HOMOEOPATHIC THERAPEUTICS IN OPHTHALMOLOGY

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Homoeopathic Therapeutics in Ophthalmology by John L. Moffat

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JOHN L. MOFFAT

HOMOEOPATHIC THERAPEUTICS IN OPHTHALMOLOGY



Homœopathic Therapeutics

IN

Ophthalmology

BY

JOHN L. MOFFAT, B.S., M.D., O. et A. Chir.

President, 1902, Homosopathic Medical Society of the State of New
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PHILADELPHIA BOERICKE & TAPRI, 1916 COPYRIGHTED 1916 BOHRICKE & TAPEL

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DEDICATED
TO MY BROTHER

EDGAR V. MOFFAT, A.M., M.D., O. et A. Chir.
OF ORANGE, N. J.



PREFACE.

Ophthalmological literature is increasing so rapidly, as are the advances in pathology, surgery, physiology and anatomy, that books on those subjects soon become behind the times. Hence monographs are among the most valuable elements of an up to date library, largely because they do not waste shelf room by the repetition deemed essential in text books or by the necessity of retaining a book only a portion of which remains up to date.

For this reason, and because it is generally recognized now that many eye cases require for their cure constitutional, internal, medication rather than or supplemented by local or surgical treatment, the author has confined himself to the facts of our homoeopathic materia medica, the pathogenetic symptoms of drugs and clinical experience of their curative action. These will be of practical value generations hence, as they are now and have been for generations in the past.

The systematic arrangement of the materia medica will facilitate ready reference. Drug characteristics are given because with their aid a much more successful prescription may be made.

1

This book is small, the remedies comparatively few, because only reliable indications have been given. Quality has been preferred to quantity. To most of the remedies in our materia medica have there been attributed one or more eye symptoms but, as yet, without confirmation. To include these would but serve to confuse the reader and impair his confidence.

The following pages are offered to the ophthalmologists who, in increasing numbers, are turning to homoeopathy for therapeutic help. But play fair, please. Do not condemn homoeopathy if your experiments in empiricism fail. Choosing a remedy from the repertory for a disease or a symptom is empiricism, not homeeopathy! Make sincere efforts at individualization and symptom-similarity. A succession of remedies as indicated may be necessary for a cure, as the rungs of a ladder have to be surmounted successively. And failure is more apt to mean a shortcoming on the part of the prescriber than of homoeopathy. Homœopathic prescribing is not easy; it is the long way around. But, oh, the joy of a really homoeopathic cure! That is to be experienced to be appreciated.

With such personal notes as each owner may make of new symptoms, verifications and clinical results clearly attributable to the single remedy it is hoped that this volume may become a cherished handbook throughout the owner's practice and even (as is the case with more than one book in the author's own library) for a second generation.

Ithaca, N. Y., 1916.