

PART TWO

NATURAL CURE OF HERNIA  
A PERSONAL RECORD  
SUBSTANTIATED BY SURGICAL EVIDENCE

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Many sick people who seek health in "Nature-Cure" only do so after having failed to find it in more orthodox therapies. When their case has been repeatedly diagnosed either as incurable or as curable only by surgery, some of these seekers are much relieved when they recover through the application of simple natural principles.

However, they are rather puzzled when they hear, later, that since their complaint was officially incurable and could not therefore have yielded to nature cure, "they can never have had it at all and that it must have been wrongly diagnosed."

Why is it that whenever an as yet unorthodox therapy heals a complaint which is officially considered incurable, many physicians would rather imply that orthodox medicine cannot correctly diagnose that complaint than investigate the new therapy clinically? Surely, he who admits that he cannot diagnose a complaint, cannot claim to treat it correctly, let alone cure it? Would it not be more rational to say that diagnosis of the complaint being now generally reliable, there is every hope that a dependable treatment may soon be forthcoming and that as a means to that desirable end any therapy which claimed credible success would be investigated clinically by open minds?

Further, where the only treatment deemed effective involves the knife, as with herniæ, or ruptures, would it not be wise to investigate in hospitals any technique for which cures were reliably claimed without surgical intervention? And, all the more so, since an operation for hernia, however skilfully performed, far from being an infallible and permanent cure, is often followed by secondary herniæ, each progressively more difficult than the first to heal permanently by the knife!

Whether or not the authorities of any hospital would investigate clinically a non-surgical treatment for hernia, they might be interested in the account of a case where this treatment was in fact curative. In this particular case, the "escape clause" of mistaken diagnosis does not operate because there is experimental evidence both that the treatment was curative and that a hernia of a specific type had been correctly diagnosed before treatment.

Whilst I was on holiday in Austria in September, 1937, a high spring diving board broke under me and in trying to straighten out before hitting the water I gave myself an awful rick and alighted on my left side. Although under water I felt as if my "guts" had been torn out of me. I had suffered only a right inguinal hernia, the size of a walnut, and a smaller left inguinal hernia. I was then 48 years of age.

In keeping with my theories and techniques, both described in *How do you Sleep?* and elaborated in *Co-operative Healing\** I rejected the operation deemed inevitable by most of my medical and nature-cure friends, and I decided to try and heal myself. I gave up all games on which I was very keen, but went on with my work, which gave me some exercise since it involved manipulating patients. Although this exposed me to strain, I had at least three almost complete cures before the war came in September, 1939. However, in spite of complete rest at weekends and periods of relaxation whenever possible during the week, not one of these cures lasted more than six or eight weeks, as some slip or carelessness always seemed to break down an insufficiently toughened mend. In any case, since I had been the only witness of these partial cures, they did not amount to scientific evidence.

*"If I could but relax perfectly."*

In the last war, in addition to my professional work by day, I became a voluntary District Warden by night, and when peace came the strain I had undergone, in common with millions of others, left me devitalised. I still believed as firmly as ever that if I could but relax perfectly without drugs, find enough vital energy without stimulants, and think the right thoughts without hypnotic suggestion or self-deception, I could get a complete cure inside six months! But my professional expenses being as they were, I could not afford six months absence, and so I gave up the attempt to heal myself, and was operated on most successfully on May 21st, 1946, by an eminent F.R.C.S. The surgeon found: "double direct inguinal hernia, the right hernia being larger than the left. The weaknesses on both sides were re-enforced by an attached strip of fascia. This strip covered the re-inforced weaknesses in the form of a lattice work," wrote the surgeon.

In 1948, again following great strain, I developed a new and "indirect" hernia, consulted my G.P. and my excellent surgeon, and we agreed to have a new operation within six weeks. Meanwhile I applied the technique described in my book *How do you Sleep?* to such good effect that when I went back to my surgeon there was no hernia to be found, and this impressed him so much that he told me with a friendly laugh that "if I could do that

\* *How do you Sleep?* is out of print, temporarily only it is hoped, but *Co-operative Healing* is to be obtained from Frederick Muller, Ltd., 29 Great James Street, W.C.1, 15/- net, postage 10d.

kind of thing he would send me his patients with secondaries." This time I felt that we had scientific evidence, for both the G.P. and the surgeon, in addition to myself, could say that I had had a hernia with the usual squelching sounds on pressure, and that it had gone.

In 1949 another period of grave strain produced yet another hernia, which also disappeared as the 1948 one had done, and my conviction that some herniæ were curable by purely natural means, at least in their early stages, gathered strength.

In 1950 I faced a much worse period of strain than any before, and when this was over either a new or an old hernia broke through again, and as even a truss frequently failed to hold it, I suffered a good deal of pain. Unfortunately, my trusted surgeon was away on holiday, and fearing strangulation, I consulted another F.R.C.S. in August, 1950. He reassured me by telling me that "I could safely go for a holiday and be operated on on my return. There was no fear of strangulation, since he could put two fingers through the hole, which would make it easy to reduce the hernia if it came down." Inwardly, I rejoiced at the idea that here I had yet one more competent witness who could one day say that I HAD HAD a hernia, if I could again manage to cure it!

*That strange rash: was it the Unconscious Mind?*

Unfortunately, a slip aggravated my condition, and I went into hospital on October 21st, 1950, confident that my surgeon, who had shown great interest in my previous partial cures, would look for evidence of them. I was "prepared" for the operation on Monday, the 23rd, but when the assistant surgeon came to examine me at 9 a.m. on the Tuesday, he had to cancel the operation because I had developed a rash over the critical area!

My psycho-analyst friends declare that my unconscious mind must have produced this rash in order to give me time to cure myself and thus establish the possibility of a natural cure for hernia.

Be that as it may, I determined to make use of this opportunity to heal myself, and I began to concentrate more intently than I had ever done before on relaxation, sleep, the groin, circulation, healing my hernia, and a multitude of constructive variations on the same theme. Further, although no physician has so far been willing to test the efficacy of this practice clinically, I kept my hands linked with the finger tips pointed at the hernia, and my feet crossed, literally for hours on end, whenever conscious, night and day, however hot I became. If one perseveres long enough with this, it eventually produces and maintains a "muck sweat," and in that state it is easy to stimulate local hyperæmia and metabolism by concentration, very much as self-consciousness produces and maintains a blush.

These effects appear to be due to the fact that the body is

bi-polar (right hand positive and left negative in right-handers and the reverse in left-handers) and that energy (vital ?) emanates from the finger tips. This bi-polarity is unconsciously utilised by old, cold, sick and devitalised people whenever they link hands, then invariably breaking the circuit as soon as they feel too warm. It is this tendency to "break the circuit" that must be resisted at any cost if one is to get significant results. I underline this assertion, knowing that it may expose me to ridicule, but I must face this possibility if the technique is ever to be given a clinical test in a hospital.

After a week in bed, my rash having subsided, I was once more prepared for the operation, only to produce a worse rash than the first, with the result that the operation was put off once again. By the time I had practised my self-cure for ten days, I found I could no longer make my hernia protrude. Within a few days two surgeons, and one doctor also, failed to find any hole. They all asserted that a hernia in which one could put two fingers could not be cured and must still be there although they could not find it. There was only one solution: open up and see, and get real scientific evidence both about the nature of the hernia and the extent of its cure, if any.

The operation was performed on November 16th, about three weeks after I had begun my "nature-cure."

"It was for an indirect inguinal hernia. This hernia had entered by way of the inguinal cord at the site of which there is a congenital weakness. The site of the original weakness operated on in 1946 was completely sound" wrote the surgeon. After the operation he had said that "on opening the sac he had found its neck so reduced that one could only have forced through it a knitting needle at the most; that no gut could have passed through such a small opening; that since so much had been done in three weeks, another week or ten days would have completed the cure, although without an operation no one would ever have known what had actually happened; and that it had all been a remarkable experiment."

I trust this has been an accurate description of facts. Scientific evidence is ample, both that there was at least one hernia, of a specific kind and size, and that it was almost completely cured BEFORE surgical intervention. Verification of facts by an exploratory operation is conclusive and it leaves nothing to the imagination.

Does this case alone justify a clinical investigation of a technique in a hospital? Of course not. But for over 30 years I have hoped that a method which never involves any risk to the patient and which has cured MANY "surgical cases" would be so investigated. This hope is strengthened by the fact that most great surgeons assert that they operate only when no other therapy appears to be effective or even possible.