

REDIMEH Project: Ibero-American Integrative Network for Clinical Research in Homeopathy

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ABSTRACT

If conscious medically oriented homeopaths were asked to name one single missing or insufficiently developed subject, the answer would probably be high quality clinical research. In this regard, a large part of the homeopathic community continues to insist on traditional models of building knowledge, although they had led us nowhere. On the other hand, there is a current agreement among clinical researchers that enough effort has been devoted to clinical trials. In spite of this, there is still lacking high quality scientific research useful to improve the daily practice of clinical practitioners. This article introduces REDIMEH, an Ibero-American integrative network for clinical research in homeopathy aiming exclusively at joining efforts to collect clinical data sufficient to draw out valid conclusions.

Keywords: Homeopathy; Clinical research; Ibero-America; Network.

If conscious medically oriented homeopaths were asked to name one single missing or insufficiently developed subject, the answer would probably be high quality clinical research allowing for introducing positive changes in daily clinical practice resulting in higher therapeutic effectiveness.

In spite of years of debate, it continues to be difficult to reach a consensus on which of the many different homeopathic clinical approaches is better in each particular clinical condition.

A large part of the homeopathic community continues to insist on traditional models of building knowledge which have led us nowhere. And, furthermore, they seem unaware of present and future potential risks. Attacks on homeopathy have become stronger and more efficient, also in countries where historically homeopathy has been well established. The most worrisome in such attacks is that many detractors adduce sound reasons and arguments against homeopathy.

On the other hand, many homeopathic teachers still try to back their ideas with the two worst possible sources of evidence: assertions by the "Founding Fathers" of homeopathy removed from their context and single case reports. In this, it must be acknowledged, they follow in the steps of the same revered masters, who would draw general conclusions out of their private practice and particular experience.

Certainly, sometimes we do learn from applying this approaching, especially when cases are well reported and documented and when ideas have a sound rationale behind them. The situation is rather the opposite when rational discussion is displaced by the guru-like claims of new fads, whose music is appealing to many practitioners. Some of these so-called "methods" are grounded exclusively in complex theoretical constructions that, on looking closer, seem to be nothing but working hypotheses, in the best of cases, presented as proven truth, and in the worst instances, mere and implausible free associations of ideas, full of logical pitfalls and no relation whatsoever to actual reality.

Just to mention one example of such so-called conceptions (more accurately speaking, misconceptions), due to reasons of proximity, let us analyze the so-called "HUMA" method [1] in its propositions, internal logic, rationale and plausibility. Its main premises are the following:

"There must be something beyond life, the vital force, disease and symptoms. This something is... *the number*. The universe is organized along numeric patterns, thus, numbers constitute its true essence."

In this premise, implicitly, the author evokes the ancient Pythagorean metaphysical conception on the essence of being. The followers of Pythagoras built a mythical sect around these ideas that in their time might have sounded an ingenious and sophisticated answer to the much more primitive

Greek views on earth, fire, water and air as the constitutive elements of reality. However, numbers and mathematics are human inventions and conventions, their only reality belongs within human mind. We can use them to help us understand and explain reality, but reality cannot be reduced to them. In fact, they are not real, but ideal beings.

Since from false premises we can only reach wrong conclusions, we could stop our analysis here. However, it is worth to go a little further.

“Homeopathic remedies have a *strange property*: their names are in Latin.

With this premise the author suggests there must be a “hidden mystery” behind homeopathic remedies. After long studies, he says, devoted scientists discovered a mathematical formula that can translate the latin name of homeopathic remedies into a number!

Once again, we must reject this premise. Indeed, there is no mystery whatsoever: the name of homeopathic remedies appears in Latin only because that was the universal scientific language at that time, before English replaced it, and they are virtually arbitrary.

Furthermore, in scientific classification all plants and animals, including human beings, have Latin names and these have changed often in the course of time. Finally – and I would have imagined this would be self-evident – as a rule, the names of substances have no relation at all with their therapeutic uses.

The way of thinking involved in HUMA can, thus, be seen as a new version of Paracelsian doctrine of signatures, already refuted. Therefore, what good can be in reducing through a formula a substance’s name to a number? It is nothing but to transform one conventional alphanumeric code into a new conventional numeric code. Can we perform mathematical operations with such codes? Of course we cannot. Can we deduce any property or therapeutic indication of substances exclusively from their code-numbers? I will ask the obvious: can anyone deduce the shape, color and flavor of an onion merely from its name? Moreover, if I call it “onion”, “cebolla”, “Allium cepa” or “435620”, does anything change but the name?

If we were to accept the two aforementioned premises, the missing step is to find a way to relate the hidden number “of the patient” and his or her disease and the hidden number “of the remedy”. How can this be done? Voilà! – the author says: by translating into Latin the name, nickname, place of birth, address and parents’ name of the patient and then apply the mathematical formula to reduce all

these data to a number. In this way, we can now compare “the patient’s number” and “the remedies’ numbers”.

Doubtlessly, a novel and highly original form of similarity, making reference to old fashioned signs and symptoms unnecessary. Any resemblance to astrology is mere coincidence.

However, let us ask: who were the so-called scientists who developed this formula? Where has their work been published? Where can we get more information on the rationale beyond the construction of this hypothesized formula? Where can we check the adduced clinical verification?

And one final, and most delicate issue: homeopaths have no access to any of such data, but are offered easy online access to buy such calculations – and with a considerable discount in case of large orders!

Let us engage now in an exercise of science-fiction and imagine what the history of homeopathy would have been if Hahnemann had asked doctors to send him a check and the list of symptoms of their patients in order to receive back the name of a remedy or even the remedy itself with the name masked.

Homeopathic literature offers countless examples of extraordinary ideas such the one described above. To mention a few examples, the possibility of transforming a glass of water in a homeopathic remedy simply by writing the name of a medicine on a paper and placing it under the glass overnight, or to treat a patient by merely thinking the name of a remedy in his or her presence, as well as conducting homeopathic pathogenetic trials (HPTs) just by thinking on one remedy [2].

A further methodological misconception – of paramount importance, although perhaps too subtle and not evident to everybody - lies behind this kind of approaches. This is: it is not possible to draw scientific knowledge out from ontological or metaphysical ideas in the same way it is not possible to discuss ontology or metaphysics with scientific ideas. Although, ideally it could be hoped that no contradiction ought to exist in knowledge, the natural sciences, ontology and metaphysics are very different fields of study, which employ very different methods and for this reason, it is very difficult to build bridges between them. A clear awareness of this fact is of the greatest importance in order to avoid pitfalls in knowledge and to be able to distinguish quality work from quackery and imposture.

On the other hand, homeopaths can argue that in our days a large number of high quality randomized controlled trials (RCTs) show the therapeutic action of homeopathic remedies, the culmination of this approach being represented by a few published

meta-analyses of such trials [3, 4]. In spite of the scientific significance of RCTs, it is also restricted: very few RCTs were replicated and for this reason, homeopathy can claim effectiveness in a very small number of specific clinical conditions. And even more disappointing is the fact that RCTs do not allow to draw conclusions able to influence on daily clinical practice. In few words, although we must be grateful, tremendous research effort has been deployed with almost no impact on the daily work of homeopaths [5].

It may be asked: is there anything else that can be done? Indeed, there is agreement among clinical researchers that it has been done enough with RCTs. They were intended to convince the scientific and homeopathic communities of the biological activity and clinical effectiveness of homeopathy and high dilutions and this goal was mostly achieved. However, what it is still missing is high quality scientific research whose results can actually improve homeopathic clinical practice [6]. For instance, observational studies of the effectiveness of homeopathic treatment in selected diseases, high quality HPTs, and clinical research aiming to validate indicative symptoms of remedies, as e.g. Rutten's likelihood project [7].

Any of the above mentioned projects require large numbers of patients. And a practical solution is to gather many homeopaths to work together. This is the seed of REDIMEH Ibero-American Integrative Network for Clinical Research in Homeopathy [8]. It is structured in a novel horizontal way, without any political goals, but with the exclusive aim of joining efforts to obtain sufficient clinical data to draw out valid conclusions. Data collection will be spontaneous, yet not disorderly; what is sought for is for members to work together at a same time in well defined high quality clinical protocols. In this context, a new concept was suggested: protocols will be freely accessible to the homeopathic community.

REDIMEH operates simultaneously in two languages, Spanish and Portuguese, which are very similar and allow to cover a territory extending from Mexico down to Argentina including Portugal and Spain. This linguistic characteristic facilitates communication among researchers across many

countries allowing to enriching their work through exchange.

REDIMEH is open to each and every homeopathic practitioner with sufficient training and experience and willing to invest his or her time in improving homeopathic science through the production of reliable knowledge. Inclusion in REDIMEH can be also made at the institutional level.

REDIMEH was created in May 2009 and in this initial phase it is beginning to apply a protocol on atopic dermatitis (PH-DA). Seventy homeopaths from eight countries have already enrolled in this protocol. PH-DA can be downloaded at REDIMEH website, where also more information can be obtained [8].

References

- [1] Universidad Candegabe de Homeopatía. Buenos Aires: Universidad Candegabe de Homeopatía. 2009- [updated in 2009 Jun 10; cited 2009 Jun 22]. Available from: www.universidadcandegabe.org.
- [2] Vithoulkas G. British media attacks on homeopathy: Are they justified? *Homeopathy*. 2008; 97: 103-106.
- [3] Kleijnen J, Knipschild P. Clinical trials of homoeopathy. *BMJ*. 1991; 302: 316-323.
- [4] Linde K, Clausius N, Ramirez G, Melchart D, Eitel F, Hedges VL, Jonas WB. Are the clinical effects of homeopathy placebo effects? A meta-analysis of placebo-controlled trials. *The Lancet*. 1997; 350(9081): 834-843.
- [5] Fisher P. Prove it or improve it? *Homeopathy*. 1996; 84: 129-130.
- [6] Fisher P. The singer, the song or both? *Homeopathy*. 2009; 98: 75-76.
- [7] Rutten ALB. Statistical analysis of six repertory rubrics after prospective assessment applying Bayes' theorem. *Homeopathy*. 2009; 98: 26-34.
- [8] Rede para a integração ibero-americana da investigação clínica em Homeopatia. Buenos Aires: REDIMEH. 2009- [updated in 2009 Jun 01; cited 2009 Jun 22]. Available from: www.redimeh.org.



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