

# John Ellis

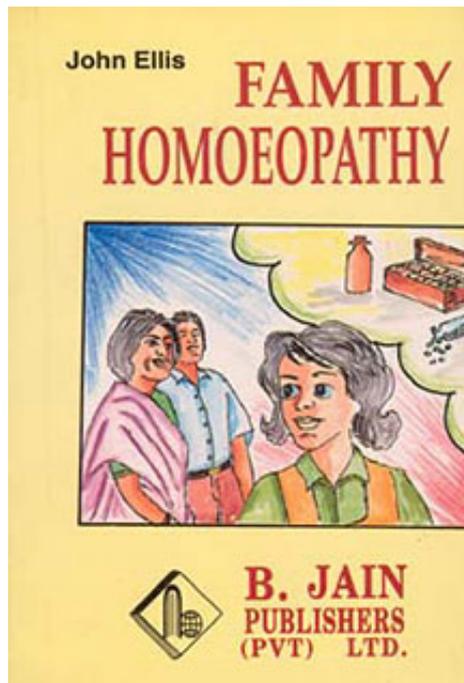
## Family Homoeopathy

Leseprobe

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von [John Ellis](#)

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Tel. +49 7626 9749 700  
Email [info@narayana-verlag.de](mailto:info@narayana-verlag.de)  
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# DOMESTIC HOMOEOPATHIC PRACTICE

## CHAPTER I

### FEVERS

No class of disease has attracted more attention, or has been the subject of more speculation, than febrile diseases. As this is a practical work, I do not intend to spend either much time or space in considering such speculations; but a few remarks on some of the theories which have been prevailed seem necessary, to counteract certain pernicious methods of treatment which are prevalent, having such theories for their foundation. Among the most pernicious of the various theories which have been prevailed will be found the one which ascribes fevers to the fluids of the body, especially to the bile, the phlegm, and blood—to a superabundance of these fluids, or to their depraved state.

The "black bile" was a bug-bear with Hippocrates, the father of allopathy, and his descendants have been bilious ever since; and if we can judge from the common expression so frequently sounding in our ears, "I am

bilious," they have not labored in vain in their efforts to convince the community that an excess of bile is the cause of a large number of their ills, especially fevers. "You are bilious," says the doctor, by which the patient understands that his stomach is filled with bile; and what is more simple, or apparently natural, than to cure this state of things by an emetic or cathartic. If an emetic is given, the first effort of vomiting may not reach the bile, simply because the stomach contains none; but by the efforts of vomiting, and the irritation caused by the emetic, the inverted action which has been established in the stomach extends to the upper portion of the intestines, below the entrance of the gall duct, and the bile, which should flow down through the bowels to aid in the process of digestion, passes up into the stomach, and is thrown up; and the more the patient vomits the more bile he discharges, until he is astonished to think he was not sick before, from being so bilious. So the poor patient is humbugged into the belief that he is bilious through his own senses; the doctor makes him a convert to his sagacity and method of practice, but he fails to show his poor deluded victim how the throwing off of the small quantity of bile which is secreted for an hour or two during the operation of the emetic, is to furnish any permanent relief, or prevent its continued secretion; but as, after the action of the emetic is over, the bile pursues its usual course, and does not trouble the patient more than heretofore, he is satisfied with the wonderful skill of his doctor. Even if there is an excess of bile secreted, the fault is with the liver, and remedies should be given to correct its deranged action; simply evacuating the stomach and bowels by emetics and cathartics amounts to little, except to do injury. Although priding only a few of the most intelligent physicians of the dominant school are beginning to make the discovery that

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blood-letting exercises little or no control over febrile or inflammatory diseases, except for injury-often exhausting the vital energies, and destroying the power of resistance which is so much needed at the critical stage of the disease.

Hoffman and Cullen introduced the nervous theories of fever. Hoffman taught that the chill is caused by a spasm of the capillary, or most minute blood-vessels, and that the heat and excitement which follow are but the reaction of the system to overcome this spasm. But there would seem to be much greater evidence of a collapse of the minute blood-vessels than of spasm. The nervous theories, in a great measure, overthrew the theories founded upon the blood and secretions, but, as we have seen, did not destroy the methods of practice founded upon them, for the latter continue to this day. Having said this much in regard to the theories of the past, I shall allow all theories to rest in the grave with their authors, for they are of no practical value. The homoeopathist has a practical law to guide him in the selection of his remedies, and so strong is my confidence in the superiority of the system for the treatment of all febrile diseases, that I would rather trust an intelligent layman, with simply a good domestic work and case of medicines to treat me, than to risk the treatment of the best allopathic physician in the world, in any febrile disease.

We have what physicians call idiopathic fevers; by which are meant diseases which are essentially and primarily febrile diseases, and do not depend upon local disease. Among the fevers of this class we have ephemeral fevers, typhus and typhoid fevers, intermittent, remittent, and yellow fevers. During the course of such diseases, local congestions, and even inflammation, may

supervene; but these local affections are secondary—rather the consequence of the fever than the cause of it. We have also symptomatic fevers, or fevers which are caused by local inflammation or local disease. Such fevers sometimes assume a typhoid or an intermittent, form during their course, or become complicated with latter affections, especially when they occur in localities where, or during seasons when, typhoid or intermittent fevers are prevailing. Then we have eruptive fevers.

#### EPHEMERAL FEVER

This consists of a single paroxysm of fever, commencing generally with chills, pains in the head, back, and limbs, followed by fever, attended by the latter symptoms, and terminating, in the course of twenty-four or forty-eight hours, in a profuse perspiration, or some other critical discharge, such as a profuse flow of urine, or a diarrhoea. This is a very common disease, especially during the prevalence of other febrile and eruptive diseases. It is not improbable but that the causes which produce such fevers acting on constitutions partially protected against them, or which are not very susceptible, may produce simply this ephemeral fever; as it is more common, as has just been noticed, during the prevalence of other febrile affections. It is not always easy to distinguish this disease from the commencement of other febrile diseases, except by its duration, and this is of no great moment, as we always select our remedy by the symptoms which exist, and not by the name of the disease. It may also be caused by exposure, sudden changes of temperature, errors of diet, mental emotions, &c.

*Treatment.*- *Aconite*, if the skin is hot and dry, the

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pulse full and hard, and the face flushed, is the proper remedy. It may be given in solution every hour until perspiration ensues.

Dose, see page 7.

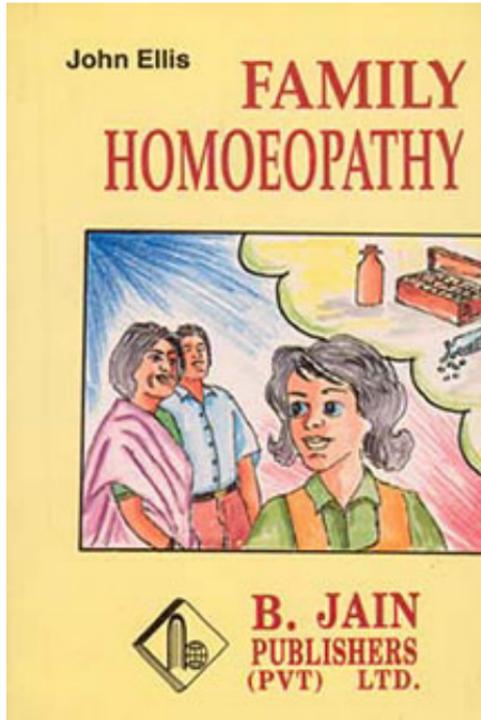
*Bryonia* : If typhoid or typhus fever is prevailing, or if the pains in the head are dull, and the hands and feet disposed to be cool, *Bryonia* may be given instead of *Aconite*, or it may follow the latter remedy at the end of twelve hours, and be repeated once in four hours.

*Belladonna* may be selected instead of *Bryonia*, and given once in two hours, if the pains in the head are sharp and cutting, the eyes red, with sensitiveness to light and noise; and if there is delirium.

A warm bath, when it is convenient, or simply bathing the feet in warm water, if great care is used against exposure afterward, will be useful. A glass of cold water, or even of hot water, milk, and sugar, and covering up warm in bed, will often afford considerable relief, by aiding the *Aconite* in promoting perspiration.

## TYPHUS FEVER.

Very little is known in regard to the cause of this disease. It occurs most frequently in situations where persons are crowded together, especially when there is added to this, unwholesome food and vitiated and confined air, as aboard ships, in crowded hospitals, prisons, camps, and large cities. But this disease not unfrequently occurs in country places, and even in mountainous regions, and also among those who are well housed and fed, and who pay the utmost regard to cleanliness. It is supposed to be, to a limited extent,



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