

## REVIEWS AND ABSTRACTS

# International press abstracts

### Clinical cases following Sankaran's method: *Opuntia vulgaris*

Ingrid Van de Vel

Two clinical cases are described: a woman suffering from dyspareunia, and a man with headaches. The woman tried to not be shrunken and constricted, then tried to accept it. The man had the delusion he was locked in a room, a small box, and tried to escape. The theme of these two cases was compression and expansion, and hope alternating with hopelessness. According to Sankaran, compression and expansion belong to the Cactacea, and the alternation between hope and hopelessness to the ringworm miasm: the medicine was *Opuntia vulgaris*.

In a second part we can find the materia medica of *Opuntia vulgaris*: alternately busy and wanting to pray, alternately praying and swearing, petulant or vindictive, fits of rage, omits and transposes letters in writing. Other symptoms are: headaches, pale face, epistaxis, poor appetite and nausea, sensation as if bowels had settled into the lower abdomen, oppression of chest, sticking pains in the heart, pain in muscles of neck or limbs, cold feet, very chilly, coldness of the body.

Ingrid Van de Vel.

*Revue Belge d'Homoeopathie* 2006;2:80–112.

### *Elaps coralinus*

Philippe Marchat

A clinical case of menopausal flushes with restless legs and feeling of heat in the right leg is described; the successful medicine was *Elaps coralinus*, which was prescribed in 9CH every day.

According to the author, the typical behaviour is a natural elegance, with good manners: they like painting, playing music. *Elaps* patients dream of or fear falling and may desire solitude or fear being alone. The main somatic symptoms are: blackness of discharges, green crusts in nose, chronic otorrhoea, worse on right side, chilliness, feeling of ice in stomach after cold drinks, marked craving for salads, oranges, bananas,

improvement lying on abdomen, desquamating eruptions on tip of fingers.

Philippe Marchat.

*L'Homéopathie Européenne* 2006;2:17–19.

### Homeopathy: what place in hospital?

Liliane Giraud

Eighty-seven patients were seen in a homeopathic outpatient clinic between 2002 and 2004 in the Hôtel-Dieu hospital (Lyon, France). Forty percent of these patients were referred by hospital doctors, 43% came on their own initiative or via relatives or friends, 14% were hospital staff, the others were sent by local doctors. The main reasons for consultations were gynaecological troubles (11%), hepatitis (10%), overweight (8%), allergies (7%), and diabetes (6%). Other reasons were insomnia, multiple sclerosis, thyroid troubles, digestive problems, recurrent infections, psychological, rheumatoid and dermatological troubles.

Medicines prescribed included: *Insulinum* 9 or 15 CH for diabetes; *Arnica*, *Bellis perennis* and *Opium* for surgery; *Arnica*, *Hypericum* and *Symphytum* in trauma; *Apis*, *Belladonna*, *Cantharis* and *Radium bromatum* in radiotherapy; *Caulophyllum*, *Actaea Racemmosa*, *Arnica* and *Staphysagria* in obstetrics. Clinical studies are planned, particularly on hepatitis and diabetes.

Liliane Giraud, L'homéopathie: quelle place à l'hôpital?

*L'Homéopathie Européenne* 2006;3:5–6.

### Six feet under

François Littner

The first part of this paper describes the case of a 16 year old boy who consulted, wearing a 'six feet under' Tee shirt and suffered from severe acne. He was cured by *Bufo rana*. The following symptoms led to this prescription: acne, curvature of spine, destructiveness, fear in a crowd, aversion to and aggravation by company, childish behaviour, ejaculation failing during coitus, enjoyment absent during coitus.

According to the author, the main feature of *Bufo* is buffoonery. Everything is swollen: face, eyes, bones, stomach... Also epilepsy, chorea, constant licking of lips, stertorous respiration with puffing expiration, acne, carbuncles, lymphangitis, tendency to sprain ankles, feeling of coldness in stomach alternating with sensation of heat, feeling as if cold balls were running through the intestines, nodules or cancers (uterus, breast). On the mental level, there is anger when not understood, aversion to or desire of music, lewdness, cursing, deceitful, hatred, love for or fear of animals.

François Littner. Six pieds sous terre.  
*Les Echos du Centre Liégeois d'Homéopathie*  
2006;111:34-51.

## Kreosotum

Wolfgang Eichler, Reinhard Flick, Gloria Kozel, Gabriele Mohr-Baumann, Christine Neuhofer, Anton Rohrer, Franz Swoboda

Several clinical cases illustrate this interesting article. The main features of *Kreosotum* in children are recalled: difficult dentition with acrid diarrhoea and excoriation between nates and thighs. These children can be exceedingly irritable, like *Chamomilla*, and they won't sleep at night unless cuddled all the time. They may also have nocturnal enuresis, particularly in the first part of the night, it is difficult to waken the child and the urine has a very offensive odor.

Some clinical cases emphasise the main symptoms of this medicine in adults: fear of coitus and rape, weeping from music, corrosive and foul discharges, profuse haemorrhages from small wounds, cancers, early decay of teeth, menstrual pains relieved by cold drinks, sensation of balls in soles of feet in morning on walking.

Wolfgang Eichler et al.  
*Cahiers du Groupement Hahnemannien*  
2006;2:93-120.

French-Language journals reviewed by P. Colin

doi:10.1016/j.homp.2006.07.001, available online at <http://www.sciencedirect.com>

## Evolution of calorimetric and conductometric behaviour of extremely dilute systems

A large number of thermodynamic and transport measurements were conducted on 'extremely diluted solutions' (EDS). The physico-chemical results presented here allow us to hypothesise that the process of iterated dilutions and succussions is capable of modifying in a permanent way the features of water. A really intriguing phenomenon was the evolution of two physico-chemical properties with time. The calorimetric and conductometric measures were carried out as a function of the age

of the samples. We found a good linear correlation between these two independent parameters, also as a function of time. A careful study of the phenomenon puts in evidence that these solutions are characterised by multiple independent variables. The EDS behave as complex systems, influenced by peculiar aspects of the preparation technique and also by the storage conditions. The EDS are far-from-equilibrium systems, capable of auto-organising themselves as a consequence of little perturbations.

Elia V, Elia L, Cacace P, Napoli E, Niccoli M, Savarese F. The 'extremely diluted solutions' as multi-variable systems: a study of calorimetric and conductometric behaviour as a function of the parameter time.  
*J. Thermal Analysis and Calorimetry* 2006;84:317-323.

## Effect of *Arnica* on bruising in face-lifts

**Objectives:** To design a model for performing reproducible, objective analyses of skin color changes and to apply this model to evaluate the efficacy of homeopathic *Arnica montana* as an antiechymotic agent when taken perioperatively.

**Methods:** Twenty-nine patients undergoing rhytidectomy at a tertiary care center were treated perioperatively with either homeopathic *A. montana* or placebo in a double-blind fashion. Postoperative photographs were analyzed using a novel computer model for color changes, and subjective assessments of postoperative ecchymosis were obtained.

**Results:** No subjective differences were noted between the treatment group and the control group, either by the patients or by the professional staff. No objective difference in the degree of color change was found. Patients receiving homeopathic *A. montana* were found to have a smaller area of ecchymosis on postoperative days 1, 5, 7, and 10. These differences were statistically significant ( $P < .05$ ) only on postoperative days 1 ( $P < .005$ ) and 7 ( $P < .001$ ).

**Conclusions:** This computer model provides an efficient, objective, and reproducible means with which to assess perioperative color changes, both in terms of area and degree. Patients taking perioperative homeopathic *A. montana* exhibited less ecchymosis, and that difference was statistically significant ( $P < .05$ ) on 2 of the 4 postoperative data points evaluated.

Seeley BM, Denton AB, Ahn MS, Maas CS. Effect of homeopathic *Arnica montana* on bruising in face-lifts: results of a randomized, double-blind, placebo-controlled clinical trial.

*Arch Facial Plast Surgery* 2006;8:54-59.

doi:10.1016/j.homp.2006.08.001, available online at <http://www.sciencedirect.com>

## BOOK REVIEWS

### Understanding complementary medicine

George Lewith

*Family Doctor Publications* (in association with the British Medical Association), Poole, UK 2002

Price: £3.50 ISBN 1903474051.

This is an excellent addition to the generally excellent Family Doctor series. George Lewith writes clearly, and explains the sometimes complex principles of complementary therapies simply but not simplistically. I suspect that the reader will obtain as good a perspective and understanding of the nature and scope of complementary medicine (CAM) from this little A5 size book as from other more substantial texts. I am only slightly tentative in making that assertion because I am obviously not competent to judge the sections dealing with therapies that I do not know well, but I would judge that it can be confidently recommended to patients considering CAM or seeking a basic understanding of the treatment they are receiving.

There are three chapters dealing with issues that apply to CAM in general; two introductory chapters, an actual introduction and a chapter titled 'CAM versus conventional medicine', and a final chapter, 'Who provides complementary therapies?'. In between there are nine succinct but perfectly adequate chapters on the principles and application of Acupuncture, Healing, Herbal Medicine, Homeopathy, Manipulative Medicine (embracing Chiropractic and Osteopathy), Massage, Aromatherapy and Reflexology (in one chapter), Mind-body therapies, Hypnosis and other relaxation techniques (one chapter), Nutritional Medicine, and Therapeutic Diets. There is a list of useful addresses at the end of the book, which unfortunately, having identified the Faculty as the organisation for doctors does not include its address or make explicit the link with the British Homeopathic Association whose address is included.

The three chapters (1, 2 and 12) that deal with CAM in general are particularly good. From the start Lewith emphasises the principle of 'integrated medicine' and the importance of placing CAM within the wider spectrum of health care, so that the patient receives whatever treatment or support is necessary and appropriate, but later bemoans the actual lack of integration between CAM practitioners and clinics and local medical services. The 'indirect risk' that arises when a patient uses a CAM therapy to the exclusion of some other essential form of treatment is clearly stated, though he also believes that, '... most CAM therapists are now over cautious and are more likely to over-refer you to

your GP rather than under-refer you if they are in any doubt'. The problem is in those last six words. I suspect many of us have encountered CAM therapists, (as well of course as doctors!), who are unwilling to admit to doubt. There is good advice on how to establish the competence of the therapist (as far as it is possible to do so), with a very good two page boxed and coloured check list, 'How do I know my therapist is competent?', in Ch 12. Advice, too, on establishing appropriate expectations of the timescale and outcome of treatment.

Lewith reflects on the reasons for the popularity of CAM. ... 'Patients who seek CAM feel the whole consultation process is more equal and therefore more satisfying than consultation with a GP or consultant. ... They feel empowered by CAM whereas their perception of conventional medicine is that they have less input and indeed less control .... An important part is ... understanding why (the symptoms) may occur and then receiving a treatment that is based on that understanding. In general the models of illness and thinking processes within complementary medicine are often far closer to our own intuitive models and processes. This is why we may find them easier to accept, even though they may be scientifically unproven.' In this manner and in a few words he makes important insights easily accessible. The empirical basis of most CAM practice and the problems of research are mentioned, again simply and clearly. The growing acceptance of CAM, both by conventional doctors and within undergraduate medical education is discussed briefly. And, importantly, Lewith disposes of the misconception that CAM is invariably holistic while conventional medicine is not—'good conventional medicine does take into account the whole person, and some CAM therapies are very narrow and specialised'.

There are a few errors in the chapter on homeopathy. One or two of them would lose marks in the Primary Health Care Exam (PHCE), but they do not detract from its value for the general reader. The use of aspirin to suppress a fever is 'antipathic', not 'allopathic', because it directly opposes the symptom. (Though I hesitate to mention it because the same error occurs in the glossary of my own book.) There is a familiar PHCE-level confusion about exactly how many drops are added to how many in the decimal and centesimal dilution scales. And the implication that all homeopathic medicines are made from natural substances is not strictly true. But in this context such quibbles are somewhat pedantic. I do think, however, that the assertion that 'homeopathy cannot be recommended for any specific conditions' is misleading. Although formal studies do not, indeed, prove the specific *efficacy* of homeopathy in specific

conditions, *effectiveness* studies, such as the clinical outcome studies from our hospital outpatient departments, tell a different story. This point could perhaps be clarified in a future edition. The chapter ends with a necessary restatement of the 'indirect risk' theme—the potentially dangerous advice given by some homeopaths to stop conventional medication because it can interfere with the action of homeopathic medicines. To this point could be added the reassurance that, on the contrary, experience demonstrates that homeopathy can be used very effectively in patients using conventional medication and does not carry a risk of adverse interaction with conventional drugs. The importance of liaison between homeopath and general practitioner in these circumstances is, however, appropriately reiterated.

I made a particular test of three chapters—Healing, Nutritional Medicine, and Therapeutic Diets; the first out of personal interest, the other two because I find those therapeutic approaches confusing. Lewith will perhaps not be surprised that I would have liked to see a distinction made between healing in a whole person sense, perhaps in the context of his brief reference to the Christian healing ministry, and the treatment of specific, often local ailments ('the particular areas requiring healing') by some of the techniques he described. But apart from that I found the chapter well balanced and helpful.

I find it very difficult to discern the role of nutritional medicine and therapeutic diets in patient care, and which regime is appropriate to whom. There is a plethora of different approaches, and the provision of nutritional supplements, often combined with herbal preparations, is a huge industry, although I know through personal contacts that they are usually underpinned by a high degree of professional integrity. Therapeutic diets are to me even more of a minefield. I was prepared to believe that my attitude to these methods was largely prejudice based on ignorance, but Lewith makes it plain that while many patients do obtain real benefit from them there is in fact a considerable degree of uncertainty and difference of opinion about the diagnosis of individual patient needs and the appropriate remedy for them.

One of the things I particularly admire about George Lewith's work is his uncompromising attitude to what can and cannot legitimately be claimed for and said about CAM. It is this attitude that lends credibility to his role as a proponent of it. And it certainly makes this little book both informative and reliable.

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doi:10.1016/j.homp.2006.07.003, available online at <http://www.sciencedirect.com>

## Homeopathic Pharmacy: Theory and Practice 2e

Steven B Kayne  
Elsevier Ltd, Churchill Livingstone Oxford, UK, 2006

Price: £34.99 ISBN: 0 4431 0160 4.

With the growing public interest in Complimentary and Alternative Medicine (CAM), against the backdrop of speculation and controversy over homeopathy there is a great need for a text book like this one. It answers many questions that health professionals may have concerning Homeopathy and its place as a form of medicine under the NHS or for Over The Counter Sales.

The second edition of 'Homeopathic Pharmacy Theory and Practice' is an excellent reference book for pharmacists it should share the same bookshelf as your BNF, MIMS or Martindale, but it will be valuable for anyone interested in homeopathy. There is more information in this book than meets the eye at first glance. Kayne has collected much practical, pharmaceutical, historical and theoretical information on homeopathy and presented it in a very concise, well-referenced manner. It would not be easy to find some of the information he has presented here without referring to numerous different books, published papers and possibly even internet searches. But, Kayne has put it all together and presented it in an easy, user friendly manner in a single manual.

The book is organised well with chapters and sub-headings and a comprehensive index making it fairly easy to retrieve information. It is divided into six parts. Part 1, includes an introduction to CAM; why CAM is becoming popular and their relevance in today's health care system. Also included in this section is a detailed account of Hahnemann's life with interesting pictures and a family tree followed by the history and development of homeopathy. This section is not an easy read if you just want a brief glimpse of its history. However, if you are interested in dates and historical descriptions it is well worth a read.

Part 2 of the book: 'Procedures' should be mandatory reading for all pharmacists or anyone involved with preparation/dispensing of homeopathic remedies. Some of the information contained here is second nature to homeopathic pharmacists but has never been documented and explained in a systematic text book form. The author describes the whole process of preparing remedies from the original raw materials through to the final dosage forms explaining processes of extraction, different methods of potentisation, succussion, and trituration. The process of medicating dosage forms is explained with pictorial diagrams of different dosage forms eg sucrose pills, lactose tablets, powders, etc. There are explanations of all the available Homeopathic Pharmacopoeias and the information they contain. Examples of homeopathic prescriptions, ways of labelling remedies, how to endorse

prescriptions, private prescriptions, storage guidelines, Quality Control issues all form part of this section. Legislation including a summary of all European Directives on homeopathic Medicine is summarised here. This section is the A-Z for homeopathic pharmacy.

Parts 3 and 4 look at the principles of homeopathic prescribing in detail and its clinical application: The vital force, miasms, theory of disease, constitutional prescribing are all explained here this information is of course also available in many other homeopathic books but, Steven Kayne has also included a section on 'The Power of Placebo'—a concept all modern homeopaths need to consider. Kayne explains the basic historical principles and added all the modern theories to bring his book up to date. For example, with his section on Repertorisation not only does he describe the commonly used traditional repertories but, he has also summarised all the different computer repertories available and referenced their Web Sites.

Methods of acute, chronic and first aid prescribing are thoroughly explained. There are easy to use tables for a range of common acute conditions to help select a remedy using modalities and keynote—these would be very useful in a pharmacy setting and for homeopaths and students wishing to prescribe an acute remedy.

Those who are convinced of the healing potential of homeopathy but struggle with it when confronted by sceptical colleagues will thoroughly enjoy Part 5 of this book. The research chapter is well written and referenced quoting many studies with both positive and negative outcomes. Different studies are sited from clinical studies to basic scientific work by Benveniste. There is also an excellent explanation on research techniques, limitations of certain study designs and relevance of certain study designs for homeopathic trials. The difficulties in homeopathic research are highlighted and include funding issues. Amidst this serious section on research is a touching interview with scientist Benveniste who had published 300 scientific

papers and had some positive results with ultra molecular dilutions.

The final section before we get to the *Materia Medica* is quite unusual. I expected the research chapter to be the last in the book but, to my surprise Kayne has added yet another finishing touch to this very comprehensive reference book—a chapter on Education. In this chapter, in addition, to having information on courses and homeopathic educational organisations there is a section on 'Giving a Talk.' Many health professionals with an interest in homeopathy may be faced with this challenge so here Kayne leaves us with a good outline to do a presentation.

The *Materia Medica* included at the end of the book is very basic consisting of around 60 remedies giving a brief description of the remedy, keynote and modalities. For prescribing purposes one would probably need to refer to a more extensive *materia medica*. This book has a great wealth of information on homeopathy that is not normally easily accessible and hence, if there was no *Materia Medica* section in the book it would not be missed. The author does express his personal opinions in certain parts of the book but, in general also states other points of views giving a balanced approach.

This is an essential desk top reference book for all homeopaths, students of homeopathy and pharmacists. With the changes in the NHS and the granting of prescribing rights to other health professionals I can see this book finding its way into many high street pharmacies.

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doi:10.1016/j.homp.2006.07.004. available online at <http://www.sciencedirect.com>

## LETTER TO THE EDITOR

Dr Tom Whitmarsh's review of my e-book, *Homeopathic Family Medicine*, was extremely supportive. He highlighted several unique characteristics of this e-book: its comprehensive body of clinical research referenced and described but also its continually updating that only e-books can provide. Dr Whitmarsh then informs the reader that 'the Hom-inform database is free to use online and will bring up much information, but searches elsewhere will not necessarily produce the succinct results available in this e-book. If you need to find out if there is some trial support for the use of homeopathy in a particular condition, this is a very good place to look.'

All of this is accurate but a bit more information to the reader would have been more helpful in clarifying the differences between these resources. The Hom-

inform database is an impressive body of references to a wide variety and standards of homeopathic research, but it provides no descriptions, summary, data, or implications of a single or group of studies...while the e-book that I wrote makes this effort. The e-book does not include as many references as the Hom-inform, but this is intentional because my standards of inclusion.

May many flowers bloom in the effort to inform everyone of scientific investigations of homeopathy.

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## OBITUARY

### **Kathleen Gordon Priestman**

**3 June 1911–26 May 2006**



Dr Priestman, who died in May 2006 aged 94, was a well-known general practitioner in Hendon, North London. She was loved by her patients and missed very much when she retired in the 1980s. After studying medicine at the Royal Free Hospital University of London she qualified MRCS Eng. LRCP Lon. in 1934. She studied and practiced homeopathy becoming a Fellow of the Faculty of Homeopathy in 1955. She worked at the Royal London Homoeopathic Hospital and after the retirement of Dr Donald Foubister, took charge of the Children's Department looking after both inpatients and outpatients. In 1964 when

Dr Margery Blackie was appointed Dean of the Faculty of Homeopathy she asked Kathleen Priestman to lecture on children's diseases. This was part of the revitalization of the teaching programme organized as intensive courses of homeopathic medicine for medically qualified physicians. The lectures were taped and are still available through the Faculty of Homeopathy. They are well worth listening to, as she illustrates her discussion of *Materia Medica* with personal experiences, which make the remedies come alive.

Her family have always been involved in missionary work overseas and she was closely associated with the Missionary School of Medicine, becoming its President between 1981 and 1991. Dr Priestman championed classical homeopathy at a time when a section of the evangelical church accused it of occultism, refuting their claims and continuing to use and teach this form of therapeutics.

During her retirement Kathleen enjoyed craftwork and reading. The country setting in Crowborough where she lived enabled her to enjoy her hobby of bird watching and gardening. She was always a happy and hospitable person even as she became more frail being upheld by her strong Christian faith. At the funeral service the vicar affirmed her excellent diagnostic abilities which reflected the homeopathic approach to whole person medicine. Dr Priestman would indeed be pleased and supportive of the teaching of whole person medicine which is increasingly encouraged today.

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