

Hahnemann's Theory of Miasms: A Modern Perspective

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Abstract

Keywords

- ▶ Miasm
- ▶ Psora
- ▶ Oxytocin
- ▶ Homeostasis
- ▶ Sycosis
- ▶ Adrenalin
- ▶ Noradrenalin
- ▶ Cortisol
- ▶ Luesis
- ▶ Insulin
- ▶ Primal Period
- ▶ Birth
- ▶ Breastfeeding
- ▶ *Lac humanum*
- ▶ *Lac maternum*
- ▶ Epigenetics
- ▶ Self-realisation

Samuel Hahnemann's Theory of Miasms has traditionally been linked to the three diseases of scabies, gonorrhoea and syphilis and clinical emphasis on miasmatic prescribing has been on the negative picture associated with the destructive nature of each of these diseases. Psora, Sycosis and Luesis, however, also have a positive emphasis which we tend to overlook; namely, that of curiosity and endurance, the desire to grow and succeed, and the ability to break through and overcome obstacles with a focus on regeneration. With the benefit of recent research on the subject of Epigenetics, it's time we took another look at these three miasms to give them a relevant and modern appraisal. It is my contention that Psora is governed by oxytocin, Sycosis by adrenalin, noradrenalin and cortisol, and Luesis by insulin. Since oxytocin regulates homeostasis, Psora's role as 'the engenderer of all disease' is established according to the amount of oxytocin-receptor priming that occurs in the Primal Period, which spans conception to weaning at the age of four.

Introduction

It has always intrigued me that *Samuel Hahnemann* nominated three miasms and linked them to known diseases at a time when many more existed beyond scabies, gonorrhoea and syphilis. Since then many have gone on to expound on and formulate additional perspectives on miasms by nominating a range of other diseases and linking them to the human condition. Such is the nature of discussion around a theory; any perspective is valid.

So why, exactly, did Hahnemann choose these three? Particularly, why did he choose just three? Did he, like Nikola Tesla, who in the 20th century intimated that understanding 3, 6, and 9 equipped one to understand the machinations of the universe, know that there is something special about that

number? Rozenchwajg¹ puts forward the interesting proposition that these three miasms are not so much about the epigenetic imprint of grand diseases, but rather more about the three basic human metabolic pathways of homeostasis (Psora), anabolism (Sycosis) and catabolism (Luesis). I applaud this perspective but think we can delve deeper as seeking 'the higher purpose of our existence' is all about fulfilling potential; and our potential (as understood with respect to the possibilities and limitations of our predominant miasmatic tie/s) is, as beautifully expressed in aphorism nine, what defines our journey as a human.

Those steeped in the Christian and Hindu traditions understand that there is something intrinsically sacred about the concept of a trinity. However, while this is not a universally held truth due to the various religious and cultural

beliefs upon which any individual's world-view is contingent, I think we would all agree that there's something very special regarding the triune of: mother/father/child; body/mind/spirit; that of superconscious/conscious/subconscious; thought/word/deed and the concept of time: past/present/future. These sublime relationships are beyond the everyday duality of gross relationships that governs our reality. We understand dyads succinctly represented by the concept of yin/yang (male/female; light/dark). Everyday events such as hot/cold; up/down; in/out; right/left; fast/slow; big/small are simply understood as opposites. It is either one or the other. Dyads perpetuate a steady state; they keep systems in balance and there is no *potential* such as exists in a triune relationship.

So is there a special relationship between Hahnemann's three miasms and, if so, what is it? As a profession we accept that Psora is our primary miasmatic tie; described by some as our basic flaw, and by Hahnemann, as 'the engenderer of all disease'. However, if one accepts the premise, so beautifully expressed by the songster/poet Leonard Cohen, that "there's a crack in everything; that's how the light gets in", Psora then becomes our ally rather than a millstone around our neck. All we have to do is to focus on the factors of curiosity and ebullience and eschew those of underfunction and lack. That may well be more easily said than done when we're dealing with an 'itch', but we need to keep in mind that an itch is not just something that affects the skin, as lack can have an emotional rather than a physical connotation. In which case it may engender a search for fulfilment, and Rudolph Steiner expresses it thoughtfully when he states that... 'The gifts allotted to us are abundant, but even more abundant is our desire. We seem born for dissatisfaction'.

In adopting this perspective, it appears that Rudolph Steiner was influenced greatly by Goethe, who in 'Faust' 1 (ii) exhorts:

Two souls, alas, dwell within my breast,
Each wants to separate from the other;
One in hearty love-lust,
Clings to Earth with clutching organs;
The other lifts itself mightily from the dust
To high ancestral regions.

Psora

Psora, then, is perhaps linked to our 'gift of Free Will' and has, therefore, a connection to the concept of volition. Interestingly the theme of **Two Wills** is integral to the understanding of *Lac humanum* as a remedy. The compensated *Lac humanum* type is self-focused (without being selfish) and on the path to self-realisation (it is the best remedy to give to someone before passing over), able to be alone but not lonely and able to make good choices which focus on personal growth in a balanced way. In that case, Psora represents the struggle to survive, to reach out and connect without being codependent, and to seek a fulfilled life. The quintessential psoric remedy Sulphur has that focus, and we tend to overlook it through conditioning to concentrate on 'the

ragged philosopher' who lacks the energy to bathe, stand up straight with squared shoulders and make his dreams a reality. A healthy Sulphur is strong physically and has high energy, is full of ground-breaking ideas and is obstinate enough as well as intelligent and opinionated enough to see them through.

Making wise choices underpins the concept of Free Will and the first test comes during birth with the type of reaction made by the baby in response to the contractions that pave the way for his transition to a new reality. Grof argues that the initial perspective is that of residing in Paradise and one can easily imagine that this is so as we picture the baby bathed in amniotic fluid, floating gently, sustained continuously and effortlessly by means of the umbilical cord. Existence is blissful. At the end of gestation, the commencement of the contractive process (governed by oxytocin [oxy: fast] [tocin: birth]), forces the infant into the deepest and unknown recesses of the womb, where, for the first time, he is intermittently deprived of oxygen as the mother's need for it at this time is high. This results in an outpouring of adrenalin (the antagonist of oxytocin) and he must choose to go with the flow or fight it. In this way, the forceps or Caesarean baby who is snatched from danger by a benevolent hand is, therefore, at risk of establishing a pattern of anxious victim in need of rescue or of not following through and completing tasks... the 'lack' aspect of Psora!

Van der Zee² offers an interesting perspective regarding this process (and links the three miasms together nicely) by suggesting that the first stirrings of Psora emerge during this time and guide the baby to make a right choice by tucking his chin on his chest and letting the process unfold. It's a journey that takes the infant into the depths of the bony pelvis (the 'Underworld') where Sycosis holds sway and where the infant may need to deal with his 'shit' (meconium-stained liquor) as he is forced through the portal of the cervix into a new dimension which offers possible oblivion (Luesis). Paradise is regained, he argues, with the baby going to the breast which completes the work of gestation by way of a unique and dynamic species-specific form of nourishment designed to progress the initial maturation process begun in utero and governed by the activity of the placenta, and maximises potential such that the dictates of aphorism nine become possible.

Oxytocin

Like Van der Zee, I also perceive that Psora has an association with birth, but that it is, specifically, underpinned by oxytocin and suggest that we need to look more widely at what is known as the Primal Period which extends from conception to weaning (keeping in mind that primates lactate for six times the gestation rate). This is the time when oxytocin rules and our oxytocin receptors are primed depending on how events unfold. It is seemingly crucial for the future of our species that the unique importance of the Primal Period be recognised. Much depends on it as it sets the foundation for the future, as outlined by Erik Erikson in his schema—'The Eight Epigenetic Stages of Man' (see ► **Fig. 1**) and Buckley in her review of the current evidence around maternity practices.³

ERIK ERIKSON'S EIGHT EPIGENETIC STAGES OF MAN	
VIII Maturity/Old Age: (WISDOM)	Ego Integrity vs Despair, Disgust
VII Middle Adulthood: (CARE)	Generativity vs Stagnation
VI Young Adulthood: (LOVE)	Intimacy vs Isolation
V Puberty and Adolescence: (FIDELITY)	Ego Identity vs Role Confusion
IV School Age: Latency (COMPETENCY)	Industry vs Inferiority
III Play Age: Locomotor/Genital (PURPOSE)	Initiative vs Guilt
II Early Childhood: Muscular/Anal (WILL POWER)	Autonomy vs Shame, Doubt
I Infancy: Oral/Sensory (HOPE)	Basic Trust vs Mistrust

Source: Adapted from diagram in *Childhood and Society* by Erik H. Erikson, 1963, reproduced in *Personality Theories*, L. A. Hjelle and D. J. Ziegler (editors), McGraw Hill Inc., Sydney, 1985, 2nd edition

Fig. 1 Erik Erikson's eight epigenetic stages of man.

So what is oxytocin, and what exactly is its role? It was discovered in 1909 by Sir Henry Dale when he noted that an extract from the pituitary dorsal lobe caused contractions of the uterus in pregnant cats. A few years later he discovered that it, similarly, caused the alveoli in the breast to contract, thereby triggering the milk ejection reflex. We now know that it is mainly formed in two large groups of nerve cells in the brain, called the supraoptic and paraventricular nuclei—both located in the hypothalamus. It can travel in the blood, where it acts as a hormone or, via the nerves, where it acts as a neurotransmitter. It is also known to affect other nerve cells by diffusion, so has a paracrine effect.⁴

All mammals require oxytocin for all aspects of sexual maturation, courtship, pair-bonding, pregnancy, birth and breastfeeding, and research^{5–8} shows that oxytocin induces not only maternal behaviours such as breastfeeding and bonding; but also trust, cognition, social behaviour and positive emotions. Additionally, and more importantly, it also regulates the immune system and autonomic nervous system (ANS),^{9–11} which controls the internal organs and other key involuntary body functions. It does this by increasing activity in the parasympathetic nervous system branch of the ANS, which slows the heart, reduces blood pressure and energy expenditure, and promotes rest, digestion, and affiliation, resulting in a 'calm and connection' effect. That is, it governs homeostasis, the disruption of which leads to functional disturbance, which can be seen to be 'the engenderer of all disease' as it precedes pathological change.

Adrenalin, Noradrenalin and Cortisol

Oxytocin release during times of excessive stress restores physiological balance, and it reduces activity in the flight-or-flight (sympathetic nervous system branch of the ANS), by reducing levels of the stress hormones epinephrine (adrenaline) and norepinephrine (noradrenaline). As well, it reduces activity in the hypothalamic–pituitary–adrenal pathway, reducing medium-term stress response hormones, including corticotrophin releasing hormone, adrenocorticotrophic hormone, β -endorphins, and cortisol. All of these 'seemingly disruptive hormones', I associate with Sycosis which is Psora's

antagonist! Still, a little bit of Sycosis serves one well as it has, as Rozenecwajg proposes, an anabolic function. That is it helps us to grow if we're prepared to face up to life's challenges and fight them.

The oxytocin receptors are initially primed during the birthing process when a good head position initiates the Ferguson Reflex as the specialised nerves that detect stretch in the lower vagina and cervix are stimulated. These nerves send a signal to the labouring woman's brain, triggering an outpouring of oxytocin, which further increases contractions; and foetal descent further stimulates these nerves, thereby making birth a relatively efficient process. This positive feedback cycle, is also understood to have a neuroprotective role for the foetal brain during labour as it reduces hypoxia, and elevates oxytocin levels in both the mother and baby into the early postpartum period. Specifically, the oxytocin, which builds in the mother during labour makes her more maternal and allows her to bond with her baby. It also opens up the peripheral blood vessels on her chest so that the baby is kept warm during skin-to-skin time while he searches for the nipple. The added benefit of this getting-to-know-you time as the baby wriggles around on the mother's abdomen is the minimising of the risk of postpartum haemorrhage due to the continued oxytocin spikes that occur as a result of the close contact, and the colonisation of the baby's oral mucosa with maternal bacteria, thereby paving the way for an optimal microbiome.

On the other hand synthetic oxytocin, which is used in a medicalised birth, crosses the blood–brain barrier in the infant; and, due to continuous streaming via an intravenous-line, is known to lead to receptor desensitisation.¹² Consequently, there is now a dire prediction from Michel Odent, the most eminent researcher associated with the Primal Period¹³ that this practice, along with IVF (in vitro fertilisation) conception and lack of or minimal breastfeeding, is causing a significant shift in the species. He contends that this is due to a lack of exposure to oxytocin (as well as interference with the priming of the oxytocin receptors) during this sensitive time; *and that it is this new paradigm during the Primal Period which underpins the rise in birth of individuals along the autism spectrum and he predicts that*

man will become an individual with a body and a brain but no emotional body!

So, while the initial priming (or not, in the case of a medicalised birth) of oxytocin receptors occurs during labour, it is reassuring to know that extended breastfeeding upregulates oxytocin as it's the oestrogens in the milk that induce the transcription of both oxytocin and its receptors. As a neuropeptide, oxytocin is the primary mediator for transforming the epigenetic experiences associated with breastfeeding and being well-mothered into permanent changes in the anatomy and physiology of the developing brain and central nervous system (which, by the way, may be transmitted to future generations^{14,15}).

To have not been breastfed, however, gives the baby a whole new hand of cards to play with, as any other caregiver who offers a bottle of a breast milk substitute ensures survival of the infant, but the initial test of Free Will which forces the infant to *Trust* and *Mistrust* (see ►**Fig. 1**) the process of incarnation which unfolds in the early part of the Primal Period, is not satisfactorily resolved. So, to survive, the infant has to adapt, to tolerate milk foreign to his species; and this results in a less than optimal microbiome, resulting in under function of the gut—a negative psoric predisposition. The infant then has no trust in the mother and little in his own body as the opportunity for maximal growth is denied. On the psychological level the infant is forced to put the needs of the mother/group before his own, and learns his first lesson in 'I'm not OK'. He then lives a life where emphasis is given to putting the needs of others before his own and he is therefore distracted from the path to self-realisation; kept in the shadow.

How then do we ensure that the positive aspects of Psora hold sway? The simple answer lies in being born well and having an undisturbed relationship with the mother for the first four years of life, as an extended period of breastfeeding can repair the damage inflicted on the infant when birth is medicalised instead of physiologic. However, in this day of 'evidence-based' strategies used to facilitate birth and in situations where the mother may well be the primary breadwinner in the household (not to mention that society does not value mothering as being a 'real job'), this is not easy to achieve. Therefore, as a society (and profession) we need to have a conversation as to how we can best facilitate this, keeping in mind the fact that the new mother is, herself, needing to resolve the crises associated with stages 6 and 7 (*Intimacy* vs. *Isolation* and *Generativity* vs. *Stagnation*) of Erikson's schema as she asks herself the question: how do I best fulfil my biological blueprint, without sacrificing the soul's journey toward self-realisation, of both myself and my baby?

Perusal of Erikson's schema makes it easier to appreciate the importance of the Primal Period, as he has elegantly defined Man's journey as being one of eight stages each governed by a positive or negative attribute; the two sides of a crisis which must be resolved before moving to the next stage. Stages 1 and 2 constitute the Primal Period (the time with the mother). Stage 1 defines the actual birth and months just after it before he becomes ambulatory and can then leave and go back to the mother and her breast as he chooses.

So, if the mother consciously works with the whole birthing process, eschews the drug option, lifts her baby onto the warmth of her abdomen and gives him the time to search for the breast, she affords him an optimum start...if I struggle I will survive! As Van der Zee has speculated, the first stirrings of Psora underpin the good choice that the curious infant makes at this time by working with the oxytocin surges (the positive aspect of Psora) trusting that all will be well, and thereby resolving the crisis of this initial stage of life's journey, such that it is satisfactorily resolved and incorporated into his psyche. If the infant has access to the breast until the age of four, he can then move away from the mother and onto kindergarten and subsequently the school playground, (stages 3 and 4) with a good sense of self, and a desire to learn and make friends.

An oxytocin-enriched Primal Period sets the pattern for life such that the journey (i.e., the climb up what I call the Stairway to Heaven) will then be more psoric and oxytocin-driven, going from *Trust* to *Ego Integrity*. This is beautifully expressed in Sankaran's proving of Lac humanum in a dream noted by prover 13 of climbing a set of stairs to have a double doorway open and to be greeted by two Gods. It is now noted in my *Repertory of the Lacs* as the rubric: (Dream: Gods consorting with; climbing stairs, after).¹⁶ Two doors always open to admit the monarch and the compensated Lac humanum will always dream of interacting with famous people (stars) or important people including royalty.

In dream symbology 'milk' signifies success; the gaining of spiritual knowledge or immortality, and the 'important people' rubrics give approbation to the mythological understanding that the offspring of Zeus all needed to be suckled by Hera in order to obtain immortality. That is to 'consort with Gods'. It is said that when she was disturbed when Zeus plotted to have her inadvertently suckle Hercules during her sleep, her let down sprayed across the Firmament giving rise to The Milky Way . . . the Galaxy of Stars. The Greek word for milk is *gala*.

P Hatherly 'The Lacs A Materia Medica & Repertory' 2010; AEN Pty. Ltd. Brisbane

Insulin

However, if it doesn't go well, during these first few years (and this may be complicated by vaccination) then the individual is consigned to the shadow, a sycotic journey, which is primarily adrenalin-driven, eventually arriving at a place of *Despair*. This is another luetic (i.e., offering regeneration or oblivion) portal, which mimics that which presented itself at birth and is, I believe, insulin-driven. Insulin is the lock and key hormone; and, at stage 8 when the telomeres have shortened and disintegration is inevitable, the final choice is between being offered the keys to the Kingdom of Heaven (Paradise regained) and becoming self-realised, (i.e., 'lifting the soul mightily from the dust to high ancestral regions') or that of

being locked out such that the Wheel of Karma kicks in and the journey has to begin again. This, in my opinion, is why the theme of **Circles** is prevalent in the Lacs and why the main sphere of action for *Lac maternum* (which, due to birth trauma, has issues about being incarnated) is with the sense organs (particularly the nose; keeping in mind the fact that a primary target for syphilis is the bones around the nose) which are the most highly developed aspects of the baby at birth, and are used by the baby who has enjoyed a physiologic birth, to search for the breast.

So, while being breastfed can do much to repair the damage with respect to the underpriming of oxytocin receptors that occurs with a medicalised birth, (and can, therefore, moderate Psora in its positive mode), a prescription of *Lac humanum* at any of Erikson's eight stages will, because it is a sarcode rich in oxytocin, bring the individual out from the shadow of Sycosis and onto the psoric treads of the stairway. The journey then, as Hahnemann implied when nominating these three particular miasms, has real potential because of the role that hormones play in moderating epigenetic expression.

Note

This article has been adapted from a paper presented at the NZCH national homeopathic conference; 'Overcoming Psora', 28–30 August, 2015; Auckland.

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