

EDUCATION AND DEBATE

Models for explaining the homeopathic healing process: *a historical and critical account of principles central to homeopathy*

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The success of Homeopathy in curing many diseases has been a serious challenge to science. Nineteenth century explanations for the healing process of Homeopathy cannot withstand the scrutiny of modern science and need to be abandoned or modified. The surviving propositions are discussed. A biocybernetic model with multilevels of electromagnetic feedback loops offers a hope of explaining the healing process. This model, its explanation of the healing process and experimental support are elaborated. *Homeopathy* (2005) 94, 44–48.

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Introduction

During Hahnemann's creative lifetime (1796–1843), homeopathy evolved on the basis of two experimental findings: pathogenetic trials on healthy subjects and their subsequent application on the basis of similitude to disease. Homeopathy became used worldwide rather rapidly thanks to its success in three great epidemics: typhus, cholera and scarlet fever. Even as homeopathy grew over the next 150 years because of its successful treatment of other diseases, it did so without firm theoretical foundations. To face the dilemma, homeopaths chose between metaphysical speculation or, for those identified with natural science, abstaining from a definite opinion, waiting until material experimental conditions and instruments were available.

However, some evidence accumulated during the 19th century, covered homeopathy's conceptual spectrum: (1) minimum dose; (2) vital force; (3) law of

similaris; (4) nature as the true healing force during homeopathic treatment; (5) proving in healthy subjects; (6) individuality of morbid processes; (7) individuality in prescribing; (8) miasms (Table 1).

The first concept to change radically was minimum, infinitesimal or micro-dose. This happened with the advent of the Avogadro–Loschmidt constant in the mid 19th century,^{1,2} it established that molecules cannot be divided infinitely. Hence the notion of the infinitesimal dose underwent a decisive transformation. It became evident that the solute (i.e. the initial tincture) could not be diluted infinitely, eventually disappearing during the dilution–agitation process. Increasing evidence of the physical chemistry of agitated dilutions entered scientific writings since 1988 with the controversial findings of French immunologist Jacques Benveniste.³ As the limited notion of low dose (or high dilution) pharmacology could not adequately describe a homeopathic preparation, we speak now of dynamized dilutions meaning serially diluted and succussed dilutions.

As the notion of 'ether' disappeared in Physics, the concept of one vital force responsible for life also became irrelevant to biology.

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Table 1 Changes in the theoretical foundations of homeopathy

Hahnemann I	Hahnemann II	Current
Microdose, low dose, high dilution, infinitesimal dose.	Dynamization, dynamized dilution, agitated dilutions, homeopathic dilutions physics of electricity and magnetism	Physical chemistry of polar solvents
Immaterial effluvia liberated by dilution Immaterial vital force, supernatural vitalism The law of similars	Organic and instinctive dynamism The law of similars	Quantum electro-dynamics Biophysics, Biochemistry, molecular biodynamics The similia principle, similia rule, or similitude generalization
Natura morborum medicatrix, vis medicatrix naturae Pure experiments in healthy subjects Morbid individuality Medicinal individuality	Curative vital reaction Provings	Biocybernetics, central healing system Controlled methodic pathogenetic trials Individuality through genetics, major histo-compatibility complex
Immaterial miasms	Hereditary theory of miasms	Polygenic diseases, clinical genetics

The original similia concept as a law could not sustain scientific scrutiny. But this concept can be described as a *descriptive generalization*. The relation of similitude persisted as the similia principle.

Another initial homeopathic principle considers nature the true healing agent: This corresponds to the *ponos* and *physis* of the Hippocratic tradition and can be visualized today as a reaction that triggers a biocybernetic process directed towards homeostasis.

The notion of pure drug experiments on healthy organisms or drug provings evolved into homeopathic pathogenetic trials (HPT) with strict methodological design.

The traditional concepts of individuality are now supported in a comprehensible fashion with the description of the human leukocyte antigen (HLA), the major histocompatibility complex. Immune responsiveness is affected, even controlled, by gene products of the major histocompatibility system and a growing number of diseases are now associated with human leukocyte antigens (HLA).^{4,5}

Similarly, the concept of hereditary miasms was clarified, even overturned when clinical genetics advanced the description of multiplicity in polygenic disease, also known as multifactorial genetic diseases.

The biocybernetic model

Evidence suggests that homeopathic medication activates an indirect healing response in the organism. This concept is supported by three arguments:

Pathogenetic trials. If a remedy directly produces symptoms in healthy organisms, it cannot then be capable of directly curing them in sick patients. So an indirect response must be responsible. Immunization is a classical example, it is not the attenuated virus that directly creates immunity, but it is the immune system that creates the cellular and humoral defence structure.

The use of toxic medicines such as *Apis*, *Lachesis*, *Crotalus horridus*, *Mercurius cyanatus*, *Arsenicum album*, *Conium*, *Sulfuric acid* and other corrosive and

toxic substances. If they acted directly, little would they cure!

In the pathogenetic trial, the homeopathic drug can elicit symptoms or signs anywhere in the body, which gave way to using the same remedy in diseases affecting various organs and systems. These wide ranging effects of the so-called constitutional homeopathic remedies suggest that a regulating principle—maybe a *central curative station*—is activated.

If the bodily reaction against the remedy (as in immunization) defines a general homeopathic healing process, which cell group, organ, apparatus or system would be the candidate for this central curative station?

To propose such a site, it helps to consider the diseases that homeopathy can cure. Logically, if homeopathy only treated neurological problems, we would suppose that it activated the central nervous system (CNS). If it only cures hormone problems, we would propose that it acts in the endocrine system and so on.

Because of the wide influence of homeopathic medicines on the organism, the candidates for a central curative station could be classified into five groups:

1. reticuloendothelial system,
2. central nervous system—autonomic nervous system axis (CNS–ANS),
3. genetic code (DNA–RNA; gene suppression or activation),
4. bioelectromagnetic sensitivity mediated by DC electricity, biophoton or water signaling transmission,
5. endocrine-adaptation reaction to stress (general adaptation syndrome),

The notion that such systems could determine a biocybernetical healing response, has been described by Jacques Monod⁶ in *Chance and Necessity*. He describes ‘microscopical cybernetics’ and how a regulatory mechanism functions to maintain health and homeostasis by using enzymes that interact with the genetic code.

The biocybernetic model is often invoked to explain how homeopathy is successful in treating diseases of

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