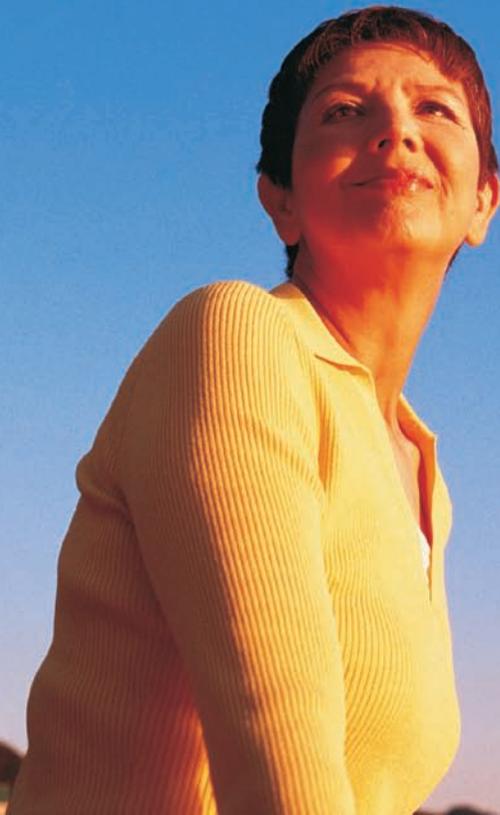


The  
Change  
of  
life in  
WOMEN

and the Ills and Ailings Incident  
thereto & Homeopathy



J. Compton Burnett

# **The Change of Life in Women**

**And**

**The Ills and Ailings Incident  
Thereto & Homeopathy**

*by*

**J. COMPTON BURNETT, M.D.**



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## THE CHANGE OF LIEF IN WOMEN

### NOTE FROM THE PUBLISHERS

Any information given in this book is not intended to be taken as a replacement for medical advice. Any person with a condition requiring medical attention should consult a qualified practitioner or therapist.

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# Preface

I have myself never heard a clinical lecture on menopause that was least help to me in my medical work, or one that afforded, to my mind, the least satisfaction; neither have I ever read any article or book on the subject that offered me either mental enlightenment or practical advantage. As far as I know my way about in medical literature, the menopause is, to say the least, a very dark region indeed, wherein we are left to grope about in quest of unknown quasighost-like awfulnesses.

I have always tried at least to strike a match in any dark corner where medical mysteries midst ghostly terrors most abound; and although the illumination emanating from one solitary match is not exactly blinding, still it is more helpful than utter darkness.

If my readers find this little work even of one-match power only, I shall not regret the labor of writing it.

J. COMPTON BURNETT

86 Wimpole Street,  
Cavendish Square,  
Easter, 1898.

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## PART – II

Of course we do not expect to find any virus-disease from without as peculiar to the change of life. The English name—change of life—is singularly appropriate : it is what its name implies and nothing more. The woman who is really in sound health—*i.e.*, of good constitution—is quite as well at and after the change as before. A good constitution does not then become bad. It is, as it were, sleeping dogs that then wake up to bark and bite; hence it is that we must early look to the principle of heredity to get correct and helpful views of the troubles that beset a woman at the change, notably where they have lain more or less latent prior thereto. Manifestations of gout and rheumatism are most common.

### GOUTINESS—ARTHRITISM

Like begets like, which no one can gainsay; but as two beget one, we have a third entity whose qualities are not

absolutely apparent. When we learn to read, and come across a new word, we spell it; so it is with the hereditariness of disease. I have occupied myself a good deal with this question, and hope to say my say thereon in due course. Here I must confine myself to its bearing on the subject matter of this book.

The offspring of a gouty parent must be gouty more or less, unless indeed the one of the twin completely neutralizes the other, which is conceivable, but not probable. The girl that comes of a gouty father will teethe goutily; she will menstruate goutily; and at and after the change of life her ills and ailings will be gouty.

Many times I have remembered this point in the troubles of dentition with much advantage. Even in using the repertory it throws a valuable side-light on the case, and helps. My two big guns in gouty menopause are—*Thlaspi bursa pastoris*  $\theta$  and *Pulsatilla*  $\theta$ . The similitude is very small; the dose must therefore be material, a few drops of the tincture; and on the treatment of gout I may fairly refer to my own monograph on the subject,\* in which what I know of gout may be found. *Thlaspi bursa pastoris*  $\theta$ , ten drops in a teaspoonful of warm water at bedtime, is a very frequently indicated remedy in gouty ladies at the change of life. The gouty diathesis must be treated on its own merits in a woman just the same as in a man.

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\*Gout and Its Cure. Jain Publishing Co., New Delhi

## NOTE ON BURSA PASTORIS

In my judgment, as I have elsewhere stated, Shepherd's Purse is pronouncedly a uterine medicine. It is a very notable remedy in uterine sterility—pregnancy frequently occurring during its use. A gentleman was under my professional care for frequent nocturnal micturition of a gouty characters, and I ordered him *Thlaspi bursa pastoris*  $\theta$ , ten drops in water at bedtime. On April 8<sup>th</sup> he wrote to me that he could not take such a large dose, as it caused him "aching and fullness in the head, worse in the morning." At my request he resumed the medicine (*Thlaspi bursa pastoris*  $\theta$ ) in four-drop doses.

June 10<sup>th</sup>—On this day he brought the medicine back himself to me in the original halfounce bottle, still two-third full of the tincture, complaining very much of its "nasty rotten drain smell," and saying he could not take any more of it, for, says he, "it *flushes* my face so much that I cannot take it; I only took three drops this morning, and just see how it has flushed my face."

This symptom being pathogenetic, we thus get another remedy for the flushes, and it would be additionally indicated in gouty individuals, for *Thlaspi bursa pastoris*  $\theta$  often produces a notable output of gravel.

And, referring again to the *flushes*, our apothecarists score one in the palliative treatment of this trouble; thus we read in the *British Medical Journal* of April 24, 1897, a note by Dr. Fosbery, of Bournemouth, as follows:

## SEVERE CLIMACTERIC FLUSHING SUCCESSFULLY TREATED BY OVARIAN EXTRACT

“As medication by various glands is still on its trial, except, perhaps, that of the thyroid in myxedema, individual experience, if recorded, will help in estimating rightly its value, and in indicating the class of cases in which treatment may be used with benefit. It is with this object I record the following case:

“Miss C., aged fifty-two, for more than three years suffered from severe menorrhagia, and during part of that time from metrorrhagia also. She was relieved by the removal of a pedunculated polypus growing from the cervix. The menorrhagia, however, continued, the periods occurring about every three weeks, and lasting a fortnight or even three weeks. The bleeding was very severe, and not influenced much by drugs, though Ergot (both by mouth and hypodermically), Hydrastis, Liquor Ferri Perchloridi, Potassium Bromide, Hazeline, Arsenic, and Thyroid Gland were tried. During the last two periods, however, Calcium Chloride, in scruple doses, three times a day, seemed to have a good effect, but this might have been due to the natural close of menstruation. Frequent plugging of the vagina, sometimes twice a day, was the only means of controlling the hemorrhage, with iced injections on removal of the plugs. Hot douches were not so effectual as the cold.

“When at last the periods ceased, the patient was much troubled with frequent and violent flushing, which at night, in winter, would wake her up, the face being in a burning heat, while the hands and body were icy cold.

“For these flushing I ordered five-grain doses of *Ovarian gland*, *three times a day*. For the first day or two, there appeared to be no effect, then the flushings rapidly became less frequent and intense, and were nearly cured by the time three dozen doses were taken. The patient now tells me she is free of them, but gets a ‘threatening’ if she omits the capsules for some days. One dose occasionally keeps her free.”

The treatment of the case is bad from our homeopathic standpoint, and I only quote it as suggestive of the use of Ovary Extract in the flushes when *Lachesis* and other remedies have failed.

## CANCEROUSNESS TRACED THROUGH LIFE CLEARLY EVIDENCED AT THE MENOPAUSE

A gentleman brought his wife to me on June 26, 1897, for a painful swelling in her LEFT breast; and as the case brings out one of the chief points of this little treatise, I will narrate it pretty fully.

Mrs. S., aet. forty-three, married since twenty years, but childless. Has pains in her left breast that wake her up in the night and cause her much anxiety. Her father died at sixty-

three of diabetes; her mother, at fifty-two, of *cancer of the LEFT breast*; her sister, of cancer of the same breast, at forty-three, just after the change; a brother, at forty-five, of rapid phthisis.

The inner half of patient's left breast is the seat of diffused swelling since the change, which occurred at forty years of age, that is three years ago.

There is nothing unusual in this history, but let us trace back her *health* history and see how that stands. Soon after marriage she was under treatment for womb trouble—ulcers at the os; these ulcers were cauterized severely and oft, at times daily for weeks together; they were then painted regularly and for long periods. She has been using vaginal injections for pretty bad whites for many years. She injects hot water into the vagina on her physician's advice every day for the past fifteen years, and still the whites—yellow and sticky and corroding—continue the same as ever. "Right lobe of thyroid somewhat enlarged for a year past. The breasts often swell. Has had gallstones twice.

We are here not concerned with the treatment of this particular case (moreover, it was only begun yesterday), but it illustrates clearly what I hold and what I should like to teach, viz., that the various ills and ailings of women are not of a local nature, and must therefore not be locally regarded or treated.

I read the phenomena thus: The ulcers at the os, the leucorrhœa, the sterility, were of a cancerous nature (pre-

cancerous, as Hutchinson would say), and inherited from her mother, and that the ulcerations and whites should have been treated on constitutional lines from the beginning in lieu of the local measures of cauterizing and painting the seemingly offending parts. And as to the treatment of the case, now it is manifest that we have to deal with a constitutional ailment located primarily in the uterus, and thence reflected on to the breasts, so ablation of the left breast would be useless, inasmuch as the root ailment is located primarily in the womb. My object in narrating the foregoing is to bring before the reader's mind how the thing appears to my mind—the ulcers and the leucorrhœa were not to be regarded as the ailment to be treated at all, they were only the local expression of the enemy within, and not the enemy himself—rather were they its voice.

What I am trying to say is that silencing the ulcers and leucorrhœa was bad practice, not only doing no good to the woman's organism, but rather harming her. So long as the monthly flow continued, so long did this lady live on in a fair state of health; but since it has stopped she has ailed rather more, the right lobe of her thyroid has become enlarged, and now the left breast is enlarging and hardening, and has already become the seat of a good deal of pain.

The persistence of leucorrhœa after the menopause is of considerable import, and certainly betokens positive disease of the womb (or ovaries), and the same may be said of the swelling of her breasts, for breast is an appendix to the womb, and ever under its influence and domination. Whenever there

is anything wrong with the breasts I direct my attention straightway to the womb, for it is in the womb, respectively the ovaries, that the ailing is surely primarily located.

When I speak of leucorrhœa I mean leucorrhœa and not gonorrhœa. This latter is a dirty disease introduced from without and not from the constitution, and should be killed *in situ* the sooner the better, if possible. I hold the same of the acarus disease—the pure itch—the nasty little acari are from without, and should be slain.

## THE HAHNEMANNIAN DOCTRINE OF PSORA RE-STATED

The Hahnemannian doctrine of psora as usually comprehended in the ranks of really pure homeopathy is so vague and mind-confusing that many of us have never known what to say or think about it. When I first tried to practice homeopathically I accepted the doctrine of psora purely and simply, and honestly believed that the itch could be, and was commonly cured dynamically by the strict Hahnemannians, and I copied their practice in this regard. Thus I kept a young lady under treatment with antipsorics, and principally with *Sulphur*, high, higher, and right away into the very high, for over a year, and the result? Total failure; and the parent very properly gave me up as inadequate. Patient was quickly cured by a near medical brother with *Sulphur* ointment and soap

and water, and I was regarded by those who knew the circumstances as a mere faddist.

I went on for several years believing in and trying to cure the itch with homeopathic dilutions, and what? I failed practically in every case.

Now the test of all doctrinal medicine must be clinical, and if I cannot cure on the lines of a given doctrine I throw the doctrine overboard. But a man who owes so much to Hahnemann's teachings as I do, hesitate much and long before discarding any of his doctrines. Hence I tried and tried, and failed time after time. Now I will take as an example what I will term my *doctrine of ringworm* I say that ringworm and fungi notwithstanding, is dynamically curable by *Bacillinum*. I cure case after case *almost* always. I say the same of vaccinosis and its cure by *Thuja* and the like in dynamic dose. Then why cannot I do the same with itch? Well, I cannot, and for me there is an end of it. It is no use to tell me that I fail to cure itch with *Sulphur* 30. C., CC., & c., because I lack in the skill requisite for such work. Well, let us grant that it is lack of skill on my part, then what is the use to *me* of a medical doctrine that is beyond *my* skill? Just none. The truth, *for me*, is that you cannot kill acari by any dynamic dose of any remedy whatsoever, and hence I have thrown the doctrine overboard.

Then is the teaching altogether false?

I would re-state the doctrine thus: You cannot cure the itch by dynamic medication, and you must therefore kill the acari; they should be killed on the spot, and sooner the better;

you cannot kill acari with dynamic remedies, and they should be killed at once. But I am NOT speaking of *its concomitant constitutional eruptions brought forth by the acari*, neither do I say that the acari may not poison the blood—indeed I think they do, and *therefore* they should be sulphured to death instantly. But, and this is very important, if the acari have called forth an eruption from a previously existing internal state, THIS eruptions may NOT be got rid of by external remedies. There is the rub. *Da liegt der Hund begraben!* It is the funiest results of suppressing the constitutional eruptions that have been *called forth from their internal lurkings* by the acari themselves, or by their poison, that we have to fear. If we watch cases of itch carefully we find that the cases of those of tainted constitutions get quite a number of different kinds of eruptions, which were potentially there before they were infected with the acari, and these constitutions have to be mended by proper homeopathic remedies, and their eruptions may not be driven, in, but the acari must be killed by parasiticides. The best men in the homeopathic ranks should set to work and clear this matter up, as it trammels our progress not a little. Year ago I was the means of converting an allopathic medical man to homeopathy; he came over bag and baggage at considerable pecuniary loss; he subsequently caught the itch, and placed himself under my care, and he remained faithfully under my care for over a year, and I totally failed to cure him, whereupon he exclaimed to me—“I cannot stand it any longer, I shall go mad; look what an awful state I am in.” He then gave up homeopathy and everything connected with it.

However, homeopathy is true, although you cannot kill acari dynamically. I have long been tussling with this question of psora, and this is my solution of it :

The dangerous results from the suppression of true itch are in reality not from the itch itself at all—on the contrary, the acari are poisonous little brutes that should be killed instantly. These dangerous results are from the driving in of dyscratic eruptions present in the itch-patients, but *not primarily* due to the itch itself, but pre-existent in the individuals suffering from the itch, and not infrequently brought out on to the cutaneous surface by the acari or their poison, though not really due thereto.

It is the source of very considerable mental satisfaction to me to have thus solved the question of psora, as now I cure the itch—the acarus disease—as quickly as possible with *Sulphur* ointment and soap and water, regarding it as a dirty parasitic disease impinging *from without* on to the individual, but *at the same time* do not suppress any concomitant skin trouble which is *from within* the organism, being there before the itch was caught, though very likely *called forth* by the irritating influence of the acari: that which is from without, is to be cured from without; that which is from within must not be treated from without, but from within.

This re-statement of the doctrine of psora has no special bearing on the change of life, and it finds a place here simply because I have only now clearly seen where the truth lies.

## RHEUMATOID ARTHRITIS

Rheumatic gout at the change of life is indeed a very large disorder; a series of remedies are needed to cure the same. A sample of how I get along with them here follows :

Mrs. X., aet. sixty-five, mother of one child, born when she was forty-one (married at forty), since when she had gone very stout and suffered from rheumatic gout ever since her menopause. Right knee and left ankle much swelled; cannot walk; dreads cold water, urine thick; is much distressed by inability to retain her urine; altogether she is in a sorry plight.

*Med.* 1000, in infrequent dose.

July 22<sup>nd</sup> —Urine much clearer, and there is much less difficulty in retaining it.

*R<sub>x</sub> Rep.*

August 12<sup>th</sup>—Pains and swellings much diminished.

*R<sub>x</sub> Rep.*

September 16<sup>th</sup>—“Decidedly better,” her husband writes, “more like her old self, a good deal better all round.”

*R<sub>x</sub> Rep.*

October 19<sup>th</sup>—Well, except that she is stiff.

*R<sub>x</sub> Bell-p.*  $\theta$ . Ten drops in water in the forenoon.

November 25<sup>th</sup>—*R<sub>x</sub> Bryonia*  $\theta$ .

December 20<sup>th</sup>—*R<sub>x</sub> Ox-ac.*, I.

February 2<sup>nd</sup>, 1892—*R<sub>x</sub> Bacillinum* CC.

March 1<sup>st</sup> —“My wife is quite well of her rheumatic gout, and the water is quite comfortable, but she is weak.

R<sub>x</sub> *Ferr. pic* 3x. Three drops in water three times a day.

April 11<sup>th</sup>—“A few pains here and there, but what can you except in this heat?”

R. *Salal.* ʒj. Ten drops in water twice a day.

Lonely after, I saw this lady's husband about his varicose veins, when he told me Mrs X. continued free of her pains and swelling, and in very good general health. And still later, I had the same report from her step-son.

## INCONTINENCE OF URINE AT THE MENOPAUSE

After the change of life ladies are not infrequently troubled with inability to hold their water; the causes vary considerably; and where the sweat glands are inactive *Jaborandi* is a good friend, as the following brilliant little cure will show:

Countess G., verging on fifty years of age, consulted me on November 6, 1890, for inability to contain her urine, worse when she had a cold, which was then the case. The point, which struck me most, was her dry skin. “I never perspire,” said she. I ordered *Jaborandi* I, ten drops in water three times a day. To the great delight of her ladyship the medicine cured the incontinence right away.

## NOTE ON JABORANDI

I have used *Jaborandi* for many years—in fact I have written a paper on it already in my allopathic days; but though I have used it long, I have not used it often; of late years I have generally used *Pilocarpinum muriaticum* 3x. It is my big shot in mumps. It is well known that *Jaborandi* causes profuse perspiration, ending in a very dry skin. I regard it merely as an organ remedy of the sweat glands, affecting also the parotid and the pancreas. I have known it long, but do not know it well.

## CLIMACTERIC INSANITY

For a number of years I have had an odd case or two of insanity under my professional care, generally only one or at most two at a time. Some of these have been cases of climacteric insanity, or that which occurs at the change of life. I cured a case of senile insanity and one of insanity in a young lady a good many years ago, and these were subsequently published in the *British Journal of Homeopathy* and are epitomized in my *Fifty Reasons for Being a Homeopath*. The cure I now propose to relate is of a somewhat different order, and clearly closely allied to the menstrual function at its close, and not merely a cephalic menstruation, so to speak. That is to say, my young woman may become insane if the menstrual flux hang about in the head in lieu of taking its proper course, and here, as soon as proper menstruation sets in, the quasi-insanity is gone.