

**Organon of Medicine in Relation to Modern Day Practice of Medicine****Bikash Biswas¹, Madhumita Nath²**^{1,2}PGT, Mahesh Bhattacharyya Homoeopathic Medical College and Hospital, Kolkata**Abstract**

The knowledge of disease is a basic principle for every physician. Based on studies of modern-day practice of medicine and Organon of medicine by Samuel Hahnemann, there are similarities of principle which he stated 200 years ago in his work. The foundation laid 200 years ago is modified, but it remains indispensable to treat patient like an individual and not as merely as a case of disease. Hahnemann's basic idea runs through all the stages of his doctrine. Modern day practice of medicine has so much developed with technical and scientifically modified in the treatment of each patients, but there is lack of understanding in busy doctors for patients as a whole which has been stated in organon of medicine that treat the patient as a whole and not by his organs or particular sufferings, with proper knowledge of disease and its application. In the Hahnemannian era there was no particular tool for diagnosis of disease, thus doctors made prescription with their faulty speculation and were prejudiced and made the patients more complicated. But now a days having the with highest level of diagnostic tools with superspecialist services also made the patients more complicated because of less human understanding, less tact, and more the technical skill, biasness and prejudice.

Key Word- Modern, Homoeopathy, practice, relation etc**Corresponding Author: - Bikash Biswas, PGT, Mahesh Bhattacharyya Homoeopathic Medical College and Hospital, Kolkata.****Received – 13/04/2021****Revised- 25/6/2021****Accepted – 29/06/2021****INTRODUCTION**

Christian Friedrich Samuel Hahnemann in the year 1790 discovered the nature's law of cure and established the science of therapeutics in the form of

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Homoeopathy in the year 1796. He did numerous humans proving and proved about 99 drugs. During his practice life he stumbled over numerous obstacles in the form of chronic diseases, which led him to discovery of theory of chronic diseases and fundamental causes in the form of Miasmas. He then formulated his whole observations and requisite in the form of Aphorisms in Organon of medicine in the year 1810, which underwent numerous editions till 5th edition and posthumous 6th edition. In this book, he has mentioned the essence of being a physician and principles of Homoeopathy in short but in an impressive arrangement.

Though this book was a creation of more than 200 years old, the principle which was bound by Dr. Hahnemann after careful observation, is still indispensable and fully reliable at present scenario as well. Modern day Practice of Medicine by Harrison has been the source of medical ethics for present day physicians. Many statements made by him and other physicians of that era are relevant and acceptable when compared with Organon of Medicine. In this theoretical review the relation between 200years old Organon of Medicine is established with Modern day practice of medicine for better acceptability and understanding.

Concept of Organon of Medicine:

The Master of Show:

Those who chosen a career in the field of medical science, there can be no better basic motto than to strive to be a person with technical skill, scientific knowledge and vast wisdom with compassionate nature and warmth personality and with the science of medicine in artistic way. The practice of medicine in its broadest sense includes the whole relationship of the physician with his patient. One of the essential qualities of the physician for the care of patient. An excellent practice of medicine entails the transfer of medical knowledge to the care of patients ^[1]. Compassionate physician care for their patients and realize that the more they know about medicine, the more they can improve the care they give.

Goal, Aim and Knowledge:

In organon of medicine Hahnemann stated about the only mission and aim, "The physician's high and only mission is to restore the sick to health, to cure, as it is termed" (§1) and the highest ideal of a cure is rapid, gentle and permanent restoration of the health, and removal and annihilation of the disease in its whole extent, in shortest, most reliable and most harmless way, on easily comprehensible principles (§2). Hahnemann has mentioned if the physician

clearly perceives what is to be cured in diseases, that is to say, in every individual case of disease, the knowledge of disease, indication, that's mean the disease process, progress. Every physician should have the skill and knowledge of disease and its indication to understand the disease and its stage of treatment by medicinal application. Physician finally figured out the obstacles to recovery in each case and is aware how to remove them, by keen skill and observation and unrequitedness so that the restoration may be permanent, then the physician understands how to treat judiciously and rationally, and that can make a physician a true practitioner. Physician should have known how to preserve the health and things that create morbid condition of health and cause of every disease and how to remove permanently from patient with normal wellbeing without touching the dynamic vital force (§4)^[2].

Taking History:

Physician has been aware about the most recent cause of disease of acute disease and also finds out the whole history of patient's present sufferings in detail without interrupting the patient with unprejudiced observation. Physician has to know about the fundamental cause which is miasm (true fundamental cause of disease). In these investigations, the

ascertainable physical constitution of the patient (especially when the disease is chronic), his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, etc., are to be taken into consideration for each case in curing the disease ^[2].

This history helps to understand the attitude and gesture of patients and that helps to identify the similitum. The physician should well aware of every keen observation which is termed as unprejudiced observer, without any predefined idea of patients suffering and takes note of nothing in every individual disease, except the changes in the health of the body and of the mind (morbid phenomena, accidents, symptoms) which can be perceived externally by means of the senses; that is to say, he notices only the deviations from the former healthy state of the now diseased individual, which are felt by the patient himself which is subjective symptoms, remarked by those around him and observed by the physician and that is objective symptoms which are perceive by physician by his birds eye^[2].

If the physician succeeds in removing the whole group of symptoms, he has likewise most assuredly destroyed the internal, hidden cause of the disease. Physician should listen patient's friends

and attendants because they are usually altered and erroneously stated, in all diseases, but especially in the chronic ones, the investigation of the true, complete picture and its peculiarities demands especial circumspection, tact, knowledge of human nature, caution in conducting the inquiry and patience in an eminent degree (§83-104)^[2].

The Process:

The written history of an illness by physician should include all the facts of medical significance in the life of the patient. Recent events should be given the most value. This individualizing examination of a case of disease, for which shall only give in this place general directions, of which the practitioner will bear in mind only what is applicable for each individual case, demands of the physician nothing but freedom from prejudice and sound senses, attention in observing and fidelity in tracing the picture of the disease^[2].

The patient details the history of his sufferings; those about him tell what they heard him complain of, how he has behaved and what they have noticed in him; the physician sees, hears, and remarks by his other senses what there is of an altered or unusual character about him. The physician advises them at the beginning of the examination to speak

slowly, in order that he may take down in writing the important parts of what the speakers. Every interruption breaks the train of thought of the patients. After the patient have finished his story of suffering the physician then reverts back to the patients and enquire each symptom and adding with his needed information for a clear totality and picture of patients (regarding his every organ and suffering). Thus, the physician obtains more precise information of the patient to get a perfect similitum. If in these voluntary details given by the patient place that on high level forming in totality specially for mental state for example, how the patient behaved during the visit whether he was morose, quarrelsome, hasty, lachrymose, anxious, despairing or sad, or hopeful, calm etc. Whether he was in a drowsy state or in any way dull of comprehension; whether he spoke hoarsely, or in a low tone, or incoherently, or how otherwise did he talk etc^[2].

History of Disgraceful character:

Any causes of a disgraceful character, which the patient or his friends do not like to confess, at least not voluntarily, the physician must endeavour to elicit by skilfully framing his questions, or by private information. For example his history of poisoning or attempted suicide, onanism, indulgence in ordinary or

unnatural debauchery, excess in wine, cordials, punch and other ardent beverages, or coffee, over-indulgence in eating generally, or in some particular food of a hurtful character, infection with venereal disease or itch, unfortunate love, jealousy, domestic infelicity, worry, grief on account of some family misfortune, ill-usage, balked revenge, injured pride, embarrassment of a pecuniary nature, superstitious fear, - hunger, - or an imperfection in the private parts, a rupture, a prolapse, and so forth^[2].

The Female:

In chronic diseases of females, it is especially necessary to pay attention to pregnancy, sterility, sexual desire, accouchements, miscarriages, suckling, and the state of the menstrual discharge. Whether delayed or early, menstruation, character of pain, blood character, paleness to define deficiency. For the inquiry of sexual history etc. In chronic disease the investigation of the signs of disease above mentioned, and of all others, must be pursued as carefully and circumstantially as possible, and the most minute peculiarities must be attended to, partly because in these diseases they are the most characteristic and least resemble those of acute diseases. Physician has to take the age of the patient, his mode of living and diet, his occupation, his domestic position,

his social relation and so forth, must next be taken into consideration, in order to ascertain whether these things have tended to increase patient's sufferings^[2].

Modern Day Practice of Medicine:

No greater opportunity, responsibility, or obligation can fall to the lot of a human being than to become a physician. In the care of the suffering, [the physician] needs technical skill, scientific knowledge, and human understanding. Tact, sympathy, and understanding are expected of the physician, for the patient is no mere collection of symptoms, signs, disordered functions, damaged organs, and disturbed emotions. [The patient] is human, fearful, and hopeful, seeking relief, help, and reassurance^[3].

To wrest from nature the secrets which have perplexed philosophers in all ages, to track to their sources the causes of disease, to correlate the vast stores of knowledge, that they may be quickly available for the prevention and cure of disease—these are our ambitions^[3].

—William Osler, 1849–1919

Goal and aim:

Physician nowadays struggles to integrate of scientific knowledge into day-to-day practice life, the prime mission of physician is to prevent disease and treat sick patients. Despite the year's scientific advances, it is impossible to understand

and evaluate the relationship between physician and patient still lies at the heart of successful patient care [3].

The science and art of medicine:

The knowledge of every medical field has improved and will further improve of physician's skill towards understanding of complex disease, chronic disease, incurable disease and the treatment and prevention. In this time skill in the most valuable application of lab technology and in the use of the latest therapeutic intervention alone does not make a good physician [3].

When a patient presented with critical clinical problems, an unprejudiced physician must be able to identify the primary elements and past history and physical examination; followed by laboratory test and appropriate diagnostic tests to determine whether to "treat" or to "watch." For the particular case. This combination of medical knowledge, patient's understandings, instinct, clinical experience, and unprejudiced discernment defines the art of medicine, which is as necessary to be a good clinician [3].

History-Taking:

The history of present sufferings should evaluate for the patient. Recent events or history of present complaints should be given the highest value. The patient at early point, have the opportunity

to tell his or her sufferings and history of present illness without any interruption and, when he receives expressions of attentiveness, mental support, encourage to tell his illness, and compassion from the physician. Event related by the patient or irrelevant to the patients suffering should be evaluated by the physician to select the proper diagnosis. When a patient feels comfortable with the physician, he or she will detail the complete information, and thus putting the patient at ease to the greatest extent, to obtain all the significant history for cure and prevention [3].

Personal- only by listening the patient's history which they describe their symptoms, physicians can gain valuable insight into the problem. Patient's voice, facial expression, gestures, and attitude, body language, may reveal important sign to understand the symptoms to the patient. The social, domestic, sexual, obvious, non-obvious, latent, history important to the types of diseases which he or she suffered for [3].

Family History: Family history defines not only rare autosomal dominant or recessive disorders but often reveals the risk factors for other disorders, such as coronary heart disease, hypertension, DM, hyperlipidaemia, and asthma. the history-taking of patients given to an opportunity to observe the patient's behaviours attitude

to better understanding. This will help to establish a bond in between the patient and physician [3].

This case taking helps the physician develop an appreciation of the patient's perception of the illness, the patient's expectations of the physician and the health care system, and the financial, social implications of the illness to the patient.

Physical Examination

Objective and subjective:

The physical examination is to determine the objective signs of disease as well as subjective symptoms. The significance of these objective signs of disease is enhanced when they confirm a functional or structural change already suggested by the patient's history. The signs of patients the only evidence of disease and progress [3].

The physical examination should be performed with given consent of the patient's modesty. Examination should be from head to foot, with careful observation to the particular organs or parts which are suffering specially. The act of examining (touching) the patient also offers an opportunity for communication and may have reassuring effects that foster the patient-physician relationship. Followed by selected powerful diagnostic tools judiciously, always considering whether

the results will alter management and benefit the patient by the skilled physician[3].

Evaluation of Outcomes:

The assessment of progression of the patients, the outcome after therapeutic intervention or after prescribing the improvement through clinical observation or by laboratory observation However, they wish to obtain relief from present sufferings, preserve the health, and normal functioning vitals. The patient's quality of life (QOL) can include physical comfort, well physical activity, personal and, sexual function, cognitive function, and overall wellbeing of health. The practice of medicine requires consideration and integration of both objective and subjective outcomes [3].

Women's health and disease:

Women's Health has exclusively significant for world women's health issues. gender differences exist in various disease condition that afflict both men and women. Physician should more emphasis on ' understanding of the mechanisms of female organs with their proper understanding, and outcome of certain diseases [3].

The patient-physician relationship

The significance of the intimate personal relationship between physician and patient cannot be too strongly

emphasized, for in an extraordinarily large number of cases both the diagnosis and treatment are directly dependent on it. One of the essential qualities of the clinician is interest in humanity (Francis W. Peabody, 1881–1927).

Physicians must never forget that patients are individual human beings with problems that all too often transcend their physical complaints. Patients do not fail treatments; treatments fail to benefit patients. A professional attitude, with warmth and openness, with compassionate can do much to alleviate anxiety and to encourage patients to share all aspects of their medical history [3].

Philosophy:

Modern medicine has concentrated on disease to the neglected of the patient, as if disease and patient were two separate and distinct entities. They think they are different in kind but with the actually be treated without taking any form of medication. Understanding the patient, his social culture, his attitude, his behaviour may permit the physician to provide better treatment. Philosophy of medicine pursue the same goals in that both aim at the search of human wellbeing. It being aimed to fight the disease of the mind which may have a direct impact on health and achieve happiness to heal the holly soul [4].

DISCUSSION:

With new inventions and research, medical fraternity has advanced a lot with modifications in approach to a patient from diagnostic tools to surgical interventions. Due to increasing pattern of human suffering in the form of diseases, epidemics and pandemics, the basic physician duty has gradually been obscured and taken over by nonprofessional attitudes. Had not been bought by the revolutionary way of gentle treatment by Hahnemann, humanity was being treated with suppressive treatment, bloodletting, asylums, etc. As mentioned in Modern Practice of Medicine, a patient is not a bunch of symptoms or signs but is an individual who is suffering, has been well explained by Hahnemann as well.

Though the therapeutic approach is variant in Allopathy and Homoeopathy, where former is based on diagnostic stance and latter is based on totality of symptoms and treated by the Law of similia, the basic principle remains the same i.e., we as physician must bear kindness, tact, circumspection, alertness and patience in handling an individual who is sick.

As it is well said by William Osler that “No greater opportunity, responsibility, or obligation can fall to the lot of a human being than to become a physician. Where a physician needs skill,

knowledge, understanding, tact, sympathy for treating a patient who is not merely a collection of sign and symptoms but also a human being”

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