

EDITORIAL‡

ADVANCING THE SCIENCE, AVERTING PREJUDICE

NEIL TESSLER ND, DHANP

Of the various books that have been forwarded for review, Paul Herscu's two-volume *Proving*s made the strongest overall impression. *Proving*s is a thorough and systematic presentation. It is a must read for every practitioner and an essential textbook for students.

Also of great interest is the anthology of essays on provings that comprises parts of the first volume and the majority of the second. Dr. Herscu's over all perspective supports the kind of balanced approach that improves the quality of professional dialogue. In terms of provings, it is a call to science in the Hahnemannian tradition.

I would generally agree with the words of Dr. Edward Shalts, who is quoted on the back cover, "In my opinion, his new book advances our community. This book is refreshing. It brings back the feel of having a solid, powerful foundation..."

Reliable information on the materia medica is the first essential foundation of homeopathic science. Establishing clearly how this is achieved is Herscu's intent and he frames many considerations of basic importance. Dr. Herscu emphasizes the close analogy between homeopathic practice and provings. He feels that participation in provings can help the homeopath in the development of practice skills.

He goes on to discuss problems and requirements for effective provings. Highlights include the errors that can arise from heightened introspection, the importance of first establishing a baseline of the individual provers symptoms, the need to identify the provers that are truly sensitive to the remedy, the dangers of including symptoms from provers who do not really show much overall sensitivity. The basic concern is to establish the voice of the remedy vs. background noise. He asserts that those who do not understand these fundamentals pollute the materia medica and repertory with hundreds of symptoms that do not belong to the remedy. He may very well be right. Ever notice how often new remedies come up strongly in a computer repertory analysis?

In terms of the methodology he advances, there is nothing unique here. Every part of it has been discussed and applied in one setting or another. The problem is that this application has been uneven, where

one element is included and others excluded, varying from proving to proving. Here we have a single, coherent and fairly complete methodology that ought to be the basic standard for all serious proving work in the future.

One omission is a consideration of the contemporary practice of periodic group meetings of the proving subjects. A number of very experienced proving leaders have found group meetings to be of tremendous value in bringing out characteristics that may otherwise go unnoticed by individual provers.

Dr. Herscu is very critical of modern Doctrine of Signature proponents. He states that reference to Doctrine of Signatures “is a refutation and a rejection of the spirit of homeopathy”. The best conversations on this issue arise from the insight that there can be no separation between the source, the remedy and the innermost expressions of the patient. It is important to differentiate legitimate developments of interest from the obvious abuses.

Is there evolution yet to occur in the realm of provings? Dr. Herscu offers his Cycles and Segments concept (See Winter 2003 issue) as a model for organizing proving information in a way that gives a full picture of the remedy.

Just as Dr. Herscu discusses the relationship between provings and practice, it is possible that developments in homeopathic case taking methodology will improve our understanding of the remedy image in a proving. Herscu points out that each symptom must be understood fully by the homeopath supervising the prover. In fact, this should be a case taking process. Just as we delve deeply to understand the expressions of the clinical patient, so it should be in a proving.

A proving is not only a collection of symptoms, sensations, concomitants and modalities that characterize the remedy. No symptom should be left as a flat point of information, a fact or a feeling that is not qualified. How far does each symptom go and where may it lead, how does it all weave together? It can hardly be expected that the prover will bring forth everything of importance in their daybooks, any more than a patient can consciously explain, without inquiry and prompting, the full measure of their case. To attain the fullest articulation of the inner state of the sensitive prover a more detailed case taking approach could be a great benefit. Publication of the usual daybook extractions could be supplemented and elaborated by information from just such a careful case taking. We might better understand the meaning and setting of the symptoms and as a result the unity of the remedy. Possibly, the deeper understanding of a remedy that often takes years of refinement in the

clinic may be more effectively realized through provings.

I would like to add a few comments from issues that arose from my interview with Karl Robinson, while thanking him for his warm spirited participation: Karl has concluded that since he uses relatively few remedies and others claim good results using a wide range, perhaps one can be cured by several remedies. He adds, “We could conclude that we don’t need more than 75 remedies or we could say that we have a problem evaluating the effects of our medicines. I suspect that different homeopaths use different criteria as they evaluate their patients’ outcomes.”

This is a very interesting point.

Aphorism 2: The highest ideal of cure is rapid, gentle and permanent restoration of the health, or removal and annihilation of the disease in its whole extent, in the shortest, most reliable, and most harmless way, on easily comprehensible principles.

Yet the perception of “shortest” may vary, the understanding of “whole extent” may vary, the level at which practitioners are working varies, so it is sure that our criteria for evaluating cure also varies. Symptoms, analysis and results can exist at differing levels of depth and value. Certainly two or more remedies can act, but this is why the bar has been raised on claims of cure in published and presented papers. It is also why this journal has an editorial board, to maintain a higher standard for curing.

Concepts that suppose about a hundred remedies should be sufficient cause a little concern. It is reminiscent of Hahnemann’s early attempt to limit potency. It is an imposition on reality and scientifically questionable, though very much a habit of human nature to which even Hahnemann was apparently subject. It is hard to imagine that the individual image of disease in its whole extent can be limited to a hundred remedies.

Ironically, Dr. Robinson decries Dr. Herscu’s proving of *Alcoholus* for one of the same reasons Herscu criticizes Sherr: too many symptoms, in this case, too many mental symptoms. Does this mean there are fewer physical symptoms? No. What is highlighted by this opinion is Robinson’s current view that mental symptoms, while potentially of great significance, are generally overrated and difficult to read. Yet in an age that has become far more cognizant of the depth, power, intricacy

and mystery of human psychology and not the least for its overwhelming impact on physiology, provings are bound to reflect a deeper sensitivity to the mental/emotional state. Many of the best cases and deepest cures are based on the psychological dimension. In provings and in the clinic, we should be concerned with finding mechanisms and methods for becoming more sensitive and more accurate in our understanding of this level - so rich in pathological expression - and how to understand it to best advantage homeopathically. I am reminded of Sankaran's comments on dreams, which seem quite applicable to the mind in general: "There are two main points regarding dreams: never ignore them and never interpret them."

Regarding the importance of personality in the homeopathic case, Boeninghausen himself writes, "As a matter of course, the personality, the individuality of the patient, must stand at the head of the image of the disease, for the natural disposition rest on it... we have all the more cause to fathom these states with all possible exactness, as in them frequently the bodily ailments recede to the background, and for this very reason offer but few point for our grasp..." "...Every man presents an individual nature different from every other one, and ...every medicine must be exactly adapted to this individuality, in agreement with the symptoms, which it able to produce in the total man...A great many medicines are thrust aside, just because they do not correspond to the personality of the patient" (Characteristic Value of Symptoms – *Lesser Writings* page 107)

These vivid expressions by one of Hahnemann's greatest students, presuppose the tremendous development in this aspect of *materia medica* and case taking. How then is it possible to criticize a proving for having too many mental/emotional symptoms? How can there be such a thing as too many mental/emotional symptoms? The issue is not at all about quantity of information. The issue is one hundred percent about quality. If we are criticizing quantity, whether of symptoms or remedies, we create artificial limits on the science of individualization.

Homeopathy has the potential to be a truly quantum medicine, but where is the quantum homeopathy? It will be found in that homeopathy which seeks the complete unity of expression on all planes, without make believe or artificial limits. The homeopath does not add or subtract from reality, for that is the antithesis of the inductive method.. Rather, homeopathy is an open-minded and resolute inquiry to discover the natural voice of "the total man" through case or provings. The question then becomes, how far down the rabbit hole are we willing to go?