

who, notwithstanding great financial difficulties and personal sacrifice, try to keep alive a spark of true Hahnemannian Homœopathy in North America! It would appear that, instead of minor individual efforts by small non-influential groups, America and Great Britain, as the leading medical countries of the modern world, should each organize curricula of post-graduate instruction at well-known universities or hospitals, lasting at least two full academic years, and so set an ideal standard that will become internationally recognized for its excellence. A Fellowship in the Royal College of Physicians or of the American College is indicative of excellence and high medical attainment anywhere in the civilized world. Is it really impossible to do something similar for Homœopathy, if we put all our sincerity and will into the effort? Surely such a type of qualification in Homœopathy should carry due weight and do away with much of the miserable misrepresentation of this finest of therapeutic sciences!

—*The Homœopathic Recorder, April, 1953*

PRESIDENTIAL ADDRESS*

DR. B. K. SARKAR, M.B., D.M.S., CALCUTTA

DR. SARVAPALLI RADHAKRISHNAN, HONOURED GUESTS,
DR. JAICHAND AND FRIENDS :

It is with great diffidence that I accepted the high honour of presiding over the third session of this august gathering held under the auspices of the All India Institute of Homœopathy. If I fail to prove myself worthy of the occasion the responsibility of selecting me for this office is certainly yours. Let us invoke the blessings of God and our immortal master Hahnemann to bestow on us necessary strength,

* The All India Homœopathic Congress, Third Session at New Delhi, dated 27-11-53.

wisdom and ability to hold our own against a multitude of odds that seem to threaten our very existence.

Now that several systems of treatment are current in our country and each of them is claiming State recognition and adequate rights and privileges for their respective practitioners, they have naturally come to draw the attention of our Central Government to rootquestioning of the practical foundations of each system and even the central principle of the subject of Medicine in general. This leads us to enquire what is implied by the term Medicine, its scope and objects.

THE ROOT PROBLEM OF MEDICINE

Why do we study Medicine?—not for its own sake but for an ulterior motive. Everybody knows that man is mortal and it cannot be the aim of medicine to avoid death. Everybody seems to be born with a definite span of life which he can live out with ease or with suffering. In healthy condition a man lives and enjoys his existence; whereas in sickness a man lives but suffers. What is the criterion of health? The best answer we find in *Sushruta Samhita*, a standard classic in *Ayurveda*, to the effect that in healthy state a man exhibits best mood of spirit, senses and mind (प्रसन्नार्थेन्द्रियमणा) and this state is manifested in and through his material body which comprises the basic foundation of the human organism. The human organism is a triune entity consisting of mind, life and body. The subject for study of medicine is Man himself. As man appears to be a complex organism there are different approaches to his study according as he is looked upon from material, vital and psychological standpoints. For a scientific study of Man concepts have been framed according to these different strata in the composition of Man. But it is very often forgotten that concepts of one order (though indispensable in its field) cannot be applied to the other. Another point which is very important, is to find which set of concepts is the most relevant to our study for a par-

ticular purpose and especially when our subject of study is complex presenting different aspects necessitating different sets of concepts for their scientific study. Here the orthodox and the homœopathic system of treatment part ways. The former wants to and explain all the human organismic phenomena from the material standpoint with mathematico-physico-chemical concepts ; whereas the latter, though considering the vital aspect as the most relevant aspect of study in Medicine, gives up the attempt to formulate suitable vital concepts and is content with recording the vital phenomena at purely descriptive level. Thus the orthodox system has science but it is out of touch with concrete reality ; whereas Homœopathy lacks science but keeps closest approximation to factual reality. What we need is the Science of Man with concepts which will be of synthetical character applicable equally to the three categories of existence e.g. mind, life and matter. From this standpoint neither Allopathy nor Homœopathy is successful to raise themselves to the scientific standard required to study Man as a whole. It is *Ayurveda* that scores over the two former systems of medicine in developing concepts of *Vayu*, *Pitta* and *Kafa* in which the physical formulæ have been co-ordinated with and incorporated into biological concepts. All this talk of synthetic medicine is idle and premature before synthetic concepts are developed and put into practice for the treatment of the sick.

Medicine is neither purely a science nor purely an art in itself, but an integral whole with a special kind of relationship between doctors and patient. Dr. R. R. Bomford, D.M.F.R.C.P., rightly remarks that this relationship is the essential feature of clinical medicine ; and that degree of success that it has depends, as in other human affairs, on the skill with which both science and art are called to its aid. Homœopathy though lacking in its scientific-part has developed and perfected its art-part by discovering a technique of studying as well as treating the Man as a whole. We find that many eminent men of the orthodox school

note with regret and concern that the rapid advances in medical knowledge and the development of the resources of the medical science during the last fifty years have not resulted in a proportionate improvement in the general efficiency of medical practice. They ascribe it to the failure to develop a holistic technique on the part of medical men as the principal cause for this serious defect in the present day medical training in their undergraduate years. A medical man cannot be properly trained in this light by the present method of dividing Medicine into a number of distinct compartments as if Man can be so divided and studied. "Man, as known to the scientists" writes Alexis Carrel, "is far from being the concrete man, the real man. He is nothing but a schema, consisting of other schemata built up by the techniques of each science. . . . We do not apprehend Man as a whole. We know him as composed of distinct parts. And these parts are created by our methods. Each one of us is made up of a procession of phantoms in the midst of which strides Man the unknown." An attempt to study Man as a whole, naturally compels us to study man as an individual having the uniqueness of existence. Thus study of totality of symptoms and individualisation of patients and drugs are the pivots round which the whole Homœopathic philosophy revolves. Another point: the orthodox group, considering themselves as strictly science men, always attempts to study the things and phenomena from causal point of view. But they seem to forget the complexity of the notion of causality and the difficulty of applying the concept of mechanistic cause in biological domain where the concept of creative or evolutionary cause is the most relevant to the purpose. Life, it has been said, is like a story-book whose first few pages and last few pages seem to have been irretrievably lost i.e, life seems to be without beginning and end. Vital phenomena are in a continual flux. We can arbitrarily break the chain at some point and denominate the successive parts as cause and effect; but that is highly improper. That is why Homœopathy

discards causal mode of thing in the study of biological phenomena which comprise our subject of Medicine. Homœopathy is satisfied by nothing the co-existence of subjects and phenomena and sticks only to the descriptive level. This attitude may not be scientific, but under the present circumstances, there seems to be no other alternative technique for studying the Man as a whole and treating him as a whole. Hahnemann found the art-part of the medicine seriously defective in his time ; and also noted the mistake of the whole generation of orthodox medical men before his time who were (and still are) obsessed with the idea that a theory of causation was essential to any rule of treatment and who neglected the clinical symptoms (which were before their eyes) and carried on a wild goose chase in search of causes and explanations of such supposed causes. It was Hahnemann who placed before the world that the art-part of the healing art can be developed independently of the scientific aspects of Medicine. The orthodox group considers the Homœopaths as not being scientific enough whereas the latter consider the former as not being practical enough so far as the cure of patients is concerned. Homœopaths accept the facts on their facevalue whereas the orthodox group clamours for a theoretical explanation before they accept a fact. It is high time to repeat for the hundredth time that Homœopathy (1) attempts to explain nothing ; it offers a plan of investigation ; (2) speculates neither with theories of life nor of health, nor of disease ; (3) affords no explanation of the intimate processes through which drugs or other extraneous agents actually exert their influence upon the life-force ; (4) accepts the "Law of Similars" as a finding principle and rule of practice ; and accepts all about 'chronic miasms' and dynamisation of drugs not as theories but as statements of facts. Homœopathy may not explain the essential secrets of life and its phenomena under varying conditions but it, however, can and does deal with them. Homœopathy never considers that the mathematico-chemico-physical approach is the sole or exclusive

method of approach to the study of basic reality of existence. In the domain of medicine—a branch of human biology—its method of approach is rather psychological which is the direct relation between a conscious organism and the external universe. Thus Homœopathy looks askance at the specialists who in their zeal for identifying each tree, miss the wood. Dr. T. F. Fox very cogently remarks in one of his articles published in the British Medical Journal: There are three sorts of lawyers, judges, barristers and solicitors. But in medicine we have about 25 “ologies,” several kinds of “icians,” some “ists” and numerous “titioners.” Surely the time has come to call a halt to this schismatic process and to realise that it is not an inevitable step in the evolution of medicine. The human being is not a conglomeration of integrated complex systems. He is an individual with a personality of his own, and unless the individual is treated as such, the whole basis of our civilization crumbles to dust. If there is this unity in man, then there must be a corresponding unity in the healing art and unless we regain that unity our patients will need to seek their healers elsewhere—as an increasing number are tending to do.” There cannot be a more glaring instance of self-criticism. We believe if the situation does not improve and if the orthodox group still refuses to take heed and read the writing on the wall—not only the patients but the practitioners belonging to them might desert their camp and swell our numbers. This is one more reason why we the Homœopaths, demand State recognition for Homœopathy so that it might be provided with all the facilities to enable it to evolve according to its own genius.

What stands in the way of our Central Govt. or the Central Medical Directorate,—as a matter of fact—to accord speedy recognition to the claims of Homœopathy? This leads us to analyse the psychological make-up of the medical men of the orthodox group.

REASONS FOR ORTHODOX DISAPPROVAL OF HOMOEOPATHY

Friends, please allow me a little time to discuss the

reasons behind the apathy or in many cases, active antagonism shown by the Government, the Medical Directorate and the Medical Council of India and as a matter of fact, the Allopathic profession in general towards Homœopathy—and why they disapprove Homœopathy more with passion and less with unbiased scientific attitude of mind.

The first and foremost reason for the non-acceptance of the Homœopathic System of medicine includes three factors: habit, authority and professionalism. For centuries, since the days of Galen the great Roman orthodox medicos are in the habit of following the Law of contraries as the only law to be followed in drug therapeutics; of accepting 'materialism' as their sole guiding philosophy in matters medical; and of accepting the mathematico-physico-chemical method of study as the sole relevant approach to the study of man in health and disease and that of the actions of drugs in man in his varying conditions of health. If any system of treatment upholds a school of thought which is not only at variance but diametrically opposite to the school of thought followed by the orthodox—it is no wonder that the natural conservative inertia of human mind attempts to reject the new thought with all the means at its disposal, fair or foul. For years, the highest medical authorities have held an opinion or view—never mind whether rightly or wrongly—and who will venture to question a recognised authority? Certainly not the members of the profession to which the authority belongs. Next comes the question of trade unionism and guild mentality, which makes it resent all rebellion from within and all competition or criticism from without.

The second reason is that of vested interests. Even a cursory glance at the history of origin and spread of Homœopathy (as evidence by the article on Homœopathy in *Encyclopædia Britannica* and *Encyclopædia Americana* respectively) enables us to find out that the opposition to this new therapeutic system was not scientific but rather of commercial nature on the part of the apothecaries and phar-

maceutical concerns who were and still are afraid of losing their huge trade-profit by drug selling.

The third reason is that the orthodox medical men do not believe in the efficacy of Homœopathy as they have never witnessed cure of diseases with Homœopathic method of treatment. It may be quite true that they might not have ever observed such phenomena as described and asserted by the Homœopaths. But this is because they have never given Homœopathy a trial. It is rightly remarked that Homœopathy as it should be practised, is not easy ; indeed, it has not tried and found wanting : it has been found difficult and not tried. An instance of how a brilliant scientific man behaves and writes unscientifically may be quoted from the introductory chapter in Clarke's Applied Pharmacology, revised by Wilson and Schild, 8th edition 1952. There the authors decry Hahnemann's Homœopathy because, according to them, the said system is based on two absolutely erroneous assumptions e.g. that (1) like cures like and (2) the therapeutic action is increased by potentiation ; though they tendered a left-handed complement to Homœopathy as proving itself to be a timely check to the polypharmacy and absurd and in many cases, harmful therapeutic procedures and overdrugging in their own system. How did they come to reject the aforesaid fundamental tenets of Homœopathy which were based on observations, experimental verifications and correct logical thinking and not on *a priori* speculative hypothesis and confirmed by the experience of a century and a half ? Because they believed so. The scientific attitude of mind is thrown to the winds ; and heart comes to rule over the head—passions and prejudices take hold of a scientist's mind !

The fourth reason of denial of Homœopathy by the orthodox group lies in the fact that it is found to be practised by a majority of men, who can be technically styled as quacks i.e., who practise the art of Homœopathy without knowing the science of it. Well, this fact is deplorable, but not at all surprising under the existing circumstances. The

very fact that the method is unrecognised by the State and lies outside the jurisdiction of the orthodox system is a sufficient invitation to the petty adventures and charlatans who hang upon the society, ever ready and eager to take advantage of human suffering. The number of those who fail to obtain relief from the orthodox system of treatment is considerable. As Homœopathy does not possess the seal of the State approval no standards of competency are legally imposed on the teachers and practitioners of these healing art. What wonder, then, if certain unscrupulous people have taken advantage of the opportunities thus offered? What wonder, then, if certain people who practise Homœopathy, know little more of the system than its name? But because some unorthodox practitioners are quacks or charlatans, it does not logically follow that all must be. But the orthodox group will persist in this logical fallacy. That is one of the reason, why, in this particular case, the unwarranted assumption that the whole business is mere quackery is so strongly and widely accepted, inspite of all evidence to the contrary. The best method of stopping quackery in homœopathic practice is not the suppression and withholding of State recognition to this superb healing art but provision of adequate facilities for the teaching and practice of Homœopathy.

The last for disapproval of Homœopathy is more of a psychological nature. However much we may vaunt of our scientific attitude of mind we put our faith on a Scientific Law—not on its own merit but on the degree of intelligibility of the theory on which is based that particular law. Homœopathy is based on a Law which, at first, appears to be paradoxical and just contrary to common popular expectation. Hence even a so-called scientific mind does not feel enthusiastic to support such a Law which is decried as being merely an Empirical Law. The unprejudiced mind and the intellectual morality—the necessary requisites of a scientific spirit—seem to desert a so-called scientific mind when it is obsessed with tradition, authority, sectarianism and secular

interests. They seem to forget that many effective arts have preceded correct scientific explanations. Hahnemann's explanation of the *modus operandi* of the Simile principle in drug therapy may be incorrect and unconvincing or incomplete as the pre-vitaminic explanations of the efficacy of lime-juice in scurvy. Nevertheless scurvy was cured by lime-juice and Homœopathy actually works. Homœopathic Therapeutic Law is not a theory but a statement of facts. In our attempt to throw the dirty water of the bath-tub let us not throw the baby away as well.

CLARIFICATION OF SOME OBSCURITIES IN HOMŒOPATHY

It is high time that we Homœopaths should correct some homœopathic misconceptions which seem to have been handed down to us from previous generations. One thing I like to impress on you is the fact that we should go to the fountain-head of our system, viz, the original writings of Hahnemann to clear up any controversial subject in Homœopathy. It is my experience through prolonged study of the Homœopathic literature for the last twenty-five years that Hahnemann was clearer and more decisive in those controversial matters than his followers and exponents of his principles and practice. I will touch upon a few of the items to justify my contentions.

1. Much has been written about the position held by Hahnemann in the domain of philosophy. By many has been described as an out and out vitalist and a vehement opponent to the materialistic group of thinkers. I maintain that he was neither a vitalist nor a materialist in the pure sense of those terms but he was an integralist and accepted substantial entitative existence of mind, life and body though they are inseparably mixed up in a living organism. What he wanted to express is that "the source of life and energy is not material but spiritual, but the basis, the foundation on which the life and energy stand and work, is physical." Similarly the source of disease is not in the material body but it works in and through the body and

produces psychic, sensational, functional and structural changes in the living organism. Physicians neither treat the pure Life or Vital force nor the inner matter of the organism but they treat the living body. The human organism, according to him, is the mentalised living matter. I refer to sec. 15 ; Footnote 8 to sec. 12 ; and ft. note 16 to sec. 31 of Organon 6th edition. Hahnemann never wanted to enter into metaphysical discussions about the origin and nature of mind, life and matter or about their actions and reactions. He accepts them as facts and sticks to the plane of phenomena which are perceptible to our senses.

2. Hahnemann's conception of miasms, acute and chronic, has given rise to endless controversies which have thrown even the staunch homœopaths into rival camps and have served to weaken the solidarity of the profession to a great extent. A close and scrutinising study of Hahnemann's writings would leave no one in doubt about the connotation and denotation of the term "miasm" i.e. he used the said term in lieu of living or biological agents which modern bacteriology has proved to be consisting of micro-organisms of the fission-fungus group in the form of bacilli, cocci, etc. or the recently investigated 'virus' group. It was Hahnemann who solved the mystery of epidemic appearance of infectious diseases and their modes of prevention and control. The credit of the discovery of "contagium vivum" as one of the causes producing some acute and chronic diseases certainly goes to Hahnemann. But he differs from his allopathic contemporaries by not accepting those "biological agents" as the sole, unconditioned disease-producing cause but one of the conditions thereof. He brought in the conception of "vital susceptibility" factor of the organism which is another condition ; and the sum of all these conditions constitute, according to him, the totality of cause of disease, if we persist in retaining the usage of the term 'cause' in the biological domain. To my mind this most significant point in the maze of his 'Psora' theory was missed and the supporters or the opponents of this brilliant piece of human observation and generalisation through

logical processes of induction and deduction and experimental verification side-tracked into futile controversies. It was Hahnemann who talked about isolation, quarantine and disinfection methods in epidemic infectious disease when the whole European medical world was against him. Anyone who cares to read the medical history of that period will agree with my conclusion.

3. Similarly much has been said regarding the nature of chronic diseases and their difference from acute diseases. Here also I presume that their real significance is missed. I like to interpret the phenomena thus: Life is both the beginning and resultant of the organism. It is its beginning because it is the power which evolves it from the primordial cell onwards. It is the resultant because the organism is the system of means by which it completes and perfects itself and makes itself to be a concrete life. As there is a central life-mechanism corresponding to the whole so there is life in the parts, tissues or organs and there is life in every cell. Life is a scale of energy forming a sort of hierarchy from cell-life to collective or central life. Disease is disorder in any plane material, vital or mental—as a whole or as a part constituting or conforming to the whole. In acute disease, the disorder starts from a lower plane of life to the tissues or organs and this disorders acts on the whole or the central life. Here the disease process is the resultant of the action of 'the part' and the reaction of the whole to it. Here the disease process seems to start from outside within. The central life-mechanism is disturbed eventually but the change is of a more superficial nature analogous somewhat to the condition of induced magnetism. Whereas in chronic diseases the whole or central life is attacked or disturbed first by some morbid agent of a miasmatic nature; this central disturbance leads to disturbance in the life of the tissues, organs or cells. Here the disease process seems to start from within outwards. That is why in chronic diseases, constitutional symptoms (i.e., symptoms indicative of the disturbance of

the central life-mechanism) are more marked ; whereas in acute cases the structural and functional changes of the tissues or organs overshadow constitutional symptoms. This conception seems to clarify the difference in the evolution of symptoms in acute and chronic diseases. Hahnemann contends that the miasms responsible for psora, syphilis and sycosis are of such a nature that they attack the central life-force at the outset and the primary derangement of the central life-force thus produced, makes the organism susceptible to many other agents to develop functional and structural changes in individual tissues or organs—thus providing occasions for diverse naming or labelling of diseased conditions corresponding to diverse tissue or organs damaged. In short, in chronic diseases the central life-force is deranged primarily whereas it is the cell-life which is deranged primarily in acute diseases. Another point worthy of being mentioned in this context is that the tissue-changes in acute diseases are of reversible nature ; whereas irreversible is the nature of tissue-changes in chronic diseases. Pathologically inflammatory changes are marked in acute diseases ; whereas degenerative tissue-changes characterise the chronic diseases.

4. A current misconception seems to obsess majority of Homœopaths about Hahnemann's rejection of the vaccination therapy for prevention of small pox. Nothing can be further from the truth. There are numerous references in *Organon* that point out that Hahnemann was not slow but positive to merit of preventive therapy in the form Vaccination. Lin Boyd remarks that Hahnemann was a staunch adherent of vaccination for small-pox ; and more accurately than V. Behring. Hahnemann perceived that it was homœopathic rather than isopathic. Of course later observers like Burnett etc. noted bad after effects, both immediate and remote, of vaccination and coined the word 'vaccinosis' in imitation of sycosis. Well, a detailed discussion on the merits and demerits of vaccination is not germane to my present thesis but it is a travesty of truth to assert

that Hahnemann was against the vaccination therapy introduced by his contemporary Edward Jenner as his later followers seem to have been.

5. The Therapeutic Law of Simile may not be a Law in the strict sense of the term ; it is safe to call it a rule of practice. It is a finding principle for selection of drugs for curative purpose. "It is entirely consistent to state that a drug found by the simile may act as a contrarium." (Lin Boyd.)

(To be continued)

WELCOME ADDRESS*

DR. DIWAN JAI CHAND, NEW DELHI.

(Chairman of the Reception Committee)

Mr. President, Ladies & Gentlemen,

On behalf of the Reception Committee of the Third All India Homœopathic Congress, I deem it my proud privilege to extend to one and all of you, our most cordial welcome and thank you for kindly responding to our invitation in coming here. Many of you have come from long distances, and all of you have come at considerable sacrifice of your time, money and comfort. We are conscious of the inadequacy of our arrangements for your stay amongst us, but hope for your indulgence in accepting them because of the common bond of comradeship in the cause of Homœopathy.

For me to enumerate the qualities of the head and heart of Dr. Sarvapalli Radhakrishnan, is unnecessary because he is so well-known to each and every one of you assembled here. He is known and honoured not only in India but throughout the civilised world. He has raised the status of our motherland and the stature of her sons

*The All India Homœopathic Congress, Third Session at New Delhi on 27-11-53.

written off by an experienced "vet" as finished, past help or hope. Another veterinary surgeon, an eminent colleague with a knowledge of and respect for homœopathy, happened to see the patient. He saw a very sick animal, barely able to stand, the picture of weak and weary suffering, looking all-in, looking also "silica". The remedy was prescribed, careful instructions were given regraded exercise and by the end of the season the moribund hunter was back following hounds.

—*Homœopathy, January, 1953*

PRESIDENTIAL ADDRESS

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(Continued from Page No. 60)

6. The bed-rock on which rests the whole structure of Homœopathy is the Law of Similars. Hahnemann's concepts of dynamisation of drugs, Psora theory or even the Vital force theory are side issues—"hypotheses—pharmacological, pathological and physiological." Facts must not be confused with suggested explanations of facts.

7. Symptoms *versus* Signs :

The scientificity of Homœopathy is denied or decried as it puts its emphasis more on subjective symptoms than on objective signs. But the so-called scientists beg the very question as their premise of materialistic notion is open to serious objection. Some try to explain away this over-emphasis on symptoms by pointing out the fact that his doctrine came at a time when symptomatology was practically the sole method of diagnosis, so that other aspects did not receive the attention merited. But we can find out a deeper reasoning. The peculiar constitution of our mind is that it separates what is inseparable and then finds itself in a fix to put the parts together. The human organism is an indivisible whole of body, life and mind and after separating them for convenience of understanding the

scientists and philosophers enter into endless battle regarding the nature of the organism. Substance is thought to be separated from its quality and then the metaphysical implications of substance and quality persist in puzzling the philosophers. In fact they are one with only varying aspects. Similar might be the case with symptoms and signs. Symptoms are nothing but subjectified signs ; whereas signs are nothing but objectified symptoms. A change or a series of changes occur in the organism—when viewed objectively they are signs and when considered subjectively those self-same changes are symptoms. The reason why Hahnemann emphasises on symptoms may lie in the fact that they are directly perceived whereas knowledge of objective changes are to be gathered by indirect means, with help of accessory appliances considered to be instrumental prolongations of our senses. Hahnemann wanted to build the Medicine of Experience instead of the hitherto followed speculative medicine. Finer shades of differentiation can be perceived by senseperception of symptoms and as they help to individualise the patients and drugs they are taken into greater importance. But as our knowledge of either symptoms-totality or signs-totality can ever be expected to be complete we have to take into account both the perceptible symptoms and signs to build a mental conception of totality symptoms.

8. Hahnemann's Conception of Dynamis and Dynamic Action :

Much confusion still persists amongst a bulk of Homœopathic practitioners regarding the proper meaning of these terms as used by Hahnemann. Here also Hahnemann's own writings clarify the issue. In his first use of the word dynamic means the contrast to crude mechanical forces as pressure, thrust etc. ; by dynamic events or actions were meant those events or actions which were not comprehensible by crude mechanistic thinking. "In the sixth edition of *Organon* Hahnemann has expressly considered the world dynamic and relates some events which he considers 'dyna-

mic' e.g. the rotation of the moon around the earth and the relation of tides to the moon. These are events which do not occur through material tools or mechanical means but are without perceptible connection between cause and effect being discoverable. In another group of expressions in which magnetism and the like are employed, he is using the word in the sense of "energetics." But I think it will best explain Hahnemann's idea if we interpret the word "dynamic" by "qualitative"; and dynamic action by qualitative action. Matter may possess mechanical, chemical and physical properties but the pharmacological property of a piece of matter in the form of a drug is a special quality inherent in the physico-chemical entity called drug. It is this quality which acts on life which is a qualitative force belonging to a distinct category other than the category of matter. Pharmacological action of drugs belongs to the plane of quality—that is what Hahnemann wanted to assert. The puzzling factor is that though quality and substance are inseparable and co-exist, quality might not be absolutely dependent on substance under all varying conditions. Under ordinary conditions a substance may present chemico-physical formulation but under other circumstances special qualitative formulation of substance may appear. Medicine is concerned primarily with that qualitative aspect of substance.

In this context I may mention Hahnemann's conception of infection, which is a biological process (other than mechanico-chemico-physical-processes) of bringing about a qualitative change in the condition of the organism through qualitative forces exerted by the morbid agents. There may be chemico-physical processes underlying corresponding qualitative changes—but it is the latter which is primarily concerned in the domain of health and disease.

9. Homœopathy as a System of Medicine :

Homœopathy should not be taken as a system of medicine involving theoretical speculation. It is just the thing

against which Hahnemann fought all his life. Life is too complex to be brought under a scheme by reasoning. Life escapes from the formulæ and systems which our reason labours to impose on it. "So reasoning with life becomes either an empiric or a doctrinaire." Hahnemann noted that all previous attempts of speculative medicine were based on imperfect observations, unwarranted assumptions and hasty, undue generalisations. Hence the speculative medicine fell out of touch with concrete reality of life. As disease is nothing but altered life any attempt of classifying or systematising diseases or fixing up their causes is also bound to fail. So Hahnemann chose to be an empiricist in the sense that he refused to generalise from his observed facts. Though he could not keep this mental attitude during his old age and delved in the domain of some speculations regarding the nature and theories of chronic diseases his speculation should be taken as statement of facts and as of some practical value therapeutically. Those who want to base Homœopathy on the system of Psora-theory miss the essence of Hahnemann's outlook towards life. What I want to assert is that Homœopathy stands by itself and the Chronic miasm theory is an adjunct. An extract from a letter of Dr. E. Whitmont M.D. (New York) written to me in this context might interest many of you: "We know that the description of psora, given by Hahnemann, is correct, that it exists, though we question his explanation. Yet, we are unable to offer an essentially better one. Here we are at a loss for further explanation until we know more about the subtle mechanism of pathogenesis in general." Had Hahnemann based his Homœopathic therapeutics on Psora-theory his system would have met the same fate as those thousand and one theories and system that came into vogue in the last couple of centuries. Here he stuck to pure empiricism. The strict adherence to Homœopathic law of similars, and individualisation of patients and drugs saved Homœopathy from premature death.

THE MEDICAL PROFESSION : ITS STATUS—PRESENT AND FUTURE

As the President of an annual gathering of medical men I am expected to dwell on the social implications underlying the medical profession. I told something in 1945 as the Chairman of the Reception Committee in connection with the Registered Homœopathic Practitioners Conference, Bengal, which I find still applicable under the present circumstances though we have achieved political independence. So I hope you will bear with me if I quote an extract from my said speech to present you here. "I will be failing in duty if I do not mention anything about the present state of the Homœopathic practitioners of district towns and rural areas. Theirs is a hard lot. Have I any plan for the improvement or amelioration of their condition? My answer is yes and no. As the fate of the Homœopathic practitioners—any of all practitioners of different schools—is inevitably dependent upon the State and social conditions, it is not possible for me to present before you a clear-cut paper scheme about the ideal medical organisation. The average doctor is hideously poor and the success of a few doctors blinds public opinion to medical poverty in general. Our country is very poor and paying capacities of an average man to his doctor are necessarily very inadequate. "A doctor's character can no more stand out against such pecuniary difficulties than the lungs of his patient can stand out against bad ventilation." The real woes of the doctor are the shabby get up, the wolf at the door, the tyranny of ignorant patients, the work-day of 24 hours and the uselessness of honestly prescribing what most of the patients really need; that is, not medicine but money. "In short, the doctors need the help of the society for the moment much more than the society often needs his. The over-crowding of the profession, mal-distribution of doctors in localities, ignoble strife and competition between doctor and a doctor—make the life of an average physician one continued story of misery and despair. What then is to be

done?" The social solution of the medical problem "writes George Bernard Shaw" then depends on that large, slowly advancing pettishly resisted integration of society called generally socialism. Until the medical profession becomes a body of men trained and paid by the country to keep the country in health it will remain what it is at present—a conspiracy to exploit popular credulity and human suffering. "The present public health service maintained by the Govt. is a half-hearted and ill-organised affair. So long there is individual private practice and there is incentive for private gain, the ills which are inherent in the capitalistic system, will manifest as various modes of corruption in the medical profession and those who deal with drug-traffic. Rightly Bernard Shaw maintains that there is nothing more insane in our social system than allowing a doctor's income to depend on the illnesses of his patients. Where struggle for existence and business come in, all this talk of nobility of medical profession is nothing but a farrago of nonsensical rhapsody. Still we the members of the medical profession have to make the best out of a bad job and we must observe some code of honour for the cause of the suffering humanity.

On behalf of the whole homœopathic profession let me make this observation: as a modern civilised Government should observe religious neutrality i.e., it should allow full scope to the followers of particular creeds or religious and interfere only when one sect infringes on the fundamental civic rights and liberties of another sect—it is high time that the Government should adopt a similar attitude to different schools of healing art. The Government should not identify itself with any particular system of treatment. Before the dream of a synthetic system of Medicine is materialised let the Government provide ways and means for the fullest development of each school of medicine. To the people at large I appeal that it is also as much their concern to have efficient physicians of different schools as

no particular system holds a monopoly of truth, knowledge and cent per cent efficacy in curing all the diseases that human flesh is heir to.

THE ATTITUDE OF THE GOVERNMENT TOWARDS HOMŒOPATHY

But I am afraid the Central Government still feels very hesitant to recognise Homœopathy officially and to accept the qualified Homœopaths under any scheme they are going to undertake. It is reported that the Government has decided to organise a two-years course for Auxiliary Health Personnel for the villages under community projects and to train Allopaths only under that scheme. The Government has also excluded the qualified Homœopaths from the Employees State Insurance Corporation Scheme and the Government Employees Insurance Scheme though the schemes are defective and condemned as such by the Indian Medical Association. This certainly goes against the agreed proposals in the *Ad Hoc* Committee regarding utilisation of Homœopaths in Health Services. But the greatest handicap the qualified Homœopaths are labouring under is the deprivation of their certificatory rights with regard to sick or fit certificates as well as birth and death certificates. It is high time that the Central Government should take up the matter urgently and settle it.

A very anomalous situation exists in W. Bengal. The General Council and State Faculty of Homœopathic Medicine, W. Bengal was established on the 1st April 1943. It is a statutory body constituted by an executive order of the Governor of the State of W. Bengal. By virtue of powers vested on the Faculty it issues diplomas to successful candidates authorising them to practice Homœopathic Medicine, Surgery etc. within the State of W. Bengal. It means that they are allowed to take charge of the patients and treat them. But is it not a paradoxical situation that the certificates of medical leave etc., issued by those registered homœopaths are not accepted by the Government? What does it lead to? Either the people undergoing

Homœopathic treatment will have to seek false medical certificates from allopathic practitioners or those who need medical certificates will not agree to be under the treatment of these registered homœopaths or would have to place themselves under the treatment of an Allopath towards the fag-end of their illness. In a way this situation goes against the spread of Homœopathic practice in the country.

I can not help passing some adverse remarks against the opinion of the Medical Council of India of having only one system of medicine current in the country. The introduction of Homœopathy only at a post-graduate level will defeat its very purpose. It is impracticable physiologically, psychologically and economically. No profession can thrive on the off-chance of securing converts from practitioners of other systems of medicine. I demand with all the emphasis that my language can command, completely separate Homœopathic institutions of undergraduate course and then post-graduate courses if possible. Considering the vastness of our country, the huge deficit in the supply of medical men, the wide gulf existing between the different strata in our society, the enormous difference in the standard of life between towns and villages, a graded method of medical training and graded medical service are imperatively necessary for the present state of our country, notwithstanding whatever might be the suggestions of the Bhole Committee set up during the British regime.

It is of incidental interest to note that the resurgent China under the leadership of General Mao Tse Tung, has introduced a scheme of medical training of only one-year-course to meet the health demand of its vast population. Fully aware of the shortcomings of this plan China takes its real situation into account and does not indulge in highsounding phraseology or launching of highly impracticable schemes.

In this context I like to draw the attention of the Government, the public and the Homœopathic profession, in particular, to the discriminatory system of levying excise-

duties on alcohol by the different States of the Indian Union. The introduction of "Prohibition" systems in the States of Bombay and Madras has made the matter more complex. As for example, Homœopathic medicines containing spirits of Indian manufacture may be imported into the State of Bombay from, say Calcutta provided the Bombay Excise-duty at the rate of Rs. 70|5 per proof gallon is paid in Calcutta to the credit of the Government of Bombay; whereas Homœopathic medicines containing alcohol which are of foreign manufacture can be imported into that State at the rate of Rs. 45|- only. This arrangement will certainly encourage the import of foreign Homœopathic medicines at the cost of Indian products; and this will certainly go against the expansion of Indian trade and manufacture of Homœopathic medicines. It is also to be noted that the rate of Excise-duty in the Bombay State imposed on alcoholic preparations of Allopathic drugs of Indian manufacture is much less than that imposed on the locally manufactured Homœopathic drugs. 'Health' may be a "concurrent subject" according to the New Constitution of our country, but it is our considered opinion that no State should act in a manner prejudicial to the interests of another State or the country as a whole, economically or otherwise.

A WORD TO MY FELLOW PRACTITIONERS

Friends, on our part we must play the game, fair and square. We must deserve first before we desire. The general level of culture in average Homœopaths must be raised. We must educate ourselves in a way as to command highest respect and confidence in the society. We must not be led astray by the superficial notion of 'Science'; we must remember that Science is in the method and not in the thing. We must remember that the scientific spirit is the evidence of a mind whose every avenue is open to the approach of truth from every direction. Like the tree it is rooted and founded in all the eternal truths that the past has revealed but is stretching out its branches and ever-

renewed foliage to the air and sunshine, and takes into its life the forces of to-day. We must remember that the scientific attitude of mind must bring independence in observation and conclusion, some idea as to what an exact statement is and some conception of what constitutes proof. And we must remember that the characteristics of a truly scientific man is not the amount of experimental and laboratory work he has done, still less the usage of a time-bound scientific terminology for so-called scientific explanations ; and that it is a mental attitude of intellectual morality, characterised by open mindedness, freedom from prejudice and fairness.

WHAT SHOULD BE OUR ATTITUDE TOWARDS HOMŒOPATHY ?

Enough has been said through the platform and the press in defence of Homœopathy. But I hold that mere static defence is of no effective value. We should try to develop the spirit of an aggressive defence. We should not shut ourselves within the precincts of thoughts and principles enunciated by Hahnemann, we must face all new facts and new ideas in medicine pouring upon us and try to evaluate them according to our light and assimilate them if possible. The best definition for scope of a physician, we find in *Ayurveda*—

व्यावेस्तत्त्व परिज्ञानं वेदनायाश्च निग्रह ।

एतद्वैद्यस्य वैद्यत्वं न वैद्य प्रभूराजृषः ॥

A physician's sphere lies in his acquisition of knowledge regarding diseases in all its aspects and his ability to relieve the sufferings of a patient; he is not the master of life.

Research works with regard to various problems and gaps in Homœopathy should be started in right earnest. Byod's electrophysical researches concerning Emanometer works and Paterson's researches in Bowel organisms and preparation of Bowel nosodes etc. are cases to the point. These certainly help to develop the science-part of Homœopathy. Attempts are to be made to develop synthetic concepts to raise semiology to the scientific level.

So we should keep our mind open to all truths concerning medical, coming from whatever quarters. No system of treatment holds the monopoly of whole knowledge of medicine. We must not only be alive to the limitations in scope and sphere of Homœopathy, but also remain ever active to extend its scope and sphere. We as Homœopaths, must be ready to grapple with every new medical problem that might confront us and be ever ready to give their solutions in our own way. "The great experiment" as Hufeland remarked long ago "which mankind has attempted upon itself, called medicine, is not yet ended and indeed as all earthly things, will never be brought to a perfect end because it is an experiment which deals with the most intricate secrets of nature viz. life. So we cannot afford to rest on our oars with the idea that last words in Medicine have been spoken by Hahnemann. "Go on we must ; for if we do not, time itself will force us forward inspite of our fancied immobility."

OUR DEMANDS

I think, I voice the unanimous demands of the whole Homœopathic profession in India, from the Central Government to implement the recommendations put forward by the Homœopathic Enquiry Committee, the suggestions made by the Planning Commission to give top priority to Homœopathy within the first five-year-plan and the agreed proposals arrived at the *Ad Hoc* meetings held under the chairmanship of the D.G.H.S.

Homœopathy is only a century and a half old. It has still to fight hard and long before it secures its rightful place in the Health Scheme of our country. I conclude by quoting the words of the Prophet of the Life Divine. "One needs to have a calm heart, a settled will, entire self-abnegation and the eyes constantly fixed on the Beyond to live undiscouraged in times like these which are truly a period of universal decomposition."

JAI HIND—VANDE MATARAM
