

URGENT NEED OF CLOSER FRATERNAL RELATION AND SOLIDARITY AMONGST THE HOMOEOPATHS OF THE WORLD

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Thanks to the rapidly increasing facilities of communication, the world is getting smaller and smaller, the people of the different distant countries are coming closer and closer, the fraternal relation in the human race is getting more and more lively, dynamic, purposive and active. The differences in the economic, cultural and social levels are steadily tending towards annihilation.

Another peculiar feature of the present age is that Homoeopathy, the most advanced system of medicine with its most squarely founded rational and objective principles and technology is steadily drawing more and more attention of the people in general and scientists in particular as the most congenial for the purpose of real cure of disease.

So it is high time that all the homoeopaths of the world should join their heads and hands together with a view to remove all the lacunae that still exist in the principles and technology and the lags in the profession in the matter of their application in practice and above all effective education of this system of medicine, so that it can adequately fulfil the expectation of people, for curative interest of whom it is basically meant.

And the machinery for gathering all homoeopaths of the world on one platform already exists there, for more than half a century, in the form of the International Homoeopathic Medical League (*Liga Medicorum Homoeopathica Internationalis* or L.M.H.I.)

But the following are the only two basic factors which are standing in the way of fulfilling the indispensable necessity of solidarity in the homoeopathic fraternity of the world:

- (1) Erroneous definition of a homoeopathic physician.
- (2) Irrational formulation and application of the Rules (6) and (7) of the statutes of the L.M.H.I.

DEFINITION OF A HOMOEOPATHIC PHYSICIAN

It is as early as 1889 that, the American Institute of Homoeopathy formulated the definition as, "A homoeopathic physician is one who *adds* to his knowledge of medicine a special knowledge of homoeopathic therapeutics and observes the law of similia. All that pertains to the great field of medical learning is his by tradition, by inheritance and right" (*italics mine*).

The last sentence is cent per cent correct. But there exist some damaging flaws in the first sentence: "A special knowledge of homoeopathic therapeutics" can never be isolated from the 'observation of the law of similia'.

The law of similia means that, the drug disease, i.e. the whole disease picture (involving the different organs, tissues and other constituents of the body with their peculiar abnormal sensation, functions and structure yielding a definite 'totality of symptoms' created by an *individual drug* must be similar-most to whole disease picture (totality of symptoms) of the particular *individual patient* as a *whole*, in a particular *dynamic* phase of development. This entails a new and peculiar approach to and utilisation of all the medical data (including body, mind and soul) observed and elicited in the patient, quite distinct from the traditional approach to and utilisation of those data.

Hence the problem of being converted into a homoeopathic physician is not simply knowing some facts of homoeopathic therapeutics and merely *adding* them to the traditional knowledge of medicine as it is. A homoeopathic physician must have a thorough conception and conviction of the implications of 'observing the law of similia' in his medical career with the sole mission of restoring the *whole sick person* to the healthy state. This engenders a radically new form of therapeutics with corresponding ancillary measures and regimen, completely distinct from those of traditional medicine and unavoidably necessitates a radically reoriented approach, assessment and utilisation of whatever there is in traditional medicine inherited by him, including those which are being newly added daily.

This flaw in the definition has been the cause of inclusion and labelling of many a person as a full fledged homoeopathic physician (with active membership in the L.M.H.I.) who completely ignores the basic principles of Homoeopathy, but only occasionally use, according to their personal fancy or convenience, one or more so-called homoeopathic medicines which happen to have some sort of symptomatic similarity with some of the manifestations of the patient, staunchly sticking to their static mechanical materialistic basis of traditional medicine; while at the same time eliminating many a real homoeopath.

These physicians, however learned they may be, cannot be accepted as full-fledged homoeopathic physicians; just as their counterparts who keep themselves confined exclusively within the subjective-symptomatic aspects of Homoeopathy, totally ignoring the dynamic objective aspects of the same, totally flouting the aphorism 15 of the *Organon*.

So I am of firm view that this irrational and harmful flaw in this definition of a homoeopathic physician must be amended immediately if the homoeopathic society is to be based on healthy and solid ground. And in my opinion the more correct definition of a *homoeopathic physician* should be as follows:

A homoeopathic physician is a person who has a rational and utilitarian knowledge of and grasp on all medical facts so far acquired by man, as much as practicable, with a holistic, individualistic and dynamistic approach to them vis-à-vis health, disease and cure, and sufficient adroitness in therapeutics based on the law of similia with its inseparably related principles of

dynamic pathogenesis of drugs, single remedy, minimum dose, and non-interference with the manifest curative action of the prescribed remedy, all of which are dependent upon the basic approach of holism, individualism and dynamism.

Obviously, fulfilment of all the norms of this definition entails life-long sincere perseverance for any person. Even then any person of average honesty, intelligence and diligence accepting this definition can be expected to develop himself into a more and more efficient homoeopathic physician by continuous personal efforts in the field of study and practice, as has happened to many a mediocre person like my humbleself. Collective efforts through mutual discussions, symposia etc. may immensely help this process.

FLAWS IN THE RULES 6 AND 7 OF THE STATUTES OF THE L.M.H.I.

(1) It is not clear why of all the specialities stomatology alone has been earmarked. In my opinion, any person with any form of recognized medical qualification of any discipline or any specialist in any branch of medicine can be accepted as an active member only provided he accepts the above formulated definition of a homoeopathic physician and pledges to develop himself as such.

(2) *Diploma of a university*: Leaving apart the earlier days of Homoeopathy in the U.S.A. for about three quarter of a century up to date, no university of any country has taken up homoeopathic education in their purview, except that, some universities in India have just taken up this task.

So this stipulation obviously implies that a homoeopathic physician must first have an allopathic diploma of any university. But it is most often actually found that a grounding in the traditional medicine, instead of helping in comprehending homoeopathic principles and technology, and in acquiring adeptness in their practical application, work as hurdles, overcoming which requires extra efforts. So medical education in an allopathic medical institution, should not logically be made an essential condition of choice, for being accepted as a homoeopathic physician. But nevertheless, in countries where there is no arrangement for medical education except through the allopathic institutions, there is no alternative.

But there are countries like our subcontinent (India, Pakistan and Bangla Desh), where there are statutory arrangements for medical education through homoeopathic institutions under statutory councils/boards guiding and controlling the education in such institutions and conferring the proper diplomas. These officially recognised diplomas should be deemed as sufficient for being accepted as a homoeopathic medical qualification or preferably and more rationally be given more value than the diplomas which have no relation with Homoeopathy. But very unfortunately and irrationally, these rules of the statute refuse to do that at great detriment to the strength and solidarity of the world homoeopathic society.

We all know of many a person in many a country, who had neither an

opportunity to obtain medical education under any university or even a statutory council/board; but simply by their own personal efforts has acquired sufficient (often remarkable) knowledge both in general medical subjects as well as in homoeopathic principles and technology with a clear rational approach to essential medical facts. The L.M.H.I. can arrange for an appropriate course of training for this class of homoeopaths for bringing them up to the required standard and for making them acceptable as Active Members and take them in, after a regular screening/examination to ascertain whether they are capable of developing themselves into a real *homoeopathic physician* as defined above.

In my opinion, each and every candidate for active membership, irrespective of whether they come with diploma conferred by any university or statutory council/board or taught otherwise, should pass through such a screening examination before being accepted into the L.M.H.I. as active members.

(3) I fail to comprehend the actual meaning of the following categories of Active Members, viz. national homoeopathic societies, schools of homoeopathic teaching, homoeopathic hospitals, any body corporate. Do these mean that the L.M.H.I. will accept as active member any representative sent by these corporate bodies, even if such representatives do not fulfil any of the other requirements of its membership? Or, on the other hand, does it mean that all the members of the national homoeopathic societies, irrespective of their intrinsic qualities will be accepted by the L.M.H.I.? The reality is that, the L.M.H.I. actually does not or perhaps cannot take either of the alternative steps. So this point needs clarification. Hence, I like to suggest the following amendments to these two rules of the statutes of the L.M.H.I.:

“Clauses 6 and 7 (p. 2) **Active Members**: The following categories of physicians or specialists are entitled to be Active Members, on fully accepting the statutes and its bye laws and rules (including payment of fees etc.):

(i) A graduate or diploma holder in homoeopathic system of medicine going through an officially prescribed course of study under a university or any other statutory board/council recognised by the government of the respective country.

(ii) A graduate in general medicine, veterinary medicine or any speciality (surgery, gynaecology and obstetrics, ophthalmology, otolaryngology, orodentology, psychiatry etc.) who has gone through a course of study in Homoeopathy, recognised by the government of the respective country or (in absence) by the L.M.H.I.

(iii) Any self-taught homoeopath who has gone through a course of training organised by the L.M.H.I. and passed the examination held by L.M.H.I. for the purpose.

I am quite conscious that these views and suggestions of mine will wound or even shock the feelings and ideas of many of my colleagues, particularly of the L.M.H.I. But I most earnestly appeal to them, with all the

humility of my heart and soul, to critically assess all my points, as impersonally as possible, setting aside their respective personal ideas and prejudices. If they can do that, I am sure, the L.M.H.I. will turn into a really effective solid platform for synthetic dynamic consolidation of all the forces of the whole homoeopathic society of the world, all the while steadily enhancing its intrinsic strength by continually elevating the qualities of its members by regular mutual give and take, as well as its extrinsic prowess turning the whole homoeopathic society into an invulnerable force to be duly respected by all and sundry. And if they refuse to give due heed to these candid suggestions, the whole world of homoeopathic society will miss the opportunity offered by history, by remaining scattered with dissipated forces and the L.M.H.I. will turn into a small ineffective and impotent sect of high-browed physicians who only fancy to call themselves homoeopaths.

The only strong string that may restrain their heart and brain in this rational and objective approach to the problem, is the fear of disobliging our brethren of the dominant school. But history should teach us that we have so far gained nothing by striving to make us acceptable to their prejudices; rather on the contrary, Homoeopathy in all the Western countries, particularly the U.S.A., once the citadel of the homoeopathic world, has suffered the most, by following the policy of adjustment with the dominant school instead of standing on its own legs with its own genius and social strength.

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