

AN INTRODUCTION TO MODERN HOMOEOPATHY*

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ABSTRACT: Homoeopathy requires updating in view of the later discoveries by various branches of sister sciences. While doing so, it will not disturb the pioneering status of Hahnemann. An attempt is made to provide scientific explanations to various empirical terms used by Hahnemann and his followers.

Modern homoeopathy is an advanced study of homoeopathic medicine. It requires the knowledge of biology, biophysics, biochemistry, physiological psychology, medicine including Homoeopathy. If we can give this knowledge to the student of Homoeopathy, he can play a greater role in controlling disease, maintaining health and prevention of population growth.

Homoeopathic theory states that totality of symptoms may be considered while prescribing for patients. The totality of symptoms constitutes emotional behaviour such as anger, fear, fright, grief etc.; desires and aversions, such as desire for sugar, or sweets, salt, cold drinks, hot drinks, etc.; thirst, and hunger; environmental effects such as heat and cold, dark and light, time and seasons; sex, sleep, dreams; physical ailments such as inflammations, ulcerations, overgrowths, pains; family background; previous treatment, if any, etc.

Homoeopathy considers that mental symptoms or emotional behaviour is more important than physical symptoms or pathological changes; more importance is also given to peculiar symptoms. Though sometimes, a homoeopath could hit rightly, yet it was empirical. Neither was there any method to understand nor was any attempt made to teach the physiology of the symptom in question; therefore, it was regarded as a peculiar symptom. So it was a hit and miss method. In order to understand symptom, the student of *modern homoeopathy* would require to know the physiology of each symptom, if we want to make him perfect in diagnosis and prescribing medicines.

"To keep the various parts of the human functioning properly, the nature has provided a correspondingly sophisticated co-ordinating device, the brain, to co-ordinate and integrate the activities of all parts of the body." Jussal *et al* have said that the seat of the disease is in the mind and therefore medicines should be so designed that they may act on mind. Mind works with the help of an analysing computer, the brain, and communication network, the nervous system.

Till recently, people believed that once the nerve cell is damaged, it cannot be repaired. Therefore, many wonderful cures of paralysis claimed by homoeopaths were rejected by critics. Workers now claim that even if nerve cells in the CNS are not just damaged but dead, the functions lost as a result

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might still be recovered. . . . In almost every case cells in the CNS whose axons are cut or crushed, degenerate and die within weeks. Meanwhile cells in the peripheral nervous system, like the ones that communicate with muscles, cannot only survive but grow new fibres along their original pathways to make good contacts with their targets, enabling them to work again. At the level of single cells, in the CNS or in the periphery, healthy nerves adjacent to degenerating ones can form sprouts that take over the dead cell's former contacts.—Georgina Ferry: 'Can the Injured Brain Recover?'. *New Scientist*, 25th Feb. 1982.

Now suppose that someone has been scolded; his mind has to analyse the circumstances and environment under which the things happened. This is done in seconds, and sometimes in a fraction of a second. The man may not show anger instantly and he has suppressed the emotion. The effect of anger would be different from that of suppressed anger. Hence two different sets of remedies in Homoeopathy.

Modern homoeopathy believes in scientific methods of diagnosis and prescribing. In order to differentiate anger from fear or fright, we must know the physiology of anger and fright. Normal behaviour will not precipitate or establish pathology; whereas abnormal behaviour such as stress would certainly bring about pathology in due course at the cellular level. Behavioural studies tell us that many physical changes are common to various emotions—Grossman. Homoeopathy knew it, but empirically.

Under the active stage of anger, inner mucous coat of the stomach becomes morbidly red, dry and irritable. The heart now aroused beats quickly and forcibly and the blood rushes impetuously to head and surface, the brain becomes heated, and face flushed, the lips swollen, the eyes red and fiery, the skin, and literally may be said, that one burns with anger. Anger and fear facilitates the body's general capacity to respond vigorously. The adrenal medulla secretes large quantities of epinephrine when a man is frightened or angered. The epinephrine promotes several responses, all of which are helpful in coping with emergencies—the blood pressure rises, the heart rate increases, the glucose content of the blood rises, the spleen contracts and squeezes out a reserve store of blood, the clotting time of blood is decreased, the pupils dilate, and the muscles which erect the hair contract, providing a thicker protective mat in those mammals with fur and gooseflesh in man.—Claude, Grossman, Samson.

Maclean's theory of emotion states that the hypothalamus may be effector mechanism of emotional expression and that only the cerebral cortex is capable of appreciating all the various effective qualities of experience and combining them into such states of feeling as fear, anger, love, and hate.—Grossman.

In animal trials, magnesium free diet caused lack of love for their offsprings in female mothers, and the offsprings died uncared.—Robert. This study is useful in scientific diagnosis, if we wanted to evaluate love and hate.

Illusions, delusions, and hallucinations are considered as mentals; they are psychobiological changes which are the product of stress. Stress and other emotions affect immunoresponses and many vital functions. "The hypothalamus in the brain stimulated by emotions, causes autonomic nervous system to set off chain of reactions that alter functions of many glands, catecholamines from the adrenal medulla causes kidney to raise blood pressure. The pituitary gland stimulated by stress triggers release of beta endorphine, which can diminish pain; it also stimulates release of corticosteroids."

The stress causes an emergency in the biological system; and when this emergency is over, the body must return to normal. But the system sometimes does not get normal and produce symptoms such as illusions, delusions, and hallucinations. Such symptoms are considered as mentals and, homoeopaths give them due importance while prescribing. He should therefore know the physiology of these symptoms.

"The normalizing task assigned to an enzyme called amine-oxidase, which interacts with the adrenaline, and holds it captive and quiescent until it can be altered and disposed of. When the enzyme binds with the right molecules of adrenaline, it performs its task and it lets go; but when it binds with the wrong one, it binds itself more or less permanently, and all sorts of chemical disorders result. While the adrenaline destroying enzyme is occupied with the wrong molecule, adrenaline accumulates, producing strange effects. The person experiences visions and other sense perceptions that have no objective existence, while ordinary objects take on bizarre overtones."—Reyna.

Designing of suitable biochemical experiments/tests for purposes of homoeopathic diagnosis has become now easy. Specific diagnostic tests can be developed for prescribing for patients suffering from anger or fright and accompanying ailments whatsoever. Anger provoking stimuli increase the secretion of nor-adrenaline by the adrenal medulla, whereas fear-provoking stimuli increases the secretion of adrenaline. Workers have claimed to be able to distinguish emotional states on the basis of the adrenaline and nor-adrenaline ratio—Grossman, Guyton, Samson.

By implanting electrode wires in the brain, neurosurgeons have been able to locate different parts of brain which are associated with the functions of smelling, memory, speech, hearing and so on—Grossman. The available evidence suggests that the memory resides either in the continued synthesis of cyclic AMP by adenylate cyclase or in diminished degradation of the cyclic nucleotide by phosphodiesterase. Behavioural and electrophysiological experiments suggest that short term sensitization grades into long term sensitization. A single noxious sensitizing stimulus produces a memory that lasts several hours. With four consecutive noxious stimuli the memory lasts one day. Sixteen consecutive stimuli prolong the memory to several days and with sixteen spaced stimuli (four per day for 4 days) it lasts several weeks. Two independent experiments suggest that short and long term sensitization

also have a common cellular locus.—Eric R. Kandel.

The very process which allows learning and cortical growth may lead to undesirable parasitic modes (a little like wrong connections in electric circuitry)... During REM sleep, the forebrain is periodically and widely stimulated by the brain stem. The available evidence suggests that in REM sleep, the brain is isolated from its normal input and output channels and its intense activity is promoted by nonspecific signals from the brain stem. Thus every night we dream, whether we remember our dreams or not.—Kanekar: *Science Today*, Jan. 1984.

Therefore, each symptom has got its physiological basis, which may be hunted out and mastered.

Desires and aversions have their physiological basis. Desires for sugar and sweets can be associated with glucostatic theory. Glucostatic theory states that glucoreceptors in the central nervous system may be preferentially sensitive to the rate of sugar utilisation. No particular harm results from a simple increase in the amount of glucose in the body but reduced concentration leads to an increased irritability of certain brain cells, so that they respond to very slight stimuli. As a result of impulses from these cells to the muscles, twitches, convulsions, unconsciousness, and death may ensue. An extremely complex mechanism involving the nervous system, liver, pancreas, pituitary and adrenal glands maintain the proper concentration of glucose in the blood.—Grossman.

Similarly, thirst and hunger have their physiologic basis and their seat is in the brain. A few of the impulses from the receptors, located in the internal organs, do get to cerebrum, however, and give rise to sensations such as thirst, hunger and nausea. The sensation of thirst originates in receptors in the lining of the throat; when this becomes dry, the receptors send impulses to the brain which we interpret as feeling described as 'being thirsty'. Workers have demonstrated that, in a man this range amounts to $\pm 0.22\%$ of body. When water loss exceeds $0.5\pm$ of total body weight, man becomes thirsty and seeks water.—Grossman, Claude.

The wall of the stomach also contains receptors. When the stomach is empty, a series of strong, slow muscular contractions sweeps over the walls, stimulating these receptors and resulting in the feeling of hunger. However, since patients who have had the entire stomach removed surgically, still felt hunger.—Grossman, Claude, Samson. Electrical stimulation of the anterior region (of amygdalla) inhibited food intake in deprived animals but increased water consumption.—Grossman.

Basis of the drug action: To claim that the potency is a drug, it must fulfil the condition of either modifying the synthesis, release or destruction of the inhibitory or excitatory neurotransmitters.—Satoskar. When we applied potencies of Arsenic alb. to see the behaviour of an enzyme acetylcholinesterase responsible to hydrolyze acetylcholine—one of the neurotransmitters—the enzyme was found inhibited or activated under the influence of various

dilutions i.e., potencies, even beyond the molecular level. It is thus proved that the potency is responsible for action as a drug.

Time has now come that we can standardise homoeopathic drugs. The Central Council for Research in Homoeopathy announced in February, 1977 that the drugs would be standardized. In spite of various pharmacological problems, the author considers also that it is not impossible to relate drug effects to the potencies.

Scientific explanations to various empirical terms used by Hahnemann and his followers are given as under:

Modifications of symptom(s) are called *modalities* by homoeopaths. These are associated with the receptors specialised to transduce mechanical, thermal, electromagnetic, and chemical energies, and most of the receptors are preferentially sensitive to only one form of energy, although all will respond to excessive (i.e. damaging) stimulation in all modalities. Some of the modalities are associated with biological clock. In addition there seems to be receptors which are very sensitive to all types of physical energies and respond to only potentially damaging intensities of stimulation in any modality. Pain receptors fall into the latter category.—Grossman. Biological clock is perhaps the basis for time modalities. In each of us there is a timing device which regulates our daily activity to synchronize more or less with the 24 hour geophysical day. Desynchronization of body rhythm gives rise to various modalities such as morning aggravation, evening aggravation, 1.00 p.m. aggravation, light aggravation, dark aggravation, etc. Sadness or endogenous depression is also associated with biological clock.—Chandrashekar.

Return of symptoms: When the receptor once triggered to generate action potentials, there is no foreign control over it, until the receptor potentials, decrease because the amplitude and duration of the receptor potential are related to the strength and duration of the stimulation.—Claude. Homoeopathic potencies are regarded as stimuli.

Repetition of dose: It depends on the category of receptors. Some receptors adapt very rapidly and completely; but others more slowly.—Claude. Receptors belonging to former category of receptors would probably need frequent repetition. However, most scientific way of repetition of dose is to administer it on the return of symptoms. We are, however, working on the problem and have already collected data for giving an exact explanation to both, acute and chronic conditions.

Antidote: This is associated with the term inhibition. One impulse might cancel out the effect of another, a process known as inhibition.

Similarly, we can find out answers to various questions being faced by the homoeopathic system of medicine to prove its rationale.

This article is dedicated to Dr. Diwan Harish Chand, my teacher.

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