

# Y.R. Agrawal

## Drug Relationship - Antidotal & Inimical

Reading excerpt

[Drug Relationship - Antidotal & Inimical](#)

of [Y.R. Agrawal](#)

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## *Drug Relationship—Antidotal*

Homoeopaths have made a special study of drug relations, an important and very necessary branch of medical knowledge. If a medicine should act unfavourably—an initial aggravation followed by improvement is more or less normal—an experienced homoeopath would immediately antidote it. The orthodox practitioner does not know how to antidote unsuitable medicines. The only thing which he understands is the antidoting of poisons which threaten life. Dr. John H. Clarke wrote in his clinical Repertory :—

"It is often as important to be able to arrest a medicinal action as it is to start it. A prescriber who cannot antidote a drug effect is like a driver of a motor who cannot put on the brake. Hahnemann was always careful to observe and record the antidotes to the remedies he proved and later observers have largely added to his observations. Some remedies have been observed to prepare the way for other remedies. Some follow others well. Such remedies are termed compatibles. Some spoil the effect of others and such are called incompatibles".

Antidote\* means to undo what has been done and antidotal drugs means a drug which has been given or which is to be given to counteract or to nullify the effect of earlier medicine/medicines. Antidotal medicines are the rival medicines which

\*Antidotal remedies are such as may have a similar potential power to inimical remedies, but in this case the adverse action of the first remedy is checked without the impact, and the *vital* energy which was thrown back upon itself in disorder by the first remedy is now met with a similarity which meets the disordered pace symptomatically and the natural order is restored. Moreover, in the case of antidotal remedy, we rarely use one of similar morbid trend. Thus we would not consider using an animal remedy to antidote another animal remedy, we would go to a different basic derivation. Antidotal remedies have definite symptomatic relationship ; usually, however the general action of the antidote is of a milder character and it meets the disordered conditions with greater sympathy. —H.A. Roberts

counter balance or neutralise the effect of medicines given prior to it. Where an antidotal remedy is also a complementary one, such a remedy modifies the effect of earlier one besides antidoting its bad effects.

Some remedies which have a wide range of action are very effective antidotes for a wide range of remedies; this antidotal action seems to be a part of their symptomatic picture without such marked similarity to the remedy requiring antidote. Or perhaps we may say that such remedies as Nux Vomica and Pulsatilla, having naturally a wide range of action have a certain similarity to many other remedies and because of that similarity are frequently used with great success as antidotes.

The necessity of giving antidotal medicine may arise due to following reasons :—

1. When the new symptoms caused by medicinal reaction of first or second prescription are found to be causing distress to the patient or are detrimental to the welfare of the patient, the action of the remedy has to be antidoted.
2. When under the action of remedy the symptoms take a wrong direction *i.e.*, the symptoms disappearing from less vital organs but appearing in more vital organs. For example, a patient relieved of his rheumatic trouble of joints is compelled to take rest because he has developed some bad condition of heart on disappearance of his rheumatic trouble. This is known as shifting of symptoms and in such cases where so called cure takes wrong direction, the remedy has to be antidoted.
3. When the selection of potency is incompatible with the degree of vitality *i.e.*, when the potency selected is very high as compared to the vitality and thus is causing aggravation which the patient can not withstand and the case is bordering on the fatal termination, it requires to be antidoted.
4. It is necessary at occasions to antidote the effect of an unsuitable medicine. Antidoting, in fact, is a problem

so, whether such medicines should be given to antidote, the former or not ?

Ans. We should be very cautious in such a situation. For example, we do not like to antidote Nux vom with Ignatia (which is also inimical) unless strongly ' forced by persistent indication for the latter (*i.e.* Ignatia).

Two important questions were raised by Dr. V. Krishnamoorthy on Relationship of Remedies. The gist of the replies given by Dr. P. Sankaran and published in the Indian Journal of Homoeopathic medicine—July/September, 1979 was as below :—

Q. How can a remedy which is complementary to the; indicated remedy be antidotal ?

Ans. A remedy is complementary as well as antidotal to another, when the time dimension of administration of the succeeding remedy is not kept in view *e.g.*, Sulphur is complementary to Mercurious in dysentery when given in time *e.g.*, when the acute symptoms have subsided, if given too early, then it acts as an antidote. It is this-TIME-PHASING which renders the remedy corriprenentary or antidotal.

Q. Should we necessarily antidote the first medicine before-switching over to correct one ?

Ans. Suppose in a case needing Bryonia we have by mistake-given Aconite. As long as Aconite does not disturb the symptoms of the patient there is no need to give-antidote to Aconite. But if Aconite has disturbed some symptoms or acted unfavourably then it is necessary to-antidote Aconite before giving the correct remedy.

Let us now discuss in detail about the principal remedies and their antidotal friends.

**Acetic acid** :—Large doses are best counteracted by Magnesia or Calcareo according to bodily peculiarities of sick, fluid Magnesia or lime water, a teaspoonful in a cup of water taken in sips. Higher preparations for depressing agonising feeling.

Tabacum if insufficient, Aconite for gastric, pulmonary and febrile symptoms'.

**Aconite** :—If you have given Aconite in too many doses or too strong or Aconite has been administered unwisely then coffee or Nux vom will often put the patient in a better condition.

Sulphur is the main antidote when paralysis results from over dose of Aconite. Acetic acid, Belladonna, "Chamomilla, "Paris, Vinum also antidote. Citrus limonum (diuresis).

**Aesculus** :—Nux vom antidotes symptoms of piles.

**Aethusa** :—is antidoted by vegetable acids and it antidotes Opium.

**Agaricus** :—Absinth, Charcoal, coffee, wine, brandy, Cbmphor, fat or oil, Cal carb, Pulsatilla, Rhus tox.

**Agnus castus** :—Camphor, Nat mur.

**Ailaisthus** :—Aloe for the dull headache, Rhus tox for the headache and erysipelatous face, Nux vom for general effects

**Aietris farinosa** :—Alcohol, Nux, Rhus.

**Allium cepa** :—Arnica (toothache), Chamomilla (bellyache) Nux (coryza recurring in August), Thuja (offensive breath and diarrhoea after eating onions), Vert alb (colic with despondency).

**Allium sat** :—Lycopodium.'

**Aloe** :—Opium, Sulphur and mustard.

**AJumen** :—Alumen and Plumbum antidote each other. Chamomilla (cramps in abdomen), Ipecac (nausea and vomiting), Nux and Sulphur.

**Alumina** :—Bryonia, Camphor, Chamomilla, Ipecac, Lachesis. Bryonia is also complementary. (Boericke)

**Ainbra grisea** :—Camphor, Coffea, Nux vom, Puls., Staph.

**Amnion carb** :—May be antidoted by Camphor and some of its symptoms by Arnica. It is also antidoted by Hepar, vegetable acids, fixed oils, as castor, linseed, almond and olive oil. (See also Lachesis).



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