Is there still an art of healing in modern homeopathy, as we are about to enter year 2000 - Dr Patricia Le Roux

The purpose of this paper is to clarify a fundamental aspect of every day homeopathic practice and it concern's its artistic point of view. As we enter year 2000, during the homeopathic consultation, some elements of the prescription are influenced and altered, essentially by the technology that invades the consultation (for example computer repertorisation, biological and technical medical tests..etc), and essentially by the fact that we have to see our patients too fast and too superficially.

The artistic component of our prescription is not well known by us all. Its seems to me therefore to be the key to the best homeopathic prescriptions.

I have been inspired to write this paper after reading one of Dr DEMANGEAT's conferences, concerning mechanical and artistic prescription.

Homeopathy must stay artistic. HAHNEMANN himself presents his Organon as "Homeopathic art". He is followed by KENT shortly after with his book "Science and Art of healing".

1°) What is the difference between artistic and mechanical prescription?

We will start by referring to KENT who quotes the two types of prescription.

Mechanical prescription can be understood and applied by anyone: it consists in repertory searching, and it has been helped a lot by the computer. It still remains long and boring and it interferes badly in the relationship with the patient during the consultation. It can become a finality in itself, especially if it is pushed to an extreme; in those conditions, the repertory is considered as an aim rather than a guide to prescription. We must insist to say that the repertory must remain an "index", we might i say a tool to "refresh" our memories.

If one stays bound to this technique, one can not get rid of it, and will have difficulty in understanding the "spirit of the remedy" which will lead to defects and bad results of the resulting homeopathic treatment.

How should we approach artistic homeopathy?

It is important first of all to understand the meaning of the Materia Medica, and to feel its essence and its significance. To achieve this, it is necessary to use our capacities of intuition and sensitiveness. This also means one must have understood after studying and thinking, the essence of the remedies; this means we always need to search the leading lines and central idea of the remedies. Of course this needs a lot of intelligent regular studying, not just memory.

We are now going to try and compare the homeopathic doctor to a musician, using the following example:

The musician must play a piece of music. In that situation, he can opt for different attitudes.

He can be mechanical about it: counting, sharps and lows, different notes... He will technically play this piece perfectly, mechanically, but with no feeling. It will therefore be very flat and boring and the public will not be sensitive to his music.

If he acts with the same piece as an artist, he will first of all play it of by heart, so that he can get away from the music sheet. Secondly he will put emotion according to the public the place of the concert and everything that can interfere. He will then play something really artistic and emotional.

We can also quote other artists: lets take the example of **the poet**, whilst writing his poem, he can use words and writing techniques. If his source of inspiration is too far away from the readers or if his style is to abstract, he will then produce his personnel problems but will not get through to the reader, and this same reader will not be sensitive to the poem. So they will be no conscious or unconscious relationship between the artist and his reader.

The case is perfectly comparable to that of a patient who does not react to homeopathic remedies, even if they appear to be technically correctly prescribed.

These two examples do therefore, illustrate clearly the problem of homeopathic prescription when it remains fixed and mechanical.

Let us now refer back to Kent. We will quote what he says about the artistic prescription (Lesser writings): "The artistic prescriber has more consideration on Provings than what is concealed in the repertories, where everything is sacrificed to alphabetical order.

The artistic prescriber must study his materia medica much longer and conscientiously, so that he is able to fix the meaning of the disease in his mind, and when he will need it, he will then apply it to personal human disease. All these diseases are far too numerous to be able to give them a classification. I have often observed the artistic prescriber trying to explain a beautifully cured case, and saying for it "I can not really explain how I came to choose this remedy but I knew it was the similimum". We have all felt this, heard this, but who can explain it? It is something that would never occur to beginners, but which the artistic prescriber acquires progressively."

2°) A few cases to try and show artistic prescription in everyday practice.

We must try to see the place that artistic prescription holds and try to explain it. I would like to insist on two different points.

First of all, it is important to insist on the difficulty of artistic prescription if the doctor has no experience and little knowledge of homeopathy. At the French congress of Homeopathic Pediatricians in Lerins (Cannes 1995), it was confirmed that the similimum was found in only 7% of the cases. It is clear that to find the similimum, artistic method is necessary, but the repertory is still there to correct its mistakes.

Let us take for example the case of Mathieu, who I have known and treated since his birth, and who seemed to me a SILICEA profile.

This small boy Mathieu, is physically a thin baby, with a large head "like wheat filled out to fast", sensitive to cold, and with easy perspiration of the scalp and the feet. As soon as he put into a Kindergarten, at the age of 3 months, he starts colds and ear infections regularly.

I try to give SILICEA 7, 9, 12, 15CH, with no result on the frequency of his infections.

Concerning his personality, Mathieu is bright but shy and the consultancy is difficult especially when I have to approach him.

One winter evening, Mathieu comes back to me for an ear infection, and I decide to go through the repertory with more precision concerning his perspiration. His Mum explains to me that he perspires from the head and especially from the occiput and more when, he is asleep; I find in the KENT repertory P223, at HEAD, perspiration during sleep, occiput, SANICULA, as a unique remedy at the 2nd degree. I then go back to the Materia Medica, which confirms to me those signs of SANICULA ACQUA, very close in fact to SILICEA's.

I give him one dose of SANICULA ACQUA 10000K, the only one I have in my surgery, because it is very difficult to get the remedy in France, as it is about to disappear; his ear infection cure in 48 hours and there have been no more ear infections since. Mathieu is now 18 months old, and has the odd cold, but that's about it. He has needed to take just one dose of SANICULA 200K, and that has kept him going. I know this remedy is his similimum but I would not have found it with out the repertory.

A second case of artistic prescription where I did not need to open the repertory at all is Marion's. She came to me because she was a sleepless child, and woke up about 12 time a night. Generally speaking she would wake up to play, her parents would go to her when she got fed up and when they put her back to bed she would scream "as if there were seaurchins in the bed" they would say to me.

I gave her CYPREPREDIUM, and this did not have much effect. The next time I saw her, I tried to see what was striking with this child. At every consultation with her there was no way for me to get near her or touch her without a frantic reaction. I realised then that even looking at her straight in the eyes would make her scream even more. Then came to me the idea that CACTUS GRANDIFLORUS, a prickly flower that blossoms at night, therefore that does not like to be seen, would be the remedy.

Since she has had it, Marion sleeps and has the odd cold. I have now 2 years of backup on this case. It seems to me important in a second phase, that we need to take care of the patient with all the tools we have to try and cure him.

We can give this comparison: a patient is like a house. To get into the house one can go in through the door, the windows, the chimney and even the letterbox.

The entrance through the door is the main one, it is the one of the artistic prescriber. But it must always be checked by a good repertorisation. But sometimes there just the repertory to solve some cases and this must be respected.

3°) Philosophical interpretation of the artistic healing of a patient.

How can we explain this artistic approach, philosophically?

I think a good approach to our patients is the one that Dr D Grandgeorge, explains in his last book "Homeopathie, chemin de vie". He compares Psora, Sycosis and Luesa with the different stages of Freudien affective development.

To the psoric state corresponds the oral stage, the fusional love with the mother, which tends to stay closed in its self and doesn't reach out to others.

To sycosis, one can compare the anal stage of Freud, also conjugal and filial love. At that stage love is to restricted to family and relatives and communication with the world is limited.

Cosmic love corresponds to Luesa. Luesa represents the creative potential in each of us.

It is altruistic universal love. In the relationship to the patient it is this creative power potential that the doctor must project on him to heal him.

At this level of altruistic love are seen the most spectacular healings, the same way as artists communicate with their public.

CONCLUSION

We can now confirm that we must remain artistic: we must not neutralise this ability we have and we must develop it so that technique can then become our partner.

It is true that the actual tendencies of the end of our century do not help us in that way, so we must be careful.`

We are human beings and we have intelligence and sensibility, and our patients are like us.

If we approach them allopathically and technically, we can not be proper homeopaths. Intuition and emotion must be constantly in our consultancies, bearing in mind not to make suppressions of symptoms, even homeopathic suppressions, but trying always to look for the reactional mode or diathesis of the patient, to find his unique remedy in one unique aim: to heal him.

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