

Homoeopathy In 21st Century

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What will be the future of homoeopathy in the 21st century? In the world of science, homoeopathy is perhaps subjected to more criticism and questioning than any other system of medicine. Why the scientific community is opposing the principles of homoeopathy from time to time? The best is always under criticism. Homoeopathy has survived for more than two hundred years and will continue to gain more momentum. According to a news item in leading English and Hindi papers dated 10th Dec 07, users of homoeopathy are multiplying not only within the country but also throughout the world. The reason given in the news is that Homoeopathy roots out the disease for good. The Indian markets of homoeopathy are expected to top 650 million dollars by 2010 and outpace the growth of pharmaceutical industry, say a study of 'Assocham'. In the year 2006-2007 about 50 million people opted for homoeopathy. Does it not say that the reports of some UK journals and authorities are fabricated, false and meant to defame homoeopathy?

Most of the homoeopaths in the age group of 70 - 80 years are real gems who follow the single medicine doctrine. The 50-60 age range also follow the classical homoeopathy but with a difference- punctuate biochemic medicines, acupuncture, acupressure or magneto-therapy with homoeopathy. These are but experiments and eventually they depend upon the excellence of classic homoeopathy. Homoeopaths below the age of fifty are actually improvisers who are taught homoeopathy with a streak of competency with allopathic system. For them, going in for pathological laboratory reports and use of modern amenities or tools to explore the diagnosis has become somewhat primary before going in for basic symptomology. This gives a better deal. Knowing

the name of the disease becomes a helping hand to find out the similimum. One must remember that homoeopathy cannot be compared with other systems of medicines nor it should copy the other systems. Ultimately the phenomenon of competency has brought a better outlook for homoeopathy. Now the homoeopathic clinics look posh modern avenues with AC and inverters, reception counters and comfortable furniture, computers and nurses. In this sort of set up, the polyparmacy and patent medicines have also crept in and made an entry in popular chains of clinics that have branches throughout India. This is both fortunate and unfortunate. It is fortunate because the name of homoeopathy has entered into a phase of popularity and commercialization. It is unfortunate because this trend may slow down the pace of classic homoeopathy. Kindly recall that in the twentieth century, homoeopathic clinics used to have table, chair, stool, bench and a box containing phials. The medicine was served in folded paper and not in direct globule- phials or dilutions. It is still prevalent in remote rural areas of West Bengal, Orissa, Assam, Bihar, and North East India. I have seen such clinics in seventies and eighties of last century in these state-villages and met many homoeopaths who were known for their single medicine therapy.

The changes that we experience these days are due to systematic homoeopathic education. There were only five or six colleges in whole of India in the fifties of last century and now we have more than 180 colleges. Up to early seventies, anyone having some experience in homoeopathy could get him/herself registered with the state council due to shortage of colleges but after 1972, the provision of registration without qualification was abandoned. We have more than 2 lakh qualified

homoeopaths now and we should expect a lot of progress in the science of homoeopathy. But is that happening? It is bound to happen in this century in spite of the venom sprayed by some journals in Britain against homoeopathy.

The question of competency raised by these journals has some points worth thinking about. They compare homoeopathy with the progress allopathic system is making. They utter absurd comments against homoeopathy due to this hidden comparison? Just have a look on the progress of conventional system of medicine.

- Research on HIV/AIDS is in progress. Tuberculosis research center, Chennai has documented cases of forty couples where husbands are HIV positive but wives are not in spite of their regular sexual contacts. This proves that Indians have genes that remain HIV negative. Research on this point may progress in this century. (Courtesy- Mail today 1.12.07)
- Work on genes therapy may also get enhanced. Duke university scientists have identified about 20 silenced genes, which play a profound role in people's health. There is possibility that the secret of how some people get sick and how others do not in spite of same set of pollutants, food and stress, could be solved. (Courtesy- TOI- 1.12.07)
- There may be development of some combined vaccines containing multiple benefits just like triple antigen. (Courtesy- Span, Nov, Dec, 07)

I am not mentioning the progress made in the field of surgery because there is no comparison here with homoeopathy.

RESEARCH IN HOMOEOPATHY

Recently a new 'Asian Journal of Homoeopathy' has been introduced. Dr Nidhi Luthra Arora, managing editor of this journal has sent me an introductory copy. It speaks of the spread, knowledge and awareness of latest research and development of homoeopathy according to Dr Eswara Das, honorary editor. There are articles in this journal on evidence to evaluate the efficacy of certain medicines. This is a good start and we hope for

better exposure as far as research is concerned.

CCRH is also having a number of subordinate institutes organized for the purpose of research in different fields. The work is appreciable. A Central Research Institute is being started in Noida that may reduce the difference between the individualism strategy and standardization of medicine. At present the big question posed by the homoeopaths is something that is missing in the aforesaid research work by many journals and CCRH. Research in homoeopathy is not only searching or inventing new drugs after experimentation in the laboratory but also making people know how homoeopathy excels. This can only be done when we show results of cure *at the cheapest cost and in minimum possible time.*

- Our research is not by mixing medicines or making patents. It is, of course, an additional asset to show that some diseases can be cured temporarily at the earliest by patents although it is not within the framed rules of homoeopathy. Either we have to make our rules flexible to assert an entry of poly-pharmacy in the professional ethics or we have to find out standard single medicines that could have a label of single diseases like constipation, fever, cold etc and which could be sold OTC. This is bound to happen in 21st century.
- We have to make experiments on 'which is the right frequency of taking medicine for a particular disease', 'what is the potency best suited to persons of all ages', or 'what is the medicines which can be called as immunity-developer'.
- What is the best transporter of medicine: water, globules, or powder? There is a need for research on this to make a standardized method of transporter so that there is no differentiation felt by the patients in whole of India on this account. No doctor should be considered efficient because he or she uses dilutions instead of globules or powder.
- We have to find out medicines that could be given against the abnormal values of patho-

logical tests like haematological, lipid profile, LFT or thyroid profile, urine or blood chemistry etc. As a matter of fact we do not have any Materia Medica that could give us inkling like 'here is medicine that cures exclusively the abnormal uric acid or bad cholesterol' etc.

We have to find out additional therapeutic method that could intensify the action of first given medicine. It may be dietary, thermal, physio or hydro and not in the form of another medicine like complementary, or follows well. The example on this sort of method is giving an oil massage after extreme tiredness or pressing head while having headache. With our selected medicines, if such actions were devised, they would be very helpful. People now-a-days have no time to wait and depend upon instant painkillers. Hopefully, 21st century would make this dream true.

We have to know the prophylactics and their actual utility. If our prophylactics are actually working, how is it that homoeopaths are not using them on their own children in infant stage? In one of the scientific meetings of National Homoeopathic Medical Research Association, Delhi in Nov 07, this question came up and it was found that no doctors had practiced this except one Doctor whose candid statement was appreciated. This Dr Bhatia of Delhi never gave any primary vaccinations to his children and his grand children. He gave only homoeopathic prophylactics. He did not even give the most advertised polio drops. How many doctors date practice this? We are not doing it because there is no confirmed proving on prophylactics and we do not want to take chances. A broad research is needed on this topic. And if it is not practical why to include

prophylactics in the course of studies in colleges. Is to confuse the students and doctors? A study on this is needed in 21st century.

We have more than two thousand proved drugs but how many drugs are in actual practice? A candid statement will be that we do not use more than forty medicines in daily practice. Why these forty or so polychrests are not given much of research work instead of finding out new drugs? Our colleagues in West Bengal are the pioneers in finding out many Indian drugs and proving them as well but how many of us actually use them to find out the success rate.

There is a need in 21st century on use of mother tinctures. Are they actually needed or do they have our confidence when we belong to potentized culture of homoeopathy. Similarly there is a need for use of biochemics with homoeopathic medicines. Are they really useful or can they be discarded? I was using biochemics with homoeopathy and after cost of biochemics was raised in the market, which I could not afford with the fees charged from patients, I discarded them. Without their use, the results of success rate in my practice did not change. Research is needed on this aspect.

I am sure with the trends of research now going on, we shall be able to show excellence in 21st century. All the above points will be covered by the end of this century. The only thing is to work hard on each case and make experiments with new methods of treatment. Sometime some one may hit an idea to give a second coming to homoeopathy and become a second Hahnemann, even if not so great as he is. We need thinking beyond thinkable to achieve something in homoeopathy in this century.

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