

## Is there a future for homeopathy?

Milan Korock



***It has been tough for purveyors of natural medications, which are crucial to the practice of homeopathy, to maintain their identity while the world around them was being suffused by antibiotics and other chemical miracles. It has also been tough to escape the taint of quackery.***

**F**or more than 50 years, North American interest in the practice of homeopathic medicine has dwindled to near extinction.

It has been tough for the purveyors of natural medications that are crucial to the practice of homeopathy, to maintain their identity while the world around them was being suffused by antibiotics and other chemical miracles. It has also been tough for the obsolete and the unorthodox to escape the taint of quackery.

However, with the word "natural" assuming almost mystical dimensions and with consumers fervently seeking alternative forms of medical care, is it possible that homeopathic medicine may once again stake out a share of the medical marketplace?

Not yet. There are not enough full-fledged, 100% homeopathic physicians in Canada and the United States to make up two complete football teams. Even those physicians who use homeopathy as an adjunct to their existing allopathic practices would barely fill up one 747.

It's this lack of a homeopathic base that makes North America look so tempting to European, primarily French, advocates of homeopathy. Advocates include the manufacturers and distributors of homeopathic medications.

Recently, the most prominent French manufacturer, Laboratoires Boiron, whose headquarters are in a suburb of Lyons, invited a group of North American journalists representing medical and health-care oriented publications to visit their laboratories to explore the state of homeopathy at the consumer and medical school levels.

The intent of the tour was straightforward and clearly stated by Boiron executives: they wanted to expose North American medicine to what homeopathy has to offer and to stimulate its research and scientific evaluation in North American medical education centres.

Mr. Korock is a freelance medical writer living in Ft. Lauderdale, Florida.

Just as clearly stated was the marketing implication for Boiron which sees North America and the North American acceptance of homeopathy as a critical step in its international marketing strategy. Boiron set up a research institute in Bethesda, MD, in 1982 to stimulate scientific and clinical studies of homeopathy at US universities. The following year Boiron, Inc., was formed in Bethesda to oversee North American operations, production, marketing and physician education. Previously, it had only a distribution and packaging centre near Philadelphia.

Boiron has 1200 employees in its headquarter's location at Ste. Foy les Lyons and 12 preparation and distribution centres through France. It also has subsidiaries in Italy, India, the United States and Spain, plus agents in Belgium, Switzerland and South Africa.

Boiron has cooperated in staging seminars in the United States and Canada. One seminar was held last October for 40 physician and pharmacist members of the Quebec Holistic Medical Association (QHMA) in Sherbrooke; another was held for physicians in New York City and still others are held periodically in Lyons.

Just before the Sherbrooke seminar, leading homeopathy lecturers from French universities spoke to the Sherbrooke faculty regarding the positive value of building homeopathic teaching into the medical curriculum. Their recommendations are now under study by a faculty committee.

Proponents of homeopathy in France admit that if homeopathy can be sold in America and if the energy of American researchers and technologists can be harnessed to prove the validity of homeopathy, then credibility in the rest of the world will be made much easier.

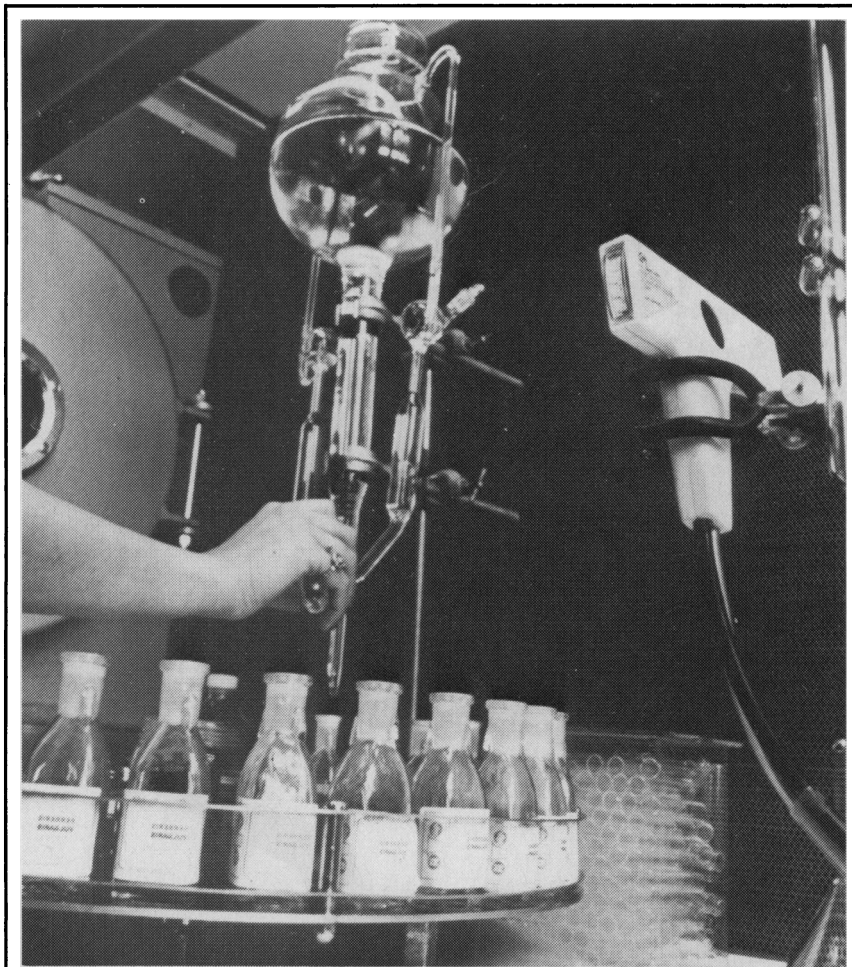
The journalists' tour clearly indicated that homeopathy in France is already the chief source for the development of homeopathy in other countries and that it has deeply penetrated medical education at France's leading universities. Homeopathy's leading advocates — practitioners, academics and product marketers — are adamant in their belief that homeopathy can

gain appropriate credibility if it is practised only by medical doctors and if it is considered not as an "either/or" proposition but as a therapeutic weapon to add to their existing therapeutic practices.

However, the tour also showed that even homeopathy's strongest advocates feel their discipline requires more rigorous scientific substantiation. That, they admit, is

tough, since homeopathy, based as it is on the use of infinitesimal doses of plant, animal or mineral extracts and dependent upon highly individualized prescribing techniques, doesn't lend itself well to the randomized double blind control studies so favoured by North American scientific journals.

The question about this scientific substantiation has given critics of



***Recently, the Laboratoires Boirons, the most prominent manufacturers of homeopathic medications, invited North American guests to explore their facilities in France. First, to procure American research and evaluation and second, to garner the North American acceptance that is so crucial to their international marketing strategy.***

homeopathy so much of their ammunition. It's a vulnerability the advocates hope to rectify.

First of all, what is homeopathy? Homeopathy — first defined and documented by German doctor, chemist and toxicologist Samuel Hahnemann in the 1790s — is based on the law of similars (originally suggested by Hippocrates). The law of similars states that there is a parallel action between the toxic power of a substance and its therapeutic action. Put in more pedestrian terms, the same things that cause the disease can cure it.

Hippocrates saw that white hellebore, which toxicologically causes cholera-like diarrhea, could also be used successfully to treat cholera. Cantharidin tincture, which at toxicological doses causes cystitis and hematuria cystitis, could be therapeutically useful in small doses to treat cystitis.

Hahnemann, picking up on Hippocrates' observations, noticed that cinchona bark (quinine), then used to treat the fever of malaria, could also cause febrile attacks similar to those of malaria.

Hahnemann then took all of the

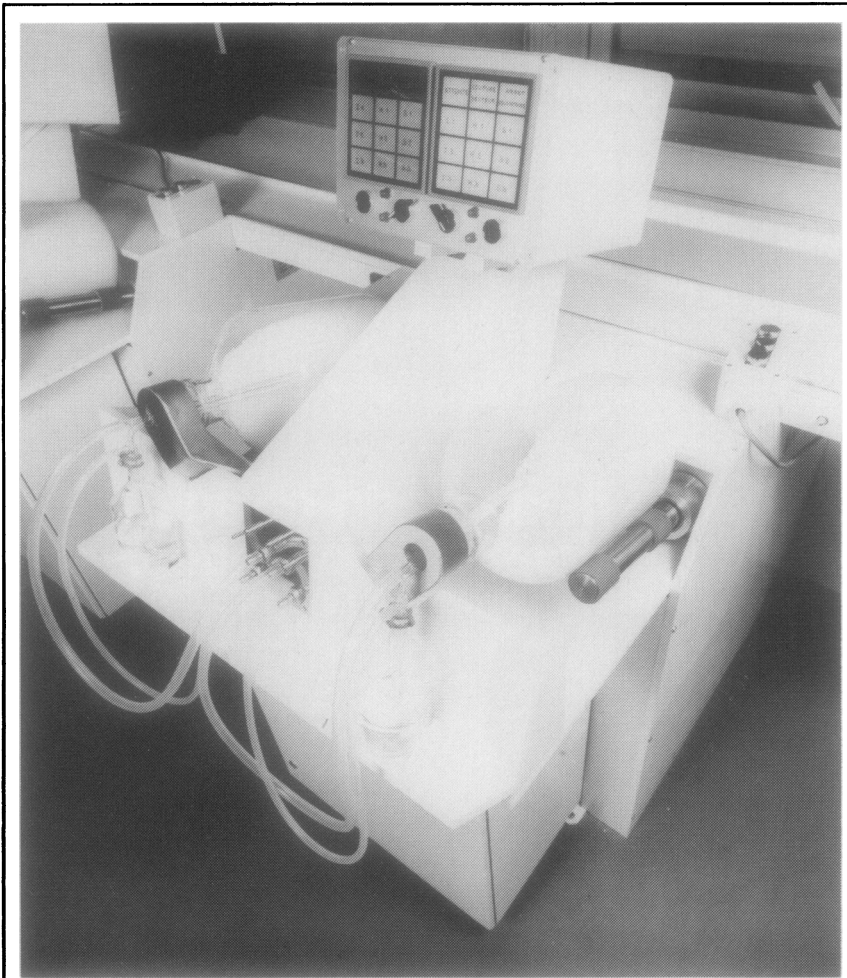
known medically active substances and began testing them on himself and on friends to find out what the pharmacodynamic action was on healthy subjects. He then tried these same substances as therapeutic agents on patients showing similar symptoms as those that were induced in healthy people. His hypothesis was confirmed — but only when he used very small or infinitesimal doses. The intent, after all, was to encourage or to stimulate gently the body's reactive powers — to work with the powers, rather than aggravate them with strong doses.

Actually, there are plenty of examples of the law of similars in traditional therapeutics. In allergology or immunology, it's not uncommon for doses of the same substance capable of producing pathologic disorders to be effective therapeutic agents. But it is not as simple as it may sound, since it's a tenet of homeopathy that as individuals differ, so might their symptoms and, therefore, so must their therapies.

In his descriptive booklet on homeopathy, American physician Dr. Karl Robinson, who did his residency in internal medicine in New York and then studied homeopathy at the Royal Homeopathic Hospital in London, England, wrote that "homeopathic medicines are not employed against one particular area or organ of the body. The homeopathic remedy is chosen because it matches as closely as possible the totality of symptoms of the patient."

Said Robinson: "Homeopaths place great emphasis on the patient's symptoms because they regard each symptom as an intelligent manifestation of the disordered defense mechanism. Unlike the orthodox doctor who views symptoms as a nuisance to be removed, homeopaths view symptoms with great respect realizing that they are the organism's best possible way of calling attention to the underlying disorder".

Thus the proper matching of therapeutic agents to symptoms is crucial to the success of homeopathy. The ability to individualize such treatment is paramount. For example, two patients suffering from intercostal herpes zoster are presented. The first patient suffers from itching and burning pains that are



***Homeopathy is based on the law of similars. This law states that there is a parallel action between the power of a substance and its therapeutic action. Put in more pedestrian terms, the same things that cause the disease can cure it.***

relieved by cold compresses; this reaction is the same as that of a healthy person who has been stung by a bee. The homeopathic remedy will be bee venom (*Apis mellifica*).

The second patient also has an eruption and complains of burning pains, but that patient's pains are worse at night and are relieved by hot compresses. This is a different reaction from the first patient, even though the disease is the same. In this case the preferred treatment could well be arsenic anhydride since this is just the kind of effect a healthy subject would show when

given arsenic anhydride. The treatment is homeopathic because the active agent is capable of producing a similar (homeo = semblant) suffering (pathos = suffering).

Where do the homeopathic medications come from and how are they made? Homeopathic remedies are derived mostly from vegetable sources and occasionally from mineral and animal sources. The Boiron laboratory near Lyons stores more than 1500 products derived from different vegetable species, mostly wild plants that are harvested in their natural surroundings and are pre-

pared fresh. (It also stores several hundred extracts derived from minerals and animals [whole or part].)

The plants are used to prepare mother tinctures which are precisely diluted and potentized (shaken a specific number of times by an automatic machine), and then each dilution is specifically labelled according to its potency. The method of deriving potencies is now highly automated, but still essentially based on a method and formula developed by Hahnemann.

These tinctures are then used in various forms — in tablets, in drops or in impregnated globules and granules.

The high dilution, which according to Hahnemann was the key to the remedies' effectiveness, has also been the source of claims that homeopathy is really nothing more than very clever use of the placebo effect. "Hardly more than distilled water", is a charge homeopaths hear often.

Homeopathy's defenders will argue that pharmacologic action has been demonstrated, under reproducible conditions, and they cite several animal studies to make their point. They are also growing more aggressive in responding to charges that they have few clinical evaluations to help substantiate the therapeutic effect of their remedies and methods.

They have long taken the position that results count too and it is impossible to deny the track record homeopathy has built in terms of patient satisfaction, absence of adverse effects and iatrogenic misfortune. As well, homeopaths point to the recent Western acceptance of acupuncture as an example of a therapy that cannot be explained although it does produce beneficial results.

These same defenders have become more willing to slug it out on scientific turf as well, referring to several clinical evaluations to help make their point. These studies include the use of homeopathic medications to restore bowel function in patients with abdominal surgery, and clinical double blind trials which showed that patients with rheumatoid arthritis treated with anti-inflammatory drugs plus homeopathy received markedly better subjective pain relief than did patients with anti-inflammatory drugs



***The Boiron laboratory near Lyons stores more than 1500 products derived from different vegetable species, mostly wild plants that are harvested in their natural surroundings and prepared fresh. (It also stores several hundred extracts derived from minerals and animals.)***



plus placebo. This latter study was published in the *British Journal of Clinical Pharmacology*.

Nonetheless, even the most fervent advocates of homeopathy admit that homeopathy, given the relatively long time it has had to develop since the days of Hahnemann, has not yielded as rich a lode of scientific literature as could have been hoped. This situation must be remedied if North American doctors schooled in the rigorous scientific schema of controlled, double blind studies are to become adherents or, at least, tolerant observers.

The problem, said Dr. Jacques Jouanny, one of France's most prominent teachers of homeopathy and a consultant to Boiron, "is that the officials say you must bring forth clinical proof (of therapeutic action). They are right. However, to be able to bring clinical proof which is credible and valid, the proof must be developed in a hospital department.

"But if you ask the same official doctors to try our methods, in hospital, they say they have no time. So we have a vicious circle."

Jouanny stressed that homeopaths have tough enough battles to endure outside their own community to convince allopathic practitioners of the value as well as the limitations of their art. But they also have to put their own house in order. It's a subject which spurs Jouanny to passionate discourse.

There was a time when homeopathy flourished in North America — after it was introduced by Europeans in 1828. According to Robinson (who participated in the French tour), more and more orthodox physicians found they could effect safer, speedier cures using homeopathic remedies without encountering all the side effects and iatrogenic sequelae that mainstream medical prescribing allowed. Robinson noted that the growth of homeopathy was so rapid that orthodox practitioners felt the need to bind together for protection and in 1864 formed their own organization — the American Medical Association.

By the turn of the century, one-sixth of all US doctors and hospitals were homeopathic. With the subsequent rise of modern pharmacology and then, in the early 1900s, with the rigorous scientific imperatives

imposed on medical education by the Flexner report, homeopathy went into steep decline.

However, according to Jouanny, there is more to the decline and moribund nature of homeopathy in America than simply the rise of modern pharmacology and the Flexner report.

Said Jouanny bluntly, "Homeopathy in America is dead now because they (homeopaths) refused to move. They did not stick to the clinical realities. They did not move with the times".

"In effect", said Jouanny,

"though Hahnemann had great objectivity and flexibility, and though he moved onward to new concepts, findings and conclusions, many of his disciples remained rooted in his original ideas and accepted them like dogma." Homeopathy was thus "frozen in its original state".

"Another group of 'deviationists'", said Jouanny, "distorted Hahneman's ideas, to back either their personal concepts or philosophic and theosophic ideas."

These latter "deviationists", among whom Jouanny groups most American homeopaths, took the in-



***There is more to the decline of homeopathy in America than simply the rise of modern pharmacology and the Flexner report.***

***"Homeopathy in America is dead now because they refused to move. They did not stick to the clinical realities. They did not move with the times."***

dividualization process to such a degree that the remedy was secondary to the psychotherapy which had become part of diagnosis. Much of this emphasis on psychotherapy was rooted in the teachings of James Tyler Kent, an American who wrote and practised in the late 1800s and early 1900s.

What these differences mean in real terms is that most American homeopaths who lean to Kentian approaches use remedies slowly and sparingly, only one at a time, while monitoring their patients closely and relying heavily on psychotherapy at the same time. However, many of the French remain much more aggressive in their use of medications,

rooted in the realities of modern medicine.

One of those realities, said Jouanny, is the need to build homeopathy into the medical curriculum in an organized way.

In France, homeopathy has already penetrated the medical school curriculum. One lecture on homeopathy, delivered at the University of Bordeaux medical school and witnessed by the visiting North American medical journalists, was attended by approximately 120 students — graduate doctors as well as undergraduates. The class, apparently, was not a rarity.

Bordeaux's homeopathy program in medicine and pharmacy assumes

government could cut its health care costs dramatically by generating the research money needed to encourage even greater acceptance of homeopathy.

Though over-the-counter preparations are not covered by social security, the single remedies (1163 of them), which constitute much of the homeopathic arsenal, are all reimbursed 70% — the same level as allopathic drugs. Complex remedies, prescribed by the physician and prepared extemporaneously, are also covered to 70%.

The growth of homeopathy through France makes for a challenging market. There are reportedly 6000 doctors who practise some homeopathy in France and approximately 15% of the population use some homeopathic remedies, with 6% primarily using homeopathy. Of France's 20 000 pharmacies, 19 000 sell some homeopathic preparations.

However, it's the world market that puts a twinkle in the eye of Jean Boiron, who with his twin brother Henri started the Boiron homeopathic preparation business in 1932 and who is still active as research head of Laboratoire Boiron.

He noted that homeopathy is practised in 25 countries, that the heaviest populations of prescribers are in Mexico, Argentina, West Germany, France and Pakistan, and that in India there are more than 100 000 prescribers, including 25 000 physicians.

Boiron failed to mention Britain in his survey, where despite continuing denunciation of homeopathy by allopathic physicians, Prince Charles continues to beat the drum for acceptance of alternative medical approaches, such as homeopathy. (The Royal Family has been served by homeopathic physicians for three generations.)

As for the North American market, the French are throwing their biggest guns into the battle. Already Jouanny, Dr. Denis Demarque and Dr. Pierre Cornillot, director of medical studies and research at the University of Bobigny (Paris), have hit the North American lecture circuit. Last October's seminar for the QHMA was part of this lecture circuit.

Dr. Gilles Vezina, a Cookshire, PQ, family practitioner and presi-

***Most American homeopaths who lean to Kentian approaches use remedies slowly and sparingly while monitoring their patients closely and relying heavily on psychotherapy at the same time. The French remain much more aggressive.***

using several at a time if necessary.

Jouanny said that while some of the hypotheses and the emphasis on psychotherapy were clearly positive, it is the overreliance on psychotherapy and timidity in medication use that bother him about the Kentian approach.

"It appears", said Jouanny, "that the only thing that's important (in the approach of the Kentians) is the spirit . . . matter does not exist. That's illogical. That's the reason homeopathy died in America."

It is also important, said Jouanny, to define the limits of homeopathy. There were those, he stated, who claimed it had no limits, who raised it to the level of a religion. "Homeopaths are not priests, homeopathy is not a religion", asserted Jouanny.

Homeopathy does have clear limits; not all conditions will respond to homeopathy and it requires a doctor to be able to make that distinction.

A good homeopath must first be a good general practitioner; homeopathy is a scientific method which must remain "open to progress, open to new knowledge" and must be

100 course hours per year for 3 years and leads to a university diploma in homeopathic therapeutics. Similar programs (with course hours ranging from 55 to 100, over each of 3 years) are also now in operation at Limoges, Besancon, Poitiers, Lille and Paris. In addition, there are 3-year programs at several private homeopathy schools, covering most of the major population centres in France.

Educators in homeopathy estimate that there are now over 2000 students enrolled in these various courses, with at least 420 graduate diplomas being earned each year.

In achieving this kind of academic recognition it helps, of course, that homeopathy is officially recognized in France, that homeopathic remedies are listed in the official pharmacopoeia and that the French social security system does allow for reimbursement of homeopathic remedies under its health insurance program. Advocates claim that homeopathic remedies are but a fraction of the cost of orthodox pharmaceuticals used today and that the French

dent of the association, wants more of these lectures. He particularly likes the French insistence on homeopathy as a medical discipline, not homeopathy as herbal medicine dispensed through health food stores.

This is the theme that was emphasized again and again by Boiron executives who admitted that although some of their preparations can be found in North American health food stores, this is not the way they want to go.

They want homeopathy to be practised by physicians and they want their remedies dispensed through normal North American pharmacy channels.

"Before practising homeopathy we must first know about medicine", stated Vezina adamantly. He said the QHMA will attempt to have homeopathic training placed in the medical curriculum, and they may try to achieve that directly through the Ministry of Education.

The model for course curriculum would be that of the French — 100 hours a year for each of 3 years and an emphasis on the science of homeopathy, not the religion, to use Vezina's phrasing.

Though Canada and the United States have had a history of homeopathy, there are few remnants left. In the United States, there several homeopathic associations and foundations serving the interests of consumers and practitioners. One of these, the American Institute of Homeopathy is now closing in on the funding and methodology for a research program that would measure therapeutic efficacy and cost-effectiveness of homeopathy in large, controlled populations.

There is also an official *Homeopathic Pharmacopoeia of the United States*, recognized by the Food and Drug Administration. Therefore, there are relatively few problems in importing homeopathic products into the country or manufacturing them there. Nonetheless, distribution of homeopathic remedies through US pharmacies is very much a hit and miss affair; very few actually carry them. Ordering from European laboratories, either directly or from US subsidiaries, is quite common among the few American and Canadian physicians who practise homeopathy. There is at least

one manufacturer of homeopathic products in Canada, in Toronto.

Canada does not have a recognized homeopathic pharmacopoeia, though the Food and Drug Directorate (FDD) uses the US pharmacopoeia as a reference source. Similarly, Canada does not have a directory of homeopathic physicians and estimates of their numbers are guesses at best.

Vezina knows of one group of homeopathic practitioners (not all physicians) meeting regularly in Montreal, and there are now at least 40 practitioners obviously interested in homeopathy, identified via the Sherbrooke seminar held last year. But are there concentrations in

Ferrier said there are approximately 330 homeopathic products which have been assigned DINs in Canada and approximately 220 are on the market.

Most DIN applications have come from foreign companies, said Ferrier, "and we expect the requests for numbers to keep increasing".

Ferrier explained that homeopathic remedies are granted identification numbers after the FDD examines applications which declare the content and composition of homeopathic products, their potencies and their intended use.

"We do consider homeopathy an unorthodox method of treatment and so there are different require-

***The American Institute of Homeopathy is now closing in on the funding and methodology for a research program that would measure the therapeutic efficacy and cost-effectiveness of homeopathy in large, controlled populations.***

other parts of the country? "I just don't know of any", said Vezina.

The identification process isn't much better in the United States. Robinson, who publishes a journal on homeopathy, said that based on physicians who attend seminars in the United States, he would guess that there might be up to 200 doctors who use some homeopathy; pockets of them showing up in San Francisco; Washington, DC; Boston; Eastern Pennsylvania; and Connecticut. Of those, who make their living exclusively from homeopathy? "Very few", said Robinson, "20 to 50 maybe".

Yet, there are signs of growing interest. Robert Ferrier, director of the Bureau of Nonprescription Drugs, told *CMAJ* that in recent months there has been a marked resurgence of interest in homeopathic remedies in Canada, particularly in Quebec. This is shown by the number of applications from European and some US homeopathic remedy manufacturers and distributors seeking drug identification numbers (DINs) for their products.

ments for listing of these products", he added. Indications and contraindications are not listed on packages as they are for orthodox pharmaceutical products. Homeopathic remedies are labelled only as homeopathic remedies. No claims or suggestions are made about conditions for which they might be used — not even a subliminal or catchy brand name or title. Similarly, there can be no direct advertising of a homeopathic product to the public. It is expected, said Ferrier, that all persons receiving homeopathic products would first be counselled by their physicians or pharmacists about appropriate use.

Ferrier did express concern about the possibility of homeopathic remedies being diverted from regular channels, but he said he was reassured by pledges of foreign manufacturers to concentrate their distribution efforts on doctors only.

However, distribution will ultimately depend on demand. If by delving into homeopathy, doctors assume they can pick up a competitive edge, who knows? ■