

# The Meaning of "Natural Medicine"

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At a time when there is much resistance to school medicine the obvious alternative is what is called "natural medicine", but opinions differ as to what that means.

A popular version has it that "natural medicine" is one which relies entirely on drugs made from "natural", usually taken to mean botanical, sources, as if they were more life-enhancing and/or efficacious than drugs made from non-natural sources. But this leads to confusion. Drugs from botanical sources can be virulent poisons (aconite, belladonna) or highly addictive (cocaine, heroin). Are chemicals found in nature (sulphur, arsenic, antimony) considered "natural" even though they are not of botanical origin? And why should drugs made from petrochemical substances be regarded as "unnatural"? Oil is found in nature, after all.

A better approach to the meaning of "natural" would be to proceed from an analysis of the patient, rather than of the medicinal substance used for treatment. Is it possible to define a "natural" way of healing, a "natural" way of bringing the patient from sickness to health?

In fact, it is possible, and this brings us to what is called "Hippocratic Medicine".

The Hippocratic Corpus sets out a dynamic understanding of the relationship between the patient and his environment, describing how the individual becomes ill and how he must be cured if the cure is to be genuine and long-lasting. This doctrine perceives illness as a struggle between the causal factor (which is never precisely defined) and the host organism. The causal factor gets a foothold within the organism, described as a "rawness". The organism attempts to overcome this "rawness" by cooking (Latin: *coctio*; Greek: *pepsis*; English: "coction") it and in that way making it palatable. Fever and inflammation, in particular, are signs that the rawness is being cooked.

The struggle between the organism and the rawness in due course reaches a "crisis" which can have one of three outcomes: (1) cure, (2) death, or (3) relapse followed by the development of a chronic condition. The sign of a cure is evacuation of the "cooked" and "digested" rawness, in the form of diarrhea, hemorrhage, urination, or sweat. If these do not occur, and the patient does not die, it signifies that the "coction" was incomplete, and it is to be feared that the patient will develop a chronic condition.

Since Hippocratic Medicine presupposes that the organism is a reactive entity, i.e., alive and kicking at all times, this medicine is vitalist.

It is to be noted that all the symptoms: fever, inflammation, diarrhea, hemorrhage, and the like, are signs of the host organism's struggle with the "rawness" at the root of the disease. The physician must take care not to undermine or suppress these symptoms with his remedies, but rather to support and even intensify them. Hence these remedies were known as "promoting" or "favoring" remedies (Latin: *secunda remedia*).

Some examples of these *secunda remedia* would be:

- treating coughs with medicines which intensify the cough;
- treating nausea with emetics;
- treating diarrhea with laxatives and enemas;
- treating coughs with expectorants;
- giving hot wine or hot water to patients with a fever;
- putting patients with chills into a cold bath;
- tightly bandaging an emaciated limb;
- treating enlarged spleen with ox spleen;
- extracting splinters using a poultice made of a splintery reed;
- boiling scorpions in oil and using this to treat scorpion stings;
- treating an ear infection infested with maggots by applying oil in which maggots have been boiled, etc. etc.

When the "promoting remedies" were used to help the patient through the stages of his illness, achieving coction, crisis, and evacuation, and recovering without any relapse into

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a chronic condition, the patient was thought to have been cured "naturally".

Now, of course, none of us today would want to be treated in this way, but the underlying philosophy has been found applicable at many periods of medical history since the fifth century B.C., and it is still applicable today.

Its first reincarnation was in the therapeutic doctrine of the Empirical School or Sect ("Empirical" is from the Greek word for "experience"), which flourished in Greece, Alexandria, and Rome at the beginning of the Christian era. The Hippocratic doctrine has been known since that time as the Empirical medical doctrine.

The second was in the writings of Paracelsus (Theophrastus Bombast von Hohenheim) who lived from 1490 to 1541.

It was again resurrected by Thomas Sydenham (1624-1689), known as the "English Hippocrates", and his follower, the Italian, Giorgio Baglivi (1668-1707). In Germany it came back to life in the writings of Georg Ernst Stahl (1660-1734), who was a contemporary of both Sydenham and Baglivi. And from Stahl it went to France where it was the official doctrine of the School of Montpellier until the late nineteenth century. In Paris it was also espoused by such members of the nineteenth-century clinical school as Pierre Jean-Georges Cabanis, Philippe Pinel (known as the "French Hippocrates"), Rene Laennec, and Armand Trousseau.

In Germany in the late nineteenth century it was promulgated by Emil von Behring.

All of these thinkers adopted the Empirical principles as part of a conscious rejection of the alternative - known as "school medicine" or "Rationalism".

The concept of "Rationalist Medicine" also comes down to us from the early Christian era because there was a sect or school in the ancient world known as Rationalists (Latin: *rationales*) from the word *ratio*, meaning "reason" or "logic". This was also the doctrine of Galen, and it remains the doctrine of school medicine, so-called "scientific medicine", today.

Today's school medicine is also called "allopathic medicine", an expression which was coined by the man who was perhaps the greatest of thinkers in the Hippocratic-Empirical tradition, namely, Samuel Hahnemann (1756-

1843), the founder and developer of homeopathy.

Homeopathy was a major doctrinal development of Hippocratic medicine and is one of the best paradigms of what could be called "natural medicine". However, it is not the only one, as we will see.

Homeopathy has particularly developed two aspects of the Empirical-Hippocratic tradition: the concept of the "promoting medicine" and that of the stages of disease.

The idea of the "promoting medicine" was transformed into the "similar medicine" by Paracelsus. He, and others since him, have interpreted "similarity" in different ways which, for lack of time, we will not discuss here (this, and much else besides, can be found in the four volumes of my *Divided Legacy: A History of the Schism in Medical Thought*). But Hahnemann had a new interpretation of this ancient idea. By his discovery of the "proving", meaning the administration of a medicinal substance to healthy people in order to define its healing potential, he revolutionized the concept of similarity.

Hahnemann concluded that the medicine which would heal a patient with a given set of symptoms was the one which produced the same, or a "very similar", set of symptoms if administered to a healthy person.

The technique of giving medicines to healthy people to ascertain their healing powers was called, in English, the "proving" -from the German *Pruefung* ("test" or "trial"). The people engaged in this exercise were called "provers", and the pattern of symptoms developed thereby was also called the "proving" of the medicine.

It is obvious that prescribing medicines on the basis of "similarity" is a refinement of the Hippocratic "promoting" remedy. Both are based upon the assumption that the patient's symptoms represent the signs of the struggle against disease. The symptoms are positive signs, which need to be intensified, not suppressed or eliminated. And the medicine which evokes a given pattern of symptoms in the healthy person will, in the sick one, reinforce the very pattern of symptoms which that individual is already manifesting. In other words, it reinforces the effort of that individual's vital force to overcome the (still undefined) disease cause, the "rawness" within him. If it means enhancing the effort of the

patient's vitality to cope with and overcome the morbid cause, treating with similars must be considered a form of "natural medicine". Today this technique is described by homeopaths as one of selective reinforcement or strengthening of the immune system.

The origin of the medicinal substance is of no significance. Whether botanical, mineral, or animal, whether found in nature or manufactured in a petrochemical plant, every substance in the world has its own unique signature in the sense that each evokes a specific set of symptoms in the healthy individual, a set of symptoms which is peculiar to this substance and to no other. Each substance in nature has its own place in the system of treating with similars.

But the naturalness of homeopathy (and of several other contemporary systems) does not stop there. A second feature is its elaboration and extension of the Hippocratic stages of disease. Known as the "Law of Cure", or sometimes "Hering's Law" in honor of Constantine Hering (1800-1880), the "Father of American Homeopathy" (although he was a German immigrant), this Law holds that diseases pass through certain defined states and that for a true cure to take place the disease must progress backwards through these same stages.

The Law of Cure applies especially to the movement from an acute to a chronic disease and to the cure of chronic disease, but it is applicable to some degree to acute disease as well. According to this Law, as an illness progresses from an acute to a chronic form, the symptoms move from the outside of the body to the inside, from the lower parts of the body to the upper ones, and from the less vital organs to the more vital. If the cure is accomplished correctly, the symptoms will then move from the inside of the body to the outside (meaning, especially, to the skin), from the upper parts of the body to the lower, and from the more vital organs to the less vital. Furthermore, the symptoms disappear in the reverse order of their appearance.

While this Law is not completely fulfilled in every case, it is seen to apply, in whole or in part, to a remarkable number, and the homeopathic physician will often use it as a guide to ensure that the cure is proceeding along the correct lines.

A violation of this law can readily convert an

acute condition into a chronic one, or make an existing chronic condition incurable.

The following case illustrating the Law of Cure was reported in an American homeopathic journal. The patient was a three-year old girl with asthma and hair loss. The physician found that at the age of two weeks a rash on her cheeks had been treated with an ointment, whereupon it spread all over her body and was treated with further ointments until, by the age of six months she had developed asthma and lost most of her hair. Under homeopathic treatment the skin remained eczematous, but hair started growing back on her head; then the asthma attacks, while continuing to be brought on by allergies to meat and poultry, diminished in severity, although the skin rash remained unchanged. After a year of treatment the asthma attacks ceased, and this was followed by a clearing of the skin.

The homeopathic literature contains thousands of cases illustrating all aspects of the Law of Cure.

You are perhaps thinking that the "similar" medicine and the Law of Cure are peculiarly homeopathic phenomena, but they are not. The "similar" remedy is found in allopathy as well. And the Law of Cure is encountered in both acupuncture and chiropractic (where it is recognized) as well as in allopathic practice (where the physician does not know quite what to make of it).

Let us look for a moment at the use of the "similar" remedy in allopathy.

This therapeutic system makes very common use of medicinal substance which operate by virtue of similarity and which, in many cases, were first introduced into practice by homeopathy. Since I have written on this extensively elsewhere (see my *Homeopathic Science and Modern Medicine* and *Homeopathic Influences in Nineteenth-Century Allopathic Therapeutics*), I will just make very brief mention of some of them here: *Colchicum* for gout; digitalis in certain heart conditions (very slow pulse - in contrast to the allopathic use of digitalis to slow down a rapid heartbeat); nitroglycerine in angina pectoris (introduced by Constantine Hering); gold salts for rheumatoid arthritis; *Veratrum viride* for hypertension; ergot of rye (*Secale cornutum*) for Raynaud's Disease and other peripheral vascular diseases, also for migraine headaches; honey-bee

venom for arthritis and rheumatism, edema and nephritis. This list could be extended indefinitely, as there are dozens of medicines used in allopathy whose "mechanism of action" can be explained only in terms of the Law of Similars.

Perhaps the most significant application of similars in allopathy, however, is in the disciplines of immunology and allergy. This vast area can only be mentioned here, but it is worth noting that Emil von Behring, who discovered antitoxin treatment for diphtheria and tetanus and is the major figure after Pasteur in the development of immunology, considered himself a Hippocratic and on many occasions professed great admiration for homeopathy. In fact, he held preventive and therapeutic vaccination (i.e., antitoxin treatment) to be applications of Hahnemann's Law of Similars.

No one will doubt that preventive and therapeutic vaccines have been remarkably effective in reducing the incidence of many disease. And the other medicines I have mentioned above are among the longest-used and the most "reliable" known to allopathy. It could well be hazarded that the Law of Similars, without being applied systematically, is a mainstay of allopathic treatment today. That is because, in my opinion, these are "natural" modes of treatment and for that reason can readily withstand the test of time. Allopathic medicine, of course, also contains numerous modes of treatment which are not "natural" at all, but thoroughly "unnatural", but that is another topic.

As I mentioned, the Law of Cure also functions outside homeopathy, specifically, in acupuncture, chiropractic, and even in allopathy; in the first two disciplines, the manifestations of the Law of Cure are welcome; in allopathy they are usually seen as confounding variables in treatment.

A typical case of the Law of Cure in acupuncture would be the following - described to me by Robert Duggan, a well-known acupuncturist in Columbia, Maryland. It was complicated by the patient's insistence on seeing her dermatologist at the same time. She was a 34-year-old woman with severe colitis. Her history revealed allergies to metals, dating from early childhood, and the erythema had been treated allopathically with cortisone.

Duggan states: "Acupuncture treatment commenced with the patient still taking the

cortisone, but her skin promptly broke out in a rash, and her personality - which had been tense, hypersensitive, and edgy - showed a notable improvement. Her allopathic physician prescribed another skin ointment, whereupon the skin inflammation subsided, but her colitis broke out with renewed severity, and her personality again deteriorated. Resumption of acupuncture treatment caused the skin again to develop a rash, while the personality improved. The allopath was induced to stop giving skin ointments, while acupuncture treatment continued. Subsequently the colitis disappeared, followed by the skin condition."

Here we see a case where the symptoms were trying to move from the inside out (colon to skin), and from more vital organ to less vital (colon to skin, brain to skin) but were blocked and suppressed by the use of cortisone. This case of course resembles the homeopathic case mentioned a moment ago. There suppression of skin symptoms led to asthma, here to colitis.

The Law of Cure has been particularly developed in chiropractic, where it is called "retracing". A textbook from this discipline observes:

"From the original concussion of forces which produces a nerve-impinging subluxation to the stage of chronic disease with which the patient usually approaches the chiropractor for relief, disease develops by a series of gradual steps. Successive changes take place from time to time in the degree of subluxation as it is augmented by further jars, strains, etc. ... Perhaps the first effect of the bad subluxation is irritation of a nerve and acute functional disturbance such as pain, fever, etc. The later effect may be paralysis and its attendant train of evils.

When the chiropractor begins adjustment, he does not at once return the long-displaced and misshapen vertebra to its normal position. He merely tends to do so, his adjustments making slight and gradual changes from the abnormal back to the normal.

Thus it is that the subluxation passes back in reverse order through the successive stages of its development, following a process which may be called involution of the subluxation. At the same time the morbid process resulting from the subluxation tends to retrace its steps, passing in reverse order through the stages by which it developed. Pains which have not

been felt for years may unaccountably return under the reawakening of the long dormant nerves. Headache, long absent but once a prominent feature of the disease may again make its appearance. The patient feels worse. ... In many cases it is possible by securing an accurate history and by careful observation of the patient's progress to observe a definite reappearance, in reverse order, of every important event in the history of the disease. For instance, if the patient has at one time had a severe fever, perhaps lasting many weeks, and has later developed a chronic weakness marking the increase in degree of subluxation, the fever may reappear during adjustments, last a day or two, and disappear forever, having been corrected beyond that stage." The Law of Cure is also found in allopathic practice, even though unrecognized as such. It should be noted in passing that one of the many shortcomings of school medicine is its inability to define the relations among diseased states, even though this is an essential precondition for the treatment of any chronic disease, and many acute ones besides.

Presumably for socio-economic reasons, allopathy prefers to view the condition of each patient coming through the office door as a discrete event, unrelated to what went before or will come after. Accepting a necessary connection among diseased states would complicate diagnosis and treatment, requiring the physician to incorporate a mass of data which can otherwise be left out of the calculation.

In allopathy as well, the workings of the Law of Cure are manifested most particularly in the relationship between the skin and internal diseases.

Observers throughout history have noted, for instance, that erysipelas, an inflammation of the skin and subcutaneous tissue, can play a leading role in curing such conditions as pulmonary tuberculosis, local cutaneous syphilitic lesions, chronic gonorrhea, or gonorrheal orchitis and epididymitis. Anton Chekhov, who was a physician as well as one of Russia's greatest writers, told a friend in 1890: "It has long been noted that the growth of malignant tumors halts for a while when [erysipelas] is present."

This led to adoption, in the nineteenth century, of the idea of provoking an inflammation of the

skin to relieve distress of some internal organ. In 1878 Ludwig Meyer treated progressive paralysis by rubbing a salve of tartar emetic into the scalp and observed some "encouraging successes". But then, in 1883, Friedrich Fehleisen treated lupus and inoperable tumors by injecting erysipelas, provoking a severe skin inflammation which in many cases caused the tumor to recede and the patient to be cured.

This technique for treating tumors and cancers was introduced in the United States by William Coley in the 1890s. He used the "toxic product" of erysipelas obligingly supplied by Robert Koch, injecting it into a man with tumors of the tonsils and the neck and found that they disappeared. Between 1891 and 1893 he treated ten cases of inoperable cancer with erysipelatos matter and tabulated another seventeen cases of "spontaneous remission" following natural erysipelas infection.

He published his first paper on this in 1893 and many more in subsequent years. Ultimately he treated 894 cases with his "toxins", getting far better results than any other technique in use for treating sarcoma, cancers of the bone and connective tissue, breast cancer, Hodgkin's disease, ovarian cancer, melanoma, and others.

A vice-president of the Sloan-Kettering Institute wrote in 1973: "Those who have scrutinized Dr. Coley's records have little doubt that the bacterial products that came to be known as Coley's Toxins were in some instances highly effective." Despite this testimonial, and despite Coley's many cures, the American Cancer Society for many years considered his erysipelas toxins to be "quack" remedies, and physicians were persecuted for using them.

A more general approach to treatment by provoking inflammation was the "fever therapy" popularized in the late nineteenth century by Julius Wagner-Jauregg. He experimented with various procedures, such as a mixture of Tuberculin and mercury inunctions in paralyzes, typhus and cholera vaccines combined with Salvarsan in paralyzes, and finally the treatment of syphilis and its consequences with malaria for which he was awarded the Nobel Prize in 1927.

The relationship between the skin and internal pathology is significant in all diseases. Louis Tuft wrote in 1931:

"In such acute exanthematous diseases as

measles, scarlet fever, smallpox, or chicken-pox, the presence of a marked skin eruption has always been considered of good prognostic import, and not infrequently, when the eruption was scanty, measures were used to bring it out more strongly ... in syphilis it is well known that patients with marked primary or secondary skin manifestations practically never develop nervous or severe visceral involvement and that an arsphenamine dermatitis always appears to offer a favorable prognosis in patients with visceral syphilis. Finally, it is a clinical fact that patients with skin tuberculosis rarely develop pulmonary involvement ... the skin seems to have a specific biologic function, designed to protect the internal organs from disease agents ..."

Hans Zinsser in 1939 seconded Tuft's remarks and added that "the skin may possess the function of removing toxic substances introduced into the body and suffers injury as a result of this capacity of fixing the circulating poisons. This accounts for a variety of dermal reactions such as toxic erythema, urticaria, etc."

Tuft regarded this protective function as immunologically mediated: "possibly by the formation of immune antibodies excited by strong specific skin stimulation." But there is no need to restrict the skin's function in diseased states merely to the elaboration of antibodies or some other immunologic activity. The Law of Cure, which regards the skin as the final channel through which internal toxins are voided outside the body, thereby protecting the more important internal organs, is a more meaningful and comprehensive interpretation of the observed phenomena.

In any case, there is abundant evidence for a dynamic relationship between the skin and the internal organs of the body.

Getting away now from the skin, allopathy can also provide evidence for the Law of Cure in the relationships among internal organs.

A good example of how pathology can move around the body, passing from less vital organs to more vital ones, is the inverse relationship in rheumatic fever between the severity of joint symptoms and the occurrence of heart disease. Rheumatic fever is likely to "bite the heart when it licks the joints, and to lick the heart when it bites the joints". The patients with the most severe arthritis often have no carditis, while those with carditis often have no articular symptoms.

That being the case, medicinal intervention to alleviate joint pains in rheumatic fever will often render the cardiac condition worse than it was. Rheumatic fever is treated with antiinflammatory drugs which then yield cardiovascular reactions such as: hypertension, tachycardia, chest pains, arrhythmias, and palpitations.

The literature on rheumatoid arthritis and rheumatic fever contains much anecdotal information on patients developing cardiac symptoms after long periods of treatment with corticosteroids and other suppressive drugs. Almost one half of patients who die with rheumatoid arthritis are found on post-mortem examination to have cardiac lesions.

Although the allopathic literature is not yet sensitized to a causal relationship between suppressive anti-inflammatory treatment of rheumatoid arthritis and the onset of cardiac symptoms, there can be no doubt that such a relationship exists. The ordinary treatment of arthritis today with anti-inflammatory drugs is inexorably worsening those patients' heart conditions.

Hering's Law holds that the most extreme form of suppression is conversion of a physical disease into a mental one. The brain, after all, is (1) the most vital organ, (2) well inside the body, and (3) at the top of the body. Hence, in the light of the Law of Cure, it is the final refuge of disease and the first organ that must be cured if any cure is to take place.

G. H. Savage, in 1884, described the alternation of asthma and insanity. When the patient was having asthma, the insanity symptoms disappeared, and vice-versa - designated "alternation of the neurosis".

Wagner-Jauregg observed that the mental state of the insane often improved after falling ill with a febrile disease such as typhus or malaria. He treated idiocy, melancholy, mania, "acute and chronic insanity", epilepsy with mental disturbance, dementia paralytica, and others with erysipelas and also with Koch's Tuberculin.

It is observed today that when epileptic patients are given seizure medication, concomitant mental and behavioral symptoms are often worsened, leading to an increase in irritability and dyscontrol. Authorities speak of "an equivalence between seizures and psychosis which states that when the seizures are

controlled, the psychosis becomes worse, and vice versa." Schizophreniform psychosis, in particular, is known to occur most often when seizures are well controlled. Hence it is often very difficult to "manage" these patients.

Suppression can come about not only through medicinal intervention but also through surgical, as in the reported case of a man with peptic ulcer who was: "dramatically cured by gastrectomy and for the first time in years was free of pain. Surprisingly, instead of becoming happy he became depressed and attempted suicide. It became evident that his stomach symptoms had served as a crutch or excuse to spare him from stress or unpleasant situations."

If mental illness represents an advanced stage of physical illness, it should be improved when converted into physical illness. Thus children suffering from the post-en-cephalitic syndrome with associated mental and behavioral disorders can manifest improvement in their agitated behavior and in the incidence of convulsions with appearance of symptoms of Parkinsonianism.

Constantine von Economo urged the use of "pyretic therapy" for victims of epidemic encephalitis in the 1920s and 1930s. Observations since that time bear out the importance of fever and fever therapy in these conditions. Autism, which is a post-encephalitic state (often, in my view, caused by childhood vaccinations) is also seen to benefit from a high fever: the mother of an autistic boy will say, for instance, "our autistic son is never so close to normal as on the few occasions in his life when he has high fever".

There is in allopathy today a general feeling that physical illnesses moderate mental ones. A 1977 review article of 75 studies of schizophrenia and its amelioration by intercurrent physical illness concluded that: "there is a vast and intriguing literature that strongly supports that such a phenomenon exists, at least for certain patients, and merits further evaluation".

The occurrence of mental symptoms as part of the "side effects" of a large part of the drugs used in modern practice may be further evidence that suppression of physical symptoms converts them into mental ones. Taking such a thoroughly mundane example as facial acne, it has been found that one of the medicines commonly used for this causes central nervous system symptoms such as seizures, emotional instability, dizziness,

nervousness, depression, and drowsiness.

One aspect of the Law of Cure which has been difficult to substantiate from the allopathic literature is that symptoms disappear during cure in the reverse order of their appearance. The only piece of evidence I have been able to find is a discussion in a 1989 Russian article, of the treatment, using autogenic therapy, of Parkinsonianism and other neurological conditions. The authors note: there was "a significant overall reduction in rigidity, hypokinesia, and tremor... the latest symptoms were the ones to regress most markedly, while those from the earlier stages of the disease regressed much less."

What I have tried to show in this lecture is that a true "natural medicine" exists, especially in disciplines such as homeopathy, chiropractic, and acupuncture which are considered to be somewhat marginal. In its structure this "natural medicine" is identical with Hippocratic medicine. Bits and pieces of this natural medicine can also be encountered in allopathy, especially treatment with similars and manifestations of the Law of Cure.

This natural, or Hippocratic, medicine is today playing the role that it has played periodically in the history of medicine, namely, that of recalling school medicine to its roots in history and in science when it has departed too far from a reasonable understanding of the meaning of sickness and health, and of the ways to convert one into the other.

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