

## CHAPTER 57: DOSE AND POTENCY

### 57.1 INTRODUCTION

What distinguishes Dr. Hahnemann's medical system, in regards to medicine proper, is the use of medicinal substances on the basis of the law of similar resonance. Almost any substance can be used as a medicine, even many common items of diet, such as coffee, tea, sugar, cinnamon, pepper, mint, saffron, etc.

The nature of a medicine lies in its very capacity to negatively affect the living organism at a dynamic level. In a very real sense, all medicines must be poisons, although some items may have a low toxicity in their crude state, or we may have become accustomed to their effects through long usage, as is the case with common salt (*Natrum muriaticum*) or the various spices such as red pepper (*Capsicum*). However, all have the ability to affect what Hahnemann called our Living Power.

When medicine is used on a false basis, as is the case in allopathic medicine ("allo" means that it operates on no principle of nature) by and large, it may also have a seeming positive effect, in terms of temporary relief of some of a patient's symptoms. However, this is achieved only through suppression of the expression in the condition of the patient (what Hahnemann termed changes in the feelings, functions and sensations) of the underlying disease. The temporary relief is seen as desirable and the negative effects of a medicine are seen as unwanted (referred to as "adverse effects" or more commonly as "side effects"). These unwanted effects are, in reality, the disease effects of that medicine on the patient. That is, each medicinal substance has the potential to engender a medicinal disease in a patient. It is this power to affect the generative aspect of the Living Power of a living being that makes them medicines in the first place.

When a medicine is used on the basis of the correct principle, that is the curative law of similars, then it has a **true** positive or therapeutic affect.

However, the issue of dose is almost as important as the selection of the remedy on the basis of the correct principle. If the dose is not correctly chosen, then there also remains a potential negative effect. As Dr. Hahnemann stated in the *Organon*:

§275.1. The appropriateness of a medicine for a given case of disease does not rest alone on its apt homeopathic selection, but just as well on the requisite, correct size or, rather smallness of its dosage.

§275.2. If an all too strong dose is given (for the present disease state) of even a completely homeopathically chosen medicine, so must it nevertheless, notwithstanding the beneficence of its nature in itself, certainly inflict damage due to its size and the here unnecessary, overly strong impression which it makes on the Living Power by virtue of its resonant homeopathic action throughout precisely those most sensitive parts of the organism already attacked most by the natural disease.

§276.1. For this reason a medicine, even if it was homeopathically appropriate to the disease case, does damage in every dose that is too large, and in strong doses all the more, the greater the homeopathicity and the higher the potency that was selected, and to be sure, far more than

every equally large dose of an unhomeopathic (allopathic) medicine bearing no relation to the disease state.

Medicines truly are a two-edged sword. In the hands of allopathy, the sword causes damage in both directions:

- suppression of the original disease, which only serves to drive it deeper into the organism and weaken the resistance, creating chronic, protracted problems, and
- the engendering of a new, medicinal disease in the patient, that must now be treated.

In the hands of the true physician (Heilkünstler, that is, one who practices the system of medicine called Heilkunst), the “sword” is able to cure without causing any damage. This is because of the manner in which medicines are prepared (highly diluted and shaken so that they act energetically or dynamically) and the use of the optimal dose (just enough to cure and no more).

## 57.2 FROM CRUDE TO DYNAMIC MEDICINES

In keeping with the medical approach of his time, Dr. Hahnemann initially used mainly crude doses applied on the basis of the law of similars. He was able to achieve curative results, but he noticed that some medicinal disease effects also occurred. He sought continually to reduce the dose in order to lessen the adverse effects of the medicine, while still retaining some positive, therapeutic effect.

If we wish to render powerfully acting medicines innocuous, then they should only be prescribed on the right occasion and in a suitable dose. (S. Hahnemann, Haehl, Vol. I, p. 310)

In the thinking of his day, still prevalent today, the effect of a medicine was ascribed to the chemical constituents of the crude, material substance.

Being a chemist, Dr. Hahnemann was well aware of this. However, his concern for his patients and his sensitivity to the disease effects of medicines led him to begin to dilute the usual fairly material dose (usually in grams or the equivalent of milligrams) of such poisons as arsenic, mercury, and plant poisons such as *Aconite* (Monkshood), *Belladonna* (Deadly Nightshade), *Hyoscyamus* (Henbane), *Helleborus* (Black Veratrum), *Veratrum album* (White Hellebore), *Conium* (Hemlock), etc. Even before he formally founded his new system of medicine, he departed from the medical conventions of his day and used medicines in quite small doses (see Haehl. Vol. I, p. 311).

When Dr. Hahnemann first began to apply the law of similars as the principle for medicine in his cases after around 1790, he still used these material, if relatively small doses in treatment. However, he noticed that this caused an initial apparent aggravation of the patient’s symptoms as the similar medicine caused a temporary artificial disease in the patient similar but not identical to the natural disease of the patient. He called this the “homeopathic aggravation.” (See Volume II, Section A, Chapter 29: Homeopathic Aggravation). The more similar the remedy, the more there was a risk of this “homeopathic aggravation,” such that the issue of dose became very important. Indeed, as Dr. Hahnemann knew, the law of similars had been known in the past but had been

abandoned because it was too dangerous in crude doses. Dr. Hahnemann's work in adjusting the dose provided a new lease on this ancient principle.

14.2. The reliably availing ones could not have been any others than the specific ones; that is, medicines which were homogenic **a]** in their action to the disease irritation, whose use, however, by the old school was **forbidden b]** and **tabooed** as **highly damaging** because observation had taught that, with the so **highly intensified receptivity for homogenic irritations in diseases, such medicines in the conventional large doses had proven themselves life-endangering.**

14.2. a] Called Homeopathy.

14.2. b]1 "Where experience had taught us to know the curative power of homeopathically acting medicines, whose working action could not be explained, they resorted to declaring them specific, and thereby lulling further cogitation to sleep with this vacuous expression.

14.2. b]2 They have, however, long since **forbidden** the homogenic stimulants, the specific ones (homeopathic), **as highly damaging influences.**"

14.3. However, the old school had no inkling of smaller doses and of most extremely minute doses.

14.4. Accordingly, to cure in a direct (most natural) way by means of specific homogenic medicines, was **not allowed**, and could not be, since most of the medicinal actions were and remained unknown, and even if they were known, it would never be possible to divine the apt remedy with such generalizing views.

So, he began a gradual process of reducing the dose over more than two decades. Dr. Hahnemann proceeded slowly as he was still caught up in the material notion of dose that governed science and medicine. However, he also had a growing awareness that there was an energetic or dynamic element involved in the process of remediation (*heilen*). The care with which he proceeded indicates that he was concerned to establish a firm foundation for any dosage approach for his new medical system.

4.1 What would they have risked had they straight away followed my directions in the beginning, and had made use of just these small doses from the very first? Could anything worse have happened than that these doses might not have helped? They surely could do no harm! But in their injudicious, self-willed application of large doses for homeopathic application they only traversed once again **that roundabout road to reach the truth**, so dangerous to their patients, **which I myself had already in trembling but successfully passed over** so as to spare them this trouble; and if they really desired to cure, they were nevertheless at last compelled to arrive at the only true goal, after having inflicted much mischief and wasted a goodly part of their life. All this I had already long before laid before them faithfully and frankly, and **well-grounded.**

### 57.3 HAHNEMANN'S SYSTEM OF CREATING POTENCIES FOR THE CENTESIMAL SCALE

Let's first look at the standardization that Dr. Hahnemann developed over time for his medicines.

Hahnemann began to take one drop or one grain (almost a poppy sized amount) of a given substance and dilute it in a given quantity of water, usually 100,200 or 300 drops of water/alcohol. He later standardized this to 99 drops of water and alcohol solution (usually 80%/20% mixture). He also took pains to thoroughly agitate the resulting solution, by a process he called succussion.

Succussion involved, in Hahnemann's case, taking the small glass vial of the solution and shaking it by a quick flick of the arm in a downward motion, or by brisk stirring. Later he advised to strike the vial of the solution onto a firm, but still flexible surface, such as a leather bound book. This process clearly mixed the solution so that the single drop was now spread through the new solution.

What he discovered was that this vigorous mixing, what he referred to also as "intimate" mixing released a spirit-like energy within the crude substance that often was not noticeable in that form, such as in the case of *Lycopodium* seeds (club moss) or salt. He discovered that medicines had a Wesen or dynamic aspect.

The mix of one drop of herbal mother tincture (the concentrate from the soaking of the plant – either the whole plant, or the leaves, roots, bark or fruit alone) and 99 drops of water/alcohol mix gave a solution of 100 drops. The concentration of the medicine in such a solution was then 1/100 or  $10^{-2}$ .

Let's look at how this process of sequential dilution works:

First, we begin, in the case of a plant or soluble mineral, such as a salt, with the stock solution. For an herb, this is referred to as the Mother Tincture (MT) or Tincture mere in French (TM).

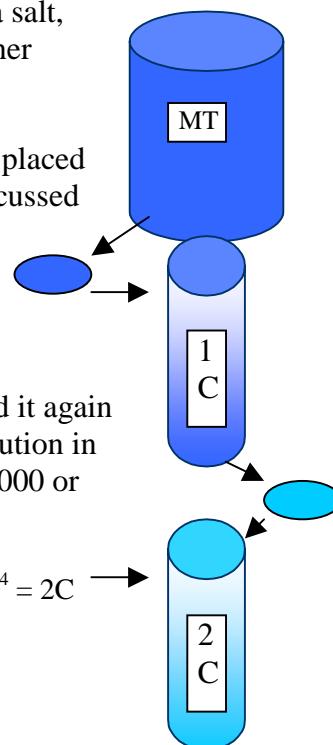
Next, Dr. Hahnemann took one drop from this stock solution and placed it in a glass vial with 99 drops of pure water/alcohol. He then succussed this solution which he named 1C.

$$1 \text{ drop medicine to } 99 \text{ drops of water/alcohol} = 1/100 \text{ or } 10^{-2} = \\ 1\text{C} \text{ (C is for centesimal dilution)}$$

If we then take, in turn, one drop of the new solution (1C) and add it again to another vial with 99 drops of water/alcohol, we now have a solution in which the original substance from the MT has been diluted to 1/1000 or  $10^{-4}$ .

This is now labeled as a 2C solution.

$$1 \text{ drop of } 1\text{C} \text{ solution to } 99 \text{ drops of water/alcohol} = 1/10000 \text{ or } 10^{-4} = 2\text{C}$$



This process can be continued many times using the same approach. Dr. Hahnemann worked mainly with the dilutions up to 30C by 1816. By the time of his death, he had apparently used as high as a 1M (or 1000C).

#### 57.3.1 KORSAKOV METHOD

Dr. Korsakoff (or Korsakov, as the spelling varies) also, for practical reasons, developed a new method of producing dilutions. Whereas Hahnemann used a new vial for each dilution, Korsakoff simply emptied the vial in use and added 99 parts of water/alcohol to produce the next dilution. Observation had convinced him that at least one drop equivalent of the solution remained in the vial when empty. Thus, adding the 99 drop sof water/alcohol to the same vial when “empty” had the same effect as taking a drop of the solution and putting it in a new vial with 99 drops of water/alcohol. This method was less expensive and time-consuming than Hahnemann’s more precise and methodical approach, and worked particularly well in the higher potencies. For example, to produce a 200C potency by Hahnemann’s method would require 200 vials, whereas this could be done with only one vial using the Korsakoff method. The latter also lends itself better to mechanization. Thus, the Korsakoff method is generally the one most used today, particularly and almost exclusively in the higher potencies (above 200C). To distinguish the two methods, the potencies made using the Hahnemannian approach are designated with an H (e.g., 3CH) and the potencies made by the Korsakoff method have the designation K (200CK or 200K).

Korsakoff also went further in using a single globule to dynamise hundreds of unmedicated globules. At one point he claimed to have medicated 13,500 golbules from one single globule of Sulphur 30C (Haehl, Vol. I, p. 322).

#### 57.3.2 TRITURATION

Dr. Hahnemann also began, around 1816, to refer to his dilutions as “potencies” or “power developments.” Although he had been aware since around 1800 that the medicines acted dynamically, not materially, it seems that he became more conscious of the reality of this when he discovered the ability to take substances that were innocuous in their crude state (such as salt, charcoal, lycopodium, silica, lime, etc.) and render them effective through prolonged trituration. (Haehl, Vol. I, p. 317) The detailed directions for trituration were first given to the public with the publication of the first edition of the *Chronic Diseases* (1828, Vol. II) and in the second edition (Vol. I, p. 182).

Essentially, one part of the original substance (dry plants, sapless native plants, metals, minerals and all other insoluble substances) is mixed with 99 parts of milk sugar (lactose) and ground for an hour using a mortar and pestle. This is called the 1<sup>st</sup> trituration. One part of this is then taken and ground with another 99 parts of lactose to produce the 2<sup>nd</sup> trituration. Only when he reached the 3<sup>rd</sup> trituration, did Dr. Hahnemann find that the substance could be dissolved in liquid and then further diluted using the method above. The process of trituration to 3C is also the basis for the last potency scale Hahnemann developed, called the LM potency or Q-scale.

### 57.3.3 DECIMAL SCALE

Later, homeopaths developed a dilution on a decimal scale, which is generally used in Europe for the lower potencies. Here, one drop of mother tincture is diluted in 9 drops of water/alcohol giving a 1X or 1D potency. The “D” stands for “decimal.”

### 57.4 THE LM POTENCY

Finally, in the last years of his practice, Hahnemann developed a new scale of dilution, which is commonly called the Q or LM scale. The dilution is 1/50,000.

The process for making the LM1 dilution is to take a medicated round pellet of lactose/sucrose using a 3C potency (on the basis of one drop to mediate 500 poppy seed size pellets). This pellet is dissolved in 100 drops of water/alcohol and succussed. This represents the LM1. The LM2 is made then by taking one drop and medicating 500 pellets, wherefrom one is dissolved in another 100 drops of water alcohol. Again, one drop of this is used to mediate 500 pellets or fine globules. The 3C potency is arrived at by the process of trituration.

### 57.5 SUMMARY OF PRINCIPLES REGARDING DOSE AND POTENCY

Dr. Hahnemann, in all of his writings, provided the fruits of his experience with the development of dose and potency. The following basic principles are derived from a study of these writings (see Volume I, Section A, Chapter 11: Historical Development of Dose and Potency).

- The more acute the disease, the smaller the dose required (the higher the potency), but the greater the frequency of application.
- The liquid dose is stronger than the dry dose (single globule taken directly in the mouth).
- The more sensitive (arousable) and weak the patient (lower vitality), the smaller the dose (in quantitative terms – e.g., a part of a drop – one globule – instead of a drop).
- The more the dose is repeated, the more it must be diluted (that is, in a greater quantity of liquid).
- A repeated dose requires that the degree of dynamization of each subsequent dose be altered slightly.
- The higher the degree of dilution and/or succussion, the more deeply the medicine penetrates into the Living Power of the patient.
- The more protracted the disease, the longer the counter-action to restore balance (homeostasis – a dynamic balance of health).

The determination of the optimal dose must be done in the living context of each case of disease and involves the use of the physician’s *kennen*, or supersensible knowing. It can not be done by formulas, although these can provide a degree of guidance.