THE PROVING OF DRUGS.

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Ever since mankind was afflicted by diseases, drugs have been employed to cure them; and as various as were the different opinions of the nature and history of diseases were also the opinions of the knowledge of drugs and drug-action. The father of the healing-art, Hippocrates, obtained most of his knowledge of drugs from the popular practice; he applied for the cure of the sick only simple, unmixed and single remedies. Dioscorides in his writings deviated already from the early simplicity, and always compounded several remedies in one prescription; as a consequence the knowledge of drug-action became less and less, and uncertainty increased with the use of a multiplicity of mixed drugs. In the early history of medicine, we find that the similarity of certain plants with certain parts of the human organism was a sufficient reason to ascribe to such plants a specific effect on such similar parts of the human organism. This was one of the sources of the Materia Medica, and on it was based the doctrine of the "*signatura medicamentorum*," the first and crudest conception of the law of cure as accepted by us. The smell and taste of drugs were thought to be indications of the manner in which they would affect the organism. Later, whole botanical classes of plants were supposed to have a specific effect, because one plant belonging to that class was thought to exercise a certain specific effect on the diseased organism.

Others flattered themselves with the hope of obtaining a knowledge of the dynamic effect of drugs by means of chemical analysis. The greatest source from which all knowledge came, and from which the Materia Medica was composed, was the clinical experience—that is, the application of drugs

to the sick, "*cognitio medicamentorum ex usu in morbis.*" The crude provings of drugs on animals, by Orfila and his contemporaries, revealed nothing really useful; for no analogy could be drawn from the action of drugs on the lower animal sphere as to the mode in which the same drug would affect the higher human organization. And even in our days some learned physicians vainly suppose the Materia Medica may be much improved, and a more perfect insight into the action of drugs obtained, by analyzing not only the drugs themselves, but also all and every secretion from the human organism following their administration: but nothing can be learned of the healing property of the drug, or of the essential nature of the disease, by subjecting all the secretions of the prover or of the patient to chemical tests. With Hahnemann dawned a new era for the medical art; he was the first who ascertained with certainty what effect drugs had on the human organism; the first physician who proved drugs on the healthy, and thereby established a full knowledge of drug-action.

The knowledge of drug-action on the human organism enabled Hahnemann to demonstrate practically the correctness of the law of cure on which the new system of medical practice was based; and in proportion as the new Materia Medica grew larger and more perfect, were he and his followers better prepared to give practical proofs of the superiority of Homœopathy over all former modes of treatment. Following in the footsteps of the Master, his disciples continued to prove drugs; some introduced by Hahnemann were subjected to re-provings tending only to confirm the great accuracy of his observations; new drugs were proved, and thereby our Materia Medica became much enlarged, much more useful, and the cure of many diseased conditions, formerly considered hopelessly incurable, was greatly facilitated. Every prover formed for himself some rules which governed him in conducting his inquiry into drug-action. These rules were the results of observations on himself and on others. Although I have made a comparatively limited amount of

observations, from which I am enabled to draw conclusions and form rules to be observed by a prover, I may, nevertheless, be allowed to offer some suggestions on the most feasible plan of proving drugs and some rules to be adopted by provers. The first and very important point is the drug itself. If we desire a correct proving of a drug, it is positively necessary that all the provers should test the same drug—precisely the same substance, whatever it may be.

Chemical preparations made by different persons may slightly differ, as every chemist may obtain the substance in a different manner and with different degrees of purity; such was the case with Niccolum. When provings were made of Kobaltum, it appeared by the symptoms obtained that some of them had a great similarity with those obtained by the first provers of Niccolum—that preparation, no doubt, containing Kobalt, the chemist not then having been able to separate these two metals fully; a new Niccolum proving became a necessity. Animal poisons are still apt to be much more at variance if obtained by different persons, at different places and in different seasons, and many mistakes must follow such provings. Plants differ very much in various localities and at various seasons; even the time of the day on which they are taken for preparation may make a great difference; and Paracelsus, long ago, attached great importance to the time of collecting plants for medicinal preparations.

It is very desirable that the provings should be made by as many persons as possible; that they should be of different ages, and of both sexes, of different temperaments, occupations and stations in life. It does not, nevertheless, follow that a proving made by one or two provers should be rejected on that account, since we have obtained very valuable provings made by one or two persons only: I will but mention here the very valuable urinary symptoms of Benzoic acid, of Dr. J. Jeanes; and the great addition to our Materia Medica, in later days, by Dr. R. Rubini, who with his wife alone proved Cactus grandiflorus. It would have been more

than unwise to reject either of those provings because not made by many persons.

Having the drug and the willing prover, the next question arises, what dose or doses should be taken to obtain the best results. The dose may be varied on account of the quality of the drug, or on account of the known susceptibility of the prover to similar substances, or to drug-action in general. As a general rule it will be found best to take but one single dose of the drug at a time. The effect of this single dose, however small or large it may be, will often develop itself almost instantaneously; as is the case with Glonoine, which will make its effects known, at the latest, in a few minutes. Other drugs are slow in developing their effects, as Causticum, Lycopodium, &c., and they may not be perceptibly felt before the third day. And where it is so slow in developing its effect, the drug-action will frequently continue for weeks; and even then the proving cannot be considered ended, as similar symptoms often reappear after fourteen or twenty-one days; or the symptoms, or group of very similar symptoms, will recur at certain intervals regularly; those intervals may be hours or days as the case may be. It would certainly interfere with the observations of the prover, if a second dose should be administered before the first had exhausted its effects. This one single dose should be just large enough to affect the prover; if too large, the proving will be of little practical use, as the system will at once endeavor to rid itself of an unwelcome intruder, and the revulsive symptoms so obtained will be of a low order and comparatively useless. If the one single dose produces no effect, it will not often be an indication that the dose was too small; in most instances a repetition of the same dose, or the administration of a larger one, will have no more effect than the first, and will show that the prover is not susceptible to the effects of that drug at that particular time. Under such circumstances it would be advisable to postpone the proving of the drug on that person to a future period. All the changed conditions and sensations produced by this one single dose should be

carefully written down as they occur, and not even such symptoms as at first appear trivial should be omitted; the prover should examine himself and such persons assisting him in his provings, by interrogatories, and in the same manner that he would examine a patient; Hahnemann's advice in his Organon, paragraphs LXXXIII to CIV, will guide him well in this respect. The record should be continued as long as any symptoms occur. If they have not been interrupted by an antidote on account of their severity, or by any other interference, the symptoms of drug-proving generally end similarly to other diseased conditions, in a kind of Crisis. The symptoms appearing latest are of great value; many provers have omitted them on account of their lateness, not believing them to be still the result of the drug-action; the mistake not being detected until, in the reports of other provers, corresponding symptoms to those omitted were found too late to put them on record from memory. The comparison of the records of different provers at once shows their correctness, as there always exists a harmonious similarity between good observations; the differences are often only complimentary symptoms observed by one, and not by the other provers. The diet should not be changed during a proving, as such a change alone is apt to cause a deviation from the habitual feelings and sensations. All excesses, or otherwise possibly interfering acts, or unaccustomed food, or unusual excitements, should be carefully avoided; and if such possibly counteracting influences have occurred, they should be carefully put on record. The first and sole object for which Hahnemann instituted these investigations (the proving of drugs) was to ascertain their action on the human organism. He obtained what he wanted, a diagnosis of the drug proved; and he further established the correctness of his observations, viz., the diagnosis of the drug, by using it as a curative agent, under the law of the similars. The speculative attempts to which medical men had resorted to obtain a "*Cognitio medicamentorum ex usu in morbis*" were failures; it was left to Hahne-

mann to teach the world, by precept and example, how the knowledge of drug-action could be ascertained, how drugs were to be proved, how a reliable Materia Medica was to be established. And as drug-action became a known fact, applicable to the cure of the sick under the law of the similars, an increasing knowledge of Materia Medica gave us an opportunity to diagnosticate the similar curative drug with increasing certainty in almost all diseased conditions.

In order to cure a patient it is not sufficient to know only the similar curative drug; another important question arises at once; how is the drug to be administered? Shall it be given in the crude state, or in a potency, or in what potency; shall it be but once administered, or oftener; how often, and at what intervals; or, is it right and advisable to give drugs mixed or in alternation? We require, then, practical rules to guide us further in practising Homœopathy. Hahnemann left us practical rules in his various writings, and holds out the promise of success, if they are strictly adhered to and carried out. Still the most implicit confidence in Hahnemann as an observer cannot induce every one to accept his practical rules "on authority." We can acknowledge in the science of medicine no other "authority" than natural laws; and only as far as he discovers these natural laws and proves their correctness, not by argument only, but by practical experiment also, can any one stand as an authority.

The "*cognitio medicamentorum*" (or knowledge of drug-action) does not include a knowledge of the "*usus medicamentorum*" (the practical rules according to which the similar drug should be applied). We have shown that the "*cognitio medicamentorum*" could not be obtained "*ex usu in morbis*,' but only by provings, by putting the question directly to nature. Shall we now fall back into the previous error, and expect to obtain a knowledge of the "*usus medicamentorum*" (or practical rules) by resorting to the "*usus in morbis*," the results of experiments on the sick? The very history of our school settles this question. Experiments on the sick

have been made, observations have been put on record, but the deductions drawn from such observations have resulted in conflicting practical rules laid down by various experimenters. And these widely-conflicting differences of opinion among the physicians of our school have their origin in the erroneous and fallacious manner in which observations have been made,—each claiming to have found a new practical rule; while many claim to have found Hahnemann's errors, and demand their rejection, among them his theory of potentization, which is pronounced a grave error. According to such persons, with the promulgation of this theory began "the great errors of this great man." Some claim that the mixing of medicines is a great improvement, or that medicines given in alternation will do wonders; all of them in common appeal to their experiments, to their facts, and assert that the deductions they draw from such facts establish the best practical rules. These differences of opinion are then the legitimate results of the experiment on the sick. Had the question been put right, could it have been possible to obtain such contradictory and conflicting answers? The error thus perpetrated becomes the more serious, since all these questions have in fact been already answered; these answers are before us, if we but wish to see them; the provings of drugs have revealed them long ago, and, at the same time, corroborated Hahnemann's theories and practical rules. And although Hahnemann did not tell us how he obtained some of the theories and practical rules which he left us, it is very evident that the drug-proving strongly suggested them to him, and that experience proved the correctness of the suggestions.

The theory of potentization, the great stumbling-block to the materialistic converts to our school, is shown to be correct by the proving of drugs; because:

1. Some drugs, in their crude state, exercise either very slight or no visible dynamic effects on the human organism, but act very efficiently when potentized; as Carbo veg., Lycopod., Nat. mur., Silicea, &c.

2. The provings of medicines made with higher potencies have elicited more characteristic symptoms than the lower potencies or the crude drugs were able to produce; as Nat. mur. 30, proved by the Vienna provers.

3. The highest potencies do not lose the power of causing sickness, or morbid symptoms; but provings instituted with them have confirmed former observations made by proving the drug in the crude state or in lower potencies, and brought out new series of symptoms in harmony with those known before. These new provings have also been confirmed by the test of clinical experiment, as the most excellent provings of Lachesis, Gelseminum, &c., by Dr. B. Fincke, will clearly show.*

And if these three propositions are correct, it follows that potentization does not diminish the dynamic power of drugs, and that potencies having the power to cause sickness must most assuredly have the power to restore to health, if applied under the Homœopathic law.

The advocates of alternation and mixing medicines will find but poor comfort in our drug-provings, certainly they cannot properly use means for the cure of the sick that have never been subjected to the test of proving; and as we possess no provings of alternate or mixed drugs, we must, as Homœopathists, discard their use till the first step has been taken in the proving of drugs in the same manner.

If the method of proving drugs by taking but one dose is found correct,—as it seems to be so far as my individual experience goes,—then, should we not infer from this fact that one dose of medicine at a time will be sufficient to do all which this Homœopathically-selected medicine can do in a given case? And if the analytic study of our drug-provings shows that one single dose of a drug can affect, has affected, the human organism for weeks and even longer, may we not

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* To reject, ignore or ridicule such provings, *a priori*, shows such an utter disregard for the manner in which scientific inquiries are made, that we feel ourselves compelled, *at least, to ignore such persons.*

infer from this fact again, that one single dose of a drug may affect the diseased condition of the organism for at least an equal length of time? And whoever will subject these deductions to the practical test, the clinical experiment, will find them confirmed.

The pathological wing of our school will also derive but poor comfort from the study of drug-provings. It will appear very evident:

1. That the same drug will affect different individuals similarly yet differently, this difference depending on the individuality of the prover.

2. That different drugs will affect the same prover in a similar and yet different manner; the similarity being caused by his individuality and predisposition for affections of certain organs, the difference being of course attributable to the difference of the drugs themselves.

The fact that morbid influences do cause corresponding similar yet different effects on different individualities will be a permanent bar to the fond hopes indulged in by the pathological school of presenting us with a description of the "unity of disease;" and so long as this unity of disease is not found, we need not dream of "specifics for specific diseases;" while the consequent expectation "to extend our usefulness" by generalizing will also be found to be a delusion, and we shall still have to individualize diligently.

Drug-provings have solved many questions, taught us "the knowledge of drug-action," and enabled us to find practical rules which unerringly guide us in the treatment of the sick. There are some questions still remaining open, unanswered, and among them the most vexed question is that of the "dose;" the experiment "*ab usu in morbis*" has failed to solve this one as well as the others, but this question, and all others that may arise, will, I hope, eventually find their solution in what I have endeavored to explain in this paper, "*The Proving of Drugs.*"

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