## REFLECTIONS ON HOMOEOPATHY TODAY

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The article 'Anti-thoughts' by Dr. R. S. Negi (March 1985) is both interesting and provoking. The author and the editor of the journal have invited reaction.

I do not see what harm has come about to either the homoeopathic law or its therapeutics by assigning the status of a "Lord" or "Master" to the founder Hahnemann by most of the followers of this system of medicine. However, if one wants to know the reason for assigning such a status to Hahnemann, one should examine the state of medicine during the period when Hahnemann opened up a new era in medical thought and practice which brought about such remarkable results when diseases like cholera, diphtheria, smallpox were stalking the length and breadth of the land; a therapy which saved so many lives was naturally considered so great that the founder was considered as "Master". There were also many 'little masters' in those days who were able to abort and cure many 'killer diseases' with a single dose of a single medicine, based on the homoeopathic law of similars. One need not, therefore, condemn those who worship Hahnemann. If one chooses to call Hahnemann merely a 'scientist', whatever it may mean, it is one's privilege. But surely, the law of similars has stood the rigorous tests of time for nearly 180 years now. The progress of the other sciences like physics, chemistry, pathology, physiology etc., have not in any way shaken this basic law but have only verified it in everyday practice. In any case, I do not think that Homoeopathy is considered today as a 'pseudo-abstract eult'. Such smear words like 'eult' have been hurled at Homoeopathy by its antagonists in the past.

Regarding the use of combinations and poly-prescriptions in Homoeopathy there can be no excuse at all. The only justification would be physician's ignorance and inefficiency. We cannot stop anyone from prescribing two to twenty medicines all mixed together in one prescription and even claim 'cures'. It was precisely against such mixtures that Hahnemann rebelled. What is 'Homoeopathy' bereft of its 'single remedy' prescription? Twisting the homoeopathic tenets to suit whims is improper. Such poly-prescriptions should not be called 'homoeopathic' prescriptions. Let the prescribers give some other name to it. Merely because one pulls out a vial from the homoeopathic medicine chest (but dispenses in a mixed form), it cannot be considered Homoeopathy. The arguments that Diacard is used by some and that combinations occur in nature and hence that it cannot be avoided in homoeopathic prescriptions are all fallacious and misleading and even mischievous. A naturally occurring combination is one thing and combining remedies proved as 'single' is another. The single remedy prescribers need not wind

up shop as recommended by Dr. Negi. In actual practice it will be 'mixer dispensers' who will surely have to wind up for the simple reason that their cures will be far, far poorer than the single remedy Homoeopathy practitioners. We assert this from practice.

The problem of different types of Homocopathy practitioners, namely, those who hold recognised degrees or diplomas, those who have been registered on the basis of experience and the category of unauthorised practitioners, are all temporary phenomena. To the best of our knowledge no State is adding to the list of practitioners on the basis of experience. According to the laws of almost of all the States, only those who hold 'recognised' qualifications can become registered homoeopathic medical practitioners. In due course the number of the practitioners registered on the basis of their experience will vanish and the field will be entirely left to the university qualified oncs. Why calumniate this dwindling number? The fear that these different types of practitioners are all 'tinkering' with the health of the people is an illusion. This again is the product of a smear campaign hy the antagonists of Homoeopathy and very unfortunately even homocopaths who want to appear 'scientific' sing in the same tune. There are many homoeopaths in the villages and towns who have been doing genuine Homocopathy practice but of course, there are also many impostors. For that matter there are many 'compounders' who have been practising allopathic medicine. Bunglings of a homoeopath are exaggerated while those of the others are lightly passed over; the homoeopath is called a 'tinkerer' or 'quack'. However, it is not denied that there are bad characters in Homoeopathy as in any other field-nothing more or less.

With regard to some unscrupulous persons' use of such titles as 'AM, HMAP, etc. with an intention to hoodwink the people, there is no dispute that they should be condemned and curbed, by the concerned professional organisations. Here again, the craze for titles is not peculiar to homoeopaths. There are many Allopathy practitioners who, not satisfied with M.B.B.S. or M.D., add 'MRSH (London)' or 'ARSH (London)', etc. which are not at all medical qualifications but merely membership of some society or association available for mere payment of the subscriptions. In the end, however, titles cannot hoodwink people for all times and only one who is able to cure people can prosper.

Coming to the so-called antiquated literature, it is true that there has been no additions to the literature during the last 50 years at least. It is very essential that the literature should be updated and suitably amended to help physicians combat present day-to-day problems more easily. It was reported recently that in Poland the book *Principles and Art of Cure by Homoeopathy* by H. A. Roberts was being translated into Polish and the matters relating to many physical sciences stated therein was being updated while translating. Unfortunately, none in the English-speaking world have come forward to do this, least of all in India. However, the "antiquated"

literature has not been found unhelpful for the daily practice; that is the glory of Homocopathy. Every day homocopaths all over the world have been performing cures with the help of this antiquated literature. There, however, is a strong case for revision, extension, etc.

Dr. Negi has hastily and harshly dubbed the article in The British Homoeopathic Journal, Jan. 1946 as "idiotie". Of course, we do not recommend that histology, pathology, etc. should all be totally ignored. In fact Hahnemann himself has stated that the physician must know all these sciences. The question, however, is: how far is the study of histology, pathology etc. by every homoeopath helpful to him/her in the day-to-day practice? Let a search be made in all the journals over the past one-and-half century and let Dr. Negi count the number of case reports where such knowledge has actually helped in the 'cure' of the patient; thousands of cases can be cited from the old (and contemporary) records where histology or for that matter pathology played no role in the selection of the homocopathic remedy by a physician well-versed in Homocopathy. Again, what exactly is meant by 'seientifie'? What is 'seientifie' and what is 'nonscientific? There seems to be a mistaken notion that only those which can be explained by today's knowledge of physics and chemistry and allied branches are 'science' and anything beyond these, as on date, is to be contemptuously dubbed as 'non-scientifie'. These mistaken ideas are due to the cagerness to get the 'recognition' hy the dominant schools; a product of inferiority complex. The physician is not to "attempt to give countless explanations regarding the phenomena in disease, wrapped in unintelligible words and an inflated abstract mode of expression, which should sound very learned in order to astonish the ignorant-while sick humanity sighs in vain for aid." (footnote to paragraph I of the Organon). Let us not lose sight of the primary and ultimate aim of the physician which is to restore the sick to health. To that extent whatever is necessary, one should learn. It has, however, been observed that as one gains experience in practice of genuine Homoeopathy, it is only the knowledge of materia medica and the nature of chronic diseases and the application of the repertory which help true cures. Ask any homoeopath with a quarter century of practice.

It is not necessary for us to condemn Allopathy or any other system for that matter. Let us, the homoeopaths, just practise Homoeopathy and let these cures speak for themselves. No need to speak or write adversely of Allopathy.

It is true that save one or two, our journals are substandard in get-up and contents. The crying need today is that the present day Homoeopathy practitioners contribute case reports to the journals. There are many practitioners who are performing true homoeopathic cures but these are not being communicated. It is paradoxical that while the number of homoeopaths have been increasing, original contributions to the journals have been dwindling!

It is for the editors of the journals to ponder over this and try to remedy it. Let us hope this state will improve at least hence.

How succinctly has Stuart Close put it: "...always, following the appearance of a great teacher or leader, opponents, detractors, or corruptors spring up and attempt to stay, or destroy, or divert to their own glory the progress of the new movement. Disciples or would-be disciples have always to be on guard against false teaching. Their principal safeguard is in maintaining a sincere and intelligent loyalty to the historic leader whose personality and teachings represent the original truth and in intellectual and personal fellowship with other followers who maintain the same attitude and relation.... Homocopathy, the science and art of therapeutic medication, has a twofold existence—as an institution and in the personnel of its loyal, individual representatives. These two constituents are pervaded by a common animating spirit, which finds expression respectively in its organizations and literature and in the life and practice of its followers."