

Review Article

The Role of Posology in the Treatment of Psychosomatic Disorders

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ABSTRACT

Man is the cause of everything that happens to him, the environment being abstracted by him from the circumstance that is. For thousands of years, various cultures have known the connection of the mind and the body, that illness and disease not only originate from external chemical toxins, but from the traumas within the emotional and mental states.

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INTRODUCTION:

Man is the cause of everything that happens to him, the environment being abstracted by him from the circumstance that is.¹ For thousands of years, various cultures have known the connection of the mind and the body, that illness and disease not only originate from external chemical toxins, but from the traumas within the emotional and mental states.

Dr. Samuel Hahnemann in his Organon of Medicine has classified these types of diseases in aphorisms 225-227 under mental diseases and has given guidelines for their treatment. On attempting to treat, even the most similar remedy, however does not become the *simillimum* until the potency is adjusted to the plane of the individual during his or her illness at the time of prescribing.²

Dr. Stuart Close says that, "It may be stated that any curable diseases may be cured by any potency, when the indicated remedy is administered but that the cure may be much accelerated by selecting the potency or dose appropriate to the individual case". Ever since the time of Hahnemann homoeopathic posology represents the accumulated clinical experiences and interpretations of all careful prescribers.³

It is only when we consider the *simillimum* as a form of specific energy aiding the restoration of lost balance, that we are in a position to have an intelligent grasp of the rules governing homoeopathic posology.⁴

This ever changing kaleidoscopic picture presented by homoeopathic posology contrasts well with firm application of the law of similars. The fundamentals of homoeopathic posology are represented in the trinity of a single remedy, minimum dose and minimum repetition.⁴

Hence a clinical study is undertaken based on the potency selection, the dose and the repetition in the cases of psychosomatic nature depending on the expressions of the patient and the analysis done on the overall outcome of treatment.

Psychosomatic medicine is an interdisciplinary medical field studying psychosomatic illness now more commonly referred to as psychophysiological illness or disorder, whose symptoms are caused by mental processes of the sufferer rather than immediate physiologic causes.⁵

History of psychosomatic medicine:

It was Sigmund Freud (1856-1939) who brought psyche and soma back together using memory as the laboratory of the psyche. He demonstrated the importance of the emotions in producing mental disturbances and somatic disorders.⁶

Diagnostic criteria:

The diagnostic criteria given in DSM-IV for the psychosomatic disorders are;

"The factors have influenced the course of the general medical condition as shown by a close temporal association between the psychological factors and the development or exacerbation of or delayed recovery from, the general medical condition, the factors interfere with the treatment

of general medical condition, the factors constitute additional health risk for the individual, stress related physiological responses precipitate or exacerbate symptoms of the general medical condition.⁷

Common characteristics of psychosomatic disorders:

- Emotions precipitate attacks of illness. The emotional changes can increase the severity of an attack or prolong its duration.
- A correlation is observable between the occurrence of stressful life experience and the onset of these disorders or with recurrence of attack during the course of the illness.
- They exhibit a differential sex incidence of e.g. asthma before puberty is twice common in boys as in girls whereas after puberty it is more common in women than in men.
- Peptic ulcer, coronary heart disease and hypertension are more common in men. Thyrotoxicosis and chronic urticaria are more common in women.
- Psychosomatic disorders often run a phasic course. Most of the disorders fulfilling the above criteria show evidence of a genetic and constitutional predisposition.⁸

Some of the common psychosomatic disorders:

Essential hypertension, Coronary disease, Irritable bowel syndrome, Inflammatory bowel disease, Peptic ulcer disease, Ulcerative colitis, Hypoglycemia, Diabetes mellitus, Psoriasis, Amenorrhoea, Immune disorders.⁸

Principles of management:

- Providing a positive explanation of symptoms.
- Ensuring regular follow up.
- Treating with specific therapy when indicated.
- Changing social dynamics that reinforce symptoms.
- Resolving difficulties in the doctor patient relationship.
- Recognizing and controlling negative reaction on counter transference.⁹

Homoeopathic approach:

In his aphorism 225, Dr. Samuel Hahnemann stated “..... The body being but slightly indisposed, originate and are kept by emotional causes such as continued anxiety, worry, vexation, wrongs and the frequent occurrence of great fear and fright. This kind of emotional diseases in time destroys the corporeal health often to a great degree.¹⁰

In his aphorism 227, he has said the fundamental causes if these also is a Psoric

miasm, should be given an antipsoric treatment and also the psychotherapy method should be employed.¹⁰

The psychosomatic aspect forms a portrait of the illness or disease. The homoeopathic Materia medica fits the pieces of huge puzzle after the history taking.¹¹ The homoeopathic posology represents the accumulated clinical experience and interpretations of all careful prescribers since the time of Hahnemann.⁴The general rule in chronic diseases is not to repeat a remedy till improvement continues and also is said a single dose acts continuously brings complete cure.¹⁰

The reasons for microposology:

An observation of the greater power of a medicine when given in solution.

An observation of greater power of given quantity of medicine when given in divided doses.

An observation of greater susceptibility of diseased organism.

The increase in power of medicine by thorough admixture of it with a non medicinal vehicle by means of succession.

A desire to avoid aggravation of the disease by the larger doses.¹²

R.E. Dudgeon.

People with nervous sanguine temperament, constitutions with advanced pathological changes and people with lowered vital force need the highest potency. Constitutions with moderate pathology with strict mental and emotional disease, who has temperate reactions to food, need the medium potency. Constitutions who have high tolerant drugs, diseases present on functional level and patients with lower mental reaction time need the lowest potency.¹³

Luc De Schepper

Implication of posology in different approaches required in different cases. It is decided based on careful analysis of various entity, such as susceptibility, sensitivity, suppression, correspondence of constitutional, sector, and intercurrent remedy, functional and structural changes, variations with time, general vitality and presentation.¹⁴

M. L. Dhawale

The rule in repetition is never to repeat or change the remedy while the patient himself is improved.²

Elizabeth Wright

Kent has put forward his 12 observations for the analysis of remedy reactions after the prescriptions. He says that the disappearance of symptoms, the increase of symptoms, the amelioration of symptoms, the order of the symptoms are all changes from the remedy and these are to be studied.¹⁵
James Tyler Kent

The quantity of action required to effect any change in nature is the least possible. The decisive amount is always a minimum or infinitesimal.¹⁶

Herbert A. Roberts.

Five considerations influence us in the choice of the dose;

- The susceptibility of the patient.
 - The seat of the disease.
 - The nature and intensity of the disease.
 - The stage and duration of the disease.
 - The previous treatment of the disease.³
- Stuart Close.

Each person has an optimum potency. If the optimum is 12c start at 6c. By starting at 6c a tolerance is built and the healing is gentle, rapid and permanent.¹⁷

Robin Murphy

.....the preparations of trituration, the further, the development of their power is thereby brought and the most perfectly capable they are thereby rendered for display their power becomes capable on answering the homoeopathic purpose in proportionately smaller quantities and doses.¹⁸

Lesser Writings of Samuel Hahnemann

REFERENCES

- 1.The ICR Kalpa- Taru series. Research in education philosophy and technology. Mumbai: Institute of Clinical Research; p.14.
- 2.Wright Elizabeth. A brief study course in homoeopathy .New Delhi: B Jain Publishers (p) Ltd.1995.p. 48.
- 3.Close Stuart. The genius of homoeopathy. Reprint ed. New Delhi: B Jain publishers (p). Ltd; 1999.p.191.
- 4.Dhawale ML. Principles and practice of homoeopathy. 2nd ed. Bombay: Institute of Clinical Research; 1985. p.402.
- 5.http://en.wikipedia.org/wiki/psychosomatic_medicine. 9-11-2008
- 6.Abrams C Robert, Adams L Russell, Agras Stewart, Agronin E Mare, Akiskal S Hagop, Aladjem Asher Dorell et al. Comprehensive

textbook of psychiatry. 8th ed. USA: Lippincott Williams and Wilkins; 2005.p.2109.

7. Sadock James Benjamin, Sadock Alcott Virginia. 10th ed. USA: Lippincott Williams and Wilkins ; 2007. p.814.

8.Bhatia MS. Essentials of psychiatry. 3rded. New Delhi: CBS Publishers and Distributors; 2000 .p.172.

9.Abbey E Susan, Arnold M Lesly, Barnes D Roxame, Bambardier H Charles, Bostwick John M icheal, Breitbart William et al. Arlington: Panther Publishers (p) Ltd; 2005.p.278.

10. Sarkar BK. Hahnemann's organon and medicine. 9thed. New Delhi: Birla Publications; 2004.p.415.

11. http://www.shirleys-wellness-café.com/homeopathy-psychosomatics_gina.htm 9-11-2008

12. Dudgeon RE. Lectures on the theory and practice of homoeopathy. Reprint ed. New Delhi: B Jain Publishers; 1997.p.397.

13. Schepper De Luc. Achieving and maintaining the similimum. New Delhi: B Jain Publishers; p.53.

14. Dhawale ML. ICR operational manual. 2nd ed. Mumbai; M.L. Dhawale Memorial Trust; 2003. p.102.

15. Kent J T. Lectures on homoeopathic philosophy. Reprint ed. New Delhi: B. Jain Publishers; 1999 .p. 225.

16. Roberts HA. The principles and art of cure by homoeopathy. Reprint ed. New Delhi: B Jain Publishers; 1999 .p.120.

17. Murphy Robin. Hahnemann's organon of medicine. New Delhi: B Jain Publishers; 2004. p.287.

18. Hahnemann Samuel. Lesser writings of samuelhahnemann. New Delhi; B Jain Publishers; 1984. p.733.