



# Link & Learn

## Adverse Effects of Homeopathy? A Useful Discussion

Christine Wittenburg, Spain

This short paper forms part of an assignment I wrote for the MSc. Homeopathy course at the University of Central Lancashire.

### A Review

The discussion between homeopaths and scientific critics of homeopathy has just gained a new quality. Before, this discussion was limited by:

- There can't be medical action of substances diluted above Avogadro's number.

versus:

- Homeopathy can successfully demonstrate effects.

By now, the debate centres on adverse effects of, or initial reactions to, homeopathic medication.

A recent qualitative contribution to how homeopaths handle initial reactions to homeopathic medication was made by *Stub, Alræk and Salamonsen* [9]. Simultaneously, *Posadzki, Alotaibi and Ernst* [3] published a systematic review of 38 reports/1159 cases, treated homeopathically. They accused homeopathy of causing harm; being responsible for certain adverse effects (AEs). Homeopathic AEs were detected in 30 of the reviewed reports.

The remaining eight reports refer to noxious effects produced through substitution of conventional medication by homeopathy. This – questionably described as “indirect AEs” – represents a serious therapeutic negligence. I think problems caused by this form of therapeutic negligence will be solved by the ongoing efforts to medically train homeopathic lay-practitioners as in the German model of qualification-assessment by government and by providing robust homeopathic education to both medi-

cal and nonmedical practitioners. It is absolutely necessary to know what might happen to a patient after stopping conventional medication. Furthermore, rebound-effects should never be underestimated!

As stated by *Posadzki, Alotaibi and Ernst* [3], 94.7% of the medications employed in the reviewed reports were administered in material dilutions lower than C12/D24. Some cases were treated with highly poisonous non-homeopathic mother-tinctures (*Aconitum, Rhus toxicodendron*). Classical homeopaths beware of low material potencies as stated in § 276 of the *Organon* [6].

### Examples of Questionable Reviewing Procedures

Let's look at the first 30 reports. Four reports mention a fatal outcome from homeopathic medication. In three of them, neither homeopathic nor conventional medications are listed. The remaining case provides more information: male, 67 years old, diabetes type II, medication with sulfo-

nylurea (glimepiride); started additional homeopathic treatment two weeks before the fatal outcome: acute pancreatitis and necrosis of the pancreas head [1].

A literature search (Pubmed) results in various case reports: GPs expressing their concern about sulfonylurea treatment, presenting cases of acute pancreatitis after medication (e.g. [2,5]). A recently published RCT (Randomised Controlled Trial) also states some incidence [7].

The inclusion of this fatal case in the review would have gained more weight if sulfonylurea had never been observed to cause acute pancreatitis.

Another questionable case of homeopathic AEs: *Geukens'* treatment of an elderly coal miner: imminent heart failure, cured by homeopathy. Some years later, the patient developed bladder cancer and got radiotherapy, which successfully removed the cancer, but he had still some symptoms which again were cured by homeopathy [4]. *Posadzki et al.* turn the case around and declare both pathologies as being caused by homeopathy. They omit that the patient was taking carbamazepine for seizures following an injury of the head before commencing homeopathic treatment, as stated by *Geukens*. Carbamazepine is known to cause cardiovascular problems [8].

Concerning the bladder cancer: if a malignant illness could be attributed to any medication in the past, where would this story end?

How could these details escape the attention of the publication's peer reviewers?

### SUMMARY

This column is intended to stimulate discussion on the pages of LINKS and to share short formulated ideas and observations. Open is the keyword here: open to any subject; write with an open mind and an open heart; favour question marks over exclamation marks and be open to discussion. In a recent publication of a systematic review, homeopathy – besides not having benefits – is charged with causing harm. But “there is no evil without any positive outcome” (Spanish proverb), and the debate on adverse effects might illuminate the theme of primary effects, secondary effects and initial reactions of (not only!) homeopathic remedies. The work of *M. Z. Teixeira* – which makes adverse and rebound effects of conventional medicines available for homeopathy – will help me to disentangle this spiny subject.

**KEYWORDS** Adverse effects, Primary effects, Secondary effects, Rebound effects, Initial reactions, M. Z. Teixeira



## Effects, Adverse and Rebound Effects

### The work of Marcus Zulián Teixeira

A promising aspect of the discussion on “adverse effects” is that homeopaths and their critics finally encountered a platform where both are discussing the same problem, but from different angles. Seen from the homeopathic philosophical point of view the difference consists in the application of the principle of similitude versus the principle of contraries: Conventional medicine uses the “effects” of drugs – primary actions – based on the principle of contraries, converting them into suppressive actions, and has to deal with “adverse/rebound effects” (secondary and paradox reactions) systematically.

Homeopathy utilises “effects” and “adverse effects” (primary actions of substance and secondary reactions of the organism to the substance) based on the principle that “like cures like”, attenuating both effects by potentiating/dynamising substances. It uses the primary and secondary actions to trigger the organisms’ self-healing mechanisms.

Teixeira investigates the effects, adverse effects and rebound effects of conventional drugs basing his analysis on the homeopathic principle of similitude. He published his findings concerning various classes of drugs, e.g., bisphosphonates [16], proton pump inhibitors [15], statins [14], antidepressants [13], bronchodilators [12] and NSAIDs [11]. Interestingly, the more a drug develops its primary action of suppression on the patient (“successful treatment” in conventional medicine), the higher the probability of rebound/paradoxical effects:

“Drugs with stronger enantiopathic [palliative] effects suppress the primary symptoms of the disease more intensely, triggering proportional greater paradoxical reactions.” [13].

Hahnemann [6] lists some primary and secondary/paradoxical (re)actions in §59 of his *Organon*; e.g., the use of digitalis to slow down a high pulse frequency, and the paradoxical reaction to this drug: an even faster pulse than initially observed.

Teixeira makes his findings available through a website which contains the ho-

meopathic *Materia Medica* and a corresponding repertory of hundreds of conventional drugs based on the adverse effects listings from the FDA [10].

Homeopathy can logically explain effects, adverse effects and rebound effects of conventional drugs applying the Law of Similars. It also explains why rebound effects of these drugs are of higher frequency in patients sensitive to a given drug. The use of the Law of Similars makes conventional drugs’ AEs available for homeopathic treatment.

## References

- Barquero Romero J, Redondo López JM, Galeano Díaz F, Pérez Miranda M. Pancreatitis aguda fatal en un paciente en tratamiento homeopático. *Med Clin (Barc)* 2004; 122: 318–319
- Duboeuf T, De Widerspach-Thor A, Scotto B, Bacq Y. Pancréatite aiguë liée au glimepiride (Amarel®). *Gastroenterol Clin Biol* 2004; 28: 409–410
- Posadzki P, Alotaibi A, Ernst E. Adverse effects of homeopathy: a systematic review of published case reports and case series. *Int J Clin Pract* 2012; 66: 1178–1188
- Geukens A. Two more case histories. *AJHM* 2001; 94: 93–105
- Knezewich E, Crnic T, Kershaw S, Drincic A. Liraglutide-associated acute pancreatitis. *Am J Health Syst Pharm* 2012; 69: 386–389
- Hahnemann S. *Organon original – Organon der Heilkunst*, 6. Auflage (facsimile). (Original work published 1921). Berg am Starnberger See: O-Verlag; 1985
- Nauck M, Frid A, Hermansen K, Shah NS et al. Efficacy and safety comparison of liraglutide, glimepiride, and placebo, all in combination with metformin, in type 2 diabetes: the LEAD (Liraglutide Effect and Action in Diabetes)-2 study. *Diabetes Care* 2009; 32: 84–90
- Novartis Pharmaceuticals Corporation. Tegretol® (2009). Retrieved from: [http://www.accessdata.fda.gov/drugsatfda\\_docs/label/2009/016608s101,018281s048lbl.pdf](http://www.accessdata.fda.gov/drugsatfda_docs/label/2009/016608s101,018281s048lbl.pdf) [accessed December 13, 2012]
- Stub T, Alræk T, Salamonsen A. The Red flag! Risk assessment among medical homeopaths in Norway: a qualitative study. *BMC Complement Altern Med* 2012; 12: 150. Retrieved from: <http://www.biomedcentral.com/1472-6882/12/150>
- Teixeira MZ. New Homeopathic Medicines. Online: [www.novosmedicamentoshomeopaticos.com/eng/presentation.asp](http://www.novosmedicamentoshomeopaticos.com/eng/presentation.asp) [accessed July 12, 2013]
- Teixeira MZ. NSAIDs, myocardial infarction, rebound effect and similitude. *Homeopathy* 2007; 96: 67–68
- Teixeira MZ. Bronchodilators, fatal asthma, rebound effect and similitude. *Homeopathy* 2007; 96: 135–137
- Teixeira MZ. Antidepressants, suicidality and rebound effect: evidence of similitude? *Homeopathy* 2009; 98: 114–121
- Teixeira MZ. Statins withdrawal, vascular complications, rebound effect and similitude. *Homeopathy* 2010; 99: 255–262
- Teixeira MZ. Rebound acid hypersecretion after withdrawal of gastric acid suppressing drugs: new evidence of similitude. *Homeopathy* 2011; 100: 148–156
- Teixeira MZ. Antiresorptive drugs (bisphosphonates), atypical fractures and rebound effect: new evidence of similitude. *Homeopathy* 2012; 101: 231–242

## Vita

Currently I am studying a Master of Science (Homeopathy) at the University of Central Lancashire, UK by e-learning. I am involved in a homeopathy teaching project for Homöopathen ohne Grenzen e.V. in the Bolivian Amazon-Lowlands. My students are a most interesting and peaceful but highly endangered ethnic people, the Tsimane. Besides that, I am a member of WissHom, The Scientific Society for Homeopathy! (<http://www.wisshom.de/?getlang=en>)

Thank you, Hazel Partington (UCLan) for your helpful comments on this article.

My teacher Kate Chatfield says: “Work never stops!” I hope so.

Christine Wittenburg  
Heilpraktikerin Homöopathie  
Barrio Udalla 48  
39850 Ampuero  
Spain  
E-mail: [cwittenburg@hotmail.com](mailto:cwittenburg@hotmail.com)