

HOW TO TAKE THE CASE

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Prof. Tyndall has shown the necessary elements of a science to be the observation of facts, the induction of laws from these facts and the constant verification of the laws by practical experience.

When Hahnemann read that Cinchona Bark, the great empirical remedy for ague, had actually caused symptoms like the ones it had been curing, it was too striking to be passed over and he began to search medical lore for other cures seemingly based upon the similar action of drugs. He found a number, but the accounts were not conclusive enough to clearly confirm his induction, hence he began those experiments in drug action which were destined to end in what we now call provings, and to finally have a more profound effect upon medical science than any one thing that has happened since the days of Hermetic medicine, more than fifteen hundred years before our era.

As his work went on and drug effects were verified again and again he was troubled by the frequent overaction of the remedy, which he sought to remove by steadily decreasing his dosage, and was thereby insensibly led into potentization, which is after all Hahnemann's real and greatest discovery. Daily experience with potencies gradually evolved the practical details of the law, all of which was incorporated in the Organon as we know it today.

We may well believe that our innumerable verifications of the law will, in time, raise medicine more nearly to the plane of a true science, like that of mathematics, which advances from certain fixed and self evident truths, while all the others draw conclusions from evidence, by deduction, through reason, etc., all from premises which are in themselves of a variable import.

Our vision transmits impressions by means of light with considerable fidelity, but as we descend into matter each successive sense using lower rates of vibration reports with less and less accuracy, so that by the time we reach subjective sensation, interpretation is needed. In other words, in proportion as things are not self-evident, they must be and are defined, by comparison, essentially a very flexible method, which uses the striking and unusual as points of departure.

The larger part of sickness is composed of morbid feelings and sensations, which necessarily bear the impress of the sufferer, which also holds true of drug symptoms. A partial or one sided array of symptoms of either sort, is perhaps common enough, but unless marked by very striking features, is to be greatly distrusted. Here is the weak point in most of the minor remedies, as well as the difficulty in many clinical cases.

In daily clinical work it has always seemed best to first get a pretty full life history of the case in hand, then look over the objective appearances, and lastly find out what the patient thinks and feels. These factors are then carefully built into a mental picture of what seems to be wrong. For sufficient reasons all of its features can not usually be elicited at the first interview.

Hahnemann repeatedly pointed to the peculiar symptoms, as being the real indicators for the curative remedy, and the successful prescriber is he who can pick them out and without losing touch with the essential diagnostic features assign them to their proper places in the symptom picture. He links together and combines the essentials with the singularities present in such a way as to produce an harmonious whole. This is perhaps, not easy to learn, but it can be done, by avoiding a false start and persistence, even to the point of seeming to be intuitional.

The number of such possible combinations, is of course, unlimited, but we find that certain ones actually occur with relative frequency, giving rise to the idea of specifics, organ remedies, epidemic remedies, etc., etc., all delightfully indefinite terms, full of danger and lacking in the accuracy which makes for correct and radically curative homeopathic work.

In learning this art it is needful to divest oneself of all speculative opinions as to the origin of such odd manifestations. These things belong to the obscurities of diagnosis, nor does this mean that a diagnostic symptom can never be a major indication, as witness the marked aggravation from motion, equally prominent in pleurisy and the provings of Bryonia or the 2 A. M. aggravation, frequent in both duodenal ulcer and the effects of Kali bichromicum.

It is the striking nature of the systemic effect that determines the value of a given symptom; a manifestation that is prone to occur without any obvious connection with the disease itself. In chronic cases it is very apt to be a concomitant, while in acute ones it often stands out like a freshly painted guide post. The physician must know how to give it the right value. It is an especially dangerous mistake not to ascertain the relative age of such symptoms. A few clinical cases will illustrate some of these points.

CLINICAL CASES

Case I:

Left sided quinsy with constriction in fauces, *general smarting of the skin* and prostration. The skin symptom held the second, yet deciding position. Smarting of the skin belongs especially to Apis, Cantharides, *Capsicum*, Graphites, *Lachesis*, *Lycopodium*, Ranunculus scle, Sinapis and Sulphur. Three doses of Lachesis 4M. aborted the attack in twenty-four hours.

Case II:

Marked, diffuse hypogastric peritonitis, of uncertain origin, with thirst, *profuse foamy vomitus*, dusky, almost black tongue, violent abdominal colic and temperature of 102°. Aethusa, Arsenicum, Cantharides, *Kreosotum*, Lachesis, *Natrum carb.*, Podophyllum and *Veratrum alb.* especially have frothy vomit. Profuseness is a strong feature of Veratrum, hence she got the 12th potency; after the second dose, there were three copious stools containing mucus, the temperature dropped to normal and the distension disappeared, leaving only a sore and swelled appendix; all within twenty four hours.

Case III:

Man with a violent cold. *With every cough the nose discharged copiously*, a combined characteristic that belongs to Agaricus, Lachesis, Nitric acid, Salicylic acid and Sulphur. One dose of Lachesis made a quick cure. I have verified this action of Lachesis several times

Case IV: A flat chested woman with a chronic cough is always excited by eating candy. Aggravation from sweets belongs to a goodly list of medicines, but the symptom has only a clinical relation to coughs, hence is of low value. Badiaga has caused and *cured "Spasmodic cough from tickling in larynx as if sugar were dissolved in throat"*. A single dose removed that cough in ten days whereupon she added that with each cough formerly the expectorate flew from her mouth, an additional Badiago characteristic. Sometimes we discover the real keynote after curing the patient.

Case V:

A single lady was subject to repeated cold taking; each attack began by running from the right nostril and violent sneezing. *Blowing the nose always caused nausea* (Hellebore, Sanguinaria, Sulfur). Her cheeks were frequently flushed. Sanguinaria repeated at each

attack cured.

Case VI:

Child aged 7. Diphtheritic membrane covering both tonsils and pharynx with *cramps in calves of legs and fingers*. *Has been sick one day*. A dose of Ignatia every six hours until four were taken caused the expulsion of large pieces of membrane. Within one day she was fully convalescent.

Case VII:

Infant age 2. Yellow points in crypts of right tonsil. *Right cervical glands enormously enlarged*. Great prostration. *Takes a little food then quits*. *Is very cross*. Four doses of Lycopodium 43M reduced the glands to almost normal, and in one day she was about herself again.

Case VIII:

Lady aged 47. Years ago chilled stomach with ice water; since then had duodenal ulcer with recurrent gastritis. The X-ray shows a large scar on lesser curvature, stricture of the duodenum and many corrugations (adhesions). Bitter, sour, grumous vomit preceded by chills and accompanied by *cutting pains in stomach*, > urinating or belching. Craves very cold water. Phosphorus helped for a while, when a *regularly recurring 2 A.M. aggravation set in*. Kali-bichromicum gave surprisingly prompt relief, followed by recovery. A radical cure is not to be expected.

Case IX:

A small goitre seemed to press upon the trachea of a young woman out of all proportion to its size; a symptom reminding one of Baryta carb., Bromium, Causticum, Graphites, Lachesis and Phosphorus. A single dose of Bromium 71M., caused a violent reaction on the fourteenth day, during which she felt as if her face were drawn to a point in front of her nose, a big crop of herpes came out on the lips and chin and the goitre rapidly disappeared.

Case X:

A young man was subject to attacks of migraine once or twice a week. He had inherited this from one of his parents. The attacks were preceded by blindness, reminding one of Kali bichromicum, Psorinum and a few other remedies. In ten days after a single dose of Psorinum 50M., a carbuncle, which opened and discharged of its own accord, came on the nape. Since this he has had no headaches.

Case XI:

Sore aching from the region of the *gall bladder to the left scapula*, better lying on the stomach, as of a lump under the sternum, then the mouth white with foam. Very foul black stools. Prolapsing, bleeding piles, nails very thin, split and turn black. Dry skin. Anaemic, emaciated and very weak. Constantly caves in. Aggravation from pressure of clothes and from fat foods. Four doses of Leptandra, in different potencies, have in three months, returned her to nearly normal flesh and strength. The nails are absolutely normal again, her colour is quite good and an old, very foul leucorrhoea has returned in spite of which she keeps right on gaining.

DISCUSSION

Dr. Stearns:

Dr. Boger's papers are always so good that nothing is left to discuss. I remember the first meetings of the I. H. A. I ever attended, where because of his knowledge and wisdom, I always wanted to touch the hem of his raiment. I asked him to-day "How do you feel about your prescribing each year as compared with the last?" He said, "I think I am getting better all the time." That is something to live for—to feel from year to year that you are getting a deeper and deeper understanding of the art of prescribing.

Dr. Boger is wonderful in his paper, and I think it would help, if he would tell us where he finds his odd keynotes. I cannot remember all the characteristics of our most used drugs.

Dr. Loos, interrupting:

If you did that you would know all that Dr. Boger knows.

Dr. Boger, answering:

I have an insatiable desire and read and have a good memory for what I read.