

## **IV - The legacy of the past : third stage<sup>1</sup>...**

### **Various trends...**

***If they have a prevailing Kentian basis, they herald certain changes starting in the United States.***

Introduced by the Kentian theory of 'original sin', they, too, advocate the looking, in the mental state, for the signs reflecting it in order to permit, through the appropriate medicine, to sort out the problem of all the resulting illnesses.

If the medicine in similitude to the basic illness, which reflects the original disruption (the *simillimum* for the subject), is not found, the *simillimum* for the disorder (its *simile*) can be given. Although it is Kent's point of view, it is not ideal: there is a risk that the real disorder will not be attained, the symptoms may be modified if not displaced, unpleasant consequences difficult to assess might be engendered... The way of getting to determine the medicine more easily needs to be found.

***The need to determine the mental signs therefore entails the use of various strategies.***

As all means prove to be worth using to find the appropriate substance, comparisons of dreams, analogies, classifications of all types and favouring data from the repertoires are used.

New *pathogénésies* and clinical cases to justify the value of the medicine prove to be essential - hence the greater increase in their number.

***There have appeared a substantial modification of Hahnemann's approach and the beginning of the distortion of Kent's points of view.***

In fact, if all the approaches that followed have prided themselves on being faithful to Hahnemann's approach, they have applied Kent's teachings: centring of research on the mental state, hardening about the 'single medicine', banishment of any other perspective practically considered heretical, refusal of any homoeopathic prescription not following from the prevailing looking for 'mental' signs... A form of theoretical hardening has appeared...

Nothing, not even allopathy or placebos - sometimes said to be potentially dangerous<sup>2</sup> -, rather than a mistake about the medicine. All the risks are stated in great detail, increasing both fear - even in pluralists - and confusion.

***Various ways of prescribing have appeared...***

According to the schools, one medicine renewed - or changed - a long time afterwards - or quickly - and various potencies are recommended...

***Different trends have appeared***

Some apply similitude according to Hahnemann and Kent while others move away from it.

***Broad analogies underlain by various postulates have appeared***

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<sup>1</sup> Fourth section of a seven-part article entitled, *Entre héritage du passé et modernisme... L'homéopathie*, Geneviève Ziegel, December 2019, published on homeopsy.com

<sup>2</sup> T. P. Paschero

### ***In South America:***

Analogies of various types have supplanted similitude.

- Proceso Sanchez Ortega (Mexico), Tomas Pablo Paschero<sup>3</sup> (Argentina), in whose opinion body and mind are indissociable - moreover, they were Jungians -, used the stages of the psychic development as points of reference concerning the choice of the medicine.

- Alfonso Masi Elizalde (Argentina) used Thomistic classifications to list the modalities of original sin with the medicines corresponding to them.

### ***In India:***

Among many schools, the Premalone school ('Prescribing', 'Mind', 'Alone') was clearly a Kentian one<sup>4</sup>.

### ***In France:***

Two unicist schools first developed:

#### *Pierre Schmidt's:*

More similar to Kent's in its mode of practice, it seemed to be rather vague about the reason for the single medicine<sup>5</sup> but, as the Hahnemannian similitude was totally respected by it, the dialogue and meetings with pluralists<sup>6</sup> went on.

However, even though Pierre Schmidt clearly referred to Kent in his work<sup>7</sup>, it was the faithfulness to the 5<sup>th</sup> and not - posthumous - 6<sup>th</sup> version of *The Organon* that seemed to be officially expressed<sup>8</sup> to defend the choice of the single remedy.

And yet, it must be said again, given the problem posed by chronic illnesses and the disorders attributed to the diathetic components of the patient, Hahnemann had said that several medicines given alternately were possible<sup>9</sup>.

Is this theoretical explanation due to the impact of the Freudian points of view<sup>10</sup> prevailing in France, where Jung is still, even today, badly accepted? It is not possible to answer this question. However, it is possible to advance that the introduction of the spiritual dimension in the Jungian 'depth psychology' most probably played a role in explaining that sort of relegation to the background of the Kentian point of view on the part of original sin in the choice of the single medicine even though P. Schmidt did not hide his interest in Kent.

#### *Simonne Fayeton's (AFADH):*

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<sup>3</sup> (1904-1986)

<sup>4</sup> It seems that it has disappeared?

<sup>5</sup> Which would now seem to become less pronounced with the growing importance of the new theorisations.

<sup>6</sup> They were at the root of the creation of the INHF (*Institut National Homéopathique Français*) which, before its current - totally unicist - orientation, brought together homoeopaths from different - pluralistic and unicist - trends to 'join forces' against the attacks of which they were the object.

<sup>7</sup> Like Kent in his reference to original sin and even Hahnemann in his beliefs, which he never mixed with his tests but mentioned when talking about the looking at the patient.

<sup>8</sup> But (in 1973... 1993... and even later) the information and translations were probably not as widely spread as they are today and working parties were less open to the outside world...

<sup>9</sup> Cf. 6<sup>th</sup> version of *The Organon*.

<sup>10</sup> In which the issue of belief is also a point to be analysed although Freud was not talkative concerning it except by saying that this dimension existed in all human beings but it was not the point in which he was more particularly interested.

A follower of Masi, she claims that she is very officially a follower of Kent, does not apply similitude according to Hahnemann and Kent but uses analogies and classifications.

***In their current variants of unicism<sup>11</sup>, the French unicist schools reflect that fact...***

Perhaps it is a characteristic of the unicist homoeopathy of this country to see the different trends (Dauphiné Savoie, Simonne Fayeton, INHF) gradually appear and integrate into it more or less happily or easily.

***In Belgium***, there is 'Hahnemannian Unicism'... The psyche is not seen as a focal point of the prescription but, an element referring somewhat to Kent, the unicity of body and mind is mentioned to explain the disruption of vital energy.

***In Greece***, George Vithoulkas's school is quite similar to Pierre Schmidt's (Dauphiné Savoie) but it lays stress on the risk incurred if the medicine prescribed is not appropriate.

But, gradually, ...

***The spreading to other countries has engendered the appearance of various trends:***

The concept of 'original sin' has become less marked in favour of that of spiritual illness and has taken on a universal quality; the break with natural laws is mentioned.

***The misappreciation of the issue is the cause of much mixing up and inevitable confusions.***

They are understandable given the gradual and little clarified aspect of the changes that have occurred...

***And yet, points of view spread and become clear...***

It must be stressed that the increase in the number of possibilities of translation, the diffusion of knowledge, the subtler understanding of what happens permit to have access to information going beyond the scope of organisations that had been exclusive until now...

As Doctor Philippe Servais - a unicist - wrote in substance, they illustrate 'deux tendances inconscientes qui ont toujours cohabité dans l'histoire de l'homéopathie' ; à savoir 'celle qui consiste à garder le cap d'une compréhension profonde de la vraie similitude et devient par là même, impossible à être déliée de subjectivité, donc inanalysable par le biais d'une approche scientifique' ; et 'celle qui consiste à vouloir lui échapper, pour réintégrer une pensée plus scientiste'<sup>12</sup> ...<sup>13</sup>

To be continued...

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<sup>11</sup> Standard (Dauphiné Savoie School), Masist AFADH (S. Fayeton), INHF which, after bringing together pluralists and unicists, now accepts the data coming from the new theorisations (homoeotherapy)...

<sup>12</sup> 'two unconscious trends that have always coexisted in the history of homoeopathy', that is to say, 'that which consists in sticking to the profound understanding of true similitude and thus becomes impossible to be without subjectivity and therefore unanalysable through a scientific approach' and 'that which consists in wanting to avoid it to return to a more scientific thought'... (Cf. *Rêves et cauchemars au coeur de l'homéopathie*, text by Dr Philippe Servais taken from <http://www.homeobel.org/?page=article&id=37>)

<sup>13</sup> Translated by Pascale Tempka