

# Chapter 9 of *Looking back, moving forward* by Rowena Ronson, London, 2007, Food for Thought Publications. Pp 119-135.

## Interview with Francis Treuherz:

Thursday 3 March 2005 found me in Kilburn visiting the fountain of knowledge that is Francis Treuherz. He swept me upstairs to the library in his high-ceilinged Victorian house, and as I relaxed in his patients' worn velvet throne chair, I was immersed in the sights, sounds and smells of our heritage. Nearly every book written about homeopathy adorns the many shelves of Francis' clinic room. Exciting trinkets once owned by our renowned forefathers and mothers are displayed for his patients and fellow scholars of homeopathy to view. For the several hours that I was with him I felt that I had stepped back in time.

*"I don't like labels and I am only interested in finding the right way of treating any individual patient, whatever that right way may be. I have very, very rarely found that right way to involve the use of more than one remedy at a time and cannot understand how people who are creating the principles for a single register seem to be allowing that in."*

*Francis Treuherz, March 2005*

*"Vithoukias once talked about prescribing for people on his Greek island. Decades ago the patients were simple to prescribe for and they were on one remedy all their life. But now, there is so much Western influence - antibiotics, divorce, drugs and all the rest of it. Life is more complicated and it is harder to be certain of that remedy for all their life."*

*Francis Treuherz, March 2005*

*"Many homeopaths undersell and undervalue themselves. Some are unknowing of how to deal with money and how to present and publicise themselves."* Francis Treuherz, March 2005

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## CHAPTER 9 FRANCIS TREUHERZ

**ROWENA:** What got you into homeopathy in the beginning Francis?

**FRANCIS:** I was a successful patient actually. I went to see my dentist one day and made some joke about dirty needles, because I had had hepatitis years before, and he said 'You have made that joke before - go and see my brother, he is a homeopath'. I had no awareness of the word, although there was a Manchester Homeopathic Clinic at that point in an old building right next to the university. I must have driven, walked, or been on the bus past it countless times, with no conscious knowledge of it. This was in the early 1970s. I had had hepatitis in 1966, seriously.

So I went to see his brother. At the time, I was drinking coffee intravenously and the first remedy he gave me was *Nux vomica*, but that really was because of the coffee. Then I got another remedy and I remember, very, very quickly, feeling well. I used to ride a bicycle everywhere and I could no longer really ride; I just didn't have enough energy, and after the remedies I was back on my bike.

The homeopath's name was Jack Lozdan. He was also a dentist and trained with Margery Blackie, and then he went off to live in France for a while. The first book I got was Boericke, it looked like a bible. Then I picked up two volumes of *Clarke's Materia Medica*, \*\*Clarke not italic\*\* signed by the author, without the third, for a fiver, and that began the hunt. I did eventually find the third volume.

I heard about a couple of homeopathic study groups. One was taught by John Damonte in North London, which Misha Norland was attending, and the other was taught by Thomas Maughan in South London. I was holding down full-time and part-time jobs, at the Open University and London University at the time, so I didn't have much time other than that for private reading. I decided to try and register for a PhD because I felt this was a subject worthy of study and I was interested in the history of homeopathy and in particular, as I was a social scientist, the reactions to successful homeopathic treatment of the cholera epidemics in the nineteenth century.

There had been a cholera epidemic and the then secretary of the Board of Health made a report to Parliament. He added that if he got sick he would go to the homeopaths despite his initial prejudice. He stated their mortality rate was about 16% compared to the general London hospital \*\*lower case G and H\*\* mortality rate which was about 60%. It could have been that the patients were brought in at an earlier stage of their illness; the homeopathic hospital could have been more hygienic and perhaps the patients could have been better nourished \*\*nourished is what I said not managed\*\* as they were from a higher economic class. The reaction from Parliament was that 'this was against all reason, truth and science' and the figures were suppressed. \*\*added single quotes\*\*

So I called my proposed thesis 'The Social Construction of a Rejected Science' and my idea for a PhD was rejected. The Open University said that homeopathy was not a proper subject to study. However, it was prevailed upon the University of London to accept me because, after all, I had been teaching there for eleven years and I was an examiner. I wrote long chapters on Kent's philosophy and the origins of Kent's thought and on Rudolph Steiner and the apparent confusion between homeopathy and anthroposophy among homeopathic practitioners. I was trying to look at what the boundaries were of homeopathic science. I began to look at the work of Bach and got as far as the bibliography, which was actually published, but I never got round to writing that chapter because I discovered that a college had emerged where homeopaths were actually being taught.

So I went to see the principal of the College of Homeopathy, Robert Davidson, and asked if I could find out what he was teaching. He replied that the only way I could enter his classes was if I enrolled as a student. I appreciated the way an observer changes the subject under observation and that it would be less of a problem if I was one of the students so I agreed, although, I thought, the notes I would be taking might be different. I wrote down everything the teacher said and before long I became so fascinated that I ended up carrying on seriously studying and the PhD was abandoned along the way.

Back then I borrowed a book, *Hahnemann's Lesser Writings* (1852), from the BHA library. I was on my bicycle waiting at a traffic light and somebody came by on a motorbike and whipped my bag and the book was in it. So I started haunting the second-hand bookshops - it took me eight years, but I found another copy. Then I found another that summer, so I kept one and the BHA library got one back. But by that time I had bought everything I could see because they weren't so expensive, and I became a collector.

**ROWENA:** Were you in the first year intake?

**FRANCIS:** No, I was in the second with Stephen Gordon, Robert Nichols, Barbara Harwood, Tony Hurley, Jeremy Sherr, Peter Adams, Susan Curtis, Stella Berg, Lesley Gregerson, John Morgan, Robin Logan, Sylvia Treacher and some others were in my class. It was a very big year and a good one too. There are still quite a few of us around. Janet Snowden and the late Stan Tibbs were already there.

I had contact with George Vithoulkas and colleagues very early on. At the first ever annual conference of the Society of Homeopaths - it wasn't annual then but started off as being every year and a half for the first two or three - I was asked to give my lecture on Kent and I was still a student. Our first foreign guest was Vassilis Ghegas, a close colleague and friend of Vithoulkas. I had family in Greece so they asked me to be his minder. I didn't really know what to say to him as I was still new to all this and he was an apparently eminent Greek physician. He was accompanied by Roger Morrison, because it was the first time Vassilis has ever lectured in English and he knew he would need help occasionally.

I told him that I had been to Greece a few times and I bought him a whisky because I was told that was what he liked. He asked me what I did when I went to Greece and I told him I went to visit my uncle. I told him who my uncle was and he nearly choked on his whisky. He is dead now, but he was the Dean of the Medical School at the University of Athens and physician in charge of the largest hospital. He was a very modest man and I wasn't trying to drop names, but Vassilis did nearly choke. He told me that my uncle had referred patients to him but he did not admit to it. He taught Vassilis and the first wave of Greek homeopaths allopathy - a very weird connection.

Later on I went to Athens and my uncle gave me a book and it was by Vithoukias. It was first published in English in Greece and Vithoukias had given it to my uncle as a present because he wanted him to adopt homeopathy. He said that he was not interested and gave the book to me. So I showed it to Vithoukias and his jaw dropped. He asked me where I had got it. So I told him, and so he sent my uncle another copy because he wanted him to have it. My uncle said he would put it on the shelf in his office where he had the sort of books that furnish the room.

My uncle was regarded in Greek medicine as a great clinician, a great diagnostician and a sort of human being polymath. He could talk about Greek poetry with one voice and then write a play for a patient who is an actor the next day. He was one of those renaissance men who we don't get any more.

**ROWENA:** So who were your teachers at COH?

**FRANCIS:** Robert Davidson, Misha Norland, David Mundy, Dr John Ball, Dr David Curtin and Sheilagh Creasy. There were one or two lectures of hers through which I slept, but that is my pathology. It took a while until somebody figured what remedy to give me to stop me falling asleep, as many years later I fell asleep at a Board Meeting for the Society of Homeopaths. A fellow board member, Robin Logan, gave me *Opium*. **\*\*italics Opium\*\*** It sorted it out to some extent but it is a family trait. I am useless being taken to the Albert Hall for example. I always fall asleep at a concert.

I felt that sometimes I learnt homeopathy because of the college and sometimes despite the college, as it was terribly organised. Having come from a university background, including teaching and examining, it was a shambles. So I made a long and detailed suggestion for a revised assessment system within the college and gave it to Robert Davidson as a gift, you might say, but I don't think he understood what to do with it. I remember saying to a friend in our first year that wherever I went it seemed quite hard to adopt a low profile and we both resolved to do just that, but it didn't work for either of us.

What happened during those early years - the very late 1970s and the early 80s - was that Vassilis, who had been invited to our Conference, came back and did a series of eight long weekend seminars. A lot of students and homeopaths came, both medical and non-medical, and that is what gave modern homeopathy a secure foundation in the UK. Although we had the teachings by the students of Thomas Maughan and John Damonte, they didn't have their feet in the classics and in the philosophical structure in the way that we needed.

**ROWENA:** Was that part of the course?

**FRANCIS:** No, this was extra and they were not consecutive. They were a series of eight seminars known as the Greek Seminars and then Vithoukias also came and gave some seminars. But those eight were elementary in a way, looking back now, but it is what we needed at the time. They were the foundations that put us on a thorough footing, back into the mainstream of homeopathic thought.

We had about thirty students in the year and we began at the YWCA in Great Russell Street and moved to Imperial College.

**ROWENA:** Who had the biggest influence on you?

**FRANCIS:** I don't think there was a 'biggest' influence. Vithoukias' ideas certainly had a big influence. Hahnemann and Kent have always had the biggest influences and Burnett and Clarke - reading the old masters from this side of the Atlantic. The first really good grasp I had of the history of homeopathy was a French book by someone called Denis Demarque, *Homeopathy the Medicine of Experience*, which looked at the whole gamut of the history of

homeopathy, and Harris Coulter. I read that very early on before I was studying to be a homeopath. One of the reasons for choosing a project on the ideas of Kent and the influence of Swedenborg was that that was something that Harris Coulter had avoided.

I sent that early chapter of my PhD to the Journal of the American Institute of Homeopathy and they sent it to Harris Coulter for peer review. I never heard. So I wrote to Harris asking for his advice, not knowing that he had been sent it for peer review, and he thought "Oh no, not an article on Swedenborg - I can't stand that!" Then he realised I had got inside it in some way and said it was okay to publish, and we became firm friends and he has been one of the biggest influences ever since. Harris is steeped both in the history and philosophy of homeopathy, without being a practitioner. His former wife was a practitioner - Catherine Coulter - she practised in Washington DC. Harris's understanding of how and why homeopathy rose and fell in the nineteenth and then early twentieth century, the rise of the drug companies and so on, is really important to understanding homeopathy. He wrote *Divided Legacy* and a lot of people only read one volume but it is in four volumes.

A digression, one day I was in my bedroom and I heard the answer phone going, and it was Harris saying he was going to Moscow and his plane was going to come to London for a stop-over later that day. I rushed to pick up the phone, he was in Washington at the time, and luckily I was free and I picked him up from the local station. We sat and talked about homeopathy and got books from the shelves. I had this big pot of mushroom soup, we drank red wine and I had the most marvellous day. Later he went to Moscow and then to Paris and the next thing I got was a phone call saying that he had had a stroke.

He was due in Ireland, a month after that meeting of ours, to talk at the Irish Conference. I simply packed an enormous briefcase with every book he had ever written and took it over there and we lit a candle at the beginning of the Conference when he was due to speak, as I didn't know whether he was alive or not. I fished out of my bag one book after another, and talked about his work and explained what he had done.

When I returned home, I received a phone call from one of his sons asking me if I would go to Paris where he was in hospital to see him. I just dropped everything and went by Eurostar. I walked in there early in the morning, and there he was with a tube in his face, lying there in a stupor. "Hello Harry", I said. "Hello Fran" he said. They wanted someone whose voice he might recognise.

It was the only time in my life I have pretended to be a doctor. The nurse came in and I asked her what medicine he was going to be given. She replied "*Opium*" **\*\*italics\*\*** and I requested that it wasn't given to him. But she came in an hour later, and again I asked her not to give it to him. As the day wore on he began to sit up and we had a conversation. He wasn't really always there, his mind kept drifting off, but by the end of the day he was sitting up, and by the end of the second day he was drinking from a cup instead of from a tube. He had told me a lot of names and addresses of people to write to tell them where he was. I was testing his memory, but he couldn't remember his own address. So it wasn't quite right. He had been proving *Opium* **\*\*italics\*\***, the remedy he needed, but it was given too often.

Unfortunately he has remained partially paralysed and disabled. The last thing he wrote was the introduction to Julian Winston's book *The Faces of Homeopathy*. This was a few years ago now. It is possible that Harry took too much *Arnica*. He used to travel a lot and use an enormous amount for jet lag. So yes, Harry was a big influence.

**ROWENA:** Who influences you the most nowadays?

**FRANCIS:** In the winter of 1985-86, I spent a fortnight in New Delhi. From there I spent a long time in Calcutta and then over to Bombay. Someone who had a very, very big influence was a Dr S P Dey. He was taught by Foubister (who has also had a big influence on me), and he gave really practical information but also a lot of ideas about miasms, single remedy classic prescribing and how it works in the most direst of pathology that you can imagine in Calcutta - and it would make your hair stand on end. Literally, walking in, seeing a woman patient dressed in shawls rather than closed garments in hospital with a breast cancer lesion pouring rubbish out. In England they would have cut it out and been horrified but he gave her a dose of *Staphysagria 1M*. The reaction was that stuff poured out, and gradually it poured out less and less and it healed. We don't have the experience nor the courage to do that here.

**ROWENA:** Do you do that?

**FRANCIS:** I don't have the opportunity unfortunately, but see my article on *Matters of Life and Death* in the *Homeopath*, summer 2005. On my last day in India, I got a phone call from someone from the Society of Homeopaths in England asking if I could find Rajan Sankaran and invite him to come and speak in England. It was my last day and it was a miracle the phone worked and I was still in my hotel room at the time - and that they had actually found me. I apologised and said that I had a dinner date with the most beautiful homeopath in Bombay. Coincidentally she said when we met that she had a surprise for me, and it was dinner with Rajan. So I invited him to come to England and I have a photograph of that moment. He was eating something with his hand - his mouth open, nearly choking on it. So Rajan has been a big influence, and I am happy to say that I am responsible for inviting him for the first time to come to England to our Conference in 1986.

**ROWENA:** Tell me more about your journey - your career within homeopathy.

**FRANCIS:** I have a tendency to get involved with things. "If I am not for myself who will be for me? And if I am only for myself, who am I? And if not now, when?" This quote is from a Talmudic book known as *The Ethics of the Fathers*. It is a Jewish ethical statement, which I learnt early on. When I was growing up, my father spent a lot of his spare time helping to manage and run, in a practical sense, a Jewish old peoples' home in Manchester. So I learnt to get involved with things. I was secretary of a youth club attached to my synagogue, of which I was a member. So I got involved with the Society of Homeopaths, and the first thing I did was edit the Journal, then I was on the Board at the same time as doing that. At that time there wasn't a time limit for being on the Board so I was on it for about ten years. Then I had a gap, and I have now been on it again for five years. I will withdraw in 2006 because six years is the end of the term you can have. This time it will be the end of my term as Secretary.

**ROWENA:** How come you got to be Honorary Secretary?

**FRANCIS:** Because I have a background in public administration and because it is the sort of work which a lot of people find boring. In the early days our work was much less differentiated. I was involved with planning, running and organising seminars; with setting up a proper disciplinary procedure because although we had a Code of Ethics, nobody actually knew what to do when somebody did something naughty - how to actually organise it. I got involved in everything, but all Board members did at one time or another. We initially didn't have staff, then we had Mary Clarke, and then things gradually grew, but we were hands-on when really in a legal sense, a Board ought to do sole governance. But there was no other alternative.

I got involved with computing fairly early on. MacRepertory was invented and I took to it like duck to water. I got involved with David Warkentin who started *Homeonet*, a very primitive e-mail service. He and I virtually met when I found a remedy for him the first time I logged on. He was living in California and after that he began to pick my brains about literary things - why the remedy abbreviations in Boericke didn't match those in Kent and stuff like that, very basic. He was a big influence and has become one of my best friends.

There are books on these shelves that went into that repertory because no one else had got them. So my obsession, my pathology, is collecting books. I got involved with *MacRepertory* and ended up helping to develop it, helping to sell it and most important, helping to teach people how to use it because it is both intuitive and simple but very deep and rich. There is an enormous amount there that people don't use because they never think to click in every one of the possible click boxes.

Because of my involvement I started going to lots of seminars. The idea was that I would only go to a seminar if it would pay for itself. I went to loads and I learnt loads. I started teaching in Helsinki; I went four times a year for about five years. Five years later when that college had its tenth anniversary I was invited back to teach a seminar. I went to teach in Prague; I went to teach in Sweden, but I very much preferred to teach within a programme rather than coming on as guru teaching without responsibility - turning up, teaching, and disappearing again. I didn't like that as much.

**ROWENA:** So where have you taught in the UK?

**FRANCIS:** I have taught at the College of Homeopathy in London; bizarrely they kept asking me to teach when I lived in Manchester, less so when I got back to London. The London College of Classical Homeopathy, as it used to be known; I taught quite a lot for the British School of Homeopathy when it began in Swindon. I taught for the Yorkshire School in York and Leeds. I teach regularly but not frequently for one or two colleges where I go along for a day only and talk about the history of our literature. I taught in Manchester for the longest, whether I lived in Manchester or in London - 10 years of regular teaching at the North West College where I also ran their bookshop. I have given odd lectures at the Northern College in Newcastle and the Southdowns College in Chichester ..... and who knows where else.

I literally get scholars from all over the world coming here. I have been to America three times and done some lecturing there and individual seminars. Very early on I got to know Dana Ullman who runs *Homeopathic Education Services* in California, a big publisher and publicist for homeopathy. I met him and helped him run his stall at a conference in Lyon, France in 1985. I met a lot of people that way. So I have been to quite a lot of conferences to try and hear all different viewpoints about homeopathy.

**FRANCIS:** Where do you stand now having listened to all these people?

**ROWENA:** I don't like labels and I am only interested in finding the right way of treating any individual patient, whatever that right way may be. I have very, very rarely found that right way to involve the use of more than one remedy at a time and cannot understand how people who are creating the principles for a single register seem to be allowing that in. There is a vast library here and the only books about mixed remedies are a handful and ~~used~~ **\*\*published\*\*** by pharmacy companies who make them. There isn't a book about the philosophy of it, so I am not sure there are any principles for this type of prescribing except expediency.

Approximately fifteen years ago The Faculty of Homeopathy at The Royal Homeopathic Hospital decided to hold an intellectual debate in the old British style of debating for and against the motion. The person organising it came to chat with me to ask what the motion should be. They knew what the subject was but wanted to know how it should be phrased, and I suggested "the single remedy is the medicine of experience" - that was one of Hahnemann's titles from his early essay *The Medicine of Experience*. **\*\*Italics not quotes\*\*** The event was open to medical and non- medical (professional) homeopaths. Dr David Curtin and myself spoke for the motion, the late Dr June Burger and Dr George Lewith against it. The motion was overwhelmingly carried. I spoke seriously but with some jokes about what Hahnemann called 'half homeopaths', and crabs, scientists who walk backwards! The debate was published in *The Homeopath* and the *British Homeopathic Journal* in 1993.

Before I became a student of homeopathy, when I was only a patient, I gave a child the *Nelson's Travel Combination* remedy for travel sickness and it really did the job as an acute prescription. It contains *Cocculus*, *Theridion*, *Tabacum*, *Nux vomica*, *Apomorphine* and *Staphysagria*. That is the only sort of combination remedy I have used. I have got a seven year old now where *Cocculus* alone never does it whereas the combination does. Within forty minutes of a journey in our car he will be sick if he doesn't get some relief. I have never used a combination remedy on any other patient.

I do prescribe single remedies in a variety of potencies and LM remedies, but every now and again I will also give mother tinctures of plant based remedies, and I have given those at the same time as a potentised remedy. I had a case where I gave somebody *Carduus marianus* in a 6C potency. He had left-sided liver pain and haemoptysis - he was coughing blood. It wasn't a question of organ support, it was the remedy that came through the repertorisation; I gave it to him in the sixth potency and nothing happened. I went over the case again and gave it in the mother tincture and it worked immediately.

**ROWENA:** Tell me about your experience working in the NHS.

**FRANCIS:** When I first became a homeopath I had a nightmare; it was rather like when I first had a mortgage. Me settle down and own a house in North-West London? Me go into private medicine? I had recognised the NHS was the National Sicknes Service, not the National Health Service, but I felt it ought to be free at point of use for all. So when that phone call came from an NHS GP asking if I wanted to be interviewed to work there I phoned a very good friend, Miranda Castro, and asked her if I could come over to her house and talk about it. She replied that I could have, had she not been invited too.

Anyhow, it was me that got the job and I have written and talked about it many times. It was the most stressful work experience I have ever had in homeopathy because the clinic was stressful. Physiologically it was in a basement with skylights and a bit of natural light, and that was all.

**ROWENA:** Was that soon after you qualified?

**FRANCIS:** Well, that is a relative term. I started practising in the summer of 1984 and this was in the summer of 1990. I did an audit of my practice at the Marylebone Health Centre which showed how successful I was being; no more nor less than anyone else, 70-80% of patients were satisfied, either doing well or very well. I was the only homeopath there at the time, but there had been a homeopath previously and I was asked at my interview how I behaved in situations of conflict. I wondered what my predecessor had created so I made various placating noises and I got the job. Apparently she had not been a single remedy prescriber.

So I did very well, and when my audit came through they didn't believe it. They said that it must be because I was so nice to the patients - and I was sacked! In the book about Marylebone Health Centre it was as if I was never there. I was airbrushed out of the place - it was very, very weird. However, I contacted a friend who was a GP and told him my predicament and he asked me to come over and sign on the dotted line immediately. So I never looked back. I happily worked in the Fitzrovia Medical Centre for ten years.

I spent thirteen years in that area, and during that time I was invited to do a research project for the Faculty, which was to create a drug dictionary for the NHS computer service so that you can go 'click click' and print a homeopathic remedy into their automatic prescription printing service. It was a few years on before it was actually used, but that was quite interesting, so that filled up the gap of declining NHS patient numbers.

And then quite separately I started at a GP group practice in North London. I had seen a patient there, a baby who was vomiting after every feed. I discovered that the mother had been given castor oil to help the birth. The idea was if you open your bowels, a purgative, the baby will come out, too, because the muscles will all get going. She didn't tell me initially because, of course, it was something 'natural' **\*\*added quotes\*\***, so my first prescription didn't work. We made up *Ricinus communis* (castor bean) into the sixth potency there and then, and gave her some. The baby stopped vomiting.

I did it as a presentation at a Society Cases Conference where I gave a series of short cases of small remedies. *Ricinus communis* increases the quantity of milk in nursing women and is a purgative, so she was getting more milk than the baby needed and there was all this digestive stuff - **\*\*dash\*\*** and he stopped vomiting. The baby's father was a GP. I was there for six years and it was well paid in NHS terms. I carried out a practice audit with help from a grant from the Faculty there, which the Society published and I presented it at a Faculty Conference - **\*\*dash\*\*** it was very, very satisfying. One of the GPs from there set up a practice on his own and asked if I would come and join him before he had even got a practice nurse. I was still seeing private patients from his neighbourhood.

I wept when I gradually got the sack from those practices - thirteen years of working part-time with the NHS and it was over. The way I practise and what I did with patients clinically was never questioned; I was allowed to practise how I wanted. The doctors had to sign the NHS prescriptions, but clinically I could have as much time as I needed. I saw pathology that you wouldn't see anywhere else and which I wouldn't have been able to cope with if I hadn't been in India before working for the NHS.

**ROWENA:** How did the Homeopathic Helpline come about?

**FRANCIS:** Once upon a time I worked above a pharmacy for many years in East Finchley. I was already working there when I got recruited for NHS work and I stayed working there as well. The pharmacist, David Needleman, had studied homeopathy. He didn't own the shop and the owner said that now he was doing homeopathy all these people were coming along for free advice and ringing him up and blocking the shop line. The owner asked David to get his own phone line. David thought of getting a pay line but obviously he couldn't do it seven days a week, so when he had a day off I was his first reserve and I still am.

I suddenly realised when I was on duty on the first non-public holiday day after Christmas, the day when everyone nowadays goes shopping - every homeopath in the land was still on holiday. Everybody who had suppressed their flu or cough over Christmas now rang the Helpline and I got over one hundred calls a day - and this winter it has been like that almost throughout December and January. It is very, very busy and routinely homeopaths now put the number on their answer phones and patient literature.

We receive calls on everything you can imagine, but we also get people who have never used homeopathy before but they have been recommended to call us by a friend. And of course, they don't have remedies so we have to have a mental map of where the people can get remedies from all over Britain. Neal's Yard Remedies, a small chain, is actually very, very useful. We have to be very careful.

For example we might say, "It is possible, and I am just saying this as a routine question, I think you have got pneumonia, but I don't know at this distance away. Why not go and see your GP; you will then have a prescription of antibiotics as a safety net. Then don't let them frighten you. If your GP says that you have, then you are welcome to ring up and tell us, and this will give me an idea as to which remedy to give." I know in these circumstances that they have got the safety net in their prescription. I haven't said to them to do anything other than a citizen would say. It may be pneumonia, it may be something else, but I suggest they go and see their doctor, get the diagnosis and ring back. We don't need the diagnosis to prescribe; as we know, we need the symptom picture; but the doctor can listen or observe or say which lung is affected, which will help choose the remedy. For example, I can't see what sort of rash a person has, on the telephone.

**ROWENA:** Do you often recommend they go to the doctor?

**FRANCIS:** Or accident and emergency, yes. I am going to suggest a remedy - a child has got a bump to the head and has been unconscious and may need more than *Arnica*. I say that if there is any disturbance to vision; if a squint develops or there is vomiting, I tell them to go to hospital. I may have said take *Natrum sulphuricum* but they don't have it or they might not obtain it fast enough. Or they may not improve from the remedy and I am not there to observe and prescribe again. That is where these little kits are so wonderful, because you can always tell people, if you have got a kit the Helpline is so much more useful, because there is a chance that you have got the right remedy.

**ROWENA:** And your experience to draw on?

**FRANCIS:** Experience I didn't realise I had, but yes, I could be cooking a meal or changing a nappy but I have got a headphone on and I can turn round and get on with it. You have seen me do it, haven't you? There is a strangely disproportionate use of the Helpline in terms of the population in this country. There are many orthodox Jewish communities - North-West London, North London, Salford and Gateshead are where the main concentrations are.

**ROWENA:** Do you think it is because they find out that you and David Needleman are Jewish?

**FRANCIS:** No, it can't be only that. With so many children in the family they get loads and loads of acutes. What is funny is maybe two or three will get an acute and the others won't. I think they have a distrust of the authorities and so they distrust vaccinations. We saw a measles epidemic run through that community and we dealt with all of it. We even had a doctor who was Jewish, from Gateshead, ring us, discussed the campaign and the epidemic and then he sent people to the Helpline.

One of the things that I have enjoyed doing is not only collecting books but reading them and writing book reviews. I have seen a lot of mediocre books and obviously read some interesting ones as well. There seems to be an enormous concentration on trying to understand what Hahnemann really said, or what he meant by what he said, and it is a lot more complicated even than reading the Bible. There are many ways of being right and the problem is that numerous teachers and writers insist that theirs' is the only way of being right. Hahnemann, Kent, Clarke and Burnett, they were in different centuries, different cultures and had different sources from which they learned. Clarke gathered his information from all over the place. Burnett was unusual for an Englishman in that he understood and spoke German and French and then studied in continental Europe so he knew the writings of Rademacher.

**ROWENA:** How do you feel about the philosophy that there is one remedy that a patient resonates with all their life?

**FRANCIS:** This is an ideal state. Vithoukas once talked about prescribing for people on his Greek island. Decades ago the patients were simple to prescribe for and they were on one remedy all their life. But now, there is so much Western influence - antibiotics, divorce, drugs and all the rest of it. Life is more complicated and it is harder to be certain of that remedy for all their life. I also think that when an epidemic turns up the 'remedy for all their life' is not going to help them when they have got mumps or if they have got septicaemia. They might need *Jaborandi* or *Pyrogen*. Quite often when they turn up with a more chronic complaint, arthritis or anxiety, the 'remedy for all their life' might help them. And you might think that it should help their sepsis, too, but often it doesn't and then you are in trouble if you don't have other tools up your sleeve.

The question is what to do when the philosophy doesn't fit the patient. As long as you are prepared for the exceptions, philosophical approaches are very useful; they are heuristic devices, ways of understanding the world and the patients within it.

There have always been innovators and seekers after a new truth. Eizayaga from Buenos Aires was a medical doctor and fitted his way of prescribing with his view of pathology. I think his best work wasn't his attempt to explain the philosophy but his way of looking at the repertory, which is less well known. If you are new to medicine, although you have a grasp of homeopathy, and a patient comes to see you with multiple sclerosis, do you know how to look for diplopia - visual disturbances or whatever else they have got?

So Eizayaga extracted all the rubrics, which apply to MS from the repertory and created a series of books called his Algorithms (now available on computer as part of *MacRepertory*). So I read through the repertory to see the pathology, not to ignore the individualistic aspects, but to help differentiate. Eizayaga's way is not to ignore the mentals but to look for the pathology to guide the way through the repertory. Kent's *Repertory* \*\*capital R & italics\*\* is full of pathology and not only the mentals. Swedenborg talks about the mind ruling the body, and that is true, but the pathology is still there.

**ROWENA:** Tell me what you know of Swedenborg.

**FRANCIS:** Well, Swedenborg had a big influence over Kent. Once upon a time, a long, long time ago, there was an Englishman by the name of J J Garth Wilkinson. Wilkinson set off on a holiday to Iceland and he observed the sheep on this volcanic mountain called Hekla. They had got bony growths on their jaws and legs. Due to his homeopathic imagination he thought that it was because of the water, the grass and the lava - the sheep have got 'hekla'. So he had a lump of Hekla mountain brought back to England and made it into a remedy and behold it was good for bony growths. I looked up Wilkinson and what I found was he was a doctor like Hahnemann, who gave it all up and became a translator. We have heard that before haven't we? Hahnemann was also a translator.

But what he did was to translate Swedenborg's mid-eighteenth century Latin into English, mid-nineteenth century. Who wanted to read these translations? People like Ralph Waldo Emerson, the transcendentalists on the Eastern seaboard of America. Henry James senior, the father of the novelist, and William James, the psychologist, ran a magazine called *The Harbinger*, of all good tidings. Through Henry James, Wilkinson's translations of Swedenborg became known to the intelligentsia in North America and many of these intelligentsia were homeopaths, and so Swedenborg's ideas filtered into the homeopathic community, not only to Kent, but to all of them. This started in the 1840s and for the next couple of decades.

Swedenborg was a Swede and he was a mining engineer, philosopher, Christian and a hallucinationist. People afterwards founded what became known as the New Church of Jerusalem of Emmanuel Swedenborg, a non-conformist sect, but that is about as much as I know. They have got a reading room and library in Bloomsbury. So that is the short version of how Swedenborg came into homeopathy. We believe that it is possible that Hahnemann knew about Swedenborg but he never admitted it. Kent absorbed it in a more wholesale fashion than a lot of the other Swedenborgian homeopaths, and quotes him.

**ROWENA:** So what influence does Swedenborg have on homeopathy?

**FRANCIS:** The idea of the 6, 30, 200, 1M 10M series of potencies. Levels of energy in the universe have this harmonic scale, this series of degrees, for example. The idea of the mind as an influence on the body is a Swedenborgian concept - far-thinking then, taken for granted by us now. *Economia Regnum Animalis - The Economy of the Animal Kingdom*, he wrote it in the mid-eighteenth century, the body (economia) is ruled by the mind, (anima).

**ROWENA:** On another subject Francis, do you think it was easier to be a homeopath when you first studied, because there were so few?

**FRANCIS:** Intellectually, morally, emotionally, it is always as difficult or easy as you make it. Did you mean economically?

**ROWENA:** What has made you financially successful at being a homeopath?

**FRANCIS:** Dogged persistence and a positive attitude, I suppose. Many homeopaths undersell and undervalue themselves. Some are unknowing of how to deal with money and how to present and publicise themselves. There are a lot of homeopaths who have other sources of income in their families; their husbands or wives are the main breadwinners. I don't know how many homeopaths are financially independent, but obviously some are and it is their main source of income.

There are a lot of unsuccessful clinic businesses, too. People set up half-baked health centres in an unprofessional, unbusiness-like way, where there are a number of different disciplines working together in an unthought-out way. And they neither know how to relate the different practitioners together nor how to run a business in a community, either. So generally a lack of business-sense is the problem. Middle class people who have come at it from only ever having been in public employment might find it difficult. I had only ever been in public employment and somehow or other, that wasn't a handicap for me. If you have only ever been a schoolteacher, it is very, very different from earning your own money by being self-employed.

We are talking about issues of so-called poverty consciousness and prosperity-consciousness and the culture that blames patients for being ill and blames practitioners for earning money from them. It isn't that stuff. I have not found it difficult, although I know that patient numbers have ebbed and flowed. It takes dedication, persistence and being good at it - and marketing is part of that, too.

Of all of the things about long-term practise I would like to say, never bullshit patients about the possibility of curing them. If I have seen a patient three times but I haven't found the remedy, I stop and I say that I think that we are really getting on fine in relation to each other, but I haven't grasped their remedy, so I don't feel I should be taking their fee anymore and that I regret I haven't been able to help them. I suggest that they go and see my colleague, and I have a short list of homeopaths that I refer to. Sometimes I actually say to a female patient, that maybe they would be better off with a female homeopath. They may never go, but I don't feel I can carry on if I think I haven't cracked it.

**ROWENA:** Homeopathy has obviously gone through a renaissance these last thirty to forty years - do you see it becoming dormant again?

**FRANCIS:** No, it is too successful for that. I am an optimist. I hope it has learned its lessons for keeping its head above water. I just think it has grown too much.

**ROWENA:** What, do you think, has contributed to its growth this time?

**FRANCIS:** The world is beginning to realise that allopaths are busy inventing medicines and then withdrawing them because they are dangerous. There are these things like MRSA and flu epidemics. If only we could get in there with our foot in the door, that would make a huge difference.

**ROWENA:** From your experience, do you think we have remedies to combat MRSA?

**FRANCIS:** It will depend on the remedy epidemicus. It is likely to be a snake venom like *Crotalus horridus* or *Pyrogen*, but it depends on how it presents in any hospital or region at any one time. There is an essay by Pierre Schmidt, which is only in French, on the epidemic remedy. It has never been translated but it would be very useful at this time. It boils down to the economics of publishing; nobody wants to do translations because they cost a lot.

**ROWENA:** And finally, Francis, what do you think makes a good homeopath long-term?

**FRANCIS:** You have to be a fanatic. I don't mean that you go around converting everybody! I just mean you have to be fairly single-minded about the intellectual and emotional demands of the job - and keep at it. And be a member of a team, that is to say whether it is with a supervisor or a colleague - you can't be a loner. If you are alone a lot you have to find ways of relating to teams so if your CPD, like mine, is devoted to reading books and you are alone, you actually have to go out and meet people and go to seminars as well and learn from other people.

**ROWENA:** That is good advice Francis. I know that is why some want to leave our profession, because they feel unsupported and alone. Many thanks for your time and stories today Francis. What would we do without you?

