Homoeopathy: past, present and future

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Introduction

Since Samuel Hahnemann (1755–1843) published his 'like cures like' (*simile similibus curentur*) principle 200 years ago [1], homoeopathy has repeatedly been in and out of favour and fashion [2]. In spite of the fact that its rationale flies in the face of science and its clinical efficacy remains unconvincing [3], UK sales of homoeopathic remedies are increasing by 20% annually [4]. The following communication will summarize the criticism homoeopathy has received during its existence, outline the present situation and try to determine what the future may bring.

Historical criticism

From its very beginning, homoeopathy received fierce criticism. In his book: 'Anti-Organon oder das Irrge der Hahnemannschen Lehre im Organon der Heilkunst' (Anti-Organon or the errors of Hahnemann's teachings in the organon) [5], J.C.H. Heinroth for instance stated that medicine was misguided to accept from Hahnemann 'much that would not have stood the test of a sharp mind'. Others called homoeopathy 'the highest triumph of ignorance and mysticism' [6] and 'a public scandal' [7]. Oliver Wendel Holmes analysed Hahnemann's three basic assumptions (the 'like cures like' principle, the theory about infinitesimal dilutions and the origin of all disease) in some detail and concluded, 'when one man claims to have established these three independent truths, which are about as remote from each other as the discovery of the law of gravitation, the invention of printing, and that of the mariner's compass, unless the facts in their favour are overwhelming and unanimous, the question naturally arises, is not this man deceiving himself, or trying to deceive others?' [8]. Many physicians agreed: 'either Hahnemann is right, in which case our science and the basis of our thinking is nonsense, or he is wrong, in which case this teaching is nonsense. There is no third option' [9]. The Encyclopaedia Britannica of 1891 summarized the orthodox view of that time: 'Hahnemann's errors were great. His doctrine of specifics was highly retrograde ... He led his followers far out of the track of sound views of disease ... But ... he had the great merit of disturbing and discrediting indefensible modes of practice' [10].

Criticism within homoeopathy

Hahnemann, called 'the Messiah of Medicine' by his disciples [10], considered homoeopathy to be the 'only law consonant to nature' and anyone disagreeing with it was 'an apostate and a traitor' [11]. Nevertheless several contemporary homoeopaths did dare to rebel. In 1837, the German homoeopath Paul Wolf published his 18 theses which entailed a departure both from high dilutions and Hahnemann's psora theory [12]. Forty years later, the vice

president of the British Homoeopathic Society wrote in the *Lancet*: '... the views expressed by Hahnemann are often extravagant and incorrect ... some diseases are best treated by similars and some by contraries ...' [13]. At the end of the 19th century, homoeopathy had 'no scientific recognition' and was 'universally condemned' [10]. Yet even critics (now and then) admit that homoeopathy has its merits: it led to the gradual disappearance of some overtly harmful treatments of its time. Homoeopaths were also pioneering modern trial designs, albeit with regrettably little impact on mainstream medicine [14].

The present

Recently George Vithoulkas, an internationally acclaimed homoeopath, was awarded the 'Alternative Nobel Prize', the Right Livelihood Award, for his outstanding contribution to the revival of homoeopathic knowledge [15]. UK Sales of remedies increase every year by around 20% [4]. As part of the general 'boom' in complementary medicine, more and more patients turn to homoeopathy [16]. Exact figures are hard to come by, but in a survey of almost 4000 asthma patients 12% had tried homoeopathy [17]. The climate has changed, and even the Cochrane collaboration is now involved in meta-analyses of homoeopathic trials [18].

Perhaps not surprisingly, the 'opposition' has once again aligned, and their arguments have become focused on several recurring themes. The most elementary one is that highly diluted homoeopathic remedies are in every possible way indistinguishable from pure diluents. This was highlighted by the 'Benveniste affaire'. Benveniste and his group had apparently shown that ultra-high dilutions can have biological activity [19]. Subsequently a team of 'quack busters' visited Benveniste's laboratory and concluded that his experiments were flawed [20]. Later, a group of independent scientists was unable to replicate Benveniste's results [21].

The clinical efficacy of homoeopathy continues to be questioned [e.g. 22]. Systematic reviews and meta-analyses of controlled clinical trials invariably suggest that the effects of homoeopathic treatments are more than a placebo response. Yet numerous methodological shortcomings prevent more definitive conclusions [3, 23–25]. Nonetheless, today's homoeopaths seem convinced that the proof of their methods' effectiveness has been demonstrated. The 'opposition', on the other hand, remains uniquely unconvinced.

Other critics have questioned the prevalent notion that homoeopathy is inherently and entirely risk-free. Reports of adverse reactions to homoeopathic remedies do exist [e.g. 26, 27], the use of heavy metals might represent a problem [28], and there are important indirect risks, for example homoeopaths' opposition to immunisation [29]. Even if homoeopathic remedies were totally safe, not all homoeopaths necessarily are. Others again point out that homoeopathy as a unified school of thought simply does not exist; there are 'as many homoeopathies as there are homoeopaths'

[30]. Finally opponents stress that homoeopathy has all the qualities of a sect [31]; a group of German professors recently called homoeopathy 'a media-hyped superstition' [cited in 32].

At least one country has taken the drastic step of banning outright homoeopathic remedies [33]. In the US and Europe, the regulatory authorities are more liberal and allow registration of highly diluted homoeopathic remedies without evidence of safety or efficacy [34].

In terms of research, some conclude that more and better investigation ought to be done in order to determine whether homoeopathic remedies are more than placebos [e.g. 3, 22, 23, 25]. Others argue that this would be a 'great waste of time' [31, 35]. George Vithoulkas (see above) stubbornly counters: 'If the world's medical authorities still choose to ignore Hahnemann's beneficial discoveries ... they will be accused by succeeding generations of criminal negligence and shortsightedness' [15].

The future

If homoeopathy is to survive, it must become evidence-based. The fact that homoeopathy is utterly implausible is disturbing, it should not, however, deter us from investigating whether or not it works clinically [37]. Many homoeopaths claim that the randomized clinical trial is not applicable to a treatment as individualized and subtle as homoeopathy [38]. This argument has been shown to be wrong simply by the fact that good randomized trials exist which homoeopaths unanimously acclaim [e.g. 39]. A valid criticism lies in the fact that even the best such studies were conducted by enthusiasts in the absence of impartial, close monitoring. What we require therefore, is not another series of hundreds of trials which inevitably would leave sceptics sceptical. Much rather, a small set of randomized trials is needed, which are planned, executed, monitored, analysed and published by both knowledgeable proponents and informed critics—trials which are sufficiently definitive and rigorous to convince both camps no matter what the result may turn out to be.

Recently the European Union set up a truly balanced panel of experts (believers, disbelievers and impartial scientists) in an attempt to solve some of the existing controversies. The group met regularly for 2 years and produced a sizeable document [40]. By no means does it solve all the problems—in fact it asks more questions than it answers—but it represents an honest attempt to advance the issue free of emotions. This, in my view, is the way to proceed. Homoeopathy, one might speculate, will be a science or it will not be.

Conclusions

Two hundred years of arguments and counter-arguments are more than enough. The most pressing question, 'is homoeopathy clinically more effective than (or even clinically distinguishable from) placebo', needs to be answered conclusively. We do not need yet another two or three hundred non-definitive studies, but two or three convincing, methodologically rigorous trials conducted and overseen by a balanced team of investigators. In the light of

homoeopathy's present popularity, it would be nothing less than unethical [41] and against the best interest of our patients [16] not to take up this challenge.

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