Sören Jensen:
A Danish Homoeopath,
his Time and his Patients
(1874–84)

Anna-Elisabeth Brade

Introduction

This essay is based on a collection of letters\(^1\) addressed to a general homoeopathic practitioner, Dr Sören Jensen (1811–87) whose clinic was in Skindergade\(^2\) in the old centre of Copenhagen. Who was Sören Jensen? He was born on 18 February 1811 in Højslév, a small village in North Jutland as a son of the Rev. Iver Jensen and his wife Mette Marie Kastrup. Though he came from an academic family he finished his schooling without a General Certificate but in 1835 he is noted in the register of the Royal Surgical Academy as a student of surgery.\(^3\) Thus, he belongs to one of the last classes which could be admitted without a General Certificate. His professional background at the time of admission was probably that of the traditional practical training of a barber surgeon. At the Academy he was able to supplement this training with a theoretical education combined with a clinical training at the Royal Frederic’s Hospital. In 1837, he finished his studies at the Autumn examination ostensibly with a very low second class degree. Unlike most of his fellow students at the University of Copenhagen, his insufficient General Certification prevented him from enrolling for studies towards the final medical University examination. From 1837 to 1839 he was employed in the military as a company surgeon,
attached to the King's Regiment and, in 1853, he is known to have been a cholera doctor in Copenhagen.⁴ Thereafter, he practised as a homoeopath in Copenhagen until his death at 76 years of age in 1887.⁵ He married Laura Hutzen, daughter of master joiner Carl Hutzen and Eva Lund, living in Roskilde.⁶

Why did Søren Jensen choose to practise as a homoeopath? There is no direct evidence, but it is likely he realised that his less than substantial qualifications reduced his chances of promotion as a surgeon in the military or in the mercantile marine, especially as there was no shortage of surgeons. The reorganisation of medical education in 1842, which resulted in the unification of medicine and surgery, created a further obstacle. The revised medical syllabus was placed under the Medical Faculty of the University of Copenhagen: medical graduates had the right to practise medicine as well as surgery, but Søren Jensen’s sphere was limited mainly to surgery. He must have been quite aware of that fact during the cholera epidemic. In private practise, surgery would only deal with minor injuries which normally were still treated at home without the use of doctors. Major surgical cases calling for specialist intervention and apparatus, such as the use of anaesthesia, were treated in one of the three hospitals. Furthermore, as Søren Jensen had insufficient qualifications he could not establish himself as an independent barber surgeon and maintain an emergency room for the acutely injured.⁷ However, by establishing himself as a homoeopath he could practise legally the profession in which he was educated and, at the same time, increase the number of his patients. Here he was also within the framework of legality as only ‘examined and authorised Doctors had the right to attempt homoeopathic Cures’.⁸ The neutral term of ‘attempt’ was used here as homoeopathy was not a treatment accepted by the Danish medical world nor by the relevant Danish government authorities.⁹

**Danish Homoeopathy**

Homoeopathy was introduced into Denmark by Hans Christian Lund (1765–1846), an unqualified surgeon who, from 1821, practised homoeopathy in Copenhagen. Homoeopathic treatment met very strong resistance from authorised doctors and was practised mainly by an unknown number of laymen whose activities were illegal from 1794. Very few authorised medically educated doctors openly dared to use homoeopathic therapies in their practises and to call themselves homoeopaths (Table 1). In the rest of Denmark only two homoeopaths, educated as allopaths, were practising.
There was no homoeopathic school in Copenhagen with a standardised syllabus and a final examination. The education was therefore based on self-tuition where the German literature absolutely dominated. Few of the allopathically educated homoeopaths went abroad for further studies. Until the mid-1850s, Danish homoeopathic literature was based on translations of mainly educational works for the public. The Danish Homoeopathic Society was founded in 1854 and the members included homoeopaths as well as some sympathisers from among laymen, especially from the upper and lower middle classes. Although membership was small, c.100 in 1884 and only c.50 in 1894, the Society published a periodical almost continuously from 1860 to the end of the century. Its professional content and layout were oriented towards the current allopathic specialist literature, in order to oppose the allopaths' objections which were focused mainly on homoeopathic dosages and the lack of scientific documentation according to the laws of allopathically approved trials or experiments.\textsuperscript{10} During the time of this dispute, which was characterised by very violent allopathic attacks and similarly robust homoeopathic defences, S\o ren Jensen operated his homoeopathic clinic.

\textbf{S\o ren Jensen and his Patients: a Letter Collection}

This historical analysis is based upon the letter as a dialogue between positions,\textsuperscript{11} with the patient here as a sender and the homoeopath as a recipient. Yet for one of the positions (that of the homoeopath) part of the dialogue is missing, as his answers to the patients can hardly be traced. Nonetheless, S\o ren Jensen did note the treatment, medicine and price on each of the patients' letters. The letters appear as monologues\textsuperscript{12} which want to obtain something. In the form of ‘anamnesis’ (symptoms), they are arguing for and requesting for medicines to be sent. In addition, there is an element of expectation that the doctor, in his answer, will give information, comfort and hope to the patient and relatives. Consequently, the letters

\begin{table}[h]
\begin{center}
\begin{tabular}{llll}
\hline
Allopaths & Homoeopaths & Allopaths & Homoeopaths \\
\hline
1860 & c.80 & 7 & 160 & 8 \\
\hline
\end{tabular}
\end{center}
\caption{Allopaths and medically educated homoeopaths in Copenhagen at the time of S\o ren Jensen}
\end{table}
can actually be analysed as monologues which tend towards being dialogues with an absentee. Thus, the letters are manuals where the letter writer had to inform the addressee as accurately as possible, as there is no possibility of interrogating the questions and statements. Accordingly, a great part of the letters provide great detail on the ‘anamnesis’. Furthermore, they are authentic letters as they have been written by one historical person to another historical person without the intention of publication.13 Hence, they are not supposed to be ‘dimmed’ by intentional suppressions and/or perversions but are sober manifestations of the patients’ attitudes and hopes in relation to homoeopathic treatment.

The letters from the period 1874–1886 are a fragment, particularly concerning the patients’ evaluation of their treatment. Patients who have been cured by homoeopathic therapy are unlikely to write about this to the doctor – probably a general rule throughout time and for any therapy. There is only one clear exception to this in the collection, in which a patient has been cured of eczema and has sent a letter of thanks but, in reality, the letter writer really wants to know if the doctor had received the payment of four kroner.14 Thus, there is a defect in the source material which cannot generally document the value/effect of homoeopathic therapy. Another problem is related to Sören Jensen’s missing answers to the patients.15 There are no instructions to the patient, nor any medical comments. The dialogue is from the patient to the doctor only and, therefore, a valid, general picture of a homoeopath’s therapeutical practice cannot be fully established.

The letters are intense human documents written by distressed patients or their relatives, friends, neighbours or the schoolteacher to their apparently last ‘life-saver’, Sören Jensen. They are characterised by reverence, being addressed to the ‘Good Mr Doctor’, ‘Your Honour’ etc. and signed ‘With all due respect’, ‘With my best reverences’ etc. Even if fragmentary, the letters can generally document which illnesses a Danish homoeopath doctor treated and which treatments he prescribed. More specifically, the letters can provide information about the patients’ illnesses

<table>
<thead>
<tr>
<th>Locality</th>
<th>Number of Letters</th>
<th>Number of patients</th>
<th>Women</th>
<th>Men</th>
<th>Non-identifiable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denmark</td>
<td>62</td>
<td>51</td>
<td>17</td>
<td>28</td>
<td>6</td>
</tr>
<tr>
<td>Sweden</td>
<td>7</td>
<td>7</td>
<td>1</td>
<td>6</td>
<td>0</td>
</tr>
</tbody>
</table>
and health problems within the framework of homoeopathy and give an insight into their hopes and expectations together with their understanding of their illnesses as expressed by themselves. Finally, the social classes which sought homoeopathic therapy can be determined (Table 2).

Geographically, the Danish patients are widely dispersed. Like many ‘wise people’ of the time, such as ‘Wise Sören’ in Funen, Sören Jensen must have consulted and supplied drugs extensively by mail. However, some of the letters indicate that he has actually seen the patient at least once. A common feature of the letters is that the patients ask for a new drug supply based on returned prescriptions or medicinal packings. On a few letters Sören Jensen has noted ‘Unknown’ and, in these cases, Jensen has been recommended perhaps by another patient. Finally, in one case, Sören Jensen has been contacted on behalf of a patient by a Mr J. Nielsen who, according to his stamp, was a ‘Commission’ with establishments in Copenhagen and Næstved.

Men make up the majority of the patients being agriculturists (farmers, market gardeners, forest staff), artisans (engineers, clog makers, tailors, tanners, smiths, cooks), as well as the son of a weaver, a schoolteacher, a driver and the daughter of a chemist. All the other designated children belong to the agriculture group. Only one occupation is stated for women, a maid; the remainder were probably housewives whether or not they are mentioned as widows or as mistresses. The occupations of 15 patients cannot be verified. The patient group does not include the well-educated classes. Nevertheless, they are people, especially the men, who after primary education have had careful, practical training lasting several years. As farmers and artisans, they were employers with a staff of farm hands, journeymen, apprentices and maids. They had to be able to afford payment to Sören Jensen, typically two to six kroner. For example, a single gonorrhoea patient who contracted his illness after a visit to ‘the bitch’ sent, in advance, the sum of 20 kroner. The patients must therefore have had some surplus income to be able to consult Sören Jensen and so, although they are lower class people, they are not the ‘bottom’ of society.

The letters describe the suffering of the patients who have consulted Sören Jensen, together with the symptoms and effect of the treatment. The case studies (see Appendix) cannot be grouped within the genre of ‘experience narratives’ which are characterised by a more-or-less stable structure – the beginning of the illness, the treatment and the restoration to health. The point of the narrative is that the details of the outcome are generally lacking.

The patients’ evaluation of the homoeopathic treatment is tabulated
in Table 3, which shows the trend in the source material, but should not be analysed scientifically as an exact testimony about a reality. The group ‘not stated’ includes some first-time inquiries and patients who do not provide information about the effect of the homoeopathic medicine. Positive evaluations might be hidden here and the probably missing group of cured patients cannot be expected to write a letter. That patients who feel a recovery write for more medicine is evident, but it is less evident that a doctor, simply because of a written request, will send more medicine. It is surprising that patients who cannot feel any recovery write for more of the same sort of medicine. Either the patients are still motivated by hope and/or confidence in the homoeopathic doctor, or Sören Jensen really was their last hope. Consider, for example, the mother who writes about her son who had a very bad cough: ‘The doctor [the allopath] has said that it is incurable. Now I want to hear your opinion if consumptive patients, 8 years old can be cured’. The patients’ illnesses are shown in Table 4 according to Sören Jensen’s classification. The number of patients is apparently higher.

Table 3. Outcomes of homoeopathic treatment

<table>
<thead>
<tr>
<th>Cured</th>
<th>Recovered</th>
<th>No effect</th>
<th>Not stated</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>12</td>
<td>22</td>
<td>23</td>
</tr>
</tbody>
</table>

Table 4. Patients’ illnesses

<table>
<thead>
<tr>
<th>Illness</th>
<th>Number of patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Convulsions</td>
<td>2</td>
</tr>
<tr>
<td>Menstruation</td>
<td>3</td>
</tr>
<tr>
<td>Ringworm</td>
<td>3</td>
</tr>
<tr>
<td>Swollen legs</td>
<td>1</td>
</tr>
<tr>
<td>Falling sickness (epilepsy)</td>
<td>1</td>
</tr>
<tr>
<td>Skin disease</td>
<td>7</td>
</tr>
<tr>
<td>Venereal disease</td>
<td>5</td>
</tr>
<tr>
<td>Rheumatism</td>
<td>3</td>
</tr>
<tr>
<td>Hip problems</td>
<td>1</td>
</tr>
<tr>
<td>Knee trouble</td>
<td>1</td>
</tr>
<tr>
<td>Scofulousis</td>
<td>4</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>1</td>
</tr>
<tr>
<td>Stomach trouble</td>
<td>3</td>
</tr>
<tr>
<td>Hearing</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Illness</th>
<th>Number of patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of appetite</td>
<td>3</td>
</tr>
<tr>
<td>Disease of the eye</td>
<td>2</td>
</tr>
<tr>
<td>Heart trouble</td>
<td>2</td>
</tr>
<tr>
<td>Anaemia</td>
<td>1</td>
</tr>
<tr>
<td>Nervousness</td>
<td>1</td>
</tr>
<tr>
<td>Inflammation/abscess</td>
<td>1</td>
</tr>
<tr>
<td>Toothache</td>
<td>1</td>
</tr>
<tr>
<td>Kidney disease</td>
<td>1</td>
</tr>
<tr>
<td>Hand trouble</td>
<td>1</td>
</tr>
<tr>
<td>Asthma</td>
<td>1</td>
</tr>
<tr>
<td>Cough/haemoptysis</td>
<td>10</td>
</tr>
<tr>
<td>Headache/ heaviness</td>
<td>3</td>
</tr>
<tr>
<td>Dyspnoea</td>
<td>1</td>
</tr>
<tr>
<td>Unverifiable</td>
<td>7</td>
</tr>
</tbody>
</table>
than previously enumerated as some patients, in the same letter, ask for advice/medicine for more than one illness.

Two letters concern specific problems about the importation of Søren Jensen’s drug shipments to Sweden as the private importation of medicine is prohibited. The largest single group is that of patients with cough and haemoptysis – probably tuberculosis, the most serious disease of that time. In these case stories, which are rather detailed, it is possible to come very close to the letter writer as a person with deep humanity. One submits himself to the will of God and Søren Jensen’s drugs but, at the same time, is asking if the doctor will be so kind as to write as legibly as possible ‘as I am not one of the best persons to read hand writing’. Another asks if the person concerned will get his health back or if ‘I have to resign myself to the thought that no advice can be given for me’. Here, as from time immemorial, illness is a part of the stages of life and, when everything has been proved, there must be a resignation to destiny. Another attitude towards illness appears in helping neighbours, represented in one single letter. ‘If I dare to ask you [to send] the same drug to a poor small-holder’s wife here in the village I thank you so much as she is suffering from the same illness as my wife’, the letter writer will pay the doctor’s bill for the poor wife. Thinking that what helps one patient probably helps another suffering from the same symptoms is a very old popular tradition. Despite the individualised treatment of homoeopathy and, although he had never seen the poor wife, Søren Jensen sent the medicine.

In addition to the consumptive boy, a further five patients state that they maintained contact with an allopathic doctor before or during the course of treatment provided by Søren Jensen. A patient with cough and haemoptysis wrote: ‘... then I became afraid that it should go too far why I went to a doctor here in Brædstrup’. Yet, now I am afraid of using the medicine which he proscribed before I hear from you [Søren Jensen] and that’s why I send the prescription to you: that you can see what it is ... I did not tell him that I consulted you’. A patient with ringworm reported: ‘I went to my family doctor ... he gave me some bath water which smelled like coal tar and the boy very constantly has used it for some time. But it doesn’t help ...’. A patient with blood-stained diarrhoea told Jensen: ‘... now I have consulted 5 various doctors, but no change’, while a patient with kidney disease stated: ‘For half of a year my sister has suffered from a kidney disease and the doctor here cannot help her’. Finally, the case of a patient with scrofulosis was described as: ‘the illness began at the age of 18 ... therefore she consulted doctor Larsen in Randers ... who operated on her neck. She got a lot of cod-liver oil which she hardly
could endure ... 34 These situations are well known from the past as well as today as doctors cannot prevent patients from consulting 'wise people' or a homoeopath, or from using other alternative treatments. They bring with them the doctor's diagnosis and prescriptions but they keep the alternative consultation secret from the family doctor.

Conclusion

Letters from Patients to a Homoeopath cannot provide a complete validation of the effect of homoeopathic medicine, but they can give a glimpse of human sufferings and health problems. Through the letters, the patients themselves present their own cases in their own language at a time when the meanings and the attitudes of the ordinary people and the lower middle classes normally are hidden or have been lost. Søren Jensen obviously had his patients' confidence even if the contact was remote and mainly took place by correspondence except, of course, for his patients in Copenhagen. He treated all kinds of illness, even highly dangerous diseases such as tuberculosis. The patients' safety was based partly on his personality and humanity, which it is not possible to evaluate, and partly on his professional education as a surgeon/doctor with government authorisation. The fact that homoeopathy was viewed with contempt by his colleagues only affected the patients in the way that they generally did not reveal their contact with him to their family doctors. They were very aware of the schism of government authorisation versus alternative medicine, and they knew this very well from another schism at the time, scholarly medicine versus traditional folk medicine.
Appendix: Cases

Letter no. 7, 23 October 1877

'Mr Doctor.

By this I allow myself to request Mr Doctor kindly and as soon as possible to send to me a small bottle of medicine which Your Honour earlier has sent to me. As then I am again suffering from the same eczema on my legs which the Doctor at that time declared was a mercurial trouble plus a rise to my head, now and then with a heavy headache. Now complications have supervened in the form of a cold, too. Probably Mr Doctor cannot remember me since it is so long time ago, but to a kind of information I allow myself to remark that I think I then got an acid.

Yours faithfully ... ' Guide.

Letter no. 9, 2 January 1879

'In 1875 I got a pneumonia, it lasted 7 weeks before I recovered. On September 9th. I again got a pneumonia. A great bag of porridge was placed on my waist and it was renewed each hour daily. September 14th. was the last day with the bag of porridge why I was rather restored to health. Later on in the afternoon I got a haematemis. The doctor did not mean it was so dangerous but asked me to be quiet and stick to cold milk foods for some days. On September 20th I felt well and it was a lovely weather. I decided to go for a walk in the morning. When it was 2 o'clock in the afternoon I was glad myself and the blessed weather. I had just arrived only a short distance outside the garden fence, walked around and was so happy – then the blood jumped up into my neck and out of my mouth, exactly as when a person got a real vomiting. It came over me as a lightning and I walked softly into the garden and lied down on the grass. People arrived and they wanted to give me salt water. But it took a long time before they obtained the power over the blood. They had been behaved as if a head of cattle had been slaughtered. Two men carried me inside the house and brought me to bed. Again at 7 o'clock in the morning I got a similar attack and hardly it was all up with me. When the doctor came he said that it was in due time seriously to tackle the problem. It was on September 20th and in the night between 2 and 3 o'clock on September 21st. I got a blood vomiting. Only a little ray of life was left. At night at 3 o'clock on September 22nd. I got a small attack, then it stopped. During the next 8 days I lived on cold strained water gruel and during 6 weeks on cold milk foods. Sometimes since then there has been blood in the hawk and when I am coughing. On May 17th. 1876 I got a haemoptysis. It lasted half the day. In the same Autumn on November 21st. I got a haemoptysis again with clear blood. It lasted 2 days before I got free. When I got a haemoptysis it has always been a very heavy moment and it has lasted for a long time before it stopped.

December 29th 1878 I again was attacked, not as heavily as earlier but it lasted till January 2nd. I had strange feelings in my breast and since then I have had haemoptysis and hawked up an awfully big quantity without very much cough. On June 9th 1878 I got a bad cough which I still am suffering from. Now I want so much to live for a
moment and to get a remedy against the bad cough. Concerning the blood I think there are no remedies to me anymore.

Yours faithfully ...' (Occupation not stated).

Letter nos. 17–19, 8 August, 14 September and 26 November 1879

'Mr Jensen.

Would you be so kind as to give my son a remedy for ringworm. Early in the Spring some small swellings appeared on the boy's chin. To me they were like what I call blisters of a size of a small coin. During about 3 weeks it spread rather heavily and at once I presumed that it was ringworm. I consulted my family doctor who confirmed my supposition. He gave me some bath water which smelled like coal tar and very regularly the boy has used it for some time. But it doesn't help, [the ringworm] continues to spread more and more not on the neck but on the face. Now it has reached to the middle of his cheeks with its dark edges which are swollen. The chin is now smooth and I cannot see the ringworm there. What mostly trouble me is how the situation will be when the ringworm attacks the eyes.

The boy is 8 years old. Tall for his age and of a strong constitution.

Your very thankful ...' Weaver.

'Mr Jensen.

I think it has not been better for my boy – the ringworm is very clear when he is cold or sad in another way: when he is outside in the morning and in the evening.

As formerly he is not suffering from much itching but I think he has some ache. Still it is spreading and it is on the level with his right eye. On the right side it has not yet reached further than to the nose. Still he has some pills and liniment I can buy at the pharmacy here in Nykøbing though it is a rather troublesome affair (they are some rude fellows at the local pharmacy).

Do tell me if it is necessary that you see the boy – I want to do everything to get him cured.

Yours very respectfully ...' Weaver.

'Now my boy has used his medicine – nearly 14 days ago. I suppose that you will say: then you already 14 days ago should have written for more medicine. The reason for not doing so is that the boy has been very ill: first measles, since pneumonia in the right lung. Now the boy is fairly healthy again. Concerning the ringworm I can hardly see any changes, besides that the dark which was in his right eye now nearly has disappeared. But on the neck behind the ear the edge is clear. On his nose, right cheek and neck it is nearly as you saw it. Well, it seems to me even as if it has been worse because it is like a sort of small blisters or small red swellings round the face and it disfigures him dreadfully.
He is not talking about itching and I never see him scratch himself but basically
it never minds.

After this, please, would you be so kind as to give him more remedies (if you
think so).

Yours very respectfully ...’ Weaver.

Letter no. 45, March 1882

‘Esteemed Doctor Jensen.

By this I allow myself to ask you to be so kind as to send to me some medicine
why that [gonorrhoea] has broken out again and there is much flux in it. I would ask
for something to the testicle why it is very painful and rather swollen. I carry it up
and use red wine in order to spray. But, please good Mr Doctor, be so kind as not to
betray me to my wife. I have duped her that it is wrong with my urine and she knows
that something is wrong about my testicle. Please, Mr Doctor, give me a medicine
as strong as I can tolerate. Last time I got some drops in a bottle. Simply enclose
the directions for use then I know it very well. Probably it will not last a long time
before I come to Copenhagen and I promise to contact you and settle my account.
If you, Mr Doctor send off the medicine on Saturday before 6 o’clock in the evening
then I can fetch it in Herning on Sunday. Because of your goodness I expect that
you will send it to me, Mr Doctor.

I remain Sir, your obedient servant ...’ Wool merchant.
Notes

1 In the archive of the Medical Historical Museum of the University of Copenhagen.

2 Skinder = tanner. Skindergade: the street where tanners and furriers formerly had their workshops and shops.


4 The epidemic ravaged the city from 11 June to 1 October. 4,737 persons died – 65.7 per cent of those attacked and 3.65 per cent of the inhabitants of the city.


6 A city 30 kilometres west of Copenhagen. The city is famous for its cathedral where the royal Danish family is buried.

7 The barbers' duty to receive acute patients was abolished on 3 April 1900.


10 Brade, 'Die Welt der Medizin'.


12 Luise Linser, 'Der Brief des Schriftstellers' in Deutsche Akademie für Sprache und Dichtung Jahrgang 1875, 108.


14 Letter no. 67, 10 September 1886 (the letter numbers are mine).

15 There are only his notes on the patients' letters which relate only to dating, prescription and intensification.

16 Wise people: the practitioners of traditional folk medicine.


18 Letter no. 8, 14 November 1877 and no. 23, 6 February 1880.

19 Letter no. 20, 19 October 1879 and no. 8, 14 November 1877.

20 Letter no. 3, dated 5 February 1876 and nos. 4 and 49, dated 18 March 1877 and 23 February 1882.
21 A provincial town in southwest Seeland. Letter nos. 54 and 55, 22 November and 22 December 1882.

22 By way of comparison the average time wages for a skilled male worker in the cities was 0.26 kroner (price level 1879).

23 Letter no. 44, 2 September 1881.

24 Letter no. 14, 15 June 1879.

25 Letter no. 43, 24 August 1881.

26 Letter no. 20, 19 October 1879.

27 A small village in the middle of Jutland.

28 Letter no. 15, 8 July 1879.

29 Letter no. 17, 8 August 1879.

30 Letter no. 29, September 1880.

31 Letter no. 57, 19 December 1882.


33 Provincial town in northeast Jutland.

34 Letter no. 58, 29 December 1882.