

SIGNS AND THE LAW

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In her own way nature asks plainly for what she wants, but her code is not printed in books. While the play of her forces may often seem subtle, she uses enough expressions to make herself clear and her moods perfect their meaning in our understanding.

We learn by resemblance and comparison, finding old friends in every crowd. The fellaheen of today looks like his brother in stone four thousand years old. Such is the elemental power that moulds us and at the same time invites our friendship. It paints the fear of death on the countenance as well as in our dreams and speaks to us in wind and weather, darkness and light, heat and cold, touch, thought and countless other ways. The ancients heard it, and interpreted it in fear but its message is one of guidance; when read through reason: The absurd things of today become fundamental tomorrow, because we have mastered their meaning. We neither despise small things nor magnify them overmuch, but learn their relationship to greater ones. Infinity is written larger in the heavens, but we learn of it through the microscope also and the uncharted fields of nature are boundless when compared with the recorded ones.

In a day when heterodoxy meant vastly more in medicine than in religion, Hahnemann, with a firm grasp of the knowledge of the past, ventured to open up a new path and show its relationship to life. Many of his professed followers do even now not see the marks which he blazed. The earlier homeopaths depended largely upon subjective manifestations, but even Hahnemann began to see their one-sidedness in his later days. Bönninghausen developed the objective and anamnestic phases very fully, but the time was not ripe for either to grasp the full meaning of their relationship to human development and the general harmony of life. The extension of the law, lies before, not behind us, and its fuller grasp has been left for our time. The law is all embracing, in that it is but part of the greater law of harmony, guiding us in everything.

Health is relative, and the subtle juncture of forces which breeds sickness is necessarily evanescent and intangible. Inheritances, surroundings, emotions, vital resistance and much else go to make it up. Gloomy days bring low spirits and relaxation, while a high electric tension gives us joy in living, dear thoughts and sudden sicknesses. The one is slow, the other intense and quick. It is well to know as much as may be of all its bearings in order to build up the reaction which we call life. If we believe-that life is born of action and reaction, then medicines cure like nature does, and all cures are but nature's ways expedited. But a real cure is this and much more. It means the transfer of energy from sound into sick parts; the conversion of energy. This explains many obscurities. It accounts for the rapid action of the similitum, whether in quick relief, euthanasia or aggravations which may even be fatal.

We draw upon the ebb and flow of life's forces and symptoms appear like the waves of the sea; now intense and mounting high, again dipping low but always undulating in ceaseless opposites. Life is perpetuating itself in the direction of least resistance, growing upon its surroundings, but carrying the impress of its experiences with it. These and the particular way in which it meets them we must learn and know in order to regulate the expenditure of energy, by applying synchronously acting remedies.

Symptoms tend to arrange themselves in groups; the earlier drug effects being coarser responses and the later, finer and more individualistic. Among many sick we generally fail to find the latter or grasp the state of the mind and soul that so faithfully mirrors the whole organism and holds up the true colours with which the minutia must blend harmoniously. Hospitals serve a good purpose, but they only throw the deep shadows of disease across our path and rarely admit of a dose individual study of the sick. Symptoms remain but fragments until we learn their bearings and see their reflection in the mind, where objective phases and

impulses stand uppermost; and as similar causes may excite any grade of reaction we must know the deciding value of individualities, which are always clearest in the mind. If they seem to spring from the mind itself and affect the understanding and memory especially, they are mostly of miasmatic or concomitant origin, and must be treated as such. The state of the emotions is of the most fundamental importance.

In the life history of every substance there is a mark which points towards its application. The doctrine of signatures is not all fancy even if correspondences have mostly been found in forms; a little understood subject. Striking things have their counterparts and their mutual connection is made clearer through symptomatology. While the indications include subjective, objective, anamnestic and environmental effects, drug symptoms are also made up of much more than has been recorded and we read much between the lines.

There is an art in matching the peculiarities of the patient with the singularities of drugs which demands a good knowledge of symptoms as well as disease, in order to avoid the dangers of generalisation as well as those of over individualisation. The one leads to the treatment of disease, en masse, and pathological views, the other to symptom covering; yet their connection must be understood.

The exciting causes of acute disease become of less importance as the sickness develops, being replaced by one of the miasma as a maintaining factor. Neglecting this fact yields recoveries but no cures.

Our students are seldom impressed with the comprehensiveness of the law, every teacher seeming bent on showing some special short cut and the result is poor work, although its principle is so fundamental that it helps even such dabblers to some measure of success; but in the main their practice is a miserable bungling, inconsistent with their profession.

Students select homoeopathic schools to learn the better way and they should not be disappointed. Therefore every teaching chair should be filled with enthusiastic men who lay special stress on a knowledge of the law and materia medica. It is the veriest nonsense to imagine that the materia medica can be taught by one or two men in a few years. The work of elucidating the generalities and modalities is alone more than enough for one, not to speak of the different regional effects, mental phenomena, etc. We will not advance until our teachers learn how to make the student see more of the patient and less of the disease; he must view the sick one as a living expression of some particular drug action, regardless of the diagnosis. Fortunately while diagnosis is rapidly multiplying diseases, it is powerless before individuality, which can be learned through our remedies only. This is a great advantage, which our schools are not utilising.

The advocates of diagnostic prescribing have entirely neglected the field of homoeopathic prognosis, and the further they follow modern scientific medicine the less they will know about it. On the other hand the true healing artist knows, by inference, how to fill out a partial symptom picture without awaiting dangerous developments. While this is often a tedious and painstaking process the results go far beyond anything that traditional medicine with its suppressive treatments can accomplish; therefore it is worth while.

While the exhibition of the similimum is steadily enlarging the bounds of our hope, the line of demarcation can never be exact; yet a just estimate of probabilities weighs heavily for homeopathy. From every standpoint we see some advantage or other that the law offers over and above so-called rational medicine. The outcome is not uncertain, but our progress suffers from incompetency and poor

instruction. The earnest spirits are just as eager as they ever were, but we must meet them half way and show them the path which nature has made for us and which often leads into untrodden but nevertheless true ways, where we will find the true surcease in things well done. If we seem finite, infinity is greater and we are part of it. If we know but little of the law the whole is swallowed up in a divine harmony of which it becomes us to learn

more.

DISCUSSION

IL E. S. Hayes: The thought brought out in this paper about the danger of too much individualisation is a novel one and one not often dwelt on. The usual way is to advocate individualisation without limit but there is a limit to that and if carried too far it will lead to many mistakes. We are all apt to fall into that way of handling a case and we do often get brilliant results; I do it myself but once in a while, in fact every now and then I come across a case that will not bear handling from mere symptom-matching and I have to call a halt and look more thoroughly into the matter and prescribe from more fundamental grounds.

R. F. Rabe: There are many interesting points in this paper; one thing that arrested my attention and which I believe to be true is that the exciting cause may start a ease of sickness but it gives it a character only for a short time and then is lost as a cause and the miasm whatever it may be, is responsible for carrying on the symptoms of ill health. In a chronic case we are very apt to hark back to the exciting cause Of indications—it may have been a fall or a fright—and to think that therefore Arnica or Aconite will be the remedy. But this is not always the case for by the time that the patient comes to us the miasm Psora or what not has got in its work and quite another remedy than that demanded by the exciting cause, may be needed.

Early in the history of the case the Arnica or the Aconite would probably have acted and the miasm would have been overthrown but those remedies not having been used and the miasm of the patient having had time to work, an entirely different set of remedies must be considered. That is one of the important points in this paper.

Harvey Farrington: I was struck with the statement that the most important symptoms are in the emotional sphere; if we start with the proposition that the patient is to be prescribed for and not the disease, it follows as a corollary that the mental or emotional symptoms are the most important because these apply to the individual alone. The mental faculties are the centre of every patient and the others are secondary The doctor in his paper made the dogmatic statement that the art of prescribing is the art of reading between the lines. But the art of prescribing is rather the art of sifting a case and analysing the symptoms out of many, which indicate the remedy. that will cure. Given a case in which the symptoms are clear you do not have to read between the lines or to do any sifting but such are exceptional. The mixed and chronic cases are the ones where the analysing and sifting has to be done.

In respect to a chronic case, the mental symptoms art of the greatest relative value and the most peculiar to the patient and from them we can descend to- the various tissues, always remembering that those are of the greatest relative value which express some characteristic or peculiarity of the individual. The statement that the miasm may continue a case after the exciting cause has been left behind and lost sight of is no doubt true but nevertheless the exciting cause is one important feature of a case and often leads to the remedy.

P. E. Krichbaum: Before we try to read between the lines, we must be able to read the lines themselves; we must study the materia medica and have a mental picture of the remedy. Without the repertory, if the case needed some unusual remedy I should be apt to miss it. A certain kind of study is needed; for instance I could not tell the characteristic features of my father although I am supposed to know him so well. But if you were to read out his characteristics to me when you had read out a certain number, I would say, that is my father. I have been very much interested in a patient that I have been treating lately because she has been under the care of Dr. Allen, Dr. Carleton and Dr. Kent for several years without being cured. I did as well as they did until I told her to drink buttermilk and then I did much better. She has a movement every day since then.

R. F. Rabe: How do you know that it is not a mere chemical action?

P. E. Krichbaum: I do not.

E. A. Taylor: Dr. Boger makes some startling statements in his paper. I supposed that the totality of the symptoms was the only guide to the use of a remedy and yet that is practically what he condemns as symptom-covering unless by symptom-covering he means with no regard to the relative value of symptoms. If he means to say that there is something mystical, or hidden or something beside the symptoms for us to consider, then I say that that is beyond what Hahnemann taught us and beyond Homoeopathy. It is admitted by all good homeopaths that we must see and consider the sick man without regard to diagnosis but then a good many go farther and say that we must also know about the miasm that effects the patient now I would like to know what a miasm is but a diagnosis. When you determine that a man has syphilis, have you not made a diagnosis? Now if you prescribe for the syphilis are you not prescribing on the diagnosis?

A. P. Bowie: The great and distinguishing characteristic of Hahnemann was that he was a marvellous observer and just as we excel in observing we will become successful practitioners. This paper to my mind is too much concerned with philosophy and not enough with materia medica. We can theorise as much as we please and we can entertain various opinions but there is our record of materia medica to go by and unless we stick to that as a guide and observe the symptoms, objective and subjective of the patients, we are sure to be all at sea so far as practical work goes. It does not much matter what theories we have if we stick to that. I do not want anybody's opinion about the remedy or about how it works. Nor do I care a penny about what Dr. Waring esteems so highly, the connection between the vital force and the pathological result. The proof of the correctness of a prescription is the results that follow. If I get the results I know that I am right and if I do not, I know that I have made a mistake and must try again.

C. M. Boger: I do not feel that any of these criticisms need answering; careful reading of the paper itself will show that all these questions are answered in the paper. One point I will try to make a little clearer; you cannot cure cases by exclusive symptom-covering or by exclusive individualisation. The true reflection of a disease is a single thing; it is one thing. Why do you not cure with *Lilium tigrinum* unless the sexual sphere is involved? Or why do you, not cure with *Aconite* unless the mental sphere is involved? Every remedy expresses a single concrete entity and proper study will enable you to recognise it just as you recognise the letter A when you see it. Every patient presents also a distinct entity—a group of symptoms that you must rook at as a one. It is your business as physicians to find out how closely you can fit your patient with curative remedies.

In order to do that, you must use repertories, but you must not use them merely to cover the symptoms of the case and nothing else. Suppose the repertory shows that Sulphur stands at the head of the list in a certain case and yet you know that it is not a case for Sulphur and that there is no use in giving Sulphur to the patient. That shows at once that you can not do good prescribing by machine work or by the force of numbers. Judgement and knowledge both of humanity and of materia medica must be used.

Suppose that a case has few symptoms, and Hahnemann tells us that these are the most difficult cases to deal with, how are you to determine the remedy when perhaps the repertory shows that several have those few symptoms, unless you use your knowledge both of patients and materia medica? A lady came to me with profuse nose-bleed, she said "doctor, my nose does not bleed unless I touch it." Worse from touch, in that location; four remedies have it, three in the repertory and one in manuscript. I looked up every one of those four before I could decide which was the one. It was not because of the aggravation from touch alone but because the mental condition revealed to me that the remedy was *Niccolum* and *Niccolum* cured her promptly. The remedy should be a true reflection of every thing in the patient's body. A man stubs his toe and he either swears or cries. It discloses his mental state when he does that without thinking; it is an involuntary act and hence genuine.

E. A. Taylor: These points you speak of are only symptoms. What would you have in addition to the symptoms? That is what I am trying to get at.

C. M. Boger: The way the patient talks; the modes of expression all show the operation of his mind.

H. S. Llewellyn: Why are not those very things symptoms?

C. M. Boger: Every operation of the mind has its own peculiar

E. A. Taylor: Was the woman's mind operating in that way when her nose began to bleed?

C. M. Boger: Such thing cannot be found in the materia medica as symptoms but they are there if you can read between the lines. You will find the deciding touch to a case in these mental states when you get into a tight place.

The way the mind operates picks out the one remedy out of the twenty that have the symptom that you are looking for.