

speedy, gentle and permanent restoration of health. It is not a permanent restoration of health to suppress an acute disease, which will only break out again at some time in the future or be converted in chronic disease.

Constantine Hering, that great pioneer of American homœopathy, once said: "If our school ever gives up the strict inductive method of Hahnemann, we are lost and deserve only to be mentioned as a caricature in the history of medicine."

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ASSAM STATE HOMŒOPATHIC CONFERENCE

PRESIDENTIAL ADDRESS

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Dr. Chopra, Ladies and Gentlemen and Brother Practitioners of Assam.

I have been asked to preside over a Conference of Homœopathic practitioners many a time and I have always refused because I did not think that I was competent enough to do so. This time also I started with the same amount of diffidence in me as in previous occasions because I was told that one of the most veteran homœopaths of India, the first elected President of a Council of Homœopathy accepted by one of the State Governments, was to preside at this conference. But as I was requested by this gentleman to come here and officiate in his place, I thought it was indeed a great honour conferred upon a comparatively junior practitioner of Homœopathy. Further, Homœopathy seems to be at cross roads in India at this particular juncture of time and I felt that I should try to help you gentlemen in chalking out a course of teaching and training for

the homœopaths in the Province of Assam. With regard to this I felt I had acquired some amount of competence after having worked in the Homœopathic Enquiry Committee appointed by the Government of India. We, the members of the Homœopathic Enquiry Committee, have been much maligned by a large section of the profession, particularly the lay portion of it.

We have been blamed even as a Homœopathic Condemnation Committee. Gentlemen, even today I do not understand how condemnation of our teaching institutions or the majority of our practitioners for their shortcomings can be a condemnation of the system of Homœopathy.

We are turning over a new page in the history of Homœopathy and we felt that at this juncture the first thing that any Indian is required to be in any sphere of public life is to be honest and that more so in the stock-taking of what we have in the homœopathic profession today in India. In the Committee Report we have asked for recognition of Homœopathy by the State. We have also asked for liberal help for the study of Homœopathy for future generations of Homœopaths. We have also asked for a radical control of entrants into the profession provided facilities are given by the State to see that the profession is not strangled.

Should we have asked for these things if he had already what we desire them to be? What was the use of asking for State controlled Institutions giving regular instructions with facilities for clinical teaching if we already had them? If the large number of Homœopathic Practitioners who are practising Homœopathy today were also real physicians, was there any necessity for us to have asked for such training facilities?

If we want ourselves to be recognised as also the Homœopathic system of treatment, we felt that we had our responsibilities towards the people who would recog-

nise us. This brings us to a fundamental consideration of the difference between a mere homœopath and a complete homœopathic physician. This involves a lot of discussion as to what is necessary for practising homœopathy ; but the main difficulty has been that the physician, if he has to enjoy the rights and privileges of a physician, has many other ancillary duties to perform over and above his main duty of curing the sick.

These to my mind are (1) preventive medicine ; (2) medico-legal aspects which have increased so much in their implications today in view of the complexities of the relations of the people and the State. Further, there is the relationship between the employer and the employee. Next I put the aspects of prognosis where a knowledge of Pathology is essentially necessary for a physician. Lastly, but not the least, the homœopathic physician has to decide conscientiously what are the difference between a natural disease, dynamic in nature, needing medicinal therapy and a surgical disease requiring surgical intervention along with drug therapy.

These surgical conditions as enumerated in the "Organon" are diverse, ranging from congenital defects, trauma and the mechanical effects of a dynamic disease. All these necessitate a general practitioner to be trained in the ancillary subjects subservient to the law of therapeutics that we all cherish so truly at heart. To my mind even that understanding of the law of therapeutics and its application in actual practice in a manner conducive to the production of best results would require the help of these auxilliary subjects.

Because the clinical approach to the study of diseases and drugs has raised Homœopathy to an art almost independent of subjects satellite to the medicine proper, it does not imply that the study of these indispensable subjects, though not basic, is not required by a homœopathic prescriber. I rather hold the opposite view that the best out

of Homœopathy can never be obtained without previous knowledge of the auxilliary subjects.

Otherwise Hahnemann himself would not have written in section 3 of the Organon (5th Edition) that the knowledge of diseases, knowledge of medical powers and knowledge about the choice of remedy are three essential requisites for a true practitioner of the art.

Gentlemen, knowledge is power and we can never know enough about the human organism. Any knowledge regarding man is not to be neglected by a physician "whose high and only mission is to restore the sick to health, to cure as it is termed." And sometimes it is dangerous for such persons who just hide their ignorance or for their ulterior motives, like financial gains through selling of medicines, books, degrees and diplomas, might want to propagate this idea that to practise Homœopathy the auxilliary sciences and arts of medicines will not be necessary.

Gentlemen, I have tried to explain why we think we do not deserve to be condemned as a condemnation committee. I draw your attention today to what we strive for in this Enquiry Committee Report. At least once in the history of Homœopathy nine members of the Committee appointed by the State and country were fully qualified doctors, a majority of them practising Homœopathy and a minority of two practising modern medicine, with a Chairman who was an accepted scientist of repute, agreed upon the fact that it was a system of therapy with an orientation different from that of modern medicine and was one which could supply a State with the requisite necessities to be fulfilled by a scientific system of therapy. They recommended it unanimously for recognition.

If you go through the Report carefully you will find that the dissension notes of the two allopathic practitioners was only in the method of such recognition and not in the fact of recognition itself. Secondly, the fact of allowing the present practitioners of Homœopathy to continue to

practise if and when any control of medical practice in general is introduced as an assured fact. Thirdly, once at least in India we have recognised the past graduates, of some of the institutions who did want to impart some sort of systematic training in spite of the tremendous difficulties that they had to face and meet, as persons fit to enjoy the rights and privileges of qualified doctors.

Gentlemen, we know that it is not the average practitioner of Homœopathy without such institutional training who is interested in having spoilt the chance of those trained colleagues of theirs who are putting up a fight but those who are interested in not having homœopathy recognised at all by the State are putting up this fight and trying to intimidate and delude the practitioner without institutional training with false propaganda. Once for all through your forum I want to assure the genuine practitioner without such training that we will not tolerate any procedure in which their means of livelihood may be taken out. We will see that he has not got to face indecent competition from people who do a part-time job of sketchy Homœopathy and we can assure them that the way we have recommended in the Homœopathic Enquiry Committee to accept them will certainly never take away from them anything that are enjoying now. In addition they will be accepted by the State as Homœopathic practitioners if not as Homœopathic physicians. Further, those amongst these who can come under category "C" of the classification of Homœopathic practitioners in the H.E.C. Report will certainly have an opportunity of getting themselves qualified and getting the privileges of a Homœopathic physician.

Gentlemen, to fight the Enquiry Committee Report at this stage when it is almost accepted even at the last Health Ministers' Conference is to fight Homœopathy and to put weapons into the hands of the not too sympathetic directorates at the States and at the Centre. There are States where a directorate is sympathetic towards Homœopathy but I am afraid they are few.

In a Homœopathic conference it is customary to give a little account of what Homœopathy is. I do not know whether it is advisable to carry on giving the technical definitions in a place where most of us know what it is. I will just try to make it understandable even to the layman so that the fundamental difference between Homœopathy and the other systems of medicine may be clear in our minds.

The fundamental difference starts with the conception of what disease is between the different schools. Barring "Ayurveda" I think the main difference lies in the roots of the conception of diseases. Allopathy, our so-called Modern medicine, has up to very recently conceived of diseases as an entity affecting a particular person either in a functional sphere where they take into account only up to that portion of the intangible phenomena in a human body, namely, the mind. But mainly they consider structural disease derangements as what constitute diseases. According to them it is only when structural derangements have taken place that the function of an organ of a person is deranged, and thus they would think of a person with a diseased liver, a person with a diseased brain and a person with a diseased kidney, and while treating patients they want to treat this diseased liver, this diseased brain and this diseased kidney, trying to alleviate the other symptoms coincident with the functional disorders of these organs symptomatically either by a law of contraries or by methods of empiricism.

In the case of a diseased organ they want to restore the function of the organ either by removing a portion of the organ which is diseased when it is accessible and the cause of the condition is not known or partially known or when it is an infection that is an attack by external parasites, be it an animal of the higher type, the bacteria of the lower type in the scale of evolution or the ultra-microscopical virus to take such methods as would be inimical to

these parasites continuing to flourish inside the human system. The methods of this have been diverse and the attempt has gone on from trying to find parasitocidal substances in the early stages which would be detrimental to the human organism, the Chemo Therapeutic agents which came next whose effect was to produce substances which when inside the human organism would be most parasitocidal and least harmful to the human organism. The latest in this line has been the antibiotics which aim at making conditions inside the body such that parasites cannot continue to grow and multiply. You will find in this method the human being himself has as yet been kept out though his health is being found to be necessary as would be evidenced by a method of work of the antibiotics. In the other spheres the symptomatic treatment has been always to relieve symptoms by giving contrary medicines or by substitution therapy where a definite idea could be made with regard to the deficiency of a particular constituent of the human organ. In these also the main factor of the human being as a whole was left out.

Homœopathy, as evolved by Hahnemann, started with a rebellious thought, the idea of finding a *causa morbi* (cause of diseases) by a harmful agent and of treating diseases from the point of view of "Tolle causam" (remove the cause) at the time of Hahnemann's practice was purely hypothetical. It was for him to understand that an individual was not the body alone. It was the energy that permeated the body and made it alive, work, function and suffer diseases that was primarily diseased in all diseases. The structural changes in the organ generally follow excepting in the case of trauma and congenital defects where it was because of some defect in the parents or in the derangement of this vital energy without which life, work, function and diseases are not possible. Diseased life energy, according to Hahnemann, has become disease of the person which includes his vital energy, mind and the structures that constitute his body. To the homœopath the

disease was manifest only by the symptoms which were nothing but the deviations from the normal in either the mind, the structure or the function of the human organism. This was the main philosophy on which homœopathy is based. You will observe, gentlemen, that there is no such philosophy behind modern school of medicine and other schools excepting the ayurvedic system.

It was also an observed and a scientific fact that drugs producing similar symptoms when administered to healthy persons as produced by diseases in a person and administers according to the law of symptom similarity, produce such changes in vital energy as to eradicate the disease along with the *causa morbi* even when we did not know what the *causa morbi* was.

During the process of finalising the practical application of homœopathy, Hahnemann found that the drug effects when given in crude form were, though curative, producing undesirable symptoms because of the drug itself acting in other spheres. To minimise that he wanted to diminish the quantity of drug and in this, as a chemist in a methodical manner, he took up a particular form of diminishing the quantity according to mathematical proportions and to have a good admixture of the drug with the dilutions giving definite numbers of succussion or pounding (triturations). And he found that peculiarly enough this particular method of dilution was increasing the curative property of the drug while diminishing the side effects or by-effects as it were. This he termed potentization or dynamisation of drugs.

There are still other theories and corollaries applicable to these, the hypothesis of the Homœopathic system. Gentlemen, you have heard in your President elect's message a better and more lucid exposition of the principles as also its mode of propagation in India and the world. I will just draw your attention to one fact today that the idea of the imponderable in our potencies are no longer imponderable. With the advent of Planknian mechanics as expounded by

Planks and Einstien the conversion of mass into energy and energy into mass is no longer imponderable. The scientific fact of a crude substance being converted into some form of energy is definitely evidenced and proved by the fact of its capability of curing sickness when applied under conditions that it is predicated to do so. The explanation of how this conversion takes place is a matter for the scientist and not for the clinician. If that explanation being not available is adduced as a reason for not accepting Homœopathy as a science I venture to say that much of modern medicine which was vaunted to be scientific for so many years from so many forum will have to be dubbed as unscientific. To mention a few, the much belauded specifics of modern medicine like Arsenic in Syphilis, Emetine in Amoebic dysentery and Quinine in Malaria still awaits explanation of their action. To say that they are parasiticial of these diseases is to beg the question, because how this takes place is not known as yet.

Gentlemen, I do not want to take any more of your time. I conclude by just asking you to unite at this critical juncture of homœopathy and help your Enquiry Committee to formulate ways and means so that Assam, which is a growing Province, might have Homœopathy recognised, the status of the homœopaths accepted and arrangements made either by private bodies or by the State for teaching homœopathy and the auxilliary subjects so far as they are pertinent to the study of homœopathy.

I thank you gentlemen for giving me this opportunity of meeting you and of explaining our action in the Homœopathic Enquiry Committee of India.