

International Journal of <u>Homoeopathic Scienc</u>es

E-ISSN: 2616-4493 P-ISSN: 2616-4485 IJHS 2018; 2(1): 04-07 Received: 02-11-2017 Accepted: 03-12-2017

Dr. Siva Rami Reddy E Research Scholar, Faculty of Homoeopathy, Tantia University, Sri Ganganagar, Rajasthan, India

History of homoeopathy: A review

Dr. Siva Rami Reddy E

Abstract

Homeopathy is a medical science developed by Dr. Samuel Hahnemann (1755-1843), a German physician. It is based on the principle that "like cures like". In simple words, it means that any substance, which can produce symptoms in a healthy person, can cure similar symptoms in a person who is sick. This idea is referred to as the "Law of Similars". In 1973, the Government of India recognised homeopathy as one of the national systems of medicine and set up the Central Council of Homeopathy (CCH) to regulate its education and practice.

Keywords: History, homoeopathy, European countries, central council of India

Introduction

The history of homeopathy begins with the discoveries of its founder Dr. Samuel Hahnemann (1755-1843), a German physician. Hahnemann first coined the word "homeopathy" ("homoios" in Greek means *similar*, "pathos" means *suffering*) to refer to the pharmacological principle, the law of similars, that is its basis. Actually, the law of similars was previously described by Hippocrates and Paracelsus and was utilized by many cultures, including the Mayans, Chinese, Greeks, Native American Indians, and Asian Indians, but it was Hahnemann who codified the law of similars into a systematic medical science ^[1].

Hahnemann's first comments about the general applicability of the law of similars were in 1789 when he translated a book by William Cullen, one of the leading physicians of the era. At one point in the book Cullen ascribed the usefulness of *Peruvian bark* (*Cinchona*) in treating malaria due to its bitter and astringent properties. Hahnemann wrote a bold footnote in his translation, disputing Cullen's explanation. Hahnemann asserted that the efficacy of *Peruvian bark* must be for other factor, since he noted that there were other substances and mixtures of substances decidedly more bitter and more astringent than Peruvian bark that were not effective in treating malaria.

Hahnemann was particularly disliked by the apothecaries because he recommended the use of only one medicine at a time and prescribing only limited doses of it. Because he recommended only small doses of each medicine, the apothecaries could not charge much for them. And because each medicine required careful preparation, Hahnemann found that the apothecaries were not always making them correctly or were intentionally giving his patients different medicines. As he grew to distrust the apothecaries, he chose to dispense his own medicines, an illegal act at the time in Germany. The apothecaries then accused Hahnemann of "entrenching upon their privileges by the dispensing of medicines." Arrested in Leipzig in 1820, he was found guilty and forced to move [2].

The hallmarks of unitary homeopathy are

- A thorough interview to discover the totality of signs and symptoms. This total picture is
 our most important guide to the medicine. By "signs" we mean that which can be
 objectively assessed by the physician. By "symptoms" we mean what the patient himself
 feels subjectively.
- How a homeopathic medicine acts is found out by administering it to healthy volunteers and recording the symptoms the volunteers report. By repeating these trials often, we get a complete profile of the medicine. Such trials are known as "provings." All homeopathic medicines have been "proved" on healthy volunteers to learn how they act.
- The total picture of the patient should be as similar as possible to the drug picture of the selected remedy. This is known as similia similibus curentur (let similars be cured by similars). The medicine should match the so called characteristic (striking, unusual, and uncommon) symptoms of the patient as closely as possible.

Correspondence
Dr. Siva Rami Reddy E
Research Scholar, Faculty of
Homoeopathy, Tantia
University, Sri Ganganagar,
Rajasthan, India

• Since a homeopathic remedy corresponds only superficially to a particular disease, it must be customized to match the individual with that disease, a process we call "individualization." The very same illness in another patient will most often be cured with an entirely different remedy thus we could have two different remedies that cure two different patients with the same disease.

According to the homeopathic way of thinking, a disease originates from a disturbance of the patient's "vital force." This is the life force energy that sustains life. As the origin of disease occurs on this energetic level, the homeopathic remedy has also to be on this level.

- Such an energetic medicine is made by diluting the remedy and succussing (shaking) it. All homeopathic medicines are "potentized", i.e., diluted and succussed. This method of preparation imparts considerable energy to each substance.
- "Unitary" homeopathy means that only one remedy is given at a time because only one remedy can correspond perfectly to the total picture of the patient. A prescription that does not aim for this totality is not homeopathic.

Homeopathic medicines can be administered in drops, grains (approx. 3mm in diameter) or globules (approx. 1mm in diameter). The medicine is taken once, meaning that a given number of drops, grains or globules are taken on a single occasion and only once. Sometimes the medicine is repeated, e.g., two times a day or every three hours, etc. You must follow the instructions carefully. Usually the remedy is repeated until a reaction occurs. When a dose is taken can be important. Usually you will be instructed to take it before a certain meal, usually breakfast. It is best is to eat no food, alcohol, tea or coffee before taking the remedy. Also do not brush your teeth at that time. After a couple of minutes the remedy is absorbed and you can eat breakfast [3].

Homoeopathy preparation

Homeopathy is based on rigorous dilutions and mixing, called successions. The dilution level is printed on the bottle of medicine. A typical homeopathic dilution is 30X, where the X represents 10. So, one part toxin (such as the aforementioned poison ivy) is mixed with 10 parts water or alcohol. The mix is shaken; one part of this mix is added to 10 parts of water or alcohol again; and the whole process is repeated 30 times. The final dilution is one molecule of medicine in 10 to the 30th power (10³⁰) of molecules of solution - or 1 in a million trillion. At this dilution level you'd need to drink 8,000 gallons of water to get one molecule of the medicine - physically possible but implausible. Other homeopathic solutions are 30C, which represents 100 to the 30th power (100³⁰).

Homoeopathy in European countries

Among the different forms of Complementary and Alternative Medicine (CAM), in particular homeopathy has a form of legal recognition in certain European countries, an organisational structure at European level, self-regulatory mechanisms, and a certain level of scientific credibility. Homeopathy is being increasingly recognised as a potential asset to European health care. Resolutions on CAM (or non conventional medicine) have been adopted by the European

Parliament and the Council of Europe, EU Directives oblige the Member States to register homeopathic medicinal products, and homeopathic medicinal products are being included in the European Pharmacopoeia. The monopolistic system exists in Austria, Belgium, Cyprus, Czech Republic, France, Greece, Hungary, Italy, Latvia, Lithuania, Luxembourg, Malta, Poland, Portugal, Slovakia and Spain, constituting 60% of the whole EU population. Medical practice by other people is illegal, which implies that in these countries also the practice of homeopathy is explicitly restricted to medical doctors. Germany is the only EU Member State where non-medically qualified practitioners or Heilpraktikers, have to qualify for a licence. Health authorities subject the candidates to an examination in order to assess that they have sufficient public health knowledge as well as some basic knowledge of anatomy, physiology and pathology to prevent them from constituting a public health risk. The purpose of the examination is not to determine the level of knowledge and skills required for their professional competence.

Total of 42 countries: Albania, Austria, Belarus, Belgium, Bosnia Herzegovina, Bulgaria, Croatia, Cyprus, Czech, Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Israel, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Malta, Moldova, Netherlands, Norway, Poland, Portugal, Romania, Russia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey, Ukraine, United Kingdom, Yugoslavia. In Hungary (1997) and Lithuania (1999) homeopathy is officially recognized as a regular medical method by the government. In 1999 the Belgian Parliament adopted a law with the aim to recognise some CAM modalities, including homeopathy. According to this law homeopathy is considered as an additional qualification (GP with homeopathy, paediatrician with homeopathy etc.). The Portuguese Parliament in 2003 and the Bulgarian Parliament in 2005 adopted similar laws, providing a framework for recognition of individual branches of CAM including homeopathy. The Italian Parliament is currently discussing legislation that will eventually lead to the recognition of medical qualifications in homeopathy and other branches of

The European Pharmacopoeia (EP), which belongs to the jurisdiction of the Council of Europe, is including specific homeopathic monographs on several homeopathic starting materials – from botanical, chemical, mineral, or zoological origin – and this process will proceed over the next years. It is intended that the official homeopathic pharmacopoeias currently used in the Member States, i.e. the French and German one, will eventually merge into the European Pharmacopoeia [4].

Homoeopathy in India

The Indian government has almost 11 000 homoeopathic hospital beds and three-quarters of all registered practitioners have been trained by the state. Medical students, regardless of whether they intend to be homoeopaths or modern medics, share the fi rst 3 years of training. The result is that India's creaking publichealth system faces competition from not only a well resourced private sector in conventional medicine but also a cheaper, widely available homoeopathic service. A visit to a homoeopathic doctor costs less than half the price charged by a medical doctor in India. Another attraction is

homoeopathy's reputation of being harmless, S P Singh, the Ministry of Health and Welfare's adviser on homoeopathy told The Lancet. "It does not give side-eff ects. With a small quantity of medicine we can serve a lot of people." Despite evidence to the contrary, Singh says that homoeopathy "has a biological eff ect" and that "all homoeopathic medicines are therapeutically proven".

Homeopathy is an integral part of Indian healthcare and under the patronage of the Government of India, Homeopathy has seen much growth and better regulation since independence. This is a very disturbing trend in the progress of system which claim to be the 2nd largest medical practice in the world. In 1839, Honigberger came to India for the 2nd time and took up the treatment of Maharaja Ranjit Singh of Punjab. The fakeer Azeez-oo-deen called upon Honigberger as all the native physician had failed to cure the swollen feet, paralyzed organs of speech of Maharaj. Though the Maharaja did not take any European medicine, he was resolved to take homoeopathic medicine if it is prepared in front of him. Honigberger had brought with him the tincture of Dulcamara and three empty corked phials. Dulcamara 3X was prepared and one single drop was given on a lump of sugar to take every morning and evening. A marvelous result began to start. On the third day there was great feeling of well being and the Maharaja ordered the minister to present him with 2 gold bracelets and 2 Kashmiri shawls of the same value. He was therefore the person who introduced the homoeopathy in India and a book appeared in London in the 'Calcutta Review' in January issue an article was published as "Homoeopathy, And Introduction into India" [5].

Dr. Rajendra Lal Dutta (Father of Indian Homoeopathy) was popularly known as Babu Rajen Dutta belongs to a scholar family of Bengal and for sometimes he studied in Calcutta Medical College. He was treated for a chronic disease by an amateur homoeopath in India and cured. Therefore, he developed interest in homoeopathy. Being an ardent believer of homoeopathy, he decided to practice homoeopathy by himself in 1861. Pandit Iswar Chandra Vidyasagar in 1863 was treated by Dr. R. L. Dutta for one of his chronic illness and got a marvelous result whereas he was treated by many allopathic doctors beforehand. The king of Sovabazar Rajbari, Raja Sir Radhakanta Deb Bahadur was suffering from gangrene of his feet was treated by Dr. R. L. Dutta with homoeopathic medicine. Dr. Mahendralal Sirkar helped in establishing homoeopathy in India. He has obtained M.D. degree from Calcutta University. Dr. R. L. Dutta had converted Dr. M. L. Sirkar to homoeopathy. He was basically an allopathic physician, but after reading some books on homoeopathy he got interest in the subject. After seeing the efficacy of homoeopathic medicine with Rajen babu, he became a member of homoeopathic society.

Dr. Pratap Chandra Majumdar took his L.M.S. degree from Calcutta Medical College in 1878 and later got the honorary degree of M.D. from USA. Converted to homoeopathy by his Father-in-law, Dr. B. L. Bhaduri he fortified his grasp of Hahnemannian Homoeopathy as the worthy assistant to L. Salzer for a pretty long time. He proved a number of indigenous drugs, and wrote a large number of books in English and Bengali. He edited the Indian Homoeopathic Review, the second oldest homoeopathic journal in India. He attended the Fourth International Congress held in Chicago in June 1891. In 1881 in collaboration with Dr. D.

- N. Roy, Calcutta Homoeopathic Medical College was established and maintained till his death.
- Dr. B. K. Bose a son of a Judge was born in India in 1879. The son of a good house soon developed into a riotous rebel against the British occupants. Persecuted by the British as an anarchist, he had to flee to America via France. Then fortunately he was directed to Dr. James Tyler Kent, who took him to the Hering Medical College and imparted knowledge of homoeopathy. Here he also had a brief acquaintance with Sir John Weirof Royal Homoeopathic Hospital who was then an outgoing student. After this he took his admission into the Kansas City University where he obtained M.D., D.O. degree and then returned to India. In India at first, he started his practice at Calcutta and then shifted to Banaras where he became the family physician of Shri Motilal Nehru. Later on, he migrated to Calcutta, where he has been the backbone of the Calcutta Homoeopathic Medical College and Hospital.
- In 1967 a bill was discussed and the Government decided to constitute a committee of 36 parliamentary members for consideration of establishment of Central Council. The Central Council of Homoeopathy Act was made in 1973 and the then Health Minister Dr. Karan Singh on behalf of Government of India constituted the Central Council of Homoeopathy (C.C.H.) in December, 1974. As soon as the Central Council was nominated, the Government abolished the Homoeopathic Advisory Committee.
- The National Institute of Homoeopathy was established in December, 1975 as an autonomous organization under the Ministry of Health and Family Welfare, Govt. of India, registered under the West Bengal Society Registration Act of 1961. This institute was set up with a view to promoting the growth and development of Homoeopathy in the country by producing graduates and post graduates in Homoeopathy
- In 1970, under the advice of Dr. K. G. Saxena, the then Hony. Advisor of Homoeopathy, the Central Government decided to form Central Homoeopathic Research Institute and thus Central Council for Research in Homoeopathy had been established on 30thMarch, 1978 under Society's Registration Act XXI of 1960.

The Government of India constituted an ad hoc committee on homeopathy in 1952. There were five members of the AIIH on this committee, presided over by the Director General of Health Services (DGHS), Ministry of Health. This committee had six sittings between 1952 and 1954 and discussed and resolved various problems pertaining to homeopathy. In 1954, this committee was designated as the Homeopathic Advisory Committee. In 1956, this advisory committee was transferred from the directorate to the Health Ministry with the health secretary as its chairman. The DGHS (Director General of Health Services), the director of medical research and six homeopaths formed the committee. All the homeopathic members were members of AIIH. This committee functioned until the formation of the Central Council of Homeopathy in 1974. Another landmark in the progress of homeopathy in India was the appointment of a Homeopathic Pharmacopoeia Committee in September 1962 with B.K. Sarkar as the chairman. The other members were S.R. Wadia, Diwan Harish Chand and K.G. Saxena. The

term of the committee was for a period of 3 years commencing from 17 November 1962, the date of its first meeting. After the expiry of 3 years, the term of the committee was extended by a further period of 3 years. The work of the committee was in connection with the compilation of the Indian Homeopathic Pharmacopoeia.

Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homeopathy (AYUSH)

The ISM&H was established in March 1995. Its name was changed to Department of AYUSH in November, 2003. The department is working constantly for upgradation of AYUSH educational standards, quality control and standardisation of drugs. It is also working on improving the availability of medicinal plant material, research and development and awareness generation about the efficacy of the systems domestically and internationally.

Table 1: Registered Practitioners and Population of India

S. No.	Item	Homoeopathy
1	Number of Registered Practitioners	284471
2	Percentage of Registered Practitioners	36.8%
3	Registered Practitioners per crore Population	2136

Table 2: Annual Growth Rate in India

S. No.	Item	Homoeopathy
1	Eighth Plan (1992-97)	2.4%
2	Ninth Plan (1997- 2002)	2.0%
3	Tenth Plan (2002-07)	2.0%
4	Eleventh Plan (2007-12)	-1.7%
5	Twelth Plan (2012-17)	4.5%
6	(1993-2017)	2.7%
7	Average Annual Growth Rate in AYUSH doctors during 1980-2017	2.9%

Central Council of Homoeopathy (CCH) in India

In 1964, a composite Central Council Bill for Ayurveda, Unani and homeopathy systems was introduced in the parliament. A joint parliamentary committee of 36 members of parliament with Bhargava as the chairman was constituted, which submitted its report in 1967 and recommended for separate Central Councils of Indian Systems of Medicine and Homeopathy (ISM&H). The Indian Medicine and Homeopathy Central Council Bill, 1968 was introduced in the Rajya Sabha (upper house of Parliament) on 27 December 1968. In 1971, the Central Council for Indian System of Medicine was formed and a separate bill for homeopathy was raised in the Lok Sabha (lower house) in December 1971. In April 1972, a joint parliamentary committee of 48 members of parliament (MPs) was constituted for homeopathy. The Central Council of Homeopathy Bill was accepted, in the Rajya Sabha in July 1973. The Central Council of Homeopathy Act was introduced in 1973 and the government constituted the Central Council of Homeopathy (CCH) in 1974 with A.K. Kisku as the president and Jugal Kishore as vice president. Currently, the CCH approves two courses: BHMS: (Bachelor of Homeopathic Medicine and Surgery) This course spreads over 5.5 years, including internship of 1 year duration after passing the final year degree examination. M.D (Homoeo): (Postgraduate Degree Course) The CCH has prescribed postgraduate degree courses in homeopathic

subjects, for example, Materia Medica, Homeopathic Philosophy, Repertory and allied subjects are Practice of Medicine, Psychiatry, Paediatric spread over 3 years' duration including 1 year of house job or equivalent thereof. Indian universities are stared PhD in Homoeopathy with minimum 3 years and maximum 5 years duration.

Central Council of Research in Homoeopathy (CCRH)

Before 1947, research on homeopathy depended entirely upon the non governmental financial support. With a view to expediting research since independence in 1947, it was felt that government grants in the form of finance and approval were necessary. On 23 May 1969, the government of India formed the Central Council for Research in Indian Medicine and Homeopathy and Yoga. In 1970, under the advice of K.G. Saxena, the then honourable advisor on homeopathy, the central government decided to found the Central Homeopathic Research Institute. The first homeopathic research institute in India, which was also the first in Asia, was established in Howrah, West Bengal. CCRH, one of the successor organisations to the erstwhile Central Council for Research in Indian Medicine and Homeopathy (CCRIMH), was established as an autonomous organisation at New Delhi in 1978. Ever since, CCRH remains a unique organisation, which is engaged in various research studies in homeopathy.6

Conclusion

Homeopathy became extremely popular and spread all over world. Hanhemann's conception regarding health, disease and cure coincides with ancient Indian philosophy: the source of health and disease is not material but spiritual, that is, in the material life principle, which is integrated with body and mind in the human organism. Anything which affects the life principle morbidly must do so qualitatively and the medicine which cures diseases also does the same qualitatively. Homeopathy has limitations; it can be used as complementary and supplementary therapy to allopathy and can co exist with other modern methods.

References

- Sarkar BK. History of Introduction and Spread of Homeopathy in India and The Gleanings on the History of Homeopathy in India, Homeopathic Bijnan Parishad. 1988.
- 2. Sarat Chandra Ghosh MD. Life of Mahendra lal sircar. Homeopathic Bijnan Parisad, Cal. 1909, 25-54.
- 3. Ajoy Kumar Ghosh. A short history of the development of homeopathy in India. Homoeopathy. 2010; 99:130-136.
- 4. MKAli. Scope of Homoeopathy. Hom Book. 2017, 3.
- 5. Prasad. Homoeopathy booming in India. The Lancet. 2007; 370:1679-1680.
- 6. Homoeo Rays. Brief Introduction, Aims and Objects of central council of research in homeopathy. 1985; 6(1):128.