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A MEDICAL PSYCHOLOGIST'S COMPARISON OF THE EFFECTS OF HOMOEOPATHIC, ALLOPATHIC AND NON-MEDICINAL TREATMENT OF EMOTIONAL ILLNESS

By Richard H. Cox, Ph.D., ABPP

I am writing this paper as a professional observer. It is not intended as a scholarly treatise or a scientific research paper. I do not claim to be an expert in homoeopathic, allopathic, or any other medicinal modality, although I have studied them, some of the in depth. I am writing as one expertly trained in medical, consulting, and neuro-psychology. The field of psychiatry and psychology has waged war of many years over the value (or lack thereof) of pharmacotherapeutic intervention in emotional illness. I have had the privilege of working with many patients over the years, some on various medications, others on no medications. The effects of medication have been mixed, rarely predictable, and the beneficial effect seemingly produced in one patient, not always duplicatable in the next. I know this contradicts the advertisements and reported research of the allopathic drug industry, but there are few professionals in my field who would take exception to this statement.

With the welcome renaissance of natural health and healing methods, all branches of health care are being forced to take a more critical look at themselves. The consumer no longer sees the physician as a deity, and is no longer satisfied with simple symptom relief. He wants to know not only how to get well but how to stay well. The educated public now knows that symptoms are manifestations of underlying illnesses which have foundational etiologies of a holistic nature. They know that receiving “a shot for the pain” is only closing the door on Fibber Magee’s closet, and they are much less willing to do so than in former years. This is particularly true of emotional illness. Although the “tranquilizer age” is far from over, more and more patients are saying, “please don’t give me pills, let’s get to the bottom of this and see what makes me upset.” All illnesses affect the whole person, and most of all those illnesses which we call “emotional.” Emotional illness involves the physical, mental, spiritual, ecological, and every other part of man that we can name. That alone is sufficient reason to make any true professional blanch to think he could have an edge on the therapeutic market.

My purpose in this paper is not to condemn any form of treatment. Different patients need different treatment in the hands of different healers at different times, and who am I to assume that I could have an edge on a market which I have just stated is non-existent?

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My hope in presenting this paper is that my simple observations may cause you to take new heart in your work and to encourage others to learn about Homoeopathy.

Several years ago I read a reprint oh Homoeopathy by Garth W. Boericke, M.D., in which he lists ten advantages of homoeopathic treatment. They seemed so simple, logical, and workable, that I found it difficult to understand why allopathic medicine had been so successful. Now, after several more years of observation and study, I now only find it difficult to understand, but incredible that Madison Avenue advertising and those super-salesmen, drug detail men, have been able to dupe not only the public, but also the doctor! It might have been more understandable if doctors had added allopathic drugs to the homoeopathic base, instead of throwing out Homoeopathy altogether and replacing it with Allopathy. I would like to take the liberty and courage to add some additional advantages to Boericke's astute and original list advantages which come from my own observations and experience.

First, the entire art of psychotherapy rests upon the ability of the healer to understand the whole person. This has been attempted throughout the years in various ways, from Freud's theory of the unconscious, to Sheldon's body types

Murray's personalogy, Gall's phrenology, and so on. The personality types suggested by Homeopathy are clearer and more usable, since they consider how people actually feel, and are more representative of actual symptomatology. Most psychodiagnostic language is the work of academicians, who describe how they think others feel: terms such as neurotic, psychotic, schizophrenia, and so on, only describe how we think people are a catalog of the mind. As a result, I find that allopathic medications often fit the diagnostic label but somehow do not fit the person's deeper personality structure.

Homoeopathic descriptions do not catalog the mind into artificial classifications, but offer the careful observer a method of correlating symptoms with personality characteristics, thus retaining the individual as a human being with symptoms, rather than a patient wearing a label, which may do further damage, society and psychologically. And yet, the homeopathic healer understands his colleague when he says, "this person is of the 'Sulphur' type." We have common understandings about personality classification according to remedy description. No one ever lost his job because he was "Nux vomica," many certainly have for being "neurotic," "psychotic," or "hysterical." Furthermore, these labels do not suggest a proper treatment. There is no way to treat the "neurotic,"

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so why call someone that? In my opinion, it makes much more sense to allow the person to own his own symptoms, see them as part of his whole person, and receive a treatment for that total person. Homeopathic diagnosis and treatment is more compatible with a holistic definition of life, death, illness and health, and maintains a common every day vocabulary, which is easy for the patient to identify with. I can tell you that it is not easy for anyone to identify with modern psychiatric jargon. Although we may joke about being “neurotic,” not many actually own that label for themselves. On the other hand, it’s not hard to own “Nux vomica,” the remedy for many of the conditions of modern life, quick, active, nervous, irritable, mental strain, and sedentary life.

People do not object to looking at what is true and real nearly so much as they do to having someone else give them a label, and a shot or a pill, and a statement of fees for services rendered, telling them that “everything will be fine, come back in one week,” when they know that all will not be fine, for they have not been seen as a person. The healer must know his patient who has the illness, not only the pathology book which describe the illness.

The treatment of emotional illness most certainly cannot be based upon etiology, since we have many theories about mental illness but do not know what causes any specific syndrome. Those who wish to believe that allopathic medicine is curative for emotional illness should be reminded that, in repeated research, patients consistently improve, for the most part regardless of the method of treatment utilized. Although this has been known for years, doctors still subject their patients to addictive, toxic substances, which frequently produce in themselves the necessity for further treatment.

Second, I have observed the frequency with which allopathic medicines are specifically contraindication, while homoeopathic remedies have no such limitations. I recently had a patient suffering from marked depression, lethargy, anorexia and insomnia. This syndrome is often treated by pharmacotherapy alone, or by pharmacotherapy plus psychotherapy and at times by psychotherapy alone. However, this particular patient is an elderly gentleman, who, in addition to his emotional distress, suffers from intra-ocular pressure. None of the “better” allopathic drugs are safe for his condition. The tricycle anti-depressants are not safe with intra-ocular pressure and the MAO inhibitors frequently cause increased agitation, anorexia and mental confusion. With safe utilization of homoeopathic remedies by his physician, the patient steadily improves without side-effects which could further endanger his health.

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Third, I would like to suggest that homoeopathic remedies often even out a total personality, as well as mangle specific symptoms. Allopathic drugs tend to ameliorate the symptoms at times, but when the medication is terminated the symptoms return. At other times the patients find that although he is no longer depressed, the medication makes him jittery and nervous instead.

Allopathic medicines tend to produce extremes. Because we are dealing with chemical rather than biological agents, the body reacts unpredictably on a very individualized basis. The utilization of biological, natural-herbal remedies allows each individual to assimilate his remedy in a highly individualized fashion, and allows a catalytic action rather than simple acceptance or rejection.

I have been particularly impressed with the leveling effect that homoeopathic remedies have on children. I would suggest that people of the “Ritalin” region take a good look at the possibility of safe, non-toxic, non-anorexic homoeopathic remedies for that huge collection of symptoms termed “hyper kinesis.” It should particularly be taken into account that children on such medications are usually given the drug by parents, school teachers, and so on. Errors in dosage and frequency have more than once produced profound and sometimes tragic results.

Fourth, patients appreciate knowing that remedies aid their bodies to find their own unique equilibrium rather than having to depend upon external maintenance methods. The breadth of symptomatology affected by any given homoeopathic remedy is so much greater than any known allopathic drug. The allopath speak of a “symptom specific,” and as great as this sounds, rarely do we find a patient with just one symptom and a medicine that specifically fits that symptom. People tend to have multiple symptoms, usually involving more than one body system. To equal the effect of a well-chosen remedy, the patient would be on so many drugs that he would need a special carrying-case, and often, unfortunately, patients are. One of the very difficult problems in psychotherapy is treating the patient through drug effects. It is difficult to know just what is progress, drug action-re-action, and new symptomatology. Homoeopathy tends to allow the patient’s own body and body systems to sort out, even out, use or not use, catabolize or anabolize, ingest or excrete the remedy to its own needs. Furthermore, remedies do not produce toxic side-effects which keep the physician guessing as to whether the drug or the illness or other factors are actually causing the problem. The homoeopathic doctor is therefore able to observe the patient in a non-drugged state, and able to observe the primary symptoms first hand.

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Fifth, cost has always been a concern of both doctor and patient. It was bad enough in the days when the doctor could be paid in chickens or hogs, but non of us has escaped today's problems of rising health costs and imminent government controls which we will surely feel even more keenly within the next few years. In my field, patients often have seen numerous other doctors before seeing me, or even have several doctors concurrently while seeing me. This particularly true of the brain injured and the physically handicapped. It is not unusual for a patient suffering from a traumatic injury to have the services of a neurologist, internist, neuro-surgeon, orthopedic surgeon, psychiatrist, and urologist, all at the same time. I do not need to remind any one that their medications do not always produce pharmacotherapeutic harmony. As a matter of fact, to watch the chemodynamics at work is tragic, and the predominant body sound is not the heart beat but the chemical cacophony

Although I am not suggesting that these specialists are superfluous, the body must be screaming out for medications that do not produce further tissue injury and physical distress. And the cost of all this medication is tremendous: a recent Medical Digest tape stated that in the U.S.A. the ratio in drug advertising is \$4000 per physician per year. It is little wonder medicine is so costly. The same tape implied that physicians could utilize far less medications if they would be willing to listen to their patients and treat them as whole persons rather than a series of specialized symptoms.

Sixth, one of my major concerns when dealing with the emotionally disturbed patient is the question of over-dose. We are all reminded that some of the lethal medicines are not prescriptions. More patients commit suicide with common aspirin than with any other single drug. And we are faced with the problem of having prescribed a medication which, even if the patient does not abuse it by actual dosage, is potentiated by alcoholic consumption. The same Medical Digest tape stated that it is reassuring to know that, when a patient walks out of physician's office with a prescription for 100 diazepam tablets, he cannot commit suicide with them! Should one laugh or cry? As you know, diazepam (Valium) is the most frequently prescribes psychotropic agent. The list of warnings, contra-indications, and adverse reactions in the PDR is very long and formidable. Furthermore, patients I see often have been on such medications for so long that they no longer respect any drug, and treat them all as if they were candy. Dosages spiral at alarming rates to produce a minimal therapeutic effect- if it be therapeutic-and potentiation is common. If this consideration were sufficiently taken into account I cannot imagine any physician who would not welcome homoeopathic remedies, which are safe and not subject to patient abuse.

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Lastly, I should like to state that as a traditionally-trained medical psychologist, I proceeded to study allopathic, then homoeopathic medicine. Only when I studied homoeopathic medicine did I begin to understand the real basis of all medicine and observe how the body functions when allowed to utilize its own strength to heal itself. This knowledge has completely changed my way of viewing and treating what is commonly called “mental illness.” We must coin a new word that will more accurately describe the syndrome of body-mind-spirit disease, so poorly called “emotional illness.” Although Homoeopathy was abandoned by the rank and file of physicians in this country, I personally predict and hope that, as the natural and holistic healing movement continues to gain ground. Homoeopathy will find its way back into the armamentarium of the healer of that illness which we all know so well, and which is so poorly named “emotional.”

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