Miasmatic Prescription: Philosophy & Utility Dr Subrata Kumar Banerjea

The utility and incorporation of miasm in prescribing:

The consideration of miasms is of paramount importance in effective homoeopathic prescribing particularly in this world of multi-suppressions where perceiving a clear picture of disease is becoming increasingly difficult.

Disease pictures can be complicated for several reasons, and the chart below shows the three pictures which may arise. These pictures are expanded upon within this chapter as an important starting point in understanding the value of miasms and miasmatic prescribing in modern homoeopathic practice.

a) Contaminated Picture:

the disease is contaminated or masked (through a lack of expression of symptoms or manifestations due to emotional, physical or iatrogenic suppressions).

b) Conjoint Picture:

the original malady exists upon which symptoms of various drugs are superimposed.

c) Scarcity of Symptoms:

conditions in which it is difficult to ascertain
a totality of symptoms,

i.e. one-sided diseases such as insomnia, migraine, fatique syndromes etc.

a) Contaminated Picture:

The disease picture is contaminated by various forms of suppression, which can be recognised in either of two ways:

- i) A lack of expression of symptoms which have been driven inside by heroic suppressive measures.
- ii) A contaminated picture formed by the original disease together with a lack of expression caused by physical or emotional suppressions. E.g. an extrovert receives disappointing news and their natural inclination is to sob loudly to recover. Circumstances however forbid this and they are forced to bottle up their feelings their emotions therefore become suppressed.

b) Conjoint Picture:

In these cases, the symptoms of the original disease are superimposed with symptoms of the artificial drug disease. Conjoint pictures may arise as follows:-

- i) The original disease is joined by an artificial chronic disease (due to allopathic medical malpractice §78).
- ii) The original disease is joined by an artificial chronic disease (due to homoeopathic medical malpractice, e.g. as in cases of polypharmacy, too frequent repetition of doses or the usage of combinations where the action of such applications has not been proved on healthy human beings.
- iii) The original disease is joined by an artificial chronic disease produced by vaccinations and serums.

c) Scarcity of Symptoms:

A scarcity of symptoms will be apparent in cases of 'one-sided disease', of which Hahnemann makes us aware in §173 of The Organon. These are diseases with too few symptoms, such as insomnia, anorexia and cases of hyperactive, restless children. They also include the so called modern illnesses such as Chronic Fatigue Syndrome, where there are only one or two symptoms showing on the surface of the case. In a case of insomnia, for example, where loss of sleep is due to anxiety and nothing more, we are unable to make a totality. We cannot prescribe successfully on the basis of one or two symptoms and it is due to suppression that only one or two symptoms are visible. It follows therefore, that the manifestations and expressions of the patient must have been suppressed.

We know that in the modern world, the causes of suppression are many. They do however fall into the three main categories as follows. Examples are given under each category although it should be noted that these examples are by no means exhaustive.

Physical Suppressions

e.g. suppression of perspiration by antiperspirants.

Emotional Suppressions

e.g. broken relationships; disappointments in love; pecuniary embarrassments.

latrogenic Suppressions

- i) Suppressions by non-homoeopathic remedies e.g. antibiotics, steroids etc.
- ii) Suppressions by homoeopathic medicines e.g. daily repetition of doses over a prolonged period, polypharmacy, quick alternation of remedies, the use of combinations.
 - iii) Widespread vaccination.
 - iv) Suppressions caused by the use of serums (anti-sera preparations)
 such as the contraceptive pill and H.R.T.

So we can clearly see that manifestations of one-sided diseases are either contaminated, conjoined with artificial disease symptoms, or hindered and suppressed. Clinical experience of the classical prescribers and my own ancestral wisdom has shown that the best way to open up these cases is from the miasmatic viewpoint. That is to say, we perceive the surface miasm and treat it accordingly. The surface miasm itself

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being diagnosed by considering the symptoms showing on the surface of the case as presenting complaints.

Uncovering the Layers:

It is apparent therefore, that it is necessary to understand the soil, the very dyscrasia of the person, and the miasm, which represents the stigma, groove or pollution in the system. This stigma/groove/pollution, call it what you will, can only be corrected through constitutional, anti-miasmatic treatment, and through such treatment, the complete annihilation of symptoms and perfect restoration of health will ensue.

In order to make a miasmatic assessment, we need to uncover the layers of predisposing weaknesses, which can be attributed to the different layers of suppressions. These reflect the miasmatic weakness of the individual.

like to compare these different layers of miasmatic dyscrasia with the lotus flower. The outermost layer or petal reflects the surface miasm, that is, the presenting manifestation of the person. On the basis of the totality of symptoms, together with the miasmatic totality, the constitutional anti-miasmatic remedy is then selected for that presenting totality. This not only removes the surface symptoms but also the corresponding miasmatic dyscrasia, which was being manifested on the surface at that time.

Once the outer layer of the flower is removed the second layer is revealed. This second layer in turn becomes the surface miasm, reflecting a different group of symptoms. Dr. Kent guides us here, stating that there now has to be a change in the plan of treatment. This means that if the previous outermost layer was sycosis (and accordingly an anti-sycotic remedy was given which annihilated all the symptoms of that layer), the next miasmatic layer, which rises to the surface, has also to be addressed by its own presenting symptoms. The totality of the case needs to be reassessed and the next prescription selected on the basis of the totality of symptoms including the miasmatic symptomatology.

The skill of a homoeopathic physician is to recognise the differing layers present as they reveal themselves through the surfacing of symptoms. The remedy they select should not only cover the symptomatic totality as manifested through the surfacing of symptoms in the outermost layer but also the miasmatic totality. In such a way 'layer upon layer of predisposing weakness' can be peeled off, taking with them the layers of suppressions and corresponding miasma, and the miasmatic dyscrasia can be nipped in the bud.

Classical Miasmatic Prescribing: MTEK is a useful memory aid to arriving at a correct prescription.

M = Miasmatic TotalityT = Totality of Symptoms

E = Essence (should include gestures, postures,

behaviours etc)

K = Keynotes (which should encompass PQRS symptoms,

refer §153 and §209 of Hahnemann's Organon)

When the above criteria are considered and the steps below followed, a correct prescription can be made.

Step I Make the miasmatic diagnosis of the case i.e. ascertain the surface miasm.

Step II Assess the Totality of Symptoms + Essence + Keynotes and PQRS of the case and formulate the indicated remedy.

Step III Ensure that the indicated remedy covers the surface miasm, as diagnosed in Step I (refer Miasmatic Weightage of Medicines, the last section of this book).

Step IV Administer the remedy, which encompasses miasm as well as the Totality of Symptoms.

By such a prescription, which covers the miasmatic dyscrasia of the person, the chances of recurrence are eradicated and the axiom of 'rapid, gentle and permanent recovery' (Hahnemann's Organon §3) is encompassed. In cases of one-sided disease with a scarcity of symptoms, the action of the antimiasmatic remedy is centrifugal, and by bringing the suppressed symptoms to the surface allows a proper totality

to

be

framed.

The miasmatic consideration is therefore of great importance as demonstrated in the following example:-

A person is suffering from features of gastric ulcer, which has been confirmed by radiography. As ulceration is syphilitic, the surface miasm is therefore syphilitic also. Let us say that the totality of symptoms (physical, emotional and essence) of the person reflects towards Kali Bichromicum, an antisyphilitic remedy. The choice of remedy is therefore simple, as Kali Bich covers both the totality of symptoms and the surface miasm of this gastric ulcer case. Kali Bich will peel away the outer layer and reveal a second layer underneath. This second layer may manifest perhaps through the appearance of warts or moles on the face, an indication of suppressed sycosis and the next assessment of the case should include this new surface totality. Following Kentian ideology we now know that there needs to be a change in the plan of treatment, that is, the previous syphilitic plan needs to change to a current sycotic plan, and a new anti-sycotic medicine needs to be selected based on the presenting totality

Why Should We Know Miasm?

A thorough dissection and incorporation of miasm in each case will help a homoeopathic prescriber in the following ways:

- (i) A deep acting anti-miasmatic medicine by virtue of its centrifugal action will open up such cases (brings to the surface the suppressed symptoms) where the totality of symptoms cannot be framed due to a scarcity of symptoms (i.e. one-sided cases), and those cases with conjoint or contaminated pictures due to various physical, emotional or iatrogenic suppressions.
- (ii) Also of importance is the value of selecting an anti-miasmatic medicine, which covers the psychic essence, nature and character of the individual in absence of any recognisable totality. For example, a patient presents with insomnia with no distinguishing modalities or other characters to complete the symptom. By ascertaining that person's psychic essence or character (for instance, suspicious, jealous and exploiting in nature, representing sycosis) we can prescribe an anti-miasmatic medicine to cover the insomnia and open up the case. Thus, the anti-miasmatic medicine covers the essence of the person is capable of surfacing the suppressed symptoms and then we can easily frame the totality.
- (iii) To be more confident in prescribing by including the surface miasm of the case in the consideration of the totality, as miasm, the dyscrasia of the person, constitutes a major part of that totality. Miasm and the symptoms are nothing but the two sides of the coin, and one cannot be considered whilst ignoring the

other. In fact, the totality of symptoms cannot be said to be total until and unless the selected remedy covers the miasm.

- (iv) To evaluate the necessity of a change in the plan of treatment or a change of remedy; when few symptoms have disappeared after the first remedy has been administered, yet the miasmatic totality shows the preponderance of the same miasm on the surface as that which was originally covered by the initial remedy. It indicates that the prescriber can stay with that initial remedy, as can be seen from the following example: a patient came with the presenting symptom of facial wart, for which Causticum was prescribed. As this medicine covers the miasm (here in this case, sycosis) as well as the symptom, the wart has fallen off; and the next suppressed layer, perhaps a profuse yellowish leucorrhoea (which was previously suppressed by cauterisation) comes to the surface. This symptom too is a sycotic manifestation, and if also covered by Causticum, then that remedy will totally eradicate the problem. So knowledge of miasm guides us to stay with the remedy and to allow its full and complete action.
- (v) To evaluate the homoeopathic prognosis of the case, as removal of layers of suppression are manifested as clarity of symptoms and also reflected by a quantum jump in the sense of well being. Deep acting anti-miasmatic medicines by virtue of their centrifugal action will remove the layers of suppression which can be evidenced as follows:
- a) A quantum jump in the sense of well being.
- b) Improved energy.
- c) Increased appetite.
- d) Better quality of sleep.
- e) Harmony and tranquillity of temperament.
- f) Stability (in obese people) or weight gain in under weight subjects.
- g) Clarity of the existing or presenting symptoms or even lighter symptoms.
- h) Suppressed symptoms (even of years ago) reappear on the surface and are permanently eradicated.

This reappearance can be in a very transient form, which may not even be visible to the naked eye.

(vi) To fulfil Hahnemann's three injunctions of cure: rapid, gentle and permanent.

(vii)Anti-miasmatic medicines help to clear up the suppressions (in relation to the past); clear up the presenting symptoms from their root or origin (in relation to the present); and clear up the susceptibility to get infection and thereby strengthening the constitution (in relation to the prophylactic aspect or future).

And so we return to the key points of this introduction — the utility and incorporation of miasm in prescribing. Miasm represents the past, the present and the future — the past in terms of the layers of suppression and their removal, the present by the removal of these layers, which leads to a clear assessment of the totality of symptoms, and the future where the patient becomes stronger as a whole and is more able to resist morbific influences. Even in this modern world of heroic suppressions, a proper constitutional, anti-miasmatic treatment is capable of achieving the following results:-

Past

In one-sided cases, the centrifugal action of the anti-miasmatic remedy brings suppressed symptoms to the surface and in so doing allows the proper totality to be framed. A correct anti-miasmatic prescription is also effective in cases where the picture of the disease is either conjoint or contaminated. In such cases, it organises the symptoms and frames a clear picture by removing the blocks.

Present

Removal of the different layers of suppression one after another through changes in the plan of miasmatic treatment according to the presenting surface miasm and corresponding symptomatic totality. Thereby the miasmatic dyscrasias are corrected, which in turn lessen the susceptibility to become sick. Thus we achieve the Hahnemannian ideology of permanent restoration of health.

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Future

Clearance of the miasmatic stigmas and dyscrasias serves to improve the immunity and strengthen the constitution.

The proper miasmatic diagnosis of each case can uproot the underlying cause and nip the bud of increased susceptibility to diseases! Miasmatic prescribing is therefore both curative and preventive.

KEY WORDS AND CRITERIAS:

BASIC CRITERIA OF THE FOUR GREAT MIASMS:

KEY WORD		MIASM	CRITERIAS
IRRITATION		PSORA	LACK, SCANTY & ABSENCE
Either physical or mental			e.g. atrophy, anaemia, ataxia, anorexia etc.
Physical	Mental		
Physical irritation is characterised by itching	Mental irritation leads to mental turmoil characterised by		Therefore any diseased condition characterised by deficiency, scantiness or absence, and all 'hypo' conditions reflect psora
e.g. itching all over the body	e.g. anxiety alertness apprehension (especially of impending misfortune), which manifests as fear. Psora has the most fears of all the miasms.		So deficient immunity resulting in increased susceptibility to catch infections i.e. 'hyper sensitivity' is a psoric criterion.

KEY WORD		MIASM	CRITERIAS
INCOORDINATION		SYCOSIS	HYPER
Either physical or mental			
Physical	Mental		All hypers and excesses are sycotic.
Incoordination in development	Incoordination in the sensorium or comprehension		
Proliferation or excess	e.g. absentmindedness		e.g. hypertrophy, hyperplasia, hypersexuality, excess working
e.g. tumours, fibroids, warts and any growths.	Whilst concentrating on studies the mind is abstracted and wanders off elsewhere.		(workaholics).

KEY	WORD	MIASM	CRITERIAS
DESCTRUCTION & DEGENERATION		SYPHILIS	'DYSES' AND IRREGULAR MANIFESTATIONS
Either physical or mental			
Physical	Mental		All hypers and excesses are sycotic.
Characterised by structural destruction and degeneration	Characterised by destruction and perversion		e.g. dystrophy, dysplasia, dysphagia
i) Ulceration (where there is cellular destruction and degeneration) ii) Pus formation	 i) Love for one's own life is destroyed (suicidal tendencies). ii) Perverted sex and sexual cravings. 		Irregular manifestations such as irregular peristaltic movement resulting in dysenteric spasm and stool, or high systolic and low diastolic blood pressure in
(characterised by degenerated cellular debris)			one individual. Such manifestations reflect irregularity in the circulatory mechanism.
iii) Necrosis (characterised by structural degeneration)			

KEY V	VORD	MIASM	CRITERIAS
DISSATISFACTION		TUBERCULAR	ALTERNATING, PERIODIC, ONE-SIDED AND VAGUE MANIFESTATIONS
Either physical or mental			
Physical	Mental		

		MIASM	CRITERIAS
KEY W	KEY WORD		CRITERIAS
i) Person craves sugar but this makes them sick and they become dissatisfied. ii) Perverted sexual cravings or profuse masturbation make the person exhausted (this is from the syphilitic component of the miasm), or the person enjoys sex but exhaustion does not permit so they remain unsatisfied.	i) Changeable mentality (e.g. wants new clothes, changes occupation, studies, jobs partners etc. very frequently and is never satisfied). ii) Vagabond mentality (e.g. likes to travel often, cannot stay in one place).		i) Alternation — e.g. constipation alternates with diarrhoea. ii) Periodicity — e.g. headache comes on every seventh day. iii) One sided diseases — e.g. insomnia, anorexia, migraine, fatigue etc. iv) Other conditions which present with ill- defined symptoms or too few symptoms. v) All allergic manifestations such as food and dust allergies. vi) All haemorrhages. vii) All recurrent problems.

There are six main sections to this book (MIASMATIC PRESCRIBING) as detailed below:

Part I — Philosophy and Utility of Miasm: Here I have taken the opportunity to discuss the philosophical background of Miasm, and to share my views regarding suppression and the need for miasmatic prescriptions in the modern world. Key words are presented to reflect the miasmatic tendencies.

Part II — Miasmatic Diagnostic Classifications: Starting with the mental symptoms, this is a head to foot schematic classification of the four miasms, including my tips for rapid miasmatic diagnosis. **Part III** — Miasmatic Diagnosis of Clinical Classifications: In this section I have shared all the possible clinical nosological names under their respective miasmatic headings with a view to enabling fast diagnosis of the corresponding miasm.

Part IV — Miasmatic Ancestral Tips: All the tips of my four generations of Miasmatic Prescribers.

Part V — This is a totally new concept, and once again aimed for your quick miasmatic diagnosis.

Part VI — Miasmatic Weightage of Medicines: A comprehensive guide to the weight, value or gradation of the medicines and listings of the leading anti-miasmatics.

Price of the Book:- GBP 25 / US \$ 35 (inclusive postage)

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