

# Francisco X. Eizayaga Rediscovered

*Dion Tabrett*

*This book is dedicated to my good friend Fred Johnson.*

*Fred taught me the scientific study of nature and the art of  
arranging her forces in order to achieve optimum results.*

*Rest in power Fred.*



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# Francisco Xavier Eizayaga

(1921 - 2001)

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*Buenos dias mi amigos y mucho gusto!* and welcome to my book about the great Argentinian homeopath Dr Francisco Xavier Eizayaga MD.

He was a genius! For me he ranks up there with the greatest of the past masters of homeopathy. Dr Eizayaga's influence upon my clinical practice is on equal standing with Hahnemann, Kent, Clarke and of course James Compton Burnett. Eizayaga's system is, in my opinion, the most elegant we have when analysing a broad spectrum of cases and deciding upon the most appropriate prescription. Eizayaga's system unites many different approaches to case analysis. From the therapeutic or practical prescribing style, to the classical constitutional and the use of the *simillimum*, and finally the miasmatic or terrain understanding of susceptibility to disease. All these strands are woven together into a coherent and logical system.

There is a strange disconnect in homeopathic medicine regarding two of the most popular leading lights. Both Hahnemann and Kent wrote *materia medica* and philosophy books, *The Organon* and *Lectures on Homeopathic Philosophy* respectively. Yet neither published great tomes of clinical cases. Granted we have *Lesser Writings* for both doctors, but these are collected works of essays and articles and odd cases. Hahnemann wrote that he did not like to publish many cases for fear that the allopaths of his day would simplify and dilute the homeopathic medical system. He was greatly concerned that myopic medics would associate the clinical diagnosis of each of his cases with the prescription of the given appropriate remedy and then extrapolate a very simplified system of 'specifics'. The process of analysing each case individually and following the similar principle of reflecting the patient's symptoms with the pathogenetic symptoms found in our *materia medica* and repertories is a lot more arduous. (By the way all of this is completely dissimilar to Burnett who almost exclusively published clinical case work and I will make no apology for the very frequent referral to Burnett's fantastic influence upon our understanding of clinical homeopathic medicine.)

In relation to this odd and bizarre separation of philosophy and clinical work, Eizayaga did a strange thing. Firstly, he practised classical homoeopathy for the best part of two decades. Got great results. Then he researched and read the clinical cases he could find of both Hahnemann and Kent. Eizayaga perceived how both doctors worked in clinic and then adapted and evolved their own application of clinical homoeopathic medicine. Eizayaga reaped the benefits.

Dr. Eizayaga formulated and made crystal clear the best model or template for case analysis that I know of. Once you understand Eizayaga's model of 'layers' you can understand practically all other forms and methodologies of homeopathic case analysis. No small feat!

The clarity and lack of ambiguity that Eizayaga has brought to the understanding of both simple and complex casework is fantastic. This method of case analysis and prescribing has been absolutely instrumental in my own clinical application of homoeopathic medicine. The use of Eizayaga's system had produced reliable and wonderful cures in my own clinical practice for over thirty years.

I have taught my version of Eizayaga's model of case analysis for twenty-seven years. Postgraduates and undergraduate students easily assimilate this methodology. Veteran prescribers often have an "Aha!" moment when they grasp the concept of the different layers in relation to past cases they have treated. This is immensely satisfying from a teaching perspective. And the good news is that you already know lots of this information, but in a slightly different format.

Let me be clear and communicate that this is my version of Eizayaga's work. It works for me and has worked well for others. If I have misunderstood or misrepresented any of his original ideas, then that is all my responsibility. If there are new ideas that seem good, then... those are also my responsibility!

As always I must thank two of my contemporaries, Mike Bridger and Lynn Forte. Many ideas and discussions with both of these friends and homeopaths have expanded and pushed my understanding of the science and art

of homeopathic medicine further and beyond what I would reach if left to only my own devices. Both Lynn and Mike are excellent homeopaths, always practical and with great philosophical roots to explain their reasoning. Both are also good chess players. The chess board forms the arena over which many of our discussions take place.

This book will be standard reading for all post graduate students who attend the Orion course.

I also would like to give a special acknowledgement and thank you to a fellow homeopath from Australia, Nathan Clements, who has sourced some crucial educational information for me. Nathan supplied me with digital versions of Eizayaga's lectures given in North America over the years 1983 through to 1985. It was wonderful to listen to Eizayaga speak and explain his methodology, take case histories, and then analyse and prescribe. This information answered some of the questions that I could not solve and the discussions with Nathan have pushed both of our understanding further and made a very real impact on the clinical application of Eizayaga's system.

A big thank you to my wonderful editor Jenni Tree. Jenni has done a great service on reading and re-reading this manuscript many times over. Jenni has helped me immensely and corrected and streamlined this book. She has truly enhanced the final edition with her insights.

Also a big thank you to my publisher Olivier Bakker at Emryss and to his sister Roos for all their help. Finally, *muchas gracias* to Dr Francisco Eizayaga, the son of Eizayaga, who I had an interesting conversation with about his fathers work. Francisco also kindly supplied me with a photo image of his dad which has been used as the front cover of this book.

The repertory referenced throughout this book is Dr Robin Murphy's *Metarepertory* 4th edition.

When teaching this method of case analysis it is often my experience to encounter resistance and opposition on reaching the 'Lesion level' prescribing section. This is fair enough when considering lessons from past masters of

homeopathic philosophy. If this is new to you, then do investigate with an open mind and contemplate this idea from clinical evidence.

Please do explore and examine Eizayaga's work. My advice is to pay particular attention to the prescribing of Hahnemann and Kent in their clinical work as verification of the applicability of this model.

Finally, test it in your own clinic and practice. If it is no good, then it will fail and fall. If it is well founded and effective, then it will stand up and make certain aspects of treatment much more successful. Once you have seen the evidence of this method you will undeniably understand it much more and then trust it as an appropriate strategy for particular, individual cases. Let's make a start and work through the layers *poco a poco* (little by little).

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# Introduction

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## The Jigsaw

Consider a complicated case to be a jigsaw. Many different remedies may be indicated. Some of these remedies will be for the constitution. Others for acute phase symptom states. Miasmatic states may also demand your attention. Keynote symptoms jump out at you. Where to start? Which remedy to prescribe?

The beauty of Eizayaga's layers model is that it can give the prescriber a plan, a template to work with. At the same time, this approach is flexible and fluid as the case unfolds. And the great news is that you already know lots of this information. What I intend to do in this book is to explain and define Eizayaga's system of case analysis in relationship to layers.

We shall explore four main layers:

1. Constitutional
2. Fundamental
3. Lesion
4. Terrain/Miasmatic

At least 50% of the above, namely the constitutional and miasmatic layers will be more than familiar to every trained and professional homeopathic prescriber. The lesion and fundamental layers will also be known but there are aspects that need expanding and defining for you to become fully acquainted with Eizayaga's system.

After Hahnemann formulated his medical system of homoeopathy it continued to evolve and develop after his lifetime.

## Prescribing categories: Unicists and Pluralists

Eizayaga identified two main categories of prescribing techniques, and named their prescribers thus:

1. **Unicists**
2. **Pluralists**

The unicists prescribe one remedy or medicine with each prescription.

The pluralists prescribe mixtures of medicines. Homeopathic polypharmacy. The application of homeopathic polypharmacy may be further sub-divided into:

1. **Complex homeopathic compounds**
2. **Individualised homeopathic polypharmacy**

Complex compounds comprise a preparation of a mixture of remedies all in one pill in one bottle. An example of this would be a hay fever treatment that contained, for example, *Allium cepa*, *Arum trip*, *Arundo*, *Euphrasia*, *Mixed pollen*, *Sabadilla*.

Individualised polypharmacy is when the prescriber takes a case and then prescribes a number of different remedies aimed at different levels of treatment in the case. For example there may be a daily therapeutic remedy, a weekly miasmatic treatment, a weekly constitutional medicine and also an organ remedy given twice a day.

This book is not about the pluralist methods described above, although there will be times when more than a single remedy prescription is described.

The unicist school of homeopathy may be further sub-divided into the following divisions:

1. **Classical homeopaths**
2. **Clinical homeopaths**

And war may rage between them!

*Classical* homeopaths often elevate the mental/emotional symptoms and may downplay the significance of the disease or pathology presented with a case history. The *Clinical* homeopath will do quite the reverse in promoting the pathology and prescribing in a therapeutically focused manner. They may use psychological symptoms as confirmatory concomitants as opposed to placing them at the top of the symptom hierarchy. The term *Classical homeopathy* is often used but equally, is as often misunderstood.

Kentian style classical homeopathy may be summarised and explained as the following basic principles:

- one single medicine of a high potency given for each prescription
- a single dose is usually prescribed
- potency scale of 30c, 200c, 1M, 10M, 50M, CM, MM may be used.
- case analysis follows a symptom hierarchy of mental/emotional, physical-generals, physical-particulars.

Importantly, Eizayaga noted that Kent's homeopathy was influenced strongly by the illuminism philosophy and religion of Emanuel Swedenborg (1688 - 1772). Kent had a general idea, theory (*a priori*) or belief, that he placed before his experience and clinical reality. Therefore his clinical reality had to fit his general theory which was influenced by Swedenborg philosophy. This is the deductive method: where a general concept or idea is taken and then tested on observed particular facts. The clinical reality must correspond to the general idea. For example, Kent believed that in tuberculosis of the lung, the cavity is first, then come the bacteria. Re-read lectures 1 and 5 in Kent's philosophy book to understand his theories on bacteriology. The following quote sums up his ideas perfectly:

“All diseases known to man are in the form of simple substance, an invisible something that cannot be detected by the chemist or the microscopist, and will never be detected in the natural world”.

– Dr. James Tyler Kent. *Lectures on Homeopathic Philosophy*. p104.

The above piece of writing is repeated many times in different forms throughout Kent's philosophy lectures. The idea is that infectious disease is not bacterial (or viral, fungal, protozoal, prion etc.) in origin but is due to the invisible

something known as ‘simple substance’ that will never be detected. Quite a claim. And very hard to prove. The term ‘*simple substance*’ is derived from Swedenborgian mysticism in relation to a new form of matter in relation to the mind, body and soul. This viewpoint of Kent’s is totally opposite to Hahnemann’s observations, experiments and ideas.

Hahnemannian homeopathy may be summarised as the following:

- one or at times two prescriptions given daily in ascending or descending potencies
- repeated daily doses, often with succussions between each dose
- potency scale Ø, 3c, 6c, 12c, 18c, 24c, 30c - 300c. (plus LM and decimal (X) range also.)
- case analysis focused primarily on pathological symptoms and miasmatic/diathesis symptom-complex.

This is radically different to Kent’s homeopathy. Also Hahnemann proceeded from observation and experiment. He noted particular facts, formed a hypothesis, experimented and then developed a theory. A general principle or law is inferred from particular facts. This is the inductive method.

Hahnemann was also more than suspicious of a microbial agent for certain infectious diseases. In 1831 Hahnemann wrote about the propagation of Asiatic cholera. After many observations and clinical experience he hypothesised that it was transferred from person to person by

“a swarm of infinitely small, invisible living organisms”.  
 – Dr S Hahnemann. *The Lesser Writings of Samuel Hahnemann*.  
 RE Dudgeon, pp 756-765.

And he was right! Years before the cholera bacterium was isolated and identified, Hahnemann proposed that an infinitely small living organism was the culprit. Lots more on this subject will be found in the chapter in this book on ‘*Miasms*’.

But what is peculiar in our profession is that Dr James Tyler Kent’s (1849 - 1916) philosophy of homeopathy is frequently described as ‘*Classical homeopathy*’, whereas Dr Samuel Hahnemann (1755 - 1843) and his prescribing

approach would now be more often termed as '*Clinical homeopathy*'. Regardless of their differences, both approaches have their time and their place in our practices today. Both approaches of case analysis and prescribing styles may be valid at different times.

These two different categories of unicist homeopathy need not be in conflict. There is no need for division if we understand the applicability of each mode of practice.

Dr Eizayaga wove together these two separate strands that homeopathy divided into after Hahnemann. Both *Classical* AND *Clinical* prescribing strategies can be appropriate at different times and stages during the treatment of a complex case. This is the genius of Eizayaga's system of case analysis. He unified the *Classical* and *Clinical* strategies of prescribing and formulated a methodology that clearly shows the prescriber accurately when to employ either approach in our clinical practice.



# 1 Constitutional Level

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## Introduction

The first piece of the jigsaw.

This chapter will define the term ‘**Constitutional remedy**’ and ‘**Constitutional level**’ within the framework of Eizayaga’s case analysis model. The first piece of the jigsaw. The idea of a ‘**genotype constitution**’ will be introduced and explained and differentiated from the term ‘**classical constitution**’.

Following the definition of the word ‘constitutional’ we shall journey through homeopathic history and understand the evolution of this term and its use in the global homeopathic community. Then the very important clinical application of constitution will be explored in relation to symptomatic hierarchy for case analysis and prescribing. A *materia medica* section will outline the most important constitutional remedies. Advances in the biological sciences will be discussed to challenge the ideas represented. Finally a look at remedy relationships, acute phase remedies connected to constitutional states, will be outlined.

## 1.1 Definition of Constitutional level

The term ‘*constitution*’ from a biological perspective can be described as the physical make up or the basic structure of an organism. The configuration, anatomy or form of an organism or species. The academic study of this particular form, shape or structure is known as **Morphology**. This is one way to differentiate a giraffe from an elephant. A quadruped with a long, long neck for the former. And a quadruped with a trunk and tusks for the latter. We will return to the discipline of morphology later on. Back to the term ‘*constitution*’.

The word constitution may also include the function or mode of performance of an organism. In particular, it may refer to the metabolic processes, reactions to stimuli and resistance to pathogenic influences of the organism. The code for the constitution is of course the DNA. The complete story runs from DNA to gene to chromosome to the entire genome. The genome of an individual may also be referred to as the **Genotype**. Both genome and genotype may be used to describe the total set of genes in a cell or an organism. Eizayaga used the term *genotype* when describing the constitution of an individual in relation to the homeopathic medicine that was most similar to their natural born healthy state.

Now do please note that the terms ‘*constitutional medicine*’ or ‘*constitutional remedy*’ are used in two ways in homeopathic medicine. (Also known as - *constitutional layer/ state/ level* all these terms are interchangeable). I will give clear definitions for both.

Firstly there is what I will term the **Classical constitution** and secondly there is the designation **Genotype constitution**.

### 1. **Classical constitution:**

The word ‘classical constitution’ is the remedy or medicine that corresponds to the patient’s total symptom complex. That is the medicine or remedy in our *materia medica* that matches the characteristic, **Totality of symptoms** from a case history. This also known as the **Simillimum**. The symptoms analysed are from a broad spectrum, a truly holistic perspective. Symptoms are taken from the psychological to the physical and may include the pathological manifestations as well. **Mental-emotional, physical-general and physical-particular** symptoms are all included. *Importantly - the classical constitutional remedy/ medicine may change over time. The individual receiving treatment may move from one classical constitutional prescription to another, different preparation or medicine. The remedy that matches the totality of symptoms on the day of the prescription may be termed the classical constitutional remedy.*

### 2. **Genotype constitution:**

The word ‘genotype constitution’ refers to the remedy or medicine image in our *materia medica* that mimics or mirrors an individual’s healthy state. Once

again psychological and physical symptoms are included. Mental-emotional, physical-general and physical-particular symptoms. And here's the really significant bit - the remedy *may* correspond to the shape, form or anatomy of the individual. The aforementioned morphology. *Importantly - the genotypical constitutional remedy must always remain the same. It does not change over time and is a fixed state. The individual receiving treatment will have designated a single genotype constitutional medicine in regard to their constitutional state. The genotypic constitutional remedy always stays the same. The genotype constitution is prescribed as a preventive medicine to optimise and consolidate an individual's state of health.*

The first term *Classical constitution* will of course be familiar to all of us trained in **Classical homeopathy**. There are many great books and authors that specialise in this branch of our medical discipline, and I will not pursue the definition of this term further at this point.

The second term *Genotype constitution* may well be a new phrase or concept to some. But I wager that you will be acquainted with this idea in regard to our *materia medica*. This idea I will now explore in great detail as it forms the bedrock upon which Dr Eizayaga's model of case analysis is built.

Within the domain of Dr Eizayaga's model of case analysis the **Constitutional level** is defined as the *materia medica* remedy symptom complex that best matches the healthy state of an individual.

A healthy constitutional state is when all the functions and physiology of the organism are in harmonious homeostasis (within acceptable parameters for each individual due to bio-variability and genetic polymorphisms).

The endocrine system is in homeostasis, the autonomic nervous system is nicely balanced and not listing to either sympathetic or parasympathetic over or under expression. Emotions are appropriately expressed; psychological and cognitive function are all good. You get the idea.

This is the base line healthy state and it may be considered that the goal of homeopathic treatment is to - *clear all layers, treat all miasmatic influences and return the patient to their basic constitutional remedy state*. This level is then consolidated with the appropriate constitutional remedy and further

improvement of health will now depend on a more **Naturopathic** approach with emphasis upon healthy lifestyle choices such as diet, exercise, sleep, relaxation and fun.

Importantly, Eizayaga proposed that each individual has only one constitutional remedy state. This is their healthy state and is often the *materia medica* remedy image that they are born as. When Eizayaga was asked the question: “Does the constitutional remedy change throughout life?” He answered “No”. But added that during the first year or two of life many healthy children have characteristics that are very similar to the remedy *Calcarea carbonica*. Characteristics for other constitutional remedies can be very difficult to identify. By the age of one to ten years old the characteristics of the real constitutional remedy often declare themselves and become evident. Food desires, temperament, fears and other healthy characteristics of remedies such as *Lycopodium*, *Silicea* and *Sulphur* begin to emerge at the ages of one to two years.

So let us imagine a situation whereby a healthy mother and father conceive a healthy child. The pregnancy runs full term, and the labour goes well. All of this resulting in the birth of a healthy, fit as a fiddle, baby. In an ideal world this would happen all the time. The healthy state that the baby is in upon being born is the Constitutional level. This may be defined as the following:

**Constitutional level:** This is the healthy symptom state of an individual. The symptoms comprise of permanent, irreversible, lifelong traits. Examples are - skeletal structure, skin colour, eye colour and metabolic rate. It should be noted that constitutional state symptoms cannot be removed but that they may become distorted out of a healthy perspective (see **Corrupted constitutional level** in the fundamental chapter) and if so then ‘constitutional treatment’ aims to bring about regulation and optimisation to the individual’s healthy condition. The healthy, constitutional level is often the ultimate goal for long term homeopathic treatment.

The constitutional level may be considered to be the ‘ground zero’ of a case. This is the ideal state that the practitioner will most often aim to prescribe back to and then fortify and consolidate. Successful treatment of the constitutional state will often result in less acute illness, reduced intensity of acute

phase disease (e.g. colds that used to last 5 - 7 days are now resolved in 24 - 72 hours), greater energy, increased mental lucidity and cognitive function, greater emotional wellbeing and stability.

For example, we should all witness in our patients, particularly the younger ones, that they very frequently pass through the winter months with far stronger resistance to the colds and influenza than their peers. There are fewer days off school. Acute illnesses have a lesser impact and manifest with a reduced intensity than prior to constitutional treatment. Eizayaga stated that prescribing the constitutional remedy will go a long way to preventing possible future disease states.

With effective constitutional prescribing we can envisage the perfect entwining of homoeopathic prescribing and naturopathic ideas to fulfil this idea. Dr Hahnemann very frequently advised his patients upon dietary, hygiene and exercise regimes and may be considered to be described as naturopathic in some of his approaches when treating disease and giving guidance on health.

Here is Eizayaga's writing on the subject of *genotype constitution* from chapter 32 of his book '*Treatise on Homeopathic Medicine*':

“Chapter XXXII

#### **What must be cured in diseases**

##### ***General constitutional characteristic:***

When a human is born, he is born with hereditary genetic characters, such as the colour of his skin, the structure of his bones, the size and shape of the different parts of his organism, the colour of his hair and his eyes etc. All these organic structures, just as the different functions of the organs, take place within certain average margins of normality and are acceptable within a range of minimum and maximum degrees beyond which we consider that the individual suffers from some abnormality. His general and organic functions also move and oscillate within certain limits, such as vital heat, the desire of open air, and his way of perspiring, his way of sleeping, his thirst, his appetite, his desire and aversions for food.”

– Francisco Xavier Eizayaga, M.D. *Treatise on Homeopathic Medicine*, p255.

This all fits rather nicely into the biological definition of the word ‘constitution’. No problem here whatsoever. The anatomical structure and the physiological action are all clearly described. As well as the healthy homeostasis, stable equilibrium of physiological function, in regard to a state of healthy wellbeing.

Eizayaga then goes on to write that these healthy, permanent symptoms are not pathological, and that the prescribing of the homeopathic medicine that is similar to the genotype constitutional state is preventive to the evolution of future disease.

“What we wish to point out absolutely clearly is that none of these constitutional genetic characteristics, which depend on the genotype, is pathological; therefore, none of them can undergo a treatment nor is it curable. **We only advise to prescribe the genotype’s constitutional medicine to prevent future ailments. In other words, to prevent the diseases from which human beings will fatally suffer.**” (Bold type emphasis Eizayaga.)  
– Francisco Xavier Eizayaga, M.D. *ibid.*, p256

Once again this is logical and the first part locks in tightly with the biological definition of the word *constitution*. The second part highlighted in bold type is interesting. It builds upon the genotype traits being healthy, non-pathological, therefore not curable. Then it champions the use of the genotype constitutional prescription as a preventative to future disease. The concept being that if an individual’s physiology is functioning within appropriate parameters then they will be at an oscillating level of optimum health and that this will potentially prevent future diseases.

To illustrate this point further think of a healthy functioning immune system that correctly targets ‘non self’ invading microbial agents such as viruses, bacteria, protozoa, etc. Now compare this with an unhealthy immune system that targets ‘self’ cells and the myriad auto-immune disease (coeliac, systemic lupus, multiple sclerosis, diabetes type 1, Grave’s disease, Hashimoto’s etc. etc.) that proliferate today. It should be understood that despite some genetic and environmental links, generally auto-immune diseases have an *idiopathic aetiology*. Which is of course medicalese for “we don’t know what the cause is”. Eizayaga noted that allopathic medicine has increased the average longevity

of populations. But also that the chemical-synthetic medicines (corticoids, antibiotics etc.) do not increase an individual's defences and do not improve an individual's homeostasis. But they do have the opposite action, namely a reduction in the capacity of the immune system:

“... it (allopathy) provokes a real **immunosuppression**, i.e., a diminution or loss of the human being's immunologic defences.”

– Francisco Xavier Eizayaga, M.D. *Treatise on Homeopathic Medicine*, p261.

And to go a little further and note that in many individuals ranging from middle to older age for whom **Allopathic Polypharmacy** is the norm, Eizayaga states, and correctly so in my opinion:

“It is true that people live longer, but it is an undeniable fact that people are also living more chronically ill. On account of this, **it would be more correct to say that people survive longer.**”

(Emphasis mine. Author)

– Francisco Xavier Eizayaga, M.D. *Treatise on Homeopathic Medicine*, p261.

Quantity of life is the measure here, not so much the quality. The use of many allopathic medicines may result in immune suppression. In contrast to this the homeopathic constitutional remedy is considered to be immune regulating and enhancing in a non-specific way. Optimising function.

Writing today, I suggest that in the western world, a considerable percentage of our population has hit the zenith or apex of longevity. The populace may be living longer than ever as a whole, but, I think that there is a perceivable turnaround occurring. Overmedication and childhood and adult obesity are firmly on the rise. This will result in the shortening of the natural lifespan and the increased use of allopathic medications. So Eizayaga differentiated between allopathic disease and symptom management and homeopathic disease treatment AND prevention via constitutional treatment.

So the idea here is that the correctly prescribed, genotypical constitutional remedy will of course not remove genotypic traits, but will bring increased resistance and more balance and equilibrium (homeostasis) to the individual.

To use a modern turn of phrase... “to be the best version of yourself”. One last quote from Chapter XXXII:

“... the constitutional remedy may supply the individual with a non-specific resistance to all non-specific noxious agents and to all acute exacerbations of chronic diseases. Here is a brief list of the diverse types of disease which the constitutional remedy is capable of preventing in a gentle, quick and lasting way:

- endogenous infections due to saprophyte germs (*Escherichia coli*, streptococcus, staphylococcus, proteus, etc.).
- allergic diseases in general, both respiratory and skin allergy.
- internal and external mycosis.
- neurological, muscular, osseous, hepatic, renal degenerative diseases.
- metabolic diseases such as gout, diabetes, hypercholesterolaemia, hyperlipidaemia, etc.
- endogenous diseases hyper- and hypo- thyroids; hyper- and hypo- ovarian, and so on.
- neoplastic diseases, both benign and malignant.

The constitutional remedy is capable of curing or of stopping morbid genetic trends thus stopping diseases from evolving towards more serious or deeper processes... the new generations of homeopathic physicians may trust the method which cures according to ‘**Similia similibus**’ as the true natural law cure of cure which enables us to live in ecological harmony with the created universe.

– Francisco Xavier Eizayaga, M.D. *Treatise on Homeopathic Medicine*, p264.

Once again the idea here is that the genotypic constitutional remedy, when correctly prescribed, will optimise the function, the physiology, of an individual’s organism. Homeostasis is the ideal state, functioning between established parameters. Immune surveillance and response are enhanced and coordinated and focused on correct ‘non-self’ targets and not ‘self’ cells, thus decreasing and ideally completely avoiding auto-immune diseases. Also the orchestration between the innate and the adaptive, (specific and non-specific) branches of the immune system prevents many diseases becoming manifest. Note that

this is not treatment for diseases (disease or lesion treatment is covered in chapter 3) but preventative treatment.

For now we can leave behind the rationale or reason for *why* to prescribe the genotype constitutional remedy, and look at *which* particular medicines in our *materia medica* can be assigned the term 'genotype constitutional' remedy. This is something of a long journey and will involve looking at our past history and the rich heritage that shape and form some of our ideas and ~ dare I write ~ pre-conceptions of today.

Somewhat surprisingly Eizayaga maintained that he differentiated between just four **Genetic Constitutions**. Decades of clinical experience led him to the speculation that there are only four basic constitutional remedy types that humans are born as. This conjecture suggests that when a case is prescribed for, no matter how old or young the patient, it will always progress back to one of the four constitutional remedies. No matter how much physical pathology is present. That if treatment is continued over an extended time, then the end game, the final healthy remedy state will be only one of the four remedies listed below.

The four normal genotypic constitutional medicines:

- *Calcareo carbonica*
- *Calcareo phosphorica*
- *Calcareo fluorica*
- *Sulphur*

The above four medicines are listed in Eizayaga's book '*Treatise on Homeopathic Medicine*' under the title of 'genotypic constitutional diagnosis':

**"Genotypical constitutional diagnosis.**

This is related to the "way of being" of a person, related to the normal features of an individual, be they physical, general, local or functional. In homoeopathy we distinguish usually **four normal genetic constitutions expressed by four medicines: Sulphur, Calcareo carbonica, Calcareo phosphorica, and Calcareo fluorica.**"

– Francisco Xavier Eizayaga, M.D. *Treatise on Homeopathic Medicine*, p133-134.

But wait a minute! Just four! Out of thousands of remedies! All of this seems far too simple. And perhaps it is. And there is a disconnect here as well. When Eizayaga lectured in the USA and the UK in the 1980's he referred to more than the four remedies listed above. At other times Dr Eizayaga mentions other polychrest remedies that can be thought of as constitutional remedies. *Phosphorus* and *Silicea* instead of *Calcarea phosphorus* and *Calcarea fluor* respectively.

When Eizayaga presented his ideas of analysis, discussed cases and spoke about the four constitutional remedies he referred very frequently to the four mineral remedies listed below:

- *Calcarea carbonica*
- *Phosphorus*
- *Silicea*
- *Sulphur*

He also speculated on a potential fifth genotypic constitutional remedy:

- *Lycopodium*

Conspicuously the only medicine of plant origin in the group.

Why did Eizayaga select four medicines initially? And why did he then adapt to include more polychrests? One possible answer for this is, I deduce, from his studies of the European homeopaths, specifically the Swiss and the French. I suggest that he utilised the information we shall explore and then evolved this idea as his clinical results postulated other possibilities. After all, our patients are our greatest teachers. Any well thought out theory can be questioned by the positive results of clinical efficacy.

Also, do re-read carefully the above quote. He does use the words “we distinguish usually”, so there is some variable here; some wiggle room on which to elaborate and evolve this idea.

So what exactly is going on? Just how many base state, constitutional remedies are there? I propose that the unsatisfactory answer is... we just don't know! Perhaps we never will. But the idea of each of us having a genotypical constitutional image that is reflected by the *materia medica* makes good sense

because it gives the prescriber a final goal to aim for. When reading Eizayaga's cases it is strongly evident that the polychrest remedies *Phosphorus* and *Silica* are far more frequently prescribed than either *Calc fluor* or *Calc phos*. For this reason, and because the *materia medica* literature and clinical use of *Phosphorus* and *Silica* is far more extensive than the *calcareae* salts I will gravitate towards using the second list of polychrest remedies plus *Lycopodium* as the starting points for explaining Eizayaga's approach to case analysis.

Odd one out: *Bacillinum*.

The idea of there being only four or five constitutional remedies does seem very limiting and should be questioned. I agree with James Compton Burnett (1840-1901) and consider there to be what can only be called a genotypic constitutional image when writing about the tubercular nosode *Bacillinum*. He described them as frequently being taller and slimmer than their peers. A tendency to grow quickly but not have as much physical and mental stamina as their contemporaries. Long, slim necks, olive shaped nails, skin that tans easily and maintains the suntan longer than others. The physical description and many more details of this nosode may be found in the *materia medica* section of the miasms chapter of this book.

So how do we use the idea of Eizayaga's that there are only four (possibly five!) constitutional state remedies? I think the answer must be... Cautiously! As far as I am aware he only speculated on there being such a small list. I deduce that he selected the original four constitutions (*Calc carb*, *Calc fluor*, *Calc phos* & *Sulphur*) from his reading and research of the Swiss homeopath Dr Antoine Nebel and the French homeopaths, particularly Leon Vannier, Henri Bernard and Roland Zissu to name a few. Certainly this concept of four constitutions seems too simple. However, simple ideas in biology can result in many varied branches and ramifications. Consider the chemistry of life, the genetic code. DNA has only four base pairs (adenine, thymine, cytosine and guanine) and RNA, possibly the mother of all molecules, has three the same and one different (adenine, guanine, cytosine and uracil). Yet still, only four. Regarding the four genetic constitutions let us not consider this to be the gospel truth. Let us be ever willing to experiment and expand this idea. Certainly the idea that we all have one base state, healthy constitutional remedy image derived from our own individual genotypes is a sound one. After

all, we cannot take a remedy and turn our blue eyes brown (or vice versa) or stretch or shrink our skeleton. Therefore we shall be pressing ahead with the concept that all of us have a healthy constitutional remedy that we were born as and that is ever present underneath all the layers accumulated on top of it.

Before we start our journey on the origin of genotype constitutions, we shall do two things.

Firstly we shall perform two short thought experiments which will illuminate our learnt preconceptions and expectations about the symptom complex associated with the two grand **Polychrest** remedies- *Calcarea carbonica* and *Phosphorus*.

Secondly, we shall explore some examples from the homeopathic *materia medica* and see how our learnt expectations are rooted within the literature. When we have done these two tasks, we shall then be ready to go on a trip back through time and isolate the start of the concept of the genotype constitution. Then follow its trajectory and evolution. Once all of this is completed then we shall be in a position to finally reach a conclusion that is workable in clinical practice today.

Here we go...

Thought Experiment number 1:

1. Think of a stereotypical *Calcarea carbonica* patient. Let's imagine a 10-year-old boy and also a woman, 60 years old. I particularly want you to focus on their anatomical appearance. Here we are interested in physique and form.

Thought Experiment number 2:

2.) Now conjure up in your cortex a female *Phosphorus* patient, ten years old and also a male patient in his 60th year. Once again draw your attention to the anatomy of this individual as well as other signs and symptoms.

Now let us examine the results.

When conducting this experiment in a classroom, be it second year undergraduates or seasoned veterans on postgraduate courses, the results are

largely the same regardless. At this point I wager that much more than half of us will have similar conclusions. In fact I am as suspicious as a surukuku bushmaster snake that this will be the case!

The outcome from experiment 1, the *Calc carb* lad, will have a vast majority of us, if not all of us, picturing a flaccid chap, easy going and methodical of mind. He may be prone to being sweaty of the scalp and highly likely to be an eater of eggs. Possibly a history of pica and still a pencil end muncher today. But most importantly for today's lesson his physical aspect. His shape is often thought of as - a rotund figure, heavier than his peers, overweight and with lax muscle fibre and a tendency to a slower metabolism than his contemporaries. Likewise the 60-year-old *Calcarea carbonicum* lady will probably fit the physique of shorter than average stature, broad hips, broad shoulders and torso. More adipose tissue accumulation than many of her peers. Short, sturdy and solidly built. Her bowel action may tend towards the slower side of function, resulting in occasional constipation. Cognitive function is very good if she is permitted to assimilate information at her own pace and in a logical, step-wise manner.

Let us move onto the results of number two thought experiment. The young *Phosphorus* girl. This time the other extreme is evident. Yes of course we think of an enthusiastic, charismatic, vivacious, lively-animated person. You may even use the apt term “bubbly” individual. A thirsty person, particularly for cold water and fizzy drinks. A strong sweet tooth with cravings for chocolate, ice cream and also highly seasoned or spiced foods such as chilies and curry. But once again focus on the anatomy. Many of our thoughts will have coalesced and united upon a slim and slender boned individual, taller than her peers with little adipose tissue resulting in easy definition of muscle tone. Most likely a faster metabolism than her classmates. The male patient requiring *Phosphorus* may be imagined as taller and slimmer than many of his contemporaries, lively and active for his years. Talkative and socially orientated. Fearful of thunderstorms. Engaging and easily excited and enthused. Quick intellect but easily distracted from his task.

So what has happened here? And why do we gravitate towards these particular physiques? I suggest that many of us have been strongly influenced in our perceptions of *materia medica* by great classical homoeopaths and authors

such as James Tyler Kent, Catherine Coulter and Philip Bailey to name but three. All of the above have woven together threads of information in our vast *materia medica* to make up psychological profiles linked in with physical symptoms of food desires and aversions, reactions to temperature and environments and in many cases physical structure. They have produced an archetype anatomical description that, *at times*, is reflected in clinical practice.

Here are some examples from these three authors, a whistle-stop journey through their *materia medica*:

Let's start with Philip Bailey.

"Physically most Calcareas have a characteristic appearance. The body is fleshy, with a tendency to obesity, and a soft layer of fat is present even in non-obese Calcareas... The face is usually rounded and soft in appearance, but more cerebral Calcareas often have a broad, squarish face, with a wide mouth... Like Baryta, Calcareas' limbs and digits tend to be shorter and fatter than average, or else squarish and strong looking."

– Philip M Bailey M.D. *Homeopathic Psychology. Personality profiles of the major constitutional remedies*. p56

Now onto Catherine Coulter.

"In outward appearance Calcarea is what is known as the "leuco-phlegmatic: type (Hering), described in the homeopathic literature as unhealthy looking, chalky or pasty-faced, fair-complexioned, lymphatic, tending toward a flabbier unwieldy type of corpulence... and it is probably the most useful homeopathic children's remedy - the child's constitutional par excellence... The head is large and moist, the torso pear-shaped or pot-bellied, and sometimes the upper lip is swollen or protruding."

– Catherine Coulter. *Portraits of Homeopathic Medicines. Psychophysical analyses of selected constitutional types*. p39-58

Finally, the original grandmaster of the constitutional type - James Tyler Kent. He starts his lecture on *Calcarea* with a thought experiment of his own on how to produce a *Calcarea* subject. The hypothesis of the experiment is to

feed an individual lime until they become a lime subject and they grow fat and flabby! A forced proving.

“... and they grow fat and flabby, and produce deficient bones...Calcareo corresponds in a very high degree to the chlorotic and anaemic, pale and waxy; and in spite of this plump...emaciation of the neck and limbs, while the fat and the glands of the belly increase. Especially is this noted in children. A big bellied child, with emaciated limbs and emaciated neck. Enlarged glands. Pale and flabby, and sickly. Those that take on flesh without any increase in strength. They take on flesh and grow flabby. Remain feeble.”  
– James Tyler Kent. *Lectures on Materia Medica*. p311-316

Let us quickly examine the remedy *Phosphorus* from these three sources of information.

Philip M Bailey - “The body is generally tall, slim and very lithe, being more flexible than most, to the point of being double-jointed. The limbs tend to be long and graceful, like those of a dancer, but not as fragile as those of *Silicea*... The facial features of *Phosphorus* are usually highly characteristic. The most prominent features are the eyes, which are unusually large, and bordered by very long eyelashes... The face is angular in outline rather than rounded, and tends to be triangular in shape, with a pointed chin and a broad forehead.”  
– Philip M Bailey M.D. *op.cit.* p271

Catherine Coulter - “He is usually of slight build. The woman is slender and graceful, the man is spruce and dapper.”  
– Catherine Coulter. *op.cit.* p1

James Tyler Kent - “The complaints of *Phosphorus* are most likely to arise in the feeble constitutions, such as have been born sick, grown up slender, and grown up too rapidly.”  
– James Tyler Kent. *op.cit.* p824

So we see a repeated theme.

Tall, slim and slender and graceful with big eyes for *Phosphorus*. And in contrast - square, soft, round, fat and flabby with a protruding upper lip for *Calcarea carbonica*. Our experimental results seem justified by the three literature sources referenced.

Concerning morphology, the examples of *Calcarea carbonica* and *Phosphorus* display the full spectrum of this typification ranging from short and solid to tall and slim. I propose that this is a simplification and mostly an academic strategy to aid students of *materia medica* in the assimilation of the vast information of our medicinal agents. At times, it may of course be perfectly true in the clinic. At other times it may equally not be so accurate. But we shall continue with the constitutional archetype as it suits our purpose perfectly for exploring Eizayaga's model of case analysis. Particularly in relation to the *genotype constitution*.

Often when explaining the idea of Eizayaga's genotype constitutional level I will ask students to think of athletes. Imagine a professional rugby player or weight lifter or heavy weight boxer. Now summon up the image of a long distance runner, ballet dancer or featherweight boxer. The rugby player/heavy weight boxer has a heavier, broader physique with a strong upper body, torso and arms. This may correspond to the classical *Calcarea carbonica* remedy symptom pattern. Whilst the taller, slimmer but much faster physique of the runner, dancer or featherweight may be comparable with the genotypical constitutional *Phosphoric* individual.

Now I will deviate here and make it crystal clear that the anatomical structure, physique or form does not limit the capabilities or intellectual faculties of the individual. Not by any means. It may be quite the reverse and indeed the inverse. The stereotypical *Calc carb* can often be associated with a slow, methodical, plodding intellect and frequently perceived as not necessarily the "sharpest tool in the shed!" This is quite incorrect. I will now share with you an academic experience I had many years ago. Upon completing my undergraduate training in homeopathic medicine I decided to expand and extend my understanding of the biological sciences of anatomy, physiology and pathology further, thus giving myself a firm foundation for clinical practice. As a young man with a young family and an increasingly busy practice, time was

in short supply. So I enlisted with the Open University and completed two science degrees. The first in natural sciences and then the second in molecular biology. Naturally I focused upon the biomedical sciences. As I learned and climbed up to higher level courses it became necessary to devote some of my attentions to organic chemistry. This was needed in order to sign up for the advanced anatomical, physiological and pathological courses where an in-depth understanding of the organic chemistry of carbon, hydrogen, nitrogen and oxygen was essential for the biochemistry of the explanations for the course material. This was all conducted in the days before the internet. So, as students, we were posted assignments and VHS video tapes.

Imagine my surprise when my course materials arrived for organic chemistry, and I inserted the videotape into the machine and up popped the image of... *a genotypic Calc carb constitution!* A solidly built, square framed physique. He was a world expert professor in organic chemistry. He delivered his introductory lecture and all subsequent lectures in a slow, methodical, clear and logical manner. To him organic chemistry was simply building blocks. Lego. Jigsaws. Organised, logical, coherent patterns (all praise to the Russian chemist Dmitri Mendeleev and his periodic table). This experience taught me a great lesson. Constitutional genotype structure places no limitations upon mental abilities or intellect. Far from it!

Now I shall retell the age old tale of the tortoise and the hare. We are all familiar with the story. A fast hare and a slow tortoise decide to race.

Ready, steady GO!

The hare bounces and speeds off leaving the slow, plodding tortoise in its wake. The fast-moving mammal quickly takes advantage and zooms far ahead. The non-rapid reptile, slowly, but steadily steps forward. Incrementally advancing. Consistently consolidating his ground. You know how this ends. Hare becomes bored, rests upon his advantage. Stops for a snooze. Tortoise plods onwards. Eventually overtakes the sleeping hare and eventually wins the race. Much to the hare's chagrin. What does this story teach us? That slow and steady wins the race. That when applying your intellect to academic study, however you assimilate information, be it slow or fast, it is tenacity,

perseverance and devotion to your studies that will often repay dividends in the end. Therefore a *Calcareae carbonica* individual may methodically and steadily attain the highest levels of academia.

What I am trying to emphasise here is that there is great variability within each individual's cognitive capacity and emotional expression regardless of their genotypic constitutional remedy state. If we focus exclusively on the mental-emotional symptoms of any individual, then we are immediately presented with a conundrum. The psychological symptoms are highly mutable. Yes there may be a ground zero condition that typifies an individual. We are all familiar with the idea of **Temperament** - an individual's way of behaving and reacting emotionally. For example the following terms will be well known to all:

"She has a *fiery temperament*" (think of *Bryonia*, *Chamomilla*, *Nux vomica*, *Phosphorus*)

"He has a *nervous temperament*" (think of *Ignatia*, *Nux moschata*, *Tarentula hispanica*, *Valerian*)

But how these states are triggered and manifest and maintained is exceedingly complex. There is the age-old debate of whether the temperament is innate or learned. Is it nature or nurture? Of course our experiences shape and form us but how much? And how does it differ between individuals? The answers to these questions are of course unknown and individualised each and every time. Incidentally the origin of the word *temperament* is from the Middle English and Latin - '*temperamentum*' which translates as 'correct mixture'. This word is derived from the initial Latin term '*temperare*' which means 'mingle'. So perhaps the best idea here is to consider each and everyone's temperament to be a correct mixture or mingling of *both* nature and nurture.

Each and every individual's temperament, emotional expression and personality is influenced by many, many variables. We focus on this through the lens of *material medica*, but the contributing factors are vast. The following list is by far incomplete but does touch upon some of the effects that may contribute to the formation, transformation and continual evolution of an

individual's temperament and personality:

- Genetics and evolution
- Epigenetic influences
- Diet
- Exercise
- Sleep & Circadian rhythm
- Microbiome
- Hormones
- Neurotransmitters
- Society
- Culture and sub-cultures
- Childhood/life experiences
- Environment
- Religion
- Social media

Add to this the ability of the brain to re-shape and re-connect synapses in response to meaningful experiences, some neurotransmitters (acetylcholine and adrenaline), making mistakes and sleep then we have *neuroplasticity*, and we are trying to track a moving target. A fearsome task indeed. But as we shall learn, Eizayaga's model does supply us with something of a template, a roadmap on how to map out the evolution of remedies within a complex case history. The bottom line here is that mental-emotional symptoms are of course important symptoms. And we shall look at how they arise within individual cases. But we cannot pigeonhole or typify intellectual capabilities according to genotype constitution. A *Calcareo carbonica* person may be every bit as clever and emotionally expressive as a lively and bright *Phosphorus* constitution.

Deviation concluded. Now to continue with the genotype constitution. Simply explained, Dr Francisco Eizayaga considered the constitutional remedy as the expression of the genetic composition. Relating to the mental, emotional AND the physique or form or anatomy of a person. The word 'soma' (body) from Sanskrit, is used in biology to describe all the parts of an organism except the reproductive cells, and also fits somewhat this idea.

A final word upon the subject of constitution within the remit of homeopathic medicine. I will refer to my two favourite dictionaries of homeopathic medicine to elucidate and explain the differences between how this term is utilised within our profession.

The wonderful and illuminating book *‘Thorsons Encyclopaedic Dictionary of Homoeopathy’* by Harald Gaier states on pp103-4 the following:

### **Constitutional Type**

#### **• Classification according to which particular medicine suits a specific kind of patient.**

“This describes the aggregate of patients’ common distinguishing features. The concept was developed, in an attempt to simplify homeopathic diagnostics, in post-Hahnemann homeopathic practice. It is used to identify patients according to their temperament, appearance, certain characteristics of behaviour and their variance from normal, who each seem to respond to a corresponding polychrest remedy, both

1. in the earlier, undifferentiated stages of disease and particularly after an acute episode, and
2. in chronic disease with pronounced pathological complaints.

If the word constitution describes, as it does, the physical, emotional and mental make up of a living organism, including the mode of performance of its functions, the activity of its metabolic processes, the manner and degree of its reactions to stimuli and its vital power of resistance to attack, then polychrest remedies are widely applicable but are particularly useful in chronic illnesses where “constitutional prescribing” is of most value. This is so because polychrests produce a wide range of reactive symptoms in provers, and such a remedy, in potency, through its broad spectrum of action, affects all tissues of the body in some degree. *All the polychrest remedies are considered to be ‘constitutional drugs’ by the majority of homoeopaths, because the proving of these remedies has indicated that certain persons produce a much fuller picture of the total symptomatology than others... identical conclusions have also been reached by clinical experience with these drugs... it follows, therefore that a classification according to ‘con-*

*stitutional type' in homeopathy is, in reality, a classification more of drugs than of patients, all semantic appearances to the contrary."*  
(Italics emphasis mine. Author)

Gaier communicates that the idea of a constitutional type can be correlated with the *materia medica* symptom images from proving and also confirmed in clinical practice. We will explore this idea more in depth shortly when we meet a Swiss homeopath named Dr. Antoine Nebel.

One last piece of crucial information from Gaier's dictionary, on p105:

"The upshot is that ***the phrase 'constitutional type' is interpreted in two different ways by homeopaths. Some simply mean by it the total symptom-complex presented by the diseased patient, fully as he is found to be at the time. Others, however, also include in its meaning certain unchangeable aspects, such as the patient's build, hair colour, ingrained behaviour patterns and the like which identify the patient-type with a propensity to be constitutionally sensitive to the particular remedy.*** The former group, which denies that **unaltering morphology** can have any meaningful role during the process of homeopathic remedy selection, simply ignores the references to build, hair colour, etc. that have crept into the descriptive 'constitutional drug' pictures."

(***Bold italics*** emphasis mine. Author)

Aye and there's the rub! The term 'constitutional remedy/type' is deployed in two different ways in homeopathic medicine. Some take it to mean the total symptom complex also known as the 'totality of symptoms'. Whilst others use it to refer to the genotype, the genetic configuration of the organism plus the totality of symptoms. Eizayaga is of course in the latter camp, whilst many others reside in the former.

Now let's jump into the second dictionary, namely, Jay Yasgur's *Homeopathic Dictionary & holistic health reference*. This is a great, contemporary work and is frequently updated to include new information as need be. Similar to Gaier, the work of Yasgur defines two explanations under the term Constitution:

“Constitution 1) The overall mental, emotion and physical make up of the person, including the temperament, appearance and behaviour, corresponding to one of the major homeopathic remedy types. 2.) *The physical make-up of the body* including the mode of performance of its functions, temperament, appearance and behaviour characteristics, the activity of its metabolic processes, the manner and degree of its reactions to stimuli, and its power of resistance to the attack of disease-causing organisms.”

(*Italics emphasis mine*) Author

Once again, the former explanation represents the ‘totality of symptoms’ approach with an emphasis on mental/emotional symptoms, whilst the latter emphasises the physical qualities, the genotype, as defined by Eizayaga. Now there is an overlap between these two ideas and certain similarities between them. But being similar is not being identical. Therefore we have the two definitions of *classical constitution* and *genotype constitution* so that we can differentiate.

We can now put this question to bed and continue. The term ‘constitution’ will be used hence forth to mean the genotype description, or to give it a full and accurate name the ‘**Genotypic Constitution**’. Furthermore, Eizayaga was of the firm opinion that the prescription of the constitutional remedy was for healthy individuals and is prescribed to strengthen or fortify an individual’s natural state of health. In short, the constitutional remedy is given as a preventative to the manifestation of disease in the future. The constitutional remedy increases the resistance of an individual’s healthy state and in particular, towards their idiosyncratic predispositions to which they are most susceptible.

Now this does not mean that every tall, slim, nimble person equates to *Phosphorus*. And neither does it indicate that all human anatomies that are similar to rugby players and weight lifters may be regarded as *Calc carb*. That is as absurd as it is silly. However, we must be aware that these ideas are somewhat fixed within our understanding of the *materia medica* and constitutional medicines.

The fact that we have these preconceptions surely does beg the following questions...

- Why do we have these preconceived ideas about morphology and medicines?
- Why do we associate stocky, broad, square skeletons with *Calc carb* and taller, slim, slightly elongated bone structures with *Phosphorus*?

And perhaps most intriguingly of all:

- What is the origin of this idea of a permanent genotypic constitutional type? From whence did this idea spring?

I will tell you why right now. A large percentage of the responsibility for these notions may be delivered to the door of a certain Swiss homoeopath... Dr Antoine Nebel (1870-1954).

To answer these questions fully we must take a journey into the past and look at the history of the evolution of the genotype constitutional remedy. This is going to be no gentle paddle in the shallows. It will be a deep dive into the past. An exploration of our homeopathic heritage.

## 1.2 History of the evolution of the constitutional remedy – Hahnemann to Grauvogl to Nebel to Vannier to Le Roux & Jouanny

The roots of the genotypic constitutional type appear to stem from the European homeopaths, particularly the Swiss and the French. Now, I must admit, I've got a bit of a thing for the Europeans and their approach and use of homoeopathy. (As I also do with the South Americans - hence this book!) In Britain today we are strongly influenced by, naturally, the British homeopaths and also very much so, by the North American homeopaths. Often, the contemporary Swiss, French, German and other European nations are given very little attention or none at all. I think that this is to our educational and clinical detriment. I hope to impress upon you the opinion that investigation of our close neighbours is very worthwhile indeed. I wish to pique, arouse and stimulate your appetite for knowledge from sources that are not commonly taught at the colleges or at our seminars or written about in our books.

I do deduce that the South American homeopathic lineage, and thus Eizaya-ga's concept of the genotype constitution, was firmly influenced by the Swiss and French clinicians in particular.

So come with me now on a journey through time and space and let's go back to the origin of this idea of a healthy, constitutional state. The genotypic-constitutional phase. First of all let's go right back to Samuel Hahnemann (1755 - 1843) and explore his thoughts on the physical constitution.

In the *Organon* 6th edition, Hahnemann writes

Aphorism 5:

"... it will help the physician to bring about a cure if he can determine the most probable *exciting cause* in an acute disease and the most significant phases in the evolution of a chronic, long-lasting disease, enabling him to discover its *underlying cause*, usually a miasm.

***In this he should consider: the evident physical constitution of the patient*** (especially in chronic conditions) ..."

– S Hahnemann. *Organon* 6th edition p11

(***Bold italics*** mine. Author)

The message here is clear. Hahnemann emphasises the importance of looking at the physical constitution when prescribing for a patient, especially when treating chronic diseases.

Now we switch from prescribing in the clinic to provings or **Pathogenetic Experiments** upon healthy individuals.

In Aphorism 135 and 136 Hahnemann writes the following:

Aphorism 135:

"The total picture of disease symptoms that a medicine can produce approaches completion only after multiple observations have been made on many suitable persons of both sexes, ***with various constitutions.***"

Aphorism 136:

“As we have said, in provings on the healthy the changes in health which a medicine can produce cannot all be brought out in any one person, but only in *many different people of various physical and psychic constitutions.*”

– S Hahnemann. *Organon* 6th ed, p114

(***Bold italics*** mine. Author)

Twice is nice! In these two paragraphs Hahnemann shows the importance of testing or proving medicines on a diversity of physical constitutions in order to bring out the fullest possible picture of the pathogenesis of the medicine being investigated. Now dear reader, all I want you to do is to hold this idea in your head. That is, the postulation that *physical, constitutional symptoms may be important both in the clinic and also when conducting provings/pathogenetic experiments.*

Now we can roam and ramble back up to contemporary times, exploring the evolution of the constitutional state and visiting various other influences along the way.

Let's quickly drive-by Dr Eduard Von Grauvogl (1811 - 1877). Who's he some of you may ask? Grauvogl was a German doctor of keen intellect who practiced in Nuremberg, Bavaria and then Gastein in Austria. It was here that he introduced a new remedy into our materia medica - *Lapis album*. This remedy was derived from a metamorphic rock, gneiss, made up of *Calcareo silico-fluorata* and is a fantastic medicine for goitre, enlargement of lymphatic glands, fibroids and cancer.

Grauvogl was invited by the Governor General, Count Nikolai Adlerberg (1819 - 1892) to pop over to Finland and introduce homeopathy to the medical faculty and high-ranking military physicians. Grauvogl was one of the first authors to write about constitutional states. He introduced the ideas of 'three constitutional dispositions' namely - **Hydrogenoid, Oxygenoid and Carbo-nitrogenoid**. These constitutional types are founded on a biochemical hypothesis. The idea is that each of the three constitutional states is linked to an excess of specific substances:

Hydrogenoid = excess hydrogen

Oxygenoid = excess oxygen

Carbo-nitrogenoid = excess carbon and nitrogen

However, it didn't work out. These terms are now largely redundant in homeopathy today and rarely referred to. Grauvogl's constitutions may be considered to be a dead end, a blind alley or to use the French term a *cul-de-sac*. They are included here as some will be familiar with them and also to give a full account of the history of constitutional states. So let us push onwards and upwards with our journey.

The person who I deem as the originator of the genotype constitution is the Swiss homeopath Dr Antoine Nebel (1870 - 1954).



Dr. Antoine Nebel

It was Dr Nebel who, in his tuberculosis sanatorium in the Swiss Alps, greatly employed the use of the tuberculosis nosode *Tuberculinum residuum Koch* (a nosode prepared from a modified version of the disastrous allopathic drug ‘Tuberculin’, by the German physician and microbiologist Robert Koch (1843 - 1910). Nebel, described as “one of the most powerful personalities in homeopathy”, also championed the use of the ‘Korsakoff potenziation’, and had a machine for successive Deconcentrations/Triturations to make Ultradilutions for homeopathic medicines. He, like Dr James Compton Burnett (1840 - 1901), was influenced by Dr Johann Gottfried Rademacher’s (1772 - 1849) system of ‘**Organopathic medicine**’ also known as ‘**Drainage**’.

And he, most relevantly here, introduced the idea of physical constitutions related to the three following remedies:

- *Calcarea carbonica*
- *Calcarea phosphorica*
- *Calcarea fluorica*

The three medicines listed above may be referred to as the **Calcarea constitutions**. (If you re-call the Eizayaga quote earlier, it was these three *Calcarea* preparations plus *Sulphur* that made up the four normal genetic constitutions.)

So how did Nebel arrive at this conclusion? There were two reasons that led him to his hypothesis of the three *Calcarea* constitutions:

1. Provings/Pathogenesis
2. Clinical observations and results

The first was observing patients whilst conducting provings. The second was spotting a similar but inverse relationship at his clinic. The **Morphology**, that is the form and structure of a biological organism, of certain provers and specific patients sparked Nebel’s interest and attention.

Let’s start with the provings. Whilst Nebel was conducting provings of the remedies - *Calcarea carbonica*, *Calcarea fluorica* and *Calcarea phosphorica*, he noticed a strange thing. He observed that individuals with shorter, broader skeletal structures produced the fullest image and best proving symptoms for the remedy *Calcarea carbonica*.

Whereas individuals with tall, slim skeletons, narrow shoulders and hips tended to be the best provers, producing the clearest symptoms, for the remedy *Calcarea phosphorica*.

The *Calc fluor* remedy produced the most symptoms in people with neither short or stocky nor tall and slim skeletons but in volunteers with a tendency to dysmorphia or strong asymmetry evident in their anatomy. Examples being asymmetry of the face - ears and/or eye sockets at different level. Table 1 below summarises this information and shows the correlation of proving remedy and morphology

**Table 1. Proving remedy correlated with an individual's morphology and physiology.**

| Proving remedy              | Morphology of the best provers                                     |
|-----------------------------|--------------------------------------------------------------------|
| <i>Calcarea carbonica</i>   | Shorter than average, stocky build, slow metabolism.               |
| <i>Calcarea fluorica</i>    | Varying heights, tends to be short and slim, pronounced asymmetry. |
| <i>Calcarea phosphorica</i> | Taller and slimmer than average. Fast metabolism.                  |

This idea must have floated around in Nebel's mind and then settled down for a bit. A few years later the idea was woken up and resurfaced when Nebel noted that his clinical results showed the opposite, inverse relationship. This time he observed that when patients presented with pathology for treatment, that he got the best results when the morphology linked up with the same remedies correlated with his *calcarea* provings.

So short, stocky individuals ameliorated quicker when *Calc carb* was their indicated remedy. Tall, slim patients improved rapidly when prescribed *Calcarea phosphorica* and patients with asymmetry of structure responded particularly well to *Calc fluor*. Table 2 below shows this relationship.

**Table 2. Morphology and physiology of patient and good clinical results.**

| Morphology of the patient                                          | Effective clinical outcome from Rx |
|--------------------------------------------------------------------|------------------------------------|
| Shorter than average, stocky build, slow metabolism.               | <i>Calcarea carbonica</i>          |
| Varying heights, tends to be short and slim, pronounced asymmetry. | <i>Calcarea fluorica</i>           |
| Taller and slimmer than average. Fast metabolism.                  | <i>Calcarea phosphorica</i>        |

From this convergence of proving details (table 1) and verified clinical cures and information (table 2) he performed a pincer movement in his mind. Dr Nebel joined the two pieces of data together. Then he suggested that these three *Calcarea* medicines - *Calc carb*, *Calc fluor* and *Calc phos* may be considered as constitutional remedies within the remit of the biological definition of the term ‘*constitution*’. That is, with correspondence and correlation with an individual’s morphology. Namely - genotypic constitutions. The joining up of proving details with effective clinical outcomes in relation to morphology and constitution correlates with the ideas and observations that Hahnemann wrote about in the 6th edition of the *Organon*. I asked you earlier to retain this thought and direct you back to the aphorisms 5, 135 & 136 from Hahnemann’s 6th *Organon*.

Nebel went on to associate each of the above three remedies with three particular morphological types. From this he formulated a constitutional triad that was used to classify individuals.

- **Carbonic constitution**
- **Phosphoric constitution**
- **Fluoric constitution**

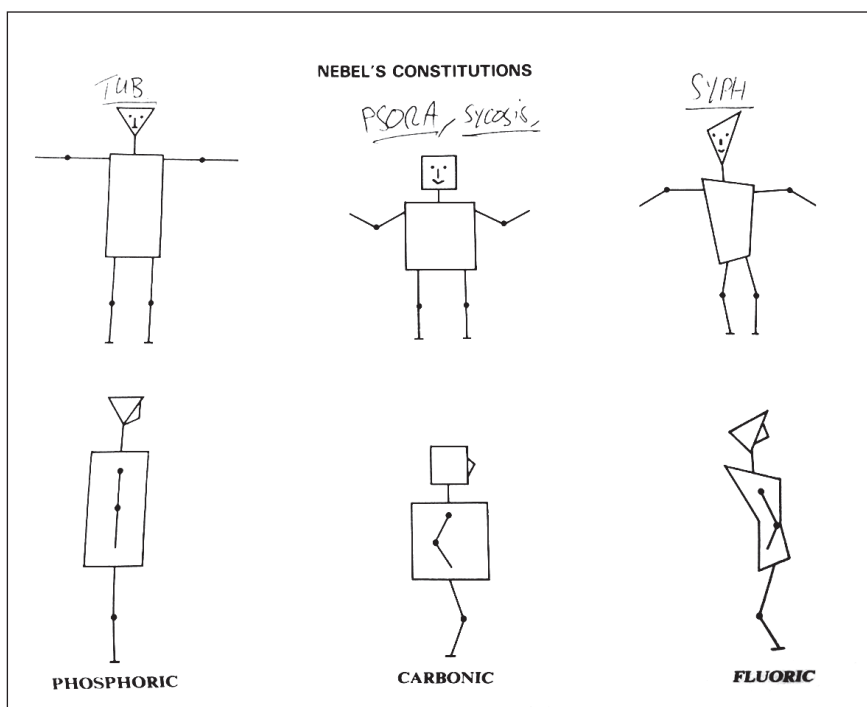
The carbonic constitution is compatible to short, stocky skeletons, with a slower metabolism than so called ‘normal’. Prone to accumulating weight, even becoming obese. Articulation is predisposed to be hypo-lax, where horizontal extended arms form an angle opening upwards and the legs form an angle opening backwards (see Figure 1 below).

The phosphoric constitution tends to be tall, slim individuals with long skeletons with narrow shoulders and hips and a faster metabolism than the carbonic constitution. They do not accumulate body weight very easily and may drop down below a healthy weight rapidly, especially children during an acute phase illness. Articulation tends to be supple which corresponds with arms and legs forming fairly straight lines when extended fully (see Figure 1 below).

The fluoric constitution is associated with neither exclusively tall nor short skeletons but individuals of varying heights. There is a tendency of correlation with shorter, slimmer builds but the main key point is an asymmetry of structure. Skeletal dystrophy and hyperlax articulation of the joints. The arms when extended horizontally bend down and open an angle downwards, the legs hyperextend and open forwards. Think back to school days and remember the kids who could perform those strange, gut-churning, deformations with their hands, arms and legs. These classmates would proudly (but of course, anatomically and physiologically incorrectly) claim to be ‘double-jointed’ such was their ability to contort their bodies.

These three constitutions (carbonic, phosphoric and fluoric) are represented diagrammatically in the most excellent book “*The Essentials of Homeopathic Therapeutics*” by the French homoeopath Dr Jacques Jouanny, which is reproduced below in Figure 1.

**Figure 1. Diagrams of Carbonic, phosphoric and fluoric constitutions.**



*The Essentials of Homeopathic Therapeutics by Dr Jacques Jouanny. p64*

The simplified diagrams above give us the stereotypical *materia medica* image of the short and stocky, square shaped *Calcareo carbonica* body shape in the centre. This can be contrasted by its opposite, the taller, slimmer *Phosphorica* body build on the far left. The dysmorphic, fluoric morphology is represented upon the right of the diagram.

Dr Nebel's ideas inspired a number of first-class homeopaths, particularly French physicians, to persist in the direction of constitutions and morphology. This typology or classification was disseminated broadly and adapted by Leon Vannier (typology and temperament), Andre Rouy, Henri Bernard (embryological hypothesis) and Roland Zissu (bio-typology).

### Leon Vannier

First of all we shall briefly focus on Leon Vannier. He continued this idea of the three **Calcareo constitutions** and this idea has lived on, particularly in

France, and been subsequently modified and expanded. Vannier broadened the constitutions idea to include body types based upon eight of the Greek gods - Jupiter, Saturn, Mars, Venus etc. This is not about astrology, no birth dates are given, rather the constitution is correlated with statues and works of art that typify particular anatomical structures. Artists who are creative with paints on canvas, or with stone and sculpture, must all to a greater or lesser extent, be observers of anatomy. Vannier explores this in his book '*Typology in Homeopathy*'.



Dr Leon Vannier (1880 - 1963)

Now I must put my hand up and admit that I have not gleaned lots of useful clinical information from Vannier's book on Typology. I thought it would help clarify some points on genotypes and constitution, but for me it comes closer to confusion than lucidity. Vannier's work on typology does spiral off into mythology, zoology, celestial signatures, ethnology, psychology and many other directions. It is interesting in places but for me it lacks coherence. In an attempt to understand the morphological and psychological complex in an individual, Vannier describes his concepts of prototypes (eight pure types) and metatypes (a combination of prototypes). The eight prototypes are based on the Ancient Gods: Mars, Saturn, Apollo, Jupiter, Venus, Mercury, Luna and Terra. This is bewildering and complex. His descriptions of the temperaments acknowledge the vast variability of influences from free will to environmental

effects. For the genesis of the temperament he identifies two elements - *atavism* (hereditary traits) and the *possible* (experience). This is a philosophical work with some very interesting *materia medica* information. But for the large part it is not practical for clinic. However, he does have some excellent observational details. Particularly for the teeth of different constitutional morphologies. Here is a description of the three *Calcareae* constitutions from Vannier:

“The development of a human being follows one of three plans - three constitutions, which I have named Carbonic, Phosphoric and Fluoric. Why these names, which at first may seem a little strange? In the course of studying the constitutions, and identifying their sensory functional phenomena and objective signs, I was surprised by the frequent correlation with the characteristics of three important remedies in our *materia medica*: *Calcareae Carbonica*, *Calcareae Phosphorica*, and *Calcareae Fluorica*.

Between them these three forms, Carbonic, Phosphoric and Fluoric, divide the human species into three distinct types, whose morphological characteristics I shall briefly recall. This will allow us to establish the morbid predispositions of a subject, by defining his hereditary.”

### **Carbonic Constitution**

The structure of the Carbonic is rigid and straight. His upper and lower rows of teeth are in perfect occlusion. The teeth themselves are very white and the central incisors are almost square. When he is in the upright posture, the forearm projects slightly forward and the thigh and leg are not exactly aligned, though they show no angular deformity. In forced hyperextension of the upper limb, the forearm still forms a slight angle with the upper arm.

The Carbonic is ‘basic’ and ‘fundamental’. He is resistant and stubborn. His directing principle is order, his reasoning always logical. He likes to establish, to organise, to construct; and in whatever situation he finds himself he shows, to a high degree, a strong sense of responsibility.

### **Phosphoric Constitution**

The Phosphoric is expressive and variable in appearance. His upper and lower rows of teeth are in perfect contact at all points, but the palatine

arch is often markedly ogival. His teeth are yellow and long; the transverse diameter of the central incisors is definitely less than their vertical diameter. When he is standing erect, with the upper arm in forced hyperextension, the forearm forms a straight line with the humerus. Thigh and leg are likewise perfectly aligned.

The Phosphoric is ‘elegant’ and ‘shapely’, he is fragile and has low resistance. Naturally distinguished, the search for perfection is the dominant concern of his life. Aesthetic considerations rule his spirit and dictate his smallest actions. He loves beauty and seeks to express it.

### **Fluoric Constitution**

The build of the Fluoric is unstable and flexible. His upper and lower rows of teeth do not meet correctly. An undershot jaw is normal in the Fluoric. His forearm forms a reflex angle with the humerus, more evident when the upper limb is put into forced hyperextension. Thigh and leg show an angular deformity, an obtuse angle facing forwards.

The Fluoric is ‘unstable’ in attitude and ‘irregular’ in function. Uncertain and irresolute, he takes decisions on the spur of the moment, and his plans, always sudden and unpremeditated, are often contradictory. Gifted with extraordinary mimicry, the variety of his brilliant performances are astonishing.”

– Leon Vannier, *Typology in Homoeopathy*, p2

In the above writings we have the *Calcarea constitutions* exactly the same as Nebel. But note the inflexibility of the theory, all humans must fall into one of three morphological plans. The Carbonic is described as ‘basic and fundamental’ with a strong sense of responsibility. The Phosphoric as ‘elegant and shapely’ searching for perfection and expressing beauty. These descriptions link quite nicely with the *materia medica* noted earlier (Bailey, Coulter, Kent) and once again it must be emphasised that these characters or personalities are strongly exaggerated forms. Memorable players from our literature. Over magnified behavioural traits that make recall easier. Surely not every Phosphoric constitution is naturally distinguished and dominated by a search for perfection? I know a few who get bored very quickly and swap a search for perfection for a change to routine.

And finally onto the poor old Fluoric constitution. They are lumbered with being 'unstable and irregular' and also being hesitant and uncertain. Always deciding on a 'spur of the moment'.

But the morphological descriptions of the teeth are interesting, and these can be observed in clinic. Essentially Vannier champions the idea of three *Calcareae constitutions* and superimposes on top of them a diversity of different types in order to try and explain psychological symptoms and variations from the classic *Calcareae* constitutions. My final conclusion is that this work may be interesting but that the use of *prototypes* and *metatypes* is just not practical in clinic.

### Dr Henri Bernard

Now we move onto another famous French Homeopath, Dr Henri Bernard. Bernard built upon the ideas of the *Carbonic*, *Phosphoric* and *Fluoric* constitutions and very importantly added a fourth constitution the **Sulphuric Constitution**. We will now investigate Bernard's ideas and expand upon Nebel's and Vannier's work on the three basic primary constitutions.



Dr Henri Bernard (1895 - 1980).

As Dr Jacques Jouanny writes in his fascinating and clinically practical book *'The Essentials of Homeopathic Therapeutics'*:

"Just before the Second World War, *Henri Bernard* proposed an **Embryological Hypothesis** to the theory of constitutions because they are in fact the result of hereditary factors. According to him, the constitutional difference resulted from the pre-eminence of the development of one of the three embryological layers:

- **If the three layers develop in an equal, balanced way**, the result is perfect harmony of shape, physiology and psychology. This is the ideal type, the Greek model (think of Leonardo da Vinci's 'Vitruvian Man' with its perfect anatomical appearance, which is used as a reference, but which is practically never encountered. (I am resisting diving down the rabbit hole of the Golden Mean and the Fibonacci sequence here! - author)

- **If the endodermic layer predominates**, the organs for which it is responsible (digestive and respiratory) are preponderant in the economy and pathology of the resulting constitution: this is the **Carbonic or Brevilineal constitution**.

- **If the mesodermic layer predominates**, the supporting tissues and the blood (consequently the defensive system of the body) are preponderant. The result is the **Normalineal constitution** which has a strong reaction to morbid aggressions just like the pathogenetic reactions of *Sulfur*. Therefore, this constitution is still called the **'Sulfuric' constitution**.

- **If the ectodermal layer predominates** (nervous tissue and skin), the resulting constitution is dominated by the nervous system. This is the **Longineal or Phosphoric constitution**.

In addition to these **three fundamental primary constitutions**, which are the result of the preferential development of one embryological layer over another, there is a fourth constitution, the **Fluoric constitution**, which may modify each of the above constitutions by adding a measure of **dys-trophy**. The fluoric constitution is therefore always **mixed and secondary**."

– Dr Jacques Jouanny, *The Essentials of Homeopathic Therapeutics*, p66

With Bernard's hypotheses we have some new terminology and new ideas to assimilate. Let us start with the terminology first.

### **Brevilineal constitution**

The word 'brevis' is from the Latin for 'short' or 'brief'. And the word 'lineal' is derived from the Old French and Latin 'linealis' which is originally from 'linea' which means 'line'.

Therefore it is quite logical the 'short-line' equates to having a morphology that is shorter and broader. Thus, *Brevilineal constitution* = *Carbonic constitution*.

### **Normalineal constitution**

The word 'normal' is from the Latin 'normalis' which is from 'norma' the Carpenter's square. Which is a little tricky, but is associated with correct, perfectly aligned angles when building with wood. So 'normal-line' is the average, well-proportioned morphology. *Normalineal constitution* = *Sulphuric constitution*.

### **Longilineal constitution**

The word 'long' is from Germanic origin - 'langen' which means to reach or to extend. So this fits really well with the idea of the *Phosphoric constitution*. The *longilineal constitution* is the opposite of the *brevilineal/carbonic constitution*.

### **Dystrophic constitution**

The word 'dystrophy' is a medical word that describes the degeneration of an organ, tissue or body. This may be due to malnutrition or disease. It may also be hereditary. The word 'dystrophia' is from Latin, which in turn is from the Greek - 'dus' which means 'bad'. And 'trophia' which means 'nourishment'. The *dystrophic constitution* = *fluoric constitution*.

The idea of an *embryological hypothesis* i.e. the constitutional differences resulting from the predominance of development of the three embryological layers is also encountered in the work of the American psychologist W.H Sheldon. He proposed the idea of *somatotypes* which is a classification of body types into three different categories. Sounds familiar? Sheldon's theory

which appeared around the same time in the 1940's, as Bernard's hypothesis is extremely similar. The three morphological types - *endomorph*, *mesomorph* and *ectomorph* match up very closely indeed with the three *carbonic*, *sulphuric* and *phosphoric* constitutions. All these classifications will be summarised after we have looked at *Roland Zissu's* ideas after *Henri Bernard*.

*Bernard* did also associate Hahnemann's chronic disease/miasm/toxin theory with individual morphology. The correspondence is listed below:

- Carbonic constitution and Sycosis
- Sulphuric constitution and Psora
- Phosphoric constitution and Tubercular
- Fluoric constitution and Syphilis/Luetism

Table 3 below summarises much of the information already discussed and also associates constitution with miasmatic influences which will pave the way for further development of this idea for case analysis later in this book.

**Table 3. Timeline and evolution of the idea of constitutional medicine & corresponding miasms & related remedies.**

| Name of source                                  | Constitutional types                                                                | Corresponding miasms                          | Related remedies                                                                                                                                                                                                        |
|-------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Samuel Hahnemann (1755 - 1843)</b>           | <i>Sulphur</i><br><i>Thuja</i><br><i>Mercury</i>                                    | Psora<br>Sycosis<br>Syphilitic                | <i>Calc carb</i> , <i>Graph</i> , <i>Psor.</i><br><i>Med</i> , <i>Nat-s</i> , <i>Nit-ac</i> , <i>Puls.</i><br><i>Aurum</i> , <i>Nit-ac</i> , <i>Syph.</i>                                                               |
| <b>Johan Gottfried Rademacher (1772 - 1850)</b> | 3 universal remedies:<br>Copper<br>Iron<br>Cubic Nitre                              |                                               |                                                                                                                                                                                                                         |
| <b>Eduard Von Grauvogl (1811 - 1877)</b>        | Carbo-nitrogenoid<br>Hydrogenoid<br>Oxygenoid                                       | Psora<br>Sycosis<br>Syphilitic                | <i>Cuprum/Phos.</i><br><i>Natrum Sulph/Thuja</i><br><i>Kali iodatum</i>                                                                                                                                                 |
| <b>Antoine Nebel (1870 - 1954)</b>              | <i>Calcarea carbonica</i><br><i>Calcarea fluorica</i><br><i>Calcarea phosphoric</i> | Psora/Sycosis<br><br>Syphilitic<br>Tubercular | <i>Calc carb</i> , <i>Graph</i> , <i>Psor.</i><br>+ <i>Med</i> , <i>Nat-s</i> , <i>Nit-ac</i> , <i>Puls.</i><br><i>Aurum</i> , <i>Nit-ac</i> , <i>Syph.</i><br><i>Bacill</i> , <i>Caust</i> , <i>Phos</i> , <i>Tub.</i> |

| Name of source                                                                                                                                                                 | Constitutional types                                                                | Corresponding miasms | Related remedies                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------|
| <b>Leon Vannier (1880 - 1963)</b>                                                                                                                                              | <i>Calcarea carbonica</i><br><i>Calcarea fluorica</i><br><i>Calcarea phosphoric</i> | As above             | As above                                                             |
| <b>H. Bernard</b>                                                                                                                                                              | <i>Sulphuric</i> = Mesodermic                                                       | Psora                | <i>Calc carb, Graph, Psor.</i>                                       |
|                                                                                                                                                                                | <i>Carbonic</i> = Endodermic                                                        | Psora/Sycosis        | <i>Calc carb, Graph, Psor.</i><br>+ <i>Med, Nat-s, Nit-ac, Puls.</i> |
|                                                                                                                                                                                | <i>Phosphoric</i> = Ectodermic                                                      | Tubercular           | <i>Bacill, Caust, Phos, Tub.</i>                                     |
|                                                                                                                                                                                | <i>Fluoric</i> = Dystrophic                                                         | Syphilitic           | <i>Aurum, Nit-ac, Syph.</i>                                          |
| <b>Francisco Xavier Eizayaga (1921 - 2001)</b><br><br><b>Calc types from book in 1972</b><br><br><b>Calc, Phos, Silicea, Sulphur &amp; Lyc from lectures in 1980's onwards</b> | <i>Calcarea carbonica</i>                                                           | Psora/Sycosis.       | <i>Calc carb, Graph, Psor.</i><br>+ <i>Med, Nat-s, Nit-ac.</i>       |
|                                                                                                                                                                                | <i>Calcarea fluorica</i>                                                            | Syphilitic           | <i>Aurum, Nit-ac, Syph.</i>                                          |
|                                                                                                                                                                                | <i>Calcarea phosphoric</i>                                                          | Tubercular           | <i>Bacill, Caust, Phos, Tub.</i>                                     |
|                                                                                                                                                                                | <i>Sulphur</i>                                                                      | Psora                | <i>Calc carb, Graph, Psor.</i>                                       |
|                                                                                                                                                                                | Alternatively...<br><i>Calcarea carbonica</i>                                       | Psora/Sycosis        | <i>Calc carb, Graph, + Psor. Med, Nat-s, Nit-ac.</i>                 |
|                                                                                                                                                                                | <i>Phosphorus</i>                                                                   | Tubercular           | <i>Bacill, Caust, Calc phos, Tub.</i>                                |
|                                                                                                                                                                                | <i>Silicea</i>                                                                      | Syphilitic           | <i>Aurum, Nit-ac, Syph.</i>                                          |
|                                                                                                                                                                                | <i>Sulphur</i>                                                                      | Psora                | <i>Calc fluor.</i><br><i>Calc carb, Graph, Psor.</i>                 |
|                                                                                                                                                                                | & possibly also -<br><i>Lycopodium</i>                                              |                      |                                                                      |

This idea will be expanded upon further in chapter 4.

The table 4 below summarises our progress up to this point on the main ideas and authors regarding morphological/constitutional types.

Table 4. Constitutional types and interchangeable terms.

| Author/<br>Reference       | Morphological                                     | Types                                              |                                                     |                                                 |
|----------------------------|---------------------------------------------------|----------------------------------------------------|-----------------------------------------------------|-------------------------------------------------|
| <b>Nebel &amp; Vannier</b> | <i>Calcareo carbonica</i> constitution            |                                                    | <i>Calcareo phosphorica</i> constitution            | <i>Calcareo fluorica</i> constitution           |
| <b>Bernard &amp; Rouy</b>  | Brevilineal constitution<br>Carbonic constitution | Normalineal constitution<br>Sulphuric constitution | Longilineal constitution<br>Phosphoric constitution | Dystrophic constitution<br>Fluoric constitution |
| <b>Sheldon</b>             | Endomorph                                         | Mesomorph                                          | Ectomorph                                           |                                                 |
| <b>Eizayaga</b>            | <i>Calcareo carbonica</i>                         | <i>Sulphur</i>                                     | <i>Calcareo phosphorica</i><br><i>Phosphorus</i>    | <i>Calcareo fluorica</i>                        |

Note that Nebel and Vannier did not have a *sulphuric constitution* type. Also that Sheldon does not have a *dystrophic/fluoric constitution*. Only Drs Bernard and Rouy have the broad spectrum of four constitutional types. And that these four constitutional types of Bernard and Rouy are exactly mirrored by Eizayaga in his writings we encountered earlier from his book...

“In homoeopathy we distinguish usually **four normal genetic constitutions expressed by four medicines: *Sulphur*, *Calcareo carbonica*, *Calcareo phosphorica*, and *Calcareo fluorica*.**”

– Francisco Eizayaga MD, *Treatise on Homeopathic Medicine*, p133-134.

Now that we have the new terminology under our belts, we can progress on to how Bernard’s hypotheses are represented by the morphology and also pathological tendencies displayed in clinic. There is also information on **Neuro-Psychic behaviour**. This may be described as the general behaviour of an individual. If they are restless or relaxed. Aggressive or placid. As Eizayaga would put it “There way of being”, an individual’s basic personality state. Obviously this is highly mutable and changes day to day and moment

to moment depending upon external and internal stimuli. This also changes with the continual change of life experiences. But the idea here is that there is a base state. A ground zero of personality that an individual will gravitate towards when in a healthy state. Hahnemann referred to these symptoms as nervous or psychic symptoms.

Bernard's addition of a fourth constitution, namely the *Sulphuric constitution*, gives more breadth and scope than the ideas of the three *Calcarea constitutions*. Also, as we shall see, there will be a group of remedies that may be aligned or associated (and miasms as well, but that is for later) with each constitutional group.

### **Normalineal / Sulphuric constitution**

The sulphuric physical constitutional morphology is typified as being harmonious and well proportioned. Average height and weight.

The face is rectangular in shape, vertical axis is longer than the horizontal. And if we divide the face into three sections - with a line across the eyebrows and another across the tip of the nose then all three sections are equivalent and in equilibrium. (see figure 2 below) If the sulphuric constitution individual is asked to stand up and stretch both arms out sideways with palms facing upwards then the angle is only slightly less than 180°. The hand is evenly proportioned. The finger length to palm length ratio is in balance. The length of the first and third finger (second and fourth are respectively too long and short) is generally equivalent to the length of the palm (see Figure 2).

Muscle tone is normal with average laxity of ligaments. Teeth are square, strong and white. Teeth meet together exactly. Dental arcades are circular, and the roof of the palate is rounded.

Pathological predispositions are:

- eczema
- allergies
- boils
- haemorrhoids
- spasmodic arterial hypertension

Neuro-psycho behaviour of Sulphur patients is good self control and good confidence. Optimism that is balanced with common sense. There may be explosive episodes of irritability and anger. But these are usually short as common sense predominates and modifies the emotional reaction.

### **Brevilineal / Carbonic constitution**

The morphology of the carbonic constitution is below average height coupled with above average weight giving a stout or square appearance.

The face is described as short (brachycephalic) and shaped square or round. With the two lines across the face at the eyebrows and tips of the nose there is disequilibrium with the lower third of the face (tip of nose to tip of chin) being the largest. (see figure 2)

The hands are short and wide with stout, thick fingers. The fingers are shorter than the palm which is strong and wide. In Britain we may colloquially call this 'hands like spades' referring to builders and shovels. Thus the finger to palm ratio is unbalanced. There is hypo-laxity of the ligaments which makes articulation tight. If the carbonic constitution individual is asked to stand up and stretch both arms out with palms facing upwards, then the angle is considerably less than 180°. (see figure 1 above)

The teeth are either square or rectangular in a horizontal direction. Strong and white with a tendency to cavities at the root. Dental arcades are wide and elliptical. Palate roof is flat due to a horizontal direction of development and is slightly rounded. Near perfect occlusion of teeth.

Pathological predispositions are:

- nutrition disorders such as - obesity, diabetes, gout, biliary and urinary stones/lithiasis
- arthritis
- eczema
- warts
- sclerous hypertension with hypercholesterolaemia, abnormal lipid levels, uraemia
- fibrous or osteo-articular tuberculosis

Neuro-psycho behaviour is controlled by passivity and economy. Good stamina for either physical or mental work. But likes to embark on such events at their own pace and rate of assimilation of information. This patient likes order and method and is fond of peace more so than confrontation. There is a strong streak of stubbornness.

### **Longilineal / Phosphoric constitution**

Phosphoric morphology is of course long and slender. Height is above average, and weight is low in comparison. Development is in a vertical direction which may result in a tall, thin and hunched appearance.

The face has a long and triangular shape. Growth is in a vertical direction more so than relative to width (dolichocephalic). There is a high, wide forehead. The third of the face from the eyebrows to the vertex is the largest, displaying disequilibrium (see figure 2).

Hands have a finger length to palm length ratio that is unbalanced and in disequilibrium. Long, thin fingers exceed the length of the palm. (see figure 2) The nails are almond or olive shaped. Colloquially this may be known as the 'musicians hand' or the 'artists hand'.

There is hypotonia, low muscle tone. Therefore when the arms are extended, they may be at 180° and straight.

The teeth are long and rectangular shaped in the vertical axis. Tendency to turn yellow and have cavities that are located towards the centre and symmetrical. Dental arcades are elongated eclipses with large anterior-posterior axis. Palate roof is arched and pointed - ogival. Imperfect occlusion of teeth with an inclination for the upper teeth to extend out and form an overbite. The canines can be extremely pointed and wolf-like.

Pathological predispositions:

- weight loss
- visceral ptosis and organ prolapse
- demineralisation of teeth and bones
- wastage of subcutaneous tissue
- tuberculous cavities

- Graves and para-Graves disease
- peripheral venous stasis due to hypotension
- juvenile acne

Neuro-psychic behaviour. The phosphoric constitution is hypersensitive and nervous. Excited easily and quickly. But at the same time exhausted easily and quickly. Low stamina for either physical or mental work. Cyclothymic with sharp swing between excitement and depression. Easily enthused but equally as easily discouraged. A dislike of regularity, order and method.

### **Dystrophic / Fluoric constitution**

The dystrophic constitution morphology is described as variable. However, the tendency is towards short height and low weight.

Asymmetry found anywhere in the body coupled with an appearance of looking older than their chronological age. There may be deficiency of elastic tissues - elastoplastic dystrophy and asymmetry of the connective tissues of the bones. The skull may be long or short (dolichocephalic or brachycephalic) but will always display some form of asymmetry e.g. eye sockets at different heights or ears at noticeably different heights.

Hyper-laxity of ligaments gives great suppleness to the joints and hands. This can easily predispose to easy dislocation of joints. The hand displays easy dislocation of the thumb.

The hyper-laxity of ligaments means that when the fluorine constitution extends their arms out, palm up, that the angle goes beyond 180° and the arm, from elbow to hand can point downwards and back. (see figure 1). Also when the leg is extended the angle opens forwards (see figure 1).

Teeth are irregular, asymmetrical, small and triangular shaped. They may have spaces between them or overlap. Particularly the incisors, canines and pre-molars. Deficient enamel giving a grey colour. Prone to many cavities. Dental arcades variable. Occlusion is imperfect due to incorrect position and overlap or spaces between teeth. Palate roof is ogival.

Pathological predispositions:

- sclerosis
- exostoses
- lymph node induration
- tissue induration
- vascular sclerosis or distension due to affinity to elastic tissues. Varicose veins, aneurysm etc.
- hyper-laxity of ligaments: sprains, lumbago, dislocations.

Neuro-psychic behaviour is influenced by instability and paradox.

Indecision and restlessness result in instability.

Paradox is due to unexpected, strong reactions which are short lived.

The combination of these two behaviour traits results in a capricious and illogical state. Restless with a need for change.

**Figure 2. Morphology of face and hands of carbonic, sulphuric and phosphoric constitutions.**

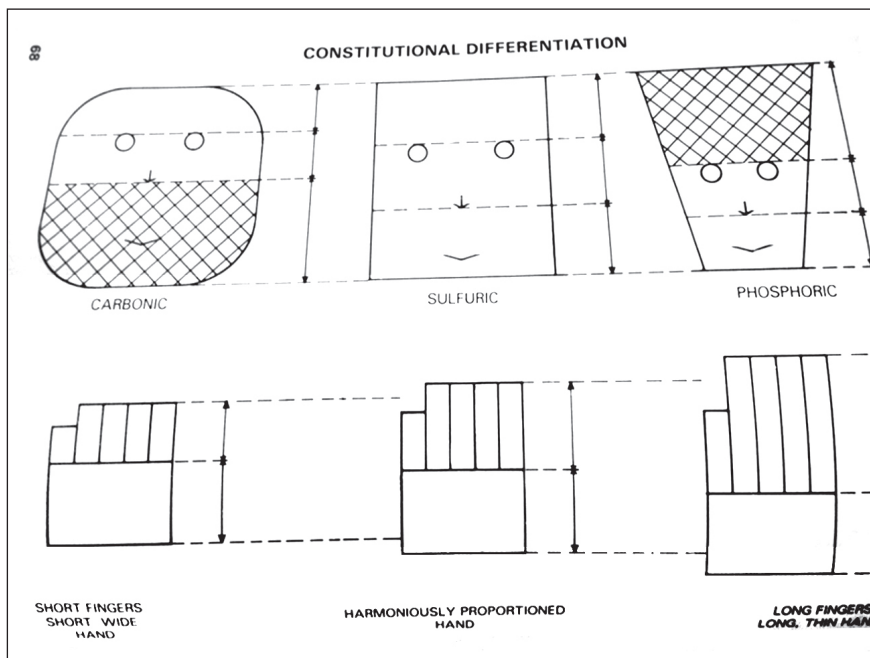


Figure 2 above shows the short, stocky, wide carbonic constitution on the left. Note that the lower third of the carbonic face, from tip of nose to tip of the chin, is the largest third. The finger to palm ratio of the carbonic is unbalanced, with the fingers measuring shorter than the palm length.

In the centre there is the sulphuric constitution. This shows a harmonious, balanced, well-proportioned individual. Normal, average morphology. Note that all three thirds of the face are in equilibrium and that the finger to palm ratio is equivalent.

On the right side of figure 2 there is the phosphoric constitution. The upper third of the phosphoric face, from eyebrows to vertex is the largest third. The finger to palm ratio shows disequilibrium with the fingers being much longer than the palm.

So now we have the four basic constitutions from Bernard arising from his embryological hypothesis. Jouanny writes that Bernard's and others' suppositions on constitution have not been verified by experiment. What's more is that to do such an experiment would in itself be impossible. However, Jouanny states that from a clinical perspective, it can be statistically seen that certain morphological appearances do respond more favourably to certain medicines in our *materia medica* table 5 below displays this information relating morphology and the very often favourable or amenable reactions that such morphological constitutions respond to after prescriptions of certain groups of remedies.