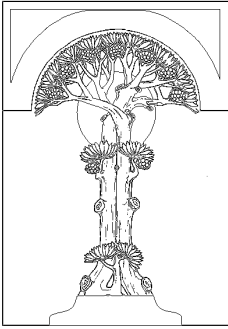


Centre for Integrative Medical Training
In Association with London Integrated Medical Health Education



Intermediate Course in Medical Homeopathy

A Blended Course in Homeopathic Medicine for Healthcare Professionals

Unit 27

Materia Medica Studies and Therapeutic Pointers for Week 7

This week we will restrict ourselves to the study of only one polychrest remedy.

You have already encountered *Lycopodium clavatum* in your foundation course, where it was introduced as one of the important remedies for anticipatory anxiety.

Lycopodium is derived from the spores of the club moss. These tiny spores have very low surface friction and when you tip them in a glass vessel they can seem to flow almost like a fluid.

The source plant itself is an ancient genus. Although now growing only a few centimeters high, many millenia ago members of this plant genus towered high above the ground.

Lycopodium powder used to be used in the pharmacy to coat hand made pills as a means of preventing them from sticking together. It was considered therapeutically inert.

In potency however, Lycopodium reveals itself to be an important constitutional remedy with a subtle but well characterised mind picture.

It is often prescribed predominantly on a clear perception of its mind characteristics. However, there are nearly always a cluster of characteristic locals and generals to support its indication.

Lycopodium is most often used in high potency although older, patients with co-morbidities who are using conventional drugs sometimes respond better to LM potencies or repeated dosage with lower potencies.

Before looking at an illustrative case, study the materia medica summary overleaf and watch a presentation on this important remedy.



<https://youtu.be/ZZUJNZICq0E>

Dr Todd Rowe



<https://youtu.be/K5PMmLKEQ6A>

Dr Larry Malerba

Lycopodium clavatum (Club moss)

Lack of self-confidence.

Charming to outside world with a façade of confidence.

May assuage their feelings of inadequacy by becoming dictatorial at home.

Apparent Inflation of ego, haughty.

Abdominal conditions: gastro-intestinal disturbances

R-sided symptoms and reactions (symptoms may move right to left)

Desire for sweets



Typology

- Not very muscular: narrow thorax and sometimes large abdomen.
- Older patients can have frail varicose legs, yellowish wrinkled face with worried look.
- The eyes are wary and can either be searching or actively avoiding the gaze.
- Can be very intelligent, with a quick wit, but often difficult to live with.
- Usually, flaccid unconvincing handshake (but occasionally a forced one).

Tissue Affinity

- Liver and digestive system, kidneys and genital system.

Mentals

- lack of self-confidence with compensatory haughtiness and sometimes dictatorial (Unpleasant and overbearing with people they consider to be of lower status).
- aversion to undertake new things, shun responsibility, avoid conflict.

Generals

- chilly but craving for open air
- R-sided, moving to left
- full of gas, easy satiety
- weak muscular power
- dryness
- worse 4 - 8 pm (sometimes 4 - 6) energy dip and recovery

Clinical Indications

- Flatulence, constipation, gall stones, duodenal ulcer, dysfunctional liver metabolism
- Urolithiasis, prostatism
- Psoriasis
- Psycho-social problems, psycho-sexual problems, inadequacy, impotence

Clinical Case Study

Doctor: Can you tell me about the problem ?

Patient: Well, about three years ago I was diagnosed as having sarcoidosis ...I had swelling of the joints and problems with the lungs.. sore lungs really ...difficulty breathing ...great lassitude, you know, inability to really do very much.

I was told it would be better after a couple of years..and to be fair it possibly did get a little better, but I seem to be pretty well back to square one as far as the inability to do anything.. you know lack of "oomph" really.

The rheumatic side of it has gone completely, it went at a very early stage...but my lungs can still be sore on occasions and I'm short of breath, and if I push the pram up the hill, that's me knackered for the rest of the day, sort of thing. I've really a **general lack of interest in going out and doing my business**, I just don't feel up to things.

Doctor: Did they do a Kveim test on you and a biopsy?

Patient: They did a biopsy

Doctor: Which did they biopsy, from the lung or from the skin?

Patient: From the lung.

Doctor: The X-rays, did they show very large...

Patient: Yes they did, and they did show signs of reducing... then basically I stopped going...they wanted me to keep going back to the hospital to look at X-rays..but they never..I've never had anything...nobody has ever...they simply said it would go away in time...so there was no purpose [in going back]

Doctor: Did they put you on steroids at any time?

Patient: No they didn't, they chose not to, and I didn't encourage them otherwise...it was a natural reaction...I've not been happy with that sort of thing...so no they felt...my doctor at the time who is not my present doctor... I lived elsewhere, he was against the steroids... **I had no reason to argue with that.**

Doctor: Did you get any skin eruptions with it, or any nodes on the legs ?

Patient: I got the nodes, but they weren't red...usually they are roseate sort of nodes, in my case they weren't which is why it took them such a time to discover them..to find out I had sarcoidosis, **finally I plucked up courage** to



https://youtu.be/VJkskzW_77I



say should I [mention] these two little lumps either side of my leg, of course then they realised what it was. But they hadn't gone red so they weren't evident. Occasionally they come back, on the arms and on the legs, just occasionally one imagines one feels them.

Doctor: [Have you had] any serious illnesses in the past?

Patient: No

Doctor: There is no history of TB, asthma, jaundice, diabetes, epilepsy?

Patient: No

Doctor: Any operations other than the biopsy ?

Patient: I had quite a major road accident, so I had a femur pinned and all that sort of thing...fifteen years ago, maybe.

Doctor: For how long before the diagnosis had you been feeling unwell?

Patient: Well I think I had been feeling pretty moderate and low for as much as a year, maybe even longer...it's very hard to say.

Doctor: Had you had any particular problems with pneumonias, or any particular infections?

Patient: No...The only thing I had a few months before was very severe food poisoning and my wife often wondered whether that triggered it off, I didn't send for the doctor...but it was bad, it was very bad...I should have had the doctor ..and it is just a thought whether that has some bearing on it

Doctor: Where did you pick that up?

Patient: Dublin...In one of the best hotels in Dublin...their salad sandwiches.

Doctor: Was there shellfish in it?

Patient: No it was mayonnaise..I commented at the time that the sandwiches were quite strong..it is one of those stupid things, I know exactly what it was...the time scale.. it was spot on... my wife got it to a lesser degree, and she went to her doctor, and he confirmed that the time scale was about right.

Doctor: Have there been any problems with the bowel since?

Patient: No it is fair to say that I'm fairly sensitive to food that isn't right..one keeps going of at tangents, but I have a

pain which I get here (indicates **right** iliac fossa), which no one has been able to really do much about...they obviously think that it is bowel related, and that can be very, very acute if for instance I eat things like green or red peppers, you know uncut peppers, big lumps of it ...I mean, I can be out for a couple of days you know real pain during the night, and then weak for a day or two.

Doctor: Is that associated with changes in the bowel habit or not?

Patient: Not particularly, no...but it is certainly associated with eating things like...well particularly peppers, and I had it recently, which has sort of brought this on coming to see you, because I went to my new doctor I've not long moved to this area, actually it was **just the partner**, the lady that I saw, and she went through the motions ...poking about and feeling the bowel and this sort of thing and couldn't pin it down..she read my notes and said that it will probably go away on past form, and it did. I'm not saying that it is any way related to my general sort of lack of momentum or the sarcoidosis, I simply don't know. If I steer clear of peppers and that sort of food I'm fine.

Doctor: In general do you suffer from indigestion, constipation....

Patient: Not constipation **but indigestion.**

Doctor: Which foods tend to cause that?

Patient: **Even if I had a nice rare steak or something like that, I would tend to want an alka-seltzer before I went to bed.**

Doctor: Are you tolerant of onions or not?

Patient: ..tolerant of cooked onions, I would say that raw **onions are not something I eat much of, I always fish them out them same as I fish the peppers out of salad.**

Doctor: Who is at home in the household?

Patient: I have a young son who is just a year old and [a girl] I refer to as my wife but who is actually my girlfriend, but I live with her, there is never a box for **divorced** and re-engaged or something...but I was married..this is my second time around although we are not actually formally married. We have a stable relationship.

Doctor: When did the last marriage come to an end?

Patient: Three or four years ago. **I don't have bother with my ex-wife, we are on very good terms...we work together so...**It is fair to say my business is stressful. Anyone who has anything to do with estate agency at the moment will know that it is not the easiest concern in the world..its a family business we're in...and I've really rather got to the stage **I can't really face it** a lot [of the time] You know largely because I can't seem to do a day's work, because **I feel as though I want to sleep at four o'clock in the afternoon** or something...that's the problem..

Doctor: Does the energy really suddenly drop off at about four o'clock in the afternoon?

Patient: **Yes I would say it does**, I hadn't really thought of it that way, but yes.

Doctor: Are you generally warm blooded or chilly in your reactions to temperature round about you ?

Patient: **I wear a jumper when it is hot.** You know what I mean, I feel the draught or the cold. I like the heat but I don't need to strip off in the heat.

Doctor: So you are fairly heat tollerant.

Patient: Heat tollerant..yes absolutely.

Doctor: Do you perspire much?

Patient: At the moment and its been since this sarcoidosis I developed, I mean, I've had **night sweats**, very hot ones, a lot less now than I did, but I have similar sweats, for instance, if I go out and cut a little bit of lawn or cut a few thistles in the field...I mean very little work produces a great deal of sweat..like fifteen minutes work...

Doctor: What about nodes in the neck, have there been any nodes there?

Patient: Not that I know of..under the arms, on the arms and on the legs...thats it.

Doctor: Tell me about the chest symptoms you still get.

Patient: I mild dull soreness, not a pain. I just know that my chest is there if you know what I mean, plus just sometimes I can be very short of breath for a short time.

Doctor: ...under what circumstances?

Patient: Usually after exercise, but not necessarily...sometimes out of the blue really, **just lying in bed** maybe, you

know, at a certain angle. I couldn't say I had any pain or any real problem with my chest but it is noticeable.

Doctor: Does your energy pick up in the course of the evening again?

Patient: If I have a rest...if **I actually sleep between four and five, or six**...I am grand for a little bit...so if I go out socially at night I always have a sleep...I go home early and have a sleep or else I fall asleep over the dinner table.

Doctor: Do changes in humidity alter the chest symptoms or not?

Patient: I can't say I've noticed.

Doctor: So damp weather, for example, doesn't affect it.

Patient: No

Doctor: Do you tolerate the sun?

Patient: **The wind, it's the wind that affects it. If I'm out in the wind or walking in the wind it's much worse**, than when there is no wind. So much so that on a windy wet day, I would often not go and walk across the farm, or something, if I'd had that in view.

Doctor: ... Stormy weather ?

Patient: Yes that's the sort of weather that [affects it]..

Doctor: Does it make any difference whether you are by the sea or whether you are inland.

Patient: I always feel better by the sea, I'm one of those sort of people...I don't know why.

Doctor: ... and you're tolerant of the sun?

Patient: I like the sun, I feel better in the sun.

Doctor: How is your sleep.

Patient: I think it's...sometimes I'm very tired, like as I say, occasionally afternoon *** I have to sleep. But at night I maybe don't sleep that well, but I often tend to put that down more to **worry** than sarcoidosis...you know...things spinning on in your head. So I sleep a lot, but I'm not a good [sleeper], I toss and turn a lot. When you've a one year old child, you know, it's hard to know whether you are sleeping or not.

Doctor: How would you describe your personality?

- Patient:**That's a difficult one, **and this on camera as well.** I'm not naturally outgoing, but **I force myself to be.**
- Doctor:** Do you speak your feelings easily, or do you tend to keep things much to yourself?
- Patient:** **I would keep them to myself as a rule...**feelings and problems.
- Doctor:** Do you have hobbies and interests outside work?
- Patient:** Yes, well I suppose they are a bit limited..they're more things like reading, and that sort of thing, rather than.. **I don't have social hobbies** if you know what I mean.
- Doctor:** How is your confidence generally?
- Patient:** Business-wise my confidence has always been good because you just get out there and get on, if you are an auctioneer then obviously you are very confident in the public eye. **Lately, I suppose, my confidence has been less...some days I can't be...I can't really face people, this is all a new departure over this last two or three years. But I'm not confident at parties and things...but I obviously talk with people I know.**
- Doctor:** Would you be able to stand up and speak?
- Patient:** I'm good at that, yes...**that's what I've been brought up to do, and trained to do,** yes I could make a speech or anything like that, I'm confident enough that I wouldn't be that nervous about it...**much more nervous going to a party where there are a lot of people that I don't know,** and nobody much that I do know, do you know what I mean...it's a strange thing.
- Doctor:** Has your illness affected your mood as such?
- Patient:** Yes I think that **I would be prone to be more short tempered and stressed,** really because **I have to do things that I don't really feel that I am able to do.** You know **the conscientious side says that I've got to deal with this client, and the other side says I should be at home sleeping...**
- Doctor:** I mean, do you ever want just to pack the whole lot in?
- Patient:** ...yes, one has to say, some days I do...financially that it not a very realistic view...although I am thinking of reducing it a bit...I have been trying to have more time off...

Review appointment

- Doctor:** Now, how have you been keeping?
- Patient:** I've been a lot better.
- Doctor:** Can you tell me what happened after the first powders generally.
- Patient:** Well, after the powders I felt significantly worse for about twenty four hours and I don't know whether the powders were different or not, but they seemed to affect me differently.
- Doctor:** That's right, there were three powders the first time round and there were tablets from September.
- Patient:** That's right, yes.
- Doctor:** So after the powders you were worse for twenty four hours.
- Patient:** Roughly, yes. The powders made me feel worse. I felt the powders affected me differently, but maybe it was just imagination...I had a slightly sore chest and I was very slow and lackadaisical. Sort of my symptoms really but worse, or as bad anyway.
- Doctor:** And then what happened?
- Patient:** I would say, over the next fortnight I kept a sort of note for a fortnight of how I felt but at the end of that time I felt that there was nothing really to note, that I did feel significantly better.
- Doctor:** In what respects do you think?
- Patient:** Well I certainly seemed to have rather more energy and I was sleeping better. And it's fair to say that this last fortnight I maybe have felt... not to where I was again, but I have felt more lackadaisical. I certainly haven't been sleeping so well. I've been down. But I definitely felt a lot better a month ago. You know I actually felt really quite...I was really saying I felt as well as I had felt for some very considerable time.
- Doctor:** The main symptoms were focusing in the joints and to some extent in the breathing. Can you tell me whether anything changed in those respects?
- Patient:** I would say that the joints I almost don't notice nowadays. The joints, even by the time I came to see you were of less significance than they had been earlier on, and really I would say that the joints, now that you

ask, I would say I don't feel stiff in my ankles and things.

Doctor: And what about your exercise tolerance and breathlessness?

Patient: I was a lot better. Again, I maybe feel slightly worse again. The only other thing we mentioned...remember last time you were asking, you asked me about wind which I hadn't really thought about last time. I have to say that lately I've had terrible wind. Really bad you know! When you asked last time, I realised that I had a problem that way but actually, lately, I have and yes it's been quite extreme.

..... (Doctor: What about drinking coffee?)

Patient: I've been very rigorously off coffee since. I've only had two cups since I saw you last, and they were both accidental. Somebody dumps it down in front of you and you suddenly find yourself drinking it. I didn't know how much I would miss coffee either. The first fortnight I felt like a drug addict, it was dreadful, the asking for it, the obvious withdrawal...

<input checked="" type="checkbox"/> Polychests <input checked="" type="checkbox"/> Frequent <input checked="" type="checkbox"/> Small <input checked="" type="checkbox"/> Nosodes <input checked="" type="checkbox"/> Psoric <input checked="" type="checkbox"/> Sycotic <input checked="" type="checkbox"/> Syphilitic WinCARA Chart	<input checked="" type="checkbox"/> Apply weightings <input checked="" type="checkbox"/> Stress significance <input checked="" type="checkbox"/> Emphasise S.R.P. <input checked="" type="checkbox"/> Emphasise small <input checked="" type="checkbox"/> Totality <input checked="" type="checkbox"/> Miasmatic <input checked="" type="checkbox"/> Expert <input checked="" type="checkbox"/> Eliminative	L	Y	C	P	L	A	A	S	U	N	K	C	S	T	P	C	A	A	A	S	T	R	K	H	I
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WEATHER-WIND		3	3	2	2	1	3	1	1	1	1	3	1	1		2	1	1							1	
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PAIN-SORE,ILIO-CAECAL REGION		2		2	2			1					2			3		3	2							
COMPANY-AVERSION,PRESENCE OF STRANGERS		1							2	2	2		2								2					
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APPETITE-THINGS THAT DISAGREE,ONIONS		2											2													
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BUSINESS-AVERSE TO		1	2	2	1	1	1	1	2	3					1								1			
HAUGHTY		3	2	2		3	1		1		1	1	1	1	1	1								1	2	

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natrum sulfuricum, lachesis, lycopodium

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Case of the month

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Case of the month

lycopodium

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Three anti-psorics

sulphur, lycopodium

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Morgan-Gaertner, the bowel nosode complementary to Lycopodium

Br Homoeopath J 1949 39: 91



Without looking at the text, how many of the keynote of Lycopodium can you remember ?

Mind

General or environmental

Local

Frequent Pathological Indications

Now read Lycopodium in your materia medica:

- Page 606 Vermeulen
- Page 329 Clarke
- Page 409 Boericke (2nd British ed)
- Page 605 Neatby & Stronham
- Page 363 Phatak
- Page 231 Jouanny