

# We need repetition of HPTs

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It is with a mix of surprise and pleasure that I respond to Sherr and Quirk's criticism of my editorial.<sup>1</sup> The pleasure is at having the possibility to discuss provings, or HPTs, with expert and passionate interlocutors with whom I share an interest in proving and some opinions. My surprise is at seeing such a different interpretation of some other points and even some misunderstandings. I will pass over the first three points, which are dealt with by the authors of the systematic review.<sup>2</sup> But I am concerned by the rest of the letter.

I disagree that scepticism is not grounded in homeopathic experience. Hahnemann was a sceptical, rigorous and critical investigator, who did not trust contemporary science, did not accept the groundless assertions of his colleagues (Organon, para.1, footnote) and did not rely on materials of doubtful origin (para. 264-268).<sup>1,3</sup> Without this scepticism, rigor and critical mind probably homeopathy would not have been born, and the foundation of a Pure Materia Medica would not have begun. His efforts were directed to give new rigor to medical science, to build a Pure Materia Medica with facts, and not speculation, based on the real actions of the drugs in the healthy, not the sick. Many other authors followed him on the necessity of reliability of symptoms; distinguishing the help we have from clinical experience, from the duty to repeat provings.

It seems that Sherr and Quirk forget some parts of Hahnemann's guidelines for instance, they do not encourage the repetition of provings, while Hahnemann's recommendations were exactly the opposite: to repeat provings until the symptoms are almost always the same (para. 135).

I'm not so severe in judging historical provings as authors of the review, but I agree with them about the need of "reliable information from HPTs, to get better results in our clinical practice and research". In our HPT of *Plumbum* 30cH we confirmed a lot of Hartlaub and Trinks' symptoms, but we gave more importance to skin symptoms, to anxiety and to hyperactivity, symptoms practically neglected in almost all Materia

Medicas, the two last present in both provings.<sup>4</sup> These symptoms were verified by two of us in clinical practice in at least six patients in the last two years, providing *Plumbum metallicum* with some indications for which it is normally forgotten or unknown.

How many HPTs are needed to get complete and reliable symptoms? It depends, but in my opinion two is the minimal requirement. We should raise the standards of our research and the quality of our information. If a proving is 'a suggestion for a remedy', and often a partial suggestion, we are looking for the clear knowledge of the healing power of the medicines (para. 3) and for this we need to know the totality of the pathogenetic symptoms, as much as possible.

Finally, when I wrote "toxins should be the first choice" to use in HPTs, I did not mean to use 'low potency of solely toxic substances' as Sherr and Quirk assume. I do not doubt that inert substances may make great homeopathic remedies, but the use of highly diluted toxins in HPTs instead of inert substances allows us to compare known actions of active compounds with the actions of their correspondent dilution, to better understand homeopathic phenomena. And it is beyond doubt that better comprehension and lesser interpretation of the curative action gives better opportunities to cure the sick.

## References

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- 4 Signorini A, Lubrano A, Manuele G, et al. Classical and new proving methodology: provings of *Plumbum metallicum* and *Piper methysticum* and comparison with a classical proving of *Plumbum metallicum*. *Homp* 2005;**94**: 164-174.

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