

The principles of homeopathy

The Law of Similars

The basis of homeopathy is the Law of Similars, also known as "*like cures like*" or *Resonance*. This principle was first documented over two-thousand years ago by Hippocrates who declared *homeopathy*, the treatment of problems with Similars, to be superior to that of *allopathy*, the treatment with opposites. The latter is the principle on which today's conventional medicine is based. Medical interventions are designed to oppose or fight infections, cancers and other diseases.

The founder of homeopathy, Dr Samuel Hahnemann (1755-1843), developed this approach into the first principle of homeopathy, The Law of Similars. In homeopathy, a substance which causes symptom clusters in a healthy person are used to cure a sick person suffering from these same symptoms. For instance, an onion which causes symptoms such as irritation of the eyes and tears, can be used to prepare a remedy for hay-fever. Given in a very dilute form, this onion-based remedy (*Allium cepa*) will induce a healing response in the hay fever sufferer who has streaming eyes and nose.

Proving

In order to discover what kind of symptoms a substance can produce in a healthy person, the homeopath can utilize a number of sources. For example, if a substance is very toxic, then many of the symptoms induced are familiar because of the number of people or animals who have fallen ill from it. Homeopaths can also tap into the study of traditional medicine as a rich source of information on many substances.

In order to discover the curative properties of a broader range of substances, Dr Hahnemann introduced a method of testing called 'proving.' In a proving, healthy individuals, the provers, take a small dose of a substance and by very carefully observing themselves document any symptoms which are at odds with their normal state. By this method symptoms connected to the substance are discovered.

The smallest possible dose

A remedy that is based on the Law of Similars can induce health in a patient without causing unwanted, dangerous side-effects. Hahnemann designed a process that he called Potentization, which involves a series of steps of diluting and shaking (dynamisation) a solution containing the substance. Starting with a *mother tincture* (a first dilution of the substance in water and medicinal alcohol), the substance is further diluted and shaken in a series of successive dilutions. Using this process, a homeopathic pharmacy can produce a wide variety of potencies of a remedy.

Through the potentization process, the chemical substances which could cause side-effects are diluted further with each step. Water has the ability to 'remember' what substances have been dissolved in it. (This has been proven by modern day leading material scientists (Lo, et al., 1996; Elia and Nicoli, 1999; Rey, 2003). By shaking the fluid after each dilution, the healing information of the substance is imprinted into the water. Through this 'potentization' process a homeopathic remedy is produced. That is, a substance which could induce certain symptoms in a healthy person is processed in such a way that it can then produce a curative response in a sick person suffering from those same symptoms. It can induce this healing response in the diseased individual without causing side-effects. Thus, homeopathic remedies, applied in the correct way, can be safely used for everyone, including small babies and pregnant women.

Individualizing remedies for each person

When we see individuals suffering from the 'same complaint,' such as a medical diagnosis of diabetes or tuberculosis, we can still observe many differences in the way that the illnesses affect each individual. In migraines, for instance, the location of the pain can differ, as can the time and circumstances, the possible causes, the things that make the pains worse or better, etc. In addition to

all these signs and symptoms of the main complaint, a homeopath will also take other things into account. For example, other symptoms, the history of the patient and that of the family; mental, emotional and physical characteristics; dreams; sleeping habits; dietary habits and many other factors. No two people are the same and to apply the Law of Similars with the best results a homeopath needs to find a remedy which best matches the totality of the symptoms in that patient. Here, those symptoms which stand out because they are strange, rare or peculiar are the most important. In these the individuality of the patient is most visible, that which makes him or her different from other people. Those symptoms which are very general, in that most people have them, are considered to be among the least important.

As if one person

There is an exception to the rule to individualize for each person, and that is in all collective conditions, like epidemic diseases or collective psychological traumas. In these diseases and emotional stresses that affect groups of people, the personal history and traits are not important because they have little or nothing to do with the disease or the problems of the entire group. We could also say that these diseases do not come from within the individual persons comprising the group, but come from within the group or society as a whole that the individual belongs to. In the case of these collective diseases we now do not need to individualize on the level of each patient but on that of the disease as expressed in the whole group.

The role and purpose of an epidemic disease is on the level of the collective, even though it is expressed through individuals who belong to that collective. So here we need to collect all the symptoms that are typical of the disease and make it different from other diseases. This totality of a disease complex of symptoms Hahnemann called *Genus Epidemicus*. Again in this application of homeopathy, anything strange, rare or peculiar for a specific disease is of the utmost importance in defining a remedy which matches the totality of the symptoms of the disease. To find this remedy, homeopaths bring the symptoms of a group of patients suffering from the same disease together as if they were one person. All symptoms typical for individual persons are excluded, and all symptoms typical for the disease are included. So if, for instance, a person always worries about money matters and during the epidemic illness does this even more so because now he cannot work, this is not typical of the disease and can be ignored. But, if a person is always very thirsty and during the illness refuses to drink at all, this symptom, thirstlessness, is typical for the disease and is to be included in the analysis. Once all the symptoms of the disease have been gathered in this way, a remedy can be selected that best matches the totality of the disease, and this remedy can be given to all those who suffer from the same condition.

The history of homeopathy

Before discussing future ways of applying homeopathy on a world-wide scale it is interesting to go back in time to the nineteenth century and early twentieth century, the peak time of Western acceptance of homeopathy. Homeopathy was then at its best, in terms of public acknowledgement and scientific recognition, and also in terms of clear and significant therapeutic results. The reason for this is that homeopaths were using homeopathy's best asset – the treatment of epidemics.

Genus epidemicus - A remedy for a disease

Hahnemann himself had already laid down the foundation for successful treatments of epidemic diseases. The rules are very simple:

- Take a good number of cases and put their symptoms together
- Include all disease specific symptoms
- Exclude all patient specific symptoms
- Select one or more remedies based on the disease totality

This totality he called the '*Genus Epidemicus*' of the disease.

In the American Homeopath – 'As If One Patient' - *Greg Bedayn* (1998) describes Hahnemann's discovery of how to treat epidemic diseases:

"In 1799 *Hahnemann* first applied the genus epidemicus; the single homeopathic remedy to treat a similarly affected population, during a scarlet fever epidemic he treated in Königsutter, Germany. The story of how he accidentally discovered the genus epidemicus is interesting: There was a large family that had members with scarlet fever.

Hahnemann noticed that one of the children who had been taking Belladonna for another reason did not have symptoms of scarlet fever. He discovered that by giving the other members of the family Belladonna, as a prophylactic, they did not get scarlet fever. Hahnemann concluded that a remedy that rapidly cures at the onset of an illness would be the best preventative.

This serendipitous discovery led Hahnemann into developing the principle of genus epidemicus - where if one takes the symptom-totality from each person in an epidemic population and then puts those features together into one case, as if one person, and gives the indicated simillimum (a remedy selected that in its signs and symptoms is similar to the disease) to the entire affected population - that it will cure."

This approach, as Hahnemann found out, worked well. Bedayn continues:

"The curative results of the genus epidemicus were so positive during the epidemics in the ensuing decades that they not only cured the majority of those affected where nothing else had worked, but they also drew international acclaim towards homeopathy, the new, the rational, medicine. There is something intrinsically powerful about the success of homeopathy in curing large populations that is undeniably attractive to anyone gifted with the power of observation, and it was through these early cures with epidemics that Hahnemann was able to quickly and widely spread the word: Homeopathy. It was from his discovery of the genus epidemicus that Hahnemann later developed his theory of miasms; the taints that color and shape all family trees, as representing the basis of chronic disease."

Hahnemann later writes about the genus epidemicus principle in his 'Organon' §101:

"It is possible that a physician meeting with the first case of a certain epidemic should fail to perceive at once its perfect image, because every collective disease of this kind will not manifest the totality of its symptoms and character until several cases have been carefully observed. But after having observed one or two cases of this kind a physician may approach the true condition of the epidemic that he is enabled to construe a true characteristic image of the same and to discover the true homoeopathic remedy."

Hahnemann broadens this general principle in §102, when he says the complete knowledge is only to be obtained in a perfect manner by observations of the affections of several patients of different bodily constitutions.

Using this as-if-one-person approach, homeopaths impressed the medical establishment with their results. Here are a few quotes to illustrate this:

- *Epidemics in general:*
"In epidemics the mortality per 100 patients is 1/2 to 1/8 in homeopathic hospitals (a century ago there were several homeopathic hospitals in the US) compared to allopathic hospitals."
(Bradford, 1900)

"Homeopathy had become very popular in North America during its early years due to its amazing successes obtained by the 'old guard' during the epidemics - epidemics of diphtheria, scarlet fever, cholera, malaria, yellow fever." (From its Roots Upwards, Interview with *André Saine*, N.D., D.H.A.N.P., Vienna January 1994.)

"Ever since Samuel Hahnemann homeopathy has time and again been able to successfully treat epidemics/pandemics with a small number of remedies." (*Stahl, Hadulla, Richter*, 2006)

- *Cholera in Europe:*

"In Russia in the years 1830 and 1831 homeopathy was used to treat 1270 cholera patients in the provinces Saratoff, Tambtoff and Twer: 1162 of those were cured, 108 died... similar rates in the results of homeopathic treatment for cholera were observed in Hungary, Mähren and Vienna." (Gebhardt, 1929)

"When in the year 1854 cholera came to Palermo 1513 soldiers fell ill ... Of these 902 were treated with allopathy of which 386 died, a bit more than 42%; 611 were treated with homeopathy, of which only 25, so almost 4%, died.

In the abovementioned years cholera also visited the Caribbean, and on the 'pearl' of these islands, Barbados, 2113 people fell ill. Of the 346 treated with allopathy 154 died, but of the 1767 treated with homeopathy only 370." (Gebhardt, 1929)

- *Cholera in USA*

"3% of the cholera patients under homeopathic treatment died (Cincinnati 1849). Mortality rate of cholera patients under allopathic treatment was 40-70%." (Humphreys 1849)

- *Spanish influenza:*

"Perhaps the most recent use of homeopathy in a major epidemic was during the Influenza Pandemic of 1918. The Journal of the American Institute for Homeopathy, May, 1921, had a long article about the use of homeopathy in the flu epidemic. Dr. T A McCann, from Dayton, Ohio reported that 24,000 cases of flu treated allopathically had a mortality rate of 28.2% while 26,000 cases of flu treated homeopathically had a mortality rate of 1.05%. This last figure was supported by Dean W.A. Pearson of Philadelphia (Hahnemann College) who collected 26,795 cases of flu treated with homeopathy with the above result." (Winston 2006)

"Homeopathy has been used with great degree of success in influenza and other epidemics for 200 years ... In 1918 flu pandemic homeopaths reported around 1% mortality in their cases, while conventional doctors were losing 30% of their patients." (www.lifemedical.us/flu)

NB: The Spanish influenza virus we know now was an avian virus. Approximately 40 million people died in just 18 months.

"Dean W.A. Pearson of Philadelphia collected 26,795 cases of influenza treated by homeopathic physicians with a mortality of 1.05%, while the average old school mortality was 30%. Explanation: conventional treatment of folks with flu caused at least 8038 deaths while the homeopaths lost only 281 patients. That is a statistically significant difference."

"Thirty physicians in Connecticut responded to my request for data. They reported 6,602 cases with 55 deaths, which is less than 1%. In the transport service (during WWI) I had 81 cases on the way over. All recovered and were landed. Every man received homeopathic treatment. One ship (using conventional therapy) lost 31 on the way. H.A. Roberts, MD, Derby, Connecticut." [Explanation: a number of homeopathic physicians served in the Armed Forces during WW1 and made use of their homeopathic training.] (Dearborn, 1923; Dewey, 1921)

"The most severe epidemic of all time was the Great Influenza Pandemic of 1918. Twenty percent of the entire world population was infected and 20-40 million people died. The epidemic was so

devastating that the average lifespan in the United States was decreased by ten years. During this epidemic homeopathic medicines were used widely both for treatment and as prophylaxis. The average mortality under standard treatment ran from 2.5-10%, while 1% or fewer patients died under homeopathic treatment." (Hoover, 2006)

- *Yellow Fever in USA:*

"Homeopathy had become very popular in North America during its early years due to its amazing successes obtained by the "old guard" during the epidemics - epidemics of diphtheria, scarlet fever, cholera, malaria, yellow fever - especially yellow fever; the death rate for that was 55% when allopathic treatment was used, but less than 5% in cases with homeopathic treatment; and it was the same for cholera. It is here with the 'old guard' that homeopathy obtained its golden letters." ('From its Roots Upwards', Interview with *André Saine*, ND, DHANP, Vienna, January 1994.)

These are clearly impressive figures, certainly if we compare them with the results of contemporary regular treatment. If homeopathy could come up with similar significant results in our time and age, general acceptance might follow a lot easier. Why is there such a huge difference in the outcome of old and new studies? One reason is that these old figures concern epidemics, whereas more recent studies mostly concern individualized treatment of chronic diseases. The great advantage of the homeopathic treatment of epidemics is that the individuality of the patient is not an issue, nor are the skills of individual homeopaths. Once a successful group of remedies is identified, any homeopath will be successful. The collective case is a lot simpler and the skills of the homeopath have less influence on the results. Another reason why these amazing figures stand out in the earlier records is that antibiotics had not been discovered yet, so the means to treat epidemic diseases were largely absent in allopathic hospitals. And as we know from Hahnemann, a lot of what conventional medicine did rather speeded the process towards death, as in the practice of therapeutic blood letting.

What happened since 1918?

Homeopathy and Medicine were equally well accepted by the public towards the end of the 1800s. The medical doctors in the US lobbied the government in the early 1900s and legislation was passed giving medical doctors the exclusive right to diagnose and treat medical conditions. With the US taking the lead in the world, homeopathy went into a decline. Homeopathic hospitals were closed. The light of homeopathy was kept alive by smaller number of homeopaths, but many lost track of what we call Hahnemannian homeopathy and as a science little progress was made.

This changed in the last decades of the 20th century. Homeopathy flourished again and especially in the treatment of chronic diseases and in the understanding of the materia medica (description of all researched homeopathic substances including all their signs and symptoms), great advances were made. Soon the materia medica started to expand, many new remedies were introduced, and new approaches to case analysis and materia medica research saw the light.

If we look at homeopathy today, the use of the as-if-one-person approach for epidemic diseases is marginal. In part, this is because epidemic diseases like those mentioned above hardly play a role anymore in the West. However, if we look at the state of health in the rest of the world we see that epidemics still influence and take the lives of millions. With people migrating as never before and with virologists warning for a new avian flu pandemic, the West also has to reconsider how to address epidemics.

Immunizations against viral illnesses, such as a bird flu epidemic, are far from solving this problem. It is impossible to predict the specific genetic map of the viral mutation that will develop, and without that knowledge, immunizations for the new variety of influenza virus are likely to be ineffective. It has also become very clear that Big Pharma does not and will not have all the answers and actually creates

many of the problems we are facing today. Conventional medicine is the third leading cause of death in the modern world, ahead of automobile accidents and all other causes other than cancer and heart disease (Lazarou, Pomeranz and Corey, 1998; Null, Dean, Feldman et al., 2005). Hahnemann concluded in his day that the suppression of infections is a causative factor for chronic diseases to emerge, meaning that conventional medicine is co-responsible for the increase of conditions like cancer and heart disease (which are numbers one and two on the list of leading causes of death today) as well (Hahnemann 1828). The simultaneous rise in the use of antibiotics and the prevalence of chronic diseases suggest he may be right.

Also more and more virulent strains of bacteria and viruses are created as a result of the war against them. The term used for this is therapy resistance, meaning that the bacteria or viruses are no longer killed by the medication used. For the major epidemics in Africa, malaria, TB and HIV this is a serious problem. The problems surrounding resistance are finding increasing acknowledgment within the healthcare community.

"The threat of large-scale drug resistance is 'real and scary.'" (Marani 2007).

"Resistance develops naturally, in response to the selective pressure from drugs or from the body's own immune system." (World Bank 2003)

The World Health Organization (WHO) is aware of these issues and so should any doctor be, but an alternative has not been developed because the alienation of the diseasing agent as an enemy that should be extinguished is deeply seated in mainstream medical philosophy. Fighting bacteria with antibiotics simply leads to ever more resistant strains. Hospitals have now become dangerous places to be because of 'super-infections' with virulent, antibiotic-resistant bacteria.

Building on past lessons and knowledge

Infectious diseases and miasms

Before discussing how I perceive homeopathy can constructively address the collective issues of our time - as expressed in epidemic diseases, collective trauma, and cultural illnesses – let's review some of the lessons of history.

In his Organon at §78 Hahnemann declares that true natural chronic diseases are those that arise from a chronic miasm. (A miasm is the result of the suppression of an infectious disease on an organism that can cause signs and symptoms later in life and can also be passed on to the next generation. Hahnemann postulates these miasms are the very basis of chronic diseases) (Hahnemann 1810)

In his analysis Hahnemann defines three miasms: psora, sycosis and syphilis. In modern terms, psora could be seen as the mother of all chronic diseases, as Hahnemann in his analysis concludes that ultimately all other miasms would have grown out of this one.

According to Hahnemann uncured miasms cannot be eradicated by the life force (§79) and only homeopathy can do this. This may be too bold a statement, as I believe the 'like cures like' principle is broader than homeopathy but a general law underlying all creation.

Further miasms have been recognized since the time of Hahnemann, although not all homeopaths are accepting them. I have no doubt that somewhere in the future these will be broadly accepted and it will be recognized that many influences besides the three infectious diseases Hahnemann pointed out, determine states of health and can cause a miasmatic disturbance.

I propose that our understanding of miasms needs to be updated to be able to bring homeopathic treatment of collective issues to a higher level in today's world.

Miasms and process

My own theoretical understanding of the miasms underwent a revolutionary change based on an accidental observation that I made. I was fascinated to find the work of Stanislav Grof (a Czech psychiatrist who later moved to the US) on the birth experience (Grof, 1995).

All the miasms homeopaths have come to recognize (e.g. psora, sycosis, syphilis, tubercular, cancer, leprous, etc.) can be clearly retraced to a certain phase in the birth process, and the main remedies representing them can be understood using the symbolic language of that aspect of the birth experience. Since birth is a process, it became clear that miasms are related to development, and each of them to a specific phase or theme in development, both on an individual as also a collective level (van der Zee, 2000).

The birth process shows us life in a nutshell. All phases of human development and of the individuation process are represented. Analysis of an individual birth shows amazing similarity to the states of physical and psychological health and illness observed later in life, so the birth experience already displays the central theme of an individual's life. Birth is not causing that state but expressing it, since in cases where there is information from pregnancy, conception or previous life experiences, the same patterns can be observed.

Case example:

A person with anxiety disorder in narrow places that seemingly started after a history of drowning may show an earlier history of severe whooping cough, a birth history of near-suffocation, an anxious situation the mother experienced during pregnancy that points to the same remedy indicated for the child, and images of a tsunami coming up in regression therapy.

Phases of birth and miasms:

- The onset of birth is related to Psora (departure, learning to take care of oneself, formation of the persona);
- The dilatation phase irreversibly entered by the Tubercular miasm (longing to return to paradise and resenting being 'fixed' on any level; fighting socialization);
- The dilatation phase itself by Sycosis (fixed, victim, powerless, no exit, identification with the shadow);
- The transition from dilatation to the propulsion phase by the Cancer miasm (taking on responsibility for others but insufficient care of and space for oneself);
- The propulsion phase itself by the Syphilitic miasm (death-rebirth struggle; anima and animus issues; egotism versus altruism); and
- The moment of birth to the Acute miasm (sudden change, seeing the light).

See more on the marked analogy between Hahnemann's miasms and the stages of birth in *Miasms in Labor* (van der Zee, 2000) and *Homeopathy for Birth Trauma* (van der Zee, 2007).

From my work on the miasms the following conclusions can be drawn:

- Miasms have a role and serve a purpose. In homeopathy we have only highlighted the pathological side of them, the results of something going wrong during development. From analyzing each miasm and its corresponding phase, it becomes clear that each cultivates qualities in humanity and plays a role in the individuation process. For instance, if one suffers from a situation that one perceives as impossible to be changed, a quality like endurance is nurtured, along with love in the form of friendship and loyalty with others who are in the same position. Dissociation can be a pathological expression of an inner escape from a painful situation but becoming free from identification with the ego is a positive side of the same miasm.

- Disease induces change within an individual, and miasmatic diseases that we could also call collective diseases, induce change within society, the group, tribe, nation or mankind as a whole.
- Diseases and miasms induce the development of qualities within an individual and within humanity. Miasms are subconscious Archetypes that pervade not only the psyche but also the physical form. If the normal process of development and growth is blocked, diseases can manifest in order to bring this to awareness and to induce the changes needed to restore a healthy, balanced state of being.
- Diseases and miasms are both the problem as well as invitations to growth. Diseases and miasms are the teachers of mankind, and in infectious diseases, microorganisms carry the message.
- About 95% of our DNA originated in the dawn of our evolution from viruses and bacteria. This means that these germs today bring pieces of information to us and integrating these pieces is a significant part of what drives evolution. This also makes very clear why killing the bug, allopathy, can never support the role and purpose of the disease, and forces the organism to acquire the same lesson following a different route, one that may involve even more suffering. This is the deeper meaning of suppression of individual and collective diseases and miasms and the cause of chronic diseases.

Manifestations of miasms

- *Symptoms* are a sign of the Dynamis (Life Force) restoring balance (Hahnemann 1810)
- A *disease* is a combination of symptoms
- A *disease* is a sign of the Dynamis restoring balance in an individual by bringing it to a higher level of functioning. The fact that balance is restored does not mean that the individual is brought back to a previous state, but rather moved on to a new one that includes the qualities induced by the disease.
- An *epidemic disease* is a sign of the collective Dynamis restoring balance and inducing growth and awareness in a group.
- *Miasms* can be expressed in humanity through a variety of afflictions.
- *Miasms* are a sign of the Dynamis restoring balance and inducing growth in the collective.
- Epidemic outbreaks are acute collective manifestations of this process involving a large group, whereas miasmatic diseases are more of a chronic expression of the same energy afflicting those individuals that apparently are working on the same issues in their individual development.
- Epidemics that are endemic for long periods of time, like malaria and TB, are concerned with major shifts in humanity that take many generations.

Since 2004 I have been increasingly involved with the treatment of epidemics in Africa. This started with AIDS, but gradually has come to include many more epidemic diseases as also representing manifestations of collective trauma. It was Peter Chappell's work with AIDS that made me decide to make the treatment of collective diseases my main focus. (Chappell 2005) I witnessed spectacular results with his remedy PC1, first in Malawi and later, also in other African countries. I came to understand that in homeopathy we overemphasize the individuality of problems a patient presents. The majority, if not all so-called individual problems are expressions of universal themes, and the collective roots of these themes can often be traced back in the life of the individual and his/her family or culture. The expression in the individual person can be unique, asking for an individual simillimum, but there are many cases where if we look deep enough we can discover roots, miasms if you like, that are collective. Let me give you an example.

Case example: *55-year-old woman with a deep pain*

A, who was born in 1947, had suffered as long as she could remember from a deep pain, a grief that is bottomless. In the history of her personal life there were certainly reasons for grief and pain, as her

mother had been severely depressed and therefore absent for A. throughout her youth. Many of A's symptoms could be well understood in the light of this history. But somehow, the depth of her pain was of a completely different league. As I experienced it in interviewing her, it exceeded by far the degree of depression one would expect in a case of the lack of motherly support and love.

A. said: "It's like a very old well of pain. As if I was losing grips. As if I was losing contact with reality. Going to a deep place where this was lying. It is a completely different world, with strong emotions and loneliness. Being cut off. As if everything is useless. As if I can already see the end of things. The grief and pain there are so huge and I don't dare to feel the depth of it."

When she later told the whole family had been killed in the Nazi concentration camps, the depth of her pain revealed a more understandable explanation. She was clearly suffering from something that was lying beyond her personal history, in the collective trauma of genocide.

In 2005, when Peter Chappell was in Rwanda to treat AIDS, he soon found that in addition to AIDS, people were still suffering from the genocide that had taken place ten years before. He recognized this to be a collective trauma that should be dealt with using the genus epidemicus approach. He prepared a resonance that he called PC War/Genocide Trauma and gave that first to his patients, who responded remarkably well. All of the symptoms subsided rapidly, including the feeling as if it had happened yesterday, the flashbacks, nightmares and all other ways in which this traumatic miasm (PTSD) was being expressed in them (Chappell, web reference). Just as the individualization of homeopathic remedies for single individuals will vary with the treating homeopath, so the individualization of remedies for collective trauma may vary with the focus of the homeopath on various causes, disease and symptom clusters and other demographic factors.

So I decided not to individualize the treatment of A. but to start treating the genocide trauma using the above mentioned PC Resonance: PC304 x 5 drops daily. The response was wonderful!

Five weeks later, A. reported: "I am very much surprised. There is a change I had never expected to be possible. I feel a completely different person. A dramatic change. For a short period I continued crying but since then it has not come back. It is a completely new period. I feel optimism, trust, love for life. It is miraculous. This weeping has travelled with me all of my life. The last couple of years it was constantly there. Before that in episodes.

I dream again, quite lucid, remember them better. My sleep is much deeper and I waken up less. On waking up in the morning I am okay.

No more panic or fear of being abandoned. I can continue with my life like this. I'm no longer afraid to move on, to be forsaken. A great trust has come. It is okay what happens or is about to happen. There is more peace inside. I can enjoy the simple things of life again. Before this all joy was lacking.

Before I started taking this remedy I had the feeling being wiped out, taking no space. I just as well might not be there. Now I take a space and that has meaning."

Two months later there was no further improvement and we discontinued the drops. She says now: "A complete layer has been dealt with, this layer of collective grief. The insecurities I have now have to do with every day practicalities. Like building my house. Then I feel a lack of stability and go back to the time our family was broken up. Like a sea without borders. I love the sea because it gives space, quiet and openness.

In the morning I have a bit troubles starting the day, a little sadness. In the evenings I am feeling great. What I didn't tell you before is that I have a strong fear of spiders. Since the last couple of months my menses has returned."

So she's free now from the collective trauma and the complaints she still has now she relates to her own history, for which now a personal simillimum is indicated.

Regarding her personal trauma, the broken relationship with her mother is essential. A. was disconnected from her mother, causing feelings of forsakenness and insecurity. This definitely happened at the age of nine when her mother could no longer cope, but also before that time her mother was depressed and not the source of warmth and comfort she needed. Later in her life we see a tendency towards bulimia with a desire for sweet dairy products, including ice cream and chocolate.

In short, she received one dose of Lac humanum MK, the function of which is to heal dependency issues concerning the mother, and eleven weeks later she reported: *"I'm beautifully out of the dependency in my recent relationship (a friendship she made after her divorce). I'm on my own feet now. There have been no dips any more and my base has become firmer. All the symptoms that have improved on the first remedy never returned. Since this last remedy my asthma is a lot better, my stomach problems are gone and I no longer have abdominal pains.*

I dream about my recent relationship. I dreamt of getting a clear view by literally putting on other glasses to be able to see further away."

Three months later: *"I'm totally fine and suggest to cancel the appointment. I'll contact you in case anything new will come up."*

Of course we do not know what would have happened had I started with Lac humanum, but I honestly doubt whether she would have responded as she had done now. By fully clearing up the collective trauma, just one dose of her simillimum was enough to clear up all the remaining symptoms and to my knowledge a repetition of either remedy has never been indicated.

Trauma en miasm

Let us look at an example of collective trauma in our time:

Kashmir (Washington Post September 2008) "The number of patients seeking mental health services surged at the state psychiatric hospital, from 1,700 when the unrest began to more than 100,000... The patients have insomnia, learning disabilities, anxiety disorders and what Kashmiri therapists call the 'midnight-knock syndrome,' a fear stemming from the many pre-dawn raids by Indian security forces aimed at rooting out suspected insurgents..."

Mental health groups estimate that 60,000 Kashmiris committed suicide last year, a record number, said Mushtaq Margoob, head of the Government Psychiatric Diseases Hospital in Srinagar...

More than 15 percent of Kashmiris are afflicted with post-traumatic stress disorder, according to a recent study by Margoob ... In January, the army recruited 400 psychiatrists after more than 100 soldiers, including officers, killed themselves..."

The symptom in each of these people described above may differ, but it is very clear to me that an as-if-one-person approach would be very effective in a vast majority of the cases. And this is only Kashmir. I'm writing this part of the article on my way to Burundi and East Congo, another area full of heavily traumatized people. Just watch the news for some time and you can see that many millions of people are suffering from collective trauma. It's the collective that is ill, out of balance, and it's the collective that needs to be treated. If we don't see that and act accordingly, we will never be able to heal these collective derangements. For in the time we need to treat one single traumatized patient using individualized treatment, ten new ones get traumatized. It is also a lot more practical to start with a genus epidemicus remedy – genus traumaticus if you like – and to later individualize those cases where the collective approach is not enough. Following such a strategy, we would be able to help many more patients and perhaps even be able to induce a real change in the collective.

It seems as if unresolved trauma lies at the basis of many chronic conditions. If we look at the language of Vital Sensation (the deepest way in which a patient experiences his state, for instance a sensation of being scattered to pieces) these are all expressions of trauma. These are sensations fitting a traumatic experience to a life form.

Further ideas on the role of trauma:

- An *Individual Trauma* can express itself in an *Individual Disease*. This is something we know from experience. For instance, an unresolved grief can be expressed in recurrent throat infections, or as a result of sexual abuse a woman can have recurrent bladder infections.
- Trauma is hereditary. See the case above. See also the work of Hellinger (www.hellinger.com). If we go a few generations back, there are lots of traumas that can be at the root of symptoms we come across in our patients. These include wars, periods of starvation and crashing stock markets, stillborn babies, rape, incest, and so on.
- A *Collective Disease* can follow a *Collective Trauma*. A good example is cholera following the horror of war. It is interesting to see that for instance Cuprum is a remedy fitting both war (the typical Cuprum state is that of a soldier) and cholera. Of course there are also circumstances on the physical level like lack of clean drinking water that contribute to cholera epidemics, but that doesn't mean that trauma at the energetic level is not an essential part of the expression of the disease. By looking solely at material manifestations and circumstances, conventional medicine denies energetic disturbances in many conditions. Let's not make that same mistake. Besides that, we know from research that traumatic events cause malfunctioning of the immune system (Segerstrom and Miller, 2004; Smith and Giannoudis, 1998), so circumstances and susceptibility come together to create disease.
- The language of the *Vital Sensation* is the language of *Trauma*. If we read all the different ways a vital sensation is expressed, this becomes very obvious. Whether it is being pressed together, falling to pieces, torn apart, exploded, scattered, and so forth, these are all very physical expression of ways in which the integrity of an organism can be threatened.
- There seems to be a chain reaction:
 - (Collective) trauma → Miasm
 - Miasm → (Epidemic) infections
 - Infections → Genetic damage (genetic trauma) in individuals
 - Genetic damage → Chronic disease
- Collective trauma ↔ Epidemic; a collective trauma can be both cause and effect of an epidemic; if for instance, due to Avian Flu millions of people die, that causes a trauma to many more million survivors. And staying with that example, the fear and panic that comes up if such an epidemic is broadcast is the first symptom of the epidemic, the first way in which the collective shows signs and symptoms before or without the virus itself ever reaching the individual.
- Trauma seems to be Primary. So in the chain of diseases and traumatic events - a limited two-dimensional way of cause and effect - it seems that the wheel starts turning with trauma. However, over the longer term, with accumulated miasms, the cause can be either miasm or trauma.
- Separation, the delusion that we are separated from each other and from the world around us instead of one, the mythological departure from paradise, is the Basic Trauma. (See above for details of the Psoric miasm, the departure from Paradise and the analogy in the birth experience as departure from the good womb and entering the birth process.)

Follow the river to its source

If we look at the role homeopathy can play in the world, it makes sense to analyze what would be the most effective way of using our resources. A valuable but neglected resource is the knowledge on how to heal using the Law of Similars that is known to homeopaths. Regretfully, in many parts of the world there are very few homeopathic practitioners.

- Treating individuals and their miasmatic diseases alone is clearly not enough.
- Besides treating miasmatic effects we can and should treat the causes.
- These causes start as trauma or infectious and epidemic diseases - often based on trauma.
- The roots of miasms lie in collective themes, such as the infectious and epidemic diseases causing them, or the bacteria and viruses instrumental in starting them, and may have nothing to do with the individual who is presenting with the disease.
- To be able to effectively address miasms at an earlier phase, we need to understand and treat the totality of these collective diseases.
- The totality on which we base our prescriptions to treat collective derangements of the vital force (trauma and epidemic diseases) should include the symptoms and the role and purpose of the disease.
- Chronic diseases that prevail in a certain culture or era have strong collective roots. The more prevalent they are the less important an individual approach becomes, and the more important it is to treat the collective issues. Some current examples today include obesity and diabetes mellitus.
- Ideally, we always do both if one approach doesn't fully cure: treat the individual and the collective picture.
- The best practice is to start as early as possible with the collective before it branches off in a variety of individual expressions.

Homeopathy for the World

Following the line of reasoning above, I feel that homeopathy needs to develop a practical approach to make its best asset a top priority. Treating the collective is what we do best and is what has a larger curative and prophylactic impact on humanity. Treating the collective is like using a wider filter that will take out the big chunks effectively. The smaller chunks that it lets through can be filtered out using the more refined filter of individual treatment. By overemphasizing the individual expression of collective issues, our filters are clogged by a lot of collective debris and the effects of individual treatment is therefore often limited.

- The higher purpose of homeopathy on a global level is to know what needs to be cured in the world, a continent, country, society, or other such grouping of individuals.
- For this we need to be able to read the signs and symptoms of our time.
- An epidemic is an expression of a need for collective change.
- Treating today's trauma is preventing tomorrow's epidemics.
- Treating today's epidemics is preventing tomorrow's chronic diseases.
- Healing today's collective diseases is preventing tomorrow's individual diseases.

Impossible?

This sounds very ambitious, and it is. It may take decades to make this vision a reality. Impossible? Here are some quotes from the past that history falsified:

- "Heavier-than-air flying machines are impossible."
- Lord Kelvin, president of the Royal Society, 1895
- "Unworthy of the attention of practical and scientific men."
- British Parliamentary Committee report on Edison's electric light bulb
- "X-rays will prove to be a hoax."
- Lord Kelvin, president of the Royal Society, 1883

To use a more contemporary quote: "Yes we can." With the emphasis on *we*. In theory, this is what homeopathy can. To make this a reality will require dedication and action by homeopaths. At the end of the article I will give some short cases showing what is already a reality using this approach in

Africa and how other health professionals can use new advances in homeopathy for treating trauma and epidemics.

Homeopathy should take its responsibility in epidemics!

The easiest and most practical way of starting to address collective derangements of the vital force is by treating epidemics. There are lots of reasons why this is a more than good idea and why luckily several homeopaths are practicing this, especially in developing countries:

- It creates no side-effects
- It is safe for pregnant women, babies and elderly people
- It is not expensive
- Production, storage and distribution is simple
- It does not induce therapy resistance
- It does not create more dangerous viruses and bacteria
- It has been effective in many epidemics in the past and is effective in today's epidemics

Strategies need to be developed:

- For treating collective trauma
- For treating epidemics
- For treating chronic diseases in case the individual Simillimum alone is not sufficient
- For inducing Wellness and Spiritual Growth – this is another step we can make to enhance peace and health. Provings are usually performed to get to know the healing qualities of a substance. During a proving the 'provers' have a learning experience that can involve spiritual changes as proving a homeopathic substance awakens part of the human potential. Hahnemann himself said that doing a proving is beneficial for the prover. It awakens people and makes them more healthy. By doing provings on a larger scale, including many individuals world-wide, and by selecting substances that we know from earlier provings on a smaller scale can address the needs of our time, collective wellness and spiritual growth can be stimulated.

Genus morbicus

There would be great benefits in broadening the genus epidemicus principle to include other collective conditions that can be approached using the 'as-if-one-person' principle, either with or without complementary individual treatment. The following terms we could use:

- Genus epidemicus
 - Based on the totality of the symptoms of an epidemic disease
- Genus traumaticus
 - Based on the totality of the symptoms of collective or endemic physical and/or psychological and/or spiritual trauma
- Genus endemicus
 - Based on the totality of the symptoms of an endemic disease
- Genus chronicus
 - Based on the totality of the symptoms of a chronic disease

Super Simillimum

The ideal Simillimum for a patient would include all typical symptoms:

- Those that are unique to the patient, including the vital sensation, and
- Those that individualize or are unique to the disease.

In some rare indications we see this combination of patients, like in a Mercurius case of colitis ulcerosa, where the characteristics of the patients and also of the disease all fall within the totality of the remedy.

A New Source

In homeopathy until today remedies have been used derived from material sources. These include the imponderables (remedies not created from substances) like *Sol* and *Magnetis* as these also originate from material sources.

Non-material remedies are made in different ways and homeopaths may have different opinions on what should still be considered reliable and scientific. For instance a container with water and alcohol can be exposed to a source (like the sun, magnets, a microwave) or remedies are being prepared by using machines that can create a wide variety of electro-magnetic waves.

Non-material sources have to my knowledge only rarely been used, and where so have been met with great skepticism. Their basis is consciousness and since nobody can see that under a microscope or put it into a mortar to grind it, the reserve is understandable. This doesn't mean though that this source can and should not be used. See the books of Madeline Evans for *meditative remedies* (Evans 2000; 2005).

I'm sure there are many ways, either based on spiritual practice or technology, in which purposely designed remedies based on conscious understanding can be made. My personal experience is limited to those prepared by Peter Chappell. In his search for a Simillimum for AIDS in Africa, he couldn't find a suitable remedy in the then existing materia medica and found a way to create a Simillimum without the use of material substance using a new technology to directly impinge healing information on water (see www.ARHF.nl). He has named his first remedy PC1 and developed many others later, which together are referred to as PC Resonances.

From theory to practice

In the above I have given several suggestions that the homeopathic community could pick up to further unfold the potential of homeopathy on a global level. Both quality and quantity count if the intention is to create a wave of healing that is strong and specific enough to create lasting change in the collective.

In the following I will share some personal experiences and initiatives that have strengthened my belief that we as homeopaths can indeed extend our healing practice beyond individual pathology.

Global proving

In 2005, with the help of Jürgen Becker, I initiated a global proving. Homeopaths from all continents participated and each took the remedy at the same local time, so you could say the remedy was unfolding going from East to West with the speed of the turning Earth. Three substances were proven with several months in between and the analysis of the first substance proved – Himalayan Salt – is almost finished and will be published in 2009. The analysis of the other two substances – natural silver and Arizona clay – will follow. The hundreds of diaries make a huge amount of information and that processing these carefully takes a lot of time.

The idea behind this kind of proving is that not only can a proving be used to get to know a substance but also to bring about an effect. From group provings we know that often more people besides those who take a physical dose of the remedy show symptoms. In addition, synchronicities are reported occurring in the world, which have meaning in the context of a proving being conducted. The larger the group of provers, the wider the ripple caused by the proving substance will be. With some 200

homeopaths participating, this was a relatively small group and demonstrating an effect beyond the participating individuals may be difficult. A global effect may be impossible to demonstrate. I postulate that if a small proving already tends to include people who themselves do not take the substances it may be expected that with a much larger group of provers a point may be reached where a global effect is achieved, as humanity as a whole will respond. A proving can be compared to laser light in that the proving substance brings the provers into the same frequency of the substance and that with a small group a large effect can be reached. See also the many reports on effects on the collective of relatively small groups of meditators.

More could follow this first global proving and I invite those interested to pick up the challenge. Global provings involving a sufficient number of participants can awake the collective subconscious and thus bring the light of healing consciousness to a humanity that, evidenced by the enormous suffering throughout the world, is in desperate need of it.

Amma4Africa

To create the kind of impact necessary to bring about real and lasting change in the collective and the epidemic diseases and collective trauma that cause suffering to it, many more people will need to be treated with homeopathy. In my experience, the PC Resonances are ideal for that, as their efficacy for some conditions, like AIDS and malaria is, I believe, unparalleled. Treating HIV/AIDS, malaria, gonorrhoea, hepatitis and other diseases in Africa has become incredibly simple. Based on this experience ARHF (Amma Resonance Healing Foundation) has requested Helios Pharmacy to compile a basic PC kit that includes a manual – the Amma4Africa Kit (available at www.helios.co.uk). The manual in a condensed and clear way explains the fundamentals of treating epidemics, trauma and endemic diseases with homeopathy and how to apply the disease specific PC Resonances contained in the kit. A medically qualified person can be taught to treat 14 conditions in a couple of hours. For teaching purposes or general interest the manual is also available in a larger size (van der Zee, 2008).

In Congo the concept has been tried out in a first clinic that now proudly bears the name Amma4Africa Clinic. Alongside the regular medical care they were already providing the PC kit is now used and more and more patients are demanding this new treatment as they hear about the wonderful results. The experience with this simple, practical, cheap and effective concept is very promising and only a minimal amount of supervision by nurses is needed to evaluate results. I have walked the road of years of study and doing practice to be effectively able to stop a running nose. And here in just a few hours people can learn how to treat AIDS, malaria, war trauma, rape trauma, diabetes and other diseases.

I wrote the first pages of this article in November on my way to Congo and Burundi. Now it is the end of January and I'm in Kenya and am just back from my second trip to Congo and Burundi. I cannot hide my excitement about the results I've seen there, nor do I wish to. Potentially this Amma4Africa concept can grow very fast as the investment in terms of time and funds to implement it in a clinic is minimal. The clinic in Congo is already planning to start mobile clinics for villages and to open more clinics in larger communities. Connections have been made from Burundi to Tanzania and Rwanda to also start clinics there. Among the nurses the interest to know more about homeopathy grows and a program with advanced courses to learn to also use classical homeopathy for all those cases where a genus epidemicus approach is insufficient will hopefully follow soon.

Those interested in supporting this work in Africa, either by going there to teach health workers to use the basic kit, or to provide a second phase training in homeopathy, can contact the ARHF by writing to info@ARHF.nl. Together we can make a huge difference.

Amma4India Kit

The intention is to create a similar kit for India where literally hundreds of thousands of homeopathic doctors are running clinics. The vast majority of them use clinical homeopathy, have no books, and work with a handful of remedies. An Amma4India Kit will improve their results considerably,

especially for the many epidemics present in India for which their present arsenal of remedies and knowledge is often insufficient. In addition, the small group that have developed themselves as classical homeopaths could help many more patients effectively if they would use disease specific PC remedies for TB, malaria, dengue fever and other common local diseases, and save the time consuming individualized treatment for the symptoms and conditions that are not responsive to this approach.

Cases of epidemics, trauma, and endemic diseases

Here are some short cases I have seen in Africa most recently. I have data collected on many hundreds of people treated with PC Resonances. Other colleagues have treated thousands of people with epidemic diseases in African countries and India. The experience with PC Resonances for chronic diseases as a complementary or second Simillimum mainly comes from Europe and the USA, but the results in Africa with what we could call endemic chronic diseases like diabetes are so stunning that these promise to become as important and useful there as homeopathic treatments for epidemics and trauma.

The cases below were treated in Burundi and Congo where I went on the invitation of Floribert Kazingufu of Cherezi Foundation. He is setting up clinics in Congo, started an educational project for child soldiers and created a school for 600 children called Land of Hope. It is people like him who make a true difference and can remedy in numerous ways the ongoing tragedies of killing and rape.

Cases of HIV/AIDS

D. is a seven-year-old girl born from HIV-positive parents who are both on Anti-Retroviral medications (ARVs). She herself was tested positive in 2004. Since 2006 she has symptoms. The last CD4 white cell count in June 2008 had gone down (a sign of progression of the disease) but her parents don't know the exact number. She uses bactrim. Her appetite is bad, she has an eruption in the mouth, and lacks the energy to play with other children.

Prescription: PC1AF (HIV/AIDS for female*) once daily 5 drops.

Follow-up two months later: The eruption in the mouth is gone. She is eating normally now, has gained two kilos and plays with other children. She used to be sick all the time but now she is well. Also her sleep has improved. She is just like any other child. As she was using Bactrim for already 2 years the remarkable improvement seen in this case cannot be attributed to that.

Comment: The social and psychological situation for men and for women in Africa is very different in relation to AIDS. Although there are of course many different individual situations the typical issues are that men are supposed to have as many sexual contacts as possible, that women are not supposed to refuse men, that rape is endemic (in many regions has a higher chance of being raped than to learn how to read), that men go to prostitutes, that virgins are supposed to heal a man from AIDS (causing rape at even younger age) that men refuse to be tested or have safe sex whereas women on losing their husbands go for a test and seek treatment to prevent their children to become orphans etc. Therefore, two different remedies have been designed for men and women.

J1. is a six-year-old orphan boy. (Africa today has 1.5 million AIDS orphans!) He was tested HIV-positive in May 2008 and was immediately put on ARVs. His last CD4 count measured in September was 110 units (normal in Africa is 700 or more – AIDS sets in below 200). His weight is 21 kilos (which is very low because he is a tall boy). He suffers from skin eruptions that get infected, and has had malaria and angina many times. He has lack of appetite, headaches and pains all over his body.

Prescription: PC1AM (HIV/AIDS for male) once daily 5 drops

Follow-up after 4 weeks: weighing 22 kilos now. The angina, bronchitis and fever are gone and he has no more malaria.

Three weeks later: his CD4 has gone up to 175 units and his Karnofski score (Performance Measurement Scale) has gone up from 40 (disabled, special care needed) to 90 (normal, minor symptoms).

Two weeks later: All symptoms have now disappeared. He acts and looks like a normal child.

Comment: HIV-positive AIDS orphans have to deal with AIDS and also the loss of their parents due to AIDS. As losing loved ones is part of the symptom totality of the epidemic it may be expected that PC1 as a genus epidemicus remedy for AIDS also covers the loss and grief. My impression with infected AIDS orphans is that PC1 does exactly that, because these children turn into happy children who play with others and enjoy themselves. A complementary remedy to PC1 can be PC309g (adoption trauma), which has been successfully used for orphans in general.

Z1. is a 53-year-old woman who developed the first symptoms of AIDS in 2002 and was diagnosed HIV-positive in 2004. With a CD4 count of 170 units she started using ARVs in 2005. She is also using septrim (antibiotics to treat opportunistic infections). Before she started with ARVs, she weighed 45 kilos. After starting ARVs her weight increased to 62 kilos. From June 2008 she was losing weight again and developed other symptoms of AIDS: tiredness, weakness, cough and chest pains. Clearly the ARVs are no longer working for her (therapy resistance is an increasing phenomenon) and again she was losing weight, down to 57 kilos.

Prescription: PC1AF once daily 5 drops

Follow-up after 4 weeks: Tiredness, weakness and cough have gone, but the chest pains remain.

Three weeks later: The pain in her chest is gone. Her weight has increased with to 62 kilos.

Comment: An initial aggravation is one of the signs indicating that a remedy works. If there is an initial aggravation in AIDS patients, this is often expressed as diarrhea, as the following case illustrates. Also remarkable is the very rapid improvement, as in just two days she is restored back to health.

C1. is a 40-year-old woman who tested HIV-positive in 1998 and probably had the first symptoms in 1992. She had been using ARVs since 2003 but she has become allergic to them and therapy resistance has set in. So she is losing weight and has all the typical symptoms: tired, weak, lack of appetite, muscle pains, joint pains, headache, pain in the abdomen and pain in the chest. Her weight was then 54 kilos.

Prescription: PC1AF once daily 5 drops

Follow-up after two days: Shortly after the first drops she gets more abdominal pain and that same night had a lot of diarrhea – from 6 PM to 12 AM. After taking the remedy she was sweating again, also at night. Ever since the symptoms of AIDS had set in again, she had stopped sweating. Now she is sweating normally again and doesn't need to cover herself up at night any longer, as she is no longer cold (at night in Bujumbura it is usually still quite warm). She is also thirstier now. The pain in her abdomen and chest subsided considerably and all the rest of her symptoms abated.

Two months later: no symptoms whatsoever and gaining weight.

Comment: the longest follow-up with PC1 is now 6 years, including patients who had full-blown AIDS and without treatment would have died. These patients were not put on ARVs as these were not available in the region at that time and solely survived on PC1.

A case of gonorrhoea:

J2. is a 36-year-old woman who was scheduled for an operation two weeks after she was initially seen for homeopathic treatment. For three months she had suffered from intense pains in her uterus and had continuous bloody discharge. These symptoms prevented her from working. She had an ultrasound report in hand demonstrating cysts in her uterus. Two months prior to the onset of symptoms she had an infection, the symptoms of which and the prevalence of the disease suggest this was gonorrhoea.

Prescription: PC180g (gonorrhoea) once daily 5 drops

Follow-up after 8 days: After the first dose she discharged great lumps of blood that looked like meat. The next day the pains were practically gone and she went back to work. Four days later she was beaming and cancelled the operation. Pain and discharge had completely stopped. On a new ultrasound the uterus appears completely normal now.

After 10 weeks: Doing well, no complaints. In church she stood up and testified about the wonderful cure she experienced.

Comment: in Africa I observed the onset of a chronic complaint following an acute infection much more clearly than in Europe. In the above case the time between the infection with gonococcus and the onset of a chronic complaint was brief as also the existence of the complaint. Many more cases have been observed of complaints starting ever since an infection occurred; often having lasted 10 years or more. Recurrent bladder infections and/or vaginitis following gonorrhoea is very prevalent and PC180g (gonorrhoea) is extremely effective. Of course the partner is also advised to take it, and a partner having urinary complaints is a strongly suggestive confirmation of the diagnosis. I've seen lots of cases of infertility with a history of vaginitis, most likely gonorrhoea. It will be interesting to see in the long term how many of these women will become pregnant. Starting with a bottle of PC180g (gonorrhoea) is a standard approach with infertility unless it is very clear there is another cause.

A case of gonorrhoea and malaria:

C2. is 35 years old and over the last few years has had malaria 10 times in a year, with a range of chronic malaria symptoms and also suffered from vaginitis with itching and discharge for 5 years.

Prescription: a combination of curiosity and lacking dropper bottles made me combine PC180g and PC240m in one bottle.

Follow-up after 5 days: In response to the medication she felt a pain in her right shoulder extending to her head, which then went away within a day. The pain she had in the lower abdomen doubled in intensity for a short time and then went away together with the discharge. The itching is a lot better since the discharge has stopped. The headaches and vertigo have improved as also cramps she used to have all over her body. The pain in her joints is completely gone. Her head is still sensitive to the sun.

After four weeks: All symptoms of chronic malaria and chronic vaginitis have gone. No malaria as yet.

After ten months: Feels completely fine. No malaria.

Comment 1: Despite the combination of remedies she responded according the laws of healing. She had a short aggravation, and then was relieved of all symptoms and shows increased health with no malaria up to the latest point of follow-up.

Comment 2: Next to PC1 for HIV/AIDS, the PC Resonance for malaria is the one that has been used most in previous years. Hundreds of cases of acute and chronic malaria have been treated (during two weeks early November 2008) with great success. At a school with 600 pupils the teachers treated a group of children who had had malaria frequently. Their chronic symptoms resolved and they had no malaria any more at the time of the latest follow-up at the end of January 2009. In an untreated group, malaria was still present, so now all children in the school will be treated.

Protocol: PC240m once daily 5 drops on school days for two weeks. One month later once daily 5 drops for one week. After that once a month 5 drops. By the end of 2009 we expect to have a good impression of the results.

Comment 3: In acute malaria PC240m should be given every 30-60 minutes until clear improvement is evident and then the intervals can be increased. Although in an acute attack a patient is supposed to experience relapses of the symptoms every 48-72 hours, once the treatment has started, patients are normally well within 12 hours and stay well. Besides having curative capabilities, the remedy also works prophylactically as once the acute attack is cured the usual short (8-10 days) or long (2-60 days) relapses do not occur.

I have also observed that in many cases of chronic malaria also typhoid is present. On PC240m the majority of the symptoms disappear but pain in the abdomen may remain, for which complementary treatment is needed. PC302v is an option for that. It is not included in the Amma4Africa Kit and should be ordered separately.

Comment 4: I've observed several cases in which there is a relationship between malaria and gonorrhoea. In areas where malaria is endemic the immune system of healthy people is strong enough to prevent them from getting malaria. Gonorrhoea, and likely also the treatment of it with medications, are possible ways of weakening the immune system, and several cases have been observed where people reported that they never had malaria until a couple of months following gonorrhoea. In those cases it is advisable to start with PC240m (malaria) to be followed by PC180g (gonorrhoea) as soon as the malaria symptoms have gone.

A Case of Tuberculosis:

M1. is a 70-year-old woman who had pulmonary tuberculosis for three years. Initially she was treated with antibiotics for six months and was okay for some time but then the complaints came back. She had a painful cough and coughed up blood every day. Her abdomen had become painful from all the coughing.

Prescription: PC300t (tuberculosis) once daily 5 drops.

Follow-up after 5 days: On coming home after the first dose she coughed up a lot of blood, much more than normal. That was the last time she coughed up blood. The cough started to become less painful and after the fourth day the cough completely stopped.

After ten weeks: Still being well, with no further cough.

Comment: Despite her age, this woman showed a remarkable cure, starting with an aggravation within hours after the first dose, followed by a very rapid cure. Usually it takes longer for a patient to become well and my advice now is to take the remedy 2-3 times daily until the symptoms have subsided. Especially in people with AIDS who often also have TB, along with many other infections, the patient may need more time to recover. If in a person with AIDS TB is most prominent, we advise starting with PC300t and to also give PC1 (for the AIDS) as soon as the TB symptoms are clearly subsiding. In cases where AIDS-symptoms are most prominent we start with PC1 and have observed that often the improved immune status is enough for the patient to clear tuberculosis on PC1 alone.

A case of rape and gonorrhoea:

M2. is 38 years old who was raped by two soldiers four years earlier and became pregnant. It was an extra-uterine pregnancy and the fetus was aborted. Now during intercourse she has a lot of pain, "as if they are trying to put a tree inside." She has vaginal infection frequently. Every time she has pain she thinks about the rape, and ever since the rape she is fearful on seeing a man. The joy of sex is gone, and instead she is afraid of it because of the pain. During intercourse anger is stimulated.

Prescription: PC435p (rape and sexual abuse) once daily 5 drops.

Comment: I had used this remedy only once in Holland with good results but had no idea whether and how it would work in Congo, where thousands and thousands of women have been raped by rebels or soldiers.

Follow-up after 10 weeks: "The thoughts about rape have disappeared. I have no longer an aversion to sex but desire it very much now. No more fear; I enjoy it now. When I see men, I'm no longer afraid. No more anger even though having sex is still painful."

Nevertheless, there are still the physical problems of pain with intercourse and vaginal discharge. However, the pain doesn't raise anger anymore and doesn't prevent her from enjoying intercourse.

Most likely the pain is caused by gonorrhoea due to the rape.

Prescription: PC180g (gonorrhoea) - no follow-up yet, but as many women with similar complaints improved on it, I trust it will help her.

Comment: I am very happy with this wonderful result. I have a video with this lady beaming with joy and to me it is amazing to see how just a few drops of remedy could rid her of this past trauma. During my first trip to DR Congo, entering from Burundi into Kivu province, this was one of several people who had been raped whom I treated, and all responded well. We were advised not to go deeper into Congo, but on my second trip it seemed to be more quiet and we went to Bukavu, a city that saw the number of inhabitants double due to streams of refugees. There I treated more women and we hope to be able to set up a permanent clinic there. The women who shared their experiences with me made me aware of how the act of rape is only part, sometimes even a smaller part, of their trauma. Let me present a composite story:

Rebels enter the house and demand that a woman should undress. She refuses, after which they torture her with guns, knives and sticks. Many still carry scars from the severe wounds inflicted. Then several of them rape her in front of her children, or the children have escaped the house and try to hide in the woods. Elderly children they may take with them and kill them later or use them for their purposes as child soldiers. If the husband is there, they first kill him. A way is to lock him into the hut and to set fire to it and then rape his wife. If the husband was not there and finds out about the situation, he usually chases his wife and the (remaining) children away. They walk to the city where she tries to earn some money by carrying heavy loads. She earns just enough to pay some food for herself and the children, but as she cannot pay school fees, her children are expelled from school, and have, as the women express it, no future. So many of these women experience trauma piled on trauma and end up doing the heaviest work for the lowest fee while their children roam the streets.

Although PC435p (rape) and PC304x (genocide/war trauma – see next case) produce wonderful healing responses, it is clear that on a very practical level far more is needed to improve the fate of these women and their children.

Not only in the war-torn regions of Rwanda, Burundi and Congo is rape a huge issue. For instance, in South Africa a girl has a higher chance of being raped than of being taught how to read! One could say that rape is endemic to most of Africa, making it a symptom of a collective derangement. The long-term effects are of course huge. AIDS is just one expression of the underlying trauma. To stop this we can contribute by treating all victims of these behaviors, rapists and raped alike. As the perpetration of rape is often an expression of a history of sexual violence in a family or nation, rapists have very frequently either been sexually abused themselves or carry the trauma of rape of their ancestors with them, very similar to the way infectious diseases of ancestors can cause miasmatic chronic diseases in their offspring.

A case of war trauma:

Z2. is diagnosed with cardiomyopathy and dilatation of the heart. It all started in 1997 in her fourth pregnancy, during the time that the war broke out. One day she woke up and found many dead bodies in the street and saw a dog eating from a dead body. That image has forever stayed with her. “Maybe,” she says, “that caused my depression.”

Prescription: PC304x (genocide / war trauma) once daily 5 drops.

Follow-up after 6 days: After the remedy she first had an aggravation with pain in her chest. That pain is now gone. She is still easily short of breath but the images of the war are gone.

After 2 months: When a few days ago the police were searching the house looking for illegal immigrants, the fear came back and she felt as if her heart broke in two. The images of the war never came back and she no longer dreams of the war. The heart symptoms are the same.

Prescription: Repeat PC304x daily for one week and then start with Cactus 200K one dose per week.

Comment 1: Since the focus of the paper is on collective issues the impression may arise that the normal homeopathic remedies no longer matter. That is far from the truth and the above case shows how regular homeopathic remedies and PC Resonances can complement each other.

Comment 2: Many more people like this have been treated with PC304x with good results. It is the war, the genocide, that is the true totality of the disease and each patient has experienced a part of the horror and expresses a part of the totality of the symptoms.

In the same school where children were lined up to get 5 drops to treat malaria, we also treated several children who had lost parents in the war (400 of the 600 children are orphans!) or had been recruited against their will (dragged from their parents' huts) to become child soldiers. Trauma is all over their faces, their eyes turned inside or staring into a void. When I returned to the school two months later, I interviewed them and they told me how they had improved. Their tormenting thoughts and dreams had stopped. Their teachers reported the children could concentrate now in class and looked so much brighter.

Comment: Many traumatized patients on narrating their symptoms say they have hypertension. What it boils down to is that they have anxiety with palpitation and hyperventilation and often fear of death. They should not be treated by the hypertension resonance, as hypertension is not the correct diagnosis, and can be treated with the PC Resonances for war trauma, rape trauma or injuries if any of these have caused them, or would need a specific homeopathic remedy fitting their state and its cause.

In the Amma4Africa Kit there is, however, a remedy for true, physical hypertension (PC423z) included because of the very positive experiences with it in a clinic in Kenya. There they have treated lots of people with diagnosed physical hypertension with good results.

Cases of diabetes:

Z3. is a 51-year-old woman who was diagnosed with diabetes in 1993. She injects insulin herself daily. She complains of pain in the lower back, has to urinate very often and sometimes the urine doesn't come immediately. Blood sugar levels 345,9 mg/dl (Normal 55-115).

Prescription: PC158n (diabetes mellitus – all forms) once daily 5 drops.

Follow-up 10 weeks later: "I'm no longer urinating a lot of times. The mouth is no longer dry and I don't need to drink a lot of water any more." Her blood sugars have become normal! Already two weeks after starting the remedy the blood sugar went down from 19,2 to 5,6 Mmol/l.

Comment: I had had little to no experience with this remedy and my general experience with treating diabetes with homeopathy was simply not as I would love it to be – freeing people from symptoms and returning blood sugar levels to normal. So these results in Africa have been a big surprise for me. We can have all kinds of convictions and theories but cannot deny reality. I used to be a strong believer in the dogma that homeopathic treatment of diabetes, like treatments of many other chronic diseases, should be individualized. The clinic in Congo has now treated more than a dozen of people with diabetes and a response as in the above example is their general experience! We cannot ignore that and need to understand that an ideal treatment for a chronic disease combines a disease specific Simillimum with a patient specific Simillimum. With diabetes in Africa just the resonance for diabetes alone appears to be enough. Diabetes could be called endemic in Africa and is based on a genetic preposition and also influenced by culture and diet. My impression is that there is a very simple rule that will usually hold true: *the more common a disease is the less it is necessary to individualise for the individual person.*

The following case simply left me speechless.

Z4. is a 40-year-old woman. She was diagnosed with diabetes in 2005 and has taken insulin since 2007. Despite the insulin her blood sugar is still 189 mg/dl.

Prescription: PC158n (diabetes) once daily 5 drops.

Follow-up: She has been followed up by the nurse who reports as below after 10 weeks' treatment. Her tiredness improved quickly and is now completely gone. Before she could only walk short distances but now there are no limitations and she is much more active. Due to this and to the fact that her appetite is no longer increased her weight went down from 75 to 68 kilos. Without consulting the nurse she decided to stop injecting insulin, as her simple reasoning was that she was feeling fine. Without insulin she keeps feeling well and on checking her blood sugar this appeared now to be normal - 78 mg/dl.

Comment: In large areas of Africa people need to pay for their medications themselves. With diabetes we have seen people telling that sometimes, when they can afford it, they take a tablet or an injection. Others can never afford it. With an effective remedy that hardly costs anything this provides a wonderful alternative.

Conclusion

I could include many more cases. They would all add up to the same conclusion.

Yes we can!

1. We can treat endemic and collective trauma effectively and thus by using a genus epidemicus approach heal the collective and prevent whatever else would have grown out of the trauma – repeated trauma, epidemic diseases, chronic diseases. It is important to realize that there are only victims in this - raped and rapists, tortured and torturers etc. It takes a traumatized person to heavily cause trauma to another person. PC resonances could be used in centers that take care of victims and also in prisons for those who violated them. Together, these people have shared the same experience, be it in a different role, and to be healed the same PC Resonance can be used. With genocide trauma in Rwanda this appeared to be the case and there is no reason to suspect this would be different for other types of trauma. One person's nightmare becomes another person's reality to create another nightmare. One person's delusion becomes another person's reality who from then on tends to look at the world through the glasses of this experience, another delusion.
2. We can treat epidemics effectively. Easier than with one remedy for one disease as in the above cases it can hardly be imagined. More ideally than with no side-effects and ignorable costs neither. The consequence is that in countries lacking homeopathic skills nevertheless all suffering from epidemic diseases can be treated homeopathically. All that is needed is a short training and a simple network of storage and distribution
3. And, especially directed to the homeopaths reading this, yes there are diseases that do respond well to a disease-oriented prescription, ideally complemented with individualized treatment. It means that classical homeopathy and clinical homeopathy are allies instead of foes and together can successfully answer to the needs of our time.

Resources

Amma Resonance Healing Foundation – www.ARHF.nl and www.aidshealing.org

Peter Chappell, The Second Simillimum, Homeolinks Publishers – www.homeolinks.nl

Amma4Africa Kit plus Manual – www.helios.co.uk

Amma4Africa Manual – www.homeolinks.nl

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