

# **Examining the Irises and Tongue for Health Assessment and the Homeopathic Medicine**

**By**

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Evaluation of the eyes and the tongue in assessing one's health is as old as medicine itself. However, the consideration of the irises associated with the tongue in regard to determining a homeopathic medicine has been only a couple centuries.

It has been my pleasure and honor to be associated with one of the greatest contemporary specialist in tongue diagnoses in Traditional Chinese Medicine: namely, ZE-LIN CHEN, MD; who taught at the Santa Barbara School of Oriental Medicine for a number of months when I was a student. Dr. Chen, in addition to his wife, MEI-FANG CHEN, MD, are authors of a book called TONGUE DIAGNOSIS. Ze-lin Chen, MD is a Professor of Medicine at Shanghai Medical University, Chief of Traditional Chinese Medical Department and Laboratory, Shanghai Zhongshan Hospital. He is presently on the staff of the Oriental Healing Arts Institute in Long Beach, California.

It should be noted that at least three other books have important information on the tongue. First, GIOVANNI MACIOCIA, who is an acupuncturist and medical herbalist in Amersham, England, wrote an excellent publication-- TONGUE DIAGNOSIS IN CHINESE MEDICINE.

Homeopathically, DR. PRAKASH VAKIL has written a text called THE TONGUE DOES NOT LIE which has a few color pictures and much information on specific tongue appearances and associated homeopathic medicines. It was an honor to have Dr. Vakil lecture at one of the recent California Homeopathic Medical Society's Spring Conferences. And thirdly, the famous doctor ELI G. JONES, MD wrote a book in the early twentieth century called

## READING THE EYE, PULSE AND TONGUE FOR THE INDICATED REMEDY.

In the publication INSPECTION DIAGNOSIS ACCORDING TO THE CLASSICS DR. WANG HONG states: "The tongue is the window of symptom expression of the Heart, hence tongue inspection can foretell the state of the Meridians Network, Cold-Heat and Deficiency-Excess of the viscera." Dr. Ze-lin Chen relates in his reference work: "All internal changes inside the human body, visceral Deficiency or Excess, whether disease conditions are mild or advanced, whether body fluids are full or deficient, whether the Qi and Blood are healthy or in decline, can be objectively reflected by changes to the features of the tongue."

Before going to any clinical significance of both the tongue coating and tongue proper, I think it would be appropriate for us to review the anatomy of the tongue

Lingual papillae are found in the superficial mucosa layer and are divided according to their shape, size and distribution into four categories: 1) Filiform papillae; 2) Fungiform papillae; 3) Circumvallate papillae; and 4) Foliate papillae.

The filiform papillae are the most numerous and smallest papillae on the tongue. They

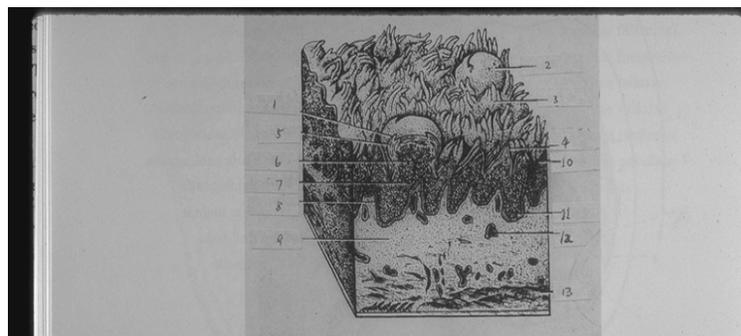
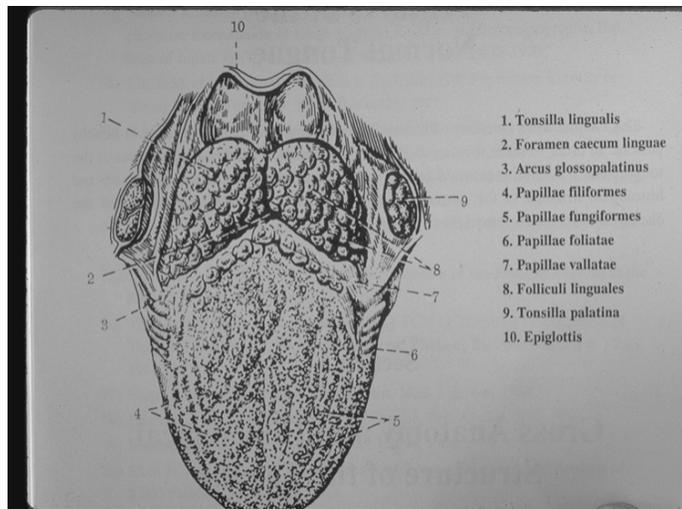
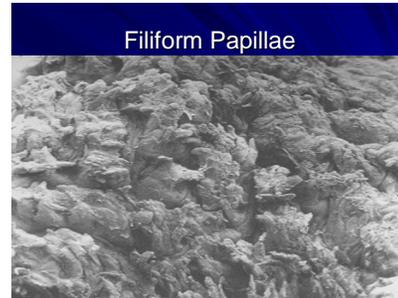


Figure. 37 Mucosa and Papillae of Normal Tongue

- |   |                       |                      |
|---|-----------------------|----------------------|
| 1. Cornified protuberance of Fungiform Papillae | 2. Fungiform Papillae | 3. Filiform Papillae |
| 4. Cornified protuberance of Filiform Papillae  | 5. Cornified Layer    | 6. Granular Layer    |
| 7. Spinosium Layer                              | 8. Basal Layer        | 9. Lamina Propria    |
| 10. Gap of Papillae                             | 11. Nail Process      | 12. Vessel           |
| 13. Muscular Layer                              |                       |                      |

cover the front 2/3 of the dorsum linguae, anterior to the circumvallate papillae. The nerve inside a filiform papilla is an ordinary sensory nerve without taste buds and has no taste function.



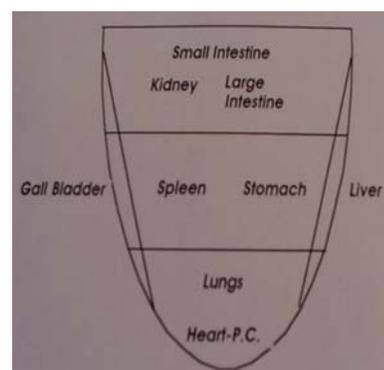
The fungiform papillae are sometimes referred to as “mushroom” papillae. These are fewer in number, but larger than the filiform papillae. The fungiform papillae contain nerve endings for the sense of taste and sometime taste buds can be observed. These papillae also have general sensory functions. Newborn babies have more fungiform papillae than adults.



**FUNGIFORM PAPILLAE**

The circumvallate papillae are the largest papillae; they are few and their numbers are constant. Generally, they are 7-9, but the number may vary from 4-16. They are arranged in a V-shaped sulcus terminalis, which separates the tongue body from the tongue root. On the interwall are many taste buds: small, oval bodies that stain light and which are scarce on the outer wall. The number of taste buds in each circumvallate papillae vary, but are estimated at around 250 per papilla.

The foliate papillae vary from 3-6; they are numerous plicae (folds), parallel to each other, have a deep sulcus, as their common boundary and are mainly situated on both side fringes of the posterior tongue. The epithelium on both sides of the foliate papillae contain taste buds, which do not exist in every papilla and are few in human beings. In most adults, the



glandular tissue in this foliate papillae area has degenerated to be replaced by adipose tissue and lymphoid tissue.

The tongue is primarily divided into three different levels. The first level being the anterior third of the tongue, the tip is commonly associated with the heart and pericardium. The next level between the tip and the middle third of the tongue is related to the lung. The middle third of the tongue is conjoined with the spleen and the stomach, sometimes considering the stomach to be on the left and the spleen on the right (although there are various opinions on this). The posterior third of the tongue, or root of the tongue, is coupled with the kidneys, small intestines, large intestines and occasionally with the liver. The left side of the tongue is associated with the liver and the right side with the gall bladder.

It is important to note that various organs mentioned should not be considered exactly the same as in the strict anatomical or physiological aspect as denoted in western medical literature. Traditional Chinese Medicine [TCM] observes not only the anatomy, but also the energetic countenance of a person --in other words, the channels of Qi [Chi] or Vital Force or the Acupuncture meridians. Also, the physiological appearance may differ as in this example. The liver has the following functions in TCM: 1) Storing the blood; 2) Maintaining the patency for the flow of Qi or Vital Force [ The emotion of anger especially affects the liver and interferes with the free flow of Qi]; 3) Controls the tendons [nourishes them with blood and Qi]; 4) Opening into the eye {the liver energetic channel communicates with the eye [perhaps, that is the main reason why toxic materials to the liver, such as alcohol cause “red” eye]}.

I think this information is enough to clarify the fact that one must be careful drawing direct relationships between TCM and western medicine, either homeopathic or conventional. It is not the purpose of this paper to delve

deeply into TCM, as interesting as this wonderful medical paradigm may be.

Now let us pursue some direct correlations between the tongue and homeopathic medicine. The coating on the tongue is primarily allied with the stomach and digestive system and “external pathogenic factors” [ i.e. “colds,” upper respiratory infections, influenza, seasons, cold, heat, damp, windy, foggy, etc.]. Therefore, one would look more closely at remedies which affect commonly these areas. The following will be some of the most important types of coverings or discolorations: white, yellow, brown, black and gray. There may be combinations of these colors along with various adjectives such as: moist, dry, slippery, dirty, slimy, shiny, thick, thin, striped, patchy, geographic, rooted, superficial or floating and, of course, greasy. The distribution of these strata are also consequential, such as: anterior, middle, posterior, unilateral, bilateral, side or sides, tip or vertex.

When examining the tongue proper, one should be aware that the perspective evolves primarily the internal organs and associated energy channels in general [not just the stomach and digestion] with appropriate consideration for the relative part of tongue.

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### **What is HOMEOPATHY?**

Approximately 200 years ago the German physician Samuel Hahnemann coined the word Homeopathy which comes from the Greek: “Homois”—Like and “Pathos”—Pain. Or simply “Like cures Like” or the law of Similars. In other words, homeopathic remedies stimulate the immune system [energies and substances] to work harder on the various symptoms an ailment manifests. Therefore, the body and its energies naturally try to rid themselves of any imbalance.

There are at two analogous approaches in conventional medicine with this strategy: Allergy “shots” [Desensitization] and immunizations.

However, homeopathy considers the whole person—the mental, emotional, physical *etc.*—and uses primarily natural substances [about 1,500].

**HERING’S LAWS OF CURE**

An illness is progressing to cure when it:

- 1] Moves from a more important organ to a less important organ.
- 2] Goes from the inside—out.
- 3] Travels from above to below.
- 4] Advances in the reverse order of appearance.

It should also be stress that discharge from any orifice could be another way in the body eliminates disease or toxins [Inside--Out].

**OUTLINE OF 4<sup>TH</sup> IRIDOLGY CONGRESS 2003**  
**4 Cases of Tongue and Irises Reflecting the Homeopathic Medicine**

Homeopathic Medicine	Irises	Tongue
NUX VOMICA	<ul style="list-style-type: none"> <li>• Contraction Furrows</li> <li>• Ferrum Chromatose Accumulations</li> </ul>	<ul style="list-style-type: none"> <li>• Posterior Yellowish/White Coating</li> <li>• Cracks in Center</li> </ul>
MERCURIUS VIVUS	<ul style="list-style-type: none"> <li>• Lo RITO’S IPB luetic</li> </ul>	<ul style="list-style-type: none"> <li>• Swollen with Teeth Marks</li> </ul>

		<ul style="list-style-type: none"> <li>• Yellowish/White Greasy Coat</li> </ul>
TUBERCULINUM	<ul style="list-style-type: none"> <li>• Trabecular Weakness in Lung and Kidney Areas</li> <li>• Deep Contraction Furrow in Lung Area</li> <li>• Toxic Pigmentation</li> <li>• Tophi</li> </ul>	<ul style="list-style-type: none"> <li>• Sub-lingual dilation of Veins</li> <li>• White Coating</li> <li>• Cracks in Tip and Center</li> </ul>
SULPHUR	<ul style="list-style-type: none"> <li>• Toxic Yellowish/Brown Pigment</li> </ul>	<ul style="list-style-type: none"> <li>• Red Tip</li> <li>• Thick Whitish Coating</li> </ul>