As homeopathy progresses through the third century since its founding by Samuel Hahnemann, it is timely to reflect – not only on milestones that have been achieved but also millstones that have hindered or delayed progress.

When embarking on a journey it is essential to be clear about one’s current position so that there is a solid platform from which to measure progress. In this article, the focus is on five major homeopathic innovators whose significant contributions we now take for granted. It also explores circumstances that have shaped homeopathy from 1810 to the present and which serve as the foundation platform for its practice during its third century of existence.

The Organon milestones

During 1810 Samuel Hahnemann published the first of six editions of the Organon that track an evolving healing quest that was only terminated by his death. Throughout those editions modification, revision and change resulted from clarification due to experience-based innovation. The outcome is that the six editions may be divided into the two categories of 1) increasing conservatism followed by 2) increasing flexibility: Organon 1-4 represent the increasingly conservative Hahnemann. Organon 5-6 represent an increasingly flexible approach to prescribing.

The fourth edition may be viewed as the point when Hahnemann introduced his most conservative rules concerning the practice of homeopathy (4th edition, para 242):

a) The dosage is to be the single administration of a few poppy-seed size pills.

b) Repetition should be performed only when there is a relapse of symptoms.

However, within four years, writing in the fifth edition, Hahnemann revised his previous emphatic limitation regarding repetition and advised the practitioner to formulate the remedy in liquid form, an approach that allows the practitioner to (5th edition, para 246):

a) Repeat the remedy during improvement in order to accelerate the time for cure.

b) Tailor the repetition to the nature of the illness: frequent for acutes; days or weeks for

Of milestones and millstones

by Jerome Whitney
There are numerous locations from which to ‘photograph’ the contributions of Hahnemann and Hering. One of them has yet to be emphasised is their interactive work as a team. The incredibly fruitful collaboration between Hering and Hahnemann – from 1830 to 1843 – was not based on face-to-face interaction but rather sailing ship mail delivery between Paris and Philadelphia. Previously, while studying at the University of Leipzig, Hering had seen Hahnemann and family walking on the promenade on Sundays but had never met him. While performing his assignment for his university mentor to disprove homeopathy, Hering found that it worked. During 1821, homeopathic treatment prevented the need for the amputation of his finger from sepsis. As a result, he began to correspond with Hahnemann, a dialogue that lasted until Hahnemann’s death in 1843.

Although copies of Hering’s half of the correspondence no longer exist, those of Hahnemann’s responses are so vivid and thorough that a reasonably clear feeling for their friendship and creative interaction radiates from the texts. While Hahnemann in the early years from 1810 to 1825 focused on introducing remedies sourced from the mineral and vegetable kingdoms, Hering – responding to early editions of Chronic Disease – found the stimulus to prove Lachesis from the bushmaster snake and, subsequently, Lyssin, the saliva of a rabid dog. He went on to initiate the potentisation of animal and human substances, giving rise to nosodes, sarcodes, isodes, and homeoprophylaxis. Although Hering was not alone in the subsequent advocacy of these remedy substances the extent and range of his contributions established him as the leader in the field. His contributions in this area include:

1. Use of poisons & secretions such as Lachesis
2. Nosodes: Medorrhinum, Syphilinum, Lyssinum
3. Isodes: Nosodes made from the patient’s own disease secretions
4. Sarcodes: Normal secretions from healthy glands, such as Thyroidinum
5. Homeoprophylaxis: Variolinum for prevention of smallpox
6. Pre-Schüssler cell salt therapy: Hering suggests minerals may be lacking in diets.
7. Preventative remedies: potentised seeds, insects, and animal organs to prevent or remove unwanted pests.

The complementary milestone contributions of Kent and Burnett

The final years of the 19th century witnessed the simultaneous creative innovations of James Tyler Kent in the USA and James Compton Burnett in England. Both homeopaths introduced two uniquely different, however equally valid, working models of the interconnected nature of humanness.

These working models, when subsequently taken up by homeopaths throughout the world, were to have profound and lasting effects on the evolution of methodology of practice right up to the present moment.

Constitutional prescribing

James Tyler Kent, drawing on the writings of the scientist-spiritual philosopher Emanuel Swedenborg, introduced a new structure into homoeopathic prescribing and layout of the materia medica that has since been termed ‘constitutional prescribing’. Swedenborg had written that there is nothing that exists in any one of the spiritual, abstract, or material realms of life that does not also exist in some form in the other two realms. This observation may be termed the law of correspondences. Kent, by engaging in lateral thinking, reframed this concept into a working model which may be expressed as: there is nothing that exists in any one of the mental, emotional, or physical states of a patient that does not correspond in some form with the other two states of their being.

This concept of ‘what is here is there’, as utilised by Kent, provided the means whereby a homeopath was now able to select a remedy by isolating symptoms on two levels and then checking them against the third level. In addition, the Kentian hierarchical approach of categorising symptoms from generals to particulars supported much more profound prescribing for reaching into the inner levels of the being. Ultimately, this advance was to make it possible for the competent professional non-medically qualified homeopath of the late 20th and 21st centuries to emerge.

Organopathic prescribing

Meanwhile, challenged to effectively treat the extreme morbidity presented by many of the patients that crowded into his surgery each day, Burnett drew on the organopathic teaching of Paracelsus. Organopathy, as it became known, had reached him via the recorded 25 years of experience of Johann Rademacher, a medical contemporary of Hahnemann.

Some patients presented with such morbid pathological symptoms that it was not possible to ‘see the unique person’ in amongst them. Burnett’s response was to treat the organ that, at the time, was most dysfunctional. In
If the constitution is masked by pathology then organopathy is a possible alternative.

When a milestone is delayed by a millstone
The sixth edition of the Organon did not see the light of day until it was published in 1921. This meant that there was a gap of 88 years between it and the 1833 publication of the fifth. It needs to be stressed that the sixth edition is far more than a tweaked version of the fifth edition in the tone and flexibility of its revisions.

For example:

1) The application of the flexible liquid potency methodology previously outlined in the fifth is significantly extended by the introduction of the wholly new 50 millesimal potency prescribing system. The motivation for developing this method represents a continuation of Hahnemann’s desire to reduce aggravation when prescribing the simillimum.

2) Repetition with ascending potency until change is observed is introduced.

3) The term ‘Vital Force’ gives way to the more frequent use of the term ‘Vital Principle’.

4) Hahnemann concludes the sixth edition to have been separated from the Burnettian and both were independently practised on an increasing scale by separate segments of the homeopathic community.

Organopathy
1) Organs are not only a part of the body as a whole but also have a unique character and function of their own.

2) Either an excess or deficiency of a given organ results in disease of the organism.

3) Many times, ‘organ remedies’ cured the whole person by restoring the disturbed organ to health.

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edition, in paragraphs 286–291, with the positive acknowledgment that the Vital Principle may be stimulated to achieve cure with methodologies other than homeopathic remedies such as mesmeric techniques, massage, and water-based therapies. How then did this more flexible oriented mode-of-practice document become ‘buried’ during the 78 years following Hahnemann’s death in 1843? Further, what significant implications was this delay to have on homeopathic practice worldwide which remain with us today?

The answer to the first question may be attributed to concerns raised by Hahnemann himself and later his wife Melanie who became holder of the document upon his death. Over the years, Hahnemann had demonstrated that innovation and variation to the practice of the methodology as outlined by him in the Organon was to distort homeopathy. Melanie, faithful to his concerns along with her own, and keeping in mind the progressive flexibility of prescribing techniques of the fifth and sixth, was seriously concerned that the document would be misused by those unwilling to carefully adhere to Hahnemann’s precise directions.

Melanie’s reluctance to allow the working manuscript of the expanded and annotated fifth edition to be published was based on a number of excuses, including the fear of alteration of the text and meaning from that intended by Hahnemann.

According to Haehl, in his 1922 biography of Hahnemann, Melanie replied to an enquirer in about 1877 to the effect that...

... her husband had repeatedly required of her a solemn oath that all copies of his works should be made under her supervision, ‘so that no malicious and deceptive alterations of the text’ could take place. As to the publication of the works, she was to wait until the rancour of his contemporaries had subsided.

Haehl goes on to elaborate an ongoing series of promises by Melanie to loan him various manuscript documents as well as the sixth edition; however, she reneged repeatedly so that none were ever forwarded. As early as 1856 Baron von Bönninghausen, Hahnemann’s friend and father of Melanie’s adopted daughter’s husband, had suggested publication of the sixth edition but to no avail. Meanwhile, over the years, Melanie held negotiations with various American homeopaths. At one point, she was...

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It is worth re-emphasising that 88 years had passed since the publication of the fifth edition of the Organon in 1833. This meant that the fifth edition had become the entrenched bible of homeopathy on a worldwide scale. In the meantime, the monumental works and influence of James Tyler Kent had been introduced into homeopathic interpretation, understanding, and practice, based on the fifth edition, dramatically reshaping both the approach to homeopathic materia medica interpretation and repertory symptom search. This had occurred at a time when alternative medicine and homeopathy were declining disciplines in Europe and North America. In the face of these factors, it is not surprising that the sixth edition, although available in the public domain, exerted relatively small influence on the practice of homeopathy by most homeopaths.

Dr John H Clarke, the ‘milestone grandfather’ of professional homeopathy

Clarke is extremely important to contemporary professional homeopathy which has evolved since the later years of the 20th century. In fact, he was the patron-supporter of ‘lay homeopathy’, its antecedent, until his death in 1931. It was his untiring support of lay homeopaths...
and the writing of books to support their prescribing that aided British homeopathy to survive the declining public interest in homeopathy that lasted from 1885 to 1960. At a time when few new homeopathic manuals and reference works were being published, Clarke championed the study of homeopathy by non-medical homeopaths and provided them with resource material with which to carry on study in small highly motivated tutor groups. It was from the tutor group movement that contemporary professional homeopathy, the colleges of homeopathy, and the professional homeopathic registers emerged.

Clarke was one of the early supporters of Kentian constitutional prescribing when it was introduced in England. At that time, it was considered to be non-Hahnemannian by many of the leading British homeopaths of the day. However, Clarke was in fact part of that mini minority of late 19th century homeopaths who adhered to Hahnemannian principles while the vast majority of low potency homeopaths considered it to be outdated and ‘pre-scientific’.

He was also an important member of the most creative group of British homeopaths of the late 19th century which became known as the Cooper Club and also included Thomas Skinner, R.T. Cooper, and James Compton Burnett. It was this small group which was able to wield high and low potencies with such skill that they were able to cure morbid conditions including tumours and cancer. Meanwhile the majority, consisting of primarily pathological homeopaths, were no better than the allopaths at treating such conditions.

A short list of Clarke’s contributions to homeopathy include Editor of the Homeopathic World for many years; Promoter and supporter of ‘lay homeopathy’; Member of the Cooper Club; Outspoken anti-vivisectionist. He was a prolific author of homeopathic works that include The Prescriber, Radium as an internal remedy, Clinical Repertory, Therapeutics of Serpent Poisons, Dictionary of Materia Medica, Hahnemann & Paracelsus, Foundations of Materia Medica, The Life and Works of James Compton Burnett, Constitutional Medicine, Homeopathy Explained, The Care of Tumours by Medicine.

When narrow focus on a milestone serves also as a millstone
On the evening of 8 January 1903 Dr Octavia Lewin presented a paper to the British Homoeopathic Society entitled: ‘Cases Illustrating Constitutional Treatment’. Dr Dudgeon, translator of many of the works of Hahnemann, was incensed and denounced this innovative Kentian prescribing model with its high potencies as being ‘non-Hahnemannian’. Dr John H Clarke, a close friend of the now deceased Burnett, responded to the innovative approach to prescribing with great enthusiasm and immediately declared support for the methodology presented by Dr Lewin. Such was the formal introduction of Kentian constitutional prescribing into England, a prescribing methodology that later became a fundamental item in the homeopathic tool kit, worldwide. Meanwhile, within a few years, records show that doctors at the Royal London Homeopathic Hospital were repertorising their cases and prescribing in the 30c potency.

Following the death of Burnett, Clarke became the primary practitioner advocate for a balanced application of the Burnettian and Kentian prescribing methodologies appropriate to the need and symptom picture of the patient. However, there was a tendency for several of his more prominent pupils to emphasise utilisation of the Kentian organopathic approach, a direction that was to have long-term implications.
It also needs to be recalled that, from the early years of the 20th century until the 1960s, practitioner numbers continuously declined yearly via attrition through death. Accelerated by the adverse publicity of the 1910 Flexner report which had as much impact in England as in the USA, entrants into homeopathic education continuously declined while its training institutions progressively closed. In fact, a study posted in the British Homeopathic Journal, October 1962, considered the period from the ‘1940s to 1960 as the terminal period’ for homeopathic education when in 1961 ‘... the last elective course in homeopathy offered to undergraduates in medical schools in the USA was discontinued’. (See: A Motivational and Sociological analysis of Homoeopathic Physicians in the USA and UK, Vol LI No.4)

However, by 1970 interest in homeopathy and complementary therapies in Europe, the UK, and USA began to receive increasing attention and the revival leading to our current era was underway. On the other hand, there were few deeply experienced practitioners in homeopathy at that time. Those few, such as George Vithoulkas, were predominately Kentian-Hahnemannian in their training, outlook, and practice and they became the inspirers of the 1980s ‘classical’ movement. ‘No non-classical’ Burnett for them!

Given that the emerging homeopathy training courses of the 1980s were being founded and led by deeply committed homeopaths lacking extensive experience, they adopted the Kentian classical methodology of prescribing as their primary practice tool. As a consequence, throughout the 1980s and 1990s most homeopathy colleges taught variations of capital ‘C’ Classical homeopathy.

Somehow the flexibility introduced into the fifth and sixth editions of the Organon was ignored and the classical movement focused on a Kentian-based application to practice, drawing on the narrow conservatism of the fourth.

Even George Vithoulkas in a 2004 interview indicated that it was now rare that one homeopathic remedy was the complete solution to a case. He spoke instead about the importance of prescribing the right sequence of remedies – proceeding from one to the next, but definitely not polypharmacy.

He said:

There are some cases where you can do wonders with one remedy. Some homeopaths believe there is one remedy, the constitutional remedy, but there is no such thing. We are too sick with pollution, with antibiotics, with interference, with vaccinations. All this has to be cleared up with very careful prescribing. We have much more complicated cases than Hahnemann had to deal with.

Meanwhile it is important to acknowledge that small ‘c’ classical constitutional prescribing, based on the fifth and sixth editions of the Organon, is and will continue to be an important methodology in the homeopathic tool kit. However, the tool kit needed is more than one tool! After all, even the most well-balanced hammer is not capable of fixing everything that is not a nail.

As a movement ‘classical-Kentian’ homeopathy made a positive contribution to homeopathic methodology by encouraging homeopaths to look beyond pathology.

At the same time, it is also important to remember that homeopathy is a multi-methodological discipline, even as introduced and advocated by Hahnemann in...
Since the 1950s, he had developed a unique model for classifying disease states and a system for treating them based on thousands of cases gained from his many years of experience. In 1972 he put his approach to print in a book entitled Treatise on Homoeopathic Medicine which was published in Spanish. In 1992 it was translated into English, following a very positive response to his lectures in North America, England and Europe during the 1980s.

Eizayaga’s layers model
To appreciate Eizayaga’s system of prescribing with regard to layers, it is helpful to examine his working model of a human being. Eizayaga viewed the human life cycle as moving from potential and propensities to tangible expressions of health or disease. Thus a person is born with unique qualities or essence and inherited propensities which serve as the basis for interaction with one’s outer environment. These in turn may lead to either curable, semi-curable, or incurable disease. The following is an outline summary of the layers in Eizayaga’s model.

When analysing a case, Eizayaga focused on the symptom disharmony presented by the patient as consisting of a series of concentric ‘layers’, extending from the external consecutively inward and described as the:

Local / lesional layer: Outward pathological / observable symptoms

Fundamental layer: Mental-emotional symptoms / physical generals

Morbid soil layer: Miasmatic: psoric, tubercular, sycotic, syphilitic

Constitutional layer: The person / their individuality.
As the years have passed, there has been a growing utilisation of the concept of the ‘layers’ model by homeopaths throughout the UK. This has enabled them to more effectively apply the range of methods available in the homeopathic tool kit such as detox, bowel nosodes, totality, constitutional, organopathic, physical generals, miasmatic.

The milestone of professional homeopathy

Until World War One, homeopathy had been practised primarily by medically qualified doctors. Meanwhile, encouraged by Clarke, and later by Dr Donald Foubister as well as other doctor members of the Faculty of Homeopathy, ‘lay homeopathy’ began to gradually grow in strength and numbers as the 20th century progressed. Before, during, and following World War Two, the primary active energy put to spreading the knowledge of homeopathic prescribing became centred on a small but dedicated circle of non-doctor homeopathic practitioners. These committed people engaged in home study, attending lectures of doctor homeopaths, and open meetings of the British Homeopathic Association. In turn, they held homeopathy classes for interested members of the public.

Among this group were Phyllis Speight, Edwin Tompkins, John Damonte and Dr Thomas Maughan. It is from the germinating efforts of this group that the professional registers of homeopathy were to progressively emerge following a series of progressive attempts.

In 1946 a meeting of 300 people involved in homeopathy (including those named above) met at Caxton Hall, near Buckingham Palace, to form the Institute of Homeopathy, a non-doctor organisation. Twenty-four years later on 10 January 1970 Thomas Maughan, John Damonte, Edwin Tompkins and others met and formed a Society of Homeopaths. This organisation remained active during the period of consultations prior to the 1971 revision of the Medicines Act. Their concern focused on the possible limitations that the proposed act might have on limiting homeopathic practice and manufacture of remedies. Fortunately, the revised Act proved benign in regard to homeopathy.

Permanent organisation had to await 1978, when the students of doctor homeopaths, and open meetings of the British Homeopathic Association. In turn, they held homeopathy classes for interested members of the public.

My primary aim has been to take a fresh look and follow the evolution and role of the relationship of primary contributors and events
the now deceased Maughan and Damonte gathered together to found The Society of Homeopaths. This they achieved by updating and revising Dr Maughan’s hand-annotated copy of the earlier 1970 Articles of Association. As the UK profession grew in numbers so did the founding of additional professional registering organisations including the Homeopathic Medical Association (1985) and the Alliance of Registered Homeopaths (2001). Today these registers provide for the ongoing professional needs of those who choose to join them.

The milestone of formal homeopathic education

During World War Two and in the years that followed, Dr Thomas Maughan and John Damonte held homeopathy classes in various people’s homes in the Greater London area. As the 1960s progressed the number of people regularly attending these classes began to increase. By the early 1970s they had attracted a highly committed ongoing nucleus of students. Dr Maughan’s group later became known as the South London Group and John Damonte’s as the North London Group. Damonte, a radionics practitioner and homeopath with patients from many countries was a long-time friend of Maughan, who was also Chosen Chief of the Druid Order, and who likewise attracted patients by word of mouth from around the world.

A major contribution that Maughan and Damonte brought to their teaching of materia medica included the integration of the esoteric concepts and philosophies of Hahnemann, Paracelsus, Swedenborg, Rademacher, Hering, Kent, and Burnett along with a study of ‘Subtle Anatomy’. This is the science of the treatment of the endocrine glands and the vital energy centres that are associated with them. Their neuro-endocrine focus extended not only to prescribing on the outer physical, emotional, and mental symptom picture of the patient but also the state of the vital energy field animating and surrounding the physical body. This they accomplished by mapping the symptom picture of the endocrine system which is its biological counterpart. Today neuro-endocrine topics have achieved an integral role in the curriculum of a number of colleges.

Following their ongoing participation in the South London Group, Robert Davidson and Martin Miles established the first educational institution for professional homeopaths in the UK. During September
1978 their ‘London College of Homeopathy’ welcomed its first intake of students, achieving far greater enrolment figures than even their most optimistic expectations.

During its first years the College trained many people who later became ‘household names’ in the field of homeopathy as well as principals of colleges and lecturers at many of the 30 colleges that subsequently emerged. This means that many of the courses of homeopathy and their lecturers in England today have direct and indirect lineage of formal homeopathic education over the years the quality and standards of colleges and lecturers at many of the courses of homeopathy as well as principals of colleges and lecturers at many of the 30 colleges that subsequently emerged. This means that many of the courses of homeopathy and their lecturers in England today have direct and indirect lineage of formal homeopathic education and training have progressed from the North London and South London Groups. Meanwhile, over the years the quality and standards of formal homeopathic education and training have progressed from strength to strength.

Of milestones and millstones

This article has focused on the background to a number of the human milestones and their contributions as well as several milestones that led from Hahnemann to the present day. As in any selection there are additional milestones that could have been considered.

However, my primary aim has been to take a fresh look and follow the evolution and role of the relationship of primary contributors and events that have influenced the expression of the principles underlying the practice of homeopathy; that which we now take for granted as being unquestionably fundamental, when newly introduced in earlier eras was found by many, at the time, to be disruptive and disturbing. By appreciating this fact, we are provided with the opportunity to reflect on the progression of the profession to which we have committed our lives with new eyes and understanding.

Meanwhile, as the evidence inexorably builds in the various separated branches of physics, it is becoming more and more apparent that, in the not too distant future, homeopathy will be recognised as an application of the interdimensional quantum-nano reality that is gradually entering mainstream understanding. The anomaly is that it will have been a milestone of that reality for 250 years or so prior to that realisation!

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