

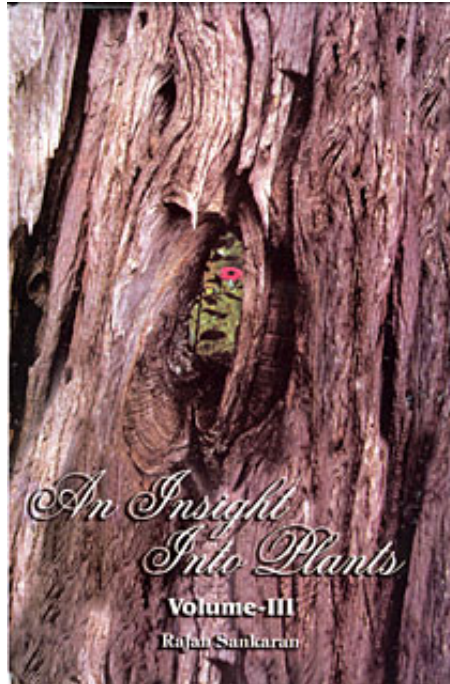
Rajan Sankaran

An Insight into Plants Volume 3

Leseprobe

[An Insight into Plants Volume 3](#)

von [Rajan Sankaran](#)



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EUPHORBIACEAE

(Spurge Family)



The spurge family (Euphorbiaceae) is a large family of flowering plants with around 280 genera and 8,000 species.

Members of this family often have a milky latex, which in some species (*e.g. Jatropha*) is irritating to the skin and can be fatal to livestock. Rubber is derived from the latex of several members of this family, most importantly the Para rubber tree (*Hevea brasiliensis*) which provides around 90% of rubber to all rubber industries, the rest coming from other species of Euphorbiaceae and other families. The Castor oil bean (*Ricinus communis*), tung tree and tallow tree are other important members of the family, producing commercially significant oils. Species such as *Jatropha* (*Jatropha curcas*) and *castor bean* have been recommended as sources of biodiesel. The cassava or manioc (*Manihot esculenta*) tuber is rich in starch and is the source of tapioca. Some plants are grown as ornamentals, such as the poinsettia (*Euphorbia pulcherrima*); it is a popular Christmas decoration.

Summary of Euphorbiaceae:

Sensation

Tied and untied. Bound and unbound.

Passive reactions

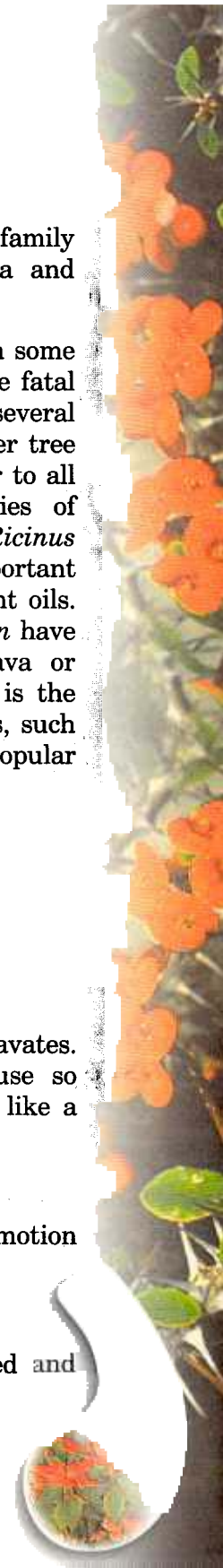
Tied and cannot do anything. Change of position aggravates. Motion aggravates. Beginning motion aggravates because so tightly held, no space to move or to come out. Held in like a prisoner in a prison.

Active reactions

Desire to break free. Intolerant of clothing. Continuous motion ameliorates. Rest, repose aggravates. Release.

Compensation

Manages in a limited space. Not affected by being tied and bound.



MIASMS

| | | Addition |
|------------|----------------------|----------------------|
| Acute | Croton tiglium | |
| Typhoid | Mancinella | |
| Malaria | Cascarilla | Mercurialis perennis |
| Ringworm | | |
| Sycotic | | |
| Tubercular | Acalypha indica | |
| Cancer | Euphorbium | |
| Leprosy | Hura brasiliensis | |
| Syphilitic | Stillingia sylvatica | |

Source words of Euphorbiaceae:

Tied, bound, bind, get entangled, straightjacket, arrest, captive, capt catch, clasp, clutch, detain, ensnare, entrap, get snarled, strangle, stuck, get tangled, get trapped in, grab, grasp, hold of, net, seize, snare, stifle, suffocate, take prisoner, prison, throttle, trap, at lib boundless, break away, break free, free, freed, liberated, not tied release, released, untied, unbound, unchained, flowing open, limit uncontrolled, escape, disentangle oneself, get away from.



CASES:

CROTON TIGLIUM CASE

Italics are used to highlight pertinent phrases.

Case of a female with asthma seen on 2 April 2002:

D: Tell about it.

P: Started as bronchitis in childhood. After Homoeopathic treatment it under control. For one or two years it was bad and then was under control for a while. But I always had a tendency for cold and cough.

After marriage, in Mumbai, the tendency for cold and cough increased little bit more. For two to three years used to have it. During pregn

turned up into full-fledged asthma, was hospitalized twice. Could not breathe well. Was introduced to the pump for the first time, scared to use the pump, will harm my baby.

Would wait for it to go, but would lead to severe attack and lead to hospitalization on both the occasions.

In the seventh month of pregnancy, was shifted to Malad (a suburb in Mumbai), which was away from the sea, where humidity was less. Then, was fine till ninth month. I had a normal delivery. Then, when daughter was one and a half years old, got aggravated and was hospitalized. After that I started doing yoga. I was better, under control.

But because of my laziness, I discontinued. I should have continued that.

I walk a lot; I am a dancer.

On and off get it, trying to find out whether dust or change in season—

At times it suddenly triggers then even medicines do not work.

Right now I am taking Betnasol. Had taken Deriphylline Retard injection.

One and a half month ago eosinophil was nine or ten.

Starts with cold and then developed breathlessness.

At times under control but this time took longer.

This time took one month to recover. Last night after three weeks I did not get up, otherwise I have to get up to use the pump.

D: Tell more about this.

P: Throughout the day doing lot of things. In the daytime I am not conscious of it.

< Night, when lying down.

Get breathless and wake up.

> Sitting.

Try not to use the pump but rush invariably.

(It is important to note that she is fine for months and then there is a severe attack. This is indicative of the miasm.)

Trying different things. Ice is out, no ice creams, fried not much. Don't know what triggers me. Ate grapes – felt they won't harm me but I think it aggravates.

< Change of season, dust

< Night (3 marks)

Difficult to climb stairs when I have an attack.

For three weeks did not go for walk, avoid it. Otherwise I go for my walks in the morning on the beach for 45 minutes regularly.

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D: You said it gets suddenly triggered; tell about that.

P: Starts with cold. Do steam inhalation, morning and night but it increases gradually.

Take Theobid, but no relief. Continuous steam inhalation also gives no relief. No relief from cough syrup or Deriphylline. Cough is not always there, but this time cough, cold, wheezing everything got together.

D: What is the effect of this on you?

P: On all these days could function. Go to school everyday. Go for my walks everyday. When I am sitting down and either reading a book or watching TV I am not conscious of my breathing. But I was never sitting down and doing nothing, I was doing all my daily work but I knew there is lots of restlessness and wheezing inside.

In past could dance even during asthma, but this time it has really affected me. I am a dancer, practice regularly. I teach dance too in the school.

(This fact that she is a dancer, we keep it on the side. What is dance for her? Why not take dance or amelioration by dancing? But we have to see dance in the whole case. We have to see dancing in context with the case and that will come from the chief complaint. We do not ask about dance. Dance is on a lower level. Now we are at the level of fact. Effect should be in tune with the nature of the problem, which is sudden and severe. The answer should go along with that.)

Try not to exert myself too much. In the past, danced even when my asthma was on, while I take my medication. It does not bother me. But this time it was affecting me.

D: What is the effect on you?

P: Scares me. When hospitalized the first time, I was shaken up so badly. Told myself I will never get myself in this position again. I started doing Yoga.

(She said it scared me. This feeling comes from something that is sudden and severe. It shakes you up. I don't want to come into this situation again as this is very scary. Watch very carefully the gestures of hand and what she says.)

For a long time that got me out. This time brought me to the same situation. I cannot find out the cause. I am still trying to figure it out.

> Cold, December through January

< Monsoon, > out of town

There is lots of restlessness.

Last year same thing in March through April, was bad, but not so much as this year.

D: When you say, "it scared me", what do you mean?

P: Night when very bad, feel it will do something to my lungs. (Hand gesture: she brings her hands close to her throat as if she is grasping it with both her hands)

I will get some attack or heart attack. This is going to be *fatal*, especially in the nights.

(It is going to do something to my lungs. This is going to be fatal. That sentence gives away the remedy. So what is the sensation that comes in this sudden and severe way and how is it going to be shown by her hand gesture? This is going to do something to my lungs and that is going to be fatal. At the same time, her fingers clasp and squeeze. Observe this gesture.

Do not worry about it if you missed it because if this is the gesture that describes it, it is going to come again and again and again and in all situations of her life. It is going to happen again and again and again).

Will not be able to function, will be bedridden, that is my fear. I hate to just lie down, do that for days.

Get very restless. If anyone has to do things for me, I don't like it. All this scares me. The fear is that something bad will happen to my lungs. Is going to ruin my lungs and that will make me absolutely invalid.

D: What is the sensation that will happen to your lungs?

P: It will cause congestion (with fingers moving together in a tight way). Congestion, with no passage to breathe. (Hand gesture: as if putting her hands around something to grasp it, with no space between the two hands). Not even little bit. Will lead to death, heart attack. < NIGHT

No passage, not even little bit left to breath.

It is the end, cannot go beyond that. (HANDS)

Nothing is left.

D: Describe in more detail?

P: Choking. The next breath will be the last one. I feel congested. (Hands)

(What is significant in her hand gesture?)

All asthmatics feel choked, blocked and so on. So what is the difference?

The vivid description of sensation with so many hand gestures cannot be local. This sensation has to be general. So, when you keep asking about the local sensation again and again, at one point you get the general sensation.

If a gesture is described with a hand gesture and it is done over and over, then it is not local; it has to be a general sensation of her whole being, of her whole life. As you continue exploring her case you see that, it is a general sensation of her whole life and her whole being and then you see that that sensation and that miasm is there in everything throughout the whole case. Therefore I have learned to trust this sensation more than anything else. In the beginning you would think that choked, suffocating, congested is just common for asthma, but every

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asthmatic will describe it in a different way. And when you have hand gestures, this is it!

I ask the patient again and again, what are you showing with your hands and then they show a lot of things; dreams, delusions, life situations and everything is on the basis of this gesture. Just hold onto this and ask about it.

Her hand gesture shows no space to take in or take out, no space at all.)

D: Tell me what you are showing with your hands?

P: (Now every word is accompanied by a gesture.) As if there is nothing left, *not even a little bit of space for me to breathe.* (Again the gesture as if the hands are encircling something.)

Congestion, accumulated. *No passage* to breath.

D: Show again with hands?

P: Choking. Everything is blocked inside lungs.

(Locks her hands into each other so that her fingers are intertwined and there is no space between the palms, as if something is very tightly encircled.)

No passage left at all. No space to breath.

D: Can you just describe what you are showing with your hands; what is that?

P: (She continues to keep her hands locked into each other.) Congestion, all is blocking my lungs.

Nothing is left. No space left for next breath to go in. (shows hands)

No place to breath. *Nothing to take in and nothing to take out.* Choking.

D: Describe this feeling?

P: *Total blockage.* (Hand gesture)

D: Just describe this choking feeling in as much detail as possible.

P: Breathlessness and so on.

D: Forget the lungs. Just describe to me what you are showing with your hands.

(This is very important. I am asking her to dissociate the sensation from its local to its origin and asking her to describe it purely as sensation.)

P: (Clasps hands so tightly as if she is squeezing something between them.) I just think of death.

D: Describe this blockage more?

P: Just think of death. Block; no space. Will die. Lead to an attack, ~~a heart attack.~~