

# Submission on Homeopathic Medicine To The Australian Department of Health

In response to the “Review of Pharmacy Remuneration and Regulation Interim Report” (The King Review) released for public consultation on 22 June 2017 and relating to **OPTION 3-4: SALE OF HOMEOPATHIC PRODUCTS** stating that: *“Homeopathy and homeopathic products should not be sold in PBS-approved pharmacies. This requirement should be referenced and enforced through relevant policies, standards and guidelines issued by professional pharmacy bodies.”*

Submitted by:

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Submitted on 23<sup>rd</sup> July 2017

The spellings homoeopathy and homeopathy are used interchangeably and vary with the source being quoted.

## Executive Summary

This submission is in response to recommendations by *The King Review* that homoeopathic products should not be sold in pharmacies.

It provides evidence and reasoning why it is not in the public interest to remove an important healthcare choice by limiting access to Homoeopathic medicines *via* restrictions on its availability and sale.

It is shown below that homoeopathy has been a branch of medicine for a very long time (some 200 years) and that the recognition and use of Homoeopathy is expanding significantly in various countries.

Also, there has been significant ongoing research into homoeopathy and a body of evidence exists to show that the notion "*that there are no health conditions for which there is reliable evidence that homeopathy is effective*" cannot be sustained and is incorrect.

Although there are many methodological challenges in research on the clinical effects of homeopathy ..... there are a number of well-done studies of homeopathic interventions for specific conditions. To compare therapies according to allopathic (conventional medicine) criteria, investigators have to sacrifice some of the potency and characteristics of non-allopathic remedies. These are based upon the assumption that every patient is a universe that needs a tailored therapy. *The standardization, which is fundamental for the development of clinical trials, definitely limits the efficacy of homoeopathy.*

This submission shows evidence that Homeopathic Medicine is widely used internationally; is extensively prescribed by medical physicians in various countries; and is recognized in law in various jurisdictions

Rising health consciousness and changing community attitudes to health care in Australia is expected to contribute to growth in consumer healthcare products and use of complementary medicines.<sup>1</sup>

Consumers value access to complementary medicines in the community pharmacy setting.

Rising health consciousness and changing community attitudes to health care in Australia is expected to contribute to growth in consumer healthcare products and use of complementary medicines.

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<sup>1</sup> IBISWorld Industry Report C1841, *Pharmaceutical product manufacturing in Australia* (November 2016).

It is shown that there are significant and cost effective outcomes with homoeopathic care. It therefore does not make sense to stop its sale in pharmacies.

There is wide integration of homeopathic medicine with conventional medicine in certain jurisdictions where practitioners understand both disciplines: whilst contradictory theories between homoeopathic medicine and conventional medicine hamper understanding in others.

The credentials of persons from whom material for this report has been sourced are impeccable. They are virtually all eminent medical practitioners with knowledge and practice experience with homeopathy. Also, recent books on integrative medicine, that refer to homeopathy, have been compiled by eminent medical academics and medical clinicians. Material has been derived from these sources.

It does not make sense for Australia to place limitations on homeopathy that restricts the population's freedom of choice.- it is not a patient-centred approach to healthcare; especially at a time when demand for it is increasing locally and internationally.

In view of the challenges facing healthcare, it does not make sense to restrict or eliminate a branch of medicine that has been effective in epidemics at different points in history.

**Recommendation:**

It is respectfully recommended that homeopathic medicine be recognised in law in Australia.

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1. Homoeopathy has been a branch of medicine for a very long time.
2. The recognition and use of Homoeopathy is expanding significantly.
3. There has been significant ongoing research into Homoeopathy
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5. Conditions for which Homoeopathy May be Used
6. Homoeopathic Medicine and Conventional Medicine
7. Persons Involved With Books on Integrative Medicine Used in the Submission

## 1. Homoeopathy has been a branch of medicine for a very long time.

*The homeopathic method was developed by Samuel Hahnemann, MD (1755-1843), and extensively practiced ever since.*

### **(1) Founder**

Fisher (2005) writes: Homeopathy originates in the work of the German physician Samuel Hahnemann (1755—1843), who coined the term from the Greek word *homoios*, which means same or similar, and *pathos*, meaning disease or suffering. He became a doctor during a brutal period in medicine when treatments involved blood-letting and giving doses of medicine so large the patient often died. Hahnemann vehemently denounced these practices, accusing his contemporaries of “killing gradually more millions than Napoleon ever slew in battle.” He also condemned the chaining and beating of “lunatics”, instead advocating ‘humanity combined with firmness’.

Hahnemann grew so disillusioned that, for a while, he abandoned medical practice. The inspiration for homeopathy came as he translated a medical book by the Edinburgh physician William Cullen. He disagreed with what Cullen said about cinchona bark, the source of quinine and an effective treatment for malaria, which at that time was common in parts of Europe. Using himself as a guinea pig, he took regular doses of quinine and developed symptoms very similar to malaria, which inspired him to think of the idea of similarity. In 1796, Hahnemann launched homeopathy by publishing an article entitled “On a new curative principle”.

Early homeopaths introduced many new medicines and radically changed the uses of others. Homeopathy grew rapidly through the 19th century, largely because of its success in treating epidemics, particularly of cholera. During the infamous London cholera epidemic of 1854, eventually traced to a water pump in Broad Street in Soho the overall hospital mortality rate was 52 per cent (over 500 people), but at the London Homeopathic Hospital (which was the hospital nearest the infamous pump) the death rate was only 16 per cent.

In 200 years, homeopathy has become a worldwide practice. It is particularly popular in Latin America and the Indian subcontinent. In Western Europe over 50 per cent of the French have used it, and usage is only slightly lower in Germany. In the UK, homeopathy is currently used by 10 per cent of the population, with annual growth in sales of around 12 per cent.

Homeopathy suffered a sharp decline in many parts of the world in the 20th century, but is now growing again. For example, in the US, it almost died out in the 1970s and 1980s, but sales grew by a staggering 500 per cent in a seven-year period in the 1990s.

[From: Fisher P: Homeopathy. In, Peters D, Editor-in-chief, 2005: Family guide to complementary and conventional medicine. Dorling Kindersley, London, UK]

Hahnemann was a German physician, chemist and author of a well-known textbook on the preparation and use of contemporary medicines.

In a series of experiments conducted from 1790 to 1810, Hahnemann demonstrated that:

- a) medicinal substances each elicit a pattern of signs and symptoms in healthy people, and
- b) the medicine whose symptom pattern most closely resembles that of the illness being treated is the one most likely to initiate a curative response for that patient (Hahnemann, 1833).

Homoeopathy is a system of holistic medicine that is now over two hundred years old. It was founded by the German physician and chemist, Dr Samuel Hahnemann in the late 18th century, yet its reputation and stature has been growing exponentially, both nationally and internationally, over the last few years. The homoeopathic approach is to not only treat an individual for their physical complaints – but to also consider their mental and emotional states as pivotal components in the healing and treatment process as well. Homoeopathic treatment differs from the more conventional forms of medicine in that it is highly individualized and tailored to suit each patient's particular health needs. In this way, homoeopathy is a medical approach that respects the wisdom of the body.

## 2. The recognition and use of Homoeopathy is expanding significantly.

*Limiting the sale of homoeopathic products in pharmacies will remove an important healthcare choice for Australians at a time when the use of Homeopathy is expanding significantly overseas.*

### **(1) The USA, Germany**

Peters D, *et al*, (2002) write: In the USA and Germany homeopathy forms a major part of the training (as does herbalism) of state-boarded naturopathic practitioners (Heilpraktikers in German).

### **(2) India**

Peters D, *et al*, (2002) write: "Homeopathy has been integrated into Ayurvedic practice in India where it is used on a national scale."

### **(3) The UK**

Peters D, *et al*, (2002) write: "Training - About 2500 homeopaths are practising in the UK, including over 1500 NMQPS (non-medically qualified (homeopathic) practitioners) and 1000 UK doctors. "The Faculty of Homeopathy has various training courses for doctors, including a basic 40-hour course, and an examination leading to a primary care health care certificate, and intermediate and advanced study. "The Faculty admits as members (MFHom) only those who have completed at least 150—180 hours of study.

"The Homeopathic Hospitals in London and Glasgow have been offering postgraduate medical training for some years, and it is claimed that 20% of all Scottish GPs have now undertaken at least a basic training.

"NMQP homeopathic training ranges from 3 years part time to 3 years full time; there are also university degrees in homeopathy.

"Regulation - A register of medically qualified homeopaths is maintained by the Faculty of Homoeopathy; this body was incorporated by an Act of Parliament in 1950 to train and examine doctors in homeopathy. NMQP homeopaths may join the register of the Society of Homoeopaths.

#### **(4) South Africa**

The profession of homoeopathy is regulated in terms of the Allied Health Professions Act 63 of 1982, the first legislation having been passed in the 1970's. The Act is to provide for the control of the practice of allied health professions, and for that purpose to establish an Allied Health Professions Council of South Africa and to determine its functions; and to provide for matters connected therewith.

In South Africa, formalized homoeopathic educational standards are closely aligned with those of medicine, and are recognized as an education of excellence internationally. Homoeopathy is a legally- recognized profession and is becoming an increasingly important part of the South African healthcare provision. Homoeopathic physicians are registered with a statutory body, the Allied Health Professions Council, and their activities are closely monitored by a professional board.

There are two types of professional education available to become a homeopath in South Africa:

- A medical doctor can do a postgraduate course at a qualified University with an international accreditation.
- A five year full-time course can be done at either one of two Universities and a further medical internship year must be completed for professional registration. During training, clinical knowledge in the fields of human anatomy, physiology, pathology and diagnostics are studied in great detail. A homeopath has the clinical diagnosing skills honed in during their training. Homeopaths can interpret X-ray results as well as Path Lab tests.

Universities In South Africa Providing Homeopathic Training are:

Durban University of Technology  
[http://www.dut.ac.za/faculty/health\\_sciences/homoeopathy/](http://www.dut.ac.za/faculty/health_sciences/homoeopathy/)

University of Johannesburg  
<https://www.uj.ac.za/faculties/health/Homoeopathy>

In South Africa homeopathic treatment is widely regarded to be safe, and can potentially be very effective in treating the new strains of disease which are spreading widely in the 21st century. As a primary-contact practitioner, a homoeopath manages all aspects of patient healthcare, diagnosis, treatment and management, including referral and communication with other healthcare professions and institutions.

**(5) Denmark**

In Denmark, in 2004, homeopaths from the Danish Association of Classical Homeopathy (DSKH) were included in the group of alternative therapists registered by the Ministry of Health, in order to guide the public in a choice of serious and well educated therapists. In keeping with the increased demand for healthcare, and the provision of competent homoeopathic practitioners, formalized homoeopathic education has become a priority.

<http://hpathy.com/past-present/homeopathy-in-denmark/>

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### 3. There has been significant ongoing research into homeopathy

*Although there are many methodological challenges in research on the clinical effects of homeopathy ..... there are a number of well-done studies of homeopathic interventions for specific conditions.*

Evidence from various sources indicates support for the use of Homeopathic medicine in medical practice:

**(1) Accompanying this submission is a PDF copy of an 85 page report from Italy.**

It states in the preface that: **“since this document is coming from an Advisory Board of qualified scientists, it is also available for any Regulatory Agency who wants to be updated on some aspects of homeopathy.”**

Title: Homeopathy: the scientific proofs of efficacy

ISDN 88-85076-40-8

Publisher: Guna S.r.l., Via Palmanova 71, Milan, Italy

1st English Edition: September 2002

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In the Preface to the English edition of this book (with emphasis inserted by the author of this report), *Prof. Umberto Cornelli, Adjunct Professor of Pharmacology Loyola University Medical School – Chicago; and Director of First Multinational Corporation in Psychiatry Toronto – Canada, wrote:*

*“Any chemical agent that affects the processes of living is considered a drug. Duty of a physician is to study as many drugs as possible so that he can treat patients in the most appropriate way.*

***Every time the physician seriously approaches the mechanisms of action of a given drug, he reaches for the limit of the “unknown”. For entities such as statins, or homeopathic dilutions, this limit is not very different.** The only*

way to practically overcome this border, is to verify the effects of these entities. In this way, the real knowledge becomes the “effect in the contest”. For this reason, I was not surprised when, as a clinical pharmacologist, I was asked to participate to an Advisory Board aimed to review a large body of clinical trials comparing some homeopathic therapies with placebo or allopathic medicaments.

Immediately, I realized that, to compare therapies according to allopathic criteria, investigators have to sacrifice some of the potency and characteristics of non-allopathic remedies. These are based upon the assumption that every patient is a universe that needs a tailored therapy. ***The standardization, which is fundamental for the development of clinical trials, definitely limits the efficacy of homeopathy.*** Nevertheless, most of the trials that the Advisory Board analysed were conducted following an appropriate methodology and ended up with surprising results in favour of homeopathic remedies, both in terms of clinical activity and costs.

Furthermore, a high benefit risk ratio, based upon the ability to produce a desirable effect with minimal side effects, was achieved quite exclusively by the nonallopathic remedies.

Although these trials showed some outstanding results, I am afraid they will never overcome the prejudice.

I do not expect that detractors will modify their attitude because an Advisory Board has made a positive judgment pertaining to non-allopathic drugs. Moreover, I do not even expect that the entire homeopathy will gain credibility just because some medicaments have shown to be active. This is only an example on how it is possible to get together two different approaches. A good physician does not feel obliged to use one drug or the other, but will choose what he thinks is more suitable for the patient, and the clinical outcome will give him the most appropriate indications.

The pages of this compendium have been mainly constructed for those who believe that homeopathy and Homotoxicology belong to the medical discipline.

***These colleagues do not need any confirmation about the validity of these approaches, since they are supported by the daily evidence deriving from their patients.***

These pages have the duty to indicate that a more precise medical methodology may improve and extend the knowledge of homeopathy.

In conclusion, I hope that this compendium will be the first of many which will analyse all different aspects of these disciplines, and stimulate those physicians who are open-minded to review and discuss the new issues of the medical science.

At the same time, ***since this document is coming from an Advisory Board of qualified scientists, it is also available for any Regulatory Agency who wants to be updated on some aspects of homeopathy.***

I want to thank all the members of the Advisory Board who dedicate time and enthusiasm to the preparation of this compendium, particularly Prof. Leonello

Milani and Dr. Alessandro Pizzoccaro who were collecting and selecting, with patience and sapience, the publications available in the medical literature.”

*Prof. Umberto Cornelli*  
*Adjunct Professor of Pharmacology*  
*Loyola University Medical School - Chicago*  
*Director of First Multinational Corporation in Psychiatry Toronto – Canada*

**(2) Shalts (2004:261)** writes the following on clinical outcomes research: “Although there are many methodological challenges in research on the clinical effects of homeopathy—specifically the challenge of applying a randomized double-blind approach to a discipline that requires sophisticated individualized prescribing to be effective—there are a number of well-done studies of homeopathic interventions for specific conditions. “Diagnoses studied to date include otitis media in children, allergic rhinitis, acute diarrheal syndromes, asthma, depression, and many others; where high-quality trials exist, they are included in the discussion of the specific conditions found elsewhere in this text.”

[Shalts Edward. Homeopathy: Chapter 12. In, Kligler B, Lee R, 2004: Integrative medicine. Principles for practice. The McGraw-Hill Companies Inc., USA, Page: 261]

### **(3) Meta-analyses**

To date (in 2004), two meta-analyses of the clinical effects of homeopathy had been published. (Kleinjnen, Knipschild 1991<sup>38</sup>, Linde, *et al* 1997<sup>39</sup>)

A 1991 review by Kleinjnen et al. assessed 107 controlled trials in 96 published reports. Overall, of the 105 trials with interpretable results, 81 trials indicated positive results versus 24 trials in which no positive effects of homeopathy were found. In studies judged to have better research designs, 15 trials showed positive results, whereas in 7 trials, no positive results could be detected. A more recent review by Linde et al (1997) assessed 186 double-blind and/or randomized trials, of which 119 met the inclusion criteria and 89 had adequate data for meta-analysis. The combined odds ratio was 2.45 in favor of homeopathy. The odds ratio for the 26 good-quality studies was 1.66, and when corrected for estimated publication bias, the ratio remained about the same (1.78). A detailed analysis of current research data can be found elsewhere. (Merrell, Shalts 2002, (Bellavite, Signorini 2002)

[Merrell WC, Shalts E. Homeopathy. *Med Clin North Am.* 2002;86:47-62.  
Bellavite P. Signorini A. *The Emerging Science of Homeopathy.* Berkeley, CA: North Atlantic Books; 2002.

Kleinjnen J, Knipschild P, Riet G. Clinical trials of homeopathy. *BMJ.* 1991; 302:316-23.]

#### **(4) Research on ADHD**

The following appears in: Kotsirilos V, Vitetta L, Sali A, 2011: *A guide to evidence-based integrative and complementary medicine*. Elsevier Australia, Chatswood, NSW, Australia:

An increasing number of parents are turning to homeopathy to treat their hyperactive child. [Frei H, Everts R, von Ammon K, et. al. Homeopathic treatment of children with ADHD: a randomized, double-blind, placebo-controlled trial. *Eur J Pediatr* 2005;164(12):758—67.]

One study of children with ADHD receiving individualised homeopathic treatment demonstrated a 75% response to treatment, reaching a clinical improvement rating of 73% and an amelioration of the Connors Global Index (CGI) of 55%. In comparison, clinical improvement under Methylphenidate was 65% with a lowering of the CGI to 48%. Both treatments appeared to be similar in efficacy and it was concluded that in cases where treatment is not urgent, homeopathy is a valuable alternative to methylphenidate. [Frei H, Thurneyson A. Treatment for hyperactive children: homeopathy and Methylphenidate compared in a family setting. *Br Homeopath J* 2001;90(4):183—8.]

## 4. There are Significant Outcomes and Cost Effectiveness with Homeopathic Care

*As Ian Chalmers, the founder of the Cochrane Collaboration, states, "The patient's opinion is the ultimate outcome measure."*

### **(1) Global Measures of Homeopathy: Cost Effectiveness and Outcomes**

Carlston (in Micozzi, 2011: 352) writes: "Another relevant area of research in homeopathy is cost effectiveness and outcomes. Many believe that outcomes research will prove to be the most important area of homeopathic research (Carlston, 2003; Jacobs et al, 1994). Like several other forms of CAM, homeopathic treatment is directed toward the patient's global well-being, not specific disease features. Therefore, general out-come measures such as overall health status (assessed using widely accepted scales), patient satisfaction, days missed from school or work, and the cost of treatment are most suitable for evaluating homeopathic treatment. Also, patients do not care if their treatment is merely statistically superior to placebo. They only want to get better, and thus many conventional medical researchers argue that measuring patient satisfaction is crucial. As Ian Chalmers, the founder of the Cochrane Collaboration, states, "The patient's opinion is the ultimate outcome measure."

Carlston refers to the following studies:

- a) A German study in which nearly 500 patients received either conventional or homeopathic care found that, although costs were similar, patients' clinical response to homeopathic treatment was significantly better as determined by both patient and physician ratings (Witt, Keil et al, 2005).
- b) Another study of patient outcomes found a highly significant improvement in disease severity and quality of life among 3981 German and Swiss patients (Witt, Lüdtkke et al, 2005).
- c) In France the annual cost to the social security system for a homeopathic physician is 15% less than that for a conventional physician, and the price of the average homeopathic medicine is one third that of standard drugs (Caisse Nationale des Assurances Maladie, 1991).
- d) The reduction in expensive services documented in other studies also suggests a potential for cost effectiveness (Jacobs et al, 1998; Swayne, 1992; Van Wassenhoven et al, 2004).

[From: Carlston Michael. Homeopathy: Chapter 24: In, Micozzi MS, 2011. Fundamentals of complementary and alternative medicine. *Fourth edition*. Saunders, an imprint of Elsevier, St Louis, Missouri, USA: 354]

Fisher (2005) found that expenditures for patients of the London Homeopathic Hospital were significantly lower than those for matched, conventionally treated patients.

[From: Fisher P: Homeopathy. In, Peters D, Editor-in-chief, 2005: Family guide to complementary and conventional medicine. Dorling Kindersley, London, UK: 74-75]

## 5. Conditions for which Homoeopathy May be Used

*Opinions about what can be effectively treated by homeopathy vary widely, medically trained practitioners generally being more conservative than non-medical ones.*

**(1) Peters D, et al,**<sup>1</sup> (2002) write: “Homeopaths often treat chronic recurrent conditions such as common skin problems, headache, rheumatoid arthritis, IBS, asthma, fibromyalgia, and ill-defined complex conditions. “Opinions about what can be effectively treated by homeopathy vary widely, medically trained practitioners generally being more conservative than non-medical ones. Many GPs have received only a basic training and generally restrict their prescriptions to a limited number of remedies for specific acute conditions. “Homeopathy is a very popular way of treating children. “Many naturopaths and nutritional counselors also use homeopathy in their work.”

**(2) Carlston (2011)**<sup>2</sup> writes that: “Homeopathic remedies are most likely to be successful and to optimize overall health for the types of conditions listed in Box 24-4.

Homeopathy is less useful:

- a) for the treatment of chronic diseases involving advanced tissue damage, such as cirrhosis of the liver or severe cardiovascular disease;
- b) for people with prolonged dependence on conventional medications such as corticosteroids, anticonvulsants, and anti- psychotics; or
- c) as a substitute for appropriate conventional treatments such as emergency surgery or reduction of fractures.

*Homeopathy is often used by homeopathic specialists as a treatment complementing conventional medicine in these circumstances or as a palliative measure when no other effective treatment exists.*

#### Box 24-4 Uses of Homeopathic Remedies

<ul style="list-style-type: none"><li>• Functional complaints with little or no tissue damage, such as headache, insomnia, chronic fatigue, and premenstrual syndrome</li></ul>
<ul style="list-style-type: none"><li>• Conditions for which conventional medicine has little to offer, such as viral illnesses, traumatic injuries, surgical wounds, and multiple sclerosis</li></ul>
<ul style="list-style-type: none"><li>• Chronic health conditions, such as allergies, recurring infections, arthritis, skin conditions, and digestive problems</li></ul>
<ul style="list-style-type: none"><li>• Conditions that have not been cured by conventional treatments because of the inappropriateness of the medication, determined nature of the disease, or patient noncompliance with the treatment regimen</li></ul>

[From: Carlston Michael. Homeopathy: Chapter 24: In, Micozzi MS, 2011. Fundamentals of complementary and alternative medicine. *Fourth edition*. Saunders, an imprint of Elsevier, St Louis, Missouri, USA: 354]

#### Variance of Opinion

Based on the foregoing, there is a strong difference of opinion between Peters and Carlston – both very well qualified medical specialists – on the one hand; and the following statements:

*“Based on the assessment of the evidence of effectiveness of homeopathy, NHMRC concludes that there are no health conditions for which there is reliable evidence that homeopathy is effective.”*

*“Homeopathy should not be used to treat health conditions that are chronic, serious, or could become serious. People who choose homeopathy may put their health at risk if they reject or delay treatments for which there is good evidence for safety and effectiveness.”<sup>2</sup>*

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<sup>2</sup> National Health and Medical Research Council, *Statement on homeopathy* (March 2015).

## 6. Homeopathic Medicine and Conventional Medicine

*Homeopathy is probably the form of alternative and complementary health care most widely integrated into mainstream medicine in Europe. There are thousands of doctors using homeopathic methods of treatment - Peters.*

### (1) Contradictory Theories

Carlston (2011:353) writes: "Homeopathic medicine has persisted both in spite of and because of its dissident voice. Its theories usually contradict those of conventional medicine, and the intensive clinical interaction between patient and practitioner stands in opposition to the time pressures of managed care. Although its controversial aspects would seem to weaken homeopathic practice severely, in fact this distinction attracts interest, and in many ways this controversy serves to invigorate both conventional and homeopathic thought.

[From: Carlston Michael. Homeopathy: Chapter 24: In, Micozzi MS, 2011. Fundamentals of complementary and alternative medicine. *Fourth edition*. Saunders, an imprint of Elsevier, St Louis, Missouri, USA: 354]

### (2) Wide Integration

Peters D, *et al*, (2002) write: Homeopathy is probably the form of alternative and complementary health care most widely integrated into mainstream medicine in Europe. There are thousands of doctors using homeopathic methods of treatment, most notably in France and Germany. In the UK, homeopathy has been part of the NHS since its inception. Homeopathy is recognized as a postgraduate specialty with about 1000 doctors practising some form of homeopathy alongside conventional treatment. Several homeopathic hospitals remain active within the NHS, of which the two largest, in Glasgow and London, have inpatient units. Normal NHS conditions apply: patients receive services free at the point of care, the hospitals being reimbursed through block contracts. There are also at least 1500 professional non-medically qualified practitioners.

[From: Peters D, *et al*, 2002: Integrating complementary therapies in primary care. A practical guide for health professionals. Churchill Livingstone, London. UK. Pages: 89-91; 320]

## 7. Persons Involved With Books on Integrative Medicine Used in the Submission

**Dr. Michael Carlston MD**, Editorial Advisory Board. Homeopathy: The Journal of the Faculty of Homeopathy; Private Practice; Santa Rosa, California.

Wrote a book chapter in Micozzi MS, 2011. Fundamentals of complementary and alternative medicine. *Fourth edition*. Saunders, an imprint of Elsevier, St Louis, Missouri, USA: 354]

**Dr Peter Fisher FRCP, FFHom** (Homeopathy) is Clinical Director, Royal London Homoeopathic Hospital.

Wrote a book chapter in Peters D, Editor-in-chief, 2005: Family guide to complementary and conventional medicine. Dorling Kindersley, London, UK]

**Dr. Vicki Kotsirilos; Assoc. Professor Luis Vitetta; and Professor Avni Sali**, Authors of: *A guide to evidence-based integrative and complementary medicine*. 2011 Elsevier Australia, Chatswood, NSW, Australia

**Professor David Peters** is a highly respected practitioner in the field of integrated medicine. A medical doctor who is trained in osteopathy and homeopathy, he is currently Chair of the British Holistic Medical Association. He is also the Clinical Director of the School of Integrated Health at the University of Westminster and he is a Board member of the Prince of Wales Foundation for Integrated Health.

Editor-in-chief, 2005: Family guide to complementary and conventional medicine. Dorling Kindersley, London, UK

Main Author: Integrating complementary therapies in primary care. A practical guide for health professionals. Churchill Livingstone, London. UK. Pages: 89-91; 320]

**Dr. Edward Shalts MD, DHT**, Vice President, National Center for Homeopathy; Advisory Board Member International Academy of Homeopathy; Member, Council of Homeopathic Education; Center for Health and Healing. Beth Israel Medical Center, New York NY.

Wrote a book chapter in Kligler B, Lee R, 2004: Integrative medicine. Principles for practice. The McGraw-Hill Companies Inc., USA,