

RICHARD HUGHES MEMORIAL LECTURE 2004

Homeopathy, wholeness and healing

J Swayne^{1,*}

¹*Faculty of Homeopathy, Hahnemann House, 29 Park Street West, Luton LU1 3BE, UK*

Keywords: Homeopathy; Wholeness; Healing

Introduction

This paper explores questions and ideas that have been central to my work as a doctor, though constantly evolving, for 37 years. They concern medicine and healing, and the understanding of human nature in its wholeness; a wholeness that is truly holistic, in that it concerns a whole greater than the sum of its parts. They reflect the contribution that the study and practice of homeopathy have made to their evolution; and not least the influence of people I have met in the process, practitioners and teachers, but also the patients who have trusted me with the intimate details of their lives. I will describe briefly my perspective, explain what I mean by healing and wholeness, and suggest how medicine needs to change if it is to be a true servant of healing. I will show how homeopathy has informed my thinking, and how it exemplifies some of the principles that I have come to be guided by.

This is not an academic dissertation so much as a personal view. Some of the principles I shall discuss will be familiar, and I hope that most of what I say will bear some relationship to your own experience. Some of it may be new to you. Some may be controversial. Some of the issues I shall raise are big and difficult and would require a seminar of their own to do them justice. Because of the need to be brief, my treatment of them will inevitably be inadequate, and may seem dogmatic. For these reasons, I want to begin with a quotation and a disclaimer.

The quotation is from EF Schumacher's book 'A Guide for the Perplexed'. '(our) maps ofknowledge....show (only) things that allegedly (can) be proved to exist. The.... principle (seems) to be 'if in doubt, leave it out'... . It occurred to me, however, that the question of what constitutes proof was a very subtle and difficult one. Would it not be wiser to turn

the principle into its opposite and say, 'If in doubt, show it prominently'? After all, matters that are beyond doubt are, in a sense, dead; they do not constitute a challenge to the living. To accept anything as true means to incur the risk of error. If I limit myself to knowledge that I consider true beyond doubt, I minimise the risk of error but I maximise, at the same time, the risk of missing out on what may be the subtlest, most important and most rewarding thing in life.' He quotes St Thomas Aquinas, 'the slenderest knowledge that may be obtained of the highest things is more desirable than the most certain knowledge obtained of lesser things'.¹

That is an important message for us who practise the implausible art and science of homeopathy. And it nicely justifies my disclaimer, which is that I can claim no certainty for anything I am talking about. I do not know how homeopathy 'works'. I know that patients get better, but I do not know what part is played by the homeopathic medicine, the consultation, the therapeutic encounter as a whole, or my personal attributes. Similarly I have no certainty about what constitutes human nature in all its amazing subtlety, nor what determines the course of illness and healing in any individual. Although I have confidence in many of the principles by which I practise, I do not claim certainty for any of them. My justification is the belief that we have to explore constantly and courageously the penumbra of uncertainty that surrounds our presumed and precarious certainties, in pursuit of that 'slenderest knowledge that may be obtained of the highest things'.

A personal perspective

There are two fixed points that help to define my perspective. The first is the absolute value and importance of the flesh and blood nature of the creatures that we are, and for whom we care. I believe strongly that a doctor must remain closely in touch with the wonder of his or her patient's body. However

*Correspondence: Jeremy Swayne, 16 Folly Drive, Ditcheat, Shepton Mallet, Somerset, BA4 6QH, UK.
E-mail: jem.swayne@btinternet.com

sick, damaged or distorted it may be, it is the unique vehicle of a unique individual of unique value. Where possible we should literally be 'in touch' with our patients, whether in a respectful and sensitive physical examination, or by the simple contact of a handshake or a hand on the shoulder. Our patients' bodies should be an object of worship—of 'worth-ship'—and our dealings with them a reflection of our sense of that worth.

My ordination as a priest 5 years ago, represents that aspect of our lives which for me ultimately defines the whole which is greater than the sum of our parts; that bigger picture of which each one of us is a uniquely important, valued and loved part; which according to our various understandings we call God. And it represents my belief and my faith that God is an active source of healing, if we seek it and cooperate with it.

General principles of healing

So, what is 'healing'? The essential characteristic of healing is that it is creative, and not just remedial. There are some general principles that govern the healing process as I understand it. One of these is that it is fundamentally similar at whatever level it operates. For example, all healing involves, in some fashion, the following elements—understanding the problem, providing the conditions conducive to healing, mobilising resources to effect healing, new growth, and reconciliation. The second principle is that healing cannot be achieved without suffering. The third, that it involves us in changing attitudes and new responsibilities.

Wound healing is a simple, physiological example of the first principle: It requires that our body 'understands' what has happened; that it recognises and responds to the stimulus of trauma. It requires conditions conducive to healing—that the wound edges are brought together, the wound kept clean, and so on. It requires that the physiological resources of immunity to infection and tissue repair are effectively mobilised. There will be new tissue growth, which may even be stronger than the original tissue. And if the damage is sufficient, it will require 'reconciliation': adjustment to compensate for loss of function.

The second principle is the 'necessity' of suffering. Suffering is not only the consequence of illness and trauma, but inherent in the healing process. The most basic healing process in the body is the inflammatory reaction. What are its cardinal signs? Rubor, calor, tumor and dolor; redness, heat, swelling and pain. We do not enjoy the experience of inflammation, but we cannot do without it, and we are increasingly aware of the disadvantages of suppressing it.

The third common requirement is a change in attitudes and relationships. Any illness, injury or disability affects our relationships with others, through

the limitations it imposes on them or us, because of its possible implications for our future life and so on. Illness affects other people's responsibilities towards us, and ours towards them. The responsibility of others towards us, including the community's responsibility to its sick and disabled, is for compassion and care. The responsibility of the sick person, subject always to any absolute limitations, is to get well; because only when we are as fully ourselves as possible, can we fulfil our potential to contribute to the well-being of others. True healing is not a self-centred process. These essential characteristics of healing can be applied to all kinds of disorder that affect our physical or mental health, our relationships or our quality of life.

I want to suggest four other general principles of healing. The first is the apparent paradox that *illness is the agent of healing*. This is exemplified in the development of immunity. A child's exposure to infection is necessary to the development of a mature immune system. In other words, we need challenge, and the discomfort that challenge may produce. Mental and emotional illness, is often an essential prelude to the development of new psychological insights and strengths and the healing of old wounds. The breaking down is a necessary condition of rebuilding and new growth. In homeopathy the idea that illness is the agent of healing is exemplified in the idea that symptoms are the expression of the organism's response to disorder, its coping mechanism, rather than of its failure to cope.

Another general principle is that, *rather than suffering from an illness, we are often suffering from a 'wellness'*. The pain caused by a physical injury is the response of a healthy nervous system to trauma. The pain of rejection, abuse, the denial of love and of self-worth, is the healthy response of our wounded humanity. We suffer because we are denied some quality of life that is fundamental to the fulfilment of our unique potential as a person, and that we need; just as hunger is the response of a healthy body to lack of food. The experience of suffering affirms our unique personhood; just as an immune reaction to an organism or antigen, or implanted organ that is 'not self', affirms our unique physiological identity.

The next general principle is that *healing does not necessarily involve cure, and cure does not necessarily involve healing*. Indeed, the pursuit of cure may allow destructive influences that produced the disorder to persist. That is why homeopathy is so opposed to antipathic medicine, which suppresses the disease process and does nothing to address the real disorder.

Finally, *healing is a collaborative process*, involving the right use of a number of relationships, and involving the willingness, trust and cooperation of the people involved. Healing cannot be achieved in isolation, because 'no man is an island'. And it cannot be self-centred, because the healing process in one individual necessarily benefits others. Our personal wholeness is only valid in relation to other people's,

and in relation to the 'bigger picture' of which we are part.

The meaning of 'wholeness'

But what is this 'wholeness', the goal of the healing process?

It is the fulfilment, as far as possible, of the unique potential of each individual. It is the fulfilment of our unique vocation. It has to do with what Jung called 'individuation'. It has to do with integrity, both in the sense of structural integrity and of truthfulness. And it has to do with integration—the bringing together into a balanced and interactive whole of all our faculties, attributes and characteristics, physical, emotional and intellectual, psychic and spiritual. I particularly like the mutation of the concept of integrated medicine into integrative medicine; medicine which promotes the integration of the individual, and which at the same time promotes the integration of those involved in the care of the individual into a compassionate and effective community of care.² And that should also be, I suggest, integrative of the individual in his or her relationship with others. As all this implies, wholeness does not mean perfection. Indeed the pursuit of perfection may perhaps only be achieved at the cost of our true humanity, our capacity for wholeness. The wonderful thing about becoming a whole, well-integrated person is that flaws and imperfections, the disordered and ugly parts, are transcended by the value of the whole.

These propositions beg many questions. For example, why do I associate vocation with wholeness and healing? And how do they apply to the life of someone seriously disabled mentally and/or physically? Someone whose fixed limitations are severe? The answer to the first question may help us to answer the second, very difficult question. Just as our bodies have an instinct towards homeostasis, self-regulation and self-healing, so, I believe, we as persons have an instinct towards self-fulfilment; firstly as unique individuals, and secondly as individuals with a unique place in the scheme of things; in the bigger picture of which we are a part, to which we belong, and which gives us our unique value. We have an instinct for wholeness which is inseparable from our sense of vocation, which is not restricted to certain careers or professions, but which is, I believe, an instinct that we all possess to be fully ourselves, however hidden that instinct may be.

A simple analogy for this is to liken this search for wholeness in our lives to doing a jig-saw puzzle. The trouble is that, unlike most jig-saw puzzles, we do not have a picture on the lid to tell us what we should be. What we do have is a set of pictures provided by others—our parents, our peers, our teachers, our society and culture, our religion perhaps. These may be seductive, persuasive or simply taken for granted, but the chances are that they will be at least in some

respects wrong and sometimes completely wrong. In addition, amongst the pieces in the box that do belong to our true picture there will be other pieces that do not. These will be both positive and negative attributes or aspirations, put there by the circumstances of our life, or by other people. And ironically, sometimes tragically, even those positive attributes that earn us admiration and success may distort the true picture. As we live our lives and build our jig-saw, it is inevitable that in the attempt to build one or other of the misleading pictures, and using the pieces which do not belong, the puzzle becomes distorted and may even break up because of the stresses induced by the misplaced pieces.

The only guide we have as to what the picture should be is the instinct to wholeness, the vocation to be uniquely ourselves. This instinct is actually inviolable; it never dies. It belongs to that part of our being that I call the soul. And if it is too severely denied by the life we live, whether by our own choice or by circumstances imposed upon us, the picture will break down. The disorder in our soul will be reflected in disorder of our body, or mind, or in our relationships and conduct towards others. If we are able or are helped to recognise what is happening, and to respond to it, the process of rebuilding—of understanding, reconciliation, new growth and new relationships, can begin. Thus illness becomes the agent of healing.

The jig-saw analogy illustrates another essential principle of wholeness. A Fred Basset cartoon shows Fred's master fretting over a jig-saw puzzle which he cannot complete because of one missing piece, a brown one, which he thinks he must have dropped on the floor. Lying on the floor under the table, Fred is saying, 'Yes. And I know where it is. I thought it was a biscuit'. The point here is that each one of us is part of a greater whole from which we derive value and meaning; the 'bigger picture' of which, like every single piece of the jig-saw, we are a unique and indispensable part. And remember that Fred's master's missing piece was a non-descript brown one. However non-descript we think we are or appear to others to be, we are all uniquely important and indispensable in the bigger picture. And within that picture relationship is the key. Each piece in the jig-saw is only valid in correct relationship to its neighbours as well as to the bigger picture as a whole. Jig-saw building is an integrative process.

But the other question I raised concerns those people so severely affected by disease, disability or adversity that any prospect of greater wholeness and self-fulfilment seems denied them. This is a question so big that no brief comment can do justice to it, but I offer the following observations. Each piece in a jig-saw in a sense helps to give meaning to the adjacent pieces. Similarly every person, however diminished or restricted in their personal attributes, gives meaning to the lives of others who are in relationship with them. These others may be family, friends, carers or fellow

and society, and the attitudes, expectations and relationships that we are exposed to. In the overlapping areas between are shown processes by which each dimension of our being interacts with another.

The one dimension of ourselves that we seldom discuss, and which many do not acknowledge, is the soul. I do not believe that medicine and the healing professions will ever be able to do full justice to people's need for healing and health care unless and until they recognise and understand the soul as the core of our being; and understand that illness can involve, and even arise in the soul. I have represented the soul as comprising psyche and spirit. The 'Soul' is a translation of the Greek word 'psyche'. The psyche exists on the interface between mind and spirit. It has been called 'the intermediate dimension'. It includes those attributes that are described as extrasensory or paranormal. It is, so to speak, the medium of the medium. But it is a normal aspect of the human condition. We all possess some psychic sensitivity and some psychic attributes, to a greater or lesser degree. It is, for example, what makes some people 'charismatic'. It is on this level of rapport, in addition to our empathy and compassion, that any of us may develop a healing relationship with another person, whether within a professional health care relationship or in everyday life.

We are all susceptible, to a greater or lesser degree, to psychic influences. The psyche is not bound by time or space. It helps to form and is formed by our personality. Both our own psychic attributes and extraneous psychic influences can affect our body functions and our personality. It is by the exercise of their psychic gifts, working initially through the psychic nature of the patient that some 'faith healers', more properly called psychic therapists operate. The psyche is the matrix of the soul, and interpenetrating that matrix is the spirit; the fragment of the divine nature that is in each of us. It is through the intermediate dimension of the psyche that prayer is effective in promoting healing, usually in the absence of any overt psychic gifts in those who pray. The structure of our personal wholeness, then, is the interactive, interpenetrating and interdependent relationship of body, mind and soul, infused by the spirit of God, in whom we have unique value in relation to one another and the 'bigger picture'.

Homeopathy, wholeness and healing

Homeopathy has been an invaluable tool to me for exploring the nature of healing and wholeness; both in its approach to the patient, and by what it reveals of the healing process. In addition to those characteristics of homeopathy that I have already alluded to, it has been illustrative and instructive in a number of ways.

Firstly, it is *an experience of wholeness* for both the patient and for the practitioner. A homeopathic

consultation may be the first time a patient has been encouraged to think of him or herself as a whole. The combining of local, general and psychological characteristics in the symptom picture of even a circumscribed ailment is an unusual experience. Patients become aware of themselves in a new way, which can be daunting but also liberating and affirming. It is an experience of wholeness for the practitioner, who if he or she is properly reflective, will be continuously growing both in self-awareness and in awareness of the infinite variety and wonder of human nature. The homeopathic consultation is indeed a 'whole making' experience.

Homeopathy is a true example of that nebulous entity, '*natural medicine*'. Its medicines are not all from natural sources, and their method of preparation can hardly be called natural. But the healing process they induce can truly be described as natural. We know that homeopathic medicines have none of the properties by which, in conventional medicine we control or manipulate body function. We cannot make the body or mind behave as we can with conventional drugs. We cannot control the healing process. We can only enable the process to proceed in its own way. Our body, our mind, our whole being has its own wisdom in these matters. Homeopathy can only encourage and assist, through the relationship we create and the medicines we use. The healing process that results is the natural response of the organism to its predicament. This is a remarkable experience for both patient and practitioner. The realisation by patients that it is their own natural capacity to heal that is at work, is hugely encouraging and affirming. And, of course, this capacity to heal often exceeds our expectations and the conventional prognosis. This continues to astonish me, after 25 years.

How often have you heard patients describe *the response to homeopathy as 'miraculous'*? There is more truth in that figure of speech than we might suppose. This is not because I think there is anything about homeopathy that is 'supernatural' in the sense usually implied by the word 'miracle'. On the contrary, it is because I distrust the distinction usually made between the natural and the supernatural. I am inclined to believe that what we call supernatural or miraculous is actually the perfectly natural, but that we have a wholly inadequate understanding of what constitutes human nature and its potentialities. So in homeopathy, I suggest we have a true example of natural healing, and also a true glimpse of the miraculous.

One characteristic of the healing process I mentioned at the beginning was '*reconciliation*'. This can mean the adjustment of body function to the effects of the illness; the development of a new way of coping, a new way by which tissues and organs relate to one another, a new kind of integrity. In human affairs, too, it means developing new ways of relating to one another. There are many therapeutic approaches for promoting reconciliation in both these senses. Homeopathy is

just one of these, but it can greatly accelerate the process.

Where reconciliation is needed in a person's relationship with others, or where there is guilt, self-doubt or self-denigration, there is usually no way of avoiding the emotional and psychological adjustment that must be achieved through conversation. By which I mean all the various counselling and psychotherapeutic approaches. But that adjustment can be very slow, and incomplete. The emotional pain, and other symptoms may not go away even when understanding and acceptance have been achieved. In these and other circumstances of psychological illness, the additional use of homeopathy can more rapidly and completely alleviate the destructive imprint of past experience and psychological wounds. Homeopathy has greatly enriched my understanding of the nature and healing of such wounds, which I have come to see as not just 'psychological' in the usual sense, but wounds to the psyche.

Such reconciliation often requires forgiveness, of others or of ourselves, and the manner in which a patient's story emerges often has a confessional quality. How often do patients tell us that it is the first time they have ever spoken about some matter of profound importance to them, which has come out in the context of ordinary homeopathic case taking? This may be something from the remote past, a secret that has been a real obstacle to well being and whole-making for them. In the course of the consultation and treatment, and importantly through the non-judgemental and unconditional acceptance of the practitioner, they are able to achieve forgiveness. Homeopathy has no special prerogative in this. But our approach, and the effect of the remedies themselves, does seem to have a particular enabling power.

In this, and in many other situations, if we are to promote healing in the fullest sense—which is to promote the greater wholeness of the individual—it is evident that we need to help the patient to arrive at *the heart of the matter*. In a story by Kafka, a country doctor says that to write a prescription is easy, but to come to an understanding with people is hard.³ I would add that to help people to come to an understanding with themselves, an essential ingredient of the healing process, is harder still.

The homeopathic approach is for me an ideal way into the heart of the matter. In conventional practice we are inhibited in this task by its pre-emptive approach. The diagnostic process immediately narrows the field of enquiry to particular aspects of the illness and particular systems of the body or the mind. This distorts the patient's view of herself, and often inhibits the free expression of the whole nature of the problem. It gives the impression that some parts of the person's experience are irrelevant—to their well being, to their medical care.

Homeopathy insists that this is not so, and that all the patient's experience, the whole narrative of the

illness, and indeed sometimes of their life, is valid and important. Our neutral, non-pre-emptive clinical method allows the patient to journey within his own experience in whatever direction the story leads. The journey may lead her to reveal the most strange, rare and peculiar symptoms, invaluable to us in our work. Or it may reveal the deeply hidden secrets of the heart, to which I have referred. Our job is to respond faithfully, whether by choice of the well-indicated medicine, or by entering more deeply into a psychotherapeutic relationship with the patient, often both. After many years of caring for people's psychological illness before I met homeopathy, my experience is that the gentle non-pre-emptive homeopathic approach is a far better route into the heart of the matter than a more direct and explicit enquiry into the psychological issues.

Finally there is an experience of healing through homeopathy that I have called '*true resurrection*', the title of a book by a monk, Harry Williams.⁴ In it he suggests that the experience of resurrection, or rising to new life, which even in its Christian context is nothing to do with the resuscitation of a corpse, is something that can be experienced in ordinary life. Such 'new life' is something that homeopathy can help to bring about. I will give you an example of a response to homeopathy that I believe is consistent with this. It required very little sophistication as a prescriber, involving a prescription for *Lycopodium*, which was not difficult to recognise in the patient. He was a severe asthmatic, requiring courses of steroids every few weeks, and at his first follow-up consultation he reported no improvement in his asthma, but told me with amazement and delight that he had started to enjoy playing his violin again, and that there had been a great improvement in his relationship with his wife. Now I had no idea he played the violin, and we hadn't discussed his marriage at all, so I could not credit myself with any great psychotherapeutic achievement. But undoubtedly the quality of his life had improved at a very deep level. There was new life in his love of music and his love for his wife; a '*true resurrection*', which one might call miraculous. And his asthma did subsequently improve.

Conclusion

I have tried to share with you something of my understanding of human nature in its wholeness and of its unique expression in each of us; and my understanding of the healing process that helps us to achieve that wholeness and uniqueness. I hope I have shown you the immense contribution that homeopathy has made to my experience, and to my ability to understand. And I hope I have revealed something of my gratitude for that.

We have a 25 year vision for the Faculty, which is now about 4 years old. It is that we should develop and

demonstrate the validity and value of homeopathy, and of the approach to people, to health care and to healing that underpins it, not only to justify its existence, but to join with others who share a similar philosophy in changing the whole culture of medical practice. This means, I suggest, to help contemporary medicine discover the healing vocation that should be at its heart.

In doing so, we must have the courage to work always in that discomfort zone beyond the edge of certainty, in search of that 'slenderest knowledge of the highest things'; which ultimately is the full potential of humankind, and its destiny within the 'bigger picture' that in my role as a priest I would call the Kingdom of God.

We must accept the challenge that Hahnemann left us on the frontispiece of the *Organon*.⁵ 'Aude Sapere'—Dare to know; dare to be wise.

References

- 1 Schumacher EF. *A Guide for the Perplexed*. London: Sphere Books (Abacus), 1978.
- 2 Reilly D editor. *Enhancing Human Healing*. Editorial. *EMJ* 2001; 322: 120.
- 3 Kafka, F., A County Doctor, in *The penal settlement* London, Secker and Warburg (date unknown).
- 4 Williams H. *The Resurrection*. London: Mitchell Beazley, 1972.
- 5 Hahnemann S. In: O'Reilly WB (ed, trans.), *The Organon of the Medical Art*. Washington: Decker S. Birdcage Books, 1996.