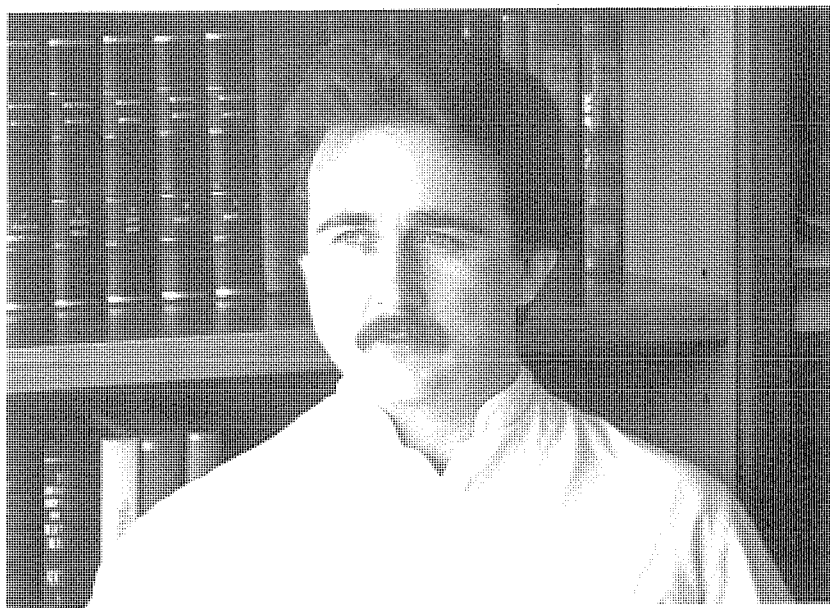


# HOMOEOPATHIC MEDICINE

THEORY, METHODOLOGY, APPLICATIONS



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General Director, Medical Institute for  
Homoeopathic Research and Application

**HOMOEOPATHIC  
MEDICINE**

**THEORY, METHODOLOGY, APPLICATIONS**



*dedicated to  
the suffering Humanity*



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# FOREWORD



## FOREWORD

It gives me great pleasure to write a foreword to this book written by my friend and illustrious colleague, Dr. Spiro Diamantidis. We met for the first time in 1976 at the time of the Congress of the International Homoeopathic Medical League which was held in Athens that year. Ever since, I have watched with keen interest the tremendous work Dr. Diamantidis has done for the promotion and spread of Homoeopathy, especially in Greece.

In the 5th Century B.C. it was Hippocrates, the father of medicine in the West, who made a mention of the Homoeopathic therapeutic law, Similia Similibus Curentur. It is a strange fact of history that this truth has remained buried for so many centuries till the human experiments with medicines (termed "provings" by Homoeopaths) were conducted by Hahnemann, making it possible that this golden rule can be applied freely and with certainty.

I have had the privilege of watching with deep interest the growth of Homoeopathy, whose very name has Greek roots, in the land of Hippocrates. At the time of the First International Homoeopathic Congress in 1969 there were only 2 or 3 Homoeopaths and it was a Congress jointly

organized with the practitioners of some other medical systems. By 1976, within a span of 7 years, it had already taken deep roots and there was a sizable number of qualified doctors who had taken to the practice of Homoeopathy. That trend has continued and in this process Dr. Diamantidis is making a big contribution.

It has been a privilege to be one of the first to read through this delightful book while it was still at the stage of a manuscript. It is remarkable how the author has been able to touch on every aspect of Homoeopathy and present so much material in a concise form.

This comprehensive survey includes not only the basic tenets of Homoeopathy, with an attempt at explaining their rationale, but also its therapeutic methodology and some idea of its treatment potential in different clinical conditions, right up to the latest and most talked about disease - AIDS. A brief account is given of the history of medicine, the history of Homoeopathy and a biography of its pioneers.

A chapter on Homoeopathic medicines gives all that one needs to know about the special methods of the preparation of our medicines. An attempt to try and explain the process of dynamisation in Homoeopathic pharmaceutical techniques is surely commendable. It deals with a subject that is mostly avoided because of difficulty of comprehension.

A hypothesis is presented on the mode of action

of the infinitesimal doses used by the Homoeopaths and called by them "Potencies". So far, a lack of explanation in this direction has been the greatest stumbling block in a wider acceptance of Homoeopathy. It has not been so difficult to convince people about the scientism of the similia principle but a materialistic mind cannot accept the use of medicaments in doses so small as to contain no molecules or atoms, or diluted beyond the number of Avogadro. In this field further work is going on and perhaps the absolutely acceptable explanation has yet to be found.

Having been used to demonstrable scientific methods and statistical analysis the scientific world is no longer content with the anecdotal method of reporting that has so far been used in Homoeopathy. I am very pleased to see that the author has given reference to some of the most recent research publications which rule out the Placebo effect in the case of Homoeopathic trial studies.

The presentation shows that Dr. Spiro Diamantidis inherits the philosophy and wisdom born from the soil of Greece, the ancient cradle of civilization in the West, and has added to it the logic and science of present day world. The numerous references he has given at a number of places shows the wide reading and indepth study that he has made of the whole subject.

The Homoeopaths on reading this book will get a firmer scientific base for their beliefs. For the



orthodox colleagues I must put a word of caution: If they go through this text carefully and with an open mind they run the risk of completely changing some of their own concepts and becoming Homoeopaths.

I have no doubt that doctors, medical students and even lay people will be greatly enlightened about the subject and will enjoy and benefit from a perusal of this book as much as I have.

Prof. Dr. Diwan Harish Chand

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# INTRODUCTION



## INTRODUCTION

Health has always been one of the greatest blessings of humanity. An asset for the acquisition of which great efforts are made everywhere in the world. Huge amounts from national budgets are being spent on research and development for new medicines. The war against disease is in constant rage. In this field Homoeopathic Medicine comes to add its therapeutic tools for the use of any doctor who could perceive their usefulness. Homoeopathic Medicine has been beneficial for millions of people all over the world during the two centuries of its history. Based on stable principles and scientific laws, it constitutes a drastic, highly effective therapeutic system whose action is more causal than symptomatic. It is considered a beneficial offer to the suffering humanity, free from the danger of side effects, since no homoeopathic pharmaceutical has ever been recalled in its 200 years of application due to side effects or any other reason.

Homoeopathy has often been at the centre of controversy. Other times it has become the target of contention which somehow never reached extremity, as if the doubters had themselves the feeling that Homoeopathy has more substance and value than they could perceive from looking

at the surface. We should not forget that C. Herring, Professor of Medicine in 19th century Germany, was the greatest adversary of Homoeopathy. C. Herring was given a grant by a publisher to study Homoeopathy in order to collect evidence proving its lack of foundations. He studied Homoeopathy for several years and finally he comprehended deeply the laws, ascertained himself about its justness and its usefulness and became its defender. After a few years, he compiled the most extensive Homoeopathic pharmacology (Materia Medica) which exists today and he served Homoeopathy with great enthusiasm. I, too, faced Homoeopathy with deep scepticism and a tendency for contention. This of course was natural at the beginning, since I was coming in contact with, what was for me, a totally new therapeutic system and my way of thinking was adapted to the classical medical education I had received. In spite of this, my intensely investigative disposition made me unable to ignore Homoeopathy, when I first made contact with it. I studied it and put it through every scientific medical filter in my disposal. Finally, I was absolutely convinced.

It is because I believe that all fellow physicians, as well as every person, require information to understand a scientific and indeed a medical system, that I undertook this attempt in book writing. My aim is to explain simply, but at the same time scientifically, the principles of Homoeopathy. I therefore endeavored to cover with this book two areas: The area of general

information and the area of scientific documentation. This way, both the reader who first contacts a scientific subject and the specialist scientist can have their respective interests covered. Health, after all, is a subject concerning both the physician and the patient and it is only fair that the patient be informed about the therapeutic effort of his doctor, so that he can accept and approve it.

In this book, I have tried to put across, as best as I could, the essence and the deeper meaning of Homoeopathy, so that the reader can form his own personal perception of it. This I have done because it is known that incorrect and inaccurate information are the most frequent reasons for the lack of understanding which we have about several scientific and other subjects. Hence, when writing this book, I tried to remain faithful to the principle of correct and efficient information on Homoeopathy, to the best of my ability.

I also have tried to avoid every comparison, as far as possible, to other systems of therapy, because that would have been an incorrect approach, given that medicine is one and indivisible. I took care to document my personal beliefs about Homoeopathy, which are based on the classical homoeopathic theories, with up-to-date knowledge from scientific research material which I have studied. It is my sincere hope that homoeopathic medicine will co-exist with the rest of the healing arts in the wrestling ring of clinical action, so that it can demonstrate

its valor and benefits to humanity.

I feel obliged to express my deep appreciation and gratitude to all those who assisted me in preparing this work. In this regard, I would like to thank:

The Royal London Homoeopathic Hospital.

The English Faculty of Homoeopathy.

The Homoeopathic pharmaceutical industries:  
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The Documentation Department of the Greek National Research Institute and especially Mr. G. Karambasis and Mrs. M. Zavou.

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Finally I offer my sincere gratitude to Professor Dr. Diwan Harish Chand for his moral support to my writing endeavor.

Spiro A. Diamantidis, M.D  
Vis. Prof. M.A.

## Chapter 1

# WHAT IS HOMOEOPATHY





## A: What is Homoeopathy

Homoeopathy is an *integrated medical system*. As such it encompasses both parts of the medical science, that is, the diagnostic and the therapeutic aspects.

a) **The diagnostic aspect:** Diagnosis as a medical action is of great importance to the clinical medical practitioner since it will constitute the base, for the therapeutic treatment he will recommend. In Homoeopathy, the diagnosis is based on the homoeopathic history and on modern laboratory methodology, with the homoeopathic history serving as the main basis. The information elicited, in taking the patient's homoeopathic history, provides to the experienced homoeopathic practitioner almost all the essentials that are required for a dependable diagnosis of the patient's morbid predispositions. As an auxiliary complement to the homoeopathic history come all the known laboratory examinations whose usefulness is the confirmation of a diagnosis, the follow-up of a patient's progress, or, sometimes, the solution of serious problems in differential diagnosing.

b) **The therapeutic aspect:** In the sensitive area of the therapeutic action, Homoeopathy offers a powerful, yet harmless, system of therapy. The

homoeopathic therapy is accomplished with medicines. Here it must be emphasized that these medicines are prepared from natural substances and used in the very form in which they are to be found in nature, after they have undergone a special process known as potentization. The result of potentization is that the final homoeopathic medicine is in such a great dilution that there are no side effects while it still maintains its powerful therapeutic action.

In its therapeutic aspect, Homoeopathy is, to a great extent, self-sufficient, cooperating however with other systems of therapy wherever this is warranted by the state of health of the patient, without fanaticism or a sterile attitude of science for the sake of science.

Being an integrated medical system, Homoeopathy has principles and laws which govern its application. It also has a complete protocol of treatment which applies to all cases. Up to here, only a condensed definition of Homoeopathy was given. In the subsequent chapters a lucid analysis is provided of all that concerns the homoeopathic history, the diagnosis, the medicine and other relevant principles.

## **B: The Law of Similars**

Homoeopathy is the derivative of the Greek

words OMIO and PATHOS, which mean SIMILAR and (translated literally) PASSION / SUFFERING. The two Greek words, merged into one, form the word OMIOPATHITIKI (HOMOEOPATHY), which states the essence of Homoeopathy ... *"the similar cures the similar"*. This linguistic analysis of the term Homoeopathy reveals the first and most fundamental law of Homoeopathy: *The Law of Similars*. Hippocrates was the first doctor and philosopher who made substantive references, in his writings, to the term OMIOPATHITIKI.

*"Similars are the cure of similars" or "from the similars it becomes illness and from the similars offered health restored"*. The Law of Similars can be expressed colloquially as follows: *"An illness can be cured by a medicine which has the capability to produce symptoms similar to those of the illness it purports to cure"*.

Let us look, however, at the Law of Similars through some examples:

#### Example A

Scarlet fever is a contagious disease, usually of childhood and constitutes an acute streptococcal infection. The disease begins with sudden high fever, chills, intense headache, nausea and vomiting. The pulse is rapid, the pharynx turns deep red and swells. After the fourth day, the tongue appears red with dilated papilla resembling red berries (morular tongue). The face takes on a marked redness, the eyes shine and show anxiety and fear. The child under the

influence of the high fever, experiences anxiety, excitement and, often, delirium. This is the typical pathological picture that many parents come to know when their children are infected with scarlet fever.

Let us now see another pathological picture, this one produced by **Belladonna**. Belladonna is a plant, the crude element of which has been used, during the past two centuries, in the treatment of such disorders as colic, asthma, gastritis and other. Being a widely used medicine, it was found in the drug cabinets of many homes, and consequently it was common for small children to become accidentally poisoned with Belladonna when they ingested it out of curiosity, in moments when they were not supervised. The term "*Belladonnism*" refers to this kind of poisoning.

In belladonnism, we see the following pathological picture: sudden high fever, intense throbbing headache, nausea, vomiting, deep red tongue with swollen papilla resembling berries, a deep red face with shining eyes, anxiety, photophobia, dilated pupils. The child shows excitement and later delirium, during which the child jumps out of its bed, pushing everybody away from him in an effort to flee from the dogs which, it thinks, are chasing it.

This pathological picture is due mainly to the alkaloids atropine and scopolamine, ingredients of the Belladonna plant. We see therefore that the two pathological pictures, of scarlet fever and Belladonnism, are similar. That is, scarlet fever

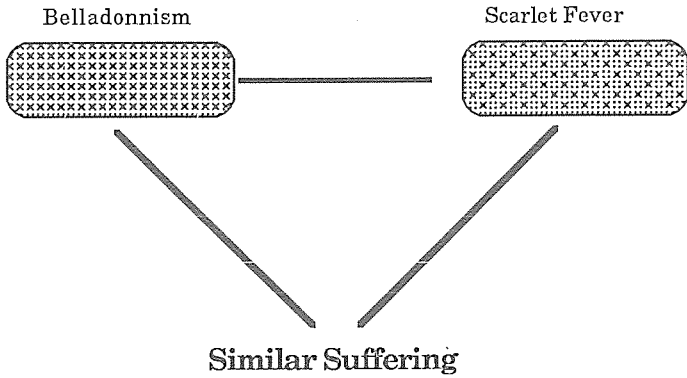
and Belladonnism, produce "similar suffering" which means a similar pathological picture. Two hundred years of clinical experience of Homoeopathy have shown that a patient suffering from scarlet fever, can be cured with the homoeopathic medicine prepared from Belladonna by means of a special natural process. This process is called potentization and will be explained in detail in subsequent chapters.

What we see then, is that a natural substance, has the capability to produce a pathological picture in a healthy person. This same substance, after undergoing a natural process (potentization) and becoming a homoeopathic medicine, cures another person suffering from scarlet fever. In other words, it cures a person suffering from the "similar suffering" to that which is produced by the same substance when ingested in its natural state by a healthy organism.

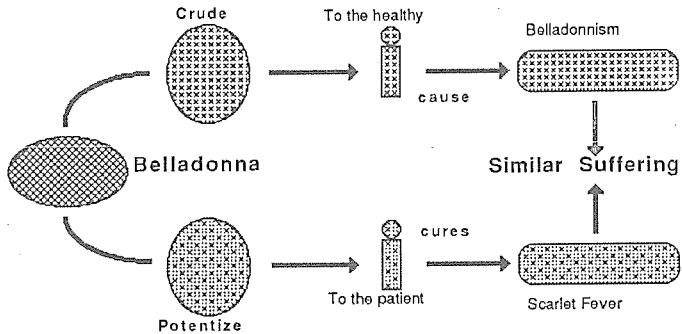
### Example B

Let us now refer to the pathological picture of a person suffering from **Cholera**. This person presents mild colic pains in the abdominal area, rice-like diarrhoea, that is, a watery stool with solids broken into small particles like rice, drop of blood pressure and great debility. The face is pale, weary with sunken cheeks (Hippocratic face).

If we now compare the pathological picture manifested by a person poisoned with **Camphor** to that of a person suffering from cholera we will see that the two pictures are similar, that is, they



**Fig. 1:**  
Schematic representation of the notion of "Omion Pathos"  
(Homoeopathy) -- Similar Suffering



**Fig. 2**  
Schematic representation of the Law of Similars

have "similar suffering".

Camphor is a chemical substance distilled from the pulp of the tree **Cinnamomum Camphora**, and in the past it has been used as a pharmaceutical substance and indeed as an analeptic of the heart and respiration. The poisoning from Camphor is known as *Camphorism*. In the case of Camphorism we will have a pathological picture which includes abdominal pains, diarrhoea often rice-like, muscular debility, drop of blood pressure and a face that is pale, weary, with sunken cheeks. This action is mainly due to the terpenic carbohydrates pinenion and cymenion contained in camphor. We thus can say that the clinical experience has shown us again, that we can cure persons suffering from cholera if we administer to them the homoeopathic medicine which is prepared from camphor. When the camphor undergoes the special natural process called *potentization* it is transformed to a homoeopathic medicine which cures cholera.

We have many similar examples of substances whose pathological pictures, on healthy organisms, are similar to the pathological pictures of various diseases. All these pathological pictures compose the **Medical Pharmacology of Homoeopathy** which is called **Materia Medica** and which is extensively analyzed in the following chapter.



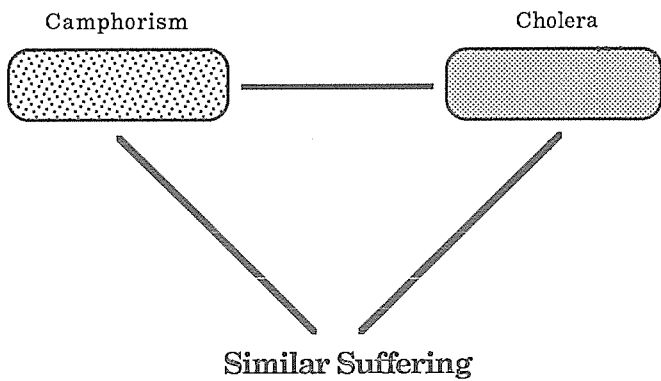


Fig. 3:  
Schematic representation of the notion of "Omion Pathos"  
(Homoeopathy) -- Similar Suffering

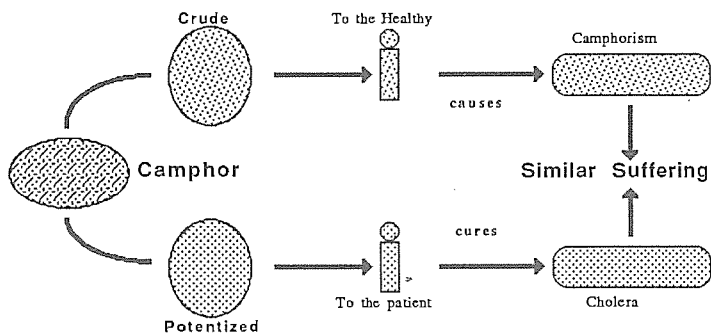


Fig. 4  
Schematic representation of the Law of Similars

## Chapter 2

# HOW HOMOEOPATHY WORKS



## A: How Homoeopathy Works

In the previous chapter it was mentioned that the action of Homoeopathy is based on the Law of Similars: "*Similars cure similars*". While this may seem to be simple, the practice presents many difficulties. From what has been said earlier, one would think that as soon as a diagnosis of, let us say, cholera, has been established, camphor as a homoeopathic medicine can be administered and the patient can thus be cured. But things, however, are not quite like that.

Homoeopathic medicine has today more than 3000 substances to choose from, which, when potentized, become a homoeopathic medicines. From this plethora of substances a number of them can create, to a healthy organism, a pathological picture similar to that of cholera. Of these, only one will present the greatest similarity to the manifestations of the disease and this will be the appropriate one for the therapy of the patient. This single medicine is called similar medicine (*Similimum*). When we are therefore faced with cholera, we must choose only one of these pharmaceutical substances to administer to our patient.

The result of this uniqueness of the homoeopathic medicine which is required for the therapy, is selective therapy; a phenomenon which becomes more apparent in epidemics. For example, in a hepatitis epidemic, the same medicine will not be given to all the patients. From the many medicines of the homoeopathic pharmacology which present a picture similar to that of the disease, every patient must take the one most suitable for his own case. The verification of the law which states that "Homoeopathy cures the patient and not the disease" is made through clinical practice. And this is so because the criterion for the selection of the medicine is the greatest possible similarity of the pathological picture of the patient to that of the medicine. Even the slightest differences in the pathological manifestations of patients suffering from the same disease, which, in other cases would not even be noticed, do play, in Homoeopathy, an important role in the differential diagnosis between the medicines.

The final criterion in finding the similar medicine (similimum) will be the idiosyncrasy of the patient.

## **B: About Idiosyncrasy**

Idiosyncrasy is the totality of the specific characteristics and manifestations of a person when it is in a state of health or in a state of illness. The meaning of human idiosyncrasy, as

well as its manifestations, has been from ancient times a subject of research for medical science and still is, to this day, a wide field of study.

The significance of biotypology in medicine did not escape the attention of the ingenious Hippocrates who divided people into four types, according to the proportions of the four body juices - blood, phlegm, black and yellow bile - within each type, which he called correspondingly *sanguine*, *phlegmatic*, *melancholic* and *choleric* types. Later on Galen and also Theophrastus (with his 30 types), as well as a long line of researches, in relatively recent times, have worked on this subject. Of these latter the most significant are Kretschmer, Dilthey, Jaspers, Spranger, and Jung.

But the one who worked with strict objectivity and has offered the neurophysiological basis for understanding the essence of idiosyncrasy, was Pavlov. According to Pavlov, idiosyncrasy is the most general characteristic of higher neural activity which expresses its main natural properties, that is, the strength, the mobility and the balance of neural elaborations. Pavlov was the only one to experimentally confirm the original, ingenious, observation of Hippocrates concerning idiosyncrasies and this is why he adopted the same classification.

The strong, unrestrained person corresponds to the choleric type. The choleric type or the choleric idiosyncrasy, is a strong, unbalanced and clearly belligerent type, easily stimulated into



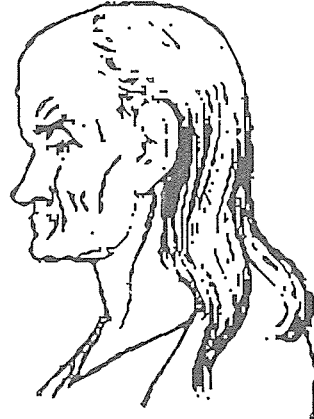
**Sanguine**



**Phlegmatic**



**Choleric**



**Melancholic**

**Fig. 5:**

Human idiosyncrasies according to the Physiognomy

a state of anger, in whom a cyclical repetition of actions and emotions is observed.

The strong, balanced, slow-moving person corresponds to the phlegmatic type. A phlegmatic person is always stable in his actions, calm, persistent and obstinate in the achievement of his aims. It is sluggish and unwilling to change its habits, prudent, mildly sociable and opposed to superfluous effort.

The strong, balanced, fast-moving person corresponds to the plethoric (sanguine) type. Persons of this type are generally enthusiastic, very productive at their work, but only when something interests them, that is, they need continuous stimulation while, when they have nothing to do, they are passive and in somewhat low spirits. The plethoric type of person is characterized by the great mobility of its neural functions, inventiveness and quick adaptation to the external environment.

Finally, the weak type of person corresponds to the melancholic type of Hippocrates. The melancholic idiosyncrasy corresponds to the weak, inhibitive type of higher neural system. Every new incident in life causes inhibition and the melancholic type is coward, withdrawn and indecisive, with bad premonitions and always fearful about his safety. The melancholic type is sometimes autistic. On the other hand, when living in a calm ordinary environment, such persons can be good workers and can successfully face the everyday problems and difficulties.



Many contemporary Soviet psychologists correlate idiosyncrasy with emotional stimulation, that is, with the speed and strength of the emotional response. On the other hand we must emphasize, say Portnov and Fedotov, that the idiosyncrasy does not only affect the speed and strength of the emotional responses, but also the thinking, the will and other psychic processes.

According to Homoeopathy, idiosyncrasy consists of *physical*, *mental* and *psychic* characteristics. Every human being is a total of different physical and psycho-mental characteristics which interplay in such a way, that each one of us is a unique, inimitable being. There are of course groups of characteristics, which, if taken as a reference base, allow us to make more general classifications of people.

Idiosyncrasy has many physical characteristics: height, weight, complexion, eyes and hair colour, and their combinations. The quality of the skin and the muscles, the proportion of the skeleton, of the skull and their relation to each other. The motion, the coordination of movements, the span and the precision of the physical senses, the physical preferences and so on.

The mental characteristics of idiosyncrasy are also numerous, such as the memory, the intelligence, the ability to discern, the ability of orderly thinking, the ability to produce ideas, the ability to express, the ability to foresee, the mental

preferences and so on.

The characteristics of psyche (soul) are those related to the emotions and the higher psychic functions such as the offer of emotions, compassion, sympathy, mutualism, altruism, love, psychic preferences and so on.

For every human being the total of such characteristics determines its idiosyncrasy in combination with its personal preferences. An element of difference among the various idiosyncrasies is the way one reacts to external or internal stress factors e.g. while one might like cold weather, another might dislike it, one may suffer physically from the cold, yet another may suffer psychologically, feel angry, or become irritable, another may feel that the cold ameliorates a pain, yet another that it aggravates a painful condition. One person might feel better in humid cold, while another in dry cold, and so on. Similar differences in reaction appear also in people under various other external factors such as heat, fatigue, hunger, thirst and so forth.

Also, different people react in different ways under the influence of emotional, mental and psychological factors. Under an intense emotion people react differently, covering the entire spectrum of reactions, from complete apathy and catatony to the most violent or hysteric behaviour. All these reactions of an individual to the external and the internal stimuli are not incidental. On the contrary they constitute the characteristics of its idiosyncrasy. Changes of a few or more

characteristics of the idiosyncrasy of an individual occur under the influence of intense stress or under the influence of an acute or chronic illness. And then the total of the medical facts that are collected concerning the idiosyncrasy of an individual, before and during the illness, constitute the basis for the selection of the similar medicine (Similimum).

The way an individual reacts to the internal and the external stimuli, its psychological and mental attitude to things and to itself, its self-image and its conception of others, as well as a number of other factors, also constitute the elements of its idiosyncrasy. These elements can affect its physical condition to the point where they often become the cause of physical malfunctions, or illnesses.

The American psychologist L. Leshan, one of the leading pioneers of our time in the research of the relationship between the psychological make up and cancer, reports that the loss of an important human relationship, the inability to express one's hostile feelings and the intense emotional reaction to the death of a beloved person, constitute a constant finding in all the cases of malignant tumours which he studied. Using two psychological projection tests, the Rorschach and the T.A.T., he managed to diagnose with great accuracy the existence of cancer in a group of ten patients whom he had never ever seen.

To the three above mentioned characteristics,

the American writer soon added one more. The future victims of malignant tumour had a strong tendency to underestimate, to have no love and to have no confidence in themselves. According to Leshan, their self-alienation and their inability to become aggressive for their own self-defense, are closely related to their general attitude to life, a situation which that writer called Despair.

Despair, however, continued Leshan, must not be considered to be the result of cancer. It constituted a basic element of the structure of their psyche which accompanied them through their entire lives. A great many of his patients confided to him that they had always been firmly convinced that in order to escape from the emotional cage in which they believed themselves to be in, they had no way of escape other than death.

To the above primary characteristics of the cancer patient personality, Leshan added three secondary characteristics which his experience in psychotherapy allowed him to ascertain. Firstly, there was a lack of confidence in external objects which could give satisfaction. Thus, these patients always believed that any relationship they would establish, irrespective of the meaning they could find in it, would only be temporary and that only disappointment and pain would follow. Secondly, they believed that nothing, whatsoever, would change, not even time or their own personal evolution could produce any change. The person in a state of despair sees no possibility in anything. Thirdly, Leshan reports that the

future cancer victim does not believe that there is anything it can do that would relieve its loneliness. Whatever it may do is doomed to fail. However great an effort it can make to get close to others, is destined to fail.

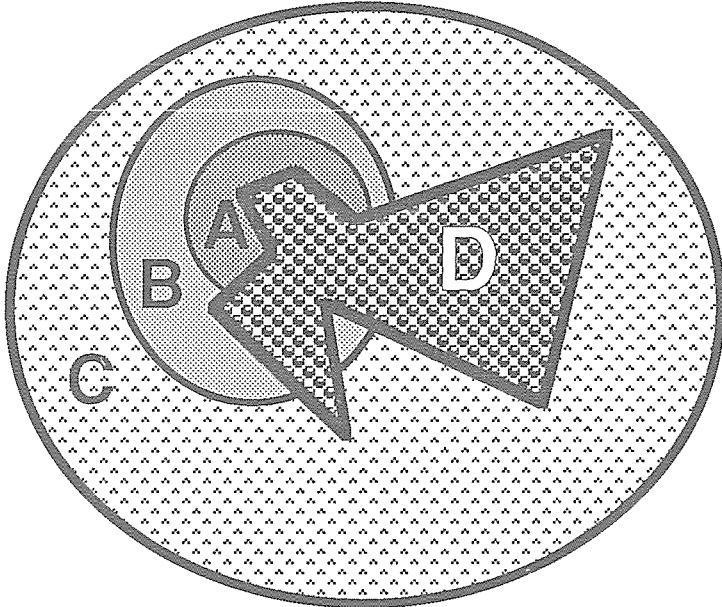
From the foregoing, one can understand that even in the case of cancer, it is not easy to ignore the psycho-mental characteristics of the patient. It appears that one cannot, satisfactorily, cure the patient if the treatment is confined to the pathological tissue. The notion that idiosyncrasy is the sum total of characteristics that must be considered as a whole and not separately, is strongly justified here. Idiosyncrasy is the key to the homoeopathic diagnosis and treatment.

Let us now return to the earlier example of cholera. When we have an individual suffering from cholera, we must identify its idiosyncrasy in order to be able to select from among the many medicines with a resembling pathological picture, that particular one which best fits to the idiosyncrasy of the patient.

Let us observe two people suffering from the same illness, bronchitis, for example. The pathological picture of the two patients will be more or less the same: pyrexia, bodily pain, productive cough, stethoscopic findings, X-ray revealed bronchial markings, etc. Although these two patients have a basic similarity by virtue of the fact that they are both suffering from bronchitis, they can, however, manifest substantial differences. The one may feel hot and

could perspire, the other may feel cold and ask for additional blankets. One may have thirst, while the other may salivate and have an aversion to water. One may feel frightened and desire company and consolation, be worried about his health and ask and take medicines eagerly so that he recovers. The other may feel indifferent about his health, be irritable, aloof, bad tempered, repulsive and seeking solitude.

Although afflicted with the same illness, these two patients manifest completely different idiosyncrasies. Two people under the influence of the same illness manifest a totally different reaction. The idiosyncrasy of these people is, therefore, the key to the selection of the remedy which each person will take and so for every person there will be a different medicine. Each of these two patients will take a different medicine. Each person will take that medicine which is capable of producing, to a healthy person, the **similar suffering**, that is, the similar idiosyncrasy. From this example, can be understood that in homoeopathic medicine we apply to everyday practice the axiom that **there are no illnesses but only ill people**. We, therefore, treat the patient and not the illness.



**Fig. 6**

Schematic representation of the effect of disease on the three planes of man:

A= Physical Plane. B= Mental Plane. C= Psychic Plane. D= Disease.

Disease is presented to cover part of the physical, mental and psychic planes and thus several signs and symptoms of the disease are produced from all three planes. The physical, mental and psychic symptoms, taken as a whole, are the information needed to determine the patient's idiosyncrasy.

## Chapter 3

# THE HOMOEOPATHIC MEDICINES





## A: The Homoeopathic Medicines

Man has always searched for ways of relief from his illnesses. At first he appealed to his Gods, begging and appeasing them. Later, after he had noticed and recorded the effects of several natural substances on his organism, he used them as medicines. For many centuries, he used as medicines the natural substances he found in his environment. Nature has always been man's great supplier of substances which had therapeutic action. The vegetable, mineral and animal kingdoms offered thousands of substances for pharmaceutical use. Processings of these substances were made with perfectly natural methods: mixing, sublimation, compression, pulverization, dilution, boiling, heating, freezing, cooling and so on. The final result was a substance which had pharmaceutical action.

The shelves of old pharmacies were full of bottles containing liquids or solid substances. Pharmacists used spatulas, porcelain pots, pipettes, the Bunsen burner and the traditional mortar to mix the pharmaceutical substances and to prepare the final medicinal preparation which doctors ordered in their prescriptions. In those days, it was the pharmacist who had the responsibility for the final medicine.

Later on came the chemistry revolution when man discovered ways and methods with which he could affect the chemical structure of several substances. He discovered strength allowing him to intervene in the formation of the molecular structure of chemicals. The discovery of molecular polymerism is what gave him the capability to produce several substances with specific desired properties by adding, removing or changing given chemical units. This capability was also used in the manufacture of medicines. Nowadays, man has two capabilities:

a) To take natural substances, to isolate the chemical substances that interest him and to use them unaltered (for example digitalis) or to modify its molecular structure by chemical interference and to produce semi-synthetic medicines i.e. penicillins and other antibiotics.

b) To create new chemical substances with the desired properties which, however, are invariably accompanied by undesirable side effects; to follow, in other words, the chemical processing of the substances.

We can therefore say that the old traditional *natural therapy* (with natural means) has changed into *chemical therapy* (with chemical means).

Homoeopathy followed neither the old route, which is practically somewhat powerless but harmless, nor the new, practically impressive but at the same time frequently dangerous route. Homoeopathy established a new route which has elements from both:

a) It took for the preparation of its medicines

the natural substances known for centuries, that is, those that are the basis of natural therapy as well as of chemical therapy before they are altered chemically.

b) It processed these substances. Homoeopathy does not use the natural substances in their unaltered form, as they were used in old times for natural therapy. It uses them processed but not chemically, as the chemical therapy does. For the preparation of homoeopathic medicines a special processing of natural substances is used called potentization and this will be greatly expounded further on. Let us now get acquainted with the homoeopathic medicines.

## Nomenclature

All homoeopathic medicines are identified and written in their Latin names, e.g. *Ruta Graveolens*, *Chelidonium Majus*, *Calcarea Sulphurica*, *Magnesia Carbonica*, *Indium Metallicum*, *Strophanthus Hispidus*, *Iris Versicolor*, *Tarentula Hispanica*, etc.

## Origin

Homoeopathic medicines come from:

a) The **vegetable kingdom**, that is, they are prepared from several herbs. For the production of homoeopathic medicines, several parts of plants are used: the roots, the stalks, the leaves,

the flowers or even the entire plant. The collection of the plants takes place during the proper season and they are used either fresh or dried. Their dehydration is done under specific temperature conditions. Nowadays, special electrical dehydration dryers are used, but despite this certain plants are dried under the sun or in the shade so as to avoid any alteration of their ingredients. Most of the plants used for the manufacture of homoeopathic medicines are found in many parts of the world, but only those from specific areas are used. There is a certain preference for plants from some areas, where, due to soil and climatic conditions, the plants grow richer in various substances that are necessary for the homoeopathic medicine.

The importance of collecting the natural pharmaceutical substances from certain specific areas was shown by doctor **Taufiq Khan** in his study "*Method for the control of homoeopathic preparations and their potentization*". The researcher used the method of infra red phasmatography to check the concentration of ingredients in the mother tinctures of three pharmaceutical plants. He had three specimens of every plant and these came from three different areas of the world. Results showed that in the case of the medicine *Rhus Toxicodendron* the difference between the concentrations in the mother tinctures of the three different plants ranged 2% to 4%, for the medicine *Hypericum* from 10% to 70% and for the medicine *Hamamelis* from 100% to 185%. This study was presented at the XXXI International Congress of

Homoeopathic Medicine that took place in Athens, in 1976.

Greece is considered to have one of the richest and best flora for the production of homoeopathic medicines. The flora used up till now and mentioned in the university pharmacognosy includes more than 800 plants in which over 1500 pharmaceutical substances are contained. We will mention some of the most common.

**Secale Cornutum** (Corpuscles of the fungi *Claviceps Purpurea* that grows in rye).

Active ingredients: lysergic acid, alkaloids from the ergotamine and ergotoxine group.

Indications: helps labour (oxytocic action), sympatholytic, peripheral vasoconstrictive, adrenaline antidote.

**Lycopodium Clavatum**

Main active ingredients: alkaloids such as lycopodin, annonithin.

Indications: nephrolithiasis, stones in urinary bladder, emaciation.

**Terebinthina** (Pine resin)

Main active ingredients: resin, essential oils (*oleum terebinthinae*).

Indications: bronchitis, antidote for phosphorous poisoning.

**Camphor** (Extracted by distillation from the bark of the *Cinnamomum Camphora* tree).

Main active ingredients: camphor.

Indications: heart and respiratory analeptic.

**Myristica Fragrans** (nutmeg)

Main active ingredients: myristicine, elemicine, eugenole, safrole.

Indications: stomach, tonic, analgesic in rheumatism, abortive. High doses produce

illusions. It is used as a substitute for substances that are under control.

**Curarium** (Extraction from several plants, mainly from *Chondrodendron Tomentosum*).

Main active ingredients: chondrocurine, D-tuvocurarine, mavacurine, macuzine.

Indications: Primitive people used it as a poison on arrows, ballism, tetanus, rabies, muscle relaxant in anaesthesiology.

**Aconitum Napellus**

Main active ingredients: aconitic acid, aconitine, neoline, napeline, L-ephedrine, L-spatein.

Indications: neuralgia, migraines, antipyretic, antireumatic.

**Podophyllum Peltatum**

Main active ingredients: podophylline.

Indications: cholagogic, laxative, skin tumours, condyloma, warts, papilloma.

**Physostigma Venenosum**

Main active ingredient: physostigmine.

Indications: parasymphomimetic atropine antagonist, causes contraction of the pupil, increases intestinal peristalsis, causes bradycardia, as a collyrium in glaucoma, and per os in dyspepsia.

Ninety per cent of the pharmaceutical flora mentioned in the University pPharmacognosy are used in Homoeopathy. A great many others are also used and these are described in detail in the Homoeopathic Pharmacopoeas. Homoeopathic pharmaceutical flora, as a whole, consists of more than 1800 plants.

(b) Many substances from the **animal kingdom**

are used, such as: **Apis Melifica** (bee venom), **Moschus Moschiferus** (secretion from the glands of the male Moschus animal found in Central and East Asia), several poisonous and non-poisonous spiders such as **Aranea Diadema**, **Tarentula Cubensis**, **Theridion**, **Mygale Lasiodora**, several venoms from snakes including **Crotalus Cascavela**, **Crotalus Horidus**, **Naja Tripudians** etc. and sea-dwelling organisms such as **Asterias Rubens** (red starfish), **Coralium Rubrum** (red coral), **Pyrarara** and **Murex** (tropical fishes.)

Most of the above substances are used by several pharmaceutical industries for the production of antivenine serum and for other pharmaceutical products. The collection of these animal pharmaceutical substances is done by specialists in specially-prepared pharmaceutical laboratories under antiseptic conditions.

(c) From the **mineral kingdom**, several organic or inorganic elements, salts and compounds are used. In use are several compounds of **calcium** (Ca), **potassium** (K), **sodium** (Na), **magnesium** (Mg), **manganese** (Mn), **iron** (Fe), **silicon** (Si), **mercury** (Hg), precious metals such as **gold** (Au), **silver** (Ag), **platinum** (Pt), and rare elements such as **tellurium** (Te), **thallium** (Tl), **strontium** (Sr), **titanium** (Ti), **selenium** (Se) e.t.c. All these materials are used in absolutely pure form and are preserved under special conditions. Today over 800 such substances are being used.



## B: Titration and control methods

For the titration of homoeopathic medicines their mother tinctures are used, and this is done by the determination of their active ingredients. For example, *Secale Cornutum*, after being degreased in order to be preserved, is titrated by the determination of the fusional and undiluted in water, alkaloids that it contains. Many other methods are used, which are mentioned in the following studies.

**Dubost** and **Guillemain** studied the release of the homoeopathic medicine picric acid from two different types of homoeopathic granules. The final conclusion was that the porous granules are better than the classical ones. The same researchers repeated the same study with many other homoeopathic medicines in cooperation with **Benesse**.

**Roeder** and **Frisse** studied the stability of the homoeopathic dilutions in glass and plastic containers so as to determine the suitability of these pots for the preservation of homoeopathic medicines. They used radioactive  $^{195}\text{Au}$ ,  $^{59}\text{Fe}$ ,  $^{65}\text{Zn}$  and  $^{203}\text{Hg}$  in homoeopathic solution and traced the absorption of the radioactive elements in dependence on time, as well as on the container-material and composition of the solution. With exception of the zinc solutions, in all other solutions a considerable decrease was ascertained. Acid or silicone treatment of the

surfaces shortly cause altered absorption properties, but cannot prevent absorption. From the different absorption behavior of the investigated elements one can conclude that the different affinity and adhesive power of the ions must be referred to their different chemical and physical properties.

**Fernandez and Alessandri** titrated several dilutions of homoeopathic medicines by the Thin Layer Chromatography (TLC) method.

**Delta, Bose and Ghosh** in 1972 ran a quality control study of the homoeopathic medicine *Nux vomica*. They studied the ultra violet absorption spectrum of *Nux Vomica* tinctures and found that all the samples were similar and that the absorption was located in the area of 290-330 nm. Thin Layer Chromatography (TLC) of the 5 samples showed two brown spots which correspond to the existence of strychnine and brucine. The ultraviolet analysis of the elutriates of these spots confirms their identity.

**Ghosh, Delta and Bose** titrated the mother tincture of the homoeopathic medicine *Ipecacuana* using the TLC method and ultraviolet absorption spectrum.

**Munshi, Mudgale and Chandra** titrated the homoeopathic medicines *Aconitum*, *Belladonna* and *Nux vomica* by the TLC method and suggested several control methods.

**Roeder, Puetz and Frisse** in 1981 titrated several homoeopathic medicines with analytical determination of Au, Fe, Zn and Hg in homoeopathic dilutions by the Non-destructive Neutron Activation (NNA) method.

The NNA method was used for the

determination of Au, Fe, Zn and Hg in solutions of homoeopathic medicines, with different potentizations and in concentrations varying from 50ppm-3ppb. The determination of these elements was achieved through comparison of the gamma-rays intensity of the examined solutions with the intensity of the gamma-rays from a blind solution (a solution containing exactly the same elements with the examined solution except from the element under control).

**Munshi** in 1979 titrated some mercury salts in homoeopathic medicines diluted in  $10^{-3}$  with the Thin Layer Chromatography technique (TLC).

**Perrin** in 1979 titrated several mother tinctures of homoeopathic medicines and suggested new techniques for the quality control of the plant substances and their extractions.

## Potentization

After collecting the homoeopathic raw materials their processing takes place. This processing is called potentization. Potentization consists of two phases:

- a) **The dilution**
- b) **The vibration**

In the first phase, the homoeopathic medicine is diluted in a 1:10 or 1:100 ratio. The solvent used is distilled water or ethyl alcohol, or a mixture of both. We dilute one part of the homoeopathic raw material in to 10 or 100 parts of solvent and we

have the first dilution of the homeopathic medicine.

Now comes the second phase. It is the phase of vibration . The solution we have formed is transferred to a jar with a volume 2-4 times greater than the volume of the solution. This jar is fitted on an electrical vibrating apparatus which vibrates the jar with its content. These vibrations have great intensity and frequency that is analogous to the medicine being prepared, according to the rules of the homoeopathic pharmacopoea. The result of these intense mechanical vibrations is that the contents of the jar are shaken and hit the interior of the jar with great force. That means that the contents are intensely vibrated with high frequency. When this phase is through we have the final homoeopathic medicine, ready for medical use and prepared in the first potentization.

What we have then is:

**dilution** of the medicine + **vibration** of the medicine = **potentized** homoeopathic medicine.

The process of potentization is repeated several times. However because, potentization is preceded by dilution after a certain number of potentizations we reach very high dilutions. In the 20th potentization, for example, if we have used the centesimal dilution, the initial substance of the solution will be in a  $1:100^{20}$  dilution. If we repeat this potentization process 30 times, then at the 30th potentization the dilution of the initial substance will be  $1:100^{30}$  (thirty

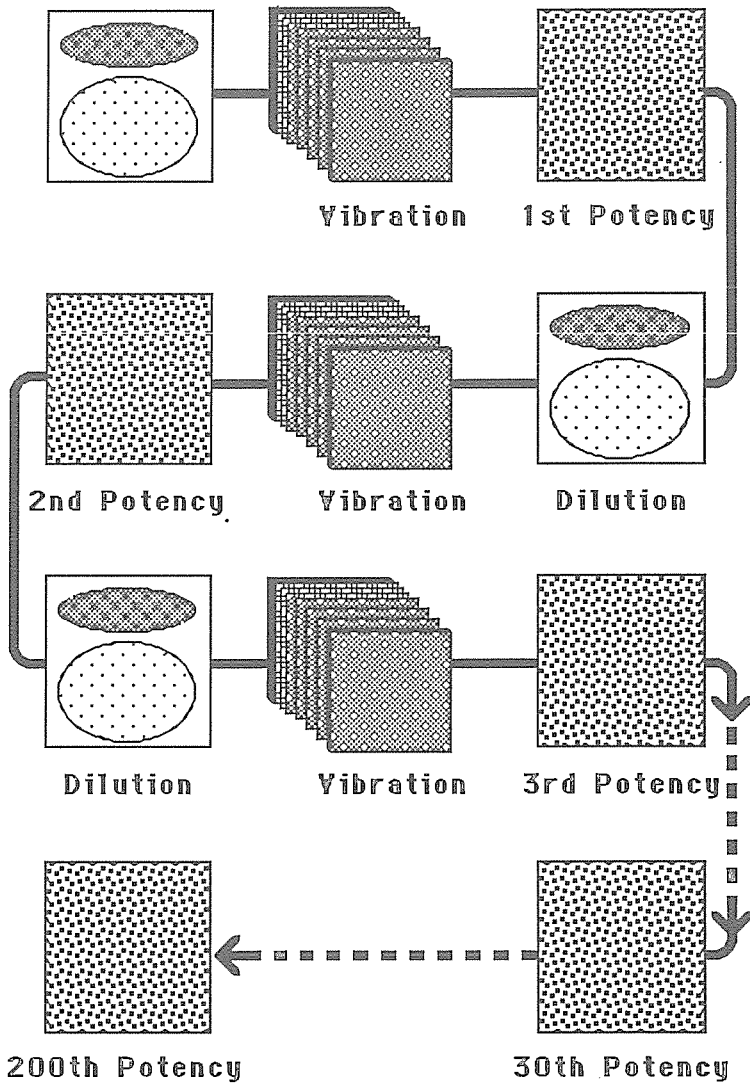


Fig. 7:  
Schematic representation of the potentization procedure .

zeroes).

Imagine for a moment how high the dilution of the initial substance becomes in the 1000th potentization (one thousand zeroes after the figure 100)

We therefore reach a point where we wonder how it is possible for this minute dosage of natural substance contained in the homoeopathic medicine to be effective and indeed therapeutic for the organism.

That the homoeopathic medicine is therapeutically effective is a common experience of millions of people who have benefitted by Homoeopathy over the last 200 years, a period of clinical practice leaving no room for doubt.

This action is due to the capability that every organism possess (and especially its vital force), to be stimulated and to react under the influence of infinitely minute dosages. We know very well that allergic phenomena can be produced in a sensitive person by the action of minute dosages of antigen. A person sensitive to penicillin can enter a state of allergic shock even with dilutions of the order 1:10.000, or 1:100.000 or 1:10.000.000.

A person sensitive to flowers pollen can present an intense allergic hyperergic reaction just by passing from a great distance near a pine forest in blossom. This reaction is due to the minute dosages of air-born pollen coming into contact with the body. We see then, that the immune system of humans is capable of being stimulated by minute quantities of substances and as a result the reaction of the organism is infinitely greater

and spectacular.

The example of the immune system of the organism allows us to believe that there is also another organic system which becomes stimulated by infinitely smaller dosages and that is of course the vital force of the organism, the nature of which is described in a separate chapter of this book.

The theory of inoculations comes to reinforce the above mentioned position. We know that for inoculation minute quantities of antigen are needed to stimulate the immune system of the organism in order to have it produce great quantities of antibodies.

As mentioned earlier, potentization is characterized by two phases :  
dilution and intense vibration.

This process is carried out with the aid of modern apparatus. We shall examine potentization as a natural phenomenon and will try to shed some light on it in a scientific way.

F.O. Barnard, a physicist, reports: The question is whether Hahnemann almost accidentally discovered, with his method of dilution and vibration, a natural phenomenon, or not.

I think he did. We must try to explain what it was that he really discovered, with only our knowledge as a basis. All the experiments conducted show that there can be no molecules of the original medicine in potentizations over the 30th, basis the Avogadro number, which determines the number of molecules, atoms or of any other particles (ions, electrons) contained in a mole of a substance and which is  $6.023 \times 10^{23}$

There is no need to indulge in the potentization mechanism. It is enough to say that the solvent used for our medicines is distilled water although some ethyl alcohol is also added.

Water is a liquid with a number of peculiar properties. About the structure of the water questions exist even now. Many scientists advocate that in a natural state water molecules and hydrogen bonds have a great degree of freedom. They join together and form great groups and then quickly separate within less than micro-micro-seconds of time.

Over the last 80 years many scientists have found evidence that under special conditions a great number of water molecules can bind together and form a long molecular chain. In other words, we could say that water is in a condition of polymerism. This therefore is the picture we have of water, at present, as shown by experiments and theoretical studies.

If we look closely at the list of homoeopathic medicines, we shall see that a great number of these are, or contain in their natural botanic condition, acids and bases. This is a very interesting fact, because we know, that when diluted in water salts, acids and bases, the molecules of these diluted substances are ionized. A separation of electrostatic charge also takes place and some of the molecules of the dissolved substance are charged positively while others negatively.

All this we know from electrolysis, but when a



group of the solvent molecules separate the molecules of the substance dissolved, every water molecule undertakes a certain task and at the same time accepts a certain constriction. When this is finished, all the water molecules that took part are placed in a certain formation within the space. They have lost their freedom. The formation within the space is determined by what was needed to separate the molecules of the dissolved substance, step by step. This formation in the space or the formation within the space provides a complete picture of the structure of the molecules of the dissolved substance molecules. We have a polymerism of the water with a certain spatial arrangement which is totally controlled by and dependent from the molecules. The water molecules cannot free themselves from their bonds, unless they were given again at least some energy in every case to break the bond that corresponds to every side of the structure of the molecule of the dissolved substance.

The molecular arrangement resulting from the polymerism is created by absorbing energy and not by giving off energy. This energy is provided by the second phase of potentization, which is vibration.

In the saturated solution we find the charged parts of the molecules of the dissolved substance together with the formations of the water from the polymerism carrying all the information concerning the molecular structure of the original dissolved substance. In other words, we have a sort of a mold of the original substance

made by the water molecules.

We proceed to the dilution gradually. In every stage we apply the practice of the forceful strike (vibration). What does this mean? Again we have to ask ourselves what do we know about this phenomenon. From certain experiments we know that when water is thrown on a solid surface, or when water is struck by wind currents, with the water drops breaking into smaller ones, then the water becomes charged positively while the molecules of the air surrounding it become negatively charged. It is then obvious that what we do by vibration is to increase the energy level of some water molecules by charging them with positive electricity and simultaneously we vary the arrangement in the space of these charged molecules.

Can some of these molecules be joined at the end of the chains that were formed from polymerism?

They can, if they overcome the energy obstacle at the end of the chain and if they are in the proper position in the space relative to the arrangement of the chain. In other words, vibration creates a state in which it is possible to have self-repetition of the formations of polymerism. The chains of polymerism continue to grow repeatedly and the parts of the molecules of the dissolved substance continue to become less and less after every dilution. But this is not yet the end of the story, because otherwise we would be left with a very long chain of polymerism and even this chain would vanish by further dilution. We must again examine the process of vibration.

What else happens?

We know that when a liquid is stirred forcefully shearing tendencies are created in the liquid. We can estimate these tendencies with a certain procedure. When the chains of polymerism become very long, with great molecular weight, these tendencies can be such that they break the long chains into shorter ones. Again the self repetition of formations of polymerism into smaller chains can be continued, although the number of these chains decreases by further dilution.

We thus form a theory that can explain the continuation of the polymerism formations of the solvent in the solution even when there are no more molecules, of the original dissolved substance, present. These polymerism formations of the solvent can continue their self-repetition in further dilutions and vibrations without the presence of the molecules of the original dissolved substance. This leads to ever more numerous, longer polymerism chains, as dilution and vibration continue up to a point determined by the endurance to the shearing of the liquid during vibration. All the chains of polymerism contain the same kind of information, that is, the codified structure of a certain medicine. They differ in the number of repetitions of the same information. This state can of course be controlled from the bonding points of the series, so that while generally the number of repetitions of the information will increase, as the dilution and the vibrations will increase, the increase will not be uniform or

monotonous. Rather, it will be rhythmical. Accordingly, one can understand that the homoeopathic doctor by regulating the time between the dosages of a given potentization and by varying the potentization, he truly takes into consideration the personal ability of the patient to process information in a certain rhythm. If we take proportionally a communication system (and as far as we know the human organism behaves largely as a communication system) we know that if we activate this system to process information with a speed beyond its capabilities, the static that will follow can lead to a state where no information is transmitted. But, naturally, the first duty of the homoeopathic doctor is to match the informational content of specific chemical substances with the informational needs of the patient.

We see then that the final homoeopathic medicine is an extradiluted solution of a natural substance in which several electrostatic and other energy variables have been activated in such a way that we may confidently characterize the homoeopathic medicine as an energy medicine.

We can say that during the forceful vibration of the water and the molecules of the original pharmaceutical substance, and due to the polymeric ability of the water, a cast of the original substance is formed, a mold or model, which then imitates the action of the substance although the latter almost ceases to exist after many repeated dilutions.

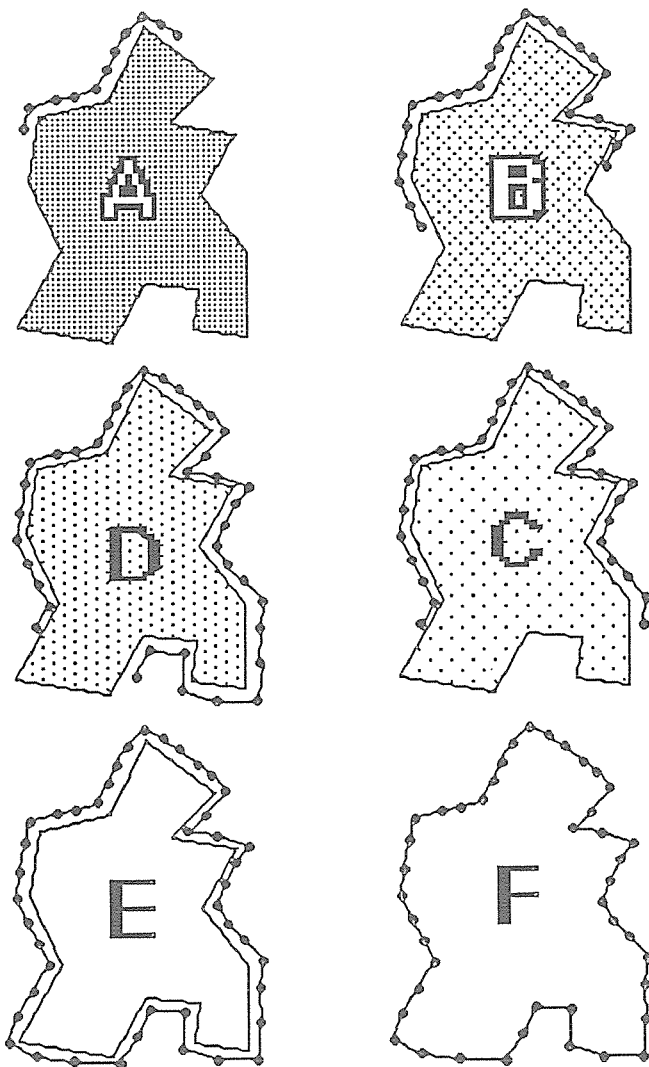


Fig. 8

Schematic representation of the creation of the active cast: During successive potentiizations, a long polymerism chain consisting of water molecules is formed around the molecule of the original active substance (A, B, C, D, E). The final result is the creation of active cast (F).

This new molecular model is termed **active cast**. The above explanation is reinforced by the studies of **J. Boiron** and his associates.

For several years, **Boiron** used the Raman Laser spectroscopy method for the study of homoeopathic potentizations. The results showed that:

a) There is a mutual effect of the solvent and the dissolving substance in every solution.

b) This phenomenon is determined by many interdependent factors, such as the ionization ability, polarity, molecular weight and size of the molecules and the ions.

c) The spectrums of the highly diluted homoeopathic medicines are different from that of the solvent even when we reach tremendously high dilutions, (where practically only the solvent exists).

d) The difference in spectrum intensity is due to the structural re-arrangement of the solvent (alcohol).

e) The rearrangement happens with a change of the dielectric constant and the viscosity of the alcohol. Let us present the above results by means of a schematic presentation for a solution of Kali Bichromicum  $K_2Cr_2O_7$  (Fig. 9) into absolute alcohol.

In theory, F4 should be the same as F1, since in the dilution of 1:100<sup>30</sup> according to the law of probabilities, there are practically no molecules of the original substance left but only alcohol molecules. Despite this with the repeated potentizations, (dilutions and vibrations) a structural re-arrangement of the alcohol took

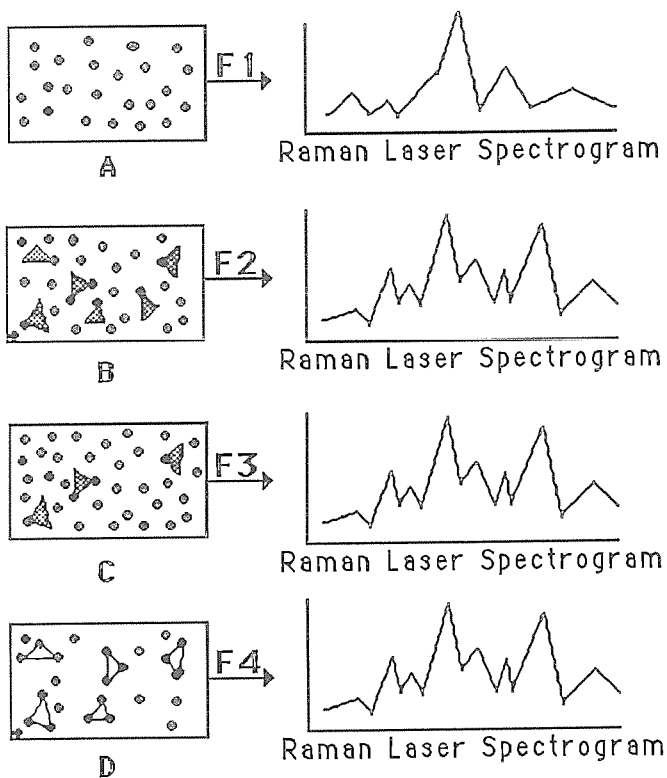


Fig. 9

Schematic representation of the Raman Laser Spectrography of the solution in ethyl alcohol of a homoeopathic medicine consisting of Kali Bichromicum ( $K_2Cr_2O_7$ ): In pot A only alcohol molecules can be found, represented as black dots. F1 is the spectrum of ethyl alcohol. Pot B contains a 1:100 dilution of  $K_2Cr_2O_7$  in ethyl alcohol. F2 is the spectrum of the solution and is different from F1.  $K_2Cr_2O_7$  molecules are represented as gray triangles. Pot C contains the previous solution in a 1:100<sup>12</sup> dilution. F3 is similar to F2. Pot D contains the same solution in a 1:100<sup>30</sup> dilution. Due to the enormous dilution, F4 is expected to be the same as F1, but instead F4 continues to be similar to F2 and F3, because of the formation of the active casts of  $K_2Cr_2O_7$  molecules. Active casts are represented as white triangles with black dots at each angle.

place. Large casts that imitate the Kali Bichromicum molecule, and so F4 remains identical to F2 although molecules of Kali Bichromicum do not exist in the solution but exist in its active casts.

This study by Boiron was presented in 1976, at the 31st International Congress of Homoeopathic Medicine held in Athens.

Although the result may, initially, appear as a paradox, it is one of the strongest evidences of the energy nature of the homoeopathic medicine.

The above views are also supported by the study of Luu, Vinh and Boiron who showed, using viscometry, that in aqueous solutions of ethyl alcohol 70<sup>o</sup>, the hydrogen bonds created, caused the bonding of molecules together, in various degrees. As a result, there is a coexistence of a variety of associations ranging from isolated, free or binary molecules up to in a state of stable clusters.

In low ethyl alcohol concentrations, perturbations of the alcohol molecules are induced by the solvent, probably as a result of intermolecular hydrogen bonding between water and alcohol. These bonds can lead to the formation of intermolecular groupings, thus causing an increase in the viscosity of the mixture up to 2.5 times more than that of water or pure ethyl alcohol.

Bardet, Lucete and Vinh studied several dilutions of homoeopathic medicines in ethyl alcohol (64-17-5) with the Raman Laser effect and found that the distances between the atoms of ethyl alcohol were not modified in the presence of active substances.



The process of potentization, as has already been mentioned, has two phases: a) dilution b) vibration.

Dilution or vibration, separately, cannot transform a simple substance into a homoeopathic medicine. This fact is verified by **Cocude's** study carried out in 1973.

The subject was: *Atmospheric pollution and Homoeopathy. The question was to define if chemical compounds present in the atmosphere, in very low concentrations, are pollutants or homoeopathic medicines.* while it has been found that indeed some of the chemical substances in the atmosphere are in great dilution like those in homoeopathic medicines, these substances bear no medicinal action but instead have bad effects on health, and this is because they are only diluted and not potentized. They therefore cannot be regarded as homoeopathic medicines but simply as compounds in very low concentrations.

## Action Mechanism of the Homoeopathic Medicine

Homoeopathic medicines could be compared to an energy battery given to the organism. This energy is suitable for use by the reactive mechanism of the organism when and where it is needed. The medicine that is capable of producing a pathological picture, similar to that of the patient, has an energy relation with the patient. It can be coordinated to the action of the

organism.

At times, opinions have been expressed, that homoeopathic medicines act through auto-suggestion, that is, that the homoeopathic medicine has no medical action whatsoever but that the patient simply believes he is going to get well and this is why he eventually becomes cured. This auto-suggestion explanation, however, is proved to be wrong by three facts:

a) The fact that **infants are cured**:

Homoeopathy cured infants which have no auto-suggestion ability and which take their homoeopathic medicines dissolved in their milk without knowing that they are taking a medicine.

b) The fact that people are cured while being in a state of **coma** or **confusion of mind**: these people, because of their condition, do not know that they are taking medicine and therefore cannot auto-suggest.

c) The fact that **plants** and **animals** are treated and cured: Homoeopathy cures animals and plants which undoubtedly do not possess the ability of auto-suggestion. Below, some of the numerous studies of several researchers will be mentioned that provide information about the action mechanism of homoeopathic medicines.

**Quilichini, Bildet, Saurel, Gendre**, in a laboratory study carried out in 1977, at the pharmacological laboratories of Bordeaux University, to investigate *the protective action of various dilutions of white phosphorus in toxic hepatitis in rats* report:

*"Based on enzyme and microscopic studies the research showed that white phosphorus has a beneficial effect in toxic hepatitis in rats with CCl<sub>4</sub> -induced benefits. Their results have been discussed with respect to homoeopathic therapy and to the Law of Similars."*

Noiret and Glude in 1976 carried out an experimental laboratory research project, their subject being *"enzymic study on wheat grains intoxicated by copper (II) sulfate and treated with different Hahnemann solutions of the same substance"*. They report: "Growth inhibition was observed in wheat grains germinated in the presence of inhibitory, homoeopathic dilutions of CuSO<sub>4</sub> after intoxication by CuSO<sub>4</sub> (1.5 and 2gr/l). Treatment with the homoeopathic dilutions had a complex effect on the enzymes of the grains. Amylase activity was stimulated from the beginning of the treatment with the homoeopathic dilutions. Aldolase and pyruvate kinase activities increased from the 18th hour after treatment. Malate dehydrogenase and glucose 6-phosphate dehydrogenase were briefly stimulated at the 6th hour of the therapy and isocitrate dehydrogenase was stimulated until the 18th hour, and then it was inhibited.

From the above studies it can be seen that homoeopathic medicines have hepatopreventive and anticancerous action. They also effect enzymes and thus also many functions of the living organism as well.

Baranger and Pierre, in laboratory studies lasting from 1967 to 1971 on *antineoplastic and antiviral geraniol-containing homoeopathic medicines*, report: "The homoeopathic drugs

containing geraniol exhibited therapeutic activity when administered on 15 male chickens (4 days old) infected with lymphomatosis. Forty percent of the affected chickens recovered with the homoeopathic medicines, whereas all untreated chickens died around the 13th day.

These medicines, because of their antineoplastic action, may also be used in human treatment, following surgery or radiotherapy".

The antibacterial action of homoeopathic medicines was supported by the studies of Khanna and Chandra, which were conducted in 1977 at the Botanical Department of Alahabad University. The title of the study was: "*Control of Guava fruit rot caused by Pestalotia Psidii with homoeopathic drugs*".

The researchers report: "*The effect of 1-200 potencies of four homoeopathic drugs containing Blata, KCl, As<sub>2</sub>O<sub>3</sub> and Thuja on the spore germination of Pestalotia Psidii, the causal organism of Guava fruit rot, was studied. Potencies of 1, 20, 24, 61, and 87, inhibited spore germination completely. Fruits were sprayed with homoeopathic medicines and then were inoculated with the germ Pestalotia Psidii. Those fruits did not develop rotting*".

As a general conclusion we could say that scientific research has shown that homoeopathic medicines have several actions, including antibacterial, antiviral, antiinflammatory, antirheumatic, analgesic, antineoplastic and enzymic properties. They can also be used against vertigo, nausea, oedema or as a general tonic.

Other investigators have studied the antirheumatic and antiinflammatory action of homoeopathic medicines or their direct action on oedema. The results of these studies are presented further on. In addition, in one of the following studies the centre of action of the homoeopathic medicines was determined.

**Niebauer, Dorcsi and Klaering**, in a laboratory study in 1977 in the Veterinary Department of Vienna University on *the action of homoeopathic medicines on oedema in mice*, report: "Honey bee venom (*Apis Melifica*) at a 1:10<sup>4</sup> dilution injected subcutaneous, decreased formaldehyde - induced oedema in the rat paw; a 1:10<sup>30</sup> dilution was effective against caragenin-induced oedema".

**Claussen, Bergmann, Bertoli and Claussen** in 1984 carried out a study called "*Clinical experimental test sand measurements of the therapeutic action of a homoeopathic drug consisting of Ambra, Cocculus, Conium and Petroleum in the diagnosis of the vertigo and nausea*". They report as follows:

"This paper presents a study by means of a modern neuro-otological technique for investigating the action and the site of action of an antivertiginous drug. The sensory motor tests are able to discriminate the sites of the lesions in the equilibrium regulating system i.e. peripheral vestibular system, lower brainstem regulating system, upper brainstem nystagmus generating system and supratentorial system. Acoustic brainstem evoked potentials and information. A sample of 40 vertigo and nausea patients was treated by a combined drug containing Cocculus 10<sup>-4</sup> 210mg, Conium 10<sup>-3</sup> 30mg, Ambra 10<sup>-6</sup> 30mg,

Petroleum 10<sup>-8</sup> 30mg (Vertigoheel). The patients received 3 tablets 3 times per day during 14 days. An initial investigation was performed just before starting the treatment. A second directly followed the therapy. By subjective self-rating 57,5% of the patients reported on an improvement after the intake of Vertigoheel. Statistical evaluations showed that the different vertigo and nausea symptoms as well as the trigger mechanisms of vertigo and nausea (i.e. getting up, turning the head or gazing aside), very significantly improved, with the therapy. The objective sensory motor tests showed a highly significant improvement in the monaural caloric butterfly chart as well as in the vestibulospinal head and body sway. The site of the action of Vertigoheel is in the brainstem and at the medulla oblongata".

Another study by Gassinger, Wuemstei and Nettle in 1981 aimed to compare the therapeutic results of a homoeopathic and an allopathic medicine. The study was titled: "*A controlled clinical trial for testing the efficacy of the homoeopathic medicine Eupatorium Perfoliatum in the treatment of common cold*". The authors report:

"Fifty three patients suffering from common cold (flu) were randomly assigned to either a therapy, with acetylosalicylic acid ASA or the homoeopathic medicine **Eupatorium Perfoliatum D2** in a controlled clinical trial. The efficacy of the medicines was assessed on the days 1, 4 and 10 of the infection by symptom check lists and by physical examinations. Neither subjective complaints, nor temperature or laboratory findings showed any significant differences

between groups, which was taken as evidence that both drugs were equally effective".

In 1978, Gibson, MacNell, Gray, Dick and Buchanan carried out a clinical study with the subject: "*Salicylates and Homoeopathy in Rheumatoid arthritis:: preliminary observations*". At the end of the study they report: "This paper reports the results of a pilot study in which 41 patients with rheumatoid arthritis were treated with high doses of salicylates, 3.9 g per day, and the results compared with a further 54 similar patients treated with Homoeopathy. Both groups were compared with 100 patients who received placebo. The patients who received Homoeopathy did better than those who received salicylates".

Two years later, in 1980, the same team of researchers conducted a second research so as to distinguish between the effects due to the physicians and the effects due to the drugs. The subject was : "*Homoeopathic therapy in Rheumatoid arthritis: evaluation by double-blind clinical therapeutic trial*". After the study they reported: "23 patients with rheumatoid arthritis on orthodox first-line antiinflammatory treatment plus Homoeopathy were compared with a similar group of 23 patients on orthodox first-line treatment plus Placebo treatment. There was a significant improvement in subjective pain, articular index, stiffness and grip strength in those patients receiving homoeopathic remedies whereas there was no significant change in the patients who received

placebo. Two physicians were involved in prescribing for the patients and there were no significant differences in the results which they obtained. No side effects were observed with the homoeopathic remedies".

As we can see, the investigators did their best to avoid the phenomenon of autosuggestion and they succeeded in their aim. Research demonstrates the fact that homoeopathic medicines, although highly diluted, are very effective. But there are many matters that need investigation. The answer to the question "Is Homoeopathy scientific?" has been given. From the very moment that scientists widened their interests and studied Homoeopathy, they have proved its correctness and revealed its scientific base. Let us see now what are the effects of minute dosages on the organism:

**a) Lack of side-effects**

We know that there will be side-effects when a certain dosage of a medicine given once is exceeded. Let us take the example of a common medicine, aspirin. Every aspirin tablet contains 500 mg of acetylosalicylic acid. To have side effects, a person has to take a quantity exceeding 10 grams, that is, 20 tablets of aspirin in a single dosage. The lethal dosage of aspirin is 15 grams taken at once.

If aspirin was potentized, one tablet would be enough for the production of over 3 tons of homoeopathic medicines in the 30th potentization, that is, two hundred billion



capsules. If someone now tried to poison himself by aspirin in the form of a homoeopathic medicine, he would use 10 years of his life swallowing capsules from early morning until late at night to complete the quantity required for poisoning. That is the reason why homoeopathic medicines have no side effects at all. The same argument stands for the strongest poisons, such as strychnine. The mean lethal dosage of strychnine is 15-30 mg. If strychnine is potentized however, it becomes absolutely harmless due to its tremendous dilution.

b) Idiosyncratic action and thus **causative action**.

Homoeopathic medicine motivates the vital force of the organism by minute dosages and thus its action is idiosyncratic and causative.

Nature gave the contemporary doctor the capability of using minute dosages for the benefit of mankind.

## Chapter 4

# MEDICAL PHARMACOLOGY OF HOMOEOPATHY



## A: Medical Pharmacology of Homoeopathy

The law of similars has already been explained and several pharmaceutical substances that can be used as homoeopathic medicines have been mentioned. Nevertheless, there is still something very important needed in order that the Law of Similars be put into application and cures be effected. The homoeopathic doctor must ascertain the action these pharmaceutical substances have on the organism. This way he can identify the medicine which creates the **similar suffering** to the malady, in other words, the medicine indicated for its treatment. Medical science tends to experiment on various animals so as to discover the medicinal action of a substance. This, however, can not be done with Homoeopathy for three basic reasons:

- a) Animals cannot talk to describe the symptoms created under the influence of a pharmaceutical substance.
- b) The observing physician cannot perceive many of the signs that the animal develops during experimentation.
- c) The organism of the animal often presents essential organic and functional differences, from the human organism, and as a result its reaction to the pharmaceutical substance differs significantly from that of a human organism.

Recent studies showed that medicines which act on dislipaemia were used on humans but did not produce satisfactory results despite the experimental observations of recession of the atheroma with a reduction of cholesterol in test animals. Perhaps, presicely this 'difference' between the animals and humans indicates that the prevention in humans must take place in the very first stages of the disease.

Let us recall the example of Belladonism. If the researching physician caused belladonism to an animal, e.g. a dog, he could perhaps observe some physical symptoms and nervousness, but he could not see the characteristic appearance of the skin, neither could he know that this nervous tension is related to a delirium and indeed one of a specific content. Many elements of belladonism would be unkown and of course the diagnosis would be uncertain. What is left, therefore, is for the human being to become itself the object of its experiments. And naturally, the only suitable experimental person is none other than the homoeopathic doctor.

Indeed, homoeopathic doctors have placed themselves in the service of medical science, with self-denial and altruism, in order that studies be made on them of the pharmacological actions of the substances which became a source of help and relief for thousands of people. The example was set by the reviver and father of Homoeopathy, **Dr. Hahnemann** himself.

**Hahnemann** carried out the first proving of medicines. He experimented on himself and on many of his collaborator physicians who offered themselves for this purpose.

One realizes that great praise is due to this spirit of self-sacrifice, possessed by **Hahnemann** and his colleagues and to all the homoeopathic doctors that followed, who often took themselves various pharmaceutical substances in order to make their provings.

To their self-sacrifice we owe the huge volume of today's **Materia Medica** which gives to the contemporary doctors the capability to have all the information which is required in order that they benefit their patients.

One of the many provings of medicines that **Hahnemann** conducted upon himself was also that of **Arsenicum Album** (arsenic). Arsenic is one of the most poisonous and dangerous substances. The Mean Lethal Dose of Arsenic is 0.1 gr. For his provings he used the 1:1,000,000 dilution. In the first proving of **Arsenicum** which **Hahnemann** conducted upon himself, in 1816, he described 294 symptoms. Later, in 1824, he repeated his proving of **Arsenicum** upon himself and increased the number of symptoms that he described to 431. At the same time his collaborators **Starf** and **Hornburg** also carried out provings upon themselves. Later **Starf** and **Hornburg** repeated their own proving of arsenic together with **Langhamer**, **Frederic Hahnemann** (S. **Hahnemann's** son), **Baehr** and **Meyer**. Some years later **Nenninf** added the

symptoms of his own proving and so the total number of symptoms thus described reached 1.231.

Since then, the homoeopathic doctors who followed have carried out many provings of the same substance and so today the picture of the pathology produced by this substance on human organisms is complete.

Let us follow the symptoms described by M. Damour during his *Arsenicum* proving and mainly from the oral cavity. Damour took *Arsenicum* for 5 days in total.

On the 4th day he felt pain in the mouth, mainly on the left side, that spread to the gums.

On the 5th there was oedema of gums, which bled, were very sensitive to touch and showed white spots.

On the 6th day he felt the tendency to cough in order to clean his throat from something that bothered him.

On the 7th day there was intense salivation. The gums were still swollen and extensively covered with white pseudomembranes. Detritus was observed on the base of the teeth. The rear surface of the palate was very red and swallowing was somewhat painful.

The symptoms continued on the 8th and 9th days and the gums were completely covered with pseudomembranes.

Over the next two days the symptoms started withdrawing and during the 12th day they all vanished quickly and he was in a normal state again.

This entire picture described by Damour reminds the doctor several pathological situations such as simple stomatitis, aphtous stomatitis, diphtheric stomatitis, stomatopharyngitis, gingivitis, etc. These are pathological pictures that often come across in clinical practice.

The general symptomatology and semeiography of *Arsenicum* from all the systems of the organism covers over 160 pages in the *Materia Medica*. Not only this medicine but all the other medicines have been subjected to the same careful study and registration, by homoeopathic doctors.

The proving of medicines is the most important part of the *Materia Medica*, because it includes all the necessary information required by a homoeopathic doctor in order to make the diagnosis and to select the appropriate medicine for the therapy of a given patient, that is the similar medicine (similimum).

The proving of the medicine is carried out on clinically healthy people. This is a prerequisite so that there is no confusion with the symptoms of an already existing malady and with those symptoms and signs generated by the taking of the medicine. All the substances now used as homoeopathic medicines have been proven on clinically healthy persons. The data gathered constituted the *Homoeopathic Pharmacology* (*Materia Medica*).



The knowledge contained in the *Materia Medica* has, naturally, been enriched with the observation of accidental cases when a person erroneously took a large dosage of a pharmaceutical substance where upon it developed a certain pathological picture, as a result.

The proving of every medicine follows a specific protocol of scientific deontology and is carried out according to the method of "double blind trial" so as to avoid any possibility or error. The comparison of the results is made with Placebo which has no pharmacological action.

To conduct the double blind experiment two groups of people are required. One group is given the pharmaceutical substance and the other the placebo. The participants do not know to which group they belong and naturally they do not know whether they are taking the medicine or the placebo. The participants are isolated and have no contact between them so as to avoid influencing one another. After receiving the medicine or placebo the participants begin writing down and reporting all what they feel is happening to their organism at the physical and the psychomental level. The totality of this information constitutes the symptomatology produced by the pharmaceutical substance in the organism. At the same time, however, there are groups of experienced doctors observing each person separately and noting all the changes they see at

the physical and the psychomental levels e.g a redish complexion, tremor in the extremities, change of facial expression, behavioral changes, etc. The observing doctors, also, do not know which of the participants took the medicine and which of them took the placebo.

The totality of these findings constitutes the *semeiography* which the pharmaceutical substance produces in the organism. Finally comparison is made between the symptomatology and the semeiography developed in the persons who took the medicine and those who took the placebo. In practice, the individuals who took placebo do not develop symptomatology and semeiography except on rare occasions of very sensitive individuals who develop, through autosuggestion, a picture that is totally irrelevant to that developed by the medicine. This difference is a very strong proof of the pharmacological action of the substance studied. When the proving of the medicine is complete all the facts and data are gathered and classified according to the system and the function. The duration of the proving procedure of a medicine can vary from a few hours to a number of days.

For the proving of the homoeopathic medicines the crude form of the pharmaceutical substance without any dilution or admixture is used.

Dilution of the substance is used only for very strong poisons. In certain cases, low decimal potentizations are used. The medicine is taken either through the alimentary tract (*per os*) or

parenteral. The proving of the same pharmaceutical substance is repeated several times by the same or other researchers each time on different groups of people.

This way it is possible to compare the experience of several investigators and to confirm absolutely the action of the homoeopathic medicine. The researching doctors who conduct the proving of a medicine always take into consideration the Nuremberg code, some of the articles of which state:

a) The participation of people in the proving of a medicine is strictly voluntary.

b) During the experiment the participants must be free of any mental and physical fatigue and of any type of injury.

c) If any possibility of death exists, or any possibility of heavy organic damage, from the medicine under study, the experiment can be permitted only if the researching doctor, conducting the experiment, also participates in it.

d) The participating persons must be properly prepared in order to avoid every possibility of damage of any kind.

e) The individual undergoing the experiment is entitled to interrupt the taking of the medicine if it feels that it can no longer continue taking it.

f) The researching doctor must interrupt the experiment whenever his bonafide experience and just discretion lead him to believe that a participant is in danger of death or serious damage.

Naturally the homoeopathic *Materia Medica* does not end here. There are many medicines requiring complementary information and others that must be studied again, from the beginning. This study is based on the love for the science and the self-sacrifice of contemporary homoeopathic doctors, who continue the task of their spiritual fathers for the benefit and welfare of the human race.



## Chapter 5

# THE THEORETICAL BASIS OF HOMOEOPATHY



## The theoretical basis of Homoeopathy

Homoeopathy, being an integrated medical system, consists of a theoretical and a practical aspect. The theoretical aspect of Homoeopathy contains all the theoretical knowledge indispensable for a meaningful approach of the human being as a totality of functions and manifestations.

In this chapter an analysis of the homoeopathic view of man will be attempted. Although this is very difficult, considering that the analysis must be enlightening without, at the same time, acquiring excessive proportions, it is deemed necessary because it constitutes the philosophical basis of Homoeopathy.

For this analysis, all the classical knowledge has been used, enriched with the contemporary experience of clinical practice.

The reference to philosophical systems provides the possibility for comparative study and completes the effort for information within the framework of feasibility.



## The human being

Many views and theories have been expressed concerning the human hypostasis (a Greek word meaning existence or entity). These theories cover the entire spectrum of view points from the most materialistic and monistic to the most metaphysical and dualistic.

It is not the aim of this book to pass judgement or to dispute these theories. In anyway, both the materialistic self-proving and concrete and the metaphysical and intuitively accepted, contribute to a great extent to the integrated view of the human being, from within the truths they contain.

Dogmatism is incompatible to scientific thinking and so is fanaticism over theories. Dogmatism and fanaticism render sterile the scientific thought and they create people who reject, unequivocally, every theory that does not coincide and agree with their dogma and who are ready to condemn every new point of view and become its enemies. As a result of such action new ideas and systems which could offer immense services to mankind, are being fought. This phenomenon has dramatic repercussions on humanity when this polemic turns against a certain therapeutic system that has a lot to offer to

the human health. Those belonging to the category of people who refuse to "open up", lest they be persuaded, have, over the centuries, offered negative services to humanity.

They are the ones who say: "Don't tell me the truth, I know what I believe." This negative action of these people has three starting points:

a) dogmatism, fanaticism and bigotry

b) personal rivalries and contests in the social and scientific areas so that a new theory may not gain acceptance and the subsequent reputation that it deserves.

c) lack of the disposition to follow the new theory, especially when it demands personal effort, study and non-accomodation of what is already known and established.

In categories (b) and (c) belong those individuals who know the significance and the usefulness of the new theory but, inspite of this, fight against it for the reasons mentioned above.

It is purposeful to recall Homer's words when he spoke about the mind: "Intelligent people do not remain attached to a point of view, they are ever ready to accept a better viewpoint and the same applies to the Gods." "come with a flexible mind".

Unfortunately, the history of medicine is full of such examples where theories and accomplishments that later have greatly benefitted humanity, were vehemently opposed in their inception. Their creators were often forced

to seek refuge in other countries.

**Hippocrates**, the father of medicine, whose spirit inspires physicians even today, was highly esteemed in his time, but there were also malicious, slandering commentators such as the writer **Andreas**, who accused Hippocrates of leaving the island of **Kos** for the purpose of setting on fire the library on the island of **Knidos** so that he could present all his writings as his own inspirations, theories and methods while, these were the heritage and the teachings of physicians of earlier times.

**Galenus**, an undisputed master of medicine, was also criticised severely by the French professor of anatomy **Mantebil** (1260-1320) who disputed the ideas of Galenus and said sarcastically: "God did not exhaust all of His creative ability when creating Galenus".

**Galileo**, was a graduate of the university of **Padova**. He dared say that the Earth revolves around the sun, and he would have been burned at the stake if he had not renounced his theory and had begged on his knees for mercy from the holy inquisitors. For his philosophical ideas, he was incarcerated for 14 years and was released only towards the end of his life.

**Parakelsus** (1493-1541) was quoted and commented on, more than any other doctor in the Middle Ages. **Osler** characterised him as the **Luther of medicine**. **Daremborg** said that "Parakelsus dreamt in high noon and went into

delirium in full health." Sprengel held that "he harmed medicine because he tried to connect it with mystery and magic".

**Gaspar Arseli** (1581-1622), the Italian professor of anatomy at the university of Pavia faced intense polemics and malicious comments when he published his studies concerning the discovery of biliary vessels.

**Thomas Sydenham** (1624-1689), known as the English Hippocrates, was very successful, became famous and acquired a very large practice. He thus, however, attracted the envy of his colleagues, who went out of their way to ensure that he did not acquire a professorship at a university.

Here, must also be mentioned the name of a great French doctor who established the first political newspaper, "la gazette de France" in 1631, founder, publisher and editor of which was **T. Renaudeau** (1584-1631), physician to the King and General Commissioner for the poor of the Kingdom. He established charity foundations with wise administration, where poor people received free medical care. He was also the institutor of the first pawn shops and his friend Richelieu held him in high esteem. Guy Paten, who would call him the "pamphleteer" reviled him and the medical school of Paris, always ultraconservative, conducted a vicious fight against him that ended only with his death. France later dedicated a beautiful monument to this great doctor and journalist.

Guy Paten, himself, (1601-1672), an outstanding member of the Paris Medical School, characterized Harvey's theory on blood circulation as "odd, useless, erroneous, impossible, absurd and injurious."

This statement is typical of Paten, one of the most interesting characters of the French medicine of 16th century. He fought with a passion, in the name of the school, against all who presented something new in medicine, against the doctors of Montpellier, against Renaundeau, Van Helman, and many others. His letters, republished by Pique in 1911, provide a vivid picture of the condition of the doctors and of the Paris Medical School of that time.

Malpigi, a student of Borelli and one of the most daring pioneers of Experimental Medicine, was already a professor in the University of Pisa at the age of twenty eight. Some years later, after returning to Bologna, he began publishing his numerous medical discoveries. He was met, however, with such hostility from the doctors of Bologna, who were faithfully conservative and committed to old theories, that his continued presence there became impossible. He accepted the invitation of the senate of the University of Messina where he taught for four years, but he again faced the same opposition from the adherents of Galenus. Returning once more to Bologna he was very satisfied with his election to the Royal Society of London.

Malpigi's life is a good example of the hostility faced by those who dared challenge old ideas. Such was the power of dogmatism and the unlimited admiration for the classical opinions that even the anatomical and microscopic evidence were insufficient to persuade these enemies of every kind of progress.

**Van Helmond**, was one of the most interesting medical personalities of the 17th century. He experienced violent opposition and persecution to the point where he was denounced to the Holy Inquisition by his opponents.

The medicine **China Officinalis** (quinine) has played an extremely important role in medical treatment during the last two centuries, saving millions of people from death. When it was first used, many theories were formulated concerning its pharmaceutical action, yet no assumption of any kind could explain the therapeutic effect of quinine. For that reason many Galen adherents conducted a ferocious campaign against the introduction of this new therapeutic means, under the pretext that it was something irrational. One cannot help but admire **Ramazini**, who declared that the revolutionary effect of quinine in medical history was comparable to that of gun powder in the art of warfare.

The Viennese **Auenbrugger** (1722-1809) was a doctor and musician. One day he happened to see his father tapping a barrel to see how much wine was left inside, this reminded him the words of Hippocrates who had said that doctors could

learn many things if they would pay attention to the sounds and noises produced in the human body and he thought that by percussing the thorax he could evaluate the state of health of the lungs.

Following up on his idea, he found that with the thoracic percussion distinctive sounds are produced, differing in relation to the patients' condition. This method he described in his essay "New Discovery" in 1761. The Medical community, however, did not accept it. Even his professor, the distinguished Van Swieten, did not mention it in his book "On Thoracic Diseases."

He at least had the satisfaction of seeing his discovery ultimately recognised, belatedly, one short year before his death.

Because he anticipated the polemic of his colleagues, he prefaced his essay with, roughly, the following words.

"I offer to my reader a means that I have discovered for the diagnosis of thoracic diseases. This is the percussion of the thorax for the identification of the state of health of the thoracic cavity viscera, through the difference in resonance of the sounds produced. I have written about this discovery, not to satisfy an author impulse or an excessive desire to lay down theories. Seven years of observation left no doubts in my mind about the positively good foundation of my discovery and have convinced me to publish it.

I foresee that I will meet much opposition to my views and in view of this prospect I am exposing this discovery before the public.

In addition, I realize that people who have illuminated the arts and sciences with discoveries or their perfection, have, as a rule, attracted envy, accusations and even hate or slander. I am, nevertheless, willing to place myself in that danger, confident that no one can invalidate my observations. I have written only what I was taught from my repeated personal observations and from my perceptions, after many years of labour.

Never have I allowed myself to add or subtract anything from my observations due to the misdirection of a preconceived theory."

Auenbrugger confirmed his percussion findings with autopsies.

Today, percussion and auscultation constitute the basis of clinical examination.

**Laennec** (1781-1826) of France, was also a physician and musician. A student of Corvisart and later a professor and a member of the Academy of immortals, he was one of the greatest clinicians. Before Laennec, practising physicians placed the ear directly against the chest to listen to cardiac or pulmonary sounds. On his invention of the stethoscope and auscultation, he wrote: "In 1815 I had to auscult the heart of a young female suffering from cardiac ailment. Because of her obesity and youth, examination directly by ear would not permit me to get close to her breasts. I took, therefore, a notebook, formed it into a cylinder and put one end to the precordial area and the other to my ear, whereupon I was pleasantly surprised to hear clearly the sounds of her heart."



In 1816 he wrote an essay entitled "Indirect Auscultation." This discovery also caused agitation and even the famous Broussais called Laennec a "false prophet." Laennec was quick to reply: "Let not my friend Broussais forget that during the last five years, in the department that he directed there occurred the greatest number of deaths and this of course can not be accounted as a success on his career."

The British **Jenner** (1749-1823), became one of the greatest benefactors of humanity with his discovery of the vaccine against smallpox. In this case, as well, many hasty critics, showed up, among whom was the philosopher Kant.

The Austrian **Mesmer** (1734-1815) studied in Vienna and developed the theory of life magnetism. He was the first to widely apply hypnosis as a medical method. But in 1784 the Medical Academy of France interfered and declared that both life magnetism and his treatments were a fantasy. Mesmer was forced to leave Paris, where he worked, and settled in Switzerland.

The German **Samuel Hahnemann** (1755-1843), the doctor who revived Homoeopathic medicine and organised it to a medical system, was intensely opposed from the doctors of his time. The hostility of his colleagues was totally unfounded because they never wanted to be informed about his achievements. They rejected his theories a priori and accused him of a lack of scientific methodology. In spite of all this,

Hahnemann, deeply moved by human pain and suffering, offered himself to the service of medicine. He spent many years of his life lying in bed, describing all the intense and tyranic symptoms produced in him by the several pharmaceutical substances with which he was self-experimenting. The doctors of his time were never willing to be informed about all these, they were not even interested about the validity of his conclusions. There were some, however, who were firm supporters of his and who wanted to know, personally, the truth he offered them. After Hahnemann's death, monuments were erected in several places of the world, to his memory.

Davy of England in 1799 was the first to discover that inhalations of nitrous oxide (laughing gas) had anaesthetic properties. To convince himself, he inhaled the gas and recommended its use to surgeons, but no one paid attention to him at the time.

The German father of psychoanalysis, Freud, published his famous book "Interpretation of Dreams" in 1900, in which he especially emphasised the importance of the unconscious. This book and his theories on childhood sexuality and the oedipus complex generated great stir and divided doctors and intellectuals into two opposing groups. The pro-Freud put him on a pedestal and bowed to his greatness and the anti-Freud denied him any value.

Another great benefactor of humanity, Pasteur, faced the hostility of the establishment when the

commentators of his time said about him that: "Undoubtedly, the world to which Pasteur claims he will lead us, is beyond the limits of imagination"

In 1864, Wells, an American dentist, demonstrated a painless tooth extraction in the Massachusetts hospital, using nitrous oxide. The patient reported no pain, but Wells' critics considered the demonstration a failure because the patient moaned during the extraction. Contemporary medicine can present similar lamentable examples.

In spite of the danger of ridicule and defamation from the scientific establishment, the scientist has an obligation to humanity to present his work, whether this encompasses a new theory, or an old one renewed and enriched with his personal experience. This will be attempted further on in this book. There is nothing left but to hope that well-intentioned readers, both physicians and non-physicians, will want to confirm the new ideas, or reject them, if they do not pass the test of the touch stone called clinical practice.

The materialistic theories on the human being accept it as a totality of cells whose functions are intact and which, by differentiation and organization into systems, constitute an autonomous being. These theories are based on the experience gained by sensory perception. But one must remember that these senses are limited. The eye practices the function of vision

only within the visible light spectrum. It is incapable of seeing within the ultraviolet or infrared spectrum. Similarly, the ear cannot hear ultra- or infra- sounds. Such limitations apply to the other sensory mechanisms of the human body.

It is difficult for someone to prove that the only reality is that which falls within the sphere of our senses and that man consists only of matter, since only this falls within the sphere of our senses. In any event, matter is in itself energy in its uttermost dense form of condensation.

It would be, therefore, possible to assume that since there are sensory organs which perceive matter, there are, by extension, sensory mechanisms which perceive the other forms of energy and not only matter.

Appart from the monistic, materialistic theories, there are also binary theories. These regard man as consisting of two components: One is the material body and the other a non-material element, called soul. Binary schools are those that introduce the "metaphysical" element to the perception of man. Of course the term "metaphysical", could be labeled inappropriate or unfortunate, here.

What is really "metaphysical" ? That which does not fall within the sphere of our physical senses ? That which we do not see, do not hear, do not touch etc ? Perhaps the Hertzian waves and the several other radiations are metaphysical

phenomena ?

Until the invention of the electronic microscope, which made viruses visible, could these have been mentioned as theoretical, "metaphysical" beings, whose only visible manifestation of existence was the result of their action.

There are many natural forces that are not directly perceived but are recognized from the environmental changes they produce. For instance, heat could be regarded as something "metaphysical" since it is recognized and measured only by the difference in temperatures that it produces to different materials.

It becomes apparent that the outmoded state of our senses renders impossible our contact with various natural forces that are recognized only from the result of their action and that is why our knowledge of these is purely empirical in an indirect way.

The same is true of magnetism. While we have not isolated one magnetic pole - there are always bipolars - we, nevertheless, accept magnetism as a natural phenomenon determined by charges and forces.

There are, therefore, natural qualities which, although not perceivable with our physical senses, exist nevertheless, act and determine our lives at various levels. Today, more than ever, there is a tendency to adopt more and more the view that there are no metaphysical substances

and phenomena. All are natural phenomena that simply contradict, some times, the empirical knowledge of man through the senses.

The term "metaphysical" for the various phenomena flourished in the darkness of the Middle Ages, when sourcery and para-medicine were in exaltation.

Today, of course, the rapid progress of science has shed light on the "metaphysical phenomena" and has recorded and measured them.

Let us remember that common phenomena, such as gravity, had once held a "metaphysical" shade in the mind of primitive man, who could not explain them and attributed them to Godly action. Often a "modern primitivism" becomes the reason for characterizing certain phenomena as "metaphysical" because science is incapable, at present, to explain them. It is very certain, however, that in the near future science will be able to explain many more of the currently inexplicable phenomena.

Through this viewpoint, the human being will also be examined. It is not a materialistic viewpoint because it can not be solely materialistic. On the other hand it is not metaphysical either since its accuracy is being proven by science, everyday.

It could be characterized as an extensive natural theory that perfectly agrees with the tangible experience of clinical practice.

This theory considers man as a triple "hypostasis" consisting of **body, mind and psyche**.

Mind and psyche are the concern of Psychiatry and Psychology. Their various schools do not usually distinguish mind from psyche. Clinical experience, however, leads us to this distinction which has no clearly cut boundaries, but which helps in the understanding of human psychomental function.

## The body

The human body is known in very great detail. Anatomy and Physiology are the two sciences that study to the fullest extent its structure and function. The human body is the most tangible of the three parts of the human being. Consequently, it immediately attracted observation. The opposite is the case with the mind and the psyche which one can come to know only from the results of their actions. The Magnet, the metal, is the body. Magnetism is the force ingrained in the metal that gives it its properties. The mind and psyche are to the body what "magnetism" is to the metal. The metal is visible and can be tested directly with natural methods, while the magnetism it contains is invisible and can be tested only indirectly, through its manifestations.

The body consists of a variety of tissues. The tissues form the organs. The organs are in a hierarchical order of sensitivity and importance to the organism, which is in an inverse ratio to their regenerative capability. The skin on the outer surface is the least sensitive tissue. It has great regenerative and healing capability, in contrast to the brain tissue which is ultra sensitive and therefore well protected by the cranial cavity and has no regenerative capability.

The concept of the significance of the organs has a relation to the survival of the human being in the event of their malfunction. The concept of the hierarchy of the organs is in absolute agreement with the homoeopathic law of the progress of disease, because, while disease proceeds from the external to the internal and from the less refined organs to the most refined, therapy proceeds in the reverse direction. This is substantiated by the importance of the organs in relation to the viability of the organism. The brain is the most refined organ of the human being coordinating all the physical functions and is regarded as the centre of all psychomental functions.

## The mind

Mind is the uttermost logical and accounting organ of man. It is the bond between the tangible physical body and the non-materialistic but



nonetheless lively existing psyche. It is the centre of all emotional interactions.

Mind is the administrator of all the material of experiences. It is the focal centre of experience. Mind processes the impressions and forms experience. The ability of the mind to process the impressions is innate. It is a sort of talent which, nevertheless, can be greatly improved. This improvement can be achieved by voluntary methods selected by the individual itself. Individuals who exploit this innate property of the mind acquire great quantities of experience within a short time. This is why reality has revealed that it is not experience, but the amount of impressions that is conjuncted to age. A person of mature age will probably have a greater amount of impressions than a younger person, but this does not necessarily mean that it will also have more experience. This happens because experience is directly dependent upon the processing of the impressions. It is, thus, a common occurrence to meet young people with more experience than older ones. This is due to the fact that the younger individuals have processed much more their direct and indirect impressions than older individuals who have not processed theirs to the same degree. This phenomenon owes its existence, to a great extent, to the progress of education and the development of data processing which offers to the young individual the capability to come into contact with vast amounts of information and therefore impressions within a short time and to process them correctly and rapidly. The result of this

phenomenon is that, as time passes, we find younger and younger individuals in many fields of public life and science.

Mind is one of the most basic tools of man for his evolution. It has the following functions:

a) **Perception:** the ability to perceive through the senses. Perception resembles a direct discernment with a passive phase, where perception is purely a mental function and an active phase where it becomes a psychic function. The predominant view is that perception depends on the knowledge, the needs and the interests of the individual.

This results in vast differences in the perception of the same sensory input among individuals with differing education, with different needs and interests. The theory of form accepts that the physiological process which accrues from a series of stimuli, tends to organize automatically and independently from every previous impression, in a certain structured form (Gestalt) according to certain laws of structure. This form takes the character of direct data in such a way that "to perceive" means "to organize.

Personality and social factors also affect perception. These factors are:

**Emotional factors:** Some of these are relative and are also found in apes of higher species as much as in man. If, for example, to an ape raised isolated from the sight of other animals a picture of an ape is shown, the ape panics, and more so if we show a picture of a snake.

Something similar is observed with some humans, especially women at the sight of a harmless little mouse. Besides the inherited emotional influences on perception, there are also corresponding, acquired influences following a pleasant or unpleasant episode which occurred in the life of the individual. Similar influences are exerted on perception by the interests or the abilities of the individual.

Factors according to the perceptual type of every individual: We know that because of idiosyncrasy, there are individuals of the "analytical perceptual" type, who perceive immediately the details of the perceptual area, but who have difficulties in perceiving the entire structure of that area. There are others who are of the "comparative perceptual" type. These people perceive with difficulty the details of the perceptual area, but perceive easily its entirety.

Social factors also influence perception, the influence stemming from the perception of other individuals of the society, which influence the average person cannot easily shake off, so as to create a perceptual structure that is clearly individual and more or less original. Social factors are especially manifest in primitive people, who perceive almost nothing the way we do (Levy Bruhl), because in them the collective images of the tribe, totally different from our images, are mixed with their perception. But even in civilized humanity the influence of the group on the individual perception is clear mass illusions. The independence of the individual

from the influence of the collective perception constitutes the main characteristic of the scientific perception of phenomena.

It appears therefore that there is an urgent need to free the perceptual ability of individuals from the influence of the public perception, the public opinion, which is often erroneous or manipulated.

The widening influence of the mass media plays a significant role in the creation of this phenomenon. Contradictory information often becomes the reason why an individual loses his perceptual ability and resorts to fanatical acceptance of certain positions as the only way out.

b) **Memory:** Psychology and Psychiatry find it difficult to give an exact definition of the term memory. We could simply say that memory is the ability of the mind to remember. Memory is the reflection of what we have acquired with our previous experience. Thanks to memory, the images of objects, events and phenomena, that are formed by emotions and perception, reappear when the objects and phenomena that provoke them do not affect the sensory organs. In these cases, we no longer have the perception of the objects but their recollection.

Memory, in itself, is indeed of an intellectual character: memory of facts, knowledge, ideas, feelings which the individual not only recognizes as past particles of its conscience, but whose

acquisition it locates in time. Memory is an instrument of learning of a higher level. Memory is not just any form of recollection of the past, but the ability of the conscience to relive the past, identifying it as its own and placing it in time, in other words, memory that is thought.

c) **Imagination:** Imagination, according to **Lalande** is :

A - the ability to form mental images

B - the ability to combine images into entire boards or into successive series, which imitate the facts of nature but do not present anything real or existing (reveries, works of art, etc.)

According to **Ribot**, imagination is creative. This, anyway, is expressed during the recall function of the memory, when many of the memorative data that were forgotten are replaced or simply distorted during this recall.

With the aid of imagination our mind, instructed from the reformation of the past, can construct, by forerunning, an image of the future, erecting on the basis of the knowledge of the past, a hypothetical future which will satisfy the desires that are dictated by our personal inclinations, a dreamy future which we all know, more or less, that impartial reality will not respect.

The individual, which, with perception, can gain knowledge of only a part of an external reality, tries with its imagination to complete all what it cannot perceive directly, not only from the

present but also from past reality. Imagination plays an essential role in artistic creation: painting, sculpture, architecture, poetry, literature and finally in scientific and technical creation itself.

Imagination uses images, more than anything, which do not reach ofcourse the vividness of sensation, but which, according to the expression of classical psychology, constitute "reproductions" or, according to the term used previously, mental images which sometimes, like a distant echo of an old sensory acquisition, reach an intense vividness, especially in some painters and architects who "see", one would say, coloured figures or architectual figures which they afterwards draw on paper, just as sculptors do. At times, these images move away from sensation, become non material, approach the level of ideas and then they deserve to be called mental images.

But apart from images, the material used by imagination can have an emotional character, as is the revival of an old feeling, or it can even be created by a thought.

d) **Judgement:** The term expresses the property of the human mind to ratify or deny the existence of a relation.

True judgement implies the state of full consciousness of this intellectual action and the willingness to clearly formulate the relationship that has been found. So we must separate judgement from a whole category of mental

phenomena which resemble judgement but are not true judgements. This category includes quick behavioral reactions to situations which we neither analyze nor judge, which resemble, however, the result of judgement while they are the result of automation and must be placed in the realm of hypnotic psychism while judgement is unraveled in the realm of expressed thought.

The great problem of judgement is subjectivity. The tendency which the individual has to see things as it wants to see them. This is a basic element for the loss of objectivity of judgement. The same problem accrues when judgment is influenced by emotions or by social factors. A more or less conscious influence of social factors is what is known as conformity, and is characterized by the full compliance of thought and of action with what is generally "acceptable" by society, either in religious or in political views. This can reach the point of conscious resignation of the individual from every right of free mental criticism of whatever is instituted by the whole.

It must also be admitted, however, that social factors may also exert a favourable influence, creating the possibility of objection which, by creating discussion, can lead to the more conscious view of the, possibly, opposite conclusions of judgement and can give the possibility to arrive at a logical conclusion and self-controlled judgement.

One of the strongest tendencies of present day man is the tendency for self-awareness, the

tendency to acquire an objective judgement , as far as possible, in order to be called an "aware" person.

e) **The speech function** as a function that serves communication between similar beings and the transmission of mental situations through the medium of speech.

f) **The function of reason** which is specified as the study of mental actions purporting to enable us to distinguish the real from the unreal, in short the finding of the truth.

g) **Emotions and the feelings:** Different events, different experiences produce in people joy, while other produce grief. There are those that produce enthusiasm, those that lead to indignation and other that cause suffering, or fear. Depending on their relation to the activity of man, these emotional experiences that increase his vitality (activity), increase his strength, his energy and urge him to activity, are called energetic. Passive, or weak emotional experiences, are called those that decrease the vitality of man and weaken his energy. Pleasant emotional experiences are usually energetic while unpleasant ones are passive.

This is not always so, however, under different conditions and in different people the same emotions can have either energetic or passive character. Fear, for instance, can force a person to marshal its strength to confront danger. Unpleasant emotional experiences, resulting



from difficulties or frustrations in the discharge of activity, can have either energetic or passive character: to motivate to even greater energy in the fight against difficulties, or, on the contrary, to decrease energy and restrain activity.

At the side of qualitative differences in emotional experiences there are significant differences as regards their intensity.

The greater the importance of any given phenomenon or the given activity for the life of a person, the greater is the intensity of its emotional live-experiences. Agitation, anger, fear, etc. all these, are several forms of emotional experiences, various forms of subjective relationship of man to reality.

Human emotional experiences are classified into two different groups: Sensations in the narrow context of the word and emotions.

Sensations are called the simpler emotional live experiences that are related to the satisfaction, or not, of the physical needs, such as food, water, fresh air, protection from cold, sexual needs, life-threatening situations e.t.c

The emotions relate to the needs that appear in the course of the development of mankind.

An emotional relationship is produced only by what relates in one way or another, directly or indirectly, to the satisfaction of human needs and the demands projected by society.

It is according to whether, or not, these needs and demands projected by society are satisfied

that positive or negative emotional experiences appear.

The needs of people are multiform and the phenomena of reality complex and they can be, from different angles, in varying relations to the needs of people, some giving satisfaction and some not. The relationship of man to the demands of society can also vary. This is why many aspects can produce complex emotional experiences consisting even of opposing sensations and emotions. A person may, for example, feel moral satisfaction from openly criticizing the faults of a friend, even though directly this displeases and upsets the person. Similarly, a person may feel satisfaction from the discharge of patriotic duty, despite the fact that this is done in conditions that are ruinous to life and give the person physical suffering. The predominance of an emotional experience depends on its importance to the individual. Emotional experiences are closely related to the activity and the behaviour of the person.

From what has been said until now one can conclude that mind is a very valuable instrument for the human being. However, it must be used objectively. As was pointed out before, most and the basic-most mental functions depend on social and emotional factors as well as on the objective and subjective needs of the individual.

In consequence, man some times develops a significant dependance on mind, on his instrument.

The mind, through its automatic function, has the tendency to interpret phenomena in accordance with acquired experience and often through the function of imagination, that is, to see things as it wants. The difficulty of objective judgement has always been great, for man. The individual finds it difficult to relieve its emotions from the social influences so as to experience them more deeply and more completely.

From the time immediately after its birth, the individual begins absorbing images and impressions. Initially, its impressions come from the parents. Later on, at school, teachers become another source of impressions and so do class mates. When the person reaches puberty it is ready to choose its own course. It is ready to select the social and political system it will adhere to. This choice certainly depends on its own needs, which are the result of the learning experiences it has taken. We see in fact that man finds himself caged in a system of inter-influences from which he can escape with correct judgement, the recognition of his true needs and the rejection of directed of false needs. After the passing of puberty the individual has matured and has selected its own moral and social values that constitute elements of its personality.

## The psyche

The psyche, as a problem and as a concept, has concerned man from the beginning of his existence. From the infancy stage of humanity, it has not yet ceased to attract him with the same interest. Of course in the dawn of history the perceptions about psyche were naive and simple, whereas today, after the many lustrous accomplishments of the human spirit, our perceptions of psyche are very advanced and scientifically founded.

But let us make a review of perceptions concerning the psyche through the centuries. Homer mentions that the psyche of the dead is a shadow that lives under the earth, an idol, a shadow of the living men, from whom, nevertheless, neither materialism nor some of the characteristics of life of the "world above" are missing, as is seen in *Odyssey*. Especially characteristic, of this idea, is the fact that "psyche" is used by Homer only as a declaration of the phenomenon of life and death and never as a declaration of the functions known today as "psychic functions". On the contrary, we find a very refined and detailed terminology that expresses a multitude of psychic situations and functions and shows that in the years of the formulation of the Homeric epics there was

abundant material of observations, already processed by the tribalistic society. The main terms that are used are thymiko (meaning the part of psychism that contains emotions), mind (intellect), heart and brain.

Heracletus had a purely natural idea about psyche: he identified psyche with life and life with motion. ("All beings are in motion as he said and many other philosophers had said" says Aristotle, about Heracletos and most of the other ancient philosophers).

So he saw psyche-life through the entire contrasting processes where the predominant law is the law of conversion, of unceasing flow, where life and death are two faces of one and the same phenomenon and where death of one form of existence means the birth of another, where the organic alters into inorganic and the inorganic into organic: the death of the live, the animate existence means its conversion into water, the death of water is its conversion into earth, of earth into water, of water into life. Everything originates from the same initial state of matter, that obeys the inviolable law of motion and of alteration, and all things in it return to matter. "Everything is altered into fire and fire into everything, just as money is changed into gold and gold into money." This is why that which died has no value for man: the deceased is something that we take out of the world of the living, we throw it away just as we throw away waste: "Dead people are thrown away easier than waste".

With this meaning, we can interpret two of the most difficult passages from Heraclitus, where the psyche is connected to one of the most important terms of his philosophy. The term "logos" (Word) which means the more general law of world motion, the law of the unity of controversies and of the perpetual flow and alteration. Heraclitus thus considers that the psyche, as an expression of life, obeys its own law of increase: "It is of the soul to increase itself" and the law that governs it is so deeply rooted in life that no matter how far you walk you will not find the boundaries where life ends.

The perceptions of Heraclitus were also important in what concerned the psychic and especially the mental functions which he views as belonging to the general laws of the motion of nature, which determine the mode of human thought, even though people do not know it: "While life is one and the same for all, many are those who think they have their own will." According to Heraclitus the knowledge of truth is feasible only when research follows the traces of the function of the general law of wordly motion and analyzes the phenomena as they are actually presented.

Still near to the ancient perceptions about psyche as a vital and motive power, Alkmaion was teaching that the psyche is immortal and always moving as is everything else that is immortal: as is the sun, the moon, and the entire sky. According to the testimony of Aristotle, the perceptions of Alkmaion about psyche were very

close to those of Thales and Heracletus and others.

Along the same line develops the theory about the psyche of the atomic philosophers. Thus, Democretus considers psyche as the cause of the motion of beings and interprets it according to his atomic theory. Life originates, as everything else in nature, from the infinite combinations of atoms. The psyche, being more mobile consists of spherical atoms which, due to their shape, are more agile and consequently more suitable to transmit the motion. The function of the spherical atoms that make up the psyche, he saw through the breath which is the condition and the characteristic of life: the external environment, pressing the body of the organism, tends to drive out of the body the spherical atoms and so every loss of spherical atoms must be replenished immediately by the influx of spherical atoms from outside - which is accomplished with breathing. Breathing hinders the spherical atoms from getting out of the body by resisting the external forces of pressure and by aiding the influx of new particles from outside. As long as this function continues live beings remain alive.

Similar is the perception of the soul of the last great atomic philosopher of ancient times Epicuros. The psyche is a material body that resembles hot breath. When this body-breath escapes then death comes.

Based on the greatest accomplishments of natural philosophy and Hippocratic medicine,

Aristotle will become the founder of modern psychology. According to him, the psyche is "that with which we live, feel and think." Consequently, these multiple functions lead to the hypothesis that the psyche can only be a "power" or an "analogy" a composition of several factors and a "species", that is, a formulated substance, an entelechy.

In consequence, it is not the body that is added to the psyche, to create the live being but the psyche is the "entelechy" of a body. That is why those who contend that the psyche is not a separate body and that it can not exist without a body, are right. The psyche itself is not a material, separate from the body but it is "something of the body", something directly connected to the body and this is why it exists in the body, and indeed not in every kind of body but in a body of a certain kind. Here again thought confirms what is accredited by observation: that everything that exists "potentially" can not be altered "energetically" to anything else but to what it has "potentially" the prerequisites to be altered into. So then, the psyche is the entelechy of that body which has the prerequisites to become a live body.

The theories that have, so far, been expounded are those known as monistic or natural theories, in contrast to the binary theories, the "metaphysical" views on psyche, that follow.

Orphism, the mystical salvatory religious faith that came from Thrace, was brought to



Athens in the 6th century B.C. and soon spread to Sicily and lower Italy. According to the Orphic teachings, the psyche does not belong to the body. The body is the prison and the tomb of psyche. Psyche is Godly by its very nature and by its imprisonment in the body it is punished for some pre-paternal sin (the murder of Dionysos by the Titans). To free itself from the body again and to return to its Godly hypostasis, the psyche must pass through the "wheel of need" through a series of successive reincarnations. Initiation into orphism brings about the "purification" of the psyche, its release from the wheel of need and its return to the divine state. Orphism is in other words an expression of desperation and at the same time of hope: desperation for life and hope that the psyche will finally find its salvation in death. This way there is a reversal of reality: Life is death and death is life. Such a perception is something unique in the Greek thought and seems to carry the influences of the mystic spirit of the East.

Orphic beliefs in successive reincarnations of the psyche were adopted by the Pythagoreans and placed within their politico-philosophic framework. The purity of life of the Orphics was connected with the purity of the life of the philosophers. The mystic, salvatory initiation of orphics was combined with the initiation into knowledge, with the secrecy of the esoteric teachings in the Pythagorean schools that were established in Sicily and lower Italy, and all these were combined with the effort of the Pythagoreans to prevail politically in the cities of

Greater Greece, projecting for the first time the form of the philosopher-governor, which was later adopted and developed by Plato. In the Pythagoreans we find one more perception about the psyche which seems incompatible with their orphic beliefs. This is the doctrine that the psyche is a "harmony of the opposing properties of the body" of the heat and of the cold, of the wet and of the dry etc. These opposites are held together by some kind of harmony, just like the harmony of the chords of a lyre. This Pythagorean view is expressed by Plato, through the words of Simmias, the Thebian Pythagorean and a student of Filolaos. In a strange way, Simmias does not defend with it the immortality but the mortality of the psyche. This way, however, the psyche identifies with life and Simmias, although a Pythagorean appears in Plato's "Phaedon" as a dependent of perceptions of the natural philosophy and Hippocratic medicine, to conclude that the psyche appears as a harmonious "krisis" (constitution) of the opposites, within the human organism.

Plato expresses through "Harmides" ,one of the first dialogues of his youth, some tendency towards the Thracian beliefs and the orphic faith in the superiority of the psyche over the body, as well as the immortality of the psyche. In this dialogue of Plato Greek doctors are criticized because they cure the body instead of curing the psyche, from which the body and its health are dependent and the superiority of the Thracian doctor-priests of the God Zamolxis is projected because they knew even how to donate

immortality.

In Plato's "Menon" the famous "theory of anamnesis" (recollection) is presented for the first time. According to this theory, the psyche, being immortal and subject to reincarnations brings with it the "anamnesis" (recollection) of knowledge, which it has acquired in its various reincarnations. The knowledge is carried within itself, but in a somewhat latent state, and is awakened with learning. The process of learning is thus the awakening of knowledge carried inside by the psyche.

The theory of anamnesis presupposes, naturally, an Orphic perception of the psyche. But it is in "Phaedon", in the dialogue dedicated to the last moments of Socrates, that this perception is greatly expounded. What characterises this dialogue is not only that in it Plato refers clearly to the Orphic roots of the perceptions he expresses about the psyche, but that he also connects his theory of ideas that are first founded, in this dialogue: The psyche, in its divine state, before its downfall and punishment, had realised the "ideas", that is, the general notions, which, according to Plato, pre-exist the perceptibles and constitute their eternal and unchanging "prototypes" and their genitive cause. By this connection Plato:

1. rationalises the subordinate position to which he places not only the percepts and the senses but also all knowledge which is connected in any way to the senses,
2. elevates intellect, which he regards as definitely a psychic function,

independent and of irrelevant to the senses and, 3. concludes, in accordance with the much older perception that "the similar knows the similar", in that, the more the psyche is delivered from the percepts and the senses the nearer it is to the world of ideas.

When, however, the psyche looks at itself, as if in a mirror, it rises to the world of ideas, where "the pure and eternal and unaltered and similarly being" is found - the unchanging and always similar to themselves notions that are not subject to the interminable flow of the world of the precepts.

Orphic perception places psyche in a superior position and the body in that of a servant: "Psyche and body are one thing and nature orders the body to work and obey, and psyche to command and dominate." The soul, this way, in accordance with the Orphic perception, takes the dominant position, while the body takes that of the servant since, however, psyche identifies with intellect and ideas it shares with them the divine substance, then the philosopher who isolates the intellect from the world of the percepts and the psyche from the body, is certain to be released from the wheel of need and from other reincarnations. Salvation belongs to the "correctly philosophising" psyche and the Platonic philosopher gains that salvation which orphism was promising to the initiates.

The immediate successors of Plato, Spepsipos and especially Xenocrates, in their theory about

the psyche were inspired by "Timaios" as well as the so called "esoteric teaching" of Plato. This teaching is secret, intended only for his disciples. In this teaching, Plato expounded the theory of the "one" and of the "vague duality". This theory was influenced by Pythagorean numeration, where the "one" is the generative cause of every good and the duality is the generative cause of the material world, of the multiform and of motion.

The psyche, Plato considered, as being unborn, incorporeal and immortal, even its irrational element and the same is true of animals, which is why he forbade the eating of meat, so as to prevent the psyche from receiving the irrational element.

According to Plotinos, the main representative of Neoplatonism, the psyche makes up the third "original hypostasis" which in accordance with the Platonic heritage is separated into two parts: the higher, that is turned towards the second original hypostasis, which is "mind", pure intellect and the lower that is turned towards the material world. The same division we also find in the human, psyche, which is saved as it is being released from the world of matter and by separating from the body, while still alive, reaches an ecstatic-mystical union with the divine.

Galen, apart from imagining the psyche, like Plato, as a divine being consisting of reason, emotion and desire, accepted, in addition, the existence of the vital principle, the psychic spirit

of Stoics, a somewhat subtle aura or substance with which the psyche comes into contact with the brain, acting on it.

Consequently, we can say, from the above, that both the philosophical monism and the philosophical dualism were born and formed in ancient Greek philosophical thought. That is when the two perceptions of psyche were separated and since then they continued through the centuries their own separate courses, which we observe even today, more or less covert. Later on, the medical science, that mostly covers the psyche, concentrated its effort in locating the seat of the various psychomental functions in the brain.

Pinel and Esquirol the famous French psychiatrists, believed in the idea of the action of the psyche on the corporal and vice versa, considering that the spirit is closely connected to the material terms from which the brain functions are dependent. Indeed, Esquirol had pointedly said that if man thinks sensibly through his brain, then it must be through his brain, again, that he becomes insane.

It is perfectly obvious, Dagoret wrote in 1876, that the brain is the instrument of the spirit. Many times moral impressions, passions, sorrows and anxiety play a significant part in the development of psychic disorders, but their action is brought directly on the nervous system, on the parts that are useful as instruments of psychic properties.

Falret, a student of Esquirol and a prominent French psychiatrist, writes in 1864: "In every human being, whether healthy or sick, every intellectual or moral phenomenon, does necessarily presuppose the cooperation of the brain. It is impossible for one to act on the brain without acting on the ideas and the emotions and the opposite: one cannot act on the ideas and the emotions without acting on the brain or on the entire nervous system."

The distinguished Englishman Maudsley said in 1880, that whatever opinion one holds about the substance of the spirit and its independent existence from matter, it is nowadays proven that the manifestations of the spirit are carried out by the nervous system. If the nerve elements are healthy, then the manifestations of the spirit, the psychic functions, are also healthy. If, however, these are sick, then the manifestations of the spirit also become pathological.

Lelut was saying that just as the actions of cellular life alter, so does the spirit alter with the alteration of matter. Every time you see a certain change in the body you must simultaneously seek another in the spirit and vice versa. This relationship we must search in all the levels and all the exaltations and the collapses of the mind, from the last degree of sinility to the highest level of genius and from the most natural mind to its deepest disorders.

Sechenov held that the psychic function can not be studied in a vacuum, isolated from either the

external stimuli or from the esoteric functions of man. He emphasised, even before Pavlov and Freud, that it can not be only a subjective experience, that there also exists a power of reasoning in psychic phenomena as well and that the determiniing cause of all the deeds and actions of man are the external influences. More precisely, not only the external influences but also the entire combination of influences, which man has undergone in the past, all of his previous experience, constitute, always, the result of his development because "every action of the spirit, no matter how simple it is, invariably constitutes the result of the development of man during past and present".

As can be seen from the foregoing, it is difficult to consider the psyche as an independent being. A being has functions and destinations different from and incompatible to those of the mind and the body. Clinical practice confirms this opinion. The body, the mind and the psyche make up a united and inseparable entity. The separation of these notions has more of an educational rather than a factual reason. Just as magnetism cannot be sepatated from the metal, but both exist concurrently and this concurrent existence is that generates the magnet, so it is impossible to consider man only as a body or only as a psyche. The concurrent existence of body and psyche is that gives birth to the living being called man.

In this book, we do not consider the psyche as a "metaphysical" being. We considered it a physical being, that is being researched by



science, with additions to the knowledge of it occurring daily. We consider the psyche an energetical being that coordinates the functions of the mind and the body; a sort of energy with great condensation from which the mind originates with greater condensation and the body in the greatest condensation of this same energy.

The psyche, being a subtle, expanded energy has its own qualities and its own constants. The same happens with the mind, which originates from the same energy, but in greater condensation so that it changes form and subsequently it changes qualities and natural constants also.

Finally, the body is considered as the greatest condensation of this same energy which, in this state, gives birth to matter, which has its own qualities and constants.

Metaphorically speaking, we could say that a cloud with its own properties represents the psyche. When it condenses it becomes water which represents the mind and has different qualities compared to the cloud. When the water is condensed even more it becomes ice, with different properties. Although these three materials are different and behave in a different manner they do not cease to consist of the same element, the same substance.

Like mind the psyche has certain functions:

#### a) Perception

The psychic perception corresponds to the perception of the mind, but with one difference. It does not pass through the sense organs. It is a

perception more automatic than intellectual perception. Psychic perception passes through the psychic senses which are much wider than the physical. The range of psychic perception has not yet been discovered, but it appears that the psychic senses are not restrained by space and time as is the case with the physical senses which determine intellectual perception. It could be said that psychic perception is related to prescience, which is taken as an ability to perceive phenomena with the psyche and not with the mind. It is this same quality of psychic perception that led Einstein to conceive his Theory of Relativity, a psychic not an intellectual inspiration, since the conclusions of this psychic inspiration are difficult to be completely understood by the mind, even to the present.

It appears as if the psychic perception comes about when the psychic senses come in contact with the absolutely real, in contrast to the intellectual perception which comes into contact only with the relatively real due to the limitations of the physical senses. Einstein reports: "In physics I quickly learned to sense what is fundamental and to put aside everything else from the plethora of things that detach our spirit from the essence." Hoffman, writing about Einstein was saying: "Such a mighty prescience cannot be explained with reason. It is something that is neither taught nor put into rules, because otherwise we could all become geniuses."

In spite of all this, we can feel optimistic that science will discover the laws ruling psychic

perception, and that someday they will be taught in schools, the way that the laws of intellectual perception are now taught.

#### b) Reason

Phenomena seem to point that we can accept the existence of a psychic logic. One arrives to this conclusion intuitively, through the lives of ingenious individuals. To these individuals, a psychic perception appears beyond the limits of intellectual perception, of a kind that Einstein himself characterized as prescience. These individuals have provided solutions to problems that could not be solved with intellectual reasoning. Since logical procedures are required, for the solution of any problem, which in these cases are not intellectual, they will have another hypostasis, that is the psychic hypostasis.

Reason as an intellectual function is based on axioms. An axiom, however, is something we take for granted, as the basis of our intellectual structure but it cannot be proved. For this reason, intellectual logic can lead us only to the relative truth, although its original target was the absolute truth. The principles or axioms of the intellectual reason have been widely disputed. Professor Patrikios says: "All three 'fundamental principles' (of intellectual logic) have become the object of intense disputes. They have been accused of being metaphysical principles that can not be applied precisely to the specific reality which is characterized by instability.

From the first axiom, the axiom of identity, one can deduce a metaphysical conclusion: that reality is permanent and definite, yet we know that every specific reality evolves as for instance the live matter, or even a lifeless metallic object which is being oxidized, or that is otherwise altered with time.

As for the principal of non-contradiction, this also appears to be disputable, when applied to a specific reality, because this reality is "in a state of continuous flow". It is constantly "in the making" e.g a child continuously matures and grows, in other words, it is small in relation to what it will become and it is big in relation to what it has already been.

In what regards the principle of the non-excludable third, this too has a metaphysical character and is not accepted when it concerns an objective reality because, for example, between the warm which we must regard as A and the "opposite" the cold which we must regard as non-A, there is an infinite intermediate gradation, that are "third possibilities".

From the above we deduce that these "fundamental" principles are those of a "formal reason", that they constitute, more than anything, principles of a linguistic character and that this form of "reason" consists mainly of rules that permit, as Granger says, the correct handling of language.

Psychic logic also has its own principles which, however, are determined by nature itself, from the very principle of phenomena; this is why it is the basis leading to the absolute truth and not to relative truth. The principles of psychic logic are indeed the **natural laws**.

### c) Emotions

Psychic emotions are free emotions. They are not bound by the Ego of the individual. The intellectual emotions are determined by the relation of the individual, its Ego, to other individuals. The child, for instance, loves its parents because they protect it. Intellectual emotions relate to an exchange of offers between people: we like those who refrain from insulting us; on the contrary, we dislike those who do. We feel satisfaction when we are offered something or, to the contrary, we feel anger, indignation, hate, for someone who deprives us of something.

The psychic love is unlimited. It is addressed to all, not only to those that benefitted or served the individual. Psychic satisfaction, which is often confused with intellectual satisfaction does not derive only from the recognition by others. It can exist even when there is no such recognition, because it seems from the feeling that the person has acted according to natural law.

The feeling of psychic tranquility is likewise universal. The feigned calmness achieved by intellectual skill has no relation to the deeper psychic calm. It is the psychic emotions that give the deeper sensation of serenity. Altruism also

belongs to the psychic emotions since it presents the perfect form of service for the benefit of society by the Ego of the individual.

These three pure constituents of a person as an intergrated and inseparable entity are inter-influenced and inter-dependant. There can be no physical function that will not have repercussions on the psycho-mental state of the individual and vice versa. This belief is reinforced by the recent progress of psychosomatic medicine. Psychic and intellectual influences ignite mechanisms in the body which, through chemical or electrical stimuli, affect its function.

Inversly, body functions that were stimulated first have as a consequence intellectual and psychic reactions that are expressed in several ways. E.g, unpleasant psychomental stimuli such as anxiety, fear, grief, or even pleasant ones such as joy, the feelings of love and such that cause palpitation, perspiration, redness or palor in the face e.t.c. By contrast some pleasant or unpleasant physical sensation affects the psychomental state. E.g pain causes uneasiness, restlessness, irritability etc.

The limits of these interactions of the body-mind -psyche axis are not yet known completely, but there is an ongoing and increasing amount of evidence of this relation.

The great progress in the techniques of Biofeedback, in recent years tends to establish the view that mind directely influences the body and

indeed to such a degree, that what is currently known about the limitations of the body is being renegated.

Erik Peper reports that in 1971 when he was examining a person who was capable of passing the spokes of a bicycle wheel through his cheeks without any sensation of pain, he ascertained during the experiment the production of alpha waves in the man's brain while he was in a state of alertness. The individual reported that he could convince himself that he had no pain.

This case reminisces of the "fire-walkers", in Greece and India, who walk on hot coals while in a state of psychic ecstasy without sustaining burns.

With the aid of Biofeedback, science has given man the capability to control the functions of the autonomous nervous system. This way, such functions as gastric secretion, heart rate, blood circulation, temperature regulation etc. can be influenced by the individual's will. By means of this same training, man has even managed to deceive even the lie detector, whose function is based on changes in skin galvanic resistance due to minute amounts of perspiration secreted when a person lies. By controlling, however this function, which is dependent from the autonomous nervous system, man has succeeded in deceiving the machine. These examples clearly show the effect of the intellectual and psychic functions on the body which tend to lead us to the conclusion that time will soon come when man will be in control of his biological

functions at will.

This view is reinforced by the accomplishments of medical hypnosis. The individual under hypnosis is capable of putting a red hot coal in his mouth and suck on it as if it was delicious candy, without sustaining any burns, since its doctor has submitted it to the idea that the coal was a candy. Is it possible that ultimately the limitations of the body will prove to be totally different from those we know now ?

Will the time come when the body will be that which the mind wants it to be ? This of course will signify a great change in the idea of aging.

It seems that nature has given man vast possibilities of self-regulation. By contrast, man often behaves inconsiderately towards nature. Man and nature make up an open, natural system.

The activity of man has a direct effect on nature and vice versa. The relationship of man with nature is, from their inception, homeostatic for both parts. In this relationship, man can potentially find his balance, the best conditions for his survival and generally his homoeostasis (homoeostasis is a Greek word meaning the preservation of a harmonious balance). The same holds for nature as well, in its relationship to man, but this homoeostatic relationship is very often disturbed from the activity of man which, in obedience to the natural law of action and reaction, has as a result a reaction for which man is called to pay with his health.



It is very difficult to give the definition of health. Here, we could speak of health in relation to the homoeostasis of man in nature and say: "Health is the state of the homoeostasis of man in the open natural man-nature system and is characterized by the sensation of happiness in all of his levels, that is, the body, the mind and the psyche." The activity of man relative to nature is determined by human laws, which, being man-made and often dictated by temporary interests, tend to prove imperfect and often destructive to nature. But destruction of nature means destruction of man himself, since they both are closely tied to a relationship which little by little stops being homoeostatic.

The result for both is disease. The disease, of man has been extensively studied due to the need that it creates. But the disease of nature has gained interest only recently. Ecologists have undertaken a great part of the struggle to save the homoeostatic relation of man with nature, which is threatened with total destruction.

The origin of disease according to the point of view, which is now being developed, is energetic. It is clearly a matter of disharmony between man and nature.

In order to restore this harmony, man must adopt methods that do not disturb this delicate balance.

The notion of hierarchy in what concerns the function of the organs has already been

mentioned. This same hierarchy, however, appears in the triptych body-mind-psyche. On the top of this hierarchy is psyche, followed by mind and finally the body.

Homoeopathic treatment obeys this hierarchy, which is why it proceeds from the interior to the exterior, from the most subtle constituent of man, that is psyche, to the mind and to the body.

This view is confirmed by clinical experience, where the patient who follows homoeopathic therapy almost always reports, before the relief of his physical problem, a relief of the accompanying psychic and mental ailments.

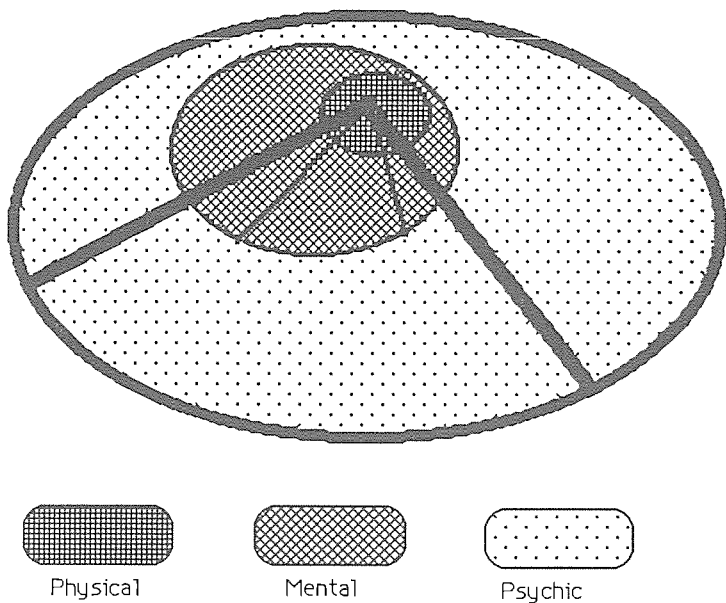


Fig. 10  
Schematic representation of the three planes of the human hypostasis.  
Physical, mental and psychic planes are represented by circles of different density. The triangular sectors represent the interaction between the three planes.

## Chapter 6

# THE LAWS OF HOMOEOPATHY



## The Laws of Homoeopathy

As previously mentioned, Homoeopathy is an integrated medical system, consisting of two sub-systems: a diagnostic, subject to special laws concerning the pure homoeopathic diagnosis of the idiosyn-drasy, and a therapeutic sub-system, subject to laws concerning the homoeopathic treatment. In this chapter, these laws will be highlighted and the mode of their application will be explained.

### 1. Laws concerning the diagnosis

#### a) The Law of similars

This law has already been expounded in the previous chapter. Here, only a conclusive reference will be made. It is the most fundamental law of Homoeopathy and can be summarized in the phrase: "*Similars cure Similars*", that is, substances that, while in their crude form provoke in a healthy organism a pathological picture, have the capability to cure the patient with a similar pathological picture,

when given in the form of a homoeopathic medicine. In other words, *the medicine that can produce symptoms similar to those of the illness, is also the most effective for the cure of the illness.* A medicine which can produce a certain pathological state, when given in high dosages, can cure an illness which presents similar symptomatology, if given as a homoeopathic medicine (potentized in minute dosages), even if the illness was produced by another cause.

#### **b) The Law of the Homoeopathic Target**

This law states that *"there are no illnesses but only ill people and so the diagnostic but also the therapeutic aim of the homoeopathic doctor is the patient, and not the illness"*

Whenever a homoeopathic doctor treats a patient, he invariably goes through the usual procedures which will lead him to the diagnosis of the malady and which will allow him to name the illness according to the medical terminology e.g. colitis, bronchitis, depression, neurovegetative disturbances, diabetes mellitus and so on. But that is not enough. He must now concern himself with the patient as a human being, as a well concerted entity of three elements called body, mind and psyche. The homoeopathic doctor cannot consider the patient only as a body organ e.g. a suffering hand, foot, eyes or stomach. Anymore, medical science has proven that the majority of illnesses have a psychosomatic

hypostasis (essence), something that supports the Law of the Homoeopathic Aim.

The West German researcher H.J. Baltrusch summarises as follows his researches, of the last three decades, on the psychosomatic consideration of malignant neoplasm: "A psycho-social stress can play an important role in the appearance of a malignant tumour. A high percentage of cancer patients showed clinical manifestations of the malignancy when they could not get over a difficult situation, a significant psycho-social change resulting in a threatened or real danger of losing an important human relationship, or after mourning and depression followed by despair and the unbearable feeling of helplessness."

The cancerous individual described by Baltrusch has inhibitions, is pathologically flexible and easily adaptable, conformist, attached to the norms, depressive and obsessive. Additional characteristics of its personality are the tendencies to refuse and repel unacceptable emotions, to hide emotions and psychic tendencies and at the same time it suffers from a profound inability to express anger and anxiety which this type of person conspicuously hides under a mask of tranquility and calmness.

We know that when someone suffers from an ulcer and has stomach pains, this also affects one's psychological situation with the correspondent repercussions. On the other hand, such negative emotions as anxiety, agony or other



disturbing feeling, have an effect on the physical functions and manifest themselves with such symptoms as palpitation, blush, stomach pain, trembling, etc. The diagnostic data collected by the homoeopathic doctor concern essentially the patient who is faced holistically, as one being which expresses himself in the physical the intellectual and the psychic planes, since these are inseparably connected, interdependent and interacting.

The metabolic or respiratory acidosis or alkalosis also produce various psycho-mental reactions, ranging from excitation to apathy. Fear, anger and several other emotional situations increase CRF (the factor regulating the cortizole secretion in the blood.)

Prolactine secretion is stimulated by anxiety. Thyroid hypofunction causes psychomotor retardation, lower emotional tone and sometimes psychotic manifestations. On the other hand, hyperthyroidism often produces irritability, overactivity and emotional sensitivity. Cortizole hypersecretion (Cushing's Syndrome) produces irritability, changeable mood, and often psychotic manifestations of the manic-depressive type.

Anorexia nervosa often produces amenorrhoea. In this case, the psychic factor affects the hypothalamus of the brain and causes inhibition of the secretion of genetic hormones.

Psychological factors also affect the virility of a person and affect its sexual disposition.

Psychological factors also affect the immune system with the result that individuals, in a state of psychic stress, are more easily infected from virulent factors.

S. Trotnow, a West German researcher, in his research in the gynaecological clinic of a German hospital administered the Minnesota Multiphasic Personality Inventory (MMPI) to some 7,500 women and found that divorce and especially widowhood contribute to the development of malignant neoplasms of the breast. Sexual abstinence, social isolation and frequent occupation with religious matters were found to be more common among the group with breast cancer than in the control group. Women having breast cancer were also statistically found to be much more neurotic than expected.

K. Achte of Finland and his collaborators, with the help of a special questionnaire and psychological tests similar to the British M.P.I and the American M.M.P.I, reports the frequent existence of psychic isolation and the constant tendency for self-destruction in individuals that are about to develop cancer. Insufficient self-knowledge, difficulty with interpersonal relations, intense rectal-sadistic tendencies, are also usual findings concerning the personality of canceric patients.

The Hungarian doctors Nemeth and Mezei, in a series of studies published over the last 20 years report the constant findings of a number of psychological stress, depression and the

irresistible feeling of despair in most of the cancer patients whom they researched. The existence of some degree of aggressiveness and hostility in these patients consists, for these Hungarian researches, a favorable sign for the prognosis of the disease.

### c) The Law of Miasms

The Law of Miasms states that: *"There are three basic miasms that influence man and create an underlayer of elements that are useful for the deepest possible approach to his idiosyncrasy"*.

Studying the human being, Hahnemann ascertained the existence of three archetypes of human expression. Three basic, primordial idiosyncrasies which he called miasms. The term is Greek and it means "an effect a deep influence".

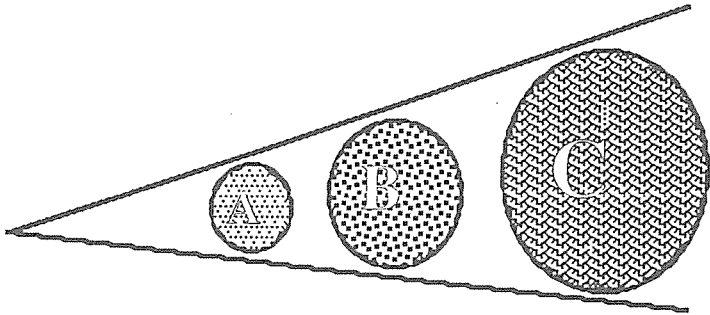
Hahnemann assumed that, man had been, at his creation, an absolutely pure being but was later influenced by several factors that left the marks of their effect on him and have burdened him with what he called miasm. Hahnemann's miasmatic theory can be considered as analogous to the Hippocratic theory of idiosyncrasies, that has already been mentioned.

Hahnemann distinguished three miasms: the psoric, the gonorrhoeic, (or sycotic) and the syphilitic miasm. He assumed that these came

from the prolonged massive and persistent infection of the human race with the three corresponding diseases. This way, man found himself under the influence of the miasms which formed his deep primitive idiosyncrasy, his idiosyncratic cast model. All human beings are under the influence of miasms, since these are transferred from generation to generation. One of them, however, always predominates and gives the prevailing tint to the idiosyncrasy of the individual. Hahnemann studied and recorded in detail the special elements and the influences that each miasm exerts on the personality of the individual.

It has thus become possible to classify individuals, even more distinctly, from the idiosyncratic point of view and at the same time to make important "prognoses" about the progress of the homoeopathic treatment, in the particular individual. For the physician, the knowledge of the deeper sublayer of man is as important as it is for the sculptor to know the nature of the material he is going to chisel. Professor Pascero, who interpreted and completed the miasmatic theory, states:

"Through miasms and the physiognomical characteristics, the physician perceives the degree of pathology of the patient, by classifying all the indications and all the symptoms according to how they correspond to every miasm. This way, the physician reaches a conclusion about the manner and the degree these alter the correct expression of the individuality of the



A = Psoric  
B = Sycotic  
C = Syphylitic

Fig. 11:  
Schematic representation of the Law of Miasms.

person. At the same time he can determine the future progress of the individual, that is , he can make a "prognosis".

The "prognosis" made by a homoeopathic doctor is not based on the assumption of an organic pathology which makes generalities out of specific cases, but on a special verity of the human being which he can examine in all its aspects using its past history, its present situation and what precisely lies behind this moment of its life and, above all, the projection of its self into the future and the possibility of affirmation in the presence of what is negative and which forms the miasm.

"Every human being is characterized by a miasmatic formation through which it constantly endeavours to raise itself according to its individuality. When the miasmatic obstacle is so strong as to make the individual feel a distortion of its tendency for self-realization, it provokes symptoms that create a conflict between the ego striving to express itself and the obstacle or negativism which the miasm has. To every miasm we give a number. To the psoric miasm we give 1, to the sycotic 2 and to the syphilitic 3. This way we could refer to every individual with the use of these three numbers, according to the order of the influence on it. For instance, a 3-1-2 person means that it has intense and predominant the influence of the syphilitic miasm, less strong the influence of the psoric miasm and even less the influence of the sycotic miasm. There are six combinations of this kind between the miasms.

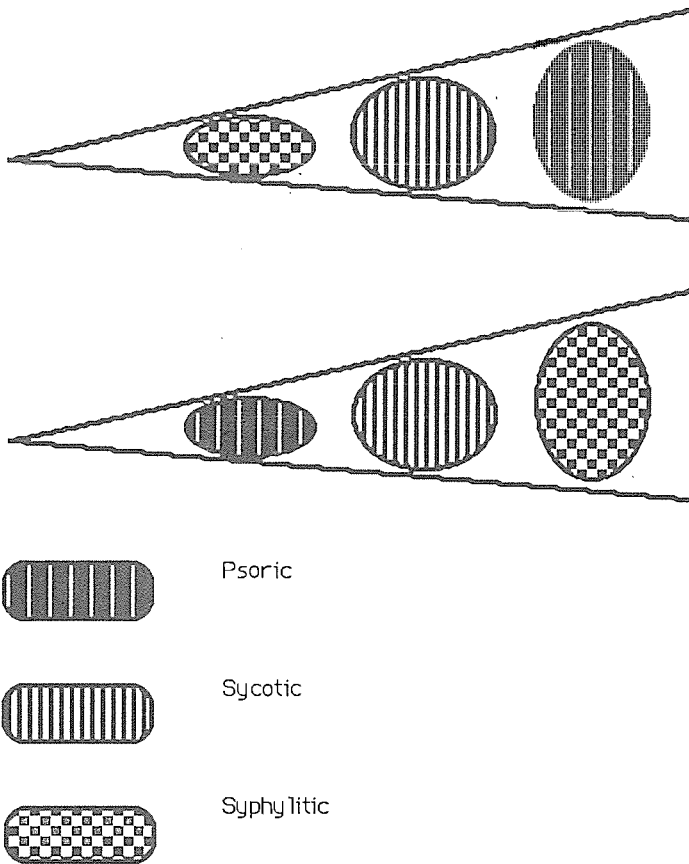


Figure 12:  
 Schematic representation of the miasms of two different people. The special relationship between two people is due to the circular complementary relation of their miasms, i.e. 1-2-3, 3-2-1

What must, now, concern us is the evolution of the human being. In the presence of a truly efficient therapy, that Homoeopathy is and of something negative tending to destruction, that is the Miasm, we have an excellent weapon, the *Materia Medica*. We must use it correctly. To do so the knowledge of the miasms is essential.

The miasmatic aspect of the human being also predetermines its contacts and its social relations. Remember the philosophic axiom: "Everything has a reason for being." This is a fundamental axiom of all knowledge. There is no result without a cause. Each of us is a result of other influences from our ancestors. We are not an accidental result. We are a causal result. We do necessarily have certain characteristics. Theory, as well as practice, prove that in order to have harmony between two people there must be certain coincidences or correlations. This is why, for instance, we say that this individual is or is not likeable. We prove this every minute.

In the same way, the miasmatic aspect explains the company we keep in our daily lives. We can be sure that a patient who is psoric-sycotic-syphilitic will be a perfect complement to another individual of the syphilitic-sycotic-psoric type because, with their predominant miasmatic tendencies, they form an almost unbroken cycle. This way we see that what is biological becomes mathematical. Between the emotional and the biological spheres there exists an absolute correspondence. A 1-2-3 individual, however, does not have the same



correspondence with another 1-2-3 type of individual and the two do not relate. This is an absolute truth from the emotional or from the psychological manifestations point of view.

The reader is invited to see this right now. Let us take an example.

A writer, for instance, if he has a predominant psoric miasm influencing most of his manifestations, then his writings will have a widespread impact and will make people ponder at length about them. This is the characteristic of the psoric miasm, and everything that this individual does will bear this characteristic. He will have great planning, intense revisions, prolonged process. His writings will be somehow calm, meditative, penetrating.

If, now, the predominant miasm of the writer is sycotic, his articles will be enthusiastic, thrilling, they will create a stir. They will be "best-sellers", created with a manifestedly warm disposition and their effects will be sensational and short.

If it is the syphilitic miasm that characterizes the writer, his book will be very revolutionary, very great or irrational. It will be basically controversial, inflammatory or subversive, whether it is of a philosophical or of a political nature. It will always be opposed to something with such persistency and maybe malice, as is the intensity of the syphilitic miasm.

Of course we can apply this theory to any field of human relations, but it is much more evident in the work of artists and to this subject I have devoted a great amount of study. Let us take a painter, who has the psoric miasm in predominance. He is very different from others. You all know the work of **Fra Angelico**. How is it? It is cold, peaceful, sweet, quiet, where the blue colour always predominates. All of you also know the works of **Rubens**: what a tremendous difference! Rubens is full of colour, shapes, gaiety, because he is predominantly sycotic. And, also, what can we say about **Van Gogh**? His work is tormenting, full of red colour, he counterfeits shapes, ridiculing geometry, because he was led by his syphilitic miasm.

In this manner we can analyse music, with more certainty than with any other theory. Using the miasmatic theory we can completely analyse an individual on the basis of its contact with us, its physical or intellectual symptom, its attitudes, its dynamic aspects, its known historic, as well as its expression, so as to classify it in our mind according to a series of corresponding signs which form a clear picture of this individual.

There is a rational coherence in relation to the past of the individual which is projected into its future in a characteristic way. On this future we can achieve several therapeutic corrections depending on the similarity of the medicine given, which is doubtlessly chosen not only for its organic but also for its intellectual symptoms, the psychism, the contact, the various tendencies e.g

the music of Bach. It is superb music understandable by and accessible to man, because it has been regulated by the psoric miasm.

When we are pleased with Bach's music-whoever is pleased by it- we must be in a psoric attitude, passivity deep introspection, a disposition for higher things. It could not be otherwise. This is the psoric way of escaping, like the paintings of Fra Angeliko.

Now let us think that should Bach had no miasmatic influences, he would not have had any resemblance to us and his music would be music for angels and not for human beings. In the same way, Rossini's music is totally sycotic. It is very superficial and it stimulates our sycosis; it makes us dance, jump, laugh, it makes us express our joy to the point of hilarity, of delight.

By contrast, the music of Beethoven, shaped as you all know from the syphilitic miasm, has a touch of passion. His "appassionata", his symphonies, all reveal the human passions in an ingenious way. But this does not mean that the syphilitic miasm made him a genius. It means that his genius was largely shaped by it. That is, if he as well had not had the syphilitic miasm, his music would have been superb, but incomprehensible to us. We assimilate with him according to our own syphilitic burden.

The homoeopathic method is unique in understanding and laying the foundation of

miasmatic theory. According to it we can understand the human being as a whole. Without the miasmatic theory, Homoeopathy is like any other medical system. Without the miasmatic theory it is but common medicine, with some advantages, however, without the superiority added to it by the miasmatic theory. There is nothing in the world that can modify and ameliorate a miasm except for the idiosyncratic-homoeopathic medicine."

#### d) The Law of the Vital Force

The Law of the Vital Force states: "*There exists in man a power related to the phenomena of health and disease that occur to him, and it is called vital force.*"

Homoeopathy has been, in the past, an inscrutable therapeutic method. Its results were tangible but the theoretical knowledge of medicine was not sufficient to explain the modus operandi of Homoeopathy on man. Today, of course, science has succeeded in providing many answers to the old unanswered questions, as it became evident from the scientific studies that have been mentioned. Hahnemann was ecstatic in the face of the powerful therapeutic action of highly-diluted medicines and tried to give an explanation which, naturally, originated from his personal experience. In his effort to locate the point of action of the homoeopathic medicine on the human organism he developed the theory of the vital force. This theory drew strong

commentary from the doctors of his time, both positive and negative. Today, the theory of the vital force seems to be ascertained by scientific research and also by common human experience, which is the catalyst for many truths. It is deemed purportive to make, here, a presentation of the classic view about the vital force, together with the more current views.

Scientists have many times found themselves confronted with a difficult question: what is this great power that energizes every living organism? What is that power that coordinates the action of billions of cells of an organism into a common model of action? What is that subtle substance which, when it stops energizing the body death comes and which cannot be measured with physical methods, since just one second after the death of a person all its measurable constants are the same but despite this it is lifeless?

What is that internal power of man to which are attributed all phenomena of self-cure, even in cancer cases?

The vital force is the energetic power found in all living beings. It is the power released by the organism to neutralise the effects of morbidic factors natural or artificial. "Was it not for the vital force, no living organism could confront the morbidic factors and life would not exist at least not in its present form," Hahnemann says in his book, "Organon of the Healing Art".

Freud, as well, talks about the vital force, and he refers to it as "Libido". It is an energy which he never measured but saw it expressed as a motivating force in every psycho-emotional expression of the individual, a force which mobilizes the disposition for action, for expression, for communication; a force without which no psychic action can take place no psychic function can occur.

**Wilhelm Reich** named this energy "orgone" and tried to measure it, to direct and to use it. The results of this effort were spectacular.

In acupuncture the vital force is referred as **KI** or **CHI**. It is considered to be the energy that constantly flows through the body meridians and is accumulated into energy reservoirs which, although they are not anatomical beings, they constitute points of acupuncture. The action on these points with the needles as conductors connecting the energy with the universal energy, produces the known results of acupuncture.

Naturally Hippocrates also, in his theory of the five elements (earth, water, air, fire, and ether) mentions ether as the life-giving power of the organism, something related to the superior intellect and to psyche.

The vital force of the organism is the energy potential itself, humans have, which permits them to develop defence mechanisms and to cope with every-day stress. The vital force is the bioenergy contained in the energy reserves of the organism and can be transformed into other

forms of energy, according to the needs of the organism.

Is the vital force something that can be measured or proved? The most sceptical of the observers of man would wonder about it. The answer comes in a natural manner, through the observation of the cures obtained with homoeopathic medicine.

The fact being that a highly-diluted medicine, such as a homoeopathic substance has, for more than two centuries, been proven to be medicinally active, we cannot but conclude that this energising medicine acts on the energy hypostasis of man which Hahnemann called the vital force. Certain other phenomena, however, also lead us to the acceptance of the existence of a force that has the capability of being mobilized and to cure simple or more serious maladies such as cancer, without the effect or the assistance or any medicine. This capability of man for self-cure leads to the empiric acceptance of the vital force as an able and necessary condition for the accomplishment of self-cure. Another widely discussed phenomenon called auto-suggestion comes to add new indications that reinforce the theory of the vital force. When the patient is by himself persuaded for his cure he is indeed cured, probably by mobilizing his vital force which, until then, was inactive. It seems that some cure mechanism was mobilized all of a sudden, which could be characterized as the vital force of the organism.

The placebo effect (curative action of a placebo devoid of any active ingredients) is one more indication of the mobilization of a therapeutic force in the organism without any apparent reason and which could be named Vital Force.

The Greek Professor N. Rasidakis reports: "In two of our research studies, published between 1970-1979, entitled *"Anxiety, Schizophrenia and Cancer Development"* and *"An Essay on the Study of the Etiology and Pathogenesis of Schizophrenia, Psychosomatic Diseases, Diabetes Mellitus and Malignant Tumours"* we have expressed for the first time, the hypothesis that these four diseases are produced from psychotic anxiety and the reappearance of the life instinct. These four diseases were supposed, by **Bahnson** and **Bahnson**, to be parts of a unity, but we set the boundaries, proved them statistically and finally named them internationally. These diseases, no matter how multiform they seem to be, have acquired a special meaning and were explained as a way in which the individual can channel its anxiety in an effort to achieve psychobiologic balance and homoeostasis in its struggle for life. This transubstantiation of anxiety, we believe, represents the level of a regression of a certain ontogenetic and phylogenetic evolutionary phase and is manifested by the way that the organism reacts, according to its character structure.

The consideration of another disease, the Continuity of Cancer, permits us to ascertain similar phenomena in many cases. Intellectually



endowed individuals seem to react more favorably to a psychotherapeutic effort against the disease.

If the psychotherapy techniques can manage to mobilize and to activate the powers of the organism against the symptomatology of cancer development, the intellect facilitates very positively these developments. Should not we then see the intellectual apparatus as a factor of resistance and a fighter of the disease? This fact has already been detected and determined statistically from several analyses of the personality of cancer patients, within the framework of their psychotherapy.

The above findings permit us to support the notion that intelligence significantly affects both the course and the prognosis of malignant tumours the same way it affects the capability of the organism for reaction, to the degree that it exerts decisive influence over the defence mechanisms against schizophrenia, so that by using the terminology of psychiatric epidemiology we can talk about a common factor between these two diseases."

The vital force is, in as many words, a power permitting man to exploit the therapeutic energy of the potentized homoeopathic medicines and is marked by certain specific properties:

a) It mobilizes the regenerative capabilities of the organism that attend to the restoration of every day physical and psychomental wear.

b) It undergoes changes and can be transformed from one kind of energy to another.

c) It has the capability to form and to shape the groups of properties of the human organism, giving birth to new models of psychomental expression and this because of the ability of the psychomental organon of man to mobilize and to direct the vital force.

d) It has the ability of adaption to the internal and external conditions, so as to perpetually preserve the homoeostasis of the organism.

The Vital Force also has the property of expression. A result of this property is the pathological picture of a sickly syndrome, i.e a whole range of symptoms and signs that determine the specific syndrome and which is nothing but the cry of nature for help, as expressed through the ailing organism.

In the study of nature we often wonder: Which is that power that cures a sick animal which does not have the benefit of being attended by a doctor, but isolates itself in a quiet corner, avoids food even when offered to it, drinks very little water and by lying low it tries to give the opportunity to this mighty power of its organism to fight and to win over the disease?

This power is considered to be the vital force of the organism which perhaps, to this day, appears as a mystery because it has not been measured with scientific instruments. Despite all this, the progress of science is so rapid that very soon this too will be done.

Naturopaths claim that by trying to assist the vital force of the organism and by imitating nature, they avoid giving food or give very light food, when someone is in the acute stage of an illness. By so doing they do not weaken further the vital force of a person by forcing it to decompose and to assimilate food, especially when it is heavy or foul. The vital force can, therefore, throw all of its strength to the fight against the illness, since the reserves of the body energy suffice for several days of fasting without undrenourishment of the organism.

When the vital force is in its natural and balanced state then the state of the living organism is called "Health". When it is disturbed, then the state of the organism is called "Illness". When the vital force stops functioning, or simply vacates the material body and the body becomes inanimate, then this state of the organism is called "Death".

Longfellow states:

*What the string is to the bow the vital force is to the body.*

The Vital Force is the potency or that energy which, when present and active within the body, produces all phenomena of health or illness within the material body. When, however, it leaves the body, man is considered dead despite the fact that all his systems, the organs and the tissues remain intact.

Tale said that unwillingness to accept the existence of the vital force would appear to him as

unreasonable as the inability to distinguish a live organism from a corpse.

Hahnemann called the vital force "Totalitarian" because it is self-powered and an "autonomus potency" because it is the energy that keeps the organism intact and without which life could not exist in the material body. It is the vital force that gives life to material organisms and is responsible for all phenomena and functions of the body in both the state of health and that of illness. When the material body becomes unsuitable for the use of the vital force the vital force simply stops functioning.

In a state of health, the vital force animates the material body and preserves it in a harmonious order. A healthy person is aware neither of the existence of his internal organs nor of their functions while constantly being intellectually occupied.

The Vital Force maintains balance between mind and body. The harmonious cooperation between them is assured in such a way that absolutely nothing can be done without the consent of both. It protects the body from the numerous health damaging effects to which the body is constantly exposed. The atmosphere, the water and the various foods are contaminated by bacteria, viruses and other virulent factors. The vital force continuously protects us from these unhealthy factors. It is for this reason that man does not become ill even when he comes into contact with pathogenic microbes, when his vital force is strong.

The Vital Force is a tireless protective power which, however, is disordered because it is constantly exposed for long periods or because of the greater potencies of the damaging effects, or finally, because of the burdens of everyday life. There comes a time when man begins to be aware of the existence of an organ or of its function. His physical balance is disturbed. He then begins to suffer from altered feelings and functions. These altered feelings and functions, called signs and symptoms, are produced by the vital force. They are its way of expression. These signs and symptoms are considered to be the external manifestations of the internally disturbed vital force. The natural balance and cooperation between the psychomental organ and the body is lost. The illness does not have by itself a trully separate hypostasis. In reality, there are no illnesses, but only patients (people in a state of illness).

Since the altered feelings and functions are a result of the disturbance of the vital force, to cure the patients one has but to restore the harmonious flow of the vital force.

As previously mentioned, the vital force is a power of self-preservation. It protects the body from ill effects and is capable of securing its own harmonious flow in the body and consequently health. In this way, during recovery, the natural process for the restoration of the balance between body-mind-psyche takes place and the temporary disorder of the vital force is restored to its natural state of being, or in other words, the balance is restored.

Diamond in his book entitled "The Body Never Lies" says that the muscular power of an individual is influenced by several substances that touch its mucosa of the mouth, before they are swallowed and that it is even influenced by symbols or intellectual pictures. His research concluded in a long list of alimentary substances, symbols, shapes, notions e.t.c that strengthen or weaken the individual, that is they increase or decrease its muscular strength. To this point this phenomenon may not seem very strange but it becomes positively queer when exactly the same happens if we put a food substance, not in the mouth of the individual, but on the skin over the area of the thymus gland, located under the episternum. Observations have shown that when a substance that weakens the individual is placed on the sternum over the thymus gland, the deltoid's muscular strength is decreased up to 80%. The thymus gland is directly related to the immunogenic capability of man. The influence of the weakening substance on the thymus seems to be clearly a matter of energy.

It can therefore be considered that this influence affects the organism's vital force and has a direct bearing on the muscular strength of the individual.

From what has already been mentioned it could be supported that the nature of the vital force of the organism is similar to the nature of the psyche, as this has been expounded in a previous chapter. It is certain that an intellectual confirmation is not enough to make the power of auto-suggestion and self-cure work. The

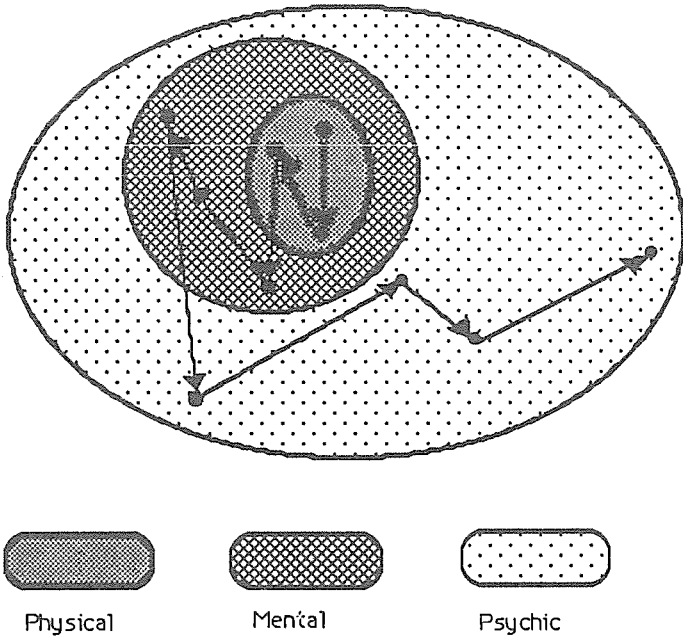


Figure 13:

Schematic representation of the Law of Suppression of Diseases: When a disease is suppressed, it is transformed from the external tissues to more sensitive, internal ones. Finally, the disorder, after having passed through several locations in the mental plane, going deeper and deeper, settles in the psychic plane with a tendency to go even deeper after suppression.

individual must believe deep inside that it can be cured. This means that other mechanisms as well must be mobilized beyond the intellect i.e. psychic mechanisms. It becomes apparent that psychic logic must be mobilized which, as a superior logic not subjected to intellectual models, has the capability to mobilize and to direct the vital force of the organs, which in turn mobilizes the immune system of man, the reticuloendothelial system, the defence centers of the cerebrum and so on.

Professor Rasidakis says:

"We must believe that very soon cancer will be defeated for good. In this fight against it the winner cannot but be the strongest power on earth, the spirit and the human psyche."

#### e) The Law of the Suppression of Illnesses

The Law of the Suppression of Illnesses states:  
*"When an illness is not cured deeply and causatively, then it is simply suppressed."*

When an illness appears in a person it must be cured. From the homoeopathic point of view, cure is not considered to be simply the disappearance of the symptoms of the illness because then we end up with a symptomatic treatment of a series of disorders which, despite the deeper origin, we try to cure only by suppressing their manifestations. We must consider cure as the holistic confrontation of the problem, the re-establishment of health to all the



levels of the organism. We must consider cure also as the erasion of the specific predispostion possessed by an individual for certain ailments. For example, when a person suffers from psoriasis, he applies several ointments to the affected areas of the skin to promote its healing, but this does not last long. The eruption reappears at the same or other spots and the story is repeated. Of course, psoriasis, as is the case with all skin diseases, is not a matter of epidermic concern only. It concerns the whole organism. It is a deeper disorder, some manifestations of which reach up to the skin. Psoriasis is due to an innate sensitivity of the individual which apart from the other manifestations includes skin manifestations as well. When these manifestations are not cured deeply, but are treated as symptoms, then the disease is not cured. It is simply suppressed. The same happens with all other illnesses.

The supression of illnesses has often bad effects on the organism. The illness, when suppressed, has the tendency to affect the organism deeper, in order to settle on more sensitive tissues and organs. The suppressed illness tends to transform into some other more severe illness and to affect more sensitive organs. Hahnemann, in his book "Chronic Illnesses" devotes many pages to the description of such cases where it is clearly seen that mainly skin diseases that are suppressed result in the appearance of rheumatic syndromes, acute feverish syndromes, severe respiratory infections or asthmatoïd bronchitis.

Clinical practice confirms, daily, the Law of the Suppression of Illnesses. It is considered that the great increase in psychiatric cases is due, to a great extent, to the suppression of illnesses which finally settle at the psychomental level and are transformed into anxiety neurosis, depression, manic-depressive syndromes, obsessions, psychoses and schizophreniae, which correspond to the maximum of psychic disorder.

The vital force of the organism resists this suppression of illnesses taking care to keep the disease as much as possible on the surface. This is how we have the phenomena of chronic illnesses. Let us again refer to the example of psoriasis. At the same time that man tends to suppress his illness the vital force of the organism tends to keep the problem on the skin, so as not to have it suppressed and affect other organs more sensitive than the skin. The problem thus becomes chronic and reappears constantly after temporary suppression. If the vital force is finally exhausted and cannot react, the disease will be suppressed and sooner or later it will appear in some other system of the organism in another form. Although psoriasis has stopped existing, the disease was not cured, only its skin manifestations have vanished. The disorder still exists, potentially, within the organism until it reappears somewhere else. It is considered that when an organism presents exaltations and recessions of psoriasis, but nevertheless, the psoriasis persists, it is an organism with strong vital force that keeps resisting the suppression of the disease.

In this case, the prognosis (forecast) is considered to be very good.

It is known that gonococcic urethritis presents complications such as gonococcic arthritis and gonococcic carditis. Some of the people suffering from gonococcic urethritis (commonly called gonorrhoea, as opposed to common urethritis which is due to several other cocci or saprophytes) will also have arthritis, that is an arthritic syndrome and probably carditis. The same cause of disease appears to many people, after suppression of the gonococcic urethritis.

Let us consider a person presenting gonorrhoea. This person is treated and is rid of its symptoms. Despite the treatment, its predisposition toward the gonococcus continues to exist. When it next comes into contact with this bacteria it will again have urethritis, that is, he will have a relapse. After several successive relapses, the vital force has no longer the endurance to keep the disease at the surface, at the urethral mucosa and being worn out, allows it to go deeper. That is when the gonorrhoea ceases to appear, even if the person comes into contact with the gonococcus. On the contrary, as time passes it begins to exhibit a rheumatic syndrome, located mainly in the lower extremities and which is usually negative in laboratory findings. If this person continues to suppress its "new" illness it will go deeper and affect the heart.

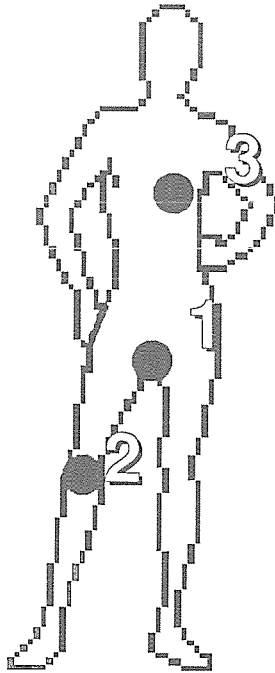


Figure 14:

Schematic representation of the course followed by a suppressed disease. The suppressed disease tends to settle in more sensitive internal tissues. In the above example the course followed is: urethritis - arthritis - carditis.

Urethritis: disease is located on the mucosa of the urogenital system (external tissue).

Arthritis: disease is located in the joints (more internal tissue).

Carditis: disease is located in the heart (most internal tissue).

The result will be a cardiac illness which may be critical for the life of the patient or which may render the person bed ridden.

Such examples abound, but this one is reported because the line of urethritis-arthritis-carditis is the most commonly known and usually more typical. Most treatments today are symptomatic, their aim is to fight the symptom. There are other treatments that are causative. Treatments of infections are considered as causative, where the fight is against the cause of the disease, the microbe. But there are contradictions concerning the thesis that microbes are the cause of an infection.

If this is true, then all the individuals coming into contact with an infectious agent such as microbes, should get sick.

Yet there are people who, although they have contact with pathogenic microbes, do not become ill themselves but they become carriers. Clinical research has proven in large population samples positive cultivations for pathogenic streptococcus in pharyngeal smears, at rates exceeding 20% while the repercussion of the disease was below 1%. This means that in these population samples, 20 people in 100 were carriers of the pathogenic streptococcus but only 1 in 100 became ill.

As a final conclusion we see that many people are exposed to pathogenic microbes but few fall sick from those. Those that do are the only ones having specific predisposition to the microbes. The microbe is, therefore, not the reason but the catalyst of the illness. The cause of the disease is

the sensitivity of the organism and after the microbe appears, it becomes the catalyst for its appearance. We therefore conclude that to fight the microbes does not constitute a causative treatment. With the homoeopathic therapy the organism is supported and strengthened and its sensitivity to the microbes is cured, rendering them powerless. They are thus rendered impotent and cease to be the catalysts for the illness. The purely causative treatments are the replacement treatments in several endocrinological illnesses such as diabetes mellitus, blood transfusions, regulation of the electrolytic balance of the blood, orthopaedic operations, etc. The great frequency of cancer today is due to many factors. One of them is considered to be the suppression of illnesses which are converted to more and more severe forms, until they end up as cancer, which presents the maximum physical disorder.

## 2. Laws concerning therapy

### a) The Law of the Similar Medicine (Similimum)

This law has already been explained, so that only a brief summary will be made here. The Law of **Similimum** is one of the most basic laws of therapy. It states that *"one and only is the medicine needed each time for the cure of a patient"*

This is natural, since only one is the medicine

which creates the precisely similar pathological picture to that presented by the patient we are called to cure. There are other medicines which produce akin pictures, but only one is the medicine recommended.

The homoeopathic doctor has to select this one medicine which will cure his patient. This medicine is the only one that will act in depth and by strengthening the vital force of the organism will bring about the cure.

#### b) The Law of the Whole (Holistic Law)

The Law of the Whole states that "*the patient must be treated holistically, as an integrated entirety consisting of body, mind and psyche and not each part separately*". Indeed, the homoeopathic doctor treats the patient accordingly, in what regards both the diagnosis and the therapy. The diagnosis is based on a complete history that includes all the elements that concern the physical and the psychomental aspects. The treatment is addressed to the entire range of signs and symptoms, since with the homoeopathic medicine, we cure the patient and not the disease.

The holistic action of the homoeopathic medicine on the whole, is considered a reality. It is confirmed from clinical practice where patients are cured from their main disease but are concurrently also cured from their various small problems, which they did not mention initially to the doctor. Because, however, the

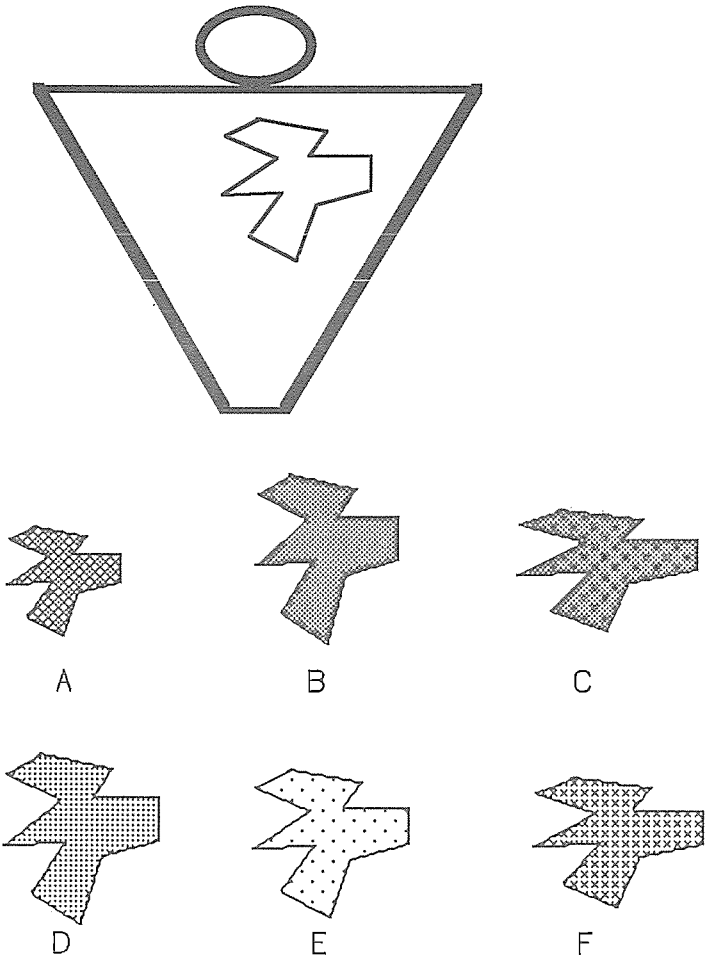


Figure 15:  
Schematic representation of the Law of Similimum. Shape E is the one that most resembles that of the organism and it represents the similimum. Other shapes have just slight differences compared to E, but these are enough to support a differential diagnosis.



homoeopathic medicine cures the organism as a whole and not only a part of it, the result is that the patient is relieved from every annoying symptom.

### c) The Law of the Direction of the Cure

The Law of the Direction of the Cure states "In the duration of the therapy the symptoms are withdrawn following a course,

- a) from the centre to the circumference,
- b) from the most important to the less important organs,
- c) from the top to the bottom,
- d) in the opposite direction to that in which they originally appeared.

The cerebrum is the centre of the human organism, in the special area of which the various psychomental functions are located. When we treat a patient suffering from gastric ulcer and from a neurosis, he will, in the first stage, be cured from the neurosis while the ulcer may still remain. In this case our prognosis is good because the therapy follows the correct direction, from the center to the circumference. Clinical practice has shown that the cure of the ulcer follows soon thereafter.

In the discussion of the Law of the Suppression of the illness it was mentioned that illness progresses from the exterior to the interior, progressively affecting more sensitive tissues. The therapy progresses in an inverse direction. Let us again consider the urethritis-arthritis-

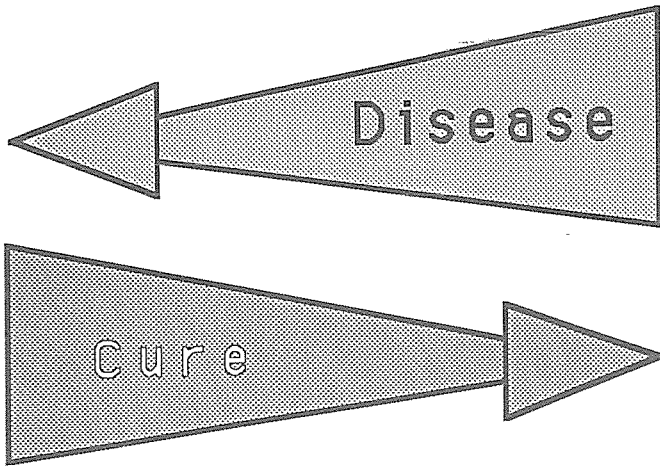


Figure 16:  
Schematic representation of the Law of Cure  
Direction. Disease direction is opposite to that of  
cure direction. While disease progresses from the  
outside inwards and from below upwards, cure  
follows the opposite direction.

carditis example. If the patient is treated with homoeopathic medicines at the carditis stage, when the carditis is cured, arthritis will appear. Continuing our therapy when the cure for arthritis is complete, urethritis will appear. In this case, urethritis will be aseptic, that is, laboratory analysis of the urethritic secretion will not find gonococci, since this urethritis is a result of the progress of cure and is not due to infection.

The therapy is complete after some time when the urethritis is also cured totally. It can thus be seen in what way the therapy is directed from the more important to the less important organs, from the top to the bottom and in a direction opposite to that of the disease. From the point of sensitivity and ability to regenerate it is natural that the heart is considered a more important organ than the skin or the mucous membranes, at least from the aspect of sensitivity and regenerative capability since the crack of a small vessel on the entire skin or the mucous membrane can be considered almost unimportant, while the same occurrence in the heart is of great consequence. Hippocrates in his aphorisms has made many references to the Law of the Direction of the Cure:

*"To him that suffers from angina, if oedema and flush appears in the chest, it is a good sign because it indicates that the disease is moving outwardly."*

*"In psychic cases of the manic type, the appearance of dysentery or dropsy is a good sign."*

*"If varicose veins or piles appear in psychopaths, this shows that the mania will be cured".*

*"If erysipelas that appeared on the skin turns to the internal organs, this is not good, good is the opposite, from the interior to the exterior."*

#### d) The Law of the Therapeutic Crisis

The Law of the Therapeutic Crisis states: *"In certain cases, at the beginning of the treatment an escalation of physical symptoms appears."*

The homoeopathic medicine strengthens the vital force of the organism and helps it overcome the illness. The illness appears when the vital force, under the influence of several endogenous and exogenous factors, weakens significantly and the morbidic predisposition prevails. That is when a pathological picture is manifested, consisting of several signs and symptoms. As has already been mentioned, the homoeopathic medicine consists of a pharmaceutical substance which is capable of producing in the organism a picture similar to that of the illness.

When we give the homoeopathic medicine to the patient his vital force is mobilized and produces a reaction whose features are **similar** to those of the illness. We thus have an exaltation of the symptoms. This exaltation occurs to the bodily symptoms and this phenomenon is called **therapeutic crisis**. When the therapeutic crisis appears we consider that the vital force of the organism has the capability to react against the illness.

The appearance of the crisis is considered a guarantee for the good outcome of the illness as it is the prelude of the coming cure. The therapeutic crisis has been proved to be completely harmless for the organism. It is completely under the control of the organism and this is why it reaches only that certain point which is necessary for the mobilization of the vital force, which is followed by the cure.

One could wonder, what will happen if in a certain illness an escalation takes place of the vomiting or the diarrhoea symptoms. As was said earlier the escalation is completely under the control of the organism and through clinical experience it has been shown to be absolutely free of any danger, whatsoever. On the contrary, after the therapeutic crisis, which usually does not last long, there comes relief from the illness which otherwise would have lasted much longer and would have troubled the organism to a greater extent. We could simply say that the vital force of the organism by obtaining reinforcement and reserves from the homoeopathic medicine, intensifies the struggle against the illness and as a result the effects of this battle become louder. Never in the two hundred years of homoeopathic medicine was there ever a report, of even one case, where the therapeutic crisis had become dangerous for the organism.

The therapeutic crisis appears with greater frequency in painful illnesses such as rheumatism, migraine, dysmenorrhoea, colitis etc. Clinical experience in Homoeopathy has

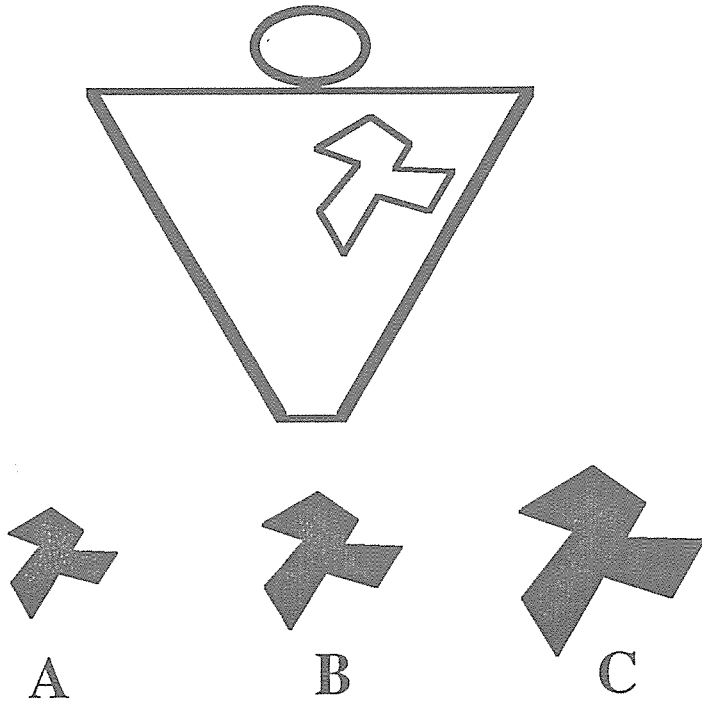


Fig. 17  
Schematic representation of the Law of Potency Selection. To achieve an effective cure, the diagnosis of the similimum is not enough. We must also select the proper potency of the remedy. Shape C is of the most suitable potency in the above example.

shown that when patients are forewarned about this phenomenon of the therapeutic crisis, so that they do not worry, they accept it patiently and readily in about 97% of the cases. This is also due to the fact that their psychomental condition has improved significantly with the homoeopathic treatment, since, as already mentioned, the cure progresses from the centre to the circumference, that is, from the psychomental sphere to the body.

In the majority of cases therapeutic crisis does not appear. This of course does not mean that these cases are not on the right therapeutic course.

#### e) The Law of the Potency Selection

The Law of the Potency Selection states "*the homoeopathic medicine must be given to the patient in the correct potentization in order that it has the maximum of its yield.*"

The homoeopathic medicines exist in many potencies. It has been shown that the greater the potency of a homoeopathic medicine the greater is its effect. This, however, does not mean that we will have the maximum of its yield when we always administer higher potencies. For every patient there exists the most appropriate potency in order to give the right amount of the energy required by the vital force of the patient so that it overcomes the illness.

If a much higher potency than the one required by the organism is given, then, although the

medicine is the appropriate one, there is a great possibility that we do not have any results. The selection of the proper potency depends upon:

a) The illness we are treating and more specifically:

1. The kind of illness
2. The chronic length of it
3. The severity of the illness

b) The idiosyncrasy of the patient

c) The age of the patient

d) The previous treatments and the amount of medicines taken by the patient.

e) The present treatment of the patient and the dosages of the medicines he is taking.

It is common for patients to tell their doctor: "Give me strong medicines so that I will get well sooner". It is then necessary for the doctor to explain that he does not take his decisions without taking into consideration the condition of the patient and that it is possible that the patient will not benefit from very high potencies. The patient must know that all the factors mentioned determine the strength of the medicine he will take. These factors must be respected by the doctor if he wants to benefit the patient as much as possible.





## **Chapter 7**

# **HOMOEOPATHY IN CLINICAL PRACTICE**



## Homoeopathy in clinical practice

The practice of Homoeopathy requires that the doctor uses a special approach to the patient. An essential communication between doctor and patient is needed and this is developed mainly during the taking of the case history. A deep knowledge of the Law of Similars and of the homoeopathic pharmacology is indispensable for the correct application of Homoeopathy. To put, however, this knowledge into practice, the doctor must study the patient at all three levels, physical, intellectual and psychic, so as to arrive at a deep understanding of the idiosyncrasy of the patient. It is absolutely essential for the homoeopathic doctor to have a perception of the patient as a whole, including physical and psychomental manifestations, since the doctor must have the most complete idiosyncratic picture of the individual that is possible, in order to correctly select the appropriate homoeopathic medicine.

On the basis of the data collected the homoeopathic doctor will form the picture of the idiosyncrasy of the patient. The more perfect and complete this picture, the more certain the diagnosis will be.

In the practical application of Homoeopathy the doctor must fully perceive the idiosyncrasy of

the patient and then select among the many medicines of the *Materia Medica* the one that better suits that idiosyncrasy.

Development of this interphase will take place according to the stages which the cooperation of the patient with the doctor will be undergoing.

#### 1) **The case history**

The history is of critical importance to the diagnosis and begins with the present illness, that is, the health problem that brought the patient to the doctor.

**The present illness** is examined in every detail. For the completion of the homoeopathic history many details are required. These special details are called **modalities**. They are the conditions that modify a symptom. For example, in the case of an arthritic syndrome of the knee joints, some elements absolutely indispensable for the homoeopathic historic are: is the pain in the joints piercing, burning, pressing or stinging, does it get better with tense pressure while getting worse with the touch of the blankets in bed; does it ameliorate with hot or cold applicants, is it affected by certain specific weather conditions, does it get worse after psychic stress, better after intense perspiration or an excessive amount of urination, etc. Homoeopathic diagnosis and determination of treatment are greatly dependant on such specific details.

The symptoms noted down in the historic of the patient must be in those same words used by the patient. The homoeopathic doctor is very much

interested in the exact expressions used by the patient to describe his symptoms and so the patient is often encouraged to describe the symptoms in his own words. It often happens that patients give peculiar descriptions of their symptoms, as the following shows:

*My headache feels like I have a door in my head that opens and shuts" or*

*"It feels like a hot wind blowing in my head" or*

*"As if a vice is tightening on my temples" or*

*"The pain in my stomach is like a nail scratching inside" or*

*"I get nausea from the sensation that the ceiling is going up and down over my head" or*

*"When I sleep I feel like I m falling through the bed which has holes and I wake up frightened" or*

*"I feel as if my gums are loose and my teeth are moving" or*

*" The pain in the head feels like a wodden ball that swings with the head moves" or*

*"I feel a lump in my throat resembling a ball that goes up and down as I swallow" .*

The homoeopathic Materia Medica is full of such descriptions of symptoms. In his two books titled "As If" Ward reports over 40.000 such descriptions of symptoms. These descriptions will play a significant role in the selection of the therapy and especially in those cases that constitute a pathognomonic criteria of an illness. For example, in the case of a headache due to endocraniac tumour where the pain is often located behind the eyeballs and appears as if it

pushes the eyes outward. The specific descriptions by the patient are indispensable and indeed mandatory for homoeopathic diagnosis. This is so because the homoeopathic doctor bears in mind the provings of the medicines. During the proving of the medicine, the description of symptoms was made with the expressions of those participating in the proving. For example, during the proving of Ipecacuana, the following was described: "*Vertigo, as if the head was rolling, one moment to one side, next moment to the other, accompanied by a momentary loss of thought. The vertigo was aggravated by walking and especially when the patient was turning his head to the side.*" The value, for the homoeopathic doctor of this description is tremendous, because together with other characteristics of the idiosyncrasy of the patient, will lead him to the correct selection of the medicine. This peculiar sensation described by the patient is strictly subjective and very important for the homoeopathic diagnosis.

The individual recollection plays a significant role as a source of information, because it describes the past illnesses and ailments and the operations the individual may have undergone. Many diseases of the past are possibly related to the present disorder, e.g. typhoid fever with chololithiasis, rheumatic fever with valvular heart disease etc. Previous surgery may also be related to or even be the cause of the present ill condition, such as communicant ulcer after gastrectomy for gastric ulcer, or obstructive ileus due to adhesions from previous surgery.

All this information is of immense importance for a doctor, but for the homoeopathic doctor it is even more so, because through this information and by perceiving the course and the progress of the various illnesses of the patient he can deduce the morbidic predispositions and burdenings of the patient. The medical past of the patient is very useful for the evaluation of the present and for the forecast of the future.

The **hereditary recollection** is also of interest, because certain diseases are transmitted through the genes to the descendants, such as haemophilia, diabetes mellitus and spherocytaric anaemia. There are also familiar diseases and predispositions such as familial polyposis of the colon, affinal cardiopathies, breast cancer, tuberculosis etc. Apart from the general interest of this information, there is also a specific interest for the homoeopathic doctor because through these facts he reaches to conclusions about the morbidic burdens of the patient. These conclusions are often of definitive value to the homoeopathic treatment.

The **psycho-social recollection** includes all the information concerning the patient as an individual, as a personality, the life style and the habits. Living conditions, the efficiency and the appropriateness of the food, the use of tobacco, alcohol or other toxic substances, the professional, social and sexual life and activity are all elements of the psycho-social recollection. The doctor assesses these elements when they



have any relation to the present illness under examination. For instance, when examining a patient with a gastric ulcer, the doctor is interested in whether or not the patient smokes, as this aggravates the problem and must advise accordingly. In a case of suspected liver cirrhosis it is necessary to know what amount of alcohol the patient consumes. In a case of pneumoconiosis the doctor must know if his patient works in a quarry or other similar work environment. On the other hand, when examining a patient with such a profession who suffers from pulmonary obstruction, he must be directed towards a diagnosis of pneumoconiosis, in order to verify or reject it.

The homoeopathic doctor takes into very serious consideration all these factors but at the same time treats his patients as an entirety.

Man consists of a physical and a psychomental hypostasis. These two hypostases are interdependent and interacting. Whatever happens to the body affects the psychomental state of the individual and vice versa.

It is generally considered that the fluctuation of hormones in the body has a direct effect on the psychological state of the individual. It is also considered that psychological factors affect many of the measurable constants of the human body. The psychosomatic point of view of the nature of very many ailments has been widely accepted by the medical profession. This psychosomatic aspect of the nature of illnesses has been stated by

Homoeopathy long before the view was generally known. This is why it examines the patient as an integrated entirety and always in relation to his life style and habits.

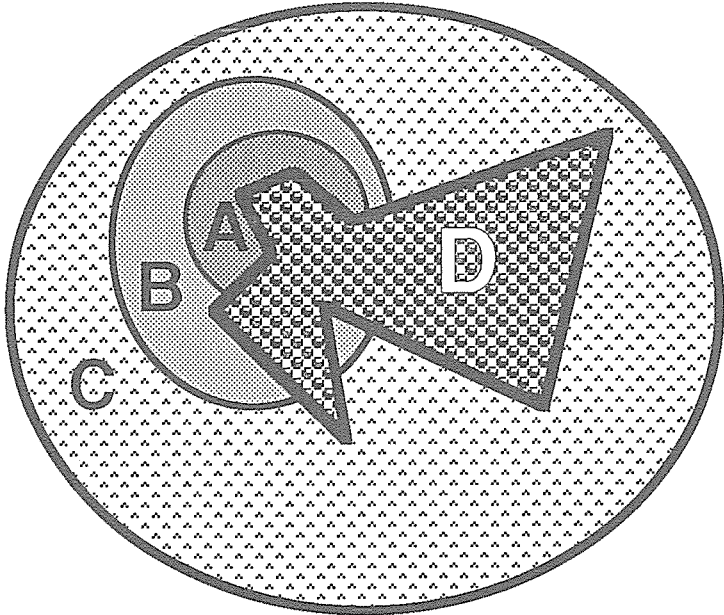
This information constitutes the **idiosyncrasy** of the patient. The elements concerning the psychomental state and the modalities of the symptoms are of the greatest importance in the homoeopathic history of the patient. There may be two or more patients with the same illness but each may be given a different medicine. This happens because their psychomental states and the modalities of their symptoms vary and as a result a different idiosyncrasy shows up.

The elements concerning the psychosocial historic of the patient are taken into consideration by the homoeopathic doctor, not only in relation to the illness but in relation to the general idiosyncrasy of the patient.

As has been mentioned, the homoeopathic medicines that have been studied in several provings are characterized by symptoms that concern the physical and the psychomental hypostasis of the individual, that is, its entire idiosyncrasy. In the same way, the homoeopathic doctor examines the patient as an integrated entity, the totality of the functions of which is integrated and inseparable.

## 2) Clinical examination

Inspection, auscultation, palpation, percussion etc are used by the homoeopathic



**Fig. 6 b**

Elements of the homoeopathic history

A= From the Physical Plane. B= From the Mental Plane. C= From the Psychic Plane. D= Homoeopathic case history

Elements of the homoeopathic history (anamnesis). A repetition of fig.6 is deliberately used to show that the homoeopathic case history completely covers all the human planes in the same way that disease covers all three levels.

doctor and are very useful in the determining of the Similimum.

### 3) Paraclinical laboratory examinations:

Modern medical science has a great number of general and specific paraclinical examinations available to it: blood, urine or cerebrospinal fluid tests to trace pathological elements or to find the deviations from natural constants, X-rays, fluoroscopy, various endoscopies, electrocardiograms, axial tomography, ultrasound, electroencephalograms, biopsies and many others. All these tests and examinations have given the doctor the capability to know better the patient internally and to measure the functions of the body. The benefit of medicine from the laboratory capabilities is immense.

Homoeopathy makes use of all laboratory examinations, without exception. However, it must be observed that in our days an abuse of laboratory examinations takes place and contemporary physicians tend to depend excessively on the laboratory. Clinical examinations tend to be substituted by laboratory examinations.

A great part of the diagnosis is often determined after laboratory analysis and in many cases the clinical examination is followed by a long list of paraclinical examinations, making the physician more and more dependant on the laboratory, which works incessantly.

The homoeopathic doctor throws the weight of

his effort on the clinical examination while using the laboratory analysis to verify his diagnosis, rather than to define it. In this way a significant reduction is achieved in the laboratory examinations.

#### 4) **The Treatment:**

Homoeopathic therapy is conducted with medicines. The nature of these remedies is described in chapter 3. Here it is mentioned only referentially. Homoeopathic medicines originate from natural substances. They undergo a special process called potentization and are given in a greatly diluted form. Because of their great dilution, they do not create any side effects whatsoever. Not one homoeopathic medicine has ever been recalled, from the beginning of homoeopathic practice to the present time.

**The duration of the homoeopathic treatment** depends on several factors, the most basic of which is the **reactive ability** of the organism. Where the organism has a good and agile reactive ability, cure comes about in a comfortable space of time. The ability of the organism does not depend solely on age, but also on the morbid burdenings of the organism. It depends on its predispositions, that is, on its specific sensitivities. This often results in the phenomenon of two people with the same health problem, but of different age, presenting dissimilar patterns, the younger of the two with a shorter history of illness requiring more time to recover, than the older one, with substantially large history.

There is also another phenomenon. Two people of the same age, with the same illness and history differ greatly as to the time required for cure. This shows that the duration of the cure depends on how fast and effectively the counteracting mechanisms act. Clinical experience has shown that age plays its part in the duration of a therapy, since age itself is directly related to the wear of the organism. In spite of this, the above mentioned phenomena show that a young person may be more burdened and powerless to react to the disease than an older person having a stronger constituency and a more robust reactive mechanism.

Another factor relative to the duration of a cure is the duration of the illness and the chronic state of it. Acute illnesses are generally cured more rapidly than chronic ones. In the case of two chronic ailments the chronic history of them is not of great importance. For example, a psoriasis dating back to ten years may be cured faster than a psoriasis with a five years history, despite the fact that they are of the same nature, intensity and spreading. In many illnesses the nature, intensity and duration of previous treatments are of importance.

There are many observations suggesting that even the place of residence plays some role in the duration of cure. People living in the countryside have a faster response to the treatment than those living in large urban area. It is believed that this is associated with the healthier environment of rural areas, which allow the counteracting

mechanism of the individual to act faster.

**The duration of the therapeutic result:** When cure is established, the result is permanent. In curable illnesses the therapeutic result of Homoeopathy is permanent. However, there is a possibility of a relapse, due to **antidotal factors**. Relapses occur either during treatment or after its end. Several factors may be responsible for this. It is now a certainty that some substances, such as caffeine, menthol and camphor inhibit the action of the homoeopathic medicine. When the patient uses caffeine, menthol or camphor while taking homoeopathic medicines, a relapse occurs because these substances act as antidotes. The same happens if they are used right after the end of treatment.

There is a "safety space of time" after which there is no danger of relapse, from the effect of these substances. This period is estimated to be one year, in average, following the treatment, but it does vary according to the patient.

It has also been observed that some people do not relapse when using these substances. There are several examples of patients who have responded well to treatment and were cured despite the continued use of caffeine. This means that these individuals do not have the specific sensitivity against these substances relative to the homoeopathic medicines. However, since the homoeopathic doctor is in no position to know in advance which of the patients is sensitive and which is not, he advises all patients to avoid these

three substances that can cause a relapse.

It has been observed that the exposure of the homoeopathic medicines to ultra-violet radiation renders them inactive. This factor can play a part only during treatment. This means that if the homoeopathic medicine is inactivated by ultra-violet radiation its curative effect ceases and a relapse follows because the organism remains therapeutically uncovered. This does not happen when the inactivation of the medicines occurs when the patient is taking them during the phase of preservation of the therapy, because at the preservation state the cure has been accomplished.

The observation of urban dwellers relapsing more frequently than those from rural areas, for none of the above reasons, leads to the conclusion that the stressful life in the cities, the processed foods, the lack of variety in nutrition, the atmospheric pollution and such factors are possible contributors to relapse. These factors continuously burden the vital force of the organism and when they overcome it the occurrence of a relapse becomes possible.

Two other personal factors acting as antidotes should be mentioned. One is the inability of the patient to give up the use of substances, especially coffee, that may lead to a relapse. Fortunately, very few relapses are due to this factor. The second personal factor behind the occurrence of a relapse is the "doubting Thomas syndrome". While the cure is progressing and the patient is



feeling better, he decides to take one of the substances mentioned to check whether the cure is due to the homoeopathic treatment or not. This type of relapse is also fortunately rare. It should be emphasized, here, that it is possible to have a relapse during treatment, both in curable and palliable illnesses. However, at the end of the treatment, only the palliable maladies relapse because they are due to a certain sensitivity of the organism that cannot be completely diminished.

It must also be said that after a relapse, the homoeopathic doctor finds it difficult to bring back the state of health of the patient. The medicine that acted curatively before a relapse is not always the one indicated to restore the balance.

## Chapter 8

# THE CLINICAL APPLICATIONS OF HOMOEOPATHY



## The Clinical Applications of Homoeopathy

As has been stated, Homoeopathy uses all the laboratory examinations in existence, to help the practicing physician to locate and elucidate a medical problem.

The great technological progress made in medical laboratory equipment and the vast research into the reactive mechanisms of the body have yielded a great amount of new knowledge in this sector. New methods of measurement and control are constantly being added and old ones modernized.

This is how it became possible to check the functions of several organs, to measure various substances of blood (mineral, non-mineral, enzymes, hormones, metabolic products, etc.) of the urine, the perspiration, the saliva and all other secretions of the body. The progress made in endoscopic techniques has made it possible to closely examine organs in situ and to arrive at conclusions, about their natural or pathological state, through direct observation. Such methods as laryngoscopy, bronchoscopy, gastroscopy and ophthalmoscopy, belong to that group of endoscopy. The old method using X-rays has been complemented, to a great extent, with radiography and simple tomography. These are

nowadays complemented by axial tomography. The measurement and printout results of the electric loads in the various organs has opened up yet another series of laboratory examinations such as electroencephalographs, electrocardiographs and electromyographs. Among the newer and very effective methods are thermography and the ultrasound.

Despite the immense progress in laboratory techniques it has not yet become possible to provide answers to all the diagnostic questions facing the practicing physician. The limits of the diagnostic techniques in contemporary medicine are not unrestricted. The homoeopathic doctor has the capability to widen the limits of his diagnosis, thanks to the great contribution of the homoeopathic historic to this field.

The homoeopathic historic, when correctly used and qualified, allows the doctor to safely diagnose the present disease and to perceive, to a great extent, the predispositions and sensitivities of the organism he is examining. This, results in the homoeopathic doctor using all the above mentioned laboratory tests not, however, as a means of arriving at a diagnosis but to verify the diagnosis and to strongly confirm it. These examinations also assist the doctor to follow up the progress of the cure.

In the area of therapy, Homoeopathy has never claimed to be a panacea. As a therapeutic system it too has its limits, but it should be stressed, here, that the limits of Homoeopathy and of Medicine in

general are determined by the state of the patient. Furthermore, it is not so much the extensiveness of the damages that matters as much as two other factors:

- a) the curability of the damages
- b) the ability of the organism to react to the illness, i.e its contribution, or, according to Homoeopathy, its Vital Force.

It is of course self-undrestood that the curability of the tissues determines the limits of the effectiveness of a therapeutic method.

It is the vital force of the organism, however, that plays the most important part in defining the limits of Homoeopathy. Clinical experience leads us to the conclusion that the cure of a patient depends on the state of the vital force, as it appears to be burdened during its fight against the illness. The homoeopathic medicine represents the energy reserves necessary for the vital force to cope with this fight. When the vital force of the organism maintains its ability to react, it can overcome the illness, taking advantage of the reinforcement offered by the homoeostatic medicine. This results in the saving of many patients critically ill from poor prognoses, but whose spark of life had been preserved and was rekindled by the homoeopathic medicine.

We can, therefore, say that the limits of Homoeopathy are identical to the limits of the vital force of the organism. These limits are sufficiently wide, today, so that the general therapeutic result of Homoeopathy has reached sufficiently high degrees.

The capabilities of Homoeopathy on several illnesses, according to international bibliography, the minutes from several congresses and clinical practice, are outlined below:

a) Contageous Diseases.

Homoeopathy can demonstrate high percentages of cure effected in a short time. It is known that acute diseases are cured acutely because the homoeopathic medicine acts on the reactive mechanism of the patient and helps him coordinate his defence mechanisms to sustain the infection. Some of the viral infections that are treated with a high percentage of cure are poliomyelitis in the early stage, influenza, measles, small pox, herpes zoster, herpes simplex of the genitals, Cocksakie virus disease, infectious mononucleosis, hepatitis A and B. Some other viral diseases treated by Homoeopathy with great success are: typhoid fever, pneumonia from pneumococcus, rheumatic fever, furunculosis, urethritis, cystitis, urinary infection, brucellosis and tuberculosis.

From time to time there have been made reports of the successful cure of some rare infections such as aspergilosis, histoplasmosis and toxoplasmosis. Several researchers have studied the antibacterial action of the mother tinctures of homoeopathic medicines.

Khanna and Chandra studied the antifungal action of homoeopathic medicines on the spore germination of four isolates of *Alternaria*

Alternata. The researchers reported: "Several homoeopathic medicines such as Arsenicum Album (1327-53-3), Kali Iodine (7681-11-0), Blatta Orientalis and Thyja Occidentalis have inhibited the germination of A. Alternata spores isolated from various plants. The effectiveness of these medicines depended on the potentizations that were used and on the origins of the Alternaria spores. Some potentizations induced permanent inhibition of spore germination, while in other cases the effect was only temporary, as was seen when spore germination was attempted following the washing of the spores after their incubation with the medicines.

Dumenil, Chemli, Blansard, Guiraud and Lallemand described the antibacterial properties of the homoeopathic medicine Calendula Officinalis.

Chemli, Balansard, Guiraud and Lallemand studied and titrated the antibacterial action of the homoeopathic medicine Calendula Officinalis against staphylococcus aureus and sterpthococcus fecal.

*Reports:* Hughes, Ganapathy, Swansea, Tomhagen, Gregg, Jhap, Singh, Skinner, Tyler, Gee, Herford, Charman, Gutman, Edwin, Jonson, Nash, Webster, Cowperthaite, Gilbert, Ballard, Seth, Lippe, Descher, Dever, Bhapa, Smith, Davies, Blake, Biegler, Krishnamurty, Burgetziani, Wadia, Gnaiger.

#### b) Respiratory Ailments.

Many reports show satisfactory therapeutic results in several such ailments as bronchitis, either acute, chronic or allergic, bronchial asthma, apostema of the lungs, pleuritis and



other.

Poor therapeutic results were reported in cases of bronchiectasis, pneumoconiosis, pulmonary fibrosis, due to non repairable histologic damages of the lungs.

In cases of bronchiectasis, the therapy consists mainly of a general strengthening of the patient and the treatment of the psychological syndrome which appears as a result of the frequent haemoptysis. In many cases haemoptysis was reduced significantly and the progress of the disease was delayed or inhibited.

*Reports:* Neill, Paschero, Twentyman, Berridge, Carr, Verma, Miller, Burnett, Fincke, Guernesey, Bhakta, Hayness, Gedhardt, Miller, Barta, Illing, Kruger, Manfuso, Agneni, Pabrocini, Vervloet, Diamantidis, Polihronopoulou, Kivelou, Papakonstadinou.

#### c) In ailments of the **Gastrointestinal Tract.**

With these there is a significant success, as in stomatitis, parotitis, gastric or duodenal ulcers, gastritis, ulcerative colitis, acute cholecystitis and cholelithiasis. Concerning cholelithiasis, it has been reported that in many cases the size of the stones had decreased with the homoeopathic treatment until they were totally obliterated. This treatment often requires a long time.

*Reports:* Davies, Hunton, Kennedy, Gilbert, Bell, Tyler, Schlegel, Dienst, Spalding, Lennemann, Cadegabe, Tomhagen, Rapp, Miller, Diamantidis, Hatzikostas, Paizis, Drossou, Skalioudas, Papakonstadinou, Kiriakopoulou.

#### d) Ailments of the **Kidneys.**

There are reports of significant success in the

cure of such ailments as glomerulonephritis, toxic or allergic nephrosis, pyelonephritis, nephrolithiasis. In nephrolithiasis the same phenomenon as in chololithiasis, has been observed, in a significant number of cases, where with the homoeopathic treatment a progressive decrease in the size of the stone has occurred until it was totally obliterated.

*Reports:* Rainer, Reed, Kancy, Bakarishnan, Berridge, Campbell, Webster, Iling, Blackwood, Lutze, Dilingham, Gee, Norman, Groton, Diamantidis, Polihronopoulou, Savva.

e) Illnesses of the **Endocrinal Glands.**

There are reports of cure of such illnesses as in Cushing's syndrome, secondary aldosteronism, simple or toxic goiter and diabetes mellitus. Especially in cases of diabetes mellitus it was frequently observed that a reduction in the daily need for insulin had come about in these patients. In all cases, the homoeopathic therapy begins with the parallel use of insulin. Progressively however, a reduction in the need for insulin and in some cases the complete abolition of insulin was ascertained. This treatment often requires a long time.

This phenomenon appears as a paradox, because it is known that in these cases there is usually a destruction of the b-cells of the pancreas which produce the insulin. There are reports that in many cases there is no destruction but only inhibition of these cells, or that the homoeopathic medicine helps in the conversion of already existing pre-insulin into insulin.

*Reports:* Davey, Bell, Jack, Renner, Blake,

Bernoville, Miller, Srinivasan, Diamantidis, Skaliotas, Hatzikostas, Othonos, Labropoulou, Polimenea, Haralabidou.

f) **Rheumatic and Orthopedic Ailments.**

A large number of authors have reported considerable success in the cure of rheumatoid arthritis in children and adults and also in other non-rheumatoid arthritis such as psoriatic arthritis, gout and degenerative arthritis. In degenerative arthritis especially, besides the reduction in subjective ailments, there was, in many cases, a significant improvement in the mobility of the joints and even in the X-rays of these patients. In many cases there was a reduction of the osteophytes. Significant results have also been reported in lumbago, sciatica, rheumatic muscle pain and in athlete wrist syndrome.

The 1969 study in the French Boucour laboratories, titled "The Use of Silicon as an antirheumatic and anti-arthrosic agent" resulted in this report: "Injections of homoeopathic medicines composed of Silica 10 (-6), Magnesium 10(-6), Phosphorous 10(-6) and Hekla Lave 10(-8) have anti-arthritis, fibrolytic, litholytic (dissolving of stones) and anti-inflammatory effects and are useful in all forms of arthroses and rheumatism".

*Reports:* Peberdy, Spence, Boyd, Gibson, Martin, Williams, Hall, Hayes, Spalding, Gupta, Puri, Verma, Flores, Burnett, Ostrom, Kaiser, Burgher, Rhees, Krishnamurty, Saha, De. H. N, Machado, Diamantidis, Drossou, Hatzigeorgiou, Kiriakopoulou, Prokopiou.

g) Ailments of the **Connective Tissue.**

There are many clinical reports on these illnesses presenting significant percentages of cure in lupus erythematosus and periartiritis nodosa. In cases of sclerodermia there was improvement in many patients in some of whom progress of the illness was arrested. In a significant number of cases there was a rapid cure of existing and persistent ulcers.

**Bertand** and **Demande** titrated a composition of homoeopathic medicines having anti-inflammatory action and consisting of glycerine-phosphoric Mg (927-20-80), PI3 and  $\text{LiO}_2(\text{NO}_3)_2$ , each one in a  $10^{-6}$  dilution.

*Reports:* Clatceu, Row, Gupta, Kumar, Doney, Martin, Baylies, Sethi, Bhattachaya, Robert.

h) **Diseases of the Skin and Venereal Diseases.**

Many skin and venereal diseases show a good response to homoeopathic treatment: urticaria, erythema nodosa, lupus erythematosus, psoriasis, porrigo de calvans, or total alopecia, gonorrhoea, non-gonococcus urethritis, condyloma accuminatum, furunculosis, acne, herpes simplex, warts.

Satisfactory results have been reported in the treatment of genital herpes, although treatment is protracted. There are also reports of significant improvement in the condition of the skin in cases of ichthyosis. In addition, a few cases of ichthyoid erythema showed significant improvement of the skin and a general improvement of the patients with deficiency of IgM and IgG immunoglobulins, which patients presented an increased resistance to infections.

*Reports:* Brucks, Myller, Hofmann, Renodault, Khalil, Fereti, Paschero, Lippe, Pulford - Sherbino, Mathalaikani - Spence, Illing, Burnett, Blake, Firmat, Douglass, Luze, Stow, Gladwin, Kumar.

i) Ailments of the Cardiovascular System.

These ailments are usually treated in homoeopathic hospitals at least in their acute stage or in a stage of exaltation. In some cases homoeopathic treatment takes place together with cardiant treatment, antiarrhythmic drugs or oxygen. Several forms of heart failure, arrhythmias and coronary ailments are treated with success, as are arteriosclerosis and several forms of hypertension. Two cases of arteriosclerosis of the abdominal aorta are mentioned, that were operated after six months of homoeopathic treatment. During the operation, however, the surgeons could not collect atheromatous plates because they were found in a state of disolution, in the form of elastic, fragile bodies, loosely tied to the wall of the blood vessels and which were taken off with the use of the aspirator. In the case of hypertension, homoeopathic medicines are given together with the anti-hypertensives, which is the usual treatment of the patient before he comes to the homoeopathic doctor. As the homoeopathic treatment progresses a reduction of the need for anti-hypertensives is observed in a large number of cases and the patient begins to need them less and less until he stops taking them altogether when he no longer needs them.

Many cases of angiemphraxis of the arteries of the lower extremities with intermittent

claudication have been reported, which showed significant subjective improvement and an increase in the oscillations of the vessels.

*Reports:* Rainer, Kennedy, Brown, Peake, Hayes, Blackwood Vakil, Murata, Bhatia, Poirier, Sherbino, Gilbert.

j) Diseases of the **Blood**.

The various amaemias respond well to homoeopathic treatment, except for the familiar and genetous varieties such as the familiar spherocytosis, sickle cell anaemia, Mediterranean anaemia and others. There are reports of many cases of acute or chronic leukemia, infectious mononucleosis and thrombocytopenic purpura with very good therapeutic results.

**Wilson** and **Harold** studied and demonstrated the therapeutic action of homoeopathic medicines on heavy metal poisoning.

*Reports:* Suri, Pareek, Eizayaga, Kapor, Dienst, Diamantidis, Drossou, Kiriakopoulou, Kivelou, Haralabidou, Fragiadaki.

k) **Gynaecological Diseases**.

Gynaecological diseases show a very good response to homoeopathic treatment, especially menstrual disorders, dysmenorrhoea, vaginitis, cervicitis, genital herpes, endometritis, salpingitis, myofibroma in its early stage, ovarian cysts and endometriosis. Pregnancy is not a contra-indication for taking homoeopathic medicines since they have no side effects. It is, however, recommended to discontinue taking homoeopathic medicines during the first five

months of pregnancy because great and frequent changes occur in the idiosyncrasy of the pregnant woman, so that certain medicines she had been taking are no longer indicated. If at any time an acute disease threatens the life of either the mother or her foetus, this can be confronted with homoeopathic medicines. In this field Homoeopathy finds an ideal area for treatment because it can be given to the pregnant woman without any fear whatsoever and it can greatly help in the preservation of her health and that of the foetus.

*Reports:* Paschero, Maendl, Fortier, Bell, Row, Brown, Webster, Schmid, Hall, Schaedler, Anshutz, Leavitt, Gastier, Sherbino, Diamantidis, Paizis.

#### 1) **Psychiatric** Illnesses.

Psychiatric illnesses usually respond very well to homoeopathic therapy. Very important successes are reported in illnesses such as anxiety neurosis, phobic neurosis, depressive neurosis, hysteric neurosis, obsessive neurosis, hypochondriac neurosis, manic-depressive psychosis, simple schizophrenia, paranoid schizophrenia, hebephrenia, autism in children, melancholic psychosis, reaction to adaptation, personality disorders, alcoholism, sexual perversions, toxicomania.

The great problem confronting the homoeopathic doctor, when treating a psychiatric patient, is the alteration of the idiosyncrasy of the patient resulting from the psychiatric medicines the patient takes. This problem is one of colossal dimensions for the homoeopathic physician when treating patients suffering from psychosis or

schizophrenia who have been taking psychiatric medicines for years. Psychiatric medicines alter the idiosyncrasy of the patient and create an acquired idiosyncrasy which is not the true idiosyncrasy of the patient. The homoeopathic doctor, therefore, makes his diagnosis based on information from the past of the patient and whatever characteristics of the idiosyncrasy of the patient are still intact. This of course presents a special difficulty and requires special knowledge from the part of the doctor.

In all these cases homoeopathic treatment is given, in the beginning, in parallel to the psychiatric treatment of the patient. At first no reduction is made to the medicines taken by the patient up to that time, because this is impossible due to the nature of the disease and to the relevant dependance of the patient on them. As the homoeopathic treatment progresses, the patient feels and declares feeling calmer, psychologically stronger, reporting in other words a general psychological vigour. When this stage is reached, a progressive reduction in the psychiatric medicines begins and in some cases this becomes a lengthy process. The reduction of these medicines is not only progressive but also eclectic, according to the drug combinations used by the patient.

The outmoded view that patients taking hallopathic medicines should stop taking them at least for a month before beginning homoeopathic treatment, is no longer valid and should not be valid for three reasons:

- 1) because Homoeopathy thus becomes



prohibitive for many patients,

2) because many patients who will attempt discontinuing these medicines remain without any treatment, which may endanger their health,

3) because this way you have a selection of patients, which is incompatible with medical ethics.

In toxicomania homoeopathic medicines offer significant help. The homoeopathic treatment assists in the psychological reformation of the patient resulting to his detachment from the psychological addiction to the narcotics. In addition, it helps in the progressive decrease of the physical addiction. Reports from detoxification centres lead us to the conclusion that there are very good detoxification results when the same toxic substances, that were used in the past by the patient, are given in a potentized and highly diluted form.

*Reports:* Gutman, Clover, Biegler, Tyler, Kock, Barbaranci, Enders, Atmaojian, Gallavardin, Berridge, Gee, Gosh, Hotzer, Riskey, Soares, Diamantidis, Katsonis, Skalioudas, Drossou, Othonos, Paizis, Hatzigeorgiou, Panou, Haralabidou, Padziaras, Papakonstadinou.

#### m) Tumours.

The treatment of tumors with Homoeopathy often presents difficulties. These are mainly due to the treatment given to the patient before the homoeopathic treatment. This treatment often burdens the organism and creates fatigue of its vital force. More than that it alters the

idiosyncrasy of the patient making the homoeopathic diagnosis much more difficult. The anti-cancer action of homoeopathic medicines is continuously being studied and encouraging new facts are coming to light. Many cases of significant relief, inhibition of the disease and cure are reported, mainly in cases of early stage breast cancer, cancer of the uterus, primary cancer of the lungs, the stomach, the intestine and the liver.

It is difficult, as yet, to deduce final conclusions, because all cases of cancer that survive with homoeopathic medicine require systematic follow up for many years, so that one can speak with certainty about the mechanisms and the factors affecting cure. But up to the present time, clinical experience sends optimistic messages.

**Braunger** and **Bunse** have produced an homoeopathic antineoplastic medicine based on tetramethyl-p-phenylenediamine perchlorate (110404-70-3).

**Baranger** and **Piere**, in a laboratory research study conducted in 1967 with the title: "Antineoplasmatic Homoeopathic Agents" proved that substances that have cysteogenetic properties such as Allyl-Isothiocyanate and Cantharidin are antiviral agents, especially against the lymphomata of chickens.

*Reports:* Fisher, Ghosh, Verma, Peake, Bakshi, Crawford, Jackson, Bihari Gudhka, Gilchrist, Mukherjee, Burnett, Washburn, Skinner, Allen, Kamtham, Chatak, Cooper, Chand, Benett, Brunton, Diamantidis, Labropoulou, Skalioudas, Hatzikostas, Othonos, Drossou, Polimenea, Polihronopoulou, Paizis, Kivelou,

Haralabidou, Kiriakopoulou, Savva.

n) Ailments of the Nervous System.

Homoeopathic treatment has been applied with great success in various ailments of the nervous system: headaches, migraines, trigeminal neuralgia, atypical neuralgia of the face, postherpetic neuralgia, memory disorders, epilepsy, paresis, chorea arterosclerotic, Parkinson, brain concussion, arterosclerosis of the brain. There are quite a number of reports on cases of multiple sclerosis where there was an improvement in the pathological picture of the patient or where the progress of the illness was arrested.

Slovak and Andrej have studied the pharmacological actions of homoeopathic medicine based on terpene compound which is contained in certain essential oils. This study showed that it acts as a buffer and stabilizer within the alkaline reserve of the blood, and affects a number of enzymic functions, it acts on the cell membrane to maintain haemostasis, has analgesic properties, and slows down the reversibility of demyelination.

Grandgeorge and Bouchanlat, in 1980 in the state hospital of Grenoble studied 19 neurological cases treated with Homoeopathy and formed their opinion on the neurologic action of homoeopathic medicines according to the pshysiology of the nervous system.

*Reports:* Kimball, Bell, Howard, Tomhagen, Tyrrell, Harris, Ganapathy, Myller, Biegler, Blackwood, Kitching, Gregg, Tompkins, Ostrom, Burnett, Buttler, Hoyne, Flores, Popescu, Farokh, Marichal, Tsiakopoulos,

Diamantidis, Labropoulou, Skalioudas, Hatzikostas, Othonos, Papakonstadinou.

**o) Acquired Immune Deficiency Syndrome (AIDS).**

Up to the time of writing there is no clinical experience of the treatment of this syndrome by Homoeopathy. Nevertheless, it serves a purpose to mention certain facts based on the homoeopathic experience, which may offer a good assist to the struggle of science against this disease. At first the view must be reinforced that the retrovirus that causes AIDS is not a new one, but that it has only now been discovered, or otherwise that its specific action on the human organism was identified. According to the homoeopathic view on the origin of diseases, it is not the virus that causes the immune deficiency. It is the human organism that is already in an early stage of immune deficiency and this is why it becomes infected with the AIDS virus. This view is reinforced from the fact that AIDS victims are easily infected by other infectuous diseases also, and by the fact that there are healthy carriers of the virus who do not become ill because they do not present this immune deficiency. Accordingly, it becomes clear that the efforts of the researchers should turn to the direction of creating a vaccine which will cause a passive immunization of the organism and not towards the discovery of an antiviral medicine.

It is easily understood that the production of an antiviral medicine would relieve the organism from the dangerous AIDS virus but, due to its immune deficiency, would leave the organism

unprotected against other infectuous agents. Because the homoeopathic medicine strengthens the vital force of the organism and consequently its immune capability, it is believed that it could offer significant assistance to the confrontation of AIDS. Researches on 68 AIDS' patients have provided very envouraging results concerning the treatment of AIDS with Homoeopathy. There are more than ten medicines described in the *Materia Medica* whose pathological picture is similar to that of patients suffering from AIDS.

As previously mentioned, one of the basic problems in practising Homoeopathy is the parallel treatment, that is, the need to give the homoeopathic medicine in tandem with the medicines taken by the patient up to now. The problem becomes more acute when some of these medicines weaken the action of the homoeopathic medicine. This problem can, however, be solved with patience, a good design of the treatment and excellent cooperation with the patient, for whom this entire effort takes place.

*Reportts:* Chand, Jaener, Marichal.

Successful homoeopathic treatment depends greatly on the scientific expertize and productivity of the physician. A strong vital force on the part of the patient and extensive scientific knowledge and ability on the part of the doctor, constitute the basis and the guarantee for a quick and very often spectacular cure. In paralel the correct preparation of the homoeopathic prescription is required. All suffering organisms can be helped through Homoeopathy and by extension all the diseases.

According to Homoeopathy, there are several types of illnesses, as far as the cure potential is concerned. These are:

- a) curable: illnesses that can be cured.
- b) palliable: illnesses that can be palliated but can not be completely cured due to permanent anatomic damages.
- c) incurable: diseases which due to permanent damage of the tissues and a very advanced stage of evolution have irrevocably subdued the vital force of the organism so that it can no longer be helped from the homoeopathic medicines.

Homoeopathy always aims at helping the patient and cooperates with all medical specialities. This cooperation is often required, especially with surgery and orthopedic specialists. In these cases Homoeopathy prepares the patient before the surgery so as to be in a good general condition and helps postoperatively to enable him to achieve a speedy recovery afterwards, with reduced complications. It is clear that for the benefit of the patient the same spirit of cooperation must exist also between other specialities and Homoeopathy, which is capable of greatly widening their therapeutic limits.



## **Chapter 9**

# **THE ROLE OF THE PHYSICIAN**





## The role of the Physician

It is hard to distinguish the role of the homoeopathic physician from that of any other physician. It is not proper to segregate physicians into homoeopaths, hallopaths and so on.

The physician is one and the same, regardless of which system of treatment he employs. His aim is to re-establish the health of his patient in the most mild and harmless manner. In spite of this, the terms homoeopath and hallopath are used out of habit to observe tradition. There are of course several systems of therapy from which the physician may choose the one he deems best for his patient. A necessary presumption for this action is that the physician has full knowledge of all, or at least of most of the systems of therapy being applied today.

Very often, the physician is ignorant of other methods of treatment and is familiar with only one of them. This, however, deprives him of the ability to select a therapeutic system which could, in some instances, be more effective than the one he has known until now.

There also appears frequently the case of the physician refusing to be informed about other treatment methods, which he rejects a priori.

The hallopathic physician often rejects

Homoeopathy as being unscientific, mainly because he has not made the effort to inform himself about the scientific nature of Homoeopathy. The homoeopathic doctor usually rejects allopathic medicine as violent and dangerous for his patient. Both opinions are extremes and create fanaticism among scientists, thus contributing to the marginal position of the one or the other therapeutic system. This fanaticism can certainly harm the patients, as it deprives them certain benefits that they need.

As is known, the actions of the physicians must be regulated by what is to the best interest of the patient. The interest of the patient dictates the re-establishment of his health in a mild and harmless way. It is not proper when the scientific fanaticism of the physician becomes a cause of damage to the interest of the patient. In those cases where Homoeopathy can relieve, or cure, it is not proper for the physician to refuse this help to the detriment of the interest of his patient. Similarly, where the homoeopathic doctor can not offer complete care and assistance to the patient due, to his condition, it is not proper that he refuses the help of allopathy, against the best interest of the patient.

Medical ethics require that the physician should make every effort and use any legitimate method to cure the patient and to save his life. In keeping, therefore, with medical ethics, the physician is obliged to know all the methods that could help the patient. The homoeopathic

physician knows hallopathy from his studies at the university medical school, but also knows Homoeopathy from his post-graduate training.

The homoeopathic doctor faces two basic problems in clinical practice:

a. The parallel therapy: this is when he has to treat a patient who is taking hallopathic medicines. (has already been outlined)

b. His cooperation with hallopathy: Frequently, there arises the need for cooperation between the two methods of therapy. This need appears in acute cases mostly due to the lack of a homoeopathic hospital. In a case of acute bronchitis, for example, the patient should be treated in a homoeopathic hospital. There he could be under constant observation. In the course of an acute illness, it is common for the idiosyncratic characteristics of the patient to change within a short time and he needs every so often to take a homoeopathic medicine which has its optimal action when taken at the right time (timing).

Wherever there is an absense of a homoeopathic hospital, the homoeopathic doctor cannot closely observe the patient and so he is obliged to restrict and attend the patient at home. He gives to the patient homoeopathic medicines, trying to foresee which of them will be needed and is in frequent telephone contact with the patient to monitor the progress. (of the patient). It is obvious that the handling of a case in this manner is very difficult and, more than anything, it requires intense effort and great knowledge on the part of

the homoeopathic physician. Nonetheless, there are some acute cases where, due to circumstances such as the unavailability of homoeopathic pharmacies, irrespective of reason, it is not possible for the patient to have his homoeopathic medicines. It is then mandatory, as in the case of the bronchitis example, that the homoeopathic physician recommend the use of antibiotics because this is what the immediate interest of the patient dictates. Of course, this recommendation is made only for those cases where there is a genuine need for an antibiotic and indeed in the cases where the antibiotic selected will be the one indicated for the illness and which, at the same time, will not act as an antidote to the homeopathic therapy. Clinical experience has shown that there are certain antibiotics that do not nullify the action of homoeopathic medicines.

The relationship of the patient with the physician is one of need and altruism. The patient comes to the doctor under the pressure of his illness. The physician helps the patient, manifesting, through this action, his altruism.

It is known that the patient is cured not by the physician but by nature. The physician acts as the interpreter of nature for the patient. In the course of the illness, the patient exhibits various signs and symptoms. These are the language of the illness, its identity. The homoeopathic physician must know this language and understand it very well in order to select the appropriate medicine and by giving it to the patient to enable nature to manifest its therapeutic action. This is a role that

the physician must accept and respect for it is of prime importance to the health of the patient. It is not proper for a doctor to preclude therapeutic systems from his patient, which could be very useful to him, in the name of "science", in the name of a sterile fanaticism concerning the therapy.

The physician must develop his ability to observe and understand the natural laws that govern the illness and the cure and must accept expressions and reactions bearing in mind that these are part of the idiosyncrasy of the patient .

The physician must not be offended by the idiosyncratic manifestations of the patient, because then he loses his ability to think correctly in order to help the patient. He must maintain the best possible communication with all the patients. This is necessary so that the doctor can perceive subtle elements of the idiosyncrasy of the patient.

The homoeopathic doctor is not constricted by the limitations of communication that are identical to the limitations of speech; he is not confined by the limits that speech imposes on communication.

There are people that are introvert or shy. These people report formally their problems to their doctor but do not express themselves, do not talk about themselves, do not analyze their problems even if asked persistently to do so. This, however, does not constitute, for the homoeopathic doctor, an obstacle to his diagnosis. On the contrary it is in itself an element for his diagnosis. This intorvertness, timidity, the

refusal to talk about one's self, the tendency to hide the deeper aspects of one's ego actually help the diagnosis instead of obstructing it.

The physician must also be unprejudiced. The homoeopathic physician must accurately judge the physical and pshychomental qualities of the person in order to form the correct picture of the idiosyncrasy of the patient. There are many people who exaggerate when they describe their symptoms, especially those of pain. There are also those who understate their symptoms, who although suffering intensely, usually describe their problem in much milder terms than what actually happens.

There are also individuals, who present a very calm exterior while actually feeling internally intense anxiety and nervousness. The physician must be unprejudiced, he must not be taken by this outward appearance because then he will miss the essence of the case, which for the specifical patient, is anxiety and nervousness and not the external calm.

The homoeopathic doctor must discover the exact quality and dimension of the idiosyncratic characteristics of the patient. He must not arrive at superficial conclusions of his own, which is why he must be unprejudiced. He must also himself be modest and affable so as not to create special impressions to the patient, who by developing a behavior adapted to the psychological climate created by the doctor, conveys erroneous impressions about his idiosyncrasy.

A very strict physician creates a heavy

atmosphere in which an otherwise cheerful and extroverted individual is compelled to restrain itself and thus convey the wrong impressions about its idiosyncrasy.

The physician must also base his diagnosis on his own impartial and unprejudiced judgement and not on the judgement of the patient's relatives, especially when the patient is a child. Parents tend to describe sometimes their children with different psychomental qualities than those that actually exist.

In summary, the need for the physician to be calm, self-possessed, affable, observant, objective, impartial and unprejudiced serves the all-important objective of correctly diagnosing the idiosyncrasy of the patient, which is the basis of a correct homoeopathic prescription.





## Chapter 10

# SCIENTIFIC RESEARCH IN HOMOEOPATHY



## Scientific Research in Homoeopathy

During the last few decades, many scientists have intensified their efforts to investigate the several fields of homoeopathic medicine. Results were very positive and have confirmed the scientific basis of Homoeopathy.

Some of these research studies, providing information on how homoeopathic medicines act as well as the clinical and laboratory findings, have already been mentioned.

Nevertheless, there is still great scope for research in Homoeopathy, as is the case in all sciences. Our knowledge on man has, in recent years, been greatly enriched, but one should not forget how small this knowledge is compared to the almost infinite number of mechanisms and factors that still remain unknown. The human organism, even at the most tangible cellular level, is still largely unknown but the rapid accumulation of new information will permit scientists to soon know much more about man than they do now.

Scientific research is the basis of the procedure for the investigation of the present knowledge. This research is carried out with a special design and a special protocol is followed in several phases to ensure the correctness of the results.

The fundamental principles of experimentation are summarized as follows:

1. Definition of the objective aims. This usually requires the formulation of the hypotheses that must be checked.
2. Determination of the experimental unit (people, animals, cells or whatever else.)
3. Determination of the proper experimental design, including the selection of the control units or control groups.
4. Random distribution of the experimental units to the groups under study (e.g. therapeutic method).
5. Ensuring, by every reasonable effort, uniform treatment or testing of the groups being studied, throughout the entire experiment.

Experimental research on homoeopathic subjects has followed, up to now, the international scientific rules of research. The results of the studies carried out so far confirm the homoeopathic theory and strengthen the homoeopathic practice. However, scientific research never stops.

There is still a great deal to be studied in Homoeopathy. The following is a list of studies that must be conducted in the future:

### 1. Proving

of the new medicines, that is, completion of the *Materia Medica* with the addition of new pharmaceutical substances. The plethora of ill syndromes appearing in man requires even more pharmaceutical substances to confront them.

When the physician has at his disposal a great number of proven pharmaceutic substances, he has a greater possibility to find the precisely similar picture of his patient within the *Materia Medica*. The gamut of homoeopathic pharmacology is reasonably large. It is, however, known that new pathological syndromes, or variations of the old keep showing up.

It is difficult for a contemporary physician to see a typical picture of, for instance, an infectious disease in the same way as it is described in the older books. This variation in the manifestation of the disease in man is due to various factors such as the use of vaccinations, the use of strong drugs, a change in the resistances of the human organism, mutation of germs, development of the endurance of germs and so on. This creates the need for new medicines that can cope with the varied forms of disease. Although Homoeopathy confronts this problem, there is, nevertheless, the need to continue enriching the *Materia Medica* with provings of new medicines.

The proving of a medicine requires the enforcement of a special scientific protocol.

Even nowadays, provings of medicines are carried out with the active participation of homoeopathic doctors as test-subjects. There is a new tendency among homoeopathic doctors to make provings not only with natural substances but also with chemical substances that have been widely used and due to their side-effects have created new morbidic syndromes. It has been found that for an allergic reaction to penicillin the use of potentized penicillin helps the organism instantly. The same is true for many other

substances.

Haushaw studies the proving of several substances such as amino acids, vitamins, food allergens, fatty acids and nucleic acids etc. Similar studies are carried out on the treatment of plants which have been poisoned with insecticides and growth stimulants. These plants recover when given the substances on which they were poisoned but in a potentized form.

A subject for further study is the relationship between the quantitative analogy of the ingredients of a crude element and the pathological picture it produces. For example, two different crude elements produce in man different pathological pictures, but two crude elements consisting of the same active ingredients may produce a different pathology. What is the relation of analogy between their active ingredients and the pathology they produce ?

## 2. Potentization

The mechanism of potentization has been studied extensively and many elements have been found that explain what until recently was a "peculiar" phenomenon. The theory of the active cast is reinforced by the theory of water polymerization and by the results of the study of hydrogen bonds in aqueous solutions.

The study of this phenomenon, however, does not end here, since physics, chemistry, biochemistry and other sciences are examining the subject of potentization and continuously present new data explaining the phenomenon.

### 3. Relapse

The phenomenon of the inactivation of homoeopathic medicines from the concurrent intake of caffeine, menthol, camphor, naphthaline and several other chemical substances, found mainly in house paints and varnishes as well as certain hallopathic medicines, is under study. Also under study is the phenomenon of the inactivation of homoeopathic medicines from the effects of ultra-violet radiation, while their action is not inactivated when the patient that is taking them is exposed to the ultra-violet radiation.

Subjects for further research are: a) which idiosyncrasies relapse more frequently b) the limits of tolerance of enduring idiosyncrasies to relapse c) the relationship between the stereotaxic form of the relapse causing substances and the stereotaxic form of homoeopathic medicines and their active cast d) environmental factors favouring relaps e) which idiosyncratic characteristics act favorably to the recovery of a person that has relapsed the therapy.

### 4. Effectiveness

Clinical practice has proved the great effectiveness of homoeopathic medicines. Their curative action is indisputable. Many clinical studies have also been carried out to compare the curative action of homoeopathic medicines to that of the hallopathic ones in circulation.



This comparative study is left to be completed. The concern of the physician is to give to the patient the most effective and at the same time, most harmless medicine. This information the doctor will retrieve from the results of comparative clinical studies. Studies carried out so far have confirmed the great effectiveness of homoeopathic medicines.

## **Chapter 11**

# **HISTORICAL REFERENCES**



## Historical References

The first information about some therapeutic systems or techniques were given to man by nature itself. By studying the birds and the animals man noticed that they protected their nests or lairs against rain, sun, wind and enemies and that they kept them relatively clean in general. The furred animals cleaned their fur with the tongue and birds cleaned their feathers with the beak.

Early man noticed how animals cleaned their wounds with their tongue. He observed that some carnivorous animals, when suffering from constipation, were driven by instinct to find and eat purgative plants or to drink from certain springs mineral water of unpleasant taste which they normally avoid.

Man also watched how a constipated stork would take water in its beak and pour it into his bowel, as an enema. As Plenious reported, early man observed a sick rhinoceros rubbing itself against sharp rocks tearing its flesh to cause bloodletting and so relieve itself. He saw how the pelican would tear its chest to suck out blood to pour it on its wounded young. This is the paradigm mentioned in a church hymn: "Like a pelican, oh Divine Word, Thou hast torn Thine innards and hath given life to Thy children, pouring on them the vital fluid".

Thus at the beginning of time primitive man employed all what he invented by instinct or what he imitated from animals and birds. As time passed, however, he felt the need to find more effective therapeutic means.

He thus started testing and using, without exception, all things in his animate and inanimate environment for the treatment of illness. The search for effective medicines was taking place many centuries before the start of the search for the panacea by alchemists.

Through the centuries, therapeutic techniques were gradually developed, based on the then-unknown Law of Similars. Later, various theories about the nature of man, the origin of illness and the role of the physician brought to the surface laws and truths which had a direct relation to the Law of Similars.

The ancient Egyptians considered illness not only a possession by demons or a divine punishment, but also an action or result of human revenge. However, they believed that cure was only possible if it came from God. This did not stop them from searching for and testing herbs and other substances, or ways of therapy. They believed that all means of therapy became more effective when accompanied by prayer or supplications.

The priest of those times, without knowing it, applied homoeopathic therapeutics. He used yellow flowers to cure jaundice, hematite (red stone) to stop bleeding and fumigations with burnt meat to

cure vulvovaginitis with secretions that smelled of burnt meat (papyrus Cachoun).

Later Egyptian physicians applied *Helleborus* for the cure of psychoses, a medicine used by Homoeopathy even today.

The Messopotamians applied a broth made of beer and onions for the cure of conjunctivitis caused by sandstorms, which was characterised by a burning feeling in the eyes and lachrymation. As is known, onion causes a burning sensation in the eyes and lacrymation.

The first proving of medicines on healthy people were done by the Chinese. Tradition has it that ancient Chinese medicine was glorified by three physicians who are surrounded by a halo of myths, and tales. *Chen Nung*, 321 B.C. was the most prominent and he was said to have been a herbalist. He tested almost all the herbs of his empire himself, in order to discover which ones were therapeutic. He taught his students the use of therapeutic herbs as well as the use of some agricultural tools. His experience and his teachings constituted the *Pensar* or Grand Botany book. He is considered to be the father of medicine and the God of agriculture in Chinese mythology.

Melampus lived in Pylos circa 1400 B.C. and, according to Herodotus and Diodorus the Sicellian, he studied in Egypt. They alleged seeing his name engraved on the granite stones of Egyptian temples. Melampus is considered to be the first known mortal Greek physician. He was also a priest and a king and was said to be the

first mortal gifted by the gods with the capability for prophesy.

Appolodorus reports that "he was the first one to find the cure by medicines and purifications". Plinius and Dioscurides added that "he was the first to apply Helleborus and that, according to the dosage he used, it was either a tonic, a stimulant, a tranquilizer in psychopathic cases, or a purgative."

With Helleborus he also cured the manic daughters of the King Proitus of Argos. He was the first to indicate the curative properties of the Kiafa springs.

Zamolxian physicians believed that no one can cure the body if the psyche is ignored and that they **both should be treated as a whole at the same time**. "Because everything comes from the psyche, both good and bad, to the body and to the whole of man, and there they act, from the head to the eyes; so it is necessary to cure the one that is first in order to have the head and the other parts of the body in good state. The psyche must be cured through certain prayers, consisting of good words, which drip into the psyche as prudence, bringing the head and the other parts of the body into a state of health. Giving medicines only, we do not cure the body (the head) unless we first apply the praise therapy to the psyche." Zamolxis taught that the body is a totality and that if it is not studied as such it would be impossible to cure a sick part of it.(9th century B.C). Zamolxis was the first to teach a system of psychosomatic therapy which differed little from the one of today.

Thales, from Milos (636-546 B.C.) was taught mathematics by the Egyptians and astronomy by the Babylonians. When he returned to Milos he established the Ionian School of Philosophy where, for the first time, the study of mathematics and philosophy was established systematically.

He did not accept the mythological explanation for the creation of the world but considered that the physical phenomena were its primary cause.

Studying the physical phenomena and the laws that governed them he established the theory that even the divine power is simply a manifestation of natural forces and as such it could be included in the natural rules.

While examining amber he reached the conclusion that "the world is animated and full of spirits and so matter is activated by a supernatural power of the spirit, which is not a mythical god, and does not have any worshipping or religious meaning but only the natural idea of energy.

Thales also developed a system of ethics. The most famous of his sayings are: "Know thyself", "God is the oldest of all beings for he is unborn", "Who is happy?" "One of a healthy body with an opulent psyche and of a well-educated nature." Thus, Thales separated the physical, from the emotional and the mental functions and he cared for physical health, emotional maturity and intellectual cultivation.

Hippocrates (460-357 B.C.), the father of medicine and the originator of the Law of Similars, founded many of the principles of Homoeopathy.



He reached the conclusion that illness is an abnormal situation which the human organism suffers and that most of the time the cause should be searched for in three categories of factors: Climatic conditions, dietary habits and the customs and mode of life of every individual. He was the first to cure the patient and not the illness.

He also said:

"To those individuals obsessed by grief, suffering from depression and wanting to take their life (hang themselves), give them in the morning a **mandrake** root, in a low dosage so as not to cause delirium".

"The cause of fevers is this: when the body presents a superabundance of fluids, the flesh is swollen and phlegm

and bile within it do not flow: nothing is cooled either by exit or by motion and no bowel movement takes place. When there is fatigue, fever and repletion, the patient must take a shower with plenty of hot water, he must anoint himself with a wet, fatty substance and heat himself as much as possible to cast away heat by perspiration."

"Moderation in medicine is not static and he who undrestands this, walks on solid ground and knows specific and non-specific things, the knowledge of which gives us moderation, for instance, purgatives lose their purgative property, that other medicines acquire opposite properties, and that **totally dissimilar are not completely so**. Moderation is this: To give food in such a quantity that the body can manage to get over it, and when this happens purgative food will

be purgative and phlegmatic food full of liquids. If, in other words, the body manages to control the food taken, then no disease or ailment will appear when eating and that is the the meaning of moderation that the physician must know. But **if moderation is exceeded the contrary occurs** and thus, before digesting the food taken in great quantities, a weight and fever will be felt. Truly if the body can overcome the food taken it will then be fed; but when it surpasses this moderation the opposite happens and the person becomes slim. The same happens with everything else that causes phlegmasia (abundance of fluid): if the body predominates, these fluids act according to their moderation and to their nature, i.e the phlegmatic ones cause phlegmasia. But when moderation is surpassed the opposite will result.

It is my belief that nothing in the body is beginning, but that **everything is equally beginning and ending**, because from the moment a cycle has been established, the beginning cannot be found. Similarly diseases originate from the **entire body**. What is drier has the property of attracting illnesses and to suffer more; what is liquid suffers less. Illness secures itself in a dry place and has no interruption, but in a wet place disease is fluid, it possesses one place then another and by continuously changing positions gives repose and stops quickly because its place is not stable."

Hippocrates' works are full of such principles, where the laws of Homoeopathy are verified.

Plato (429-347 B.C) taught that man must be examined by the physician while healthy,

because when he becomes ill it is already late. He also taught that physicians are wrong when they attempt to **separate body from psyche** and that it is foolish to try to restore physical health while neglecting psychic health. He was teaching psycho-physiology.

Aristotle (384-322 B.C.) accepted that in the small arteries there flowed the **vital spirit** while blood circulated to the various organs in the larger vessels.

Erasistratus (300-250 B.C.) taught that "we must avoid violent bowel movements because by emptying fluid we do not cure **the cause of the disorder**, while the fluid is reproduced." He diagnosed the relation between the stone-like hardness of the liver and the production of ascites. He believed that the spirit or air fills the entire body and provokes its every motion, this spirit or air has some relation to the air we breathe.

The air, being a spirit, goes from the lungs to the heart where it is converted into **vital spirit** carried by arteries to the various parts of the body. It is also carried to the cavities of the brain where it is again converted into vital spirit. From there, through the nerves, which he considered to be hollow, it is again carried to all the parts of the body. He also believed that during contraction, the muscles become shorter and are dilated by the vital spirit carried by the nerves, a theory suggested by Descartes and Borelli in the 17th century A.D.

Herman Boerhaave of Holland, who was called the Batavian Hippocrates, taught medicine to half the physicians of Europe in a 12-bed hospital. Many of his students became famous, among them the Swiss Albrecht Haller, the Dutch Gerhard Von Swieten and many of the professors of the University of Edinburgh in Scotland. He advised the physicians that when treating patients they should always bear in mind that they should assist nature in its task.

## References to popular tradition

Man's instinct has often provided solutions to his therapeutic problems, induced by an internal inspiration which was not scientifically substantiated but proven to be effective. The Law of Similars was used in folk remedies in many instances. From folk wisdom we have received many "recipies". In ancient times, when someone was wounded by a spear, scrapings from the point of that same spear were added into a solution that was used for applications to cure the wounds. Today also, Greek folk wisdom shows many empirical applications of the Law of Similars. In Kythera, an island at the southern end of the Peloponissos, some of the hair of a dog that has bitten someone is burned and the ashes are put on the person's wound. The local people say "If you' ve been bitten by a dog, put some of his hair on the bite." They also say that if a hand is burned by fire, the pain and injury can be

prevented from progressing and can be cured if we bring immediately the burnt part as close as possible to the fire and as many times as the person can tolerate. "If touching a hot iron bar causes a burn, we can prevent swelling if the burned part is brought as close, as the person can tolerate, to a hot coal or fire, so as to heat it strongly and this we repeat several times." This is the application of the saying "one fire drives out another". The islanders put scorpion oil on a scorpion bite, the oil having been prepared by putting scorpions in it.

In other places, people who have been bitten by a scorpion will crush the scorpion and prepare a solution which is then diluted several times and applied to the bite.

In folk language, erysipelas is called windgeating. Country folk say that to drive away this disease, "fire" is needed. So, they place a red cloth on it and gently pass over it the lid of a fire-heated copper object.

## References to the Christian Religion

It is admirable that the Law of Similars is also found in the writings of Christian tradition. It is used to explain the actions of Christ and as an example of the work of St. Paul.

**Hahnemann**, who was deeply religious and very knowledgeable about the Christian writings,

often referred to the theories concerning man which are parallel to those of the scriptures. Christian scriptures mention that the first created human beings, while still sinless not only did they not fall ill but they were also immortal. Disease and death are **the results of the original sin** (Genesis), that is, a result of the violation of natural laws.

J. T. Kent of America, who continued the work of Hahnemann, said: "Man was created a free being, with the capacity to think and to do either good or bad. In order to have become disposed to miasms, there must have existed earlier in the human mind a certain state favourable to the attraction of disease. There must have been a **desire for what is wrong and evil**. Man, therefore, by thinking and desiring evil prepaars his body to accept disease."

This is not just a theory. In the Old Testament, we read in the Book of Leviticus "You shall not have sexual intercourse with a man, as with a woman; it is horror. Neither shall you do the like with any animal, so as not to **take miasm** from it. Do not take miasms from any of them, because with them the nations have taken miasms and I am casting them away before you and earth has taken miasms from them; so I return her sin and she will vomit her inhabitants."

St Paul's approach to people can be said to have been based on homoeopathic principles. In his first letter to the Corinthians he wrote (quoted from the original Greek): "To the Jews I behaved like a Jew to win them over; to those under the

law of Moses, I behaved as if I was under the law to win them over. To the gentiles who had no law, I behaved like a lawless one, although I did not commit any iniquity before God. On the contrary I lived according to the law before Christ. I behaved to those Christians that were weak in faith and knowledge as a weak one. So as to gain the weak ones for the Christ. To all I have become everything and I complied with all characters, so as to save some in any way possible."

The abbot Dorotheo, in his devotional books wrote: "Our Lord came to us, becoming for our sake, a human being, for as Saint Gregory says, the similar cures the similar, psyche cures psyche, flesh cures flesh."

Saint Maximos the confessor, referred to the Law of Similars when he said:

*"And to be brief through the sacrament of divine dispensation mind learns that the deprivations of Christ became a habit for us, that is, the incarnation of the Word (Logos) became our union with God; his evacuation our filling; his condescension our rising; his suffering our release from suffering; and his death our life; and when the mind learns these, it is pleased and exalted. And it is through this sacrament of divine dispensation that mind learns an admirable and peculiar medical science, because he sees that this medicine doesn't cure contrarious by the contraria, as the laws of doctors and physicists say, but he sees similar to be cured by similar; he sees that through the poverty of God, of reason, our poverty was cured; through His suffering, our sufferings were*

*cured, by His death, our death, and by His ruin, our ruin was cured."*

## The life of Samuel Hahnemann

Samuel Hahnemann was born on April 10, 1755, in Meissen, Saxony, Germany. Despite his limited means Hahnemann's father gave him the bases for a good education, so that at the age of twelve he was accepted at the state Latin school of his town. His persistency and diligence and his insatiable thirst for knowledge made him the favourite student of his teachers.

At age 15, he continued his education at the famous Prince's school of Meissen. The classical education he obtained there was to be of great value in his life, subsequently. It enabled him to have an excellent grasp of methodology, which later proved to be very useful in confronting difficult scientific and philosophical problems. Having a remarkable command of his mother tongue, he was skilled in clearly and precisely describing every symptom which he observed in his later work with patients and during provings. It also enabled him to complete one of his most important works, the *Materia Medica*, which even up to the present time has lost nothing of its clarity and expressiveness. Mastering several other languages, he became conversant with the opinions of the most important doctors and authors of his times.



In the spring of 1775, he graduated with distinction from Prince's School of Meissen and obtained admission to the University of Leipzig medical school. Financial difficulties compelled him to translate English books into German concurrently with his studies. After two years of studies at Leipzig he went to Vienna, on foot, to enjoy the clinical practice of the then distinguished Dr. Quatin, the personal physician of the Emperor. In the years that followed he would many times be heard expressing his gratitude for this experience, saying: "I am very much obliged to him, for all that a doctor could teach me."

One year later continued financial difficulties obliged him to leave Vienna to work as a private physician and librarian of the governor of Transylvania. This position gave him the necessary time to increase his knowledge and skill, so that in 1779, on August 10, he received the doctorate degree in medicine from the University of Erlangen. The excellence of his scientific education can be seen in the subject of his thesis: "A Consideration of the Etiology and Therapy of Spasmodic Affections".

After earning his degree Hahnemann practiced medicine for the next ten years in several cities of Germany. At the same time he wrote books of chemistry and pharmacology. Within a short time, his essays in this area established him as one of the most important writers in this field of study. His essay on "Poisoning by Arsenic" was considered by critics as "an excellent, classic work." His book "Discrimination between Unadulterated and

"Adulterated Drugs" was hailed as "indispensable knowledge for physicians and pharmacists" of those times. His "Pharmacist's Lexicon" was annotated as a "classic study" and his book "A Guide for the Treatment of Suppurated Wounds and Ulcers" was praised as "complete and well written." His "Guidelines to surgeons on the Treatment of Venereal Diseases" was commented on as being "an essay written by an intelligent and well-educated man" and as evidence of wealth of knowledge and maturity of reasoning."

In the area of Chemistry Hahnemann distinguished himself with the invention of a new method for the tracing of adulteration of wines which became known as "Hahnemann's Wine Test." One of the best preparations of mercury is still called "mercurius solubilis Hahnemanni." Skimming through scientific periodicals of that time we find that his colleagues referred to Hahnemann with the greatest respect and highest praises such as "laudable and honourable Mr. Hahnemann" "this famous chemist-scientist", "this skillful observer and efficient, successful physician".

Later, however, the severity with which he publicly criticised erroneous actions of his colleagues, as well as his evident success as a scientist, far ahead of his time, gave rise to envy from his peers. His severe criticism of the personal physician of Emperor Leopold II of Austria, who in essence caused the death of the aged monarch by applying four bloodlettings in the space of 24 hours in an attempt to cure pleurisy, earned him more enemies, who

accused him of a lack of professionalism. Other declarations of his, condemning cruelty against mentally-disturbed and handicapped patients (painful corporeal punishments) but mainly his criticism of the ignorance of physicians about the action of the medicines of that time on the patients, and against the aimless poly-pharmacia (the administration of numerous medicines) and bloodletting and use of laxatives, further increased his enemies in the medical world.

In 1796, through the scientific publication Hugelands Journal, he presented what could be regarded as the harbinger of the Law of Similars.

In the same journal, in Vol. 22 of 1805, he published his essay "Medicine of Experience", which is the precursor of the "Organon of the Healing Art" published later. In this essay, he argues that physicians must identify the properties of each medicine by proving, on healthy people, the properties of medicines. He himself completed a daring and tiresome task proving on himself and his colleagues a series of pharmaceutical substances. In his monumental book "Pure Materia Medica", consisting of six chapters and presented between 1811 and 1821, at a time when he was teaching at Leipzig University, he describes the innumerable signs and symptoms produced by pharmaceutical substances during provings on healthy organisms.

At about the same time he expressed the opinion that the physician must cure the patient

and not the malady, the name of which does not have any significant importance to the cure

Similar opinions concerning the terminology of illnesses (the name of an illness changes when new data on its etiology are added) were expressed by Virchow in the periodical "For the Unity of Scientific Medicine" and in the journal of the Medical Society of Berlin in 1884.

With reverence to the provings of Hahnemann Dr. Schlegel, observed: "Here we meet with the constant cry of nature which we were carefully and sincerely seeking: these are the pathological manifestations of life in all the unlimited varieties of action, at last recorded with precision and certainty."

The clarity of the descriptions of the symptoms produced during provings led professor von Bakody to say that "Homoeopathy is a system of biological medicine of great precision".

In 1821 Hahnemann stayed in Leipzig and became the personal physician of the Duke of Goethen. IN 1835 he left Leipzig and settled in Paris. By that time he had become very famous. He died in Paris on July 2, 1843. During his life, Homoeopathy had spread to many countries.

## References to Gram, Hering, Allen and others

The first man who took Homoeopathy to America was Dr. Hans Burch Gram. Born in Boston in 1786 and while practicing medicine in Germany he met Hahnemann and his students and adopted Homoeopathy. He returned to America and he founded the colony of homoeopathic physicians in New York.

The staunchest promoter of early Homoeopathy in America was Constantine Hering. He was born in 1800 in Oschatz, near Dresden, studied medicine and graduated from the University of Wurtzburg. He formulated the opinion that experience gives perfection. Hering perceived the deeper meaning and the usefulness of Homoeopathy and became converted to Homoeopathy while reading Hahnemann's books for the purpose of preparing a condemnation of Homoeopathy, financed by publisher C. Baumgashrer who was looking for a physician who could write a book against Homoeopathy. He came to North America in 1833.

H. C. Allen was born in 1836 in Canada and became an important writer and professor of Homoeopathy in the Chicago Hering Homoeopathic College.

From 1830 Homoeopathy spread into Germany by Hahnemann's students: **Staph, Gross, Hartmann, Wislicenus, Brunnov, Caspari, Hartlaub** and others.

Homoeopathy was introduced into France by **Des Guidi** and by **Dr. Romani** (1832). Into Switzerland Homoeopathy was introduced by **Pierre Dufresne** and finally into Paris it was introduced by **Petroz, Cuitre** and **Simon**.

In 1833 **Leon Simon** established the journal "Homoeopathic Medicine" and **Petroz** founded the Paris Homoeopathic Association. **Jourdan** translated Hahnemann's books into French.

In 1841 **Benoit Mure** from Lyon introduced Homoeopathy to Rio de Janeiro.

In 1853 **Jahr** published his monumental book "Homoeopathic Pharmacopoea and Posology."

From 1850, **Paul Tessier**, a physician practicing in the hospitals of Paris, worked hard on Homoeopathy and established the "Medical Art" journal, in 1855, **Pierre Jousset**, a student of **Tessier** (1864) continued his work and carried out the first scientific research studies (1902-1909) on the effect of dilutions of silver and mercury salts on the growth of *Aspergillus Niger*.

In North America **C. Hering** a student of Hahnemann, established in the 19th century a school with many hospitals while at the close of the century the *Materia Medica* of **T. Allen** and **C. Hering** was completed. **Kent** succeeded them and develops "Kentism".

**Leon Vannier** continued the work of **Jousset** and created the periodical "French Homoeopathy". He established the "Lique Homoeopathique

Internationale" in Rotterdam in 1925 and the St. Jacques Hospital in Paris in 1931. In 1945 Pierre Vanier created the "Notebooks of Homoeopathy and Comparative Therapeutics." He will live for ever in the memory of those who propagate and teach now the Homoeopathic theory from his work as co-director of the Homoeopathic Centre of France up to 1955.

During the life of Hahnemann Homoeopathy spread to many countries.

J. T. Kent was the one who continued the great work of Hahnemann.

## References on J. T. Kent

James Tyler Kent, son of Stephen and Caroline Kent, was born in the city of Woodhull, New York State, on March 31, 1849. He attended Franklin and Prattsburg Colleges and continued his studies in the Woodhull Academy. He graduated with a Bachelor's degree from the Madison University at the age of 19.

He continued his studies at the Bellevue Medical College, where in 1870 he earned the title of Medical Assistant. He completed his real medical studies at the Institute of Eclectic Medicine in Cincinnati, Ohio, where he passed his examinations with top honors and gained his medical licence at the age of 25. It was here that he was taught all the disciplines of medical science as it was then known in Europe, that is Anatomy, Physiology, Histology and Pathological

Anatomy. But his program of studies on the therapeutic part was more extensive than it was in Europe. It included Homoeopathy, Naturopathy, Chiropractic medicine and other methods that were either unknown or relatively unknown in Europe.

Kent married in his 26th year and in 1874 settled down in St. Louis, Missouri.

He was a strict, honest and hard-working physician and soon became widely known by his articles in prestige medical journals and was one of the most important members of the National Association of Eclectic Medicine.

The Eclectic School displayed a significant tolerance to the various therapeutic systems and the fact that it did not defend any of them but allowed its students to freely pursue whichever their personal preference dictated, became for some of the students, an advantage, but for others a serious disadvantage.

Kent decided to follow allopathic medicine, the system that seemed to him to be more positive and reliable. In view of his knowledge and the high esteem to which he was held, he became professor of anatomy in the American College of St. Louis at age 28.

At that time, he had only a superficial knowledge of Homoeopathy, which he did not practice, devoting all of his time to the teaching of Anatomy. Although not an extrovert he adored his wife. He suffered very much when she became ill. Neither he nor anyone from among his colleagues at the Eclectic School succeeded in having even a mere palliation of the symptoms she displayed: weakness, persistent insomnia



and anaemia. This condition kept his wife in bed for months and as time passed she became steadily worse.

Then she asked him to seek the advice of an elderly homoeopathic physician who had been recommended to her as being very good. Kent did not like the idea at all. As he had sought the advice of all the reputable physicians of St. Louis with no result. Besides, it seemed ludicrous to him to turn to a homoeopathic doctor for such a severe case. The minute dosages given by homoeopaths seemed to him ridiculous, to say the least. Ultimately, however, he gave in to the insistence of his wife, and agreed to call the homoeopathic doctor expressing at the same time his desire to be present during the examination. The homoeopathic doctor Dr. Phelan arrived in his carriage distinguished by his white-beard and his black hat. It took him more than an hour to examine the patient. He asked a lot of questions, many of which seemed to Kent, silly and irrelevant to the illness of his wife, which made Kent bend towards the bed side of his wife to hide grins of irony. Dr. Phelan asked Mrs. Kent in great detail about her mental state, her fears, desires, preferences in food, although it was obvious that there was nothing wrong with her stomach and intestines. He questioned her about her sicknesses, her reactions to cold, heat and the various climatic and seasonal influences. After a physical examination, he finally gave her a homoeopathic medicine. When Kent saw him pouring the medicine into a glass, telling the patient to drink a spoonful every two hours until she became sleepy - an effront considering that

his wife had not had a wink of sleep for weeks on end - he thought that this man was a swindler and showing him the door he got rid of him unceremoniously.

Kent then went to his study next to his wife's room and started preparing a lecture he was to give. After two hours he went to her room and gave her some of the homoeopathic medicine, so that he would not displease her.

After the second dose he was so absorbed in his work that he forgot about it. When he remembered it four hours later, he got up to go give her the third dose but lo and behold! The patient was deeply asleep, something that had not occurred for a long time, despite all the various medicines she had taken.

Dr. Phelan continued his visits and Mrs. Kent started recovering slowly, she started getting out of bed and a few weeks later she was almost cured. Not one of the professors of medicine had succeeded, until then, in what Dr. Phelan had achieved. He had cured the sick woman in depth, in a mild way and permanently.

Kent was very impressed and, because he was a man of integrity, felt the need to apologise to Dr. Phelan and to confess to him the initial lack of confidence in him and to express his change of attitude towards Homoeopathy after the results of the therapy. He decided to engage in it seriously. Under the guidance of Dr. Phelan, Kent began to study Hahnemann's "**Organon**" the basis of Homoeopathy, and everything else that was relative to this "peculiar" method. Kent was studying day and night, often staying up all night, a coat over his shoulders to keep warm,

devouring all the bibliography on the subject available in America. His enthusiasm was such that he first resigned his Anatomy professorship and then his membership in the National Society of Eclectic Medicine in order to devote himself totally to Homoeopathy. From then on, he devoted himself body and soul to this new medical system, the truth and value of which he begun perceiving clearly.

He especially understood, comparing it to other medical systems, that this was the only one that offered laws and fixed principles which one could follow, as a guide, in order to cure. All other systems seemed to him dangerous and unstable, since they were every now and then changing theories and medicines.

In 1881 he was appointed to the Missouri Homoeopathic College as professor of Anatomy and later of surgery, a position he held for two years. In the meantime Dr, Uhlmeier, professor of the Materia Medica, retired and asked Kent to replace him, which he did. A few years later he resigned that chair to take the position of Dean of the Homoeopathic Medical School of Philadelphia where he directed an advanced group of doctors in the study of Materia Medica.

He worked harder than ever for Homoeopathy, making provings of medicines on himself and trying hard to perfect the art and the technique of Homoeopathy. He studied the works of Swedenborg and adopted his philosophy. During his tenure in Philadelphia he lost his wife. Some years later he was called upon to treat a lady who, later, became his second wife. She was Clara Louise, a practising physician. Her intelligence and

supportive personality made her an enthusiastic wife who greatly helped Kent to complete his extensive works "Lectures on Homoeopathic Philosophy", "Materia Medica" and "Repertory".

After several years of intense activity in Philadelphia he was invited to Chicago, to the same position, at the Dunham Medical College. He acquired such a reputation that people from everywhere would seek his advice. At age 56 he became a professor and Dean of the famous Hering Medical College in Chicago and consequently he taught at the Hahnemann Homoeopathic College, also in Chicago. In addition, he was the director of a clinic where he taught specialist doctors how to analyse and to evaluate, in a short period of time, the most important symptoms of a case.

In his lectures on Homoeopathic Philosophy he would place Hahnemann's "Organon" on the podium from where he would teach and pacing up and down the room, he would analyse and explain all the knowledge he had acquired from deep and careful study of the three hundred paragraphs of the "Organon".

For his lectures on the Materia Medica, Kent would open one of the 10 volumes of Hering's "Guiding Symptoms" and with an analytical presentation he would enliven his subject, projecting at the same time the picture and the idiosyncrasy of each medicine, revealing its uniqueness with all its characteristics and subtle hues.

Finally, not knowing where he would find a lexicon of symptoms which could enable him to find the medicines for a given symptom and

having only nothing more than the small work of Lippe and Lee for consultation, he decided to create a repertory of symptoms that would be as complete as possible.

Working day and night, he went through the entire bibliography of his time to complete this monumental work of 1420 pages filled with descriptions of symptoms. Exhausted from teaching, writing and his numerous patients he retired to his paternal home at Sunnyside, Orchard, near Stevensville in Montana where he died shortly thereafter on June 6, 1916.

Kent was a member of many different scientific associations, including the Homoeopathic Medical Society of Illinois, the International Hahnemannian Association, the Homoeopaths, which he had founded himself, and he was also a member of the **British Homoeopathic Society**.

No doubt Kent was one of the greatest promoters of Homoeopathy, not only in America, but in the entire world. He stayed home working and studying because he could not bear hearing ignorant, uninformed people discussing Homoeopathy, people who had not studied even its basic principles. Much has been written about Kent's personality. The most eminent critics consider him one of the best representatives of the American Homoeopathic School and at the very top echelon of American Homoeopathic doctors. What distinguished Kent was the perfect combination of teaching and practice. The depth of his knowledge is reflected in his three main works.

1)"Lectures on the Homoeopathic Philosophy", published in four editions and in a fifth commemorative edition.

2)"Lectures on Materia Medica" (pharmacology) of Homoeopathy, issued in three editions. It is a large volume, unique in its kind describing 183 medicines in 982 pages. It was not only an analytical study of the Materia Medica as such that can be found in many works, but a synthetic study that gives a live picture of the medicine, in other words, the soul of the medicine.

3)The "Repertory of the Characteristic Symptoms, Clinical and Pathogenetic of the Homoeopathic Materia Medica" (1889). One could mention the "Journal of Homoeopathics" which Kent published from 1897 to 1903, a work of seven volumes, enriched with lectures which he gave to advanced physicians, with many of his own articles and some works of his students. There is a pamphlet titled "What the Physician should know to prescribe successfully", which is the most complete questionnaire ever, consisting, of 22 pages to guide the examining physician. From 1912 to 1916 he published, with his students the diary of round table discussions called "The Homoeopathician", which is six volumes of pure Homoeopathy.

We should not forget the important work of Kent concerning the Materia Medica. During his life, he experimented with medicines on himself and on his students. He studied 28 medicines, 14 of which had not been proved before. For his work he took into consideration the preeminent homoeopaths such as Hahnemann, Lippe, Hering,

Allen, Hempel, Dunham and Wesselhoeft.

Kent along with H.C Allen and C. Hering, are considered the three greatest American Homoeopaths. Appart from these, however, several others, before Kent, are not worthy. It is difficult to rank them but some deserve a special mention. They are E.J. Lee, T. Wislon, P.P Wells, E. Bayard W. Guerney, A. Lippe, Finke, Suan, C. Pearson and H. Farrington.

## Historical Synopsis

1755: April 10th, the Birth of Christian Frederick Samuel Hahnemann at Meissen.

1779:Hahnemann graduated as Doctor of Medicine at Erlangen.

1796:Hahnemann published the first principles of Homoeopathy .

1810:The first edition of Hahnemann's "Organon of the Art of Healing" is published.

1825: Homoeopathy introduced into the U.S.A by Dr.H. B. Gramm.

1832:Homoeopathy pioneered in the UK by Dr. Frederick Foster Harvey **Quin**.

1836:The Hahnemann Medical College founded by Dr. C. Hering in Philadelphia.

1837:The Liverpool Hahnemann Hospital founded.

1843: July 2nd, Hahnemann deceased.

1844:The British Homoeopathic Society (later The Faculty of Homoeopathy) formed by Dr. **Quin**.

1850:The London. (later Royal London) Homoeopathic Hospital opened in Golden Square

(9 years later moved to Ormond street.)

1860: Ambrecht's (later Nelsons's) Homoeopathic Pharmacy established in London.

1877: The London School Of Homoeopathy established.

1878: November 24th, Dr. Quin deceased.

1903: The Tunbridge Wells Homoeopathic Hospital opened in Church Street.

1909: The Missionary School of Medicine founded. British Homoeopathic Association founded.

1914: The Houldworth Hospital (later Glasgow Homoeopathic Hospital) opened.

1918: Dr. (later Sir) John Weir appointed a physician to King George V and Queen Mary.

1922: Drs. E. Bach and C. E. Wheeler introduced the nosodes into homoeopathic therapy.

1925: The Bristol Homoeopathic Hospital opened by Princess Helene. The Interantional Homoeopathic Medical League formed.

1937: Dr. Sir John Weir appointed a physician to King George VI.

1941: Drs. W. E. Boyd and J. Patterson report on clinical activity of high potencies.

1948: The Title of "Royal" given to the London Homoeopathic Hospital by King George VI. The Homoeopathic Trust is formed. The National Health Service is inaugurated incorporating Homoeopathy.

1950: The Faculty of Homoeopathy incorporated by Act of Parliament.

1957: The Jersey Homoeopathic Association founded.

1958: The Hahnemann Society founded.

1969: Dr. M. G. Blackie appointed a Physician to



H.M. Queen Elizabeth II.

1971: The Manchester Homoeopathic Clinic opened in Brunswick Street.

1978: The British Homoeopathic Medicines Manufacturer's Association formed.

1979: Mass lobby of Parliament (27th March) and petition presented with 116,848 signatures (13th July) in support of Homoeopathy. Homoeopathic deputation met new Minister of State for Health, Dr. Gerard Vangham.

Commons adjournment of the debate fought by Tom Ellis, M.P., leader of the Homoeopathy lobby in Parliament. British Homoeopathic Congress held in Norwich, 25th-28th July. International Homoeopathic Congress held in Hamburg, 21st-25th May.

1980: Introductory Courses in Homoeopathy for Pharmacists introduced. International Homoeopathic Congress held in Acapulco, Mexico, 18th - 22nd April. British Association of Homoeopathic Pharmacists established. The Homoeopathic Development Foundation established.

1981: Mr. F. Crawford (Nelsons) appointed U.K. Consultant to the Homoeopathic Pharmacopoeia Convention of the U.S.A. The British Association of Homoeopathic Veterinary Surgeons is formed. Liga Medicorum Homoeopathica Internationalis Congress of Homoeopathic Medicine held in Rome, 11 - 16th May.

1982: H.M. The Queen Mother became patron of the B.H.A. International Homoeopathic Congress held at the University of Sussex, Brighton, March 29th - April 2nd.

## Chapter 12

# HOMOEOPATHY TODAY



## Homoeopathy Today

Homoeopathy today appears to be widely expanding. This expansion is due to the continuous work of the homoeopathic physicians, but also to the impressive results of Homoeopathy in everyday clinical practice.

At times, Homoeopathy has met with resentment from several physicians. The common characteristic of these doctors was that they were almost always uninformed about Homoeopathy. This is reinforced by the fact that the doctors who wanted to study the principles of Homoeopathy in an attempt to find its flaws and imperfections on which they could later base their objections, ultimately came to recognize its value as was the case of Hering, mentioned earlier in this book.

There have also been some absurd interpretations of Homoeopathy, some so bigotted that only in the Middle Ages could they have found fertile ground. The proven clinical value of Homoeopathy was what has given it the possibility to endure and to develop. Many other therapeutic systems have temporarily occupied the medical world only to vanish and be forgotten soon.

On the contrary, Homoeopathy, continues on

its two hundred years course history, thanks to its effectiveness.

Homoeopathy, is today, practiced by physicians in the following countries, listed in alphabetical order, in most of which there are Homoeopathic Medical Associations:

Argentina  
Australia  
Austria  
Bengla Desh  
Belgium  
Brazil  
Burma  
Canada  
Chile  
Colombia  
Denmark  
England  
France  
Ghana  
Greece  
Hungary  
India  
Indonesia  
Ireland  
Israel  
Italy  
Japan  
Lebanon  
Malasia  
Mexico  
New Zealand  
Nigeria  
Pakistan  
Poland

Romania  
Senegal  
Singapore  
South Africa  
Sri Lanka  
Sweden  
Switzerland  
U.S.A.  
U.S.S.R.  
Uganda  
Venezuela  
West Germany

Homoeopathic clinics or hospitals are established and function in the following countries:

Argentina - Austria - Belgium - Brazil -  
Canada - Denmark - England - France - Germany  
- India - Ireland - Italy - Mexico - Pakistan -  
Sweden - Switzerland - U.S.A.

In the countries listed below, Homoeopathy is officially recognized or is in the process of recognition as a university speciality:

Argentina - Austria - Belgium - Brazil -  
England - France - Germany - India - Italy -  
Mexico - Switzerland - U.S.A.

Homoeopathy was brought to Greece in 1967 by G. Vythulkas. Although G. Vythulkas does not have a medical degree, he worked hard to promote Homoeopathy in Greece. He established the first Homoeopathic Medicine Centre in Athens and has inspired to many Greek doctors a love for Homoeopathy. In 1979, the Association of Homoeopathic Medicine was established in the form of a Medical Society. Homoeopathy in Greece

is today practiced exclusively by physicians the number of which exceeds 40.

In 1985 the Medical Institute for Homoeopathic Research and Application -MIHRA- was founded in Greece which is directed by the author. Nowadays, MIHRA has 428 members and constitutes the main body of the educational, research and therapeutic endeavour of Homoeopathy in Greece. The aims of MIHRA are: the promotion of Homoeopathic Medicine in Greece and internationally, the articulate training of physicians and paramedics in the science of Homoeopathy as well as the promotion and scientific organization of research in Homoeopathy.

MIHRA has inaugurated the Longterm Seminar in Homoeopathy (LOSEHO) in order to achieve its goal of articulated training of its physician members. The Longterm Seminar has a three year duration and includes theoretical and practical instruction in Homoeopathy. The graduates receive a Certificate of studies which is internationally recognized because MIHRA has a close scientific relationship with and recognition from Medicina Alternativa, which is the largest international organization of alternative medicine.

In 1983 Homoeopathy was introduced in Cyprus by the author. In August 1985 official interest on Homoeopathy was expressed for the first time by the Greek Government and the Minister of Health and Welfare requested from the Greek homoeopathic doctors to submit their

proposals concerning the inclusion of Homoeopathy in the National Health System. In February 1988 by a Ministerial decree the Committee on Homoeopathic Medicine was formed, as part of the Central Health Council. It comprises of five homoeopathic physicians and a homoeopathic pharmacist. The author is the secretary of this committee. He participates in it in his capacity of general director of MIHRA. The function of the committee is the promulgation of proposals and recommendations to the Government regarding the terms and prerequisites for the practice of Homoeopathy in Greece.

The last World Congress on Homoeopathic Medicine took place in Athens, in May 1988. Several internationally acclaimed homoeopathic celebrities participated to name a few: Professors S. Ortega, D.H. Chand, Charles Kennedy, M. Jenaer, P. Künzli e.t.c. In May 1988 also MIHRA in collaboration with the International Institute for the Study of Metabolic Diseases and Cancer organised the 1st World Symposium on Cancer. Its topic was: The holistic approach to cancer. A number of the subjects expounded, in the course of the Symposium, had focused on the confrontation of various forms of cancer with homoeopathic medicines.

MIHRA in its four years of operation has a lot to show, in terms of educational and research activities. In June 1987 it invited Prof. S. Jurasunas to lecture the MIHRA members on the confrontation of cancer with metabolic methods. In October, of the same year, the Chairman of



Alternativa, prof. A. Jayasuriya, conducted seminars on Acupuncture for the members of MIHRA. In May 1988, the distinguished professors D.H. Chand and S. Ortega, invited by MIHRA, gave lectures on the subjects of Homoeopathy.

MIHRA participated in the World Congresses of Medicina Alternativa that took place in Malaga, Spain in April 1986 and in Copenhagen, August 1987. Also participated in the 43d World Congress of Homoeopathic Medicine in Athens, May 1988. In these congresses MIHRA presented over 30 scientific researches and dissertations on subjects concerning homoeopathic medicine.

In September of 1988, MIHRA, as part of its participation in the programs of the European Economic Community against cancer, submitted to the pertinent committees of the EEC, proposals for the conduct of these reserach projects concerning cancer and Homoeopathy.

In June 1988, the Panhellenic Homoeopathic Medical Society was founded by fifty physicians.

## Informational Material

### Medical Institute for Homoeopathic Research and Application

#### ESTABLISHMENT

The Institute for Homoeopathic Research and Application (MIHRA) is a scientific non-profit Society established in October 1985 in Athens with, presently, 446 members.

#### AIMS

The aims of MIHRA are:

1. The study and research of the Homoeopathic Medical science.
2. The establishment of a centre for the study of Homoeopathic Medicine at post graduate level, under the name "Homoeopathic Medical Academy".
3. The creation of a scientific research centre for research and studies in Homoeopathic Medicine, under the name "Homoeopathic Research Centre"
4. The publication of magazines, books, the organization of scientific lectures, seminars and announcements from all audiovisual means that are available, for the appraisal of the intrested parties and the collaboration with all the corresponding scientific Societies, Institutes or Organizations around the world, for the exchange of views and the collection of statistical data.
5. The establishment in Greece of a permanent centre for conventions, lectures and the propagation of Homoeopathic Medicine under the name "International Centre for Homoeopathic Medicine".
6. The establishment of a charitable scientific foundation under the name "Hippocratic Homoeopathic Foundation" which will have the form of a general Homoeopathic hospital.

7. The establishment of branches of the Homoeopathic Medical Academy, the Homoeopathic Research Centre and the Hippocratic Homoeopathic Foundation in other Greek and foreign cities.

### **ADMINISTRATION**

MIHRA is administered by a board of directors which today consists of: Chairman and General Director: Spiro Diamantidis, M.D. Secretary General: Hristos Hatzikostas, M.D. Treasurer: Athos Othonos, M.D.

### **STRUCTURE**

The administrative structure of MIHRA consists of the following departments for which physicians, members of MIHRA provide their work voluntarily: Education Department, Organization Department, Research Department, Laboratory Department, International Relations Department, Public Relations Department.

### **EDUCATION SECTOR**

NOVEMBER 1985: MIHRA inaugurated the Medical Homoeopathic Academy. The educational program of the Academy, called Long Term Seminar on Homoeopathy, has a 3 year duration and includes lectures, educational films and videotapes as well as the attendance of clinical practice. The Long Term Seminar on Homoeopathy purports to provide complete theoretical as well as practical training to the members of MIHRA in the subjects of Homoeopathic Medicine.

As part of this training program Homoeopathic physicians and distinguished professors have been invited by MIHRA and have taught its members. During the Long Term Homoeopathic Seminar the members of MIHRA, apart from Homoeopathic Medicine, have the opportunity to receive training in other diagnostic and therapeutic methods of

Alternative Medicines such as the diagnostic Blood Test HLB, Iris diagnosis, Mora Therapy, Natural Medicine, Chromotherapy e.t.c.

JUNE 1987: Professor S. Jurasunas, director of the International Institute for the Study of Metabolic Diseases and Cancer, invited by MIHRA, gave to its members a seminar with subject the Confrontation of Cancer with Metabolic Methods.

OCTOBER 1987: Professor A. Jayasuriya, Chairman of Medicina Alternativa invited by MIHRA, gave seminars to MIHRA members with subject the Acupuncture and its Applications.

NOVEMBER 1987: A special course of lessons begun, addressed to pharmacists and veterinarians. In the course of these lessons apart from the basic training in Homoeopathy, a more specialized form of knowledge is offered, in what concerns the pharmaceutical technique of homoeopathic medicines and the application of Homoeopathy on animals. The taining includes a theoretical and a practical part.

APRIL 1988: Professor D.H. Chand was invited by MIHRA and lectured its members on a number of subjects of Homoeopathic Medicine.

MAY 1988: As part of the 1st International Symposium for the Holistic Therapeutic Confrontation of Cancer "*The entire View on Cancer*", speakers such as: K. Spellman (England), G. Smith (England), R. Kupsinell (USA), D. Marshall (Canada), C. Young (Australia) enlightned the members of MIHRA on subjects such as: Iris diagnosis, Acupuncture, Reflexology, Natural Medicine and other topics. The Seminars lasted for 3 days and took place in the island of Kithira under the auspices of the District Governor of Kithira. The same month the internationally known professor of Homoeopathy S. Ortega gave lectures at MIHRA.

JUNE 1988: The Greek Scientific Society of Phytotherapy-Aromatotherapy, in collaboration with

MIHRA, inaugurated a course of lessons in Phytotherapy and the Homoeopathic Meicine. The lessons where hosted by the professor of Pharmacology, of the Medical Faculty of Athens University .

### RESEARCH SECTOR

The members of MIHRA On the basis of a program of the the Department of Research and in close collaboration with and under the guidance of the Institute carried out a number of research projects. These research projects were presented at the International Conventions of Medicina Alternativa, which took place in Malaga 1986, in Copenhagen in August 1987, in Malaga in April 1988, at the 1st International Symposium on the Holistic Therapeutic Confrontation of Cancer in Athens May 1988 and at the 43th World Congress of Homoeopathy which took place also in Athens in May 1988. The subjects of these research works and projects were the following:

### SCIENTIF RESEARCHES:

1. Comparative Clinical Study of Homoeopathic and Allopathic Treatment in Diabetes Mellitus.
2. Comparative Clinical Study of Homoeopathic and Allopathic Treatment in Haemorrhage of the Upper Digestive Tract.
3. Homoeopathic Treatment of Multiple Sclerosis.
4. Homoeopathic Treatment of Chronic Psychototic Patients.
5. Comparative Clinical Study of Homoeopathic and Allopathic Treatment on Benign Paroxysmal Vertigo.
6. Homoeopathic Treatment in cases of Chronic Bronchial Asthma.
7. Comparative Study of the Homoeopathic Medicines and Allopathic Analgesics (Aspirin) Effect in Rats.
8. Using Tissue Salts as a support of the Similimum Effect.

9. Identification of the Homoeopathic Idiosyncrasies through the Haematological test HLB.
10. The Treatment of Patients who presented Chronic Proving or Paliation under the Influence of Homoeopathic Treatment.
13. The Homoeopathic Pharmacology of Bufo Rana.
14. Homoeopathic Treatment of Toxic and non Toxic Goitre.
15. Homoeopathic Treatment of the Cancer of Cervix Uterus.
- 16 Homoeopathic Treatment of Stomach Cancer.
17. Homoeopathic Treatment of Cancer of Urinary Bladder.
18. Homoeopathic Treatment of Multiple Myeloma.
19. Homoeopathic Treatment of Primary Liver Hepatoma.
20. Homoeopathic Treatment on Terminal Cases of Cancer.
21. Homoeopathic Treatment of Carpal Tunnel Syndrome.
22. Homoeopathic Treatment of Leukemia.

#### SCIENTIFIC WORKS

1. The Role of the Physician in the Society of the year 2000
2. The Laws of Nature and Homoeopathic Clinical Practice.
3. Principals of Differential Diagnosis in Homoeopathy.
4. Oranization and Structure of a Modern Homoeopathic Pharmacy
5. The Change of Psychological Parameters after Homoeopathic Treatment.
6. Observations and Views on the Functional Structure of Being as an Idioasycratic Entity.
7. Acquired Patterns of Behaviour and their Role as Acquired Predisposing Factors of Diseases.
8. Miasms and Eugenics - Ten Principals for a

Healthy Future.

9. Psychological Patterns and Cancer - The Homoeopathic View.

10. The Origin of Cancer according to the Homoeopathic Miasmatic Point of View.

11. Code of Deontology and Ethics in Homoeopathy.

SEPTEMBER 1988: MIHRA in collaboration with the Panhellenic Medical Society participates in the EEC program titled "Europe against Cancer" and forwards to the appropriate committees of the EEC proposals for the following research programs:

1. The Effect of Homoeopathic Therapy on the cost of Health System.
2. Comparative Clinical Study of Allopathic and Parallel (Homoeopathic and Allopathic) treatment on children suffering from lymphoblastic leukemia.
3. The study of the HLB haematological test as a screening test for the early diagnosis of cancer. A calculation of the credibility, the sensitivity, the expertise and of the positive value of the test.

#### CONVENTIONS' SECTOR

MIHRA has participated in the following conventions with scientific works:

1. APRIL 1986: 10th World Congress on Natural Medicine, in Malaga Spain.
2. NOVEMBER 1986: Paneuropian Congress of CIA-MAN on Complementary Medicines, in Madrid, Spain.
3. APRIL 1987: 11th World Congress on Natural Medicines in Malaga, Spain.
4. JULY 1987: International Congress of Medicina Alternativa in Colombo, Sri Lanka.
5. AUGUST 1987: 12th World Congress on Complementary Medicines of Medicina Alternativa in Copenhagen, Denmark.

6. APRIL 1988: World Cogress on Complementary Medicines of Medicina Alternativa, Malaga Spain

7. MAY 1988: In collaboration with the International Institute for the Study of Metabolic Diseases and Cancer MIHRA organized in Athens the 1st International Symposium for the Holistic Therapeutic Confrontation of Cancer. Several International Celebrities of Alternative Medicines presented their work in the Symposium. To name a few: R. Defourny (Holland), V. Winter (Denmark), G.S. Blokker (Holland), T. Manifold (England), B.P. Sami (USA), N. Eddie (England) and several others. At the end of the symposium 3-day post event seminars were organized in Kithira island for the members of MIHRA. The same month MIHRA participated in the 43d World Congress of Homoeopathy which took place in Athens by Liga Medicorum Homoeopathica Internationalis (LIGA).

Since its founding MIHRA with its scientific associates has presented 27 lectures to the general public about the scientific potential of Homoeopathy. These Lectures took place in Greece, Cyprus, Holland, Sri Lanka, England and Germany.

8. NOVEMBER 1988: MIHRA oragnized from November 9-13th in Athens in the auditorium fo Physiology of the Medical Faculty of the University of Athens the 1st Week on Alternative Medicines.

#### **OTHER ACTIVITIES IN GREECE**

NOVEMBER 1985: MIHRA responding to the proposal from the Health Minister submitted its proposals to the Ministry of Health, Welfare and Social Insurance concerning the inclusion of Homoeopathy in the National Health System.

DECEMBER 1988: MIHRA elaborated and submitted a complete study on the establishment and fuction in Greece of a World Centre for Homoeopathic Medicine (INCEHOM).



FEBRUARY 1988: MIHRA is represented in the Homoeopathic Committee of the Ministry of Health, Welfare and Social Insurance. The Committee is entrusted with the task to submit to the government proposals on the conditions and the prerequisites for the practice of Homoeopathy in Greece. The representative of MIHRA was elected as Secretary to the Committee.

### OTHER ACTIVITIES IN THE INTERNATIONAL AREA

DECEMBER 1985: MIHRA introduces Homoeopathy for the first time in Cyprus.

JANUARY 1986: MIHRA participated in the exhibition of Alternative Medicines that took place in Nicosia and Larnaka, Cyprus.

JUNE 1986: MIHRA became affiliated with the Medicina Alternativa which is the greatest world organization on Complementary Medicines.

APRIL 1987: MIHRA became affiliated with the British Medical Holistic Association which is the largest organization for Holistic physicians in England. Members of MIHRA participated in seminars in Amsterdam concerning the application of the HLB Haematological test for the early detection of cancer. Members of MIHRA were trained in Kolonia on the practical application of MORA therapy.

### INTERNATIONAL COLLABORATIONS

MIHRA maintains scientific collaboration and exchanges with the following foundations, institutes and organizations abroad.

- International Homoeopathic Medical Organization
- Liga Medicorum Homoeopathica Internationalis
- International Institute for the Research on Cancer and Metabolic Diseases
- Progressief Meisch Centrum

- Collegio Medico Homoeopathic del Atlantico
- Homoeopathic Natural Clinic
- America Biologists
- Acumedic Centre
- Acupuncture Foundation of Ireland
- Sri Venkateswara University
- The Society of Bioenergetic Research
- The Association of Natural Medicine
- CIA-MAN
- Belgian Royal Homoeopathic Society
- The Institute of Psionic Medicine
- Academie Diplomatique de la Paix
- Institut fur Holistische Blutdaignostic
- Canadian College of Natural Healing
- Tyringahm Naturopahtic Clinic
- Stichting Vrije Universiteit Arnhem
- Institute for General and Family Medicine
- Association on Natural Medicines
- Wimbleton Clinic of Natural Medicine.

### **BIANNUAL PROGRAM 1989-1990**

MIHRA has programed for the years 1989-1990 the following activities:

**APRIL 1989:** In collaboration with the Medicina Alternativa MIHRA will organize the 16th World Congress on Complementary Medicines which will take place from 26-30th of April, in Athens.

**SEPTEMBER 1989:** In collaboration with the International Institute for the Study of Metabolic Diseases and Cancer MIHRA will organise the 2nd International Symposium on Holistic Therapeutic Confrontation of Cancer. The symposium will take place in Cyprus.

**OCTOBER 1989:** In collaboration with the Pancypriot Medical Homoeopathic Society the 1st Greek-Cypriot Congress on Homoeopathic Medicine, in Athens

**NOVEMBER 1989:** The 2nd Week on Alternative Medicines, in Athens

MAY 1990: The 3d International Symposium on the Holistic Therapeutic Confrontation of Cancer, in Athens.

SEPTEMBER 1990: The 2nd Greek-Cypriot Congress on Homoeopathic Medicine with Pancyriot Medical Homoeopathic Society.

OCTOBER 1990: The 3d Week on Alternative Medicines, in Athens.

## INTERNATIONAL CENTRE FOR HOMOEOPATHIC MEDICINE

MIHRA is planning the establishment in Greece of the "International Centre for Homoeopathic Medicine" INCEHOM, a meeting place for Homoeopaths from all over the world.. Its facilities will enable it to host a great variety of activities and programs, ranging from congresses, seminars and lectures to studies and research programs. The main building of the establishment will include congress and conference hall, auditorium with a capacity of 600 persons, library, laboratory and offices. Traditional apartments around the main building will host the participants and their families. Reacration facilities will be available. In the centre will also be included an area for organic agriculture and experimental laboratory for the preparation of homoeopathic medicines.

## SCIENTIFIC PUBLICATIONS OF MIHRA

Published:

Prof. S. Diamantidis M.D: "Homoeopathic Medicine: Theory, Methodology and Applications" in Greek and English.

Prof. S. Diamantidis M.D: "Homoeopathic Philosophy and Hippocratic Medicine" in Greek and English.

Prof. S. Diamantidis M.D: "Biofeedback" Greek and English.

To be published soon:

Prof. S. Diamantidis M.D:

1. "Homoeopathic Pharmacognosy."
2. "The Nature of the Human Mind."
3. "Lectures on Homoeopathic Philosophy."
4. "Homoeopathic Medicine: Clinical Cases."

Dr. A. Othonos M.D: "Behavioral Patterns and Disease."

Dr. H. Hatzikostas M.D: "The Homoeopathic Treatment of Peptic Ulcer."

Dr. P. Drossou M.D: "The Triadic Hypostasis of the Human Being - The Homoeopathic Point of View."

Dr. G. Katsonis M.D: "Homoeopathic Treatment of Psychiatric Cases."

The writers, members of MIHRA, provide free their books to the other members of MIHRA



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