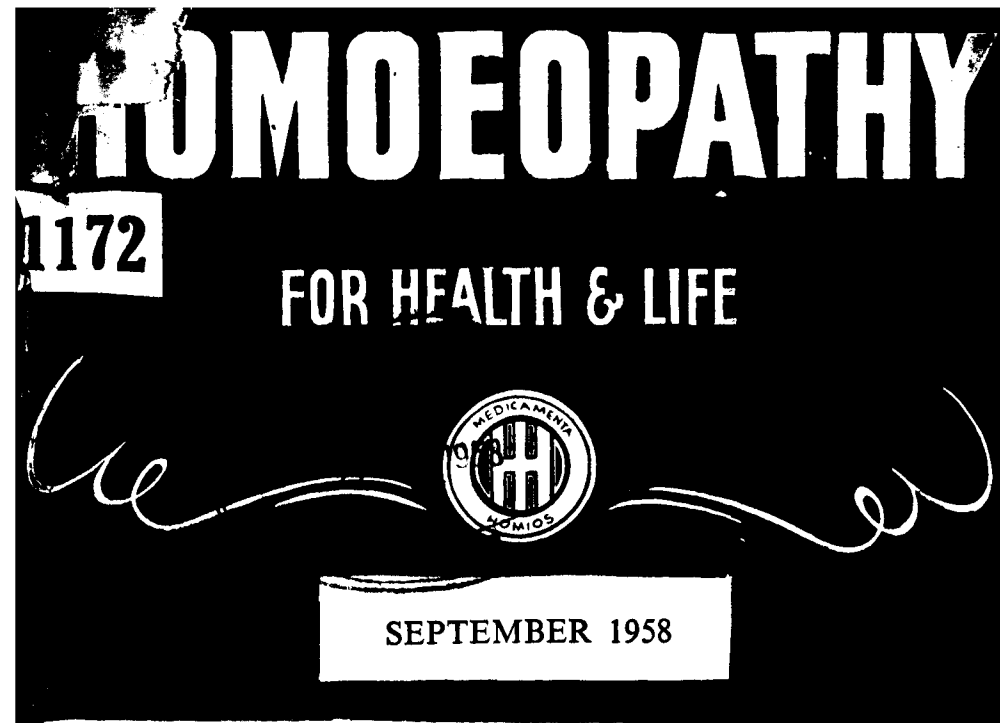




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Dindigul:	Dr. A. K. Shamsuddin, Maligai Stores, Main Road, Dindigul
Tiruchirappalli:	Dr. V. Mahadevan, Tiruchy Homoeo Medical Stores, 12, Singarathope, Trichy—8.
Turaiyur (Trichy Dt.)	Dr. S. Narayana Iyengar, M/s. Laxmi & Co., Trichy Road, Turaiyur.
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Pollachi (Coimbatore Dt.):	Grace Homoeo Pharmacy, Police Station Road, Pollachi.
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MADRAS—1

HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

SEPTEMBER

1958

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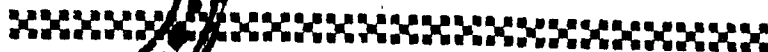
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THE HOMOEOPATHY

VOL. VII

SEPTEMBER

BOOK 9

MIX HUMANITY WITH SKILL

Two of the noblest sons of India have, within the course of one week, had occasion to give words of advice to medical practitioners in this State. The profession is quite lucky in this, and it will be definitely luckier for doctors and patients, if the advices are acted upon in the same spirit in which they were offered.

While laying the foundation stone of the new Medical College building at Tanjore on the 9th August, President Rajendra Prasad said that in the medical profession, more than in any other profession, the milk of human kindness should run in every vein of the person, who took to it. It was not so much medicine as the goodwill, sincere devotion and faith, which the doctor inspired in the patient, that cured him of his illness. Medicine has its own value but without kindness it might be ineffective. It was, therefore, that he laid great emphasis on this human aspect combined with the moral and spiritual aspect of this noble profession.

A few days earlier, Sri C. Rajagopalachari delivering the inaugural address of the Madras Medical Association had some incisive remarks to make about medical education and practice.

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"I consider that anatomy and physiology," Rajaji said, "are essential for anyone who wishes to study the art of healing either by drugs or with knife. It is very necessary that you should know it thoroughly."

He wanted them to remember that human body was not like a motor car or aeroplane whose parts could be replaced at leisure and made to work at will. The human body had more parts than an aeroplane and these parts were intimately connected with one another. The human body had its own doctor so that repairs went on while life was normal. If a man suffered from an ache somewhere it might be due to some complication elsewhere and so, "the whole man should be treated and not the particular part of the man."

The Ayurvedic system insisted on treating the man as a whole. The ailment was traced to an excess of bile or gas (pitham or vayu) and the man was treated for the root cause. He was only concerned here about the doctrine of treating the man as a whole and the cure must be directed to the entire man.

Another thing they should remember was the correct dosage of medicine. A young doctor who might not know the correct dosage was likely to fail in curing a disease whereas an elderly doctor by administering the same medicine in correct dosage might succeed.

The young doctor was likely to say "it is all a question of luck." Nothing happened by good luck in the process of nature. Nature never changed her laws. So, the dosage was important.

The physiology of man himself healed any disease. What was required was that they should just remove the

impediment and allow time to pass for nature cure to take effect. There were, of course, wonderful drugs these days which helped nature to cure. They should, therefore, remember that physiology of the human being was capable of effecting the cure more than the surgeon or the physician.

Rajaji added that it was in the medical profession, more than in any other, that they came in contact most intimately with human beings and they had the maximum scope for the virtues of the human kind, pity, compassion, helpfulness and honesty.

It is noteworthy that both these eminent personalities lay stress on the HUMANE APPROACH as a necessary equipment of any successful doctor.

What was known as the "bed-side manner" was considered more important for success by the profession itself than any mere technical skill. But, unfortunately, the stress of competition and the high cost of living added to other causes, make doctors work at such high pressure nowadays that the ordinary humanities associated with the words "bed-side manner" have become casualties. So much so, that, if we nowadays come across a doctor, who listens to a patient's statement of the case, as if HE only mattered in the whole world for the nonce, took time to examine the patient thoroughly, gave soothing words of encouragement and hope and then gave a prescription, he becomes a shining light and tradition and all the world blesses him.

We commend these words of advice to Homoeopathic practitioners. It would be well for a budding practitioner to engrave these words in letters of gold to adorn his clinic and carry them always in his heart.

STUDY CIRCLES

In places where there are two or more than two Homoeopathic practitioners, it would be a good idea for them to meet at a common place at least once a week for an hour or two to discuss case reports. Such Study Circles should be of immense benefit to each practitioner and cannot harm anybody.

It is not necessary to have elaborate rules or office-bearers, etc. It can be held successfully in a most informal manner, with the minimum of rules to govern procedure. At a later stage it may be possible to have tea and snacks as a further attraction.

Every one attending the Circle should bring his own Materia Medica and Repertory, as well as paper and pencil. If it is Boericke's Materia Medica with Repertory, it is all to the good, as you have both a Materia Medica and a Repertory in a single compact volume; but, it is not necessary to insist that every one should bring the same book.

By lots at the first meeting it will be decided who will be the Master for the next Circle. At the next meeting, when the lottery is drawn his name will be excluded, so that ultimately each member would have had his turn. Then again all names could be included.

It will be the duty of the master to bring to his meeting a detailed symptom-study of any important case which he had been handling during the week. Starting from Mind and Generalities, from Head to Foot, and on to Modalities and Peculiarities, he will read out the symptom.

As each symptom is called out, every one, including the Master, will convert it into the rubric of his own Repertory as far as he can make out and find out the similimum.

When all the symptoms have thus been covered, each one will find out the best remedy that will fit the case. A free discussion may then take place with a view to deciding the correct similimum.

At subsequent meeting or meetings, the result of such treatment may be indicated.

We request all Homoeopathic practitioners to form such Study Circles as soon as possible and we shall be happy to publish selected case reports in our Journal.

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SEPTEMBER '58

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Homoeopathy in Atrophy of Testicles

By
Dr. K. C. MALHOTRA, PAHAR GUNJ, NEW DELHI.

It can be safely said that Homoeopathy is a perfect science. To every conscientious and responsible reader of this science, it is fairly limpid that there is no lacuna in the system. What is required is scholarly grasp of the subject and its principles. By application of Hahnemannian principles of prescribing, our remedies can easily win laurels and for this we must be true to his salt and strictly adhere to his principles in the practice of medicine. Believe me, I have experienced excellent results clad in this armour and a few of these I express in the following few lines.

By 'atrophy of testicles' we mean the diminished and decreased potency, associated with smallness and reduction in size of testicles.

Various causes are responsible for this disease. In primary cases, this may result from genetic or embryologic defect or, later in life, may result from inflammation following infections. Chronic disease with starvation and inanition may also lead to this trouble.

CLINICAL PICTURE: This can be classified conveniently according to the age of onset, since in general the severity of manifestations is inversely proportional to the age at onset of deficiency.

PREPUBERTAL: When this is Prepubertal, testicular deficiency occurs before normal development of the sex organs has been completed. The testes are extremely small, penis and other accessory sex organs are hypoplastic. The skin is delicate. There is deficiency or absence of

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pubic, axillary and facial hair and the voice retains its juvenile quality. Characteristically, there is exaggerated length of extremities, with broad hips, occasionally girdle obesity and often gynecomastia and the general body configuration tends more towards that of female type, although the patient may be tall and thin. Sexual activity usually remains dormant.

POST PUBERTAL: In this case the changes are less striking. Atrophy or hypoplasia of the genitalia and accessory sex organ occurs. The small-sized prostate is noteworthy on examination. There is retarded beard growth, thinning of the skin with decreased pigmentation and diminished or absent axillary and pubic hair. There is a failure to grow hairs on the antitragus of the ear.

HOMOEOPATHIC REMEDIES: Blessings are due to this mighty science which has so many remedies in its scope. Amongst these, the major are Aurum Met., Iodium, Kali iod., Capsicum, Conium, Zinc Oxide, Staphisagria etc.

CLINICAL EXPERIENCE: It was in 1948 that I attended for the first time to a case of this type. While complaining of this trouble, the patient murmured that he had lost his vigour in his age of thirty. Truly speaking, he seemed to be a man of forty in looks. A study of his complete history revealed that he was a patient of CONIUM. Homoeopathy came to his rescue and Conium crowned me with success. It not only cured him of his ailments but also made him to feel a young man again.

The next opportunity was in March, 1950 when Mr. N. consulted me for his settled sexual weakness. In appearance, he was pale, face sunken with blue rings around the eyes. His nervous system was also miserable and shaken. On examination, I found his testicles under-

developed. Looking to these and other symptoms, I found Zinc Oxide true to the picture. It made him perfect in health in three months,

Mr. O. a young man of 19 with poor inheritance, consulted me for undeveloped and retarded growth of testicles. He was feeble both physically and mentally. This all was due to poor nourishment, poor inheritance etc., as he narrated. Looking to his physical undergrowth and other symptoms, I found it a case of delayed puberty. The dramatic results which he experienced from Calc. Phos and Kali Phos constrained him to pay thanks to this art of healing.

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Division of: INDIAN INSTITUTE OF HOMOEOPATHS.

UTERINE DISPLACEMENTS

Dr. Mrs. N. A. Radha,

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

As a rough working definition, uterine displacement is a deviation from the normal position of the uterus in relation to the pelvic cavity. In a normal state the female uterus lies in the centre of the pelvic cavity, almost horizontally between the bladder in front and the rectum behind, its long axis forwards and slightly bent on itself. This position can be defined as one of antiversion and antiflection. Despite the fact that it is frequently subjected to different conditions that disturb its normal position, such as, a distended bladder or rectum, pregnancy, child-birth, etc., it is maintained in its normal position by a complicated mechanism, consisting of strong ligaments, reflection of the peritoneum covering the uterus. These supporters are not merely extensible; but have got extraordinary contractile power, enabling the uterus to recover and return to its almost original size, shape and position, in the pelvic cavity after pregnancy and child-birth. Under certain abnormal conditions, this peritoneum gets stretched and weakened thus favouring uterine displacements. The integrity of the pelvic floor and the intra-abdominal pressure are also other contributing factors that keep the uterus in its normal position.

The different types of uterine displacements are :—

1. Prolapse or descend of the uterus
2. Retroversion
3. Retroflexion
4. Combined retroversion and retroflexion

5. Lateral displacement
6. Ascent
7. Retroposition
8. Inversion

PROLAPSE: Among the different forms of uterine displacements, prolapse is the common form, especially occurring in married women and who have borne children. Instances have been observed of this abnormal condition taking place in virgins too. Prolapse is characterised by a simple descend of the uterus into the vagina or protrusion of any portion of the uterus at the vulva. According to the nature and degree of uterine portion prolapsed it is classified as

1. **PROLAPSE OF THE FIRST DEGREE:** When there is a slight descend of the uterus over the vagina.

2. **PROLAPSE OF THE SECOND DEGREE:** When the uterus is partly within and partly outside the vagina.

3. **PROLAPSE OF THE THIRD DEGREE:** (Procedentia.) In this condition the uterus is wholly or partially outside the vulva. This is a serious condition.

CAUSES: As I have told in the beginning, the uterine displacements result from the relaxation of the uterine ligaments especially broad ligament and peritoneum. There are different conditions that occasion such relaxation. It may be either due to an inherent weakness of the uterine peritoneum or due to other incidental influences such as pregnancy, child-birth, etc. A certain amount of stretching and weakening of the peritoneum takes place during pregnancy and child-birth. Prolapse occurring as a consequence of delivery is mainly due to an imperfectly sutured or completely neglected perineal tear. Application

of forceps and dragging the child before full dilatation of the cervix pulls down the uterus too, altering its normal position. An already stretched peritoneum plus a destroyed perineal body and livator-ani-muscle favour uterine displacement when intra-abdominal pressure is brought about by chronic cough or straining at defecation or during heavy work. Sub-involution of the uterus i. e., the uterus fails to contract to its normal size, after child birth, is another contributing factor for uterine displacement. General ill-health, heavy work, inherited weakness of the uterine muscles, insanitary surroundings, etc., are considered to be the main causes for uterine displacements in virgins and in married women who have not borne children.

SYMPTOMS: In its early stage the patient feels, as if something is protruding through the vagina during micturition and defecation. In an advanced stage, i. e., in proidentia, when a major portion of the uterus is outside the vulva, it becomes a source of discomfort to the patient. The prolapsed uterus being frequently rubbed on the thigh causes erosion and bleeding of the peritoneum. In prolapse resulting from debilitated tone of the perineal body and the livator-ani-muscles, constipation becomes a common symptom. In a similar manner, when the bladder is involved, incontinence of urine occurs. Dragging pain referred to the sacrum especially during day-time, when the patient is engaged in work is observed as a common symptom of prolapse. Such women are also seen suffering from frequent pulling and bearing down pain in the lower abdomen, and a sensation, as if something would issue from the vagina when intra-abdominal pressure is exerted during chronic cough, or lifting any heavy article or during heavy work.

(to be continued)

NEWS AND NOTES

REPORT ON CRAVINGS OF PREGNANCY: The cravings of pregnant women—secret and over-powering—range from fruit to coal, pickles to soap and candies to mothballs, according to the British Medical Journal.

At the same time, they may turn with loathing from tea, tobacco, coffee and marmalade.

M. Harries and T. F. Hughes, scientific advisers to the Ministry of Agriculture, Fishery and Food, report on figures supplied by over 500 women invited to write about their cravings and aversions.

The replies covered 820 pregnancies and gave 991 cases of cravings—with fruit, especially green apples and oranges, tomatoes and lemons, at the top of the list. Confectionery, pickles and raw vegetables are also popular.

Coal tops the list among cravings for non-edible substances followed by soap, disinfectant, toothpaste, mothballs and metal polish.

A few mothers say they have felt strong desires for tar, paraffin and wood.

What lies behind these cravings?

The authors of the survey offer various explanations from nutritional to psychological.

Mothers, they say, probably like refreshing snacks to counter pregnancy sickness or nausea and fruit is ideal for this.

Other theories put forward the need for more calories and the desire for "something to crunch."

As for the non-edible stuff, it seems smell is the temptation of disinfectant and petrol.

There may be psychopathic explanations behind the odder cravings—but the investigators tend to discount reports of



such desires because of the possibility of a bias favouring the unusual.

The scientists also report, "Many correspondents stated that, though they were able to joke about a craving after the baby was born, at the time it was over-powering.

"Also mentioned on numerous occasions is the sense of secrecy which surrounds the phenomenon.

"Many women state that they went to great lengths to keep their cravings secret even from their husbands.

"Some experience a sense of shame."—Reuter.

COMMITTEE ON AYURVED: The Government of India have appointed a Committee to evaluate and assess the work done in the field of the Ayurvedic system of medicine.

The Chairman of the Committee is Dr. K. N. Udupa, Surgical Specialist, Himachal Pradesh.

SIDDHA RESEARCH INSTITUTE, PAMPULLI: Information is to hand from Tenkasi that on the 5th August, Messrs. V. Balaramiah and C. M. Subramania Pillai founders of the Siddha Research Institute, Pampulli, had the pleasure of welcoming two Ministers, when Sri M. A. Manickavelu, Minister for Health, Madras, declared the Institute open.

Sri M. Bakthavatsalam, Home Minister, Madras, speaking on the occasion said that in Courtalam Hills several medicinal herbs and plants were growing in plenty and that he had reserved some areas in the hilly tracts specially for this purpose. Students of Botany were taking advantage of this and visiting these areas. He assured that the Government would encourage undertakings of the kind being set up at Pampulli.

THE KOLAR DISTRICT HOMOEOPATHS Association met the Minister for Labour and Local Self-Government, Mysore State, on deputation at Robertsonpet on the 3rd August last and pleaded for the registration of all practising Homoeopaths when the new Bill will come into force.

The Minister promised to recommend his support to the Ministry of Health to consider the matter sympathetically.

Medicinal Plants Of India

by Pandit Shiv Sharma

(continued from last issue)

SANCTION OF ANTIQUITY

Some plants have remained untraceable in the texts for a long period, being known only by their use in domestic medicine amongst old wives and villagers; and then the discovery of a new manuscript has brought them to the notice of scholars and extended the sanction of antiquity to their usage. Thus "Chakshushya" or "Chaksu" (Cassia Absus, Linn.) a household remedy for skin diseases, impurities of the blood and sore eyes, was not to be found in any text till the "Kashyapa Samhita" brought it to light that the drug had been officially recorded in an Ayurvedic text as early as 600 B. C.

There are also a number of plants which have not become part of our common stock of knowledge owing to their identities having been kept secret by the individuals, the families or the religious sects possessing the knowledge of their therapeutic values. Quite often a person dies without imparting the knowledge he possesses to his descendants, or to disciples, or to anyone else, and this deplorable narrowmindedness results in the loss of precious medical information to the nation and to mankind. Substantial additions to our clinical armoury could be made if the State offered suitable prizes or inducements in return for the revelation of effective secret remedies, while providing drastic punishment for those who possess but do not reveal such secrets.

The contribution of Indian medicinal plant lore to world Medicine is rich and varied. "Infinite as the sea", like Juliet's love, the more it gave traditionally, the more it had. The first Western treatise on medicine, which could be considered the earliest effort at presenting a systematised compilation of the medical knowledge existing at that time is the "Principia" of Hippocrates, the Greek physician, who is called, on this account, "the Father of Medicine."

Hippocrates (460 B.C. appeared on the scene long after the "Charaka (originally "Agnivecha") and the "Susruta Samhitas" had been written (600 B. C.). That this "Father" of western medicine was a "son" of Indian medicine is evidenced by his borrowing a number of Indian medicinal plants from the Ayurvedic texts, including "Nagara" (Zingiber Officinale, Roscoe), the two peppers (Piper Longum and Piper Nigrum. Linn.) and "Jatamansi" (Nardostachys Jatamansi, D. C.). "the Nardin of Dioscorides (called also 'Gangitis' because the Ganges flows from the foot of the mountain where the plant grows," to quote Dymock, Warden and Hooper's "Pharmacographica India.)

The Chinese names "Tsin (tin)-du-kie" for the Sanskrit "Tinduka" (Diospyros Embryopteris, Pers.), "Kumichi" for "Kunchi Dulim" for Dadim (pomegranate) and the mention of other Ayurvedic vegetable drugs in old Chinese medical texts, as also the mention of certain physical characteristics of the Chinese people in the "Charaka Samhita," go far to demonstrate the unilateral flow of plant lore from India to China at an early period.

BORROWINGS FROM INDIA

Subsequent cultures (medically speaking) such as the Persian and the Arabic, were too late in time to have developed their medical knowledge with basic origins of their own. The foundations of Arabic medicine were first laid in the eighth century A. D., when, under the enlightened patronage of the Caliphs Al-Mansur and Haroon-al-Rashid, Arabic translations of the Sanskrit and Greek works of Charaka, Sushruta, Hippocrates and later Indian and Greek physicians were undertaken and completed.

It is surprising how at an almost prehistoric age Indians managed to identify, study and classify therapeutically nearly 2,000 plants of varying medicinal value, which today still add to the ever-increasing volume of knowledge of world medicine. Even the latest and most popular hypotensives are but preparations or derivatives of the 2,600-year old Ayurvedic 'Sarpagandha' (Rauwolfia Serpentina, Benth.), an Indian plant first mentioned by Sushruta in 600 B. C. The excellence of this herb can be judged from the following passage culled from a recent issue of the Journal of the American Medical Association:

“When an exotic remedy like *Rauwolfia* finds its way into American therapeutics, amongst a hundred thousand complex organic chemicals of Western science, it seems to show that older cultures may really know what they are about. What do they do in India? What other treasures lie hidden in the practice of Ayurveda...?”

The panegyrics of this Ayurvedic drug in modern medical literature border on ecstatic hyperbole. And yet in the villages of India, on the first signs of insomnia, melancholia, schizophrenia, or more violent mental disorders, the old wives or the village physicians pound the root of ‘*Sarpagandha*’ with rosewater and administer it with results which sometimes vie with those of the best and most expensive modern treatment in the world.

Although during early ages there was a unilateral traffic of information from India to other countries on the subject of the identity and therapeutic uses of the various medicinal plants, there were many additions to the Indian ‘*materia medica*’ during the middle ages and many useful plants were imported. ‘*Vanapushpa*’ (Pers. *Banafshah*—*Viola Odorata*, Linn.), ‘*Gojivha*’ (Pers. *Gaozaban*—*Onosma Bracteatum*, Wall.) ‘*Akarakarabha*’ (Arab. ‘*Aqarqarha*’—*Anacylus Pyrethrum*, D.C.), etc., are precious gifts from West Asia which have enriched, and become part and parcel of the medicinal flora of India.

Since borrowing and assimilating valuable material is as free and unrestricted in the realm of science as giving it, the chooser usually picks up the best; and this group of West Asian plants (which now grow abundantly on Indian soil) represents the finest vegetable therapeutic agents borrowed by Indians from their Arabian neighbours. A decoction of *Banafshah* flowers, for instance, still remains the best clinical approach to the common cold, all systems considered, in spite of the advent of a large number of modern anti-histamine drugs and anti-catarrrhal sera and vaccines.

Beginning alphabetically with “abortion” and ending with “Writer’s Cramp”, the Indian *Materia Medica* has listed 316 different diseases which are covered by the 2,671 Indian medicinal plants described. Within the restricted scope of this

article it will not be possible to mention more of those diseases, leave aside describing or discussing them even briefly. Suffice it to say that Indian medical plants cover the entire range of human sickness, excluding only those where surgery, in one form or another, is indispensable. We can further add abdominal pain, xanthoma, xeroderma, yaws and yellow fever to Dr. Nadkarni’s list.

There are many forms of medical preparation in which plants are used as therapeutic agents. Again only a part of a plant may be used or, it may be used as a whole. Different parts of a plant may have different therapeutic effects. The seed of *Gunja* (*Abrus Precatorius*, Linn.) contains an intensely concentrated principle, *Abrin*, poisonous even in doses of 1/2,000 mgm., but its root, i.e., the liquorice root is absolutely safe even in the hands of children and village yokels and is extensively used in cough and bronchitis. Its leaves relieve pain when applied over the site in the form of a poultice. The juice of its fresh leaves mixed with some bland oil is applied to painful swellings. There are many similar plants whose different parts possess dissimilar properties.

The art of pharmacy developed very early in India and ready-made medicines were stocked in various forms. The ‘*asavas* and *arishtas*,’ although technically grouped with wines, are vegetable decoctions preserved by their self-generated alcohol. They not only last indefinitely, but actually improve in quality with the passage of time. There are over 600 ‘*asavas* and *arishtas*’ in Ayurveda covering the entire range of medically curable diseases. This group vies with the higher-powered mineral and metal preparations called ‘*rasas*’ in the quality of improving with time.

RICH REPERTORY

It will be beyond the scope of this article to discuss or even name the various forms in which Ayurvedic vegetable medicines are stocked. The commoner ones are: powders, pills, linctuses ‘*arakas*’ or weak distilled essences, wines and tinctures of various potencies (‘*asava*, *arishta*, *madya*, *sura*, *sidhu*, etc.’), ashes, expressed juices, decoctions, hot and cold infusions, dry and liquid abstracts, fumigations, medicated ghees and oils, plain or medicated vegetable gums and exudates, ‘*kanjikas*’ (fermented sour drinks),

confections, vegetable alkalis, milk decoctions, soups, collyriums and sternutatories. Other preparations for local use are powders, poultices, ointments and medicated fats for application to affected areas.

The use of Indian plants in the 'Panchakarma' or 'Ayurvedic Nature Cure' opens up another vast field of an altogether different clinical subject. Ordinary and retention enemas and douches, medicated water, milk, ghee and oil baths, fomentations and massages run into hundreds of items. This system of Ayurvedic treatment, consisting wholly of vegetable drugs (even when internally used) is extensively and skilfully practised in South Malabar, where it has attained its highest efficacy and glory in the hands of the "Mooses" of Kerala.

Certain plants, e.g., Gadadhar (*Artemesia Maritima*, Linnd.) and Cinchona grow in India but are not used by the Indian indigenous practitioners. Others are used by them but do not grow in India. Important aspects of the subject which I have left out in this article include the different analytical and therapeutic approaches to the same plants by different schools of medicine (even Homeopathy uses over a hundred Indian plants and drugs to prepare "Mother" tinctures). However, I have tried to give the lay reader a general idea of the antiquity, the extent and the high utility of the Indian vegetable lore.

I have of course, also left out eggs and fish, since I cannot share the belief, with certain "vegetarians", that these, too, are vegetables!

— *Illustrated Weekly*

STOP PRESS

As we go to press, we have received by the same mail two different types of documents—one, a routinely worded letter from the Union Ministry of Health "regretting their inability to establish a Homoeopathic Drug Research Centre", and a letter from Dr. A.V. Subramanian, President The Salem Homoeopathic Association, emphasising the need for such a Centre and enclosing an appeal to all Homoeopaths in Madras State to close up their ranks with a view to constructive work. We will publish both in our next issue together with our comments.

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LETTER TO THE EDITOR

To

The Editor,
"Homoeopathy",
Kumbakonam.

Dear Sir,

CORRESPONDENCE COURSE

Certainly you and the learned readers of "Homoeopathy" will be glad to know that in the U. S. S. R. lessons are sent by post or in other words, "by correspondence course" in different branches of science including medicine and technology, as described by Dr. S. Bhagabantam from the All-India Radio, Delhi, a few days back. He visited all over the Soviet Land and discovered the mystery of the "correspondence course."

Would anyone care to say that their educational standards are low because of the correspondence course?

Bhatpara,
18th August 1958

Your etc.,
Bankim Ch. CHATTERJEE

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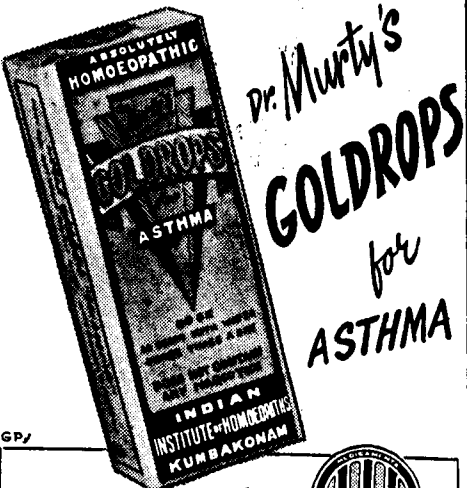
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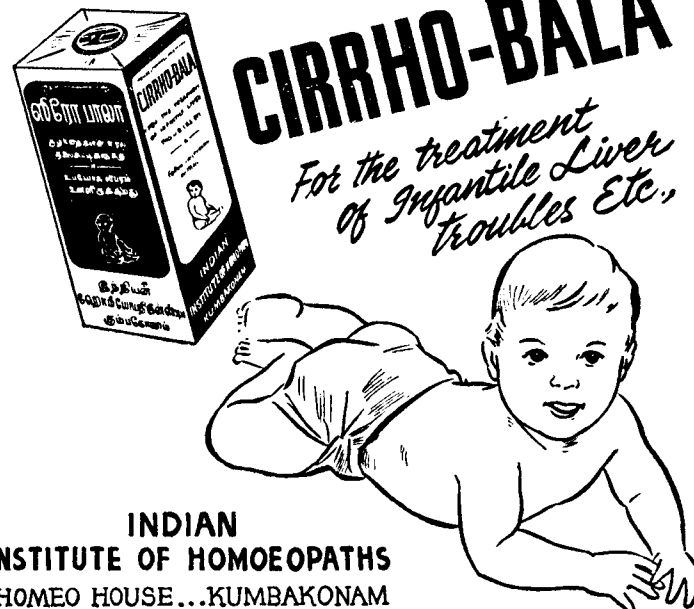
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MADRAS

AUGUST 1958

GP



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IMPORTANT ANNOUNCEMENT

For the convenience of our students and Homoeopathic practitioners we have appointed several stockists in some of the important centres, as under:

Madurai:	Dr. M. Gopalakrishnan, 26, Pandia Vellalar St., Madurai.
Tinnevely and Nazareth:	M/s. Abraham & Co., Chemists, Nazareth. Branch at: Tinnevely Jn.
Dindigul:	Dr. A. K. Shamshuddin, Maligai Stores, Main Road, Dindigul
Tiruchirapalli:	Dr. V. Mahadevan, Tiruchy Homoeo 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 Homoeo Pharmacy, Police Station Road, Pollachi.
Rasipuram (Salem Dt.):	Dr. R. Balusamy, Balu Pharmacy, Athur Road, Rasipuram.
Orathanad:	Dr. K. V. Govindarajan, Kadai Veedhi, Orathanad, Tanjore Dt.
Nilgiris:	Dr. T. K. Varma, Nilgiris Homoeo Clinic, Kotagiri

INDIAN INSTITUTE OF HOMOEOPATHS
KUMBAKONAM
MADRAS—1

HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

AUGUST

1958

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No. 2. This is indicated in all types of ordinary Fevers, Influenza etc. May also abort, if given at the initial stage. Fevers like Typhoid, Pneumonia etc.

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No. 5. This is a sure remedy for Diarrhoea. Even in cases of Cholera, if given in the beginning, will curb that much-dreaded disease.

No. 6. A remedy for Dysentery of any form and variety.

No. 7. A remedy to correct long-standing and chronic constipation, and its attendant ill-effects on one's health.

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PRICE

A set of these 8 remedies packed in a neat box with directions for use both in English and Tamil. Big Set (About 100 doses)

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MADRAS

THE HOMOEOPATHY

VOL. VII

AUGUST

BOOK 8

DRUG PROVING CENTRE

(i)

We read recently in a reputable medical journal that allergy due to penicillin has been the cause of more than a thousand deaths in one year in U. S. A., where relevant statistics were compiled. For one such discovered death it is reasonable to presume that there are many more not reported and the pathological damage caused is much more numerous. Not only penicillin, but the sulphonilamide group of drugs and the more recent antibiotic group also cause damages which go under the name of allergies. To recognise the existence of allergies is not to deny the immense curative values of these potent drugs.

But, Homœopaths, as we are, we immediately realise that, if we had facilities for *potentising* these drugs and experimented with them on *healthy human beings*, as is the normal practice in Homœopathic drug-proving, most of these allergy-caused harm could be prevented and probably, the field of curative action of these drugs also expanded simultaneously to a large extent

Now that Homœopathy is recognised as an important and distinct system of curative medicine, to enable Homœopathy to be efficiently practised and in order to catch up with the

deficiencies of decades of stagnation, it is important that there is established immediately at least one Homœopathic Drug Research Laboratory in our country. Besides, we all know that quite a wealth of curative value lies dormant in the hundreds of our Indian medicinal plants which await Homœopathic drug-proving.

The Central Health Council consisting of the Health Ministers of all the States decided in its Bangalore sitting in January last that research is in the purview of the Centre. While there are Drug Research Laboratories in the allopathic system, and some progress has been made in the matter of opening Research Centres in Ayurveda, the Central Government has so far made no beginning in the matter of establishing a Drug Research or Drug Proving Laboratory for Homœopathy.

Sri D. P. Karmarkar, the Union Health Minister, is noted for his imagination, drive and resourcefulness. We appeal to him in the name of Homœopathy to make an early beginning in the matter of establishing a Homœopathic Drug Proving Centre.

Comparatively, it is easy to establish a Research Laboratory in other systems of medicine. It is purely a question of technical assistants and equipments. Proving of drugs are done on dumb animals. This may imply many handicaps, the chief of which being, of course, that the action of such drugs when applied to human beings is largely presumptive and deductive. But, it has one great advantage and that is, that guinea pigs for testing provide no problem. They are available in abundance.

Not so in Homœopathy. Besides technical assistants and equipment, it is necessary to find a batch of normal, healthy, human beings who are willing day after day to act

as provers of drugs. First of all, let us hasten to assure that constant proving of drugs does not in any way damage the health of such provers. On the contrary, such proving under scientifically controlled auspices, improves the health of the provers. This we say on the high authority of Dr. Hahnemann himself who along with a few devoted friends, had personally proved all the hundred of remedies that were ultimately gathered together in the compendious volumes of his *Materia Medica Pura*.

It is very difficult to find volunteers, either for love or money, with the requisite qualifications of education, intelligence, sobriety, power of keen observation, perfect normal health both in body and mind, and spirit of service for this kind of work. Even the great Hahnemann had to suffer from this handicap and ultimately had to depend on himself and about half a dozen close friends. However devoted they were, such a small band of men could not possibly thoroughly prove all the drugs available and so ultimately, much against his will, sometimes he had to depend on pathological cases to amplify his codex of symptoms.

Luckily, we in India, are placed in a much better position as regards the availability of good provers. In the more than three or four thousand sanyasins and sadhus who have gathered about the sacred precincts of Rishikesh in Haridwar District, there are quite an unsuspectingly large number of English educated intelligentsia devoted to a life of poverty, meditation and service. Doyen among them, towering higher than all of them both in body and intellect, stands the gigantic figure of Sree Swami Sivananda Saraswathi Maharaj, the matured leader and inspirer of an enthusiastic band of young, educated, accomplished sanyasins who have helped him to build up the spiritual tradition of Sivanand-nagar.

Himself a doctor of eminence, and devoted as he is to the cause of service of humanity, if a proper appeal is made to Swamiji we feel sure that he and his band of workers will be only too willing to undertake this humanitarian task, especially as it need not interfere with their spiritual practices and other normal functions of life.

When there is such a golden nucleus of voluntary workers at hand, it would be our own folly if we do not utilise their service for establishing a Drug Proving Centre, especially as the initial equipment and expenses necessary should not be a great impediment these days once Government makes up its mind.

Would Sri D. P. Karmarkar, the Union Health Minister give this matter top priority in his schemes for promotion of Homœopathic practice in this country?

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(ii)

An advance copy of this editorial was sent to Shree Sivanandaji for his comments, and we have great pleasure in publishing below the reply we have received from the Swamiji:-
23rd July 1958

From
SRI SWAMI SIVANANDA,
Chancellor,
The Yoga-Vedanta Forest University,
P. O. Sivanandanagar,
RISHIKESH (Himalayas)

To
Sri Dr. V. R. MURTY,
Kumbakonam.

Glorious, Immortal Atman,
Salutations and adorations.
Om Namo Narayanaya.
Thy kind letter.

You have moved in the right direction at the right moment. A Drug Research Laboratory is the need of the hour in India.

Not only has Homœopathy become popular in this country today, but increasing recognition is being given to it both by medical and social leaders. That is because this system is based on the fundamental ethical and spiritual doctrines which are, as it were, the vital airs of India.

The system has so far flourished mostly on drugs manufactured and proved by Westerners. India's soil abounds in plants and herbs with which Nature has endowed her for preservation of the health of her children. It is the duty of heroic, selfless and devoted men practising the noble healing art, to conduct experiments with these plants and herbs and discover their healing properties.

You have been a great pioneer in this field. The Divine Will and God's Grace have found in you a worthy channel and instrument. When you take the initiative, you will find the men and the material. It is God's work; and God will provide all that is necessary for its accomplishment.

May God bless you!

Thy own Atman,
(sd.) SIVANANDA.

RURAL MEDICINE

We have for quite some time been worrying our heads with the question of Rural Medical Relief and its inadequacy in spite of the best efforts of the State Government. All their inducements to influence medical graduates to settle in villages have proved abortive of results. It is our firm conviction, which we have tried on several occasions to reinforce with tangible arguments that, if this stalemate is to be broken and substantial and immediate medical relief and knowledge are to be made available to the villagers, it can only be done by Homoeopathy, because it is easy to teach and learn, it is easy to practise, efficient in result comparatively and what is most important, less costly.

The last editorial we wrote in our July issue is a result of our cogitations and therein we had recommended to the Madras State Government to approve of a Scheme for the training of Homoeopathic doctors of a standard similar to the old L. M. P. complete with medicine, minor surgery, preventive medicine, and forensic medicine, so that the alumni could be effectively used by the State for manning rural dispensaries. The course was to be of three years duration, so that at the earliest the first batch that could be in service would be by about 1962.

We have had occasion to discuss this matter with prominent and interested persons, both official and non-official, and they all seemed to think the whole matter was very much more urgent and important than we thought and that they would be interested in a Scheme which could bring in quicker results and be capable of expansion. They wanted something definite to be initiated within a short period, say, one year. Could Homoeopathy do it?

Homoeopathy *can* do it, and we can do it, if only Government would co-operate with us by offering quicker action. We have approximately 10,000 students who have been trained by us so far and at least three to four thousands of them are now

practising in the different villages of this State as active Homoeopathic practitioners. Out of these experienced persons, we can select, to start with, a batch of one hundred persons, with the *minimum qualification of S. S. L. C. and having four years immediate and continuous medical practice.*

We undertake, on behalf of the Government, to give them an intensive training on the basis of a Government approved syllabus, for six months in Rural Medicine and Hygiene, Preventive Medicine, Community Sanitation and Public Health, Forensic Medicine, etc., etc. The only expense the Government need be put to at this stage is to offer a monthly stipend of Rs. 50 to each such selected student. This would amount to Rs. 30,000 only for a trained batch of one hundred students at the end of six months. In one year, thus, at the cost of Rs. 60,000 only, we could have 200 qualified students ready to function in 200 Village Centres, which, at a modest estimate, we may calculate to cover at least one thousand villages at the rate of five surrounding villages for each centre.

To make this Scheme a success, it would be necessary for the Government, besides granting a stipend, to insist on these students serving the State in Rural Dispensaries for a minimum period of three years at least, after which they would be free to stay on or relinquish and settle down in any village of their own choice. These Rural Homoeopathic practitioners may be offered a scale of Rs. 100—5—150 per month. As they may in the earlier stages be expected to run the dispensaries as one-man shows, besides the initial equipment and building, the recurring expenses for medicine, etc., need not exceed Rs. Twenty five per month. Thus, for 200 practitioners covering about one thousand villages, the recurring expenditure would only be about Rs. Three lakhs, rising up to Rupees Four lakhs in five years' time.

Thus, this Scheme ensures that for a small outlay of Rupees Three lakhs, about one thousand villages can be ensured efficient medical advice and treatment.

We feel that relying on outmoded suggestions emanating from interested practitioners of the old school and sympathisers, we have sufficiently long delayed the matter of rural medical relief by wishful thinking.

Will the Government liberate its mind now at least from the tyranny of old ideas that have been found impracticable of achievement and concentrate on a more aggressive and sympathetic approach to the problem, which is offered by Homoeopathy?

Why not at least make a trial and experiment as has been done in various other fields?

We are at their service.



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A pleasant and agreeable preparation in syrup base containing a few reliable homoeopathic medicines.

Composition: Justicia Basaka, Senega, Ant. Tart., Ipecac etc.

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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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Any disease of the scalp including certain types of alopecia come under its favourable influence. Growth of hair can be expected on even bald spots by continuous use of this preparation.

For a luxurious growth of hair nothing can take the place of BAHOLA (Arnicated) OIL.

Method of use: Rub the oil into the scalp at least once a day. It can be used for hair toilet also, being mildly scented.

Important: In those whose scalp is very much diseased, there may be a slight increase in the falling of hair in the beginning. This is a healthy sign which indicates that the scalp is getting repaired and the application of the oil is to be persisted in for some time.

For those that require abundant beautiful healthy hair, BAHOLA (Arnicated) OIL is the choice.

BAHOLA (Arnicated) OIL has been used and certified by the medical profession.

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A Division of INDIAN INSTITUTE OF HOMOEOPATHS

MY EXPERIENCES AS A HOMOEOPATH

(Dr. V. K. Rao, 41, Prakasam Road, Erode)

One day in May 1954 my wife complained of a terrible, stinging pain over the right eye; the pain was so unbearable that she began to weep. Tears were rolling down her cheeks. She could not open her right eye and all the household work she had to do with only the left eye on active service. She said that the pain was like that of the stinging of a scorpion and she begged of me to give her something for immediate relief. Whenever a complicated case presents itself to me, the first thing that I do is to give the patient the indicated Bio-Chemic remedy and study the reaction. By the time the patient returns again for medicines, the indicated Homoeopathic remedy will be ready on the table—the interval of time being sufficient to study the case and select the similimum or the most similar remedy. I gave my wife 10 grains of Mag. Phos. 3x in hot water and asked her to sip it in slowly. In about ten minutes she said that she was feeling a little better. I gave her another dose of the same remedy. Within thirty minutes she was completely free from the terrible pain. Great indeed was my joy! I congratulated myself on my success and the smiling face of my wife was in itself reward enough for me!

Within an hour of my triumph, I had the rude shock of my life when my wife began to shriek with another attack of the agonising, stinging pain! At once I gave her a massive dose of Mag. Phos. 3x in hot water. There was a little relief but not the magical effect of the first dose. She did not experience complete relief from pain; there was still a little of the dull aching pain. As there was pain in the eye-balls too, I thought that the best thing to do was to consult an eye specialist which I did immediately.

The eye-specialist, after a careful examination of the eyes in the dark room told me that there was absolutely nothing wrong with the eyes and that it was a clear case of neuralgia. He put a few drops of medicine into the eyes and told me that the same drops, if repeated for three or four days, would

cure her of her trouble completely. We implicitly obeyed the doctor by attending his dispensary daily. The end of the period came but not the end of the trouble. We thought that the trouble was so serious that four days was too short a period for a cure. Perhaps, the same treatment, if continued for a week more, would set her right. That, however, proved to be only wishful thinking!

The pain was growing worse, day by day. The specialist told us that it was a case of allergy to some irritant complicated by anaemia and debility and that within a few days she would be free from the pain and that what she needed was only rest, good nourishing food, milk and oranges. She was given everything that the doctor advised us to do but the neuralgic pain continued its daily visit without even a day's break.

Was there any peculiar symptom associated with her pains? Since Allopathy had failed her, why not try to find a Homoeopathic remedy that would match her peculiar symptoms? This was the thought that began to agitate my mind. One of the peculiar symptoms of the case that I thought would be of some value in symptom-matching, was that the pain began every day at sunrise and vanished at sunset and, throughout the night, she was completely free from the pain.

Every Homoeopath knows that the remedy that matches this peculiar symptom is Natrum Mur. I gave my wife three doses of Natrum Mur 6x to be taken dry on tongue at fifteen-minutes intervals. The first dose was taken at 10 A.M. There was appreciable improvement in pain but I insisted on her taking the other two doses too for cumulative effect. Within a few minutes she experienced wonderful relief from pain. Still I was not sure whether Natrum Mur was just the right remedy or not. The acid test lay in whether or not she got the pain again the next morning. She got up at 6 A.M. as usual the next day. There was no pain. Perhaps, she might get it at 8 or 9 A.M. That was what I inwardly feared. At 8 o'clock, there was no pain. Every minute I was expecting the horrible attack—not that I wished for it, but that I thought that there was no cure for it at all. Every half hour I asked her as to how she was

feeling. The excruciating pain did not recur again. It is now more than three years since she was freed from that neuralgic pain and the simple drug that accomplished this miraculous cure is Natrum Mur--our common salt potentised!

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This is a most palatable and highly nutritive Tonic, indicated in all wasting diseases, sleeplessness, anaemia, loss of appetite, indigestion and as a quick recuperative after influenza and other acute diseases.

A great body - builder after serious illness and also during pregnancy and after delivery.

Directions:- A teaspoonful 2 to 3 times a day after food or as directed by the Physician.

Price:- Rs. 3—50 per bottle of 4 fl. ozs.
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HOMOEOPATHY IN VETERINARY PRACTICE

SRI V. BALASUBRAMANIAN,
(Homoeopath, Sevasramam, Sendamangalam, Tanjore Dist.)

I am a social worker doing service to humanity at large. Where humanity includes the dumb animal kingdom also, why not the dumb animals too get a share of our services?

One fine evening in the first week of June, one of our co-villagers (a rich mirasdar) was worrying about the condition of his bull and he was making enquiries whether the services of a veterinarian would be of any use in the case and, if so, he could send for a veterinarian from the nearest town, which was 10 miles off this village. The village headman told the gentleman that it was too late to get the veterinarian and the condition of the bull warranted immediate attention without which it would succumb to the fits, which it was experiencing. The village headman who had great faith in me, turned to me and asked me, "Mr. Mani, why not you try your medicine in these circumstances? Please do attend to the case".

Immediately I was called in to attend the case. I went to the shed where many native physicians were standing and they all discouraged me saying that it would be better for me to leave the animal to die in peace without disturbing it. I went in and looked at the animal. The abdomen was bloated, the animal was lying on its sides. It was experiencing very severe fits and lay senseless.

Suddenly the convulsions of Strychnine (*Nux Vomica*) came to my mind. I gave double the human dose of *Nux Vomica* 30 and ordered it to be given every six hours. The servants simply laughed at me saying that I was attempting to avert death.

Their jeering and laughing made me feel a bit diffident; but, I told them that there was no harm in trying my medicine.

I rose up in the morning and was attending to my clinical work. It was eight in the morning when the gentleman came rushing in. From his demeanour I could not understand whether the animal was dead or better, and asked him so.

"No! It is not dead! Man! I thought your medicine could do little help. But you see it has done a lot of good. The bloated condition has subsided, there was urination and also defecation. But the bull has become chill, and his head is shaking". I told him I would call in an hour's time. But the village headman went and saw the animal. He returned to me saying, "Your medicine has done wonderful work. But, I do not think the bull will survive the attack. It has become chill and there is tremor of the head". It touched my heart a lot. I suspended every other work and went and watched the animal. I noticed the same condition seen in the later stages of cholera—chillness and shaking of head from side to side. The chillness reminded me of Arsenic. I came to my house dispensed three double doses of *Ars. Alb. 30* and ordered them to be given at three-hour intervals and, if the symptoms abated, at longer intervals. Plain conjee was to be given, if it showed any craving for food.

At 3 o'clock in the evening, I was given the happy news that the condition of the animal was much improved—there was warmth all over the body, the shaking of the head had stopped and the animal was chewing fodder. I was asked whether plain conjee could be given. I said "Yes". All were wondering that Homoeopathic medicine could effect such a miracle.

Few people understand the wonderful words of the Lord, when he said in the Gita, "In the microcosm as well as in the macrocosm, I exist in every nook and corner".

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Dr. U. KRISHNA RAO, Speaker of the Madras Legislative Assembly, speaking after unveiling the portrait of Dr. V. R. MURTY, Chairman, Municipal Council, and Governing Director, Indian Institute of Homœopaths, Kumbakonam, at "Patel Buildings" (Municipal Meeting Hall) on July 8. Note the portrait of Dr. MURTY at the top right hand corner, after being unveiled.



Sri K. R. M. S. CHOKKALINGAM CHETTIYAR, the leader of the Congress Party in the Municipal Council, Kumbakonam, reading the address before presenting the same to Dr. V. R. MURTY.

NEWS AND NOTES

PORTRAIT UNVEILED : Dr. U. Krishna Rau, Speaker, Legislative Assembly, Madras, unveiled a portrait of Dr. V. R. MURTY, Municipal Chairman, Kumbakonam, and Governing Director, Indian Institute of Homœopaths, Kumbakonam, on July 8 at the Patel Buildings (Municipal Meeting Hall) and paid a tribute to the services rendered by Dr. MURTY.

Dr. Krishna Rau said Dr. MURTY's work for the people was really praiseworthy. His extreme popularity bore testimony to his broad-mindedness, breadth of vision and kindness of heart.

As Mayor of Madras, the Speaker said, he had realised the difficulties of an elected Chairman. "It is really an achievement that Dr. MURTY had endeared himself to one and all, both officials and non-officials".

He referred to Dr. MURTY as "a self-made man, a bright example of industry and honest effort".

Earlier, there was a garden party in honour of Dr. MURTY.

INTEGRATION DISINTEGRATES : The Committee appointed by the Uttar Pradesh Government to study ayurvedic education in the State, says that integration of the Indian and Western systems of medicine has failed to evolve any synthesis between the modern and ancient systems.

In an interim report, the committee says that as a result of integrated courses, ayurveda has been relegated, though imperceptibly, to an inconspicuous back place; instead of a revival Ayurveda has suffered a setback.

The experience gained in the working of the integrated courses over quarter of a century has been far from happy, the report adds.

KERALA COLLEGE OF HOMOEOPATHY : Dr. B. Ramakrishna Rao, Governor of Kerala, on 14th July emphasised the need to develop the three aspects of human life—physical mental and spiritual—for the progress of any nation.

Inaugurating the Athura Seva Sangam (an organisation for serving the poor) at Athurasramam, six miles south of Kottayam, the Governor welcomed the formation of such an organisation for the uplift of the suffering humanity and congratulated its founder-president, Swami Athurdas, on his initiative in this noble mission.

He welcomed the Homœopathy college started under the auspices of the Sangam, as a landmark in South India. Homœopathy was the most economical of all systems of medicine and therefore deserved every encouragement and support.

Dr. A. G. Saxena, Physician to the President of India and member of the Homœopathic Advisory Committee, Government of India, inaugurated the homœopathic college, the first of its kind in Kerala and second in India (the first one is in Andhra). This college will have provision for 60 students, with an initial cost of Rs. 4 lakhs and a recurring annual expenditure of over Rs. 1 lakh.

Dr. Saxena welcomed the State government's decision to start a hospital at its own expense to enable this college to function, but revealed that there was provision in the second five-year Plan for helping in the maintenance of the college also.

Concluding, Dr. Saxena emphasised the need for establishing a homeo directorate, besides the homeo boards and homeo faculties as they were having at present in some of the States, so as to co-ordinate the various branches of study.

BIHAR'S PLAN FOR HOMŒOPATHY: The Government of Bihar proposes to purchase during 1958-59 one hundred acres of land at Gulzarbagh in East Patna for locating a college of Homœopathy, a college of dentistry, an infectious diseases hospital, a drug control laboratory and a T. B. demonstration centre.

This was disclosed by Mr. Birchand Patel, Health Minister of Bihar to the Special Correspondent of the *The Pharmacist* recently.

Despite his best wishes, Mr. Patel said he could not put the Homœopathic system and other Indigenous systems on par with the allopathic system because of the meagre allotment for the

former by the Planning Commission during the Second Plan period. But he hoped that a standard College of Homœopathy with a five-year degree course would soon be set up in Patna. Agitation for the closure of institutions which distributed bogus degrees and diplomas was necessary, he concluded.

"The Pharmacist" - May 1958.

A CHALLENGE TO "DRINK MORE MILK" CAMPAIGN: At a lecture given at the Royal Society of Arts and reported in the *Lancet*, for 15-3-1958, Mr. N. W. Pirie stated "Our choice is still restricted unreasonably by the whims and limitations of primitive man." He pointed out also that in using animals to convert vegetables into animal food we stand to lose in quantity while half the world is underfed and the population goes on increasing. The idea that animal foods give us more protein and more fat in our diet may have more serious repercussions in our systems than is generally realized. A correspondent from New Zealand sends us interesting cuttings of opinions in that country where the consumption of rich foods, so called, is very high. At Wellington a spokesman from the British Medical Association said "Animal fat in normal diet is a killer to people who are obese, over-worked or are under considerable strain. Many are injuring themselves by excessive consumption of butter, bacon, or cream. From the same source come reports of an attack on the excessive use of milk, this time by three New Zealand practitioners. They complain that the authorities there, having stimulated the over-production of milk, are now, without thinking of the consequences, using every means of communication to persuade people to "drink more milk." Such over-consumption of milk is positively harmful, say the doctors, and they list a number of complaints that they consider to be directly related to the habit. They attribute many of the complaints of childhood, the coughs, colds, enlarged tonsils and adenoids, catarrhal affections of the chest and so on, to the free drinking of milk, and protest against the practice in schools of feeding milk to children between meals. They point out that many of these complaints are on the increase, and call for an investigation into the "drink more milk" campaign.

They have issued a direct challenge to the authorities: "The pressure of producer-groups, politicians and the Department of

Health, by daily advertising, publicity, posters and campaigns, to go on forcing cow's milk down the throats of our infants and adolescents is perpetuating a proven scientific evil."

— (*Health For All*, May 1958)

(We assure our readers that there is no such risk in India. Per head consumption of milk is so very little, that we do definitely want to drink milk, and more milk. — Editor)

HOMEO MISSION MEDICAL COLLEGE, AHMEDABAD: On 29th June last the inauguration ceremony of this College, the first of its kind started in the whole area of Gujarat, Saurashtra and Kutch was performed by Sri M. S. Kannamwar, Minister of Health, Bombay State. Sri Seth Chinubhai Chimanlal, Lord Mayor of Ahmedabad, presided.

Among the guests were Dr. Pranjivan Mehta, Principal, of Shah Medical College, Jamnagar. Dr. Burve, Principal, B. J. Medical College, Ahmedabad, Dr. Mothibhai Patel, Member of the Senate, Gujarat University and Sri Vaid Vallabhram, Dean of the Ayurvedic Faculty.

Students have been admitted for the course of L. C. E. H. (hom). This course is of four years after matriculation and the medium of instruction is English. Seventy-five students are admitted in the first year, at present, while 50 applications are on the pending list. There is hostel accommodation for 20 students. The honour and credit for starting this College goes to Dr. J. M. Gor, leading veteran practitioner of that city.

Dr. Gandani, leading medical practitioner and corporator of the Ahmedabad Corporation has, we understand, allowed the students to have their practical and clinical training in his hospital, which is fully equipped with a modern surgical theatre and 40 beds.

XXII INTERNATIONAL CONGRESS OF HOMOEOPATHIC MEDICINE will meet this year from the 8th to the 12th September at Salzburg, Austria, the chief subject for discussion being "Homoeopathy and Science". Salzburg is noted for its salubrious climate and scenic wonders, so that those who do think of going to Europe this autumn can combine business with pleasure in visiting Salzburg.

THE SALEM HOMOEOPATHIC ASSOCIATION, SALEM: Inaugurating the anniversary day celebrations of the Association on Sunday the 27th July, Dr. V. R. MURTY, Governing Director, Indian Institute of Homoeopaths, and Chairman, Municipal Council, Kumbakonam, said that there was great need for more Homoeopathic practitioners in villages. He hoped that Government would not grudge funds for providing a short term training to existing Homoeopaths and giving them a stipend for this purpose.

Sri. N. Venkataranna Ayyar, presiding over the function said that the Central Government had allotted funds under the Second Plan, which had been made full use of by other States. He hoped that in a short time, they would have State aid in Madras also for encouragement of Homoeopathy.

AT THE GARDEN PARTY



(From L to R) Sri T. S. SWAMINATHA ODAYAR, M. L. A., Dr. U. KRISHNA RAO, Speaker, Madras Legislative Assembly, Dr. V. R. MURTY, Chairman and Sri P. R. PONNUSWAMY SIVAL, Vice-Chairman, Kumbakonam Municipal Council.



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Medicinal Plants Of India

by Pandit Shiv Sharma

MEDICINE vies with religion, ritual and superstition in being as old as mankind itself. The recorded beginnings of Indian medicine, which developed into Ayurveda, or the "Science of life", at a later period, go as far back as the Vedas themselves.

We need not enter into the acrobatics and intricacies of the disrupted chronology of the Vedic texts. Whether they are 6,000 years old or 16,000, the general consensus of opinion accepts them as the earliest literature extant, and the history of medicinal plants begins with them. India, the home of the Vedas, is thus the birthplace of what may be called the institution of the medicinal plant.

The first plant to have been used (and described) for its medicinal properties is the celebrated *somalata* of the Rigveda. Controversy rages today over the real identity of this plant, and different scholars and experts claim widely different vegetable species to be the Soma of the Vedas.

At present a very large number of Vaidyas use the word *Somalata* to designate *Ephedra Vulgaris*, the source of the popular allopathic anti-asthmatic drug, *ephedrine*. But the evidence in all cases is extremely inadequate and unconvincing, and none of the "finds" conforms to the true identity of the original. It appears that the source of *soma rasa* the celestial drink which made the gods dance with joy, remained a jealously guarded secret and has been lost to us for ever. However, the author, being a prohibitionist and past the age of dancing, does not regret the loss, which he considers purely academic.

ANCIENT KNOWLEDGE

The Atharvaveda describes in detail 15 more medicinal plants in addition to *Somalatha*. Identifiable amongst them are

1. Ajashringi (Oxycarpus Woodier, Roxb.); 2. Apamarga (Achyranthus Aspera, Linn.); 3. Kushtha (Saussurea Lappa, Clarke); 4. Pippali (Piper Longum, Linn.); 5. Prishniparni (Uraria Lagopoidis, D. C.); and 6. Rohini (Soymdia Febrifuga, Adr. Juss.). The others cannot be identified and most of them are not even mentioned in the later (but otherwise quite ancient) Ayurvedic texts.

Among the more interesting unidentifiable Atharva-Vedic plants are Sahasraparni, a powerful aphrodisiac for men and women and 'Kleebakarni,' a destroyer of the sex urge. Many of my readers will regret the loss of these two great drugs as some of them would have loved to use the former for themselves and pushed the latter into the food of their rivals. The only chance of reclaiming them from oblivion lies in intensive research, but since our national interest has shifted from the time-honoured houri-packed harems of our old potentates to the labour-packed community projects of our new leaders, there is little likelihood of the country affording the luxury of research along these unproductive (or rather, wrongly productive) lines.

The Vedic period also saw the first application and administration of medicinal plants for restoring constitutional wholesomeness (i.e., the metabolic equilibrium of the body, as conceived in the Ayurvedic theory of Tridosha) as indicated by the oft quoted passage from the Rigveda, "Tridhatu sharm vatham shubhaspati."

The medicinal use of lac and gum exudates of plants also dates back to the Vedic period. The Atharvaveda contains many references to these effective vegetable products. Another remarkable product was the Atharvan *mani* or "vegetable medicinal bead," which proved effective by merely being worn and kept in contact with certain parts of the body. There are echoes of this Vedic approach in present-day practice, e. g., the tying of 'Sahadevi' (Veronia Cinerea Less.) to the hair in the quartan fever, or the wearing of amber beads around the waist in cases of threatened miscarriage or abortion. But the vegetable medicinal bead of the Atharvaveda is nowhere to be found in present-day studies or practice of Ayurveda.

As the science expanded, the number of medicinal plants in use in India also went up rapidly. It should, of course, be clearly understood that even the earliest texts refer to an earlier Ayurvedic compendium, the authorship of which is attributed to Brahma himself. The oldest 'Samhitas' (compendiums) do not claim originality and describe themselves as mere abridgements of the vastly bigger treatise of Brahma.

It is therefore very difficult to say whether the ancient 'Samhitas' represent an expansion of the medical knowledge which appeared in the earlier Vedic texts, whose main subject could not embrace medicine as an essential constituent, or, as asserted by their authors, a mere epitome of a much greater work which, according to the authors of these texts, was too vast to be grasped by people of average intelligence and understanding. However, the fact remains that during the Ayurvedic period (i.e., the post-Vedic, pre-Buddhistic, Buddhistic and post-Buddhistic periods) the number of medicinal plants in use in India rose to about 1,500. This was the age of the famous compendiums of Agnivesha (later, of Charaka) and Sushruta. Both these 'Samhitas' were written during the 6th century B.C. according to Dr. Radolf Hoernle, in his 'Studies in the Medicine of Ancient India'.

When the Council of Scientific and Industrial Research, New Delhi, published the 'Glossary of Indian Medicinal plants' by R. N. Chopra, S. L. Nayar and I. C. Chopra, the number of medicinal plants in India had risen still higher. The preface of this book states that "out of about 2,000 items recorded in Indian medical literature, less than 200 are of mineral and animal origin, the rest are derived from vegetable sources".

Another recent publication, K. M. Nadkarni's 'Indian Materia Medica' actually describes in detail (complete with Sanskrit, regional, English and Latin botanical names) no fewer than 2,671 medicinal plants in current use. As against these, the non-vegetable medical items do not exceed 190, 58 of them being mineral and 130 animal products.

From time immemorial plants have held pride of place in the realm of Indian medicine. The mineral, metallic and animal

preparations used in this field themselves often require the help of vegetable leaves, roots, juices or decoctions during the process of manufacture. The plants mentioned in the Vedas or in post-Vedic literature and later Ayurvedic works do not necessarily exhaust the list of plants actually in use in the practice of medicine, although the "Indian Materia Medica" has tried to pick these up from every nook and corner of the country—academic and domestic alike.

(To be continued)

—Illustrated weekly

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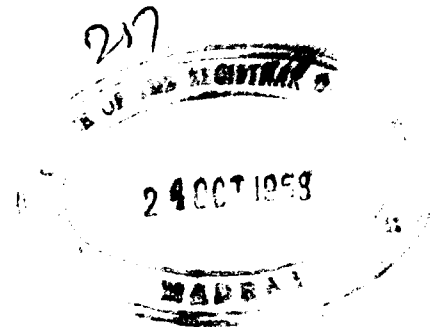


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IMPORTANT ANNOUNCEMENT

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Tinnevely and Nazareth:	M/s. Abraham & Co., Chemists, Nazareth. Branch at: Tinnevely Jn.
Dindigul:	Dr. A. K. Shamsuddin, Maligai Stores, Main Road, Dindigul
Tiruchirappalli:	Dr. V. Mahadevan, Tiruchy Homoco 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 Homoco Pharmacy, Police Station Road, Pollachi.
Rasipuram (Salem Dt.):	Dr. R. Balusamy, Balu Pharmacy, Athur Road, Rasipuram.
Orathanad:	Dr. K. V. Govindarajan, Kadai Veedhi, Orathanad, Tanjore Dt.
Nilgiris:	Dr. T. K. Varma, Nilgiris Homoco Clinic, Kotagiri

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HOMOEOPATHY

Managing Editor: Dr. V. R. MURRY

OCTOBER

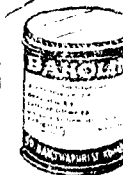
1958

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We were, therefore, surprised to receive the following routine reply from the Deputy Secretary to the Ministry of Health, New Delhi, dated 27th August:—

"With reference to your letter No. MNR/HC dated the 7th August 1958 addressed to the Union Minister of Health on the subject mentioned above, I am directed to say that the Government of India regret their inability to establish a Homoeopathic Drug Research Centre as no funds have been provided for the purpose in the Second Five Year Plan".

We are taking this matter up again with the Union Ministry of Health.

Meantime, it confirms us in our belief that, however just and reasonable a demand may be, the ponderous machinery of Government in a democracy does not move until the pressure of public opinion gathers sufficient momentum to compel it to do so

It is, therefore, upto us all, Homoeopaths, to gather together in one powerful professional organisation and then voice our demands for essential improvements and provision for the betterment of Homoeopathy.

We are publishing on another page an interesting letter received from Dr. A. V. Subramanian, President, The Salem Homoeopathic Association, as also an Appeal to all Homoeopaths of Madras State.

While the development of Homoeopathy in India so far has suffered only because of the indifference of its practitioners to the commonweal of the profession as a whole, in other lands, divided loyalties and fanaticisms have proved the bane that has prevented Homoeopathy's well-deserved progress and popularity.

In India, the national resurgence that is visible all round as a result of our political independence is also reflected in

the greater interest that is being taken in Homoeopathy as a possible effective weapon in our hands for the building-up of the health of rural India.

Let us hope that we will avoid the mistakes which history has taught us to avoid, and that not only in Madras, but throughout India, we will organise ourselves under one organisation with the status and functions of the Indian Medical Council.

It is then only that we can look forward with hope to the future of Homoeopathy in India.

As an immediate practical measure for the attainment of the objects set forth above, we heartily support the appeal of Dr. A. V. Subramanian.

DOSAGES

The problem of what potencies to use and how frequently the dosage should be given has remained rather an open question with Homoeopaths all the world over.

So long as no two patients are completely alike even though their disease nomenclatures may be the same and so long as Homoeopathy treats the individual and not the disease, perhaps it is not possible to be too precise in this respect. This gives large scope for individual judgement and experience in treating patients.

Students and beginners are naturally foxed by this indefinitude. They would certainly like to have some precise instructions to act as a guide.

So far we have not come across a brief and handy narration giving the principles on which potencies should be prescribed.

Now, we are happy to reproduce on another page the editorial appearing over the signature of G. L. K. in the *Homœopathic Outlook* of July 1958. This should be of great use to the profession.

As regards the frequency of dosage the father of Homœopathy has set down a golden rule to be followed, viz., that any medicine in whatever potency should not be repeated until the effect of the first dosage is completely exhausted. More than a century of practice by eminent Homœopaths and the several years of our own practical experience only confirm the innate wisdom of this rule.

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As long ago as 1938, Mr. Granville Hey realised that the potency of a drug mattered a good deal—patients were not all alike and never would be, and therefore their reactions could not be the same. He did not subscribe to the view held by some people that the potency does not matter so long as the indicated drug is prescribed. But it was Dr. Tarcisio Escalante Plancarte who, in 1954, compiled the following principles for the use of low, medium and high potencies:—

In acute disease: Low Potencies frequently repeated.
In chronic sickness: High potencies at distant intervals.

For children, Women or for the weak: High potencies.
For strong men: Low potencies.

When dealing with vegetable substances: Low potencies.
With mineral, animal or nosodes: High potencies.

Sensory disorders: High potencies. Functional disorders: Medium potencies. Lesional disorders: Low potencies. (Leon Vannier).

If we administer the medicament for one symptom alone: Low potencies. For a set of symptoms: Medium potencies.

Concern for sickness aside, and taking into consideration the constitution and type of the patient: High potencies. (Henri Voisin)

Now comes Dr. Homee A. S. Hatteria with his *Organon of Esoteric Principles of Homœo therapeutics*, which deals in the main with the selection of appropriate potencies and their administration at the appropriate time. Inspired by Kent's statement that "There arises no aggravation in the sickness if the potency is upon the same plane as that of the sickness," Dr. Hatteria has marshalled a hundred cases treated by doctors C. M. Boger, A. Lippe, J. T. Kent, John H. Clarke, M. L. Tyler, E. W. Berridge, Samuel Swan, E. A. Farrington, H. C. Allen,

J. Henry Allen, Dorothy Shepherd, T. F. Allen, E. B. Nash, Stuart Close and himself, to show how the cases were cured without any aggravation with a single dose of the appropriate potency. From an analysis of the cases, one must agree with Dr. Hatteria that the cures were effected because the plane of the potency matched the plane of the sickness, as tabulated below.

<i>Potency plane</i>	<i>Corresponding sickness plane</i>
30	Mental pain Affection caused by : anger ; fear; grief Dyspepsia
200	Physical pain Affection caused by a mechanical injury Rheumatism
1M	Inflammation Chill, fever Cough, dyspnoea Flatulence, diarrhoea, constipation Haemorrhage Skin-lesions
CM	Cardiac dropsy Duodenal ulcer Impotence
MM	Cancerous ulcer Carbuncle Eczema

To quote Dr. Hatteria,

“30c potency is of utility for stomach, abdominal, rectal and pelvic regions ailments; the ailments should be without pain or inflammation or malignancy; also of use in case of hysterical or hypochondriacal pains ; also of use for muscular spasms of any part of the body without pain or inflammation; useful in delusions without congestion or inflammatory condition ; of especial use in climacteric, menopause and puberty stages ; also of use for heaviness, tension like sensation or weakness, twitchings, pulsations in abdomen, stomach, rectal or pelvic regions without inflammation or pain. Also for all sensations as if symptoms.

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(HOMOEOPATHIC)

WITH VITAMIN B COMPLEX

The famous Homoeopathic ALFALFA Tonic, is now being prepared in our Air-conditioned Laboratory, fortified with Vitamin B Complex. Besides a combination of Homoeopathic Tinctures of Alfalfa, Avena Sativa, Aswagandha, Hydrastis, Passiflora Incarnata and Tissue Phosphates, Vitamin B-Complex has been added, proportionately.

This is a most palatable and highly nutritive Tonic, indicated in all wasting discases, sleeplessness, anaemia, loss of appetite, indigestion and as a quick recuperative after influenza and other acute diseases.

A great body - builder after serious illness and also during pregnancy and after delivery.

Directions:- A teaspoonful 2 to 3 times a day after food or as directed by the Physician.

Price:- Rs. 3—50 per bottle of 4 fl. ozs.
(Packing and postage extra)

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(Division of Indian Institute of Homocopathys)

No. 30, Bakthapuri Street

KUMBAKONAM

200c potency for all kinds of pains without inflammation preceding the pain i. e. the pain may be present by itself or pain comes first and then inflammation sets in, but not of use in malignant condition or of hysterical or hypochondriacal pains. Also of no use in pains of intermittent kinds. Useful in all kinds of trauma with reddish or blackish or blackish-bluish tint of the surface without bleeding or suppuration.

1000c or 1M potency is employed for all kinds of inflammatory processes without discoloration other than reddish tinge. Also of use for all kinds of intermittent sufferings like pains and so on except in malignant processes. All kinds of congestive processes. Whitish discharges with or without reddish areola, but no other tint areola.

CM potency: For all malignant sufferings.

MM potency: For all lingering-malignant sufferings.

* * *

When the given suffering is either on CM or MM planes but the patient's mental state is that of hysterical state, in that case the said patient be administered 30c potency and not the CM or MM potency because the patient's mental condition will need primary consideration."

The selection of the right potency is not enough; the right potency should be given at the right time. Dr. Hatteria lays down the following rules in this regard:—

"For all continued sufferings the remedy in its fixed potency be administered when the suffering of the patient is at the highest point but never should it be given when the suffering is in its transitory stages of either declining or increasing.

For all intermittent sicknesses the remedy should only be administered when the disease force has completely ceased i. e., immediately after the suffering has come to an intermittancy stage; it should be noted that at neither stage of increasing nor decreasing the remedy should be administered."

G. L. K.

—In the Homoeopathic Outlook

Q-3 TABLETS FOR ALL FEVERS

"Q-3" is a purely Homoeopathic medicine containing essential tissue salts and herbs. Whatever the nature of the fever, whether Malaria, Influenza, Rheumatic fever, or in the beginning stages of Typhoid and Pneumonia, 'Q-3' tablets will give immediate relief, without any after-effects.

DOSE: One tablet once in three hours when there is fever and as soon as fever subsides, one tablet per dose three times a day is enough.

Packing: In Bottles of 50 Tablets.

Indian Institute of Homoeopaths

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KUMBAKONAM

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(Phone: 5 5 3 9 0)

LETTER TO THE EDITOR

To

The Editor

"Homoeopathy".

Dear Sir,

I read your editorials regarding Proving Centres and Homoeopathic Colleges; and I appreciate very much the practical way in which you are dealing with these problems and the cautious manner with which you are approaching them. For the healthy growth of Homoeopathy, the one is as essential as the other. I can go further and say that the art of Homoeopathy or rather this "science expansive progressive, fostered and fostering" will not flourish without Proving Centres. An organised Proving Centre in India where medicines are proved or re-proved, as the case may be, is a sine-qua-non for the progress of Homoeopathy. As you explained to me in person the other day when we met at Salem, a Proving Centre is not an easy joke; I am quite aware of it. A chemical or pathological laboratory can be set up with necessary appurtenances and these can nowadays be ordered for money; but so far as a Homoeopathic Proving Centre is concerned, human bodies become the instrument and this naturally sets up various complications. I do realise all these things. But somebody should come forward to undertake this task. That was what I was anxious about and that was why I went on writing about it to every leading Homoeopath I came across during the course of the last one or two years; in fact, I was dreaming about it throughout the twentyfour hours of the day. So far, however, no one else except Dr. V. R. Murty seems to have listened to my lonely cry; for, I have not had the pleasure of getting any

reply to any of my letters in this connection from anybody else except your goodself. Now, I am indeed very glad to note that this idea has attracted your attention. I do hope that ere long it will take a practical shape. India's genius demands it and I have absolutely no doubt whatsoever that her spiritual heritage will supply it in the proper time and in an appropriate manner.

Your editorials regarding colleges are also very enlightening. Please pursue with this subject and do not rest content until you establish a college of your own conception in Kumbakonam, which will ultimately prove to be a standing monument for your long and continuous service to Homoeopathy. I think Mr. Venkatarama Iyer will certainly take note of what you have written about a second College in Tamil Nadu and I do hope that Madras State will be able to boast of possessing two colleges in the near future.

After our meeting at Salem and after going through the contents of the various Homoeopathic journals which I had opportunity to come across, many complex problems regarding our future existence seem to have cropped up and divergent and conflicting views are being put forth by the leaders in this line. After carefully going through all these news and after consulting my colleagues, I am issuing an appeal to the press describing the present state of affairs and suggesting the desirability of convening a conference of all Homoeopaths in Madras State to enable us to come closer together and take some coordinate steps to solve these knotty questions; for they have to be tackled by us at any rate—no body is going to solve them for us. And the sooner we do it the better for us all. I enclose copies of this appeal to you for your perusal and request you to be kind enough to insert them in your journals, English and Tamil alike.

The conference may be held somewhere in December 1958 or January 1959 and the venue, I suggest, may be this town, i. e., Salem. No Homoeopathic conference worth the name appears to have been conducted here so far, and I think this city requires some very effective and good propaganda as far as this branch of medicine is concerned.

Once again, I earnestly request you to please give this matter your serious consideration and write to me at your earliest.

Thanking you in anticipation and requesting to be excused for the somewhat lengthy shape that this correspondence has assumed.

I am, Sir,
Yours sincerely,

Salem }
25-8-1958. } A. V. Subramanian,
President,
The Salem Homoeopathic Association,
SALEM.

BAHOLA TOOTH DROPS

Can also be used regularly as a mouth wash. A few drops in a tumblerful of water act as an effective gargle after cleaning the teeth.

Small bottle — 0.50 nP.
Big bottle — 1.25 nP.

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FILARUM

An absolutely Homoeopathic preparation for the cure of
Elephantiasis, Filarial Limbs, and Filarial Fever

"FILARUM" being a purely Homoeopathic medicine in the subliminal form it is quite harmless to the system. There are no toxic effects even by heavy overdosing and by continuing treatment for quite long periods.

"FILARUM" is available in the form of pills. Two pills constitute an adult dose (one for children below eight years of age) and the pills are to be put in the mouth and slowly chewed, preferably $\frac{1}{2}$ to $\frac{3}{4}$ hour before food. Three doses per day is the usual dosage.

We strongly recommend FILARUM for all cases of Elephantiasis, Filarial Legs, Scrotum, hands etc. Put up in bottles of 180 Pills for One month's Course.

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AN APPEAL TO ALL HOMOEOPATHS OF MADRAS STATE

Homoeopathy as an art of healing is now coming to the forefront. There was a time when it was supposed to be unscientific and akin to witchcraft; the incredulously small dose of the medicine and the infinitesimally small proportion of the drug each dose contains made it impossible for materialists of the 20th century to accept it as a valid system of treatment. It remains a patent fact, however, that all those people who cared to experiment it in actual practice, either upon themselves or upon other human beings, not only testify to the action of the medicine *per se*, but go farther and begin to preach it as the one system par excellence. Recent advances in the theory of atomic science go to confirm all these views and establish the efficacy of Homoeopathy without any doubt. After the findings of the Homoeopathic Enquiry Committee appointed by the Government of India in 1948, all State Governments in the Union except Madras have accorded their recognition to this system and have passed or are in the process of passing legislative measures designed at regulating this field of medical practice. The present Health Minister of our state too, seems to have taken notice of the present trend of events and appears to be favourably disposed towards giving recognition to Homoeopathy.

On the other hand, what do we find in our ranks? Forces of disunity appear to have set in among Homoeopaths in Madras State very recently. They are trying to divide themselves as part-time Homoeopaths and whole-time Homoeopaths, pseudo-homoeopaths and original homoeopaths, low-potency homoeopaths and high-potency Homoeopaths, Tamil-knowing homoeopaths and English-knowing homoeopaths and what not? While this can to a certain extent be tolerated as exhibiting signs of self-awakening and self-thinking which is inevitable for our progress, we should not allow it to proceed to such an

extent as to divide our own house and spilt the milk just when the oven is hot. We fervently appeal to all homoeopaths, leaders in the line as well as followers in camp, to consolidate their position and present a united front to the authorities until we win the recognition that is long overdue. There is place in the present set up of our society even for the low potency man with some rudimentary knowledge of the system as well as the high potency man with highly specialised skill and intelligence. Adjustment is always the law of nature; let us help her by our coordinated action and sympathetic approach to all human problems. By perseverance and self sacrifice, by hard work and tireless effort, Madras, Kumbakonam and Tiruvarur have built up strong edifices for themselves; let us now try to unite these edifices by cementing them with Salem Steel and Madukkarai Cement.

One Dr. Sen of Bengal once told in Lok Sabha that homoeopathy has died in Germany its land of birth, is dying in England and America its lands of adoption and that it is bound to die in India too. His statement has already been falsified 80%; let us give the final blow to it so that nobody again dares make such statements.

“The best for the last” so goes a saying; let Madras prove itself to be the best by being the last to officially adopt this system.

The signatories are of opinion that a comprehensive Conference comprising all homoeopaths throughout Madras State should be convened at an early date where all questions regarding our differences of outlook, our future course of action, etc. etc. should be discussed threadbare and in a heart-to-heart manner; and they invite correspondence from readers interested in the subject.

Dr. A. V. SUBRAMANIAN,
President.

SALEM - 1 } Sri R. NARASINGAM, M. A., B. T.,
19-8-58 } Secretary.
The Salem Homoeopathic Association.

OCTOBER '58

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BAHOLA House-hold Remedies

The following are the 8 famous House-hold Remedies manufactured by Bharath Homeo Laboratory :

No. 1. This specific is indicated in Cold, Coryza, Headache, Feverishness etc.

No. 2. This is indicated in all types of ordinary Fevers, Influenza etc. May also abort, if given at the initial stage. Fevers like Typhoid, Pneumonia etc.

No. 3. This is indicated in all diseases that usually affect the infant, viz: Fever, Convulsions, Cold, Diarrhoea etc.

No. 4. This is indicated in Indigestion, Nausea, Vomiting, Colic, Flatulence, Chest and Stomach ache etc.

No. 5. This is a sure remedy for Diarrhoea. Even in cases of Cholera, if given in the beginning, will curb that much-dreaded disease.

No. 6. A remedy for Dysentery of any form and variety.

No. 7. A remedy to correct long-standing and chronic constipation, and its attendant ill-effects on one's health.

No. 8. This is indicated for all kinds of Cough, whether acute or chronic, and also in all other throat complaints.

PRICE

A set of these 8 remedies packed in a neat box with directions for use both in English and Tamil. Big Set (About 100 doses) Rs. 5 00
Small Set (About 50 doses) .. 3 00

(Packing & Postage extra)

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NEWS AND NOTES

RECOMMENDATIONS OF DRUGS CONSULTATIVE COMMITTEE:
We give below an extract from Pharmaceutist of August 1958.

"The recent recommendation of the Drugs Consultative Committee that bonafide Ayurvedic and Unani drugs should not be controlled under the Drugs Act, has been received with applause by indigenous drug manufacturers in Calcutta. The Committee's further proposal that manufacturers of patent and proprietary medicines should market their products in the form of tablets or capsules in strip packings has also been welcomed because it will facilitate purchase in original packings. It is also learnt that the Committee has suggested that patent and proprietary medicines should be sold in consumer packing even if they are in the form of liquids."

The bonafide manufacturers as well as the buying public have suffered so much at the hands of the criminal makers of facked and spurious drugs and the unscrupulous retailers that any bulk packing—tablets, capsules or liquids—is now looked upon with suspicion and trepidation. These recommendations of the Drugs Consultative Committee mean so much reputation saved for the manufacturers and safety assured to the patients. We hope they will be implemented by the Government without undue delay.

* * *

TOO TALL! New hope is offered for girls who look like growing too tall.

The British Medical Journal describes tests which can predict a growing girl's ultimate height with reasonable accuracy and better still, a treatment which can be given in time to stop this height being reached if it is too tall.

Most mothers would prefer their daughters to be less than 5 ft. 10 in., so there is likely to be quite a demand for this new keep-me-short treatment.

The sex hormone oestrogen, in small doses every day, has been given to girls, aged 11 and 12, to reduce their ultimate height with apparent success.

Its action depends on antagonising the growth hormone from the pituitary—the body's master gland.

No serious ill effects have been reported with this treatment. But conservative gynaecologists and gland specialists have warned that oestrogen should not be given to girls before puberty without proper medical advice.

Oestrogen tablets are supplied by reputable chemists only against a doctor's prescription.

★ ★ ★

MAHATMAJI ON HOMŒOPATHY: Mahatma Gandhi's *Obiter dicta* are always listened to with respect and deserve close attention and scrutiny.

The Navjivan Publishing House, Ahmedabad, has recently published Mahatmaji's letters to Sardar Vallabhai Patel. Writing in 1941, he has this to say of Homœopathy:—

"I have not had so far any confidence in it. I only wish that Homœopathy is successful in your case. C. R. Das believed in it, as also Motilalji and Gurudev and nearer home, our Lakshmidas believes in it. But, in the end every one seems to end up with Allopathy". He shrunk equally away from Ayurvedic Vaidyas and remarks, "I should shudder to put you under such physicians. I see in the end even Malaviaji and Motilalji had to resort to doctors".

Mahatmaji was such a lucid and careful penman that it is not fair to him or to these systems of medicine to read more in his words than he actually means. He just reflects on the popular reaction of patients to incurable diseases.

It is unfortunately true that in spite of all doctors and systems of medicine, there are illnesses and diseases that defy treatment and patients ultimately pass off under the label of some disease name or another.

All doctors are familiar with desperate patients who run from doctor to doctor, one system of medicine to another and it would be extremely puerile if any one tried to take credit out of such a pathetic phenomenon.

★ ★ ★

DOCTORS' CERTIFICATE EN MASSE: The Director of Health Services has taken up with the All-India Medical Council the

conduct of doctors in Lucknow who had issued medical Certificates to over 700 postmen who reported sick *en masse* in June last, it was stated in the Rajya Sabha. The question of how to deal with similar cases in future will receive the attention of Government, who were satisfied that most of the certificates should never have been issued.

The situation is no doubt quite embarrassing to the doctors as well as the Medical Council. So long as the system prevails of fees being paid by the patients for obtaining doctors' certificates, the latter are in a way bound to oblige their clientele. On the other hand, if the Government agreed to pay the fees in every case a Government official appears before a doctor for a certificate, then the doctor could be expected to give his frank opinion. Whoever pays the piper, calls the tune is the inevitable logic of life.

★ ★ ★

"DOCTOR", "DOCTOR" Mrs. Anantanayaki drew the attention of the Health Minister in the Madras Legislative Assembly recently to the utter confusion "among the people because every one used the prefix "Doctor" and asked if the Government could not stop this.

The Minister explained that under the Indian Medical Degrees Act there was no ban on any practitioner, whatever the system of medicine, using the prefix "Doctor". He did not agree with the member that many persons lost their lives because Homœopaths were allowed to style themselves as Doctors.

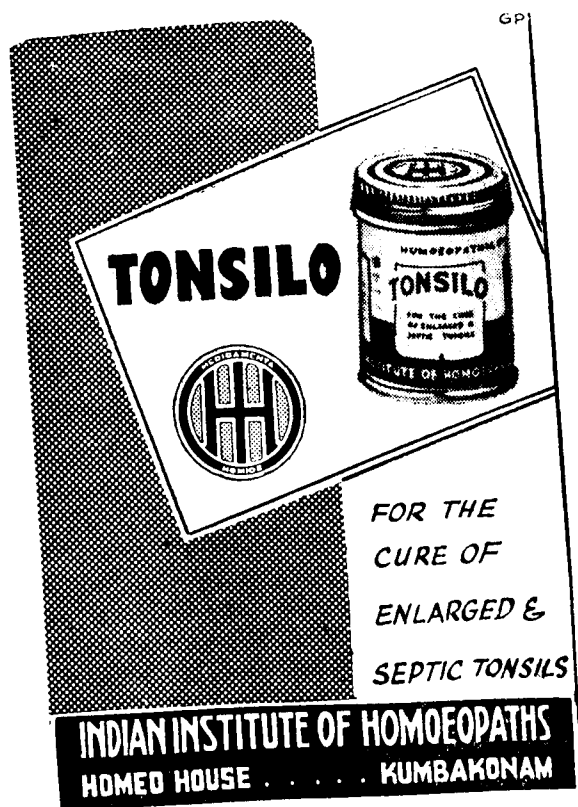
★ ★ ★

RECOGNITION IN MADRAS: The Pollachi Homœopathic Association recently met Sri M. A. Manickavelu, Health Minister, Madras, on deputation and while replying them, the Minister assured them that the Government was fully aware that Homœopathy was daily increasing in popularity among the general public and intended to accord the same recognition to Homœopathy as was accorded to Ayurveda, Siddha and Unani systems.

★ ★ ★

ORAL CONTRACEPTIVE: Speaking at a Press Conference, Prof. Rock of the Harvard University Faculty of Medicine referred to an inexpensive contraceptive pill which induced sterility throughout the period it was used in 255 women who had submitted to the test. The results of the experiment were 100 per cent conclusive.

GP



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FOR THE
CURE OF
ENLARGED &
SEPTIC TONSILS

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For the last 20 years "COMLAX" has been the choice of both old and young as the immediate remedy to relieve constipation, gently, promptly and safely.

Even though laxatives are not needed while under homoeopathic treatment, there may be times when evacuating the bowels becomes an urgent necessity.

A couple of tablets of COMLAX relieves the bowels in the course of a few hours and the properly indicated remedy acts better after the evacuation.

The best time to take COMLAX is at bed time for early morning results.

COMLAX is now manufactured under strict controls in our laboratories & are available in packets of two tablets & tins of 40 tablets.

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is a wonderful remedy for the oral treatment of Diabetes in all forms and varieties. It is not a remedy to simply reduce the Sugar temporarily but is curative and will, if used continuously for some time, root out the disease in its entire form.

Here is what Sri S. Asirwatham R. H. M. P.

Adaikalapatnam writes to us:—

"Your dibet has given startling results in a case of diabetes. This medicine has cured the disease in my son completely. Please send 2 more bottles through V. P. P."

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The pill is a synthetic compound, chemically similar to hormones, which stops the production of eggs in the ovary. Production begins again without difficulty when the pill is no longer taken.

★ ★ ★
MODERN MEDICINE NOT ADJUSTED: In a report which will be submitted to the eleventh session of the WHO Regional Committee in New Delhi, a survey team has attributed the so-called resistance to scientific medicine in the rural areas to "our own inability to adjust modern medicine to the needs of the villagers".

★ ★ ★
SELF-CONTROL: At a monthly meeting of the Salem District Homœopathic Association, Tiruchengodu, held on the 21st September the following resolutions were unanimously passed:—

1. All Homœopathic Doctors who have less than 5 years experience as Homœopathic Medical Practitioners should attend the Homœopathic personal class running in this District Association and at the end of the course they will write examination and get certificate.

2. Homœopathic Doctors of 5 years experience and above should register their names with the District Homœopathic Association after producing a satisfactory evidence to the Committee as proof of experience, etc.

3. They should keep a case record and be able to produce the same, if required.

4. The District Association will appoint a person empowering him to check all Homœopathic Medical Practitioners in this district whether they adhere to these rules and to take necessary action.

5. Homœopathic Doctors should not use other medicines than Homœopathy.

6. They should possess a good character.

7. Any Homœopath with all the above qualifications may be deemed fit to become a member of this District Association.

We shall watch this interesting experiment at self-control and wish it all success.

The Homoeo Way to Health

DR. MURTY'S MOST POPULAR SPECIFICS

	PRICE Rs. nP.
GOLDROPS for Asthma	3.75
SODHARI for Women's complaints	3.00
PYLET for Piles, Fistula and Haemorrhoids	2.50
DIBET for Diabetes	3.00
FILARUM for Filariasis and Elephantiasis	3.00
CIRRHO-BALA for Liver and Splen Complaints	4.00
HOMOSERP for High Blood Pressure, Insanity, Hysteria, Sleeplessness, etc.	4.00
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UTERINE DISPLACEMENTS-II

Dr. Mrs. N. A. Radha,
(Medical Officer-in-charge, Women's and Children's Clinic,
Indian Institute of Homoeopaths.)

Retroversion, Retroflexion, Combined Retroversion and Retroflexion:—By the term retroversion is meant backward displacement of the uterus, i. e., by vaginal examination, the cervix is felt upwards and forwards towards the upper portion of the symphysis pubis and bi-manual examination traces the fundus of the uterus backwards and downwards at the Douglas pouch. When the cervix is in its normal position and only the body tilted backwards, it is said to be retroflexion. A combination of both retroversion and retroflexion, i. e., the fundus of the uterus bent back and the cervix forwards, bent less downwards, is termed as *combined retroversion and retroflexion*. Speaking generally, these three forms of displacements are seen almost together and associated with prolapse. The signs and symptoms are also to a certain extent similar to that of prolapse.

Causes: Backward displacement can be either congenital or acquired. The causative factor in congenital form is, malformation of the vagina or uterine supporters at the period of growth or puberty. Virgins and married women, who have not borne children, are seen to be suffering from such displacements. The contributing factors to acquired backward displacement can be decidedly traced to repeated child birth and abortions. A certain amount of backward displacement is likely to occur during puerperium, if the proper hygienic measures are not adopted. Accidents, viz., fall, blows, etc., chronic over-distension of the bladder, pelvic inflammation, uterine tumours also occasion backward uterine displacement.

Symptoms: In the congenital form the main symptoms are dysmenorrhoea, pain referred to the ovarian region, cervical erosion and sterility. Speaking generally, pain referred to the sacrum, constipation, incontinence of urine, leucorrhoea, dysmenorrhoea, repeated abortions, especially in the 3rd and the

4th month, back ache, are observed as the symptoms of backward displacement of the uterus. Pain during intercourse indicates inflammation of the fallopian tubes and ovaries.

The altered position of the uterus to one side or the other by the pressure exerted by the ovarian tumour or inflammation of the parametrium or pelvic cellulitis following delivery is termed as lateral displacements. Instances have been observed of lateral displacements, occurring from salpingo-oophoritis or from tumours. As it is, it will not exhibit any symptoms.

Ascent: This results from puerperial infection, or sub-involution. This is otherwise called upward displacement of the uterus, i. e., the fundus can be palpated per abdomen. It may also result from ovarian cysts or broad ligament cysts.

Retroposition: Bi-manual examination traces the position of the uterus, unusually far back in the hollow of the sacrum, the fundus felt as a rounded mass.

Inversion: The uterus is turned inside out and projects at the vagina, i. e., the endometrium becomes the outer layer of the uterus and the fundus protrudes at the vulva, under this form of displacement. It is a rare condition, but when it occurs it is to be considered as a serious and dangerous condition. The chances for this form of displacement occurring in virgins and women who have not borne children are very rare. Inversion of the uterus generally takes place during the third stage of delivery during the process of expelling adherent or retained placenta. As the fundus is being pressed, it is brought down along with the placenta. Other conditions favouring inversion are the expulsion of a tumour or the expulsion of clots after delivery.

Symptoms: Shock and bleeding are the alarming symptoms resulting from inversion due to the expulsion of the adherent placenta after delivery. If the condition is unnoticed or neglected, prolonged lochia appears after delivery. Metrorrhagia and menorrhagia become the characteristic symptoms of the menstrual flux. Offensive discharge, rise of temperature and pain in the pelvic region with irregular bleeding results. When the woman is moving about or at the slightest physical exertion bleeding occurs.

Treatment: From the curative point of view, all the different forms of uterine displacements have to be classified under two categories, i. e., which can be cured medically and other group requiring surgical interference. The causative factor and the degree and the nature of displacements also are to be considered. In case the prolapse is due to neglected perineal tear and a complete procidentia, surgical interference is necessary. The presence of tumours and inflammatory conditions also has to be carefully investigated, for surgical interference is inevitable under such conditions. However, uterine displacements, if treated early at the onset of symptoms, can be checked from becoming worse, by proper Homoeopathic medicines with hygienic precautions and nourishing diet. Medicines such as Sepia, Sabina, Puls, Hydrastis, Calc. phos., Kali. Carb., Nux, Bell, Canth., Aletris Far., Lycopodium, are found to be of much effect. (6x and 30x).

Diet and Hygiene: Nourishing diet has to be taken in order to maintain the uterine ligaments in a strong and healthy condition. The bowels should not be allowed to get accumulated for it may cause congestion in retroverted uterus. In a similar manner the bladder has to be emptied periodically. Constipation and incontinence of urine, presence of discharge, pelvic pain, etc., etc., have to be considered by every woman as a warning signal of uterine displacement and timely Homoeopathic treatment received. Lifting of heavy weights or working for long hours on sitting posture has to be avoided when there is the least tendency for uterine displacements, especially, prolapse. The most hygienic and aseptic measures have to be followed during and after Puerperium and abortion.

If our women can strictly follow these measures, I believe most of the uterine displacements can be eradicated at their early stages.

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

The Homoeo Way to Health for Children's Illnesses

COMLAX: the sweet and safe Laxative, which children love: per tin of 40 tablets (a BAHOLA Product)
Rs. 1—50 np.

CIRRHO-BALA: preventive and curative against the much dreaded Liver and spleen complications; also a general tonic for weak and underdeveloped children: per bottle of 60 doses
Rs. 4—00

TONSILO: for enlarged and septic Tonsils and Adenoids, reduces need for operation:
per bottle of 50 tablets. Rs. 2—50 np.
per tin of 90 tablets for month's use. Rs. 4—00

OMKAR: in all complaints of digestion, viz; Indigestion, Flatulence, Colic, Acidity, Diarrhoea, Stomach Pain: per bottle of one oz. liquid.
Rs. 1—50 np.

Q-3: Tablets for all fevers: per bottle of 50 Tabs.
Rs. 2—50 np.

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KIDDYTONE-C: helps to build up growing tissues and gives added strength and energy to infants, children and adolescents: per bottle of 50 tablets. (with Vitamin C added)
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Any disease of the scalp including certain types of alopecia come under its favourable influence. Growth of hair can be expected on even bald spots by continuous use of this preparation.

For a luxurious growth of hair nothing can take the place of BAHOLA (Arnicated) OIL.

Method of use: Rub the oil into the scalp at least once a day. It can be used for hair toilet also, being mildly scented.

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For those that require abundant beautiful healthy hair, BAHOLA (Arnicated) OIL is the choice.

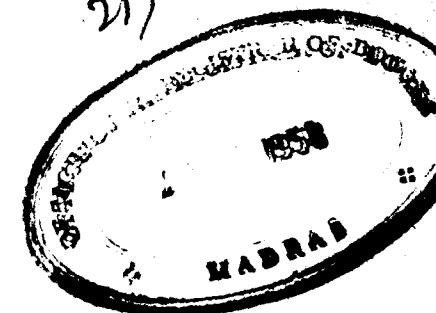
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BAHOLA PHARMACEUTICALS

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NOVEMBER 1958

GP

Baholin is an everready prescription for all neuralgic pains. Harmless to the human system.



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"Baholin" is a combination of important medicines and is very effective in colds, Headaches, neuralgic pains, early fevers and 'Flu'

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OUR STOCKISTS

For the convenience of our students and Homoeopathic practitioners we have appointed several stockists in some of the important centres, as under:

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Tinnevely and Nazareth:	M/s. Abraham & Co., Chemists, Nazareth. Branch at: Tinnevely Jn.
Dindigul:	Dr. A. K. Shamsuddin, Maligai Stores, Main Road, Dindigul
Tiruchirapalli:	Dr. V. Mahadevan, Tiruchy Homoco 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 Homoco Pharmacy, Police Station Road, Pollachi.
Rasipuram (Salem Dt.):	Dr. R. Balusamy, Babu Pharmacy, Athur Road, Rasipuram.
Orathanad:	Dr. K. V. Govindarajan, Kadai Veedhi, Orathanad, Tanjore Dt.
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HOMOEOPATHY

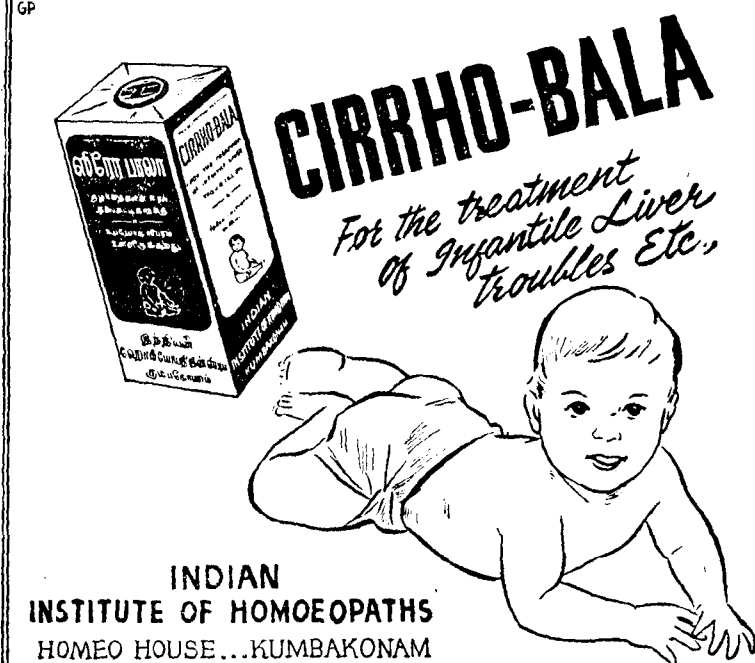
Managing Editor: Dr. V. R. MURTY

NOVEMBER

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CIRRH-BALA
For the treatment of Infantile Liver troubles Etc.

INDIAN
INSTITUTE OF HOMOEOPATHS
HOMEO HOUSE...KUMBAKONAM

The fact is that, basically, all systems of medicine are Therapeutics and, say, Preventive, first and foremost. Otherwise they cease to exist and have no justification.

True enough, Allopathy, being the last pet child of our erstwhile Western Government, occupied a position of vantage in Medical College curriculums where other allied subjects were also taught. Now, that should not make them lose their head and imagine that none else is entitled to such other branches of medical knowledge. Thus sick room nursing and hygienic precautions will remain the same whether an allopathic, unani, ayurvedic or homoeopathic doctor treats the patient.

If henceforward, in Ayurvedic, Unani and Homoeopathic Medical colleges, their alumni are taught Anatomy, Physiology, Botany and Biology, Surgery and Nursing, Forensic and Preventive Medicine—all of the same standard as in the present M.B.B.S. course, who can prevent it? Is modern knowledge and appurtenances of diagnosis the sole monopoly of allopaths? We say, it is not. Why should not Preventive and Public Health medicine be taught in the colleges of such non-allopathic systems? They must and will be done in future and then allopathy will have to prove its comparative merits on common ground without any special advantages or handicaps.

Then, the public will be in a position to judge of the comparative merits of these systems so far as the welfare of the individual and the public is concerned.

What is sometimes forgotten is that the scientific method of approach, and modern developments in scientific knowledge are the common property of anyone who desires and is able to make use of them.

We have always maintained that Homœopathy, Ayurveda, Siddha and Unani are essentially scientific in their approach to problems, although in the case of the latter three, being Eastern and ancient systems, their science may not be immediately apparent to those trained in modern medicine. Further, just because they are ancient systems or even two centuries old, it is not necessary that they should forego the benefits accruing from modern scientific appurtenances for diagnostic, pharmacological and surgical purposes.

In his foreword to the Union Health Ministry's recent publication entitled, "Health in Independent India", the Prime Minister has brilliantly summed up the position as follows:—

"There is no reason why we should not bring about an alliance of old experience and knowledge as exemplified in the Ayurvedic and Unani systems with the new knowledge that modern science has given us. Persons who are practising the Ayurvedic and Unani systems (*and let us add, Homœopathy-Ed.*) should also have a full knowledge of modern methods. This means that there should be a basic training in scientific methods for all including those who wish to practise the Ayurvedic or Unani systems. Having got that basic training, a person may practise either of these systems."

We entirely agree with what the Prime Minister has said. But, having said this let us add that there should be no mistake about it. As systems of medicine, they should be taught entirely separately in their own Colleges: their practitioners should be allowed to practise with equal status and privileges, without any handicaps; and Government should devote equal energy and money in promoting research, manufacturing and Collegiate organisations for these systems as are being done hitherto for Allopathy. Any lopsided or half-hearted development, as, for example, establishing A-1 Medical Colleges for these systems and turning out first class alumni, but as practitioners, neglecting to provide them research and manufacturing facilities so that their medicines can be tested, improved, added upon and made readily available, is bound to be disastrous.

Education, research and manufacture are all equally important facts for the successful training and practice in any system of medicine. Equally steady and simultaneous advance on all these sectors are absolutely necessary, if the Government would do justice by these systems of medicine.

EXCURSION PARTY VISITS INSTITUTE

(By N. KOTHANDARAMAN, Kumbakonam)

On Sunday the 12th October a touring team of 60 employees attached to the B & C Mills Clerks Excursion Club, Madras, visited the Indian Institute of Homoeopaths.

Dr. V. R. Murty, Governing Director of the Institute and Municipal Chairman, Kumbakonam, Dr. R. Jyotirmayam and staff welcomed them. The visitors were entertained to a breakfast after which Dr. Murty spoke on the Role of Homoeopathy in India.

After welcoming the tourists, Dr. Murty said:

"I would like to draw your attention to the conditions in our villages where the teeming population of the land have had to live. The problem of medical relief in rural areas is bristling with enormous difficulties. This has become indeed an acute problem. The Government, of course, do want to solve the problem in a satisfactory manner and are making earnest attempt at it; but the magnitude of the task may be imagined by having an idea of increasing population and the difficulties inherent in such a context.

In these days, it has become a practice with the people to run to doctors even for ordinary ailments. This is certainly a regrettable state of affairs. In fact, most of the diseases will have natural cure by themselves with a little attention to them. Our grand-mothers and great grand-mothers were fully conversant with a number of never-failing cures for ordinary ailments in a family and even today sometimes we hear of the efficacy of "*Patti Vaidhyam*". Having forgotten such a good family practice, handed down for generations, we are now flocking to doctors on the slightest indisposition.

The Allopathic system, as every one would admit, is somewhat costly in these hard days. The cost of living has tremen-

dously sky-rocketed. It was found possible before to run a family decently with Rs. 30 a month but several times that amount would hardly suffice today to make both ends meet. Would it be possible for ordinary people under the conditions prevailing today, to spend much on medicines? This aspect should be deeply considered by every one of us. It is well known how families suffer on account of heavy expenditure on medical bills.

The supreme importance of the Homoeopathic system and the great urgency with which the country should have to take to it in an ever increasing measure, is a matter of immediate concern to all of us. It is a most effective and simple system and in addition to that, *cheap* and within the reach of one and all. It is a well established scientific system, having its fundamentals on a firm and unassailable basis. It has not the slightest tendency to do any harm to the system which is no small thing in any medical system. I am fully confident that the problem of medical relief can be solved in a substantial way and satisfactory manner by the practice of this system. Needless expenditure on medical treatment can also be safely cut down. The health as well as the economy of the family stand to gain a good deal by this. Many diseases declared incurable in other systems have been successfully cured by Homoeopathy at an incredibly cheap cost and Homoeopathic history is full of it. In short, this is a great boon to humanity.

"As regards our Institute its services are wellknown during the past 20 years of its steady, progressive and dedicated growth. The edifice has been built on hard and tireless labour harnessed to well-defined planning, concentration and dedication to human welfare. The Institute is determined to go ahead with its programme of medical relief to cover villages and hamlets in a humanitarian spirit, which is its basic ideal. (Cheers)

Sri B. Parthasarathy, Secretary, the Excursion Club, and Sri L. M. N. Thomas thanked Dr. MURTY and the staff.

The visitors were then taken round the Institute's various departments including the non-bonded laboratory.

IMPORTANT ANNOUNCEMENT

CHANGE IN THE RATES FOR BIO-CHEMIC MEDICINES

Due to Import control restrictions imposed by the Central Government, the price of Sugar of Milk which is the basic ingredient used in the manufacture of Bio-chemic medicines is now nearly double that of its previous price. As such, it has now become necessary to slightly increase the rates for Bio-chemic medicines also. As these preparations are being manufactured by us in our own Laboratory, we have been all along selling them at a lesser rate than those fixed by other Homœopathic Pharmaceutical Firms. Even now, while revising the rates, we have calculated and fixed the new rates as low as possible.

Now Bio-chemic tablets are being manufactured by our Laboratory in 2 different sizes to suit the convenience of Homœopathic Physicians, that is, the usual 1 gr. small tablets and 3 grain flat size tablets. The dosage for the former is as usual, that is, 3 tablets per dose for adults and that for the latter is 1 tablet per dose. We have also reduced the rates for 3 grain flat tablets compared to those for 1 grain tablets.

Our clients are requested to specify in their orders the exact size of Bio-chemic tablets required by them. If the size of the tablets required is not given we will send the usual 1 grain tablets.

New Revised Rates that will come into force with effect from 1-11-1958

RATES FOR 1 GR. SMALL SIZE TABLETS

Potency	2 drms.	$\frac{1}{2}$ Oz.	1 Oz.	2 Oz.	4 Oz.	8 Oz.	1 Lb.
3x, 6x, 12x, 30x	0-40	0-60	1-00	1-50	2-50	4-00	7-00
200x	0-50	0-75	1-25	2-00	3-25	5-50	9-00

RATES FOR 3 GR. BIG SIZE TABLETS & TRITURATIONS

3x, 6x, 12x, 30x	0-35	0-50	0-90	1-40	2-25	3-75	6-50
200x	0-40	0-70	1-10	1-50	2-75	5-00	8-00

Bio-Chemic tablets are not sold less than 2 drams, which is the minimum packing. Orders for half and one pounds can be given either by weight, packed in card-board packing or by volume packed in bottles. The usual discounts as per our terms will be allowed on the above rates.

These revised rates will come into force at our Madras Branch also simultaneously.

DIRECTOR, (SALES DEPARTMENT.)
INDIAN INSTITUTE OF HOMOEOPATHS.

A BOOK REVIEW

Some Recent Research and Advances in Homœopathy claimed to be merely a compilation by Dr. P. Sankaran, L. I. M., D. F. (Hom.) (Lond), Hon. Physician, Government Homœopathic Hospital, Bombay, should be an eye-opener to many Homœopaths. It is perhaps not fair to the author of this 23-page booklet that we should reproduce many extracts. But, this small volume is so much packed with compressed information that reproduction of any number of extracts will still leave the reader with interest to peruse the whole volume in comfort and in detail.

Calm and careful study and deep reflection are necessary to appreciate the implications of the several experiments so ably and briefly touched upon.

Although we have heard of Dr. Boyd's Emmanometer and, thanks to the "*Homœopathic Outlook*", had reproduced brief details some time ago in our pages, the several other experiments referred to in the book are rather news.

By means of the Emmanometer Dr. Boyd was not only able to prove scientifically "that there are some energies of a very delicate character inherent in highly diluted and potentised substances," but also that "these energies evoke reactions on the human body that can be detected."

"With the help of a new biological heart rate recorder and using 367 frogs for the experiments Dr. Boyd again was able to record biologically the action of microdoses of *stropanthus sarmantosus* of the range of 6x to 11x potency".

"The French physicist Gustave de Bon demonstrated that sodium chloride in 1M potency sprayed into a vacuum will show a sodium band in the spectrum".

"In 1952 Krawkow demonstrated in his laboratory the pharmacological activity of adrenalin, bichloride of mercury and

copper sulphate in the 24x and histamin and silver nitrate in the 32x potency”.

Some experiments with guinea pigs were conducted by the Foundation of Homœopathic Research in the United States “to study the effect of potentised drugs on normals”. In these experiments two hundred and twelve animals were used, sixty five being used as controls and one hundred and forty-seven for the experiments. The substance used was *Natrum Mur.* in dilution ranging from the 30th to the 2000th.”

“The result of this experiment can be summed up as follows: Sixty guinea pigs living in family groups of four females to one male including all progeny born during a period of sixteen and one half months, were reduced to seventeen by giving dilutions of *Natrum Mur* ranging from the 30th to the 2000th dilution. Twenty control animals in seven months had increased to seventy six”.

We shall not give more examples except to add that details given of experiments on the action of Arsenicum, Mercury Nitrate and auto-potencies on tumour-bearing fruit flies; on the bowel nosodes; and on the new scale of potencies based on 50,000 parts of the dilution instead of the original 99 parts.

The Drug Proving and Research Committee of the Faculty of Homœopathy, London, has been conducting a number of provings including mustard gas, Carcinotin, ACTH and *rauwolfia serpentina*.

We have given enough examples to show how very interesting and informative this booklet is.

There are still unfortunately many laymen who think of Homœopathy as being in the borderland of witch-craft, hallucination and faith-cure and as “an unscientific humbug unfit to occupy the attention of a regular physician”.

In the absence of knowledge of the latest developments, many Homœopaths have to look apologetic when facing such critics.

To all such, this book is a priceless boon. It costs Rs. 2 only and can be had from the publishers, The Homœopathic Medical Publishers, 13-A Station Road, Santa Cruz, (West) BOMBAY—23.

WHAT TO DO ABOUT STUTTERING

SPECIALISTS tell us that stuttering usually begins around the age of three or four. Furthermore the way the stutterer's parents act towards him often determines whether he will recover from stuttering or go on with it for the rest of his life.

Barring a few exceptions stuttering is an emotional problem which arises from a variety of causes. Some speech disorders are caused by shock, association as a child with some one who stutters, or by careless speech habits.

Whatever the cause, once stuttering has begun, unpleasant emotions are sure to arise in the child because of the way other persons, particularly his family, act towards him.

The pros and cons of this subject are long and varied. What the specialists do agree on, is that the child should never be made to feel that he is an object of ridicule. Nor should a sense of shame be attached to his poor speech co-ordination.

The worst thing in the world is for parents to reveal an overdeveloped sense of anxiety. Practically every child halts and repeats during his early years.

Except in isolated cases, stuttering decreases to a minimum or disappears altogether as the child grows in stature and confidence.

George Wilton in his informative book “How To Overcome Stuttering” states: “It is bad technique to shout at children who have nervous speech disorders. The most destructive method consists of bawling them out,” he continues, “hurrying them, or letting them see you are angry or impatient.”

It's hard for parents to assume the attitude that all is well, especially as the child becomes aware of his speech hesitation. He may resent what he thinks is an unfeeling attitude on your part.

Parents will find that they toe a very precarious line with their youngster in his alternative need for sympathy and desire to be left alone.

At school or at home, an atmosphere in which the child can feel worthy and comfortable, is the first essential for overcoming speech difficulties. Spontaneous fun and laughter, which liberates self-consciousness, is a proven miracle worker.

There is no use pretending that the child does not stutter. With a youngster of six, seven and eight it is better to talk it over with him. A stutterer shielded at home from criticism and even kindly laughter, will find it hard going when he encounters the school bully who takes it all as a big joke.

However much your child may suffer from ridicule, he must learn to "grin and bear it." The best cure for nervousness and self-consciousness, is his ability to laugh it off. This is better for the stutterer than all the parental coddling and over-done understanding.

The only known treatment for such speech disorder is relaxation. Stuttering is largely the result of hurry, anxiety and self-consciousness.

Most people who have speech trouble are high-strung, easily excitable. Once the stutterer learns that slowness is the watch-word, deep breathing the secret, and clear articulation the method, he will be on his way to overcoming the problem always remembering to take it easy!

The worst feeling for the stutterer is the sudden thought "I am going to stutter over this word." And, of course, he does. Speech is an unconscious rhythmic habit.

When we speak normally all muscles of the throat are brought into play. Nervousness produces semi-paralysis of these muscles.

No wonder many people who stammer badly find that in the natural rhythm of singing or reciting, rigid muscles are

soothed and enunciation is perfect. You just can't sing and stutter too!

"If you are not afraid that you will be able to speak, in all probability you will be able to speak," continues Mr. Wilton in his guide to speech control. "But if you anticipate trouble, you will certainly get it," he cautions. "Keep past failures out of your mind. Quit worrying about your speech."

Advise your child calmly and sensibly. Don't mention stuttering in hushed tones as if he had an incurable disease. You can help more by setting the stage so he can relax and welcome your help.

How do I know? You see, I s-s-s-stutter.

— *Sunday Standard*

HOMEO COUGH SYRUP

A pleasant and agreeable preparation in syrup base containing a few reliable homoeopathic medicines.

Composition: Justicia Basaka, Senega, Ant. Tart., Ipecac etc.

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.

A purely homoeopathic combination remedy that does not contain any physiological sedatives.

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NEWS AND NOTES

FAMILY PLANNING: Every student of Homoeopathy must have some basic knowledge of family planning. The greatest champion of this cause, Dr. Marie Carmichael Stopes passed away last month. As a tribute to her memory, we publish on another page an article entitled, "The Pioneer Family Planner" and hope it will be of interest to our students.

* * *

Dr. Bankim Ch. Chatterjee, a Family Planning Research Worker of Bhatpara, 24 Parganas, writes that Mr. Nehru, Prime Minister of India, will inaugurate the International Planned Parenthood Federation's Sixth International Conference at Vigyan Bhavan in New Delhi on February 14th, 1959. Mrs. Lakshmi Menon, Deputy Foreign Minister, will be the Chairman of the Reception Committee.

"Family Planning - Motivations and Methods" will be the theme of the conference which, under the auspices of the Family Planning Association of India, will be in session from February 14th to 21st. Subjects to be discussed include population in atomic age, cultural patterns and motivations, Biological aspects of fertility control and evaluation of oral methods, laboratory and clinical testing, sterilization, infertility and education for family life. Application for registration forms and other details for Homoeopathic Biologists, Bio-Chemists, can be had from Mrs. Ava Bai Wadia, Bar-at-Law, FPA of India, 1 Metropolitan House, Dadabhai Naoroji Road, Bombay-1.

* * *

DELHI HOMOEOPATHS TO REGISTER: The Chief Commissioner, Delhi, has recently constituted a Board under the chairmanship of Dr. Yudhvir Singh for administering the Delhi Homoeopathic Act, 1956. At their first meeting the Board decided to invite applications from Homoeopathic practitioners for registration on prescribed forms.

* * *

MEDICAL LICENTIATES: The Standing Committee of the all-India Medical Licentiates Association, which concluded its four-

day session at Mussorie on the 25th September last, has urged the Union Health Ministry to amend the Indian Medical Council Act, adopt one schedule for all statutorily recognised medical practitioners and maintain one All-India Medical Register.

We cannot in all conscience support such a demand. So long as there is a dearth of medical personnel to fulfil the requirements of the whole country, it will be necessary to afford different grades of training and it is but right that cadres are distinguishable according to their standards of education and training.

★ ★ ★

REGISTRATION IN MYSORE FOR HOMŒOPATHS: The Mysore Government in a Press note issued on October 7th informs practitioners of Homœopathic medicine that they should apply for registration only after the introduction of the Registration of the Homœopathic system of Medicine in the State.

Meantime, there is no restriction on qualified Homœopaths practising freely in Mysore State, as they do in Madras State.

★ ★ ★

PUNJAB CONFERENCE: The fourth Punjab State Homœopathic Medical Conference concluded its sittings in Ludhiana on Sunday the 5th October.

The Conference suggested the setting up of a Homœopathic Advisory Board and requested the Government to amend the Punjab Homœopathic Registration Bill 1958, so as to bring it to the level of the Homœopathic Registration Act of Delhi as regards the rights of Homœopaths.

By a resolution, a demand was made for the application of the Health Insurance Scheme to Homœopathy with choice of treatment for insured persons.

★ ★ ★

TIRUCHIRAPALLI: At the monthly meeting of the All-Tamil Nadu Homœopathic Medical Association held on the 12th October Dr. V. Mahadevan spoke on "Diabetes and Genito-Urinary Organs".

★ ★ ★

KARELA FOR DIABETES: An inquiry has been made in a recent issue of "The Indian Express" about the proper method

of preparation and use of the juice of Karelas (bitter gourd) *momordica charantia* (Pavakkai in Tamil and Kakara in Telugu).

Chop into small pieces four small-size, fresh, garden-picked green Karelas. Pound them on a "Masala stone." When in paste form, sieve them through a muslin cloth and extract the juice. Add to it a pinch of salt and drink it. After gargling, the bitter taste from the mouth will disappear. If large-size, but green, Karelas are available, then their skin is to be scraped. The collection of the skins is to be pounded in the above manner and the juice taken. Not only against diabetes, but also against jaundice and piles, Karela juice has proved very efficacious.

K. C. JAGASIA.

—*Indian Express.*

★ ★ ★

MEDICINAL PLANTS: To enable the projected Central Indian Medicinal Plants Organisation to function immediately an executive council with the Director-General of Scientific and Industrial Research as Chairman has been constituted.

Until arrangements are completed for the headquarters to be set up in Delhi, the organisation will function temporarily from the Central Drug Research Institute, Lucknow.

The Council of Scientific and Industrial Research, which has sanctioned the scheme, has also suggested that the organisation should consider problems of extension of the cultivation programme to actual cultivators and farmers.

There would be four regional centres — at the Botanical Survey of India, Poona centre, Botanical survey centre, Calcutta, the Cinchona Directorate, Nilgiris and the Regional Research Laboratory, Jammu and Kashmir. The number of zonal centres will be increased as work progresses.

The scope and functions of the organisation would include the evolution and laying down of standards for plant drugs with special reference to their identity, quality and purity, cultivation of important medicine plants, bringing about improvement in the quality of crude drugs by experimental studies on their cultivation



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Children's Illnesses: Colds and Coughs, Indigestion, Vomiting,
Colic, Flatulence, Diarrhoea, Dysentery, Constipation,
Whooping Cough, Tonsillitis, Liver Complaints, Skin
diseases, etc.

Ladies' Complaints: Menstrual Disorders, Leucorrhoea,
Hysteria, etc.

Men's Ailments: Lumbago, Rheumatism, Dyspepsia, Diabetes,
etc., and

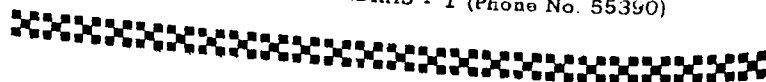
General Diseases: such as, Malaria, Nephritis, Dropsy,
Impotency, Paralysis, epilepsy, etc.

Each Bottle of H. P. P. Specifics costs Rs. ONE only
Teak-wood Box to contain 24 Specifics Rs. 2.75 nP.
(Sales Tax, Packing and forwarding charges extra)

For further particulars, please contact :

INDIAN INSTITUTE OF HOMOEOPATHS,
KUMBAKONAM.

Madras Office at
6, STRINGERS ST., MADRAS - 1 (Phone No. 55390)



the benefit of the poor millions of India and China. A cotton pad of the size of one's palm and about a quarter of an inch thick, enclosed in a silken net with a silken string attached for safety purposes is the only gadget required. It is dipped in any sweet oil, which is normally found in every Indian household, slightly squeezed and worn by the woman pressed deep so as to completely cover the cervix. This is placed in position before retiring to bed and is removed only after 24 hours. The pad is then burnt and a fresh one used when necessary. This is said to offer more than 80% protection which is after all the best that is claimed for any single method of conception-prevention.

After elaborately experimenting with all known safe methods of family-planning in the various clinics under her control over a number of years, Dr. Stopes gave it as her considered opinion that to be completely safe, two methods should be combined together. It would appear therefore that if one regularly uses "Suba", Homoeopathic oral contraceptive, (referred to later on) as also the cotton wad soaked in sweet oil (referred to before) almost cent per cent safety can be presumed.

Of course, this does not refer to vasectomy or salpingectomy, which offers the only 100% method of birth-control. Salpingectomy for women, it should be added is a major and risky operation, while vasectomy for men is comparatively very simple, safe and equally effective so far as the couple are concerned.

iii

It is noteworthy in this connection that within the last four or five decades, although tremendous progress has been made in popularising birth-control and although scientists and pharmaceutical researchers have devoted concentrated attention on the problem, practically no advance has been made in our knowledge of the subject, on the position as it obtained when Dr. Stopes first published her "Wise Parenthood". No new knowledge has come to our possession, no new method has been developed and none of the defects and objections which were then raised in using any of the various methods advocated have been overcome. All the major efforts have been concentrated on preventing, immobilizing or destroying the ejected spermatozoa from

entering into the cervix. Mechanical contrivances of metal or rubber, chemical compounds of gelatinous or foaming variety, rubber sheaths for male and female wear, have all their advocates and objectors. The inter-menstrual sterile period theory was popular for some time until scientists started differing as to the exact effective period in question, so that the average person is more confounded than ever. Persons are known to have practised *coitus interruptus* with varying success over long periods. There are also those pseudo-religious, orthodox people who swear by voluntary abstinence as a means of birth-control. The last category, with honourable exceptions, usually consists of those who mainly preach to others and in their own private lives are fathers of unnumbered, unplanned children.

iv

Barring vasectomy and salpingectomy the ideal method from the people's point of view, is the oral contraceptive offering freedom from conception just so long as the pills are taken orally.

While scientists all over the world have tried their best to discover such remedy, so far, it has eluded everybody.

No doubt, there are many claimants in India who market such oral contraceptives but their success is untested and their products are not standardised.

Some time ago, while referring to the question of family planning in the West Bengal Legislative Assembly, Dr. B. C. Roy, the Chief Minister and eminent physician, stated that West Bengal did not intend to take any action regarding Family Planning clinics as they had a simple and effective popular remedy wellknown in that region; but unfortunately he did not mention what it was.

In Homoeopathy, we have certain remedies, such as, Apis Mel., Sabina, Nat. Mur., and Pulsatilla which, when given orally in certain potencies about one week before the expected onset of menses are said to ensure its prompt appearance.

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"Suba" pills, a popular product of the Indian Institute of Homoeopaths, has worked effectively in quite a large number of cases where they have been tried. But, still none of them can be claimed to be cent per cent success.

An ideal oral contraceptive has still to be discovered and investigations in this respect are being carried on in many centres throughout the world. Meantime, the only perfectly certain method is vasectomy or salpingectomy of which we have already written.

Quite a useful little pamphlet has been issued by the Government detailing the important methods of family planning. So it is not in the region of this article to mention them all over again.

But, this occasion may be utilised for assessing the worth of the recent campaign being carried on by the Government of India to popularise family planning by means of Family Planning Clinics.

As in other spheres of advancement, in this also we seem to be blindly imitating what happens in the West, without allowing

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for the drastic change in outlook, standard of life etc., between the two regions.

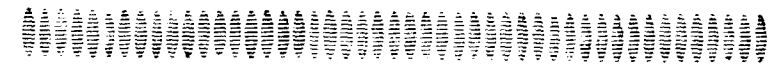
No doubt, women in the west were pioneers of this movement, especially the aggressive suffragettes, who took up this cause along with so many others, with a view to fighting for the emancipation of women and their right to vote. In the West the educational economic and social standing of women make it possible for them to learn and practise birth control.

Quite the contrary is the case in Eastern countries, including India. The poverty and backward condition of the population, as well as their social upbringing deny either privacy or the necessary ability to our women to practise family-planning without the active consent and approval of the menfolk. Menfolk are the dominant personalities in families and unless they are in active sympathy with the cause, even women trained in this technique can do nothing.

If family planning is to succeed widely among the masses rather than be confined to the socially advanced educated middle classes of urban areas, who can anyhow take care of themselves and who in many cases are not exactly in need of family planning, it is absolutely essential that the menfolk are appealed to appreciate the wisdom of family planning. Their sense of responsibility and pride in their own family and the upbringing of their own children to a standard of life at least not less than their own should be emphasised. If the menfolk are convinced that they should not bring forth children whose welfare they are not able to provide for, then half the battle is won. They should be told that the upbringing of their own children is primarily their own responsibility and that it cannot by any means be shifted on to God, Nature or the Government. Unfortunately, this mentality prevails to a great extent among men even in educated middle class families.

It is thus our belief that proper family-planning propaganda among menfolk should not be neglected as it is now. Propaganda and training given to women alone cannot be productive of full results at least in India and other Eastern countries.

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



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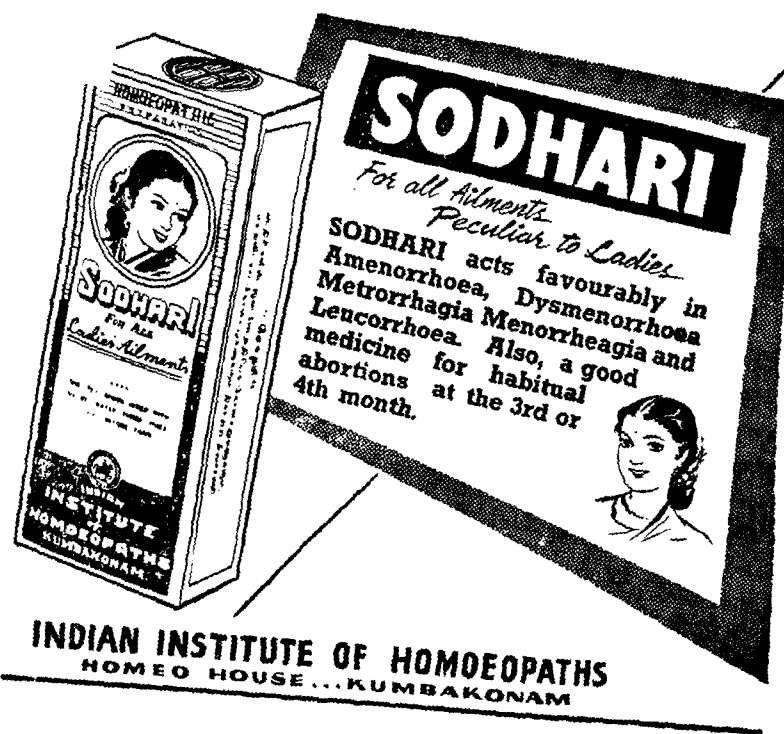


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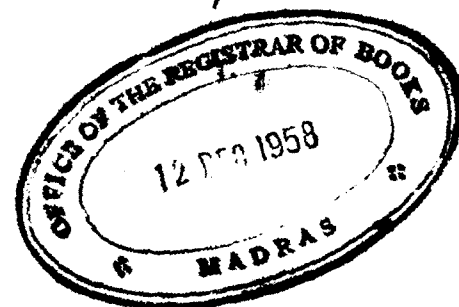
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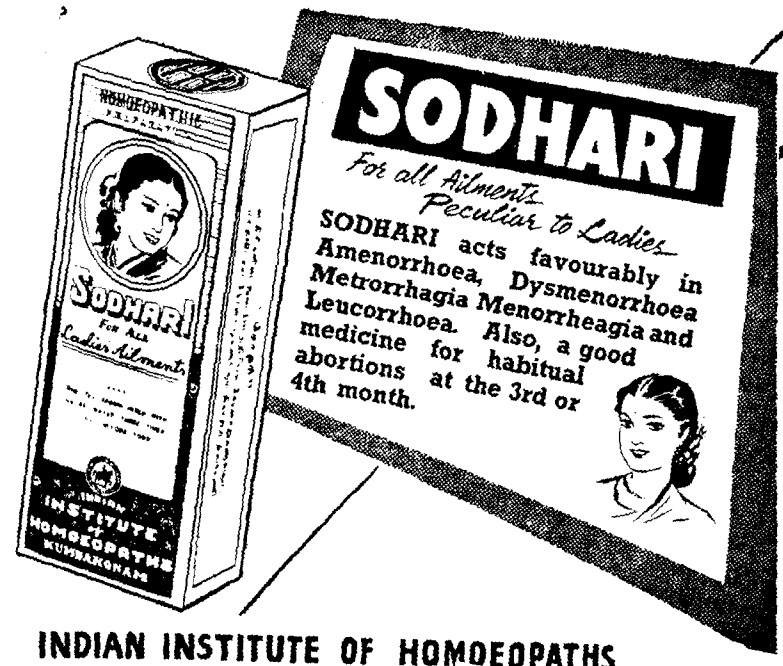


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HOMOEOPATHY

Managing Editor: Dr. V. R. MURTY

DECEMBER

1958

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Tiruchirappalli:	Dr. V. Mahadevan, Tiruchy Homoco Medical Stores, 12, Singarathope, Trichy—8.
Turaiyur (Trichy Dt.)	Dr. S. Narayana Iyengar, M/s. Laxmi & Co., Trichy Road, Turaiyur.
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MADRAS—1

THE HOMOEOPATHY

VOL. VII

DECEMBER

Book 12

AIM HIGH

I

A CERTAIN amount of frankness characterises the speech of Dr. C. S. Patel, President of the Medical Council of India, while presiding over the Silver Jubilee Session of the Council in New Delhi on the 31st October last. He announced that the Medical Council had informed the Union Government that there should be only one system of medicine in the country, and that, the so-called “modern” Allopathic system. The eminent doctor went on to say that the ultimate aim of the Council had all along been that the basic medical qualification should not be lower than the M. B. B. S. standard and, with great unctuous solicitude for the masses, added that “human life should not be left in the charge of inadequately trained medical men”. To quote him again, the gigantic organisation required to meet the problem was not yet in sight principally due to the paucity of resources as well as trained medical personnel. “Therefore, I would like to suggest to the Government to proceed slowly”.

These strange hypotheses and stranger deductions might suit the comfortable existence of the Medical Council, but meantime, what happens to the millions of rural dwellers thus denied means of medical attention because of the self-satisfied philosophy of the Medical Council?

Luckily, the Government of India under the present leadership is not in a tolerant mood towards such complacency and is in a hurry to find quicker ways of redressing the long-felt

wants of the rural population. Besides, no one seems to be entirely satisfied that the practical monopoly so far enjoyed by the orthodox "modern medicine" has been used entirely in the interests of the suffering public. After all, as the Medical Council have no other remedy to offer except "to go slow", they should not be surprised if it is decided to try other methods also, especially, Homœopathy, which is decidedly more modern than the "modern" medicine and has the added advantages of cheapness, quicker training and demonstrated efficacy.

With the next proposition stated by Dr. Patel, viz., that there was a fundamental difference in theory and practice between the different systems" we are in perfect agreement and reiterate that each system should be taught in entirely different Medical Colleges, equally well-equipped and staffed.

We have *ad nauseam* condemned outright the third suggestion of Dr. Patel and the Medical Council, "that every person trained hereafter to take up the profession of medicine should have a basic qualification in *modern medicine*".

It was only in our last month's editorial that we heartily approved of what the Prime Minister has said in this context, viz., that "there should be a basic training in *scientific methods* for all including those who wish to practise the Ayurvedic or Unani systems. Having got that basic training a person may practise either of these systems."

Now, it is a far cry from what the Prime Minister intends when he speaks of basic training in *scientific methods* to what the Medical Council wants when it speaks of basic qualifications in *modern medicine*. The Medical Council is at perfect liberty to have and even air their own views, but, as a responsible body on whom would "devolve greater responsibility and powers" under the Indian Medical Council Act, 1956, it would be far better if they understood modern trends and the basic policy of the Government as expressed by the top leaders and gave effect to the same instead of repeating the part-worn old shibboleths that have been adumbrated by the President of the Medical Council.

It has already been decided at Government level that Ayurveda, Unani and Homoeopathy are to be taught in entirely

different institutions, and that their practice and propagation side by side with Allopathy are to be encouraged. As such, we do not see any point in the Medical Council now harping that the study of the indigenous system and Homoeopathy should be promoted only as post-graduate courses of training. Whatever happened in the U. K., Europe and America, the Medical Council may rest assured that the tactics employed in those countries to smother Homoeopathy are not going to be tolerated in India. India is too wide awake now. We wish the Medical Council were more realistic in their expressions of opinion.

II

While we have on the one hand the well-entrenched Medical Council zealously and even jealously guarding its prerogatives and privileges and prepared to fight tooth and nail to maintain its monopoly, on the other, we have the strangely hesitant and apologetic attitude of the Madras Presidency Homoeopathic Association, which has ambitions to represent the whole profession of Homoeopathy in the Madras State.

Considering how frustrating and ineffective has been the work of Boards of Homoeopathic Medicine in all the other States, and that registration by itself is no panacea for all the evils we are suffering from, unless it is vigorously followed by measures to establish Homoeopathic Medical Colleges and Research Centres of a high standard not any the less than the parallel Allopathic Medical Colleges, our Association (M. P. H. A.) calls for the establishment of a similar Board in this State also. No doubt, they do talk of establishing a College for Homoeopathy, with a hospital attached, but they seem to be more worried about "quackery" than about the type of College they are visualising.

Sri M. Patanjali Sastri, the former Chief Justice of India, presiding over the 21st anniversary of the Madras Presidency Homoeopathic Association said that it was unfortunate that still the public had prejudice against the system, which was due to the fact that a large number of people with little or no training had come into the field and spoiled the fair name of the system.

We believe that the time is long past when we should bemoan our fate, that, when properly trained Homoeopaths are available in enough numbers to satisfy the needs of the public, then is the time to control the practice of Homoeopathy and put down what is called "quackery", and that the immediate need of the hour is the opening of as many first rate Homoeopathic Medical Colleges and Hospitals as the State can afford. We believe that this can be done only under the Government auspices and that donations of the type envisaged in the Association's appeal cannot take us very far. Nor should we be satisfied with a Homoeopathic College of the sort that failed so disastrously a few years ago in spite of the best intentions and enthusiastic support of the late-lamented Justice Somayya. If donations could build up an efficient college, we want donors of the order of Rs. 20 and Rs. 30 lakhs. As such, it is futile talking in terms of donations of hundreds of rupees that may with great effort accumulate to one or two lakhs!

We have the greatest respect for the eminent men in charge of the Madras Presidency Homoeopathic Association and for the work they are doing. But, frankly, we believe they are unnecessarily stunting their vision when they speak of "at least help the Association to restart the old College".

These half-hearted measures will not in any way help to improve the status of this system of medicine or its usefulness as will be only too evident, if we notice that in spite of similar work being done for the last few decades by the two Homoeopathic Colleges in Calcutta, the best of their kind in India, we have only advanced this far.

We must aim high and ask for very much higher things and the Association is not helping the cause of Homoeopathy by thus cramping their style.

NO DRUG PROVING CENTRE EVEN IN THIRD PLAN

In our October editorial we wrote that we hoped to take up again the question of a Drug Proving Centre with the Ministry of Health, New Delhi.

It will be remembered that before we mooted this question, we had already contacted Sri Swami Sivananda Maharaj of Rishikesh and obtained his blessings and consent to form a nucleus of a Drug Proving Centre at Rishikesh. We did this in the firm conviction that the chief impediment to establish such a Centre was the difficulty of finding the correct type of men to act as provers and that once we were sure that the ideal material was readily available in this respect, it would be criminal folly, if we did not take further steps to establish a Centre soon.

While colleges and clinics can at a pinch be established and run by private enterprise, a Drug Research Centre can by its very nature be only established and managed by the Government.

It will also be remembered that replying to our previous reference, the Ministry of Health at the Centre said that "the Government of India regret their inability to establish a Homoeopathic Drug Research Centre as no funds have been provided for the purpose in the Second Five Year Plan."

In September we took this matter up again with the Ministry of Health, New Delhi, and pointed out that, as the preliminaries for the 3rd Five-Year Plan were already under consideration by the Planning Commission, this proposal may be forwarded to the Homoeopathic Consultative Committee of the Ministry of Health for their detailed study and that on receipt of their report, a recommendation may be made to the Planning Commission to provide requisite funds in the Third Five Year Plan.

One should think that this was a modest enough request considering that propagation of Homoeopathy was the approved

IMPORTANT ANNOUNCEMENT

CHANGE IN THE RATES FOR BIO-CHEMIC MEDICINES

Due to Import control restrictions imposed by the Central Government, the price of Sugar of Milk which is the basic ingredient used in the manufacture of Bio-chemic medicines is now nearly double that of its previous price. As such, it has now become necessary to slightly increase the rates for Bio-chemic medicines also. As these preparations are being manufactured by us in our own Laboratory, we have been all along selling them at a lesser rate than those fixed by other Homœopathic Pharmaceutical Firms. Even now, while revising the rates, we have calculated and fixed the new rates as low as possible.

Now Bio-chemic tablets are being manufactured by our Laboratory in 2 different sizes to suit the convenience of Homœopathic Physicians, that is, the usual 1 gr. small tablets and 3 grain flat size tablets. The dosage for the former is as usual, that is, 3 tablets per dose for adults and that for the latter is 1 tablet per dose. We have also reduced the rates for 3 grain flat tablets compared to those for 1 grain tablets.

Our clients are requested to specify in their orders the exact size of Bio-chemic tablets required by them. If the size of the tablets required is not given we will send the usual 1 grain tablets.

New Revised Rates that are in force with effect from 1-11-1958

RATES FOR 1 GR. SMALL SIZE TABLETS

Potency	2 drms.	$\frac{1}{2}$ Oz.	1 Oz.	2 Oz.	4 Oz.	8 Oz.	1 lb.
3x, 6x, 12x, 30x	0-40	0-60	1-00	1-50	2-50	4-00	7-00
200x	0-50	0-75	1-25	2-00	3-25	5-50	9-00

RATES FOR 3 GR. BIG SIZE TABLETS & TRITURATIONS

Potency	2 drms.	$\frac{1}{2}$ Oz.	1 Oz.	2 Oz.	4 Oz.	8 Oz.	1 lb.
3x, 6x, 12x, 30x	0-35	0-50	0-90	1-40	2-25	3-75	6-50
200x	0-40	0-70	1-10	1-50	2-75	5-00	8-00

Bio-Chemic tablets are not sold less than 2 drams, which is the minimum packing. Orders for half and one pounds can be given either by weight, packed in card-board packing or by volume packed in bottles. The usual discounts as per our terms will be allowed on the above rates.

These revised rates will come into force at our Madras Branch also simultaneously.

DIRECTOR, (SALES DEPARTMENT)
INDIAN INSTITUTE OF HOMOEOPATHS.

policy of the Government and that it was conceded by everybody that both by its efficacy and cheapness, Homœopathy offered the best solution for the expansion of medical services in the rural areas.

We were, therefore, shocked today to receive the Central Ministry of Health's reply "that the Government of India regret their inability to consider the request of the Institution for including the establishment of an All-India Homœopathic Drug Research Laboratory in the programme for the Third Plan at this stage."

We can only say, we are sorry. It is bad luck for Homœopathy and Homœopaths that within the plannable future, the Government is not prepared to establish a Drug Proving Centre for Homœopathy.

We repeat, what we have said on another occasion in respect of Ayurveda, that the half-hearted implementation of declared policies can only cause disappointment, embarrassment and failure to those directly affected and distrust in the intentions of the Government and in their ability to successfully carry out what they set out to do.

In spite of all that they say, we are inclined to believe that the Government have not shaken off the hypnotic thralldom in which they are held by the All-India Medical Council and that they are at present only prepared to offer step-motherly treatment to Ayurveda, Unani and Homœopathy.

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Myristica Sebifera is a remedy of great antiseptic powers and one of the most efficacious remedies for ulcerative and suppurative conditions in every tissue, especially in cellular tissue and periosteum. It hastens the process of suppuration and shortens the period. The pain during the inflammatory and suppurative stage is removed within 24 to 48 hours.

I have successfully used it in traumatic infections, parotid abscess, fistula-in-ano, panaritium, carbuncles, septicaemia, felon, paronychia, boils caused by streptococcus infections, peritonsillar abscess, septic tonsillitis, scrophulous glands, phlegmasia cellularis, cellulitis, filarial abscess, furuncles, poisonous ulcers, osteitis, periosteitis, ulcerous dermatitis, otitis media and perityphlitis.

In cases of whitlow and panaritium, where lancinating and throbbing pains are present, it acts miraculously when compared with penicillin and orthodox surgical operations. If surgical treatment is applied, the affected finger is spoiled and gets irreparably damaged for a lifetime. But under *Myristica* one would never meet that fate. For an external application in whitlow panaritium and abscess hot *Calendula* compresses, antiphlogistine and linseed poultices are very useful.

Myristica matures abscesses, hastens suppuration and shortens its duration and builds an outlet for the drainage. It has acted very well even in such cases where penicillin did not help at all. After drainage is established, there come in *Hepar* and *Silicea* to hasten the process of healing. *Hepar sulph.* is required in cases where pus is thick, yellow and the patient is very sensitive and the touch of wound excites the pain. *Silicea* is applicable in cases where the patient is chilly and the discharge is thin and white. Both *Hepar sulph.* and *Silicea* are to be given in 200c dilution. *Myristica* acts well in D3 (3x) and D6 (6x), given every 4 hours.

Clinical Cases

C. P., a station master. *Fistula-in-ano*. Seven outlets. Profuse drainage of thin watery pus, extremely weak. *Silicea* 30c did not help. *Myristica* D6 completely cured in a month and the patient is hale and hearty for the last eight years.

S. B., a photographer, suffered from *Panaritium* in the right index finger; extreme burning pain, could not sleep for three nights, extremely restless. *Myristica* 3x was given every three hours; pain completely disappeared in 24 hours. Had a very sound sleep. It burst on the third day and was completely cured in a week.

M. M., a cabman, was suffering from a *carbuncle* in the dorsal region. Excessive burning, lancinating pain; sleepless. *Myristica* 3x was administered every four hours. The pain disappeared in 48 hours. Externally antiphlogistine was applied. After being drained off, *Silicea* 200. was given and the patient was completely cured in three weeks.

H. M., a lawyer, was suffering from *Filariasis* of the right leg. Had occasional attacks. Last attack in August 1956.

Hetrazam was given. Remained under allopathic treatment for three weeks. *Penicillin* and *Combiotic* injections were administered but the result was an abscess. There was extreme pain, burning and lancinating in nature, and a great doughy swelling. *Myristica* 3x was given with the result that pain completely disappeared in 48 hours and the abscess burst, draining off the pus. Swelling was reduced in two weeks; completely cured in three weeks.

Mrs. K. N. had an abscess over her right eye. It was so big that the whole eye was covered and she could not open it; reflex swelling on the right side of the face. Again pain was so acute that the patient was extremely restless. *Penicillin* 20 lacs unit was given with no response. Again, in this case, *Myristica* 3x was given every four hours. The pain was completely removed in 24 hours. The abscess burst on the third day and the pus was completely drained off in a day. After that *Hepar sulph.* 200. was administered and she got well in a week.

—The Homœopathic Recorder

THE PLACEBO

By TREVOR KNIGHT

The adage that a little knowledge is dangerous works most "dangerously" in the field of medicine. Paradoxically enough, the reason for this lies in the increase of medical knowledge among the general public.

Because most patients today have some small knowledge of the symptoms, cures and causes of their illnesses and diseases, they tend to be somewhat critical of medical advice and to then make suggestions to their doctors about new cures, techniques and drugs they have read about.

The upshot of this is that many doctors are finding it increasingly more difficult to prescribe what they call a placebo. A placebo is, of course, not a medicine in the usual sense of the word, but something that is prescribed only for its psychological effect.

Only Coloured Water

In itself, it may be little else than coloured water or a tablet compounded of sugar—substances that are not likely to inspire much confidence in a patient if he were told. And, with so many patients wanting to know just what sort of drug is being administered to them the plight of the doctor becomes evident.

It should be understood the doctor is not being a "quack" or a charlatan in prescribing a placebo. He prescribes it for a very good psychological reason, namely, that the patient believes that it will do him good.

And this, very often, is all the patient needs to make him better!

If such psychological treatment makes the patient better, there seems little sense in prescribing any of the more expensive so-called "miracle" drugs, which are so often asked for.

Most doctors have a host of stories about the efficacy of placebos, and many of these tell of patients who travel hundreds

of miles to get a special medicine which is apparently exclusive only to a particular hospital or clinic.

The truth of the matter is that the particular medicine is usually little more than coloured water. But the patients swear by it—and, more important, it makes them feel better!

It is really a matter of faith. The patient has faith in a certain medicine, and this is often more than enough to make him well.

Indiscriminate Use

This is not to say that doctors frown upon the new wonder drugs. They are most grateful for the sulpha drugs, penicillin, the anti-histamines, etc., but such-like drugs, they feel, are used rather indiscriminately—and sometimes at the request of the patient.

Most family doctors know that for the large majority of sick people all that is needed is a medicine, and that it matters little what it is.

As long as the patient believes that he has been given something to make him better, he gets better.

Large hospitals used to use the same technique. They don't today because they have become rather impersonal—almost too scientific.

In the same way, the family doctor is on the wane. Specialists are called in often for trivial reasons because patients today (with their "little dangerous knowledge") believe that they need expert advice which their family doctor is not qualified to give.

This all leads up to what some doctors now call the "placebo bar"—an iron curtain against the use of the simple, old remedies that were concoctions of "water and faith."

Harmless Tablet

Yet, on the other hand, all medical researches make extensive use of placebos—in fact, the development of most of the wonder drugs would have been made far more difficult (insofar as obtaining clinical results are concerned) without the use of placebos.

If researches want to test a new drug, it is given to only half the patients on whom they are experimenting. The other half get a harmless tablet—looking exactly the same as the real one but made up of milk, sugar or something like that.

Not even the doctors in charge of the experiment know which patients have received the real drug and which the harmless substitute. Only the medical statisticians know this.

The purpose of this apparent nonsense is to eliminate the psychological effects of actual medicine taking which may be doing the work of the new drug.

The results are interesting in that many of the patients who are given the placebo recover as fast as those who have been given the new drug! What better proof could there be for the efficacy of placebos?

In U. K.

In Britain, where the impersonal Health Service has almost taken over from the family doctor, the placebo has met with a formidable enemy in the red tape of bureaucracy.

Any modern drug can be obtained free on the Health Service in Britain. All the doctor has to do is to prescribe it. But just let him try to prescribe a placebo. He can't for the simple reason that placebos are not included in the National Formulary of medicines and drugs.

This hamstring doctors, and seeing that they are unable to prescribe a placebo they have to resort to using expensive drugs—often when these are not at all necessary.

As a result of this, the national health bill in that country continues to climb. Millions of pounds could be saved by prescribing placebos—and the nation's health would be no better or no worse.

The "placebo bar" is one of the strangest facets in the progress of medicine, and for the simple reason that the people who drew up the National Formulary probably felt that their professional integrity would be questioned if they allowed placebos to be prescribed, because, after all, the prescribing of a placebo is a deception.

— *Sunday Standard*.

NEWS AND NOTES

HOMOEOPATHY IN MADRAS STATE: The Madras Government are examining the question of according recognition to Homoeopathy in this State.

Giving the information to the Press, Mr. M. A. Manickavelu, Health Minister, said Homoeopathic medicines were cheap and harmless. In view of the need to satisfy the medical needs of the vast rural population of the country, Homoeopathy could be encouraged. In the nature of things, it was not quite easy to extend all the modern medicine facilities to the entire population, and they had necessarily to develop and encourage indigenous systems of medicines the Minister remarked.

Asked whether Government would start a Homoeopathic College, the Health Minister said that, if any private association interested in the propagation of Homoeopathy came forward with a proposal to start a college, Government would try to help it.

Matters like registration of Homoeopathic practitioners were details which had to be gone into at a later stage, Mr. Manickavelu added.

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Mr. M. PATANJALI SASTRI, M. L. C., ON HOMOEOPATHY: Mr. M. Patanjali Sastri, M. L. C., former Chief Justice of India has urged the Madras Government to fall in line with the other States and recognise Homoeopathy.

Presiding over the 21st anniversary of the Madras Presidency Homoeopathic Association on Sunday, Mr. Patanjali Sastri said the system was fast becoming popular and early legislation should be enacted setting up a Board of Homoeopathic Medicine to be in charge of training and registration of Homoeopathic practitioners and to establish a College for Homoeopathy, with a hospital attached to eliminate quackery.

He said it was unfortunate that still they had prejudice against the system, which was due to the fact that a large number of people with little or no training had come into the field and

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spoiled the fair name of the system. This could be eliminated only by institutional training.

He hoped that the Madras Government would soon recognise the system and start a college or at least help the Association to restart the old college with the degree and diploma courses. The trained practitioners might be able to settle in rural areas and afford medical relief. He also appealed for donations to the Association.

—THE MAIL

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KERALA AYURVEDA STUDENTS: The students of the Ayurvedic College, Trivandrum, demand that they should be allowed to practise both Ayurveda and Allopathy at the successful completion of their course.

It will be remembered that a bill to amend the old Travancore-Cochin Medical Practitioner's Act was passed in the Kerala Assembly some time back and sent to the Centre. Under this amendment the successful students of the Ayurvedic College were to be allowed to practise allopathy.

The Centre referred the matter to the All-India Medical Council, who, after a local inspection by their own commission appointed for the purpose, have naturally reported that the training in Allopathy is sub-standard and so, these students should not be allowed to practise Allopathy.

Out of all this fiasco, the All-India Medical Council alone comes out with flying colours. We can well imagine the Council laughing within their sleeves at the plight of those students and the embarrassment of the Government.

Our entire sympathies are with the students who started their education in Ayurveda with high hopes that a nationalist Government in full power and wedded to the policy of promoting indigenous medicine, would render them all help. The halfhearted and fumbling methods of Government bring disillusion to them. Not having standardised Ayurvedic medicines and preparations and not being able to obtain them readily at their locations of practice, just to earn their living, they are forced to practise Allopathy, whose patent products are so widely and efficiently distributed that they can be obtained from the nearest drug store in any part of the country.

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The remedy is not merely to allow such students to practise Allopathy and be damned, but to vigorously promote the mass production and distribution of standardised Ayurvedic remedies.

What is now happening to Ayurveda may also easily happen to Homoeopathy, if we encourage the opening of sub-standard teaching institutions who cannot adequately provide for thorough clinical experience for their alumni. Already there are complaints that some Homoeopaths do resort to Allopathic medication and injections. The moral for the Madras Presidency Homoeopathic Association should be obvious.

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NEW WAY TO LOSE FAT: If you want to lose those ugly bulges round your waistline Professor John Yudkin, of London University, knows how you can do it.

But he says: "I'm afraid it takes more will-power than most women possess."

What's his solution? The idea's simple. Stop eating all foods containing sugar. But it's a taller order than it sounds.

For, Professor Yudkin told a meeting of the Good House-keeping Institute recently: "we're eating more sugar now each month than our ancestors 200 years ago ate in two years."

And he believes it isn't improving the country's health.

Cut out every food containing sugar and you'll be hungrier for meat and vegetables. But you can eat as much of those as you like and your intake of energy-giving carbohydrates will remain about the same, so you won't suffer from the diet.

HOUSEHOLD REMEDIES: Sri Jagannath, Chairman, Railway Service Commission, Churchgate, Bombay, writes:

Simple household remedies have survived and become popular after being tried for many centuries. They are cheap, but at the same time efficacious and also harmless. They were being passed on by word of mouth from generation to generation. But the present generation, unfortunately, is getting cut off from this tradition. There is the danger that, when the older people who still retain some acquaintance with these remedies pass away, this knowledge will also disappear with them. I request people

in all parts of the country, who may know of any simple household remedies, to communicate the same to me. Names of drugs may kindly be written in as many different languages as possible. I shall have all the information printed in book form, so that this precious knowledge may be preserved.

SIMPLE TREATMENT, PLENTY MEDICINE: "In the present socio-economic condition of the country we should have vast quantities of drugs which could be administered with simple methods of treatment," said Mrs. Padmaja Naidu, Governor of West Bengal, inaugurating the third convocation of the State Faculty of Medicine, West Bengal, in Calcutta recently.

She added that, in the final analysis the future of homoeopathy in the State must depend not on Government help but on the sincerity of homoeopathic advocates to evolve a uniform system of teaching and regulations for the registration of homoeopathic practitioners, as well as control and supervision of homoeopathic dispensaries to guard against impurity of drugs.

She advised the homoeopaths to go out to the rural areas instead of practising in the over-crowded cities.

Dr. S. N. Ghosh, in his convocation address said that they were trying their utmost in putting homoeopathy in its legitimate place. He regretted that it was an irony of fate that their system of treatment, though proved unmistakably efficacious in the treatment of diseases, though cheaper than any other system of treatment and thus suitable for the poverty stricken masses of our country, had always remained grossly neglected by the State Government. Training in it had been deplorably unorganized for lack of Government patronage, and a duly qualified physician received no official recognition. He regretted that, in spite of their repeated prayers, the State Government had turned down the proposal for legislative enactment.

—The Pharmacist.

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BEANS: One of the easiest to grow and possibly the cheapest of all vegetables, is the Indian Beans. There are innumerable varieties ranging from the popular French, Runner and Broad Beans, to the equally popular Valpadi, Gawar and Cholai Beans, etc.

All kinds of beans, especially, the Broad and Kidney varieties, are rich in protein and form an excellent vegetable substitute for meat. Analysis show, that half a cupful of Lima or Kidney beans, contain practically the same amount of protein, as a large helping of meat. Surely this is a gift of God to mankind, since both rich and poor alike can share the benefits of this health giving vegetable.

PATHOLOGIC PROCESS UNTOUCHED: It has been demonstrated in practice that the accurately prescribed remedy will relieve symptoms without influencing the underlying pathologic process. For example, in an attack of appendicitis *Belladonna*, *Bryonia* or *Rhus Tox*, may alleviate the pain, improve the general condition of the patient, while the involvement of the appendix will continue until it finally terminates in rupture. This has been witnessed a number of times. This relief of symptoms without the reversibility of the pathological condition is a very real pitfall. Do not discredit Homoeopathy attempting to cure or relieve a condition that is past the medical stage.

—Dr. Franklin H. Cookinham, M. D.

WELL DONE, THE BOMBAY UNREGISTERED HOMOEOPATHS, ASSOCIATION: The Association had addressed the Hon. Minister for Public Health, regarding the question of registration of Unregistered Homœopaths (all those who could not obtain their registration under the Bombay Homœopathic Act 1951) in the Bombay State. A reply has now been received that "the unified law is at present in the drafting stage and as soon as it is finalised it will be placed before the State Legislature." It is hoped, the reply continues, that after the law is enacted "your present difficulty would be removed".

THE KOLAR DISTRICT HOMOEOPATHIC ASSOCIATION (REGD.), K. G. F: The annual General Body Meeting of this Association was held at Robertsonpet on 23rd November, when Dr. D. Abdul Rashid, M. L. A., was elected President and Dr. T. S. S. Pillai, General Secretary.

Among the resolutions passed was one recommending to the Mysore Government that when the Homœopathic Practitioners' Registration Bill of 1958 became law the then practising Homœopathic practitioners in the State should be automatically registered with equal rights with other Registered Practitioners.

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