

patient and not the disease," and the conception of the "totality of symptoms" constitute, therefore, the central ideas of Hahnemann's revolutionary medical therapy. This conceptional wholeness of man, along with the therapeutic wholeness of suffering individuals, as envisaged in Hahnemann's psychosomatic conception of disease, is a medical philosophy that has yet to be properly assessed.

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SOME SUGGESTIONS FOR THE IMPROVEMENT OF HOMŒOPATHY

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1. So long as Homœopathy is not fully recognised by the Central Government, it is the duty of every sincere and devoted Homœopath to see that the system of medicine continues to be recognised by the people, for recognition of the people cannot but lead ultimately to the recognition by the State. There are certainly many difficulties in the way of laying a solid foundation to the teaching and practice of homœopathy in this country by a purely non-official organisation independent of the State and this is true not only of Homœopathy but of any other branch of theoretical or practical science. But the solid logical foundation on which homœopathy is based and the innumerable practical tests through which it has passed during the past century and a half leave no ground for any doubt as to its final and permanent acceptance as an efficient, if not the most efficient, system of medicine. Moreover, the growing recognition by the modern physiologists of a vital force beyond the reach of physics and chemistry, on the one hand, and the attempts at finding out an explanation of the effects of succussion and potentisation in terms of modern scientific theories, on the other,

are gradually tending to reduce the gap between the opposing schools of thought. We may hope that this optimistic view will be shared by all who are intimately interested in the development of homœopathy.

2. Our first need is of a central organisation for the whole of the country, which will take upon it the charge of formulating the main principles relating to homœopathic medical education and homœopathic practice. All provincial or other organisations should be affiliated to this central organisation, and should work in harmony with it, though not necessarily formally subordinate to it in matters of internal management. This C.O. (central organisation) should arrange conferences, mobilise public opinion, carry on negotiations with the State, issue suggestions and instructions relating to matters connected with the practice of homœopathy, manufacture of drugs, rules for registration of practitioners, and so on.

3. We should have a botanical garden, in which the medicinal herbs, creepers, plants and trees may be grown. The Indian soil is very prolific and it should be possible to find out a suitable site in one or two different regions where such a garden can be located. The C.O. may contact the officers in charge of the existing botanical gardens, obtain necessary information and work out the practical possibilities. Quite a number of members of the vegetable kingdom are useful bases of medicines belonging to other systems of medicines as well and the botanical gardens as suggested above, would supply necessary bases not only for homœopathic drugs, but also for other kinds of drugs, for instance, Allopathic and Ayurvedic medicines. A joint effort in the direction should be made by the sponsors of the different systems of medicines.

4. We should have a standard Indian Pharmacopeia of homœopathic drugs and also a standard set of formulæ for preparing higher potencies from mother tincture or other kinds of bases. The foreign pharmacopeias may be taken as the starting point, but we should have our own phar-

macopeia, suited to the drugs of both foreign and indigenous origin. There are quite a large number of drugs (and the number is increasing) which have no place in foreign pharmacopeias. The C.O. should compile a standard Indian Pharmacopeia which it should be obligatory for every manufacturer to follow. In this matter the C.O. should of course take the advice of the leading manufacturers in this country, who have already been working along these lines.

5. We should have well-equipped modern laboratories for the preparation of mother tinctures or bases and the higher potencies. The laboratories must be manned and supervised by competent scientific men and should be beyond criticism. It is not justifiable that we should eternally depend on imported crude drugs, mother bases, back potencies and higher dilutions. We must be self-sufficient in this matter. The C.O. should inspect and advise these laboratories as to the best methods to be adopted or the best appliances to be used.

6. There has been a tendency in India and also in countries outside India to prepare homœopathic drugs which are not strictly Hahnemannian. While it is true that homœopathy should expand and develop and should not remain confined to the Hahnemannian drugs, it is also true that the fundamental tenets on which the theory and practice of homœopathy are based, should not be violated or ignored. It is not easy to become an independent Hahnemann and formulate original homœopathic theories contradictory to Hahnemann, nor is it fair or honest to pass these new theories in the name of homœopathy. The C.O. should keep a vigilant eye on such theorists and practitioners and should include in their standard pharmacopeia only those medicinal preparations which, in their considered opinion, adhere to the Hahnemannian principles. All preparations outside the standard pharmacopeia should be very carefully examined and only those which are strictly homœopathic should be incorporated in the pharmacopeia from time to time.

7. We should have a standard Materia Medica. This does not mean that we should not read any book on Materia Medica except the standard one, but we mean that there should be one which should be regarded as the most authoritative and should be used for reference whenever necessary. We should certainly read Kent's and Farrington's lectures on Materia Medica, but they are not convenient as a dictionary for reference. The C.O. should compile a standard Materia Medica which would combine the essentials of Clarke, Hering, Cowperthwaite and Boericke.

We should also have a standard repertory, which should include not only the polychrests but also the new medicines which are being used in recent times. It would of course be a really herculean task and would require a tremendous amount of time and energy. A volume intermediate in size between Kent and Knerr would probably be an ideal one.

8. Homœopathic Medical Education should be imparted through two different grades of institutions. We may call them Senior Grade College and Junior Grade College, or we may call them college and school respectively.

The college course should extend over a period of four years, the minimum qualification for admission being the passing of the Matriculation or an equivalent examination.

The school course should extend over a period of two years and the minimum qualification for admission being the passing of the Class IX examination of a High School.

The syllabuses may be drawn up by the C.O.

Students passing the final examination of the school or of the college should be entitled to practice and should have the same legal status.

Two different grades of Allopathic medical education were in vogue even only a few years ago and considering the realities of living conditions of the average Indian, especially in villages, it is highly necessary that a large number of qualified homœopathic practitioners should be

distributed all over the country. This cannot be done if we insist on a single very high standard of syllabus and examination. The number of students passing out of the first grade colleges will necessarily be very small, as it has actually been even in the case of Allopathic colleges, and the villages will continue to remain in dire need of medical aid. Moreover, of what use is an F.R.C.S. or a modern X-ray apparatus to a poor villager who cannot procure even a decent cup of sago or barley?

It is understood, however, that the above suggestion for a school or lower grade college, will hold good only as a temporary measure. When the standard of living in the rural areas will improve and the village folk will be in a position to pay for physicians with higher qualifications, and at the same time, there will be a sufficient number of first grade colleges all over the country, capable of turning out a sufficient number of doctors, we may then do away with the lower grade colleges.

Every college should have an efficient hospital attached to it. These hospitals will serve the double purpose of treating indoor patients and of giving an opportunity to the students for practical clinical work under proper guidance. These attached hospitals may also be used as centres for proving new medicines.

9. We should have well-equipped libraries both under the C.O. and under provincial organisations. It is a pity that there is no library, public or private, where we can get a comprehensive collection of homœopathic books and Indian and foreign journals on homœopathy. At least every city should have one such library, where the students and practitioners may read and consult books and journals and keep themselves sufficiently informed about the latest researches in homœopathy and about what is going on in the homœopathic world.

It is highly desirable that there should be a homœopathic museum in every big city. It will not mean too much expense. A collection of the original sources of the

homœopathic drugs belonging to the various groups, e.g., the vegetable kingdom, mineral kingdom, animal kingdom, etc., would be highly interesting and instructive, both for the students and for the general public.

10. An attempt should be made to popularise homœopathy by means of lectures arranged at convenient places on convenient occasions, periodical publications which would appeal to the common people, organisation of exhibitions in public places on suitable occasions and by cinematographic shows depicting the essential and practical features of homœopathy.

11. With regard to the expenditure necessary for the maintenance of schools and colleges and for carrying out the other suggestions, it is obvious that it should be met from four main sources, viz., (1) the amounts received from the practitioners in connection with their registration, (2) the fees received from the students, (3) public donations and (4) contributions from the State and such bodies as Municipalities and Corporations. The C.O. as well as the provincial organisations should try their best to tap the possible sources.

12. Every sincere believer and lover of homœopathy should rise above personal prejudices, personal jealousies and personal ambitions in order to serve the true cause of homœopathy. Combined effort is essential, but the combination should be one of mutual trust and co-operation and not of ill will, party feeling and love of domination. The sincere and honest efforts of a combination of capable men for the development of a system of medicine based on the solid rock of logic and experience are bound to succeed.
