

them by Sec. 72-82 of the fifth Edition. Though he remained a strict individualist so far as treatment is concerned, he swung to the opposite extreme of being a Universalist or a Unitarian so far as the etiological aspect of diseases is concerned. His system is perfected by the full acceptance of the scheme of nature i.e. unity in diversity. Clinically he divided all the dynamic illnesses as acute and chronic with special connotations and denotations attached to these terms by himself and etiologically he divided them as falling under three miasms—Psora, Syphilis and Sycosis—a subject to be taken up for discussion in a later article.

B. K. S.

IS HOMŒOPATHY WORTH WHILE ?

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Being the introductory Lecture to the Educational Course delivered at The Royal London Homœopahtic Hospital on October 12th, 1950.

I am honoured to be asked to be your speaker to-day to introduce what I am sure you are going to find a most fascinating study. By whatever path you have reached the point of enrolling in this post-graduate course, whether through discontent with ordinary medicine, whether through an enlightening personal experience of Homœopathy, whether simply through constitutional aversion to orthodoxy, you have now reached a point of "No-return", for whoever has studied Homœopathy, mastered its philosophy and applied its principles to clinical practice, has never gone back to the old outlook and the old ways.

It will already be apparent that the title of my discourse is in the form of a rhetorical question, to which an affirmative answer can be expected. I am aware that it is a question present in your minds just as it was present in my own

mind when I attended this course some twenty years ago. It is a question implicit in the mind of anyone undertaking to acquire new knowledge, more especially if the new knowledge is regarded as unorthodox. If Homœopathy is worth while you will expect it to bring you inspiration, inward conviction, and lasting satisfaction in your chosen work. In posing the question I hope to place before you certain facts and ideas about Homœopathy which, I think, may help to set you on the road to finding the answer for yourselves.

You will have noted that I referred to Homœopathy as unorthodox, for Homœopathy is still, I'm afraid, regarded as a heresy by the great bulk of the medical profession. But we need not be afraid of names. The heresy of to-day has a habit of becoming the orthodoxy of to-morrow. Moreover as you will learn, this particular heresy possesses an inherent quality of permanence, which has enabled it to survive many vicissitudes during the 180 years of its existence.

Doctors do not, as a rule, come to study Homœopathy through any encouragement received during pregraduate training at orthodox medical schools. Though it is a fact that a few leading authorities of the orthodox school of medicine have been showing, in recent times, a more enlightened attitude towards Homœopathy, prejudice is still prevalent. I recall an incident related to me by a homœopathic physician, now deceased, who had given up an appointment at a leading London hospital in order to become a homœopath. Happening to meet a former colleague in the street, he was asked what he was doing now. "Working at the Homœopathic" he said. "I'm sorry to hear it" said his colleague, "If I had my way the whole place and everybody in it would be burned to the ground": Well, that was 15 years ago, and prejudice is less blatant to-day. Nevertheless the Royal College of Physicians will not accept homœopathic physicians for membership, and repeated attempts to have the Royal London Homœo-

pathic Hospital recognised as a post-graduate teaching centre of Homœopathy within the framework of official Medicine have been turned down by the Senate of the University of London. In the United States of America a number of homœopathic medical schools which formerly gave officially recognised qualifications in medicine have become absorbed into official medicine through relentless and overwhelming pressure by the American Medical Association, and have all but lost their identity. There are signs that something similar would happen here but for the constant vigilance that has to be maintained to prevent it. Prejudice and ignorance, as we know, are closely related phenomena and there is no doubt that prejudice against Homœopathy is based on ignorance of what it really is. The orthodox school has never at any time given Homœopathy a proper clinical trial, and its hospitals and universities still remain closed to the investigation and teaching of the principles and practice of Homœopathy. However regrettable this may be, we cannot shut our eyes to the fact that it must have a profoundly deterrent effect on any student desirous of studying Homœopathy, for it involves semi-isolation in a minority group outside the main body of Medicine, ostracism by former colleagues, and exclusion from almost all public and hospital appointments. The price may well be too heavy for the faint-hearted to pay, and we can never know how many potential adherents have been lost in this way. Furthermore it may be assumed that our student has an intuitive conviction of truth in Homœopathy to wish to study it, yet this conviction can only be tenuous until he has placed himself under an able teacher by enrolling in a Post-Graduate Course, such as this, thus openly declaring his interest in Homœopathy.

It follows from all this that our student must be something of an idealist. Above all, he must have courage. Let him be sustained by the fact that no one has ever given up Homœopathy after giving it a fair trial. When once he has got over his initial bewilderment at the immensity and

seeming complexity of the homœopathic *Materia Medica*, not to mention the somewhat archaic terminology in use, he will come to realise that he is not, after all, being asked to throw overboard the knowledge which he has so laboriously acquired by years of study at Orthodox medical schools. On the contrary, he is being asked only to intensify, develop and extend this knowledge, particularly in the domain of *Materia Medica* and Therapeutics, to a degree which will open out a far wider field of usefulness and cannot fail to make him a more complete doctor. He will then realise that Homœopathy must take its appointed place in the sphere of Medicine for, as McGavack points out, it has its definite place in the armamentarium of the practising physician, and does not preclude the use of other methods of therapy or other adjuncts to treatment if indicated in the interests of any individual case. As I wish to set you on the way to answering the question which is the subject of this lecture in the affirmative, it is desirable that you should keep these facts very firmly in your minds.

I recall that during my pre-graduate training in orthodox medicine, references made to Samuel Hahnemann, the Father of Homœopathy, were few, and these few, on the whole, derogatory. When I came to study Homœopathy I therefore devoured everything I could find concerning the life of Hahnemann. I think I wanted to reassure myself that he had been, after all, not a crank. Of course, my homœopathic friends spoke of him as a genius, but subconsciously I felt that, if this high estimate should prove to be an exaggeration, which, being something of a sceptic by nature, seemed to me not impossible, my attitude towards Homœopathy might be coloured adversely. For the sake of any of my audience who may find themselves in a similar frame of mind to-day, it now becomes necessary to refer briefly to Hahnemann and his works, and to ask indulgence of those who have heard it all before.

In the days of Hahnemann a kind of legalised thuggery masqueraded under the description of medical treatment.

It was safer to fall into the hands of the highway robbers which infested the roads than to fall into the hands of the medical profession. If you fell into the hands of the highway robbers you lost your treasure, but if you fell into the hands of the medical profession you lost your treasure and your life. If Hahnemann never did anything else he deserves a niche in the Hall of Medical Fame for instigating the reform of the medical practices of his day. It is ironic that the name of Ambrose Paré, the barber, the originator of blood-letting, against which Hahnemann inveighed so successfully, is probably better known than that of Hahnemann. Hahnemann was a brilliant scholar, industrious worker, logical reasoner, intuitive thinker, inveterate reformer. He was an internationally famous chemist as well as doctor. He is known as the Founder of Homœopathy, for though Hippocrates had glimpses of the law of similars it had become overlaid with ignorance and superstition until Hahnemann rediscovered it "denovo" and by patient experiment placed it on a secure basis for all time. Till 1790, when Hahnemann began to write against the treatment of the day, he was respected among the leaders of the medical profession, besides being considered one of the foremost chemists in the land. He published the Apothecaries' Lexicon, which treated of everything relating to drugs, their preparation, chemistry and medical properties that can be of use to the apothecary. He was a pioneer in the humane treatment of the insane. He was a pioneer in Public Health and established for the first time clear principles for the control of epidemics. He was a pioneer in the use of the single remedy. He proved 100 different medicines, wrote a prodigious number of original works in his native tongue. After conceiving the law of similars he spent 6 years proving his theory before publishing it to the world, and he spent 12 years of intensive research before publishing his theory of Chronic Disease. Once having aroused the enmity of the medical profession he was persecuted and even prosecuted. He changed his

address 65 times in his lifetime finding sanctuary at last in France where he was able to pursue his studies and experiments in peace. This is a picture, we have been asked to believe, of an impostor, a scoundrel, a charlatan, an ignoramus, a crank. Though it did not bring him material success he lived to see Homœopathy take root in a small but brilliant minority of his profession. Can we doubt that for Hahnemann, Homœopathy was worth while?

How has the survival of Homœopathy come about, against opposition, when other systems of medical treatment, which were considered orthodox at the time of Hahnemann, have been forgotten or at most passed into medical history as curiosities? The explanation lies in the fact that Medicine hitherto has been based on speculative theories, to which medical treatment was made to conform. This was the very antithesis of Science. In paying homage to Hahnemann it must be remembered that Hahnemann is not Homœopathy nor Homœopathy, Hahnemann. In other words Hahnemann did not make Homœopathy. The principle of similars was already inherent within the processes of life from the beginning, only waiting to be discovered in due time. But we owe thanks to the genius of Hahnemann, who by intuitive reasoning supported by exhaustive experiment and meticulous observation, brought it to light. This is the very warp and woof of Science. By the same method Science defines the laws that govern the Universe. Hahnemann, on occasion could be guilty of speculative theory and his theory of Chronic Disease is full of controversial matter. But there is nothing speculative about his law of similars. In effect he says "I do not speculate. I have tried it and it works. Try it for yourself. The only condition is that you should be honest and your observations accurate." The law of similars is a scientific fact, capable, like other scientific facts, of experimental proof, as homœopaths have been proving it since the days of Hahnemann. Truth shall prevail, whether we accept it or not.

Let us now consider if it is possible to relate the main tenets of Homœopathy, by analogy, to conceptions with which you are already familiar. You will presently be studying the homœopathic *Materia Medica* and you will find that, in marked contrast to the *Materia Medica* of ordinary medicine, there is a wealth of symptoms affecting the mind, subjective sensation, and reaction to environmental conditions, and that symptoms of gross pathological change are largely absent. You will find vivid pictures which you will come to know as "Drug Pictures", of the effects produced by drugs on healthy people and you will find no references whatever to the effects of drugs on animals. These "Drug Pictures" are based on "Drug provings," and "Drug provings" are the most essential as they are the most characteristic and unique feature of Homœopathy.

The necessity for proving medicines arises logically from the Hahnemannian proposition that for every case of disease it is necessary to select a medicine "capable of calling forth an affection similar to that which it is intended to cure." The only way of finding out what disturbances of health can be produced by any substance intended to be used as a medicine is to administer it to a number of healthy people, without of course pushing it on the point of gross pathological effects. Animals are useless for this purpose, for they do not react in the same way as human beings, nor can they give an account of their symptoms. Provings are conducted, now as in the days of Hahnemann and his helpers, under the most stringent controls to ensure scrupulous accuracy. The result is the accumulation of a vast storehouse of knowledge regarding the action of medicinal substances, with which there is nothing comparable in ordinary medicine. Allen's *Encyclopædia of Pure Materia Medica*, a standard work of reference runs to 10 large volumes. Do not be intimidated by this, for in homœopathic *Materia Medica* you will find much that is of great interest. You will find that drugs normally little used in ordinary

medicine, such as Aconite or the snake poisons, because of their extreme virulence when administered in material doses, can be used with impunity and with great benefit when administered in homœopathic dosage and in accordance with homœopathic principles. Many of the lay members of my audience will be able to confirm this statement from personal experience, for Aconite has become almost a specific in domestic Homœopathy, in aborting or cutting short that most troublesome of ailments, the common cold. You will find that some substances, like Nux Vomica, Ipecacuanha, or Sulphur, well known to you already from orthodox medicine, may have a far wider range of therapeutic action than you had thought possible, and you will learn that there is no such thing as homœopathic remedies, for remedies are homœopathic only if administered according to the law of similars and not otherwise. You will also find that some substances, regarded by orthodox medicine as medicinally inert can have therapeutic powers. One such is Lycopodium, made from the spores of the Clubmoss and known merely as a harmless coating for pills or as a constituent of flash-powder in photography, which becomes a valuable medicine when the spores are crushed and the medicine prepared according to homœopathic pharmaceutical methods. You will find that some substances are entirely strange to you, as they are not used at all in ordinary medicine. Let me try to give you a brief drug-picture that corresponds with a type of case very common in general practice. The patient, usually a woman near the climacteric, is thin and rather masculine, with a tendency to superfluous hair on the face, which is sallow and freckled, and she looks prematurely aged. She is sluggish mentally and physically, easily tired and catches cold easily. There is a state of venous congestion which shows itself in varicose veins and hæmorrhoids, bilious and dyspeptic disorders and aversion to fats. She has uterine trouble usually prolapse and she suffers from rheumatism or gout. She is irritable, flies into hysterical rages, breaks down in tears

and is very sorry for herself and thinks she has had a raw deal from life. She is always nagging at home, is unable to give love and affection, and is averse to the opposite sex. She is over-anxious and full of fears, but is averse to sympathy, to company and to her family and loved ones. Whatever the ailment for which this patient presents herself for treatment, the homœopathic physician will prescribe Sepia, for that is the remedy which covers the whole case homœopathically irrespective of the particular ailment which brings the patient for treatment. Now Sepia is one of many substances in homœopathic Materia Medica of which you may never have heard, for it is not used at all in ordinary medicine. Sepia is cuttle-fish juice, the ink of the cuttle-fish, and is mainly composed of melanin, a normal constituent of the body, intimately connected with metabolic processes, having an obscure but powerful connection with certain types of malignant disease, and an association with the formation of adrenaline. You may have recognised the picture I have just presented to you, and from your old school training translated it into modern terms of hypoadrenia and ovarian dysfunction. You would probably prescribe adrene-cortico-hormone, and I venture to think you would not get very far with that case, for you have destroyed the patient, metaphorically speaking, and substituted a disease entity, a cipher based on changing conceptions of pathology which may be obsolete tomorrow. You will find it fascinating and instructive to study these complementary relationships between two schools of medical thought, and there is here a potential field for research, but homœopathic drug pictures, based on the simple language of the original provers, do not change with the changing conceptions of medical science, and therefore never become obsolete.

As to the mode of action of the homœopathic remedy or simillimum as it is called, let us see if we can trace an analogy which will be familiar to you from orthodox medicine. When drug provings are carried out the drug to be

proved is administered to the prover at regular intervals over a period of time. The closest analogy of the homœopathic dose in ordinary medicine is the microdose. Incidentally the fact that homœopathic doses do produce symptoms in the course of drug-provings is itself a proof that homœopathic doses of drugs can effect metabolism. The symptoms produced develop as a result of repeated administration. In other words the natural resistance of the prover is continuously bombarded by minimal doses until resistance breaks down and symptoms appear. This process will be familiar to you in terms of sensitisation or allergy and the prover may be said to have become sensitised or allergic to the drug. Now in ordinary medicine, provided the sensitising agent is known, the patient's resistance can be built up by administering microdoses of the same or similar sensitising agent which now becomes the desensitising agent. Too often however the sensitising agent is not known, or if known is found to be not one agent but many. But in homœopathic medicine this stalemate need not occur for, it is possible to find a similar sensitising agent by matching the patient's symptom complex with a drug picture in the homœopathic *Materia Medica*. Similarly in preventive medicine Vaccination and Immunisation, which consist of the administration of small doses of similar, not necessarily the same germs, as those causing the disease to be prevented, are essentially homœopathic procedures, though here the process is limited to a certain number of bacterial infections. The aim, both in desensitisation to specific allergens and in Vaccination or Immunisation to specific bacterial infections, is to stimulate the vital reaction inherent in the living tissues of the patient against the particular substance or germ as the case may be. This, in other words, is to produce what is known to you as active immunity. This is exactly what Homœopathy seeks to do, but Homœopathy is not limited in scope, for any patient that exhibits symptoms which can be matched with a drug picture in the homœopathic materia, can be

desensitised by the administration of the drug thus indicated in suitable dosage. Now I do not claim that this is necessarily the final explanation of how the homœopathic remedy or simillimum works, but I do claim that it is, a conception consistent with the facts as we know them to-day. It will therefore be apparent that homœopathy may be regarded both as an alternative and as an addition to orthodox methods.

We have now seen that through your study of homœopathic *Materia Medica* you will develop and extend your knowledge of drug action in health and disease, and by application of this knowledge you will discover a wider field of usefulness. This is but to pursue that greater proficiency in the art of medicine which is your aim as practising physicians.

I have no doubt that some of you may expect me to make some reference to the infinitesimal dose, against which so much ridicule has been directed in the past. The potentised dose arose by experiment out of Homœopathy but is not essential to the principle of similars. Thanks to the researches of Boyd however it has been shown that high potencies do possess a form of electro-physical energy. This was corroborated in 1925 by a commission under the Chairmanship of Lord Horder, then Sir William Horder, and may therefore be accepted as a scientifically ascertained fact. There is also some evidence that this potency energy may be the same as that within the tissue cells, and if this be so it is a most important finding for it is at this level that the phenomena associated with curative reaction probably take place. Equally important, but from the clinical angle, are the researches of Dr. Paterson, for he has shown that the potentised remedy can alter the bowel flora. But the distinctive research of Homœopathy is the drug-proving for, as already pointed out, (but it bears repetition), accurate provings of symptoms and accurate matching of these symptoms in diseased persons, is the very foundation of Homœopathy. The Homœopathic *Materia Medica* includes

a number of remedies which have only been partly proved. Besides this there is a wide field for the proving of new remedies. Organised provings are still going on, both in this country and abroad, and results are co-ordinated through the International Homœopathic League. The Homœopathic Research and Education Trust are very active in promoting research, and it is through their help that it has been found possible to resume the proving of remedies in this country. It is evident that Homœopathy, in the domain of scientific research, is not standing still.

An orthodox colleague remarked to me one day that the sulphonamides and penicillin had killed Homœopathy stone dead. Well the corpse is a long time dying. In fact it's in a very healthy condition. Perhaps it had a dose of Carbo. Veg., which, I assure you, did not get its reputation as "The corpse reviver", for nothing! But this judgment of my colleague, casual and superficial though it is, raises a question, or rather two of topical importance. What is the attitude of Homœopathy towards the new so-called miracle drugs and what is the position of Homœopathy in modern medicine? The first point I want to make quite clear is that the discovery of brilliant new drugs does not affect the principles of Homœopathy one way or the other. A remedy capable of curing a patient when administered according to the law of similars, remains no less effective to-day than it was in the days of Hahnemann. The fundamental conception of Homœopathy, having been proved and re-proved over and over again, is a natural law which does not change with time. Even if, one day, the two schools of medical thought should become one, (as, indeed they ought eventually to do, for medicine is, or should be indivisible), the principle of similars would remain unaffected. In the words of Hahnemann, "The physician's high and only mission is to restore the sick to health." The homœopathic physician therefore, welcomes every advance in therapeutic medicine which aspires to this basic aim, but he knows the power of the "Vis medicatrix naturae", whatever it may be,

and he knows how it can be called forth and sustained by the vital stimulus of the homœopathic simillimum so as to enable the patient to cure himself. There are times when the infecting agent may be so virulent and the patient so overwhelmed by the infection that the natural powers of resistance are all but lost and here Penicillin may save life. The homœopathic physician is not a fanatic because he does not fly to the new remedies on every conceivable occasion. The new remedies are very powerful and with the probable exceptions of Penicillin and Aureomycin capable of causing grievous harm if used without discrimination. The homœopathic physician need not be criticised for eyeing them with a certain amount of caution, and using them, when he has occasion to do so in individual cases, with the same care and judgment he is accustomed to bring to the selection of the homœopathic remedy.

The field of drug treatment can be divided into treatment by substitution, (which includes endocrine products and vitamins), treatment by anti-bacterial agents, (which includes chemo-therapy), treatment by palliation, and, finally treatment by specific stimulation of the vital recuperative powers, which is Homœopathy. Each method may be the correct one in its own field. This leads us to inquire what is the field of the out-of-sorts, the nervous debilities, the underweights, the fatigue not yet declared themselves as specific disease entities and therefore can not be treated by orthodox medicine. There are the numbers of endocrine disorders and bacterial infections which fail to respond to the specific therapies of orthodox medicine. There are the disorders of children which respond so well to Homœopathic treatment. I am merely stating a fact in saying that Measles and whooping cough for instance, follow a benign course and very rarely develop complications under homœopathic treatment. There are all the minor disorders of pregnancy, before, during and after confinement. There are the surgical cases where pain and shock can be eased and healing stimulated. There is the vast field of disorders of old age, there

are the chronic catarrhs, the asthmas, the dysmenorrhœas, the dyspepsias, the migraines, the rheumatisms and arthrites, the chronic skin diseases, and many, many more—all these poor unfortunates who trudge the weary round from specialist to specialist, from hospital to hospital, but gaining no benefit from ordinary medicine. In this vast field Homœopathy offers to the practice of medicine a contribution of infinite possibilities.

In an article in the *Lancet* the good doctor is described by Sir Hugh Fraser as "one who is shrewd in diagnosis and wise in treatment; but, more than that, he is a person who never spares himself in the interest of his patients; and, in addition, he is a man who studies the patient, not only as a case, but also as an individual". This is an ideal which the homœopathic physician should not find it too difficult to attain, for, as I have indicated, the study of each patient as a whole rather than as a disease entity is the essential approach of Homœopathy, and entails individualisation of every patient to the utmost possible degree.

The final reflection I wish to leave you with is that Homœopathy offers an inner satisfaction to those who study and practise it. This inner satisfaction comes, not only from mastering a difficult art and getting results, but also from habitually dealing with qualitative rather than quantitative aspects of Medicine. It comes from the conviction that Homœopathy, like life itself, originates in a vital principle, and it brings us nearer to the soul of Medicine.

I have not set out to convince you of the truth of Homœopathy, for this can be achieved only in the clinic and at the bedside, but I do hope that the few ideas I have put before you may enable you to approach this course with heightened interest, and that you will go on to find, as many before you, that Homœopathy is worth while.

—*Health through Homœopathy, November, 1950.*
