

HOMŒOPATHY AND SCIENCE

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Before discussing the theme of the Congress it would be well to state clearly what I understand by the two words Homœopathy and Science in this connection.

One would hardly think it necessary before such an audience as this to define what we mean by Homœopathy. But unfortunately, when we meet homœopathic physicians, not only in our own country but also abroad, and when we read some of their papers and the catalogues of some of the homœopathic manufacturing chemists, it is very obvious that the term Homœopath does not mean the same to all men.

From the derivation of the word, which in English means similar suffering, it is plain that the founder of this branch of therapeutics understood it to mean the matching of the patient's symptoms with a drug picture having similar characteristics, and the administration to the sick person of that remedy with the similar symptom picture. This remedy may be administered either in crude or potency form without falsifying the homœopathicity of the remedy, provided it be chosen on the above-mentioned grounds. And I would like to draw your attention to the fact that that remedy should be able to cover the whole of the patient's symptoms, both general and particular, and that only one remedy should be administered at one time. He made no provision for polypharmacy, such as is practised by many homœopathic physicians, or for the multiple preparations put on the market by many homœopathic pharmacies. There is indeed no such thing as a homœopathic remedy; but remedies may be used either according to the homœopathic principle or otherwise.

Schussler with his administration of the tissue remedies in potency form, quite rightly did not claim to be radiesthetists, etc., maintain that they are practising Homœopathy.

Many people seem to think that so long as they prescribe or dispense drugs in potency form they are practising Homœopathy. What a fallacy that is! But it may be that this caricatured Homœopathy is preferable to much of the gross drugging performed by the dominant school of medicine.

We are somewhat in the same dilemma when we try to define what we mean by Science. If one looks for the word in a dictionary, one finds it has many gradations of meaning, e.g. the possession of knowledge as against ignorance; knowledge possessed as a result of study or practice; any branch or department of systematized knowledge considered as a distinct field of investigation; a branch of study concerned with observation and classification of facts, especially with the establishment of verifiable general laws chiefly by induction and hypotheses; and finally, there is what is known as Natural Science, which embraces such knowledge which relates to the physical world and its phenomena.

I hope I am right in assuming that it is this last definition which was envisaged when the theme of this Congress was decided upon.

Now the practice of medicine of any kind is not a science but an art. Indeed, one should remember that science teaches us to know and an art to do, and that all the more perfect sciences lead to the creation of correspondingly useful arts.

The practice of medicine depends to some extent on the basic sciences of physics, chemistry and biology. But it appears to me that when one considers what man is in all his manifestations and from all his facets, that he cannot be explained or understood solely on the basis of a mechanistic philosophy. A vitalistic element seems to be necessary in order to understand the "wholeness" of man. I know there is a tendency nowadays, especially since the production of electronic brains, to believe that man can be understood, or should eventually be able to be understood on a purely mechanistic basis. I do not believe this will ever be so; I cannot imagine any mechanistic basis from which we can understand man's consciousness, his conscience, his senses of beauty and duty, his imaginative flights

of fancy, etc. . . . Man, therefore, must be regarded from the two aspects, material and spiritual, with all that these imply.

Consequently, any system or branch of medicine which is to minister to the whole man must be able to influence both these facets of his nature.

Does the practice of Homœopathy fulfil this requirement? I believe it does.

In order to treat a patient homœopathically one should make a physical diagnosis according to the practice of the dominant school. One is therefore dependent upon a sound knowledge of the basic sciences of physics, chemistry, anatomy, physiology, and pathology. It is possible that some of my audience here today may deny this necessity. But my opinion is that unless we have this knowledge, we cannot determine whether the patient can be treated safely and efficiently by medicine alone, or whether some surgery or other ancillary method of treatment is required if one is to do the best for one's patient. Also, this physical diagnosis is necessary because without the knowledge thereby obtained, we are unable to give to any one symptom of the patient its proper value for the choice of the similimum. This is because any symptom which is present unexpectedly *vis à vis* the established diagnosis assumes a much greater value than if it is merely one of the routine symptoms to be expected.

The homœopathic physician, however, goes further than making a diagnosis of the disease: he must then proceed to diagnose his patient through his reactions to his illness and to his environment generally. Having done this, he then searches for the similimum for the cure of his patient. You will notice I use the word cure, and I use it deliberately, for a physician should always—and I repeat always—have a cure and not merely a palliation, as the target for his patient. Unfortunately, much of modern medicine does not concern itself with such a laudable aim, but is satisfied with merely securing palliation, or suppression of symptoms. One's experience throughout many years of practice has taught one not to look on any case, acute or chronic, as incapable of being cured; for one has had a number of surprises in this regard, for example removal of

tumours by homœopathic medication, even in one instance after a recurrence following on a primary excision by a competent surgeon.

Is the choice of a homœopathic remedy dependent on any science? Surely it is, for the proving with controls of a remedy on healthy people is certainly as scientific a proceeding as the testing of a drug on a sick patient. But a homœopathic proving is a much more searching experiment than the ordinary pharmacological testing, for the former takes into account the influence of the remedy to be proved on the whole man—or woman—from the spiritual, mental, emotional and physical aspects whereas the ordinary pharmacological testing is usually concerned with one organ alone.

That homœopathic potencies up to the 30th are capable of influencing biological processes has been quite clearly and scientifically proved in the laboratory by those remarkable experiments carried out through many years by the late Dr. W. E. Boyd of Glasgow. These experiments appear in a paper published in the *British Homœopathic Journal* for January, 1954. They were not concerned, however, with demonstrating the truth of the homœopathic formula *Similia Similibus Curentur*, but to refute the statements so often made that dilutions—more properly called potencies—of that calibre could not possibly have any effect on biological processes.

That potencies owe their therapeutic power to the energy liberated by the process of manufacture is surely in line with the latest developments of science in the realm of investigation of energies of various kinds.

I do not wish to take up any more time of this Congress, but hope that I have said enough to satisfy any open-minded enquirer that the practice of Homœo-therapeutics is firmly based on the tripod of science, philosophy and art, which is surely the *sine qua non* upon which any integrated system of medicine should be based if it is to deal adequately with the illnesses of the complex entity of man with his spiritual, mental and physical facets.

—*The Brit. Homœo. Journl., April '59.*