



# THE LIGA LETTER

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## 69<sup>th</sup> Congress LMHI 2014

PARIS, FRANCE

# Treasurer Retires

## Dedicated to our former treasurer Dr. Yves Faingnaert.....,

by *Renzo Galassi*

In the hall of the best Western Hotel, in Redondo beach, Los Angeles, California, 2010, I saw for the first time a man, white haired, blue eyes and very elegant as regards to his attire as well as his behaviour.

He was Dr. Yves Faingnaert, the invited colleague to be the new Treasurer of the LMHI. He was that time also the treasurer of the Belgian association and of the ECH, so that one colleague said to me nicely: "This man has in his hands all the money of the Homeopathic doctors....."

I was elected LMHI vice president that time and day by day, working with him for the LMHI I realized that Yves was not only a treasurer for all of us, but a Gift of God. He worked a lot for a professional management of our treasurer office. Unfortunately at the beginning of 2014, he wrote me an email, announcing that, due to his age and to the upcoming retirement, he decided to step down from the position before the end of the term. It was very sad for me, but we accepted it and fortunately we were able to find a very good substitute, Dr. Altunay Agaoglu, but I have to say that Yves, with his kindness and his friendly attitude will accompany us forever.

I want to say on behalf of the LMHI: " Thank you Yves, we wish you and your wonderful wife Kristel the best!"



### ARGENTINA

*Dr. Silvia C. Mercado, NVP*

Despite its excellent level, homeopathy is not legal in Argentina, but the homeopathic remedy is legal. Our practice is private; we are not allowed to practice in public hospitals. To compensate for this situation, homeopathic schools offer medical services at low costs. Some of them have signed agreements with universities and medical associations to teach postgraduate courses. We have the Federación de Asociaciones Médicas Homeopáticas (FAMHA) that gathers together the institutions involved in research, teaching, and diffusion of our medicine, which organizes congresses every two years (next in 2014) and provides voluntary registration, through the Colegio de Médicos Homeópatas, to those medical doctors who commit to practice Hahnemannian medicine. The Asociación Médica Homeopática Argentina, South America's first school, celebrates its 80<sup>th</sup> Anniversary with the "Week of Homeopathy" from 7-11 October, 2013.

### ARMENIA

*Dr. Mariam Gharabaghtzyan, NVP*

As we indicated in our last-year report Dr. Pfeiffer's seminar called "Neurological disorders in children" was held in Yerevan in autumn 2013. Many homeopaths from Armenia, Germany, Russia participated in the event. This year as usual we attended different seminars in Germany (Dr. Pareek), Italy (Dr. Spinedi).

Sabine Zimmermann was in Yerevan on her regular visit this year in spring to conduct a five-day seminar for the Armenian homeopaths. Homeopathy tends to gain high interest in the Armenian society, which is testified by numerous invitations to take part in medical programs on different TV channels. Several of these programs featured Mariam Gharabaghtsyan and had wide resonance.

This autumn we look forward to the traditional visit of Dr. Pfeiffer with his seminar in Yerevan.

On April 30 - May 3, 2015, the International Homeopathic Congress will take place in Yerevan which is already the 5th one in Armenia.

We are hopeful that it will be as interesting and productive as the previous ones.

We have the pleasure to invite all those who are interested to attend the event and look forward to welcoming them in Yerevan.

# Your Liga Link

## The National Vice President

The official bodies of the Liga Medicorum Homoeopathica Internationalis, frequently termed simply the Liga, include the International Council, the Executive Committee, and the General Secretariat, which meet annually. Although the International Council is composed of the President, the Immediate Past President, the Prime Vice President, the National Vice Presidents/Assistant National Vice Presidents, the Prime General Secretary, and the eight other General Secretaries, the Treasurer, and active members selected from different countries not having National Vice Presidents, *the crucial element in the function of the Liga is the National Vice President.*

As it states in the LMHI Statutes, 'The National Vice Presidents are the permanent link between the International Council and, therefore, the Liga, and the national homeopathic organizations. The National Vice Presidents have several important duties, which they *must* perform, as follows:

- the submission of an account of every International Council Meeting or Congress of the LMHI to the homeopathic journals of their respective countries;
- the presentation of applications for Liga membership from new members from their respective countries;
- the submission of an Annual Report to the LMHI on
  - the activity and the developments regarding homeopathy in their own country,
  - the homeopathic national events, congresses, jubilees, etc.,
  - the homeopathic publications or communications,
  - a listing of business addresses and telephone numbers
  - of homeopathic institutions, physicians, dentists, veterinarians, pharmacists;

- the Annual Report mentioned above must be sent to the Prime General Secretary at least one month before the meeting of the International Council. Also, a 130-word summary of that report in English must be submitted for publication in the annual *Liga Letter*, the LMHI Newsletter. *The list of addresses and telephone numbers of homeopathic physicians, pharmacists, veterinarians, dentists, and institutions, must be submitted annually to the LMHI Treasurer along with the collective membership dues.*

Failure to fulfill these duties is grounds for removal of said National Vice President by authority of the International Council or the Executive Committee, as stipulated in the *Statutes*.

### "The crucial element in the function of the Liga is the National Vice President"

*LMHI Statutes*

#### AUSTRIA

*Dr. Claudia Garn, NVP*

In Austria, only medical doctors have the legal right to practice homeopathy. About 300 medical doctors, students, pharmacists, and veterinarians attend a homeopathic formation. After the final exam in one of the medical doctor associations, AKH and ÖGHM, and completion of the medical formation including Right to Practice, the Medical Board can confer a "Homeopathy" diploma. The LMHI/ECH standardization process is supported by both Austrian Medical Homoeopathic Associations; our main organizer is Dr. Wolfgang Eichler working together with Dr. Thomas Waibel and Dr. Peter Blaimschein. Austrian societies cooperate together in public discussions with skeptics. A media team with members of each society was established in 2011. The Peithner Award 2012 was awarded to Dr. Christa Gründling for her multicenter allergy study: "Real-life effect of classical homeopathy in the treatment of allergies."

#### BANGLADESH

*Dr. Mohammed Ashrafur Rahman, NC*

We are trying to increase our number of members in LMHI, which will be a tremendous opportunity for them to express their opinions about homeopathy. Our government is very supportive of homeopathy. Most of the people of our country are choosing homeopathy over allopathy. A homeopathic ordinance was passed by the government in 1983. A government Homeopathic Medical College and Hospital, including 100 beds, a homeopathic research center unit, a production unit and museum, officers' quarters, and boys and girls hostel on the campus, were established in 1989. We have two courses of homeopathy: a five-year Bachelor of Homeopathic Medicine and Surgery (BHMS) course and a four-year Diploma in Homeopathic Medicine and Surgery (DHMS) course through the Bangladesh Homeopathic Board. Graduates of these two programs number 41,300. There are 30 homeopathic manufacturing facilities.

# LMHI Governance Meetings 2014

Actions of the Executive Committee (EC) and  
of the International Council (IC)  
Paris, 16-19 Jul 2014



IC Meeting



EC Meeting

BE Lg lu M  
*Dr. Léon Scheepers, NVP*

In the Belgian Chamber of Homeopathy, six recommendations were adopted about registration, definition of homeopathic practice, education, continued education, authorized acts, and publicity. In January 2013, the minister sent these recommendations to the Parliamentary Commission. In addition to the representatives of the universities, we had the opportunity to explain our point of view before this Commission. During the last meeting of the Chamber of Homeopathy (07/05/2013) a recommendation about the continued education in homeopathy for medical doctors was adopted:

- continued education
  - in conventional medicine ( 20 CP)
  - in homeopathy (10 CP), consisting of the following five items:  
Limitation of homeopathic treatment.  
– Semiology. – Case review. – Homeopathy and its application in relation to a specific pathology. – Research.

BRAZ IL  
*Dr. Francisco Vargas de Oliveira, NVP*

Homeopathy has been recognized as a medical specialty since 1980. Today the specialties of Homeopathic Pharmacy, Dentistry and Veterinary Medicine are also recognized. The Brazilian Homeopathic Medical Association is active in 16 Brazilian states. Currently, there are 20 training courses in homeopathy recognized by our National Association training entity that coordinates with the national entity. We have a regular physician National Congress every two years. Dentistry and veterinary congresses are held congruently with medical congresses, but homeopathic pharmacy has a separate congress. Various areas of Brazil hold regional meetings annually. Currently, there is a National Program Implementation Ministry of Health of Homeopathy and other unconventional practices, but with difficulties in its implementation.



**BuLgARIA**  
*Dr. Dora Patchova, NVP*

The National Conference of AHPB, lectures for GP's during Homeopathy Week, and courses of Homeopathic School Edicta (ECH licensed), were accredited by the Bulgarian Medical Association. The Conference was attended by 305 homeopaths, general practitioners, dentists, and pharmacists. After this success, the media reacted to the anti-homeopathic wave. The managing board chose homeopathic members to serve as media representatives, preparing written instructions for them with assistance from public relations professionals and journalists. Concentrating our efforts for Homeopathy Week, April 2013, we organized lectures for GPs and the general public, focusing on "Stress, Thyroid Diseases, and Homeopathy." Prof. Dr. Ajit Kulkarni gave lectures to 525 doctors in four towns. Additionally, there have been free consultations in seven towns. The homeopathic media representatives gave many interviews locally and nationally with positive feedback.

**CANADA**  
*Prof. Bhupinder Sharma, MD (Hom.), NC*

The Transitional Council of College of Homeopaths of Ontario is working to regulate the homeopathy in Ontario by developing the competency-based assessment tools through which individual applicants' competencies are demonstrated. New registrants are to familiarize themselves with the Entry to Practice Competency Profile for Homeopaths practicing in Ontario. A Jurisprudence Program addressing ethics and safety is also being developed. The Council is drafting tools to ensure that its curriculum meets the competency profile for practicing homeopaths. The Canadian Homeopathic Conference was held for the third consecutive year by homeopathic associations in Ontario and SPHQ of Quebec in October 2013. The Conference brings the homeopathic community together annually to get the current information on homeopathy around the world. Pre-registration for the new College of Homeopaths of Ontario should start in 2013.

# 68 th Congress of the Liga Medicorum Homoeopathica Internationalis Minutes of the International Council Meeting 2013 in Quito, Ecuador

## Agenda

### LMHI President's Opening

LMHI President Dr. José Matuk Kanan opens the meeting at 9.20 am. After a short welcome to the participants he gives the word to Dr. Edgar Godoy, the president of the 68 LMHI Congress.

### Welcome of the Congress Organizers

Dr. Edgar Godoy welcomes the participants of the International Council.

### Approval of the Minutes of the International Council Meeting in Nara 2012

### Reports of the LMHI Executive Officers

**Approved** unanimously.

#### **Dr. Renzo Galassi, LMHI Prime Vice President, Italy:**

I participated at the LMHI Officers Meeting in Köthen, March 2013, where I also attended the inauguration ceremony of the new LMHI statutory seat in the House of Hahnemann.

I have collaborated in the new edition of the LMHI Book Project with Dr. Carles Amengual, Secretary of Education and the Working Group on Education. This statement was voted upon in Quito in June 2013. There has been regular contact and work with LMHI Officers with discussion and continuous exchange of emails about the administration of LMHI and the preparations for the LMHI congress in Quito, Ecuador. I was also involved in regular contact with LMHI NVPs with exchange of emails about problems in their respective countries. I was engaged in regular contact with LMHI President José Matuk Kanan in order to support him and give advice for his very important and difficult job. We have had continuous exchange of email with several members of the LMHI Working groups with the aim to push forward the activity and the achievement of the goals of these important projects. In Quito, a third meeting of the members of the working groups took place. We are now in the second phase of the project, where all the people who want to work and collaborate in every specific area of the LMHI activity can join us. This year we will have new secretaries and I hope that they will be able to strengthen the activity of their Working Group.

#### **Dr. Ulrich D. Fischer, LMHI Immediate Past President, Germany:**

LMHI Foundation: The purpose of the foundation is the promotion and support of research and education in the field of medical homeopathy worldwide. Established as a dependent or "trustee" foundation connected directly to the LMHI and the new seat of the LMHI, it needed to achieve the status of a nonprofit organization and the registration as an association in Germany. Between October 2012 and January 2013, the LMHI Constitution was adapted to the requirements of the German tax authorities. In February 2013, the German version of the Statutes was submitted to the tax authorities for a first check, and subsequently recognized. The next step was the re-foundation of the LMHI in Germany. This took place during a special celebration in Köthen on 16 March 2013. A special document (Minutes of the Foundation) was designed by our lawyer and adapted to our needs by myself, then signed by the LMHI officers and the German and Japanese NVP. In April 2013, the LMHI Foundation Document was submitted with our Statutes and Procedures, to the tax authorities for official approval. With the document proving the tax exemption for the LMHI, we could take the final step, the registration of LMHI as an official association in Germany. In collaboration with the LMHI office and administration in Berlin, the celebration for the move of the statutory seat from Geneva, Switzerland, to the original house of Dr. Samuel Hahnemann in Köthen (Anhalt), Germany, was organized. This joyful and moving celebration occurred in the presence of the Secretary of State in the Ministry of Science and Economic Affairs of Saxony-Anhalt Marco Tullner, Koethen's Lord Mayor Kurt-Juergen Zander, other city representatives from Koethen, the LMHI officers, and more than 50 guests and NVPs from all around the world, including India, Bangladesh, Japan, Turkey, Serbia, Belgium, Austria, and the Netherlands. An LMHI Memorial Plate was mounted in the Hahnemann House.

**Dr. Thomas Peinbauer, Prime General Secretary, Austria:**

This is my last report as an LMHI officer. I would like to take the opportunity to look back and say thank you. Thank you to all my fellow LMHI Board Members of the last nine years represented by Jose Matuk, Ulrich Fischer, and Corrado Bruno as the responsible presidents, as well as all of you who accompanied me as I served as LMHI Treasurer and LMHI General Secretary . My election in November 2012 as President of the European Committee for Homeopathy focused my attention and energy on that office, such that I could only perform basic obligations for my Liga office. Grateful to retiring Liga President José Matuk for his understanding and support. I owe special thanks to Immediate Past President Ulrich Fischer who stepped in to assume some of my obligations especially the preparations for the Köthen Celebration in March. During my tenure in the executive Committee, my two important projects had been HERMES (Homeopathy, Encyclopedia, Reports, Membership administration, and Search functions), and HOPE (Homeopathy for Poor People and Environmental Protection). I am grateful for the opportunity to work with Caroline Geiser in implementing HERMES, most especially the CMS website, the permanent Berlin office, and the electronic newsletter. While the HOPE project that then Past President Corrado Bruno and I instituted has not yet come to fruition, I still carry it with me. I wish to thank my Ecuadorian Colleague Edgar Godoy, Xavier, and the Organizing Committee for this Congress and your hospitality which gratitude I further express by gift of Edgar Morin's book, The Path to Hope, whose writings were first brought to my attention by Edgar.

Quitamos en Quito, quito yo en Quito, pero seguimos en el camino de la esperanza. Muchas gracias

**Dr. Yves Faingnaert, LMHI Treasurer, Belgium:**

For the financial year 2012, we received a total gross income of € 81.176,68, with total expenses of € 134.198,20. We realized this income thanks to the support from 6.657 institutional members of 33 countries, of 13 individual members, and 3 associate members. Eighty percent of the income is generated in Europe. For the past financial year the total result became negative with a loss of € 53.021,52. What is the present situation of our reserves? Our total capital May 2013 amounts to € 125.068,92. The credibility of our organization depends on a sound financial reserve; therefore, the amount of our capital should be approximately the same as yearly expenses. When analyzing our total equity and liabilities, one sees a constant decrease, with a decline of 24 % last year. Rising expenses are to be strictly controlled, while the Treasurer should also endeavor to obtain a good income. Adjusting our membership fees has never been considered. It is very clear: we have to adapt our subscription rates on taking drastic measures. I do hope we can start with a new year with amplified resources and the objective to 'make ends meet' and I hope to be back to you next year with positive results. I wish to take this opportunity to thank all of you again for the confidence shown in me and in my work for our association.

Monthly oversight of LMHI accounts and current payments to the Executive Officers.

Regular contact and work with LMHI officers with discussion and continuous exchange of emails about the administration of LMHI.

Meetings: regular participation at the IC, EC and Officers meetings.

Voting: Balance 2012

**Approved** unanimously.

**Dr. José Matuk Kanan, President, México:**

As the LMHI President, I participated with the Executive Committee in the planning of the relocation of the seat of the LMHI from Geneva, Switzerland, to Köthen, Germany. I joined with the members of the Executive Officers in preparing for the 68th Congress in Quito, Ecuador. I appreciate the efforts of each of the General Secretaries in their work in their respective fields. I am grateful to Vice President Dr. Renzo Galassi for his work on the Working Group Project. I represented the LMHI at World Homeopathy Day in Colombia with the support of Secretary for Archives Dr. Edgar Godoy. Thanks go to Drs. Fabio Gonzalez and Carlos Rivero Gomez for the success of this event. I updated the LMHI's traditional International Address book. I urge the member countries to submit their accounts of the history of homeopathy within their borders. In my term as LMHI President, I have participated in the arrangements for several Congresses. I have supported the task of the Working Groups attendant to different LMHI activities. I have engaged in the support of the work for the creation of the International Homeopathic Foundation. I have participated in the creation of the Council of Past Presidents inaugurated in 2011 in New Delhi. I have also assisted in various projects of the General Secretaries, in the continual upgrading of the LMHI Website, and in the composing of a new LMHI Brochure.

**Round-table talks: Membership fees**

Dr. Faingnaert presents the financial situation 2013 and the budget for 2014 and puts some proposals for further discussion to the IC, and for voting afterwards:

Increase the membership fees from 15 CHF to 15 EUR: first time in the last 30 years; decrease of income

Exception for the membership fees with documented reasons for the requested exception

Proposal to stop reimbursement of the travel expenses (economy flight and 3 nights in the hotel) of the LMHI Executive Committee to attend the Liga Congresses

Automatic annual adjustment of membership fees tied to inflation: 1 € per year = 5%, inflation of 6.8% Dr. Pillay: proposes instead of an automatic adjustment an annual reviewing by the IC.

Eligible to vote only if the membership fees have been correctly paid in full and the complete membership list has been sent to the Treasurer and to the LMHI Secretariat.

Increase the associate membership fees to 350 € per year

Dr. Peinbauer introduces every participant of the IC meeting to the audience and proposes to create 3 round-tables. There are 10 European NVPs forming one group, 6 South and Latin American NVPs forming a second group and a mixed group consisting of India, Japan, South Africa and USA.

Summary of the European group presented by Claudia Garn:  
Europe pays 80% of the LMHI membership fees; this is not fair  
No mandate to vote on an increase of annual membership fees from 15 CHF to 15 EUR today  
More fairness: certain countries seem not to pay their membership fees accurately  
Double financial load for European countries: 31 € to ECH and 15 € for LMHI  
There should be a solution for poorer countries  
To be discussed in the ECH council meeting in Nov 2013

Summary of the South- and Latin American group presented by Gustavo Pirres:  
increase of annual membership fees from 15 CHF to 15 EUR: yes  
annual adaptation of the membership fees: yes  
increase the contact via website; stop printing the Liga Letter  
lower the costs for the LMHI office and the expenses for LMHI officers and LMHI Secretaries  
increase the number of LMHI members

Summary of the mixed group (India, Japan, South Africa, USA) presented by Kaila Sandeep  
increase of annual membership fees from 15 CHF to 15 EUR: yes  
focus on poorly converted countries  
create value: adequate communication; more presence of LMHI in emerging markets  
sliding scale: average physician income, easier payment system: PayPal  
Life membership  
printable Liga Letter  
Yahoo-Groups

Voting results:  
Increase the membership fees from 15 CHF to 15 EUR

**Approved.**

Exception for the membership fees possible with documented reasons for the requested exception

**Approved** unanimously.

Proposal to stop reimbursement of the travel expenses (economy flight and 3 nights in the hotel) of the LMHI Executive Committee to attend the Liga Congresses

Annual adjustment of membership fees tied to inflation

**Not approved.**

**Approved** on condition of annual reviewing.

Eligible to vote only if the membership fees have been correctly paid in full and the complete membership list has been sent to the Treasurer and to the LMHI Secretariat.

Associate Membership fee shall be 350 € per year

**Approved. Approved.**

**Reports of the LMHI Secretaries for Archives, Dentistry, Education, Newsletter, Pharmacy, Public**

**Relations and Research**

**Dr. Edgar Godoy, Secretary for Archives, Ecuador:**

As Secretary for Archives I have been collecting and archiving the documents generated throughout the year, keeping them in the same format and continuing with the policy of our institution. According to the new procedure proposed in 2013, the full-length EC and IC reports will be available in the login-protected section "International Council" of the LMHI website [www.lmhi.net](http://www.lmhi.net). A list of all documents archived are appended below for your acknowledgement. I want to take this opportunity to let you know that because of my various activities, inclined more to the teaching and research area of homeopathy, as well as beginning the process of writing a book that will be published in the near future, it will not be possible for me formally to continue as part of the Executive Committee. However, I want to express my sincere support and help to the great work that LMHI has done and continues to do or the growth of homeopathy in the world.



**Dr. Michel van Wassenhoven, Secretary for Research, Belgium:**

After each LMHI congress, we published an update of the LMHI–ECH document: “Scientific Framework of Homeopathy.” Updated each year with new results of homeopathic research, it contains recent LMHI Congress publications and relevant scientific publications on homeopathy published in several journals. The 2013 version is on the LMHI website. If you are aware of a new valuable scientific publication on homeopathy, send it to the Research Secretary to be incorporated in a future update. LMHI Guidelines for Clinical Verification of Homeopathic Symptoms were discussed again within the ECH and LMHI Research Working Group, and we may reach a consensus on a third edition draft document. LMHI Proving Guidelines were discussed extensively. Our list of about 3000 homeopathic remedies, documented only by English references (provings and materia medica, new and traditional), which is designed to facilitate remedy registration and to establish research priorities, still needs more references from other languages. An international survey on change of Quality of Life in new patients has been finalized in six European countries and Brazil. The results indicate great patient satisfaction when using homeopathy. In some countries Euroconsumers published very negative conclusions. We complained about this, asking for complementary statistics. Projects for the future:

New booklet “Scientific Framework of Homeopathy after 68th LMHI congress.”

Provings databank and access through LMHI website.

Publication of further editions of LMHI Guidelines for Provings and Clinical Verification of Homeopathic Symptoms.

A new “official” document about Homeopathic scientific publications could be considered.

**Dr. Marcela Monoz Montoya, IAVH representative**

Dr. Marcela Monoz Montoya, veterinary homeopath from Colombia and IAVH representative for IAVH at the IC reports about IAVH and its activities. IAVH has about 555 members worldwide. She presents a wikipedia programme for Materia Medica with translation in 8 languages. There is a pilot group of 20 vets in Colombia.

**7. Reports of the LMHI Working Groups: LMHI Library**

Dr. Cesar Cremonini, Working Group LMHI Library, Argentina:

Received, by way of donation, various publications.

Cataloging and classification of thematic resources.

Development Inventory, Bibliography Report and Balance sheet

Institutional promotion through the provision of headquarters Stand in National and International Congress.

Brochures Diffusion Areas and activities related to the Library.

Annual Informational Bulletin Printing sources homeopathic AUDE SAPERE

Plate Donation in honor of the work of the Organizing Committee of the International Congress.

VENUE: Open headquarters for six years. Disposition of property and suitable furniture. Storage and retention of thematic resources.

**Publications**

Print-English and Spanish-the book: Characteristic Symptoms of the Materia Medica for the Pocket by Dr. TF Allen (Published in 1894)

Four Editions in Spanish and three in English editions of the Organon. Organon of the rational art of healing according to the laws of homeopathy (Samuel Hahnemann -1913)

**Proposal**

Offers to Homeopathic Bibliography Printing to set up Eastern European countries in their mother language, on delivery of the original by the country that requires it. The costs thereof shall be borne by the Foundation

Failure to respect the interest receive above, we propose the translation, editing and publication of “Theory and Practice of Homeopathy” by Dr. Robert Ellis Dudgeon.

Preparatory actions for the purpose of developing the project to digitize library materials.

**LMHI Congresses 2012 in Nara / Japan: review**

not dealt with

**LMHI Congresses 2014, 2015, 2016 and 2017: State of Affairs and New Applications****LMHI Congress 2014** in Paris:

The LMHI Congress 2014 will take place in Paris from 17 to 19 July 2014, the EC – and IC meeting on 15 and 16 of July. Philippe Servais and Yves Maillé report about the state of affairs. A specific association named after the late colleague Patricia Le Roux has been founded. It was signed a contract with the Belgian company Medicongress. An adequate venue in the center of Paris has been found, it will cost about 300.000 – 400.000 €, about 1500 – 2500 participants are being expected. The central theme will be “Homeopathy on the Move: Strategies and Criteria for Healing”. It is an opportunity to gather the French homeopathic community, unicists and pluralists, representatives of the various different schools in France, to discuss the different levels of healing and to show unity and solidarity. There will be a simultaneous translation into English, German and Spanish, and other languages if there are more than 150 speakers of the respective language. Prof Montagnier will be invited as special guest speaker.

**LMHI Congress 2015** in Rio de Janeiro

Dr. Gloria Feighelstein applies in the name of the Brazilian National Homeopathic Medical Association (AMHB) and the Brazilian Homeopathic Medical Association of Rio de Janeiro (AMHERJ) for the LMHI Congress 2015 in Rio de Janeiro, Brazil. She reports about a meeting with Dr. Matuk on 12 July 2012 in Rio de Janeiro and the governmental support for the organizers and presents a video about Rio. Dr. Francisco Vargas de Oliveira Villela, President of the Brazilian Homeopathic Medical Association of Rio de Janeiro (AMHERJ) has been elected as the new Brazilian NVP.

**Approved** unanimously.

**LMHI Congress 2016** in Buenos Aires, Argentina

**LMHI Congress 2017** in Leipzig, Germany

**LMHI Congress 2018** in South Africa

**LMHI Congress 2019** in Italy **LMHI Congress 2020** in Turkey **LMHI Congress 2021** in Colombia

**Approved** unanimously. **Approved** unanimously. **Approved** unanimously. **Approved** unanimously.

**Dr. Geraldo A. Brown Ribeiro, Secretary for Dentistry, Brazil:**

Concerning the activities of the Secretary for Dentistry in the current period, we followed the action plan established in 2010. We can enumerate the following main points:

1. The Secretary for Dentistry attended the XXXI Brazilian Congress of Homeopathy and the XI Brazilian Congress of Homeopathy in Dentistry, both held in October 2013 in Belo Horizonte, Minas Gerais, Brazil. Our main aims were the following:

To give support to the movement for recognition of homeopathy as a dental specialty in Brazil by Federal Brazilian Dental Council;

To motivate Brazilian colleagues and associations to become LMHI members;

To disclose the 70th Congress of LMHI in Rio de Janeiro, inviting colleagues and associations to participate.

The Secretary for Dentistry set up an introductory seminar of homeopathy as applied to dentistry for average Ecuadorian dentists, as a parallel event of the 68th Congress of LMHI, in Quito, Ecuador. Homeopathy in Dentistry is not practiced in Ecuador, and it was an excellent chance to introduce it in that environment, with the support of the Congress' organization.

The Secretary is interacting with some dental homeopathic associations in different countries, continuing the process of surveying to evaluate the current status of Homeopathy in Dentistry all over the world. The data are being recorded for further publication.

The Secretary for Dentistry thanks all members of Executive Committee and International Council for the support in past three years, which was fundamental for the accomplishment of our goals.

**Dr. Carles Amengual i Vicens, Secretary for Education, Spain:**

Medical Homeopathic Education Standards: LMHI and ECH, representing medical homeopathy worldwide, adopted a common program on education standards in 2008.

Accreditation of Homeopathic Schools: Several schools from Turkey and Spain asked for accreditation to the LMHI.

The LIGA Book Project: No applications in 2012-2013. Some amendments to the procedure document of 1997 were discussed at the Quito Congress.

World Homeopathy 2013: The following representatives sent the information about the legal situation of homeopathy in their country as of June 3, 2013: Argentina, Austria, Bangladesh, Belgium, Bulgaria, Canada, Czech Republic, China, Costa Rica, Croatia, Cuba, Egypt, Estonia, France, Germany, Greece, Hungary, India, Iran, Japan, Kazakhstan, Latvia, Malaysia, Mexico, Moldova, Nepal, Netherlands, Pakistan, Poland, Serbia, Slovenia, South Africa, Spain, Sweden, Switzerland, Turkey, Ukraine, United Kingdom, Uruguay and USA.

We urgently request all representatives who have not already provided it, to send an email with the following:

a letter in English from the LMHI National Vice President with the detailed legal situation of homeopathy AND a copy of any legal document regarding homeopathy in your country.

The updated information will be collected in a report and send to all LMHI National Vice Presidents. We rely upon your collaboration to include your country's homeopathic information. We collected 530 pages for "World Homeopathy 1998". The document "World Homeopathy 2013" will be useful as technical information for the political and academic authorities of your country. Please be aware of the importance of your prompt collaboration by sending the required complete information.

**Dr. Sandra M. Chase, Secretary for the Newsletter, USA:**

Sandra M. Chase, MD, DHT, summarized her volunteer work as Liga Letter Editor from various LMHI Executive positions. One of seven pledges to the Liga membership as President in 1995, it was first published from her office that year and distributed at the Congress in Mexico in 1996, its semi-annual publication was managed by Dr. Ton Nicolai and his group (Netherlands). A 1997 survey of the LMHI membership supported the Liga Letter. The October 1998 issue was also published in Portuguese to support the Liga Congress to be held in Brazil. With the Fall 2001 issue, a Spanish version was initiated, translated by professional translator Ceferino Rodriguez (USA). Dr. Chase produced a LMHI Membership Brochure in English, French, German, and Spanish, distributed with the Liga Letter, Spring 2002. In 2005, as a cost-saving measure, the Liga Letter's publication was reduced to once a year. The 2006 issue included a "Liga Letter as pdf Document" survey, again supportive of the Liga Letter. The layout, publication, and distribution moved to Romania, with the invaluable assistance of Dr. Carmen Sturza and Ars Medica. Dr. Anna Pla performed the Spanish translation. Generation of the Liga Letter continued from the office of Dr. Chase (USA), while the layout, printing, and distribution was moved to the LMHI Secretariat in Berlin in 2010 under the supervision of Caroline Geiser. In 2011, it was translated into Russian and Portuguese versions found on the website. With the publication of this issue, Dr. Chase has completed 19 years of producing the Liga Letter in service to the LMHI and its individual members worldwide. She is grateful for this opportunity to have served the Liga and its membership.

**Dr. Fruzsina Gábor, Secretary for Pharmacy, Hungary (not present)**

see written report

**Dr. Sara Eames, Secretary for Public Relations, UK (not present)**

see written report

The acceptance of the IC is preliminary until the LMHI Congress Organizational Guidelines have been signed by both sides.

#### **International Homeopathy Day 2013 in Colombia and IHD Application for 2014**

IHD 2013: see report Dr. Matuk

For the IHD 2014 there are ad hoc applications by Brazil, Bulgaria, India and Spain.

Voting: Spain (7), India (4), Bulgaria (3), Brazil (1)

**Approved.**

#### **LMHI Seat in Köthen / Germany: Celebration on 16 March 2013 in Köthen and Legal State of Affairs**

Dr. Fischer: (see 4 b.: report by Dr. Fischer and 12)

Dr. Francesco Marino asks about the costs of the lawyer for the move from Geneva to Köthen: 10.000 €

#### **LMHI Constitution and LMHI Procedures: State of Affairs**

Dr. Fischer: (see 4 b.: report by Dr. Fischer)

Dr. Chase: declares that for the re-foundation of LMHI no substantial changes in the new statutes were necessary; 5 new paragraphs.

Dr. Matuk: declares that procedures are more important than the statutes; they will be presented well in advance before the next LMHI Congress in Paris

Dr. Pillay/South Africa: proposes to vote next year

The IC 2014 in Paris will vote on the new constitution

Voting result: Amendment of the Statutes

**Approved. 16 in favour, 1 abstention, 0 against**

#### **LMHI Office in Berlin / Germany: State of Affairs**

##### **14. LMHI International Homeopathic Foundation: State of Affairs**

Dr. Fischer: (see 4 b.: report by Dr. Fischer + 12)

Hetty Buitelaar: Is it sure that the money will be used properly? There should be an external council Todd Hoover: asks if going the simple way it would prevent to create a foundation later?

Cesar Cremonini: (not understood)

Philippe Devos: we created an independent association including patients, which works well. A scientific committee makes proposals how to spend the money.

Voting result:

**Approved. 9 in favour, 1 abstention.**

#### **LMHI Website (HERMES) – member search function**

Dr. Peinbauer reports that the searchfunction for the individual members on the LMHI website is one of the last open points of the HERMES project. The different rights for the website have to be defined.

#### **LMHI Guidelines for a Homeopathic Drug Proving (HDP)**

Dr. Michel van Wassenhoven: more discussion is needed for a 3rd edition of the LMHI Guidelines for a Homeopathic Drug Proving. In regard to registration of homeopathic medical products HDP are important for HPUS, in the European Union there is no obligation, but good if available. In India HPTs have to be placebo-controlled. For the 3rd edition different types of HDPs could be thought of: educational provings, ...

#### **LMHI Guidelines for Clinical Verification of Homeopathic Symptoms**

Dr. Michel van Wassenhoven: there is a 3rd edition. One comment has been received and implemented.

**LMHI Accreditation Regulations: State of Affairs; Amendment for Small Teaching Centres** Renzo Galassi: proposes to offer small teaching centers the possibility to apply for a LMHI accreditation based on the ECH-LMHI Medical Homeopathy Education Standard.

Hetty Buitelaar: in the Netherlands there are independent teaching centers

Francesco Marino: FIAMO has an education department and represents 15 homeopathic schools

Voting result:

#### **Liga Book Project - Regulations**

Dr. Carles Amengual: see report above (6c)

**Approved. 9 in favour, 1 abstention.**

### **National Vice President: Limited Term of Office**

Dr. Matuk: proposes to limit the term of office for 3 years. Reelection is possible, but the protocol of the (re-) election has to be sent by the national member organizations. The LMHI office will create a template.

Voting result:

### **LMHI-ECH Cooperation / Working Group**

**Approved.** 14 in favour, 1 abstention.

Dr. Peinbauer: presents some examples where cooperation between ECH and LMHI could be possible. Following the principle of subsidiarity ECH offers to take over the administration of the LMHI members of the European WHO Region. A common ECH-LMHI working group including Dr Fischer and Dr Peinbauer should be established and present proposals at the ECH council meeting in Barcelona and the next IC in Paris. Dr. Amengual: ECH was founded in 1990, and it could be a model for other continents.

### **LMHI Contribution to Hahnemann House in Köthen**

Dr. Fischer asks for a donation of 500 € in 2013 for the Hahnemann house in Köthen.

At the moment takes place an evaluation about how to use the Hahnemann house in future. Gustavo Cataldi: proposes to collect donations at each LMHI Congress

Francesco Marino: proposes to make more promotion for the Hahnemann House

S.P.S Baksi: announces that he will give annually 500 USD in the next 3 years

**LMHI Membership Applications:** no

### **Reports of the National Vice Presidents**

See written reports

### **LMHI President of Honour**

The EC has propoposed Dr. Jacques Imberechts as LMHI President of Honour. In absence Dr. Michel van Wassenhoven presents Dr. Imberechts' merits: Belgian NVP for many years and LMHI President 1998-2001, Founder of Homoeopathia Europea et Internationalis (HEHI); Initiator of Clificol; Co-founder of ECH and first ECH President; Member of GIRI; Organizer of the LMHI Congress 1972 in Brussels and Co-organizer 2008 in Oostende;

### **Presentation of the Candidates for the new LMHI Executive Committee**

LMHI President: Dr. Renzo Galassi, Italy LMHI Vice-President: Dr. Alok Pareek, India

LMHI General Secretary: Dr. Jelka Milic, Croatia LMHI Treasurer: Dr. Yves Faingnaert, Belgium

LMHI Past President: Dr. José Matuk Kanan, México

LMHI Secretary. for Archives: Prof. Dr. Martin Dinges, Germany LMHI Secretary for Dentistry: Dr. Gloria André Feighelstein, Brazil LMHI

Secretary for Education: Dr. Gustavo Cataldi, Argentina LMHI Secretary for Newsletter: Dr. Richard Hiltner, USA

LMHI Secretary for Pharmacy: Dr. Fruzsina Gabor, Hungary

Dr. Amarilys de Toledo Cesar, Brazil LMHI Secretary . for PR: Dr. Sara Eames, UK (written application) LMHI Secretary . for Research: Dr. R.K. Manchanda, India

Dr. Ashley Ross, South Africa

### **Results**

President: Dr. Renzo Galassi

LMHI Past President: Dr. José Matuk Kanan, México Prime Vice President: Dr. Alok Pareek

Prime General Secretary: Dr. Jelka Milic Treasurer: Dr. Yves Faingnaert

Secretary for Archive: Prof. Martin Dinges Secretary for Dentistry: Dr. Gloria Feighelstein Secretary for Education: Dr. Gustavo Cataldi

Secretary for Liga Letter: Dr. Richard Hiltner

Secretary for Pharmacy: Dr. Amarilys de Toledo Cesar

Secretary for Public Relations: Dr. Sara Eames (written application) Secretary for Research: Dr. R.K. Manchanda

### **Election of the new LMHI Executive Committee:**

All candidates adopted

### **Miscellaneous**

Dr. Peinbauer reports that ECH started the CEN project "Service provision of Medical Doctors with additional Qualification in Homeopathy" and urges all European NVPs to get in contact for further information.

### **Closing of the Meeting: 5.35 pm**

**Dr. Jose Matuk Kanan**  
LMHI President

**Dr. . Thomas Pehinbauer**  
Prime General Secretary

# 2013 LMHI Meeting, Quito, Ecuador



Participants of the IC Meeting 2013



Executive Committee and Sandra M. Chase



Closing Ceremony

# Highlights of the 69<sup>th</sup> Congress of the Liga Medicorum Homoeopathica Internationalis

16-19 June 2014, Paris, France

By Todd A. Hoover, MD, DHT



Palais des congrès



Opening ceremony

## CHILE

*Dr. Ewald Finsterbusch, NC*

Although homeopathy is legally approved by the Health Ministry, the number of homeopathic physicians is still low. They work mostly independently and there are no important associations. Medications, produced by four laboratories, are available in several pharmacies in all major cities. Most prescriptions are made "over the counter" by pharmacists or their assistants. Regulations allow both MDs and non MDs to practice homeopathy. The situation is confusing, as patients are not aware of the difference, which depends on therapeutic success. Some private universities offer courses as a part of the curriculum of the Natural Health Practitioner's degree, but there is no homeopathic teaching at regular medical schools. Despite these facts, Chilean society is increasingly becoming open minded towards alternative therapies.

## CHINA

*Dr. Steve A. Xue, NVP*

With the dedication of a few homeopathic association members, we achieved the following: Publication of the first homeopathic materia medica in Chinese. Dr. Steve A. Xue was the chief editor of the book. Representing Liga-China, he conducted a round-table meeting with administrators of Shanghai Chinese Medicine University (SCMU), showing the necessity of establishing a research institute on comparative studies of homeopathy and classical Chinese medicine. With technical support from LMHI Dr. Fruzsina Gabor, the Chair of Pharmacy Committee, we completed the translation of Kent's Repertory and began the translation of Boenninghausen's Repertory and Materia Medica. An introductory seminar about homeopathic history and principles was conducted at a large health-training center near SCMU. We developed a proposal to build an international natural medicine museum in Mount Wu Yi, to include homeopathy.

Congress organizer, **Dr. Philip Servais** presented an introduction to the meeting. The theme for the meeting is that of Strategies and Levels of Healing. First, the strategies for arriving at correct treatment was chosen to allow for the many methods of treatment analysis to be presented so that we may see the similarities and differences, but not to have any deep religious attachment to our own particular methodology. And levels of healing were selected to evaluate various cases to help understand what is possible through the modality of homeopathy. What level of result we should expect in our treatment?

He discussed four possible levels of healing:

Simillimum --- complete healing of the disease even to the spiritual level

Simile --- remedy enables elimination of a disease, and provides some level of comfort in total

Suppression of symptoms --- help to alleviate symptoms, but no general improvement

No cure, or palliative care --- not effective homeopathic treatment

*Homeopathy on the Move* is the title for the congress. Let us use all of the expertise available regardless of country, culture, or ideology. Let us not be constrained by the religious or moralistic roots of homeopathy, but look to methodology which is effective for our patients. Let us not be constrained by our own dogma.

To help improve understanding of homeopathy, a small group of experts in France join together to re-examine the basis for prescription. They look at how to deepen the understanding of Materia Medica through the themes that give MM meaning, through looking at successful, revealing cases, and through an attempt to understand the original substance of the remedy (using botany, mineralogy, chemistry, etc. as the roots of the medicine). --- *Using the Inductive Approach*

While using new approaches, we must examine the method from a very pragmatic aspect. It is important to consider the new models, but only to the level that they are effective for the treatment result consistency. Deductive approach allows us to examine these new methods more effectively.

**Lectures presented during the congress included:**

**Dr. Carlos Campora** presented a series of cases looking at a comprehensive approach using specific outcome scales to help measure the impact of the therapeutic treatment including the SF36 scale, VAS scale for the chief complaint, ACR classification for arthritis, Vitalis II Outcome Scale, Breccha score for chronic cases, and other methods used in standard research. He presented the objective findings in the case as well as the method of analysis. In a case of Seronegative rheumatoid arthritis with cachexia and low energy, he discussed thoroughly the allopathic support for diagnostic precision.

In the homeopathic analysis, he looked at a series of symptoms within the totality of the patient. He uses the criteria that 66% of the symptoms primary to the case must be contained in the remedy through repertorization. He states that if the totality of analysis is consistent with the case and indicates a nosode, that the likelihood of success is very high. In this case Carcinosis is prescribed in 200c and then 1 M multiple times. The case demonstrates improvement in physical symptoms and pathology, improvement on the mental emotional sphere, and improvement in the objective examination. ESR went from 95 to 21 and video of the patient before and after show dramatic improvement with at least 5 years of follow up.

**Alexander Tournier, PhD** is a physicist interested in the molecular activity of water. He presented on the physical theory for a model of homeopathy's mechanism of action. Different theories include:

nanoparticles (proponent: Iris Bell)

nanobubbles (gas from the succussion process forms structures)

Silica hypothesis (agitation process causes high pressure and temperature that can remove silica from the glass to form structures)

Classical water structures (Clathrates) --- very short lived structures

Biophotons (specific photons from the solutions resonate with the human body)

Dr. Tournier would like to look instead at the complexity of water. There are 15 known phases of water (for example supercritical water heated above 100C, or super-cooled water which is liquid below 0C)

Water remains an intense area of research. This really deals with the atomic bonding level and below which is understood through quantum mechanics.

Montagnier research – recent video was done on French TV. HIV DNA can be diluted by homeopathic method. Changed into an electronic signal through analysis and sent to another lab in another country. In that country the electronic information is then infused back into water. Upon examination of the water with the electromagnetic information can then retrieve the components of HIV DNA with the addition of DNA polymerase. In this way the water can somehow mimic the structure of DNA to a significant enough degree to allow the formation of the molecules of HIV specific DNA within a high degree of accuracy. In other words he is looking at the ability to translate DNA information using electromagnetic information. Humans are primarily water. The molecules may be very sensitive to electromagnetic information.

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## Co Lo MBIA

*Dr. Carles Riveros-Gomez, NVP*

Homeopathy in Colombia continues to achieve great accomplishments. This year the Fundación Universitaria Escuela Colombiana de Homeopatía-Luis G. Páez (FUNHOM) was recognized by our Ministry of Education. The Fundación Instituto Colombiano de Homeopatía-Luis G. Páez (FICH) will celebrate its centennial in 2014. Our homeopathic medical associations include the Federación Médica Homeopática Colombia, Asociación Colombiana de Homeopatía, Asociación Médica Unicista de Santander, la Fundación Hahnemann de Colombia, and the Instituto Hahnemannianno Dr. Juan de Dios Pinzón. Our 2013 celebration of "World Homeopathy Day" in Bogotá was honored by the presence of LMHI President Dr. José Matuk, LMHI Secretary for Archives Dr. Edgar Godoy, our LMHI National Vice President Dr. Carlos Riveros Gómez, directors of homeopathic medical associations, and a group of Colombian homeopathic physicians. We hope to host a future LMHI Congress.

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## Co s TA RICA

*Dr. Alejandro Brenes-Valverde, NVP*

In 1890, homeopathy was introduced to Costa Rica and medical diffusion has been slow, partly because of the dominance of medical training in the biomedical model (centered on disease). Since 1987, many academic activities supported by the Colegio de Médicos y Cirujanos and later by foreign universities facilitated a greater diffusion. In 1994 at an international symposium on homeopathy and public health, the groundwork was laid for integration into the social security of our country. In 2003, the Inter-American Conference on Social Security, in San José, included homeopathy in a forum on "Non-Traditional Medicine." All this has stimulated continuing the work for its integration and is key to dialogue and opening with the public system, and to the presentation of homeopathy with the holistic model of patient care (person-centered).

NMR experiment by Demangeat (Homeopathy 2013). He is able to differentiate between dilutions of silica and manganese dilution based upon examination of the molecular structures within the NMR apparatus. Dilutions within saline solution have also been tested and show greater distinction using the NMR process. In other words, more complex solutions prepared homeopathically appear to be easier to differentiate than more simple solutions. He presented information from Dr. Pollack on the concept of exclusion zone water, which is created in solutions where the impurities have minute charges and create a zone next to a gel barrier of approximately 70-100 microns. In this zone, the water has much lower concentrations of the impurities compared with the main body of the solution. The physics of this water property is not understood at this time. If you take homeopathic preparations and evaporate the water, you get a solid structure at room temperature (vacuum evaporation). This is "room temperature 'ice'". There is no physics to explain this phenomenon. This has been reproduced at two separate facilities.

Classic approach to water physics is to consider each water molecule as operating independently. If we try to apply quantum mechanics to larger groups of water molecules it becomes very difficult. We begin to see water structures at 6 nm involving hundreds or thousands of water molecules. Two researchers in Italy Peparata and Guidice have begun to apply quantum mechanics at these molecules in these large scale applications (hundreds or thousands of molecules). They predict from their theories that water can form Quantum Coherence Domains of approximately 25nm in size. They could pick up electromechanical information from the environment and record it. This information could be "stored" for long periods of time. Similar QCDs tend to attract to one another forming a more unified group of molecules within the larger solution. Applying this information to the homeopathic remedy preparation yields some interesting results. In simple dilution without succussing one would expect to see less and less QCDs. But through succussing you can create a grouping of QCDs. When this is then added to another water batch, the QCDs interact with the new batch in the succussing and create more QCDs of a similar nature. Given the information from Montagnier, when this concentrated solution of QCDs is then added to a system (human being) with DNA polymerase and other enzyme systems, the QCD templates may then create physical molecular change within the system. Once information is locked into remedies, there is a self-stabilizing character to the remedies.

Information exchanged at the HRI in Rome 5-7 June 2015.

**Dr. Manchandra** from India presented on an observational study of addition of homeopathic protocol to the institutional management of Acute Encephalitis (AE) within an institution in Delhi. This disorder is common in South Asia. Symptoms include acute fever and change in mental status (differentiated from simple febrile seizures). Typically caused by virus (including Japanese encephalitis virus, dengue, polio, coxsackie, but also others). Major outbreaks of Japanese Encephalitis (JE) (mortality 25%, chronic neurologic morbidity in 50%) have been recorded in India, but other causes are also major factors (JE accounts for only about 10-15% of all AE). High incidence of JE, led to vaccination programs in India. Antibody testing can differentiate JE from other forms of AE. Current treatment is palliative only. No antiviral allopathic therapy exists. Other forms of AE have relatively less morbidity than JE, but still have relatively high impact upon health.

Exploratory observation study was conducted 2012-2013 in a conventional allopathic center, due to the lack of sufficient allopathic treatment for this disorder. Modified Glasgow outcome scale was used to determine outcome. 151 children were included in Study I (observational), and 83 children in Study II (pilot RCT). In study I, 121 = Homeopathy + standard care, 30 standard care only (refusal of homeopathy by family). Patient populations differed in that those with standard care only were 3x more likely to be admitted to ICU and GCS worse for standard care only group (more serious cases were in the standard care only group). Results Study I: looking at ICU group only, death likelihood 23% in the homeopathic group compared to 60% in the non-homeopathic group. With patients with GCS > 7 relative risk reduction was 77% in the homeopathic treatment group when considering death outcome. The total group analysis showed relative risk reduction for mortality of 62%. Earlier oral feeding and decreased hospitalization duration was also observed in the homeopathic treatment group.

Results Study II: Homeopathic treatment resulted in relative risk reduction of death as 39%. Also in reduction of severe disability showed a p value = 0.08 and good recover difference of p = 0.02. Specific homeopathic medicines and indications were derived from both studies for the treatment of AES.

Next step is to generate a larger RCT based upon these pilot results.

#### CROATIA

*Dr. Helena Jovičić Karre, NC*

No further development regarding the legislation of homeopathy and complementary medicine in Croatia has occurred since the Complementary Medicine Working Group (CMWG) of the Croatian Medical Chamber proposed the conclusions of CMWG, which were then adopted by the Executive Committee (EC) of the Croatian Medical Chamber (CMC) and published in the official journal of the Croatian Medical Chamber, *Liječničke Novine*, on February 2011.

#### CZECH REPUBLIC

*Dr. Eliška Novotná, NVP*

Homeopathy, as well as other complementary medicine, still has no legislative statute in Czech Republic, leading to the progress of homeopathy in the nonmedical, commercial sphere and to its stagnation in the medical sphere. Although Czech Republic is a small country, there are quite a lot of homeopathic associations and schools, most of them nonmedical, resulting in a lack of unity on the homeopathic field. This situation also is reflected in the low participation in seminars of ČLHS, low income, and lack of opportunities to participate in foreign homeopathic events such as the LMHI Congresses, etc.



**Klaus von Ammon** spoke about his 5 years of experience in conducting homeopathic consultations within university hospital for pediatric oncology in Bern, Switzerland. CAM therapies have been included in Bern University following a popular vote in 1992, and establishment in the Medical School as of 1195, and in the hospital as of 1998. Research began in 1999.

Individual complementary therapy with homeopathy is requested by almost 25% of families with child diagnosed with cancer. Costs are covered in Switzerland by insurance. A case of severe oral ulcers requiring morphine in a child with bone marrow transplant was described as an example of the type of case they were treating within the tertiary care setting. This case was treated with *Mercurius* with the result that within two days the patient's ulcers became pain free within 2 days, and then progressively improved. The allopathic staff was impressed with the results from this case and other similar cases within this setting. **Alok Pareek** from India presented a series of cases of advanced breast cancer including those with fulgurating masses of the breast on first presentation. These patients have severe debility, lack of energy, and therefore lack of reactivity for homeopathic treatment. The first aim in these very ill patients is to avert any impending crisis (especially to prevent death and suffering during the final days of life). Due to the dire needs of these patients we should best refer to the primary presenting picture. Treatment strategy must be determined from the outset of whether to support the patient to reach a stage where deep constitutional and miasmatic treatment will be possible, or to decide from the outset to palliate as best possible.

With extremely ill and dying patients, one should avoid starting with a constitutional remedy (Aphorism 276 and 279 of the *Organon* 6<sup>th</sup> edition). Kent in *Lesser Writings*: "If a carefully selected antipsoric aggravates a low form of disease sharply, and the aggravation is protracted...no more antipsoric medicines should be used." He recommended instead a palliative approach to the patient. Stuart Close suggests that in these very sick and dying patients, that remedies should be more selected based upon the pathology requiring some palliation, and that they should be used in low doses (potencies).

A series of photos of advanced cancers was presented demonstrating the physical pathology associated with such remedies as *Condurango*, *Asterixis*, *Carbo animalis*, *Euphorbium*, and *Lapis alba*. A case of uterine sarcoma (high grade) was presented. Presenting complaints included abdominal mass, menorrhagia, and pain. Surgery was refused by the patient. Eventually she developed intestinal ileus and emergency surgery was done showing adhesions of the bowel to the uterus, which was removed at that time. Poorly differentiated spindle cell sarcoma with infiltration to omentum and adipose tissue diagnosed. Chemotherapy was refused and patient elected homeopathic treatment.

ECuADoR

*Dr. Xavier Godoy Jaramillo, NVP*

The Ecuadorian Homeopathic Medical Society (SOMHE) is a nonprofit, private institution, whose members are professional doctors, recognized by the health ministry in 1983, with jurisdiction throughout Ecuador. The Ecuadorian Medical Federation recognized homeopathy as a specialty in 1998. For more than 15 years, SOMHE has maintained a consultation service to provide education and treatment for people lacking resources. The last constituent assembly recognized homeopathy and alternative medicines in general as legal medical practices. The current board took office in April 2012 and its priority was to organize the 68th LMHI Congress in Quito. We participated in meetings with the Ministry of Health concerning the integration of homeopathy in the Integral Health System and to coordinate its inclusion in the national higher education health system, under the new dispositions of the Senescyt.

Homeopathic treatment initiated 1 week after surgery.

*Staphysagria* 200c prescribed (one dose). This was followed 1 week later with *Calendula* 6c daily. Good post-operative healing occurred. After 2 weeks she developed abdominal pain, tenderness, and fever. *Belladonna* 30c twice daily resulted in improvement over 1 week. *Calendula* 6c restarted for several weeks. A detailed history was conducted at that time.

Analysis led to a constitutional remedy of *Sepia* based upon mental irritability, apathy and loss of affection for family, solitude, exhaustion/depression, chilly, easy perspiration, working hard, yet no interest in the finer things of life. Sycotic miasm is strong in the physical and mental symptoms. However, some acute symptoms of urinary burning led to a prescription of *Cantharis* first. In these cases it is critical to wait until all minor issues resolve before the primary remedy is seen clearly and should be given. *Sepia* 6c daily is first prescribed about month number 4. Eventually *Sepia* 200c is given at month number 5. Over the next 6 months, symptoms of *cantharis* occurred and were treated repeatedly. These recurrent symptoms suggested need for intercurrent remedy. *Medorrhinum* was then prescribed 200c in a single dose. Eventually, because the symptoms of indifference and depression persisted, *Sepia* 1M was prescribed at 18 months. Over this time period, examinations remained normal and ultrasound showed no evidence of local or metastatic spread. At 30 months, she was more cheerful and rejoined with her husband and children in a very positive way. Follow up with Abdominal and Pelvic CT and PET scan shows no recurrence of disease. CA125 was negative. During the overall course of treatment about 5 different acute remedies were also used for non-cancer related symptoms. Overall, the treatment of advanced cancers involves careful, stepwise treatment. Intercurrent and acute remedies may be needed throughout the treatment course due to the weakness of the state of the patient. Nosodes are often prescribed as a follow-up remedy to the constitutional prescription in these cases. As an aside, *Calendula* is a wonderful remedy for healing in cancer, especially when the skin is involved with discharges.

**Maurio Bognesi** presented a lecture on the treatment of malaria based upon his experience in tropical countries. The rules for prevention are different than the rules for treatment. The speaker has himself contracted malaria 6 times during his travels. He contracted the disease and treated himself with *Nux vomica* which stopped the development of the disease in the initial stage (first day of symptoms). He has subsequently used *Nux vomica* as a preventative while travelling to endemic areas and not protecting himself from mosquito bites. He tried several other remedies that have very similar symptoms related to the typical onset of malaria. He has interviewed more than 2000 patients with malaria to find these remedies.

EsToNIA

*Dr. Saima Tišler, NVP*

No legislation on practicing homeopathy has been passed by the Estonian government. However, homeopaths can apply for an official professional qualification for proof of the quality of their services. The Homeopath II and III qualifications are awarded by the Estonian Qualification Authority (EQA), which has approved a set of educational requirements. A draft was composed in 2006 and written in accordance with WHO development strategies (WHO Strategy for Traditional Medicine/ Complementary and Alternative Medicine 2002 – 2005), European Forum for Complementary and Alternative Medicine program (2005), European Committee for Homeopathy (Medical Homeopathic Education Standards in Europe 2001) and the Finnish Luonnon Lääketiedon Keskusliito (Luontaisterapia-alaan koulutustavoitteet ja kriteerit 2005). The standards were confirmed by the EQA in 2008 and added to its official professions registry. Further information is on the EQA's website: [www.kutsekoda.ee/en/index](http://www.kutsekoda.ee/en/index)

He is proposing a scheme of prevention for residents of endemic areas. No strategy is 100% effective. A small pilot study was conducted in 7 patients comparing the effects of prophylaxis in 3 patients to the other 4 controls. The controls had 4 episodes of malaria in a 12 month period compared to only 1 in the treatment group. The suggested dosages is 5C once daily for 2 weeks, and then continue 2x per week for 6 weeks, then stop the remedy for 1 month before restarting the process. If symptoms occur, he suggests resting for 24 hours and getting a thick prep test for malaria. If negative, the symptoms may be due to the remedy, and therefore decrease the frequency of administration. If patient develops sensitivity to Nux vomica, use Eupatorium or

Aranea diadema. **Rajan Sankaran** presented via video feed on his synergy method of remedy selection. Three aspects to remedy analysis are combined to form the basis for remedy selection. These include:

Symptoms

Sensation

Genius

He presented a case of a woman with a headache. The headache is throbbing and severe, makes her feel paranoid. Get a sinking feeling and feel as though the earth is giving way below my feet. Fear to go into a dark room. Fear that someone died there and that they would come and find me. As a child, there was a lot of violence in the household. As a child, the parents were separated and the father was living with another woman. The child witnessed the father smashing a dish over the mother's head as the result of an argument. The father was living with a 'shameless' woman. She was abusive. She felt upset for the father having to be with this woman. There were other episodes of violence in her childhood. In her past, she got involved in an affair with a married man. There was some discord. She felt betrayed and could not bear this. She felt if she was really betrayed, she will kill him. Based upon the symptoms alone, you repertorize very strongly Stramonium, Hyoscyamus, and Belladonna. Because the patient was describing another person as shameless, lustful, and deceitful, these symptoms may be applied to the patient as symptoms due to "projection", because they represent inner attributes of the patient.

Based upon "Sensation" you can see, sudden, terror, and fright involved with the headache and crisis. The patient is locked into this sensation. Fright, violence and rage. He relates that this is a typical pattern seen within the plant kingdom. Each family of plants has their particular pattern. This pattern is seen in the Solinacea family (based upon the rubrics that are very common and highly related to the family of those remedies in this family). For the solinacea a number of themes are presented. Sudden, violent, spasmodic, apoplexy, terror, etc. To differentiate the remedies in the family, look to the deeper coping mechanisms which relates to the idea of miasms. How does the patient cope with the issue? If the patient has fear, they might:

Avoid the situation (Sycotic)

Stay in control (Cancer)

Feeling trapped and needing to escape (Tubercular)

These three different modes of action are related to three different miasms. In doing this we can gradually see the variance between 10 described miasms. By analyzing the various remedies in a family, we can describe each remedy and according to their related miasm. In this particular case, we see that the patient frequently reacts with "crisis" which corresponds to the Typhoid miasm. In this way we can relate the case to Hyoscyamus which is related to the Typhoid miasm. The third method is to use the Genius of this remedy which is represented by the brain and nervous system, mania, convulsions, rage, jealousy, and shamelessness.

After treatment with Hyoscyamus 1M, follow up after two years showed complete resolution of the headaches. Improvement was seen in the mental emotional state as well as the relationship with past stresses.

A second case of a man with loss of strength in the lower extremities was also presented. The patient is a high functioning executive who needs to be creative, but is not capable and feels a loss of confidence. In this case Genius, Symptoms, and Sensation all led to the same remedy Stannum. By having agreement and coherence of all three approaches, confidence in prescription becomes much higher.

Posology was discussed as well. Potency is selected according to the level of pathology and experience of the patient at the time of presentation: Pathology 6C, Fact 30C, Emotion 200C, Delusion 1M, Sensation 10M, or Energy 50M.

FRANCE

*Dr. Philippe Servais, NVP*

Plans are underway for the July 2014 69<sup>th</sup> Congress of the LMHI in Paris. Several of our associations, schools, and groups have devoted themselves to the event. In choosing our theme, we observed that what we call a cure varies according to the doctor, the patient, and the requirement of each. So I introduced the distinction between simile and simillimum to differentiate different levels of healing. With this as our central theme, this congress is essentially based on clinical practice. As our clinical experiences differ around the world, we all can learn from each other. Paris is a popular international place of scientific meeting and of cultural and tourist reception. We welcome you and hope that these five days of homeopathic exchange are a time of tolerance, pleasure, and user-friendliness!

gEo Rg IA

*Dr. Nikoloz Gujabidze, NVP*

We have 18 members of LMHI in Georgia. Unfortunately, our efforts are too weak without any support. Our financial condition does not allow us to participate in any international meetings. But we have hope for the best changes in the future.

**Michael Frass** from Austria reported on a study of patient satisfaction with homeopathy in the treatment of breast cancer as an adjunctive therapy. This was undertaken to help support the serious attacks on homeopathic physicians in Slovenia by providing some insight and assessment of patient satisfaction with homeopathic treatment added or not added to regular allopathic therapy. One hundred patients with breast cancer were included in the study. The therapeutic aim of this adjunctive homeopathic care was to help alleviate side effects, improve secondary disease, to help the physiology return to normal (i.e. to improve amenorrhea), and to help enhance the quality of life. Individualized prescribing was used in patients without restriction. Preparation of remedies was conducted according to the European Pharmacopeia. Q potencies were used in these patients in a stepwise fashion as described by Hahnemann. The group of 100 subjects was randomized to homeopathic care or control. After 23 months 18 questionnaires were completed. Patients with tumor stages 1 – 4 were included in the study. The balance between control and treatment groups were relatively even over the various stages of cancer. Statistical significant differences were found in the satisfaction, and the likelihood of patients to refer their friends for homeopathic care. Patients in the two treatment groups showed no difference in their expectation of convalescence (contrary to popular opinion of the “therapeutic effect of the homeopathic interview” and effect of expectation of results). In general, there was a statistically significant difference in the patient perception of the homeopathic treatment in terms of the confidence in the physician and the understanding of the treatment course. The homeopathic treatment group additionally had higher levels of confidence about their health in the present and for the future. In this study, the control group did not receive any homeopathic interview or placebo treatment. In a future study on non-small cell lung cancer patients, 3 groups will be used including standard therapy, standard therapy + homeopathy, standard therapy + homeopathy intake with placebo use only. This type of future study may help solve the question of the effect of the homeopathic interview as distinct from the use of the remedy. Joyce Frye presented a lecture on the Bannerji protocol for a specific patient with breast cancer. Protocols were developed in the practice in Kolkata India. They use condition based therapies rather than classical indications for individualized prescription. Currently, the clinic sees about 1000 patients per day. The breast tumor protocol includes the use of Carcinosis 30c on alternate nights with Phytolacca 200c twice daily; with the option to add Conium mac. 3c 2x per day depending upon response. The case involved palpable left breast mass 18 months after a normal mammogram. She had a Gail score equivalent of 1.6% 5 year risk for breast cancer.

She had 3 cm mass on exam with micro calcifications in the tail of the breast. MRI showed 2.1cm mass enhancement. And 2 other suspicious areas within the breast. The initial recommendation was 6 months of chemotherapy followed by mastectomy. The patient rejected the initial treatment recommendation. She found another provider who was willing to do a primary mastectomy. In the ensuing several weeks that were required to schedule the surgery, the patient underwent the Bannerji protocol. Within 1 week the patient reported decrease in mass size. On surgery, the surgeon found single 1.7 cm tumor with 5 negative nodes. Surgical pathology matched the biopsy pathology. Reported response on studying the protocol showed initial response with increased apoptosis not accelerated cell death within the tumor, confirming the probability of the biopsies remaining of similar type.

Current Bannerji database has 25000 cases of serious cancers and more serious pathologies of other types such as CRF. 1528 cases of breast cancer were reviewed. 329 diagnosed with metastatic disease on presentation (may have been more but undiagnosed). 2.5% had greater than 5 year survival on homeopathic treatment. Current data on survival at 18 months for standard therapy is 57%. For Cancer Treatments of America has 79% survival at 18 months. For the Bannerji experience, for 99 patients only 13% of patients were continued to be seen at 18 months. It is unknown what happened to the other 87% of patients.

The database is limited due to only text field entries. Outcome evaluation is not possible due to the limitations. Approximately 70% of the patients are not having any conventional therapy. Due to most statistics being related to conventional therapy, no current data exists for the natural history of the disease. Older data from 1880 by Samuel Gross looked at the natural course of disease on 97 cases. 25% develop metastatic disease within 1 year, and another 25% develop this within 3 years. An Italian study showed incidence of secondary disease occurs 2-3 years after surgery, and then another increase (but smaller) of metastasis after approximately 7-9 years. The implication and other research suggest that there is a trigger for metastatic disease secondary to the surgery. This is thought to be due to loss of active immune inhibition of metastatic “seeds” and resultant activation of these metastases.

#### gERMAnY

*Dr. Cornelia Bajic, NVP*

We are delighted that LMHI has chosen its new home in the Hahnemann House in Köthen. The ceremony, which was attended by homeopaths from all over the world, took place on 16 March 2013. The electronic LMHI Newsletter of May 2013 reported on this historic event and the public attention by the media was enormous, making the Hahnemann city of Köthen the “world capital” and “the cradle” of homeopathy. DZVhÄ and its management company initiated a public donation campaign to raise funds for homeopathic research together with the DZVhÄ's Homeopathy Foundation and the German Scientific Society for Homeopathy WissHom. We hope to collect significant amount of money with this fundraising campaign. Yet another important development is the federation of our major CAM associations to form the new “Hufelandgesellschaft,” numbering more than 20,000 CAM doctors, demonstrating a strong representation in the German health system. Although we suffer from a constant decrease in members, the DZVhÄ still unites close to 3000 homeopathic physicians, dentists, veterinarians and students.

#### HuNgARy

*Dr. Fruzsina Gabor, NVP*

The Hungarian Homeopathic Medical Association (MHOE) organizes ECH-accredited seminars on classical homeopathy for healthcare professionals twice a year. Seminars with international teachers and a teacher-training course are organized twice a year. An official homeopathic medical diploma is awarded after examination through the University of Pécs. We launched a successful new education program with practical lessons, problem-based learning, personal consultation, and trituration proving. In 2012, a group of veterinary doctors obtained the diploma of IAVH. MHOE organized Homeopathy Day with homeopathic companies and CEDH. A multi-media campaign against homeopathy was organized by some pharmaceutical companies during flu season. The Hungarian Academy of Science changed its stance, stating that homeopathy is not an evidence-based therapy. The CEDH and the MHOE organized media training conducted by media experts using the LMHI PR guidelines.

**Reinhard Flick** from Austria presented information on a proving conducted on *Thymus vulgaris*. Dr. Flick has conducted 15 provings over the past 29 years in Austria (primarily with students). The current proving was conducted with 6 women and 2 men who received 30c, 3x per day to a maximum of 12 doses. No control group has been used. All provers had symptoms from 3 to 10 doses required for each. Dreams were very strong, and about 100 total symptoms were produced in total. Very little information exists on this remedy prior to this proving. Plant remedies from this family are known to produce symptoms of stimulation, excitability, and pleasure. The author reports that typically 1/3 of provers have no reaction at all, but with this proving all provers had clear response to the remedy. One prover had the same symptoms recurring within 10-15 minutes upon each dose of the remedy including headaches radiating to the jaw, metallic taste in the mouth, and feeling as though the muscles in the face relaxed completely. He described a deep feeling of peace (opposite to his nature). At 3AM he woke with pains in the area of the kidneys each night for four nights. Another prover became very sharp and critical, very hard-hearted. This nature became very strong and lasted for several weeks. Another prover developed a feeling of "healing". Her stammering improved, and her lack of self-confidence improved completely for a short time. Her premenstrual pains improved. Three female provers became very chilly, and one male prover became more warm. Another prover developed some vertigo, aversion to being spoken to (also with one other prover), withdrew into herself in a satisfying way, and developed some blurring of vision. Another prover had complaints that alternated sides of the body and weakness of the upper arms. Palpitations occurred several times in one prover. Overall there were: stitching headaches, vertigo or swaying, twitching in the body (stammering), pains in the kidneys, weakness or paralysis of the upper arms, palpitations, and chilliness. Some of the symptoms reported by other authors were not verified in this proving (specifically cough and respiratory symptoms as well as abdominal and digestive symptoms). Healed symptoms included aversion for warm bathing, strong feeling responsibility for others (too much sense of duty), tension in the face, stammering, and lack of confidence.

Michel van Wassenhoven from Belgium presented a research study conducted on patient satisfaction with homeopathy for 398 patients in 7 countries (Belgium, Brazil, France, Germany, Italy, Portugal, Spain). The study consisted of 2 questionnaires. New patients at first visit (completed by the parents of children) and a second survey at 2 months follow-up. New QoL questionnaires for children were used. Questionnaires were distributed to 773 patients, 398 completed the initial questionnaire and 205 completed the 2 month questionnaire. Parent was typically female (93.4%). University level of education in 37%. Main complaints were respiratory in 33% and skin in 13.8% and allergies in 10.5%. The problems tended to be chronic with 90% existing for greater than 1 month and 15% with the problem for more than 3 years. Level of suffering on 1-10 scale was mean of 4.8. QoL index was 83.7 on the first consultation suggesting a mild level of disorder. 78% were using homeopathy or any non-conventional therapy for the first time. The vast majority were referred by friends or relatives (69%). Only 1/3 of homeopaths informed patients of the possibility of aggravation of symptoms. Average patient visit was 54 minutes. 11% prescribed conventional medicines as well as homeopathy. Average fee ranged from 40 – 105 Euros. Highest in Spain and Italy and lowest in Brazil, France and Belgium. 50% of patients would have preferred seeing the homeopathic doctor earlier (suggestive of a shortage of providers). Satisfaction of the homeopathic visit was consistently higher than the standard pediatric care previously received. 62% of patients stopped all conventional therapy (by the patient's parents). 53% stopped due to dissatisfaction with prior outcomes, and 30% due to concerns for side effects. Awareness of combined treatment with conventional therapy was told to the homeopathic doctor 54% of the time, but less than 1% of the time to the family physician (conventional doctor). 4.2% of parents reported side effects due to treatment (other than aggravation), and 10.9% report a significant aggravation due to remedy, and another 19% reported a slight aggravation due to the remedy. The QoL questionnaires showed only minor improvement. Statistical differences were seen in perceived change in the presenting complaint after 2 months of symptoms, especially for respiratory problems and psychological disorders. Skin affections did not show a significant change within 2 months. Final global satisfaction of the parents is about 75% or higher except for skin disorders (68%). Patient satisfaction is related to perceived competence of the provider, time taken to explain the case and treatment, and perceived outcome of the patient. 72% of respondents would definitely recommend homeopathic care to others. Additional results from an adult population are pending publication.

## INDIA

*Dr. S.P.S. Bakshi, NVP*

The year 2012-13 was very fruitful in terms of widening the horizons of homeopathy within the country. The government initiated various steps at the national and international level, including the strengthening of minimum education standards of homeopathic institutes through the Central Council of Homeopathy. Homeopathic students are better informed about medical knowledge and research. We have 3000 new homeopathic clinics under the government's National Rural Health Mission (NRHM) plan, which facilitates public access to homeopathic services in remote areas. An official document on homeopathy has been published by the government entitled Homoeopathy – Science of Gentle Healing, available on the CCRH website ([www.ccrhindia.org](http://www.ccrhindia.org)). It provides an overview of the successful institutionalization of homeopathy in the country, a potential model for other countries and a template for collaboration in research and education.

## ITALY

*Dr. Francesco V. Marino, NVP*

During the X FIAMO National Conference (Chianciano, March 2013) 28 homeopathic schools and associations signed a Protocol for determining the epistemological definition and primary training standards of professional homeopathy in accordance with the LMHI-ECH Medical Homeopathic Education Standards. Concurrently, the FISM (Italian Federation of Scientific Medical Societies) launched a similar document. As the Associations involved did not reach an agreement on e-learning, FIAMO did not sign it. In 2013, FIAMO organized the annual International Homeopathy Day in many towns and promoted the successful V International Symposium of Italo-Brazilian Homeopathy. In December, Italian Medicines Agency licensed a document (effective 2015) identifying current homeopathic medicines and registering new ones. FIAMO is appealing the regulation as the costs for laboratories is high and many remedies may be lost from the Italian market.

**Sudir Batra** from India presented a lecture on infectious disease treatment with homeopathy over the past 10 years at the AYUSH institute in India. Because TB causes disease in only about 10% of the people who are exposed to the bacteria, one must consider that immune system imbalance or weakness is a strong factor in the disease development in bacteria with relatively lower virulence.

Case series reports were given on TB. Out of 25 patients with non-lung TB, 24 showed improvement or resolution of symptoms. For Multi Drug Resistant TB, 120 patients were analyzed. 21 patients dropped out. Single remedies were used. 100 patients that continued in the study were divided into treatment and control groups. The treatment group showed a statistically significant improvement in pulmonary fibrosis and quality of life, but no other measured parameters (including conversion to culture negative) were significantly different between the groups. The study was published in *Homeopathy* journal. The author has concluded that a combination of allopathic and homeopathic treatment may represent the best approach to treatment for TB patients. Gyandas Wadhvani from India presented a lecture on skin itching within homeopathy. He discussed the origin of the word Psora. Tsora was the Hebrew word which meant to smite with a malignant disease. Tsorat was the term for those with leprosy of infectious nature. When translated to the Greek and Latin language to Psora for any skin eruptions including scaly eruptions, leprosy, etc. In the English language it eventually became the word "sores". Scabies was first described in 1700's by Italian physician Bonomo. This was first mention of the parasitic nature of the disorder. William Cullen classified Psora as a local disease primarily affecting the hands. Johann Hermann Freidrich von Autenrieth was the first in 1808 to publish on the problems that were associated with the suppression of Psora or itch, and that this should be avoided by not treating with topical sulfur. Hufeland wrote that not all Psora was due to scabies but may represent a deeper issue within the patient. If treated locally, the itch eventually reappears, or in a worse situation may become an internal problem and he went on to list a variety of conditions that may occur. Scabious Diathesis was first described in writings of Hippocrates which could represent either inherited or acquired problem. This diathetic basis of disease was propelled by other physicians through time. It becomes important because it promotes the notion that suppression of the Psora through topical applications may drive the disorder inward. Hahnemann, in his earlier years, suggested the use of topical applications to treat the scabies parasite. He described it as a "living eruption" due to the scabies mite. His early writings state that only external antiscabious remedies are required, and in certain weak individuals, china is to be used to strengthen them. Later in his career, he abandoned this notion and totally opposed the suppressive treatment of any skin disorder.

So we see that the concept of the Psoric diathesis was not actually Hahnemann's original idea. His original approach was to suppress the disease. But eventually adopted the opinion promoted by others including the allopath Hufeland who suggested that suppression of this disorder was problematic as it promoted deeper disorders. Psora was a term in wide use at the time that was originally used to refer to leprosy, evolved to only describe scabies, but is used by Hahnemann to describe all types of skin ailments. Hahnemann received considerable criticism that his theory on Psora and chronic diseases was misguided to think that scabies was the sole cause of deeper diseases. This was primarily due to the main use of the terminology of Psora in that time period. Now we should understand that the use of Psora as a term should not be confused with the terms of itch or scabies alone. **Ashley Ross** from South Africa presented a talk on the ethical consideration of provings trials. He looked at the current guidance that has been compared from the LMHI, ECH, and the HPCUS all of which have been updated in the past 2-3 years. He specifically touched on three constructs for determining the ethical value for the studies. First is the benefit risk ratio. Because provings represent the primary and only source of data for new remedies to the *Materia Medica*, they represent a significant societal value due to their primary importance to the paradigm of homeopathy. In evaluating the risk, provings place healthy people into an artificially induced "disease state". These risks are reduced by choosing healthy adult volunteers, administering doses that are in potentized form beyond the first safe dose level according to toxicology (recommended 12 c or more potentized), informed consent and ethical approval are required, and clinical evaluation is conducted throughout the trial. Additionally, guidelines recommend that the medication be stopped at the first onset of symptoms.

The second question is the use of healthy human participants. In allopathic trials, the first in human use of drugs is typically compared to animal data and the effect is typically anticipated based upon prior data. In provings, the expected results are relatively unknown. Because there is no direct toxic, chemical, or pharmacological effect, and because experience has demonstrated that the effects tend to be self-limiting with respect to severity and duration of effects, the use of healthy human volunteers is relatively safe and ethical. Informed consent in provings is difficult because there are no clearly known benefits from a new remedy in proving, and we do not understand the true symptoms of a new remedy. This situation is more difficult ethically. In addition, the patient is typically blinded to the medicine and discussion of the potential effects of the remedy is discouraged to help reduce reporting bias of the subject. However, close active monitoring occurs. Significant adverse events can be managed relatively easily through antidoting or treatment if required. Historical evidence shows these types of events are extremely rare in provings.

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## JAPAN

*Dr. Ronko Itamura, NVP*

In September 2012, the JPSH was honored to accomplish the successful presentation of the 67<sup>th</sup> Congress of the LMHI in Nara. This Congress became one step in the history of homeopathy, not only in Japan, but in the world. However the situation of homeopathy in Japan is still very severe, as legal restrictions about homeopathy do not exist. Moreover, the Japanese Ministry of Welfare and Medicine does not recognize homeopathic medicines as medicines, but as health food. There are many problems that must be overcome in time and, unlike in some countries, it begins from the right understanding of homeopathy. As the only organization consisting solely of medically certified members, the JPSH would like to concentrate further efforts on the spread and development of true homeopathy in Japan.

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## KAZAKHSTAN

*Dr. Yelena Zyukina, NC*

In 2013, the Kazakh Homeopathic Association (KHA) was active in several medical science/practical international conferences, wherein homeopathy was on par with other medical disciplines. A master class on treating children and pulmonary and gynecological diseases was attended by Federal Medico-Biological Agency of Russia (FMBA). Twelve homeopaths in Kazakhstan were trained in homeopathy in the Almaty-based KHA from 06 May to 15 June 2013 and improved their skills with the FMBA of Russia DPO Training Institute, Russian Homeopathic Association. Six new members joined the Kazakh Association. In October 2013 there will be courses on homeopathy in conjunction with the Institute of Advanced Studies at the FMBA of Russia. In November, we plan to take part in the Conference on the 50 years of the Sanatorium Sary-Agash and conduct a master class on homeopathy.

The third issue is whether placebo is used and is the use of placebo ethical within the trial. Because we are not looking for curative treatment in a proving, then the ethical risk of using placebo to a large degree is not a significant ethical issue. However, one might argue that the verum is so dilute that some will argue that both the verum and control group are actually receiving placebo. This issue remains problematic in that the mechanism of homeopathic therapeutics remains obscure. The use of placebo is recommended only for the determination of efficacy (Declaration of Helsinki).

**Frederic Schroyens** presented a convincing talk on the needs for the preservation and utilization of the vast clinical experience of homeopathic physicians around the world. First he discussed some of the origins of the classification of symptoms. Boeninghausen's suggestion for degrees of symptoms in a repertory:

4<sup>th</sup> degree – symptom has cured the symptom almost every time  
3<sup>rd</sup> degree – symptom has cured the symptom without any doubt (one clear case)

2<sup>nd</sup> degree – symptom has occurred without doubt in the proving repeatedly (no clinical evidence needed)

1<sup>st</sup> degree – symptom has cured the symptoms without doubt but not in a strong way (one case)

0 degree – symptom has cured the symptom with some doubt (first degree within brackets)

Hering's probability of a symptom:

Possible – in a proving

Probable – often appears in a proving

Confirmed – appears in other provings as well

Corroborated – symptom physiological and pathological

Verified – symptom is cured

Characteristic – symptom cured repeatedly Hering is inviting us to clinically verify symptoms in our materia medica and in our repertory. We all have clinical records. We store them during our practice. We keep them when we retire. And then they are lost forever.

The presenter suggests that to improve our accessibility to cases of so many practitioners we should:

Type our records:

Makes it readable, exchangeable, permanent

We can organize the information and utilize software

We can collaborate

Current projects to capture records include:

#### **WinChip / CliFiCol**

This system was developed by C. Rezzani (Italy) in 1987. It incorporates field information and pick list information. This helps standardize the information (remedies, diagnosis, etc.) for searchability and research in the future. CliFiCol stands for Clinical File Collection. This is an online database of clinical cases. The cases can be uploaded from WinChip and one is able to search the cases of colleagues. This effort has been slow, but it is being renewed at this time. Information is available and access is free through [www.clificol.com](http://www.clificol.com).

#### **Individual database:**

Michel Van Wassenhoven collected his database for over 16 years. 21,327 consultations over 16 years. Each repertorization, follow up evaluation for outcome, and a mark within the repertorization analysis that led to the correct remedy. He assigned a -1 to +5 scale according to the "effectiveness" of the symptom use for the outcome of a remedy prescription.

#### **Likelihood Ratio project:**

Lex Rutten from Holland has created a project from 2004-2007. Looked for the presence of 6 different symptoms within 10 practices. They found over 4000 prescriptions for these symptoms. They also looked at outcomes of the prescriptions. They could then compare the symptom prevalence in the population, the prevalence of the symptom within the prescribed remedy population and therefore could determine the likelihood ratio of the symptom within that remedy for patients who responded to the remedy.

#### **Vithoukas Compass**

George Vithoukas from Greece has developed an Online data capture system that includes repertory, case history, and outcome estimate entries through text and smart tags. Currently, the system has captured 125,000 cases, 17000 follow-ups and the Likelihood Ratio assessment of 10 symptoms of three polycrest remedies. This system is global and allows for sharing of clinical information.

The next question is: what are the best future steps for improvement of our clinical information.

The presenter suggests:

We must type our information – to add to the database. Furthermore we must use structured database with smart tags that are applied to points of data to make this searchable (through projects like WinChip or CliFiCol). One new option is to utilize Vithoukas Compass which is totally online, which will automatically capture the data and allow sharing of clinical information.

We must use Software based solutions to organize the information.

The solutions must be embedded into daily practice.

We must understand what minimal information must be collected to make it more easily usable.

The data gathering must be usable to help the individual prescriber improve their clinical practice.

The information gathered must be transferrable, exchangeable, and used for research.

This process will improve our Materia Medica and our Repertory through the research and understanding of likelihood ratios related to various symptoms used to find the correct remedy for prescription.

Quality improvement must be done through transparency which allows cross verification from any observer within or without the system. The software system allows for easy transparency and examination of our tools of Materia Medica, Repertory, and Cases to ensure more rapid transformation and improvement. **Farokh Master** from India presented a talk on homeopathic treatment of pain related to cancer. Karnofsky performance status scale (0-100), SF-36 (0-100), EORTC QLQ-30 for QoL for cancer patients, diagnosis, type of pain, pain score (0-10 analogue scale), specific type of pain syndrome, and homeopathic medication used were recorded for each patient. Follow-up was done on an as needed basis. Scales were completed with the patient by the Social Worker at the hospital. A case example of metastatic cancer of the prostate was presented. The only allopathic treatment conducted was bilateral orchiectomy. When both local symptoms and chronic symptoms were considered, Lycopodium was prescribed in 30c potency three times daily. In five months, metastatic disease was no longer present. PET and Bone scan show no metastasis at about 18 months. Metastatic disease returns at 2 years. Aur-m-n is prescribed which helps within several days and is therefore continued.

Follow-up continues. The observational work has been evaluated and presented on the comparison of homeopathic treatment and morphine therapy for pain. Similar research will be presented this year at the World Congress of Cancer Research in South America. **Andre' Saine** presented a talk on Materia Medica Pura project. Despite Materia Medica and Repertory being central to our practice, we have not formally updated our information since 1891. Seventy five people from 7 different countries have been working in groups to review and update the information on Hahnemann's selected remedies, using Hering's method for evaluation of knowledge related to remedies. Twelve acute and twelve chronic remedies were selected for evaluation first. The group looked to create monographs for each remedy including:

Introduction of the remedy speaking to the nature of the remedy, the biology or scientific information of the remedy, and the background information of the remedy.  
Genius of the remedy. To understand the primary and central aspects for which the remedy will be used. It is the essential sensations and understanding of the most important parts of the remedy use.  
Listing of the most characteristic symptoms with references and the gradation of strength of association in a five level listing in both the Materia Medica additions and the Repertory additions. (Large amounts of symptoms are recommended for many remedies: for Mancinella an increase of 120% and for Hepar Sulph an increase of 50% for a total of 60,000 new additions – these additions have been given to both MacRepertory and Radar organizations).

Introduction of the remedy speaking to the nature of the remedy, the biology or scientific information of the remedy, and the background information of the remedy.

Genius of the remedy. To understand the primary and central aspects for which the remedy will be used. It is the essential sensations and understanding of the most important parts of the remedy use.

Listing of the most characteristic symptoms with references and the gradation of strength of association in a five level listing in both the Materia Medica additions and the Repertory additions. (Large amounts of symptoms are recommended for many remedies: for Mancinella an increase of 120% and for Hepar Sulph an increase of 50% for a total of 60,000 new additions – these additions have been given to both MacRepertory and Radar organizations).

Ultimately it is not possible to be complete in this work because there are too many sources of information. Focus therefore is to be practical. Source material is examined based upon outcome of the case to ensure that the information considered has value. The Materia Medica Pura that has been produced will remain in electronic format to allow updating.

# Executive Committee Reports 2013 – 2014



## President

*Dr. Renzo Galassi, Italy*

During the last year the main purpose of my work was to improve the LMHI documents and procedures for a better management of the association and easier work for the people engaged daily with the Liga.

Some events disturbed the achievement of these goals. First of all I want to remind you of the financial problems. Some countries reduced their contribution to the Liga losing the full membership condition, that means advantages and voting rights, but we had to face a difficult reduction of our budget.

The first action was to analyse the costs and try to cut the most important ones. For this reason we decided to close our office in Berlin and, thanks to the collaboration of the Turkish Homeopathic Association of Izmir, we have opened a common office with a common secretary, Ms. Evin Turkey. The website was moved, thanks to the collaboration of Dr. Aditya and Alok Pareek to India. Our new website changed the domain. Now it is no longer LMHI.net but LMHI.org. In November I was in Barcelona for the meeting of the ECH, invited as a speaker during the conference about the Homeopathic Remedies situation in Europe.

During the winter months, during my contacts with the representatives of all countries, I realized the difficulties to pay correctly the fees of some countries due to the low income of our colleagues. So that, in collaboration with Dr. Yves Faingnaert, our treasurer, we have prepared a new fee system to be voted on.

At the end of February I flew to Istanbul to meet our new secretary Ms Evin Turkey for the first time and we spent time together in order to clarify every doubt about our common work.

In March we received the mail of resignation of our secretary for PR Dr. Sara Eames. Due to this situation we had to organize a new election for the next two years of term for a new secretary for PR.

In April I flew to Spain for Hahnemann Day, that our Spanish colleagues organized in different places, Seville, Barcelona, Madrid and finally in Tenerife island. It was a very fruitful event and you can see the report and photos in the last issue of the Liga newsletter.

As regards to the newsletter, together with Richard Hiltner I worked hard to give a different aspect to our magazine and an increased number of issues every year, no longer 2 but possibly 4-5.

According to the goals of our constitution, I entered in contact with colleagues working on projects of solidarity and Co-operation and the result was the proposal to create a new Working group on this topic.

As regards to Europe, we have the application of ECH as Associate member of the Liga, we will vote for this and a table LMHI-ECH will be opened in order to see what kind of collaboration we can have, trying to share experiences and distribute work. A first example of fruitful collaboration was in the field of Provings. Our coordinator Prof Ashley Ross and the coordinator of ECH Dr. Jean Pierre Janseen could prepare harmonized Guidelines for provings.

## LATVIA

*Dr. Inese Joksta, NVP*

Homeopathy enjoys a special status in Latvia. The Latvian Homeopathic Association has been recognized by the Latvian Medical Association as a member. Currently, we have 140 homeopathic physicians who hold valid certificates and are actively practicing homeopathy. Homeopathic doctors are private practitioners in Latvia. Only physicians are allowed to practice homeopathy. We are in the process of developing a residency program in homeopathy. Its accreditation is scheduled to take place in summer 2013 and the training is to be started in the autumn. The residency program is being developed in cooperation with the Latvian University. Recertification of homeopathic physicians takes place every five years. The Latvian Homeopathic Association also organizes international training programs and is responsible for the ongoing training, certification, and recertification of homeopathic doctors.

## LIECHTENSTEIN

*Dr. Matthias PuschkarSKI, NC*

Liechtenstein, which is a very small country with a population of 36,000, has nine homeopaths who are practicing classical homeopathy, i.e. single-remedy, fairly extensive anamnesis, etc. Three of these nine practitioners are medical doctors with a University degree in medicine. The costs of the treatment are partially reimbursed by additional health insurance, which most patients have. For training or further education in homeopathy, one has to attend seminars, classes or lectures in one of the neighboring countries, such as Switzerland, Austria or Germany.

## MEXICO

*Dr. Antonio P. Sánchez Caballero, NVP*

There have been seminars and forums, the principal aim of which is to unify the teaching in all the homeopathic schools in the country. Research, study, teaching, and reunions are the main objectives and activities in all schools and associations.

## Immediate Past President

José Matuk Kanan

Liga need funds. Besides the Liga fees, that are enough to survive, we need donations. The Liga has a Non Profit status, according to the German Law and we are ready and able to receive donations for the projects that are on the table.....

The last information is that Dr. YVES Faingnaert, our Treasurer, decided in June to step down before the end of his term for reasons of age.

We talked inside the officers group and waiting for a new election we should like to find the best solution according to our logistic situation.

I want to give my special thanks to all the colleagues around the world who collaborated with us for the good management of our beloved LMHI.



### Working projects of the Executive Committee 2014-2015

- LMHI office in Izmir, Turkey. Membership administration, and the preparation of the electronic Newsletter, as well as press work
- LMHI Website in India , Agra. The management of the LMHI Website, innovations and increasing of the functions. Interactivity with the LMHI members.
- LMHI new Accreditation rules of homeopathic medical schools and teaching centres.
- New LMHI diplomas.
- LMHI Membership advantages Brochure
- Search for donations, strategies and activities to promote LMHI solidarity projects.
- Congress preparations for the 70<sup>th</sup> LMHI Congress in Rio de Janeiro.
- The -electronic LMHI Newsletter - increasing of the issues per year. New content: international news, associative life, clinical and research's topics.
- Further updating of the Document "Topics against Homeopathy", under the supervision of the secretary for PR.
- The International Homeopathy Day. April 2015
- Common working group LMHI - ECH about future collaboration inside Europe.

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### Moldova

*Dr. Tatiana Bolbocean, NC*

Homeopathy has been practiced in Moldova since World War II, it was legalized in 1998. The 37-member Association of Homeopathy in Republic of Moldova (AHRM), founded in 1994, became a LMHI member organization in 2008. In Moldova, medical doctors can receive certification in homeopathy. Since 1999, it has been taught at the University of Medicine and Pharmacy "Nicolae Testemitanu" Chisinau. In 2013, there were a number of courses in homeopathy, as follows:

- 1 month – preserving health (156 hours)
- 1 month – pediatrics (156 hours)
- 1 month – general improving (156 hours)
- 2 months – certification level courses (468 hours)

We organize a monthly seminar of homeopathy, where 30-40 homeopaths meet and share information about cases, remedies, and news of homeopathy, nationally and internationally. Moldavian homeopaths also attended international conferences.

### NEPAL

*Dr. Ambika Prasad Gyawali, NC*

Practiced for over 60 years, homeopathy is a recognized system in the Nepalese National Health Program. There is one government six-bed homeopathic hospital. The Health Ministry of Nepal is considering opening four regional homeopathic hospitals and forming a comprehensive council to regulate alternative health systems. Approximately 100 homeopathic doctors are practicing homeopathy. The Nepal Homeopathic Medical College in the eastern part of the country will close this year. Bhaktapur Homeopathic Medical College, offering a Diploma Level Course in Homeopathy, is in its sixth year, but it struggles without governmental support. This college has planned to offer a 5½-year BHMS degree course. Nepalese Homeopaths had participated in Dr. Rajan Sankaran's seminar in India in January 2013. Dr. Resie Moonen of Netherlands conducted a seminar at Bhaktapur Homeopathic Medical College in April 2013.



## Prime Vice President

*Dr. Alok Pareek*



The Past year was a very good year for the LMHI. It was good because we got the opportunity to improve on many of our procedures, to move towards greater consensus, to work at rectifying our problems and good because it required all the Executive Officers to give their best efforts. We no, that it is in trying times, that the best often comes out.

As the Prime Vice-President of the LMHI, the points I could work constructively towards were:

In order to improve the presence of LMHI in South East Asia, I contacted several countries like Indonesia, Singapore, Malaysia etc. We have received an application from Malaysia and are studying the status of homoeopathy in the country. I am also in touch with the colleagues in Singapore.

In order to make the functioning of the Working Groups more constructive, I have suggested a systematic Agenda presentation for each group before the annual meetings. This being the first instance, I took the initiative myself and it was followed by support from the various secretaries. I have also suggested proper follow-up of each meeting and writing of the minutes. We shall also be presenting certificates to our Working Group Members from this year onwards.

The Working Groups were active around the year and several discussions yielded good results. Here, I would especially like to mention the Education Working group for the work on the LMHI Diploma; The Pharmacy Working group for the Remedy definition; The PR Working group for the Document "Advantages of being an LMHI Member"; The document "Advantages of being an LMHI Member was a perfect example of the great potential the Working groups hold and how effectively we can use the online platform to yield fast and effective results.

The LMHI Website: It was difficult to start from scratch, the LMHI website in a new place, INDIA. However, we decided to go for it and make the most out of this situation. The new LMHI website took 3 months of designing and development. It was done in a way, that all future changes, feature additions etc are possible on this very platform. It was done in a way that the entire LMHI office can be administered online from any part of the world through the website. The list of the new features available to us through the website is extensive and I would leave it to the relevant point in the agenda for today's meeting..

In India, I called a meeting in February inviting all the Homoeopathic Associations to help the LMHI gain more Institutional members from India. The meeting was very well received and saw representations from most of the big associations in India.

## General Secretary

*Dr. Jelka Milić*



For the financial year 2012, we received a total gross income of € 81.176,68, with total expenses of € 134.198,20. We realized this income thanks to the support from 6.657 institutional members of 33 countries, of 13 individual members, and 3 associate members. Eighty percent of the Europe. For the past financial year

the total result became negative with a loss of € 53.021,52. What is the present situation of our reserves? Our total capital May 2013 amounts to € 125.068,92. The credibility of our organization depends on a sound financial reserve; therefore, the amount of our capital should be approximately the same as yearly expenses.

When analyzing our total equity and liabilities, one sees a constant decrease, with a decline of 24 % last year. Rising expenses are to be strictly controlled, while the Treasurer should also endeavor to obtain a good income. Adjusting our membership fees has never been considered. It is very clear: we have to adapt our subscription rates on taking drastic measures. I do hope we can start with a new year with amplified resources and the objective to 'make ends meet' and I hope to be back to you next year with positive results.

I wish to take this opportunity to thank all of you again for the confidence shown in me and in my work for our association.

Monthly oversight of LMHI accounts and current payments to the Executive Officers. During the last year I was participating in the daily e-mail communication with the EC, Secretary Officers and LMHI office, actively partaking in the team work of the daily management and activities of LMHI. The process of understanding and analysing various challenging situations in the management of LMHI as well as trying to bring solutions was very much needed, but time and energy consuming process. So, I would like to thank to all LMHI EC officers, Secretaries and Special Committees, especially to our alert Mr. President for their steady, dedicated and relentless every day work for LMHI, work which was much unseen, but continuously happening, as someone recently beautifully wrote, "in the silent everyday hours of his/her own room".

During this period of time, I was also maintaining communication with some of the NVPs and NCs, some of it were successful, the other not so, mostly due to the lack of the response from some NVPs and NCs.

My other tasks since June 2013 were participation in the creation of LMHI Membership advantages brochure and in the revision of the new edition of the LMHI Procedures 2014. Then, I prepared the Agenda and Invitation for the EC and IC 2014 Meeting and I was also participating in the organisation of these annual meetings. I was collecting and distributing various documents to EC, Secretaries and Special Committee Members as well as to NVPs and NCs. I was helping to update the LMHI address book.

We need LMHI, but LMHI needs us more!

### THE NETHERLANDS

*Dr. Hetty Buitelaar, NVP*

We have a new name and address—AVIG! The title homeopathic doctor and the requirements to be registered as such will be safeguarded by a committee of quality. VHAN, the former medical association for homeopathy, has been changed to an organization of funds for the promotion of homeopathic training and research. We now have to pay 21% VAT on CAM healthcare in the Netherlands. This also concerns CAM healthcare offered by medical doctors. We initiated a lawsuit against this situation. We continue to have concerns about the availability of homeopathic remedies here. The re-registration for the Netherlands physicians in the register of the Law on Medical Profession (BIG) means every medical doctor has to reregister by 2017 and homeopathic medical work is not included. We might lose our medical registration.

### PAKISTAN

*Dr. Khalid Masood Qureshi, NVP*

LMHI is being coordinated and introduced in Pakistan through the Society of Homoeopaths (SH), an organization set up by Dr. Muhammad Masood Qureshi in 1935.

Since its formation, the Society has continuously held seminars and workshops to bring homeopaths on one platform.

Various homeopaths from Pakistan and India have been invited to deliver lectures on various topics on homeopathy in these seminars. In addition, the Society has published many articles and presented research in the seminars in the monthly Homoeopathic Magazine. Moreover, it has also published various books on homeopathy that have been highly appreciated by the homoeopathic community all over Pakistan.

At present, the Society has more than 300 members; hence, it can act as a sister concern of LMHI for promoting the objectives of LMHI in Pakistan.

## Treasurer

*Dr. Altunay Agaoglu*



As you know, the financial means of the LMHI comes from the annual membership fees of the institutional members, the individual members and the associates, we also have some interests. Following up our revenues, this gives for the financial year 2013 a total gross income of **€ 84.203**. The expenses of the executive officers; of our general secretaries; then the different current costs of our secretariat etc is in total **€86.553**.

Bearing in mind the foregoing, the net result for the past financial year is negative for the year 2013, and amounting to **€ – 2.350**. Why this negative result ? It's a consequence of the rising prices. Now let us have a look at our present **FINANCIAL STATEMENTS for the current year 2014**, ended on the **1<sup>st</sup> of July**. Our total available capital at this moment amounts to **€ 110.833**.

At this moment, our provisional **total gross income** until July 2014 amounts to **€35.251**, and our expenses until July 2014 is in total of **€ 26.433**. The credibility of our organization depends on a sound financial reserve, meaning that the amount of our capital needs be approximately the same as our yearly expenses. We reach that objective. Our capital is distributed over current and stock accounts, and business bonds.

We realized this income thanks to the support from our institutional members, individual members and associate members.

Dr. Yves Faingnaert  
Past Treasurer

## Secretary for Archives

*Dr. Martin Dinges, Germany*



Concerning the activities of the Sec-

### Poland

*Dr. Tomasz Kokoszczynski, NVP*

Although not officially recognized, homeopathy in Poland is practiced legally by medical doctors. The Board of Health officially states that the legal status of homeopathy is regulated by the EU directives, which are fully recognized in Poland. Homeopathic remedies are recognized in accordance with EU pharmaceutical regulation and are available with a medical doctor prescription for higher potencies. In April 2008, the Polish Supreme Medical Council adopted a statement dismissing homeopathy as a medical profession, stating that they are against the education of doctors in homeopathy. Supported by several medical professor experts without credentials in homeopathic therapy, the document had no supporting list of publications. Polish State Consumers Agency responded that the Supreme Medical Chamber is prohibited from pursuing doctors for treating with homeopathic remedies and imposed a financial penalty.

### Portugal

*Dr. Francisco A.F. Franco Patricio, NVP*

We are in process of legally forming a new homeopathic association comprised only of medical doctors to facilitate the inclusion of Homeopathy in the Medicine Faculty Teaching and obtain Medical Portuguese Order support. In March 2012, we organized, with the help of David Moreira in Portuguese Medical Order, the first Meeting of Scientific Investigation in Homeopathy, having invited our Brazilian colleague Marcus Zulian Teixeira, Professor of São Paulo Medicine Faculty University, with around 300 international medical publications and four published books about homeopathy. Recently, I had an appointment with the President of Medical Order, concerning the creation a Working Group in homeopathy therein, for achieving the same status as acupuncture with the creation of a Medical Competence in Homeopathy, to which he agreed. It would be the first step of changing the conventional Medical Portuguese paradigms - the introduction of Homeopathy in the University - Medicine Faculty!

## Secretary for Dentistry

*Gloria Andre Feighelstein, Brazil*



In Brazil we have a rich experience as far as the legality, as education, as the clinical experiences, as we have for many years in our presentativeness at the university graduation, with many postgraduate courses and we are already entitled by government agencies, to exercise homeopathy in dentistry, as well as in other related areas.

Now, in October, possibly we will gain the Dental Homeopathy skill level – the title of specialty, which demands a great job of raising awareness in our society and in our government organs, which already are the first to claim the title of expert for dentists Brazilian homeopaths, those could work in Health System, the Brazilian Public Health.

The LMHI secretariat exercises very important role in this achievement. We have the support of the AMHA, the ABFH and even the AMvHB (Who said that animals do not have teeth?). So possibly, this interrelationship between the homeopathic areas could be the reason of getting many conquests in homeopathy in Brazil.

This year, though, we will have: This secretary is, with the support of its federated ABCDH and all other federal homeopathic federal specific associations: AMHA, ABFH, AMvHB, working for the next congress of the League - 70th Congress LMHI - Brazil - Rio de Janeiro, between 02 and 05th September 2015.

This board of dentistry, at this Congress has taken a great responsibility, as General Secretary of the Congress in Brazil, and rest assured, we are all aware of doing a congress for EVERYONE within our power to realize it.

We chose a date with low season when the Rio de Janeiro will have sunny days and usually no rain with very fair prices (noting deadlines for delegations and individual memberships).

Our purpose will be to we wish a congress where a larger amount of homeopaths and students of our four areas and, even more, the growth of Agronomy and their need to know homeopathy in search of organic products, including all homeopathic societies, in a place without luxury but dignified, simple, comprehensive and the opportunity for ALL, despite all the difficulties, and giving the members of Congress the opportunity to meet the WONDERFUL CITY - RIO DE JANEIRO. This is our next challenge, despite all the difficulties, we wonder to do in RIO DE JANEIRO, a congress that will show the transformation of a new LMHI.

Together with the NVP for Brazil on behalf of all Brazilian homeopathic entities in front of the new philosophy of the LMHI, placed with pride and determination by the LMHI EC, we are working on: A Homeopathy for ALL, a congregation of matters of interest to all the Homeopathic World. So hoping, we are ready to do it! LOVE HOMEOPATHY WITHOUT CHARGES, BUT IN GIVING, AS TRUE HOMEOPATHS with the LUST OF THE HUMILITY AND SIMPLICITY OF DEVOTION TO HAHNEMANN!

I am here simply to perform in front of the trust of you all to do the best I can and try to do what I do not know if I can, but I will try to do it. This is my report with all humility and respect for the trust they place me.

## Secretary for the Education

*Dr. Gustavo Cataldi, Argentina*



This last year, we worked hard with the Education Working Group reorganizing the LMHI documents related to Education: LMHI Accreditation Regulations and LMHI Diploma Regulations. Both documents were approved during our annual meeting in Paris. Within the next few months we will start working on the accreditation for teachers. During that meeting we talked about the new layouts for

the Accreditation Certificate and the Diploma, and we extensively discussed about the amount of hours of online education that could be accepted.

As the Homeopathic Medical Education Standards is a document shared by the LMHI and the ECH, we continued our discussion by e-mail after Paris, and contacted Dr. Leopold Drexler, Coordinator of the ECH Education Subcommittee. After some considerations, we decided to accept a maximum of 40% of e-learning hours in countries where socio-economic circumstances prevent students to assist classes. The LMHI always recommends face-to-face learning, so institutions that require e-learning methodologies will have to ask for the LMHI approval.

During 2014 the LMHI accredited three associations: Klasik Homoepati Demegi (Turkey), Istituto di Ricerca Medica Scientifica Omeopatica (Italy) and Fundación Médica Homeopática Vitalis (Argentina). We are currently processing the applications of other institutions which want to be recognized by the LMHI.

Finally, I want to congratulate all the members of the LMHI Executive Committee and all the Secretaries for their devoted work, and I really hope that 2015 is as fruitful as 2014 was.

### SERBIA

*Dr. Lazar Trufunovic, NVP*

The Serbian Section for Homeopathy (SH) and homeopathy in general suffered a major setback with the death of founder and former president of the Section, Milos Popovic, M.D., Ph.D., in December 2012. A new president was elected in May 2013. Education, legislation, popularization of homeopathy, and standardization of homeopathic practice continues. Since 2003, the SH of the Serbian Medical Society educated 240 licensed physicians according to the program of DZVhÄ. The Section enjoys full support of the Ministry of Health (MH) and Council for Continuous Medical Education. The MH has issued 80 licenses for practicing homeopaths. Collaboration in the field of CAM therapies continues. In Serbian Medical Society, members conducted nine lectures. Dr. Farokh Master from India conducted a few, as well. Video lectures by George Vitoulkas were held monthly.

### sLoVENIA

*Dr. Irena Gorišek, NVP*

The legal status of homeopathy is unchanged. According to the Act of Healing Practices (2007), only medical doctors are allowed to practice homeopathy. Those who do, lose their license to practice conventional medicine. We work to change this absurd situation. We await the reaction of the Ombudsman for Human Rights to the voluminous materials we sent in 2012 describing our activities to change the status of homeopathy and information about the medical status of homeopathy worldwide.

The Agency for Medicinal Products and Medical Devices issued five-year permits for 63 homeopathic medicines since 2011. The strict regulations limit their sale except from a homeopathically educated pharmacist without a doctor's prescription in pharmacies, in some only on certain days or even hours! But licensed medical doctors are not allowed to prescribe them.

## Secretary for Newsletter

*Dr. Richard Hiltner, USA*



I hope that you have enjoyed the previous three LIGA NEWS (LN). I wish to give much thanks to our dynamic new President, Renzo Galassi. It would have been almost impossible to prepare these Newsletters without his enthusiastic help. Also, I want to commend Evin Turkay, LMHI Secretariat, for the wonderful assistance and ideas she has given in their preparation. Furthermore, I need to personally voice my gratitude to Sandra Chase, Past Secretary, for her encouragement and support especially with the LIGA LETTER (LL). Moreover, of course, great appreciation and acknowledgment must be conveyed to all the authors of the various articles in the LN and LL, the Executive Committee and the International Council.

These Newsletters have tried to expand into new grounds the wonderful world of homeopathy. Specifically, each Newsletter will give more detailed articles on LMHI Congresses, clinical, research, history, pharmacy *etc.* and not just political information. They will also explore knowledge on the lesser-known countries in homeopathy. And, I trust that all of us have benefited from the inspiring questions in the quizzes.

There are two new propositions that I desire to present.

1) As we all know, the LMHI is having financial strain. I propose that the Newsletters be sent not only to LMHI members, but also, to non-members of the medical profession in all the countries with the request that a donation be imparted. This will not only distribute more to the world a better understanding of the LMHI and homeopathy, but also will lessen the LIGA's financial burden.

2) An attachment of a letter was given to the executive committee, which could be sent to those influential and prominent people in various countries to help support homeopathy. This, along with the accompaniment of the LMHI Newsletters would also be another incentive for both financial and educational exposure to homeopathy and the LIGA.

Thank you for hearing my thoughts. Hopefully, they will be of some interest and wisdom.

## Secretary for Public Relations

*Dr. Antonio F. Marqués Arpa, Spain*



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### sOUTH AFRICA

*Dr. Danny Pillay, NVP*

The profession continues to await the finalization of the internship program for its graduates, planned amendments to the scope of practice of homeopathy, and also the implementation of a Continuous Professional Development (CPD) program from AHPCSA which is due on 01 July 2013. The proposed guidelines on the registration and scheduling of complementary medicines are understood to be at an advanced stage. The next HSA National Congress will be held in KwaZulu-Natal province in 2014.

### sPAIN

*Dr. Antonio F. Marqués Arpa, NVP*

The V National Homeopathic Congress took place in Oviedo (Asturias) in October 2012 with the participation of the Spanish homeopathic associations (medical, pharmaceutical, veterinary). During this biannual meeting, Spanish homeopaths demonstrated their unity as a National Assembly of Homeopathy. Moreover, the Research Committee of the MH Academy of Barcelona edited an important scientific work proving that the previous criticisms of the Health Ministry (November 2011) were without evidence. Recently, in Madrid, the process for registering some medicines has begun, an issue pending since 1993. The Scientific Days of Homeopathy took place in Barcelona in early June 2013. Sceptics pursue their attacks in Castilla, Cordoba, and Tenerife. Soon there will be a discussion in the Regional Parliament of Canary Islands, as to the incorporation of CAM in the Public Health System.

## Secretary for Research

*Dr. Raj Kumar Manchanda, India*



The 2013 version of LMHI document on “Scientific Framework of Homeopathy” has already become a reliable referral document for Homeopathy. A downloadable copy of this document is available on the LMHI website ([http://www.lmhi.org/dokumente/upload/48b2f\\_Scientific\\_Framework\\_Homeopathy\\_2013.pdf](http://www.lmhi.org/dokumente/upload/48b2f_Scientific_Framework_Homeopathy_2013.pdf)). The book, originally written by Dr. Michael Wassenhoven,

aply serves the purpose of updating its readers about the status of homeopathy and reports the high quality homeopathic researches either presented in LMHI congresses or published in journals. The task of constant updating this book is one of the key research initiatives of LMHI. The revised document will soon be made available on the official LMHI website.

The idea behind updating the current form of ‘Scientific Framework of Homeopathy’ was to make it more up to date and argument-based. The chapters have been modified in order to make them more accommodating of the latest research information as well as to address the issues raised by the critics within the subject. Several research papers, related to the subjects covered in the document, were referred for writing the book. An attempt has been made to express both arguments and counterarguments concerning various issues.

The revised document aims to provide its readers with an overview related to homeopathy and its varied aspects, ranging from its educational and legal framework to recent advances in terms of scientific establishment of homeopathy. The proposed features of the book are inclusive of portrayal of current place of homeopathy in healthcare, with references from recent surveys, synoptic view of the users of homeopathy worldwide, educational framework laying out the status of the education of T&CM, the ethical and safety issues of homeopathic medicines and basic research, with some literal mulling over the physicochemical and pharmacodynamic mysteries behind Homeopathy. The latest in the fields of clinical research, homeopathic pathogenetic trials and clinical verification is also included. The role of homeopathy in veterinary and agricultural streams is also discussed in the related chapters. The chapter on homeopathy in epidemics is also being updated. An inventory of homeopathic researches is presented under respective chapters in the book, mostly highlighting their aims, findings and conclusions.

Since the task of updating the book is still continuing, the readers are welcome to report about the quality work published in homeopathy that might have escaped our notice, largely due to its publication in non-peer reviewed journals or in a language other than English.

The editors of the book are hopeful that a careful perusal of this book would not only provide an overview about the status of homeopathy, but also orient the readers towards future action points required at varied ends in order to further elevate the level of homeopathy as a scientific system.

## Secretary for Pharmacy

*Amarily de Toledo Cesar, Brazil*



**SRI LANKA**

*Dr. T. C. Peiris, NC*

The progress of homeopathy has slowed since 2009 due to the sudden dissolving of the homeopathic council by the ministry because of the ministers’ understanding about several inappropriate practices of the then existing council. A new registrar was appointed and a new Board was nominated by the minister several times due to infighting among homeopaths. As a result, drug imports were hindered; however, the ministry continued to maintain the supply to the government Homeopathic Hospital and its peripheral clinics situated in different districts, including the eastern province. Thanks to the minister for instructing the officials of the ministry to continue the scholarship programs offered by the government of India to the National Institute of Homeopathy in Calcutta. I hope Sri Lankan homeopaths will stop the infighting for a better future for homeopathy.

**SWITZERLAND**

*Dr. Franziska Bläuer, NVP*

The peculiar political system in Switzerland made it possible for the Compulsory Basic Health Insurance to reimburse for homeopathic treatments by certified physicians until 2016. The admission then will be re-evaluated. Furthermore, the universities are obliged to introduce some lectures about CAM in all academic health professions. At four universities, a few lectures are held already. In Basel, a people’s initiative is being prepared to establish a chair as well. A great promoter in these political issues is DACOMED, a platform of Swiss CAM organizations, which unites politicians, patients, physicians, hospitals, non-medical therapists, and manufacturers of CAM remedies. To support and encourage the young generation to work as family doctors practicing homeopathy, we have established an annual Homeopathy Day. And a first Swiss Homeopathic Case Conference will connect different schools.

## National Vice President/ National Contact Report Form

Name of the Country:

Summary of Report: One paragraph in length, in English (for use in the Minutes)  
Duplicate 130-word paragraph to be submitted  
to *Liga Letter* Editor.

Members: Number of members in his/her country.

Organization: Numbers, titles and addresses of the different associations.

Schools: Names of homeopathic schools or courses.

Program of Activities: The programs of the national congresses in the immediate  
past and the next year.

Publications: The names of the works given in the congress or meetings.

Magazines: The names and addresses of the publications and magazines.

### THAILAND

*Dr. Monthaka Teerachaisakul, NC*

From 2011-2013, we organized and co-organized standard education and continuing education for homeopaths and consumers. However, we faced the difficulty in arranging the third 2-year post-graduate course in homeopathy at the beginning of 2013. Therefore, the association took this opportunity to emphasize the strengthening of the development of homeopathy in Thailand and organize better training for our people. In year 2013, the legal status of homeopathy is progressing. The National Drug Committee has established the agenda of a meeting on homeopathic products. The Bureau of Health and Art of Healing, responsible for new licensing in Thailand, has instructed the committee to discuss homeopathy and the licensing of homeopaths. Henceforth, we will need to work very hard to support the best information as well as the best opportunities for homeopathy.

### TURKEY

*Dr. Altunay Agaoglu, NVP*

The Turkish Health Ministry is going to release regulations on complementary medicines (including homeopathy) at the end of 2013. According to this regulation, only medical doctors can practice CAM. The Turkish Classic Homeopathy Association courses are accredited by LMHI. As per request for the 2013-2014 calendar year, they are offering modules/courses to the pharmacists. The veterinarian practice of homeopathy is very well defined and regulated in Turkey. The selling, producing, and importing of homeopathic remedies are legal now, but the regulation will be released at the end of 2013.

# 70<sup>th</sup> LMHI Congress

Rio , Brazil -25 / 29 August 2015

„Homoeopathy : Experience , Science and Art “



**LMHI**  
**RIO 2015**

L I G A M E D I C O R U M  
H O M O E O P A T H I C A  
I N T E R N A T I O N A L I S

**AUGUST 25 - 29, 2015 / AGOSTO 25 - 29, 2015**

Dear Colleagues,

**CENTRAL THEME – “RIO 2015 HOMEOPATHY: EXPERIENCE, SCIENCE AND ART”**

**Boarding:** Provings – Education – Clinical Practices –  
Legalisation By Governmental Organs – Public Health –  
Wellness – Environment Sustainability – Quality Of Life –  
Pharmaceutical Assistance Homeopathic Pharmacotechnical –  
Relationship Between The Areas Of Homeopathy – Integrality

We invited you to join with us contributing to World Homeopathy in all areas (Medicine, Dentistry, Veterinary and Pharmacy). We will present a novelty in homeopathic practice, Agronomy.

We will be immensely proud of your presence at one of the most beautiful cities of the World – RIO DE JANEIRO!

Sincerely,

Dr. Francisco Vargas de Oliveira Villela  
National Vice-President of the LMHI for Brazil and LMHI  
Congress 2015 President

[www.lmhi2015.org](http://www.lmhi2015.org)



## UKRAINE

*Dr. Zoya Dergachova, NVP*

In 2013, 143 Ukrainian doctors and pharmacists paid the LMHI membership fee. The VI Congress of the homeopaths of Ukraine was held on 9-11 November 2012. The Congress brought together more than 150 physicians and pharmacists from Ukraine, Russia, Latvia, and Lithuania. Scientific reports of the Congress were dedicated to the discussion of methodology and philosophy. Original research was presented. As part of the National Congress, Dergacheva Zoya, MD, PhD, was elected LMHI National Vice President, Ukraine.

The Homeopathic Association of Ukraine plans for 2013 include the following:

- To create modern history of homeopathy in Ukraine.
- The questionnaire for homeopaths and their patients “Medical and social basis for homeopathy into public health system.”
- To create a database of successful cases of homeopathic treatment (monotherapy and laboratory diagnostic confirmation).

## UNITED KINGDOM

*Dr. Sara Eames, NVP*

The Faculty of Homeopathy continues to work closely with a group of other homeopathic organizations, particularly for media work. We have another celebrity promotion planned for this summer after some very successful press coverage last year and we have developed a new website ‘find a homeopath’ to raise the profile of homeopathic practitioners. We will also be filming more interviews for ‘YouTube’ and website use. The achievement of which we are most proud is the recent inclusion of the Faculty of Homeopathy in a parliamentary statute conferring the status of ‘designated body’ on the Faculty. Thereby the Faculty is empowered to set up a revalidation system of members, required every 5 years by law. This will go a long way in ensuring the future of medical homeopathy as a medical specialty.

# Fruzsina Gabor, 1970 – 2014.

By Dr. Sara Eames  
IN MEMORIAL



Fruzsina was well known to so many of us as the previous LMHI pharmacy secretary, and the news of her untimely death in July 2014, came as a great shock to many of her friends and colleagues. Her dedicated work for the homeopathic community worldwide and for homeopathic pharmacy in particular, was widely admired and appreciated. She was one of the pioneers reinstating Homeopathy in post cold war Hungary, and one old friend remembered how initially she had to go to a government office to get an official stamp for every homeopathic prescription, but as we all learned, it took far more than that to deter Fruzsina!

She became active in LMHI in 2000, when she joined the scientific committee for the conference organisation. She played an important role in supporting the motion to make pharmacists full members of LMHI, in the official definition of the homeopathic remedy and in changing the conference regulations to establish an obligatory pharmacy session. She collaborated closely with colleagues in other committees including those for research, dentistry and public relations.

She was also very active in ECH and was a brilliant translator. She translated the Complete Repertory into Hungarian, and even more remarkably, learned written Chinese in order to be able to translate a repertory for them too.

I first met Fruzsina at the conference in LA when we were both elected as new secretaries for LMHI. She became one of my closest friends in LMHI and ECH meetings and I came to admire and respect her fantastic combination of high quality detailed work for homeopathy, about which she felt so passionately, her unusual modesty and her warmth, kindness and sometimes naughty sense of humour!

This is summed up so well in the many tributes which LMHI received about her life and work:-

'a very dedicated, brave and joyful lady,' 'Her love for Homeopathy, her competence, her strong opinions were her personal brand. On the other hand the huge heart that throbbed in her chest was always available to help her friends with sweetness and care.' 'We loved this hard worker with her bags full of chocolates and sweets,' 'She was able to appreciate the small and valuable good moments life offers for laugh and friendship,' 'A great heart, a great person, a friend!' 'When you were with her, you felt that she had a special place for you in her heart, her large heart, where all of us received that special warmth that she would give us.' We all send our condolences to her family, who must be devastated to lose her so soon, but so many also feel she will still be with us and inspiring us.

'dear friend Fruzsina (her name came from Euphrasia, she told us), I wish you light, love and peace'

'Dear Fruzsina, we won't say goodbye to you, as Persian poet and Sufi mystic Rumi wrote:

„Goodbyes are only for those who love with their eyes,  
because for those who love with heart and soul  
there is no such thing as separation.“



## Main Theme of the Congress

Dr. Francisco Vargas de Oliveira Villela as president of the Congress and NVP for Brasil, with the support of the Brazilian Homeopathic Medical Association and Homoeopathic Institutions participants and on behalf of the Organizing and Scientific Committees congress, comes with engagement held in Brazil, in the city of Rio de Janeiro, the 70th Congress of the LIGA MEDICORUM HOMOEPATHICA INTERNATIONALIS, promoted by the Homeopathic Medical Association of the State of Rio de Janeiro.

We are making a congress for all, so listen for deadlines for best accession, with special prices to the members of the LMHI and delegations. It will be done to all LMHI members with their payments up to date by the consulting of the LMHI Members update list.

We would like to inform that the registrations fees made during the France LMHI congress is going to be maintained as well we offered, but observing the members up to date of the Liga, as all registrations fees.

Look it better, day by day, consulting at our site:

[www.lmhi2015.org](http://www.lmhi2015.org)

**And more else: The Brazilian Homeopathy Pharmacy Association is going to held in RIO DE JANEIRO their Brazilian Pharmacy Homeopathic Congress.**

We want to invite you to participate in the next Brazilian Pharmaceutical Homeopathic Congress, on 24 and 25th of August 2015, just before the next LMHI congress, in Rio de Janeiro. In the LMHI congress, a whole day for Pharmacy is also being planned besides some multiprofessional activities.

Come and meet these technical and scientific papers in the Congress! We are sure you will be amazed at what you can find!

## CENTRAL THEME – “RIO 2015 HOMEOPATHY: EXPERIENCE, SCIENCE AND ART”



Rio Othon Palace , Brazil

### uNITED sTATes oF AMERICA

*Dr. Richard Hiltner, NVP*

Senator Tom Harkin, Health, Education, Labor and Pensions Committee Chairperson, is a supporter of patient access to homeopathic medicines. Senator Barbara Mikulski, Chairperson of the Senate Appropriations Committee, has supported Integrative Health policies. In March, the University of Connecticut School of Medicine hosted a debate between Dr. Andre Saine and Dr. Steven Novella on homeopathy. Mainstream dermatology journal *Dermatology Times* extols the virtues of homeopathy. Iris Bell, MD, PhD, wrote an important paper, *Homeopathy as Systemic Adaptational Nanomedicine*. Electromagnetic cell communication in Hepatitis A is comparable to Luc Montagnier's research and ideas on homeopathy. In January, the Dr. Oz Show, with 3 million viewers, dedicated about 1/3 of the show to homeopathy. Sales of homeopathic medicines totaled \$1.3 billion in 2012. Dana Ullman wrote about President Lincoln's involvement with homeopathy.

### uRuguAy

*Dra. Liliana Brea, NVP*

There are two homeopathic Associations in Uruguay: The Association of Homeopathic Medicine of Uruguay (AMHU) and the Hahnemann Homeopathic Medical School of Uruguay (EMHHU). They carry out regular courses of homeopathic formation for doctors and veterinarians of three years duration. The AMHU holds a monthly symposium and provides polyclinic assistance for low-income people. Homeopathy in Uruguay is developed mainly in the private environment. Homeopathic medicines are legally recognized by the health authorities of the country since 2009. One of the objectives of our Associations is the integration of homeopathy in the teaching in the university. Coming closer to this objective, we have held conversations with the Ministry of Public Health with the aim that homeopathy will be recognized as a specialty.

# 70<sup>th</sup> LMHI Congress

Rio de Janeiro, Brazil – 25-29 August 2015  
“Homeopathy – Experience, Science and Art”

## Venue

Rio Othon Palace  
Copacabana, Rio de Janeiro – RJ, 22070-001  
Rio de Janeiro, BRAZIL

The Homeopathic Medical Association State of Rio de Janeiro (AMHERJ), with support from the Brazilian Homeopathic Medical Association (AMHB) and homeopathic institutions, and on behalf of the Organizing Committee, hosts with joy the 70<sup>th</sup> Congress of LMHI in Rio de Janeiro, Brazil.

We have already begun all the preparations for the holding of this event, intending it to be a milestone in the world of homeopathy. We want to provide the opportunity to gather new ideas, and especially, to exchange our experiences and to share our clinical provings. We seek to discuss development of scientific works that strengthen the art of healing established by Dr. Samuel Hahnemann.

Come and join our enthusiasm in achieving this Congress, contributing to worldwide homeopathy in all disciplines (Medicine, Dentistry, Veterinary, and Pharmacy). The Congress will present a new area of expertise in Homeopathy – Agronomy!

Enjoy meeting in one of the most beautiful cities in the world!

We look forward to your presence from 25-29 August 2015!!!

Francisco Vargas de Oliveira Villela  
Congress President  
LMHI National Vice-President for Brazil



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In all other countries the LMHI has only individual members. The LMHI is seeking to include all homeopathic doctors' associations as institutional members, i.e. to include all the individual national association members en bloc.

## Calendar

- 2015 25-29 August, 70<sup>th</sup> Congress,  
Rio de Janeiro, Brazil
- 2016 24-27 August, 71<sup>st</sup> Congress, Buenos Aires,  
Argentina
- 2017 Leipzig, Germany
- 2018 South Africa
- 2019 Italy
- 2020 Turkey
- 2021 Colombia

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