

Adapted from the Modular Courses of The Royal London Homeopathic Hospital NHS Trust  
Academic Departments of Research and Education  
Edited, Augmented and Illustrated 2022, Centre for Integrative Medical Training



# Pre-membership Course in Medical Homeopathy

A Blended Open-Learning Course in Homeopathic Medicine for Healthcare Professionals

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**Semester 1**  
Course Guide



Welcome to the First Semester of the Pre-Membership Course. This document aims to provide an overview and timetable to help you organise your studies this term.



In keeping with your previous Intermediate programme, this semester will take place over 12 weeks (ie 3 'months' with four units per month). Semester 1 covers units 45-56

This course is made up of four study domains, which run concurrently throughout the semester:

1. MATERIA MEDICA STUDIES (See below)
2. THERAPEUTICS (See page 4)
3. CLINICAL STUDIES (See Column 3 overleaf)
4. PRINCIPLES & PRACTICE (See Page 6)

A Course Overview is provided in Table 1 Overleaf.

**Materia medica studies** fall into three sections:

### 1. Animal Group Remedies

You will be provided with 2 study packs:

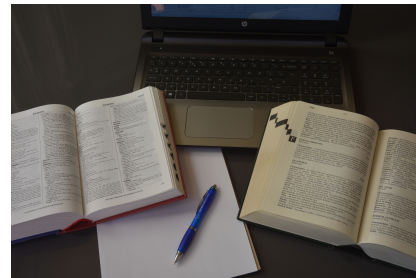
- Serpent remedies (Weeks 1-6)
- Sea remedies (Weeks 6-12)

### 2. Plant Group Remedies

The study of plant remedies this semester is covered in the weekly group work.

The study timetable for the Plant Group Remedies is provided in Table 2 on page 3.

In weeks 1-6 both tutorial groups will be studying different plant remedies from the same family. Thereafter the two groups will study remedies from different plant families. A study template will be provided in the course materials.



See group study timetable on Page 3

### 3. Nosodes & Sarcodes

There will be taught sessions / presentations on Folliculinum, Medorrhinum and Carcininum

The learning objectives for the **THERAPEUTICS** content is summarised on page 5.

**PRINCIPLES & PRACTICE** is covered this semester in the recommended parallel reading. An Introduction to this term's P&P can be found on page 6.

**NB. Be sure to refer to the Faculty's Guidelines for Candidates (MFHom) at regular intervals throughout your course.**

**Pre-membership Course in Medical Homeopathy - Semester 1 - Course Outline**

		MATERIA MEDICA		THERAPEUTICS		WOMEN / MEN'S MENTAL HEALTH		PRINCIPLES AND PRACTICE		
		Animal grps	Others	Gynae	Women's health	Psycho-social, Psycho-sexual		Organon	Critical thinking	
wk/unit										
1 / 45	<u>Serpents</u>	<i>Cimic / Staph</i>	dysmen.	self-image	<u>Adolescence</u>	Critique		empiricism		
2 / 46		<i>Helon / Croc</i>	dyspareunia	body-art				logic		
3 / 47		<i>Aeth / Oena</i>	cyclical	abuse				probability		
4 / 48		<i>Agn / Orig</i>	vulva	gender identity	<u>Sexuality / Relationships</u>			outcomes		
5 / 49		<i>Senec / Bell-p</i>	vagina	premenstrual		<i>Platina</i> <i>Medorrhinum</i>			n of 1 study	
6 / 50		<i>Caul / Cycl</i>	cervix	abortion			assignment options			
7 / 51	<u>Sea Remedies</u>	<i>Thlaspi / Dios</i>	uterus	breast / lactation	<u>Reproductive Years</u>	Metaphysics?	logic & critical thinking			
8 / 52		<i>Chim / Calad</i>	infertility	mastitis			<u>Obstetric pointers</u>		probability vs randomness	
9 / 53		<i>Sabina / Lil-t</i>	endometriosis	post-natal				<i>Folliculinum</i>		Bayesian reasoning
10 / 54		<i>Manc / Asaf</i>	bleeding	sexuality	<u>Menopause</u>			papers		
11 / 55		<i>Grat / Sang</i>	adnexae	relationships				clificol proj.		
12 / 56			ovaries	cancer		<i>Carcinosinum</i>				

Clinical studies (Women's & Men's Health) are covered mainly in the case work and clinical case discussion sessions: ie this forms part of the weekly tutorial content.

**TABLE 1**

		MATERIA MEDICA STUDIES - Plant Family			
		Monday Group	Remedy	Wednesday Group	Remedy
Study in:	Present in:				
1 / 45	2 / 46	<b>Ranunculaceae</b>	<i>Staph (1)</i>	<b>Ranunculaceae</b>	<i>Cimic (2)</i>
2 / 46	3 / 47	Liliflorae	<i>Helon</i>	Liliflorae	<i>Croc</i>
3 / 47	4 / 48	<b>Umbelliferae</b>	<i>Aeth (3)</i>	Umbelliferae	<i>Oena</i>
4 / 48	5 / 49	<b>Labiatae</b>	<i>Agn (3)</i>	Labiatae	<i>Orig</i>
5 / 49	6 / 50	Compositae	<i>Senecio</i>	<b>Compositae</b>	<i>Bellis-p (2)</i>
6 / 50	7 / 51	<b>Berberidaceae</b>	<i>Caul (2)</i>	<b>Primulaceae</b>	<i>Cycl (3)</i>
7 / 51	8 / 52	Cruciferae	<i>Thlaspi</i>	<b>Dioscoraceae</b>	<i>Dios (3)</i>
8 / 52	9 / 53	Ericaceae	<i>Chim</i>	Araceae	<i>Calad</i>
9 / 53	10 / 54	<b>Conifers</b>	<i>Sabina (3)</i>	<b>Liliflorae</b>	<i>Lil-t (2)</i>
10 / 54	11 / 55	Euphorbaceae	<i>Mancin</i>	Umbelliferae	<i>Asaf</i>
11 / 55	12 / 56	Scrophulariaceae	<i>Gratiola</i>	<b>Papaveraceae</b>	<i>Sang (3)</i>
Week 12					
Remedies in bold type are in the Faculty's learning targets for MFHom. (List 1, 2, 3). See <i>Guidelines for Candidates</i>					

TABLE 2

## Therapeutic Pointers

### Outline of Topics for Semester 1.

So far, in the *Therapeutic Pointers* sections of your course we have introduced various remedy shortlists for common problems. These have been grouped broadly according to organ systems.

The therapeutics content of this semester is primarily concerned with the reproductive tract. In terms of the therapeutic pointers for Women's Health, we will also include homeopathic remedies with specific applications in pregnancy and childbirth. We will also provide therapeutic guidance on the homeopathic treatment of functional and hormonal disturbances that have a bearing on the female reproductive tract. These conditions are rewarding to treat and homeopathy can offer an effective and acceptable alternative to long term hormonal treatment.

Toward the end of this semester we will discuss targeted organ prescribing for organic pathologies in the female reproductive tract.

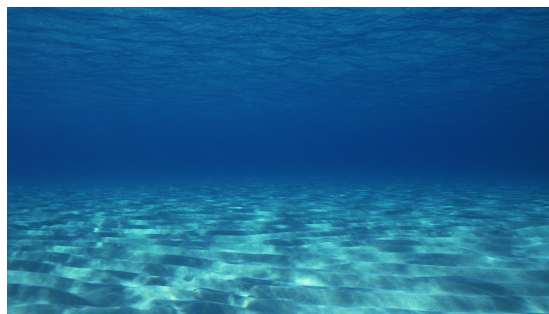
In the materia medica sections we will look closely at three important nosodes / sarcodes: ***Folliculinum***, ***Carcinosinum*** and ***Medorrhinum***. Some key remedies will be studied individually in group work. These include:

- *Cimicifuga*
- *Cyclamen eur.*
- *Lilium tigrinum*
- *Sanguinaria*
- *Staphisagria*

You will also meet some 'old friends': polycrest remedies, such as *Bryonia*, *Lachesis*, *Pulsatilla* and *Kali carbonicum*, amongst others, that have special affinities for the female reproductive system.

We will continue to discuss some remedies comparatively within families, or groupings. Last semester our focus was on mineral remedies, this semester we will outline two animal remedy groups: **The Serpents** (Weeks 1-6) and a selection of **Sea Remedies** (Weeks 7-12). The latter group includes:

- *Aqua marina*
- *Asterias rubens*
- *Calcarea carbonica*
- *Corallium rubrum*
- *Medusa*
- *Murex*
- *Sepia*
- *Spongia*



We will look at this particular family more closely, focusing on the remedies from that group that have proven particularly useful to treat conditions of the female reproductive tract. Carefully study those remedies emboldened or marked with an \* in your course booklets, referring to your *Materia Medica* as necessary. These remedies are particularly useful specifics with an affinity for the female reproductive system.

Women's cycles are integral to their health and symptoms related to menstruation are usually treated as generals, since they tend to permeate a woman's being from a physical to an emotional level. Recent research has highlighted the risks of long term use of hormones in women.



These realisations should make us rethink our current practices and search for alternatives to hormone treatment wherever possible. Homeopathic treatment of many gynaecological conditions is a low risk and effective treatment.

### *Objectives (Therapeutics)*

By the end of the **First Semester** (3rd level) you should:

- be able to differentiate between the main functional pathological conditions which have a bearing on women's health and an awareness of the homeopathic treatment options for a defined range of conditions.
- appreciate the premises which govern our approach to hormonal imbalances
- understand the concept of psycho-neuro-endocrinology
- have a conceptual overview of the snake remedies
- have a conceptual overview of the sea remedies
- be able to embark on the treatment of endometriosis
- have an outline knowledge of the remedy *Carcinosin*
- appreciate the main indications for *Folliculinum*
- have a detailed knowledge of *Medorrhinum*

## INTRODUCTION - Russell Malcolm

Welcome to the Principles and Practice section of the Pre-membership course.

At this stage in your studies you have already encountered a number of different approaches to remedy choice. We have illustrated some of these approaches, last semester, using a variety of different clinical scenarios in the Virtual Training Clinics.

Looking back to your second Intermediate term, for example, you were introduced to Thematic Prescribing and the use of Bowel Nosodes, for which no kind of Hahnemannian provings exist. At various times you may have asked yourself 'where is the Principle of Similars to be found here?'

Clearly, a large part of modern homeopathic practice has, for better or worse, diverged from Hahnemannian principles. This very fundamental shift has occurred over the past 100 years, mainly in response to the streams of thinking emerging from the work of James Tyler Kent.

Many of the most prominent Homeopathic teachers working today are post-Kentian prescribers whose 'unscientific' remedy concepts and methodologies would be largely unrecognisable to Hahnemann.

### Why Study the Historical Background?

The incongruities and tensions that exist in the Homeopathic World - between high and low potency prescribers, pragmatists and idealists, rationalists and healers - will be explored critically this term. This is a difficult, but necessary, process for any practitioner of homeopathy. However, if approached with patience and focus, then a critical approach to the various 'difficulties' and controversies within homeopathy should improve your resilience in the long term and should also help you to engage incisively and rationally with outside critics and detractors going forward.

### Study Approach

In order to make the best of this opportunity, we have selected three challenging readers:



Samuel Hahnemann's *'Organon of the Medical Art'* 6<sup>th</sup> Ed. (1842)

Anthony Campbell's *'The Two Faces of Homeopathy'* (1984)

Steven Pinker's *'Rationality'* (2021)

### The First Reader

These are controversial choices. Many homeopaths today have never actually undertaken to read Hahnemann's *Organon*, for example, let alone engage in a critical study of it.

Hahnemann's heady mixture of observation, reflective thought, experimentation and diatribe

is still both enlightening and problematic today. As modern health care professionals ourselves, what are we to make of his seemingly inflexible and uncompromising standpoint on many aspects of medicine? For example:

*‘What must we think of this school of medicine that, nevertheless, has gone on treating chronic diseases allopathically, that is, with medicines and prescriptions capable of engendering God knows what disease state -invariably, however, one dissimilar to the malady to be cured? Even if these physicians did not hitherto observe nature exactly enough [to notice this], as a result of their procedure’s miserable consequences, they should have become alive to the fact that they were pursuing a counterproductive, false path.’*

Extract from § 39, *Organon* (Trans. Steven Decker)

## **The Second Reader**

Our second reader this semester is Anthony Campbell’s critical review of the personalities behind our homeopathic heritage. This book is often quite blunt and ascerbic in its interpretations of historical ‘fact’ and, on a number of topics, it can make uncomfortable reading for students and practitioners of homeopathy. To my knowledge it has never formally been introduced as a course reader in any other homeopathic training programme.

Anthony Campbell was still a consultant at the Royal London Homeopathic Hospital, when I joined the staff there in 1994. He had long since stopped prescribing homeopathy himself and practised acupuncture as clinical lead in the hospital’s musculoskeletal medicine department.

Dr Campbell nevertheless retained a lively interest in the historical background to the RLHH and wrote a number of interesting articles in the Hospital Staff Newsletter about the pre-NHS days and the figures that most influenced health politics in England, from the 1880s, through the war years and up to the incorporation of Britain’s Homeopathic Hospitals into the NHS in 1950.

*‘The Two Faces of Homeopathy’* was published more than ten years before Steven Decker’s new translation of *The Organon* came into print. Campbell’s reading of *The Organon* therefore depended on Robert Dudgeon’s 19<sup>th</sup> Century translation of the 5<sup>th</sup> Edition.

*‘The Organon is the Bible of homeopathy, and anyone who wishes to study the subject seriously must read it with close attention...*

*In the course of his life Hahnemann was to have second thoughts about many ideas in The Organon; these he incorporated into the text of each successive edition, often, however, without cancelling what he had written previously, so that he frequently contradicts himself.’*

From Campbell A. *The Two faces of Homeopathy* (1984)



In the course of this semester, we will investigate this point further, to see how Campbell's critique of both *The Organon*, and Hahnemann's thought processes, stand up to close inspection.

### **Our Third Set Text**

The third reader, 'Rationality' by Steven Pinker may appear as an unlikely contribution to a homeopathic course:

*For fallible knowers in a chancy world, justified belief cannot be equated with the last fact you came across. As Francis Crick liked to say, 'Any theory that can account for all the facts is wrong, because some of the facts are wrong.'*

*This is why it is reasonable to be skeptical of claims for miracles, astrology, homeopathy, telepathy, and other paranormal phenomena, even when some eyewitness or laboratory study claims to show it.*

From 'Rationality - What it is, why it seems scarce, why it matters' Steven Pinker (2021)

Is homeopathy really to be lumped together with the paranormal in the consciousness of medicine and modern society?

### **Combining three lines of approach**

We cannot escape the fact that we need to apply critical thinking to our own premises and evidences, both individually and collectively, whether these are formed from case experience, opinion pieces in our literature, or formalised scientific studies.

When it comes to appraising the validity and value of our work, we inevitably need to reconcile, in our own mind, a) the precepts raised by Hahnemann and b) the human and historical factors argued by Campbell.

No academic course, on any subject, could survive credibly today without the application of critical thinking to its premises and streams of thought.

A major factor in our choice set reading this semester is an obvious need to support or enable students of homeopathy in their ability to critically evaluate both historical and contemporary homeopathic literature. This includes all the 'reality checks' you should be undertaking as a matter of course whenever you engage with any form of case reporting or clinical research.

### **Future Perceptions**

In considering the place of Homeopathy in medicine today we cannot escape the matter of public perception. Arguably, both the societal and conventional medical view of homeopathy today is negatively influenced by the very belief systems that have been promulgated in recent years by homeopathic practitioners themselves - but which remain only partly supportable by the available evidence.

Whether or not the external body of opinion appears to be informed, or merely a projection from other systems of belief (materialist, religious, rationalist, cultist, historical, social...) the way our speciality is viewed from outside will determine the availability of resources for research in years to come. These perceptions will also determine whether we can preserve our clinical skill sets long enough to engage with future clinical research, if and when these resources become available.

Whether or not there is an expanded or integrated role for homeopathy within health care in the future, will ultimately be determined by whether, as a community, we are able to discern for ourselves what can, or should, be validated and developed.

### **Ideological Sticking Points?**

Notwithstanding Hahnemann's scientific contributions, Campbell suggests that a fundamentally metaphysical 'philosophy' underpins the homeopathic world view and that this philosophy has its very origins in the 'Natural Philosophy' of the 18<sup>th</sup> Century.

Campbell appears to argue that Homeopathy has not managed to escape, or adequately evolve, from the legacy of the models for health and disease of the early 19<sup>th</sup> century, which were further elucidated by Hahnemann and harnessed to the yoke of his homeopathic 'system'.

*Another very important result of Hahnemann's growing metaphysical tendency was the incorporation of semi-mystical ideas into what had originally been more or less a scientific theory. In the later editions of *The Organon*, and also in his other writings of this period, we find an ever-increasing emphasis on the doctrine of vitalism. The term Hahnemann used was 'dynamis', which is usually translated as 'vital force'. By this he meant a spirit-like principle that gives life to the body.*

*Virchow claimed that disease could be understood by considering the body as a commonwealth of cells - an idea that contained the seed of the ultimate destruction of vitalism as a scientific concept.*

### ***The Organon* as a focus for Critical Appraisal**

Part of this term's work will be to investigate the extent to which *The Organon* is indeed 'scientific' and to what extent it is a metaphysical tract. We will consider, for example, which paragraphs in *The Organon* appear to support the view that Hahnemann subscribed to vitalism?

We will discuss whether there are other possible interpretation of his writings, as we reconsider the biological models that were available to Hahnemann between 1810 and 1842. We will also consider how he collated his clinical observations in the different editions of *The Organon*. We will discuss how his language evolved as he attempted to articulate his observations and his models for the complex dynamic phenomena of health and illness. We

will consider the limitations of 19<sup>th</sup> Century terminology in Hahnemann's attempts to articulate his conception of health, illness and the 'medical art'.

## Study Support Tools

We have devised a 'plotter' to help you organise your own thoughts around each of Hahnemann's discreet statements (see draft version overleaf). You can choose to print out copies of these tables and plot your critique for each paragraph that we select for close study. Alternatively, you can annotate a blank copy and file it using the original paragraph reference from the *Organon* and save it to your hard drive or learning portfolio.

In the process of guiding previous students on the Faculty's 'Long Course', Dr Ann Clover developed an outline 'map' of Hahnemann's *Organon*, to help orientate students to the topic areas covered in the text. Dr Clover's map is provided at the end of this introduction and has been broken down to provide a study timetable for the term ahead.

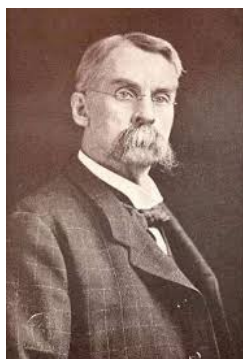
## Orientation

In this new version of the Pre-Membership Course we will use Dr Clover's original concept 'map' to explore the different topic areas in *The Organon*.

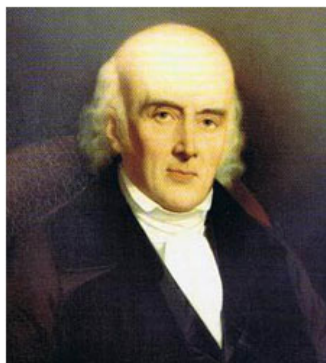
With the help of the plotters, we hope that you will be able to decide whether the different domains in *The Organon* are predominantly 'Scientific', or alternatively, which statements appear to be 'Metaphysical' or speculative. We hope that this entire exercise will help to orientate you to the important ideas in *The Organon* and help to inform the choices you will make in the future concerning the direction of your own study and practice.

*On the whole, homeopaths after Hahnemann were led by their temperaments to emphasize one or other aspect of his thought to the virtual exclusion of the other. There have been those who have laid more weight on Hahnemann's scientific characteristics and have regretted the metaphysical ideas in *The Organon*, and there have been others who have on the contrary magnified the differences that separate homeopathy from mainstream medicine.*

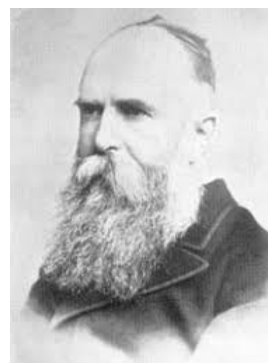
Campbell, A. *The Two Faces of Homeopathy*



James Tyler Kent



Samuel Hahnemann



Richard Hughes

Paragraph / aphorism:

§

Category of Information ➡	PRACTICAL				THEORETICAL		
	Medicinal Method		Clinical Method		Ethical / moral guiding principles	Framework for interpretation of the patient, their illness or their symptoms	Concepts of health and disease and /or part of a healing doctrine
	Medicines / drugs	Knowledge of Medicines	Recording or analysing the case	Treatment considerations			
		Proving methodology	clinical case - taking method etc.	selection and administration of treatment etc			
Homeopathic Pharmacy	Materia Medica Pura	Evaluating treatment response and frameworks for further treatment					
Select ➡							
Defined, 'scientific' (reproducible) process / observn. ➡							
Empirical process of structured reasoning or observation. ➡							
Theoretical proposition - open to experiment ➡							
Doctrine / Maxim / Principle / Aspiration ➡							
Metaphysical proposition / speculation ➡							

Tenable                      caveats in modern health care                      .                      Untenable in modern health care                      .                      Notes/ caveats

## Principles & Practice

### *The Organon of the Healing Art*

Over the course of this semester we hope to be able to familiarise you with Hahnemann's *Organon der Heilkunst*.

Ascertaining Hahnemann's intention from his writings is not always easy. Fortunately we have a good translation available, prepared by Steven Decker. His understanding of 18th and 19th century idioms in written German is a great asset in the task of elucidating Hahnemann's concepts for today's English speaking readership.

It is worth taking time to reflect on the principles as they are presented and we have provided a breakdown of the subject matter to orientate you to this important and seminal work.

We nevertheless encourage a critical reading of this text rather than present it as a 'rule book'. A questioning approach is required in order to determine what in Hahnemann's philosophy can be effectively carried over to modern practice.

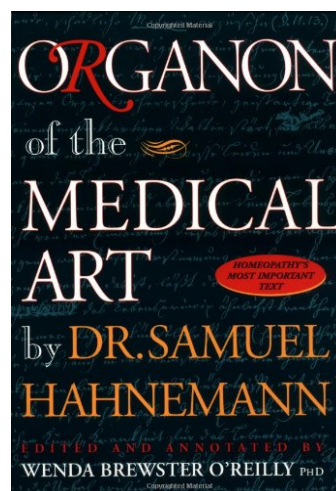
The process of critical reading will help you frame your own concepts. This course is not intended as an inculcation in to an unquestioning medical 'sect', but a working appraisal of the potential of homeopathic principles within integrated healthcare.

Spending time on *The Organon* can help to stimulate ongoing discussion of what is fundamentally important in a humane, individualised and flexible approach to suffering.

Given the pressures on our time it is logical to prioritise our studies and focus on practical materia medica and therapeutics. In a world of condensed sound bites and packaged 'evidence' it can be difficult to make space for ethical and philosophical reflection.

Using Ann Clover's subject breakdown and Gabriel Rieberer's pointers to study, we have tried to break down the task into a manageable programme of reading (see weekly schedule overleaf).

In combination with your own experiences and reading choices this will provide a philosophical depth that will carry you forward and inform your response to the various challenges you encounter in your future working life.



Translation: Steven Decker  
Edited: Wenda Brewster O'Reilly

## *Organon Studies for Semester 1*

### WEEK

- 1 §1-71: principles of cure in homoeopathy
- 2 §72-81: understanding diseases, ie definition of acute and chronic disease
- 3 §81-104: case-taking
- 4 §105-145: knowledge of medicines
- 5 §146-203: homoeopathic treatment of disease
- 6 §204-209: chronic miasms
- 7 §210-23-: mental and emotional diseases
- 8 §231-244: intermittent diseases
- 9 §245-263: case management
- 10 §246-271: preparation of medicines
- 11 §272-285: administration of medicines
- 12 §286-291: other therapeutic approaches

