

SPECTRUM OF HOMEOPATHY

NO. 2 | 2017

18 € | 24 \$
ISSN 1869-3091



ME AND YOU

**THIRD ROW
OF THE PERIODIC TABLE**

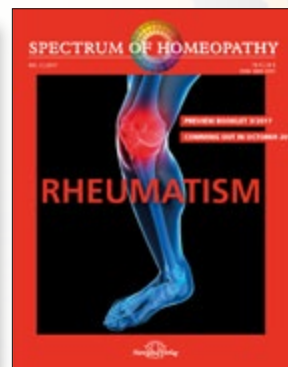
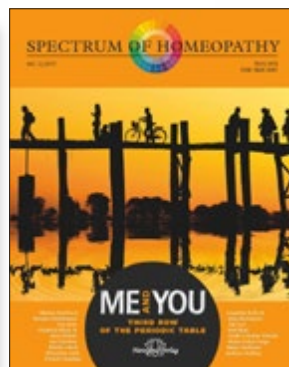


Markus Kuntosch
Renate Paschmanns
Ose Hein
Friedrich Ritzer &
Hans Eberle
Jan Scholten
Martin Jakob
Bhawisha Joshi
Dinesh Chauhan

Angelika Bolte &
Jörg Wichmann
Tali Levi
Bob Blair
Ulrike Schuller-Schreib
Wyka Evelyn Feige
Rajan Sankaran
Andreas Holling



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EDITORIAL

Dear Readers,

The third row of the periodic table, the Silicium series, contains in almost every stage elements or compounds that Hahnemann proved and which have therefore been used successfully during more than two hundred years of homeopathic practice. Yet in this issue of SPECTRUM we are not so much concerned with the well-known remedy pictures of *Natrium muriaticum*, *Phosphorus*, or *Sulphur*. Instead our authors are concerned to observe and explain the familiar polychrests from the perspective of the periodic table, which was interpreted by Jan Scholten in terms of human developmental periods, phases, and stages.

Scholten assigns the Silicium series to the teenage stage of life with the central theme of relationships within the family and with friends. The childish body-related I, represented by the development of the Carbon series, is supplemented in the third row with contact and communication with a you who I wish to please, who I love or hate. The position that we adopt in a relationship and the feeling of belonging to a group denote the respective stage in the development of the 'you'. In his contribution Jan Scholten describes these individual phases of the Silicium series and shows parallels to the plant world. *Martin Jakob* examines the similarity between the themes of the Liliales plants and the Silicium series.

The equivalence of these themes to the animal world is a secondary aspect of *Markus Kuntosch's* introductory article. His cases of the Natrium through Sulphur salts clarify the development of the relationship theme. The breadth of this becomes clear when we – as in *Renate Paschmann's* description – contrast the poles of Natrium and Argon. Virtually the entire Silicium series is encapsulated in a single complex remedy, *Terra*, as presented by *Friedrich Ritzer* and *Hans Eberle*. The proving symptoms encompass five different stages, corresponding to the mineral components of *Terra*, potentized soil.

The structure of this issue does not so much follow the stages or phases from left to right but can rather be grouped into those authors who more closely align themselves with Scholten and those who are followers of *Sankaran*. Particularly in the third row of the periodic table, the focus of these two pioneers of systematic materia medica diverges. Sankaran does not assign this row in developmental psychology terms to teenagers: he compares it rather with the years between three and six, when children are starting to make their own decisions. For him too the basic theme is "I and you," although he focuses on the development of identity. This approach is found in the authors starting with *Bhawisha Joshi's* overview article. „How much I

need others or how well I can set my boundaries", determines the developmental stage of identity in Joshi's view. This process is illustrated with case histories: in "I Want to Be Like You" for *Natrium* (Jörg Wichmann/Angelika Bolte) through to "I Am Not You" for *Phosphorus* (Rajan Sankaran).

We see the elements of the *Silicium* series in various combinations, thereby getting to know them better: *Nat-mur.* from *Dinesh Chauhan*, *Nat-s.* from *Tali Levi*, *Mag-s.* from *Bob Blair*, other Magnesium salts from *Ose Hein* and finally the compound of Magnesium and Silicea in *Talcum* or *Sandstone* from *Wyka Evelyn Feige*. The question of identity – "who am I?" – is especially significant in *Ulrike Schuller-Schreib's* fascinating study of *Aluminium*. Scholten places it in stage 3 but the element is conventionally located in stage 13 of the periodic table. *Schuller-Schreib* finds homeopathic indications to both stage 3 and stage 13. So even in its unclear position in the periodic table, *Alumina* confirms its well-known confusion about its own identity.

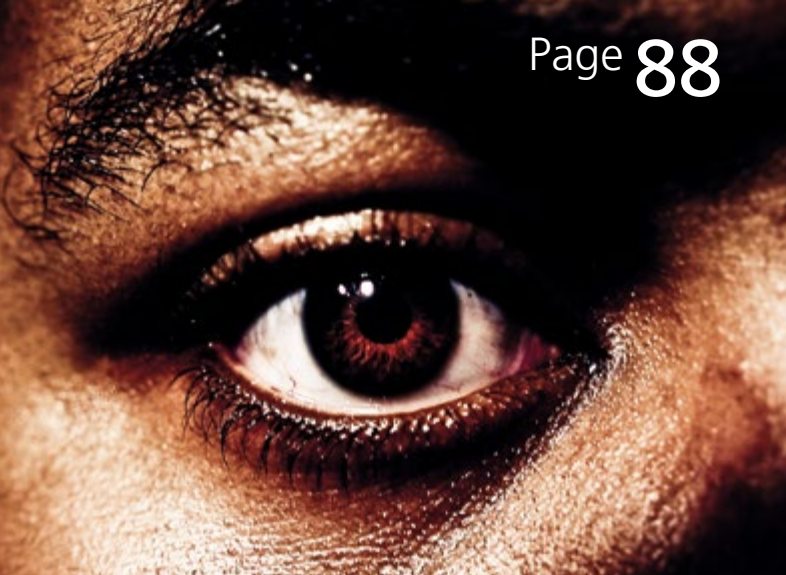
The typical hand movement of *Alumina* is a 'to-and-fro wave' between two points. Using the dimensions model of the periodic table, *Andreas Holling* can easily assign this gesture. According to his theory, the *Silicium* series corresponds to the second dimension of line or path as the physical basis of the relationship between the two points of 'me and you'. With each higher period, another physical dimension is added: space (Iron series), time (Silver series), and causality (Gold series). This understanding of the periodic table enables the prescription of mineral remedies on the sensation level. We are very glad that Andreas Holling's model – over twenty years in the making and tried-and-tested in practice – is first published here in *Spectrum*, illustrated with a case of *Natrium phosphoricum*.

With the study of the Silicium series, a remedy group composed of well-known polychrests, we hope you find a great deal to discover and savour afresh.

Christa Gebhardt & Dr Jürgen Hansel

Chief Editors





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I WANT TO BE LIKE YOU

Natrium nitricum and a case of ulcerative colitis

AUTHORS | Angelika Bolte and Jörg Wichmann

SUMMARY: This case of ulcerative colitis connects elements of the second and third rows. Whereas the explosive, urgent complaint indicates a Nitrate, the frequent episodes of diarrhoea occur in conflict with the need to be inconspicuous – to be like everyone else. This theme of an unformed identity indicates *Natrium*, at the beginning of the third row. The remedy *Natrium nitricum* works in an acute episode that is resistant to other forms of treatment.

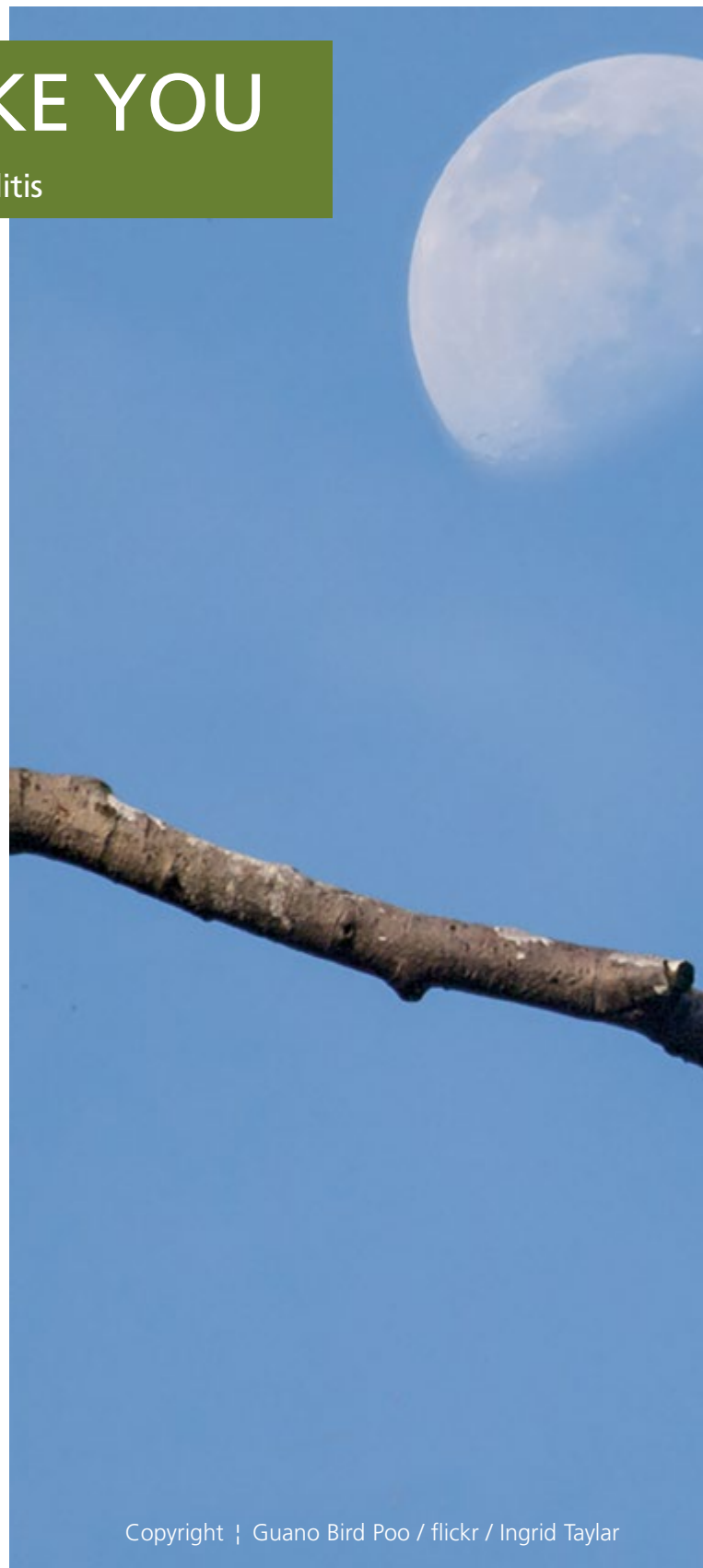
KEYWORDS: colitis, diarrhoea, guano, *Natrium nitricum*, *Nitrate*, *Nitrogen*, sensation method, Silicium series, typhus miasm

Ms H. consults us in the practice. She is a slim middle-aged businesswoman who was diagnosed some time ago with ulcerative colitis, which comes in acute episodes. It has been affecting her for nine years now although she has long complaint-free intervals. The patient nevertheless seems energetic and talks animatedly about her complaints, at times seeming rather frantic and rushed.

CASE: 45-year-old woman, ulcerative colitis

THE PATIENT'S THEMES

First consultation: "I've no idea where I should start (...) constant diarrhoea with panic attacks but pain-free. I'm always searching for possibilities. (...) It started harmlessly enough. The stool began to change, become thinner and thinner. I did some experiments with charcoal tablets, probiotic foods – that helped, it all helped at first but only for a short time. Eventually



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my husband said: nope, it can't go on like this – you need to see a doctor. (She then describes the medical history, the diagnosis, and her medication.) It only helped for three months then there was another acute episode. Finally they just gave me immunosuppressants. But that didn't agree with my liver. So I stopped everything." Then she tried a series of alternative approaches from acupuncture to nutritional interventions but nothing worked for long.

Symptoms: "When I'm feeling really bad, I need to go to the toilet up to twenty times a day – in the morning alone four to six times. I always think it's like what I ate the day before trying to get out during the night. I can't sleep long with that. There's a lot of air and the consistency is very variable: slimy, watery, lumpy. At the moment bloody again but it's not always like that. (...) Sometimes with the air there's a load of water. Like a cow or something. (...) In the evening it's a bit better. Then I have half an hour to find a toilet. In the morning I sometimes hardly make it to the toilet even though it's right next door – it's so urgent to get out. Then I have to run, like an explosion."

Being like the others: The worse thing about it? "Being different, noticeable. I want to be like everybody else. I don't want to have to go to the toilet more often than the others. They all look at me, staring." So what is it like, then, being different? "I don't want that, don't want to stand out. I'd rather go with the flow. I want to have what everyone else has. I want to be like the others." What does that mean? "Blending in – that's what I like, being low-key. But having said that, it occurs to me that I also like being in company, talking loudly and cracking jokes. Tomorrow I'm going to a karaoke bar for the first time. There you have to go up on stage. As long as I can choose to stand out, that's OK for me. But I didn't choose my illness so I don't want to stand out with that. I only want to stand out in a nice way – if I come out with diarrhoea, it's unpleasant. So I'd rather take a back seat – for example, not go to an event when it's acute."

Determined by diarrhoea: What's that like as a physical feeling? "I get panicky, hoping nothing will go wrong, that I don't do it in my pants. (...) Restricted – that my freedom is limited, the freedom to say: I'll get up and then first I'll go jogging. That's how it used to be. I feel I'm defined by the diarrhoea. You get up and the first thing is you have to go to the toilet. That disturbs me for a start. I'm forced to go to the toilet. That's what disturbs me most, that I can no longer determine what I do when I get up." What's that like? "Bad. Dreadful. Then I think how it used to be in the past. At that time you didn't value it, how nice that was. (...) My style would be freer. I've got used to it now. It's like a necessity – before I leave the house, I always sit on the toilet and massage the intestine so that everything that's in there comes out. Then I gain some time. (...) What's excruciating is always being tied

to the toilet. It doesn't matter where or which one – I'll even do it in the woods. But I have to empty myself. I'd love it to be like it used to be – once a morning getting rid of my food. I don't want to have to think about toilets. Toilets, diarrhoea, that determines my life!"

I can't let go: "In terms of things, I'm a hoarder. I only throw away the minimum. I can't easily let go. I still have things from my childhood, including my daughter's baby things. I can't give away or donate what's important to me. I'm very attached to the past. I'm afraid I will forget the good times and experiences. "I've never been alone, also as a child. My brothers and sisters were always there. Even if my parents were away. I'd never have wanted to be alone but then I never had to be. I've always clung to my girlfriends. I've always had one. They've changed but I still keep in touch with them. As a child and a teenager I always had one really good best friend. Vacations, celebrations – all shared and discussed together. It all fits with always having one, and constantly."

I copy my girlfriends: "At that time I left my parent's home to move straight in with my husband so I was never really alone in life. That's the kind of person I am – I'm quick to copy my girlfriends, want to be like them, have that, do that, like they do. If I had to describe myself, there are a thousand things I could say. But if I'm really that, I don't really know.

"When I was a child and teenager, I always had a special friend. I did everything with her and I always wanted to be like her. If she wore her hair short, so did I. When she got a new top, I wanted it too. Then she had a steady boyfriend, me too. Then she got rid of him and I wanted to get rid of mine too. And later with the kids, she fed her baby in the morning and every three hours, and I did exactly the same. So I asked, what time do you do it? One, she said, I do it at one o'clock. So I also did it at one." Why? "It makes me feel safe. It gives me security! (...) It was only later that I began to think: in fact you've never done anything of your own, you've never listened to your own inner voice.

"Last year my youngest daughter went on a school trip. Well before she went, I thought of all the things I could do. But you won't believe it; I just sat there all day long, staring ahead. I couldn't get started with anything. And when she got back? Then I was really happy and got back into the routine straightaway. I was also pleased that I was back in with the family. That makes me feel more contented."

Analysis: So that is the abridged personal experience of this patient from the casetaking. She has episodes of ulcerative colitis that are particularly bad in the morning and which completely dominate her daily routine by forcing her to stick to a rigid schedule. There are no useful modalities for analysis here – that is, modalities that we can look up in the repertory. Diarrhoea in the morning brings up 170 remedies, painless diarrhoea 120,

and bloody stool 200 – we shall clearly not make any progress like this.

So let us check her experience using the sensation method. The first step is the question of which kingdom we should look at to find her remedy. We can assume that we are dealing with a mineral remedy because the patient does not describe her physical complaints as polar reactive (plant) or a process of conflictual (animal) sensation-experience but purely functionally, explaining the role of the diarrhoea in her life. And she describes the other situations and connections in her life in a similarly functional manner. She is concerned with what she can or cannot do, with what she has or what she is missing – a mineral.

The patient's expressions: If we group her expressions according to what fits together, there is a striking description of the toilet as a place of security: it started with the move to our own house: I can't let go of old things / I'm a hoarder / I'm attached to the past / afraid to forget / I've kept it all with photos / I want to stop time / can't throw anything away / toilet means security, four walls with a toilet / I need security / I have to release and let go / it's a loss / the body lets go, I can't hold on to it.

And in the same connection there is an ever clearer aspect of pressing out: something there wants to get out! / urging to the toilet / pushing out to the exit (HG) – like a cow / sudden, like an explosion, have to run / I'm defined by the diarrhoea / I'm forced / I have to give into to the compulsion / I can't do anything about it, I have to go to the toilet / my body torments me so much! / the diarrhoea plagues me / the diarrhoea has to get out / it torments me, it has to get out / then I'm tied to the house, to the toilet / the diarrhoea determines my life. I will want to decide myself, without compulsion, free, free to do what I want.

Row: When we are in the mineral kingdom, the next question is what period or row is relevant for the remedy? The above quotes show that the patient is not concerned with the I-you relationship and the formation of identity (third period) nor with any of the following: securing one's survival and place in society (fourth period), personal fulfilment and creativity (fifth period), influence on the world and responsibility (sixth period). We can see on the one hand the toilet as a place of security, which should preferably be close by. The patient attempts to further guarantee her security by clinging on to and collecting as much as possible. This is then experienced as a conflict, culminating in the pushing out and having to let go of the diarrhoea. This world of experience between hanging onto security within a clearly delineated space with as little change as possible versus the ever more intense pushing out is known to us as an indication for the second row of the mineral remedies, with the central metaphor of the process of birth. A further indication is the sudden, alarmingly urgent emergence of the symptoms. Within this second period, the sudden urging out,

which plays a dominant role in the clinical picture, corresponds to the remedy *Nitrogen*.

SECOND PERIOD

- Toilet confers security
- Four walls with a toilet
- (= I'm in a bubble in a uterus, protected and secure)

NITROGEN

- The diarrhoea wants to get out
- I can do nothing against it
- I'm compelled by the diarrhoea
- It must get out, wants to get out
- It gets out

So we can identify one component of the remedy as *Nitrogen*. From the available Nitrogen remedies, we decide on a Nitrate since the combination of Nitrogen and Oxygen (NO₃) results in an even more explosive and urgent clinical picture (nitrates are key components of explosives, see below).

The patient's statements and the question of identity:

Together with the patient's remarks mentioned above, there is another aspect of the patient's comments that we have not so far considered: I'm different due to the diarrhoea / I want to be like everybody else / I'd rather go with the flow / I want to blend in / I cling on, always fixated on one girlfriend / I want to be like this best friend / who am I really? / I copy everything about my girlfriend, all the daily rhythms, that makes me secure / I'm in a role / I have no ideas of my own / I don't like being alone. Here we can see a very different world of experience, one that does not fit the second period. So there must be another component in the remedy – in other words, we are not dealing



JÖRG WICHMANN

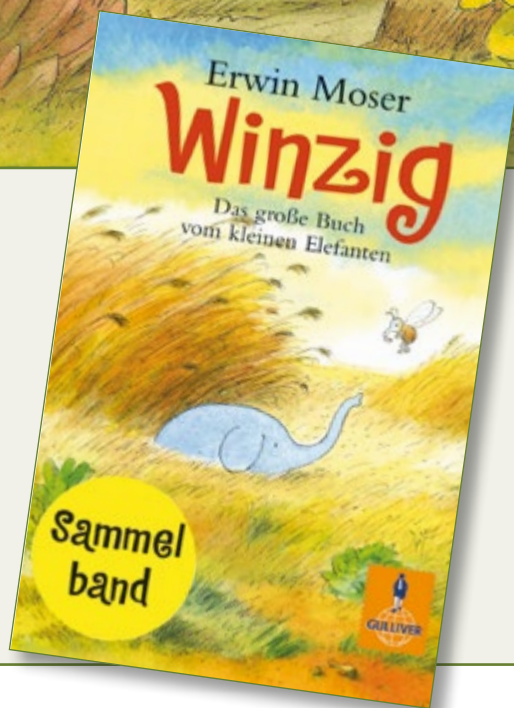
Lives in the countryside near Cologne, Germany, where he runs his homeopathic practice, writes, holds seminars, and teaches at the Bergisch school of homeopathy. Author of various works of homeopathy and founder of the internet database for homeopathic system-

atics, naming, remedy provings, and manufacture.

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ANGELIKA BOLTE

Has been running a homeopathic practice since the early 1990s after completing her paediatric training and working in the university clinic in Essen, Germany. She teaches at the Bergisch school of homeopathy. For the last ten years her focus has been the sensation method according to Rajan Sankaran.

THE VITAL SENSATION OF *NATRIUM*: I WANT TO BE LIKE YOU!

A brilliant artistic depiction of the *Natrium* theme can be found in Erwin Moser's children's book: "*Winzig. Das große Buch vom kleinen Elefanten*" (Verlagsgruppe Beltz) – only available in German; an English title might be: "Tiny. The Big Book of the Little Elephant."

It tells the story of the little elephant "Tiny" (this is the tiny but nevertheless present "I" of *Natrium*) who loses contact with his herd and does not know where he belongs. So he sets off to find those of his own kind.

According to *Andreas Holling's* concept of dimension (see his contribution to this issue of SPECTRUM), the way, the distance (from I to you, in human language) is the vital sensation of the third row – expressed differently according to the stage.

For *Natrium*, as the first element in this row, the completion of this path consists of a series of attempted adjustments. Tiny tries in his friendships with the other animals to be just like them and to do this he focuses on a relevant aspect of each animal.

A very pleasant and worthwhile picture book to help understand *Natrium* (for German speakers).

Erwin Moser,

Winzig.

Das große Buch
vom kleinen Elefanten

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Beltz • Weinheim Basel

with a single element but rather with a salt. The expressions listed above revolve around the question: who am I really? Am I different than the others? Am I like my girlfriend? – This is the language of the third period, which is concerned with the formation of identity in relation to a counterpart. The path of the third row leads from identification with the you (*Natrium*) via the conscious holding back of one's own demands for the sake of harmony (*Magnesium*) to the position of being against everyone else (*Chlor*). In this case we can very clearly see the attitude "I want to be like you!" – the trademark of *Natrium* in the third period.

So here the remedy we are seeking is a salt that must have both a *Natrium* and a Nitrogen component. With this analysis based on the sensation method, we arrive at the remedy *Natrium nitricum*, which is chemically sodium nitrate or Chile saltpetre. This is the sodium salt of nitric acid, NaNO_3 . It is familiar as a food additive E251 (curing or pickling salt) and especially as a fertilizer. Its most important natural source is guano, the excrement of seabirds on the South America coastal islands. Guano contains 7-8%, occasionally up to 60% nitrate as potassium nitrate (saltpetre) or above all sodium nitrate (Chile saltpetre).

SALTPETRE

Saltpetre (from the Latin "sal petrae," "cliff salt") is the common name of several frequently occurring nitrates.

Types of saltpetre:

Ammonium saltpetre	ammonium nitrate (combustible saltpetre)
Barium saltpetre	barium nitrate
Chile saltpetre	sodium nitrate
Potassium saltpetre	potassium nitrate
Calcium saltpetre	calcium nitrate

Homeopathically significant nitrates: NO_3 compounds:

Silver nitrate	– <i>Argentum nitricum</i>	– Arg-n
Nitroglycerine	– <i>Glonoinum</i>	– Glon
Potassium nitrate	– <i>Kalium nitricum</i>	– Kali-n
$\text{NH}_2\text{Hg}_2\text{NO}_3 + \text{Hg}_2\text{O}$	– <i>Mercurius solubilis</i>	– Merc

Potassium and sodium nitrate both occur in guano and were both used as the explosive ingredient of gunpowder, the most important premodern explosive.

Further less significant nitrates:

<i>Bismuthum subnitricum</i>	– Bism
<i>Cobaltum nitricum</i>	– Cob-n
<i>Plutonium nitricum</i>	– Plut-n

Materia medica: With repertorisation we would surely not have come across this minor remedy. There is nothing enlightening in the usual materia medicae. To reinforce the selection of such an

unusual remedy, let us take a look at the proving symptoms of *Nat-n* in the area of digestion. So we find in *Allen's Encyclopedia* (vol VI) under "Abdomen" and "Stool":

"Distension and feeling of heaviness in the lower abdomen, with emission of much flatus (...) Painless rumbling in the bowels. Flatulent troubles, (...) Some pain in the intestines (...) followed by three successive attacks of diarrhoea, with relief of the pain (...) The stool always consisted of isolated faecal masses, evacuated with great exertion; and during the last days of the proving he had a constant desire to go to stool."

This is a good fit to our patient's symptoms. And in *Leeser*: "The Stuttgart provers observed a series of digestive disorders such as distension, sour eructations with the tendency to diarrhoea or soft stool, with difficulty passing stool or a feeling of incompleteness. This occurred with the 30th, 6th and 3rd potencies, (...) with the 3rd, mushy and diarrhoea-like stools." (translated from *Leeser's Lehrbuch der Homöopathie*, Bd. 2, Mineralische Arzneistoffe, Heidelberg 1988, p. 343).

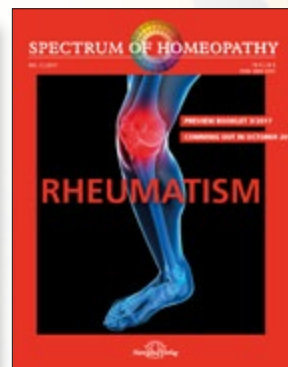
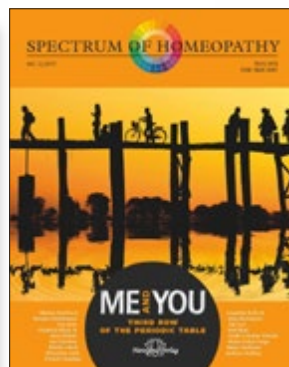
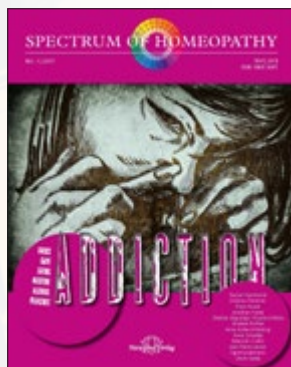
Prescription and progress: The patient was given a single dose of *Natrium nitricum* 200C and experienced rapid resolution of her colitis, which she had had for some time before casetaking and which was resistant to other forms of treatment. Her health stabilized and her digestion normalized. She felt more at ease and less prone to feeling rushed. A few months later she again started to gain weight, for the first time in several years. For a year now she has been free of acute attacks and is very contented with her progress.

Comments: According to our observations, we presume that the miasm in this case was typhoid because the patient, despite many years of setbacks, is optimistic that she can again become healthy – the psoric aspect of the reaction dynamic ("miasm"). In addition we experience a high degree of urgency in the treatment attempts (not so much just in the complaints, since this is the sensation of *Nitrogen*), in which she keeps changing course and applying a lot of pressure – the acute aspect of the dynamic. Both aspects together depict a reaction dynamic that we would call typhoid according to the sensation method.

For an additional insight into the substance saltpetre, from which we derive our remedy *Natrium nitricum*, see this short trailer depicting the unimaginably tough life of the men who "harvest" the guano: <https://www.youtube.com/watch?v=Dff6hXics64> or search YouTube for "360 GEO Guano." The daily life of these workers is pared down to a little contact with their families plus much time spent digging out the birds' excrement. This corresponds to our case history: a little family life and being frequently tied to the place where excretion takes place.



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SPECTRUM OF HOMEOPATHY

NO. 3 | 2017

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ISSN 1869-3091



PREVIEW BOOKLET 3/2017

COMING OUT IN OCTOBER 2017

RHEUMATISM

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