

MODERN TRENDS IN HOMOEOPATHY

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It is said - if you were to read the Homoeopathic Materia Medica, it would start with confusion and end in vertigo; but watching the current trends in Homoeopathy especially with regard to the young budding doctors., they start with vertigo and end in a faint (of late Homoeopathy is catching on many SCIENTIFIC MINDS) 20-30 yrs ago there were many a hobby practitioners, (of course these are many more now) and those that joined the Homeopathic colleges did so out of compulsion for bread & butter or to seek some means of living rather than a conviction about the Homeopathic Science. Today,

it is heartening to see that students with good percentage of marks and from affluent families are studying in Homeopathic Institutions, and even as they graduate they are experimenting with new ideas and concepts. Simultaneously the world over, practitioners of this system are trying to make it more scientific, and in a way which is acceptable to the practitioners of conventional Medicines (so called Modern Medicine). New theories, concepts, innovative methods of prescribing and different ways of interpreting the various Laws of Homoeopathy (Organon & Materia Medica) are being put for-

ward. Some of the work done is really appreciable [But I doubt the stretching of the things is beyond the breaking point].

Being a Teacher, Principal, Director of many Institutions, and in active practice for the last 25 yrs with a strong conviction in Classical Homeopathy, I put forward some of my apprehensions to the fraternity to think, ponder and meditate on these issues.

1. Drugs prescribed only on the basic of Mental symptoms.
2. Delusions, its interpretations and its uses in prescribing..
3. Prescribing - Double salts.

4. Grouping of drugs like Sodium, Potassium, Calcium etc. groups.
5. Music proving and music therapy
6. Prescribing only low potencies.

Let us see each one in detail

1 Mental symptoms

a) Homeopaths are already confused with the totality of symptoms, finding out peculiar, rare, queer, strange, concomitant redline symptoms etc., along with this, new nomenclatures are being introduced like "Situational Materia Medica, Clinical Materia Medica etc.,etc." Which has enhanced the confusion.. Doctor Kent's evaluation of symptoms has really given a new turn and boost to Homeopathy which has extended the scope of the system. He divided the total symptoms into Mental symptoms, Physical generals and particulars. Under each category he further divided into first, second and third grade symptoms depending on their importance, which is very apt and explains accurately the concept of mind over body, the centre to circumference, the most important to less important. Most of us do agree (those who practise Classical Homeopathy) the patients with gross structural changes have been helped by giving importance to mental & physical generals.

b) Dr. Kent goes to the extent of saying if there are strong mental symptoms and the drug selected on these symptoms does not

cover the physical generals or the particulars will nevertheless cure the case, I fully agree with this. Till now, it is fine, but let us see what exactly happens at the consultation table. Does the patient really present a correct mental picture? Many of us do not present the same mental picture in different interrogation. Most of us put on a facade, one for ourselves and one for the external world, be it with our spouse or friends, we do not present our true picture. The mental picture studied during the first consultation may be a fallacy. **SHOULD WE HAVE OUR RESERVATIONS IN ACCEPTING THIS MENTAL STATE IN TOTO?** More often than not, the patient modifies his mental symptoms during his second visit or he may give an entirely different picture altogether.

c) I have observed that the mental picture is greatly modified by his physical symptoms as well as his financial conditions. After getting some relief in his physical complaints with the first prescription (whether curative or palliative) his mental symptoms are changed.. Some times there can be an entirely different set of symptoms. It is probably for this very reason Dr. Boeninghausen did not give a superior place to the mental symptoms over the physical generals because we are not very sure of the mental picture of the patients and we have to blindly believe them.

d) Many of the mental

symptoms can be handled, rather overcome by strong and powerful counselling which can be observed on subsequent visits where-in we can see plenty of changes in the mental state/symptoms. (this is my personal experience in practice)

e) The mental symptoms also depend upon the state of mind at that particular moment. Delving deep into the mental sphere and its interpretation is feasible only if the person is intelligent enough to recall and elucidate all the past and present it in the right manner. Moreover, the persons up bringing must be in a conducive atmosphere where-in he is capable of expressing his emotions freely, which is only possible in western countries and in very few families in India. 90% of the children or adults are not allowed to express their feelings, and denied any emotional freedom. Their whole life is aimed at making two ends meet. In such case how can we expect to get a true picture? We could possibly have only one symptom that is "emotions suppressed".

f) Most of the marriages in India are arranged & finalised by the parents where there is no question of love. Generally people have marriage - love rather than love-marriage. The general tendency in Indian people is that they are more causal than responsible in life, even at their work place they don't take things seriously or strive for excellence. They only work under compulsion or for the

fear of losing their job. There is hardly anything to struggle for while things move at their own pace. Let us be more practical, down to earth and not get carried away by what we hear or see and perceive things in their true perspective. Let's take our students/younger generation into an imaginary world of fantasy.

2. Delusions and Dreams

Interpreting dreams and delusion in different manner which is not palatable to most of the practitioners, was started by Dr. Sehgal in the name of "Revolutionised The way these symptoms are being interpreted, understood or explained, I doubt whether Dr. Hahnemann, Dr. Kent and the others would have thought of. Of course, I do agree the rubrics of Delusions are hardly used or properly understood. The new interpretation of Mental Symptoms and Delusions is good rather wonderful, if it is correct.

There is need to go into depth of information of many drugs which have been just mentioned in our Materia Medica vaguely. More information, detailed study, more insight into the drugs is desired. But, the way symptoms are being interpreted, I fear, whether the provers really felt them or were they dealing with the mentals and while going in the dynamic plane. Are we not overstretching the symptoms with our own imagination, like animated fantasy films ??

3. Double Salts and Mixed Salts.

Of late, the use of double salts has increased which is a good sign. Earlier, their use was ignored and if they are properly used they can be of immense help. John Scholten has done a good work. But, the trend I see is if a patient is presenting a combined symptoms of Aluminium and Silica, the medicine prescribed is *Aluminiumsilicata*. If the patient has some symptoms of Aurum and few symptoms of Iodum, then *Aurumiod* is prescribed. Is it Correct ? If a patient presents mixed symptoms of Puls and Lyco, can we prescribe *Puls-Lycopodatus* ?

This type of Analogy was followed by Dr. Kent in later part of his life. I don't know how many cases he has cured or whether he prescribed drugs on such basis. He definitely tried to build up the *Materia Medica* of these Double Salts. He combined the symptoms of both drugs keeping in view the Physical and Chemical properties of their individual components and their Ionic behaviour etc. He had put a theory for the coming generation to work out or improve it and correct it. I still, appreciate his spirits that all the Double salts which he find in our *Materia Medica* and Lesser Writings. He has not added them in his Repertory and if at all we find one or two insertions, those symptoms have been confirmed by others. He wanted us to go in depth to reprove and confirm the symptoms and then add to the Repertory. Let's

study these double salts e.g. : 1) *CALC IOD* : The dominant character of Calc Carb of being Easily scared, Nervousness, Sluggishness, Obesity, Structural changes in heart, Extremely chilly patient, Tendency for Tumours, cysts etc. [Sycotic Miasm]. All of these may not be present but they will be modified by ionic characters of iodine. The patient may be a hot patient with extreme flushes of heat, increased appetite, Emaciation [Syphilitic Characters]. Tubercular constitution, of course combine symptoms of both Nervousness and cardiac damage may be present. If we prove Calc Iod as a new drug, you may find an entirely new set of symptoms which may not be found either in Calc or in Iodine.

2] *Aurum Ars* : Most of the symptoms are built upon combining the anxiety of Arsenic and Depression of Aurum. Here, we are failing to understand that apart from strong anxiety and worry in Arsenic, we also have a strong depression state.

3] *Aurum Mur Natronatum*: this remedy is prescribed on the basis of depression with suppressed emotion. If such prescription have worked and the patients have been benefited it can be a lucky hit or there may be some hidden peculiar symptoms belonging to double salts. I HAVE MY OWN RESERVATIONS IN ACCEPTING THIS - 'When a combination state is seen and each of two states can be confirmed from the Rubrics and *Materia Medica*, the double

salt covering both states will act effectively". This can be a hypothesis. While trying to build up *Materia Medica* of Double Salts you may use more analytical approach by keeping in view their physical, chemical properties and their ionic structure, but we are forgetting that any salt or any substance for that matter is raised to a certain dynamic level the entire properties of the substances changes and it presents a totally different pictures (which are not found in the proving of the drug). And some of the symptoms which are found in the proving of a particular drug do not have any relationship to the individual components of the drugs or its physical and chemical properties.

In this context, I would draw the attention of the readers to the following interesting example. Dr. Hahnemann proved Sulphur and gave a wonderful picture of this most used polycrest, he also gave us Calc Carb another equally important polycrest remedy by which the practitioners are doing well. At the same time, he mixed both of them (chemically) and gave us another important polycrest remedy which no practitioners can practice without it, HEPAR SULPH.

The chemical composition of Hepar Sulph is Calcarea Sulph, which is one of the salts in Schussler's Twelve Tissue Remedies. This salt is least used. Though the chemical form of Calcarea Sulph and Hepar Sulph

are same, Hepar Sulph is commonly used. Probably Hepar Sulph effects are much better than Calcarea Sulph. May be the way in which Hepar Sulph was prepared by Dr. Hahnemann, by burning Sulphur with the oyster shells along with its impurities made it more potent than the pure Calcarea Sulph. Hence, it is very important in Homoeopathy whatever symptoms of each drug we have or we get has its relevance to its preparation especially prepared by the first introducer of the drug. The symptoms are proportionate to the way it is prepared rather than its chemical purity or chemical form.

The symptoms of Hepar Sulph when compared to Sulphur and Calcarea Carb are quite different. Hepar Sulph has its own identity and it's not a mixture of symptoms of Calcarea Carb and Sulphur. I hope every one endorses this.

Hence, I feel these double salts should be proved separately rather than in prescribing them on the combined symptoms. A chemical salt is entirely a new product when compared to the elements. Here, we should understand the single chemistry that, the two elements are not mixed but they chemically react. It is not a physical change but it is a chemical change.

4) Grouping of Drugs:

Some schools teach the *Materia medica* in the form of

groups like Calcium group, Natrum group, and their associated salts. It is a very good way to study the *Materia Medica*, to understand the drugs scientifically. Even Dr. Farrington's *Materia Medica* is classified in the families & groups like animal kingdom, Plant Kingdom Hallogance, Aurum Salts etc. were he discusses the general symptoms of the family/group, followed by individual salts/species.

Of late the impact of the study of *Materia Medica* in the form of Sodium, Magnesium groups is not very encouraging. The minds of the students have been tuned in such a way that whenever a patient comes, they just try to fix the Homoeopathy". In this, the prescriptions are made only on mental symptoms and specially the way in which the patient express the condition. No other physical symptoms, generals, or particulars are taken into account. When a patient expresses a symptom, it is interpreted only according to Kent and Synthetic Repertory under Main Rubric-Mind especially, Delusions and some symptoms are referred under Dreams and cures have been claimed. This means that we need not examine a patient at all or take any other symptoms but just prescribe on Mentals/Dreams/Delusions as interpreted by Dr. Sehgal. The same thing has been further utilised by Dr. Rajan Shankaran substituting 'Delusions' for 'Dreams'.

For E.g. : If a patient ex-

presses 'I am scared of my problem getting worse', it is interpreted as "Fear, Extravagance of". So also, if the patient had some problem earlier which was trivial at that time for which he took no medication and now the problem has increased and is causing him concern then, it is interpreted as "Indifference" and "Fear, Extravagance of", for which Opium was prescribed and it gave them relief, as said and written. In another case, where a patient has pain and wants somebody to press the part, and patient cries with pain, that is interpreted as "Shrieking for aid" and "Weeping with pains", and the drug is Platina. And if the patient says "I am scared that my disease may come back", this is interpreted as "Fear, betrayed being" and Hyosyamus is given with which the patient got relief. "Fear of being kidnapped" is interpreted as "Delusion, she is about to receive injury".

In a case presented by Dr. Rajan Shankaran, he mentions a symptom in a child of 6 yrs as "Clinging to parents", which is interpreted as "Delusion, that he is alone". Don't we find this as a common symptom in most of the children? If the same symptom is present in grown up or in a child of about 10-12 yrs and above, Yes we can interpret. Some author writes in Links magazine, slowness of movement, speaking, thinking and answering in Anacardium has been interpreted as manifestation of plug in their ears, eyes etc. In Materia Medica

of Anacardium we find plug like sensation in rectum, throat, in nose etc. The crusts in the nose can give a feeling of plug. The inflammation and pain in the throat can give rise to such sensation, the hard constipated stools in the rectum can give rise to this sensation. Actually, the slowness of movement, thinking, speaking, is due to the brain fag, confusion or his split personality, which doesn't allow him to respond immediately. The symptom eating > has been interpreted as "Desire, to serve food" [This was never seen in the provings] Where as in Iodum/Psorinum there is greater amount of amelioration by eating, there is strong desire to eat even after eating. Can we extend this symptom here also as "Desire, to serve food".

As far as dreams are concerned unless they are repeated they have no relevance in prescription. The dreams which come only once or twice do not portray the inner suppressed feelings. If the suppressed feelings have to be expressed in the dreams, they have to be repeated quite often. We quite often see where a sexual desire is suppressed or not met with completely, they see dreams of snakes. Those who desire to go for higher studies and couldn't complete their studies or those who don't get their due promotions or who couldn't pursue their career often complain of "Dreams as if they are about to catch a bus and they miss it" or "They are writing the exam and the time is not sufficient enough to complete". This can be referred in

Kent's Rep "Dreams, unsuccessful events of".

Patient into one group or the other and try to prescribe the corresponding salts from that group. This clearly shows that the physician is highly prejudiced which is contradictory to basics of Homoeopathy - "Unprejudiced Observer". They are trying to mechanise the prescription by first fixing him in some group and further depending upon the symptoms, the corresponding salt. According to this school, the constitutional from metal, vegetable kingdom has very little importance or it used mainly as acute remedies. For E.g. :- Let's say there is a case of Lumbar Spondylosis with degenerative changes. He is grouped under Calcium group as the disease is predominantly of the bones and according to the symptoms given, the remedy is selected under that group. In a similar way, try to fix a patient in kali group and then prescribe the remedies from 5 Kali salts.

5) Music Proving

It was something of a surprise to come across music proving. If each Classical Rag is grouped and prescribed in different potencies, we can probably also prove M.F. Hussain's paintings. The classical Indian Music is so scientific and has so much depth that we could expend our entire life trying to understand and appreciate its effects. Each Rag has a particular time and a name depend-

ing on its effect. Each season has a specific Rag. To understand classical music first and foremost you must have an ear for it, secondly it is not like pop music where there is a catchy beat and hysterical dance. The NAVARAS (the nine emotions of individual like HASYA, KRODH, BHEBHATSYA, KARUNA, SOMYA, LAJJA, AHANKAR, UDVEK AND SHANT) accordingly have various ragas and effect distinctively on individuals. When you play them, any person with little sensitivity and knowledge of music will feel its effects. This thing cannot be taken as proving of that particular rag (it is just like salt tasting salty and sour things making mouth sourish). When a man is depressed and he listens to the Pahadi rag (tune of mountains) he feels momentarily delighted during that period, why pahadi rag alone, for that reason any rag/tune that he is fond of will change his moods. This is the very basic nature of music. Music therapy is a different entity altogether, let us not mingle with Homoeopathy, like many homoeopaths are mixing Magnetotherapy, gem therapy etc. Let us allow the Classical Homoeopathy to progress in a Classical way, all others can be used as auxiliary methods.

6) Prescribing low potencies.

One important factor which I have seen in common among all these so called new methods, is prescribing only low potencies and the highest potency ever prescribed is 1M. The concept or the idea to start every case with a 30 potency is a wrong notion prevalent among the Homoeopaths. There are various factors which decide the selection of potency like acuteness of symptoms, pathological changes, sensitivity of the patient, build up etc. Dr. Hahnemann prescribed up to 200 potency and in later part of his life he started using 50 millimal potencies where the attenuation is very high. Drs. like Kent., Lippe, Nash, Swan etc., have done wonders with high potencies like CM, MM, DM etc., let's recollect Dr. Kent's life when he got converted to Homoeopathy and starting practising, he used to prescribe very low potencies. In a case of Diarrhoea, where the child was in a grave condition, he thought any how the child is not going to survive so let me try 200 potency of the indicated potency and to his surprise that worked wonderfully well and the child was saved. He realised - yes the higher potencies do act in a much better way. In other case he prescribes 1M

potency, the patient is not relieved and the patient goes to various doctors without much relief and comes back to Dr. Kent after few years and the same remedy in a very high potency relieves him. Dr. Kent quotes 'Earlier I was a low potency prescriber so I could not help him and could help him later on with a high potency as I realised the efficacy of high potency. It is not only in western countries but a majority prescribers in India are low potency prescribers. Are we not failing to realise that higher potencies have a broader field of action, more depth and a larger action, which could also build up the vitality and immune system. Have we forgotten the Ocatave of potencies, do we refuse to realise that what lower potencies cannot cure higher potencies can and vice versa. The miasmas are being transmitted to children and in the process they are getting potentized and their manifestations becoming stronger. Let us remember that day by day the miasmas are modifying themselves, manifesting more strongly,, we need to combat them with high and higher potencies or to say on a stronger and higher plane. Are we trying to build the Art and restrict it in the frame of low potencies ?

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