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THE  
INCOMPATIBLE REMEDIES

OF THE

HOMŒOPATHIC MATERIA MEDICA

BY

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PHILADELPHIA.

(A PAPER READ BEFORE THE HOMŒOPATHIC MEDICAL  
SOCIETY OF THE COUNTY OF PHILADELPHIA.)

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PUBLISHED BY  
BOERICKE & TAFEL,  
NEW YORK: 145 GRAND ST. PHILADELPHIA: 635 ARCH ST.

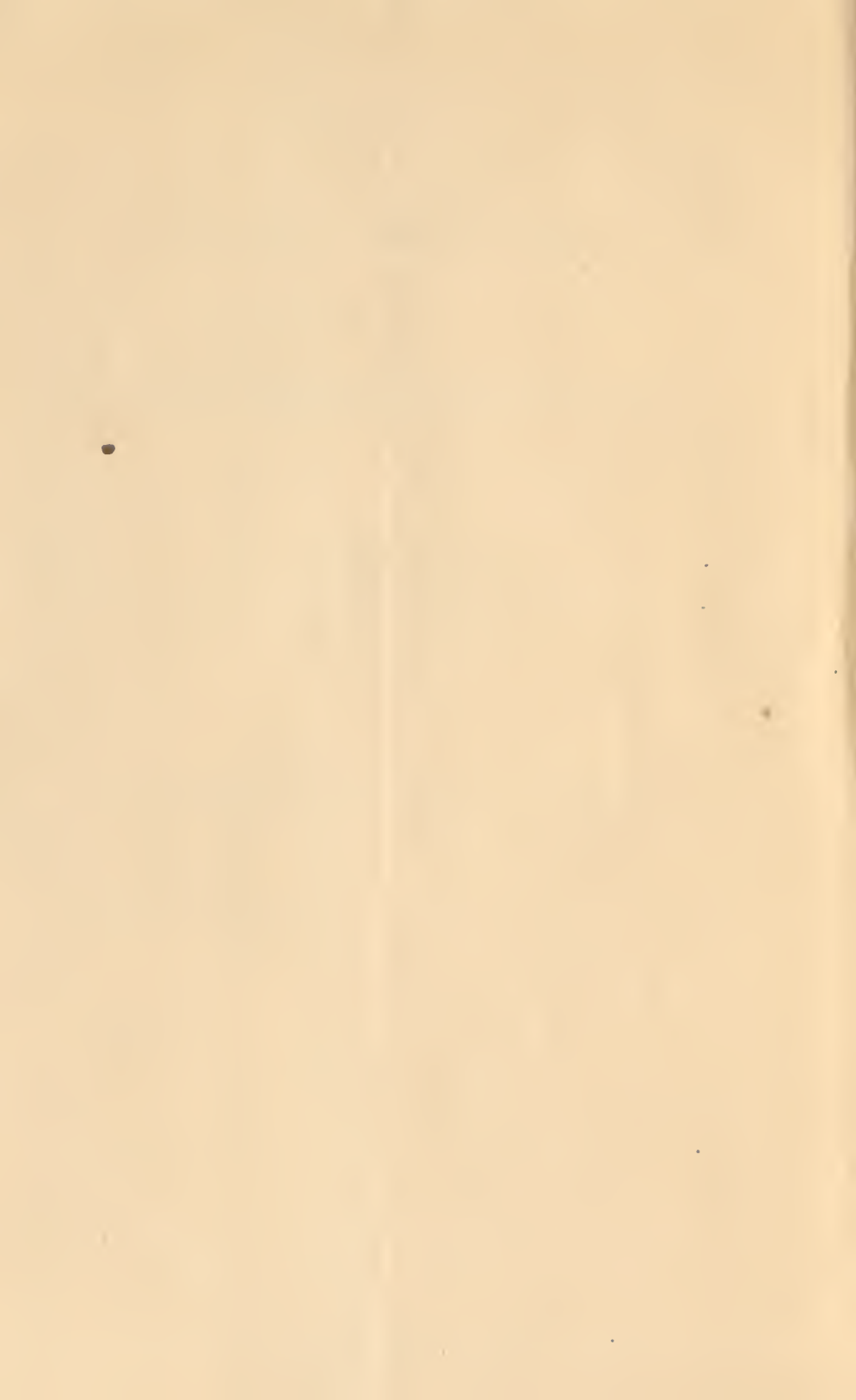


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# THE INCOMPATIBLE REMEDIES

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## HOMCEOPATHIC MATERIA MEDICA.

THE incompatible remedies of the Homceopathic Materia Medica of which I shall speak are those, which have been denominated by the few who have written on this subject, *inimical* ones.

My purpose is not to give anything new, for I have had but a limited experience, but I desire to invite discussion, and through discussion to elicit information not otherwise attainable.

I use the word *incompatible* rather than *inimical*, because in my judgment it is a better one, and enables us in a classification of drug relations—a matter daily assuming more importance—to apply the term *compatible* to all such medicines as we know *agree*. These two relations were first spoken of by Hahnemann as “*freundlich*” (friendly like) and “*feindlich*” (enemy like), and I think the two words I suggest best express the idea in English.

The word *incompatible*, as applied to medicines, is used by the allopaths when they speak of those “substances which cannot be prescribed with another without interfering with its chemical composition or medicinal activity.” They recognize two kinds of incompatibility, physiological and chemical. In their works on materia medica and therapeutics the former is rarely discussed, but long lists of chemical incompatibilities are given in the accounts of individual drugs. With the *chemical* disagreement we, as homceopaths, may have more to do in the future than in the past, for it is becoming fashionable in homceopathic pharmacy to make combinations. In respect to this new feature, I have only to say that my own predilection is for the *single* substance well proven and then applied; but, if by combining two or more chemicals we can have a remedy for any set of symptoms that it is impossible to cure with *one* substance, let us have the combination; but let us go about the use of such in a Hahnemannic way.

With the so-called physiological incompatibility we have much more to do, and yet, in the *United States Pharmacopœia* (homœopathic), published by Duncan Brothers (probably the worst book ever issued by our school), this whole subject is dismissed in a few words, and it is erroneously stated that the incompatibles are "medicines which frequently antidote each other." This is false; *they never do*, but always increase the symptoms until an antidote is applied.

*How can we know when medicines are incompatible?* On this question I invite discussion. It may be stated in a general way, so at least Hering puts it, that the substances which are too *similar* in action, especially in the remote symptoms, are incompatible, as witness *Zincum* and *Nux vomica* in nervous affections, *Rhus tox.* and *Apis* in skin diseases, *Cinchona* and *Selenium* in their effects on the sexual apparatus, *Mercurius* and *Silica* in suppurative processes. Of this similarity, Farrington, in the preface to his very able comparisons (see Appendix to the *American Journal of H. M. M.*, volumes vii, viii), says: "There is a kind of similarity not calculated to cure, but rather to aggravate. The *Ignatia* and *Nux vom.*, though very similar, are by no means antidotal or serviceable one after the other. Their resemblance appears to be too much like *aquale* or *idem*, rather than only similar. To draw a comparison, it would seem like a marriage of brother and sister."

I think we give too little thought to drug relation, and often jeopardize our patients' health and comfort by neglecting careful observations, which would determine when medicines are compatible or incompatible. Then, again, we are too apt to neglect to refer to former prescriptions before giving another remedy, and thus sometimes unwittingly prescribe a medicine which will aggravate the very symptoms we are aiming to cure. Worst of all, some among us think this matter of drug relation, in dynamized doses at least, is merely some fanciful creation of an overzealous individualizer. I well remember some years ago talking on this subject with a confrère, who said: "I never pay any attention to this matter of imminicals, and often give *Rhus* and *Apis*, or *Causticum* and *Phosphorus*, after each other, or even in alternation." The opportunity offering itself, I gave a dispensary patient (purely from scientific motives) *Apis* after I had her well under the influence of *Rhus tox.* The woman was subject to rheumatism and erysipelatous inflammations, and when applying for treatment was suffering with prolapsus uteri. The symptoms called for

*Rhus tox.*, and for some six weeks after it had been given she was entirely free from all symptoms except backache, due doubtless to the prolapsus, which did not yield to the medicine. A pessary was then used as a uechanical support, and the backache grew better. It was then I gave *Apis*, and, despite the pessary, the backache, as well as many other old symptoms, were re-awakened to such an extent that for months she suffered most severely, and added to the old symptoms were some of ovarian origin, which proved quite distressing. I condemned myself considerably for testing the relation on her, but was very sorry that I had not been able to make the experiment on my friend who "never paid any attention to inimicals."

I refer in this place to the case published by me in the HAHNEMANNIAN MONTHLY, vol. i, p. 18, date January, 1879, in which I demonstrated the incompatible relation of *Nux vomica* and *Zincum met.*, and I think the instructive part of the history of the clinical case related to this society by Dr. C. E. Toothaker, at our March meeting was, that it gave us presumptive evidence that *Nux vom.* and *Zincum sulph.* are likewise incompatible, and that was the reason the case gave the doctor so much trouble. Very likely a few doses of *Bellad.* would have cured, or possibly *Hepar*, had an antipsoric been required, both these remedies being frequently useful after *Zincum*.

In the fall of 1876 I treated a lady, otherwise in good health, for an ordinary "runround" (*paronychia*). I expected to heal the sore thumb in a few days, having in many instances cured similar sores in a short time by the properly selected remedy. Six weeks after the treatment began I was still hard at it, endeavoring to cure, and disgusted and disappointed, I found out the secret of my ill-success by referring to my day-book, when to my surprise I found I had, without any thought, given *Mercury* on November 17th, 1876, the preceding medicine having been *Silica*. These remedies are incompatible, and the lady was six months suffering with, not *one* as at first, but with *two* suppurating, painful, and distorted thumbs.

Whether *Kali carb.* and *Spongia* are incompatible I cannot say, but a case of exophthalmic goitre, since completely cured with *Kali carb.*<sup>30</sup>, demonstrated that *Spongia* did not agree with my patient. And just here let me ask another question: *Are not some of the aggravations we find after the administration of a remedy due to some idiosyncrasy of the*

patient, making the remedy unsuited to the patient, rather than really incompatible with the medicine formerly employed? On this point I invite discussion. But as to the case. The lady had received *Spongia* for some months without any benefit. A careful study of the symptoms led me to give *Kali carb.* Almost immediately the subjective symptoms disappeared, and in due course the health improved and the objective signs began to grow less and less. After some months things became quiescent, and seeing no other remedy indicated, the thyroid enlargement and the bulging eyeballs having remained *in statu quo* for several months, I concluded to try *Spongia*, of which I gave one dose of the 8000th, and inside of a week all the distressing symptoms removed by *Kali carb.* had returned; there were present the same dyspnoea and palpitation; the same aggravation at 2 A.M., compelling patient to sit erect to breathe; and a decline of the general health; and these persisted under *placebo* fully two weeks, when I returned to *Kali carb.*<sup>30</sup>, relief again following at once, and under its continued use for some months the cure was effected.

Who has not often been puzzled to know when to give *Rhus* or *Apis*, *Causticum* or *Phosphorus*? These remedies, and others too similar, are frequently about evenly indicated. Suppose *Rhus* has been given, when *Apis* should have been; or, *Causticum* instead of *Phosphorus*, what is to be done? Then, a knowledge of what medicine to interpolate stands us in good need. Between *Causticum* and *Phosphorus*, *Nux vomica* is useful; between *Apis* and *Rhus tox.*, *Pulsat.* or *Sulph.* is needed; between *Mercur.* and *Silic.*, *Hepar* answers the purpose, but so far as my knowledge extends, very little information on this point is given in our works, and this dearth of intelligence compels me to propose a third query, viz.: *When a remedy (other than those mentioned) has been administered when its incompatible similar should have been, what medicine has been found of use to interpolate to prevent mischief?*

I have studied all the works at my command bearing on the subject here presented, and the result of my investigation I give in the appended list, to which I am sure much useful information could be added, if our older and observant practitioners would but give us the results of their experience.



INCOMPATIBLES.

<b>Acetic acid.</b>	Amanita ( <i>Agaricus</i> ), Arnica, Bellad. (headache), Borax, Caustic, Lachesis, Mercurius, Nux vomica, Ranunculus bulb., Sarsaparilla.
<i>Acids.</i>	Causticum, Nux vomica.
<i>Alcohol.</i>	Anantherum, Ranunculus bulbosus.
<b>Allium sat.</b>	Aloes, Cepa, Scilla.
<b>Aloes.</b>	Allium sat., Cepa, Scilla.
<b>Amanita.</b>	Acetic ac., Amm. mur., <i>Eau de Cologne</i> and <i>Vinegar</i> (induce fainting).
( <i>Agaricus</i> .)	Lachesis.
<b>Ammon. carb.</b>	Amanita ( <i>Agaricus</i> ).
<b>Ammon. mur.</b>	<i>Wine</i> and strong liquors ( <i>Alcohol</i> ).
<b>Anantherum.</b>	Kali sulph.
<b>Antimon. tart.</b>	Rhus tox.
<b>Apis mel.</b>	<i>Coffee</i> (increases nervous headache).
<b>Argent. nitr.</b>	Acetic acid, Lyssin ( <i>Hydrophobinum</i> ), <i>Wine</i> (increases unpleasant effects).
<b>Arnica.</b>	<i>Whiskey</i> (blind after daily use).
<b>Aurum met.</b>	Acetic acid, Dulcamara, <i>Vinegar</i> (headache).
<b>Belladonna.</b>	Acetic acid, <i>Vinegar</i> , <i>Wine</i> .
<b>Borax.</b>	<i>Coffee</i> .
<b>Bovista.</b>	Nitrum.
<b>Camphor.</b>	<i>Coffee</i> , <i>Oil</i> (increases pernicious effects).
<b>Cantharis.</b>	Kreosotum.
<b>Carbo veg.</b>	Acetic acid, <i>Acids</i> , <i>Coffee</i> , Phosphorus.
<b>Causticum.</b>	Allium sat., Aloes, Scilla.
<b>Cepa.</b>	Zincum.
<b>Chanomilla.</b>	Digitalis (increase of anxiety), Ledum, Selenium.
<b>Cinchona.</b>	<i>Coffee</i> (produces diarrhœa).
<b>Cistus.</b>	<i>Coffee</i> .
<b>Cocculus.</b>	Argent. nitr., Bovista, Cantharis, Causticum, Cistus, Cocculus, Ignatia, Millefolium.
<i>Coffee.</i>	Cinchona (increases anxiety), Spir. nitr. dule.
<b>Digitalis.</b>	Belladonna, Lachesis.
<b>Dulcamara.</b>	Amanita.
<i>Eau de Cologne.</i>	Syphilinum.
<b>Ferrum.</b>	<i>Coffee</i> , Nux vomica, Tabacum.
<b>Ignatia.</b>	Spongia (?).
<b>Kali carb.</b>	Antimonium tartaricum.
<b>Kali sulph.</b>	Carbo veg.
<b>Kreosotum.</b>	

<b>Lachesis.</b>	Acetic acid, Annu. carb., Dulemara, Nitric acid, Psorinum, Sepia.
<b>Ledum.</b>	Cinchona.
<b>Lyssin.</b> ( <i>Hydrophobinum.</i> )	Arnica.
<b>Mercurius.</b>	Acetic acid, Silica (Merc. cor. is <i>antidoted</i> by Silica).
<b>Millefolium.</b>	<i>Coffee</i> (causes congestion to head).
<b>Nitric acid.</b>	Lachesis.
<b>Nitrum.</b>	Camphor (increases the pains).
<b>Nux vomica.</b>	Acetic acid, <i>Acids</i> , Ignatia, Zincum met., Zincum sulph. (?).
<i>Oil.</i>	Cantharis.
<b>Phosphorus.</b>	Causticum, Rhus tox. (?).
<b>Podophyllum.</b>	<i>Salt</i> (increases action).
<b>Psorinum.</b>	Lachesis.
<b>Ranunculus b.</b>	Acetic acid, <i>Alcohol</i> , Spir. nitr. dulc., Staphis., Sulphur, <i>Vinegar</i> , <i>Wine</i> .
<b>Rhus tox.</b>	Apis, Phosphorus (?).
<i>Salt.</i>	Podophyllum.
<b>Sarsaparilla.</b>	Acetic acid, <i>Vinegar</i> (increases effects at first).
<b>Scilla.</b>	Allium sat., Aloes, Ceba.
<b>Selenium.</b>	Cinchona, <i>Wine</i> .
<b>Sepia.</b>	Lachesis.
<b>Silica.</b>	Mercurius (dynamized doses). (Antidotes Merc. cor).
<b>Spir. nitr. dulc.</b>	Digitalis, Ranunculus bulb.
<b>Spongia.</b>	Kali carb. (?).
<b>Staphisagria.</b>	Ranunculus bulbosus.
<b>Sulphur.</b>	Ranunculus bulbosus.
<b>Syphilinum.</b>	Ferrum.
<b>Tabacum.</b>	Ignatia.
<i>Vinegar.</i>	Amanita, Belladonna (headache), Borax, Ranunculus b., Sarsaparilla.
<i>Whiskey.</i>	Aurum met.
<i>Wine.</i>	Anantherum, Arnica, Borax, Ranunculus b., Selenium, Zincum.
<b>Zincum met.</b>	Chamom., Nux vomica, <i>Wine</i> .
<b>Zincum sulph.</b>	Chamom. (?), Nux vomica (?).









