

Emerging Economies' Need for Cheap, Efficient Health Care Makes Western Anti-Homeopathy Rhetoric Irrelevant: Observations from the Canadian Homeopathy Conference, October 2011

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Abstract

Large-scale use and acceptance of homeopathy in Cuba, Latin America, and India raises questions about the relevance of campaigns mounted against homeopathy in the United Kingdom, Australia, and other nations of the developed world, especially as the developing economies of Asia and Latin America are set to outstrip those of the developed world.

Introduction

SIR ISAAC NEWTON ONCE SAID, "For every action there is an equal and opposite reaction," and this statement is applicable in more than just a physical sense. For example, when it comes to attitudes toward complementary and alternative medicine (CAM) in general and homeopathy in particular, in the *developed* world, especially the United Kingdom, we see the same principle in operation. For action read: "There is no evidence homeopathy works," and the attendant denunciations that homeopathy is "unscientific"; "unethical"; "deadly"; "dangerous"; and "quackery"; etc.¹⁻³ Contradicting these claims and general questioning of the motives of those who make them constitutes the reaction.⁴⁻¹¹ And so on it goes; antihomeopathy rhetoric met with prohomeopathy counter argument: a seemingly never-ending cycle of action and reaction.

Attendees at the first-ever international meeting hosted by the entire united Canadian homeopathic community (held in Toronto in October 2011) heard something new stirring in the developing world. Out of Cuba comes a spectacular demonstration of how to protect millions of people against the deadly mosquito-borne disease leptospirosis using homeoprophylaxis,¹² while in India many thousands of cancer sufferers have benefited hugely by receiving homeopathic treatment.¹³ Both breakthroughs suggest that not only is attacking homeopathy a peculiarly parochial "Western" pastime but, given the shifting balance of global power (toward the fast-growing economies in Asia, South, and Latin

Americas, and others), it could soon be seen for what it really is: irrelevant.

Homeoprophylaxis in Cuba

Leptospirosis is a highly contagious zoonotic (i.e., passed from animals to humans) mosquito-borne disease of major importance in the tropics, where its incidence peaks during rainy seasons. Natural disasters (e.g., hurricanes) enhance its virulence and represent a major challenge for leptospirosis prevention strategies, especially in endemic regions, such as Cuba. Vaccination usually works here, but its effectiveness is curtailed in emergency situations consisting of a sequence of disasters. This is because of difficulties in rapidly producing and distributing the vaccine, while acquiring immunity can take several weeks, leaving target populations vulnerable in multicomponent disaster situations.

In 2007, Cuba suffered just such a sequence of disasters, with three hurricanes striking the island in quick succession. So Dr. Gustavo Bracho of Havana's Finlay Institute turned in desperation to homeoprophylaxis (the use of homeopathic medicines for disease prevention, an intervention about which he initially had huge misgivings) to help control a posthurricane leptospirosis epidemic. "By using four of the circulating strains of leptospirosis pathogens, highly diluted and prepared in the homeopathic manner (known as potentisation, i.e., sequential dilution followed by agitation after each dilution step), we hoped to rapidly induce large-scale protection in a dangerous epidemic situation in three Cuban provinces," he said.

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As reported in the journal *Homeopathy*,¹² Bracho and his colleagues at the Finlay Institute, ably assisted by the Cuban public health service and the Cuban army, managed to orally administer leptospirosis homeoprophylaxis to 2.3 million persons reckoned to be in a region affected by natural disasters and at high risk of an epidemic. Only in these regions did the incidence of leptospirosis fall significantly. Indeed, it fell so low it was well below the historic median, an observation that was independent of rainfall. No significant fall in leptospirosis incidence was observed in nonhomeoprophylaxis regions.

If "Western" conventional doctors and scientists had performed this work, it would have been hailed as a major medical breakthrough, and Bracho and his colleagues feted as heroes. Instead, no prestigious conventional medical journal would accept the Cubans' findings. "Indeed," Bracho continues, "I have personally received death threats over the Internet, and even been branded a 'terrorist!'" Clearly, the thought of homeopathy being so effectively wielded by doctors from one of the world's few remaining Communist regimes is too much for some in the developed world to bear. Meanwhile, the use of homeopathy to treat cancer by some Indian doctors has received a more measured response, particularly in North America.

The Banerji Protocol in India

Pioneered by father and son Drs. Prasanta and Pratip Banerji of the Prasanta Banerji Homeopathic Research Foundation (PBHRF) in Kolkata, India, the "Banerji Protocols," as they are called, combine the latest disease diagnostic technologies (e.g., ultrasonography, magnetic resonance imaging, cancer markers) with the prescription of specific combinations of homeopathic remedies for specific diseases, particularly various cancers. Refined over 4 decades of clinical research, experience, and observations, "classical" homeopathy, this isn't!

Where the reception of Banerji's results differs from the Cubans' is that they have impressed institutions in the United States, for example, leading to research collaboration with the University of Texas MD Anderson Cancer Center in Houston. There, human brain cancer and HL-60 leukemia cells, normal B-lymphoid cells, and murine melanoma cells were treated *in vitro* with different homeopathic potencies of *Ruta graveolens* in combination with *Calcarea Phosphorica* (calcium phosphate, $\text{Ca}_3(\text{PO}_4)_2$).¹³ In addition, 15 patients diagnosed with intracranial tumors were treated with *Ruta* in 6c homeopathic potency and $\text{Ca}_3(\text{PO}_4)_2$ at 3x potency. Of these 15 patients, 6 of the 7 patients with glioma showed complete regression of tumors. Normal human blood lymphocytes, B-lymphoid cells, and brain cancer cells treated with *Ruta in vitro* were examined for telomere dynamics, mitotic catastrophe, and apoptosis to understand the possible mechanism of cell-killing, using conventional and molecular cytogenetic techniques. Both the *in vivo* and *in vitro* results showed induction of survival-signaling pathways in normal lymphocytes and induction of death-signaling pathways in brain cancer cells. Cancer cell death was initiated by telomere erosion and completed through mitotic catastrophe events, leading the Banerjis and their American collaborators to conclude that *Ruta* in combination with $\text{Ca}_3(\text{PO}_4)_2$, both at low homeopathic potencies, constitute an effective treatment for brain cancers, particularly glioma.¹³

The Banerjis have also submitted 14 of their cases for evaluation to the US National Cancer Institute (NCI) Best Case Series Program (first launched in 1991 to seek out alternative approaches to cancer treatment and support prospective research projects utilizing therapies identified through this program). "Though not the best," says Dr. Pratip Banerji, "they were the most complete."

This was a retrospective examination of 14 cases involving patients with various malignancies, 7 of which were lung cancer. The NCI accepted the series in March 1999, and they were then presented to the Cancer Advisory Panel for Complementary and Alternative Medicine in July 1999. Four (4) of these cases then had independent confirmation of diagnosis and radiographic response and were accepted as sufficient information for the NCI to initiate further investigation, which was published in 2008.¹⁴ Since 2002, the Banerjis have collected more than 27,000 cases on their database, including over half a million patient visits.

The sheer scale and positivity of the Cuban and Indian results raises an interesting question. Given that economic power is shifting away from debt-ridden developed world nations (with their reliance on globalized industries, including pharmaceuticals) toward the rapidly growing economies of India, China, Latin America, and other parts of the developing world, just how relevant is the antihomoeopathy rhetoric from skeptics (and repeated by the media, particularly in the United Kingdom)? It might seem fanciful to counter antihomoeopathy skepticism within the context of the latest global downturn, but there is a compelling case for such arguments.

First, homeopathy is incredibly popular and still growing fast in India, where it is estimated there are over 350,000 homeopaths. First introduced into India around 1810, legally it is now on a par with conventional medicine, and there are scores of homeopathic colleges, including some that give postgraduate training and degrees in homeopathy, and homeopathic hospitals. Mahatma Gandhi promoted homeopathy as part of the Indian medical system after that country achieved independence from Britain in 1947; the government promotes it in TV ads,¹⁵ and it has attracted great support not only because it is seen to work, but also because its philosophy meshes well with the cultural and spiritual traditions of the Indian people.

Consider the plight of the president of a homeopathic professional association in North America, receiving an e-mail from a well-trained and experienced Indian homeopath looking to immigrate, and requesting help finding a job in a hospital—as has happened to 2 of the authors (personal communication). "You don't understand," the hapless president tried to explain. "As far as homeopathy is concerned, *you* are in the developed world, while *we* are in the third world!" In addition, the would-be immigrant's native land is fast becoming an economic force to be reckoned with.

Professor Montagnier Goes to China

Secondly, consider China. Homeopathy is a fledgling movement there, though there is a holistic and homeopathic research lab at the University of Hong Kong, which is studying, among other things, the potentization of

traditional Chinese herbal formulae.¹⁶ The populace, like India's, has a long-standing acceptance of health care modalities not limited to the approaches of Western materialism.

In addition, in December 2010, the 78-year-old virologist and Nobel laureate Professor Luc Montagnier announced he would be taking up leadership of a new research institute at Jiaotong University in Shanghai.¹⁷ What shocked many scientists at the time, however, was not Montagnier's departure from France but the subject material he planned to study in China: electromagnetic waves that Montagnier says emanate from the highly diluted DNA of various pathogens.¹⁸

To the skeptical ear, this all sounds suspiciously like homeopathy. To quote Montagnier himself, "I can't say that homeopathy is right in everything. What I can say now is that the high dilutions are right. High dilutions of something are not nothing: They are water structures which mimic the original molecules. We find that with DNA, we cannot work at the extremely high dilutions used in homeopathy; we cannot go further than a dilution of 10^{-18} [equivalent to an quintillionth or an *attomole*: authors' addition], or we lose the signal. But even at 10^{-18} , you can calculate that there is not a single molecule of DNA left. And yet we detect a signal." When Montagnier was asked if he had drifted into pseudoscience, his response was, "No, because it's not pseudoscience. It's not quackery. These are real phenomena which deserve further study."¹⁸ Montagnier is sympathetic enough to homeopathy to have presented an article at the Joint American Homeopathic Conference in April 2012.*

But why the Chinese interest in Montagnier's research? Significantly, Dr. Bracho dropped a hint during his presentation at the Toronto conference: He mentioned Montagnier's work as a possible explanation for the efficacy and effectiveness of his leptospirosis homeoprophylaxis, and that he and his colleagues were working on similar approaches to other mosquito-borne diseases such as dengue fever and malaria. In addition, China and Cuba constitute two of the last Communist regimes in the world, and China has burgeoning mineral interests around the world, particularly in mosquito-borne disease-prone areas such as Africa and South America.

Though criticized recently by the group Human Rights Watch for its poor record on health and safety, and for abusing and exploiting the workers in Zambian copper mines,¹⁹ China does have a more-than-40-year record of providing substantial health assistance to many African nations.²⁰ It would stand to reason that in order to be able to maintain and develop its expanding mineral interests, China would want to protect the health of the workers of the countries in which it is operating using the cheapest and most effective method available. This could explain their interest in Prof. Montagnier's work and a possible link to the Cuban leptospirosis homeoprophylaxis results.

Joining the Dots

If these programs could be expanded to successfully include other tropical mosquito-borne diseases, and then coupled with the possibility of cheap homeoprophylaxis manufacture offered by application of the results of Montagnier's research, then the Chinese could help usher in an

age of inexpensive and effective medicare throughout Africa, and further such efforts in Latin and South America, where they would find the ground already well prepared.

In Brazil, for instance, homeopathy has enjoyed government approval since the 19th century,²¹ is integrated into its public health system,²² and continues to be very popular. In fact, Brazilian researchers were experimenting with homeoprophylaxis for meningococcal disease, with excellent results, as far back as 1974,²³ and more recently have had similar results against dengue fever.²⁴

The Brazilian experience of a continued steady growth of homeopathy over the decades and governmental acceptance of it as one of a range of medical options—without the aggressive persecution of homeopathy and resultant all-but-disappearance in the 20th century that characterizes its course in developed countries, the United States particularly—is actually fairly typical of nations in the developing world, as a reading of national homeopathic histories on the website of the *Liga Medicorum Homoeopathica Internationalis* demonstrates.²⁵ In fact, the developing world has produced some of homeopathy's greatest minds, including Rajan Sankaran (India) and Francisco Eizayaga (Argentina).

Combining this with the Banerjis' work in India and increasing economic parity in what at the moment are considered third-world nations, one can begin to make out a pattern of cheap and effective health care expanding rapidly throughout the developing world, while the developed world languishes in expensive pharmaceutical-industry-inspired ill health. (Using the old investigative tenet of "follow the money" to discern motivation, one might cynically note that the Western-centric campaigns of homeopathy's detractors coincide neatly with the pharmaceutical industry's preferred market locations—Cuba, of course, not being among them.)

Being at the Canadian conference opened delegates' eyes to how professional homeopaths in the developed world—and other CAM practitioners as well for that matter—would do well to emulate the *esprit de corps* of these developing economies, which are embracing homeopathy for its cost effectiveness, simplicity, and accessibility.

The advances already known to be possible in homeopathy are acquiring fresh impetus in South America, Latin America, and India. Replicable studies on huge numbers of patients are successfully being integrated into the prevailing medical paradigm based solely on a positive cost-benefit analysis of homeopathy's effectiveness at solving the medical problems of those emerging economies, unencumbered by the agenda of pecuniary interests dominated by for-profit corporations and Western institutions.

Conclusions

Indeed, the homeopathic "heresy" is even managing to infiltrate closer to home, in the form of a groundbreaking report commissioned by the government of Switzerland affirming the cost effectiveness of several forms of CAM as equivalent to conventional medicine, except for one: "Statistical procedures show similar total practice costs for CAM and COM [conventional medicine], with the exception of homeopathy with 15.4% lower costs than COM" [authors' emphasis].²⁶ One is tempted to think it is merely a matter of time before cash-strapped Western governments struggling with skyrocketing conventional health care costs take notice.

*Prof. Montagnier announced at this conference that his work had been replicated recently in Italy and Germany.

In the West, homeopaths feel they have their backs to the wall. Their sense of community is threatened by the divide-and-conquer strategy of Big Pharma and the corporatist institutions (as well as Internet “trolls”) they support in North America, the United Kingdom, and Europe.^{4,5} More attention needs to be directed to (and inspiration taken from) those countries where homeopathy is simply accepted as one among many solutions to the age-old problem of how to make patients well again. The gradual shift of economic power away from the West toward developing nations, the obvious success of the work of Dr. Bracho in Cuba and the Drs. Banerji in India, and the opportunity for continuing discovery offered by Dr. Montagnier’s research in China could mean that in the not-too-distant future, the current pressure against homeopathy/CAM will simply become increasingly irrelevant.

Disclosure Statement

None of the authors has any competing financial interests.

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