Uninformed and undemocratic BMA attacks homeopathy

On 29 June delegates at the BMA Annual Representative Meeting (ARM) in Brighton passed motions 301 against homeopathy on the NHS, training posts in homeopathy and access to homeopathic medicines. They voted 3 to 1 in favour of the motions while patients protested outside the Brighton Centre demanding doctors think about patients before they vote.

What can’t be dismissed is that 25% (about 125 doctors) voted against the motions and in favour of NHS funding for homeopathy. This support followed an orchestrated campaign by the Faculty and the British Homeopathic Association at short notice, following the announcement of motions being carried at the BMA Junior Doctor Conference at the end of May. The campaign focused on informing delegates and the public alike of the BMA’s undemocratic and baseless moves against homeopathy.

The campaign which focused on professional as well as patient power culminated over a 24 hour period from the afternoon of Monday 28 to Tuesday 29. On Monday the Faculty leafleted BMA delegates to invite them to a reception with Faculty members to discuss homeopathy ‘doctor to doctor’ and be better informed about its use and the evidence base. There was a small number of delegates that attended the reception but several decided to publicly oppose the motion. Faculty members from the region joined Sara Eames and Cristal Sumner to speak to delegates.

The morning of 29 June, delegates were greeted by a patient protest which was organised by the Faculty and BHA and supported across the whole of the homeopathic community. Over 50 patients and practitioners gathered in front of the Brighton Centre with banners and placards, to encourage doctors to think before they voted and to oppose motions 301. This made a big visual impact to all who crossed the protesters to enter the conference. The protest garnered healthy interest from some delegates and fear from others, but also thankfully brought out local and national media (see pages 4 and 18).

During the 10 minutes available to debate the motions within the conference some doctors stood up and shared their support for NHS homeopathy. One doctor, London-based GP Paddy Glackin, also spoke against the BMA motion. He said the BMA motion was in danger of ‘scientific fundamentalism’ and GPs were guilty of prescribing “all sorts of things on a Friday afternoon to patients”. He added: “Just because we cannot show something works, doesn’t mean it’s not useful.”

There wasn’t enough time for all those who wanted to speak on the motion, but it was positive that a significant number of doctors stood up for their beliefs and did not let the motions pass without opposition.

Following the vote the Faculty and BHA issued their response and Dr Sara Eames, President of the Faculty of Homeopathy, said she was shocked and disappointed that her profession’s trade union had passed these motions without consulting doctors who practice homeopathy or allowing them to participate in the debate. “There is a growing evidence base for homeopathy with far more positive than negative trials, increasing laboratory evidence and most importantly of all the large numbers of patients who have been helped by homeopathy when all other treatments have failed. What will happen to these patients now? Is patient choice to become the domain of the wealthy?”
Following a report on homeopathy published earlier this year by the House of Commons Science & Technology Committee, the regulatory body for pharmacists in Northern Ireland has proposed that patients be told that homeopathic products do not work, other than having a placebo effect. However, to accentuate the positives, in the first case a goodly number of delegates voted against the proposals, as we note in our report on page 1, and the balance of opinion on the supply of homeopathic medicines from pharmacies was restored to some extent by articles in the "Pharmaceutical Journal." In one of these, Elizabeth Williamson, director of pharmacy practice, Reading School of Pharmacy, was reported as having told delegates at a conference to discuss ‘Future directions for pharmacy education’ that pharmacists do need to have the knowledge about CAM to be able to offer the necessary expert guidance. Williamson disagreed with recent Royal Pharmaceutical Society guidance to colleagues in England, Scotland and Wales, which stated that pharmacists selling homeopathic products must be competent to do so and be able to discuss with patients the lack of evidence for the efficacy, and their formulation. All of which is a more reasonable approach than Regulators across the Irish Sea have taken and actually quite good – well at least better – news. Better still is the encouraging research update (see page 5), although the news that ‘Traumeel’ is ineffective in relieving post-operative pain will be a disappointment to many European colleagues who use the product widely. I have to say that I am not generally in favour of using trade names in research papers.

Our case studies are a little unusual this month and we hope you find them interesting. We are always looking for good case studies – both long and short – so do continue to send them in. Reports of LIGA 2010 may be found on pages 14 and 15. It was indeed a good conference with many happy memories. For me, one of the most enduring will probably be the vision of the Faculty Dean walking back to the hotel from the beach, trousers rolled up to the knees, shoes in hand – measures taken in an apparently futile attempt to prevent a soaking by the Pacific surf – 'policies' taken. I was saddened to learn of the death of Dr Ralph Twentymann a short while ago. Dr Twentymann, former consultant physician at RLHH and former editor of the "British Homeopathic Journal," was one of the great contemporary homeopaths. His book entitled ‘Medicine, mythology and spirituality: recollecting the past and willing the future’ was written after two decades of retirement from a life in active study and the practice of medicine. I found it inspiring. He also wrote ‘The Science and Art of Healing’ and was described by a reviewer as ‘demonstrating a warm understanding of wholeness that led him to the recognition of healing in its deeper sense to be a true art.’

Finally a reminder about the British Homeopathic Congress, an invitation to which appears on page 3. The list of invited speakers is formidable, the venue excellent and the social events will be as good as ever. Make Cambridge your destination this year. Have a great summer!

Steven Kayne
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Attacks on homeopathy have continued unabated since our last issue. An uninformed and undemocratic BMA Meeting in Brighton passed motions 301 against homeopathy on the NHS, training posts in homeopathy and access to homeopathic medicines.

"We should contribute, when appropriate, to the development of a common platform for homeopathy and anthroposophic medicine in the EU."
Serious illness theme of this year’s Congress

The theme of this year’s British Homeopathic Congress is an integrated approach to serious illness. Cancer is a deadly killer – one in three people will develop cancer during their life, according to the Office of National Statistics. The Faculty is pleased that Liz Thompson, Lead Clinician at the Bristol Homeopathic Hospital, will talk about how homeopathy can help improve and hopefully prolong the lives of patients.

Thompson states: "My approach to prescribing homeopathy to patients with cancer has been to work with difficult symptoms to arrive where possible at a totality of symptoms using a repertory or knowledge of materia medica and case histories. Improving symptoms has been my prime aim rather than suggesting that homoeopathy might affect survival. However, over the years, a number of patients have lived longer than expected."

Thompson will present a number of patients she has seen in her ten years at the complementary cancer care service within the Bristol Homeopathic Hospital and talk about where improvements have been marked in symptoms, well being and scan results. She will also discuss the range of remedies used in such cases.

Other distinguished speakers at this year’s conference in Cambridge include Dr Jonathan Hardy who will present two cases of renal pathology treated homeopathically while Dr Raymond Sevar, the dean of the Faculty will look at Squamous carcinoma bronchus.

Guest speakers from the USA Frans Vermeulen and Linda Johnston will present a paper on “Plant families and their use in improving homeopathic prescribing”. The conference will be the ideal place to catch up with colleagues and come together with the rest of the homeopathic community during these difficult times so don’t forget to register before 1 September to take advantage of discounted rates. Attendance at the entire Congress counts for 15 hours of CPD.

Funds have been made available through the generous support of the Blackie Foundation Trust to assist Faculty members who wish to attend this year’s Congress.

Contact Catherine Saunders at the Faculty to request an application form which must be received by the closing date of 30 September 2010.

New members

Congratulations to the seven members who have become LFHoms. They are: Dr Ann Donnelly, Thomas McBride, Jin Hikoyoshi, Margot Clayton, Dr India Mohamed, Roseanne Ramsay and Martin Janja. Three people have been awarded MFHoms. They are Tagelbahaa Bahnassi Sherif from the UK, Mary Kemuto from Kenya and Dr Renzo Galassi from Italy. We also welcome Geraldine Anwar who was awarded the DFHom(Pod) for her contribution to podiatry.

Revalidation deferred until 2012

The introduction of revalidation will be deferred for a year and will be introduced in 2012 following the intervention of the new government. It followed complaints by the British Medical Association which described revalidation “overly bureaucratic and cumbersome”.

For the time being the piloting of revalidation is being extended to ensure that these systems are sufficiently robust without being burdensome or bureaucratic for doctors or employers.

The General Medical Council (GMC) introduced compulsory licensing to practise across the UK in November 2009 announcing that it would require periodic renewal through revalidation to ensure that physicians are engaged in life-time learning to keep their skills up to date. Revalidation, it argued, was needed to assure patients and the public, employers, and other healthcare practitioners that licensed doctors are up to date and fit to practice.

The Faculty has responded in detail to the GMC consultation on revalidation which closed at the beginning of June. The response focused on pointing out the shortcomings of the GMCs proposals regarding revalidation for those in independent practice and the role of Responsible Officers, which require considerably more research and thought. Other members also responded. Generally the processes have not been welcomed across the board and are a reason for the delay in implementation.

The Faculty Council has agreed to investigate and develop revalidation processes that could be delivered in-house. The Faculty piloted an appraisal processes and we will be making those documents available shortly for the membership to access on the Members’ Only part of the website. Conversations are ongoing with other potential collaborators to enable the Faculty to have a role in revalidation and with the Department of Health. There will be more to share in the coming months and is a priority of Council.

Germany and France have had revalidation schemes for doctors for years and Spain plans to it introduce later this year. Several other European member states are now currently whether to introduce revalidation or to make their current revalidation programmes compulsory.
The attacks on homeopathy have been unrelenting over the past year. It was particularly disappointing to hear that the British Medical Association was not prepared to defend homeopathic doctors nor challenge doctors who were making wildly unprofessional statements about homeopathy and fellow BMA members who are homeopathic practitioners. It started off with some junior doctors, in particular Gordon Lehany, chair of the BMA Scotland junior doctors committee and Tom Dolphin, deputy chair of the BMA junior doctors committee calling for a motion to end NHS funding of homeopathy at the BMA junior doctors conference in Glasgow in May. Dolphin went even further likening homeopathy to witchcraft in an article published in the *Telegraph*.

Following this the Faculty spearheaded a letter writing campaign kickstarted by past president and BMA member, Bob Leckridge. Letters were written to BMA chair Hamish Meldrum expressing concern and many asked whether the comments made by Dolphin were consistent with the GMC’s “Good Medical Practice” which expressly says “you must treat your colleagues fairly and with respect”. It further adds “you must not bully or harass them, or unfairly discriminate against them by allowing your personal views to affect adversely your professional relationship with them,” and furthermore, “you should challenge colleagues if their behaviour does not comply with this guidance”.

The BMA’s motto is ‘standing up for doctors’ but sadly it didn’t stand up for any of its members that practice homeopathy. Instead of supporting Faculty doctors the trade union’s chair Hamish Meldrum appears to have given the impression of condoning them. He was asked by the Faculty for a meeting to discuss these concerns prior to the BMA’s Annual Representative Meeting (ARM) in Brighton last month. When this was deemed not to be possible due to other commitments, Sara Eames also asked if she could address the conference prior to the motion being voted on. The BMA said this was against conference procedure even though no information about homeopathy or its practice in the NHS was provided to the delegates.

To attend the conference one must have been on a committee or signed up to receive a small number of tickets months in advance. Several Faculty members tried to register to attend but were unable to get tickets for 29 June. Unfortunately the motions were passed 3 to 1. Cristal Sumner, chief executive of the Faculty said: “However that still means that 25% – around 125 doctors – objected to the motion which is something. I do believe that number against the motions would have been far fewer, if we hadn’t raised the issue in the public domain.”

She added: “This was done through actions undertaken by members writing to the BMA, getting an EDM put forward, and members and patients writing to MPs and then at the conference we leafleted delegates on Monday to invite them to come to a reception to speak doctor to doctor and the lively protest on the day the motion was voted on. All these actions combined to make this vote important and one not to be dismissed or passed over by the BMA delegates.”

“What has been edifying is the response of Faculty members and energy which seems to be growing within the membership to be proactive and be involved. It keeps us strong and resilient. Add to it the collaboration with the wider homeopathic community of practitioners and patients, and a growing number of individuals questioning the motivation of these ‘scientific fundamentalists’ and it seems we are closer to a tide change than ever before. There are a growing number of reasons to be positive about the future.”

What next?

It looks like the new government will comment on the Science and Technology Committee report at the end of the summer break. The Faculty is actively working to try to obtain further information about the new government’s intentions and it has written to the new health minister Andrew Lansley, and on his suggestion approaching the new Science and Technology Committee Chair.

The good news is that Tony MP David Tredinnick, a champion for complementary medicine has been selected for the Health Select Committee, and has tabled an early day motion against the BMA motions and prompting homeopathic research.

The Faculty is also seeking advice from a number of different sources as to the functioning of the BMA and its committees and council so that we can clarify where our lobbying needs to be directed. We can never be too well informed; so if any of you have links with any BMA representatives, do please let us know so that we can co-ordinate responses as well as possible. At the same time we are trying to arrange a promised meeting with BMA chair, Hamish Meldrum this month.

If you would like to get involved with trying to shift the direction of discourse to one more favourable to homeopathy, get involved by checking the Members’ Only part of the website, join the Promotion Network, keep in touch with other members – it is easy to do. Just email or call the Faculty.

These are tricky times indeed, but historically with its peaks and troughs homeopathy has survived and one thing we can be sure of is that it will continue to thrive because millions of people depend on it across the globe.
Faculty research

Systematic review of clinical trials in homeopathy
With the publication of the Science and Technology Committee’s biased report against homeopathy, it became obvious there was a pressing need for a new and complete review of the clinical research evidence. Regrettably, the BHA’s and the Faculty’s submissions were largely ignored by the committee. The new review will be based around the content of those submissions.

Clinical data collection update
The paper reporting the findings of the Faculty’s data collection survey in cats and dogs has been accepted for publication; it will be published during 2010. We have completed the analysis and interpretation of results from the data collection survey in periodontal homeopathy; writing up the paper has begun! Data collection in the podiatry project ended, as scheduled, on 30 June.

Traumeel ineffective in relieving post-operative pain
In spite of recent advances in post-operative pain relief, pain following orthopedic surgery remains an ongoing challenge for clinicians. This study examined whether a frequently prescribed homeopathic preparation could mitigate post-operative pain. The researchers performed a randomised, double-blind, placebo-controlled trial to evaluate the efficacy of the homeopathic preparation Traumeel S® in minimising post-operative pain and analgesic consumption following surgical correction of hallux valgus. Eighty consecutive patients were randomised to receive either Traumeel tablets or an indistinguishable placebo, and took primary and rescue oral analgesics as needed. Maximum numerical pain scores at rest and consumption of oral analgesics were recorded on the day of surgery and for 13 days following surgery. Traumeel was not found superior to placebo in minimizing pain or analgesic consumption over the 14 days of the trial. However, a transient reduction in the daily maximum post-operative pain score favouring the Traumeel arm was observed on the day of surgery. The authors conclude that Traumeel was not superior to placebo in minimizing pain or analgesic consumption over the 14 days of the trial.


Significant effects of homeopathic treatment in respiratory allergies
This article reviews evidence from controlled trials for the use of homeopathy in respiratory allergies. Several clinical trials, many of which were published in high impact conventional medical journals, have described significant effects of homeopathic treatment in allergic patients. According to the three most commonly referenced meta-analyses of homeopathic research, most of these clinical studies are deemed to be of high quality. In-vitro experimental studies also provide evidence that the effects of homeopathy differ from placebo.


Non-conclusive research evidence for homeopathy in insomnia
Current management of insomnia includes psychological and behavioural therapies and/or pharmacological treatments. The aim of this study was to review systematically the research evidence for effectiveness of homeopathy in the management of insomnia. Four randomised controlled trials (RCTs) compared specific homeopathic medicines to placebo. All involved small patient numbers and were of low methodological quality. None demonstrated a statistically significant difference in outcomes between groups, although two showed a trend favouring homeopathic medicines and three demonstrated significant improvements from baseline. A cohort study reported significant improvements from baseline. No randomised controlled trials of individualised homeopathy were identified in the review. One cohort study, three case series and over 2,600 case studies were identified. In conclusion, the limited evidence available does not demonstrate a statistically significant effect of homeopathic medicines for insomnia treatment. However, existing RCTs are of poor quality and are likely to have been underpowered. Well-conducted studies of homeopathic medicines and of individualised homeopathy are required to examine the clinical and cost effectiveness of homeopathy for insomnia.

Enough energy for one last shot

Dr Bridie O’Dowd looks at how homeopathy can be used to successfully treat chronic fatigue syndrome

The patient was a 58-year-old man with chronic fatigue syndrome. He had a muscular build combined with an imposing, but easygoing manner. He first came to me for a consultation on 19 May when he told me: “It began in earnest about three years ago, but I had been getting increasingly sick before then. I feel absolutely exhausted, fuzzy, with disorientation and brain fog. If I try to do anything above work, like a hike or a cycle, it takes so long to recover, so I stopped that, and social things as well, because it used additional energy I didn’t have.

“I began to have to leave work early. If I stay beyond 3pm, my whole body starts hurting, my back muscles start quivering and twitching, my heart is racing, and I’m on the way to being destroyed. The rest of the day is just survival. I really just need to sleep, but I don’t, because I have to first eat to replenish my energy. I get strong hypoglycemic moments. I could swim for 45 minutes, but I would be destroyed afterwards.”

Social interaction
I asked him to describe to me in more detail how this affected him. The patient replied: “This is so depressing for me. It affects how you interact with people. They want to stay away from you if you are unwell-they treat you differently.” I went on to get him to elaborate and explain what he meant. His response was: “You need to protect yourself to avoid embarrassment. When I’m bad, I can’t participate in a conversation at a normal rate. I just come to a standstill and lock up, or say completely the wrong thing. I need to conserve energy I search for a response, but my brain won’t work. Sometimes I just end up staring at a wall.

“You have to be so careful in my work (Post-graduate in Molecular Science), not to let them know how you really feel. People spot your weak point. Students giggled at me and rolled their eyes, I was ridiculed. It hurts your pride. There were lots of occasions like that. I have a huge fear that people would think me not capable. That would be a big blow to my ego.”

Too old
I then asked him to tell me about this blow to his ego. He said: “The problem is, I’m too old. I got my PhD towards the end of my career. When I was 46, 10 years ago, I knew I had only the energy for one last shot at a Faculty Position. I had 10 publications, more than my competitors, and I made a huge effort, came up with a big research project, and made lots of contacts, but I wasn’t even asked for an interview.

“I’m in competition with these younger, big-shot, demanding guys. I’ve always climbed to the ladder become senior “whatever”, anything difficult, I can do it I’m resourceful, I like to be challenged, fearless, always taking another leap.”

Hunting
I questioned him about what his hobbies and interests were. He told me: “I like cycling and swimming and hiking. When I lived in Idaho, I used to hunt-big animals, like deer. It’s hard, you have to get yourself on a very primitive level with the animal, get close to them without them seeing you, and respond to their movement. I loved it, I was very successful at it.”

Homeopathic prescription
I prescribed him Pantharis Tigris 200c daily for three days.

Patient realisation
The patient came back for a follow up appointment just over three months later on the 25 August. He told me: “After taking the remedy, I had a strange reaction lasting for 15 minutes, with red and blue coloured prisms in my vision. I had had a similar thing 10 years ago as a reaction to a chemical. Since I was last here I’ve had the realization that I could get better. Not beating myself up as much. Something has lifted I have more energy. Good spells, first good hours, then good days. Periods when I
feel almost normal. Symptoms can be away for a while, and then back, but at a background level. A week ago, was able to swim for 45 minutes and just felt normal tired. Now recover after resting, before woke up feeling the same.” I gave him Pantharis Tigris 200c to take should he feel his improvement waning.

Recovery
I saw him again later in November when he said there had been consistent improvement. “I can now walk fine for a couple of hours at a time. My recovery is quicker and symptom free for longer periods. If I do crash with whole body pain, it is only an occasional day, rather than every day. Those crashes are rarer now. I have taken dose of remedy intermittently, about every three weeks.” I prescribed Pantharis Tigris 200c PRN.

Stamina good
He came for a consultation in February 2010 and told me: “Now if the energy crash returns, I just don’t want to put up with it. It predictably goes away if I take a dose of the remedy. Muscular strength and stamina good. Not crushed any more. I am pretty pleased although there is some malaise, groggy feeling, heightened sense smell. I gave him Pantharis Tigris 1m daily for three days and PRN.

Patient happy
The patient came back three months later in May and told me “I am swimming and walking longer. I am building up my strength again and happy with the way things are going.”

Homeopathic profile
I choose the remedy Pantharis Tigris for the patient because of the issues of survival, competition – the weak-spot drew me towards the animal kingdom. Words like destroyed, crushed, blow to my ego, big shot, resourceful, challenge, fearless, leap, pride, also led me to the wildcat remedies. Specifically, the sense of “second best” in his work competition, the energy for only “one last shot”, awareness of muscular system “quivering twitching muscles”, sense of being mocked, “ridiculed” strong hypoglycemia “must eat to replenish energy” and hobbies of hunting large animals such as deer, led to the source of Tiger.

From Vasandi’s Tiger proving 1997
• Dreams, best, feels is, but no chance to prove it
• The tiger is significantly bigger than the lion, but is not considered king of the jungle
• Dreams mocked
• Dreams injustice
• Dreams inferior, lacking what everyone else has
• Staring, long at things
• Talk, irrelevant during conversation

The tiger’s weak spot is that it’s formidable energy is good for only one or two leaps, after which it is exhausted and needs to eat and sleep to restore it’s energy.

With thanks to Dr Jonathan Hardy’s superb seminar on Mammals in Glasgow 2008

Dr Bridie O’Dowd, MBChB, MFHom is on the Specialist Register and a specialist in homeopathic medicine at the Glasgow Homeopathic Hospital Centre for Integrative Care.
A case for **Eupatorium Pupureum**

Dr Julie Geraghty looks at a homeopathic intervention with a surprisingly favourable outcome

This case shows how the holistic treatment approach can help treat a patient with recurring physical ailments.

**Background**

A 52-year old male came to me for treatment in October 2001 suffering from recurrent chest, ear and urinary symptoms. He was also distressed as he had urinary problems on and off over 20 years which he described as “thrush-like”.

**Patient history**

This is his story in his words. “For the past three years I’ve had a series of illnesses, I feel as if my body isn’t fighting things off properly. I had a very bad cough earlier this year, I could barely breathe, and I had three lots of antibiotics. I’d caught a cold which got much worse because I had pneumonia and bronchitis when I was little. And other recurring things are causing me distress ... there’s something wrong with my urinary system, the symptoms are thrush-like and I get really feverish, sweating and shaking with cold and I get delirious. I’ve been having bouts for 20 years, the last time was in May, but disconcertingly, nothing can be found. Regularly I’ve had a trace of blood in my urine. In my teens I had operations on my penis for hypospadias. I often have discomfort when passing urine, but nothing has been discovered, even on urethroscopy last year.”

**ENT treatment**

“The other thing that worries me is that last year I began growing exotic fungi in my external ear. I’ve had it five times in the last year. The ENT doctors had great difficulties removing all the fungal spores, they made three attempts at it last year. Last summer, the doctor was quite upset about the state of my ear and referred me to a specialist who was the first doctor who seemed to know exactly what to do. He suggested squirting vinegar and water into my ear, which I still do. When my ear is bad, I can feel something moving and the ear is very itchy and the pain goes into my head and throat.”

**Struggles on bravely**

“I’m not an ill person, I’m used to good health. I don’t take time off work, only two days in the last two years... I tend to struggle on. I’m very wary of the term stress, I think it is over-used ... I like to think my body can cope with what I’m doing in my life. I used to have a building company, but now I’m principal of a multi agency project. We bought a house in Italy two years ago...”
and I threw myself into building work with great vigour. I find it very therapeutic to do hard physical work. The first summer was very hard; I was working 16-hour days renovating the house. Then I came back to my new job, I don’t feel the stress, but I’m beginning to wonder if it is having some effect on me.”

**Immune system**
I asked him to describe his cough. His response was: “Colds always go to my chest, which is a problem area for me. I was coughing up very thick phlegm and my lungs felt asthmatic, as if my throat and lungs were contracted. My lung tests were below average. I had pneumonia three or four times before I went to school. I remember being on antibiotics a lot. I had difficulties with bronchitis till I was 18 and bad acne in my teens and a very itchy pink scalp. I still get a lot of dry skin on my forehead; in fresh air it’s a lot better. Generally I feel my immune system was broken down by the barrage of antibiotics I had as a child.”

**Urinary symptoms**
I then asked to describe his urinary symptoms. He told me: “20 years ago I passed a lot of blood in my urine which scared me, and the doctor sent me for tests. I’d had the thrush-like symptoms, burning when I passed urine and then pain at the end of the penis for a few days before the blood started. Then I became feverish, I was delirious with uncontrollable shaking. That was the only time I had a bacterial urinary infection, all the other times nothing has been grown. When urinating it felt as if the urine was going into my blood and poisoning me. This coincided with me leaving teaching and starting the building firm and we had our first child. I was under a lot of pressure.”

**Hypospadias**
I asked him to describe the operation for hypospadias. The patient said: “I was born with the urethra too short and my penis was pulled downward. I had three operations, at one stage I had a tube in my urethra while they were doing the repair.”

**Choice of homeopathic medicine**
Case Analysis: I was sure he needed a remedy from the Compositae (Arnica or Daisy) family of plants. The vital sensation (as described by Rajan Sankaran) that they experience physically and emotionally is one of being bruised and battered, as from the shock and trauma of a blunt injury. These people want to be strong and tough, but feel weak and vulnerable in the face of illness and injury, particularly attributing this to weakness of the immune system. As we know from Arnica and Calendula, all members of this family are prone to bleeding and bruising, often having a fear of blood and injury, and we often see ‘never well since’ an accident or operation. They need to be respected, especially by doctors, and are very sensitive to their protective physical and emotional boundaries being transgressed. This is why they are so prone to bruising, when the blood vessel wall is broken down, and so aggravated by being prodded or poked.

As with Echinacea, the Compositae so well known as an ‘immune system booster’, all these remedies are prone to viral infections with high fevers, when virus has successfully broken through their defenses.

**Queen of the meadow**
Eupatorium Perfoliatum is one of our best-known influenza remedies. I recently realised that many of the words used by patients who need Compositae remedies begin with ‘b’, which makes them easier to memorise: bruised, beaten black and blue, blunt, battered, dashed, barriers/boundaries broken or breached, boost (immune system), blood, bleeding. In this case, I chose the much less well known Eupatorium Purpureum, commonly called ‘queen of the meadow’, which is known as a remedy for irritable bladder, and chills. I was pleased to find the ear symptoms ‘ears feel as if filled up, crackling in the ears’ in the materia medica. Although Sankaran has not classified this remedy in a miasm, I would suggest that it is in the ringworm miasm. For a start, one of his main complaints is recurrent fungal infection, but he displays the classic mode of struggling with his complaints, encountering difficulties again and again, and making repeated efforts to recover. These efforts alternate with despondency and giving up. I recommended the remedy *Eupatorium Purpureum* 200, 3 doses.

**Some improvement**
Two months later he reported some improvement in his symptoms. “My ears are feeling so much better, I haven’t needed to put vinegar in for three weeks. I haven’t had any problems with my urinary tract, whereas there was continuous discomfort before. I went to the lung clinic and there are no problems except a slight under-capacity, which they think, is related to the childhood pneumonia. The doctor said the recurrent chest infections are more to do with my immune system.”
Repeat 200c pm.

**Three months on**
The patient said: “The urinary symptoms came back a few days after I saw you, my ears felt unsettled and I had the burning after passing urine. I repeated the remedy and both symptoms abated. It feels as if something goes wrong there, something must be breaking down, which would explain the blood in my urine. But I was feeling well in myself and my times on the running and cycling machines were the best in years.”
I advised him that the repeated surgery to his urethra had probably left him with sensitivity in that area that caused the recurrent soreness. I repeated 200c with no effect, so gave him *Eupatorium Purpureum* 1M.

**Improvement continues**
He came back to see in January 2002 and said: “I’ve had no problems with my ears. Passing urine has been much better. A recent cold didn’t go to my lungs at all and I have less catarrh. The skin on my forehead is getting drier again, it was just on my scalp ... like I had years ago.”
Reassured by the return of old skin symptoms with amelioration of deeper complaints.

**Total success**
The patient came back ten months later in August 2002 and told me: “I definitely feel the treatment has made a difference, there’s been total success with my ears, and my urinary symptoms came back once in May and I took a single dose and they were gone within an hour. My skin was much better in Italy, being outdoors 16 hours a day.”

**Patient impressed**
The male continued to show improvement 15 months later following his homeopathic intervention. He said: “There’s been no return of the ear or urinary problems. I’ve had occasional soreness on urination but as you advised, I tend to see it more as a war wound rather than something going wrong. I’m very impressed by what you’ve done. All the talking helped me gain a better understanding of what’d been happening to me and made sense in a way the other doctors I’d consulted hadn’t. The remedy seems to act a bit like a tonic ... the effect on me is subtle but immediate – I consistently get better times at the gym after having taken it! I feel I have a better understanding of my body and the way that monitoring the weaker parts can tell me a lot about my general health.”

**Quicker recovery**
He saw me again in May 2003 and said: “I’ve had two colds, lasting two weeks each. The one in February went to my chest and ears, I was deaf and coughing. I took the remedy and it held it at bay, then it flared up again after three days, but I made a full recovery. Then this month the cold developed into a cough, I felt my chest was being beaten up every time I coughed, like my chest had been traumatised in some way, which made me feel weak and fragile. Up until February I’d been feeling like the invulnerable, I wasn’t catching colds from family and colleagues which gave me a great sense of strength. I’ve not had any urinary or ear symptoms.” (note the use of Compositae words and images)

I prescribed him *Eupatorium Purpureum* 10M 3 doses.

**Did the trick**
The patient seemed to have responded well as he told me: “I’ve found the remedy very helpful, the 10M seems to have done the trick, there’ve been none of the symptoms I had before. I don’t take them unless I feel ‘something’s coming on’ and then usually nothing does. I’ve been feeling very well and strong, and seem to be much more resistant to illness and injury.”

**Summary**
This was my first case of *Eupatorium Purpureum*. I have subsequently used it again with success in a man presenting with recurrent sinusitis, who was clearly a Compositae case. I tried a couple of remedies from this family with partial improvements, until he complained of a troublesome recurrent fungal ear infection. I then prescribed *Eupatorium Purpureum* which helped his ear infection and the sinusitis. It was interesting to compare the two men, of similar age on presentation, both thin, sandy haired with freckles, and of anxious demeanor, especially about their health. I always think of it now when patients present with fungal external ear problems.

Julie Geraghty
MBChB MFHom DCH
Autism Beyond Despair
Cease therapy • Homeopathy has the answers
By Tinus Smits • Publishers: Emryss Publishers
204pp • Price: €22.50 from www.emryss.com or £19.99 from Amazon
ISBN: 9 789076 189284

The name Tinus Smits will be familiar to readers of Homoeopathic Links for his exceptional work on Carcinosin and its related remedies, as well as his work in Nepal. He was deeply respected in the homoeopathic community, and his sudden death from cancer earlier this year saddened colleagues and grateful patients alike. Dr Smits was no stranger to controversy. His web page on Post-Vaccination Syndrome (PVS) was frequently shut down despite the fact he never directly opposed vaccination.

Inspiriting Homeopathy
His interest in autism began whilst treating children with PVS. He noticed a dramatic improvement in the symptoms and behaviour of these children, which could only be achieved by isopathic treatment of the vaccines. Classical homoeopathy had little effect on these children and the obstacle to cure appeared to be vaccines. However, the results of isopathic treatment followed by classical homoeopathy did not always produce a cure, and thus Dr Smits reviewed the cases again. Out of this close observation and contemplation, he derived a technique known as “Inspiring Homoeopathy”, a group of “universal” remedies, including Lac Maternum and Vernix Caseosa, which could be used methodically to promote healing in the most difficult of cases. Again there was improvement, but not cure.

Isopathic potencies
His perfectionist tendencies drove him to deeper and deeper research. He started using isopathic potencies of medication given to the child and parents. His philosophy was “every chemical substance that is unnatural is potentially toxic” and thus must be considered in order to achieve a state of health. To Dr Smits, the greatest obstacle to cure was the lack of information as to to the toxins a child may have been exposed to during his lifetime and before, in the form of miasms.

Treating autism
This book is a tribute to those years of painstaking work, describing his method for treating autism – the CEASE (complete elimination of autistic spectrum expression) programme. This is a combination of homoeopathy in its various forms and nutritional supplementation. It is aimed at parents rather than practitioners and illustrated throughout with cases and testimonials from parents. The incidence of autism in children is increasing. Many authorities maintain this is due to better diagnosis; however the rise in these conditions is alarming and attributing it simply to increased awareness seems far too simplistic. Estimates vary as to the true incidence and arguments rage as to the causes. Most would accept that the aetiology is multi-factorial with an underlying genetic or hereditary predisposition, with environmental factors playing a significant role. Dr Wakefield’s recent GMC hearing has not silenced parents who maintain vaccination caused their child’s problems. Dr Smits never subscribed to the theory that MMR vaccine caused autism, more that it may be the last straw that broke the camel’s back.

There is little help available for these children in conventional medicine other than medication to control the frequently associated hyperactivity and attention deficit disorder. It is natural that desperate parents therefore turn to Integrated Medicine to find help. There are no easy solutions to these children’s problems, but Dr Smits did provide a basis for a rational and consistent treatment programme to help autistic children.

Smits’s criticisms
His theories will be deeply unpopular in certain quarters. He advocated organic foods, attacking the food industry as “only interested in making huge profits instead of providing healthy food to everybody”. He was highly critical of the current vaccination protocols and questioned their safety. He attacked the “false prophets of autism” and questioned current medical “wisdom” especially about vitamin C. Unfortunately, given that the book is aimed at parents rather than practitioners, the references are lacking.

Homeopathy has the answers
In 2007 there were around 500,000 children with half a million members directly affected by autism, according to the Office of National Statistics. Four times as many boys as girls suffer from this condition. With this rise in autism and behavioural problems in children, the social and economic implications of caring for these children are staggering. Tinus Smits believed that “Homoeopathy has the answers”. This book is a useful read for Faculty members and patients as it lays out the logic behind CEASE therapy. It is not a step-by-step guide but homeopathic practitioners should be able work these steps out by reading this book.

Marysia Kratimenos
MB BS FRCSI(Ed) FFHom
Homeopathy practice is a continual learning curve as I found out when I treated an elderly patient using A pis Mellifica. My patient was a 70 year old unmarried woman with no children. She came to see me as she had problems with her right ankle and a friend suggested she come for a consultation.

**Patient medical history**
This patient was very hard of hearing. Communication was difficult on our first meeting. She had been on bendrofluazide diuretics and the beta blocker atenolol for several years due to high blood pressure. Apart from these two problems she had enjoyed good health.

**Podiatric findings**
Injury to right medial side of ankle 20 years ago caused by a shopping trolley hitting her leg. This had left her with phlebitis and slight gravitational oedema. Pain increased during the day, presumably due to local fluid retention.

**Homoeopathic profile**
At the time of the first consultation, this lady was hard of hearing and the hearing aid that she had was either poorly set or malfunctioning. The deafness had only developed over recent years and she had poor lip-reading skills. The patient found communication a problem. Despite this she had a commanding presence. There was no shyness or reticence to speak of. It could be said that she liked attention. When I first met her, it was difficult to get accurate responses to questions, solely because of the hearing difficulties. For this reason, in the early stages of treatment, I decided to prescribe on local symptoms alone using Hamamelis. Later in the patient-practitioner relationship, I slowly gained effective knowledge to put together an oral and topical treatment programme that has been successful until now at reducing the pain in her right ankle. The ankle had been damaged 20 years before she came to see me, by being inadvertently rammed by someone’s shopping trolley as she was leaving the supermarket. She was treated at the time by her GP. The ankle had never fully recovered: long term damage had resulted in prominent varicose veins on the medial side. She told me that these became especially hot and swollen after walking. It was not until five months later that a more comprehensive homoeopathic picture emerged. Below follows a synopsis of our homoeopathic conversations when she decided to open up and tell me more about her problem following treatments I prescribed at various points.

**Homeopathic conversation**
The affected area was better for cold applications and she shunned hot ones. The patient appeared to enjoy consulting me, but was initially reticent about going into great detail about her problem. The ankle was worse for touch, she told me. As for the type of pain, it was sharp, stinging and burning. Personality wise, she had what can be best described as a Regal Queen Bee Persona. Her imperiousness was highlighted by a friend she dragged along in her wake when she attended the clinic. The pair of them somewhat resembled Dame Edna Everage and Madge. It was noted that she adored company and attention in an almost childlike fashion and was fussy and fidgety in her disposition. The patient tended to prefer being cold to being hot and did not have a great thirst. Her eyelids were noticeably puffy. All these rubrics led me to suspect that Apis Mellifica might be the simillimum indicated. In her early consultations local prescribing with Hamamelis was given. Later in the day, keynote prescribing with repertorisation was utilised, along with essence prescribing.

**Treatment: 13 November 2007**
Phlebitis and oedema noted medial right ankle. The oedema was not severe and I decided that the veins
were the main problem. Patient appeared to enjoy receiving attention but the level of communication between us was poor. When I applied pressure on the veins it made the ankle more painful although she seemed reluctant to admit it at this time. I opted to try Hamamelis 30c three times daily to try to clear congestion in the veins around the ankle and I told her to rub the ankle three times daily with cotton wool soaked with distilled witch hazel. I thought that combining the homeopathic remedy with the same herbal topical may hopefully assist.

16 November 2007 – progress
I was delighted to receive a phone call saying that there had been progress. She thought that the stinging and burning in her ankle may have improved. It surprised me that she managed to phone me and had no problem talking and listening. I found out later that the hearing aid had been fixed, just after she visited me!

5 February 2008
The woman came to see me for a follow up. The ankle had improved slightly but was still painful, especially as the day went on. Still reticent to discuss her problem, but said she felt comforted after dabbing it with a cool application of witch hazel.

2 April 2008
Her ankle had showed deterioration since the last visit. However, communication greatly improved today and a homeopathic picture finally emerged. The ankle was now continually burning and stinging. Apis Mellifica 30c prescribed orally three times daily. This was to be stopped, if and when, the symptoms started to improve. The remedy was chosen after considering the main rubrics and then referring to the Synthesis Repertory. I changed the topical to a cream of Calendula, Arnica, Hypericum and Bellis Perennis all at 5% mother tincture. To be applied three times daily.

23 December 2008
She had stopped taking the Apis Mellifica a few weeks back as there was no longer any pain. She was still using the cream and wanted to keep doing so.

13 January 2009
Since finishing taking the Apis Mellifica and using the combined topical cream, there has been a gradual but definite improvement. She is happy to continue using the cream indefinitely.

Discussion and appraisal
It is obviously difficult to say whether it was the homeopathy or the topical cream which helped this patient most, but to date she is much improved and symptom free. I had always thought of Apis Mellifica as an acute remedy for stings and sudden eruptions. This case indicates that it has a place in chronic conditions. Gibson in ‘Studies of Homoeopathic Remedies’ (1987), states that Apis Mellifica can be used for acute exacerbation’s of chronic conditions. It will clear up an acute outbreak but will not necessarily prevent its reoccurrence. For this reason it may be best to follow through with a deeper acting remedy such as Natrum Muraticum, Pulsatilla or Tuberculinum. He goes on to give a description of how best to do this. I am aware of this methodology, but as there has been no suggestion whatsoever of a reoccurrence, I have not felt that it was necessary yet to adopt this option. I hope that long term usage of the topical cream will be enough in itself to keep her pain free. This case also shows that with patience, a successful treatment plan can be arranged even for those who are poor communicators.

Conclusion
Homoeopathy practice is a continual learning curve. It is easy to hoodwink yourself into believing that certain remedies are only useful for acute conditions when in fact they may be the treatment of choice in more chronic cases. If there is any future reoccurrence of this patient’s problem, then I will consider a higher potency of the same remedy, or another methodology such as that advised by Gibson.

Colin I. H. Perry
Homeopathic Podiatrist and Clinical Director of the Mount Row Foot Clinic, Guernsey.
Lee Kayne
The 65th annual Congress of the Liga Medicorum Homoeopathica Internationalis (also known as LMHI or LIGA) was held May 18-22 at Redondo Beach in Southern California close to Los Angeles. Around 450 homeopathic practitioners from all over the world who were treated to a full programme of excellent lectures over four days attended it.

The opening keynote address “That Spirit-Like Force: Homeopathy and the Physics of Water”, delivered by Martin Chaplin, professor of Applied Science at London South Bank University was a fascinating insight into the physicochemical properties of water and how these might offer some explanations for the mechanisms of homeopathy. The closing keynote “Science and Homeopathy: A Critical Perspective” by Wayne Jonas ensured that delegates left with a positive view of the current evidence base for homeopathy.

Between the keynotes, a packed Congress programme included sessions covering the entire spectrum of homeopathic practice, with feature lectures delivered by world-renowned teachers including Frans Vermeulen and Linda Johnston, Peter Fisher, Iris Bell, Paul Herscu, Farokh Master, Frederik Schroyens, David Riley and Jonathan Shore. Equally as stimulating were the many parallel sessions, giving an insight into the ways that homeopathy is used by colleagues from different professional disciplines and in different countries. David Naude from South Africa gave a very interesting overview of the importance of the remedy source in provings, while Ronko Itamura shared her experiences of an integrated treatment approach combining homeopathy with Japanese Morita Therapy.

Running alongside the main LIGA Congress, the Academy of Veterinary Homeopathy also held its 13th Annual Conference, allowing human practitioners a rare opportunity to understand how homeopathy is also used so successfully by our veterinary colleagues. As part of this programme, Faculty members Sue Armstrong and Peter Gregory delivered a very popular lecture series over two days entitled “Remedies that Bite”. In addition to the vets, specialist sessions were held for Dentists and Pharmacists, with Faculty Pharmacy Dean, Lee Kayne also presenting in a main session.

In a Congress spanning four days of approx 35 sessions each day, it would of course be impossible to try to mention every speaker. However, Faculty Dean, Raymond Sevar should be particularly congratulated on his dynamic presentation of a case of congenital cardiac anomalies, even earning spontaneous applause and cheers from the audience when he revealed the case resolution!

As colleagues who have attended a Congress of this type will know, the time spent browsing the sponsors’ displays and socialising with fellow delegates can sometimes be just as valuable as the lectures themselves. LIGA 2010 was no exception. With many excellent local restaurants along the beach, there was no shortage of opportunities for networking!
Raymond Sevar
The Faculty was well represented at the 65th Liga Medicorum Homeopathica Internationalis congress, which coincided with the 200th anniversary of the publication of the first edition of Hahnemann’s Organon of Medicine. I as Dean alongside Sara Eames as President with Lee Kayne, Peter Fisher, Frederik Schroyens, Ronko Itamura, Sue Armstrong and Peter Gregory gave oral presentations, which were well received. All Faculty members are also members of LMHI (this is one of the privileges included in your annual Faculty membership fee) and I am the LMHI UK National Vice President, so if there are any homoeopathic issues that you wish drawn to Liga’s attention then please let me or Sara know – Sara has recently been appointed to the LMHI Council as publicity and communications secretary.

The venue and presentations were of the highest quality and I can only give a taste of the wide variety of topics covered. For me the highest peak was Linda Johnston and Frans Vermuelen’s presentation of the Malvaceae plant family (cacao, kola, cotton ... ). Linda presented a wonderful case of a lady cured with chocolate and Frans expounded the main themes of the family and highlighted usefulness of the new APG classification of plants. Linda Johnston and Frans Vermuelen have a 90 minute slot at out Congress in Cambridge in November – yet another reason to take advantage of the early bird offer and book your place now. The first two books of a four book series on plants by Frans and Linda will be launched at the Congress.

Another peak for me was the presentation of the Carbon remedies by Roger Morrison and Nancy Herrick – these remedies are becoming increasingly important, perhaps as a result of environmental pollution from carbon compounds. There was three hours on snakes from an Indian perspective with Sadhna Thakkar and Farokh Master, which was very well received.

The veterinary input was extensive and of the highest quality – nine hours of practical and in-depth clinical look at “remedies that bite” presented by Sue Armstrong and Peter Gregory. Lee Kayne shone in the pharmacy workshop presenting the preparation of LM/Q potencies, Frederik Shroyens’ infectious enthusiasm on breakthrough homeopathic software, Peter Fisher on biological models in homeopathy, Ronko Itamura again intrigued us with Morita therapy and homeopathy and there were actual cheers when I presented a case of an infant with severe cardiac failure who responded well to Lauroscerasus & Phytolacca.

The entire programme as well as many of the presentations may be downloaded from the Congress website at www.liga2010.org.

The 66th LMHI congress is in New Delhi, India in December 2011 and the 67th in Nara Japan in September 2012. More details may be found at www.liga2011.in and www.ipsh.jp/lmhi2012 respectively.
REPORT:

by Jane E Greenwood, Podiatrist

The 20th FIP World Congress of Podiatry took place at the RAI Convention Centre in Amsterdam from 13 to 15 May 2010. This event only takes place every three years. There were around 900 people at the Congress, including speakers, delegates and exhibitors, with representatives from around the 30 FIP member countries. These included Australia, Canada, South Africa, Iceland, and of course the UK.

Background
Back in January 2010 deliberation took place regarding whether I should or shouldn’t submit an abstract to this international congress. I’d not been before, but I was keen to go and believed that an abstract demonstrating the use of homeopathic podiatry would go down well with podiatrists that are familiar with the use of homeopathy in their own country, such as in South America. Hence, I was delighted to hear in February that the abstract had been accepted by the scientific committee. Then the hard work began.

The title of my abstract was ‘Case study: Treatment of a Recalcitrant Viral Wart Utilising Homeopathic Podiatry.’ I was later to find this was to go into the dermatology section of the poster presentation section, alongside others from Cyprus, India, Japan, USA, and Spain. I needed to find a sponsor for the poster, and Freeman’s Homeopathic Pharmacy kindly offered to fund the design and print. After many emails and telephone calls between the designer and me, I was finally off to Amsterdam, poster in hand.

Amsterdam
After registration and the poster being displayed a welcome reception took place, this gave time to network and meet other podiatrists from around the world.

The programme offered a delight of CPD opportunities, and the trade exhibition was varied.

Opening the formal session was an unusual all female percussion and dance group called ‘Women on Wood,’ which got the audience motivated to learn with the interactive rendition of ‘We will rock you.’ I personally found the interactive sessions of ‘Measuring the Ankle-Brachial-Index’, ‘Is the Skin a Podiatric Mirror’, and ‘Live Foot Clinic – The Rheumatic Foot’ all contained very useful information ready to take away and put into practice. Notable oral sessions were ‘Marigold therapy and homeopathic podiatry – evidence based podiatry’, and ‘Biomechanics within podiatric practice’.

The poster I had taken generated quite a bit of intrigue and interest, and all the flyers I had taken to give away went very quickly. The Cypriot delegates were keen to find out more about training. The Peruvian delegates were openly elated to hear of homeopathy being utilised within podiatry. Even the sceptics seemed to be open to debate homeopathy, even if they did think it was down to the placebo effect.

Summary
All in all this congress was a worthwhile experience. I’m really pleased I forced myself to go out of my comfort zone. By my presence I was able to stimulate debate and evoke interest in homeopathy and the courses available to train in homeopathy. Through contributing to the congress I felt positive about being able to give something back, and would thoroughly recommend readers to try the same.
The Rosaceae family of plants is traditionally divided into four subfamilies: the Rosoideae, Spiraeoideae, Maloideae and Amygdaloideae, the subfamily being diagnosed by the structure of the fruits. There are at least 3,000 species in the Rosaceae family which are found all over the world. These can be herbs, shrubs or trees. There are common constitutional symptoms associated with these remedies such as a feeling of pressure or pinching; and of suffocation and shortness of breath. Impulsive movements occur, with a desire to travel. Patients are often better in the open air. Dr Charlotte Mendes da Costa looked at the following four homeopathic medicines in some detail. What follows is a brief synopsis of the important points in Dr Mendes da Costa’s informative and very useful presentation.

**Crataceus**
This homeopathic medicine, also known as hawthorn, is a thorny shrub producing edible haws and is native to many European countries. It is known as a cardiac ‘tonic’ and studies have shown increased exercise tolerance in patients with heart failure with a lowering of blood pressure and heart rate. It acts as a sedative in cross, irritable patients with cardiac symptoms. The skin may be cold with blue fingers and toes. Patients are worse for exertion and in a warm room and are better for fresh air.

Members of the group had experience and success using Crataegus in both 3X potency and mother tincture and it was agreed that in patients already taking antihypertensives or heart failure drugs the 3X potency was preferable and safer to avoid sudden drops in blood pressure.

**Laurocerasus**
The common cherry laurel is an evergreen shrub growing widely in the northern hemisphere, originating in Asia and used commonly for hedging. The leaves and seeds are very toxic. Patients needing the remedy show symptoms of sudden debility with a pale blue face, cold limbs, twitching, gasping for air. A strange, rare and peculiar symptom is ‘a sensation of drinking rolling audibly through the oesophagus and intestines.’ Also, a ‘bursting’ pain in the liver. The most important symptoms are respiratory and cardiac, with suffocative spells, felt in the heart area, which are better for lying down. The cough is tickly and dry. In discussion members of the group reported effective treatment using low potency Laurocerasus enabling cardiac patients to travel to work where they had sedentary jobs that they coped with well.

**Prunus Spinosa**
The Blackthorn or Sloe is a deciduous large shrub or tree with stiff spiny branches. The fruit, called a sloe, has an astringent flavour and is used as a flavouring e.g. in gin. The materia medica notes that Prunus symptoms involve the nervous symptom with neuralgias especially around the head with shooting pains through the eye into the back of the head. The urinary organs may also be affected with difficulty in passing urine. Patients are often restless and feel in a hurry. There is a feeling of oppression in the chest particularly on the right side, better for bending double, with wheeze and they may have palpitations. Clinically it was mentioned as being very useful in a low potency or even in the mother tincture following a severe respiratory infection to help clear up these residual symptoms.

**Amyydala Amara**
The bitter almond contains significant quantities of a chemical that causes convulsions and loss of consciousness as in an epileptic fit. The pulse is slow. This remedy has been used in recurrent epilepsy with some success when conventional medication did not entirely stop the fits.

**Alternative remedies**
As most of the homeopathic remedies in the Rosaceae family are of use in circulatory and respiratory system disorders other medicines used for such conditions may also be considered. These include Arsenicum Album, Antimonium Tartaricum, Carbo Vegetabilis, Lachesis, Lycopus, Naja and Spartium.
The good news is that despite the critics’ stance and their orchestrated campaigns to cease NHS funding of homeopathy, some media are aware of this threat due to the Faculty’s promotions activity and have a result have done their best to produce reports that are balanced and fair.

- The Independent published an article prior to the BMA conference that included a Faculty case study about Helen Llewelyn who said she found homeopathic treatment at the Royal London Homeopathic Hospital helped her with chronic physical pain and depression as a result of endometriosis.

- GMTV featured Helen Llewelyn who did a great job talking about her case, and a recorded interview with Faculty member Brian Kaplan. Appearing ‘on a couch’ following Brian and Helen were Dr Hilary Jones and Carole Caplin.

- BBC Southeast Today featured interviews with Sara Eames and several patients, as well as the protest.

- Brighton Argus produced a good picture of the protest along with a fairly balanced report.

- Scotland on Sunday featured a case study of a student who recovered from chronic fatigue syndrome after treatment at a NHS funded homeopathic hospital in Glasgow.

- In the Telegraph James Le Fanu suggested that the campaign against homeopathy might be a tactic employed to divert attention from why the NHS drugs budget has tripled in the past few years to little effect.

- The Wright Show featured actress and MasterChef Nadia Sawalha endorsing homeopathy.

Recruiting for a Deputy Dean

The Faculty is looking for a Deputy Dean to do focused work on course-based assessment and work alongside the current Dean, Raymond Sevar.

The appointment will be for 2 days a week.

If you would be interested in the post and would like further details, contact Cristal: csumer@facultyofhomeopathy.org

Applications should be received by 31 August, 2010.

Media round-up
Regular meetings

**Leeds Homeopathic Group**
Regular meetings in Morley, Leeds.
- Pauline Price on 0113 252 8849 or at paulineprice@btinternet.com

**W Surrey & W Sussex Homeopathic Group**
Meetings on the third Tuesday of each month, 8.00-10.00pm. Group members include doctors, vets, dentists and pharmacists. The aim of the group is to act as a forum for ongoing learning and support, covering all aspects of homeopathy and medical practice.
The Punch Bowl, Oakwood Hill, nr Ockley, Surrey RH5 5PU
- Charles Forsyth on 01737 226338 (office), 01737 248605 (home), 07802 293006 (mobile) or charles@dr-forsyth.com

**Wednesday 28 July**
**London Homeopathic Group**
6.30pm
Chelsea Physic garden tour • £8.00
- Anita Davies at anita.e.davies@btconnect.com or Rosie Coles on 020 793 54271

**Wednesday 15 September**
**Wessex Homeopathic Group**
Postgraduate Education Centre
Royal Hampshire County Hospital
7.30-9.30pm
- Dr Jonathan Hardy 02392 471757
drjonathanhardy@havant-homeopathic.co.uk

**Wednesday 22 September**
**Brighton and Hove Group**
Meeting at Moira Houston’s House
8pm
- Phone 07930 563796

**Saturday 30 October**
**BHDA Symposium**
Biological Dentistry for the 21st century
Birmingham Medical Institute,
36 Harborne Road,
Edgbaston,
Birmingham, B15 3AF
- Brian Teall on 01675 481535 or at brianteall@talktalk.net

**Thursday 11 to Sunday 14 November**
**British Homeopathic Congress 2010**
De Vere University Arms
Cambridge
- For more information download a Congress brochure
- Keren Sall at ksall@facultyofhomeopathy.org

What’s on the website

**www.facultyofhomeopathy.org**

Members’ area

The members’ area of the Faculty website is available to LFHoms and above and is fully secure. You will need your username and password to login – for a login reminder email: info@facultyofhomeopathy.org

- **search for other members**
  find members close to you by searching on postcode, profession, town/city or country.

- **take part in the discussion forum**
  ask questions and chat with your colleagues online.

- **download policy statements**
  to find out the Faculty’s position on important topics.

- **view local group information**
  to see what’s going on in your area and find contact details.

- **sign up for e-news**
  through the update page in your account.

- **promote your practice to the public**
  tick the box on the update page in your account.
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