

Analyzing the Phosphorus Medication Critically in Order to Understand Its Various Miasmatic Presentations Through Examples from Clinical Practice

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ABSTRACT

The true natural chronic diseases result from a chronic miasm and, when left untreated with remedies designed specifically for them, always worsen despite the best physical and mental care, tormenting the patient until the end of his life with increasingly painful symptoms. The most robust constitution, the best-regulated way of life, and the strongest vital force energy are not enough to eradicate them unless they are treated with anti-miasmatic remedies. This speaks clearly to the importance of understanding the concept of miasm and, therefore, its applicability in clinical practice. In view of the above facts, this study is aimed at learning about different miasmatic expressions of the phosphorus drug through 30 clinical cases. This study concluded that the trimiasmatic nature of phosphorus showed miasmatic expression out of the psora in 10 cases. psoro-syphilitic miasm in 11 cases psoro-Sycotic in 6 cases and psoro-syco-syphilitic in 3 cases.

Keywords: Phosphorous, Miasm, Constitution, Homoeopathy.

INTRODUCTION

The early days of Hahnemannian Homoeopathic practice was based on a more mathematical comparison of symptoms of disease and drugs, while other segments like miasm were given lesser significance. In the course of his years of experience, Hahnemann evolved a series of new thoughts that were incorporated into the

practice from time to time. One such theory that proved Homoeopathy different from other sciences with special reference to causes of disease is the miasmatic theory, though many physicians of his time have criticized this Hahnemann theory of miasm as a phenomenon of grand generalization in respect of causes of disease. But further years of his clinical practice have proved the validity, applicability, and relevance of the theory of miasms in approaching the disease. Thus, it has become an integral part of the structure of homoeopathy, with special reference to understanding the disease and the consequent selection of drugs. It was further confirmed by followers of Hahnemann that the theory of miasm has truly helped in the analysis and interpretation of natural disease.

Aims and Objectives

- Critical study of Phosphorus through the available literature to know different miasmatic expressions.
- Practical understanding of its various miasmatic expressions through clinical cases.

REVIEW OF LITERATURE

Dr. Hahnemann came to the conclusion that homeopathy could not provide a "real cure" for some ailments after 30 years of homeopathic practice. He noticed that symptoms frequently got better for a short

while before coming back at a later time. This piqued his interest and got him thinking about the reasons these errors might have occurred. The possible causes that were taken into account were as follows:

- The Law of Similars might not be universally applicable.
- There could be some flaw in the application of the Law of Similars.
- The numbers of drugs till date were inadequate to cover all the diseases
- When calculating the full spectrum of symptoms, there may be some mistake.
- There might be some obstacles that persisted, which hindered cure.

By excluding other possibilities and using logic and reasoning, Hahnemann came to the conclusion that specific barriers were to blame for relapses and failures. He then conducted a thorough analysis of the chronic cases, and after 12 years of research, he concluded that chronic diseases are brought on by chronic miasms. Miasm is a nasty disease-producing organism that is hostile to life and dynamic in nature. He established the miasm theory and gave the miasms the names Psora, Syphilis, and Syphilis.

PSORA:

Psora, the mother of chronic diseases, accounts for 80% of chronic diseases. It is an internal illness causing skin eruptions and should not be treated with external medicines. Hahnemann advises complete treatment to prevent its existence until death. Psoric personalities are quick-thinking, attentive, and cognitively active, but often exhausted physically and mentally. They worry about death, health, and failure, leading to physical signs like itching and breakouts. Psora is followed by syphilis and syphilis.

SYCOSIS:

While gonorrhoea is an acute gonococcal infection that arises after exposure, syphilis develops after gonorrhoea has been suppressed and the acute infection has

been driven into the vital energy by external suppression methods, creating a systematic stigma that permeates every cell of the living organism. Syphilitic personalities are incredibly wary, envious, vengeful, and argumentative. In their thinking, they are inflexible and fixated. Physical signs include gonorrhoea, warts, and other conditions.

SYPHILIS:

Syphilis is a relatively new illness that spreads through sex. It manifests as chancre and causes vaginal eruptions that discharge. Meanwhile, the miasm Syphilis is a fatal toxin that, once it enters the body or is suppressed, begins to consume the body, killing tissues and changing the structure of bones, ligaments, and other structures. Psora or syphilis that has been present for a long time might develop into syphilis, which has severe symptoms

Syphilis patients exhibit violent, suicidal, sadistic, criminal, and antisocial personalities, with physical symptoms worsening at night and requiring effective anti-miasmatic medication for cure.^[1]

MIASMATIC CONCEPT

As it may be seen there are certain advantages in defining the patient by his miasms.

- It helps us comprehend the serious pathologies that we will inevitably face at some point and that we have a responsibility to bring to light. So, that it will be accessible to the correct treatment seeking a true cure.
- Examining constitutional miasmatic factors that cause dysfunctions and lesions provides a prognosis based on the patient's behaviour and traits. These factors include bio pathography, pathological history, and life phases, as well as successes, setbacks, dispositions, and social preferences.
- Assess the patient's Psoric imprint of deficiency on behaviours and ideas, including skin colour, body shape,

expressions, and gaze. Understand the Sycoitic excess engraved on later generations and determine the extent of syphilitic miasms corruption in physiological and spiritual life. This will elevate the doctor's profession and free them from being mere symptom removers, allowing them to elevate their profession to its rightful dignity.

- The sum of the symptoms will not represent their whole number, but rather their sum in accordance with the predominating miasm. This makes up the actual and practical totality.
- The miasm must be understood in its broadest sense as a true chronic disease that will inevitably give rise to various illnesses, including deficiency, excess, or perversion recognizable in the organic changes as well as in the mental and emotional spheres. The "true Similimum" method can help alleviate a significant portion of a person's miasmatic burden by addressing the totality of symptoms.

A homoeopathic prescriber will benefit from a thorough analysis and assimilation of miasm in each instance in the following ways:

- By virtue of its centrifugal action, anti-miasmatic medicine can be portrayed as opening up cases (bringing suppressed symptoms to the surface) where the full spectrum of symptoms cannot be framed due to a lack of symptoms (i.e., one-sided cases) and those cases with conjoint or contaminated pictures as a result of various physical, emotional, or iatrogenic suppressions.
- Considering surface miasm in the totality of the case increases prescribing confidence, as miasm and the symptoms are simply two sides of the same coin, and neither can be taken into account without the other.
- Miasmatic totality indicates the prescriber can continue using the initial remedy if the miasm remains on the surface, despite few symptoms disappearing after administration.

- Adhering to Hahnemann's three injunctions of cure: rapid, gentle and permanent, 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 there by strengthening the constitution (in relation to the prophylactic aspect or future).^[2,3]

The use of miasmatic medicine or intercurrent medicine in treating the chronic condition is difficult without understanding the miasm. Certain authorities or practitioners demand that there be some miasm in the background of every case, and that miasm become active in any form of the disease. Therefore, if miasmatic treatment can be used on these individuals, they will have a long-lasting recovery.^[4] It will appear that some medications exhibit the basic symptoms of psora, some of sycosis, and some of syphilis if the medications are thoroughly examined from a miasmatic point of view. If you can learn the general features of these miasms, treating any chronic case will become enjoyable. It will also appear that some of them have a combination of the general symptoms of two or even all three miasms.^[5]

MIASMATIC NATURE OF PHOSPHORUS BY VARIOUS AUTHORS:

J.H. CLARKE

Suitable for tall, slim individuals with a sanguine temperament, pale skin, fine blond or red hair, rapid perceptions, and a highly sensitive character. Phosphorus is, in my opinion, the best storm-effects remedy.^[6]

H.C ALLEN

Young adults with tall, slender, and fast expanding lungs are more frequently guided to the correct treatment by phosphorus.^[7]

T.F ALLEN

The tickling cough reappeared (eighteenth day) and was followed by expectoration of

bright red; the lungs were free on deep inspiration, and the pulse was not feverish; on account of this, I took Phosphorus, and the spitting of blood did not return that day.^[8]

ANSHUTZE P

Impotence, caused by excessive masturbation or venereation, can be treated through clean living, outdoor activities, and proper nutrition. Phosphorus medications are effective.^[9]

BAELY PHILLIP.M

Phosphorus is extremely open to the feelings of others and is also just as open about her own feelings. Natrum closes off in order to protect herself, both from being hurt and from feeling too much of others' pain.^[10]

C F S HAHNEMANN

One of the most important and main antipsoric treatments is phosphorus when adequately potentized.^[11]

J T KENT

Phosphorus can cure scrofulous disease-related nose polypus, pleurisy, chest colds, nasal catarrh, and coryza in youngsters with scrofulous disease.^[12]

PSOROSYPHILITIC EXPRESSION OF PHOSPHORUS:

The patient presents with a depressed mood, obstructive behaviour, headaches, twitching pain, ear infections, ulcerated nostrils, twitching pain in two hollow teeth, painful twitching tearing in the roots of the right upper molars, and twitching in the teeth every day. They also experience twitching pain in the gums above a carious tooth, a sweet taste in the throat, and a strong aversion to boiled milk. The patient also experiences severe burning in the stomach, convulsions, cold limbs, clear, watery eyes, pale lips, a weak pulse, a decrease in strength, and death. They also experience stiches in the left hypochondrium, hepatic region, and right hypochondrium. They also

experience shaking into the abdomen, hard stool, soft stool, small ulcers on the prepuce, coughing up pus, translucent coppery spots, and a general great, sudden prostration. The patient experiences sleeplessness and restlessness in the evening, pain in the external ear, and violent stitches through the ear and teeth. The patient experiences weariness in the morning upon rising.

PSOROSYCOTIC EXPRESSION OF PHOSPHORUS:

The patient is troubled, reserved, and meditative, experiencing a range of symptoms. They experience a chaotic headache, paleness of the face, painful lumps on the inner side of the cheek, frequent pinching in the abdomen, and a tumour in the inguinal region. They also experience soft stools in the evening without accompanying trouble. Diarrhoeic stool, with tenesmus in the anus, is relieved by drinking coffee. The patient experiences itching in the rectum, tickling, itching, and urination. They experience difficulty with the discharge of urine, acrid urine, burning in the urethra, and unusual excitation in the genital parts. They experience complete impotence and no more erections after menses have been intermitted for a year and a half. They experience ill-feeling during menses, with pains in the back, neck, and abdomen. They also experience slimy leucorrhoea, acrid leucorrhoea, and strongly flowing leucorrhoea for seven days. The patient experiences asthma, palpitations, and increased secretion of perspiration and urine at night.

SYCOSYPHILITIC EXPRESSION OF PHOSPHORUS:

Forgetful, stupid individual experiences yellow mucus, blood expulsion, cough, chest pain, and chest and abdomen pain.

PSOROSYCOSYPHILITIC EXPRESSION OF PHOSPHORUS:

The patient experiences peevishness, distraction, forgetfulness, dizziness, stitching and tearing pain in the right

eyeball, tearing in the right ear, and paleness of the face. They also experience tearing under the right ear, abdominal pain, and sour-smelling feces. They also experience stools with little faeces', blood from the anus, and mucus lumps mixed with soft stools. They experience blood discharge during a stool, blood from the rectum, and tearing pains in the rectum and genitals. They experience pollution, severe colic during menstruation, and tearing pain in the pudenda. They also experience frequent violent palpitations, beating and tearing in the right scapula, and tearing in the nape and arteries of the right side of the neck. Chilblains form in March, and blood is discharged from various parts of the body. [11,13]

MATERIALS & METHODS

Source of data:

- Literary source: Symptomatology is considered from the source book of the chronic diseases their peculiar and their homoeopathic cure by Dr. Hahnemann.C.F.S. and Miasmatic expression from Chronic Miasms in Homoeopathy and their cure with classification of their Rubrics/symptoms in Dr. Kent's repertory (repertory of Miasms)" by Dr. Patel. R.P
- Clinical source: The cases treated by PHOSPHORUS will be taken from OPD and IPD of MNR Homoeopathic Medical College & Hospital, Sanga Reddy, for this study to evaluate the miasmatic role.

Type of study: Experimental study

Sample size: 30

Inclusion criteria:

1. Patients of all age groups and both sexes will be selected.
2. Cases under the scope of Homoeopathy and relevant to the study.

Exclusion criteria:

1. Patients with diseases of pathological changes and rapidly progressing disease.
2. Patients who are under other modes of treatment.

Proposed Intervention:

Depending on the patients' susceptibilities, different potencies of Phosphorous are administered.

Data collection:

A pre-designed case proforma is used to collect data.

Assessment of Result:

Effectiveness of treatment was assessed by following criteria.

- Marked Improvement: Feeling of mental and physical wellbeing with complete disappearance of local symptoms and signs with treatment
- Moderate Improvement: Partial relief of symptoms without any substantial change in the physical or mental state
- No Improvement: Cases without any change in symptomatology

OBSERVATION AND RESULTS

1. In this study out of 30 cases (100%), there were 17 male patients (56.67%),13 female patients (43.33%).
2. In this study of 30 cases (100%), there were four cases (13.33%) under the age of 20, ten cases (33.33%) between the ages of 20 and 29, nine (30%) between the ages of 30-39, five (16.67%) between the ages of 40 and 49, and two cases (6.67%) between the ages of 50 and older.
3. Among 30 cases, 10 have Psoric expression, 11 have psorosyphilitic expression, 6 are psoro Sycotic, and 3 have psorosycosyphilitic expression.
4. In this study, out of 30 cases, 20 cases (66.67%) have marked improvement, 9 cases (30.00%) were moderate improved, one case (3.33%) have no improvement.

5. Tall and slender individuals made up 17 of the 30 cases in this study out of the 13 cases that showed a marked improvement and 4 cases with a moderate improvement. There were 13

patients with medium build; of those, six cases improved significantly, six cases improved somewhat, and one case did not improve.

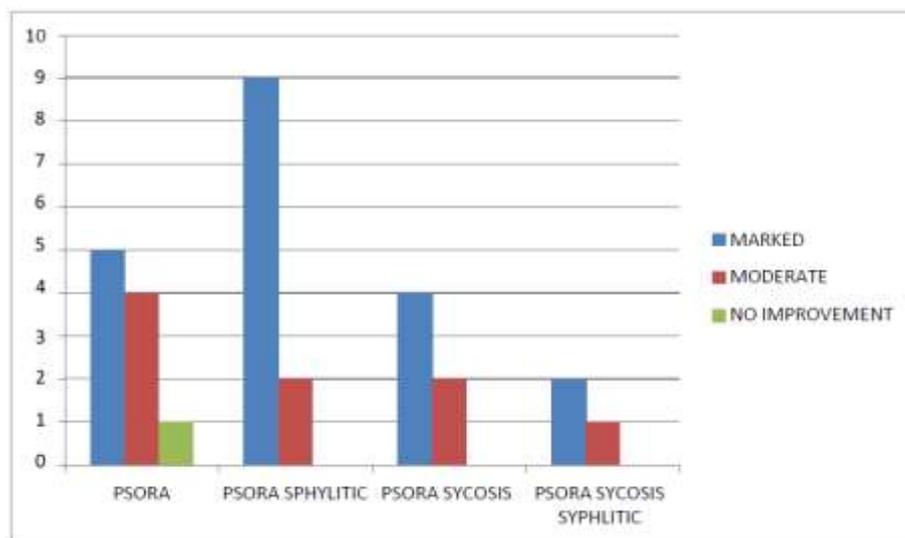
TABLE 1: CASES IN RELATION TO DIFFERENT DISEASES

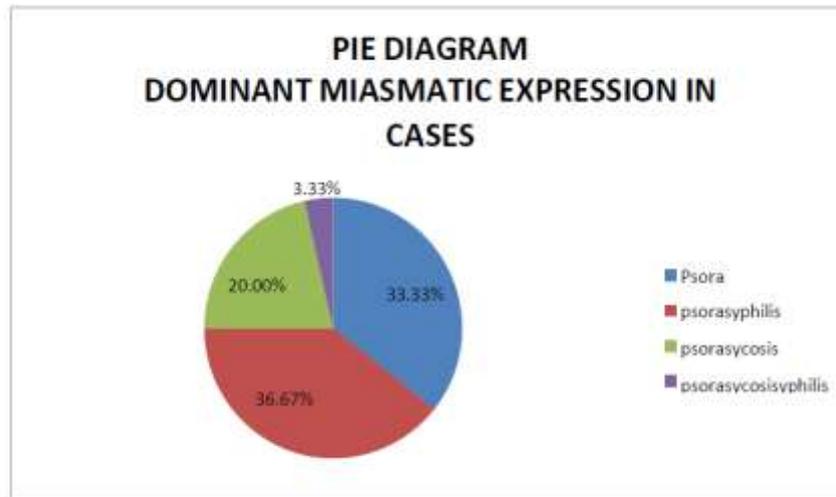
S.NO	DISEASE DIAGNOSIS	NO. OF CASES	PERCENTAGE
1	Rheumatoid arthritis	2	6.66%
2	Hypothyroidism	2	6.66%
3	Fibroid uterus	2	6.66%
4	Allergic rhinitis	2	6.66%
5	Gastritis	2	6.66%
6	Migraine	2	6.66%
7	Renal calculi	1	3.33%
8	Hemorrhoids	1	3.33%
9	Fatty liver	1	3.33%
10	Sinusitis	2	6.66%
11	Cluster headache	1	3.33%
12	Headache	1	3.33%
13	Osteoarthritis	1	3.33%
14	Cervical spondylosis	1	3.33%
15	Bronchial asthma	1	3.33%
16	Dysmenorrhea	1	3.33%
17	Gerd	1	3.33%
18	Chronic. Bronchitis	1	3.33%
19	Fissure in ano	1	3.33%
20	PAD with erectiledysfunction	1	3.33%
21	Psoriasis	1	3.33%
22	Cholelithiasis	1	3.33%
23	Allergic rhinitis with Nasal polyp	1	3.33%

TABLE 2: RESULT OF CASES IN RELATION TO MIASMATIC EXPRESSION

S.no	Improvement	Psora	Psora sycosis	Psora syphilis	Psora psycosis	Syphilis	Total
1	Marked	5	4	9	2		20
2	Moderate	4	2	2	1		9
3	No improvement	1	0	0	0		1
	Total	10	6	11	3		30

RESULT OF CASES IN RELATION TO MIASMATIC EXPRESSION





STATISTICAL ANALYSIS

The data is analyzed below using statistical techniques to translate it into scientific words in order to get to a valid conclusion. So, a paired t-test is performed on the data that was acquired.

Marks are given basing on the improvement in each case

- 3 marks- marked improvement.
- 2 marks- moderate improvement
- 1 mark – no improvement

S.NO	BEFORE TREATMENT (B)	AFTER TREATMENT (A)	DIFFERENCE (X=A-B)	SQUARE (X ²)
1	1	2	1	1
2	1	3	2	4
3	1	2	1	1
4	1	3	2	4
5	1	2	1	1
6	1	3	2	4
7	1	2	1	1
8	1	3	2	4
9	1	2	1	1
10	1	3	2	4
11	1	2	1	1
12	1	3	2	4
13	1	3	2	4
14	1	3	2	4
15	1	3	2	4
16	1	3	2	4
17	1	3	2	4
18	1	3	2	4
19	1	3	2	4
20	1	3	2	4
21	1	3	2	4
22	1	3	2	4
23	1	3	2	4
24	1	3	2	4
25	1	1	0	0
26	1	3	2	4
27	1	2	1	1
28	1	2	1	1
29	1	2	1	1
30	1	3	2	4
		TOTAL	ΣX=49	ΣX ² =89

OBJECTIVE OF STUDY: To find out the significance of miasmatic study of phosphorus in clinical practice.

NULL HYPOTHESIS (H₀): There is no difference in the improvement scores before and after treatment with Phosphorus.

RESEARCH HYPOTHESIS (H₁): There is remarkable raise in the improvement

scores before and after treatment with miasmatic study of phosphorus.

B-Score before treatment

A-Score after treatment

Mean difference of X⁻ (mean) = $\sum X/n = 49/30 = 1.633$

formula for variance = $\frac{\sum X^2 - (\sum X)^2/n}{n-1} = \frac{89 - (49)^2/30}{29} = \frac{89 - 80.3}{29} = 0.3093$

Formula of standard deviation (SD): = $\sqrt{\text{var}} = \sqrt{0.3093}$

SE of difference = $\sqrt{\text{var}/n} = \sqrt{0.3093/29} = 0.55614/5.3851 = 0.1032$ Determine the "t₂₉
"value = X⁻ (mean) / SE = 1.6/0.1 = 16

As the calculated t value (16) is > table value at 29 degrees of freedom at the level of 5% significance 2.05, hence t-test is significant, i.e., we have to accept H₁ and reject H₀. So, it is concluded out of the t-test from above table that miasmatic study of phosphorus significant in clinical practice.

DISCUSSION

Dr. Hahnemann made a significant contribution with the miasmatic idea. Without understanding the mechanism of the basic miasms activity, we are unable to choose the cure that is the closest match. To determine which miasm predominates, the symptoms of a medicine should be categorized and analysed under that miasm. If the medications are carefully examined from a miasmatic perspective, it seems that some of the medicines exhibit the typical signs of psora, some sycosis, and some syphilis. In some cases, we may even encounter a mixed miasmatic state, which is a combination of two or all three miasms. Consequently, treating any chronic case will become enjoyable if you can learn the general traits of these miasms.

This study has theoretical and clinical aspects:

Theoretical Study: Miasmatic expression of phosphorus is understood by collecting symptoms from chronic diseases by Dr. Hahnemann and classifying them into Psora, Sycosis, Syphilis, Psoro Sycotic, Psorosyphilitic, Psorosyphilitic, and Psorosycosyphilitic expression with the help

of Dr.R.P. Patel's Miasmatic Repertory and S.K. Banerjee's Miasmatic Prescription.

Clinical Study: A total of 30 cases from the OPD and IPD of MNR Homoeopathic Medical college and Hospital, Sangareddy, were included in this study. These cases included people of all ages, both sexes, all socioeconomic classes, and all disease conditions. All patients in this study have been classified as miasmatic and dynamic real chronic miasmatic diseases by Dr. Hahnemann's system of clinical disease categorization.

Physical Makeup:

17 of the 30 cases are tall and physically fit; of those, 13 have shown noticeable improvement, and 4 have experienced modest improvement. 13 cases showed a medium improvement; of them 6 had a remarkable improvement, 6 had a mild improvement, and 1 had no change.

As a result, the conclusion drawn from physical characteristics is consistent with literature.

Age incidence:

Out of 30 cases, four are of growing age, i.e., aged 0 to 19 years. 3 cases are markedly improved, and 1 case is moderately improved; this observation agrees with the literature.

According to J.T. Kent's lectures on homoeopathic materia medica, allergic rhinitis with nasal polyps on miasmatic treatment was seen to significantly improve in case study 21.

According to T.F. Allen in the Encyclopaedia of True Material Medicine, "The tickling cough reappeared (eighteenth day) and was followed by expectoration of bright red; the lungs were free on deep inspiration, and the pulse was not feverish; on account of this, I took phosphorus, and the spitting of blood did not return that day." In case study 17, it was noted that chronic bronchitis with blood streaks was markedly improved on miasmatic treatment.

It is observed that out of 30 cases, 20 have marked improvement, 10 have moderate improvement, and in 1 case, no improvement is observed. Six out of ten psoriasis patients improved significantly, four showed some improvement, and one did not. Four of the six psorosycosis cases improved significantly, while two very somewhat. Out of 11 cases of psorosyphilis,

9 exhibited a marked improvement, 2 a moderate improvement, and out of 3 cases of psorosycosyphilitic, 2 a marked improvement, and 1 a moderate improvement.

The symptoms of phosphorus were collected from Dr.C.F.S. Hahnemann's chronic disorders, and by consulting R.P. PATEL'S repertory of miasm and S.K. Banerjee, the symptoms were miasmaticized. It was discovered that 805 symptoms are associated with psora, of which 3 are syco syphilis, 45 are Sycotic, 43 are syphilitic, 41 are psorosyphilitic, 52 are psoro Sycotic, and 25 are trimiasmatic symptoms.

In this study, the symptoms that decreased after the administration of phosphorus were also classified as miasmatic expression.

Miasmatic expression	Theoretical expression	Practical observation
Psora	805	31
Sycosis	45	4
Syphilis	43	2
Psora syphilis	41	10
Psorosycosis	52	9
Sycosis syphilis	3	1
Psora sycosis syphilis	25	5
Total	1014	62

In this practical study, symptoms that were decreased after the administration of phosphorus in miasmatic expression are

PSORA:

Menses can be irregular, with bright red menses, trembling during anger, stitching pain in joints, painful urination, aversion to boiled milk, anxiety about health, lumbar pain, headaches, and tingling sensations. Menses can also cause constipation, fear of robbers, and profuse menses. Aversions to coffee and fish can also occur.

SYCOSIS:

Desire for alcohol, wine, sweat, and offensive nasal polyp.

SYPHILITIC:

Head stooping, heaviness, weakness at night.

PSOROSYPHILITIC:

Desire for fish, meat, salt, frequent cold, rectum pain, headaches, lying, traveling, and avoiding warm drinks.

PSORASYCOTIC

Irritable pain, stiff joints, weeping, burning, leucorrhoea, headaches, and weather changes can occur during menstruation, cold air, dark clots, and wet weather.

SYCOSIS SYPHILITIC

Cold air worsens cough expectoration.

TRIMIASMATIC

Desire for wine, face pallor, pollution after coition, and menstrual pain.

CONCLUSION

- Knowledge of miasm plays an integral part in the treatment of chronic diseases.

- This work has both theoretical and clinical aspects.
- In this clinical study, both genders were taken into consideration. Among 30 cases, 17 belonged to male and 13 females.
- From this clinical study, it is observed that maximum cases were present with the age of 0-19 years which is considered as fast active growth age group. Here it is concluded that out of 4 cases in this 3 are shown marked improvement.
- This study concluded the trimiasmatic nature of phosphorus showing miasmatic expression out of psora in 10 cases psorosyphilitic miasm in 11 cases psorosycosis in 6 cases and psorosycosyphilitic in 3 cases.
- Out of 10 cases of psora have good result 5 marked improvement, 4 moderate improvement and 1 no improvement, in psorosyphilitic out of 11, 9 cases Marked improvement, 2 cases Moderate improvement, In psoro Sycotic out of 6, 4 are marked improved, 2 are moderate improved, In psora sycosis syphilitic miasm out of 3 cases, 2 cases marked improved and 1 case is moderate improved
- In this study out of 30 cases treated by phosphorus, 20 cases shown marked improvement, 9 cases have moderate improvement and in 1 case no improvement.
- This study proved the Polychrest nature of phosphorus in treating various clinical conditions
Here it is concluded that miasmatic study of phosphorus is significantly important in clinical practice

Declaration by Authors

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Conflict of Interest: The authors declare no conflict of interest.

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