

Any discussion about homeopathy is bound to evoke passionate feelings, feelings that can interfere with our capacity for scientific objectivity. Fisher has accurately described much of the discourse as a “dialogue of the deaf” [1]. The divide does not just apply to the believers and skeptics in homeopathy – it is endemic within the homeopathy community, too. Homeopathy has polarized opinions almost since the beginning for two main reasons (other than that of professional rivalry). First, the visionary who introduced homeopathy to the world, Samuel Hahnemann, was a prickly character who antagonized friend and foe alike. Second, some homeopaths maintain the belief (some might say “dogma”) that drugs become more potent as the dilution increases, even to amounts that contain no original substance – an absurd assumption to the majority of scientists. It is not the purpose of this book to enter into this particular discussion in any depth, although I will address it periodically. The reason for drawing attention to these two points is to recognize how profoundly they have determined the discourse on homeopathy, which has largely revolved around this limited agenda. Opponents of homeopathy have constantly attacked Hahnemann’s teachings and scorned the remedies, while homeopathy’s proponents have been forced to go on the defensive over these same issues. Far less attention has been paid to other aspects of homeopathy, including the possibility that, as a system of health, it has influenced conventional medicine to a greater extent than is realized. If any credit has been given by those in the larger medical community, it has usually been a grudging admission that homeopathy hastened the demise of traditional medicine’s more deadly treatments like bleeding, blistering, purging, and toxic drug doses. However, the profession has been more inclined to see homeopathy as a tiresome absurdity which would best be eradicated. The possibility that homeopathy may have had more extensive positive effects has rarely been considered. Furthermore, in most discourse, the word “homeopathy” has been taken only in the narrow sense to refer to small doses and the *simile* principle of “let like be cured with like.”

Many questions can legitimately be asked of homeopathy. Does it work? How does it work? Is there a difference between low dilutions, which contain measurable amounts of drug, and higher dilutions, which contain no original substance? Does the *simile* principle have any validity? Do the medicines produce side effects? All of these are fair questions that relate to the remedies themselves, and many are now the focus of research. It is also possible to frame different, broader, questions about homeopathy, ones which expand the horizon beyond remedies. It is the purpose of this book to investigate one of these, the question of how homeopathically trained physicians have influenced medical progress, health, and culture.

A Brief History of Homeopathy

Homeopathy was introduced in Germany circa 1796. It spread throughout the world over the next 50 years, reaching Russia by 1823, the United States by 1825, England by 1827, France by 1830, India by 1839, and Brazil by 1840. As such, homeopathy is a global form of medicine, with each country having evolved its own way of teaching, practicing, and regulating homeopathy. In India, as of the early twenty-first century, there are over 100 homeopathic medical schools and 100,000 licensed homeopaths. In Great Britain, homeopathy has never been part of the medical school curriculum, and the discipline is taught as a postgraduate course at a few centers. In the United States, from the late 1830s until the mid-twentieth century, there were homeopathic medical schools that numbered over 20 at their peak and trained 10% of all physicians. For a time, American homeopathy maintained a vigorous presence in the nation’s medical culture, with its own subspecialties, journals, regulations, and local and national societies. By the 1960s however, it had almost completely died out. In Brazil, at least one university medical school boasts a homeopathy department, and homeopathic treatment is covered under many public and private insurance plans; as a medical specialty, in terms of number of doctors, it was ranked 16th out of 60 in 2007 [2].

Thus, it is reasonable to view homeopathy as more than a matter of small doses and the dogmas of its founding guru. Homeopathy can also be seen as a system, that is, a method of training, practice, and research, which, depending on the country and period in history, has played a significant role in medical practice. This book examines the extent to which homeopathically trained doctors have contributed to medical progress, public health, and culture. It also examines the manner in which their labors have borne fruit. It does so by investigating the influence of homeopathy in different medical specialties, as well as the social and political change that some homeopathic practitioners have achieved throughout history. During the course of writing this book, the author was struck by the number of times that subjects had been acclaimed by observers as being “ahead of their time.” Because these practitioners belonged to a marginalized community, it usually took generations for the true impact of their work to be recognized, and in some cases, it has remained unrecognized.

Defining a Homeopath

Since this is a book about homeopaths, it is well to consider what the term “homeopathy” means. A homeopath can be defined in various ways, and homeopaths themselves have disagreed on what constitutes homeopathy. For example, homeopaths hold different views about the place of high and low potencies in defining whether a medicine is homeopathic. By the early twentieth century, training, diagnostic practices, and treatments in US homeopathic medical schools closely resembled those of orthodox medical schools, with the chief difference being the inclusion of courses on homeopathic *materia medica* and their use in everyday practice. Some might ask if that was the only difference, and the answer to that question is perhaps more complex. It is possible that subtle differences existed between homeopathic and allopathic medical training, differences concerning homeopathy’s holistic commitment to treating the “patient who has the disease” rather than focusing on the “disease.” Homeopathy may have been the first form of “personalized” medicine, which strove to identify what was unique to the patient with the illness as a way of tailoring treatment accordingly. One sees constant acknowledgement by homeopaths of the importance of a healthy lifestyle, attention to diet, exercise, stress management, and the like. This holistic attitude could have characterized the way in which homeopaths viewed their patients, in comparison to the allopathic view. Well-trained homeopaths may have been more attuned to nonverbal signals in the patient, as well as preferences and idiosyncrasies which, to most physicians, seemed of little consequence. Their training may have led to more developed listening skills, and it could be said that there is more of the

psychotherapist about the homeopath than other types of doctor, with the obvious exception of psychiatrists (see Chap. 6 for a more in-depth discussion). That an individualized homeopathic assessment confers meaningful therapeutic benefit over and above regular treatment is suggested in a study of rheumatoid arthritis described in Chap. 18. It therefore bears considering whether the curriculum of homeopathic medical schools included more of these personalized elements. If this was to have been the case, and it is not implausible to make the argument, then there were greater differences between homeopathic and allopathic medical schools than appear at first glance.

The personalities in this book cover the spectrum of allegiance to homeopathy. I chose them not simply as upholders of the faith but instead because they contributed tangibly to the betterment (or detriment) of general medicine, public health, or culture. To merit inclusion, subjects were required to have either graduated from a homeopathic medical school or received specialty training. Some qualified for inclusion if, as regular (allopathic) physicians, they embraced homeopathy later in life. Inclusion does not necessarily imply that the subject practiced or overtly believed in homeopathy – in some cases, they did so (e.g., Griffith); in other cases, there was continuing but unpublicized loyalty (e.g., Fuller, Guttentag); some were conflicted and later abandoned homeopathy (e.g., Wesselhoeft, Boyd, McGavack), while others professed no allegiance (e.g., Bailey) or sought to argue away their contact with homeopathy (e.g., Remsen). Regarding the last two groups, one might ask why I included them. The answer is that they were products of the homeopathic culture, which served as their gateway into medicine. The system can thus “take some credit” as it were for their later achievements. A small number of individuals have been included by virtue of their faculty service in a homeopathic medical school, even though they were neither trained in, nor practitioners of, homeopathy. Technically, they were not homeopaths but were part of the homeopathic culture at the time, and their work reflects to some extent what homeopathy had to offer. Homeopathy is not without its share of villains, and they too will be discussed.

While homeopaths from various countries are included, the great majority here hail from the United States and Canada. This is not to diminish homeopaths elsewhere, but reflects several factors. First, easily accessible records exist of American homeopathy and the activities of its medical schools. Secondly, homeopathy arguably penetrated more extensively into US healthcare than in other English-speaking countries like Great Britain, so there is simply more material to work with. Homeopathy plays a notable role in French and central European medicine, but, without being fluent in the relevant languages, it would be a daunting task for this author to tackle such literature. Along with France, other countries may well have their own stories to tell. Hopefully,

similar accounts will one day be forthcoming. Even weighting this book with material from North America, there is much to say.

Synopsis

This book describes how homeopaths and allopaths who were supportive of homeopathy have influenced medicine in several notable ways.

In the area of allergic disease, the homeopath Charles Blackley discovered that grass pollen is the etiological agent of hay fever in susceptible people. Grant Selfridge was pivotal in establishing allergic disease as a medical specialty.

Anesthesiology illustrates par excellence the formative role of homeopaths in establishing a medical specialty. Active in this regard were Henry Ruth, Harold Griffith, and Rolland Whitacre (who also founded one of the nation's first anesthesiology residency programs). Harold Griffith revolutionized surgical practice with the muscle relaxant drug curare. Kenneth Keown opened up new possibilities for cardiac surgery by introducing lidocaine for anesthesia.

Bioethics was placed on the national political agenda by Senator Jacob Gallinger and became an academic-clinical concern owing to the efforts of Otto Guttentag, who is now hailed as a key twentieth-century figure in this specialty.

Cardiology has been well represented by Constantine Hering, who introduced nitroglycerin; by George Geckeler, a famous teacher in the mid-twentieth century; and by Linn Boyd, author of a textbook and of many peer-reviewed publications. Hahnemann Medical College, Philadelphia, became internationally renowned in the 1940s and 1950s for its innovations in cardiac surgery, under the leadership of Charles Bailey, assisted by Kenneth Keown, William Likoff, and George Geckeler.

Thomas McGavack was an early leader in gerontology and earned fame for his expertise in treating obesity, as well as for treating metabolic and thyroid disease. At one point, McGavack served as president of the American Institute of Homeopathy, but later resigned from the organization over its lack of commitment to a research agenda. McGavack went on to become a distinguished gerontologist and endocrinologist.

Knowledge of infectious disease was advanced by the work of Conrad Wesselhoeft, professor at Harvard and Boston Universities in the mid-twentieth century. An endowed chair in his name at Boston University has been held by some of medicine's most distinguished figures.

Pharmacology has engaged the attention of several researchers sympathetic to homeopathy. In particular, their work demonstrated the stimulating effects of some drugs at low doses and suppressive effects at higher doses – the so-called biphasic or hormetic properties of drugs. The two individuals most associated with this work were not

homeopaths, but were, respectively, a psychiatrist (Rudolf Arndt) and a pharmacologist (Hugo Schulz). Both were positively inclined towards homeopathy and willing to understand how homeopathic remedies could work.

In the world of politics, three homeopaths have been singled out for their achievements. In the United States, Senators Gallinger and Copeland long campaigned for causes such as ethical research and drug safety. Copeland's 1938 bill has had far-reaching effects on drug and food safety. In Britain, Dickson Mabon performed useful work that helped sustain a major center of complementary and alternative medicine (CAM) in London when this important arm of the National Health Service was threatened with closure. Homeopaths have held a prominent role in caring for political leaders and monarchs, including Susan Edson (President Garfield), Charles Sawyer (President Harding), Joel Boone (Presidents Harding, Coolidge, and Hoover), Tullio Verdi (Secretary Seward), Thomas McGavack (Ronald Reagan, before he became president), and Sir John Weir (at least nine European kings and queens over a nearly 60-year period).

For almost 100 years, homeopathic physicians were active in public health and the domestic sanitation movement and took initiatives to improve healthcare and minority training in various communities. Royal Copeland, Tullio Verdi, Solomon Carter Fuller, Charles Eastman, James Ward, and many women homeopaths were among such advocates during the late nineteenth and early twentieth centuries.

Psychiatry perhaps competes with anesthesia for being the specialty where homeopaths have made the most notable contributions. Indeed, a national system of homeopathic asylums existed for about 70 years in which psychiatric inpatients received treatment according to homeopathic principles. Included in the chapter on psychiatry are Solomon Carter Fuller for his pioneering work in Alzheimer's disease and neuropathology, Winfred Overholser for his administrative and forensic work, and Harold Klopp for his innovations in child psychiatry. Bayard Holmes is an unusual case: he was trained as a homeopath and practiced as a surgeon, but for personal reasons became preoccupied with finding a cure for schizophrenia, and did much to advocate for social reform and better treatment of the mentally ill.

From the mid-1800s to mid-1900s, homeopaths distinguished themselves in the field of surgery, and around 20 are discussed in this book. Some of the more famous include Ralph Lloyd and Royal Copeland (ophthalmology), Charles Bailey (thoracic surgery), Edward Franklin and William Tod Helmuth (early pioneers, teachers, and prolific writers), and Israel Talbot (early US tracheostomy pioneer). Surgeon George Taylor introduced Swedish massage to North America and homeopath Matthias Roth introduced it into the United Kingdom.

Perhaps most conspicuous is the large number of women who graduated from homeopathic medical schools, mostly at

a time when conventional medical schools forbade the entry of women into their programs. Their groundbreaking work created opportunities for other women to enter the medicinal field, and they provided services for the disadvantaged in society and for ethnic minorities. Moreover, they loomed large as agents of social change beyond medicine. It is here that the legacy of homeopathy is possibly strongest. Among the group are founders of colleges, hospitals, and unions: Clemence Lozier founded the New York Homeopathic Women's College; Emily Stowe founded Canada's first medical school for women and the Toronto Women's College Hospital; Harriet Clisby, an Australian, founded the Women's Educational and Industrial Union (WEIU); Maria Estrella pioneered greater opportunities for women in Brazilian higher education; Anna Howard Shaw chaired the women's section of Woodrow Wilson's Council for National Defense in World War I and campaigned for women's suffrage and acceptance of women for ordination in the church; and Laura Towne established the Penn Center in South Carolina as a place where freed slaves could receive healthcare and education and learn job skills.

Other distinguished figures include Dioclesian Lewis, who has been described as a "harvesting machine" of causes, including temperance and women's suffrage, but who is best known for introducing a system of gymnastics that educators incorporated into many American school systems. Ira Remsen, who downplayed his homeopathic training, became a world famous chemist, inventor of saccharin, and president of Johns Hopkins University. Emil Grubbé claimed to have been the first to use radiation in medical treatment and was an early leader in the field of radiology. Edward Cronin Lowe was recognized for his inoculation program for New Zealand servicemen in World War I.

Not all contributions are positive, however. Among the handful who brought disrepute on themselves are George Simmons, the power behind the growth of the American Medical Association, who left behind a trail of scandal; Hawley Crippen and Luc Jouret, murderers of one (Crippen) and many (Jouret); Robert Reddick, who organized a license scam; and Edward Pratt, Albert Abrams, and William Koch, commercial promoters of unproven treatments. Others (Karl

Koetschau and Hans Wapler) became closely aligned with Nazi politics in the 1930s.

Rounding out the presentation are two chapters: an introductory essay about Samuel Hahnemann and a closing account that considers the legacy of homeopathy and the evidence of whether it works. A number of extensive reviews have been conducted on human and animal studies, and some conclusions from these will be drawn by the author, who is personally familiar with clinical research, having spent 40 years conducting trials and evaluating treatments in psychiatry and complementary and alternative medicine. All but two of the chapters chronicle the deeds of individuals, but two chapters (Chap. 16 on pharmacology and the concluding Chap. 18) journey more into published literature on scientific work about the mechanism of action and therapeutic efficacy of homeopathy.

Over 100 homeopaths are presented, who largely circumscribe two symbolically important events in the life of American homeopathy. In 1848, Constantine Hering and his colleagues opened the doors of Hahnemann Medical College in Philadelphia, with the first lecture being given in October of that year. Hahnemann was America's first enduring homeopathic medical school, its flagship institution. One hundred years later, 1948 marked the first full year in which that same institution, by then the last remaining US homeopathic medical school, no longer required its students to attend lectures on homeopathy as it let go of its past for a new post-homeopathic identity. One might think of these years as emblematic of the birth and death of homeopathy as a significant force in American healthcare. Nearly all that is told in the following chapters took place during this 100-year period.

References

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