Edmund Carleton
Homoeopathy in Medicine & Surgery

Reading excerpt
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of Edmund Carleton
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HOMOEOPATHY

IN

MEDICINE AND SURGERY.

INSANITY.

The most important symptoms of a case of sickness are the mental symptoms. Hahnemann called attention to this fact. The most important symptoms produced by a drug upon healthy people are the mental symptoms. This fact has been recognized by our drug provers. Other things being equal, the homoeopathist who most closely applies the artificial symptoms to the natural symptoms, when prescribing, achieves the most notable success.

It is not claimed that homoeopathy will cure every case of insanity. Some cases are incurable. Homoeopathy will cure every curable case. It has astonished observers by curing many terrible cases which had been considered incurable. It mitigates the sufferings and postpones the fatal termination in the worst cases. I have in mind a number of cases of paresis so far advanced as to require a urinal to be worn in the trousers and help in locomotion, who were preserved to a good measure of business activity a number of years longer than the most hopeful observer dared to claim, by homoeopathic medicine and careful regimen. I think of the apparently hopeless case of mania in the practice of the late Dr. J. P. Van Evera. The patient was in constant motion and lamentation! If near a window she wanted to throw herself from it. When near the water she wanted to drown. On entering the kitchen she endeavored to get into the stove and burn to death. The case was referred to the late Professor Selden H. Talcott, who gave *Rhus toxic* and cured the case promptly. Nothing in my
medical experience has given me more insight and confidence in homoeopathy than that cure. It served me well in the case which is about to be related.

The insane patient should not be deceived. After listening attentively to his strange statements, the physician can say: "That is the way it seems to you, but I think it is thus and so. I believe you are a little crazy." Again, if it becomes necessary to send him to a public institution, the patient should be so told, in a kindly way, saying that the change is thought necessary for his comfort and care, and that he may the sooner recover. If he gets excited and refractory, listen calmly to what he has to say, but do not yield nor appear to yield the point. A physician who acts thus will retain the respect and confidence of the patient, and be in the position to render him the greater amount of benefit medically.

Mrs.________ was very happy with her devoted husband and lovely daughter. Unfortunately she meddled with "Christian Science." It upset her badly. Hoping that a change of surroundings and scene would help her, she started on a trip to different points in New England. The movement was disastrous. She became evidently insane and was hurried back to New York in a few days. Here is her own story written a few years after her recovery:

"The final culmination of my illness came on the 12th of September, 1900. This was the outcome of five years or more of intermittent insomnia brought on by a nervous condition, due, in part, to perpetual speculation on psychological subjects and arduous study of mental and religious subjects. Neglect of physical exercise and proper diversion and the attempt to do a thousand things at once probably rendered hurtful occupations which might otherwise have been harmless.

"In July and August I was nervously and physically run down, and it is to discriminate between what might be called physical and mental symptoms. In July I had been exaggeratedly anxious about a kitten which we took to the
Health is often seriously impaired by this practice. Were this plan consistently followed, man would doubtless soon become susceptible to those diseases of the lower animals which he now escapes. The inoculation of new diseases by this means is already demonstrated. Would you not prefer to let your child run the remote chance of contracting a disease, when reasonably sure and harmless remedies are at hand, than to fill him with known and disgusting poisons? For we know not where the latter's action ends. The homoeopathic prophylactic is similar to the usual symptoms of the sickness to be guarded against, reinforced by the symptoms of the epidemic remedy, if that has already been discovered.

**INDICATIONS FOR MEDICINES.**

*Aconitum* is generally contraindicated; but in a few instances I have seen the need of it. Sthenic cases, first manifestation; high temperature; dry, hot skin, quick, rapid pulse; thirst; dark red throat with burning sensation. If fear, anxiety and restlessness are added, the picture is true.

*Apis (apium virus')* is the antithesis of *aconite*. Asthenic cases; great debility from the start. Drowsiness, or more likely dullness; ash-colored membrane, with stinging sensation; puffy, glossy, bright-red parts; uvula long and apparently filled with serum; no or little thirst; puffiness about eyes; dropsical tendency; skin may exhibit itching, stinging eruption; clumsy movements. Scanty urine; strangury. The urine should be examined, as the foregoing scheme favors the existence of albumen and casts.

*Arsenicum* has no characteristic throat. It is occasionally useful when there is great prostration and rapid sinking, with fear of death, anguish and restlessness. Head must be high. Worse at midnight. Thirst for frequent little sips of water. Such cases are commonly putrid and desperate; and have feet: discharge through nostrils. Urine scanty and loaded with albumin and casts.
of the homoeopathic physician. It should be similar to the symptoms of prodrome, chill, fever, sweat, apyrexia and whatever is singular and queer. Repetition of the dose, especially within twenty-one days, commonly has a disastrous result. It is my custom to have a good understanding with the patient at the start. He is told that the homeopathist does not "break chills;" he cures cases; then the chills cease.

PERNICIOUS MALARIAL FEVER.

The last decade of the nineteenth century was, in that part of the world which has its centre at New York city, conspicuous in the annals of malarial fever. The claim that quinine is a specific for ague was continually proven to be false. Pure homoeopathy repeatedly demonstrated that it only is the curative for the individual patient. An occasional case of pernicious fever set all treatment at defiance. According to report, one patient died in the second chill, in spite of fifty grains of quinine given by the attending physician to prevent the chill.

Case I. Another case of equal severity occurred in the practice of the late Dr. A. M. Piersons. These are the symptoms:

Chill in the evening, mostly in the arms and internally, with external burning heat; chill and heat alternating; heat especially of the head. Pulse quick, full, hard and tense; throbbing of the carotids and temporal arteries. This stage lasted about an hour and was, taken by itself, not alarming. The next stage was very alarming.

Heat continuous, dry and burning; temperature at and near 106\(^\circ\) for four hours or more; face deep red; delirium.

Sweat slight, mostly on the face.

The apyrexia was marked by apathy and exhaustion.

Together we selected belladonna and gave the two hundredth potency in water. The relatives were told of the gravity of the situation. The patient went bravely through the next chill, but succumbed to the fever.
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