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# **The Prophylactic Use of Homeopathic Medicines**

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Historical Evidence and Current Findings

Dr. Catherine G. Lemmon

Emryss

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***“As the Law of Similars excels in the power to cure,  
it excels more forcibly and certainly in the art of disease prevention.”***

– A.H. Grimmer, 1949

***“..the law of similars also applies to the prevention of disease.”***

– James Compton Burnett, *Vaccinosis and its Cure by Thuja* – with  
Remarks on Homeoprophylaxis; 1884; p. 3

***“Truth is not Truth save only to the Infinite; to the mind of mortal  
man, Truth is not necessarily Truth, but only that which appears to be  
true. Hence it is that what is a glorious truth to one man is inglorious  
nonsense to another and both individuals may be equally honest of  
purpose and of like earnestness in their search after Truth.”***

-ibid., Preface, p. v



***It must be understood that full practitioner/healthcare worker training  
in the use of homeopathic prophylaxis is not the intent of this work, nor  
will information sufficient to allow this be provided here. Professional  
training in homeoprophylaxis is available directly by me, the author, or  
from other appropriate locations.***

***The information shared here is intended to provide a more full and  
complete understanding of the prophylactic use of homeopathic  
medicines so that homeoprophylaxis can be appreciated for the effective  
immunisation option that it is, and, because of this, utilised with  
confidence and to a much greater degree than at present.***

– Dr. Catherine G. Lemmon

## Acknowledgements

This book has come together with the help of so many I'm afraid to start naming them all – but if I did not, I would feel ungrateful, indeed, for everyone assistance in this. Praying I remember everyone, but if not, please forgive my short-sightedness...

My initial thanks go to **Dr. Isaac Golden**, whose pioneering work into homeoprophylaxis was an inspiration to me. I began my research into vaccines back in early 1999, when my second son, Joshua, received his diagnosis of autism. I, at first, wanted to verify that I had done nothing that would harm my children, especially when I was working so hard to make sure they got their vaccinations as close to 'on time' as possible. But the more I started looking into these, the more I realised how little I was told, especially at the trusted place for parents of young children – the paediatrician's office. Coinciding with the beginning of my homeopathic studies, the thought struck me then that, if this idea of 'immunisation' was so important, so vital, surely vaccinations are not the only method available for this. So I put together a search (before the days of 'search engines') on two terms: 'immunisation' and 'alternatives.' This is when Dr. Golden and his work suddenly came up very clearly for me. The more I read about what he had been studying, researching, and collecting data on since the mid-1980s – the more I saw how soundly effective homeopathic prophylaxis is – the more I found I wanted to stand on the rooftops and sing out, 'Yes! There IS a nontoxic option! Yes! There IS an effective choice!'

I connected directly with Dr. Golden several years later, and even though he lives in Australia and I in the USA, he agreed to help me with my son and his vaccine damage – which is another great focus of his, homeopathically. His kind and generous soul has stood out to me since I have known him. Joshua is doing tremendously well today, and I think this is in large part to the work Dr. Golden did for him.

A couple of years after that I met Dr. Golden for the first time, face-to-face, in Toronto, where he presented about homeoprophylaxis. His matter-of-

factness and unquestioning confidence in this nontoxic option stood out very strongly there, even though, of course, the media learned of his presentation and worked quite hard to play it down. I learned very clearly from him to ever bear in mind that, within the realms of homeopathy, the media is not our friend.

Shortly after this, my organisation, *Homeoprophylaxis: A Worldwide Choice for Disease Prevention* (HPWWC) began coming together. In 2015, HPWWC presented its first international conference – the first ever of its kind, not only to speak out about risks inherent to vaccines, but also the nontoxic option of homeoprophylaxis, which has been in use for more than 200 years. Dr. Golden came to this event as our keynote speaker, and was very well-received, doing brilliantly well. He also presented at the second HPWWC conference, which took place in the Netherlands in 2017 and the third conference that took place in India in January 2020.

His very kind, generous, and confident nature has been a great encouragement to me in my homeopathic pursuits, especially as I pursued my PhD in homeoprophylaxis. I am very blessed and honoured to consider Dr. Isaac Golden a friend as well as colleague.

In 2014, I returned to Germany where I lived during my undergraduate years. There I first met the homeopath couple, **Dr. Ravi Roy and Carola Lage-Roy**, in their beautiful home in Bavaria. I had learned of Dr. Roy and the teaching he was providing for homeopathic prophylaxis and knew I needed to meet him. When I made it to their place and met Carola, I learned how passionate they are not just about homeopathic prophylaxis, but also about the wonderful Chakra Flower Essences that Carola had come across. Very thoughtful, sincere, and open about what they do, I learned much from them. They have a wonderful library of books they, themselves, have written. They also spoke at all three of the HPWWC conferences. I am blessed to be able to consider them dear friends and colleagues as well.

In early 2016, I was invited to speak in Amsterdam. To this presentation came the Dutch homeopath, **Martin de Munck**. He had been using homeoprophylaxis in his practice already for some time, having received his training in this from Dr. Golden. Also a trained attorney, I very much enjoyed hearing what he could share, about vaccination rights primarily in

the Netherlands, but also in several European countries. He helped me tremendously as I put together the 2017 HPWWC conference that took place in the Netherlands. He also helped wonderfully with the 2020 HPWWC conference in India, which is a country he enjoys very much. He spoke at both conferences, to share a legal view of things.

During my time in Europe in 2016, I was also able to visit London and meet **Dr. Jayne Donegan**. I presented for her lecture series. She also helped me plan a bit of a tour through London while I was there. A very considerate, generous, and knowledgeable person, her experience with vaccination options in her medical practice is to be admired. She presented about this at the Netherlands HPWWC conference. She has since helped me in many ways through the years. I am so pleased to consider her a good friend as well.

After presenting the USA and the European conferences for HPWWC, I knew there needed to be a similar conference in Asia. I at first thought Japan would be the ideal choice for this. However, I was told that India would be the best choice, because homeopathy is so widely used there. I was introduced to **Dr. Raj Manchanda**, then the Director General of India's Central Council for Research in Homeopathy – now the Director of AYUSH, government of Delhi, India, Secretary for Information and Communication for LIGA MEDICORUM HOMOEOPATHICA INTERNATIONALIS (LMHI). A very sincere and intelligent person, Dr. Manchanda worked very hard for the India HPWWC conference, inviting not only other participants, but also governmental dignitaries. He took us on a brief tour of a homeopathic research facility in Delhi, as well as a tour of a small part of the city itself. He spoke at the Delhi conference and helped my husband and I feel very comfortable not only in the city, but also the nation of India. I am grateful for all his efforts.

I was introduced to attorney, **Jim Turner**, in mid-2015. His tireless work, promoting consumer advocacy as well as immunisation rights – and his love for homeopathic medicine – set a profound example for me from the beginning. He had never heard of homeoprophylaxis. And when I told him about it, he asked me to share with him all the information I could, positive and negative. He told me that this was something he wanted to promote – but he made it clear it would not happen overnight. The confidence he

shared gave me courage to continue forward – with the added confidence that his support was there. He came to the first HPWWC conference in 2015 – and he also spoke at the Netherlands conference. I tied him in with the wonderful consumer homeopathic group, *Americans for Homeopathy Choice*, and this proved to be a ‘match made in heaven’ – much good has happened, as they followed his leadership and advice. He never failed to be able to share a word with me when I had a concern. Sadly, we lost Jim in a tragic accident in early 2022. But his wife, attorney **Betsy Lehrfield**, has shared that she is happy to continue offering legal assistance to HPWWC. I am very honoured to know both Jim and Betsy.

Early in my homeopathic studies, I was introduced to a wonderful book by author, **Jay Yasgur** – his *Homeopathic Dictionary and Holistic Health Reference*. There were many words I was encountering that I was unable to find a suitable definition for – a definition appropriate to what I was learning about homeopathy. This book quickly became a treasure! I met him when he came to the annual conference of the Texas Society of Homeopathy in 2022 in Dallas. He proved a very generous, knowledgeable, and helpful person. And his input to me, as far as getting this book printed and out there in people’s hands, has proven invaluable.

On a more personal level, I must mention that, also during this time in 2014, I visited the city where I lived during my undergraduate study, Braunschweig, and my German ‘parents’ there, **Gerhard and Inge Jobs**. They were always very kind and helpful when I lived there and were keenly interested in what brought me there this time, which was sharing word about Homöopathische Prophylaxe, or homeopathic prophylaxis. They made sure I spoke with their son-in-law, who was a doctor in Braunschweig. When I returned to Germany in early 2016, they were still very interested in what I was doing and made the time to watch a movie about immunisation choice which I had brought to share with them. Their love and support have meant a lot to me through the years.

And, of course, there is no way I could write this list of ‘thank yous’ without including my dear family. My husband, who has come to each of these conferences, offering his IT help as needed, and just being there to support me. His great patience with me, as I’ve pursued homeopathy and homeoprophylaxis – my studies, alone, demanding so many hours. I would not have been

able to do any of this without his love and support. Thank you, **Jace**. And my three grown children, **Brandon and Joshua and Natalie** - how I love and cherish each of you – and how I thank you for the love you've shown me even when I've been so ridiculously busy and even absent. You are my truest treasures.

Thank you!



## **Dedication**

I dedicate this work to mankind. May it provide reason to think, question and above all, to demand a complete and wholistic depth of healthcare that recognises, honours, respects and works with the body.

Nothing is more important than preserving and promoting your health.

## **Preface**

### **Dr. Isaac Golden**

Homoeoprophylaxis, or 'similar' prevention, was first used by Hahnemann in 1799; was used by the early 'masters' like von Boenninghausen and Kent and has been and is used by many leading homeopaths through to the present day.

There is published evidence regarding the safety and effectiveness of homoeoprophylaxis in literally tens of millions of people using hundreds of millions of doses. This significant evidence base shows unambiguously that appropriately prescribed homoeoprophylaxis is non-toxic, safe, and significantly effective.

Despite this, it remains controversial within the homeopathic community. Some argue that the word homoeoprophylaxis is inappropriate - but that debate is more semantic than substantive. Some say that homeopathy can/should only be used to treat disease symptoms, not prevent these, despite Hahnemann's passionate support for prevention over treatment if possible. I have argued elsewhere that homoeoprophylaxis is actually treatment of inherited potential weaknesses which leave the person susceptible to specific infectious diseases. If treated appropriately, the person becomes 'immune' to developing symptoms from the disease if exposed.

So, Dr. Cathy May Lemmon's contribution is both timely and useful. If people have doubts about the conceptual basis, the evidence base and/or the need for homoeoprophylaxis in the 21<sup>st</sup> Century then this book should help resolve those doubts. It is thoroughly researched and has a strong 'academic' tone. But it also has a practical element and is not purely theoretical text.

It is a valuable addition to the relatively small but growing library about homoeoprophylaxis.

***Dr Isaac Golden***

26/3/2023 Melbourne, Australia

<https://www.homstudy.net/aboutdr/>

## **Foreword**

### **Dr. Jayne Donegan**

**Homoeoprophylaxis** is neither vaccination nor a substitute for vaccination. It is the oral administration of homoeopathically potentised remedies or similarly potentised preparations of part or parts of the disease process called nosodes. Homeopathic remedies and nosodes are energetic preparations designed to stimulate the vital force of the individual and support the innate healing power of the body. In homeopathic remedies of potencies above 12c, no molecules of the original substance remain, unlike vaccines. Administration is by mouth.

Conversely, **Vaccination** is the name applied generally to the process of introducing a substance of the nature of dead or attenuated living infectious material and other compounds, such as aluminium salts and formaldehyde into the body with the object of stimulating antibody production. The stated aim of such antibody production is to increase the ability of the body to resist or moderate disease. Vaccines are administered by injection or orally or nasally in drop or spray form.

It is important to understand that vaccination is not the same as immunisation. Immunisation means that you will *not* get a disease. The United States Food and Drug Administration (FDA), World Health Organization (WHO) and other departments of health implicitly acknowledged this having changed their informational literature over the years from saying that vaccines ‘immunise’ to saying that they ‘protect,’ a much less specific or testable concept.

This distinction must be made clear at the outset to avoid confusion among providers and recipients of both homeoprophylaxis and vaccines because most people have been led to believe that antibodies are the only factor providing immunity to disease and this is not the case. Antibodies are only the tip of the ‘Immunity Pyramid’ - the smallest part.

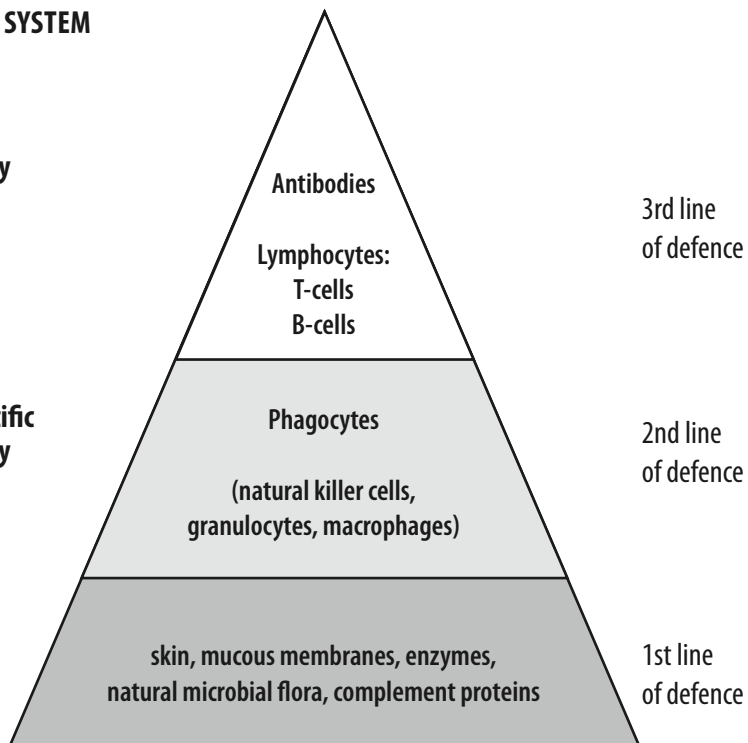
The major part of the immunity pyramid, the base which supports the rest, provides the first line of defence. We are protected by intact skin. If this

is pierced, the clotting system blocks up the hole after the blood flow has cleaned the wound. The enzyme, lysozyme present in saliva, tears, mucus and milk busts open bacterial cell walls. Sneeze and cough reflexes expel intruders, mucus traps them and cilia – little hairs – beat the mucus up and out. Ingested microbes as well as dietary indiscretions may be removed swiftly by diarrhoea and vomiting. The stomach contains one molar hydrochloric acid which denatures protein and kills bacteria. We are covered by friendly bacteria known as commensals (sharing a table). These live on our skin, in our nose, throat and gut. They take up space that would otherwise be colonised by bacteria which can lead to invasive disease, such as the *haemophilus* (Hib), *pneumococcus* and *meningococcus*, the trio that often live up our nose, usually with no symptoms, each acting as a control to the growth of the other. Some of the antibodies made by the body to ‘nice’ bacteria cross react and keep in check the multiplication of potentially ‘nasty’ bacteria such as by the meningococcus.

## IMMUNE SYSTEM

**learned  
specific  
immunity**

**innate  
non-specific  
immunity**



The Mucosal Associated Immune System (MALT) contributes almost 80% of immune cells. It lines the gut passages, airways, urogenital tract, external eye and the glands producing tears, saliva, sweat, milk and more. It processes information about hundreds of thousands of antigens, microbes, particles, pollens every day, hour, minute millisecond, picosecond and uses its innate intelligence, to determine which ones to make an immune response to and which to ignore.

The next level of the immunity pyramid, the second line of defence are white cells called phagocytes (eating cells) that include macrophages (big eaters) which do just that, they eat up organisms; and natural killer cells; also transferrin which is involved in transport of iron - very important in immunity to disease. For example, the diphtheria bacterium only produces toxin in the presence of low serum iron.

Fever speeds up all the reactions in the body making the liver detoxify quicker, the kidneys filter faster and other parts of the non-specific system work better. Inflammation walls off foreign matter from the rest of the body so it can be dealt with in a localised way. IgA, immunoglobulin A, secreted by the lining of the gut and air passages wraps microbes reducing their adhesion to body cells and reducing their ability to penetrate mucosal barriers. These and other immune responses are all part of the innate or non-specific immune system. Nothing to do with antibodies, but all to do with the general state of health of the person as stimulated by correct living conditions and holistic treatments.

It is only after the action of the innate immune system that, in a few cases, the tip of the immune pyramid, the specific immune or antibody producing system is engaged.

This is why a person can be immune to an infectious agent – i.e. they don't contract the disease when they come in contact with the organism - despite having no antibodies to that organism. Conversely, a person may have lots of antibodies to an organism and still contract the disease, as we see today with whooping cough.

Because the immune system is much more complex than the mere production of antibodies, the production of antibodies does not equal immunity.

The Innate or Non-Specific immune system relies neither on antibodies from prior infection (producing a 'memory') nor vaccination. It relies on health. Stimulation of the innate immune system by cleaning up our water and housing and ensuring an adequate food supply and provision of dry, ventilated accommodation are the reasons why the nineteenth and twentieth centuries saw such a massive decrease in death from infectious diseases in countries that carried out such social reforms and why children continue to die of such diseases in their thousands, today, in countries that did not. For example, in England and Wales, more than 99% of the people who used to die from measles and 98.5% of those who used die from whooping cough stopped dying before vaccines against whooping cough or measles were generally available and before even antibiotics were in general use, in the same manner as deaths from those diseases for which there were and are no vaccines.

What determines health are: clean water, adequate food, dry ventilated housing, someone to love and look after you, fresh air, sunshine, and the cultivation of a happy disposition.

So we can see that any measure that improves overall health also makes people more resistant to disease, and why those who are the least healthy and therefore need protection the most, are precisely those who make the poorest antibody response to vaccines.

The 'human-microbe' interface is less the chance chaos we are led to believe than a harmonious dance or symphony. Throughout life we build up spiritual, physical, and emotional waste products to be healthy and, in the case of a child, to go up a developmental step, we need to have an occasional detox. We do this by getting a fever – speeding up all the metabolic reactions in the body; loss of appetite – so the MALT can work optimally; maybe diarrhoea and vomiting; mucus or a rash – a rash is toxins coming out through the skin.

Some rashes have names, like smallpox, measles, mumps, rubella, chicken pox, slapped cheek syndrome. Others your physician calls, 'non-specific viral rash'. The name does not matter, nor the organism, they are all expressions of the process of elimination although a few have particular forms of maturation associated with them. Indeed, in India some people saw smallpox as the visitation of the goddess and in traditional Chinese medicine all such rashes are viewed as a way of expelling 'fatal toxins.'

It is crucial to understand that no-one dies from the normal course of an infectious disease, if they have the basic necessities of life (see above); they die from the complications of the illness which are all invasive. Therefore it is essential to avoid pharmacologically active medicines that suppress symptoms, especially fever. Suppression can block the beneficial detoxification leading to invasive disease.

Correct management is to support the process of elimination: opening the windows, no food, no dairy, plenty of clear fluids (breast milk is always fine) and rest. This will allow the liver, the major detoxifier, the kidneys, lungs, and bowels to work efficiently. The baby will then produce a tooth; the toddler will start walking without banging into the corners of furniture; the older child will have the emotional leap necessary to separate from home and parents and go to school or nursery or to face adolescence. The adult may make up for years of unhealthy living, solve their emotional problems, reinvent themselves, and, crucially, get rid of destructive influences that will eventually lead to fibrous and sometimes irreversible change such as heart disease or cancer, as well as having a nice rest! [see Nursing Children (and Adults) Supportively Through Acute Illness – Safe Management of Fever <https://www.jayne-donegan.co.uk/articles/>]

It can be understood that, in order to take a developmental step forward, the child has to clean out their system first, and this takes the form of a crisis, rather like a snake which has to slough off its old, too-small skin before it can slither out with its new, shiny, larger one.

Where does homeopathy come in? Homeopathy does not rely on specific disease diagnoses, the name of the pathogen nor what may be happening internally in the child or adult. Homeopathy relies on the innate intelligence of the body – rather like the innate immune system - to tell us by outward signs what is happening inside. The body tells us what we need to know, and we rely on that to work with the body to find the correct remedy. As Hahnemann said (§3) we need to, ‘*clearly perceive what is to be cured*’.

When homeopathy uses *Belladonna* or *Aconite* for fever, this is not to reduce the fever, it is to reduce the need for a fever by helping the body eliminate in other ways, including feeling more comfortable, wanting to drink more fluids, restful sleep. Ginger works in a similar way as a ‘defervescent.’

This is the case when the body has symptoms but what about when the body has none, but just might get some? We have been to some extent led astray by Pasteur, the nineteenth century French chemist's Germ Theory of Disease, namely, when you meet a microbe, you either get the disease because you had it before, survived, and have antibodies or, you have them from a vaccine. If we think about it, we know this is not true, for every winter there is a new 'flu, but not everybody gets it, even though they have no antibodies as it is new – that is why we have new 'flu vaccines every year.

Homeopathic prevention of diseases and homeoprophylaxis work differently.

1. **Constitutional treatment** acts to remove individual and inherited predispositions to disease and works in tandem with overall strategies to increase overall health – the only immunity. Similarly acupuncture, chiropractic treatment, naturopathy and cranial osteopathy can also be used to achieve a constitutional boost.
2. **Genus Epidemicus management.** This is based on the analysis of the type of infection that is circulating at the time e.g. this year's 'flu; a meningitis outbreak; the current whooping cough epidemic. Homeopathy is usually prescribed on the basis of individualised symptoms and responses, but when there is one particular disease around, the symptoms produced are often fairly similar hence the remedy that 'fits' the disease, once decided upon, can be used for both the treatment of those with the disease's symptoms and those who currently are symptom free. This method has a long and honourable history in the annals of homoeopathy. Examples include the use of *Lathyrus sativus* with polio; *Pulsatilla* with measles; *Belladonna* with scarlet fever and meningitis and *Drosera* with whooping cough.
3. **Nosodes.** These involve the use of homeopathically-potentised preparations of parts of the disease process, importantly containing no molecules of the original substance. This method does not involve looking at the characteristics of the prevailing infectious disease nor individual disease symptoms as there are none. Nosodes are administered entirely on the basis that they are made from the disease for which they are being used in order that the child or adult should remain free from the symptoms of that disease.



How can this be homeopathic – to give something for which the person has no symptoms? As stated above, the body, especially in childhood, needs to learn various ‘lessons’ and go up various developmental steps, the aim being that we should live to the age of 120 years in full strength and vigour, like Moses.

We do not need to produce external symptoms if the ‘lessons’ can be learned in another way. Introducing a child to the energetic form of a childhood illness, in the form of a nosode, can allow a stimulation of the vital force such that the child does the detox, goes up the developmental step, or learns the lesson without needing to go through the crisis or symptoms of the disease, similarly to the adult. If symptoms of the disease do occur, they may be modified as the lesson is already partly learned.

From my own experience of supervising homeoprophylaxis for more than 20 years, none of the children, or adults who have taken homeoprophylaxis have had the disease symptoms for which they were taking the nosode. It must also be remembered, however, that of the approximately 700,000 children born in the UK each year, a minimum of 5% are completely unvaccinated i.e. over 35,000 a year, 350,00 in ten years, and they do not contract for example, tetanus, polio, diphtheria either. So as there is no control group to those given nosodes, we do not know if they would have had disease symptoms without the nosode.

NB for tetanus, in my opinion, whether you do or do not vaccinate, the most crucial aspect is correct wound management, [see TETANUS and Treatment of Cuts, Grazes and Minor Injuries, <https://www.jayne-donegan.co.uk/articles/>]

Homeoprophylaxis stimulates the vital force of the whole body. Vaccination stimulates antibody production. They are not identical nor presented as such.

Dr Cathy Lemmon has written a thoroughly researched book on homeoprophylaxis that is a pleasure to read. She goes right to the roots of homeopathic philosophy promulgated by the master, Dr Samuel Hahnemann, whose vast knowledge of medicine, science and ancient Greek and Egyptian texts led him to formulate the law of *Similia similibus curentur* – like is

cured by like. She shows, with references to his copious writings, that homeoprophylaxis is part of the long and honourable practice of homeopathy as formulated by him. From there she presents the wisdom and experience of subsequent generations of homeopaths through to the modern field trials of homeoprophylaxis and current day expert practitioners.

Dr Lemmon's book provides valuable information and guidance both to practising homeopaths who have not yet considered offering homeoprophylaxis to their patients and for parents who are making health decisions for their children and themselves.

This is a very timely book.

***Dr Jayne LM Donegan, MBBS DRCOG DCH DFFP MRCGP***

23 May 2023

Dr JLM Donegan, London, UK

A former NHS GP, Dr. Donegan practises as a Homeopathic and Naturopathic Practitioner registered with the Homeopathic Medical Association, Homeopathy International and the Association of Naturopathic Practitioners. She is a member of the British Society of Ecological Medicine and a patron of the College of Naturopathic Medicine

<https://www.jayne-donegan.co.uk>

## Author's Foreword

The time has arrived, in medicine and healthcare, when people are demanding, if you will, access to information. Over the last several decades much has been brought upon them that they have not questioned, but rather trusted would lead them to better health, or preserve/ promote/ protect the health they have. More and more has been provided, in the form of medications and approaches that have been shown to be highly dangerous, if not lethal – yet these have been and are still being sold and promoted as 'health care'. Unquestionably, many advances have been made. However, many simple facts have been overlooked, forgotten, and even deliberately ignored or belittled. With this in mind, I firmly believe it is time for the (re-)introduction of the homeopathic means of preserving, promoting, and protecting health – homeoprophylaxis, sometimes called homeopathic immunisation.

And with this comes the (re-)introduction of homeopathic medicine to the general public. Homeopathy has been successfully treating, curing, and preventing ailments afflicting mankind for more than 200 years, but approaching this using means completely unknown to or unrecognised by what we know as conventional or orthodox medicine. Homeopathy is energetic medicine, utilising the energies produced by substances: plant, animal, and mineral, potentised in a very careful way so that these medicines work in a very gentle and nontoxic way. Homeopathic medicine has not changed in its approach since the time of its founder, the well-educated German medical doctor, Samuel Hahnemann. This work will touch lightly on things understood on this topic within conventional medicine, but the focus will be appropriate things homeopathic.

The idea of immunisation is not a new one, this is clearly understood. Here, I will present that the prophylactic use of homeopathic medicines is also not new. It has been continuously studied since the founder of homeopathic medicine, Dr. Samuel Hahnemann, learned of it in 1799 – which, very interestingly, corresponds directly with the time Edward Jenner introduced the now very well-known idea and practice of vaccination.

Since its inception in the late 1700s by Hahnemann, homeopathic medicine has had a dramatically positive impact on healthcare. However, in the early twentieth century, the practice of homeopathic medicine was caused to dwindle, especially as major funding began being allocated almost completely to hospitals and universities practising and utilising conventional/orthodox medicine.<sup>[1]</sup>

It is significant that today the use of homeopathic medicine is rising once more as, with ever-increasing volume, the call for non-invasive and effective medicine is reverberating. Explored here will be the history of homeopathic prophylaxis, supportive records, and supportive studies and research continuing to verify its effectiveness.

In this essay, I will not add new scientific research. However, I review and analyse much of the research that that has taken place and still continues. With the help of some wonderful and scientifically knowledgeable members of the board for HPWWC, and in consultation with colleagues, including Dr. Isaac Golden. we are embarking on some homeoprophylactic research ourselves. I openly encourage ongoing research into this, as I feel this will provide continuing confirmation of the effectiveness of the prophylactic use of homeopathic medicines.

A key part of what is presented here is the homeopathic understanding of health, disease, immunity, and susceptibility. Homeopathy exerts its therapeutic effect differently from conventional medicine – but centuries have shown that this energetic medicine works highly effectively. Knowing about (or even managing to observe) the tiniest particle of a substance does not, therewith, ensure an understanding of how something works, or why, if it seems to. However, observing the consistent effectiveness these tiny (even sub-microscopic) substances continue to have upon people to whom they are administered is empirical confirmation that homeopathic medicines work – and, by this same token, homeopathic prophylaxis.

Importantly, in this work, the prophylactic use of homeopathic medicines will not be presented as effective against diseases or conditions labelled by

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1 The Flexner Report (courtesy of the Carnegie Foundation Bulletin Number Four from 1910): <http://archive.carnegiefoundation.org/publications/medical-education-united-states-and-canada-bulletin-number-four-flexner-report.html>

conventional medicine, but by the symptoms which consistently present themselves under conditions which have been given a label of a disease. Homeopathic medicine works with symptoms, not labels or diagnoses. When the symptoms are similar, the same medicine will be effective, either as treatment or prophylaxis.

Enough information regarding homeoprophylaxis is found here, I feel, to explain what it is and to solidify its long-standing high rate of effectiveness. However, what I present here still simply scratches the surface – much more will also be forthcoming.

Facts stand firm and do not change. Facts are what are presented here. This provides a substantial and convincing summary of the effectiveness of homeopathic prophylaxis that I invite and welcome all to consider.

With the establishment of my organisation, *Homeoprophylaxis: A Worldwide Choice for Disease Prevention* (HPWWC) in 2015, I have been able to hold conferences in the USA, the Netherlands, and in India. Because of this international outreach in homeoprophylaxis and my working with global leaders – including homeopathic, conventional medical, legal, and governmental – I have been called the ambassador for homeoprophylaxis. I feel the perspective I share here is solid, fact-filled, and represents a firm understanding of its principles. I believe that the full understanding, acceptance, and use of homeoprophylaxis today is fully warranted.

## Items of Note

*In this essay, homeopathic prophylaxis will not be presented as effective against diseases or conditions labelled by conventional medicine, except as these consistently present themselves with similar symptoms. Homeopathic medicine works with symptoms, not labels. What is shared here is that, when the symptoms are similar, regardless of the label given to such a collection of symptoms, the same and/or appropriate homeopathic medicine will be effective, either as treatment or prophylaxis/preventative.*

Since its inception by the German medical doctor, Samuel Hahnemann (1755-1843), homeopathic medicine has had a dramatic impact on health-care. Homeopathy is a complete system of medicine built on the energetic approach. Its foundational principles have remained virtually unchanged for more than 200 years. Built on the law of like cures like, which was first explored by Hippocrates himself, homeopathy works effectively with nearly every health issue, from headaches and sore throats to more chronic issues, including issues having to do with the heart, joint pain, and more. It was once very broadly used, being the first medical approach of choice in the United States alone until the early twentieth century.

Because more natural/holistic forms of medicine, including homeopathy, are making a very strong comeback in the current day, for the sake of this essay, it will help to re-establish an understanding of some key homeopathic principles, including those associated with the highly effective homeopathic approach for immunisation that Hahnemann himself first realised. Understanding these, and, again, the fact that homeopathic principles have remained virtually unchanged, will offer a more thorough understanding of why homeopathy has always offered highly effective medicine.

From the outset it must be understood without question that *no* form of prophylaxis will ever offer 100% effectiveness. Yet records and studies continue to confirm very high (standing at about 90%) effectiveness for homeoprophylaxis, which introduces nothing toxic to the body. With proper use, there is no chance or opportunity for any negative effects from this.

The primary focus here, as should be expected, is on homeopathy. Homeo-prophylaxis has been in use for more than two centuries and has consistently shown a high rate of effectiveness.

The idea of immunisation – or prophylaxis or disease prevention – has been a pursuit of medicine even longer than these two centuries. I will touch to a degree on the principle of immunisation from the conventional point of view. Appropriate and relevant topics within conventional medicine will also be tangentially mentioned later.

Because history is a tremendous teacher, in presenting this information, this work will explore appropriate homeoprophylactic history. This exploration will include records in support of its efficacy from Hahnemann's time until today. This will also include general comparative health records from homeopathic and conventional practice.

Terms used to reference specifically the prophylactic use of homeopathic medicines include the following:

- Homeoprophylaxis
- Homeopathic prophylaxis
- Homeopathic immunisation
- The prophylactic use of homeopathic medicines
- 'HP'\*

*\*In the German language, the term, 'HP' is already in use within the healthcare system as an acronym to denote the Heilpraktiker, or naturopathic doctor. Because of this, and for simplicity's sake, I will not use this acronym here.*

I have five English printings of Dr. Samuel Hahnemann's seminal work, the *Organon of Medicine*, which was published in six editions, each with changes as his research and thinking evolved. Three of my copies are of the final edition, the sixth. These were translated by Künzli, Dudgeon/Boericke, and O'Reilly. The fourth edition I have is a printing of the 'Third American Edition, with Improvements from the Last German Edition', which was first published in 1849.

While Hahnemann completed his final (sixth) edition in 1842, it is assumed that this early English translation is of his fifth edition, because there are

omissions which are not included in each of the sixth editions. One such is the lengthy footnote to Aphorism 11, which I reference in this book.

My fifth printed copy of the *Organon* is an 1849 printing of Dudgeon's English translation of the fifth edition. I also reference an online sharing of the sixth edition in German which is found on the HOMÉOPATHE INTERNATIONALE website.<sup>[2]</sup> A reference for all my sources is in the Bibliography section.

I simply state here what I am using, referencing, and quoting from throughout this work. You are invited to peruse each of these *Organon* editions yourself. Because of homeopathy's more than two centuries of history and practice, what will be presented to allow a complete understanding of these terms within homeopathy is presented here with a solidly historical focus.

### ***Abbreviations used***

**AYUSH** – Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy (India)

**HP** – Homeoprophylaxis or Homeopathic Prophylaxis (in context of this work)

**RAECH** – Rapid Action Epidemic Control Cell Homeopathy (Kerala, India)

### ***Regarding the Spelling of Homeopathy/Homeoprophylaxis***

*Not wanting this to present any sort of argument of intellect, please know that I am fluent in German. It is a long-established practice, for the German language -and others that utilise the umlaut (the two small dots) to place an extra 'e' after the vowels that would have an umlaut, if this umlauted figure is not available. Hence, for the German language, the letters 'ä', 'ö', and 'ü', are also acceptably presented as 'ae', 'oe', and 'ue', when needed. Such would be the case if an English language keyboard were being used to write out words using these.*

*In German, the word for homeopathy is spelled, 'Homöopathie'. When said quickly, an English speaker could easily hear something sounding quite similar to what we understand as 'Homeopathy'.*

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2 <http://homeoint.org/books4/organon/org000.htm#p8>



*It has been pointed out that the spelling of this word, in English, as 'Homœopathy' is proper, pointing to actual Greek roots for the 'Homœo', or 'same', upon which this word is rooted. This is fine to be noted. However, I will ask just a couple of things. First, that it also be noted that this Greek root is also known to be spelled, 'Homio' or even 'Homoios'.<sup>[3]</sup> Additionally, I will state that the character, 'œ' does not exist in the alphabet used for the English language – that spelling homeopathy with this character presents but a singular word in the English language that utilises this character.*

*In my opinion, the addition of the second 'o' in this word seems quite unnecessary, and actually, considering the German roots of homeopathic medicine, seems more to point to the practice of using an extra 'e' when no umlaut is present, as is the case with unlauded letters presented with an English language alphabet.*

*And, needless to say, in English, this word is still pronounced, 'homeopathy', without regard to whether the special character – the 'œ' – is utilised or not.*

*In short, then, in my opinion it seems rather pointless to utilise the 'œ' in this word. Hence, in this essay, I will not be using the 'œ' for homeopathy or any form of this word, nor any form of homeopathic prophylaxis, except when referencing the writings of those who have chosen to utilise this spelling.*

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3 <https://www.etymonline.com/search?q=hom%C5%93o>

## INTRODUCTION

Since its introduction more than 200 years ago, the fundamental principles of homeopathic medicine have remained virtually unchanged. Dr. Samuel Hahnemann (1755-1843) was a trained medical doctor, having a deep understanding of the medical science of his time. However, due to his prodigious ability to think and analyse beyond the science of that time, when he found it lacking, many of the principles he laid down appear almost prophetic in foresight and insight and have proven to be remarkable. He frequently spoke of ideas that today's conventional medicine has only relatively recently noted to be of importance to health, these including good nutrition and physical movement; how diseases can travel from one host to the next, and more. He was an early proponent of the idea that prevention is better than cure.

Within homeopathic medicine, ideas pertinent to this work which are currently known by the terms of illness, disease, susceptibility, and immunity have been explored since its founding by Hahnemann. These and the fundamental and virtually unchanged principles of homeopathy are discussed within his seminal work and the first book of its kind, the *Organon of Medicine*. Being a fully-trained medical doctor, Hahnemann well knew the limits of science – that its answers can rarely be considered ‘firm and fast’, that there is always the need for continual study. He produced, as testament of his work and research—a total of six editions – or refinements – of the *Organon*, the first published in 1810. The sixth edition, while completed in 1842 (a year prior to his death) was not published until many years later, in 1922.

Within the *Organon* are 291 short segments, called ‘Aphorisms’, in which Hahnemann presents what he saw, experienced, and postulated through his medical career. He includes commentary about much of what he saw in common medical practice of his time— and shares his opinions and reasons and support for disagreement with much of this.

Another major work is his 2-volume *Chronic Diseases – Their Peculiar Nature and Their Homœopathic Cure*. In this 2-volume series, Hahnemann

shares ideas relating to why people sometimes simply do not get better despite careful and precise homeopathic treatment. Through these books he introduces a concept known within homeopathy as miasms. The idea of a miasm can be thought of today as a ‘genetic predisposition’, but it runs beyond this. Studying what he writes in the *Chronic Diseases* introduces a large topic that is discussed here: the idea of susceptibilities and how these can lead to contracting a condition carrying a disease label. A comprehensive knowledge of both the *Organon* and the *Chronic Diseases* is necessary for homeopaths to practise effectively.

Other works by Hahnemann were compiled and translated into English by homeopath, Robert Ellis (R.E.) Dudgeon (1820-1904) [translator of the well-known and -used version of *The Organon*, 6<sup>th</sup> edition (5<sup>th</sup> & 6<sup>th</sup> combined)], and titled, *The Lesser Writings of Samuel Hahnemann*. Especially pertinent directly to this review is a writing contained in this, entitled ‘*The Cure and Prevention of Scarlet Fever*’, written in 1799. In this, Hahnemann shares his discovery of the prophylactic use of homeopathic medicines and his strong and substantiated opinion about the profound importance of this. He discusses how he observed that, not only do homeopathic medicines work excellently curatively, but these also quite definitively work preventatively – or prophylactically, as it can be called. In fact, he writes that,

“...the perfect prevention of infection... and the discovery of a means whereby this divine aim may be surely attained, (offers) infinite advantages over any mode of treatment, be it of the most incomparable kind soever”<sup>[4]</sup>

This was, of course, principally in specific reference to what he saw occurring in the outbreak of scarlet fever with which he was working in the town of Königslutter. However, I believe that, as a trained medical practitioner, as well as an astute researcher and scientist, Hahnemann was also seeing how this would benefit mankind on a much broader level, beyond scarlet fever. Because, in this writing, Hahnemann confirms what runs concurrently to the foundational tenet of homeopathy – that not only does Like *cure* Like (Similia Similibus Curentur), but Like also *prevents* Like (Similis Similes Impedit). In other words, prevention is better than cure.

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4 *Lesser Writings*, p. 377

This thought was also echoed quite early on by another noted homeopath, Dr. J. Compton Burnett, in his book, *Vaccinosis and its Cure by Thuja* (1884), which is known by many homeopaths. Important to note about this book is that he does not here purport that the homeopathic remedy of *Thuja* should be utilised for all prophylactic measures – or even treatment of vaccine injury. Rather, Burnett here makes a solid case for how effective *Thuja* is in the prevention of smallpox. Throughout his book he mentions general prophylaxis through homeopathic means. On page 3, Burnett states that, ‘the law of similars also applies to the prevention of disease.’

In her book, *Homeopathy in Epidemic Diseases*, Dr. Dorothy Shepherd (1885-1952) observes that “...*Homeopathic preventives are much safer in use, and absolutely certain in their effects. Even should the infectious disease develop, it will be in a much milder form.*” [p. 16] We will discuss later what Dr. Shepherd notes here, regarding a disease presenting itself in a ‘much milder form’, should it be contracted after use of homeoprophylaxis. This is something Hahnemann himself also noted.

Interesting to note is that Hahnemann’s discovery of the effective prophylactic use of homeopathic medicines happened at about the same time that Edward Jenner presented the idea that today is popularly known as vaccination. Hahnemann was at first intrigued by Jenner’s idea. However, Hahnemann’s studies confirmed that actual immunity – or the informing of what is termed the immune system – needed much more than what happens with an injection, often called a vaccination. To also be noted at this point is that applying whatever justification the makers of the vaccines will give for their inclusion, these injections also include many other substances that can be harmful to the body.

Properly made homeopathic medicines used for prophylaxis contain nothing toxic and are inherently safe, as are all properly made homeopathic medicines.

Considered through homeopathic eyes, immunity is much more than simply the body’s production of antibodies or titres. While the presence of these can be helpful for the body, conventional medicine/science has known for years that they must be understood as mere surrogates of actual immunity, which in its entirety is indeed much more. Hahnemann saw early in his

career that the idea of building immunity, lessening susceptibility, or preventing symptoms worked most appropriately when it followed the idea of similar symptoms, which is what homeopathy follows even now. As will be presented, when the procedure of matching symptoms is followed, effective homeoprophylaxis results.

Since the time of Samuel Hahnemann, the study and use of homeopathic prophylaxis has been actively pursued through research and trials. To this date, this has involved millions of people around the world. Compilations – including research papers, studies, articles, and books – have been and are still being written about homeopathic prophylaxis, and these are relatively quickly accessible. The research continues today. Much of what has been collected can be found at these places:

- [www.Homeoprophylaxis.Education](http://www.Homeoprophylaxis.Education)
- [www.HomStudy.net/natural-immunisation-research](http://www.HomStudy.net/natural-immunisation-research)
- <https://homeopathyplus.com/Homeoprophylaxis-Human-Records-Studies-Trials.pdf>

Dr. Raj K. Manchanda, the Director of AYUSH, government of Delhi, India, Secretary for Information and Communication for LIGA MEDICORUM HOMOEOPATHICA INTERNATIONALIS (LMHI), and the former director general of India's Central Council for Research in Homeopathy (CCRH), is a very well-known homeopath, researcher, and educator from India. In January 2020, at the third international conference of my organisation, Homeoprophylaxis: A Worldwide Choice for Disease Prevention, Dr. Manchanda made the important observation that homeopathy is known around the world precisely because of its success in homeoprophylaxis.

The idea of immunity and, therewith homeopathic prophylaxis, as well as the accompanying ideas of disease/illness, immunity, susceptibility, and immunising agents – each of these must be understood from the perspective of homeopathic medicine. So explanation into these is here provided.

While some homeopathic practitioners question the need for homeopathic prophylaxis altogether, I have found that those presenting this idea need simply to understand more about the basic tenets of homeoprophylaxis. Breadth of opinion is always welcome. I simply desire, in this essay, to provide substantiation for homeoprophylaxis so that it can be seen and un-

derstood as it is solidly part of homeopathic practice, when properly approached.

Education is key to change. And, when change is understood to be necessary or appears to be warranted, this is best pursued by presenting solid facts.

This essay presents what is documented historically as well as other supportive information regarding the prophylactic use of homeopathic medicines. It also includes pertinent homeopathic history and how homeopathy continues to be utilised today. This work is fully referenced, and I provide a bibliography, which I encourage anyone to study further, in order to learn even more.