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A Descriptive Study Demonstrating the Utility of Repetition of Centesimal Potency in Chronic Cases

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ABSTRACT:

Centesimal potency is one of the most used potency scale in homoeopathy, originally invented by founder of homoeopathy Master Hahnemann. Hahnemann has directed several guidelines for repetition of Centesimal potency in acute as well as chronic cases. In chronic cases Hahnemann recommended not to repeat the same potency unaltered until the good effects of the medicine is going on. We hereby through the four cases demonstrate the usefulness of the repetition of Centesimal potency when it needed. In chronic cases due to patient's own fault or due to the weakness of vitality the medicine may ceases to act without completing the curing process. Hereby it becomes necessary to repeat the medicine with same potency to perfectly cure the malady.

Keywords: Repetition, Centesimal potency, Case report, Homoeopathy, Individualised treatment

Introduction

Centesimal potency was invented by Hahnemann for homoeopathic practice. It was the 1st potency to be used in homoeopathy. Later decimal potency developed by Hering & after approval of Hahnemann it was started getting used in homoeopathy. In later years in Paris Hahnemann developed "New method of dynamisation" better known as 50-millesimal potency. But as the 6th edition was unpublished till 1921 the method was unknown to most of Homoeopathic world except some of the direct disciples of Hahnemann in Paris & Boenninghausen. So stalwarts of 19th & early 20th century worked only with Centesimal potency. We can easily refer this age golden age of homoeopathy as homoeopathy reached every corner of globe in this time serving millions of patients. After the invention of penicillin & antibiotic with repetitive attack of financial, legislative & political institution homoeopathy - the only judicial curative system became dwindling in most part of the world except India where it remains flourishing. But in India also most of the doctors were reluctant to adopt new system & still using Centesimal potency, because of certain advantages of Centesimal potency e.g. huge literature, first-hand experience looking at seniors or teachers, keeping or carrying huge range of potency for every medicine seems impractical (it is necessary in most cases because in small towns & villages still homoeopathic pharmacy is rare site), the directions of 50-millescimal also cumbersome to maintain for most of the patients, above all few pharmacies are preparing 50-millescimal potencies & availability in retail pharmacy is still less. So whatever the therapeutic utility we can't ignore the ground situation & the discussion about Centesimal potency is very relevant in this time.

We must have the knowledge of repetition as it is the 6th requisite knowledge of physician as per aph.3 of Organon of medicine (the proper period for repeating the dose). The repetition of Centesimal potency is much debated topic. Stalwarts had given different directions about this matter; even master Hahnemann had developed different notions throughout his different editions of Organon of medicine. Some stalwarts developed the view the different potency should have different repetition rules. So we shall discuss the topic throughout in the expression of different stalwarts including our founder Hahnemann. In this process we shall also share the different viewpoints we have observed in our teachers & our own practice with the examples of 1st hand experiences.

Hahnemann's view in different edition of Organon of medicine: Hahnemann in his earlier days used to give crude drugs in repeated doses or single dose. Hahnemann prescribed 25 grains of Tartar Emetic single dose to Klockenbring for his madness in 1891-92. [2]

Boenninghausen's view: He used to give number of powders for a disease. As for example, he used to give five powders namely 1. Belladonna, 2. Hyoscyamus 3. Belladonna 4. Stramonium 5. Belladonna. But later he stated that he used only 200 potency and each time only a single and one or the other of the pellets was altogether unnecessary. In typhoid fever treatment he had given only 3 doses in a very few cases, most were cured with single dose. He used to give the indicated medicine in acute diseases every 24 hrs or 12 hrs, some cases every 2nd day.

He used to divide medicines according to their duration of action in 5 classes (he didn't mention any precise duration of any medicine) namely 1. Medicine having briefest action 2. Medicines having brief action 3. Medicines having medium duration of action 4. Medicines of long duration of action 5.

Medicines having long continued action of all. He forbids us to make premature disturbances during the action of class 4 & 5 remedies by repetition which would be injurious.

He also stated very clearly with definite assurance that the very symptoms which are most deeply enrooted are cured in the quickest, surest and most permanent manner and especially when these remedies are used in very high potencies and in small and infrequent doses. [3]

Dunham's view: In the book 'Science of therapeutics' he instructed to use remedies only when symptoms indicated, not to alternate or repeat indiscriminately; he has given a single drop of Rhus toxicodendron and no more nor any other medicine so long as improvement is manifest & continued. If physician is unable to visit case then he instructed to give medicines keeping in mind the ordinary form & course of the disease. But here also one medicine at a time at each stage, and never to repeat the dose, or to give any other remedy so long as amelioration manifest. [4]

Kent's view: Kent held the view that after the good action of a 200th, after waiting until it was no longer active, the 1M acted much more strongly; where the 300 or 500 generally failed. ^[5] That is to say until the improvement ceases by one potency no repetition should be done. He also said in his minor writings, the 3 rules of Hahnemann are start with too small potency & dose, avoid improper use of drugs, don't repeat unnecessarily. ^[6] Then he said that so long as curative action can be obtained, and even though the symptoms have changed, provided the patient is improving, we should not disturb the medicinal action. So the notion of Dr. Kent is until the patient's improvement stalled no repetition is to be done. ^[7]

Close's view: Stuart Close, the student of B. Finke & P.P. Wells had said a well selected remedy may fail utterly, or even do injury, because of wrong dosage. Dose as well as remedy must be adjusted to the patient's need. [8] Here the dose also includes the repetition, i.e. the total amount of medicine to be given for the case. If we go through the chapter Posology we shall certainly understand. He stated that Hahnemann's usual teaching, the outcome of his long, and rich experience, was to give a single dose and await its full action. Though it is not quite true; Hahnemann had experimented several times & had given different directions. It follows the safe philanthropic maxim, "Si non juvat, modo ne noceat". The above statement clarified by him as the only rule which can be laid down with safety is to repeat the dose only when improvement ceases. To allow a dose, or a remedy, to act as long as the improvement produced by it is sustained, is good practice; but to attempt to fix arbitrary limits to the action of medicine, as some have done, is contrary to, experience. But we have seen some homoeopaths have used the duration of action of remedies written in Gibson-Miller's book very effectively. [9] They used the way to bring down the time to cure any ailments significantly. For example, we can share a case of tongue tumour which was cured by Nux vomica 30, 4 doses repeated every 7th day. The result was within one month (within the course of medicine) the tumour vanished & constitutionally he also very much changed. It was treated by reverend Dr. Subhas Maharaj of Ramkrishna mission. Another case of thyroglossal cyst was treated in the same way by him. Though he was not keen to use this method in every cases.

Tyler's view: Dr. Tyler is of the opinion that single dose may be only one dose or two doses repeated at short interval or even three doses repeated at short interval because our aim of single dose to stimulate the vital dynamis to produce antibodies for complete immunization as the homoeopathic remedy acts like and antigen or allergen. She stated that the second fatal stumbling-block is the cabalistic sign "t. d. s." - ter die sumendum which should be reserved for Placebo. It has blighted more brilliant homoeopaths in the bud than one can imagine. She also started her career of failure and bad prescribing, by giving drugs "t. d. s." - for chronic cases anyway & fell headlong into the pit. Her mother protested as she had learned good homoeopathy in the early days of better work. But she again stated if one must play the "t. d. s." game, it is well to employ the drug perhaps about the 3x, where you have not enough quantity for crude effects, or enough penetrating power for deep and lasting mischief. Men do get excellent results in some superficial cases, in this way. [10]

Now the important aspect of above mentioned teaching is we can repeat frequently in superficial cases in perhaps 3x potency (low potency). Now question may arise what is superficial case? Dr. Tyler didn't clarify it. We can't say it either acute or chronic. The best assumption we can make that the physician's perception makes the case superficial; because a case with few symptoms never be said superficial as psora is always lurking behind it & the destruction of superficial symptoms without touching inner miasm is always dangerous; in local diseases it will develop palpable chronic disease. Our reverend teacher late Dr. R.R. Joardar once said, there are no one sided disease, it is our eyesight which makes the case one sided. [11] We can say from this viewpoint there is no superficial cases, our perception makes the case superficial. If we consider this as acute case it makes some sense as the real acute diseases are the transient explosion of inner miasm. We have also seen wonderful results obtained from lower potencies say 3x, 6x or 12x in acute diseases with frequent repetition like t.d.s. or q.d.s. But in these cases also when recovery start ensuing that is vital force start reacting more repetition cause aggravation & unnecessary suffering. In case of homoeopathic use of palliatives, the scenarios are completely different. Here low potency even to mother tincture prescription with frequent doses give symptomatically relieving result especially in terminally ill patients or patients or patients with severe organ damage. But again considering the patient terminally ill is subjective & depends on physician's indiscretion. We have seen many cases cured by 30th or 200th potency single or a few doses which were considered by other homoeopathic doctors as moribund. But Dr. Tyler here again warns us in advanced disease, malignant or tuberculous, with much tissue change or lowered vitality, the most terrible thing is to give the patient is the indicated remedy in high potency. So in case of prescribing the potencies

Case Presentations showing the proper repetition in curing the malady:

1st case:

Mr. U

Age: 70yr

Retired businessman

P/C: Single spot pain at midpoint of 12th rib rt side < bending any direction, morning, as day progresses with movement it ameliorates for 1 yr since Covid infection which was cured homoeopathically. No history of injury or UTI.

O/E: Tender on particular spot (midpoint of 12th rib rt side); after little massage a larger area becomes tender, stiff & hot.

P/H: History of diarrhoea in winter

F/H: Nothing specific

Generalities: Towards chilly but can tolerate cold when in work; Thirst moderate; Appetite well, can't tolerate hunger; Sweat excessive, on whole body, no stain or odour; Sleeps well, on abdomen & sides; Forgetful; Mild but loose temper on contradiction; can work without tiring; doesn't want to take help from others; extravagant.

Treatment: Rhus tox 30 followed by Bryonia 30 & then 200 given which gave little relief. Then with careful case taking Fluoric acid 200 single dose given; at first 15 days no physical amelioration found, but mental calmness was noticed, can maintain integrity in contradiction, after 1 month he reported that pain is much less, O/E tenderness is still there but much less in intensity. After 2 months of 1st dose noticing the standstill condition Fluoric acid 200 single dose is repeated. After 1 months he reported that pain is not at that place, but it was now at hip region only in morning, O/E no tenderness is found anywhere. After 2 months of 2nd dose again noticing the standstill condition Fluoric acid 200 single dose is repeated. After 1 month he reported he was now quite free from back pain; also mentally free from irritability & in the whole winter during treatment no diarrhoea ensued.

2nd case:

Mrs. V

Age: 28yr

Housewife

P/C: Irritability & mood swing for last 1 yr, it is aggravated for last 3 months, intolerant of annoyance produced by her child, used to beat him in trifling occasions. Along with that she has complain of hairfall since 1 yr. She is also suffering from hypothyroidism, but TSH level is under control by allopathic medication & she is not willing to quit allopathic medication on hypothyroidism as her endocrinologist suggested her so.

P/H: History of tendency to take cold.

F/H: Cervical Cancer of mother

Generalities: Ambithermal, cannot tolerate extremes of heat & cold; Thirst less; Appetite less, can tolerate hunger; Sweat less, no stain or odour; Skin dry; Sleeps less, on sides; Dreams of horror, ghost, someone's death, animals & snake. Forgetful, Irritable, loose temper on contradiction; easily becomes tired; Sun heat intolerant, it exhausts & causes headache. She has extraordinary tendency to predict future.

Treatment: Lachesis 200 2 dose OD given. 1 month after patient reported she has improvement in her mood, now becoming less irritable, hair fall improved but not so significant, Placebo given; after 1-month patient reported though her mood improved, her hair falls didn't improved much; so a standstill condition is perceived. Lachesis 200 2 dose OD given again. She came after 3 months. This time for his son. On asking she said all her complains like lethargy, hair fall, headache from sun heat are better now, on asking her main complaint she said that it didn't bother her now; also objectively it can be seen. Though she is still continuing allopathic medication (the dosage was lessened by her endocrinologist).

3rd case:

Ms X

Age: 22yr

Student

P/C: Scabies for 15 days; not much itching & burning.

P/H:

- Tendency to take cold & have recurrent tonsillitis & pharyngitis & otitis media.
- 2. Piles for 3 yrs; which is non-bleeding, protrudes during stool. It was treated through various medications, allopathy, homoeopathy & ayurvedic. For last 2 months no complain.

F/H: Grandfather: Cancer

Generalities: Tendency to have nausea & vomiting during carriage riding. Although chilly, but can't tolerate extreme heat. Thirst less, drinks only 1 litre a day. Appetite less, can tolerate hunger for long. Sweat less, no stain or odour; Skin dry; Sleeps less, on sides; Easily startled in sleep; Dreams of snake.

Memory sharp, easily remember things after single reading, but easily distracted, gets bored, easily gets out of focus; Anxious too much about her family members & own health, fear of serious diseases.

O/E: Nasal polyp seen inside lt nostril

Treatment: Ignatia 200 single dose given, after 1 month no sign of scabies, skin is completely normal, but she grew more anxious & fearful, also she complained of acute otitis media. She was asked to wait, 7 day elapsed, her complain only aggravated. Graphites 30 prescribed noting the sticky discharge & dryness of skin. Acute otitis media subsided within a week, then after 10 days she developed acute tonsillitis & pharyngitis, her mental condition remains same throughout. Now with thorough totality Cocculus ind 200 2 dose given. After 1 month she seems much better mentally, no tendency to vomit on riding carriage, her pharyngitis also gone, but piles reappeared. But she is not complaining much, also not fearing that it would turn into serious disease as she always complains previously. Placebo given. After 1 month piles continue troubling her, also she got acute coryza though not troubling her much, perceiving the standstill condition Cocculus 200 2 dose repeated. After 2 months she reported, no complain of piles or others.

4th case:

Ms Y

Age: 21yr

Student

P/C: Eczema for 10yrs on both legs on shins; itching & burning < winter, cold water bathing, > warm application.

P/H:

1. Diarrhoea recurrent in childhood.

F/H: Father: DM

Generalities: Chilly, can't totally cover her head during sleep. Appetite less, can tolerate hunger. Sweat profuse, no stain or odour. Thirst less. Dry skin. Fastidious, want arranging things properly.

Treatment: Arsenic 200 two doses each in early morning in empty stomach given. After 2 months slight amelioration noticed. Patient is asked to wait. After 6 months of 1st prescription marked amelioration noticed on both legs. After 9 months of 1st prescription the case seems stand still. So a single dose of Arsenic 200 repeated. After 3 months of 2nd prescription almost normal skin appeared with little blackish discoloration. After 6 months of 2nd prescription the blackish discoloration gone & normal skin colour ensued.

Discussion:

From above 4 cases we can understand that by judicial repetition of rightly chosen medicine we can readily cure the long standing chronic diseases. In the 1st case Flouric acid 200 is repeated after 2 months of 1st prescription noticing the standstill condition which brings the cure. In the 2nd case Lachesis 200 is repeated after 2 months of 1st prescription as the standstill condition settled, which causes rapid recovery in next 3 months. In the 3rd case Cocculus 200 is repeated after 2 months of 1st prescription as the standstill condition settled, which cures her piles. In the 4th case Arsenic 200 is repeated after 9 months of 1st prescription as the standstill condition set in, which causes the total disappearance of eczema. Though there is a long standing debate between efficacy of 50-millesimal potency over centesimal potency as for frequent repetition but one pilot study on Tinea corporis & another study on DM type-2 found no significant differences among them by result. [12] [13] Though another study on treatment of acute high grade fever shows the efficacy of 50-millesimal potency over centesimal potency as the condition needed frequent repetition without any harm which can be hardly achieved by centesimal potency. [14]

Conclusion:

The above cases support the need of repetition when improvement of cases become standstill. Timely repetition brings a speedy cure.

Consent

Author has taken necessary consent from patients before publishing these cases. The necessary efforts are taken to conceal the patient's identity also, but anonymity cannot be guaranteed.

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Conflict of interest

Nothing declared

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