

II - VERY HIGH DILUTIONS AND HOMOEOPATHY¹

There is some reflection that now proves to be indispensable.

It involves taking certain precautions made all the more necessary as the spreading of knowledge, the encouragement to self-medicate, the lack of knowledge about the complexity of the Hahnemannian approach do not make things easier or prevent potential risks...

Either homoeopathy is only 'placebo sugar' without any other effect than that associated with that name and, therefore, does not pose any problem apart from that of a temporary improvement in one's health or a spectacular aggravation to be put into the category of 'hysteria' or it has real effects²... They should be dealt with all the more carefully as, as soon as dilutions exceed 30CH, their effects are neither predictable nor measurable in terms of clinical expression and the time it takes them to appear...

'Primum non nocere'...

If that motto applies to the scopes of medicine, it is all the more appropriate when the prescribers are non-doctors³ unaware of the way of functioning of the psyche and of the psychosomatic alternations.

Several elements should be retained...

They are essential and can only make wonder anybody who has minimal knowledge of homoeopathy, advances in science and psychology.

The higher the dilution is, the more it acts at 'subtle' levels...

This is one of the first elements to take into account.

It is important to stress that the more highly diluted it is, the more difficult its effects on the body and psyche may be to detect for someone not accustomed to those minuscule changes showing a modification in the taking into account of the real.

The situation needs to be reassessed in light of that fact.

It is advisable to be careful: if the impact of those dilutions prescribed over 30CH is a recognised fact and concerns marks engraved more or less profoundly from generation to generation (the 'transgenerational' of psychologists and the 'epigenetic' of biologists⁴), it seems obvious...

And yet

Is it really possible to assess the effects and risks inherent in a prescription of very high dilutions⁵?

¹ Second part of an article published on homeopsy.com in October 2019.

² Which none of the homoeopaths using it every day doubts;

³ Or authorised nursing people.

⁴ Using words and references often mentioned at the moment.

⁵ Over 30CH.

One has become more and more aware of the impact of trauma on the behaviour of genes. Reversible at first⁶, it would eventually be engraved sufficiently strongly to bring about their mutation.

Consequently, when there are very high dilutions, is it possible - except when there are tangible elements based on pathophysiology or the mode of psychic functioning⁷, whose correspondences with the diathetic data⁸ we know - to anticipate the chain reaction likely to occur ?

Cannot the information given play as marked a role as an interpretation in psychoanalysis?

This seems to be highly probable...

One should therefore be able to see if it is the right moment and the subject is capable of bearing its effects...

Given in an ill-considered manner, those high dilutions may pose problems at many levels

These should be taken into account all the more when the *pathogénésies* used are of doubtful origin, somewhat problematic in their conclusions or one goes beyond the use of semiology to base one's judgement on what comes from the subject's mental state. The pharmacological action of the substance is worth taking into account even if it is not always assessed at its real value... It remains active whatever the way in which it was analysed and the modalities that were associated with it more or less appropriately...

Several questions are worth posing

They offer food for thought.

Can one really know if the medicine given on doubtful foundations is appropriate to the patient's physical and psychic state?

If it is not, is one always able to find the link between the medicine and the somatic or psychological disruption shown?...

The psychological disorders affecting the behaviour being often attributed to another cause even though they come from the effect of the medicine, this can only be even truer here. The manner in which they appear and the time it takes them to appear are not always detectable, notably by an ill-informed observer.

Anyone who has checked the obvious increase in the reactivity of Silicea or the disappearance of inhibition of Staphysagria after the taking of the medicine not necessarily highly diluted knows...

Is the inappropriate stimulation of a mode of behaviour that has so far been compensated for or tolerated welcome?

⁶ - which the taking of a homoeopathic medicine can probably delay if not suppress but, sometimes, also aggravate by engendering unwelcome imbalance -

⁷ Confirmed by data on psychoanalysis and what comes from what is associated with psychic structures and the possibility that they may express themselves through a certain type of pathology, behaviour or mode of reaction, all this backed up by what comes from the knowledge of diatheses. If what is found here does not constitute, strictly speaking, a proof, the points of reference which those elements constitute may back up a more enlightened choice and avoid a view that is too subjective and based on doubtful foundations.

⁸ Which constitutes a tangible point of reference.

It does not seem to be.

It may sometimes prove to be mistimed.

If, as in the case of the medicines mentioned previously, the taking of Natrum mur 30CH or 10,000K has still detectable effects⁹, can one anticipate the effects of a little-known medicine whose impact is most vague and unpredictable?

Besides, can one consider that the 'case studies' aimed at authenticating the action of the medicine from the mental state are always likely to be sufficiently rigorous and, above all else, reliable to permit to draw conclusions from them that can be used for all, whatever the dilution?

Moreover,

Morbid alternations are well known, but can one always detect them clearly?

It is often experience that leads one to think about what one observes...

One knows the impact of dilutions of Thuja given in an ill-considered manner to someone fragile and unable to put their feelings into words.

The psyche has difficulty 'metabolising' them. It eventually engraves them in the body.

If one is not aware of that possibility, if one only uses points of reference coming from sometimes doubtful *pathogénésies*¹⁰, if the choice of a medicine on the basis of prevailing mental data is made on repertorisation alone, does one know what one may produce?

The question remains all the more as there is not the benefit of hindsight and one needs to be particularly observant and well informed about that problem to be able to detect it.

Does not one run the risk of mobilising, without being aware of it, strength that might unbalance the structure of the organism?

Hahnemann, it must be said again, advised to give only what the subject's disorders needed...

That can only be problematic.

Moreover,

Cannot what is transmitted have an impact on the future?

In view of the effect of the information given on pathogenic marks coming from the past, one may ask oneself the question. Besides certain homoeopaths¹¹, often unicist, have often, rightly, raised the issue.

Cannot unwelcome information be transmitted to the following generations and potentially carry disorders with a risk of emergence in a delayed¹² and encrypted manner?

In the same way as the role of a pathogenic piece of information - such as that carried by 'That happened' of a death that was not communicated to the descendants¹³ - was observed

⁹ - not always well tolerated with, sometimes, a momentary aggravation showing the activity of the dilution.

¹⁰ - often vague, lacking rigour in their carrying out or else obviously biased towards the theorisation one wants to back up;

¹¹ notably G. Vithoukas, T. P. Paschero.

¹² As said in the Bible, 'The fathers have eaten sour grapes, and the children's teeth are set on edge.'

¹³ To such an extent that it was fixed in time and generated depression, bulimia, anorexia and drug addiction in the following generations. Cf. Suzanne Ginestet-Delbreil, *La terreur de penser*, Editions Diabase, Entendre l'Archaïque.

in psychiatry, cannot an unwelcome piece of information in a subject that is fragile or prone to distortions of all types have the same impact and affect them or their descendants¹⁴?...

Very high dilutions obviously have influence on the behaviour and certain risks of morbidity:

Anyone who has assessed their effects¹⁵ on themselves can confirm this even more strongly.

Sometimes dormant, their manifestations will often appear during facilitating situations.

One knows the role, in many cases of cancer¹⁶, of the confrontation with the 'unthinkable/unhealable' and the 'noncontrollable' in the triggering of the disease, with the wounded pride¹⁷ linked to it¹⁸. Not incorporated in the previous generation and transmitted by the mother, that 'pathogenic piece of information' is actualised in a somatised form.

It appears if the subject is confronted with a situation which the psychic structure finds impossible to handle.

The anxiety and emotion aroused are such that, since they are impossible to be perceived and therefore liberated into words, the useless anger of wounded pride that is linked to them is turned against oneself. The 'madness' carried by emotions that overwhelms the psychic world becomes cellular 'madness'...

That can only generate many reflections...

Is not one entitled to think that, if one acts by administering a very highly diluted medicine without taking into account what the subject and their family circle are able to 'metabolise', one may mobilise in an inappropriate manner information that had been dormant in the previous generations¹⁹ and generate unbalance?

And is it not likely to affect the subject and their environment?

The question remains.

In conclusion

It is necessary to be careful and to ask oneself questions before writing any prescription meant to be enlightened and appropriate.

The homoeopathic medicine is far from having no effects; those who use it and prescribe it know very well... Particularly when little known and prescribed from *pathogénésies* that are doubtful or based on broad analogies without any reference to those current in the scientific world and the strict similitude advocated by Hahnemann - and later by Kent -, it should not be administered in a rash manner...

It may prove to be all the more dangerous as, prescribed at very high dilutions, it generates effects which may not be detected but may be likely to become part of the elements transmitted...

¹⁴ Certain homoeopaths, who are not psychiatrists though, notably George Vithoukas - after Paschero -, have raised the issue.

¹⁵ Which Hahnemann encouraged to do.

¹⁶ - the remarks made during psychoanalysis by subjects suffering from it show this - cf. *Du trouble mélancolique au trouble cancéreux*.

¹⁷ 'Loss' and what relates to 'Emptiness' - in whatever form - cannot be symbolised and therefore accepted.

¹⁸ - as what is observed in melancholic depression.

¹⁹ - not without manifesting itself in one form or another; but can one detect it? -

It therefore seems that under no circumstances should it be forgotten and, notably with many newly introduced medicines, it should be taken into account.

The Hahnemannian discipline is complex. It still holds secrets.

Consequently, not only should the confusion of words and vagueness of certain concepts be dispelled and questioned, but what comes from observation and day-to-day clinical medicine should be observed carefully.²⁰

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²⁰ Translated by Pascale Tempka