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Study of Sycotic Miasm

Shubhangi A. Mehare¹, Ruchi Biswas²

¹ Merchant Homoeopathic Medical College & Hospital, Mehasana, Gujrat, ²P.G. Guide, Sri Ganganagar Homoeopathic Medical College Hospital & Research Institute, Sri Ganganagar

Abstract

Dr. Hahnemann exposed about Psora in detail but not so about sycosis, though he himself discovered this miasm. In this article I have tried to collect view of different stalwarts along with view of Dr. Hahnemann.

Key Word- Miasm, Sycosis, Gonorrhoea, Warts, Primary manifestation, Secondary manifestation, vaccinosis.

Corresponding Author: - Shubhangi A. Mehare¹, Research Scholar, Tantia University, Sri Ganganagar, Rajasthan.

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INTRODUCTION

Every homoeopathic physician who is desirous of knowing true etiology of diseases needs thorough study and understanding of chronic miasms. These chronic miasms are responsible to make diseases so stubborn that it is difficult to eradicate them.

Miasm - The word Miasm is originated from a Greek word ‘miasma’, which literally means up to Hahnemann’s time polluting exhalations, malarial poisons.

Types of Miasms:

Table 1 Type of Miasm

Miasms		
Chronic Miasms	Acute Miasms	
<ul style="list-style-type: none"> ▪ Psora ▪ Sycosis ▪ Syphilis 	Recurring type	Non recurring type

SYCOSIS

Etymology: Sycosis (Gr., sykon, ‘fig’, ‘fig-wart’)

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Late 16th century (originally denoting any fig shaped skin ulcer): modern Latin, from Greek sukosi, from sukon 'fig'.

Hahnemann's term for the constitutional effects of the gonorrheal virus/miasm or the chronic miasmatic form of gonorrhoea whose predominant symptoms are overgrowth of tissue?

Sycosis is one of the venereal chronic Miasm (Real or fundamental cause of the true chronic disease). In "The Chronic Diseases" Dr. Hahnemann said that sycosis is a figwart disease. In §79 of Organon of medicine Dr.Hahnemann said:".....Sycosis (the condylomatous disease), equally irradicable by the vital force without proper medicinal treatment, was not recognized as a chronic miasmatic disease of a peculiar character, which it nevertheless undoubtedly is, and physicians imagined they had cured it when they had destroyed the growths upon the skin, but the persisting dyscrasia occasioned by it escaped their observation."²

History of Sycosis

In the late 18th century the Scottish surgeon John Hunter (1728 – 1793) regarded as one of the most distinguished scientists and surgeons of his day was a great authority on subject of venereal

diseases. He accepted the prevailing notion that the gonorrhoeal discharge and syphilitic ulcer were caused by the same venereal infection. Writing in Philadelphia in 1823, Dr.Samuel Hahnemann (1755 – 1843), disagreed with Hunter. He realized that the nature of the two venereal "miasms" was different, and he called the gonorrheal one "Sycosis" after the Greek word for 'Fig'.

In 1879, at the beginning of the golden age of bacteriology, Alber Neisser (1855–1916) provided bacteriological confirmation of separate nature of gonorrhoea.

The important recognition that genital warts comprised a disease entirely unrelated to syphilis was first made by Bell (1793), and his work was later confirmed by Jourdan (1826) and P.Ricord (1838). But, as the belief that genital warts due to syphilis were gradually abandoned, the erroneous view developed that they were connected with gonorrhoea (Pirrie, 1852); indeed, in the 19th century they were sometimes referred to as "Gonorrhoeal warts".

Study and Background of Idea of Sycosis Developed By Dr. Hahnemann (1755 –1843)

In "The Chronic diseases" Dr. Hahnemann said that the figwart disease has produced by far the fewest chronic

diseases, and has only been dominant from time to time. In later times, especially during 1809-1814, so widely spread, but which has since showed itself more and more rarely, was treated almost always in an inefficient and injurious manners, internally with mercury because it was considered homogenous with the venereal chancre-disease, but the excrescence on the genitals were treated by allopathic physician always in the violent external way by cauterizing, burning and cutting, or by ligatures.³

He said about the origin of these three chronic maladies that three different important moments are to be more attentively considered than has hitherto been done:

- First, the time of infection,
- Secondly, the period of time during which the whole organism is being penetrated by the disease infused, until it has developed within and
- Thirdly, the breaking out of the external ailment, where by nature externally demonstrate the completion of the internal development of the miasmatic malady throughout the whole organism.

Transmission of Miasm:

For transmission of psora touch of body parts with the infected area is

sufficient, no friction or rub is required. Whereas for transmission of sycosis and syphilis, whose primary symptoms are located in genitalia, good deal of friction or rub is require the itch disease (Psora) is, however, also the most contagious of all chronic miasmata, the venereal chancre disease and the figwart disease. To effect the infection with the later a certain amount of friction in the tenderest part of the body, which are the most rich in the nerve and covered with the thinnest cuticle, as in the genital organs, unless the miasma should touch a wounded spots. But the miasma of the itch needs only to touch the general skin, especially with tender children. (The chronic diseases pg 7).

Study and Background of Idea of Sycosis Developed By Different Stalwarts

Dr. Eduardvon Grauvogl (1811–1877) - Grauvogl wished to renew the idea of Hahnemann about psora, sycosis, and syphilis, with his three biochemic constitution i.e.

- Carbonitrogenoid constitution
- Hydrogenoid constitution
- Oxygenoid constitution

Dr. J. C. Burnett (1840 – 1901) - Regarding the development of sycosis and sycotic state, it is also to be noted that Dr. J. C. Burnett after prolonged and careful

observation had noticed that repeated antipox-vaccinations create such a condition which is very much a kind of sycosis. In his book ‘Vaccinosis and its cure by thuja’ he called this condition as vaccinosis. Thuja is capable of removing the bad effect of vaccine, which is also a great antisycotic remedy⁴.

Dr. James Tyler Kent (1849 – 1916) -

Kent has said in his ‘Lesser Writings’ that “Sycosis is a constitutional and contagious disease, which sometimes, though not always, is manifested in the beginning of gonorrhoea.”

According to Dr. J. T. Kent there are two kinds of inflammation in urethra⁵.

Table no.2 Type of Inflammation

Simple inflammation	Specific inflammation	
Noncontagious in nature	Contagious in nature	
Having a tendency to recover after a few weeks or months	Acute	Chronic
	Acute gonorrhoea having a tendency to recover after a few weeks or months	Chronic gonorrhoea having no disposition to recovery but continuing on indefinitely and involving the whole constitution in varying forms of symptoms.

Dr. Herbert Alfred Roberts (1868–1950)

- Dr. H. A. Roberts said that sycosis is

generally understood to be gonorrhoeal poison. We should make the distinction clear between gonorrhoea and sycosis. Gonorrhoea is the acute infection of the gonococci, which takes from five to ten days to develop a urethritis after an exposure. If the gonorrhoea, when the acute infection is driven in upon the vital energy by external method of suppression, and it then becomes a systemic stigma, permeating every living cell of the organism, and transmitting its deadly destructive forces to the offspring as well as retaining the full destructiveness of its power in the original individual, and impregnating the mother of the child.

Sycosis is a miasm of overconstruction. In miasmatic symptomatology, we see that the psoric manifestation most strongly the functional symptom, the syphilitic has as its hallmark ulceration & destruction of tissue, even to bony tissue, while the sycotic has an opposite manifestation-infiltration and overgrowth of tissue⁶.

Dr. Proceso Sanchez Ortega(1919–2005)

- Dr. Ortega says that this miasm is the product of selfishness and covetousness – the desire for pleasure without thinking of the consequences combined with the selfishness which forget about others and concentrate only on itself. This intimate feeling of selfishness- of taking advantage

of others through lack of consideration of exploiting everything around us without becoming a part of it necessarily imprints on the mind of the sycotic that dread and open fear which is no way resembles the timidity or anxiety of the psoric. The sycotic wants to flee, his covetousness makes him want to hide, distrustful and suspicious, when angered he screams and shouts and is always in a hurry. His pains are like his mental symptoms, changing and erratic, stabbing, unbearable. He must always be on the move, changing position, finding another place. He is unstable in every way. Mentally the sycotic is audacious, the “Classic winner” whose sagacity gives him the advantage in everything, he is precipitate, always wanting something of pursuing it- including himself⁷.

STAGES OF SYCOSIS:

- Primary stage of sycosis
- Latent stage of sycosis
- Secondary stage of sycosis

Primary Stage of Sycosis³

Development - These excrescence usually first manifest themselves on the genitals, and appear usually, but not always, attended with a sort of gonorrhoea from the urethra, several days or several weeks, even many weeks after infection through coition, more rarely they appear dry and like warts, more frequently soft, spongy,

emitting specifically fetid fluid (sweetish and almost like herring – brine), bleeding easily, and in the form of coxcomb or a cauliflower (*Brasica botryes*).

Signs and Symptoms

These, with males, sprout forth on the glans and on or below the prepuce but with women on the parts surrounding the pudenda, and the pudenda themselves, which are then swollen, are covered often by a great number of them. Usually in gonorrhoea of this kind, the discharge is from the beginning thick as like pus, micturition is less difficult, but the body of the penis swollen some what hard, the penis is also in some cases covered on the back with glandular tubercles, and very painful to the touch.

Treatment

The gonorrhoea dependent on figwart-miasma, as well as the excrescences (i.e. the whole sycosis) are cured most surely and most thoroughly through the internal use of Thuja which, in this case, is Homoeopathic, in a dose of few pellets as large as poppy seeds, moistened with the dilution potentized to the decillionth degree, if further doses of Thuja are required, they are used most efficiently from other potencies (VIII, VI, IV, II), a change of the modification of the remedy, which facilitates and strengthen stability to affecting the vital force] and

when these have exhausted their action after fifteen, twenty, thirty, forty days, alternating with just as small a dose of nitric acid, dilution to a decillionth degree, which must be allowed to act as long time, in order to remove the gonorrhoea and the excrescences, i.e. the whole sycosis.

In 6th edition of Organon of Medicine (Aphorism 282, footnote) Dr. Hahnemann said that-

“...Experience, however, teaches that the itch, plus its external manifestations, as well as the chancre, together with the inner venereal miasm, can and must be cured only by means of specific medicines taken internally. But the figwarts, if they have existed for some time without treatment, have need for their perfect cure, the external application of their specific medicines as well as their internal use at the same time.”

Symptoms of Latent Stage of Sycosis:

Mind:

- Fixed idea
- Suspicious, restless, jealous and cruel
- Loss of memory with regard to recent events, though the events of the long past are well remembered
- Fearfulness
- Anger & dissatisfaction
- Head:
- Alopecia areata

Nose:

- Redness of nose

Joints:

- Rheumatic diathesis

Nails:

- Thick, ridgy and corrugated nails

Female Sexual Organs:

- Leucorrhoea smelling like fish brine

Secondary Stage of Sycosis:

Development: When these excrescences are violently removed, the natural, proximate effect is that they will usually come forth again, a similar, painful, cruel treatment. But even if they could merely have the consequences, that the figwart disease, after having been deprived of the local symptoms which acts vicariously for the internal ailment, would appear in order and much worse way, in secondary ailments, for the figwart miasm, which rules in the whole organism, has been in no way diminished either by external destruction of the above mentioned excrescence or by the mercury which has been used internally and which has in no way appropriate to sycosis³.

Signs and Symptoms:

- Either whitish, spongy, sensitive, flat elevations, in the cavity of mouth, on the tongue, the palate and the lips (H)
- Oras large, raised, brown tubercle in axillae, on the neck, on the scalp etc.(H) Or there arise other ailments of the body, of which I shall only mention

the contraction of the tendons or the flexor muscles especially of the fingers. (H)

Treatment

If the patient was at the same time affected with another chronic ailment as is usual after the violent treatment of figwarts by allopathic physician, then we often find developed

Psora complicated with sycosis, when the psora, as is often the case was latent before in the patient. At times when a badly treated case of venereal chancre disease had preceded. Both these miasmata are conjoined in a threefold complications with syphilis. Then it is necessary first to come to the assistance of the most afflicted part, the psora with the specific antipsoric remedies and then to make use of these medicines for sycosis, before the proper close of the best preparations of mercury, is given against the syphilis, the alternating treatment may be continued, until each one of these three kinds of medicine must be given the proper time to complete its action³.

In such three-fold multi-miasmatic diseases treatment schedule is:

- Anti-psoric>>Anti-sycotic>>Anti-syphilitic
- Repeating this schedule until cure is affected

- Full time should be given for a dose to complete its action

In this reliable cure of sycosis from within, no external remedy (except the Thuja juice in inveterate bad case) must be applied or laid on the figwarts, only clean, dry lint, if they are of moist variety.

CONCLUSION

No wonder that so many women in our society suffer from pelvic affections, breast carcinoma, rheumatism and chronic gout. The majority of married women suffer in some way from sycosis, either from suppressed or imperfectly cured. Men and children are really spared from effect of sycotic miasm. It seems that sycotic miasm may be the most dangerous miasm in future.

It is the need of present scenario to understand this miasm thoroughly so that we can make it easy to save the patient from curse of sycotic miasm.

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