

To Tell or Not to Tell? *Whether patients should know the name of the remedy you are giving them, and several other aspects of constitutional care in Homeopathy.*

I've been interested for some time now in the ideas homeopaths have regarding their practices. As an example, I've met homeopaths who say to avoid coffee, those who say not to have coffee near the same time as having taken a remedy, and those who say, "It doesn't matter, put the remedy in your coffee and take it that way if you like." When I consider the broad range of these perspectives, it's very clear to me that each of us will have an opinion lying somewhere along a continuum of *never to always*, and so it will be with *most* of our opinions regarding the proper or correct practice of constitutional care in homeopathy. Largely, many of us, out of habit, express our *opinions* as imperatives, or more extremely, as facts.

What most intrigues me is that *all* of the homeopaths I've spoken to are having success in their practices—so this is clearly not about the right way to practice. It's not about the coffee (or the camphor, or minty toothpaste, or how many times to stir a remedy, or whether the client knows what is being given.). This is far more about what the homeopath believes or has been taught or has learned along the way.

I came about my curiosity through personal experience with my own homeopaths (who shall remain unnamed). It was not so much the way they practiced as it was my reaction to it that caused me to consider such things. In some ways, our approach to practice and our philosophies differ, and in others we are very much alike in our training and experience. Yet there came a point in my treatment where I was having a very bad experience with a remedy and I became so angry I threatened a lawsuit if I was not told what it was. Setting aside all the allegedly good reasons why homeopaths don't like to tell their clients the name of a remedy, and particularly why they don't like to tell the homeopaths they are treating the name of a remedy, I thought my reaction a little over the top (it's not characteristically my nature to threaten legal action.). I was perplexed and confused, and yet I also felt very strongly that it was simply not ethical to withhold such information.

I decided then it would be interesting to hear what other homeopaths had to say about the issue of remedy disclosure, so I conducted an informal online poll and discussion thread (still actively receiving comments) through Dr. Suarav Arora's LinkedIn group, *Promoting Scientific Research in Homeopathy*. Since February 8, 2012, 163 individuals have responded to my informal poll (see Figure 1).

Among the reasons given for those responding that it is NOT necessary to withhold the name of the remedy are: legislation requiring disclosure (in many locations), ethics, a desire to engage the client in the journey towards health, a desire not to be paternalistic or to place oneself in a position of power or authority over another, a position of feeling fine disclosing to those who ask and not disclosing to those who don't ask, and in some cases a general feeling that it simply doesn't matter—that a patient's knowledge of what they are taking simply isn't crucial to a healthy outcome and doesn't interfere with the action of a remedy.

Practitioners/Students of Homeopathy: Do you feel it is necessary to prevent your client from knowing the remedy you are giving?

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Figure 1: Survey Results as of March 11, 2013, from [Promoting Scientific Research in Homeopathy](#).

Those responding that the name of the remedy SHOULD be withheld do, in my view, come from a somewhat paternalistic or authoritative point of view as a result of training or personal preference (and I cheerfully plead *guilty* to having a susceptibility here that causes me to label it paternalistic.). Some don't want the aggravation of their client searching their remedy on the internet or disturbing the course of remedy action. Some felt it better the patient not 'confuse themselves' with so much information—much of which they felt could be from unreliable sources. Others have mentioned it is easier on follow-up to discern remedy action outside the influence of such information. Some simply feel they should be trusted as the practitioner to know what is best for their clients. Some felt they were the expert and should be viewed as such.

Several in both camps made reference to *types* having susceptibility in this area, such as an *arsenicum-type* wanting to know the name of their remedy. What must be remembered here is that *all* of these homeopaths are practicing with successful outcomes. This is critical to understand, whether you are treating acutely or chronically—this is a personal preference clearly not founded in anything scientific or factual, and my feeling is the stance taken on this issue has far more to do with the homeopath's vital force than with the client's, particularly if strong reactions arise.

In my case, a very strong reaction eventually led my homeopath to a wonderful remedy choice that was very effective for a period of time: Conium Maculatum. My core expression was one of ethics, reasoning, legal arguments, unfairness, and a threat of legal action coupled with a sense that I had been poisoned. Had this homeopath not recognized the significance of my reaction and been willing to pay close attention to the nuances of my rebellion, it might have been far more difficult to arrive at a remedy choice. In fact, it was initially suggested I could go find another homeopath if I was unwilling to follow the protocol set forth—fortunately for me, this individual agreed to be open-minded enough in this instance to consider that every aspect of what we were experiencing as homeopath-and-client together was, in fact, part of the remedy state. I was not simply being a stubborn or difficult client. When I ponder the mind rubrics of conium and consider the overall picture (*the Thinker*), I have to stand in awe of homeopathy and its power to reach into the depths of ourselves to stir the vital force in the most magical ways.

In *The Alchemy of Healing*, Whitmont (1993) suggests:

In order to choose the right remedy, homeopaths have to identify not only the immediate symptoms but anything else that bothers the patient, even the slightest and seemingly most irrelevant complaint, regardless of its presumed cause. This includes the patient's physical, emotional, and psychological characteristics, as well as modalities: factors or circumstances which modify, ameliorate, or aggravate his condition. The homeopath reconstitutes the particular phenomenological descriptive field of the given condition...this process of matching the substance with the personal and constitutional idiosyncrasies of the patient must be sustained with each variable—whether mental, emotional, or physical. The overall correspondence between remedy and patient will have to be highly personal, constitutionally specific, and exactly matched to all descriptive phenomena in the field (p.3).

Nowhere have I found more beautifully described the homeopathic mission to find that substance for which the soul cries out. I wonder where I would be without also enjoying the care of a homeopath who feels at least similarly, even if irked by my demands to know the remedy or feeling defensive in the face of angry threats.

I once heard a homeopath say she would refuse to treat a student homeopath if unable to agree to remain blind to the remedy. I wondered about this. Where does the poor student go who has a constitutional need to know the remedy? I felt a sense of loss for this homeopath (who I feel is very gifted), because I wondered how many opportunities to help others find deep wholeness had already been sacrificed, or might be sacrificed in the future. Where would one go if they had trust issues that were, as yet, without reconciliation? Of course, the challenge in constitutional treatment is to *know thyself* as a homeopath. If anything about a case troubles you, then there is something there in that for *you* to explore. Your troubles do not belong to the client—they belong to you and arise from your own vital force.

My approach is this: when I guide the course of my work (and my life) according to a limiting belief, this belief inherently carries with it the exclusion of every other possibility. I've heard a similar argument for the existence of God. If I believe that God exists and you do not, how can God both exist and not exist?

- If a client should not know the name of a remedy because it will interfere with treatment, why then do clients who know the names of their remedies also improve?
- If a client should not have coffee, why then are there clients who feel better with coffee?

I hold these up only as small examples. Many may want to argue, rationalize, or continue to emphasize why such restrictions and boundaries make sense in actual practice or in the greater picture. My point is they only make sense if you choose to believe them. Personally, my sense is that we make homeopathy very difficult at times, and we often fail or give up on a client, believing there is something about them or their

circumstances preventing a remedy from working (it can't be that we've not arrived at a good remedy choice after all those hours of case analysis and repertorizing.). Perhaps they don't want to get well, perhaps a surgery has interfered with their wellness, perhaps they have a lousy diet, perhaps they live in a place that is too damp, and the list goes on. I once watched a video session (case intake and follow-up) in which it was quite clear there was no change in the state of the client. Not one aspect of her countenance, affect, or presentation was different. Yet the well-intentioned and very concerned (and no doubt very skilled) homeopath went on to confirm with the client how much better things were by asking leading questions, "But you are feeling better, aren't you?" We humans are amazingly able to create out of our own set of beliefs the very circumstances necessary to confirm our perception. We believe it, so we see it. This is the power (and the danger) of perception.

I am more of the opinion that a client comes into our consulting room with *exactly* the symptoms necessary for deep healing to occur. In fact, I don't even believe it to be coincidence or happenstance that they stumble into choosing us for help. My studies of perception lead me to believe that those who come to us are also exactly who we need in order to continue our own growth and healing. The idea that we can be objective observers and remain apart from the case is a myth, and nowhere in the scientific world has it been demonstrated that objectivity is an actual possibility—that is, we cannot separate ourselves as objects from the objects we are observing. In fact, we actually influence and interact with that which we observe (whether we want to believe it or not).

I feel the best approach to constitutional or chronic treatment is to enter into a healing relationship with a client in a conscious and very purposeful way, embracing that illnesses will bring with them many forms of expression. Those arising out of consultation are literally the exact markers for the similimum if we are willing to set aside all our preconceived ideas about how things ought to be and just go with what is presenting itself. I believe that the practitioner, the client, and the illness must come together in a cooperative agreement, and the field need be fairly clear of assumption, opinion, and bias in order to discover that which our clients most need.

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Reference

Whitmont, E. C. (1993). *The alchemy of healing*. Berkeley, CA: North Atlantic Books.