

## DEBATE

# The biopsychosocial model and its potential for a new theory of homeopathy<sup>☆</sup>

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**Since the nineteenth century the theory of conventional medicine has been developed in close alignment with the mechanistic paradigm of natural sciences. Only in the twentieth century occasional attempts were made to (re)introduce the 'subject' into medical theory, as by Thure von Uexküll (1908–2004) who elaborated the so-called biopsychosocial model of the human being, trying to understand the patient as a unit of organic, mental, and social dimensions of life. Although widely neglected by conventional medicine, it is one of the most coherent, significant, and up-to-date models of medicine at present. Being torn between strict adherence to Hahnemann's original conceptualization and alienation caused by contemporary scientific criticism, homeopathy today still lacks a generally accepted, consistent, and definitive theory which would explain in scientific terms its strength, peculiarity, and principles without relapsing into biomedical reductionism. The biopsychosocial model of the human being implies great potential for a new theory of homeopathy, as may be demonstrated with some typical examples. *Homeopathy* (2012) 101, 121–128.**

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## Introduction

To suggest an option for a new theory of medicine does not necessarily mean to invalidate all previous or existing ones, since their relationship need not to be exclusivist, but may be inclusivist instead. A new theory may just cover a broader range of dimensions, leaving the validity of models for more limited approaches unimpaired. Even though Einstein's theory progressed beyond Newton's physics, the latter remained relevant and indispensable up to the present.

First of all we must affirm that modern natural science has and will keep its legitimate state as a mighty tool for solving problems in many fields and aspects of our lives. We all benefit from scientific progress, from electric light

to modern means of transportation and communication. And we are aware of the many prestigious discoveries in cosmology and atomic physics, through space exploration or particle accelerators. The critical point is, however, that on closer inspection many achievements and applications of modern science turn out to be not only advantageous for humanity, but also involve risks and perils, as, for example, with nuclear energy.

Conventional modern medicine faces the same problem, since it relies upon the very same principles and methods as neighboring fields of science. Of course it has distinguished domains of competence and excellence, for example epidemiology, bacteriology, toxicology, etc. It is strong and convincing wherever medical problems can be approached by way of generalization, quantification, and statistical recording. To this end, conventional medical scientists confine themselves to the same reductionist method as used by physicists or chemists: searching for generally accepted natural laws, preferably in terms of causality, mechanism, economics, and efficiency.

They try to explore diseases, effects of medicines, and correlations between parts of the body, as if these were neutral objects or entities, existing independently of a particular context. Ensnared by spectacular successes in controlling

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and commanding life-threatening conditions of the organism and in measuring and manipulating ever smaller structures and functions of cells, genes, and molecules, indeed most scientists, technology writers, and lay persons today are highly tempted to conclude that probably everything in medicine can be explored in such a manner — if not right away, then at least some day in the future.

## Conventional medical science

This widespread attitude of positivism of science, can however be challenged in the field of medicine in a multitude of ways and in fact proves to be untenable, if examined systematically. With the exception of some diseases which can be treated effectively or have been eradicated or whose incidence has greatly declined, many human complaints, especially chronic ailments, can only be palliated, not cured. While for the former the conventional biomedical paradigm is sufficient and adequate, successful treatment of the latter, if possible at all, may need not only more research within customary paths, but new concepts and approaches based on different principles. For the healing of illnesses not satisfactorily managed by conventional medicine, the following reflections and suggestions might be useful.

Putting the criticisms and objections of the reductionist approach in a nutshell, we might say, modern science suffers from amnesia of its own genesis, an unawareness of its blind spot, or an illusion of its autonomy. Scientists are prone to forget that what they are doing is much more than just recording measured data. This can be, and is done, by robots and computers as well. Yet science is a human activity which presupposes human subjects, who are never confined to passive absorption and adaptation to allegedly objective external conditions, but are always also constructing and interpreting the world around themselves. Conducting science, therefore, is not a neutral innocuous undertaking, but inevitably has practical and ethical implications.<sup>1</sup>

Philosophically speaking, human knowledge is always reliant on underlying notions, concepts, and paradigms, which are brought into play by human minds. But at the same time human knowledge is always in danger of being misled, distorted, or adulterated by the notions, concepts, and paradigms employed. Science, especially modern science which emerged some 300 years ago and has dominated conventional medicine for 150 years, traditionally fixates on a canon of methodological rules and laws. Rather than constantly considering their scope and limits, modern medicine tries to explain as much as possible by means of reduction, subsumption, and generalization.

On the other hand, philosophy, poetry, and art, as well as history and theory of science attempt to rebuff, oppose, and disapprove the superiority and exclusiveness of predominant paradigms and mindsets. They usually try to open up new spaces, create new categories, or claim new liberties to enable the appearance of phenomena which otherwise would not emerge on the horizon and become visible or perceptible at all.

The topic of amnesia of its own genesis on the part of modern science is not a merely theoretical issue, but is of crucial practical relevance. This shortcoming is the origin of many of the problems medicine is facing at present. Modern natural scientists who, for example, are trying to explore the memory of human body and soul, are bound by the scientific method to look for putative objective entities, such as biomolecular engrams, chemical transmitter substances, neuronal flows, brain structures, or the like. They take a distant look at someone else's body. But this is an exoteric view, from outside, the attitude of an allegedly neutral observer on an allegedly separate object.<sup>2</sup> The inner dimension of what we call memory, its function, meaning, and dynamics, however, cannot be said to be understood by merely enumerating its necessary physical and chemical conditions. At this point, the category of subjectivity, long-neglected by scientific medicine, claims its legitimate constitutional place in medical theory.

## Introducing the subject into medicine

During the last century, significant attempts have been made to (re)introduce the 'subject' into biology and medicine.<sup>3,4</sup> So far, however, there is no evidence that this project has unsettled the conventional model of mainstream medicine to any considerable extent. Certainly, (re)introducing the 'subject' into medicine never meant just adding another term to a traditional set of tools and concepts, but rather a paradigmatic change, that is to say, a deconstruction and reconstruction of the fundamental scientific framework.

For centuries, in the wake of Descartes' definition of animals as automats<sup>5</sup> and De La Mettrie's reification of human beings as machines,<sup>6</sup> even the so-called life sciences applied the same criteria of scientific research as physicists or chemists. The latter, however, are dealing with dead objects, such as masses, forces, pressures, etc., while the former ought to consider the phenomena of the living. Generally speaking, every branch of scientists tried to reduce the whole world, the animated as well as the inanimate, to mechanical, physical, chemical, mathematical, or statistical laws and causal connections. This had, and still has, a tremendous impact on modern medicine, on our concept of the human being, and on homeopathy.

The ordinary view of man today is determined by the way conventional scientific medicine examines his parts and functions. Accordingly, human beings are deemed to be complicated mechanisms, health is deemed to be their regular and efficient function, and disease is deemed to be their failure, that can be objectified by measured values. As a corollary of the scientific method, drug effects are deemed to be causal impacts on the body, such as chemical reaction, physical suppression, or material substitution. To come to the point, in the conventional scientific approach no difference is made in principle between the causality of drug action *in vitro* and *in vivo*. The substance is deemed to execute its determined effect with or without the subject of the patient.

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