

THE HAHNEMANNIAN GLEANINGS

Vol. XLIX

MAY 1982

No. 5

EDITORIAL

MODE OF TEACHING HOMOEOPATHY

It is our experience that many of the homoeopathic students after acquiring qualification practise something other than Homoeopathy and thus swell the ranks of practitioners of other schools of medicine. Why is this state of affairs? Is there something wrong in our curricula, method of teaching or the quality of teaching? Are we not competent enough to develop that confidence, that conviction in the minds of these young practitioners? Apart from many other factors that contribute to this state, I feel that two most important factors are the method of teaching and the method of assessment.

Let us take up the case of the study of homoeopathic therapeutics. Almost all homoeopathic colleges in the country teach homoeopathic therapeutics as a separate subject. This legacy has been transmitted down to us today through our seniors who were responsible to introduce homoeopathic educational system. Almost all of these senior homoeopaths were converts. They were trained in 'disease oriented' based teaching. This includes Hahneman too. This fact is well borne out when we see the works of Lilienthal, Dewey, Rau, Hempell, Tyler and others. Their books on therapeutics are disease orientated. Homoeopathic philosophy emphasises just the opposite. Homoeopathic philosophy revolves round man, his mind, intellect, susceptibility, ability to respond to external and internal stimuli. At present the students are taught indications/differentiating symptoms of a few medicines in a given condition of a disease and they are supposed to memorise the same. Very rarely the entire totality of the medicines and the condition for their rational use in different diseases are taught. In practice, therefore, they find the knowledge of these medicines inadequate, leading to disgust and frustration. Does Homoeopathy teach disease diagnosis as essential part of drug selection? Then why do we follow the method? The acceptable approach should be to emphasise while teaching the materia medica, the potentialities, 'the sphere of action and the circumstances' under which a drug affects a diseased condition. For example while teaching the symptom of swelling of upper eyelids and that of frequency of urination with burning, etc. of Kali carb. it should be related

to the condition existing in nephritis. This will naturally mean that the teacher in materia medica should also be the one who will teach clinical medicine and homoeopathic philosophy. Unless there is integration in the teaching, the art of Homoeopathy cannot be developed. So, separate teaching of therapeutics will not be necessary. Today in most of the colleges, the subject of homoeopathic medicine is split into its three bits, namely the clinical medicine, materia medica and homoeopathic philosophy. These three subjects are taught by three different individuals. There is no link between each other and the result is chaos and finally the frustration. In spite of so many years of existence no college has yet a homoeopathic clinician who can diagnose and teach the subject with the homoeopathic philosophy at the background. The curricula and the syllabi framed by the Central Council of Homoeopathy has not emphasised on promotion of the idea on this line.

The examination system today is the one of a memory test rather than real assessment of a student. Examiners have their own fixed views and anything short of that is not acceptable to them, even when a student explains in a logical manner his viewpoint. There is a tendency amongst the examiners to ask for example 'give five remedies for tonsillitis'. Firstly, the approach of the question is incorrect. It is disease oriented and secondly he has his own five remedies in mind and anything other than these often is not acceptable to him. The student is at a disadvantage. The correct method would be to give a case data to the student with all the relevant modalities, causation, necessary to form a totality, and should be asked to discuss the indicated drug in that particular case with any similar remedy or remedies. This is exactly the way he will face the situation in practice. A student can be examined in this fashion in other clinical subjects. Here one can assess one's ability of application power rather than memory. The method of teaching has to be modified and with that the method of examination.

To achieve this, new text-books in homoeopathic medicine with integrated approach as mentioned above will be necessary. This does not mean to belittle the importance of the existing and the old classics. They can still be retained as reference books. This is a colossal task but can be achieved in a short time if methodically undertaken. Can Central Council of Homoeopathy take up this responsibility? It would do a yeoman service to Homoeopathy.

The views and opinions expressed by the authors of articles published in this journal are not necessarily those of the editor and publishers.