

Medicines... and 'services rendered'...

'Services rendered'... At first glance, the phrase looks noble... It can only make one think of what is given free of cost in response to a request... And yet it is the one used by the 'Haute Autorité de Santé' to justify the fact that the medicines whose files are examined regularly are maintained or not... It is also the one used to justify the regular calling into question of the Hahnemannian discipline.

'Services rendered'... Request of Whom ? Desire for What ?

A 'service' is rendered to society if it is possible to assess the value of a contribution by comparison with what is 'given in exchange' implies...

Following from the thoughts raised by the planned assessment of the appropriateness of the maintaining of homoeopathic medicines in the official pharmacopoeia and thus of the continuation of their - partial, at least - reimbursement, a question may arise :

Is it possible to assess the value of a medicine by confining oneself to the positive responses it engenders in the great majority of people, leaving out what is linked to the individual aspect and may lead to non- or over-effectiveness ?

This runs counter to what day-to-day clinical experience teaches us...

Are the patients 'malleable' to the point that they continue to use substances that have no effect on them ?

Is the impact of the person who issues their prescription or the publicity given to a medicine or a way of using its beneficial effects always striking to the point that only the placebo effect is mentioned even though neither the doctor nor the patient expresses any doubt about or criticism of its effectiveness ? This is tantamount to being unaware of the real nature of the field and giving a very minor place to their point of view if not their reliability...

Have the value of statistics and the standardised reaction taken hold of people's minds to the point that, whereas rigour is appropriate, parameters that are important enough not to be passed over in silence are rejected ?

The clinician of all kinds can only react here and the homoeopathic doctor trained in a practice in which the individualisation of therapeutic choices, of the mode of prescription and of the strategy used is of major importance sees how striking the difference is between what is observed and what is supposed to be demonstrated.

As a homoeopath, one knows that a 'minor' medicine given at the right moment and at the appropriate dilution can be a 'great medicine' for the person who has benefited from it... : often coming from old knowledge, whose conclusions should probably be examined and refined in the light of modern scientific contributions, it does not deserve to be left out and its disappearance often - and in many respects - engenders a shortfall...

The suppression for budgetary reasons (cost of the files subject to the obtention of the product licence in France) of many homoeopathic strains - and of certain dilutions, given that each of them must be accompanied by a specific file - is indisputably a loss in this respect. It reduces the possibility of treating certain disorders that had hitherto been so with an appropriate homoeopathic treatment.

One also knows the importance of those changes often barely comprehensible to those who are uninformed about the notion of 'responding type' and what it implies in the iatrogenic effects observed...

Where the supporters of allopathy alone come up against obstacles because of their lack of knowledge about that individual aspect that makes it necessary to take certain precautions and observe more attentively what is happening, the homoeopathic approach widens the scope of research... It should be explored, if only to avoid discarding too active molecules - or too quickly - for some people - with early 'pathogenetic' effects in a way - even though they are useful if not essential for others...

Several examples occur to one here and they are not the only ones... They can only make one regret the lack of knowledge which has led to a form of narrowing of the therapeutic possibilities for all whereas only certain people - probably 'responding types' - were concerned and posed problems - but not necessarily questions...

But it would have been necessary to go out of statistics to go into the phenomenon in greater depth and not to have hastened, probably for safety reasons, to discard the medicine.

Hence :

'Services rendered', to whom ?

Certainly not to the numerous patients who sometimes benefited from a treatment administered at tiny doses - and even less if accompanied by a homoeopathic prescription - , or to the practitioner for whom it is now impossible to get the same result with another molecule...

The diktat of statistics and of problematic cases leads to the drastically decreasing number of the substances that can be used...

The taking into account of individual sensitivity, of the frequent need to adapt recommended doses from the average results would probably prevent this problem... It becomes crucial in psychiatry...

Drug interactions make the prescription more and more problematic ; the lack of knowledge about both the 'responding type' and the deleterious effects on the behaviour (aggressiveness, anxiety, sleeping disorders) of a new-generation antidepressant treatment mismanaged in the recommended dose is not without repercussions either - to recognise the 'toxic' effects that are taking hold is very useful...

The knowledge of the pathogenetic effects and the admitted notion of the existence of subjects that respond more than others are very valuable in this respect. They give an advantage to the homoeopathic doctor. Thus :

Atrium®, a tranquilliser eminently active on the trembling of many patients, was withdrawn from the market without further ado in the light of a few cases of scapulo-humeral peri-arthritis... No other medicine had ever had such a powerful impact on that symptomatology... Perhaps it would have been advisable to try to know Who ? When ? How ? The interest of some has supplanted that of everyone... The fear of the disadvantages and the desire to be prepared for all eventualities have destroyed all possibility of knowing more about it or of understanding the issue better...

One has also seen, because of individualisation, how certain medicines are typically effective on some people : Humoryl®, very active, in small doses, in the Phosphorus subject if they were depressed and the homoeopathic medicine alone was not enough, has never

been replaced... Upsten®, whose 'responding type' could not be determined in a precise way, was withdrawn probably through lack of effectiveness on most of the depressive subjects of the group studied... And yet it was **the** specific antidepressant of some people, it did not require high doses and could only be 'replaced' - without equivalent results - by several molecules much less effective and in higher doses...

Is the insufficient effectiveness observed in some synonymous with a lack of 'services rendered' ?

Perhaps this is the real question...

It goes far beyond the scope of homoeopathy but must be posed insofar as the homoeopathic doctor is first and foremost a doctor and must put as far as possible all appropriate means at their patient's disposal... Because of individualisation...

It concerns the medicines to prescribe as well as the doses and course of treatment since, when it becomes necessary and the organism can no longer 'defend itself', a mixed treatment should be envisaged...

Can one judge from the statistical criteria alone ?

Can one, in the name of an insufficient prescription or the lack of prescription or of an apparent positive impact on many people, contribute to the reduced prescription of certain treatments - their non-reimbursement plays a role in it - or else, which is more alarming, make it impossible for others, who benefit from it ?

The disappearance of certain neuroleptics that are totally active and hard to be replaced by others from a different chemical family proves to be catastrophic at the present time... It threatens to destroy the equilibrium of patients who had been stable for years, with the risk of questioning work sometimes carried out as a team (with referents, therapeutic flats, professional integration)... Fragile and often lonely subjects are more and more in danger of being hospitalised in an unpredictable and problematic way given the tragic reduction in the number of beds in psychiatry (by 70 %, if one refers to recently published figures - Probably 'insufficient services rendered'...).

Whether it is about allopathic or homoeopathic medications, as regards the assessment of 'services rendered', the following fact can be observed :

- To distance oneself from and not to take into account any individual effect on pathologies which bear the same denomination but do not cover the same reality is responsible for that difficulty.

It does not necessarily go together with the notion of 'services rendered'...

- The limitation of medicines engenders the prescription of more expensive and not necessarily more appropriate medications.

Perhaps the increase in the price which automatically follows the stopping of the reimbursement of medicines whose 'services rendered' appear insufficient should be limited or the price of the latter should be reduced so that this might be coherent.

- As regards homoeopathic medications, the application of the notion of 'services rendered' is more crucial for various reasons.

If taken with the prospect of applying the same rules as to any medicine listed in the official pharmacopoeia, it may have meaning, provided that certain preconditions are respected :

. Given that this does not correspond to the same level of observation, the notion of 'services rendered' should **on no account**, either explicitly or implicitly, be associated with the fact of proving the 'non-placebo' action of the medicine.

. With this aim in view, the **absolute** respect for the Hahnemannian similitude such as accepted by the scientific world must be observed during the experiments - without any reference to symbolism or to what may be the mark of Kent's theorisation based on the prevailing looking for the 'mental state'... Similitude is not analogy.

. It is absolutely essential to use protocols appropriate to homoeopathy.

Thus, if one wants to compare the effect of the Hahnemannian approach with a molecule prescribed for a pathology defined through a list of pre-established signs, the individualisation of the homoeopathic treatment will be necessary : it will have to be revised and reassessed regularly and possibly changed - this was done in a study on ADHD¹. The analysis of the results will make it possible to find the frequency of improvement or of disappearance of certain of the signs chosen at the outset as criteria for the pathology...

Similarly, if, for a given disorder, one aims to check the impact of a homoeopathic medicine in comparison with a placebo, the modalities of its 'pathogénésie' will have to correspond to the main signs of the disorder point by point.

It is important to say here that, if all these elements may prove to be useful, they do not constitute the absolute proof of the effectiveness of the pharmacological component of the medicine alone - and this applies to each of the two approaches :

One can state that any molecule or homoeopathic medicine chosen according to defined criteria proves to be more active than a placebo but, in both cases, this does not constitute the proof of its action.

A study - quickly passed over in silence - concerning 2,000 children treated with Ritaline® in the United States showed that the product had become much less effective as soon as the support and supervision of the families put in place two years earlier had stopped² !

'Services rendered'...

An economic issue emerges here but this is not the place to discuss its legitimacy if not to make it emerge in day-to-day medical practice : it plays a role in the prescription as well as in the way the subject will be regarded...

It makes one wonder about the form of thought that engendered its emergence : in a more or less implicit way, it has an influence insofar as it gives healthcare a turn that focuses more on the general interest than on that of every individual...

The notion of individuality has disappeared, as well as that of 'subject'... The complexity of the human being and, sometimes, the strangeness of their reactions have been forgotten. Only the figures obtained matter...

And yet the differences in reaction make one wonder and remind one that no approach can pride itself on being the only one that possesses the Truth and on dealing with all eventualities...

Statistics are no proof...

The effectiveness of certain antidepressants, certain of which are widely - and successfully - used, has been questioned by the composition and origins of the population

¹ Cf., on the website, the book entitled *De l'hyperactivité aux nouvelles pathologies...*

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chosen for the experiment... - hospital or medicine as practised in general practices in towns...

The purely 'scientific' view backed up by statistics comes up against reality here and stresses the fact of not taking into account certain parameters that are nevertheless present and efficient... Therefore it is not without flaws and there are also question marks over it...

The mechanistic paradigm which, beyond the economic reason, bolsters standardisation and equal 'services rendered' to consider, in a monolithic manner and beyond the interest of the subject, only the apparent general one, is not without an impact.

Does not what is inherent in homoeopathy and makes one take into account the complexity of the human being and contributes to their better stability constitute, beyond the apparent problem, the 'services rendered' by the large living body to itself by making itself question its practices and ask newer and newer questions... ? One can ask oneself the question...

As Professor Madeleine Bastide said, referring to the professor of Philosophy Agnès Lagache and to what illustrated the development of information, which she mentioned in many of her writings, and was akin to the thought of Edgar Morin : 'Homoeopathy cannot die, it will always come back one way or another... It obeys the laws of life'...

'Services rendered' ? After all... What services ? And to Whom ?...

The mechanistic paradigm has reached its limits... Many scientists admit it...

The desire to demonstrate the effectiveness or the strictly placebo effect of homoeopathy makes the points against which modern medicine already comes up emerge... It stresses the paradoxes and certain contradictions and comes up against many obstacles...

Perhaps, as homoeopathic doctors, we should content ourselves with what can be done... To refrain from demonstrating what cannot be in the present state of affairs and of knowledge... To refrain from conforming to a norm that does not suit us but, on the contrary, to stress our specificity and our results, if only as regards the improved well-being of our patients...

If only by forcing ourselves to question our practices and prejudice to make us think, if possible, is it not the service that we can render to our fellow-countrymen as well as to the world of science ?

To get out of one's cosy existence... To try to widen the scope of one's knowledge but to accept the idea of not being able to explain everything, to retain a rigorous and critical mind and to keep a cool head when confronted with the rash and confused explanations that appear today... A very difficult programme...

And yet this is also the great 'service' that today's homoeopaths can render to tomorrow's medicine...³

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³ Translated by Pascale Tempka