

Service, India, attended the meeting. She was given an welcome address by Dr. K. G. Saxena, General Secretary, on behalf of the All-India Institute of Homœopathy. Rajkumariji made a suitable reply. In course of her reply she mentioned that there can be no question of antipathy on the part of any Government to those who are seeking to serve suffering humanity. "But it must be Government concern" said she "that all who practice the art of healing shall conform to recognised standards of qualification". In addition to these she spoke of giving the best training possible to all under-graduates in the science of Homœopathy and providing facilities for "Post-graduate" study and Research works without which no science can progress.

The session concluded with a vote of thanks proposed by Dr. J. N. Majumdar.

SYNTHESIS IN MEDICINE WITH SPECIAL REFERENCE TO HOMŒOPATHY*

A request came to me from the organisers of this meeting to speak something about Synthesis in Medicine with special reference to Homœopathy. I readily complied with this request for reasons more than one. The most important reason lies in the fact that since the publication of the report of the "Bhore Committee" on "Health Survey and Development", an opinion is gaining ground amongst the Professionals and the State Officials that the State of any country should encourage, support and rather identify itself with one *System of Medicine* which should be regarded neither as Eastern nor Western, foreign or indigenous but as an

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- integral corpus of scientific knowledge and practice belonging to the whole world and to which every country made its contribution.

This sounds quite plausible on the face of it; and it is a consummation to be devoutly wished for. But a little close thinking would lay bare the confusion of ideas implied in such an assertion. The days are still far off for the development of an ideal synthetic system of Medicine which will accommodate and rightly assess the different methods of approach to the study of diseases and consequential different therapeutic practices as are evident in Homœopathy, so-called Allopathy and Ayurveda. Each of these regular systems of medicine has its own interpretation and its own way of applications of several fundamental principles of sciences; and these differences of interpretation and the practice growing out of them are what give each system its distinctive individuality. The great experiment which mankind has attempted upon itself, called Medicine, is not yet ended and indeed, as all earthy things, will never be brought to a perfect end, because it is an experiment which deals with the most intricate secrets of nature *i.e.* Life, Mind and their workings in relation to body. Furthermore, the whole truth regarding life, diseases and cure of sickness, is not the monopoly of any single system of medicine, however widespread it is or however numerous its votaries might be or whatever degree of state recognition and state help it may enjoy.

Is there then no chance of arriving at a synthesis in medicine? Though the present times are out of joint and the world is passing through an unquiet age of gigantic ferment, chaos of ideas and clash of mutually antagonistic formidable forces and life currents, a spirit of synthetic and global outlook seems to be growing in every sphere of human activity, social, political and religious. It is in the fitness of things that the same spirit of synthesis should work in the field of medicine for the good of the suffering humanity. It will be my endeavour to present before you

my line of thinking which might lead us to the desired goal.

Let us begin from the beginning. What is meant by the term Synthesis? Synthesis relates to different principles or different practices. Let me say, at first, what is not meant by synthesis. Synthesis does not mean aggregation, compromise, mere juxtaposition or queer hotchpotch amalgam of different principles or practices. It is not merely finding the greatest common measure in different systems concerned. Synthesis either of different principles or practices, is effected by the discovery of seizing rather on some central principle common to all which will include and utilise in the right place and proportion their particular principles or practices. Synthesis is never effected through mathematical but through logical processes. Synthesis not only includes each and every different principle but transcends each one of them as the principles, often contradictory to one another, are reconciled in it. It is the widest generalisation of a Law wherein hitherto discovered individual laws turn out to be but particular applications of it. As for example, Dr. Einstein's recent discovery of the highly convincing extension of "the generalised theory of Relativity, as expressed in four equations given in letters or symbols, not numbers—which is supposed to cover the law governing the two fundamental forces of the universe—gravitation and electro-magnetism. This is what is signified by real synthesis. Thus a synthetist sees what is aimed at by different principles, often contradictory to one another and accepts each facet of the Reality in its own place, but rejects their narrowness and errors and proceeds further till he discovers the one truth that binds them together. So before we talk of synthesis in medicine we should try to ascertain the fundamental principles of different systems of medicine *viz.* Allopathy, Homœopathy and Ayurveda.

This bring us to the problem of defining a system of medicine. What are the essential requisites of a system of

medicine? What are the scope and subject matter of Medicine proper? A system of medicine, is generally meant to signify the whole corpus of knowledge covering the whole sphere of existing diseases of multitudinous varieties and diverse therapeutical means taken recourse to and the knowledge of auxiliary sciences of Chemistry, Physics, Anatomy, Physiology, Pathology, Bacteriology, Hygiene etc. In this sense it includes medicine, surgery, obstetrics, gynæcology etc. as clinical subjects and the auxiliary sciences as mentioned above as pre-clinical subjects. But on closer thinking we find that this is an undue widening of the meaning of the term. Medicine is primarily an art—an art of healing having a life of its own, independent of the nourishment its associated sciences bring. But the medical art, like other arts and crafts, has benefited greatly from the help derived from other sciences *i.e.*, chemistry, physics, anatomy, physiology, pathology etc. From this standpoint, the above mentioned auxiliary sciences (in so far as they deal with the physico-chemical phenomena underlying vital processes)—are indispensable but not basic sciences in the study of medicine, which is primarily a science of life under conditions, normal and abnormal. They are as indispensable as, but not more basic, than speaking and writing are, for instance, to a historian. These sub-sciences are not capable of constructing concepts sufficiently adequate for the explanation and understanding of phenomena concerning living organism. Thus, the science of medicine, though it takes help from Anatomy, Physiology, Pathology etc., has a distinct field of its own comprising its subject-matter and scope. We should note that the subject-matter of medicine comprises (1) the study of life, health and disease *i.e.* the science of Man; (2) the study of actions of remedial agents on the human organism in health and diseased condition *i.e.* the science of Pharmacology and Materia Medica and Therapeutics; and (3) the study of methods of preparation and application of remedial agents to man under different

conditions *i.e.* Pharmacy. Thus the scope of medicine deals with (1) preservation and promotion of health; and (2) cure and prevention of ill health.

Any system of medicine which aspires to secure a stamp of distinctiveness and completeness, should be comprehensive and wide enough to deal with the subject-matter and scope of Medicine, as mentioned above. Thus the auxiliary science subjects *i.e.* Anatomy, Physiology etc., are to be reckoned as indispensable subjects satellite to Medicine but not an integral part to the corpus of Medicine, whether it would be Homœopathic, Ayurvedic and so-called Allopathic systems. These scientific subjects are independent subjects—not monopoly of any particular system of Medicine. But this does not mean that these subjects are to be taught in a common teaching institution for students of different systems of Medicine; because each system of Medicine proper studies the facts of these sciences from different points of view, for example, let us take the case of Physiology and Pathology. From Homœopathic point of view Pathology can never be the basis of Therapeutics whereas the so-called Allopathic School vainly glorifies itself as raised to a scientific standard by treating therapeutics as applied Pathology and applied Physiology. Hence pedagogy of these subjects must differ in institutions of different schools of medicine.

Thus we find that the study of life, health and disease—forms the basis of any system of Medicine. In other words it is the science of Man which supplies the basic concepts for the study of Medicine. The question crops up—why should there be different approaches, different view points, different interpretations to the study of the science of Man? Science is supposed to deal with the truth; and truth is simple and truth is one. But Man is not simple—he is an indivisible whole of extreme complexity. He is a triune organism presenting triple aspects, material, vital and mental. He is, at the same time, the corpse dissected by the Anatomists; a system of matter and energy, studied by

Physical Scientists; a living animal, observed by the Biologists; a conscious mental personality, noted by the Psychologists. Therefore, our idea of man varies according to our feelings and our beliefs. A materialist and a spiritualist accept the same definition of a crystal of Sodium Chloride; but they do not agree with one another upon that of the human being. A mechanistic physiologist and a vitalistic physiologist do not consider the organism in the same light. But, in reality, all these aspects are aspects of one indivisible whole. There should be no question about the priority of one aspect over the other or one aspect being "more real" than the other. The so-called Allopathic school, still obsessed with the notion of the basic reality of matter studies man from a mechanistic and chemico-physical point of view; whereas Homœopathy and Ayurveda study the human organism from the stand point of life though they combine in themselves the mental and physical planes as well. But it may be agreed that for a physician the category of life is the most relevant to his purpose, the other aspects or categories being used as secondary. Herein lies the basic difference in the approach to the study of Medicine between the Allopathic School on the one hand and the schools of Homœopathy and Ayurveda on the other. Naturally, the difference of the outlook in the study of auxiliary sciences of Anatomy, Physiology, Pathology, starts from this basic difference in the study of the science of Man. At best, the physiologist of the Allopathic school differs from the stand point of 'positive vitalism' of the Homœopathic and Ayurvedic School, in not postulating any 'vital force', "elan vital" or other X, but in simply saying that, as a matter of fact, organisms require for their scientific descriptions certain biological concepts or categories which are at present irreducible to the concepts of matter. In short Allopathy considers human being more as a mechanism whereas the other two schools consider him as an organism which, though inducing mechanism, yet transcends it. The specific conception of disease, naturally follows from the

co-relative conception of life—because disease is nothing but altered life. Health is a condition of the man when he lives with ease; whereas in a diseased condition the man lives but suffers. The materialistic and vitalistic outlook of man lead to the fundamental difference in the notion of causality in the field of medicine. The mechanical cause in the physical world cannot be made synonymous with the “creative cause” in the domain of life. Physical science reduces all causality to transference and transformation of motion. But this conception of causality as applied to the realm of matter can never explain how body can act on mind or mind on body or how the drugs act on the organism as a whole or how the organism reacts to the action of drugs. So instead of delving into speculations and vain hypothesis, Hahnemann, the founder of Homœopathy, gave up the attempt to explain the symptoms or the action of drugs in a living body. To him association or sequence of symptoms was enough. Hence Hahnemann presented Homœopathy as a descriptive science, based on phenomenalism and not concerned principally with causal explanations. The Allopathic school presents medicine as a science, based on “Causality” and therefore subject to “Regressus, in infinitum”, to the endless search for causes and everchanging conceptions and terminologies. This basic difference in thought, which is underlying the conflict of both schools and which is more unconsciously felt than clearly understood, makes it so different for the orthodox school to find an approach to Homœopathy.

Another important item in the subject-matter of medicine, which differentiates one medical system from another is the Therapeutics. The selection and administration of remedies constitute the science of Therapeutics as the investigation of the properties of drugs constitutes the science of *Materia Medica*. Let us see which medical system has been successful to evolve a science of Therapeutics *i.e.* where the corpus of Therapeutic knowledge has been reduced to law and embodied in system. As the

Allopathic system is more keen to consider man as a piece of chemico-physical mechanism it is bent on investigating the minutæ of the chemico-physical processes underlying the vital phenomena; and it thinks that a complete knowledge in that direction will give us the clue to treat patients most successfully. So it treats medicine as applied physiology and applied pathology. So this system ignores any therapeutic law, its possibility or necessity. It wants to treat diseases upon general principles of pathology, by means of which science it proposes to ascertain the interior changes in tissue and structure, which lie at the foundation of and give rise to the symptoms of the patient, and thus get a rational appreciation of the symptoms. It studies the symptoms produced by the drug in the same way. And it has hit upon the law "Contraria Contraries Opponenda" which means that the relation of contrariety or opposition should exist between the symptoms and pathological conditions of the patient and symptoms and pathological effects of the drug that, we are to select to cure him, is capable of producing. The objections to this law were ably dealt with by Dunham and as his writings cannot be improved upon I refer you to his immortal essay on the study of *Materia Medica*. Hahnemann hit upon the formula "*Similia Similibus curantur*"—which is too well known to you to need description. But these two principles of Therapeutics were known by Hippocrates who wrote two thousand and four hundred years ago—"There are diseases that have to be treated by contraries and others by similars. Everything depends on the nature of the disease and of the patient." Latterly the Allopathic system focussed its attention on the the disease and held fast to the Law of opposition, firmly and strongly advocated by Galen; whereas the Homœopathic system had its attention rivetted on the patient and picked up the Law of similars as the all-prevading therapeutic Law. Two doctrines may appear to be opposite, but this does not mean that the one or the other is absolutely wrong, because there are arguments for and against regarding each

unscientific mental attitude and attempts at premature and forced synthesis. I purposely mention the last factor because medicine has separated the sick human being into small fragments, and each fragment has its specialist. Without them science could not progress. But before the results of their researches are applied to man, the scattered data of their analysis must be integrated in an intelligible synthesis. It has been rightly remarked by Alexis Carrel in his famous book "Man the Unknown" that such a synthesis cannot be obtained by a simple round table conference of the specialists. It requires the efforts of one man, not merely those of a group. A work of art has never been produced by a committee of artists, nor a great discovery made by a committee of schools. The synthesis needed for the progress of our knowledge of man should be elaborated in a single brain. So before Research institute for synthesis of medicine is started we require individuals with broad and strong minds gifted with intuition. In the meantime let each system of medicine be allowed full scope for development.

Before I finish let me try to assess the position of Homœopathy in the field of medicine:

(1) Homœopathy is a speciality in individualisation—individualisation of patients and individualisation of drugs acting on the human organism. Homœopathic method of prescribing is one which concerns itself with treating the individual who has the disease and not simply the disease which is nothing but a mental abstraction from the concrete reality of the individual being.

(2) Homœopathy is at one and same time a plea for and a cry against specialism.

(a) It deprecates the specialism which divides the body into a number of more or less delimited sections each for separate treatment of its illness.

(b) It pleads for specialism which treats the derangement of that particular organ or part as

evidence of a diseased state of the whole organism.

(c) It pleads for the specialisation which individualises the problems of the organism as a unit and treats altered function of the part in relation to the whole.

(3) The Homœopathist is one who stands as a specialist at a pivoted point between the individual with the disease, and the organo-specialist who makes the detailed investigation of the particular tissues or organs bearing the brunt of the disease. He must correlate the work of the latter with his own investigation of the needs of the patient as a whole. In the interests of the sick, there is need for the closest and most harmonious co-operation between the Homœopathist and organo-specialist (who generally belongs to the Allopathic school).

(4) Regarding the etiology or causation of diseased processes the very flexible balance and polarity of endogenous and exogenous disease origin complementing each other, seems more adequately encompassed in the idea and Homœopathic description of the miasms than by the narrower one of the Pasteur's theory of infection by micro-organisms, which completely overlooks the endogenous origin of illness. Bacteria, as we know them, are only a small physical part of a greater dynamic force complex which again is more adequately described, though not necessarily defined, in the recorded symptoms of the miasmatic concept.

(5) Homœopathy is a method which focusses its efforts upon the individual and the individualistic side of the disease. At one end of the scale lies the field of public health which deals with disease en masse and aims largely at prevention; at the other, is found Homœopathy, which copes with the individual's particular health problem and aims chiefly at cure; the places of both are equally important. There should be no conflict, complementary efforts

should be made by the votaries of the different schools of medicine.

Under the present circumstances, with the limited knowledge that we possess regarding all aspects of medicine a real synthesis in medicine is not envisaged forthwith. I conclude with the memorable words of Virchow, in this connection:—

“No matter, whether one seeks to advance through anatomic investigation of the diseased or another through clinical observations of the processes, a third pathological, and a fourth by therapeutic experimentation or one through chemical or physical and still another through historical research, science is big enough to allow space for all these endeavours provided they do not pretend to be exclusive, provided they do not transgress their limitation, provided they do not claim to perform everything. Extravagant promises have, always, resulted in harm. Exaggerated pretensions always injured; self over-estimation has always offended or else made a laughing stock of itself”.

What is the way out? What will lead us to our desired goal of synthesis in medicine? To my mind, the solution of the problem lies in the direction of studying the human being from an organismal point of view which transcends that of mechanism and which combines universal with individual. The scientificity of the synthetic study will depend on the discovery of conceptual terms which will be simultaneously adequate for the understanding of the phenomena, whether physical, vital or mental. The genius of India has already developed such conceptions expressed as “Sattva, rajas and Tamas” equally applicable to the phenomena of three planes. These have to be applied in greater details and with greater thoroughness in the field of medicine, than what has already been effected in Ayurveda. Modern science obsessed with the greatness of the physical discoveries and the idea of sole existence of matter, has long attempted to base upon physical data even its study of soul, mind and life and of those workings of nature in man and animal in which a knowledge of

psychology founded itself upon physiology and the scrutiny of brain and nervous system. So long as mind and life along with matter are not accepted as fundamental verities of Nature; so long as the re-orientation in outlook is not reflected in the field of medicine—the pursuit of medical art would not be as fruitful as it should be. As such a change in outlook would shake pedagogy, medicine, hygiene, psychology and sociology to their very depths, I am afraid, the rank and file of the so-called modern scientific medical profession would not easily give up this faith; and there will continue a perpetual war of school against school, of system against system to the great detriment of the profession and misfortune of the human races—How long, Heaven only Knows!

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SEPARATE INSTITUTIONS FOR TEACHING HOMŒOPATHY*

I have been asked to speak on separate institutions for homœopathy. In this connection I must make an apology for and on behalf of the members of the Homœopathic Enquiry Committee to the homœopathic profession in particular, and the lay public in general, in not being lucid on the reasons why we have wanted separate institutions. In that Committee report the reasons adduced by the members belonging to the homœopathic profession for wanting separate institutions whether post-graduates or undergraduates for the teaching of homœopathy, were (i) the apathy and perhaps the active antagonism of the regular school of medicine towards homœopathy, (ii) the different orientation of homœopathy in all branches of Therapeutics, particularly drug-therapy.

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