Centre for Integrative Medical Training
In Association with the Centre for Integrative Care &
The Academic Department, Royal London Hospital for Integrated Medicine



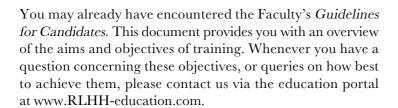
Foundation Course in Medical Homeopathy

A Modular Course in Homeopathic Medicine for Healthcare Professionals

Part 1a

Unit 1 Explained

Welcome to Unit 1 of the Scottish Modular Course in Homeopathic Medicine. This course has been created from a teaching curriculum first developed for the Academic Departments of The Royal London Homeopathic Hospital and accredited by the Faculty of Homeopathy. The content of our course includes the main theoretical content that students will need in order to sit the *Primary Health Care Certificate Examination* of the Faculty. Integrating theory and practice will be something that you do gradually in your own clinical setting with our guidance and support.



In this first unit of the course we will introduce some of the central ideas in homeopathy: including the *Principle of Similars*; the sources for homeopathic remedies, and a description of how they are prepared. You will also learn about the use of potentised allergens in the treatment of allergy (Isopathy) We will introduce you to some practical aspects of homeopathic treatment, using documented case studies. In the final section of this unit, we will familiarise you with the basic prescribing indications for some homeopathic medicines, beginning with four remedies associated with pain.

Unit 1 covers a wide spectrum of new ideas and we encourage you to read round the topics presented in the workbooks, since this will help you establish the information in your mind. We will provide you with suggested reading as we progress and a full reading list of available books is provided in your course guide.

Your tutors will cover the core information and provide clinical examples. These examples may be different to the ones provided in these support texts. Take time to review the taught content and the illustrative case studies provided. Parallel reading between course days will help you become familiar with a range of contextual models for illness and allow you to consider a range of ideas on how these can be applied in practice.



Remember to keep your training portfolio up to date with details of the reading you have done and any meetings seminars and study groups that you have attended. If you mainly studying on-line with us, your portfolio should be maintained via the portal at www.rlhh-education.com

At Foundation Level your log book, or online portfolio, is there to help orientate you through your studies and help you check your progress.

Later on, if you decide to take your training further, your training log will be reviewed in by your tutors, and as you approach the end of your training its contents will be available to the Director of Studies so that he/she can help advise whether you are ready to sit the clinical examination towards Membership of the Faculty of Homeopathy.

We hope you enjoy your studies with us and we look forward to meeting you and working with you.

Unit 1

Objectives

By the end of Unit 1 you should:

- understand the basic principles of homeopathy
- have some knowledge of the history of homeopathic medicine
- have some awareness of the practical applications of homeopathy
- understand the Principle of Similars
- know something about the sources of homeopathic medicines
- understand the terms 'mother tincture' and 'trituration'
- have a concept of what potentisation is
- know what is meant by Isopathy
- know something about the clinical indications for Isopathy
- have an outline knowledge of four homeopathic remedies:

Arnica montana, Cuprum metallicum, Cantharis, and Arsenicum album

and know how to differentiate between them

understand the terms Tautopathy and Homotoxicity

Core Theory Introduced in The Foundation Course

Re-evaluating Our Treatment Paradigm

We all want our patients to get better and we know living things have evolved to self-heal. When people are ill, however, (and especially when they remain ill) there is usually a network of contributory causes. When faced with these complex and subtle 'obstacles to cure' conventional medicine often resorts to symptom management, in the hope that the organism will heal anyway.

Is there another way? For example, an approach to treatment which helps the organism to 'switch on' or optimise its healing response?

We hope that by the end of this course we will have demonstrated that treatments based on *The Principle of Similars* can achieve just that.

In order to use homeopathy successfully, however, you will need to learn how to understand the particular triggers and responses which prevail in each individual case. To achieve this will require a different approach to case-taking than the one you are used to. We will look at the homeopathic ananmesis (case history) in the second module of the course.

You will already be aware of many of the biological factors that generate symptoms:

For example:

- exaggerated or impaired defence mechanisms
- · overactive or underactive homeostasis
- pathological tissue changes or organ damage
- the effects of toxicity or infection
- · disturbances of auto-regulation and feedback
- · disturbances of self recognition (physical, cognitive or emotional)
- environmental stressors



Overview of Supporting Concepts

Our orthodox experience tells us that many illnesses are maintained by a combination of those factors that we have listed above. As practitioners trained to use homeopathy, our role will be to apply a complex medicine, which stimulates the patient to adjust their response. Allowing them to 'switch off' chaotic mechanisms and 'switch on' processes that resolve or overcome the causes for their illness.

Contextualising

Holism in health-care is defined by a search for the functional contexts in which living systems become sick.

We investigate these phenomenologically to begin with, by looking at each patient's clinical signs and symptoms in their widest possible context.

This systems-survey usually involves a narrative approach to the case history, so that we can see how problems have evolved over time (*Pathography*). The case history is unique for each patient and we carefully record contextualised information for all the patient's symptoms and problems.

The Search for Maintaining Causes

Contextualised information of this kind can, of course, be diagnostic in itself. However, for the homeopathic prescriber, each patient's unique symptomatology also provides a dynamic picture of their *current state* as well as providing vital clues about internal and external factors that might prevent the patient from recovering spontaneously.

Once we have recognised potential *obstacles to cure*, we use the patient's *symptom-picture* to identify an appropriate stimulus and apply this as safely and naturally as possible.

Successful prescribing in homeopathy depends on:

- (1) finding the *Similimum* (a material which most accurately reflects the disturbance in the patient), and
- (2) resolving causes for illness and developing the ability to predict and interpret the outcomes of treatment.

We will illustrate the process of information-gathering analysis and treatment with case examples throughout your course. If you require clarification on any aspect of the assessment and treatment process, for any of the case studies provided, please speak to your Tutor or Course Director.

Interpreting Each Response to Treatment

Later in the course you will be introduced to the various reaction patterns, which can occur after homoeopathic prescribing. You will also be taught how to interpret different remedy reactions and understand their implications for ongoing case management.

The authors of this course are aware that our readers will be working in a wide range of different clinical settings. To begin with, we have included case studies and prescribing information for common conditions that present frequently in general medical practice.

The Scope of Treatment

In these introductory units we will focus mainly on acute prescribing. Chronic illness very often involves sequential prescribing, usually on the basis of highly individualised models for disease. Chronic prescribing is outside the scope of this foundation course, but will be explored at much greater depth in the Intermediate Course.

We will, however, introduce you to some of the clinical decision support tools which will serve you well as your studies progress.

We hope you will quickly appreciate the main differences between homeopathic methodology, and those treatments based on conventional drugs.

Homeopathic Pharmacy

One of the key learning objectives for Unit 1 is the understanding of how homeopathic remedies are prepared. At the end of the module you will be able to compare and contrast homeopathic pharmacy with other disciplines which use medications, including conventional pharmacology and herbal medicine.



Science

There are many questions in homeopathic medicine raised by current models in basic science. Many fundamental questions remain unanswered at the present time. However, new developments in research technology and experiemental design are constantly being applied to homeopathic medicines and their clinical effects.

We will allude to some of the basic research conducted so far throughout the Foundation Course and we will also summarise the clinical evidence base for homeopathy.

Research Literature

The literature is too extensive to present fully in these course materials. We will, however, provide references and pointers to the published literature, and we hope you will seek out further reading on the topics that interest you.

We hope that you get enjoyment and fulfilment from this course. Please provide us with feedback, using the paperwork provided with the units and course guide.

Some Pointers to Learning

Most medical education stresses factual knowledge and technical skill. In this respect, learning homeopathy is no different. You require to have a sound basic knowledge of your medicines (*materia medica*) and develop skill and facility with your prescribing tool (the *Repertory*).

A range of Opinions and Experience

The techniques required for learning about the homeopathic materia medica may be different from the methods you have used before.

Different authors sometimes use quite different approaches, even when they are discussing the same medicine.

One writer may concentrate on the toxicology of the material, another may stress its organ affinities or headline clinical applications. Others may concentrate on the indicating features that he/she has found useful in practice.

Some writers prefer to present a unifying theme, or 'essence', to help you remember the material more easily and recognise its indications in practice.



Therapeutic methodology

Unlike the standardised dosage regimen for most pharmacological drugs, the individualised nature of homeopathic prescribing generally involves more flexibilityparticularly in decisions concerning *potency choice* and frequency of dosage.

There are established guidelines however, which mainly depend on the patient's particular situation, but which might also depend on the co-existence of conventional drugs within their treatment regime.

Some treatment choices are also down to the clinical experience of the prescriber. It is a fundamental right of a clinical professional to exercise judgement and customise their approach to the individual needs and circumstances of each patient.

If you are used to working within strict clinical guidelines, this can feel a bit like 'skiing off-piste' to begin with, but ultimately it informs a flexible, person-centred and sympathetic approach to patients' needs. The search for tailor-made treatments will gradually become a way of life, enhancing your interest in people and medicine over the years.

One of the aims of this course is to help you make sense of the diversity of opinions and styles that exist in homeopathic practice.

From time to time, these units will present quite contrasting methodologies. We feel that it is important to have an awareness of the treatment styles currently in wide use around the world.

In your own work, you will gradually gravitate towards methods you find most appropriate to your own clinical setting and, over time, you will evolve you own unique style, bourne out of experience.

Medicines that are dispensed to work homeopathically are usually called **remedies**, to distinguish them from biochemical drugs.

Some examples of homeopathy in clinical practice

Before we start to explore the main principles of homeopathy let us have a look at some examples of homeopathy in clinical practice. The brief statements that follow, have been included here to give you a sense of the scope for homeopathic treatment.

Activity 1.A



Follow the links provided in the text below. As you watch and read through the following transcripts, think about how the patients presented might be treated in conventional medical practice.

We hope that these short extracts will help you to appreciate just how wide the clinical potential for this branch of medicine is. At this stage of your learning, you will not be expected to apply homeopathy in this range of conditions yourself, merely to understand the scope for homeopathy later on.

Dermatology

Case 1: Atopic Eczema

http://youtu.be/1mING6O3Qvc

Mother: Look at that ... that is just wonderful... His skin before was all raw and I sometimes had to bandage him during the day as well as at night...especially in April [and] May. June was quite a bad month too. It did start to get better - that was towards the end of the last course, you gave him, and before the beginning of this course. And it has continued good, it has continued very good. (8 week review)

(Treatment: member of the Kali group)

Case 2: Severe Acne

http://youtu.be/7-RQPFXV6ww

Doctor: I saw you on the fifth of December. How have you been getting on?

Patient: There has been a marked improvement.

Doctor: The cysts have been resolving? Which areas mainly?

Patient: Mainly my face. There are still some on my back. My chest is pretty clear. (6 week review)

(*Treatment*: member of the Iodum group)

Case 3: Acne, Amenorrhoea for past 5 months

(First review - at five weeks) http://youtu.be/YZbs4_-a3j4 **Patient:** Things are as they were when I wrote to you. It was just bizarre. The same night that I took the first of your powders....At 1.30am, I went to the bathroom....[my] period [had started]. That was very odd. That was early January..... I would say that my skin is as good as it has ever been since I started having spots...which is about seven years ago... no longer than that, eight even...

(*Treatment*: member of the Natrum group)

Inflammatory Arthrides

Case 4: Rheumatoid arthritis

http://youtu.be/nVKJ1zIWgC0 (First review)

Doctor: Hello, how are things?

Patient: Well, I have noticed a marked improvement in the last fortnight...it was really quite sudden. I noticed that my hands weren't so swollen. I have no pain in my neck and shoulders whatever....and that is unheard of in me, because I am usually in agony in the mornings. And my elbows aren't so swollen, they are still a bit painful. My knees are still a bit painful...but nothing like as painful as they have been. And I haven't had any painkillers for two weeks. I did without the painkillers after I last saw you......

(Treatment: member of the Natrum group.)

Gastroenterology

Case 5: Ulcerative Colitis

http://youtu.be/C-BXb-0NDok

Patient: You gave me one lot of treatment, then you gave me another lot of treatment. And the bleeding stopped.....the mucus stopped, and the frequency of the bowels went right down to about four times a day.

[Previously at stool 1-2 hourly]

(Treatment: homeopathic plant material)

Pain Syndromes

Case 6: Trigeminal Neuralgia

http://youtu.be/9qeHXgxwkhA

Doctor: It was 28th June I saw you last. How are you getting on just now?

Patient: I just had one sore face... the pains I described last time... the day after I took the three different sachets. And I have never had one since. (Previously daily attacks)

(Treatment: homeopathic plant preparation)

ENT Conditions

Case 7: Perennial rhinitis and chronic recurrent sinusitis

http://youtu.be/ZsBEbgiaDK4

My sinuses are really fantastic. I mean my nose is not bleeding now...you know how I was having bleeding in one nostril. I can honestly say it had been really awful.

(Long-standing catarrh and post-nasal drip also cleared)

(Treatment: member of Kali group)

Auto-Immune Conditions

Case 8: SLE

http://youtu.be/56-2tCjuNLU

Patient: I have a list of things that I can tell you have changed, since I have had them. For a start the angioedema is much less troublesome.

Before I was on homeopathic treatment nearly every day I had unsightly swelling somewhere - whether it was in my hands...my face...my eyes...my mouth...I haven't had that problem. I have been able to go to College every day.

Secondly, the skin has improved a lot more as well. My legs always used to be nearly always covered with purple and red blotches, which are just not as bad now.

The joint pain is a lot less troublesome...for a start I can get up every morning...and I couldn't do that before. Even if I have got a bit of joint pain, I can go out, and I don't have trouble getting out of bed or anything.

And at bedtime I don't need painkillers every single night. I used not to be able to go to bed without them. Although I did need painkillers last night and the night before, I think.

I have had more energy in general than before. I've not been as depressed. I used to get severe sore throats.

I haven't had that very much [recently] And I have not had such bad swelling in the hands and feet, which used to be troublesome.

(Treatment: homeopathic insect toxin)

Post-Infective States

Case 9: Chronic Fatigue

http://youtu.be/JyFvVizbArk

Doctor: Was your fatigue more physical or mental, do you think?

Patient: More physical.....

...I cannot believe how that first remedy, was like... like sparks in the head that night... it was brilliant...Then that last one... I thought nothing has happened, but I just knew it was right the next morning.....

(Treatment: homeopathic plant material)

Genito-Urinary Conditions

Case 10: Chronic Prostatitis and Sexual Dysfunction

(6 week review) http://youtu.be/H3OE3OJBqy8

Patient: I would say there has been a general improvement all round. First of all regarding my waterworks...I feel my whole waterworks and prostate system is better than it was. Sometimes I don't even need to go [to pass urine] during the night at all. I feel it has got to the stage it was nearly five years ago, when it wasn't a serious bother. I just didn't even think about it [then]. And it has improved on a month ago even...

On the sex-drive side, that has also improved. That is radically different to what it was three months ago, when it was just non-existent...and it had been going that way for about two years I would say...gradually getting worse and worse. I would say now that [sexually, I am] back to where I was, maybe about five years ago. It is as normal as I would have envisaged it.

(Treatment: homeopathic plant remedy)

Cardiovascular Conditions

Case 11:

Mitral valve disease, myocardial hypertrophy, arrhythmias, peripheral oedema, ischaemic chest pain (This patient has refused the cardiac drugs suggested by a cardiologist)

http://youtu.be/QDtELs1-SpM

First review appointment

Patient: I feel a lot better doctor, than when I saw you the last time.

Doctor: Have you been away?

Patient: I spent three weeks in Canada, I came home on Sunday...

Doctor: Did the powder do anything for you last time? You got a powder and some tablets?

Patient: Yes, you gave me extra because I was going on holiday. They helped me greatly, The palpitations have stopped. You know how I was telling you that [I felt] as though my heart was beating like a hammer, there. Well

I've not had that. I am feeling an awful lot better, doctor. Four months ago today, I could hardly get up those stairs. It took me an hour from the pavement to get up here. Today I got up without stopping - is that not marvellous?

(Treatment: homeopathic plant remedies)

Respiratory Medicine

Case 12: Emphysema, Depression

http://youtu.be/IFEGdjkD3q0

Patient: I don't know what happened. The powders really did well. It is great to breathe into my lungs, I will tell you that much... I can breathe into my lungs - I wasn't really getting a breath [before].

Doctor: So the breathing improved after the last remedy.

Patient: Oh yes, tremendously.

(*Treatment:* Homeopathic mineral remedy)

Discussion

These are, of course, anecdotes that have been selected from consultation video. They are not presented as proof that homeopathy works (we will examine the evidence for that in Section 2.3).

These statements are included here merely to provide some indication of the range of conditions amenable to homeopathic treatment.

Further Reading

We would suggest that you now read: Chapter 3, What does Homoeopathy Offer?: Introduction to Homoeopathic Medicine by Dr H W Boyd, which is one of the recommended companion text books for this section of the course.

Case examples are an excellent way of examining an idea in the light of 'real world experience'. Most of those who are sceptical of homeopathic medicine, have no direct clinical experience of the subject and reject it due to prejudice of a purely theoretical nature.

Basic Principles - An Overview

Derivation

The word 'homeopathy' is derived from the Greek words homoios meaning like or similar, and pathos meaning suffering.

What is Homeopathy?

Homeopathy is a branch of therapeutics in which the ill person is exposed to something that stimulates healing. The stimulus is selected to 'mirror' the illness state. It is derived from a substance that would (under other circumstances) cause the same symptoms and reactions as the illness that it is being used to treat.

Sometimes organisms do not self-heal after shock, injury or infection - even though, objectively, all the mechanisms for healing are intact. This is because the integration of these mechanisms has been disrupted and they are not coordinated in time or space. Although living systems are self-equilibrating they can be pushed into chaotic dysfunction by shock, injury, drugs, infection and a number of other stressors.

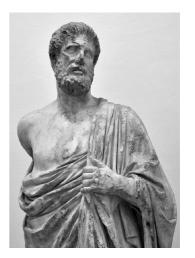
In these stressed states the organism becomes extremely sensitive to any stimulus which 'mirrors' their functional disturbance. Such stimuli can re-establish or normalise homeostatis within the system as a whole, effectively unblocking the organism's natural healing response.

In order to understand the difference between a homeopathic and non-homeopathic approach to treatment, it is important to make a distinction between *systems* and *mechanisms*. We will discuss this distinction in some detail later in the course.

What are the special features of homeopathy?

Effective homeopathic treatment is critically dependent on two things:

- the use of the correct homeopathic medicine
 - and
- · the timing of its administration.



The strength and frequency of dosage (posology) are also important. The strength of the stimulus in homeopathy is not related to the physical dose of the active substance, but is related to the potency (roughly analogous to 'signal strength') we will discuss what we mean by potency at some length in the homeopathic pharmacy section of this Unit.

Selection of medicine

When we select a homeopathic remedy we consider:

- the individual signs and symptoms in that particular patient
- the specific context in which theses symptoms have arisen
- the remedy which most accurately reflects the particular dynamics in that patient's current state (explained later)

Posology:

ie potency, quantity, frequency of dosage

Because homeopathy facilitates self-healing - using a very 'state-specific' treatment - the rules of treatment are not the same as those that are applied in pharmacology. Pharmacology is dominated by the concepts of agonistic and antagonistic action ('lock and key' models)

Drugs exploit the functional features of organic compounds that have key roles in human biochemistry. Synthetic analogues of these compounds are used to either (1) block receptors and enzymes, or (2) to augment their activity. (In modern pharmacology, there are also new classes of drugs which modulate systems, particularly in relation to immunochemistry.) Nevertheless, all the treatment models in pharmacology are essentially materialistic and manipulatory in their conception.

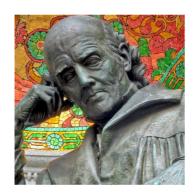
The treatment models for pharmaceuticals must be contrasted with homeopathy - which is entirely facilitatory in its approach. In terms of homeopathic dosage and frequency, the basic rule in homeopathy is (1) to use the minimum force required to initiate the desired changes and (2) to give the organism every opportunity to resolve its own 'systems-disturbances'. (Which means that we do not intervene with further treatment, while the patient's signs and symptoms indicate that they are improving.)

Remedy Selection

Around two hundred years ago, the German physician, Samuel Hahnemann, wrote the following:

'The totality of symptoms and circumstances observed in each individual case, is the one and only indication that can guide us to the choice of the remedy.'

Hahnemann (1755 - 1843) *Organon*, 6th ed, Para 18, Trans Kunzli, Naude and Pendleton



Contextualised Treatment

Hahnemann's aphorism raises the question of what we understand by the 'totality of symptoms'. The first thing to recognise, is that every response in a living organism has a context. Contexts include: specific trigger events, particular genetic predispositions and other complex factors which we do not yet fully understand, including the influence of 'memory' ie. information previously 'coded' into the system (psychological memory, immune memory and genetic memory, for example)

Individualisation

Because the context for a condition is never exactly the same in any two people, it is obvious that no two individuals ever respond in an identical way to a trigger event. Every individual shows idiosyncrasies in their response. These idiosyncrasies also indicate how each individual adapts differently to disturbances in their equilibrium.

The pain of an inflamed joint might be improved by hot compresses in one patient and cold applications in another. This shows us that there are idiosyncrasies in the physiology of their inflammatory states.

Even if these two patients have the same diagnosis, they still require entirely different homeopathic remedies: ie materials that properly mirror the different dynamic states in these two individual patients.

In order to identify the different homeopathic requirements of different patients, we need to pay special attention to each person's unique array of symptoms and reactions.

Dr Weissner speaks about what 'treating the whole person' means to her: http://youtu.be/qBKyB9sZzjI)

Integrating Homeopathy Into Medicine

It is important to remember that we are health care professionals, first and foremost, and continue to identify, as far as is possible, the:

- diagnosis
- · illness aetiology
- patient's compensations and adaptations to illness
- · likely prognosis
- patient's perception and understanding of their condition

In the process of broadening your treatment skills, you must never abandon your diagnostic skills. Accurate diagnosis saves lives and prevents suffering. However the diagnostic label can also be part of a holistic synthesis that provides the basis for homeopathic healing. Integration: http://youtu.be/xiPXK6uSWkA

Refined Patient Information

In Unit 2 we will look carefully at special modifications to our accustomed history taking. These modifications will help us to identify well-indicated homeopathic treatments. In addition to the systematic medical history that we are already familiar with, the following information is gathered to the highest level of precision and detail:

- details of personality and intellect mind symptoms
- systemic reactions generals (defined later)
- organic symptoms particulars (defined later)
- modalities (changes in signs or symptoms in response to environmental factors such as time, weather, food, etc.)
- individualising information of all kinds: including the particular chronology of the disease
- the triggers, treatments, environments and circumstances which have influenced the evolution of the illness.



The Influence of Environment and Lifestyle

'Disease engendered by prolonged exposure to avoidable noxious influences will include diseases brought about by: harmful food and drink; unhealthy places, especially swampy regions; dwelling only in cellars, damp work places; physical or mental overexertion; continuing emotional stress.'



Hahnemann (1755-1843) Organon,6th Ed, Para 77, Trans Kunzli

To the modern reader Hannemann's turn of phrase may seem quaint, but he was revolutionary in his awareness of environmental factors in health and disease:

This awareness of environment as a factor in illness, was revolutionary in Hahnemann's time and remains relevant to our strategies for healing to this day.

'Disease Management' versus the 'Facilitation of Change'

It is worth reflecting on how frequently conventional drugs are used to control symptoms in medicine today - often with no attempt to address either the causes for the condition under treatment, or the lifestyle factors which are maintaining it.

As a homeopathic practitioner it is important to make a distinction between 'disease management' (principally using pharmaceuticals that control symptoms) and the homeopathic quest for 'disease resolution' using stimuli that address the maintaining causes for the condition.

Activity 2.A



ACTIVITY: now follow the introductory lecture which is provided on DVD2. Or by following the online link to http://youtu.be/cJfUy2VStXw

Further reading:



Now read about the history and background to homeopathy in your companion reader, before checking your understanding of this section with the questions below.

SAQ 1.1 Self Assessment Questions



Try to answer the following questions.

If you are unclear on any of the points below, please refer to the previous section and read the relevant passages of the text, before progressing to the next section. If you are using the online study log at www.RLHH-education.com, please log in and complete the SAQ online.

- 1. What is the derivation of the word homeopathy?
- 2. What was the name of the physician who elucidated the main principles for this branch of medicine?
- 3. What did he say was the main prerequisite for the selection of a homeopathic remedy?
- 4. What factors are important for a successful response to a homeopathic stimulus?
- 5. Does every patient with the same diagnosis receive the same homeopathic treatment? Explain.
- 6. What is the main difference in the treatment models for pharmacological versus homeopathic medicines?
- 7. Should a homeopathic doctor think diagnostically? If so, why?
- 8. What kind of information is emphasised in the history taking process, for patients who require homeopathic treatment?

This concludes section 1.1

Take a break and progress to section 1.2 when you are ready.

Contents

| Unit 1 Explained 1 | | | | | |
|--|--|--|--|--|--|
| Objectives 3 | | | | | |
| Core Theory Introduced in The Foundation Course | | | | | |
| Re-evaluating Our Treatment Paradigm 4 | | | | | |
| Overview of Supporting Concepts 5 | | | | | |
| Contextualising 5 | | | | | |
| The Search for Maintaining Causes 5 | | | | | |
| Interpreting Each Response to Treatment 6 | | | | | |
| The Scope of Treatment 6 | | | | | |
| Homeopathic Pharmacy 6 | | | | | |
| Science 7 | | | | | |
| Research Literature 7 | | | | | |
| Some Pointers to Learning 7 | | | | | |
| A range of Opinions and Experience 7 | | | | | |
| Therapeutic methodology 8 | | | | | |
| Some examples of homeopathy in clinical practice 9 | | | | | |
| Discussion 15 | | | | | |
| Basic Principles - An Overview 16 | | | | | |
| Derivation 16 | | | | | |
| What is Homeopathy? 16 | | | | | |
| What are the special features of homeopathy? 16 | | | | | |
| Selection of medicine 17 | | | | | |
| Posology: 17 | | | | | |
| ie potency, quantity, frequency of dosage 17 | | | | | |
| Remedy Selection 18 | | | | | |
| Contextualised Treatment 18 | | | | | |
| Individualisation 18 | | | | | |
| Integrating Homeopathy Into Medicine 19 | | | | | |
| Refined Patient Information 19 | | | | | |
| The Influence of Environment & Lifestyle 20 | | | | | |
| Disease Management' versus the 20 | | | | | |
| Facilitation of Change' 20 | | | | | |
| Further reading: 21 | | | | | |

Credits: Unit 1

Author: Russell Malcolm

Educational Advisor: Stuart Campbell

Proofing: David Spence, David Williams