

PROVING - MODERN METHODOLOGY

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Homoeopathic drug provings are done on human subjects in normal health to elicit drug induced changes at functional and psychological level; and according to the homoeopathic law of similars, these symptoms serve to indicate that particular drug in cases presenting with the same kind of symptoms.

Hahnemann's Method

Hahnemann got his subjects to take the drug undiluted or in very low potencies and possibly in single dose during his time at Leipzig. He would then observe the action particularly during the first 24 hrs. If there was no change within 3-4 hrs., the drug was given again, this time in a higher or twice the dose. If there was no change when the drug had been given repeatedly for three times, Hahnemann assumed that the organism of the subject did not react to the drug and is not sensitive and discontinued the test. Following an interval of several days, he would then give the same subject another drug to test.

The aim of the test is to obtain a first spectrum of action of the drug. Statistical evaluation was not envisaged, nor would it have been feasible with this method. In view of the fact that good results have been seen in practice with drug pictures obtained in much the same way by Hahnemann, practitioners would feel that there was no need for statistical analysis.

Among those who have written on the subject of Drug Proving and who have endeavoured to establish fixed rules for its conduct, one of the most explicit and minute is Dr. G.O. Piper. In order to conduct such provings excellently, he remarks that we should endeavour to dispossess our minds of all preconceived ideas in respect of modes of cure, primary action, secondary action etc. It is best that prover does not know the substance he is taking. It is absolutely necessary to prove one and the same substance on many different persons in order to obtain a thorough knowledge of its sphere of action. It is of great importance to ascertain the duration of action of a medicine. Dr. Piper strongly advises that all homoeopathic physicians should institute

physiological provings on themselves and he bears out Hahnemann in this assertion that the health in place of ultimate suffering by such provings is rather on the whole improved. Dr. Piper thinks that the best time for taking the medicine we wish to prove is just before going to bed at night. At the same time he admits that in order to obtain the full action of the drug it should be tested in the morning also.

Piper finally thinks that we should not confine ourselves to a register of the purely physiological symptoms but should include the chemico-physiological symptoms of medicines also in the *Materia Medica*.

The remarks of Dr. Watzke, one of the most energetic of the Vienna Proving Society, on the actual condition of the Homoeopathic *Materia Medica*, and on the necessity of its careful revision are worth mentioning.

In Hahnemann's provings not only we have in most of the cases no knowledge of the age, sex, character or temperament of the person, the dose of the drug he took, the sequential order of the symptoms but also of the period of their occurrence in connection with the time of the ingestion of drug. It is then necessary to reprove the very medicine that Hahnemann has left us in order that we may acquire a knowledge of the exact value of what he had done and find them, as these are the clue to the labyrinth of the symptom contained in his *Materia Medica*.

One of the first things that strikes the student of Hahnemann's *Materia Medica* is the great preponderance of subjective symptoms in each proving and the proportionately very small number of objective phenomenon. Thus how indefinite are the recorded effects, as manifested on the skin, on the eye and the tongue etc, how loose is the description of the altered secretions and how thoroughly do we miss all attempts at the microscopical or chemical investigations of these secretions and excretions (these are more reliable than the subjective phenomenon). In 1801, Hahnemann, speaking of *Belladonna* particularly but with reference also to medicine in general says - we want to know "what organs it deranges functionally, what it modifies in other ways, what nerves it principally benumbs or excites, what

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alterations it effects in circulation and in the digestive operation, how it effects the mind, how the dispositions what influence does it exert over some secretions what modification the muscular fibre receives from it, how long its action lasts and by what means it is rendered powerless".

Now the investigation of the properties of a medicine in this way would leave nothing to be desired but it is evident that the records of the *Materia Medica* of Hahnemann fall very short of the standards he originally proposed to himself.

Hahnemann conducted repeated experimental drug studies on himself and the sixty-four volunteers whose names are listed in his *Materia Medica Pura*. In total he investigated 101 remedies over a period of about half a century, establishing the method which had come to be known as *proving*. During the 19th century provings multiplied in Germany, France, England and above all in the United States under the powerful influence of Dr. Hering.

Further Development of Drug Proving

In America, the method became very refined and thanks to the dedication of groups of interested and highly motivated students, proving on the healthy continued on a large scale. In the homoeopathic colleges young people voluntarily intoxicated themselves and remained for days or sometimes several weeks in their rooms, or even took to their beds. They noted all the symptoms they experienced. On comparing the symptoms reported it was possible to rank them according to their frequency.

The fruit of this great research efforts were published by Timothy F. Allen in 1874 in his ten volume encyclopedia which contained numerous reprovings as well as new pathogenesis, the names of the provers also indicated, alongwith the doses used in each case. The number of volunteers was very large, the largest being 226 for Arsenic. In 1892, the *Guiding Symptoms of our Materia Medica* in ten volumes edited by C. Hering appeared. The doses employed varied from subtoxic material doses upto 30c.

Without overturning the detailed rules established by Hahnemann, the technique of proving was gradually improved, largely by the introduction of

methods intended to eliminate suggestions and more recently supplemented by instrumentation and laboratory investigations. The single and double blind technique which has subsequently become the norm in pharmacological experimentation was discovered and developed by homoeopathic researchers.

Even before the death of Hahnemann, certain workers had the idea of performing pathogenetic experiments in which the nature of the substance under study was unknown to the volunteers. This is mentioned in the monograph on Aconite, published by Gerstel regarding proving of Aconite.

In the United States this technique was perfected by the use of placebos in proving. The reprovings of Belladonna carried out in Boston in 1906, specifies, without ambiguity the use of the double blind technique.

The report on these provings contained in a 665 page volume, shows that certain subjects did not receive placebo at all, other only in the first few days while others received placebo only in the final days of the proving according to the method now known as cross-over system. Cross over method compares the response of the same subject to two different substances (intra-subject comparison). This method makes it easy to distinguish placebo-reactive from placebo - resistant subjects.

These organisers of provings were also concerned to further develop the method by supplementing subjective reporting of symptoms with objective instrumental and laboratory measurements. In Bellow's proving for example subjects were examined on several occasions by Ophthalmologists, ENT specialists, Neurologists etc. Laboratory tests were also performed and even the most modern methods were employed like ergographic recordings etc.

Method Proposed by F. Lamasson

F. Lamasson, former president of the International Homoeopathic Medical League has on many occasions stressed the need for us to adapt our proving methods to keep pace with progress in instrumental and laboratory techniques but without ever forgetting the subjective, psychic and sensory symptoms.

Lamasson has discussed the experimental con-

ditions which should apply in modern provings. He insists on the necessity of single or double-blind technique, on varied subjects, using a range of dilutions, and at different times of the year.

It is only under such conditions that one can take account of the full action of a given medicine, in winter, autumn or summer, in dry weather or wet weather. All the modalities provoking or relieving symptoms should be carefully noted in the course of the proving. It is essential that attention be directed to all the variable concomitants to the appearance and disappearance of symptoms.

Elsewhere, Lamasson has quoted the recommendations for the conduct of provings of the International Council for Research in Homoeopathy chaired by late Dr. William Gutman of New York.

Suggestions for proving

First week : Take no medicine. Observe any symptoms which may be present but which might otherwise pass un-noticed. Any such symptoms should be noted in the record along with personal medical history including constitutional factors, general state of health and temperament, physical examination and laboratory tests, description of built and colouring.

Second week : Continue observation while taking placebo.

Third to sixth week : Proving of remedy, perhaps intercurrently with placebo for exact verification of symptoms.

Seventh to eighth week : Continue observation, without using remedy.

Dosage and Interval

The remedy should be taken daily, in one or more doses, preferably dissolved in distilled water and on an empty stomach. Start with the highest potency, if there is no reaction after several days, descend to lower potencies, until symptoms appear. Following Hahnemann's method, no dose should be taken from the moment when symptoms start to appear, and as long as they continue. The next dose should only be taken after the disappearance of all symptoms.

Symptom description

All symptoms should be described in detail, according to the time of their appearance, site and radiation, character and modalities. All notebook entries should give the date and day of the proving.

At the end of the proving a typed copy of the notebook must be returned to the proving coordinator.

A dose may be one granule, or about 10 globules, or 10-20 drops. As long as no symptom develops, a dose is given every four hours (three times daily). If no symptoms have appeared after several days, the initial dose may be doubled or tripled or the same dose given hourly or every two hours stopping when symptoms develop.

If no symptoms appear at the end of a week, change to a lower potency. If the symptoms are excessive, the proving may be interrupted until all the symptoms have settled, restarting with a higher potency or a smaller dose. If no new symptoms appear, change to another potency.

Give full details of symptoms

1. in order of appearance, duration, sudden or gradual onset, continuous or intermittent,
2. site (radiation, shifting slowly or rapidly),
3. sensations (local and general). If not exactly describable, describe "as if..." and
4. modalities better or worse from rest, movement, touch jarring, pressure, cold, heat, indoors, outdoors, weather, time of day or night, other physiological functions etc.
5. Dreams, emotions, thoughts, strong unusual desires (for food).
6. Functional changes (vision, smell, taste, touch, appetite, thirst, digestion, perspiration, urine, stool, periods, sexual function).

Also give a note in parenthesis whether the symptoms existed before the proving or any other possible cause for the symptoms, apart from the remedy.

It is very important to prune the provings of banal symptoms capable of being provoked by any placebo and also of habitual symptoms of the individual prover. Lamasson returned to this theme in his opening address at the first round table on scientific research in

homoeopathy. On the same occasion he recalled the importance of noting the chronological order of the appearance of symptoms and of retaining the Hahnemannian Classification by system.

Suggestions for Complete Proving

An inadequately planned proving programme may be worse than having no proving at all. Therefore following steps may be followed for complete & thorough proving.

1. Selection of the drug to be proved - one single, simple drug must be tried. (Source of the drug must be genuine)
2. Identification points regarding the pharmacognostic, pharmacologic, and physiochemical both must be completed (Therapeutic & Toxic)
3. Selection of the dosage in which it is to be proved.

4. Selection of the variables on the basis of biological, environmental, social and nutritional variations, age, sex, race etc.
5. Selection of the place, time, where to be proved & possibly to prove in all variations of the weather.
6. Consent of the prover must be taken.
7. Pretrial Examination of all the provers must be done.
8. Nature of the trials be decided whether single blind, double blind, triple blind or multicentric.
9. Standard forms for pretrial and recording of the symptom data be prepared before hand.
10. Post trial examination must also be performed.

References

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3. Devis Demarque - British Homoeopathic Journal, April 1987 Vol. 76 pp.71-75.

"The human body appears to admit of being much more powerfully affected in its health by medicines (partly because we have the regulation of the dose in our own power) than by natural morbid stimuli -- for natural diseases are cured and overcome by suitable medicines."

Organon of Medicine - Aphorism 30
Samuel Hahnemann
