Foreword

It has been a real pleasure and a source of education for me to have taken on a substantial share of the editing of the papers in this volume. As a social historian of medicine with an inter-disciplinary approach to the history of medicine and health the papers have demonstrated the value of examining a whole spectrum of healing practices. Non-regular medicine, often given the pejorative term of ‘quack’ medicine, has become almost conventional in recent years. Complementary medicine, the modern terminology, has moved from a perceived position of little more than alchemy to becoming an accepted part of regular practice. In Britain, over forty per cent of general practitioners offer complementary medicine within their practices and over seventy per cent regularly refer their patients to complementary medicine practitioners. Many of the medical schools are now approaching complementary medicine with a more open mind and there is a move towards greater integration where there are no firm boundaries and much less use of words such as conventional, alternative and complementary. The recent establishment of the Foundation for Integrated Medicine, promoted by the Prince of Wales, to develop a syllabus for the study of complementary medicine demonstrates the need to bring together conventional and complementary practice.

It is in this context that the history of homoeopathy can be seen. It is the most popular of the complementary therapies, enjoying the patronage of the British Royal family, and was included as part of the National Health Service from its foundation in 1948. Some recent scientific evidence has shown support for homoeopathy. Three separate clinical trials reported in the Lancet in 1994 indicated that homoeopathic treatment was more successful than a placebo in relieving hay fever and allergic asthma. Jacques Benveniste, a French scientist, carried out experiments in 1988 involving homoeopathic dilutions. These showed that even when a substance had
been diluted to the point of disappearance it still affected living cells. Patients who consult either a regular doctor who practises homoeopathy or a professional homoeopath find that ‘a symptom picture’ will be drawn up based on answers to questions concerning lifestyle, medical history, likes and dislikes in order to identify the patient’s constitutional type. Some two thousand remedies are potentially available to be dispensed either by the practitioner or purchased directly from health shops and chemists/ pharmacists. Lactose tablets, pills, powders or granules are available. From the patient’s point of view there is the opportunity for self-help in that basic low-dosage homoeopathic remedies are available, without prescription, for conditions such as coughs, colds, heartburn, nausea, stress, shock and bruising. Indeed, recently, a major health care company in Britain, The Boots Company, has entered the self-help area for complementary medicines and has produced a range of homoeopathic medicines for general sales and an accompanying free booklet as part of its ‘Healthcare Information’ series. The opening description describes homeopathy as a ‘natural complement to modern medicine’. Thus, the company sees an opportunity to satisfy the needs of the patient and, of course, an opportunity to generate profits. One of the principal missions of EAHMH is to ‘educate the general public’. This volume fulfils that mission admirably in bringing to a wide audience the historical background to present-day needs and demands for health-care.

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