

Establishing a scientific foundation in homeopathy

Constitutional prescribing



by Jennifer Poole

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Our profession sometimes confuses things; we frequently refer to the *constitutional remedy* while, at the same time, we fail to describe exactly what it is, or we give different definitions. I've always believed that it is important to know exactly what we are doing as homeopaths, and why we are doing it. So I have constructed a simple explanatory model of the constitution in homeopathy with the aim to simplify finding the remedies needed to treat it. This article covers these two aspects: what is a constitution in homeopathy and what is constitutional prescribing. It is apparent that the first question must be addressed before the second.

It is extremely difficult to find a definition of the constitution in homeopathic text books. In fact, I cannot find one. The closest may be when Barbara Harwood, as Principal of the College of Homeopathy, wrote in a personal summary for students that the constitution is a 'frequently used term with different meanings', before opting for 'the narrowest definition' as:

... the nature part of the nature / nurture argument. Constitutional refers to what is present at conception. ... the being-ness of the individual before they assume a personality. It includes characteristics such as variations of body type, metabolism, connective tissue type, palms of hands (short palms, long fingers variations) their intrinsic impressionability, basic deep level attraction, repulsion. (1998)

In *The Organon*, Hahnemann refers to 'different physical constitutions' (e.g. aphorisms 5;

77; 102) associated with the birth state, suggesting: 'Especially where we consider the great number of extrinsic factors and the indescribable diversity of distinct congenital human constitutions.' (Hahnemann, *Organon*, §81) He also makes one reference to 'various physical and psychic constitutions' in §136 but this is his only reference, and he does not elaborate.

Kent does not explain what he means, but asserts:

We are able to group together in the mind all those vicious constitutional

states that are called organic diseases as the result of psora.

And: 'The suppression cannot bring on the constitutional symptoms called sycosis' (Kent, 1997).

It seems from this that Kent considers diseases themselves to be 'constitutional states' according to the miasms in their cases, although elsewhere he makes the suggestion that a 'feeble constitution' will become diseased. This gives the impression that the constitution is separate from the disease state. Consequently, we are left not quite sure if the constitution is the disease, or if it is the *reason* for the disease. Close makes mention of a constitution in relation to *susceptibility*, and in association with *temperament* (1985). However, he does not explain this term or what any of the terms he uses mean. Vithoulkas (1980) makes no mention of the constitution in his major treatise, although he does adopt the term 'constitutional remedy' elsewhere (2006).

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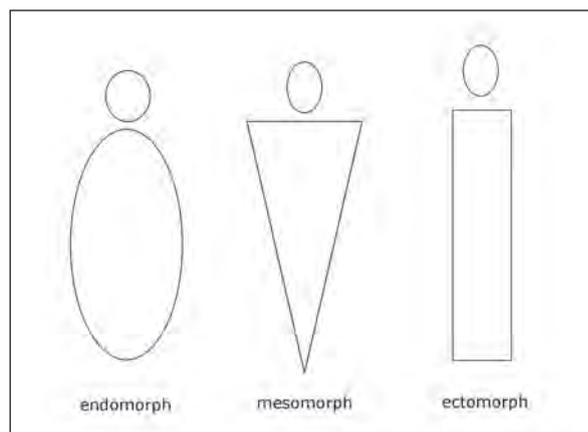


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Specific physical differences in finger length relate to thinking styles

an individual is body type. There are many classification systems for body type, but the most well known is William Sheldon's *somatotypes*. This comprises three consistent 'shapes' known as: *endomorph*, *mesomorph* and *ectomorph*, as illustrated below.

Figure 1: Sheldon's three *somatotypes*



In common with many writers, Vithoulkas identifies the constitution with the 'remedy picture' and these then become 'constitutional remedies'. Lockie, in his popular books intended for a public audience, equates the constitution directly with *susceptibility*. For him a person's constitution describes their state of health, including their temperament and any inherited or acquired characteristics (2000). This is, again, more in line with Harwood. Under this definition, however, it is unclear if one can treat a person who is healthy?

Roberts (2004) does not use the term 'constitutional' but emphasises the 'inherited tendency', later advising the practitioner to 'consider the temperament, the habits, the personality' of the individual'. However, he warns of the potential damage from allopathic treatments, as the constitution will react negatively. This is because:

... while the local suppression may be entirely successful, the constitutional manifestations are inimical to health. No greater crime can be committed against the human economy than to aid and abet these suppressions, for these may be the direct cause of the many constitutional diseases and the

symptoms which are, in their natural state, always the expression of constitutional conditions.

Whilst one instinctively feels one agrees, the exact meaning of this statement, nevertheless, remains somewhat obscure. Smith (1983), meanwhile, believes each person has a 'constitutional remedy'; his overall concept being of an 'overall' prescription which fits physiological and psychological make-up, trends of energy, metabolic activity and psychological attitudes'. Interestingly, he believes the constitutional remedy 'if known' can be given regardless of the problem. But exactly how to 'know it' is not at all clear in any of these texts.

What is a constitution?

Following Hahnemann, and those who suggest that genetic inheritance is the key in identifying the constitution, and its remedy (or remedies), the following model of the constitution in homeopathy was constructed. It comprises three main elements: physical, mental and emotional, all of which have an evidence base.

Physical aspect: body type

One genetically endowed aspect of

Body shape does not generally alter, even when individuals are overweight. For example, an obese mesomorph is still a mesomorph (that is, he / she does not become an endomorph). Somatotypes apply to both genders, with most individuals showing a preponderance for one shape. It follows that body tissue type will also reflect this. Yasko also notes that metabolism varies depending upon genetic type (2004). We can therefore draw the conclusion that there is in each person a core, physical constitution reflected in body type, tissue type, colouring and associated metabolism.

Mental aspect: thinking styles

Several homeopathic authors refer to mental aspects such as personality in relation to constitution. There is a body of psychological research in relation to our genetic endowment in this area. In her summary, Harwood notes different shaped hands ('short palms, long fingers'), although she does not say how these relate to the constitution. In psychology, it is known that specific physical differences in finger length, for example, relate to *thinking styles*. A thinking (or cognitive) style is usually defined as

➤ a preferred mode of processing and retrieving sensory data. Such styles determine and drive the way in which the brain develops ('wires itself'). There are three distinct thinking styles: verbal, visual and kinaesthetic (physical / spatial); the latter being the most neglected in Western cultures. Each of these is fixed: by which is meant that one cannot alter this preference. Individuals who prefer a non-verbal presentation, or have to move in order to learn, will always do so, and cannot change this facet of their constitution. Thinking style is, therefore, another inherited element to the constitution.

Emotional aspect: temperament

Thinking style is distinct from what is felt, which is more associated with *temperament*. Temperament is usually taken to describe differences between individuals in what they consciously experience and report to be emotionally salient: 'In other words, temperament describes what grabs our attention and how intensely we respond' (Cloninger, 2004).

This is considered to be inherited through a variety of genetic 'traits'. These comprise *dispositions* pertaining to three areas: *emotionality*, *sociability* and *activity* (Mischel, 1993). Emotionality (or *reactivity*) has been defined as a tendency to become easily physiologically aroused (through ready activation of the autonomic nervous system) and psychologically (through negative emotions such as anger, fear and distress) (Buss and Plomin, 1984). Cloninger (2004) has identified four basic temperaments, as shown in Table 1 on this page. These have been found to be cross-culturally consistent through a variety of measures.

As can be seen, each represents a dimension, with polar extremes. And, under different circumstances, an individual may reflect the whole range of the dimension, including variations in health and illness.

Three of these are associated with the autonomic nervous system (ANS) which stimulates the various neurotransmitters that orchestrate the psychophysical response (HA=serotonin; NS=dopamine and RW=adrenaline). Most children with autism / ASD, for example, demonstrate high in harm avoidance, and low in novelty seeking. Temperament is genetically fixed.

Temperament dimension	Description of extreme variants	
Harm avoidance (HA)	Pessimistic Fearful Shy Fatigable	Optimistic Daring Outgoing Vigorous
Novelty seeking (NS)	Exploratory Impulsive Extravagant Irritable	Reserved Rigid Frugal Stoic
Reward dependence (RW)	Sentimental Sociable Warm Sympathetic	Critical Aloof Detached Independent
Persistence (P)	Eager Determined Ambitious Perfectionist	Apathetic Spoiled Underachieving Pragmatic

This does not mean that a range of expressions is not possible (these take place through mental aspects and personality expression: see below), but rather that there will be one, preferred approach or instinctive reaction to life events, favoured by the individual.

This makes sense of our differences, and also demonstrates four basic strategies which, from an evolutionary perspective, enhance the chances of individual and group survival under varying circumstances. This concept is probably

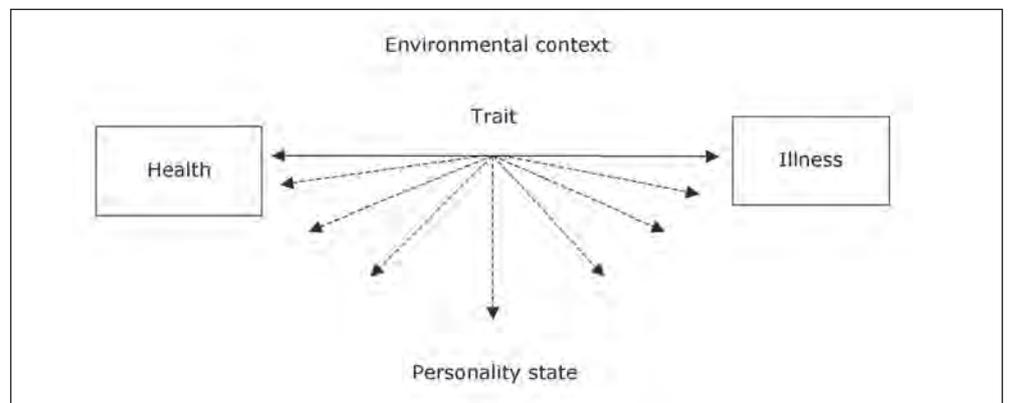
connection with the constitution, but which are not directly inherited. One is *susceptibility* (described below) and the other is *personality*. These are generally considered to be expressions of those inherited traits previously described. This is because behaviours in the same individual can vary widely under different circumstances, and in different contexts; the most obvious being variations within the same individual when sick and when well, as shown in Figure 2 below.

Equally, individuals may behave one way in a familiar setting, but a different way in a new one. Thus environmental context can moderate personality expression. Personality also comprises mental aspects (beliefs etc) which are not inherited, but cultural (aspects which may be socially approved / expressed or not, for example) and is therefore open to distortion or environmental shaping in a way that inherited aspects are not. Consequently, some researchers consider personality to be 'a dynamic system of gene-environmental interplay' (Krueger et al, 2008). In the model being constructed here, personality is not a fixed part of the constitution, but rooted in and an expression of it.

Susceptibility

Some writers (such as Close) associate temperament with susceptibility.

Figure 2: Personality variation in health and illness



what Harwood means by an 'intrinsic impressionability, basic deep level attraction / repulsion variations' (1998). Thus an individual constitution comprises three 'fixed' or 'core' genetic aspects: physical build, processing style, and temperament.

Personality

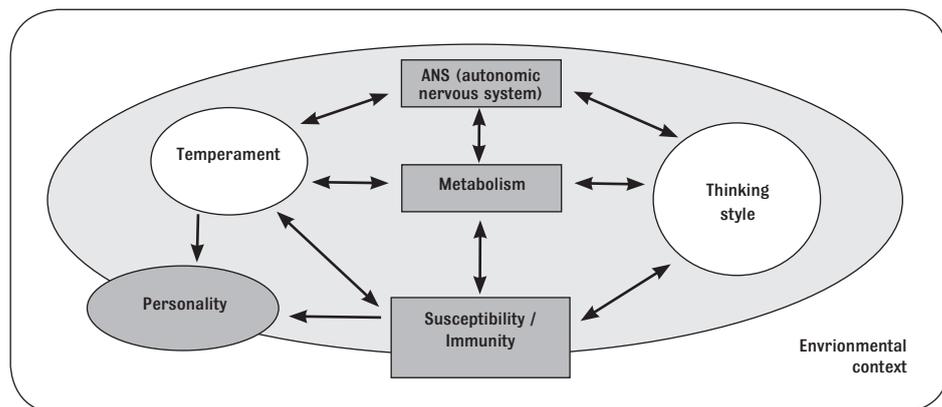
There are two further elements in the texts sometimes referred to in

This is because our tendency to react and the way we do it are part of our temperament (the emotional 'reactivity' part). From this perspective, susceptibility is part of our inherited constitution.

A constitutional model

This model of the constitution is illustrated in Figure 3 (see opposite page).

Figure 3: A model of the constitution



To summarise, the constitution comprises an individual’s physical build (including tissue type, metabolic type, natural colouring and so on); thinking / processing style (visual / language or kinaesthetic preference) and temperament (including reactivity and susceptibility) and the associated ‘brain wiring’ and central nervous system functioning correlating with all of these.

Epigenetic inheritance: miasms

The Human Genome Project has established that we inherit about 2% fixed DNA and 98% epigenetic DNA (Hall, 2012), the latter ‘regulatory DNA’ being equivalent to the cumulative experiences of our previous relations passed to their offspring in order to enhance their survival. This 98% will also include genetic mutations / damage as well. We are all born from a miasmatic soup made up of what happened to our parents, grandparents; how they felt about it (based on their temperaments) and the environmental milieu into which we arrive. Aspects of epigenetic DNA (which represent the non-fixed aspect) are extrinsic to the individual constitution and can be altered (treated). In contrast, the inherited aspects (temperament, thinking style and associated physical type) do not fundamentally change and form the constitution itself.

Although they are fixed, they can be strengthened and enhanced through treating the constitution to raise immunity and lower susceptibility. This is important, as only by treating the constitution can we achieve this overall improvement in susceptibility.

One constitution – many related ‘states’

The reason for this is that, in this model, we do not change our ‘constitution’. Each individual will possess a stable, fixed ‘core’ comprising their optimum physical, mental and emotional nature. It is this that is their constitution. And, because I have associated temperament with susceptibility, it is highly likely that there are four constitutional types: one for each of the four temperaments which have been established (see Table 1). In contrast, we can see that there are a variety of ways in which an individual will express themselves through interaction with the environment, and / or in health and sickness. As homeopaths we know these ‘ways’ will be reflected through the physical body and mental health simultaneously (holistically) presenting as an array of psycho / physiological symptoms

or ‘states’. Figure 4 below illustrates this concept.

Therefore, for each individual there will be a range of possible states into which their constitution can, or will move. The illustration indicates that the individual constitution will remain the same (although it may not be the indicated remedy) while, at any given time, one or more associated remedy symptom ‘states’ will be expressed. (The illustration gives an idea of how these may vary, or be related to each other, although not all will be expressed at the same time.)

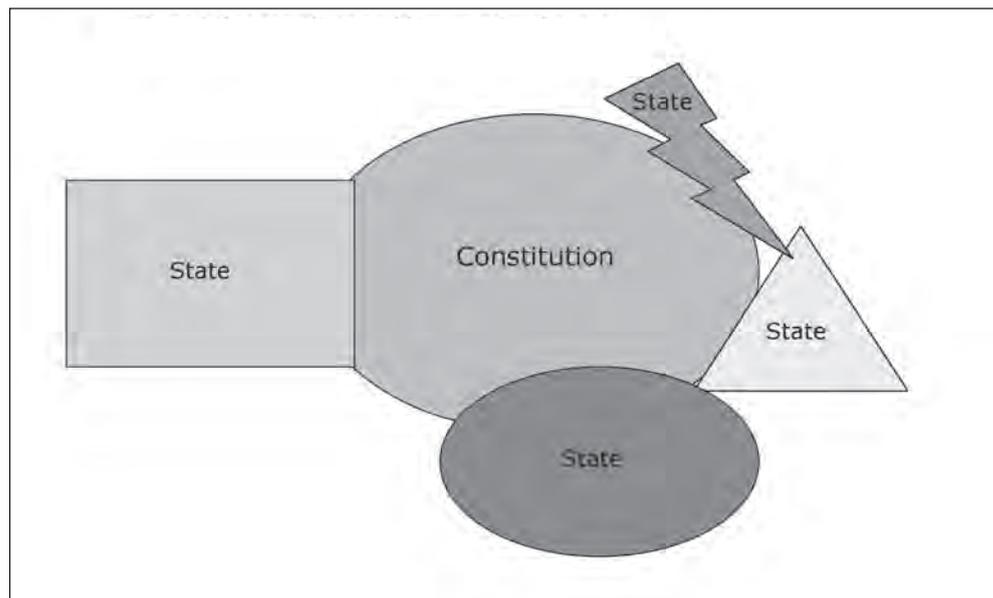
These ‘states’ represent the adaptation to the changing environmental influences made by the individual, and are therefore an interaction between these and their genetic constitution.

In homeopathic practice we recognise this as the basis of an individualised treatment philosophy, in which we match the remedy proving (‘false disease’) to the ‘symptoms’ of the genuine disease state. The key point is that all of these states are related to the constitution and that, until we treat the constitution itself, we cannot ultimately lower individual susceptibility. We may treat the state, but the underlying susceptibility will remain. We need to treat the constitution. Knowing what a constitution is makes this a logical conclusion; also much easier to find.

What is a constitutional remedy?

It’s surprisingly hard to find a clear answer to this question in the texts.

Figure 4: One constitution with many related states



➤ Most writers describe *constitutional prescribing* instead. For example, in one text we read:

Simply stated, it involves taking the whole person into account as far as this is possible, and treating the person simultaneously on all levels – physical, mental and emotional.

... under this heading are included many different ways of prescribing, all of which share the common thread of treating the whole rather than the parts.

(Watson, 1991)

In fact, this is a description of individualised prescribing (as opposed to the therapeutic / clinical method): that is, the person not the disease. Watson adds that this is also known as Kentian, classical, centralist and essence prescribing, and that this form of prescribing is ‘undoubtedly the most difficult’. And this appears to be true, given that so many have given up trying. Most homeopaths describe constitutional prescribing, rather than exploring how to do it. Bailey summarises the current confusion well in presenting three versions:

... the one remedy which covers the totality of the patient’s symptoms (both mental and physical) at a given time

... the one which covers the totality of a patient’s mental and physical characteristics over a long period of time ... [or in some practitioners] the deepest layers of a person’s constitution, which may be partially obscured by superficial layers. (Bailey, 1995)

This latter appears something of a tautology. And, clearly, it would be highly constructive (and helpful to our students) if the profession could decide on just one definition. In fact, using the model described here, the answer has become relatively simple. As previously shown in Table 1, Cloninger has established that there are four basic temperaments, which appear to be consistent and reliable in cross-cultural measures. It is logical to assume from this that there are also four basic ways of reacting to life and that there are, therefore, four basic constitutions. This is something the Ancient Greeks also decided, only they used antiquated words and concepts, not having the benefit of our modern scientific medical research and understanding.

Drawing from the modern evidence base, we can now perceive these basic constitutions or temperaments as possessing different reactive natures, largely based on neurotransmitter function (harm

There are four basic strategies which, from an evolutionary perspective, enhance the chances of individual and group survival

avoidance; novelty seeking; reward dependence and perseverance). These can be said to equate with each of four constitutional remedies. While individual homeopaths may choose to associate others, the four remedies I have always used are *Calc carb*, *Silicea*, *Phosphorus* and *Sulphur* (based on personal assessment of my clients). All the other remedies are either ‘states’ or miasms. And, of course, these four remedies may also be indicated without being the individual’s constitutional remedy.

A ‘belt and braces’ approach

Prescribing the constitutional remedy is important for the reason given earlier; it alone is capable of assisting an individual to overcome their innate susceptibility to the range of diseases they may exhibit. Using a constitutional remedy represents a ‘belt and braces’ approach which, as Smith suggests, will enhance overall health. He recommends using the higher potencies (200c or 10M) to ‘unlock rigid or distorted patterns’ (1983). In fact, a lower potency can be given as an intercurrent remedy; used as a health booster and / or following completion of treatment of a disease.

Curiously, Vithoulkas is reported to have said (although it is not clear if he actually did) that one should not give a constitutional remedy when it is not indicated because ‘we don’t want to remove positive symptoms’. However, given

this model of the constitution, it becomes clear that such negative effects are not possible. Rather, the constitutional remedy of the individual will boost their immune system generally and enhance every aspect – physically, mentally and emotionally. I have found this to be essential in post-cancer treatment and other debilitating chronic diseases where the individual may have forgotten ‘who they really are’.

In summary

The research base in this suggests that the constitutional remedy is fixed in each person. It comprises the genetic elements of physical type, thinking style, temperament and susceptibility, which underlie personality and immunity. There are logically only four constitutional remedies, with all the other remedies representing states of adaption, miasms (or both). It isn’t possible for everyone to go into every state, as our adaption to disease is both limited by our inherited susceptibility and related to our original constitution.

Clearly, it would be highly constructive (and helpful to our students) if the profession could decide on just one definition



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While we can treat states successfully, removing disease through an individualised approach, only the constitutional remedy can remove or lower susceptibility to these states. There are in fact only four constitutional remedies. Knowing this, and how they are connected to all of the other states, makes individualised prescribing simpler, less confusing and more effective. It is vital to thoroughly individualise in chronic

disease so as to evoke a global (whole person) immune response and, thereby, reduce susceptibility. Of course, the skills to identify the indicated remedy are still required (the subject of various courses at Nemeton and elsewhere). But with this model of the constitution, we have a clearer idea of what we are trying to do and why, and can move forward with increased confidence even in very complex situations.

Using a constitutional remedy represents a 'belt and braces' approach

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