






## Section

# Foundation

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David Owen

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## Introduction

The laws that govern health are the cornerstones of a homeopath's knowledge. How we understand the relationship between the substance and energy of life determines the model we use to describe health. Homeopathy is the matching of a remedy to a patient based on their similarities (like treating like). Homeopaths use several different models to explain health and define illness. The model used determines the approach to treatment. For each approach to treatment there are several methods of prescribing. This chapter invites you to reflect on what you think health is before outlining five models of health.

The different relationship between homeopath and patient – where symptoms describe the interface between patients and their environment, and illness may be seen as a necessary aspect of being well – invites further reflection about homeopathic patients and the meaning of illness. How symptoms arise and communicate the patient's needs is mediated by what is termed the vitality. The natural forces that govern the vitality and the general laws of health start to describe the homeopathic laws.

## Laws of Health

The science of homeopathic medicine is based on a framework of laws described by philosophers and validated over generations by observers and practitioners. The laws apply to all organisms and they follow laws that govern our environ-

ment whether we think of it in terms of objects or energy. By knowing these, it is possible to work with the great healing potential of nature and individuals.

The first law is that every action is matched by an equal and opposite reaction. When a force is directed in one direction an opposite force operates in the other direction. This law explains why every cause has an effect, why certain lifestyles produce certain symptoms and why the homeopath seeks to understand all aspects of a symptom, including those which at first may appear hidden or unconscious.

The second law is that nothing (in a closed system) is ever ultimately created or destroyed but that it just changes its form or nature. So energy will change from kinetic to potential, compounds may break into component elements, health and illness are aspects of the same thing and birth and death are considered a change in 'state'.

The third law is that change is a constant, that it is inevitable. Complex systems in time decay; simple systems in time become more complex. Organisms try to move towards or maintain a steady state, but when a steady state is approached or obtained for any length of time it inevitably becomes unstable again. The only constant is change.

The fourth law is that all observation is affected by the medium through which the perception is taking place. For example, things look different when seen through air or water, and because it takes time for us to see things, we only see them as they were and never as they are. Two people will have different views of the same things.

Lastly, the fifth law says that the same laws govern objects as govern energy. All matter has the potential to change and all change is an expression of energy, so matter has a 'potential energy within it'. Our bodies are influenced by energy, including thoughts, that we are exposed to and that we express.

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### REFLECTION POINT

- What do these laws tell you about health? How do these laws affect different therapeutic systems, for example the body's reaction to medicines or the remembering of thoughts from the past?
- 

## What is Health?

To stimulate your thinking about health consider the 'health' of the individual in these different situations:

*Peter comes into the practice feeling completely fit and well but needing a medical for his insurance company; he has raised blood pressure and investigations lead to a diagnosis of a serious disease. Peter was obviously not healthy before he walked into the practice but he did not know this.*

*Lucy and James are born with identical birthmarks that will, if untreated, stay all their lives; James feels disfigured by his while Lucy feels hers is a distinguishing mark. Symptoms in different people cause different responses.*

It is also important to remember health and illness have important functions in communities as well as in individuals. An individual's illness will affect their community and their community will affect them. We have a primary role to care for an individual and often a secondary role in caring for a family group or community. At times, these roles conflict:

*Joan has depression and feels different from her family and community. She is an artist, and her work makes her family and community feel uncomfortable but leads to some members of her community reflecting on how they see things and brings for them greater insight. There are important questions to ponder both on the conflict that can exist between treating an individual and that*

*of a population, and on what benefits an illness can bring. Health is therefore not a single point of balance but a dynamic state with changing points of balance; temporary removal of some symptoms is not the same as a cure. Joan, with depression, seeks treatment and takes antidepressants. This helps her feel less different but it alters her art and also leaves her susceptible to other illnesses.*

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### REFLECTION POINT

- You might like to reflect on some other situations seen in practice that inform us about what health is, and isn't. Think about the situations described below and what they tell you about health and illness.
- 

*As John gets older, his mobility reduces to a point where he finds it hard to walk to the shops unaided. He has no pain but just can't walk as far as he used to. Perception of health is related to what you expect of your body.*

*Julie feels 'absolutely fine' but wants to 'make sure I keep healthy'. She asks her homeopath if she would benefit from homeopathic treatment – might it make her healthier? Julie takes a remedy and feels that she has significantly more energy and an increased sense of well-being. Was she not healthy before?*

*David always feels at his best after a cold or cough. When is he healthy?*

*Jan brings her child to see you: the child is content and happy but Jan describes the child as a 'slow developer' or 'poor sleeper'. Who has the health problem?*

*Mike and Mary take their pet dog to their veterinary homeopath, as they want it to bark less, be friendlier to children and less protective of them. The breed is strongly territorial. Does the pet or the owners have the problem?*

## What is Natural Health?

People, animals, plants and micro-organisms can all be healthy without following a system of care and health. The ability to be healthy existed before any healing system was devised and natural laws alone are sufficient for healing

most organisms most of the time. Symptoms are in many ways necessary for health. When you ‘catch a cold’, a normal and healthy response is to develop symptoms. Tiredness might lead one to have an early night; thirst, to taking extra fluids. These things will help you throw off the cold. So having symptoms is an integral part of being healthy, not an opposite.

As individuals are drawn to explore lifestyles and environments that are more varied or challenging to them, so the challenge to maintain a healthy state increases. As this happens so the individual attempts to act in a way that can help maintain or return to a healthy state. The more any treatment system takes into account each of the laws of health the more it will work with individuals’ natural ability to heal themselves.

## The Models of Health

This book considers five main ways of looking at illness and health. They are not exclusive and frequently are combined together to try to understand a patient’s illness from several perspectives. However, each leads to particular approaches to treatment, each has strengths and weaknesses, expectations and limitations. They are represented diagrammatically in Figure 1.1.

The *pathogenic* model sees illness in terms of an external cause that can lead to a chain of causation. When the cause happens it causes the patient to ‘get ill’. When the cause is treated or reversed it can enable the patient to ‘get better’. The *biological* model recognises that a single cause in every living system does not always have the same effect. In non-living systems the effect of any cause is in theory predictable, for example a chemical reaction. In the biological model of health the symptoms always express the illness and represent how the healthy organism has been affected by a cause. It may therefore reflect indirectly information about causation. The symptoms represent the way an organism is attempting to re-balance itself in response to the cause. The symptoms may both be a way of overcoming the cause (diarrhoea in

food poisoning) or of repairing or minimising the damage after the cause is removed (scarring after an injury) or adjusting to the damage by modifying the environment or situation the organism is in (arthritic pain limiting mobility). In this model the absence of symptoms is an indicator of health. Throughout Sections I and II, the book focuses on what is required to use homeopathy in these first two models of health, and on how to treat on causation and presenting symptom.

The *holistic* model looks at health in a broader context than just that of the presenting illness. It sees that in more complex cases the factors that affect the health of the patient are many, and that one simple cause is unlikely to explain the illness and the illness is unlikely to be expressed through one group of symptoms. The cause and effect can simultaneously exist in many aspects of the patient and the environment – indeed at the extreme view

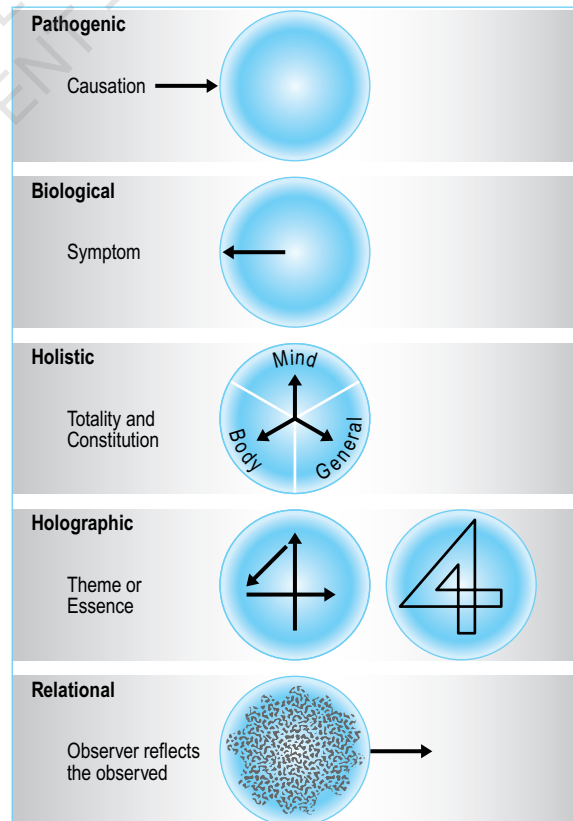


Figure 1.1 The five models of health

of this model, cause and effect are co-dependant and no one change or symptom happens in isolation. The trends and patterns in the patient both when well (constitutional state) and when ill (totality of symptoms) indicate the remedy state (see section III). In this model health is not just the absence of symptoms but also describes something of your resistance to common causations or what we call susceptibility; it also recognises that illness in some situations is necessary and even a requirement of long-term health as a way of rebalancing when the environments we are in change.

While the pathological, biological and holistic models are easily recognised in much homeopathic teaching they, like any model, have their limitations. Two other models are outlined briefly below but discussed in more detail in section VI.

The *holographic* model recognises that symptoms do not just happen in many areas of the body at the same time but that each individual symptom describes the underlying pattern of change in the whole person. The whole is glimpsed by seeing, in enough detail, any of the component parts. Like a hologram every piece of the whole, however small, reflects the whole picture. Ultimately in this model any one symptom, if known fully, will express the essence of the patient.

In this model, the observer uses one or more different concepts or methodologies to interpret what they see, such as yin and yang, the three miasms, three kingdoms, four humors, five elements, seven rays, twelve astrological signs or any other division the observer finds helpful to use. In this model health is both about what is visible and expressed and also about the deeper, compensatory or underlying aspects.

In the *relational* model the context of any symptom and the relationships of the patient, including the relationship with the homeopath, is central. The homeopath might be directed to the importance of a symptom or sensation by a sensation or feeling of their own, for example, a tingling in their spine or hairs standing on end. In this model the homeopath is using his reflections or awareness of this to explore what is happening in a patient. It is through this that the homeopath goes on 'gut feeling', on 'I feel this in my water' and I suspect this

underlies most 'intuitive' prescribing. In this model health is only partially about what the patient consciously expresses and much more about what is hidden and the influence of this on the observer. The holographic and relational models in my experience offer a great deal in the management of the difficult cases. They build on and are an extension of the holistic model, and the concepts behind them are introduced gradually through this book.

### ***Models, Approaches and Methodologies; Impression Plan and Prescription***

Each model of health invites different interpretations and realisations about homeopathic remedies, cases, analyses and treatment. Although in practice these are often blended together, a thorough understanding of each in turn is a prerequisite to a rational system of care. Each of the five models of health leads to particular approaches to treatment, and each approach is served by different methodologies. Different but complementary information about the homeopathic remedies is needed to use each methodology and different aspects of the patient's case will provide the information necessary to apply each approach. These are developed and built up throughout the book but an outline of the different models, approaches and main methodologies is given in Table 1.1 with a reference to the section of this book in which they are developed in more detail.

It helps to think of the model of health as determining the overall impression of the patient, the context in which the patient's story or narrative is told (see Chapter 3). Different models often suit different types of case and this is explored in Chapter 10. Each model of health can have several different approaches to treatment and a number of prescribing methodologies. The methodology of prescribing gives the method of selecting a specific homeopathic prescription that matches the patient in a particular context. Different methodologies indicate remedies prescribed in slightly different ways and are therefore likely to have slightly different outcomes. (The idea of separating out the impression, plan and prescription in each case is developed in Chapter 8.) The different models, approaches and methodologies are often combined

**Table 1.1 MODEL APPROACHES AND METHODOLOGIES**

Model of Health	Book Section	Approach to Treatment	Methodology of Prescribing
Pathogenic	I	Causation	Aetiological Isopathic
Biological	II	Presenting symptoms	Local Clinical Keynotes
Holistic	III	Totality Constitution	Three-legged stool Mind, body, general Morphological constitution
Holographic	IV, V, VI	Essence Thematic	Miasms Families Kingdoms Related remedies
Relational	V, VI	Reflective	Psychodynamic Emotional 'Intuitive'

in practice or emphasised in different situations but it is important to first understand each in detail.

### The Pathogenic Model

In this model health is the ability to withstand causes of illness. It concerns itself with the causation of the patient's problems and is the basis of much simple and effective treatment, using many different treatment modalities including simple lifestyle changes such as avoiding acidic foods in indigestion. It also lends itself to sensible self-treatment in the home on the basis that once the cause is removed or treated recovery will follow. It is often most effective when there are single causative factors, sometimes referred to as a trigger factor. It is the level of much conventional disease treatment today, such as treating an infection by killing the infective organism.

When a patient presents with an illness, the question the enquiring physician using this model asks is 'what is the cause?'. If, despite treatment, the cause is maintained then, although treatment may give relief the illness either remains or resurfaces later as a recurrence. Not all illnesses caused by a single causative agent are superficial. Radiation exposure, asbestosis, smoking damage and nutritional deficiency can all be accommodated within the causative model, but

just removing or treating the cause will not always lead to a cure as damage may have occurred over a period of time. We see that the duration and severity of the cause is central to the extent to which this model alone will heal patients.

Strictly speaking, treating on causation means treatment based on 'aetiology'. However it includes predisposing and precipitating or provoking causes. In many cases the causative association between events is less clear, such as a patient getting headaches when constipated, or very unclear, such as a patient feeling happier when constipated. In these cases the closeness in time between symptoms is important, including which symptom pre-existed the other. If the patient had never been happy before or unless they are constipated, it increases in importance. In more chronic illnesses there may be several causative factors which may or may not be connected. If a clear order of causes exists it can help to understand which was the first and which are acting more deeply.

A homeopathic treatment using causation may be chosen on the trigger event, on the factors that preceded the patient's illness, and events from which they had 'never been well since' or in combination with other approaches and methods of prescribing. The case of Alice in Case Study 1.1 illustrates this.

**CASE STUDY 1.1**

Alice, age 11, presented with recurrent upper respiratory tract infections. Each of these was helped to some extent by acute prescriptions but she continued to get relapses. She was brought for a consultation to see if a more deep-acting remedy might help prevent the recurrences. Taking a history the colds had started shortly after a grandparent had died. Alice had been protected from the loss of the grandparent and had not attended the funeral but neither had she had a chance to talk about her feelings. Alice was prescribed a remedy based largely on the suppressed grief but also taking into account the local symptoms. After being sad and tearful for a few days she felt much better and had a significant reduction in upper respiratory tract infections.

**The Biological Model**

The biological model sees health in terms of the effects of a cause. In this model health is the organism's ability to rebalance itself after a threat or cause. It is also called 'homeostasis' or 'auto-regulation'. When a patient presents with an illness, the question the enquiring physician asks in this model is 'what response has the patient had to the cause; what is the disease process that has ensued?'. It may follow (but not necessarily) that the cause is known. In the biological and pathological model the relationship between cause and effect is usually considered as a linear relationship, i.e. cause first and effect second and, at its simplest, especially in acute illness, focuses on one cause giving one effect – e.g. a fever caused by an infection. A more sophisticated biological model is one with multifactorial causes, where a number of different causative factors can predispose or lead to a number of effects, including a variety of symptoms. For example, poverty may be a contributing factor to poor nutrition, which may contribute to susceptibility to a particular illness.

**The Holistic Model**

The holistic model recognises that any single cause may, in different people, have a different effect, and any one individual can produce similar symptoms from diverse causes. Susceptibility determines what causative factors the patient is sensitive to, the degree to which they respond, and what symptoms they are likely to develop, i.e. their vulnerability to particular illnesses. In the holistic model the enquiring physician investigates the 'individual susceptibility' and asks why does the patient have this particular illness with these particular symptoms and what will help them now and in the future?

In this model, whatever the pattern of causation, symptoms include both the physical and psychological symptoms of an individual. These will affect the environmental preferences of the individual, what we may call 'situational' factors, as they may extend to any situation the patient chooses or 'finds' themselves in including work, relationship, cultural, etc. Taking all aspects of the situation as well as local causes and effects leads to a totality approach to treatment that incorporates local, psychological and general symptoms.

Our situations are always changing and our health in one situation does not assure us of being healthy in another. There is a quality to being healthy in the holistic model that not only addresses our ability to be in balance with the environment we are in now, but also the ability to be in balance with the situations we are likely to come across, or the changes we are likely to face. The pathological and biological models are about the individual's ability to function optimally in a set or given environment, while the holistic model provides a model to explore health as something that is sustainable.

**The Holographic Model**

As cases advance, particularly if they are only partially treated, then they get more and more complicated. Fewer symptoms are clearly expressed in the totality of symptoms and a holistic model becomes harder to work with. In these cases, where many symptoms become overshadowed by others

and where much of the case can appear to be in shadow, an essence and thematic approach, based on the holographic model, opens the possibility of working with what would otherwise be difficult cases. The holographic model recognises that cause and effect are mutually dependent and the pattern behind the causation and expression of the illness is what points to and requires treatment.

Using this model the homeopath asks what is the order or pattern being expressed or revealed by the patient. Treatment is based on these patterns, referred to as essences and themes that are matched to the essence and themes in the homeopathic remedies (see Chapters 22 and 27) – both seeing the case and the remedies thematically go hand in hand. At times these themes relate to traits that run through groups of patients and that correlate to susceptibility, including inherited and acquired disposition. When related to the influence of a particular disease process that causes a distinctive pattern of illness, not necessarily the same as the disease itself, it is referred to as a miasm (see Chapter 17). Originally in homeopathy three miasms were described, relating to the traits set up by the illnesses of scabies, gonorrhoea and syphilis, corresponding in turn to a general pattern of deficient, excessive and disordered reactivity. Some homeopaths do not accept the theory of miasms; some do not accept the concept of essence and themes – those that do, find them a useful model for understanding more deep-seated illness and what would otherwise be confusing cases.

As a patient with deep-seated illness begins to respond to treatment, so other models and approaches may become indicated. The homeopath starts to see that returning to and maintaining health is a process that may go through several stages, often using different models of health as treatment unfolds over time.

While the pathological, biological and holistic models are relatively objective the holographic model relies on the recognition of patterns that are not a random collection of events but that have a perceived order or ‘intelligence’ in the observer. These patterns may be connected to the typical symptoms of a disease in the case of miasms or due

to other more abstract qualities such as a theme of rigidity (Kali salts) or performance (metals). They all, however, share an element of ‘subjectivity’ – that is why understanding the relationship between patient and homeopath is so important (see Chapter 23). Historically homeopaths have shied away from such interpretations but increasingly they offer opportunities to perceive cases that are difficult to treat with other approaches and that can be rigorously explored using insights on perception from modern science and the therapeutic relationship from psychotherapy.

### **Well-Being**

The pursuit of well-being often preoccupies many patients. Many wish to feel a positive sense of well-being and to ‘feel healthy’. Health, however, is not something you can be separate from or ‘feel’. It is easy to find patients where health, like beauty, has become an idealised state, becoming influenced, determined and promoted by prevailing fashion, markets, culture and political norms. It is perhaps why much complementary medicine is found within the beauty sector, as an attempt to counter the dominance of the narrow objective measures of health that have more to do with fitness. Health is, however, neither fitness nor beauty.

### **The Relational Model**

*‘What is crucial ... is that, according to the theory of relativity, a sharp distinction between space and time cannot be maintained ... thus, since the quantum theory implies that elements that are separated in space are generally non-causally and non-locally related projections of a higher-dimensional reality, it follows that moments separated in time are also such projections of this reality.’*

*David Bohm, Wholeness and the implicit order*

The relational model uses the principle that the health of a patient cannot be considered as separate from those things around the patient. The patient is at all times projecting onto the surrounding people and environment and the people and environment will constantly be projecting on to the patient. This leads to an approach that



recognises and reflects on these projections, that are not just psychological but are often most accessible in the conscious and unconscious reactions of the homeopath, leading to what are here referred to as a 'reflective' approach to treatment and psychodynamic methodologies of prescribing. Here the dynamic nature of the relationship between patient and homeopath reveals important aspects of the case (that might otherwise be hidden) and informs the treatment and prescription. It is particularly useful for understanding and working with cases that may present with a single, often overwhelming, symptom such as a tumour or where a disease is diagnosed in the absence of symptoms such as hypertension. These most hidden of homeopathic cases are sometimes called 'one-sided cases' and are often treatable when using this model at a deeper level than they might otherwise be.

The relational model requires homeopaths to reflect carefully about their physical and emotional reaction to patients and to know themselves well.

## Health in the Different Models

### *Health as Balance*

Balance can be considered in a number of ways, from returning to a previous state after being 'off balance', to returning to the same state but with the ability to resist being 'knocked off balance' again. Balance may also be a state that reflects harmony, either internal, for example, balanced emotions, or external, for example, balanced diet. It may, for some, reflect a point of development, 'I'm getting more balanced', or a positive state to attain, 'I'm looking for a better work-life balance'. For others it is something only recognised when lost. In practice a homeopath works with several different notions of balance and health within different models. In the Biological model the relevant symptoms are tightly focussed around 'the illness'. At other times a broad range of symptoms including those not immediately and directly related to the presenting illness may be considered to describe balance in the holistic model of health. While each model provides a discrete view you may already be able to see where the models can 'run into' one another.

### *Health Compared with Fitness*

Fitness is the ability to perform optimally in a set or limited situation. For example, a sports person may perform very well in one particular sport but not in another. Fitness helps you 'fit into' a particular environment or situation. You can be fit intellectually or emotionally when you are in a particular intellectual or emotional situation, but this doesn't necessarily mean you will cope if the physical, intellectual or emotional situation changes significantly. Homeopaths see many people who work hard at their fitness, including athletes, but they often have problems dealing with things like changes in their career, ageing, or bereavements. They may be fit but they are not necessarily healthy. Many patients pursue fitness rather than health, and much of the conventional health care system is focused on being fit, getting the body to work well or in balance in a given environment.

In John's case the treatments he needs may be many, depending on his choices and the models of health that are used to understand this case. How do you understand this case through the different models of health?

#### **CASE STUDY 1.2**

John enjoyed running. It helped him cope with stress. However, he started to get pain in his right knee, which he treated with an anti-inflammatory. His knee deteriorated until he required surgery. At that time he was unable to exercise, and found he was unable to cope with the stress of his job. He was diagnosed as depressed and started on antidepressants.

Health in the holistic model is the ability and potential to maintain the integrity of the organism in a changing environment. Unfortunately, much research into health care looks at the ability of an individual to perform or operate only in a particular fixed set of circumstances over a brief time. It looks at a single outcome, or at immediate changes that give a pointer towards fitness but very little information about health. This is

possibly the single biggest reason why much conventional research methodology is flawed when applied to treatments used in the holistic, holographic or relational models of health.

Fitness is something that you can train and practise for in a given environment, whereas health is more difficult to prepare for – although you can anticipate some of the likely changes that will affect you, for example as you age.

### ***Tensions Between Different Models of Health***

While no one model of health will be appropriate to interpret a patient's health needs in every setting, and while several models can be used together, they do also raise various conflicts. For example, in the holistic model a homeopath sees minor challenges to a patient's health as preparation for other more serious challenges; childhood minor acute illnesses might help a patient cope with more serious illnesses in later life. Holistically it is important for some acute illness to happen and for the patient to throw it off naturally. In the pathological and biological models, if the acute illness is treated by an approach that undermines the individual's susceptibility they may, from the holistic model, end up less healthy. In some models of health it is easier to think of health as a dynamic process rather than an absolute state. In order for the body to remain healthy it has sometimes to move out of balance. When it is out of balance it can react and come back into balance. In this way being healthy includes the ability to generate symptoms and get ill.

### ***The Importance of Illness***

The moving out of balance when a situation changes is a disturbance of the organism, a *disease*. The organism, if it responds in a healthy way, generates a reaction to the disease in order to attempt to rebalance itself. While health may be noticeable and observed by the absence of symptoms, the symptoms are vital to maintaining health. Health and illness are not so much like black and white as like shadow and light. They are like two sides of the same coin. The homeopath accepts that illness

### **CASE STUDY 1.3**

Karen has recurrent chest infections as a child. Each is treated with antibiotics. The infections get more frequent and her resistance seems to get lower. It is suggested she goes on continuous antibiotics which she is reluctant to take. She seeks a homeopathic opinion and is supported through her next few acute infections using homeopathy. Her attacks get less frequent and, over six months, her resistance to infections improves.

has to happen, that symptoms are the body's reaction to the disease. This whole process is a healthy one and leads to an enhanced and developed resistance as Karen's case illustrates.

### ***Balancing the Subjective and Objective Views of Health***

When we combine a subjective and objective view of health we notice that the observer and what is observed are connected. To distinguish between what is inside and outside the body, the patient and their environment, is artificial. In the same way one part of the individual cannot ultimately be seen as separate from another. A holistic view recognises that the different parts of an individual are intimately connected. The holographic view recognises that when one thing changes, everything else changes – nothing changes in isolation. The relational view recognises that when there is change in what is being observed there are also changes in the observer. Monitoring and working with yourself as the observer, including your personal development, is an important part of working in these models of health.

### **Summary of the Five Models**

No one model can accurately describe what is happening in every patient but separately or in combination, they provide insight into most situations, from the most straightforward to the most complex case presentation. In applying the different models of health, the homeopath has to hold different boundaries and to use different skills.

I frequently observe homeopaths moving over time and with experience into more individual ways of working. Blending the models and choosing the most applicable approaches and methodologies in a given situation is central to developing your optimum way of working for any given patient and clinical setting.

The five models described do not exclude others that readers will find important or even vital to how they work; other authors may name or refer to them differently. Being clear about the model used helps in determining not only the optimal treatment approach but also deciding on the strengths and weaknesses of the available methodologies and interpreting rationally the outcome of any prescription.

The student of homeopathy may find ideas in the holistic, holographic and relational models raise important questions about the ‘nature of man’ and the relationship of the patient to their ‘global’ environment and the nature of illness. The focus of this book is on the health of the patient and their physical and psychological well-being. We will touch on questions related to the health of a population but I encourage you to reflect and question each other and your teachers in relation to the spiritual nature of patients and yourself. I do not seek to answer these questions but am pleased if they are asked, as I believe they can bring you to the heart of what it is to be a homeopath.

Before moving from the models of health to the homeopathic approaches to treatment, it is helpful to focus on the homeopathic patient and how illness expresses itself – particularly what is offered by an understanding of vitality in the cause and treatment of illness.

## Homeopathic Patients

*‘The role of the homeopath is to help patients in their pursuit of health and it requires “insight, discernment, knowledge and awareness”.’*

*Paragraph 3 Organon, Medical Art  
by Dr Samuel Hahnemann*

Different patients choose to work explicitly with different approaches to treatment. Some choose simply to counter a cause, others to remove a particular effect. Some patients recognise that their health is related to things that are happening in their lives that may provide opportunities for growth and development. Still others recognise their illness in terms of their susceptibility to what has gone before, including hereditary factors. Patients with these different views will seek out different ways to be healthy and choose different treatments in different situations. Part of the challenge to a homeopath is to recognise this diversity and choose which models are optimum for each condition, situation and patient. The more open a patient is to understanding and expressing their illness and health through a particular model the easier it is to use the corresponding approach to treatment.

## Reframing illness

*‘There is a vitality, a life force, an energy, a quickening, that is translated through you into action, and because there is only one of you in all time, this expression is unique. And if you block it, it will never exist through any other medium and will be lost.’*

*Martha Graham*

When we think of illness as having a purpose for individuals and communities, we start to ‘re-frame’ our thoughts about it. Rather than something to be avoided at all costs illness starts to offer opportunities, and sheds light on the relationship between our inner and outer worlds. A change to a patient’s outer world, such as a change in family dynamics or diet, affects the inner world, from how they think and feel to the functioning of different organs. Many patients gain, through illness, insight into how the outer world affects the inner world. Less common is the insight into how a patient’s illness and health can affect individual circumstances. If illness is an opportunity to learn, then before removing an illness it is appropriate to reflect on whether what is to be learnt has been.

**REFLECTION POINT**

- What would the world be like without illness – if no-one got hangovers after drinking too much, if no-one got joint problems from using or misusing their bodies, if no-one starved from not eating enough, or was obese from eating too much?

A definition of health and illness I invite you to consider is that ‘health is the freedom to move through the different circumstances in which you find yourself and illness is the loss of that freedom’. A healthy response to illness is to make changes to yourself and, where possible, your environment to bring them back into balance. Illness is important for keeping our environment and our bodies in balance; symptoms are what exist at the interface of the patient’s inner and outer worlds. The symptoms remain necessary until the inner and outer worlds are brought into balance. Understanding that a patient’s inner world and outer environment are connected allows us to tell things about a patient’s inner world from the environment that they desire or fear and those they actually live in.

**The Life Force and Vitality**

The life force is non-material and therefore sometimes described as a ‘spirit-like’ force or ‘dynamis’ that is expressed in living organisms as vitality. In today’s language we might instead talk about general well-being, resistance and immunity. If you think of a living organism like an electrical machine the life force would be the battery or generator and the vitality the electric current. If you imagine it as a spinning top, the life force might be thought of as what keeps it spinning, and the vitality as the force that throws things out to the periphery, both keep it balanced and upright.

The concept of life energy is found in many other therapeutic systems, e.g. as ‘chi or Qi’ in traditional Chinese medicine, as ‘prana’ in Hinduism and ‘vis medicatrix naturae’ by Aristotle. When the organism is out of balance the life force that animates the body expresses itself through the vitality. The vitality stimulates the organism to

re-establish balance through the production of symptoms. At the time homeopathy was formulated in the 18th century, the idea of vitalism was common, so it was not unusual to think of all living organisms as having a vital principle that energised, co-ordinated and brought together the functions of an organism. Using this terminology allowed homeopaths historically to conceptualise on a subtler level the physical, chemical and biological changes that take place in an individual when ill.

The potential energy needed to throw off an illness is similar to the way electrical energy is needed to operate an electrical appliance. The life force can be thought of as a battery that needs charging now and then and is subject to being drained; the vitality can be thought of as the current generated when the battery charge flows. In health, life force integrates and allows the different parts to co-ordinate, including normal physiological functions.

Many patients, as Paul’s case illustrates, are prepared to talk about their general feelings or general energy and this is similar to what historically might have been described as vitality. It allows the body to regulate, balance and evolve and, as such, is an intrinsic quality of life connecting the separate parts of the mind and body. Much debate that reflects on the purpose of life rather than maintenance of health takes place as to whether the vitality is intrinsically intelligent with perception and creativity (free and spirit-like) or ‘blind’, following patterns established in the individual that it animates (instinctive).

**CASE STUDY 1.4**

Paul consults with a history of recurrent minor infections; he is exhausted from overwork and a ‘stressful’ home life. He complains of generally feeling unwell, and when asked how he would score his ‘general energy’ between zero and ten, says it rarely gets above four.

**Vitality**

Most patients have a sense of their level of vitality and it is important for the homeopath to reflect on what it does and how it is sustained, as it is

through the vitality that individuals are able to heal themselves. It is what allows subtle homeopathic medicines to have major effects. Changes in vitality precede illness and recovery, and indicate when there is a need for the patient to be supported or to make changes to environment or lifestyle, before remedies can act fully.

Different models of health reveal different views on whether it is the vitality or the environment that is the cause of all illness. At one extreme, in the pathological model, all cause and cure could be considered to be due to external factors, e.g. it is the bacteria that cause infection. This leads to a deterministic approach to care where patients are made ill and cured by others. At the other extreme it is the susceptibility of the patient that in the holistic model invites illness, e.g. it is the host's low resistance that lets the bacteria get established. This leads to a fatalistic approach to care where nothing can be done for or to a patient unless they do it themselves.

Integrating these different models, whether as a homeopath or any therapist, is part of the art of medicine – being able to hold a balance of seeing the inside affecting the outside and the outside affecting the inside. One way to do this is to see the vitality and the patient's circumstances and environment as directly related. On the one hand the vitality enables the body to react and change its situation when out of balance; on the other hand, the vitality is nurtured and supported (if not produced) by life experiences. When an individual gets stuck in their environment, the vitality starts to stagnate and, when the individual stops completely, it is dead. This fluctuation of the vitality can be illustrated graphically through the 'vitagram'.

## The Vitagram

The vitagram schematically represents the individual's vitality over time and you will see in Chapter 3 how this links to life events as a 'time line'. It is helpful for you and your patients to appreciate that the vitality or 'general well-being' fluctuates depending on what you have been doing, e.g. a poor diet or several late nights might reduce it and alter susceptibility to illness. Normally it is

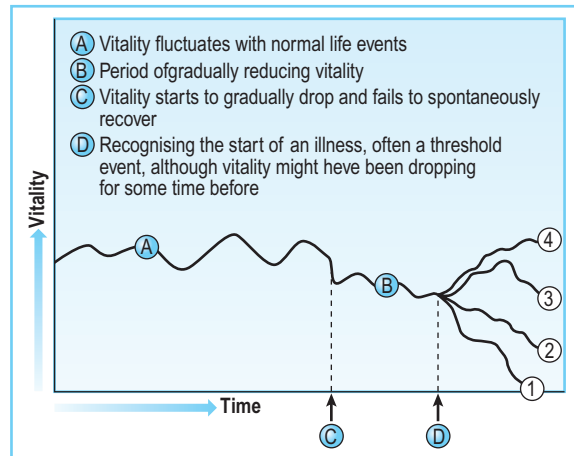


Figure 1.2 The vitagram

self-correcting and some early nights or a change in diet can improve the vitality and precede a recovery from the illness. Figure 1.2 illustrates the idea of vitality changing over time, demonstrating its gradual drop (which often is a precursor to chronic illness) and showing several common ways the vitality then changes (described below).

As the vitality drops, the individual is more susceptible to acute and recurrent acute illnesses, which is why these are often precursors of chronic illness. The four common changes to the vitality illustrated in Figure 1.2 are:

1. patients deteriorate rapidly and the vitality may drain quickly
2. the vitality may carry on draining away only slowly where they use supportive treatments
3. they temporarily stimulate their vitality but with no underlying cure they relapse
4. they may correct the imbalances of their life that have led to the low vitality or receive treatment that allows the vitality to return to its normal levels.

In order to better understand patient vitality see the reflection point below.

### REFLECTION POINT

- If you are sitting in a room with someone who has a cold, what factors in you are likely to influence whether

you catch it and how does this connect to your general well-being and vitality?

- How would you score your vitality from 0 to 10, If 10 out of 10 was the highest and 0 out of 10 the lowest? What do you think improves your vitality?
- What would your 'vitagram' look like over the last 5 years? When would you think your vitality has been highest and when was it at its lowest?

## The Law of Similars and Approaches to Treatment

In each model of health, the corresponding approach to treatment follows a central tenet of homeopathy, 'like treating like'. In the causation approach then using something that acts in the same direction as the cause can stimulate a healing reaction, similar to desensitising treatments for allergic illness and the stimulation of a patient's immunity by vaccination. In the symptomatic approach an acute symptom can often be appreciated as a person's way of trying to get well. For example, when a patient develops food poisoning they get diarrhoea and vomiting. This is the body's way of clearing out the food poisoning as rapidly as possible. The symptoms are the body's way of trying to return to a balanced state and the most helpful treatment works in the same direction as the symptoms. The information the body needs to rebalance itself is contained in remedies that can also cause diarrhoea and vomiting.

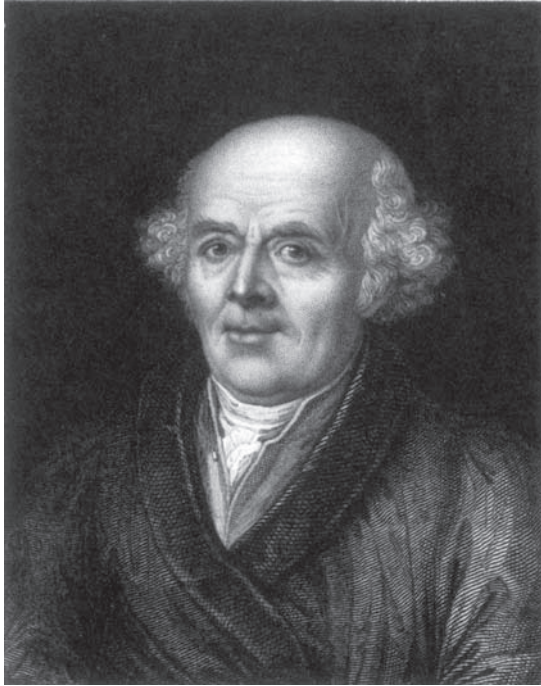
In the holistic model the totality approach is based on selecting a remedy that closely matches the symptom picture. It is as if the vitality produces symptoms in an effort to return the organism to a healthy state. It requires a stimulus as it has failed to resolve spontaneously. The illness is like a pendulum that has stuck. Tapping it is enough to free the gravitational pull on the pendulum to return to equilibrium. In the holographic model the pattern of symptoms expresses what the patient needs from the illness. In treatment this is met by the information available through homeopathic remedies. In the relational model the treatment approach has many similarities to 'psychodynamic' treatments that are informed by

the effect the patient has on the homeopath. The same remedies may be used in each model but are understood in different ways.

The Law of Similars is based on reliable observations that if a substance produces symptoms when taken by a healthy person, the same substance can help an ill person with a similar set of symptoms. The recording of symptoms produced when a substance is given to a healthy subject is called a proving and is explored in detail in the next chapter. Dr Samuel Hahnemann was the first to record this systematically and his life and experiments first with Cinchona bark and his thinking, as reflected in the *Organon of the Medical Art*, are essential study for the student of homeopathy. He observed that taking Cinchona, used at the time to treat malaria, created in a healthy person a fever similar to malaria. He successfully used Cinchona to treat fevers homeopathically and developed his thinking over six editions of the *Organon*.

### Samuel Hahnemann (1755–1843)

Hahnemann was 35 when he conducted the experiment using Cinchona bark. At the age of 50 he published his reflections on this for the first time – 'The Medicines of Experience' – observing that medicines should be prescribed on the basis that they are similar to the disease symptoms a patient has. Medicines were chosen on the basis of the symptoms and the homeopathic remedy was known by the effect it has on healthy people (provings). In 1810 he published 'The Rational Art of Healing' – this and the second edition focus predominantly on the scientific concerns regarding the new approach to treatment. In the third, fourth and fifth editions he incorporated a more metaphysical inclination with an increasing emphasis on the doctrine of vitalism. The fourth edition introduced the theory of chronic diseases into the basic text, while in the fifth edition the dynamics of remedy preparation are discussed. The sixth edition of *The Organon*, written by Hahnemann in his eighties and completed the year before he died, was not published until nearly 80 years after his death and is still essential reading for all homeopathic students.



### ***The Structure of the Sixth Edition of the Organon***

There are seven main sections in the *Organon* and over different editions the themes of each evolved gradually. The first section is an overview of the objectives for the physician (paragraphs 1–2). The second defines homeopathy in terms of what is to be cured, what is curative in medicines and how to adapt medicines to particular patients (paragraphs 3–5). Section 3 looks at the central role that symptoms play, what the illness is and how a cure is obtained (paragraphs 6–8). In Section 4 the Law of Similars is explored – looking at how disease and medicine act dynamically and how symptoms indicate not only what treatment is needed but also, from the effects that they can produce in healthy individuals, where the curative power of the medicine lies (paragraphs 9–27).

Section 5 explores a possible mechanism of how homeopathy works in comparison with other disease treatments of the time (paragraphs 28–70). Section 6 looks at how to practise homeopathy (paragraphs 71–285) and Section 7 briefly considers the context of homeopathy in relation to other

non-allopathic therapies (paragraphs 288–291) (Singer & Overbook 2004).

The idea that low doses of a similar substance could have as strong, if not stronger, effect than higher doses, and with significantly less adverse effects, he referred to as the ‘minimum dose’.

### **The Minimum Dose**

Homeopathic remedies stimulate the vital force and provide the information for the body to throw off illnesses. As the remedy is acting on a subtle level, the aim is to give the dose in an equivalent subtle form that is also the minimum effective concentration. To do this, a process of preparation known as ‘potentiation’ incorporating dilution and vigorous shaking (succussion) has been developed (see Chapter 20).

For some people the minimum dose has become the most characteristic feature of homeopathy, although this is incorrect. It is the process of prescribing remedies on the basis of ‘like treating like’ that is the most characteristic feature of homeopathy. However, Hahnemann did also observe that remedies have different effects when used in different strengths or potencies. This is reflected in the theory of hormesis, which suggests that different doses of toxins have different and at times opposite, sometimes stimulatory and sometimes inhibitory, effects (Calabrese 2001 and 2004). Different potencies often match the methodology and model of health that is being used to understand and treat a case. For example, a prescription based on causation or a single presenting symptom is more likely to require a low potency while a remedy prescribed thematically is likely to benefit from a higher potency. Of course, in many cases, more than one model and methodology may point to the same remedy.

### **Summary**

This chapter has covered some of the core concepts of homeopathy. You may like to return to the laws of health and five models of health, both to clarify your ideas about health and illness and to help you understand the role of the homeopath

in helping patients. Understanding the different views of health that patients have is an important part being a homeopath. While some methodologies will appeal to you more than others, it should be noted that some patients will only be prepared to work at certain levels and, if you are unfamiliar with the different approaches to prescribing, you will limit your effectiveness as a homeopath.

An understanding of the different models of health is also central to understanding the energetic action of the remedies and the different ways the remedy picture can be expressed and collated. Before building on this further, we look in Chapter 2 at how the information related to different remedies is expressed through provings.

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