International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493
P-ISSN: 2616-4485
www.homoeopathicjournal.com
IJHS 2021; 5(4): 13-15
Received: 17-05-2021
Accepted: 03-07-2021

Dr. Km Om Jee
Assistant Professor, Department of Obstetrics and Gynaecology, Dr. Yadubir Sinha Homoeopathic Medical College and Hospital, Darbhanga, Bihar, India

Dr. Purusottam Kumar Singh
Assistant Professor, Department of Organon of Medicine, Govt. Homoeopathic Medical College and Hospital, Godda, Jharkhand, India

Corresponding Author:
Dr. Km Om Jee
Assistant Professor, Department of Obstetrics and Gynaecology, Dr. Yadubir Sinha Homoeopathic Medical College and Hospital, Darbhanga, Bihar, India

Nosodes: Evolution and preparation

Dr. Km Om Jee and Dr. Purusottam Kumar Singh

DOI: https://doi.org/ 10.33545/26164485.2021.v5.i4a.448

Abstract
The term Nosode is originated from Greek word "Nosos" which means 'disease' and 'Cidos' which means 'appearance'. It may also be compared with Latin word 'NOXA' which means 'Noxious or Damage'. As per HPI, vol. 4, Nosodes are defined as "Homoeopathic preparation from pure microbial culture obtained from diseased tissue and clinical materials (secretions, discharges etc.)". During homoeopathic practice, nosodes are playing important and essential role. They are used on regular basis as anti-miasmatics, inter current remedies as well as for acute complaints also. This article gives a clear concept on nosodes and their preparations.

Keywords: Nosodes, evolution, history, preparation

Introduction
Nosode's mechanism possible involve direct effect on the host cells instead of under etiological infectious agent. The homoeopathic stimulus is also called the primary effect of the homoeopathic remedy that induces a secondary response increasing the body's capability to fight against different diseases. Different clinical works clearly shows that nosodes are able to induce changes in immunological balance according to homoeopathic potency used. Dr. master Hering has given us an idea to use nosodes (miasmic agents) as a potentised remedy. He himself prepared and proved some of nosodes also.

Evolution of nosodes [4]
The earliest experiment on nosodes were achieved by dr. Constatine Hering in Surinam, Guiana, South America between 1827 and 1833."During the experiments on the serpent poison, in1832 he said that he has given out the idea that hydrophobic virus should be a powerful pathological agent. He presented the same hypotheses for the virus of variola or small pox. He also coined the term "Nosode".
Isopathy was having the seeds of nosodes. Dr. Collet categorised isopathic method of treatment into three parts:
1. The organic Isopathy or Organotherapy
2. The Serotherapy and
3. The Pure Isopathy

Pure Isopathy, later on, give another term the concept of nosodes. Once an isopathic substance is dynamised, it becomes a pure homoeopathic potency. Therefore, it must be applied by the cardinal principles of homoeopathy if it is going to be used correctly. Hering clearly stated that nosode, are useful as intercurrent remedies.

History [4, 5, 6, 8, 9, 10]
In 18th century, when Hering began to study the works of Hahnemann and in 1831 when his work on Lachesis was published and his first idea on the uses of Homoeopathic remedies prepared fromexcretions or from the pathological secretions which he named nosodes were formulated.
1833, john joseph welhelm lux published his work isopathia der contageonen or all the disease carry in them the means of their cure & created the stock Anthracinum and then Malleinum. He prepared the most varied nosodes such as Carbyzine, Anthraxcinum, Leucorrhoea, Scabies, Equorium, Hominum, Variola hominum, Psorican.
At the same, time Gross and Attomyer popularised the knowledge of Psorinum of Hering. In 1833 Lyssin was potentized and proved by Hering.

In 1836 Anthracinum was introduced by G.A. Weber in cattle plague.
Later in 1862, Malaria officinalis was brought out by G. W.BOWEN of Ft. Wayne. It was prepared from the stagnant goals in the malarial section.
In 1870, Swan published two cases of tuberculosis cured by Tuberculinum (ex-phthisine of Hering and Lux) prepared from the suppurated tubercular cavity.
In 1871, Variolinum came into use.
In 1873, Vaccininum came into use.
In 1875, Medorrhinum was introduced by Swan.
In 1879, Syphilinum was used and its proving was published in the following year.
Burnett of London, disciple of Swan utilised Bacillinum (dilution of the sputum of T.B. patient) that happened five years before Koch's discovery.
Drysdale preconises Pyrogenium (product of decomposed meat)in Typhus and in septic conditions. Swan recommends Diphtherinum.
Dr. Kighel of Belgium 1st established a clinical pathogenesis of Tuberculinum. Later on J.H. Clarke (Homoeopathic world 1891, v.26, p.304) published an analytical pathogenesis called from all cases observed up to that time by the Allopathic doctors relating to the action of Tuberculine on the tubercular patients and also on the non – tubercular patients.
In 1906, Clarke in England brought out Purtussin; Bordet discovered in the same year Pertussis bacillus.
In 1910 - H.C. Allen, published the Materia Medica of The Nosodes.
29 December, 1948, in France, issue of the Journal Official, a deceree was published called Codification of homoeopathic herbal preparations - "Nosodes are never sold to the public in the natural state, but only from the 3C dilution or 6X dilution upwards." after passing the sterile test.
In 1960 O. A. Julian published first time 'Materia Medica der Nosoden' while he was in Germany.
'Biotherapiques et Nosodes' (1962) 'Traitede Micro-Immutherapie Dynamisee' (1977) was two french version of this book which comes later.
After 1990, two other nosodes, from the whole mosquito and from the blood of an affected patient of Chikunguniya, were prepared.
In 2007, the Finlay Institute in Cuba prepared a Leptospira nosode 200 CH using four circulating strains and used as homoeopathic prophylactic.
Nosode leptospira 200 CH prepared by finalay institute of Cubain 2007.

Classification of Nosodes [1, 2].

The NOSODES are classified in the following types:

1. **Basic Nosodes:** Psorinum, Tuberculinum, Bacillinum, Carsinosinum.
2. **Exanthem** (A wide spread rash): Parotidinum, Variolinum.
3. **Isopathic Nosode:** Streptoccoccinum, Staphylococcinum, Pneumococcinum.
4. **Intestinal Nosodes:** Medicine prepared from cultures of non lactose fermenting bacterial flora of the intestinal tract are called intestinal Nosode. Dr. Edward Bach,a bacteriologist in London discovered it. Proteus, Dysentery co., Morgan, Gartener bacillus etc.
5. **Autogenous Nosodes:** (Prepared from discharges or secretions from the pathological tissues or organs of the patients himself for treatment of that very diseased state).
6. **Plant Nosodes**: (Nosodes prepared from plants.) Ustilago maydis, Secale cornutum.

Preparation of Nosodes [3].

Nosodes are divided in 4 groups according to nature of used materials-
N I: These preparations are made from lysate of microorganism capable of producing bacterial endo-toxins e. g. Paratyphoidinum, Typhoidinum and Staphylococcinum etc.
N II: In this group the products made from microorganism capable of producing bacterial exo-toxins e. g. Diphtherinum
N III: This group preparations are made form purified toxins.
N VI: These Preparations are made from microorganism/viruses /clinical materials from human convalescents or diseased subjects e.g. Influenzinum Syphilinum variolinum and psorinum.

General method for collection and preparation of strain

Microbes of pure organism are collected from suitable clinical material from subjects suffering from the disease are isolated, cultured and identified.
They are studies properly for complete identification as per individual monograph in pharmacopoeia and they are lyophilised for sure preservation and stabilization of individuals characteristics.
The very first step we should prepare of culture medium which is most suitable for growth of the organism for the preparation of each nosode.
The solid medium generally recommended is nutrient agar which generally is satisfactory in most cases. In other instances, special solid culture medium containing proteins such as blood agar, serum agar have also been recommended.
Stock of each nosode should be made from recently isolated organisms only. Now the culture should be kept below 500 for retaining their full antigenic value. It is mandatory to maintain their in lyophilized state in stock.
Then the culture is to incubated for 24 hours at 370 C. While ending the incubation, the microorganisms are harvested under aseptic conditions by pouring sterile isotonic salt solution on the solid media and then generally shaking or scraping until all the microorganisms have been suspended.
The suspension is centrifuged according to 3980-4070G, ICE international centrifuge at 5,000 R.P.M. for 30 minutes, then the supernatant is discarded and resuspended remaining bacterial pellets in 0.9 percent NACL solution and shake well to them and recentrifuge it.
The suspension is examined again for purity again and again during incubation and handling.
It is very essential to check purity at each and every step if contamination occur at any level all should be rejected and again a fresh stain will be used.
Then leave the bacterial colony for 24 hours to growth and then re examine it for any impurity and Then the culture is taken up in the 0.9% aqueous sodium chloride solution.

Strength

The growth of colony is suspended again in isotonic solution, and shake them to break up clumps; it makes a uniform suspension now make an arrangement that number of bacteria in each ml of suspension 20 billions viable cells/ml.

It will call the original stock for the drugs of groups N-I and N-II. For group N-III and N-IV the strength of original stock should be one part of the pure material in ten parts of the suspending/diluting material either it is lactose or glycerine according to their monographs.

Group, N – I

After doing bacteriolysis of suspension of original stock almost all bacterial cells are ruptured now the suspension is centrifuged against 10000R.P.M. for 30 minutes. The supernatant is then filtered through sietz filter and we found cell free extract of endotoxin, which is treated with equal volume of strong alcohol. This strength is sealed separated and is labelled as primary stock nosode. Preserve the stock at 4-60.

Group, N-II

Check the stock for any impurity. Then mix it with equal volume of strong alcohol and hermetically sealed under aseptic conditions. It will call primary stock nosode preserve them between 4-100. Further potencies are made in dispensing alcohol in ratio 1:9.

Group, N-III

N-III group nosodes are prepared by trituration with lactose with desired drug strength 1/10. up to 6x potencies are kept in hermetically sealed ampoules and stored in conditions prescribed under individual monograph.

Group, N-IV

These preparations are made by Hahnemannian method of trituration for class IX, according to HPI monographs. potencies up to 6X should be stored between 4-60C.

Nosodes HIV, Hepatitis C, and Mycobacterium tuberculosis are prepared according to new method of preparation which have following steps [6].

1. Identification and procurement of source material
2. Nature of material
3. Removal of common co-infection / contamination
4. Removal / Separation of other components
5. Characterization of source material
6. Safety
7. Mother preparation
8. Quantification
9. Potentization: Machine and method
10. Safety check for human use
11. Lyophilization.

Conclusion

For deeper and brighten understanding of any topics it is essential to take a deeper look behind historical development of it. For the clear concept on nosodes, the study must highlighted the evolution of nosodes along with its preparation. This work is directed to compile the works of our masters on nosodes that would help in understanding and justifying the concept in much broder light and would further help the us to prescribe nosodes with confidence.

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