

ANOTHER LOOK AT THE PRINCIPLES OF HOMOEOPATHY

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Mr. Chairman, Ladies and Gentlemen,

If there is one fact that is clear from modern medicine it is that we need constantly to re-assess the principles on which it is founded. In all branches of medical work we are recurrently presented with data that prove the need for a continuing review of ideas about human function, disease and the therapies we use. So often the data regarded in one decade as truth, in the next become mere historical opinion. And Homoeopathy is no exception. In some ways it might appear that the concepts and prescriptions of Homoeopathy change less than those in many other branches of medicine. It is true that the vast majority of the remedies we prescribe have been used in similar ways for over a hundred years. In day-to-day practice this fact is often a help when people coming for this form of treatment ask if it has been adequately tested for side effects. To be able to tell them that such medicines have been used for over a century with no evidence of major side effects is re-assuring on both sides. But in many other respects Homoeopathy has developed in ways similar to other branches of medicine, with frequent revisions of the materia medica and therapeutic methods. At the same time there has been a continuing discussion of how the remedies work. With new ideas constantly arising about human dynamics in health and disease, it is obvious that we need continually to re-assess the therapeutic techniques we use.

In Homoeopathy, as in any other branch of medicine, there is therefore an on-going revision of the principles on which it is founded. It means that we build on insights previously clarified, in hopes of developing them further. This paper is an attempt to continue such a re-assessment and in it we will therefore look again at three cardinal principles in Homoeopathy, re-examining them in relation to some of the recent insights into human dynamics.

The three principles that we will consider are, first, that the homoeopathic prescription depends on an holistic assessment of the person seeking treatment. That is, we try to see the person as a whole and any disease process in its context. The second principle is that we then aim to correlate this picture with a medicine which would itself be able to produce in another person a similar symptomatology. And third, we prescribe this agent in the smallest amount required to produce an optimum therapeutic effect.

First then, the holistic approach. The aim here is to make a clear assessment of as many aspects as possible in the disease picture we are asked to treat. In order to do this, we aim to assess both the changes clearly associated with the disease and the processes operant in the person as a whole. This approach is logically preferable to the fragmentary attitude into which it is

easy to lapse in any medical speciality. Science has clearly shown that all matter is energetic and that the human body is therefore an energy continuum. If we pursue the implications of such ideas we have to say that the processes operant in the human body are a result of constant interfunction between all its aspects. We cannot separate one organ from another or assume that its connections are merely anatomical. The implications of modern physics are that all aspects of the human organism are energetic, with an inherent interfunction that does not depend merely on gross anatomical structures. It means that the linkages of discrete organs are secondary to the immediate interfunction of the interpenetrating energies that comprise the human body. The energetic nature of matter implies that apparently gross organs are compactions of energies operant in thoughts and feelings as well as in physical processes and that they are products of interfunction, not the cause. It follows therefore that our intellectual and affective processes are constantly influencing our physical functions in both health and disease.

Such interfunction is consciously utilized in bio-feedback techniques when a patient learns to control anxiety or other emotional reactions by particular types of mental imagery and body relaxation. Such interfunction is of cardinal importance in relation to any assessment of disease, since it means that these will only approach adequacy if they include reference to the whole picture presented. Hence the value of the holistic approach in Homoeopathy.

Throughout the history of contemporary homoeopathic medicine it has been traditional to work towards such a holistic assessment by classifying symptoms as 'mentals, generals and particulars'. The local effects of disease have been called the 'particulars', the intellectual and affective aspects of the picture, the 'mentals and generals'. These terms have usefully reminded us to look for details of both the localized effects of a disease and the wider picture in relation to which they occur. But the use of language is constantly changing, and for many of us these terms now appear outmoded and imprecise. We are therefore looking for an alternative way to classify symptoms and facilitate a holistic assessment of a disease process. At present the most useful way seems to be to use the terminology employed in many schools of psychology, namely the terms relating to 'three-part man'. Most of the diverse lines of thought in psychology seem to agree that we are concerned with the interfunction in human beings of three modalities of consciousness, namely psychical, emotional and physical processes. It is generally agreed that human behaviour in health or disease is largely a result of the interaction between these three modalities and their response to environmental factors. This three-part analysis readily lends itself to the assessment we formulate in homoeopathic prescribing.

The history-taking begins in the manner familiar to all types of medicine, with a detailed account of the presenting symptoms. Here we can readily apply the threefold classification and look for symptoms that are physically, affectively or emotionally stressed. A similar approach can again be used when

we assess the background state which probably includes data that the patient regards as his or her norm and irrelevant to the present disease. But as we said before, the homoeopathic prescription depends on details both of the disease and the activity in relation to which it occurs. When a homoeopathic doctor is forming an assessment of either local or background features in a disease, questions are commonly asked which would be less familiar in other departments of medicine. For instance, in relation to the intellectual processes we want to know not only about academic interests, the ease or difficulty in concentration, clarity of thought etc., but we also like to know how these respond to such variables as the time of day, the temperature, or the company. In relation to the affective responses, we like to know about a person's preference for solitude or company, for different forms of weather, for items of diet and how their emotional responses vary throughout the day or night. When we assess the physical aspects of the process, in addition to the appropriate medical examination we note the body-build, chilliness or warmth, the degree of sweating, the state of the skin, the bowel habits, in short any indication of habitual features continuing or new ones emerging. As with any medical assessment we note the history of previous disorders and vaccinations. Homoeopathic doctors are sometimes accused of spending so much time and effort assessing the wider aspects of a disease picture that they ignore local pathology. But this accusation is unfounded. A homoeopathic doctor is as interested as any other in the signs and symptoms of a disease and any path. lab. data, x-rays etc., that can help to clarify what is going on. Homoeopaths do not ignore pathology, they simply try to see it in its context.

Such a holistic approach is the ideal. But we do not live in an ideal world and like other doctors we frequently have to learn to look for the salient features in a picture and base our prescription on them. But even if we are prescribing quickly on the prominent features in a disease process, we are still able to observe signs of general demeanour etc. and let these contribute to our prescription. For instance when we are treating someone for cystitis, whilst assessing the local symptoms we can also form an impression of their personality pattern. Even if two people have similar local symptoms, if one is warm, gentle, and craves sympathy, and the other is chilly, irritable and loathes sympathy, they will probably be given different remedies. Such features can often be assessed without direct questioning and can often be further indicators of the correct treatment. Or, taking another common example we are often asked to see children with eczema. Here we make an assessment of the skin changes, as would any doctor, but in addition we look to see if the child is chubby or slim, warm or chilly, perspiring or relatively dry, yielding or argumentative. Treating eczema also illustrates another feature in homoeopathic history-taking. Not uncommonly we find that the onset coincided with a vaccination. Even if the eczema appears pathologically unrelated to this in Homoeopathy, it is probable that we would treat the after-effects of the vaccine as well as prescribing for the specific skin changes now presented.

The holistic approach in Homoeopathy is closely linked with the second principle that we will now consider, namely the choice of the remedy. Homoeopathic prescribing is based on the application of the second principle in Homoeopathy, that is the law of similars. Although this principle is said to have been referred to by Hippocrates and was written about by Paracelsus, it was only with the life and work of Samuel Hahnemann that it became incorporated into a widely used therapeutic system. Hahnemann was a German doctor born in 1755. In the course of his work he found that cinchona bark, a substance used to treat malaria, if taken by healthy volunteers would produce symptoms similar to those that in other circumstances it would treat. It was an illustration of the principle that what an agent can provoke, it can also relieve. The initial discovery led Hahnemann on to further research of this principle and later into playing a major part in structuring contemporary Homoeopathy. The principle became known as the 'law of similars' and led Hahnemann to state *similia similibus curentur*, or, as it is generally translated today, let likes be treated by likes. In practice it means that the agent prescribed in Homoeopathy is one that in other circumstances could provoke the symptoms it is now required to treat. For example, a remedy widely used in Homoeopathy is Belladonna, an extract of the deadly nightshade plant. If a child eats the berries of the plant as is well known he quickly becomes hot, thirsty, flushed, shows a bounding pulse and in later stages becomes delirious. If a child with an acute fever simulating this appearance is given homoeopathic Belladonna, an improvement is usually seen within minutes. It is a clear example of the application of the law of similars.

Some people would say that the ideal in Homoeopathy is to match all aspects of a disease process with symptoms that could be produced by one agent, and then prescribe this substance. Such a remedy is known in Homoeopathy as the 'similimum'. But as we said before, we do not live in an ideal world and such very close matching is not always possible. And neither is it always necessary. In many situations prescribing can be based on the salient features in the picture and matched with a remedy itself able to provoke them. Two particularly well known examples of this are Arnica and Chamomilla. Arnica is an excellent remedy for bruising from any cause and in people with widely differing temperaments. Whether bruising follows a fall, a dental extraction or surgery, homoeopathic Arnica will greatly facilitate healing, whatever the temperament and general behaviour patterns of the person. Similarly with Chamomilla. If a child is fractious from teething, homoeopathic Chamomilla usually improves the situation very quickly, whatever the body build and previous temperament of the child. But such prescribing, sometimes known as pathological or spot prescribing, is not the rule in Homoeopathy. It is often a help to patients and the staff in a busy clinic. But it is not a standard practice in Homoeopathy. The aim in homoeopathic prescribing is usually to assess both localized and general features in a disease process and then prescribe a remedy suited to the individual picture.

Another example will illustrate this. If two ladies come asking for homoeopathic treatment for premenstrual tension and one is chilly, averse from sympathy, sweating and tearful, she is highly likely to be given *Sepia*. But if the other one is also tearful, but warm, craving sympathy, and not prone to generalized sweating, she is probably going to be given *Pulsatilla*. The presenting symptoms sound similar and in some aspects the pictures are alike, but other aspects are different and indicate correspondingly different remedies.

The law of similars is fundamental to Homoeopathy. Whether we are prescribing on local symptoms, or on an assessment of the holistic picture, the selection of the remedy is based on the application of the law of similars. The same law is also basic to the establishment of the homoeopathic *materia medica*. If we look for a moment at the implications of the law of similars we will soon see that it means there are three cardinal methods of obtaining data for subsequent homoeopathic prescribing. First there are provings. If healthy volunteers take specified homoeopathic remedies for a sufficient length of time, they are likely to produce symptoms similar to those that if occurring in a disease could be treated by the same agent. We find in practice that in order to produce a proving a volunteer usually has to take an extremely dilute form of the agent under test daily for two to three weeks. Whereas if we are using the same remedy correctly for a disease already present, an improvement is usually seen within hours in acute and days in chronic conditions. The provings take much longer but still produce the required data.

The second source of data is toxicology. The application of the law of similars means that symptoms produced in accidental poisonings can indicate the type of disturbance that could be amenable to treatment by the toxic substance. Many homoeopathic medicines are extremely poisonous in their crude state but therapeutic in other situations. An often quoted example of this was a proving of *Lachesis*, the venom of the Surukuku snake. The story is told that a homoeopathic doctor was bitten when handling this snake. He became delirious and unconscious, but on regaining consciousness demanded from his wife an account of his symptoms after the bite, and this recorded became the first proving of *Lachesis*, a remedy now widely used for conditions as various as septic throats, cyanotic states and paranoia.

The third source of data comes from clinical experience when the *materia medica* established through provings and toxicology is applied. As in any branch of medicine, the clinical experience confirms or modifies the *materia medica*. In contemporary Homoeopathy data collected from these three sources are regularly used in the selection of the appropriate remedy for particular disease patterns.

Having assessed the picture presented, and attempted to correlate this with an agent able to simulate it, we come to the third principle in Homoeopathy which is concerned with the size of the dose, or perhaps we should say,

with the miniscule amount. When Hahnemann began pursuing the therapeutic effect of similars he found at first that severe aggravations sometimes occurred if he used crude amounts of the agent required. But he then found that reducing the size of the dose diminished the aggravations but did not detract from the therapeutic benefit. And the dilutions were not just halves, or quarters; they were taken beyond the point where molecular quantities are recognized. Hahnemann had studied chemistry as well as medicine and the dual training undoubtedly helped him pursue the research with remedies diluted to a very high degree. The strength with which Hahnemann is said to have done most of his work is the 30c potency. To explain these terms; the 'c' implies that one part of the original material has been diluted in a special manner with an alcohol water mixture of 99 parts. The 30 implies that this has been performed 30 times. It means that one part of the crude extract is diluted 1:100, and that one drop of this solution has been diluted another hundred times, and so on to 30 times. The result is that the 30c homoeopathic medicine has one part of the source material to the diluent whose parts number 1 with 60 noughts after it. The term potency was introduced by Hahnemann to refer to the highly active agent presented through this process.

The dilution is vast, but as practice shows presents a very effective therapeutic agent. It is paradoxical that the greater the dilution the more effective many of the remedies become. In practice it is generally found that accurate prescribing according to the whole picture is very helpful when high potency medicines are used. That is, medicines prepared in the 30c potency or even finer. The 30c is just a beginning in the high potencies. But in contrast to this, low potency prescribing is often very helpful when it is based on specific local pathology in a disease. For instance, if we are prescribing for a long standing depression we usually need to prescribe a remedy that suits the whole picture and give it in a highly potentized form. But if it is something like an acute bursitis, a low-potency medicine is often more effective.

But whether the remedy prescribed is in high or low potency, it is selected according to the law of similars and usually prescribed in very dilute form. Occasionally we use mother tinctures, the crude extract of the agent. But apart from this the lowest potency widely used is the 3x preparation. That is, a remedy prepared using a 1 in 10 dilution 3 times. It means that a 3x medicine has only one part of the original substance to 1,000 parts of the diluent.

The degree of dilution has at times provoked opposition to Homoeopathy by people who have found it difficult to accept that such a minute dose of a remedy, or one so small that no material substance can be demonstrated in an ordinary laboratory, can be therapeutically effective. Many have answered this by saying that it is an example of 'mind over matter', or that it is only effective because patients believe in it. Undoubtedly the expecta-

tions of a patient can help or hinder any prescription. But the action of homoeopathic medicine is frequently observed in babies and animals as well as adults, making it difficult to attribute the response solely to psychological factors. At least one goldfish has been resuscitated with homoeopathic Carbo. veg. In practice we see evidence of the therapeutic action of homoeopathic medicine throughout the whole spectrum of disease and we cannot discount it simply because we cannot understand it.

If we remember that the human body is an energetic complex with physical health or disease constantly maintained by the interfunction of differing modalities of energy, we may begin to consider a rationale for the therapeutic effect of homoeopathic medicine. When we consider the human organism in the terms of an energetic complex we can describe each organ, each cell or any structural component of the body as a specific energetic pattern. Every apparently substantial form is energy-involving in a particular manner to produce the apparent entity. Which means that relative health or disease is always a dynamic phenomenon resulting from the interaction of the energetic patterns in the body as a whole. Health implies that the various aspects are sufficiently co-ordinated to maintain a relatively balanced composite picture; disease implies lack of co-ordination, with various components deviating from the overall integration. Taking this a stage further it is logical to suggest that presenting the body with an energetic form able to re-align to itself the various components in a particular picture means that interfunction is restored. In other words, by presenting the body with an energetic form itself able to simulate the picture presented by a non-integrated pattern of disease, the body energies are aligned to the form presented in the remedy and integration is restored. We are suggesting therefore that the remedy acts as a template, mirroring and re-inforcing a unified pattern with similarities to that previously produced by the disease process.

Such ideas cannot at this stage be proved experimentally. But they are logically deducible. In Homoeopathy we are using energetic levels too fine for gross laboratory assessment, but we can approach the subject using logical deduction to support clinical observation. Again, by pursuing the subject rationally it is implied that the energetic levels presented in the potentized homoeopathic medicines are sufficiently finely resonant with the gross and less overt energies operant in the human organism to be able to influence their integration. We are prescribing immaterial energies to help towards a re-alignment of the correspondingly immaterial energies in the human organism. We know from our own experience that a thought process or emotional response can change our organic function. It has been suggested before by Hahnemann, and present research appears to support it, that the homoeopathic medicines work in a manner similar to the processes of thought and feeling. Perhaps this is a rationale for the therapeutic benefit we frequently observe.

In practice we know that a potentized remedy prescribed according to

the law of similars is able to help provoke healing in a wide range of conditions, both acute and chronic. In practice we know it works and does not produce troublesome side-effects. The precise details of how it works are yet a mystery. But this need not deter us from using Homoeopathy whilst we continue to research its dynamics. As with any experience, it is only evaluated thoroughly when it is brought into physicality. An idea or feeling has to be experienced physically for its effect to be realized. Homoeopathy is similar. The only effective way to evaluate it is to use it and then reflect on it in use.

So in practice we continue to use the similar remedy in the potentized form, prescribing it according to as much detail as possible in the symptoms of a disease process and research the results as they occur. Which means we will go on with the revisions and hopefully next year take another look at the principles of Homoeopathy.

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