

The psychiatrist and homoeopath faced with psychic pain (1)

II - The view of a homoeopath and of a psychiatrist¹ as well

They complement each other and go in the same direction to reach the same conclusions :

When one tackles the sphere of the psyche, no theorisation of a scientific nature can be put forward to account for what happens in the therapeutic space.

The present use of the data of quantum medicine mentioned regularly within the world of homoeopathy to justify quite heterogeneous phenomena equally - therapeutic relationship, action of the medicine, way of functioning of the dilution - does not seem appropriate in the present state of knowledge...

It can be so only as a hypothesis² and with the greatest caution, given that what it covers would still be in its 'infancy'³.

It is all the less so if one tries to explain in this manner, without discrimination, the way the treating process happens.

The effects of the relationship, of the medicine, of the knowledge of the doctor on the impact of the medicine all play a role.

One cannot therefore fully understand what is linked to each of those parameters and is currently put into a 'hotchpotch' of explanations in the hope of giving a 'scientific' connotation to what is put forward.

In the same way, one cannot use a scientific point of view to justify the choice of a homoeopathic medicine determined according to its 'mental' signs.

Many approaches currently fashionable in homoeopathy give explanations which can only pose problems.

Even if their elements spread widely⁴, lending credibility to their assertions, it is important to check what they put forward in the light of more specialised knowledge : the recent use of the very new phylogenetic classification of plants⁵, the elements announced as being extremely modern⁶ to back up the theoretical bases of what is associated with it, the

¹ Second section of an article made up of several parts, entitled *The psychiatrist and homoeopath faced with psychic pain*, Dr Geneviève Ziegel and published on homeopsy.com

² And not as an explanatory certainty based on what is currently linked more or less seriously and felicitously to that assertion... The 'quantum man', 'quantum touch' etc.

³ As Professor Levy-Leblond, a specialist on the subject, said.

⁴ Where, it is important to know, most of the time, homoeopathy is practised by non-doctors, which explains, given totally different training, the lack of possibility of looking critically at what is put forward. The title of doctor, which is more widely used and associated with other approaches linked to the art of treating, very often fuels confusion.

⁵ Which is based not on their sexual characteristics but, notably, on elements coming from genetic, palaeontological, morphological, biochemical data.

⁶ Even though it does not seem possible to draw from this classification any piece of information about medicines or any homoeopathic property corresponding to it.

points of view put forward to explain the reference to Mendeleev's Table⁷ can on no account 'hold water'⁸ with anyone with the slightest bit of enlightenment in those fields⁹.

A link has appeared between the physico-chemical properties of the different elements of the classification and homoeopathic medicines of mineral origin : according to the horizontal and vertical positions of the elements, different homoeopathic properties are attributed to them. The mentality that characterises them individually depending on the group to which they belong is then expounded, with an analysis of the special features that can be observed depending on whether an element is alone or a positively charged anion and a negatively charged cation are associated. - The latter generate variable properties if one component or the other is predominant.

At least, lines of argumentation that cannot be called so should not be put forward.

If one can concede that it is impossible to have all the data permitting to vindicate a point of view and if they reassure those who espouse its assertions, they obviously show a glaring lack of knowledge about what is put forward and the impossibility of finding an explanation to everything, even with untenable arguments.

Unless one leaves the domain of homoeopathy and clearly says one places oneself only in that of homoeotherapy and of the traditional types of medicine - which is understandable and which some practitioners claim - , one cannot authenticate what one puts forward with the aid of inappropriate explanations.

In the same way, one cannot content oneself with saying that the patient 'is better' or is 'recovered'¹⁰...

This is not enough to lend credibility to the prescription : when one tackles the sphere of the psyche, one can only be in trouble on this point.

The main symptoms must always have disappeared in a way which can be observed if not quantified and the context must be carefully examined.

One cannot always conclude¹¹ that only the medicine takes effect, which is even truer as regards the sphere of the psyche.

This is as true in allopathy as in homoeopathy.

Many events have often occurred, about which the patient does not always think of talking : the beginning of a romantic relationship or of a friendship, entertaining spare-time activities, therapy undergone at the same time or, simply, the disappearance of nervous strain.

On the other hand it can be said unhesitatingly that the medicine has often facilitated a better relationship with oneself and the environment ;

Hence greater development and putting in place of better living conditions.

⁷ Cf., on the subject, the article by René-Philippe Halm, *Le Cymothoa et l'homéopathie moderne*, Cahiers de Biothérapie, mars 2017.

⁸ Cf. Doctor René-Philippe Halm, *Le Cymothoa et l'homéopathie moderne*.

⁹ A position which, unless one does not want the homoeopathic approach to remain within the scope of medicine, the capacity as doctor compels one to continue to hold.

¹⁰ The word is not used in psychiatry if not to talk about an episode. Recovery implies the return to the earlier state. As regards psychic pain, improved well-being can only be associated with inner evolution and realisation permitting a different sort of apprehension of the anxiety-inducing situation.

¹¹ Either in allopathy or in homoeopathy ;

Thus :

If a depressed or bipolar subject is pacified by a chemical treatment and psychological support permitting better arrangement of their everyday lives, they will make their relationship with their environment easier.

If, a sign of their improved well-being, the Natrum mur subject, who 'withdraws into themselves to think about their problems', becomes more sociable, puts on weight, eats healthier food, they will get on better with everyone...

If the Lachesis subject becomes less logorrhoeic and has less headaches before her periods, she will be less difficult, which will make her relationships easier and will alleviate the profound feeling she has that she is not loved.

If the Nux vomica subject has less fits of anger or the Lycopodium subject becomes pleasanter, their lives - and those of their close relations - will only be made easier...

Those are objective signs. Visible and repeated as clinical cases are observed every day and accompanied by physical signs, they permit to conclude that the prescription and the treatment are effective.

Tangible elements must be put forward to conclude that there has been an improvement.

Apart from the general impression of the patient and of their family circle, several parameters must be examined to permit to conclude that a medicine is effective.

This applies to the substances used in allopathy as well as to the homoeopathic ones.

The experiment carried out with this aim in view must be done under the same conditions¹² : different elements, which must be as objective as possible, given the domain observed, must be meticulously observed :

A clinical experiment put in place in Switzerland¹³ showed, in this respect, how a comparative study could be carried out, permitting to use the protocols usually current, with an application appropriate to homoeopathy. The latter compared children treated classically with Ritalin® with others treated with homoeopathy, with individualised treatments supervised by the practitioner in charge of the study. Adjustments of the medicines and of their dilution were made at regular intervals. The assessment of several characteristics permitting to judge the two therapeutic approaches in a similar way permitted to conclude that the Hahnemannian approach was effective.

When one tackles the problems linked to psychic pain, one cannot content oneself with 'case studies'.

It must be noted that this practice, put in place by Hahnemann to check the effect of a prescription and assess the impact of its medication, has somewhat deviated from its original aim : used since Kent to authenticate the exactness of 'pathogénésies' by observing the way in which the patient responded to the treatment prescribed according to the Kentian rules of prescription, those 'case studies' do not have the same function as the observations recounted by Hahnemann.

They became all the more necessary as the number of 'pathogénésies' increased, their mental signs became more important and it was essential to compare the results.

This proved to be all the more vital as many 'pathogénésies' had somewhat different modalities and not insignificant nuances in the description of the points which they each saw as essential to explain the mentality of the medicine.

¹² - by giving the same place to the placebo effect -

¹³ Cf. , on the subject, the book, *De l'hyperactivité aux nouvelles pathologies*.

The need to find the 'essence' associated with it has certainly played a role in the way of apprehending and describing this 'mentality'.

Probably in question as regards the drifts which appeared just after Kent, it has sometimes become a form of synthesis of what emerged from different experiments and case studies.

This certainly runs counter to what comes from materia medica and the psychic signs that are stated in it : coming from the observation of the behaviour and of the words said, they can be spotted and are present in everyone.

To distinguish the 'mentality' of a medicine from its 'psychic signs' is important.

Objective, the psychic signs constitute neither an interpretation of the behaviour nor an explanation.

On the other hand the explanations¹⁴ and the sometimes particular - if not individual - context which are associated with the 'mental signs'¹⁵ cannot be inserted in materia medica.

They can be 'used' only as information to guide towards a medicine : if they permit to understand the signs presented or to broaden the view associated with the substance tried out, they cannot serve as a basis for the prescription : they should not be considered an inviolable 'truth' and even less a truth for everyone.

Therefore, to have observed that the Lycopodium subject often has a mother whose behaviour is contradictory and a father who often reacts in fits and starts and inappropriately is not enough to decide to prescribe it. On the other hand it partly justifies their way of reacting as, from a different viewpoint, the state of their liver, the changes in their fatigability may give an explanation for their fits of temper, which permits to understand them and to help them in various ways.

This is very different from the fact of putting forward that Lac Felinum is a 'medicine for incest', 'dreams about rape'¹⁶, even by close relations' and for 'situations of prostitution' where, like the cat, one is forced to 'give up one's freedom in order to eat and survive' even though one is 'divided between dependence and independence' and one 'finds it difficult to bear constraints'¹⁷. This seems to be an 'after' medicine even though the symptoms have no specificity.

The Arnica subject has precise signs showing the impact of their shock, as the Staphysagria subject somatises in a way peculiar to them and which can be spotted. On the other hand the Lac Felinum subject, apart from dreams about 'earthquakes'¹⁸, the 'feeling that they are not respected', and the desire 'for clean food', has no particular sign clearly showing their mentality - and are the modalities presented to try to outline it really

¹⁴ The consequences of the 'original sin' for the psyche versus Elizalde A. Masi and the vagaries of the psychological development versus P. T. Paschero belong only to their views : their particular classification and the list of the medicines corresponding to it cannot be inserted in materia medica and the similitude used is 'broadened' similitude which no longer has anything to do with Hahnemann's.

¹⁵ With which they are now mixed up, increasing the confusion between the two words and concepts since the phrase 'mental signs' is not linked to Hahnemann but seems to have appeared with the Kentian doctrine.

¹⁶ To be used in homoeopathy, unless they are signs of a particular situation - dream about tiring work by the Arnica subject - , dreams, according to Henri Voisin, must be recurrent.

¹⁷ *Homéo et Juliette*, Patricia Leroux, Publibook, 2003.

¹⁸ Which only they can decipher and help understand in their true meaning.

specified? Do the desire to eat paper¹⁹, the feeling of disparagement, the taste and loathing for milk define them in what they really are ? In the same way, are dreams about rape²⁰, the situations in which they often seem to be - prostitution etc. - characteristic insofar as they constitute more an outside element linked perhaps to the context of life ? Are they modalities specific to the medicine or are they linked to the environment in which the 'pathogénésie' was carried out²¹ ?

In the same way, if one can put forward that the psychological profile of many subjects with a cancer is representative of Sepia and their psychology, one cannot run the risk that it might be inferred that all cancers correspond to a Sepia subject - or, fortunately, that all Sepia subjects will have cancer.

And yet this is²² what can be concluded about Lac Felinum : insofar as it was announced²³ that it could be considered a medicine recommended in the event of 'incest'²⁴ and many subjects who seemed to correspond to its psychology had been 'given over to prostitution', it was seen as potentially being *the* medicine to be prescribed in that case - if one could also spot a desire 'for dependence and independence', non-acceptance of constraints²⁵, and humiliating situations imposed²⁶.

The ophthalmological signs 'aggravated in September', those showing a hormonal imbalance, the 'lump in the throat', the uncharacteristic dietary modalities - 'desire for clean food' and 'to eat paper'²⁷ - , the contradictory ones - taste and loathing for milk - visibly give way to those coming from the mentality, the previous history, and the lifestyle : the latter seem to count the most for the prescription even though, while predominant in the description, they are²⁸ reduced to a few inexplicit elements : 'Dreams about earthquakes, desire for paper, independence, ophthalmological signs'.

¹⁹ It must be replaced in its context and its meaning at the pathophysiological - like the desire of Calc Carb for chalk or indigestible food - and psychological levels must be understood, which only the patient can analyse. It must also be marked in order to be usable...

²⁰ Like the 'dreams about earthquakes', which may express a risk of inner chaos as much as the fear of what may be experienced as not reassuring in the outside world, they can be understood if they are replaced in the context of the life of the subject.

²¹ India, seemingly.

²² - And this is one of many examples meant to shed light on what is currently happening and which, fascinating and enthralling many seasoned, conscientious, and 'honest' colleagues, is gradually moving to the forefront throughout the world and for a new generation of homoeopaths. Visibly desirous of being in phase with a world that evolves, the latter do not seem to be able to weigh up the consequences of the change which is gradually happening and which they contribute, sometimes without being really aware of it, to reinforcing if not instituting and spreading.

²³ From a few cases observed ;

²⁴ Hence, apparently, the 'dreams about rape, even by a close relative', 'the feeling that one is not respected, the feeling that one's reputation is sullied, that one is treated outrageously', the fear of other human beings, of falling down the stairs, of thieves, of needles and sharp objects - expressing the feeling that one is inwardly fragile - , that of being 'locked in' and the desire for travelling which, like that to 'torture those who torture animals', expresses the desire to get away as well as to protect what may be maltreated whereas it is weak and defenceless.

²⁵ Which is, it must be noted, not characteristic at all...

²⁶ *Homéo et Juliette*, Patricia Leroux, Publibook, 2003.

²⁷ By analogy with the 'desire for reading' of the Lac Felinum child described as someone who often 'devours books' and has the desire for 'knowledge, essential for their intellectual and psychic independence'.

²⁸ - like in many of the new 'pathogénésies', which are exhaustive if not over detailed as regards the mental, psychic, and behavioural signs recounted.

One may also mention²⁹ those dreams about 'earthquakes' which are present in the Lac Felinum subject and are explained analogically, with reference to the Apocalypse and to the symbolism of the cat - linked to the snake in certain Traditions... : as it is seen about many other medicines, the description of Lac Felinum visibly also refers to various elements coming from symbolism, the Kabbalah etc.

This can only make one ask oneself whether one wants, with the aid of the most various elements, to make the 'pathogénésie' coincide with the elements given by the patient or, conversely, whether one wants to compare the patient's signs - even if it means choosing and interpreting them - with a pathogenetic description of various origins³⁰ to check the signs roughly before instituting, listing, and using them as the 'essence of the remedy'.

The general confusion, the plethora of pathogenetic elements, the lack of unity which sometimes characterises them so much that they sometimes add on the signs of the other ones explain many current positions.

The 'pathogénésie' of Lac Caprinum and the way the presence of the 'fear of sharp objects' and the 'desire for heights' - visibly coming from two different 'pathogénésies' - are linked together in order to appear coherent take one back, in this respect, to the foundation course for first-year university students.

This may throw light on what several practitioners who are supporters of this new post-Kentian type of homoeopathy say : it consists in declaring that it is possible, according to the case presenting, to choose the psyche according to so-and-so, which shows in an obvious way that the description of 'the essence of the remedy' is subject to changes.

Therefore, if it does not correspond to that with the greatest similitude to the signs presented by the patient, one can reach the conclusion that one can refer to that which is the most acceptable to the therapist through the elements which they have chosen as modalities and interpreted in their own way³¹.

In the domain of the psyche, the aggravation of symptoms is not necessarily a sign of 'non-improvement'.

This is an element which it is important to emphasise. Like their therapists or the people who have witnessed their evolution, the patients who have analytic psychotherapy or analysis can confirm this.

This is what also happens in homoeopathy : an apparent exacerbation of the malaise is sometimes a sign of struggle or of problematic realisation insofar as the need for difficult changes or decisions appears...

In both cases, the improvement in the state of the subject, who regains their capacity for reaction, is not always well received by their family circle, which does 'not recognise them' and often finds it difficult to adapt itself to the person they have become.

The family does not always prove to be the best judge of these matters.

They often make the patient go back to their previous deadly so-called stability and make them have doubts about their therapeutic and medical choices. This can be an undeniable brake on the improvement in their state.

²⁹ - simply as an illustration -

³⁰ - or composed of elements coming from several experiments - ,

³¹ (Sic !)

Psychiatrist and homoeopath : a strange position

Isolated because they are new to the practising of their profession, steeped in the advances and steps backwards, the negation of the human being and of the remaining in the movement of life which society offers, the homoeopathic psychiatrist can only be concerned with these essential points...

Perhaps their role is to share what they observe and to analyse it further.

Put between the intellectual rigour linked to the world of science which was instilled in them and what comes from the world of psychiatry and psychoanalysis and gives them greater possibility of discerning the illusion that fascinates and distorts judgement, they have the benefits of earlier knowledge and of the most recent advances in these different disciplines.

Forced to take into account the somatic component underlying all pathologies - which corresponds to their training as a psychiatrist in the most fundamental sense of the word³² - , they concur in this way with the world of homoeopathy, and this gives them a most specific if not particular role to play which is, it must be said, still little known...³³

To be continued...

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³² As it was taught by the masters of psychiatry Charles Brisset and Henri Ey, who strongly stressed the importance of these two components to define the scope of the psychiatrist's exploration in the original sense of the word : even if they may have the training as a psychoanalyst or their function - under conditions to be distinguished for the patient - , their role is not that of a psychoanalyst but of a doctor.

³³ Translated by Pascale Tempka