

# THE HAHNEMANNIAN GLEANINGS

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## EDITORIAL

### ROLE OF HOMOEOPATHY IN AN EPIDEMIC

Many States in the country experienced outbreak of epidemics during the summer. West Bengal had an epidemic of gastroenteritis, Gujrat had an epidemic of viral B hepatitis and Bombay was almost threatened with it. Karnataka was also beginning to experience gastroenteritis. Health machineries of the States were taken by surprise and therefore they took some time to mount an effective counterattack. Causes of these epidemics are often many, but unhygienic conditions, poor drinking water facilities and faulty disposal of sewage are a few important ones. These often hinder the quick reversal of the situation.

For any epidemic unless the identity of exact causative organism is established no specific treatment is possible and it is quite natural that this process takes a long period. By that time the epidemic flares up causing grave concern.

The Health Directorates and the Advisorates should realise that there are other systems of medicine which can effectively participate in this task. But these Directorates purposely show ignorance and never tap the potential that alternative systems possess. Probably the ego comes in the way. Homoeopathic prophylaxis is known to be very effective in such cases. Unless the system's potential is utilised it can never demonstrate its full capacity; the therapeutic doses are absolutely harmless and effect cure very quickly. Even we, as homoeopaths, would be enlightened on the utility of our own medicines. Many of us fully exploit the same medicines in our practice. But as it is in a limited sphere it does not go to prove its validity unless the same is utilised on a large number of cases as in an epidemic. Also, on state level, the prophylactic qualities of a medicine would never be otherwise understood. We all know that the remedies would differ from place to place, epidemic to epidemic. The same yardstick of assessment cannot be applied since the philosophy is totally different. We request the authorities to shed the inhibitions and to invite the other systems like Homoeopathy to tackle the national problems. Remember that they are not only good but very cheap compared to the modern medical system.

West Bengal has a full fledged Directorate. We do not know what part it played during the epidemic in West Bengal. During the Bangladesh war in 1971 Homoeopathy was claimed to have been utilised to counteract the cholera-gastroenteritis epidemic in camps. The report was not made known to the fraternity. If I remember aright Cup. ars. was found to be the genus epidemicus. We request the West Bengal Directorate of Homoeopathy to release the data so that it may help to boost the morale of homoeopaths.

Now we have an Advisorate at the Centre; we wonder how much advice of the Adviser is considered and or accepted. There are State Advisorates and State Directorates. How much of these Advisorates and Directorates enjoy autonomy? From their working it appears that they are nothing but post oriented decorations. Today National Institute of Homoeopathy (NIH), the Central Council for Research in Homoeopathy (CCRH), and the Central Council of Homoeopathy (CCH), all created by government, have no effective voice of their own but have to live on the mercy of the policy-makers.

How do we like this situation?

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