

Aetiologies

By far the most frequent excitement of the slumbering psora into chronic disease, and the most frequent aggravation of chronic ailments already existing, are caused by grief and vexation.

Samuel Hahnemann
Chronic Diseases

Definition

aetiology = ‘the assignment of a cause’.

A prescription is based primarily on some past trauma, illness or event rather than on the presenting symptoms. The stronger the cause-and-effect relationship between the trauma and the presenting state, the more an aetiological prescription is indicated.

Direct Aetiology

In cases with a direct aetiology there is a clear and direct relationship between the presenting problem and the trauma which preceded it, no matter how long the problem has persisted. For example, when a patient says “I have had recurrent headaches ever since a head injury three years ago”, that is a direct aetiology. In such a case I would be looking for a “head injury” remedy first, using the symptoms of the case to differentiate between the remedies in that group (*Arn.*, *Nat-s.*, *Cic.* etc.). Kent’s repertory¹ contains many aetiological rubrics showing those remedies which, from clinical experience, we know have an established reputation in curing ailments following a particular trauma, be it grief, fright, bad news, vaccination, injury, poisoning etc. The appropriate rubric is a good starting place in a case displaying a direct aetiology.

Sometimes when the cause and effect relationship is very clear, particularly if there are no outstanding symptoms in the case, the aetiology can completely over-rule symptomatology as the basis for the prescription. Thus it is that our ‘trauma’ remedies such as *Aconite*, *Arnica* and *Hypericum* have cured many symptoms and conditions which never appeared in their respective provings.

How to Prescribe

In a case having a direct aetiology there are three choices for the prescriber. The prescription may be based on the aetiology alone, on the symptoms alone or on a combination of the two. I find that wherever possible the third option is the most reliable one, but the aetiology should be used as a starting point provided there are remedies known to have that aetiology as a confirmed indication.

If the remedy is prescribed only on the symptoms of a case and the aetiology isn't covered, that remedy may well cure but often it will only palliate. A remedy which covers the aetiology but not the symptoms of the case will generally cure dramatically or do nothing at all. A cure is most likely to result if the remedy covers the aetiology *and* bears similarity to the symptoms of the case.

To illustrate the above, imagine a case of convulsions following head injury.

The symptoms of the case are:

Convulsions epileptiform
 worse from excitement
 worse from being touched
 with opisthotonos

A remedy which covers this case symptomatically would be *Belladonna*, but *Belladonna* is not known to have cured conditions brought about by injury to the head. Whilst it may well ameliorate the symptoms, it may or may not bring about a lasting cure. A remedy which covers the aetiology but not the symptoms would be *Arnica*; again this remedy may or may not cure. If the aetiology of 'Head injury, ailments after' is taken as the starting point, the remedies to be considered would be: *Arnica*, *Cicuta*, *Hypericum*, *Natrum mur.*, and *Natrum sulph.* Of these, the one which bears greatest similarity to the symptoms is *Cicuta*, and that remedy would have a greater likelihood of being curative than the other two.

Prescriptions based on a direct aetiology are often best given in a single dose of a medium or high potency (30th upwards) as the response is usually clear and obvious if the remedy acts curatively. If low potencies are preferred for any reason these will also prove curative in aetiological cases, but the remedy may need to be repeated frequently over a period of time.

Case examples

A woman complained of flu-like symptoms which had persisted for four days. She had a dull, frontal headache; nausea and loss of appetite; general lethargy; aching limbs. All of these symptoms are common to many remedies and to many flu-like conditions, hence are of limited prescribing value. I enquired about the onset of the complaint and discovered that the symptoms had appeared within several hours after the patient had been involved in a minor car accident, in which she was shaken but unhurt physically. Ignoring

the symptoms, I prescribed *Aconite* 200 on the direct aetiology 'Ailments from fright', and she reported that everything cleared up within a few hours.

Sometimes a direct aetiology will simplify cases that may otherwise prove difficult to treat. An example I saw was a woman in her mid-fifties with a small breast tumour which had been diagnosed as cancerous. She was naturally in a state of great anxiety and was due to have surgery in a few week's time. On taking her case I found her general health to be good and she was constitutionally very strong. I discovered that the tumour had been preceded by an injury to the breast, which had been badly bruised. As the bruising slowly subsided, the lump made its appearance right on the site of the injury. With such a clear aetiology, in a person of previous good health, I felt there was a good prognosis under homeopathic treatment.

As far as I could determine from the literature there are only two remedies known to have cured tumours following injury to the breast - *Bellis perennis* and *Conium*. Being unable to differentiate them on the symptoms present, I proceeded to give *Bellis* 6 t.d.s. for a fortnight. After a few days treatment she developed intolerable itching on her hands, face and eyes, so she stopped taking the remedy. The itching quickly disappeared, but the lump was absolutely unchanged.

My interpretation was that this was a partial proving of *Bellis*, as no curative result was obtained and the itching was not a return of an old symptom. Given that there were only a few days left before the date of the operation, I decided to play my only remaining card and give her *Conium*. A look in my remedy kit revealed *Conium* 6 and *Conium* CM - these were the only two potencies I had available! Seeing that we had little to lose and she was virtually resigned to having the surgery, I gave a dose of the CM with bated breath. The result was that when she went to have the operation a few days afterwards the tumour couldn't be found, much to her embarrassment, the surgeon's disappointment, and my delight!

Hidden or Suppressed Aetiology

In some cases there existed at one time a clear cause and effect relationship between trauma and disease-image, but owing to the passage of time or as a result of suppressive treatment, that relationship has become obscured. These may present as difficult cases which either do not display a clear prescribing image, or where symptomatically-indicated remedies only palliate. In such a case it may be necessary to trace the origin of the problem carefully to see if there is a hidden aetiology that has been overlooked. If such is found, a

prescription based on the aetiology and the symptoms *which used to be present* may be the curative remedy.

Case Examples

One of the best examples of this method is found under the *Mezereum* picture in Tyler's *Homeopathic Drug Pictures*². Here she relates a case of deafness cured by Carroll Dunham with *Mezereum* 30, the prescription being based on a skin eruption that had been totally suppressed years previously, and of which no trace was apparent. Ignoring the deafness, which had no distinguishing symptoms, Dunham obtained details of the skin eruption that had preceded it and found the remedy most similar to those original symptoms, even though they were now completely hidden. *Mezereum* was prescribed retrospectively and proved to be the curative remedy.

Another favourite case of mine which is worth studying in this regard is related by Dr. Allen in his *Materia Medica of The Nosodes*³. This is a case of impotence which Dr. Wesselhoeft had failed to cure with his best prescriptions. Finally, the patient visited the great Adolph Lippe, who's careful questioning revealed that the man had suffered diphtheria ten years previously which had been allopathically treated, and he had never fully recovered. The nature of the diphtheria attack was that it went from one side of the throat to the other, then back to the original site. On this keynote and the fact that the diphtheria attack seemed to have directly preceded the man's troubles, Lippe prescribed *Laccaninum* CM and cured the patient, impotence and all.

I treated an eight year old girl suffering with headaches, catarrh, adenoids and partial deafness. Symptomatic and miasmatically indicated remedies produced little response, so I questioned more closely about traumas in the past. It transpired that the girl had been concussed as a baby, had broken her arm in a fall three years previously, had fallen and injured her face one year ago and had recently tumbled down an entire flight of stairs, banging her head on the way. On this basis I prescribed a single dose of *Arnica* 10M which resulted in a complete cure of all the symptoms, and she became less liable to fly off the handle as well. I have also used *Arnica* successfully in children of various ages where there was a history of a physically traumatic birth, particularly a forceps delivery, when indicated remedies had failed to act.

Indirect Aetiology

There are two main types of indirect aetiology. The first is where a person has been in a certain environment, family dynamic or any other life or work situation which has, *over a period of time*, lowered that person's level of health

and has contributed to their becoming sick. For example, a sensitive child who was bullied occasionally at school, was afraid to tell anyone, gradually lost his self-confidence, and now suffers with timidity and a fear of new situations. If the presenting state had resulted directly from a single incident, then it would be a direct aetiology, perhaps 'ailments from fright' or 'ailments from mortification'. The cause and effect relationship is not that clear however, so the presenting symptoms would be a more reliable guide to the prescription in this case, taking into account the circumstances which have been contributory.

The second type is where a person had an illness or possibly an operation at some time which lowered their general state of health, although they may appear to have fully recovered. As a result of this they become susceptible to new problems which start to manifest over a period of weeks or months.

For example, I treated a woman who had glandular fever in her teens from which she seemed to recover. Gradually however, over a period of many months, she became far more susceptible to colds and influenza, each bout leaving her a little more debilitated than the previous one. The following year, the colds started to settle on her chest and she suffered bronchitis three times in succession. The point to take note of is that the problems she presented with did not *directly* result from the glandular fever. Rather the original illness left a residual weakness which eventually manifested in new health problems.

In cases where there is an indirect aetiology, usually there is a lapse of time before any new problems start to manifest, whereas direct aetiologies tend to produce a much more rapid and obvious alteration in health. With indirect aetiologies, the presenting symptoms should always take precedence over the original stress for purposes of prescribing, but the stressful situation, if known, will often help to confirm the remedy picture. Often in constitutional prescribing, the circumstances and events of childhood, taken collectively, will help to confirm the indicated remedy. As an example, many adult patients who require *Aurum* constitutionally are found to have been pressured to succeed by their parents, or were forever trying to keep up with an elder sibling who was the apple of their parents' eye.

Multiple Aetiologies

Chronic cases often contain multiple aetiologies in the history, each of which has added something to the picture that finally presents itself for treatment. It is helpful for understanding and treating these cases if a timeline is drawn showing the chronological sequence of events (see Layers).

Where a specific drug or toxin has created the presenting image, and an indicated remedy cannot be found or fails to cure, a tautopathic prescription is often of great benefit (see Tautopathy). Where a specific illness has left a never-been-well-since situation, this can be said to be an acquired miasm (see Miasms).

One of my favourite cases in the entire homeopathic literature illustrates beautifully the use of multiple aetiologies as a basis for the prescription. It was originally submitted to *The Homeopathic World* in 1924, and is reprinted in Clarke's *Prescriber*⁴ on pages 55-58. I am not going to retell the tale here but would hope that the reader will be tempted to seek out the reference and study the case closely.

Repertory Updates

When a remedy prescribed on the basis of symptom-similarity cures a condition dating from a particular trauma, it is important that it be added to the appropriate rubric in the repertory if it is not already there. For example, I have seen *Antimonium tartaricum* cure several pathological states in children which arose following vaccination, and now have this remedy added to my repertory under the rubric 'Vaccination, ailments after'.

We should also be creating new aetiological rubrics relevant to the stresses and traumas peculiar to our twentieth century lifestyle. One such example which I have entered in my repertory is 'Contraceptive pill, ailments after'. This rubric contains *Arnica*, *Folliculinum*, *Natrum mur.*, *Pulsatilla* and *Sepia*, all of which I have verified clinically in this situation, and I am sure other remedies could be added.

Ideally we should have a clinical database to which any practitioner may contribute and from which everyone would benefit enormously, otherwise most of the invaluable clinical wisdom relevant to our age will disappear for ever.

Further Reading

Dr. Eswara Das & Dr. Radha

Synopsis of Homeopathic Ætiology - A Complete Work on Causation

World Homeopathic Links, New Delhi-110055, India

D. M. Foubister

Tutorials in Homeopathy

Beaconsfield Publishers, Beaconsfield, England

Dr. P. Sankaran

The Importance of Ætiology in Homeopathy (A Symposium)

Homeopathic Medical Publishers, Santa Cruz, Bombay