

Kali Carbonicum

By Ian Watson

Introduction

At college I was taught that there were certain types of person that would most likely require the remedy *Kali carbonicum*. They were rigid, closed individuals with a strong sense of duty and an excessive control over their emotions. They would have a great need for order and structure in their lives, and would tend to understate their sufferings until they had progressed into a pathological state. They were probably to be found working in middle management, or as bank managers or police officers. They would be unlikely to come for homœopathic treatment, except perhaps as a last resort, and even then it would be difficult to find the remedy because of their closed, rigid nature.....

I expect that this picture is familiar to many. The impression I carried for quite some time was that *Kali carb.* would be needed in practice on rare occasions, and that only those types of person described above would require the remedy. Fortunately, however, a patient came along to teach me otherwise.

A forty-six year old woman presented with pre-menstrual syndrome of many years duration, which acupuncture and previous homœopathic treatment had only palliated. Before each period for at least one week she suffered with the following: aching pains in the legs, worse on lying down; insomnia, waking around 3am and unable to get back to sleep; great exhaustion; emotional instability ('like being on a tightrope') with frequent changes of mood. Her periods came at intervals of three weeks.

She had a tendency to recurrent backache in the lumbar region, since giving birth fifteen years previously. History of post-natal depression lasting many months. She had two children and had difficulties during both pregnancies; the first birth was a forceps delivery. She was generally chilly. She sweated easily, especially at night in bed. Several times weekly she would have to rise to urinate at 3 or 4am. A sore, bruised pain was felt periodically in the region of the liver, with occasional sharp stitches. She had great sleepiness after her evening meal, suffered a lot from flatulence and her stools tended to be very pale.

She was very well dressed and during the interview she was extremely open, extroverted and quite loquacious. She tended to worry about the family, about her children being ill and about her own health. She said she was a coward as she was frightened of pain.

When I had taken this case I was not sure what remedy she needed. I could see aspects of *Lycopodium*, *Arsenicum* and *Phosphorus*, but none of these seemed quite right. I could also see a few 'keynotes' suggesting *Kali carb.*, but her openness and extroversion seemed to strongly contradict my image of the 'typical' *Kali carb.* person. The mental/emotional symptoms that I had elicited did not seem that strong or problematic to her anyway, so I decided to find a remedy that matched the physical generals, which by contrast were clear and well marked.

I quickly repertorised the case using Phatak's Repertory, taking the following rubrics:

Menses, Before Agg. (p. 229)

Menses, Early (p. 232)

Pregnancy, Childbed, affections of, or since Agg. (p 276)

Liver (& right hypochondria) (p. 217)

Time, 3am Agg. (p. 360)

Changing Moods (p. 46)

Because so many of her sufferings were worse before the period, to save time I used the rubric 'Menses, before Agg.' as an eliminator, that is to say I only considered the remedies in that rubric. Whilst *Cocculus* and *Calcareo Carbonica* featured strongly in the repertorisation, *Kali carb.* was the only remedy to be found in every subsequent rubric. Reading the materia medica it seemed to match her overall state very well, so I prescribed a single dose of *Kali carb.* 30 (the only potency I had in stock at the time).

The result was an aggravation of her symptoms lasting almost five weeks, during which time she had a lot of pain in the liver region and she felt quite depressed. A number of old symptoms (some from fifteen years previously) returned and subsequently disappeared. After this she suddenly started to improve in every respect and her periods then established a four-weekly cycle and she had none of the pre-menstrual symptoms. All of the liver pains disappeared and she felt better than for years. The improvement lasted for three months, after which a return of some of the cured symptoms called for a

repetition. *Kali carb.* 200 was given, which produced another lengthy but less intense aggravation and she then remained well for almost a year, when a further dose was needed. The curative action of the remedy was very deep, and it was obviously a remedy that she had needed for many years.

What this patient taught (or rather, reminded) me was that the psychological profiles of remedies can be terribly limiting if we seek to fit all of our patients into the 'familiar image' we have of the polychrests. These images provide wonderful confirmation when they are found, but I have learnt from experience that there are many other aspects of a person that a remedy may be 'similar' to, and that there are many facets to a remedy other than those that we were taught.

I would like to share some of the experience I have gained with *Kali carb.* over the past two years, emphasising the *physical* aspects of the remedy which I have seen manifest in a wide spectrum of personality-types. There are a number of key areas of disturbance that have featured strongly in a majority of my cases, which form the general headings given below.

Water balance

Kali carb. is a major remedy for *fluid retention* - the materia medica state that it is suited to dropsical states, and I have found this to be frequently the case. But the water issue goes further than that. There is a generalised *sensation of dryness* which runs through the whole remedy picture and which crops up here and there in a great many patients. *Dry cough, dry stools, dry skin, dry hair, dry eyes, dry throat, dry tongue* and so on. The *urine flows too slowly*, and the *perspiration is scanty or suppressed*.

As with many of our polychrests, there is a polarity within the picture of *Kali carb.* so that symptoms of *excess water* are just as pronounced. There is a strong *tendency to weep* in the remedy picture - *weeping with headache, during chill, in sleep, without knowing why, when telling symptoms* etc. The remedy also has *continual gathering of water in the mouth, excessive lachrymation, diminution of sight after working in water, regurgitation of water from the stomach*, and a tendency to *profuse sweats* and *night sweats*. Even more strikingly, there is a *sensation as if the stomach is full of water*, and even *dreams of water* and *dreams of weeping*. Wherever there is an issue to do with water or the lack of it, *Kali*

carb. ought to be considered along with *Alumina*, *Bryonia*, *Natrum mur.* and *Nux moschata*.

I have verified the water sensation in the stomach on several occasions - the strangest was a man who described to me a feeling that he had a U-shaped tube in his stomach partly filled with water. Whichever way he turned, the water seemed to slosh over to that side of the tube. In this case I took the rubric in Phatak's Repertory 'Splashing, swashing, as of water' where *Kali carb.* is to be found, and the remedy helped him a great deal. My wife Sally also prescribed *Kali carb.* successfully for a woman who had a 'sensation as if the eyes were full of water'. I have not seen this symptom listed under *Kali carb.*, but it was cured in this case along with her other symptoms which were characteristic of the remedy.

Digestion

Kali carb. has a strong affinity with the digestive tract, particularly the stomach and the liver. Emotions are felt by the patient to affect the stomach area, particularly *anxiety*, *fear* or *sudden shocks* like the slamming of a door. There is *nausea from emotions* or *after vexation*. Often there are palpitations, dyspnoea and other respiratory or heart symptoms which are secondary to digestive trouble. One of my patients had a pain in the praecordial region extending down the left arm. She naturally thought it was heart trouble, but questioning revealed that it only came on after she ate fatty foods, which confirmed my suspicion that it was a referred symptom from the gall-bladder or the liver. *Kali carb.* helped her generally and cured the chest pains. One is constantly reminded of Burnett's injunction to 'get behind the symptoms' and find the seat of the disorder, which often lies elsewhere even on a purely physical level.

Kali carb. has much in common with *Lycopodium* in the digestive area, and they are a pair that I have often found myself differentiating. Both have problems with *eructations*, *flatulence* and *distension*. Both share a great *desire for sweet things*, *Kali carb.* also having a specific *desire for sugar*. *Kali carb.* has additionally a strong *desire for sour things*, like *Sepia*, *Hepar sulph.* etc. Both remedies have an *aversion to bread* and to *meat*. Both remedies can be full after a small quantity of food (although this I think is more

pronounced in *Lycopodium*), and both have a sensation of heaviness in the stomach after eating. Both remedies have stomach ulcers within their curative range. Both remedies can suffer from going too long without eating, and both should be strongly considered in patients with liver pains or gall-stones when the characteristic symptoms are present. The typical *sharp, stitching pain* in the right side often crops up in patients needing *Kali carb.*, either as part of the presenting picture or at some time in the past history.

To differentiate, *Lycopodium* may have aggravation from onions, shellfish and 'flatulent food', whilst *Kali carb.* can be affected adversely by bread, and also by warm food, which *Lycopodium* tends to crave. Eructations can either aggravate or ameliorate in *Kali carb.*, whilst in *Lycopodium* they virtually always ameliorate.

Physical Structure

The ætiologies of *Kali carb.* have guided me to its use on many occasions, and have helped me to understand certain aspects of the remedy which I was previously unaware of. The remedy should be strongly considered in patients who have never been well since *childbirth, abortion, miscarriage, back or pelvic injury* and *overstraining the back*. The key theme which all of these ætiologies share is that they are all capable of producing a degree of *physical misalignment*. When childbirth or abortion leaves a residual infection, *Pyrogen* would be the leading remedy, and where the trauma is predominantly emotional, *Ignatia, Staphysagria* and others would be most likely indicated. With *Kali carb.*, however, it seems to be more of a *mechanical trauma* affecting the uterus, pelvis or the back, especially the lumbar region. Hence it is often the case that *Kali carb.* is particularly indicated after a prolonged or difficult childbirth, such as a forceps delivery. One of my patients who responded to the remedy said to me: 'I feel that some of my problems have to do with the rapidity with which I had children - my body took a terrible bashing at that time'.

Another ætiology I have been able to add to this list is *never been well since hysterectomy*, which again is a pelvic trauma from which the organism may not fully recover. I discovered this indication after treating a woman in her early fifties who was suffering from severe, right-sided sciatica of several years duration. She had intense, sharp pains travelling from the hip down to the knee and was woken by them most nights between 3 and 4am. I noticed that she walked and sat hunched over forwards and to the right. The trouble had started

almost immediately following a hysterectomy, carried out to cure prolonged menopausal flooding, which it apparently did.

I prescribed a dose of *Kali carb.* 30, and the next day she telephoned to say that she was haemorrhaging. I asked what it was like, and she said that it was just like having a profuse period, which she found rather alarming given that she no longer had a uterus. The bleeding lasted for just one day, and by the next day the sciatica had disappeared and never returned. That was incredible enough, but I was even more amazed when I saw her and found that her entire posture had altered and she was now upright and relaxed - she looked as though she had just completed a course of the Alexander technique! I have since verified the indication *never well since hysterectomy* in several other cases and have found *Kali carb.* to be the leading remedy where some mechanical problem has resulted.

One of the few men I have treated successfully with *Kali carb.* also had a right-sided sciatica, with the characteristic sharp pain, travelling from the hip to the knee. He had a feeling that the knee would give way on him and a history of back injury. He also made a good recovery on *Kali carb.* 30.

I have noticed that several patients who have been helped by the remedy for some mechanical problem such as back trouble or sciatica have given the appearance when walking or standing that they have one leg longer than the other, and in some instances this was actually the case. I was therefore fascinated recently to discover a rubric in Kent's repertory 'Longer, leg' (page 1033) with *Kali carb.* as the only italicised remedy.

Female Organs

The only thing I can recall being taught about *Kali carb.* in this regard is that it can 'bring on the menses' when *Natrum mur.* fails, though apparently indicated. Having freed myself of the stereotype image of a *Kali carb.* person, I have found it to be very frequently indicated for various types of women's complaints, certainly as often as *Pulsatilla*, *Sepia* and our other polychrest female remedies. I have used *Kali carb.* successfully in women's problems more frequently than in any other single category of complaint.

Pre-menstrual syndrome, as in the case above, is an area where *Kali carb.* is often useful, as the remedy has a general *aggravation of symptoms before the period.* I have found *sleeplessness before the*

period to be a good indication, particularly if it occurs between 2 and 5am, and also *ovarian soreness, backache* or *pains in the legs before the period*. Another indication is *vaginal itching* before the period, and one which I have confirmed many times is *constipation* before the period. The remedy should be strongly considered where there are *uterine pains* before or during the period which *extend down the thighs*. It is also the leading remedy to think of during labour where the *labour pains extend into the thighs (Viburnum)*.

The menses are most commonly *early, profuse* and *protracted*, but they may also be *late, scanty* or *suppressed*. Menses which are *offensive, acrid* and *excoriating* also indicate *Kali carb.* very strongly. The remedy has proved curative in uterine *displacement, fibroids* and *cysts*, and I have obtained curative results in *indysmenorrhoea, metrorrhagia, endometriosis, pelvic inflammatory disease* and *menopausal complaints* where the characteristic symptoms were present. It should also be strongly considered in cases of haemorrhage or other disturbance following mechanical removal of afterbirth or retained placenta, or after a D. and C. for any other reason.

General Characteristics

I would like to conclude by listing some of the other general features of the remedy which I have frequently come across in practice and which are reliable indications.

Sensation as if the back, hips, knees or legs would give way. This symptom often crops up in patients with back or joint problems, and is a very strong indication for *Kali carb.*

Aggravation between 2 and 5am. There are different opinions as to the exact aggravation time of *Kali carb.*, some sources state the time as being 3-4am, others state from 3-5am. I have seen 3 or 4am to be the commonest aggravation time in patients who have responded well to the remedy, but sometimes the aggravation starts an hour or so earlier and sometimes it may continue as late as 5am. Often there is sleeplessness for a few hours during this period. It is also the leading remedy where *asthmatic attacks* occur between these hours, particularly when the patient has to sit *leaning forward with the hands on the knees*. I have treated patients who simply had to rise to urinate around 3 or 4am and, whilst this is a common symptom, it can provide useful confirmation if other symptoms of the remedy are present.

Pain in the back relieved by lying on a hard surface, particularly on the floor. Here the remedy must be differentiated with *Natrum mur.*, *Rhus tox.*, and *Sepia*. The back pains tend to be aggravated by walking, standing and sitting upright. There may be amelioration from sitting bent forward or from having the back supported, typically with a firm cushion pushed between the back and a chair. *Kali carb.* should be the first remedy to think of during labour when the labour pains seem to centre in the back.

There is a general over-sensitivity to noise, touch, drafts and to pain. Hypersensitivity of the soles of the feet is present in many patients for whom *Kali carb.* is indicated. I once asked a woman with menstrual problems how she would respond if I was to tickle her feet. She looked me straight in the eye and said: "I would kill you!" I was sure that she meant it, so I took it as confirmation of the remedy and assured her I would never do such a thing.

Sharp, stitching pains. The combination of dryness plus stitching pains in a patient bring *Bryonia* and *Kali carb.* equally to mind. In the latter I have found stitching pains most often in the liver region, the chest and in the joints, particularly the hip joint and especially the right hip. Other types of pain found under *Kali carb.* are stinging, needle-like, shooting, jerking, cutting, drawing and tearing. It also has pains which go to the side lain on, like *Pulsatilla*, *Bryonia* and others.

Puffy, bag-like swelling above the upper eyelids is given great emphasis in the texts, but I must confess to only ever having seen it once in a patient for whom I prescribed *Kali carb.* The literature suggests that this symptom would be found more commonly in patients with respiratory disease such as hydrothorax and pericarditis, in which I have had relatively little experience.

The mental picture

Whilst the majority of my successful prescriptions of *Kali carb.* have been based upon physical characteristics exclusively, I have found, often in retrospect, that there were certain mental symptoms of the remedy present in a fair number of these patients.

An *emotional instability* is often present, and *Kali carb.* should be thought of particularly when this instability becomes intensified in the week or so before the period. This has been described to me by

different (women) patients as ‘terrible mood swings’; ‘feels as though I am on a tightrope’; ‘feels as if I am on a knife edge’; I have to walk the middle road all the time’; ‘it’s like being on an emotional see-saw’. In the repertory we find *Kali carb.* listed under ‘Mood, alternating’ and ‘Mood, changeable’, as well as ‘Contrary’ and ‘Capricious’.

Many of my patients have used the word *control* when describing their emotional state, as the following quotations will illustrate: ‘I’m afraid that I might lose control’; ‘my husband says I should stop worrying about things that are outside my control’; ‘I like to be in control of the situation’; ‘we have an on-going battle about who is in control’.

Irritability or *touchiness* seems to be almost always present to some degree. This tends to be worse on waking; in the evenings; before or during the menstrual period. One patient told me if she felt a cold draft it *annoyed* her immensely. There is often a *quarrelsome* tendency, particularly with one’s own family.

An element of *fear* is usually present, and the fears will often suggest remedies such as *Arsenicum* or *Phosphorus*. Fear of being alone; anxiety about health; fear of impending disease; fear of death, especially when alone. I have also found fears regarding one’s children to be very strong in patients who have responded well to *Kali carb.* One patient presented with a crystal-clear physical picture of the remedy, and mentioned a fear that she experienced whenever she had to rise to urinate at night, and which I asked her to describe in detail. She said: “It’s to do with the emptiness in the house; fear of a presence, of something unknown; that someone will come and touch you; it (the fear) seemed to be pressing on my back”. I was amazed to discover later how well she had described a number of *Kali carb.* fears in that sentence - in the repertory we find ‘fear of evil’, ‘fear of ghosts’, ‘fear of touch’ and ‘fear of being alone in the evening’. Also listed is ‘fear at 3am’, which was the time at which she invariably had to rise.

On the emotional level *Kali carb.* seems to overlap closely with *Phosphorus* in many areas - the over-sensitivity, fearfulness, desire for company etc. Often with *Kali carb.* however there is additionally a hard edge to the personality that is not seen with *Phosphorus*, which manifests as a kind of obstinacy, dogmatism or rigidity in a certain area of their life.

I have read that patients needing *Kali carb.* will withhold or play down their symptoms - in my experience they will often withhold or de-emphasise *emotional* symptoms, but I have never had difficulty in eliciting physical generals and particulars.

Related remedies

The remedies I have found to be most closely related are *Lycopodium* (especially in the digestive sphere); *Natrum mur.* (problems with water/dryness, backache, menstrual problems); *Sepia* (female pelvic, pregnancy and childbirth, menopausal and lower back problems) and *Phosphorus* (emotionally and respiratory problems). The commonest acute satellites of *Kali carb.* seem to be *Bryonia*, *Colocynth*, *Nux vomica* and *Carbo veg.* Patients needing *Kali carb.* who have a pronounced weakness in the liver and/or gall bladder will very often benefit from a course of *Chelidonium* in tincture or low potency at some stage during the treatment.

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