

Homeopathic — medical detente

A review of the main areas of contention that help maintain the rift between the two professions.

by J L Rogers

Having long been a double-agent, trying to decide which side should receive my undying loyalty and banner-bearing support, I have at last had the good fortune to be able to invite representatives from both sides to present arms.

From behind the homeopathic 'curtain' an eminent spokesman from SA Homeopathic Association, while the medical profession is equally eminently represented by a well-known Pretoria GP.

Research

The medical profession nags that homeopathy is unscientific: research conducted excludes double blind testing, the use of controls, trials not being sufficiently large and the placebo effect not being accounted for.

The homeopathic representative maintains that plenty of research has been done in France, Russia, the United Kingdom, and the USA, and that these results have been presented to the SA Medical and Dental Council.

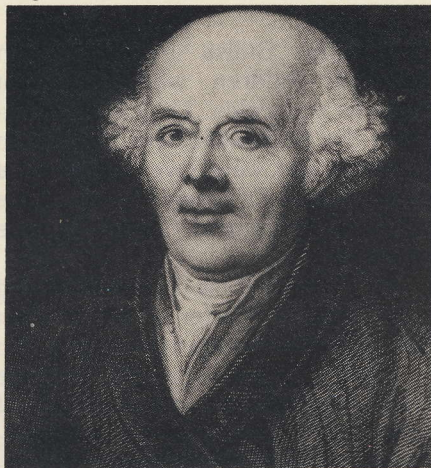
The council, however, persists in regarding these as unscientific. Perhaps our South African attitudes are lagging behind the current change in attitude towards a traditional scientific approach (which has let us down glaringly in cases such as thalidomide research).

The homeopathic complaint about

medical research is shared by many in the medical profession; the fact that drug companies dominate many medical practitioners; and that the independence of medical research in the universities is disrupted by the way in which these companies sponsor it.

Medication

The medical profession is suspicious of homeopathic remedies because they work slowly, thus leaving doubt as to whether they are ef-



Samuel Hahnemann (1755 - 1843), the founder of homeopathy.

fective or whether the patient recovers spontaneously. However, most do agree that the remedies are harmless — leaving no side-effects, even when overdosage occurs.

What belies suspicion about their effectiveness is the fact that chronic conditions (eg bronchitis and sinusitis) can be cleared up, leaving the patient with no weakness in the affected area. Although this is also seen under medical care, it is the exception rather than the rule.

It is also not true that all homeopathic remedies work slowly; the axiom is that the speed of the cure is related to the speed of the acquisition of the illness.

(The homeopathic spokesman warned here of some bogus homeopathic medicines available in some health shops and pharmacies, thus helping to give homeopathy a bad name).

Once again, the homeopathic criticism of the medical fraternity is shared by many of the latter — that medicines are used indiscriminately by doctors and/or patients and that overdosage leads to unpleasant side-effects (not least the empty pocket side-effect!).

Some doctors claim that because of thorough research, side effects are minimized. However, although our notoriously readily-prescribed antibiotics have no side-effects, they do lead to germ-immunity and are wasted on viruses in nine out of ten patients; they prevent the body from making its own anti-bodies for that particular germ.

Training

The medical profession complains that homeopathic training is too short to be sufficiently thorough. This opinion is shared by many homeopaths and in fact negotiations are being made to rectify this.

One proposal is for all practitioners to receive a basic scientific three year training after which they select a speciality (for example, surgery), these options including homeopathy. (Once again I was cautioned that bogus homeopaths have been making the situation appear far worse than it is).

On the other hand, homeopaths feel that medical training is far too long and thus costly for the state; and that too much emphasis is given to surgery and medicine, with too little attention to the patient aspect.

Our medical spokesman feels that there can never be too much study, that detail militates against dangerous gullibility. However, he agreed that less surgery and more social sciences would benefit a more holistic approach (for which a need is being felt by many in the medical field)¹.

Treatment

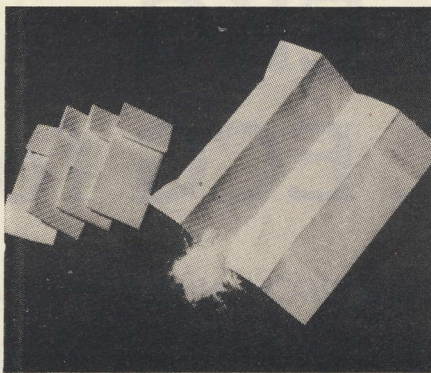
Here the non-gullible and scientific medical practitioners shudder when they hear how homeopaths use constitutional factors in their diagnosis: because they have not been proven scientifically to be significant. But, homeopaths hasten to inform us, the constitutional factors comprise only one aspect amongst many which may be used in a thoroughly holistic approach to diagnosis.

For example, the mental condition of the patient, his circumstances, sensitivities, dislikes, historical condition (including inherited weaknesses) and of course, the illness are taken into account and matched with the remedies.

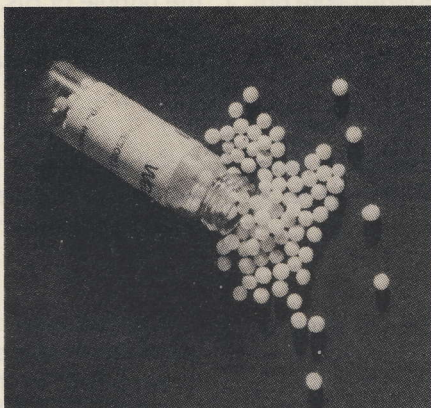
The fact has already been noted that there is an increasing call for a more holistic approach in the medical profession.

Conclusion

Although there are growing areas of agreement, the cold war seems doomed to continue between the medical and homeopathic profes-



sions unless more compromise is to take place. But in the areas most needing this (research and treatment) it would require perhaps too fundamental a disruption on either side for this to be conceivable.



Perhaps if we could practise the ideals suggested by the homeopathic spokesman a compromise would not be necessary. (Remember, that any code of ethics is in terms of an ideal towards which the followers work).

He posits placing the full responsibility of seeking treatment with the patient. Then it should be ensured that each practitioner, be he homeopath, medical doctor, sangoma or faith healer, treats a patient only when he is reasonably confident he can. When he is no longer confident, he should either communicate this to the patient so that he is free to seek help elsewhere or he should refer him to another practitioner whom he thinks can help.

Could this not also help to alleviate the problem of our shortage of doctors and make life more comfortable for them (though not perhaps financially so) than has been the case in the past?

References

- 1 Hefernan, MW, "Education for General Practice in the 1980's," SA Family Practice Nov/Dec 1981.

Ringing the changes for rheumatoid arthritis

Immunisation against rheumatoid arthritis could in the future possibly prevent the development of this crippling disease in some patients.

This was said at a recent Johannesburg press conference by Dr Heddy Berry, Consultant in the Department of Rheumatology and Rehabilitation, King's College Hospital, Denmark Hill, London.

Dr Berry, who has a specialist interest in rheumatic diseases, conducted a series of medical meetings in Johannesburg, Cape Town and Durban. He spoke about recent advances in the diagnosis and treatment of rheumatic disease sufferers.

Discussing advances in therapy he said: "One area where there has been progress in rheumatological research has been to elucidate yet more complicated systems which are formed in the joints which may contribute in some way to the acute and chronic inflammatory processes."

"But what causes rheumatoid arthritis?" he asked. "Our research in rheumatoid arthritis is much more advanced than in the more common disease of osteoarthritis. We have to think about what starts the ball rolling."

Some researchers have implicated bacteria other mycoplasma. Another area of considerable interest has been the question of looking at the genetic markers."

The Epstein Barr Virus (EBV) is a virus which has recently been possibly implicated as a causative agent in some patients with rheumatoid arthritis.

This virus is present in patients with glandular fever. These patients develop rheumatoid factor — rather like patients with rheumatoid arthritis.

Dr Berry added: "I do not think it is fair to think that all rheumatoid arthritics have this virus or that this is the only cause of the disease. It is one factor which may have possible relevance."

It is important to remember that no single drug is effective in all patients. They have to find drugs which personally suit them best. 'Ringing the changes' and remaining hopeful is essential.

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