Maurice Fortier-Bernoville
Miasms Syphilis & Sycosis

Reading excerpt
Miasms Syphilis & Sycosis
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EVOLUTION OF SYCOSIS

Let us note that in sycosis there exists in the beginning discharge or a secretion from any mucous membrane in opposition to Psora. It is a case of elimination. There may be an elimination through mucous membrane in psora, but the psoric patient defends himself specially by eruption of the skin which may be violent or not, but periodical. There is always the periodicity.

In sycosis, after a flow that lasts for a long time and which stops—this should be specially noted—and there" appear some external phenomena as: warty growth, various manifestations, or internal phenomena and finally nervous manifestations neuralgias, myalgias, articular pains of the conjunctive and nerve tissues and even the probability of neuritis.

In a word the clinical description of sycosis is very polymorphous, but we may understand it easily. On the one hand a mucous flow in the beginnig, then the stoppage of the flow and afterwards the warty manifestations.

As for example in an individual suffering from gonorrhoea at the age of twenty, which was more or less soon cured, has silent period and in consequence of which there appear the warts, then chronic rheumatism (specially if he had rheumatism during the attack of gonorrhoea) or chronic enterocolitis, neuralgias, neuritis, asthma, etc.

In these cases we incriminate sycosis as the cause, i.e., a grave morbid state, dominated by the gonorrhoeal attack at a given time.

In children the question is more problematic and delicate. The heredity is to be considered, the sycotic condition should be sought for in the parents. It is also to be ascertained whether there are some infantile diseases which are characteristically hereditary sycotic.

If it is true that generally acute infantile diseases and eruptive fevers are seen specially in psoric children, i.e., children who are the prey of hereditary tuberculinism, it seems also true that there is sometimes the association of sycosis with psora in the heredity which is predisposed to these affections.
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