

Maurice Fortier-Bernoville

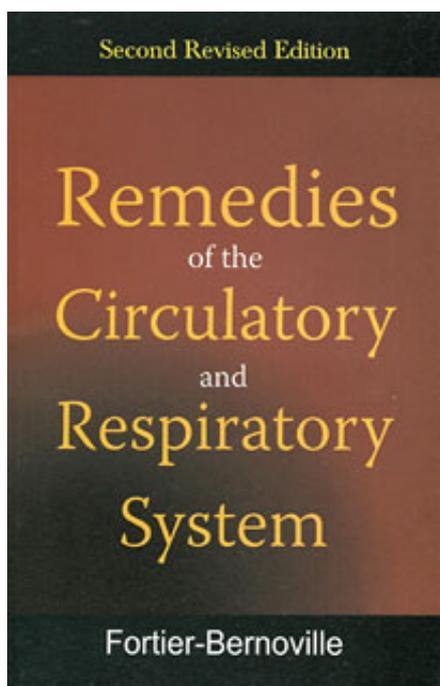
Remedies of the Circulatory and Respiratory System

Leseprobe

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von [Maurice Fortier-Bernoville](#)

Herausgeber: B. Jain



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INTRODUCTION

This book needs no introduction. It was written by one of the most famous homoeopaths of France, who was a doctor of medicine in a French university. In France, the government does not officially recognise homoeopathy. Homoeopathy is taught by some private colleges and schools established by different homoeopathic societies. The courses are meant for people who have already obtained their Doctorate in medicine. However the government has incorporated homoeopathic pharmacology in their official codex and have clearly specified the preparation of medicines according to the method of Dr. Hahnemann, which was necessary to eradicate the various methods of preparing homoeopathic dilutions. The medicines, thus prepared are placed in the market *only after they are passed by the laboratory run by the government for this purpose*. The government has completely banned serological, and isopathic medicines.

In this book, the readers will find the use of the combination and mixture of dilutions, a system which is widely followed by a large number of homoeopaths in France. According to them, a similimum remedy should in most cases be followed or preceded by simile remedies which are generally complimentary or are antidotes or remedies having elective local actions. This is not new in homoeopathy, nor contrary to the principles of homoeopathy, because during the provings it was evident that the primary action of a drug is almost always local and the secondary action is more general than local.

We must not forget that analogy has different facets : *Palliative symptomatic analogy; physiopathological analogy of syndroms and microbial or lesional analogy*.

Dr. Hahnemann despised the degraded law of analogy and always recommended the prescription on the totality of symp-

toms, but in practice, he nevertheless, precluded degraded analogy, by introducing in some of his pathogenesis, the pathological or specific tissue affinity of medicines. Even Dr. Kent himself, whose pragmatism of Anglo-Saxon race opposed his own dogmatism, has in his repertory carefully collected the statements of this kind.

Dr. Hahnemann and the first experimenters have incorporated in the pathogenesis of remedies all the effects, primary, secondary and even toxic. Thus the law of analogy applies itself to all the phases of the effects of a drug on an organism. Therefore, one can return the complements made to demihomoeopaths who refuse to admit the specific lesional action of some drugs. The theory of Dr. Hahnemann, of the selection of a remedy on the totality of symptoms, wrongly dogmatised by Dr. Kent is, therefore, wrong. The field of action of a drug on an organism according to the lesional analogy depends on the extent of its toxic action and not on the pathogenesis of weak doses alone.

The different faces of the analogy are :

1. The pathogenetic face, neuro-vegetative, endocrinal, humoral and the morbid personality of the patient, where the theory of Dr. Hahnemann about individualisation by the characteristic symptoms, retains its full value.

2. The lesional face with grave anato-physiological disorganisation, comes nearer to the specific toxic effect of powerful poisons and are characterised by analogous objective symptoms from one patient to another. *In this case individualisation is reduced to some local modalities.*

In the intermediary zone is situated, an analogy of physiopathology and well determined syndromes, responding to some minor drugs that have a short field of action or to a local sphere of influence of an important remedy which is capable of covering, in other cases a more extensive similitude. For example:- *Cuprum metallicum* is almost specific for cramps in the

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calves. If we do not apply *Cuprum* based on this specific action, we will minimize the importance of the medicine.

Modern french school has done a lot of reseach on the physiopathology of drugs. It is an interesting path, on the condition that it is not considered with a spirit of scientific mechanism which may present to us, only partially the immense of analogy.

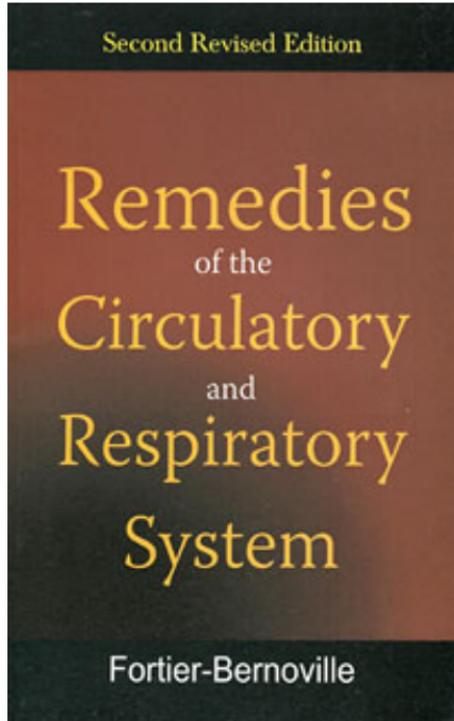
Finally, I must say a few words about using one high and one low dilution of the same medicine or applying them by mixing together. According to the french homoeopaths, the mixing of dilutions aims at checking the devastating action of the eliminatory function of a polychrest.

Moreover, do we really know whether a 6th dilution or a 200th dilution is not a mixed one? After all what does the No.6, or 200 mean? By what method are they prepared? There is no indication of the specification of the drug. The dilutions may have been prepared by the Hahnemannian method, by the Korsakowian method or by the method of continuous flexion or by any one of the so-many existing methods. If it is Hahnemannian (separate phial) it is not a mixed dilution. If they are prepared by continous fluxion or by Korsakowian method, they are mixed and according to the french school of homoeopathy, the Korsakowian method is much more effective regarding the action of the dilutions than those prepared according to the Hahnemannian method. Any dilution from or beyond M or a mixed one because such a dilution is a practical impossibility according to the Hahnemannian principle A CM dilution is nothing more than the 18th Hahnemannian dilution. Hahnemann's, say 30LM is nearer to 100th Hahnemannian centesimal. So we have nothing to boast of a very high Hahnemannian dilution.

I think that it should be the duty of each and every homoeopathic doctor to demand the exact specification of the medicine as on the label from the pharmacists. The pharmacist must mention 6CH instead of 6, meaning, the 6th dilution is

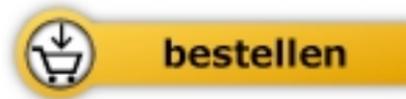
Hahnemannian centesimal and 3XH meaning hahnemannian decimal our. This is what is now enforced by the government of France and it will not be out of place to add here, that our *government would do a lot of good to Homoeopathy by, strictly controlling the homoeopathic pharmacology and introducing it in their medical codex.*

My above statements require explanations. It is not the place to give them. I will try to compile a book on homoeopathic dose and dilution and I hope to put it soon in the hands of my readers.



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[Remedies of the Circulatory and Respiratory System](#)
2nd revised edition

112 Seiten, paperback
erschienen 2008



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