# FREEDOM FROM INFECTIOUS DISEASES

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# *Foreword and Acknowledgements*

The global coronavirus pandemic has triggered renewed interest in an old method of immunization that predated and even originally influenced conventional vaccination. It also has brought to light many inconsistences and even outright fraud in the medical narrative of viral diseases including the role of external factors on immunity. It has triggered many questions about widely held dogmas and beliefs about infectious diseases and the germ theory. These doubts had previously been expressed in many seminars held by this author, especially in his tutorials on Aids and Immune Deficiency, for the Homeopathic College (thehomeopathiccollege.org).

An authoritative treatise for the general public on homeopathic immunizations is long overdue. Even though the author has presented the method of homeopathic prophylaxis to his students for around three decades, and has offered the method in his practice to his clients over the same period of time, the colorful history, methodology and research on homeopathic prevention of infectious disease has never been presented in the context of medical anthropology. This book attempts to do that.

However, even in the homeopathic community, practitioners are not thoroughly familiar with the historical and scientific facts of homeopathic immunization. Many who call themselves "classical homeopaths" still outright reject it. To those fellow homeopathic practitioners, I would like to respond, in the words and spirit of CW Eaton of Iowa, "we must not do homeopathy the injustice of giving this, one of the most successful and useful outgrowths (of homeopathy), a partial and equivocal recognition, just because it happens to be strange to us…"

The present book has its origin in an article on homeopathic immunization, I wrote around 1995 for the students of The Homeopathic College. The article summarized the history, research, and clinical methodology of homeopathic prophylaxis. However, not until recently and in light of the WHO global pandemic declaration, did I expand and revise this work as a definitive introduction to homeopathic immunization for the general public.

The history of homeopathic immunization is also inevitably a part of the history of medicine. This book highlights two important but little known parts of medicine in general—the development of the germ theory and that of vaccination. Unlike other most texts, it does not shy away from documenting the phenomena of medical scare mongering and outright fraud in conjunction with vaccination that continues to this day. The content of this book speaks for itself. It is primarily intended to educate the public about the homeopathic solution to infectious diseases and at the same time teach the homeopathic specialist as well as the general public a thing or two about the rationale and detailed protocols for homeopathic immunization.

I wish to thank my friends, associates, clients and students for their encouragement in this work, and I wish all of them, the best of health.

***Manfred Mueller, March 2021***

# I. HISTORY

## The First Experiments In Homeopathic Prophylaxis

The practice of homeopathic immunization is now over two hundred years old. More and more physicians worldwide protect their patients with it against infectious disease. Scientific studies have demonstrated its efficacy. Most recently in Cuba, Dr. Gustavo Bracho found the homeopathic immunization for leptospirosis was more effective than the conventional vaccination.[1] A review of the literature shows that homeopathy was one of the first systematic attempts toward specific disease prevention. It may be the safest and most effective to date.

The first successful experiment in homeopathic prophylaxis took place in 1799, during a Sydenham's smooth scarlatina epidemic in Königslutter, Germany. During that epidemic, many family members of the afflicted contracted the disease, especially children. Dr. Christian Friedrich Samuel Hahnemann, an accomplished physician and chemist, investigated and documented the potential of diluted tincture of *Belladonna* during this epidemic in preventing the spread of scarlet fever. According to records left by Hahnemann, none of the exposed children immunized with that medicine developed the disease. Apparently, *Belladonna* was able to induce an immune response that protected one hundred percent of the exposed children of Königslutter against the deadly disease.[2]

During his lifetime, Hahnemann single-handedly developed a whole new rational system of medicine, and an impres-

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1 Bracho G. Homeopathy. Large-scale application of highly-diluted bacteria for Leptospirosis epidemic control. 2010 Jul;99(3):156-66. doi: 10.1016/j.homp.2010.05.009.

2 Hahnemann S. Lesser Writings. Transl. by Dudgeon RE. Radde NY 1852. Cure and Prevention: 376-85.

sive number of previously unknown drugs. He was the first physician to investigate and document the action of drugs in various minute doses and innovative methods of preparation on healthy people and to draw rational conclusions on their clinical action. Although in standard medical textbooks he is not given credit for his accomplishments, according to Dr. Andrew Weil, Hahnemann was the father of experimental pharmacology[3].

## The Law Of Similars

Hahnemann is best known for his discovery of the Law of Similars, formulated in 1796. The Law of Similars refers to the observation that "like cures like"––that diluted drugs can trigger a curative response in patients when the effects are clinically similar to the case of a disorder it treats.

Under the Law of Similars, the physician prescribes drugs to a case of disease, on the similarity of the syndrome they had produced in healthy test subjects during controlled tests. He called this new method homeopathy (from Greek *omoios* homoios = similar). Homeopathic medicine applies this natural law of healing to both: prevention and treatment.

Hahnemann pointed out that this phenomenon had long been observed in nature. When a patient contracted a serious contagious disease such as smallpox while suffering from a similar milder disease, such as measles, the more serious disease cured the milder disease.[4] He hypothesized that an artificial disease produced by a medicinal substance could cure an infectious disease, if it resembled that disease by its overt signs

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3 Weil A. Health and Healing: The Philosophy of Integrative Medicine. Houghton Miflin Co Boston NY. The strange case of homeopathy: 14.

4 Hahnemann S. Organon of Medicine. §§38-40. 6th Ed. Haehl manuscript. 1921:32-40.

and symptoms.

Still a young physician, he set out to test his hypothesis through systematic experiments. Scientific experimentation was rare in the medical field at that time. Medical science consisted mostly of blind speculations and complicated theories rather than of an investigative science. Medical practice was made up mostly of rigid conventions and accepted procedures, including irrational practices like cauterizing and bloodletting. Hahnemann was one of the first investigative medical scientists.

In his now famous experiment, Hahnemann tested his theory on himself. It was widely known at the time that quinine had cured cases of malaria. As a physician he was very familiar with the syndrome produced by this endemic disease. He wanted to determine whether there was a similarity between the drug syndrome of quinine and that caused by this dreaded disease.

In order to find out the clinical effects of quinine, he took several doses of it while in good health. If his hypothesis were correct, he would develop symptoms similar to malaria. He had suffered from the disease as a young man, so he was very familiar with its symptoms. He found that within minutes of taking the drug, he developed symptoms similar to the case of malaria he had in the past.

Hahnemann tested dozens of other medicinal substances derived from plants, animals and mineral sources. He enlisted healthy volunteers who took doses of these substances to determine what signs and symptoms they would develop. He then proceeded to test each drug in minute dose on a patient who had a similar case of disorder. He carefully recorded each drug syndrome hoping to use this record to prescribe the drug accurately for cases of disease he treated.

He selected each drug by matching the individual case's disease symptoms to the drug syndrome—known to be evoked

by the drug during his controlled experiments. He developed nearly a hundred drug records that successfully cured and prevented specific infectious diseases, including serious bacterial and viral infections, and even their long-term chronic sequels.[5]

According to the homeopathic doctrine, the "similar" medicine can trigger or "stimulate" an immune response in patients suffering from infectious diseases. This hypothesis has since been corroborated repeatedly by scientific studies (see chapter on research below). Hahnemann understood that symptoms are an outward manifestation of the defense launched by the body against the invading disease. He believed the symptoms even act partly to fight the disease. For example, a fever raises the body temperature to increase the body's production of antibodies against a virus or bacteria. He felt that, instead of fighting or "suppressing" the symptoms, the body deserved to be supported in its effort to fight the disease. It therefore made sense to treat *like with like*.

In his experiments with drugs, Hahnemann quickly discovered that when these similar drugs were given in large doses, they could make the symptoms much worse before they triggered a cure. To avoid these "aggravations", he began to experiment with smaller and smaller doses. He found that minute doses of the medicine were sufficient to trigger the immune response.

Hahnemann operated on the theory that infectious agents as well as drugs could cause diseases. In his experiments he found that drug diseases are more general than natural diseases and affected all individuals. His experiments demonstrated that their effects were stronger and more intense than those of the contagious diseases of the time. Contagious disease only affected certain susceptible individuals, and the effect was generally milder than that of a drug disease.

By repeated experiment, Hahnemann showed that the

drugs still acted beneficially even in minute doses, provided that a symptom similarity existed between the case of disease and the drug-induced disorder. All you had to do was to find out what kind of syndromes drugs could cause, by systematically testing them on healthy people.

Hahnemann was the first physician to recognize that there exists a dose/response relationship between susceptibility and similarity of symptoms of the drug to the disease. The more similar the drug to the disease, the smaller the dose necessary to cause a curative response in the organism.

After decades of experimentation, Hahnemann developed a systematic process of diluting drugs to their safest and most effective dose. He diluted drugs serially, in small steps, agitating or shaking the mixture after each step. He kept careful records of this number of dilutions and succussions that these mixtures underwent. He discovered that, in addition to the dilutions, the shaking process ("succussion"), and also "trituration" in dry substances, had a peculiar significance of their own. He found that even inert substances like gold and other chemicals that were put through a process of trituration could develop medicinal action they previously did not possess.

Shaking or agitating the medicine at each step, he explained, developed the innate medicinal "power" or "force", "comparable to that of a magnet"[5]. When you rub iron with a magnet, the magnetic force is somehow transferred to the metal. Hahnemann concluded that likewise a "quasi-magnetic" drug force is transferred from the drug to the solvent by each phase of rubbing—in case of trituration of solid drug material in a mortar and pestle, or from succussing or rhythmic shaking of a liquid drug between each step of dilution. One should remember that this research was conducted before terms such

5 Hahnemann S. Organon of Medicine. §269.

as "magnetic field" were in use. Because of confusion of terminology, Hahnemann's discoveries have been falsely attributed to "vitalist" theories and various spiritual philosophies. Hahnemann's discovery has in recent times been confirmed by scientific studies[6], showing specific nuclear magnetic resonant images by Raman laser spectrometer investigations of the various batches of "homeopathic" dilutions.

Hahnemann realized that the "field-like" or, as he sometimes called it at that time, "spirit-like" drug force acts more intensely when ever smaller doses of the drug, but in higher "potency" (by a higher number of strokes of rubbing or succussions) are given. Eventually Hahnemann diluted out all of the drug-substance, at least theoretically. He prepared vast dilutions considerably beyond Avogadro's constant. This is the mathematical point where there is nearly zero probability that of any molecules of the drug still remain in the solution.

Hahnemann concluded that a "dynamic" force of the drug must have remained in the water. He surmised that these extremely diluted drugs act could on the organism in some sort of energetic fashion. He noticed, their effects set up a subtle, almost unnoticeable, healing response in the body. He concluded that this healing response was the result of a sort of phantom "drug disease"––corresponding to the physiological defense mechanism or enhancing or amplifying some reparative mechanism triggered by the drug's force field. These "dynamic" drugs became known as "potentized" drugs. Hahnemann explained, they act very much like nature, when a "strong" natural disease such as smallpox cures a similar milder one such as measles, except that the induced drug diseases these ultra-diluted medi-

6 Konar A. Raman spectroscopy shows difference in extreme dilutions of three drugs with respect to their free OH groups and hydrogen bond. https://www.researchgate.net/publication/302577400_Raman_spectroscopy_shows_difference_in_drugs_at_ultrahigh_dilution_prepared_with_stepwise_mechanical_agitation

cines could evoke were almost *unnoticeable* and disappeared quickly after they had achieved their results. Also through the exact designation of their dilution and number of succussions the clinical results could be carefully controlled.

With this new pharmaceutical method, medicinal effects could be developed from virtually any substance. Even inert substances that lacked biological action in their undeveloped stage, such as gold or flint, could be turned into effective drugs. The new method also made it possible to utilize especially very toxic substances such as curare or hydrocyanic acid for medicinal treatment.

Hahnemann established that the proper dose of a drug had to be sufficiently large enough to cause a healing response, yet sufficiently small enough to avoid adverse effects in the patient. He concluded that the most effective dose was also the safest dose for each case of disease! The perfect dose invariably was so highly diluted that it had no side effects and none of the toxic ingredients could be found in the original drug materials. At first he set this dose at the 30C potency. Later he developed an even milder method of potentization, he called the q-potency, that allowed safe repetition in chronic diseases without causing adverse effects. (For more details on the process of potentization see below). However this method and several other important new discoveries were not accepted into homeopathic practice, because the manuscript on his guidelines was not published. Instead, homeopathic practice was taught on the basis of previous guidelines. When it finally was published prominent homeopaths ignored the method and this is still the case to this day. The term "classical homeopathy" is often used to designate the nineteenth century homeopathic practice and its modern variations. Hahnemannian homeopathy is a term to designate practice that incorporates the new methodologies.

Hahnemannian doses were theoretically free from any

molecules of the original medicinal substance. Not infrequently, homeopaths achieved clinical results with extremely high "potencies" of ultra-diluted drugs. Far ahead of his time, Hahnemann explained that these medicines acted purely by their "dynamic" (energetic) properties—by a sort of "medicinal force".

Modern research has confirmed that the action of ultra-diluted homeopathic drugs—no matter how dilute—is real.[7] Many of these studies were conducted with state of the art research methodologies, such as randomized, placebo-controlled, blinded experiments. Today many observers believe that the action of ultra-diluted homeopathic drugs is due to their nuclear-magnetic properties, while research on nanoparticles may explain they possibly mobilize a hormesis effect in potentized solutions causing adaptive responses in living systems.[8]

Homeopathic drugs today are prepared in modern laboratories, in multiple potencies. Recent research shows that this process gradually amplifies the electromagnetic force for the drug in the solvent, while reducing its concentration, while making the resulting mixture completely non-toxic. While the drug syndrome is found in massive "Materia Medicas", their exact preparation is described in detail in the Homeopathic Pharmacopeiea. In the US, with the passage of the Food, Drug, and Cosmetics Act, the production and distribution of homeopathic medicines come under the auspices of the Food and Drug Administration (FDA). They can be legally sold provided strict manufacturing and labeling guidelines are followed. In

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7 Bellavite P. Immunology and Homeopathy. 4. Clinical Studies—Part 1. Evid Based Complem Altern Med. 2006 Sep; 3(3): 293–301. Published online 2006 Jul 5. doi: 10.1093/ecam/nel045

8 Bell I. A model for homeopathic remedy effects: low dose nanoparticles, allostatic cross-adaptation, and time-dependent sensitization in a complex adaptive system. BMC Complement Altern Med. 2012; 12: 191. doi: 10.1186/1472-6882-12-191.

other countries different laws apply for the manufacturing and marketing of homeopathic medicines. Because of the electromagnetic nature of the homeopathic drug action, homeopathy is often referred to as an "energy medicine".

## Potency And Dose

Hahnemann noticed that the more he succussed a drug, the stronger its effect, and the shorter the duration of its medicinal action. He observed that when the number of succussions exceeded 3,000, no additional clinical advantage could be obtained. On the contrary, higher potencies could cause unwanted strong aggravations of symptoms that were sometimes dangerous. He concluded that the 30C potency was the safest effective potency level for practical purposes.[9] The designation "c" stands for the centesimal (1:100) dilution. The 30 in the 30C designation indicates the number of [centesimal] dilution steps. The medicinal substance is shaken 2 to 40 times [depending on pharmacy] between each step, thus the potency is between 60 and 1200 succussions. Other homeopaths later experimented with steps of dilution of 1/10 with ten succussions between each step, called the decimal (1:10) dilution, designated by the letter "x" or "d" in Central Europe. Hahnemann in his last 6th edition of his *Organon—Treatise on Medicine*—explained that the dilution in a solvent was only an auxiliary factor in the effort to develop the medicinal force by succussion.

However, even at the ultrahigh 30C potency level, many sensitive individuals could still develop adverse effects from the medicine. Hahnemann developed a complex method of preparation where the dilution amounted to 1 in 50,000, and 100 succussions per step of dilution. These "quinquagintamillesimal"

9 Organon §270.

or q-potencies (sometimes still erroneously called "LM potencies") act milder and their duration of action is considerably longer.[10]

The q-potencies are still not widely used in most countries at the time of this writing. This has to do with the historical development of homeopathic practice. Hahnemann described the guidelines for making and using q-potencies in his sixth and final edition of his treatise on homeopathic theory and practice––the *Organon of Medicine*.[11] The publication of the manuscript was however delayed until 1921––nearly 80 years after Hahnemann's death––, and homeopathic practice had evolved by then with the high centesimal potencies. Even today the c-potencies are much more commonly available than the q-potencies.

Hahnemann left guidelines on how to individualize the amount (dose) of the medicine to meet the sensitivity of each individual patient. This individualization is especially important in extremely sensitive patients to prevent side effects. Instead of taking the standard five drops of a given potency, the patient is instructed to "sniff" the dose. This is called the *olfactory* dose.

Some highly sensitive patients need to further reduce the dose of the drug, even when taking it in the olfactory dose. This is done with an additional dilution in series of dosage cups.[12] The desired dilution for each case is estimated and fine-tuned by the practitioner during follow-up exams. This may be accomplished without additional succussions, so as not to increase the "potency" or stimulant power of the medicine. This is usually based on several *ad hoc* trials conducted during treatment with

10 Ibid.

11 Hahnemann S. Das Organon der Heilkunst. https://archive.org/details/HaehlMS

12 Hahnemann S. Organon §270.

each patient. The final individualized dose makes homeopathic therapy uniquely suitable for highly sensitive individuals in both treatment and prevention.

## The Peculiar Nature Of Homeopathic Medicines

Homeopathic pharmacists and laboratories prepare medicines from crude medicinal substances. The crude medicines initially undergo a rubbing process in milk sugar. This technique is called trituration. The solid triturations are then turned into a liquid by dissolving them further in a water/alcohol solution. They then undergo an alternating step-wise process of serial dilution and succussion. This *potentization* process is accomplished with machines in clean, sterile laboratory environments to prevent accidental contamination. Some laboratories have even taken precautions to protect the entire operation from electromagnetic fields, such as from electric motors and microwaves generated by telecommunication devices, by moving their facilities underground.

Machines dilute the drugs in repeated, specified steps in a water/alcohol solvent. The shaking process (succussion) of the mixtures between each step of dilution is specified for the respective desired number of succussions. Each step of dilution reduces the concentration of toxic/medicinal ingredients. Each succussion imparts the medicinal "information" to the solvents. This information is propagated from each batch of dilution to the next. Experiments show that the shaking process between each successive step of dilution increases the structural organization of the water-alcohol mixture.

Many homeopaths use potencies that are diluted well past the point where any molecule of original substance remains in the solvent. These drugs are diluted to a fraction beyond the Avogadro's limit (beyond the point were any molecules of the

substance remain in the solvent; at about 6.12 x $10^{-23}$). Clinical experience shows such ultra-diluted potentized homeopathic medicines are effective in a wide variety of disorders and commonly produce no side effects when taken according to proper homeopathic instructions.

Scientists have objected that such extreme dilutions could not possibly have any medicinal effect. However, experimental evidence shows that such "energetic medicines" are biologically active even though in a very different way than conventional drugs.[13]

Hahnemann originally explained that the medicinal force—the energetic (sometimes also referred to by him as "spirit-like") properties of the medicine are retained in the water-alcohol mixture. Years before scientists had any notion of bio-electromagnetics or nuclear magnetic resonance, Hahnemann explained his observations with the hypothesis that the force field that regulates the vital functions of the living body (he referred to by the name "life force") responds to these "charged" (*dynamic* or *potentized*) drugs, in a manner that was "field-like, like the force-field of a magnet."[14]

Scientists who have investigated the physical properties of homeopathic medicines have found, using Raman-laser spectrometers[15] and UV-spectroscopy[16] that high potencies apparently retain a characteristic electromagnetic "signature" of "imprint" from the original drug substance. One hypothesis is that

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13 https://thehomeopathiccollege.org/interviews/interview-of-professor-anisur-rahman-khuda-bukhsh/

14 Hahnemann S. Organon §11, 269

15 Luu-D-Vinh. Raman-Laser spectroscopy. Optical density measures are corroborated here using the Raman laser. Etude des dilutions homeopathiques par effet Raman -Laser
Ann Hom Fr. 1975 17:433-44.

16 Wolf U. et al. Homeopathic Preparations of Quartz, Sulfur and Copper Sulfate Assessed by UV-Spectroscopy. Evid Based Complement Alternat Med. 2011; 2011: 692798. doi: 10.1093/ecam/nep03.

the process of succussion restructures the bonds of molecules in the water solvent with each successive step of mixing. At the same time, it serially propagates the medicinal "information"—a sort of "memory" of the original diluted substance—from one batch to the next (memory of water hypothesis).[17]

When administered to the patient, the signal carried by the water apparently activates the regulatory, restorative and protective mechanisms, however much more research is needed to precisely explain this process. In homeopathic cases of acute infectious diseases, the immune system has been observed to activate a defensive response to the homeopathic potency, similar to that, when it reacts to the real substance, yet without developing any of the toxic side effects otherwise produced by a crude dose of the same medicinal substance.[18]

Potentized medicines have no direct chemical interaction with biological systems like crude drugs do. Instead, they only impart signals that the body can receive, recognize and utilize. This drug signal or "potency" in studies has triggered defensive, adaptive and reparative responses of the regulatory functions—reminiscent of the response of a health immune system when exposed to viruses. Studies show potentization is an effective pharmaceutical technology and that potentized drugs safely produce protective, preventive, and restorative action[19] in biological systems.

The discovery of the potentization method allows for the

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17 Milgrom LR. Homeopathy, fundamentalism, and the memory of water. Curr Oncol. 2007 Dec; 14(6): 221–222.

18 Bellavite P et al. Immunology and Homeopathy. 2. Cells of the Immune System and Inflammation. Evid Based Complement Alternat Med. 2006 Mar; 3(1): 13–24. doi: 10.1093/ecam/nek018.

19 Datta SS et al. Comparative efficacy of two microdoses of a potentized homoeopathic drug, Cadmium Sulphuricum, in reducing genotoxic effects produced by cadmium chloride in mice: a time course study. BMC Complementary and Alternative Medicine 2001 1; 9.

safe medicinal use of even very toxic substances such as arsenic, the botulism toxin, or the anthrax toxin, in both prevention and treatment of disease without their usual toxic side effects[20]. It also allows for the use of otherwise inert substances like gold or platinum to be utilized in medicinal applications. In our research section we will show examples where such potencies have induced protective effects against infectious and toxic diseases in studies.

After forty years of practice this author believes, that *potentized* medicines when used in a professional practice context are the safest and most specific pharmaceutical agents in use for the treatment of infectious diseases to date. Homeopathic medicine is also the safest approach to prophylactic immunization. When used properly applying the above precautionary methods, homeopathic immunizations does not cause any harmful side effects even in highly sensitive patients.[21]

In 1938, when the U.S. Congress passed the Food, Drug and Cosmetics Act, it incorporated homeopathic medicines in the legislation.[22] Unfortunately, it gave the United States government much leeway in how to interpret the meaning of the term "homeopathic" drugs. One FDA interpretation was that "prevention" was not included in the definition of "homeopathic", because the syndrome of the individual cases could not be predicted, and because homeopathic drugs have to be similar to the disease syndrome of the case. However, as we will show, this

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20 Belon P et al. Can Administration of Potentized Homeopathic Remedy, Arsenicum Album, Alter Antinuclear Antibody (ANA) Titer in People Living in High-Risk Arsenic Contaminated Areas? I. A Correlation with Certain Hematological Parameters. Evid Based Complement Alternat Med. 2006 Mar; 3(1): 99–107. doi: 10.1093/ecam/nek013

21 Bracho G et al. Large-scale application of highly-diluted bacteria for Leptospirosis epidemic control. Homeopathy. 2010 Jul;99(3):156-66. doi: 10.1016/j.homp.2010.05.009.

22 https://www.usp.org/about/legal-recognition/standard-categories.

definition was not used in cases of epidemics. The founder of homeopathy made an exception with his discovery of the *genus epidemicus* methodology, the use of which has been an historical part of the practice (see below).

As a case in point, in a letter to one licensed homeopathic physician who offered one homeopathic influenza immunization medicine on his website, the FDA claimed that this product was prohibited for prophylactic purposes, because "prevention" was contrary to the principles of similarity of homeopathic drugs. One must forgive the Federal bureaucrats and their attorneys' philosophical ineptitude and lack of education in homeopathic principles. In fact, the principle of similarity and a maximum similarity is intrinsic and guaranteed in the very isopathic disease products (nosodes) they regulate, in that a diagnosis of many infectious diseases contains also their medically accepted syndromes, which also have been repeatedly confirmed during pathogenetic trials of many prophylactic homeopathic nosodes (from Gr. νοσος [nosos] = sickness).[23]

Hahnemann himself went as far as calling the tautopathic (isopathic) preparation such as the nosodes the *simillimum* (the most similar drug) to the disorder caused by the infectious organism.[24] Furthermore, the proven effects of the influenza nosode have been an integral part of global homeopathic practice, history and documented drug action, ever since they were invented. The U.S. Food, Drug, and Cosmetic Act recognizes under the term "official compendium" the official United States Pharmacopeia, National Formulary, and the official *Homeopathic Pharmacopeia of the United States*, or any supplement to

23 Homeopathic medicines prepared from a discharge of a disease, see chapter below.

24 Hahnemann S. Chronic Diseases etc. Boericke & Tafel. Philadelphia 1896, p. 152. https://ia600303.us.archive.org/3/items/chronicdisease00hahn/chronicdisease00hahn.pdf

them. Many countries have similar official homeopathic pharmacopeias, including the United Kingdom, Germany, France, and India.

There has been a widely held and pervasive suspicion and recurring accusation of the policies by the FDA, that it favors conventional medical drugs over alternative drugs. According to various exposés, the Agency had sometimes displayed a hostile stand against homeopathic manufacturers,[25],[26],[27] coupled with an open opposition to *homeopathic prophylaxis.*

## Epidemic-Specific Prevention: Genus Epidemicus

Hahnemann's Law of Similars states that any drug will cure, if it is "homeopathic" to a case of disease. At Hahnemann's time most diseases were, indeed, infectious diseases. "Homeopathic" means the drug's inherent syndrome resembles that of the case of disease to be treated. "Drug syndromes" are the signs and symptoms produced by the drug when it is tried, usually in diluted form, on healthy subjects under controlled conditions. For purposes of treatment (as opposed to prevention), the homeopathic physician does not select medicines according to a generic disease diagnosis, or a disease category or name, such as scarlet fever or measles. Instead, homeopaths choose the medicine according to specific and peculiar signs and symptoms of the whole syndrome present in a given case of sickness.

This approach requires strict individualization during case evaluation. Two patients with the same disease but exhibiting different symptoms may require a different medicine. The physician must carefully assess the symptoms of each patient before

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25 Lisa PJ. Assault on Medical Freedom. Hampton Roads Publ. Co. Virginia 1994.

26 Carter JP. Racketeering in Medicine. Hampton Orads Publi Co. Virginia 1992.

27 G. Edward Griffin. A World Without Cancer: The Story of Vitamin B 17. Westlake Village, CA: American Media 1997.

selecting the medicine.

Hahnemann, in the late 1790's successfully cured scarlet fever and other serious infectious diseases with the indicated similar "homeopathic" medicine.

However, by definition, the homeopathic approach would not apply to prevention, at least theoretically. It would be impossible to apply the Law of Similars *before* a sickness strikes, because one cannot normally predict the unique symptoms of a case of sickness *before* somebody gets sick.

After comparing the syndromes of several epidemics of the same disease category, Hahnemann determined that an infectious disease during one and the *same epidemic* was sufficiently similar[28] that often the same medicine cured all cases of an epidemic. Once a few people showed the symptoms of the disease, the physician could select the medicine for the whole epidemic. This discovery eliminated the time-consuming task of individual case assessment during epidemics, because it permitted the use of a single medicine for everyone affected. It also made it possible to predict the curative remedy before most people were sick and to use it for prevention on those exposed. Hahnemann called this "epidemic syndrome" the *genus epidemicus*.

Hahnemann tested the *genus epidemicus* first during the 1799 scarlet fever epidemic in Königslutter, Germany, on exposed children who had not yet developed the disease—this time for prevention. In the epidemic, *Belladonna* was the medicine with the most similar symptoms to that particular epidemic. Hahnemann reported that the experiment proved successful, and none of the immunized children caught the disease. It confirmed that the *genus epidemicus* could be used to prevent the spread of epidemic diseases. Knowledge of the *genus epidemicus* permitted the application of the principle of similarity

28 Hahnemann S. Organon §73.

to the whole epidemic (as opposed to the individual patient) for preventive purposes. The Law of Similars is preserved in this method at the expense of strict individualization.

Since individualization of the remedy selection for each case is a fundamental principle in homeopathic practice, the use of the *genus epidemicus* represents an important *exception* to individualization in the homeopathic methodology of healing. The experience of 1801 proved that homeopathic medicines could not only cure but also prevent a disease. A detailed description of the entire event is described in the Lesser Writings.[29]

## Disease-Specific Prevention: Genus Morbi

However, this method worked only after the syndrome of a given epidemic was established. It did not allow prevention *before* an epidemic got started. Homeopaths eventually found a solution to this problem in the disease-specific medicine or *genus morbi.*

Disease entities that had recurrent and consistent characteristics, such as measles, often required one predominant remedy. Homeopaths discovered that they could employ this chief remedy as a preventive to stave off the spread of an epidemic. Granted, the practice of prescribing on the basis of a disease entity was foreign to homeopathic rules of individualization. However, homeopaths found that this rule could be overlooked for preventive purposes.

During treatment of those afflicted by the epidemic, the practitioner made all efforts to find the *simillimum*—the most similar remedy. However, collective experiences with a known infectious disease category could be used to identify a remedy

29 Hahnemann S. Organon §33. Hahnemann S. Lesser Writings. Radde NY 1852: 376-85.

that was sufficiently similar to trigger a *protective effect*—the *genus morbi*.

Obviously the method did not violate the basic principle of similarity. However it deviates from the strictly homeopathic guidelines in that it used the *disease category*, rather than the syndrome present in each individual case. Experience had shown that, while not necessarily the best remedy for each and every patient, apparently the remedy was *sufficiently similar* in its action to stimulate the defenses against the disease in the majority of subjects from preventive purposes. The important thing was—it worked.

The great nineteenth century American homeopath James Tyler Kent justified the practice with the words, "we must look to homeopathy for our protection as well as our cure." He wasn't concerned about strict individualization of a preventive medicine for known diseases.

He found that, "for prophylaxis there is required a lesser degree of similitude than is necessary for curing. A remedy will not have to be so similar to prevent disease as to cure it, and these remedies in daily use will enable you to prevent a large number of people from getting sick."[40]

The use of the *genus morbi* allowed the general prevention of recurrent epidemics of known diseases before anyone got sick. It represents the second exception from the usual homeopathic principles and is well established in the history of the practice. It was successfully used during many epidemics. For example, according to Dr. Eizayaga, in 1956-7, homeopathic physicians in Buenos Aires, Argentina, used the homeopathic drug *Lathyrus sativus* for generic protection against polio.[30] In a separate polio epidemic, Dr. Eisfelder reported using *Lathy-*

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30 Eizayaga FX. Treatise on Homeopathic Medicine First English Ed. Buenos Aires: Ediciones Marecel 1991. Tratamiento Homeopatico de las Enfermedades Agudas y Su Prevension. Homeopatia.1985; 51(324): pp. 352–62.

*rus sativus* for prophylaxis of children.[31] Both medicines were effective against the respective epidemic. Incidentally, for epidemic diseases like polio, there was more than one version of *genus morbi*. For example, during some polio epidemics, *Gelsemium sempervirens* was shown to be the *genus epidemicus*, thus this medicine was also used as a *genus morbi*. It turns out that this is the case for many other epidemic diseases. In the last section of this book on specific prevention, we list all the variations of *genus morbi* for each diagnosed infectious disease.

## Isopathic Potencies (Nosodes) As Disease-Specific Prevention

However, the homeopathic method of the *genus morbi* was suitable only for diseases whose symptoms could be more or less predicted. It was limited to diseases that repeatedly required the same *genus epidemicus*, or perhaps a limited number thereof. These recurrent events could then be used as a indications to predict a *genus morbi*—a disease specific preventive, base on the disease category.

This did not hold true for all infectious diseases. For example, during successive flu epidemics, radically different symptom patterns were identified, requiring a new *genus epidemicus* each time. Thus the flu had multiple versions of *genus mobi*. And for many diseases, frequently *more than one medicine* was needed during treatment to cover the diverse syndromes that manifested during a single epidemic. The medicines that commonly care for the treatment are also used to determine a *genus morbi*. This made it difficult to identify a specific *genus morbi* for such a disease. At first, several medicines (as many as five for cholera; see below) were accepted as *genus morbi* for these

31 Eisfelder, HW. Poliomyelitis Immunization: A Final Report. J Am Inst Homeopath. 1961 11-12;54:166-7.

diseases, sometimes also varying according to different homeopaths.

In the search for a more precise disease-specific preventive medicine, homeopaths welcomed the advances in infectious disease theory that explained epidemic diseases as propagated by contagion—through contact with a miniscule biological organism. Hahnemann in his *Organon* had already referred to these miniscule disease agents as "animalcules", but the science was still in its infancy. Hahnemann obviously was relatively advanced for his time, and already referred to them as the "infectious agents" in contagious diseases.[32] Eventually some homeopathic physicians, especially Hering, a prominent student of Hahnemann, began to experiment with a form of *isopathic* prophylaxis, by preparing the *potentized autogenous* "nosodes", made from an exudate or discharge of a patient infected with the disease.

It is likely that two developments had an impact on the adoption into homeopathic medicine of the preventive application of the autogenous nosodes. The first was the growing popularity of the practice of vaccination, especially in the British Isles. The second was the discovery by Hahnemann of the miasmatic—infectious or contagious—origin of *chronic* diseases.[33]

The term "isopathic" refers to the medicinal use of a substance derived from the disease to be treated. While the term "homeopathic" means a drug that could evoke similar symptoms, "isopathy" is the use of a drug made from the same disease. Isopathy (fr. Greek isos (ἴσος= the same) is of a substance obtained from a discharge or pustule of the very disease to treat or prevent it.

Constantin Hering, a young doctor and one of Hahne-

32 Hahnemann S. Organon §72.

33 Ibid.

mann's ablest students, was the first to suggest the use of disease exudates or discharges to prepare new medicines. He took on the tedious task of conducting new homeopathic pathogenetic trials ("provings") from these substances––controlled experiments on healthy volunteers to elicit the symptoms of the substance.

It was presumably also Hering who also first suggested testing these nosodes for the prevention and treatment of *acute* infectious diseases. In his *Guiding Symptoms* he claims that in 1830, he had laid down in Stapf's Archives the proposal to make a medicine from the anthrax toxin.[34]

According to these instructions, G.A. Weber, medical advisor to the Court of Hessia (Hessen; a province in Germany), produced a 30C potency of the nosode *Anthracinum* from an alcoholic extract of the spleen of infected cattle. He tried it successfully on cattle for both treatment and prevention of the "cattle plague" and published his results in 1836.[35]

Independently of him, Wilhelm Lux, professor of veterinary science at the University of Leipzig, searching for a medicine to treat anthrax, experimented with a nosode he had made from the blood of an infected animal. He published his results in 1833. In his treatise, Lux advocated the use of potentized matter of contagious diseases, in order to cure these very diseases.[36]

Lux extended the use of potentized disease discharges to organs. Homeopaths eventually applied the isopathic use to toxins, and iatrogenic causes such as medicines that had been habitually abused or drugs had been known to cause diseases.

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34 Hering C. Guiding Symptoms I. J.M. Stoddart & Co 1879 p. 299.

35 Ibid. See also Weber GA. On the Cure of Cattle Plague (German) 1833 Reclam Verlag Lepizig.

36 Lux, Wilhelm, Isopatik der Contagionen 1833
see also http://www.igm-bosch.de/content/language2/html/14147.asp.

The use of a potentized substance that caused a disorder is often and more accurately termed "tautopathy" (from the Greek ταυτος (tautos) = same; see part III and IV). It was also later used systematically to treat chronic iatrogenic or pharmacogenic diseases, by the twentieth century and by contemporary homeopaths, including the author.

That same year the search for new medicines for chronic miasms led Hahnemann, Hering and Gross to the proving of a product of *psora* (scabies). For the production of the nosode *Psorinum*, Hahnemann apparently used a seropurulent matter of the itch lesion.

Later that year, Hering produced *Hydrophobinum (Lyssinum)* from the saliva of a rabid dog. By 1833, homeopaths were successfully immunizing people and animals against anthrax and rabies—fifty years prior to Pasteur![37]

In 1835, Joly wrote to Hahnemann that he had achieved numerous cures of the bubonic plague in leper colonies using 30C potencies of serous fluid from plague buboes.[38]

After Hahnemann moved from Germany to France during his later years his primary interest was developing medicines for the treatment of chronic diseases. He and his students used nosodes primarily on homeopathic indications—on the basis of proven similarity of proven symptoms.

The practice of *potentized isopathy* for disease-specific prevention lived on in France. Five years after Hahnemann's death in 1843, the Austrian J.F. Hermann published *The true isopathy or the use of healthy animal organs as remedies for similar disease in man*.[39] The ideas elaborated in this treatise were later developed by C.E. Brown-Sequard, the father of modern *opo-*

37 Hering C. Guiding Symptoms I. J.M. Stoddart & Co 1879 p. 299.

38 Ibid.

39 Bellavite P. Homeopathy: A Frontier in Medical Science. North Atlantic Books 1995

*therapy* (treatment of diseases with extracts made from glands of animals).[40]

## Chronic Infections And Potentized Isopathics

Hahnemann had demonstrated in repeated experiments that acute infectious diseases could be prevented and cured safely, simply by applying the Law of Similars.[41] He found that this held true for all acute illnesses. However, this method did not always work in treating chronic diseases. Hahnemann observed that long-term, chronic diseases usually recurred, following an initial improvement after treatment with the standard homeopathic "acute" medicines.

By 1817, after years of research, Hahnemann concluded that chronic diseases were often due to a latent infection often already acquired in childhood or from the mother.[42] Since the infection was characterized by an itchy eruption, he called it *Psora* (from Greek; ψορα (psora) = itch), or the psoric miasm (fr. Gr. *miasma* = impurity; infection; thus the psoric miasm: itching infection; later misinterpreted by some as scabies). Using ancient medical manuscripts and tracing this itch disease back to an early Hebrew report in *Leviticus*, the third book in the bible, he hypothesized that this miasmic infection had been passed on for at least 3000 years.[43]

Hahnemann concluded that various suppressive treatments that had been employed throughout history to alleviate the itch, such as sulphur, lead, zinc, and mercury ointments,[44] had lead to an increasing number of chronic diseases. These

40 Bellavite P. The Emerging Science of Homeopathy, North Atlantic Books 2002.

41 Ibid.

42 Organon §284.

43 Chronic Diseases, p.10.

44 Ibid., p. 11.

chronic diseases were different in nature from the acute infections he had treated and prevented so far. These infections sometimes developed in a latent form, before they finally became manifest or symptomatic.

Hahnemann traced the majority of chronic diseases of his time to a single suppressed infection—an itching dermatitis in childhood. He concluded that this infection was at the root of the multitude of human chronic diseases.[45] He recognized that a whole new set of medicines was needed to conquer these chronic infectious diseases and set out to develop new remedies, as he had done previously with acute infectious diseases.

Besides *Psora*, Hahnemann identified two additional latent chronic infections or miasms as specific disease entities: *Sycosis* (Gonorrhea), and *Syphilis*. These two were later confirmed by standard bacteriological investigations. In introducing the miasmic theory, Hahnemann left the purely phenomenological (homeopathic) approach of prescribing on the basis of the totality of symptoms in favor of a causative hypothesis with infectious organisms.

In chronic diseases, he decided, the remedy had to match *more* than the manifest symptoms. These diseases were to be treated on the basis of the *apparent* as well as *latent* symptoms, which could be identified only by understanding the symptoms of the entire population that had been afflicted by the same miasm.

This new approach required the identification of the chronic miasmic disease by its *cause*, not merely by its overt phenomenology of syndromes. By recognizing the miasm, the selection of the remedy could be further narrowed down to a more appropriate remedy. The cause was important because it aided in identifying the disease by unmasking the latent symp-

45 Organon §80.

toms *before* they would manifest.

The new interpretation of chronic diseases as "infectious" provided a theoretical basis for the adoption into homeopathic practice of isopathic exudates. Hahnemann cautiously allowed for an isopathic approach in his treatise *Chronic Diseases* stating that the disease substance, provided that it is in potentized form is, for all practical purposes, the "*simillimum*" (the most similar medicine) to the disease.

In Part I. of his *Chronic Diseases*, he stated,[46] "…the antipsoric medicines treated of in what follows contain no so-called *idiopathic* [isopathic] medicines, since their pure effects, even those of the potentized miasma or itch (*Psorin*) have not been proved enough, by far, that a safe homeopathic use might be made of it. I say homeopathic use, for it does not remain *idem* (the same); even if the prepared itch substance should be given to the same patient from whom it was taken, it would not remain *idem* (the same), as it could only be useful to him in a potentized state, since crude itch substance which he has already in his body as an *idem* is without effect on him. But the dynamization or potentizing changes it and modifies it; just as gold leaf after potentizing is no more crude gold leaf inert in the human body, but in every stage of dynamization it is more and more modified and changed.

Thus potentized and modified also, the itch substance (*Psorin*) when taken is no more *idem* (the same) with the crude original itch substance, but only a *simillimum* (thing most similar). For between idem and *simillimum* there is no intermediate for anyone that can think; or in other words between *idem* and *simile* only *simillimum* can be intermediate. *Isopathic* and *aequale* are equivocal expressions, which if they should signify anything reliable can only signify *simillimum*, because they are not idem (*tauton*).

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46 Hahnemann S. Chronic Diseases etc. Boericke & Tafel. Philadelphia 1896:152.

## Controversy on Disease-specific Prevention

Hahnemann found it necessary to caution others who advocated the use for treatment (rather than prevention) of the chronic diseases they were prepared from, such as *Psorinum*, *Syphilinum*, and *Medorrhinum*, on the basis of disease diagnosis alone, rather than on the basis of the totality of symptoms according to the Law of Similars. He insisted that "provings" (from German Prüfung = tests) on healthy persons be conducted, and that, for treatment at least, the exudative substance be obtained from the patient. He objected to the old form of isopathy, however––the use of unpotentized substances, as in the case of variolation. He felt it could only make patients sicker.

"Thus there will be further diseases belonging to the animal that provide us with medicinal and therapeutic potencies for very similar human diseases and will happily complement our store of homeopathic medicines. However, to wish to cure with a human disease-product the same human disease—that is out of the question. Nothing but evil and worsening of the disease can result."

However, he expressly allowed for the use of *isopathic remedies in potentized form*. He also explained why the effect of isopathy with potentized substances was essentially that of homeopathy.

In a footnote to his *Organon of Medicine*[47] he stated that the effect of an "isopathic" remedy would be considered a "homeopathic" action after all, provided that it was given in *potentized* and therefore "similar" form. This view is underscored by the observation that when potentized remedies are given to healthy test subjects according to Hahnemann's proving guidelines, they elicit similar but not the same symptoms than the crude substances. He even goes as far as calling the potentized

47 Organon §56.

isopathic the *simillimum*—the most similar, therefore the correct medicine.

Unfortunately, the translation of this section of the *Organon* has been completely botched in the English translation. For example, the Künzli /Naude/Pendleton English translation of the above footnote obscured how Hahnemann felt about isopathy. It implied that isopathy in all forms was deplorable: "There are those who would like to introduce a third kind of therapy, called *isopathy,* treating a disease with the identical miasms that produced it. But if this were possible, since this miasms would reach the patient only in highly potentized and therefore altered form, it would cure by opposing a *simillimum* to the *similllimo*. *To try to cure* in this way, with an exactly identical *disease agent* (*per idem*), runs counter to all common sense and therefore also to all experience."[48]

Clearly these authors were influenced by the "classical" (non-Hahnemannian) theories and interpreted the section to justify their own beliefs. I present my own translation of this section from my book *Concise Organon* to clarify what Hahnemann's position was on the matter:

"There is also a **third kind of therapy**, the so-called **isopathic** method. It treats a disease using the **identical crude infectious agent** that produced it. This runs counter to all common sense and experience! **This method could only work, if** one were to **use highly *potentized* preparations of the agent.** If you gave such an **altered** dose, it would counter the disorder with its *simillimum*!

With his above remark in *Chronic Diseases*, Hahnemann confirmed his rationale that the potentized isopathic constituted the *simillimum* to the crude substance it is prepared from.[49]

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48 Organon of Medicine by Hahnemann, Samuel. Transl by Künzli J; Naude A., Pendleton P. Cooper Publishing Blaine Washington 1982.

49 Hahnemann S. Chronic Diseases etc. Boericke & Tafel. Philadelphia 1896:152.

Unfortunately, generations of modern homeopaths were educated in such beliefs about "isopathy", based on various dubious interpretations of the footnote in §56. Today, in part for this reason, many homeopaths still consider the use of isopathic nosodes controversial, including for preventive treatment.

After Hahnemann's death, some homeopaths were reluctant to adopt the isopathic method using *nosodes* in potency to prevent infectious disease because as far as they knew, this simple method seemed to deviate from the strict standards of homeopathy, and because it targets the disease rather than the patient's total state of health. However, in his sixth edition *Organon*, Hahnemann never advocated treating only the patient as a whole. On the contrary, he strongly advocated treating the disease by matching the syndromes of the remedy to those of the *disease*. And, as explained above, he only opposed the use of crude, *unpotentized* isopathic substances such as used in the ancient practice of variolation and modern vaccination.

However, when Hering advocated the use of *potentized* isopathics—so-called nosodes—Hahnemann did support his efforts, such as with the nosode *Psorinum*, provided such medicines were tested (proven) from their syndromes.

From the modern "classical" point of view, susceptibility to infectious diseases does not develop in a vacuum. A deterioration of general health, "and other circumstances" are responsible for this susceptibility. In order to increase the health of a person's whole "constitution", a homeopath can prescribe a medicine that corresponds to the totality of a patient's psychophysical picture including personality characteristics. While this approach undoubtedly has its merits, it represents only a small part of possible homeopathic interventions.

Having identified the infectious nature of chronic diseases, Hahnemann and his students began to explore the use of so-called *nosodes*—substances derived from the discharges of

*acute* infectious diseases for the treatment of *chronic* disorders associated with these infections.

Because of these and many other complex reasons, the discussion of which would exceed the scope of this treatise, some homeopaths feel that "constitutional" treatment is the best prevention against infectious disease. Many "classical" homeopaths are opposed to any form of disease-specific prophylaxis, even such as Hahnemann conducted during the scarlatina epidemic in Königslutter. Perhaps as a result of this aversion, the proper use of specific nosodes and other homeopathic preventives such as *genus morbi* has remained a subject of some dispute among homeopaths today.

Most 19th century commentary in our literature, however, attests to the efficacy of both, homeopathic and isopathic prevention. One of Hahnemann's prominent students and friends, attorney and physician Clemens Maria Franz von Bönninghausen, confirmed that "thousands of men have through the use of these homeopathic prophylactics escaped cholera."[50]

Constantin Hering was a strong advocate of the preventive use of homeopathic medicines, including the nosodes. He pointed out that although few were familiar with the nosode *Anthracinum,* it had been proven successful both in the prevention as well as in the cure of anthrax, especially in veterinary practice.

"Only the talented Dr. P Dufresne, the founder of the Biblioteque Homeopatique, of Geneva … used it and prevented the further murderous spread of the disease, in a flock of sheep (among which it is always more fatal than among other domestic animals), and cured the shepherds as well."[51]

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50 Boenninghausen CMF von. Brief Instructions for Non-Physicians Concerning the Prophylaxis and Treatment of Asiatic Cholera Lesser Writings 1849:303.

51 Hering C. Guiding Symptoms I. J.M. Stoddart & Co 1879 p. 299.