

VI - The legacy of the past... Fourth stage¹ (2) The different types of homoeotherapy.

Several faces of those 'modern' approaches are in the forefront.

Jan Scholten

The signs shown by the patient are put opposite characteristics associated with different classes of products found in nature.

This can be done with a group of metals to which characteristics from different sources are attributed as well as with a group of plants.

Intuition, deductions, classifications and approaches of all types are widely used.

- What is taken from the knowledge of the families of minerals such as presented in Mendeleev's Table is 'called to for help'.

The columns of the table would indicate the 'stage in life' of the subject;

The rows, the place of their essential problems.

The difficulties calling to mind something related to childhood would be linked to carbon; those affecting human relations, to silica; those concerning work and adulthood, to iron, etc.

The place where columns and rows cross would indicate the blocking point which the medicine is likely to make disappear. That selection would need to be later confirmed by the other symptoms shown and is recognised as becoming most complex for compound products.

- The most modern botanical and animal phylogenetic classifications with which medicines are put in correspondence are also 'called to for support'.

- Moreover, the analogic comparison is not necessarily done with a plant but with a family of plants. The *pathogénésie* carried out on one or some of that family² will do and be used as a point of reference for all of them. (Sic!)

It must be stressed that the bases introduced here with the aim of using them analogically are most debatable and it must also be said again that plants with a similar name do not always belong to the same family. This can only make the application of that mode of approach more difficult for anyone who is not aware of it³.

Clinical cases represented by some of the patients on whom the medicine was tested from the data coming from the pathogenetic test are recounted;

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

² Does an ordinary bolete necessarily have the same properties and pathogenetic incidences as the Devil's Bolete? Since *Zea mais* does not have either the same indications or the same *pathogénésie* as *Zea italica*, one can ask oneself the question.

³ That new mode of classification that uses the structure of a group of plants (scent, types of leaves, etc.) instead of its sexed mode is recent and still little known.

They are, in a way, used as proof to confirm the rightness of what came from the *pathogénésie*.

What comes from those announcements is then used by other trends with the same theoretical basis.

According to the country from which they come and their basic training, their leader adds to it certain elements or their personal touch.

Rajan Sankaran

On the lookout for the mental signs likely to lead to the simillimum, he looks for the 'Sensation'⁴ which distorts the view of the subject.

In order to grasp the personal manner in which the latter experiences what is outside them, he analyses, among 7 pre-established levels⁵, the level of experience where the block may be. He then observes the words, gestures and modes of behaviour reflecting their inner world. Each level would correspond to stages of more and more advanced age which can be detected in the way people comprehend or experience their everyday lives.

In order to do that, analogies of various types are used.

The mirroring of signs linked to the psyche and various elements and classifications from different sources⁶ leads to the appropriate medicine.

Given that the human being carries the more or less pronounced marks of each kingdom with which characteristics are associated, the pre-eminence of the world of feelings and emotion will require a medicine from the vegetable world; that of strength and instincts, a medicine from the animal world; the need for structure and stability will require a substance from the mineral world.

Massimo Mangialavori's Italian trend

It is similar to it and is founded on the same bases.

The medicine that seems to be the most appropriate is always clinically tested before any validation of the pathogenetic profile and certain *pathogénésies* are revisited.

The Hahnemannian similitude is 'misused'...

The broader and broader analogies that even embrace the symbolic plane, the backing up of the validity of *pathogénésies* with clinical cases, the psychosomatic rather than somatopsychic view of all those approaches reflect a different perspective...

⁴ According to R. Sankaran, that 'sensation' represents the filter through which everyone experiences the real - which becomes their real. It is the result, given what they inherited from those who came before them, of what everyone has carried since the dawn of time and also of the marks which the evolutionary going through the different kingdoms has generated - with key words for each kingdom.

⁵ Beyond the apparent rigour of the classifications, many elements of the methodology presented here seem to be all the more complex and vague as they are gradually accompanied by additions of different types. Consequently, the latter are all the more difficult to grasp as they make the method more complex and confuse its comprehension to anyone who wants to have a clearer understanding of it or looks at it from outside. This is the reason why we have only given an overall description of the essential elements without going into detail given the difficulty of reporting, without distorting their essence, the different ways used to discover the medicine.

⁶ Notably J. Scholten.

It does not seem to be scientifically tenable⁷.

There is a real danger.

If the confusion persists and a clear differentiation, permitting to distinguish the approaches using the Hahnemannian similitude from those using analogies of all types, is not made, there is a serious risk of endangering the whole and undermining still more the credibility of an approach that has spread and developed as knowledge increased for over two hundred years and has proved that it has possibilities.

A boundary must be marked.

It is no longer a matter of drawing it between the supporters of unicist homoeopathy⁸ and those of pluralistic homoeopathy but rather between the approaches applying similitude and those using analogies, considering that the only thing all of them have in common is, like anthroposophy, the use of diluted, dynamised products.

In fact,

The marks of the past have now an impact on the future

They have spread to many countries...

If, as already happened at the time of Hahnemann, demonstrations against homoeopathy are regularly organised by scientific groups underlain by various interests, now affecting many countries (England, France, Australia, Austria and, recently, Spain), it seems that the situation is not the same according to the countries where it is gradually introduced. Asia, Africa, India, China and some European countries do not manifest the same ostracism and, in some of them, 'homoeopathy' in all its forms is more accepted - it is practised by many non-doctors.

On the other hand, as a consequence of the Kentian impact and the prevailing scientific way of thinking, that approach is put in the dock: in Canada, whereas it was fashionable, doctors have been forbidden to practise it⁹ for over twenty years even though, in Brazil, Kentian and post-Kentian unicistism is becoming less predominant in doctors.

⁷ If the choice of the practitioners - doctors or not - who seem to confirm and praise its beneficial effects is not called into question and if only time will tell if their methodology is valid, it is important to say it given the repeated attacks on homoeopathy. Clarification has to be made so that medical practitioners - or those authorised to prescribe homoeopathy - may make their choice with full knowledge of the facts and, if necessary, defend themselves against outside threats and find the means to define homoeopathy such as it was initially.

⁸ - even if, at least in France, despite the putting forward of the 5th version of *The Organon*, the stamp of Kent can be detected. One should keep in mind that, unlike the Masist trend of S. Fayeton which uses analogic comparisons, the French trend of Pierre Schmidt remained the most faithful to Kent as regards the points on which the latter remained faithful to Hahnemann by applying similitude. And it was what made it possible for the two approaches to be in contact while retaining their characteristics.

⁹ Which may explain why the word 'homoeotherapy' has now been removed from the vocabulary: associated with that of 'parahomoeopathic therapy' - which may lessen its 'trustworthy' aspect - and that of 'new homoeopathy', it first appeared there but, given that its introduction into the practice of homoeopathy has obviously had the same deleterious effects as Kent's theorisation in the United States, with doctors being strictly forbidden to practise homoeopathy, non-doctors have, in order to retain a form of credibility, most probably wanted to continue to practise under the denomination of 'homoeopathy'. (?) That seems to be most likely.

As regards Europe, there are risks at different levels

The low cost of the medicines and the resulting economic interest engender either its revival and development or the desire to see it rejected for good from the scope of medicine.

Here the difficulty is about several issues

The oversimplification of the concepts that it propagates and, as it was still very common in the seventies, the restriction of its use to low or medium potencies - not debatable since lower than Avogadro's constant - would deprive it of part of its interest.

Conversely, growing complexity, such as that put in place by the introduction of Kentian points of view and the drifts that followed, is not more favourable to its spreading or maintaining within the scope of medical practice.

The desire to give scientific proof impossible to provide given the requirements of the current paradigm, added to what has confused the initial face of homoeopathy for a few years does not make the issue simpler either.

The diffusion of information beyond the scope within which it can be grasped in its right meaning, the false simplicity introduced by classifications, the increased and predominant use of the repertory - which agrees with a time when multiple-choice questions and medical protocols are 'fashionable' -, the lack of diagnosis in due form are dangerous in many respects - all the more so as erroneous information, inconsistencies and contradictions, propagated without any filter on the Net, are visible and transmitted...

It is therefore appropriate to be vigilant

All the more so as homoeopathy has modern aspects that are still little known, even in the world of homoeopathy.

Its use in psychiatry and its new presence in many specialised medical fields show that it has many possibilities which can be useful for care and knowledge, even in allopathy: they make a breach in little-explored fields and are therefore worth not only supporting but also extending...¹⁰

To be continued...

Doctor Geneviève Ziegel

¹⁰ Translated by Pascale Tempka