

DIABETES MELLITUS

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April 29, 2015

Natrum mur [Nat-m]

Polyuria; unquenchable thirst; emaciation, loss of sleep and appetite; great debility and despondency. Aggravation on alternate days; hammering headache.

Natrum sulph [Nat-s]

This is the chief remedy. Schussler gives as a special reason for its use deficiency of the pancreatic secretion.

Kali mur [Kali-m]

Excessive and sugary urine. Great weakness and somnolence.

Kali phos [Kali-p]

The symptoms for which this remedy must be given intercurrently are nervous prostration weakness, sleeplessness and voracious hunger; it establishes normal function of the medulla oblongata and pneumogastric nerve, which latter acts on the digestion or stomach and on the lungs.

Ferrum phos [Ferr-p]

Diabetes, when there is a quickened pulse or when there exists pain, heat or congestion in any part of the system, as an intercurrent remedy.

Calcarea phos [Calc-p]

Polyuria, with weakness, much thirst, dry mouth and tongue; flabby, sunken abdomen; craves bacon and salt. Glycosuria when lungs are implicated.

Calcarea sulph [Calc-s]

Schussler says that this may possibly be a remedy useful for this disease; also Kali sulph.

DIABETES MELLITUS CASES [Diabetes Mellitus Cases

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A writer explains the biochemic treatment of diabetes as follows: Lactic acid is composed to Carbonic acid and water, and must be split up on its way to the lungs. This is done by the catalytic action of Sodium phosphate in the blood. Any deficiency of Sodium phosphate will cause a disturbance in the water in the system by allowing an excess of Lactic acid to accumulate. Nature in her effort to eliminate the water produces the symptoms called diabetes.

But while a lack of Sodium phosphate is the principal cause of diabetes, the chief remedy is Sodium phosphate; because it regulates the supply of water in the blood. Sodium phosphate also gives off oxygen, so necessary for the process of the decomposition of sugar, and thereby prevents its reaching the kidneys as sugar, and also thins, to its normal consistency, bile that has become inspissated from a lack of Sodium phosphate.

If a case of diabetes has advanced to any considerable degree, the kidneys will have become inflamed by the Lactic acid and sugar that passes through them. This injury to the tissue of the kidney calls upon the red corpuscles of the blood for Iron phosphate, which will, in most cases, cause a deficiency in that inorganic salt. Nature, in her efforts to supply iron, will probably draw on the nerve fluid, Potassium phosphate will be too rapidly consumed, and the patient suffers from nervous prostration.

The treatment therefore, for diabetes mellitus is: the Phosphates of sodium, iron and potassium, and the Sulphate of sodium. For the great functional disturbances of nerve centers caused by the demand made on the blood for the Potassium phosphate, producing sleeplessness and voracious hunger, Potassium phosphate is the infallible remedy. It establishes normal functional action of the medulla oblongata and pneumogastric nerve, which latter acts on stomach and lungs. For the great thirst, emaciation, and despondency, give Sodium chloride. It equally distributes the water in the system and quickly restores the normal condition.

The phosphates may be combined where two or more are indicated, but the Sodium sulphate and Sodium chloride should be given in separate solutions. Where there is great emaciation or poor appetite. Calcium phosphate should be given, a small dose after each meal.

In my opinion, diet cuts but little figure in the treatment of diabetes, except as to the amount of food taken. The main object is have the food digest. Diabetic patients should never overeat; better eat six times daily than overeat once.

Of course, diet of fat meats or greasy food cannot be beneficial, for the very important fact that it overworks the liver, causes a deficiency and consequent thickening of bile and mucus, and sometimes a crystallization of cholesterin in gall duct, which gives rise to symptoms called hepatic colic, jaundice or bilious headache.

Dr. W. J. Hawkes, of Los Angeles, reports the following interesting case in the Pacific Coast Journal of Homoeopathy, October, 1913:

Miss Barr, music teacher, daughter of Dr. James Barr, 1400 West 36th Place (I give name and address with permission), consulted me July 22, 1911. Diabetes in aggravated form was her ailment. She was emaciated so that she weighed less than eighty pounds, and was so weak she could walk but a short distance. The emaciation of her neck was remarkable. Her appetite was enormous was continually hungry. Her thirst was as great as her appetite; said she drank gallons of water every day, and was always thirsty. Mouth and lips dry and pasty. Large quantity of sugar in urine.

William Boericke



William Boericke, M.D., was born in Austria, in 1849. He graduated from Hahnemann Medical College in 1880 and was later co-owner of the renowned homeopathic pharmaceutical firm of Boericke & Tafel, in Philadelphia. Dr. Boericke was one of the incorporators of the Hahnemann College of San Francisco, and served as professor of Materia Medica and Therapeutics. He was a member of the California State Homeopathic Society, and of the American Institute of Homeopathy. He was also the founder of the California Homeopath, which he established in 1882. Dr. Boericke was one of the board of trustees of Hahnemann Hospital College. He authored the well known Pocket Manual of Materia Medica.

W.A. Dewey



Dewey, Willis A. (Willis Alonzo), 1858-1938.

Professor of Materia Medica in the University of Michigan Homeopathic Medical College. Member of American Institute of Homeopathy. In addition to his editorial work he authored or collaborated on: Boericke and Dewey's Twelve Tissue Remedies, Essentials of Homeopathic Materia Medica, Essentials of Homeopathic Therapeutics and Practical Homeopathic Therapeutics.