

THE PERPLEXITY ABOUT POTENCIES

The question of potency selection has always been controversial. Students of homeopathy all over the world learn very quickly never to enter an argument about potencies, for this topic will cause more arguments and engender more ill—will than any other subject in homoeopathy. I strongly feel there must be some guidelines for the student. Teachings of old masters and then followed by my own experience I was fortunate enough to receive an early introduction to the LM potencies way back in 1980, which according to me are the gentlest and most powerful of potencies.

Some homeopaths insist that if mental symptoms are prominent in the given case, high potencies should always be chosen. Others believe one should always start with low potencies, with some using 6c potencies throughout chronic treatment. Still others believe that a 10M is necessary to cover the totality of a chronic case. Yet others choose the potency based on their confidence in the remedy; the surer they are of the similimum, the higher the potency they use.

All this method discussed above are based on individual concepts rather than what Dr. Hahnemann says:

- Nature of the patient,
- Nature of the remedy.
- Observation of the nature if the disease (acute or chronic),

Many modern homeopaths who recommend high potencies such as 1M, 10M, even CM (100,000c) believe that Hahnemann did not recommend them because he never used potencies above 30c. But according to his second wife, **Melanie**, Hahnemann experimented with all potencies from 3c to IM when he thought they were warranted.

Honestly when I studied the case records of Hahnemann I found out that Hahnemann used all degrees of dilution, low as well as high, as the individual case required. I saw him give the third triturating, but I also know that he used the 200th or even the 1000th potency whenever necessary. 1

In Lesser Writings of von Boenninghausen he clearly mentions that:

In direct contradiction that Hahnemann did not use higher potencies than 30c, I can demonstrate by his letters which I have carefully preserved, that, especially in the last years of his life, he was most zealous and insistent in carrying on the dynamizations higher and higher and to diminish more the materiality of the dose.

Dr. Richard Haehl, who wrote:

Dr. Hahnemann potencies from 3c to 60c (in addition to LMs, which were still unknown when Haehl was writing). The first time Hahnemann used 60c was in 1825, according to Haehl. But he continued to recommend limiting the potency to 30c: “I do not approve of you potentizing medicines higher than 30c. There must be a limit to the matter, it cannot go on indefinitely”

The real reason for this limit was that his science was still evolving and still under attack. He wanted all homeopaths to be uniform` in the beginning.

However, in examining Hahnemann's case books of his last three years in practice, I have found that Hahnemann frequently used potencies up to 200c.

Rima Handley in her account of Hahnemann's last years based on examining all his Paris case books, explains:

Around [1838] he began to use a higher range of centesimal potencies up to 200c ... By 1838 two great experimenters, Korsakoff and Jenichen, had individually succeeded in producing potencies attenuated up to 100c and 1500c (even higher later). This was way beyond the lower potencies with which Hahnemann had been content for so long. However, although he had apparently tried these very high potencies, he was uneasy with them, probably because he had not made them himself and was not therefore quite sure how they had been prepared. When he began to use higher potencies on a regular basis he therefore restricted himself to those lower than 200c, which he was able to prepare himself by hand. He used these increasingly often during his time in Paris .

I have read that during the time of Hahnemann's day Korsakoff and Jenichen were the only ones making high potencies, succussing by hand beyond 10M. Both of them were laymen, and at first Hahnemann did not have confidence in their remedies. But Jenichen finally succeeded in sending some of his potencies to Hahnemann through his friend Gross, who was one of Hahnemann's first students. Hahnemann good results led him to change his mind (temporarily) about the higher potencies he

experimented with them until about 1833, when the aggravations they caused led him to seek a gentler method.

Many homeopaths feel that there needs to be an aggravation in order to procure a healing. Some homeopaths feel that an aggravation lasting several months is completely acceptable. This is in total contradiction of Hahnemann teachings which he mentions right in the beginning of organon as a rapid, gentle cure.....

In later years **Dr. Kent** gave up the frequent use of high potencies as it was causing too many strong aggravations, in his last years Dr. Kent started using relatively low potency at a 200c.

Homoeopaths who open a chronic case with a high potency such as 10M attribute to Kent the belief that an aggravation is necessary for good results. But **Kent** himself states in his **Lesser Writings**:

There is a wonderful latitude between the tincture and the CM potencies and in my judgment the selection of the best potency is a matter of experience and observation and not a matter of law the indiscriminate use of one potency is very likely to bring reproach upon our art. They all have their place. Keep the mild potency as long as it works. It is not well to jump Degrees. The best action is the slight aggravation, the ideal one is the one that does not aggravate but ameliorate. We do not seek to produce an aggravation that is not the best, not the longest curative effect. You encourage the patient to become oversensitive by using the highest potencies instead of going low to begin again. Whatever potency a physician uses, that one potency is not sufficient for chronic diseases. It will generally do for acute diseases. As a rule two doses in the same plane give the best result. After long observation I have settled on the

series of degrees as of 30c, 200c, 1M, 10M, 50M, CM, DM and MM. It is not uncommon that the patient continues to improve on each potency for 3 to 4 months 5.

Many homoeopaths feel if 500c was easily available in homoeopathic shops so that they can use unusual potencies !!!! but let me tell you that **Dr. Kent** had already mastered the art of using unusual potencies. He observed for instance that *“after a good action of 200c, after waiting till it was no longer active, I gave the 300c, 500c and 8000, and then 1M acted much more strongly and 300 and 500 usually failed. The same with 80M, 60M, etc.”*

On the other hand, there are numerous examples in old journals like Recorder and Heal thyself where you will read of experienced homeopathic prescribing unusual potencies like 3M and 48M with great success.

High—potency prescribers like Dr. Kent (and his dedicated followers) who open with a high centesimal potency; administer a single dose and wait several weeks or months before giving another dose should first listen carefully what **Dr. Kent** said. *“An aggravation occurs when the remedy is so strong that it represses the secondary curative response from the Vital Force, as though it has knocked down or numbed the Vital Force which can then only recuperate sluggishly, if at all. This will obviously slow down the cure.”*

Instead the choice of potency should consider the three factors dictated by **Hahnemann**: the patient’s constitutional sensitivity the nature of the disease and the nature of the remedy.

In **Aphorism 281**, Hahnemann also gives us precise guidelines for assessing the sensitivity of the patient: it can be rated on a scale of 1 to 1000. This means a potency which would not affect a hyposensitive (such as a Calcarea) will cause tremendous aggravations in a hypersensitive (such as Phosphorus).

Reading Organon Explains Very Easily Perplexity of Potency

The Organon went through six different revisions from 1810 to 1843, the sixth being completed just before Hahnemann death. Homeopaths who call themselves “classical” all practice according to the Organon, but differences have arisen because we practice by different versions of it.

I can positively state that the publication of the 4th edition of the **Organon** in 1828 was the turning point for the history of homeopathy, since it is the basis for most classical homeopathy worldwide today

*In the 4th edition, **Hahnemann** introduced the use of a single dose of one poppy seed globule of the remedy and taught that as long as symptoms continued to improve, no repetition of the remedy was allowed, Repetition was only done when there was a relapse of symptoms (**Aphorisms 242 and 245 of the 4th edition**). It was the “wait and watch” method of case management. At that time **Hahnemann** believed that premature renewal of the dose would lead to a relapse, or that new symptoms of the remedy would be added to the symptoms of the disease, confusing the case.*

It is easy for us to see that most homeopaths world- wide still practice according to the “wait and watch” method.

In the 5th edition (1833), followed by the second edition of Chronic Diseases, **Hahnemann** introduced important changes. The 5th edition is called the “Limit Breaker? After much consideration, **Hahnemann** removed the limit of 30c and supported the use of high potencies on the advice of his first disciples, **Drs. Gross** and **Staff** but **Hahnemann** the master pharmacist was careful as to how these high potencies were made.

Besides the use of higher potencies, other important changes were introduced in the 5th edition: frequent repetition of the remedy and administration of solutions in water instead of the dry dose.

Hahnemann begins his exposition of the new method by describing a situation in (Aphorism 245, 5th edition):

Every perceptible progressive and strikingly increasing amelioration in an acute or chronic disease is a condition which, as long as it lasts, completely precludes every repetition of the administration of any medicine whatsoever, because all the good the medicine taken continues to effect is now hastening toward its completion. Every new dose of the medicine would in this case disturb the work of amelioration.

In **Bradford’s Life and Letters of Hahnemann**, Hahnemann states:

I have been able to administer Sulphur daily for months at a time with the most astonishingly good effects, as long as they continued to do good.

Contrary to the practice of the many Indian Homoeopaths who still do not put remedies in water, I ask them to read not only what Dr **Samuel Hahnemann** said but also what Dr **Kent** said, *“this has at times been favored over the single dry dose.”* He said further that *“this is open for discussion, requiring the testimony of the many, not the very to give it weight.”*

After shouting in my seminars to students giving medicines dissolved in water, many teachers have now giving remedies in water.

We can conclude that there were three major changes made in the 5th edition of the **Organon** the use of potencies higher than 30c, repetition of the dose in shorter intervals to speed up the healing, and the administration of the remedy in water. Again, **Hahnemann** was guided in these changes by his **Aphorism 2** of the **Organon**: he was seeking a rapid, gentle and permanent cure, without aggravations.