

Should we and can we treat serious diseases with homeopathy?

Reflections and observations



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SUMMARY

The twofold question "Should and can serious diseases be treated by homeopathy?" raises three further questions: that of the definition of so-called serious illnesses, that of ethics and finally that of the indication of homeopathy in these therapeutic cases. To illustrate his point, the author uses three observations of patients with serious diseases having received a homeopathic treatment during their medical follow-up.

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RÉSUMÉ

La double interrogation « Doit-on et peut-on soigner par homéopathie des maladies graves ? » soulève trois questions : celle de la définition des maladies dites graves, celle de l'éthique et enfin celle de l'indication de l'homéopathie dans ces cas thérapeutiques. Pour illustrer son propos, l'auteur s'appuie sur trois observations de patients ayant été affectés de pathologies graves et ayant reçu un traitement homéopatique lors de leur suivi médical.

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INTRODUCTION

What definition are we giving to "serious diseases"? Is it the functional prognosis which is involved? Is it the psychological prognosis and/or the degree of severity of a life-threatening condition which determine the seriousness and the possibility of treatment, or is there another consideration such as its relationship with the quality of life or inevitable destiny?

Whatever our personal definition, we have in France a medical social consensus defined by the concept of "Long Term Disease" [LTD] (ALD 30, *Box 1*), recognised and supported by the National Insurance System. They are affections the severity and/or chronicity of which require prolonged and particularly costly treatment, and for which patient financial contribution are removed.

Formulas complete the definition of LTD 30 [1] encompassing:

- the first so-called "off-list" (ALD 31) affections, that is to say, those severe diseases

not on the first list (ALD 30) needing a prolonged treatment for a foreseeable period of over six months and particularly expensive therapy and;

- the second so-called "off list" affections (ALD 32), resulting from several ailments causing a disabling pathology, requiring ongoing care for a foreseeable period of over six months.

It is from this fairly wide choice that I have chosen to illustrate my argument with 3 clinical observations.

The homeopathic medical commitment to treat serious diseases is inherent in the creation of homeopathy. Samuel Hahnemann and his successors treated all the conditions that were entrusted to them. The significant historical event is that of the cholera outbreak in the nineteenth century which affected part of Europe, during which homeopathic physicians "who refused, here, as in any other circumstances to bleed patients, as was prescribed to all and sundry by academic medicine, were

KEYWORDS

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MOTS CLÉS

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Insuffisance rénale
Maladies graves
Soins de support
homéopatique

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Box 1

ALD 30 list defined by the Health Insurance in France

List (by decree) of disorders with prolonged treatment and particularly costly therapy:

- Disabling stroke
- Renal insufficiency and other chronic cytopenias
- Chronic arterial disease with ischemic manifestations
- Complicated Bilharzia
- Severe heart failure, severe arrhythmias, severe valvular heart disease, severe congenital heart disease
- Active chronic liver disease and cirrhosis
- Severe primary immunodeficiency requiring prolonged treatment, human immunodeficiency (HIV) infection
- Type 1 and type 2 diabetes
- Severe forms of neurological and muscular disorders (including myopathy), severe epilepsy
- Hemoglobinopathies, hemolysis, constitutional chronic and acquired severe
- Hemophilia and severe hemostasis constitutional disorders
- Coronary artery disease
- Severe chronic respiratory insufficiency
- Alzheimer's disease and other dementias
- Parkinson's disease
- Hereditary metabolic diseases requiring specialised prolonged treatment
- Cystic fibrosis
- Severe chronic nephropathy and primitive nephrotic syndrome
- Paraplegia
- Vasculitis, systemic lupus erythematosus, systemic sclerosis
- Active rheumatoid arthritis
- Long-term psychiatric disorders
- Ulcerative colitis and active Crohn's disease
- Multiple sclerosis
- Active structural idiopathic scoliosis (whose angle is equal to or greater than 25 degrees) until spinal maturation
- Severe spondylitis
- Organ transplant follow-up
- Active tuberculosis, leprosy
- Malignant tumour, malignant lymphatic or hematopoietic tissue disease

Source: <http://www.ameli.fr>. Accessed 23 June 2016.

much more successful than allopathic physicians." [2]. The homeopathic medicines prescribed following the simillimum principle were *Camphora*, *Cuprum metallicum* and *Veratrum album*, as well as *Arsenicum album*, *China* and *Acidum phosphoricum* [3].

In terms of our contemporary practice, the international conference held in Paris in 2014, and of which the National Federation of French Homeopathic Medical Societies was one of the organizers, clearly showed the presence of Homeopathy in a

number of countries, and what is more for the treatment of severe pathologies with a serious prognosis [4].

In addition, since its inception 7 years ago, *La Revue d'Homéopathie*, following on from previous homeopathic reviews, has been keen to give an account of the treatment by homeopath physicians of patients affected by serious diseases.

We can quote articles on homeopathic treatments, for example, in alphabetical order, for: algoneurodystrophies, asthma, autism, benign prostate hypertrophy, bilharzia, burn-out, cancer supportive care, cardiovascular problems, chronic obstructive broncho-pneumonopathy, disseminated lupus, facial vascular pain, macular degeneration, monoclonal gammopathy, lipid nephrosis, mastoiditis, multiple sclerosis, pre-term labour osteoporosis, severe gastroesophageal reflux, shingles, tuberculosis, Werdnig-Hoffmann, etc.

However, every doctor is responsible for his or her prescription and must apply the code of ethics as derived from the Public Health Code, as a mark of respect vis-a-vis the examined patient, and to remain within the legal framework. We know Article 33 [5], which says that "The physician must always make his diagnosis with the greatest care, taking the necessary time, with the help as far as possible of the most appropriate scientific methods and, if necessary, other relevant supporting information." This is complemented by Article 32 [6]: "Once he has agreed to answer a request for treatment, the physician agrees to personally ensure a conscientious and dedicated patient care, based on the known scientific data if necessary, calling upon appropriate and competent third parties". But, to us homeopaths, freedom of prescription with the necessary caution is enshrined in Article 8. [7]: "Within the limits set by law and given the known scientific data, the doctor is free to prescribe what will seem the most appropriate given the patients' circumstances. He must, without neglecting its moral duty to assist, limit his prescriptions and actions to what is necessary to the quality, safety and efficacy of the treatment. He should consider the advantages, disadvantages and consequences of various investigations and possible treatments." Having answered the three questions (definition of serious diseases, ability to treat them with homeopathy, and conditions in which we do it), we can now turn to our observations.

THUNDER AND RETURN TO CALM

Nicole, born in 1963, has been treating patients for almost thirty years with homeopathy, with or without other complementary therapies. She expresses her choice as follows: "To choose that type of therapy means listening to one's body, detecting unusual pains, noting them, being able to describe them so that doctors can find the right remedy. To choose homeopathy means to be attentive to oneself, to combine body and mind..." likewise, she believes "in the therapeutic alliance and the importance of trust in one's doctor to overcome such trials". In 2013, while giving a lecture to students, she is the victim of a sensory motor deficit in the left side of the body, following a right cerebellar infarct on dissection of the right vertebral artery. She says of her ordeal: "The day of my stroke, I was very exhausted; I told my colleague that I wished to leave in the afternoon to rest, which is not my usual practice. I told my students: "Listen to me, this is very serious, I feel a hemiplegia on the left side, I have a pain in the neck which is going up into my head." I explain this very calmly, I continue: "Call an ambulance straight away, this is very serious." I fall down, I

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