

Do Homoeopaths use Cortisone?

INTRODUCTION: This question is raised often and again in Homoeopathy. We thought it would be useful for references to ask Dr Patwardhan for her article which appeared in the Sunday Observer.

Do homoeopaths use cortisone, a steroid? This question is often posed by some patients during the course of a consultation. The answer is a definite 'No'. Homoeopaths of integrity and commitment to their profession do not use cortisone and in fact have no need to. Their Materia Medica is very rich in remedies with a vast range of curative effects. I am an allopath who turned to homoeopathy after experiencing a personal cure for a minor but irritating ailment which allopathy was unable to cure. I then studied Homoeopathy and have been in homeopathic practice for the last 15 years. My only regret is that I did not study it earlier. Homoeopathy is a wonderful system of therapeutics and no one who has seriously studied it has ever doubted

its efficacy. Then why are people having doubts about the medicines being adulterated with cortisone?

When I posed this question to my patients who voiced their doubts, they said that either they or some friend had the medicines given by their doctors tested (in most cases very reputable doctors) and they tested positive for cortisone.

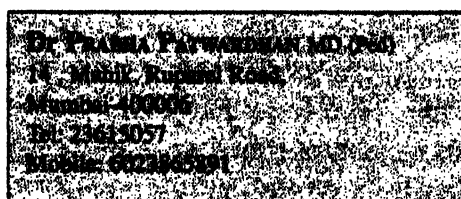
I try to reason with them with the following arguments:

1. If one has been on long term cortisone, one would show some side effects like Moon facies, weight gain, excessive body hair, osteoporosis, diabetes etc.
2. Cortisone is not a cure all for all the ills of the world.
3. Homoeopathic remedies have a very wide range of curative properties.
4. Using steroid would in fact be counter-productive as they would have a suppressive effect.

In view of this why should any Homoeopath resort to using cortisone?

Recently I had an occasion to test these allegations.

One of my old patients who had changed to another homoeopath nearer her home, telephoned me frantically to say that she had had her medicines checked and they tested positive for steroids. I decided to send some of my medicines to be tested at the same place.



The medicines sent were:

- I. Unmedicated Pills.
- II. *Cina* 1M.
- III. *Belladonna* 30.
- IV. *Sulphur* 30.

All these medicines were sent in a base of a small amount of lactose (Milk Sugar)

A report the following week, said, all of them tested positive for steroids

I asked them to carry out the same test on plain lactose. This also tested positive for steroids. It was now obvious that all these medicines were giving a false positive test for steroids. (Cortisone is a steroid)

The test used was the 'Colorimetric method using tetrazolium blue salts'. In this test, the reaction depends upon the reduction of tetrazolium blue salt to give a highly coloured compound known as farmazan. Under controlled conditions the amount of farmazan developed is proportional to the quantity of steroid or any reducing sugars present in the material being tested.

In fact for some years, tetrazolium salts have been used for determination of reducing sugars. So if the drug contains any lactose, it will impart a strong colour with tetrazolium blue salt which will give a false impression of the presence of steroid. Secondly, if the alcohol used in this method is not completely free from aldehyde, it will interfere with the reaction and will impart some characteristic colour in the reaction and will impart some characteristic colour in the reaction, which may again give a false positive impression of steroid. So this method is not advisable to determine the presence of steroids in the drug.

Most homoeopaths use lactose as a base for holding the pills containing the homoeopathic remedy together in the powders. The pills themselves are made of cane sugar, a reducing sugar. Moreover almost all homoeopathic remedies have alcohol as a diluent. One can see how homoeopathic remedies, either as pills, powders or in alcohol, are likely to give a false positive test for steroids if this method is used.

Other methods utilized to test for steroids are:

1. Liherman buchard test.
2. Thin layer chromatography method.
3. UV absorption method.

THE UV ABSORPTION METHOD

Almost all steroids show UV absorption method between 235 to 240 NM in dehydrated alcohol or methanol in a clear solution. A complete spectrum of this solution is taken in the range 400 NM to 220 NM on a suitable spectrophotometer.

If any steroid (Cortisone) is present it will show maxima at 240 NM.

None of the four samples showed maxima between 230 to 250 NM showing absence of steroids.

The same samples when adulterated with a steroid showed maxima at 235 NM, showing absence of a steroid. (The steroid added was clobetasone-17 butyrate which has maxima at 235 NM).

Figures I and II show the spectrum for *Sulphur* 30 and *Sulphur* 30 adulterated with a steroid, respectively. Figure I does not show maxima between 230 to 250 NM, showing an absence of steroids. Figure II shows maxima at 235 NM, showing the presence of a steroid.

CONCLUSION:

Before accepting a claim that the tested medicine does contain a steroid, one must find out what testing procedures were used to eliminate a possibility of a false positive result. The recommended tests TLC and UV absorption method should ideally be carried out at any of the public testing laboratories listed by FDA (Food and Drug Authority). If tests conclusively prove that the medicine given is indeed a steroid, under the guise of a homoeopathic remedy, then one must confront the doctor and seek an explanation, or complain to the homoeopathic council so that disciplinary action can be taken against the erring doctor. Unsubstantiated allegations against any doctor are most unfair and damaging to his most cherished, professional integrity and indeed to the profession.

Dear Students Of Homoeopathy,

I know, that you are very eager to know and read new ideas, concepts, theories, inventions and many journals & books published every day in Homoeopathy.

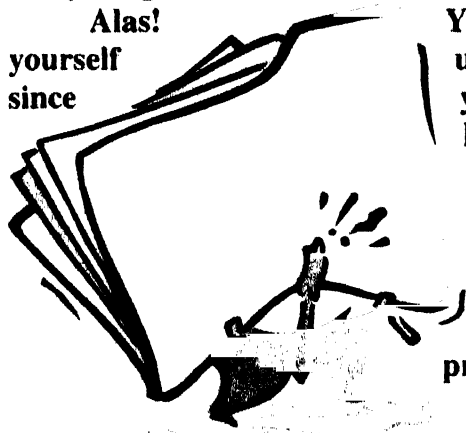


You are always baffled not only with issues like simultaneous use of mother tinctures, biochemics, flower remedies, polypharmacy, allopathy, surgery, ayurveda, but also about uses of potency and doses in the treatment of emergency cases or in terminally ill patients.

At times, you are shocked on hearing stories of successful astonishing cures achieved by leading practitioners of homoeopathy in India & abroad. And you are very eager to know their secrets of success. You want to learn everything, absolutely

everything BUT--

Alas!
yourself
since



You are buried, not only buried but also literally killed under the burden of all these heavy theoretical works your college days, plus your personal, family and social liabilities. So, some of you won't find enough time to read all these medical literatures and still don't want to miss important and interesting facts published in these literatures of homoeopathy.

Many of you are confused and frustrated and have no confidence in practicing homoeopathy due to lack of proper clinical training and lack of personal clinical experience. This fear about homoeopathy, lack of confidence and confusion with inferiority complex in you makes it difficult for you to use simple remedies even in simple day-to-day illnesses of your family members & friends.



But, now, don't be disappointed; we are here to help you. Just start reading "HOMOEOPATHIC CLINICAL CASE RECORDER", a magazine that is published since last 10 years under the able editorship of our beloved teacher Dr. D. E. DISTRY of Solapur, an expert surgeon turned homoeopath, with 40 years of his clinical experience in homoeopathy. Now update your knowledge and skills of

homoeopathic practice by reading essential important details in a nutshell published in this journal. Exchange your clinical experiences with a fellow homoeopath. Start confidently practicing homoeopathy from the day one of the beginning of your career. Send Rs.100/- yearly subscription for this six monthly publication on the following address. Next issue will be published on 10th April 2004.

*****Yours in Homoeopathy- Dr. Subhash Meher*****

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