

DRUG PROVING

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It is a pity to see that no attempt is made here in India for Homœopathic Drug Proving, and that aspect of the system is omitted altogether.

"Drug Proving is as important a vital part of homœopathy, as the law of similars itself; its cessation is what is spelling the doom of homœopathy, it is on that homœopathy must depend and thrive. While homœopaths persistently proved drugs, even unintelligently, homœopathy grew with leaps and bounds. As homœopaths ceased to prove drugs, homœopathy began to fade out, and is now fading fast from the picture." This is the statement made by Dr. Alfred Pulford M.D., in the Homœopathic Recorder of June 1946, showing the importance of drug proving.

We know of a time, when homœopathy was growing with leaps and bounds in America, with so many eminent doctors, specialised in all allopathic branches of medicine, but practising only pure homœopathy. There was a time when in U.S.A. alone, there were about 102 homœopathic hospitals accommodating near about 6,500 inmates. The Hahnemann Homœopathic College and Hospital of Philadelphia was so big that it was conducted in a twenty storeyed huge building. As for drug proving we simply wonder to hear about the pains taken by doctors like Hering, Swan, Allen etc. during their whole life-time.

But now what is the condition of this system in that country? The following statements of two eminent homœopaths of that country are interesting.* "I am sorry to have to inform you that the situation in respect of homœopathic work in the U.S. is very different from the picture that still seems to prevail abroad. The formerly Homœopathic Colleges have for all practical purposes done away with

* These are personal letters from Dr. Edward Whitmont M.D., New York, dated 11-7-55, and from Dr. Julia M. Green, M.D., Secretary of American Foundation of Homœopathy dated 18-7-55.

homœopathy as part of their curriculum. The only mentioning of the word homœopathy embarrasses them." The other is, "In fact Homœopathy is at a low ebb in the States at present; having been fought by the American Medical Association which has succeeded in closing under-graduate homœopathic schools." This shows us clearly the conditions of homœopathy in the U.S. at present.

A system of treatment, so prominent at a time, met such a tragic fate. Why has this happened? Is it due to quackery in the system? Is it due to the difficulty of becoming a master physician in this particular line? Or is it due to their failure to produce another Hering, Kent, or Farrington? Or it got strangled, when allopathy marched triumphantly with their antibiotics, and sulpha drugs? Any how Dr. Pulford's assumption is to be valued. There is no harm in believing that the rock on which homœopathy was built, was Drug Proving. When that was forgotten ill-fate began to appear.

Now our vast country, from the Himalayas up to Cape Comorin, is a big storehouse of numberless varieties of drugs. We already knew the full or partial clinical uses of thousands of unproven drugs, which luckily the diverse systems of medicine already prevalent in our land have brought forward. It remains for us to take them, prove them and discard the useless. Then we may be able to give the homœopathic world many more polychrests. Going through the book of "Nosodes" by Dr. H. C. Allen, we are simply wonder-struck to see the variety of things the homœopaths attempted to prove. Leaving aside the material drugs, they proved even energies like Magnetism, Electricity, X-Ray etc. But once they stopped proving drugs, they never attempted it again. As a result of this, they are facing the present tragic situation.

Re-proving is another aspect which we should take up. Because, there are many partially proved and ill-proven remedies with 'overlapping' useless symptoms in our Materia Medica. This state of affairs we should avoid after a

thorough re-proving of the same drug. Moreover almost all the polychrest drugs were proved a century ago, after which the world has changed a lot. Human beings, their culture, their mode of life (even vegetable kingdom) have changed. So we should keep with the time. There is no harm in proving Aconite, Bell, Bryo etc., again and again in different countries, different seasons, on different persons and different races. The same drug at different altitudes and latitudes is different in its constituents. For example, Aconite and Ergot, of different countries vary a lot in their amount and number of alkaloids present. So we should prove all of them and take the best, instead of depending upon the original drug, proved about 200 years back.

Drug proving should be made compulsory in Homœopathic Colleges. I know many brilliant students who coming out from our Homœopathic Colleges in Calcutta, completing the four years' course, either disbelieve or partially believe in Homœopathy. This was the condition of American Colleges also. The only remedy for this, is to introduce drug proving in the College curriculum. Then in the 4 or 5 years each student should have seen a good number of provings. They should themselves individually or in batches must have proved one or two polychrests and one half proved or unproved drug. Similarly there should be special societies in every state for drug proving. If such an attempt is made I am sure, Homœopathy will win the medical Derby of India.