

I - TO REMAIN IN HAHNEMANNIAN RIGOUR¹.

After pieces of work and writing, publications or various teachings, several quite simple suggestions might contribute to continuing to follow the original teachings and a form of faithfulness to what constitutes their basis.

They can be summarised in several points which delineate what represents the characteristic of the Hahnemannian approach as well as what, ill transmitted or misinterpreted, can be a source of vagueness or confusion.

There are several elements², which can combine into several rules :

First rule : to be careful not to run the risk of suggesting that identical = similar...

The words refer to two totally different ways of thinking.

Second rule : to qualify any suggestion based on new data³...

To bear in mind the permanent challenging of every scientific publication and the fact that what is advanced is often done so as a hypothesis...

Third rule : to explain the therapeutic strategy used...

To back the reason for the choice of dilutions according to what is intended.

This will make it possible not only to understand what is trying to be organised but also to eliminate certain assertions which do not always prove accurate⁴.

Fourth rule : to avoid certain problematic 'shortcuts'...

To try to make signs showing the psychic functioning tally with a marked psychiatric pathology is in itself a source of confusion.

If it is necessary⁵ to establish a diagnosis/reference point, it is important to bear in mind that, given the complexity of the human psyche and the number of usable factors⁶, it will only be relative⁷.

To suggest that it is possible to draw a close analogy between the characteristic signs of a mental illness and those of a 'pathogénésie' is problematic.

Only the signs presented by the subject who bears the marks of it can be brought to a similitude to a pathogenetic picture : one cannot compare the pathognomonic signs of a marked illness with the modalities of the latter.

To associate unqualifiedly a⁸ medicine with a mental illness is not appropriate...

¹ First part of an article entitled *Not to be more rigorous in homoeopathy is risky...* and published on Homeopsy.com, May 2016.

² They will be developed in the first bottom footnote of the second part of the above-mentioned article.

³ Quantum physics in the case of homoeopathy and epigenetics to explain ADD are obvious illustrations of this...

⁴ For instance, disorder connected with the psyche equals high dilution.

⁵ In homoeopathy as well as in allopathy.

⁶ Neurobiological, structural, behaviouristic, symptomatological and psychological approaches, mental pictures...

⁷ The decried aspect of the DSM classification used in psychiatry is a patent example of this.

⁸ Allopathic or homoeopathic

This has occurred and can still occur in allopathy but it proves even truer in homoeopathy...

If certain symptoms can be modified, relieved or moved, given its chronic aspect, no mental illness can be automatically associated with a specific treatment⁹ - or cured in the fundamental sense of the word.

Fifth rule : to qualify the results advanced and adopt rigorous assessment criteria.

It seems therefore important to :

Qualify the term 'cure'...

Explain what, among the characteristic symptoms, has disappeared : this is the only way of avoiding to maintain vagueness detrimental to the credibility of what has been advanced or make assertions that might prove unconfirmed.

This is not unimportant in a time when homoeopathy can play a deserved role as supportive treatment for certain pathologies or as a palliative to certain deficiencies within 'classic' therapies...

Explain there is a good response to the treatment, but not suggest this is the effect of the medicine alone...

Either in allopathy or homoeopathy, it is essential to assess correctly the role and actual impact of the latter as time passes and in various contexts...

Even though this is only an invitation to think about it, this is what, if not assessed correctly, might engender every danger...

Those hazards, which are worth spotting and analysing, seem avoidable.

They make it possible, if one is careful, not only to be credible but also to remain discerning as regards what is proposed to clinical experiment, certain reports of which, presented for reflection and related to the future, make it necessary to look at what comes from them in a more clear-sighted way.

To be continued¹⁰...

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Montpellier, May 2016.

Translated by Pascale Tempka.

⁹ It is this problem which, at some point during his career, led Hahnemann to revise the concept of the single remedy and advance the suggestion that it was possible, in the case of a chronic disorder, not to confine oneself to prescribe one remedy but to alternate it with others if necessary - which differentiates his position from Kent's for whom, as a symbol of the original illness inherent in original sin responsible for all illnesses, the prescription of the single remedy had a totally different meaning.

¹⁰ See, on homeopsy.com, the development of the first part in the article entitled *Rigour is necessary in homoeopathy*. Homeopsy site. May 2016.