Maurice Fortier-Bernoville
Eruptive Fever and Contagious Diseases of Children

Reading excerpt
Eruptive Fever and Contagious Diseases of Children
of Maurice Fortier-Bernoville
Publisher: B. Jain

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INTRODUCTION

Homoeopathy is specially adapted to the diseases of children and more particularly to the eruptive fevers and epidemic disease of children. The hypophysiological doses of Homoeopathic medicines are first of all harmless and secondly they do not burden the organism of the child by immediate and distant reactions which may retard the growth of the child.

In the infectious diseases of children caused by microbes or by viruses, the homoeopathic remedies act according to the symptoms from which the child is suffering. The medicines should also be used according to the stages of evolution of the disease: incubation, invasion, established period and convalescence.

The infancy is the period of immunity for the future adults. Really speaking the eruptive disease of the children may be called the eliminatory reaction of the child and if these diseases are well treated according to their courses, the child may become immune from several diseases and in the adult age it may enjoy its fruits. The reticulo-endothelial system plays a very important part in the epidemic diseases of children. The homoeopathic remedies do not cause any disturbance in the rhythm of the organism, they help the rhythm of the individual organism towards morbid evolution of the disease. The defence mechanism of the organism is not warped or unnecessarily choked by high dynamic doses.

The seven rules of the infectious diseases may be recalled here, whatever may be the modalities of each miasm, or of each temperament.

Law one. In the course of any infection, microbe, virus, toxin, antitoxin, specific lytic principle, there is the tendency to constitute in a chronological order a wide cycle of physiological modifications of the same living substances.

Excerpt from Maurice Fortier-Bernoville
„Eruptive Fever and Contagious Diseases of Children“
Publisher: B. Jain Publishers Ltd.
Excerpted by Narayana Publishers, 79400 Kandern,
Tel.: +49 (0) 7626 974 970-0
Eruptive Fevers

Law Two. According to this cycle, at each period of acute infection there appears a dominating element which is, during the period of invasion, the toxin; during the established period, the antitoxin, during the convalescence the specific lytic principle.

Law Three. The first part of the cycle is under the sign of aggression, centripetal tendency of the incubation and of invasion; the second part under the sign of defence, has the centrifugal tendency of the established stage and of the period of convalescence.

Law Four. The cycle closes in the diseases that end in cure, with complete and durable immunity (measles, whooping cough, mumps, chicken pox, diphtheria).

Law Five. The cycle may remain open according to two modalities: The cure may be incomplete when the organism is weak, or succumbs (clinical forms). It may be broken in a spiralled ring in the case of unstable cure and in the course of allergising disease (Scarlatina, acute articular rheumatism, nodular erythema). In the first case the failure is due to the organism and in the second case, to morbid agent.

Law Six. When the cycle remains open, the cycle of cure is not complete; an offensive return in each period is possible and is menacing (secondary complications).

Law Seven. Every infectious disease, after the apparent cure leaves indelible traces which may be transmitted to the descendants. That imprint of the infinitesimal order related to dilution of toxins and to latent germs create predisposition or association with other infections according to the microbean heredity.
Maurice Fortier-Bernoville

**Eruptive Fever and Contagious Diseases of Children**

96 pages, pb
publication 2001

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