

DIETMAR
PAYRHUBER

DIMENSIONS
OF
HOMŒOPATHIC
MEDICINE



Excerpt from:

Dietmar Payrhuber

**Dimensions
of
Homœopathic
Medicine**

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Chapter VII

Severe Chronic Diseases

Crohn's Disease *Silicea*

This case involved a woman who had begun to suffer severe diarrhea during her travels in Southern Europe. Three years later, Crohn's disease leading to ileocecal resection. Two months later, there was again perforation of the small intestine with heavy suppuration. A consequence of a second operation was severe problems with the scars. A few months later, she again suffered from attacks of diarrhea, loss of weight, a state of debilitation, inappetence, great thirst; once again, parts of the small and large intestine were resected (a year after the previous operation). Shortly thereafter, once again perforation of the small intestine. A colostomy had to be performed as part of this fourth operation. I visited the patient a few weeks later; I found her exhausted, emaciated, incapable of leaving her bed and caring for her family. The colostoma was inflamed and did not show the least tendency of healing.

A n a m n e s i s: as a child, inflammation of the middle ear; repeated inflammations of the sinuses (most recently, 10 years ago); has worn glasses since the age of 13 (astigmatism); cold sores; frequent ripping of the skin at the corners of the mouth; chronic gingivitis; abscesses of the roots of the teeth; recurrent attacks of angina; removal of a fibrous node from the left breast; feeling of fullness after eating; previously, constipation; hemorrhoids; kidney problems during pregnancy; menstruation begins too soon, strong, dark flow with cramps; heavy perspiration from the head and feet; dreams of being chased and trapped; strong desire for sun; condition worse during cold-wet and damp weather; no particular modalities with regard to the digestive system.

The patient describes her character as obstinate, stubborn, unruly. She is a delicate person, extremely emaciated at the present time; her character is open and affable.

Most noteworthy are the sensitivity to cold, the strong tendency to

suppuration with deterioration of tissue, and the cachexia.

R e p e r t o r i z a t i o n: looking up the above-listed symptoms in the corresponding sections of conventional repertories (KENT, FLURY), one finds that *Silicea* is specified repeatedly with a high degree.

Repertorium FLURY:

Middle ear	774	Diarrhea	878
Sinusitis	801	Tonsils, purulent	840
Herpes labialis	808	Fibrosis, Sclerosis	543
Labial angle, Affinity	38	Constipation, habitual	887
Gums	822	Hemorrhoids	899
Corners of the mouth	817	etc.	

KENT Repertorium (English edition):

ear, inflammation, media p. 291 34 remedies
of these, sil in the 3rd degree
(It would require too much space to list a differential diagnosis for each of the remedies mentioned here.)

eye, astigmatism p. 235 tub (2nd degree)
the only substance mentioned
Regarded miasmatically, *Silicea* belongs to this group; it is chiefly a "tuberculine" substance (see Chapter X).

face, herpes p. 368 58 remedies
of these, sil in the 2nd degree

face, cracked lips, p. 357 22 remedies
corners of mouth of these, sil in the 3rd degree

mouth, inflammation, p. 406 36 remedies
gums of these, sil in the 3rd degree

teeth, abscess of roots p. 430 16 remedies
of these, *Silicea* again in 3rd degree

etc.

In the first few days during which the patient received daily doses of *Silicea*, there were extremely foul-smelling and purulent secretions from the large intestine and excrement in large quantities. The inflammation of the colostoma heals completely. After a week, the patient is capable of leaving her bed and preparing small meals for her family. No new exacerbations appear. During an examination at the hospital a few weeks later, the internists declare that "the Crohn's disease

has come to a standstill".

A year later, the colostoma could be operatively closed; years later, the patient reports that she is in the best of health.

Discussion: This case illustrates the tremendous difference of the systems upon which conventional medicine and homeopathy are based. Seen from a conventional medical perspective, the prognosis regarding the progressive course of the disease is extremely poor, actually terminal. Despite several operations and conservative therapy, the course of the illness has been a continual deterioration. Seen from a homeopathic perspective-for the moment, the diagnosis of Crohn's disease will be left out of consideration in discussing the process of finding a remedy-the prognosis in this case is good, because one substance pervades all levels: the local symptoms (chronic inflammation, tendency to suppuration, otitis, parodontosis, etc.), the modalities (extreme sensitivity to cold) and the physical appearance of this rather delicate woman with a sanguine temperament and a certain amount of stubbornness-all points to *Silicea*. The (homeopathic) diagnosis takes into account the local symptoms and the constitutional signs (physical build, character and temperament). Ultimately, the decisive weaknesses in this case lie in the constitution, and it was on this level that this illness was able to come about.

The crucial point to reemphasize here is that treatment must go beyond the syndrome itself and the concepts of physical illness and do justice to the patient's constitutional state. The constitution is the foundation upon which the process of disease develops. On the other hand, this case also corresponds to the character of the patient and her psychic constellation. (Compare *Silicea*, which was partially elaborated on in Chapter VI. Reference was briefly made to the strong association to family members, career, ambition, and image.)¹

The conventional form of treatment (*cortisone* and four major surgical procedures; finally, the necessity of an artificial intestinal aperture) proved to be unsatisfactory-the disease continued to worsen, there was further inflammation,

¹ At that time, I repertorized the case the very same night and read up on this area. In FARRINGTON's outstanding-though completely organically oriented-work on medication, he comments on the relation between *Silicea* and *Calcium fluoricum* or *Acidum fluoricum*, characterizing them as complementary medicinal substances in cases of suppuration and fistulae. But when one considers the psychic dimension of these two substances, major differences come to light. *Silicea* is associated with the family; *Calcium fluoricum* and, to an even greater extent, *Acidum fluoricum* push it away, since *Fluorine* severs all connections. (See Chapter X, "Lawrence of Arabia".)

suppuration and, ultimately, pronounced weakness and cachexia. In contrast, a single homeopathic remedy, which was also capable of effecting the patient's constitution, was able to halt the progression of the disease process and finally cure this case.

DIETMAR PAYRHUBER, M.D.

DIMENSIONS OF HOMŒOPATHIC MEDICINE

The author presents not only the fundamentals of homeopathic medicine, but also its dimensions and its possibilities. He closely interrelates theory and practice to give an immediate and direct approach to the entire subject. Theory is vividly illustrated by means of case studies. This book is appropriate for physicians who are interested in homeopathic medicine as well as providing layman with insight into its basic principles and methods. For homeopathic physicians, there is a description of new developments, including the analysis and use of the elements of the periodic table and their combinations. Dietmar Payrhuber also goes into certain aspects of important issues including the proper selection of potencies and the theory of miasms.

This book is available at

HOMEODEN-HEEL

Kasteellaan 76

B-9000 Gent

Tel.: +32/9/26.59.565

Fax.: +32/9/22.30.076

e-mail: 106201.401@compuserve.com

Paracelsus Buchhandlung

Steingasse 47

A-5020 Salzburg

Tel.: +43/662/88.26.75

Fax.: +43 662 881653

e-mail: parabuch@salzburg.co.at