

This article first appeared in 'Homeopathy Today' (Vol. 21, No.11, Dec. 2001, 20-21), the newsletter of the National Center for Homeopathy, Alexandria, VA, USA, (www.homeopathic.org) edited by Julian Winston. It is presented here with kind permission.

Homeopathy is a phenomenal medicine. The lots of phenomena appearing in the proving of a remedy are purely arbitrary manifestations and without a perceptible deeper meaning. Although the human mind loves to see or recognise structures and patterns, and therefore the materia medica is reduced again and again to remedy pictures and essences in a limited way of seeing, this often leads to failures in the treatment. A case of Arsenicum album is presented, that didn't show "typical" characteristics of Arsenicum album, but its extraordinary symptoms could be found in the materia medica of Arsenicum album.

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Homeopathy, A Phenomenal Medicine; Symptoms As Arbitrary Phenomena

A proving is an arbitrary occurrence. Various substances produce various symptoms in well persons. These symptoms are not entirely random. But they are arbitrary, that is, capricious and without reason. There is no grand design. There is no meaning. There is no essence. There are only symptoms. In this sense homeopathy is clean.

It is a characteristic of the human mind that it rather compulsively sorts all manner of sensory input and labels it. Thus, a very warm something is labeled "hot," unpleasant sensations when intense are called "pain," objects which impinge on the retina are sorted into recognizable forms and shapes, labeled and categorized. This is what the mind/brain does: it takes in sensory input and classifies it with a word or phrase and files it away. The filing away is called a function of memory.

This is the mind's genius, for it makes the external world recognizable and understandable. The mind, then, is constantly filtering sensory impressions and naming them. So in a proving, the prover takes a medicine and begins to note various sensory data which they accurately or erroneously ascribes to the medicine and then variously labels this data calling them sensations, thoughts, and feelings. What makes the proving data usable is the fact that more than one prover claims to experience the same (or nearly the same) sensations, thoughts and feelings. So if a homeopathically prepared substance causes two or more provers to experience a chill, or become anxious when alone, those symptoms are deemed more characteristic of that substance than if only one prover reported them. Clearly, if in a proving with twenty provers no one experienced the same symptoms one would be hard put to know how to use such a proving. Replication of symptoms, then, is deemed essential for a proving to be considered useful.

This is not to say that a single symptom reported by a single prover is useless. It is not. But it is not as characteristic of the remedy as one which several or many provers reported.

I would argue that there is no "meaning" in a proving. It simply is-- a happening. Persons take homeopathically prepared substances and note any and all changes in sensation, feelings, mentation. There is no particular meaning to it. If enough provers experience the same symptoms we exclaim, "Aha! a pattern!" The mind loves patterns. And patterns are useful. As I said earlier, without replication of symptoms we would have a difficult task knowing how to utilize the proving in the treatment of the sick.

How then does it happen that various celebrated homeopaths (those that write books and teach) love to hold forth on how various remedies behave? Some used to say that Pulsatilla was particularly needed in blond young females! What an extraordinarily limited view of a medicine with hundreds upon hundreds of symptoms!

I remember years ago hearing George Withoukas talk about Platina saying that she (not he) was rakishly dressed, often with dark sunglasses, who sauntered into the consulting room in a sexually provocative way. I do not doubt he saw such persons who did well on Platina and I am sure he did not mean to limit the use of Platina to such a caricature of a person but for some years a number of us were eagerly awaiting her appearance.

The old homeopaths wrote of Natrum muriaticum curing intermittent fever or malaria. The modern homeopath rarely prescribes it unless the patient speaks of a deep grief or disappointed love.

"Sulphur types" were once said to be dishevelled and dirty. Since such persons are rarely seen except among street people, the modern homeopath has, perforce, had to change his conception of how "Sulphur people" present in an era of modern plumbing and daily showers. So why do homeopaths keep mentioning it? There was a time (when I first learned homeopathy) when, all "Sulphur people" were, ipso facto, warm natured. Fortunately, that bit of misinformation crashed and burned sometime in the 1980s. Now, most homeopaths know that half of the "Sulphur people" are warm natured and the other half are cold-natured.

Nux vomica was said to be an irritable businessman who worked too hard and drank too much. A workaholic lifestyle can often create a Nux facade, but that in no way implies the remedy is the person's constitutional medicine.

Now these and countless other limited views of materia medica need correction. I propose a method which would surely work. Stop reading and teaching materia medica in ways that attempt to piece together a "picture" of the remedy. Simply use the proving symptoms and the repertory symptoms. That should do it.

As for the Doctrine of Signatures? Rubbish. Unfettered balderdash. And the "essence" of a remedy? Seems to me it depends on who you read. Remedies do not "have" essences. Remedies "produce" symptoms. That is all they do. It's not random but it is arbitrary. Group analysis? Something to entertain and confuse the mind.

The following Arsenicum album case illustrates my point. In January, 2001, I traveled to Reynosa, Mexico, where I go once a month to do a clinic. A woman, in her early forties, had had stomach pains for over ten days and was scheduled to see me the next day. I happened to be next door at her sister's house for dinner that night when she called to say her pains were much worse. I walked over and found her shivering and obviously in a lot of pain. She was unable to describe the pain very well except to say it was very strong. She was having rigors. The pain had often waked her during the night in the last week. I asked if there had been any difficulties lately and she said, yes, she was under stress at work. She worked managing a hair salon and mentioned that her employees didn't want to work. Apparently, they worked on commission and were dissatisfied and it was very stressful for her. She was not very communicative about her job problems whether because of the pains or because she was naturally reticent.

As she was obviously suffering with her chills, I covered her with a blanket and drove across town to fetch my computer and remedies. When I returned she had moved into her sister's house and was clearly worsening. She was in bed, covered and still having chills. The pains brought tears to her eyes.

Temperature 40 Centigrade (104 Fahrenheit); Heart rate: 150 (sometimes higher) and regular;

Respiratory rate around 40/minute.

On examination, bowel sounds were present and there was no guarding or rigidity of the abdomen though it was tender to palpation.

She was making moaning or groaning sounds with the pain. Every so often she would move around the bed with the pain.

There was no perspiration with the fever.

What struck me was the intensity of pain.

Using pain as the "peg" I used the following rubrics:

FEVER, HEAT; PAIN, from

CHILL, PAIN; with

RESPIRATION; ACCELERATED; chill during

MIND, WEeping; pains; with

FEVER; HEAT; PERSPIRATION; absent

What was interesting about this Arsenicum case was that it did not contain any of the keynote or characteristic symptoms of Arsenicum with which we are familiar, to wit, she was not particularly restless nor was she anxious; she had no fear of death and she was not thirsty. Yet so confident of the prescription was I that I walked away from her bedside after one and a half hours certain that she would continue to defervesce and that the pain would subside. By morning she was a bit weak, but fine. How could I have had such confidence when all the best known symptoms of Arsenicum were absent? Because she had other symptoms, interesting ones that I deemed peculiar to her case, which were also characteristic of Arsenicum. Had I had a preconceived notion of how an Arsenicum patient was supposed to look and act I could not have prescribed it.

Now, let's try to understand something. When Arsenicum was proved a great many symptoms were educed, many hundreds of them. These can be verified by looking in Allen's Encyclopedia. Then along came a homeopath with the "gift" of making sense out of all these disparate symptoms and he and others decided that typically a patient needing Arsenicum would be restless and anxious, quite suspicious, have a fear of death, be constantly thirsty, and have a night time aggravation around

1 to 2 a.m. Voila! A materia medica of Arsenicum was born. Best of all, when those symptoms were present Arsenicum often cured. What could be more perfect? Nothing except for the fact that there are hundreds of other symptoms in the proving of Arsenicum which presumably are also valid and which never made it into most materia medicas. So what's a poor student of homeopathy to do when he has been taught that Arsenicum present as thus and so? I'll tell you what-- miss a great many Arsenicum cases.

Beware of ever prescribing on mental symptoms. A close perusal of the MIND section of a modern repertory will show that the overlap is bewildering. Anger, fear, grief, and sadness are in virtually all remedies. Alfons Geukens, one of the better homeopaths in Europe if not the world, once said, "I never prescribe on mental symptoms." (1)

Take the case, emphasize the totality of symptoms with special emphasis on strange, rare and peculiar symptoms-- the characteristic of the case that Hahnemann discusses in paragraph 153 of the Organon.

That's it folks.

1. Geukens, Alfons, *Homoeopathic Practice*, Vol. III, (VZW Centrum voor Homoeopathie, 1991), p. 193.