THE PROGRESS OF HOMŒOPATHY.

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THE progress of homœopathy in our State, as well as in the United States, has been rapid and unparalleled in the history of medicine, and there are now reported to be five thousand practitioners of homœopathy in the United States. This rapid progress might well be ascribed to the free institutions of this great republic, the Centennial of which is now being celebrated. A new school like ours, in order to secure a permanency as an established school of medicine, although much aided by our free institutions and untrammeled by oppressive laws, can only attain this by a *progress in the school itself.*

Hahnemann gave to the world his philosophy and method, through which might be obtained the true end and object of all medical treatment, viz., a prompt, mild and permanent mode of cure, in his classical work, *The Organon of the Healing Art.* This work should be carefully read by every person who wishes to ascertain the truth or fallacy of homœopathy, and should be well understood by the investigating student of medicine before proceeding further; by his study of Materia Medica he prepares himself to make the clinical experiment which alone can decide for him the question to which he desires a solution. If a person is *not* possessed of this previously acquired knowledge obtained by a diligent study of the *Organon,* and makes the practical experiment not in conformity with the indispensable knowledge derived from this study to guide him, a failure, either entirely, certainly partly, must and will ensue.

The earliest and later disciples of Hahnemann accepted first his philosophy and method; his principles and their practical applications coming to be accepted by the continuous good results following their application in therapeutics, which results practically proved the correctness of the master's teachings. With this acceptance of Hahnemann's teachings, his disciples were *not* committed to the assertion, with which they find themselves burdened, that they considered and accepted his *Organon* and later works as the Alpha and Omega of homœopathy, much less as the beginning and the end of all medical science. The *Organon* in fact only teaches the medical student how to utilize the previously acquired knowl-

edge of all and every branch of medical science; the *Organon* shows and clearly explains how much of the acquired medical knowledge of the various thinkers among the profession is real science and can be utilized, and how much of it is mock science, unfit for utilization. It clearly shows how the latter has been turned to a ridiculous purpose; how system after system, based on a fallacious hypothesis, has been established, to be in its turn rejected by the next generation and give place to another system based on fallacy. Almost all these periodically returning changes had their origin in a belief of medical men that they were able to discover the *prima causa morbi*, and against this hypothetical material cause were their hypothetical therapeutics directed. The fundamental error then of all medical systems was to be found in their "*materialism*," in their belief that disease was a tangible and comprehensible thing, and as such had to be eradicated from its hiding place in the organism. They boasted, each in turn, as they changed the "*system*," that they sought out and removed the morbid cause, and followed the traces of nature herself in the treatment of disease. Hahnemann expressed himself repeatedly on that subject, but never treated it in a more condensed and, to our present purposes, for illustration, more adapted form than we find in his introduction to the *Organon*, where he says: "*They talked* of being able to discover the cause of disease, without succeeding in their pretended attempts, for by far the greater number of diseases being of dynamic origin, as well as of a dynamic nature, and their cause, therefore, not perceptible to the senses, they were reduced to the necessity of inventing one. By comparing, on the one hand, the normal state of the parts of the dead human body (anatomy), with the visible changes which these parts had undergone, in subjects which had died of disease (pathological anatomy), and, on the other, the functions of the living body (physiology), with the endless aberrations to which they are subject in the various stages of disease (semeiotics, pathology), and drawing from thence conclusions relative to the invisible manner the changes are brought about in the *interior* of man when in a diseased state, they succeeded in forming an obscure and imaginary picture, which theoretic medicine regarded as the *prima causa morbi*, which afterwards became the proximate *cause*, and, at the same time, the *immediate essence of the disease*, and even the *disease itself*, although common sense tells us that the cause of anything can never

bé, at the same time, both the cause and the thing itself. How was it then possible, without deceiving themselves, to pretend to cure this yet undiscovered internal cause, or venture to prescribe for it medicines whose curative tendency was equally, for the most part, unknown to them, and more especially to mix up several of those unknown substances in what are termed prescriptions?"

There are to-day self-appointed champions of progressive homœopathy who accept Hahnemann's teachings above referred to, but who claim that, since Hahnemann made these declarations, our brethren of the old school have been most diligent in the pursuit of medical science, and that we may most profitably ask what relations the departments to which they have especially devoted themselves now hold to the science which alone distinguishes us from them,—therapeutics? The answer of some men is, pathology, which hardly existed as a positive science in Hahnemann's days, and has been diligently elaborated by ingenious and exact experimentations until to-day it holds no mean rank among the positive sciences of observation. Must we denounce it as Hahnemann did the pathology of his day? Can we not use it?

There then arise momentous questions concerning the progress of homœopathy. If we believe that in Hahnemann's days pathology hardly existed as a positive science, but has since then taken the rank of a positive science of observation, we may well come to the conclusion that if our science of therapeutics be not capable of adapting itself to, of dovetailing with, or making subservient to its uses any exact related physical science, then this fact should amount to a condemnation of our therapeutics. If it were so, then our therapeutics, established while pathology is said to have hardly existed as a positive science of observation, could never have been successful, could never have been accepted, and would have proved to be unreliable on account of a want of success in its practical application for the cure of the sick. History contradicts all the above assertions, contradicts the premises, and with them destroys the argument and deductions. Professor Schoenlein fully demonstrated the possibility of elevating pathology to a positive science of observation, and a *second* edition of his lectures was published in 1832.

Hahnemann published the last (fifth) edition of his *Organon* in 1833, one year later than Schoenlein's second edi-

tion of his *Lectures on Pathology*. Hahnemann must, therefore, have been fully conversant with the great progress Schoenlein had made in elevating pathology to a science of observation. Have the diligent, elaborate, ingenious and exact experiments so changed pathology since the days of Schoenlein and Hahnemann that we must consider Hahnemann's denunciations of pathology as unjust, uncalled for and not applicable to the present state of affairs? Can we use it? The situation has not changed at all. Hahnemann himself made use of pathology and pathological names, but he strenuously objected to construct by its aid a theory of the essential nature of the disease. The use Hahnemann made of pathology and pathological names is very clearly illustrated in his preface to Aconite in his *Materia Medica Pura*. Hahnemann first enumerates various diseases by their pathological names and says they are often curable by Aconite, but he very cautiously adds, "that Aconite will be especially indicated when there are found, besides thirst and a quick pulse, an anxious restlessness, an inconsolable anxiety and an agonizing restlessness." Pathology failed (like all other branches of medical sciences, physiology included) to show the cause of the above-described mental condition indicating Aconite, and failed to show cause why two individuals, suffering from the same disease, had different, nay, often opposite, mental symptoms, and fails to this day to show cause why, *as we well know*. Aconite will promptly cure a disease when these symptoms are present, and will be worse than useless if it is administered for the cure of the disease when these characteristic symptoms are absent. It becomes thereby evident that we never did, never can, adapt ourselves to or dovetail with or make subservient to its uses, pathology as an exact science of observation. Since the days of Schoenlein and Hahnemann, the one systematizing pathology, the other teaching the therapeutics of the healing art, various changes have occurred. We find Prof. Bock and his co-laborers collect the results of their researches in pathological anatomy. They were laborious, painstaking, scientific men, and we, as students of medicine as a science, must honor them, and as true healers we will forever be compelled to acknowledge our regret at not being able to make the slightest use of their researches any more now than Hahnemann did when he wrote the preface to his last edition of his *Organon*, in 1833. They then and later showed to us the destruction, changes and alterations in organs and tissues produced by dis-

case causing death, but all this never did, never can, show us the causes of diseases, or the disease itself, or even the presumable condition existing at the beginning of the disease. We cannot, therefore, no more than in 1833, adapt our therapeutics to this branch of medical research. The therapeutics of the common school of medicine was no more benefited by all this newly accumulating knowledge than was ours, and the common school of medicine, once more disappointed, turned to physiology to explain first the phenomena of the healthy functions. When these were disturbed and disease followed, they imagined themselves to be able to discern to a positive certainty the changes and alterations caused in the various organs and tissues physiology sickened. They further considered themselves able to find the very seat of the disease, its causes and effects, and the very nature (material) of the disease, its causes and effects. Our science of therapeutics is not capable of adapting itself to or dovetailing with or making subservient to its uses, the knowledge acquired by the physiological school. Thankful as we are as students of the medical science for the results of the labors of these scientific men, we *as* students of medicine accept them and profit by the acquisition of knowledge. As healers, however, we shall be forever compelled to exclude them from our therapeutics proper, for as healers we cannot consistently or profitably utilize them. This question, once agitated, now comes to a close settlement, and I do not know that I can better illustrate our true position as homœopathicians, as true healers, than by quoting from Dr. Carroll Dunham's address delivered before the World's Homœopathic Convention, June 26th, 1876.

Dr. C. Dunham says: "If diverting pathology from its legitimate function, the homœopathist constructs by its aid a theory of the essential nature of the disease, and a theory of the essential nature of drug-effects, as that the one or the other depend on a plus or minus of some blood constituent, or on such or such a cell-change, or on such or such structural lesion, and if he draws his indications for treatment from such theory, he introduces into his therapeutics the same element of *hypothesis* against which Hahnemann protested, and in so doing he diverges from homœopathy towards the blind uncertainty of the older therapeutics. Moreover, however well grounded his hypothesis may be, if he prescribes on the basis of a pathological induction, or when he elects to regard

one pathological modification of function or tissue as comprising the sum and substance of each and every case in which it is recognized, he prescribes for a *class*, and is unable to observe that strict individualization which is essential to a sound homœopathic prescription. This must always be the case. It is especially true in the present imperfect state of pathology, which has no way of accounting for the fine subjective symptoms that are so valuable to the individualizer."

The position taken by Dr. Carroll Dunham on this subject is clearly expressed, and his argument is as convincing as it is unanswerable. It will be accepted as settling the mooted question of making *our* therapeutics subservient to physiology and pathology, and by so doing we enter into a new progress in homœopathy. These so clearly expressed views are easy of *illustration*. The semblances of differences in the symptomatology, say of pleurisy and pleurodynia, are well known to the pathologist, and are known to a considerable degree of certainty. The homœopathician finds one or the other of these diseases present, but the symptoms showing the presence of one or the other of these similar diseases do not, cannot constitute the totality of symptoms he seeks for. The symptoms so found only demonstrate to the healer the presence of a well-known pathological condition, or in other words, give him a picture of "sick physiology," and that is all; is he then to prescribe for that sick physiology? Surely a few more subjective symptoms not necessarily belonging to the pathology of the case but to the sick individual will be of more use to the healer than all the physiology and pathology of the case. Physiology, pathology and nosology taught the *diagnosis* of sick physiology, but as above stated by Dr. C. Dunham, the *diagnosis* of the remedy (our therapeutics) cannot rest on the diagnosis of the disease; the healer, true to the teachings of our school, will soon observe these valuable subjective symptoms belonging to the patient, but not necessarily to the form of the disease he is afflicted with; and the more knowledge the healer has of pathology the better will he be able to discern these very characteristic and valuable symptoms essentially belonging to the individual and not to the sick physiology; *therefore* the best pathologist will make the best healer. Guided by these subjective symptoms, he will be able to diagnosticate the truly curative (homœopathic) remedy. The physician (healer) who *solely* relies on pathology in order to find the totality of symptoms diverts pathology from its legitimate functions; he con-

structs by its aid a theory of the essential nature of the disease, and a theory of the essential nature of drug-effects; he prescribes for a *class*, ceases to be an individualizer, and does not make a sound homœopathic prescription, and necessarily meets with no good success.

We as a school accept Hahnemann's teachings, and know full well that he has only laid the corner-stone to a structure to be built by future generations. It is for us then to consider in what manner all of us collectively and each of us individually must proceed in the building of this structure, and how we may aid in the further development of homœopathy. The structure must participate in the characteristics of the foundation, and we find that this foundation is composed of, 1. Law of the similars. 2. The principle that the totality of symptoms observed on the sick constitute the disease, and the totality of symptoms obtained by provers (of one medicine at a time) constitute our knowledge of Materia Medica. 3. The application of the single remedy in a dose sufficient to cure (minimum dose) constitutes our therapeutics. And in this manner has homœopathy been progressively developed. After accepting the law of the similars new remedies have been proved and our Materia Medica has been steadily augmented. By this accumulated knowledge we are to-day much better prepared to combat disease than we were in our earlier days; we are now able to heal the sick in a shorter time and with less medicine than we were before this accumulating knowledge of drug-action was obtained by persistent new provings, in which manner our Materia Medica was continuously developed. And last but not least, have we been going on in learning that potentization can be carried much further than we formerly conceived the possibility of, and we have not yet found any potency so highly potentized as to become inert; to the contrary, the best observers *unanimously* state it as their experience that by continued potentization the medicines become more powerful in their action, and that the highest potencies possess proportionately greater curative powers, and are therefore preferable to the lower less powerful potencies.

Not only has our own school developed the healing art in this manner, but we see the whole line of *medical* THINKERS move forward in like manner. The *progressive* men in the old school abandon the idea of "disease" as a palpable thing, and teach "individualization;" again they make an effort, as

yet very clumsy, to prove drugs on man and beast, but even the clumsy results of their so-called physiological drug provings can be utilized by us. It is a grand move forward, a great step by which before long the great prevailing differences between the schools will be obliterated, they fully accepting Hahnemann's teachings without compromise or possible modification.

And as by present appearances the united movement of all progressive medical men is in support of the fundamental teachings of Hahnemann, and calculated to develop a further progress in homœopathy, it behooves us to exercise towards all that charity which blended by justice does not admit the indorsement, shielding or excusing of fundamental errors; while it also encourages us to labor persistently for what we believe to be right, and submit patiently till the right can be realized.

REFLEX SYMPTOMS OF UTERINE AFFECTIONS.

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THE reflex symptoms of uterine affections are such as arise from an irritation of the terminal filaments of the uterine nerves, which, instead of travelling directly to the sensorium, becomes reflected or transferred from nerve-centres or ganglia to some other locality, where it becomes manifest through reflex, motor, trophic or sensory impressions. The number and intensity of these symptoms depends upon the degree or amount of uterine irritation, and especially upon the *responsiveness* or *irritability* of the nerve-centres or ganglia from whence the reflex impulses are propagated.

We know that the pupil of the eye contracts in proportion to the volume or intensity of the light impinging upon the retina, and that by increasing the irritation of the retina, by increasing the volume of light, we may add to the reflex contraction of the pupil *other* reflex symptoms, such as spasmodic contraction of the orbicularis palpebræ, etc., and, if from any cause the irritability or responsiveness of the optic nerve-centre within the brain is augmented, a *small* amount of light, impinging upon the retina, will produce all the reflex symptoms that arose from a large volume in a healthy condition of the nerve-centre. In the same manner increased responsive-