

Alternative Medicine, including Homeopathy, in Germany from the past to the present

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This article is based on my talk in the seminar of "Modern Healing Alternatives – the European practice" in the study group "Culture of care and curing" of the National Museum of Ethnology in Osaka.

First I will briefly sketch the situation of Medicine before the introduction of Alternative Medicine in the 19th century. During the Antimodernism era new alternatives treatment methods were introduced and were taken over by those movements. Lay healers came up, lay associations developed. I will explain the situation between lay healers, the physicians and its legal situation. After World War II the situation changed with the introduction of a variety of modern medicines and diagnostic tools. The patient changed from being passive to being proactive. This also has its influence in the current German medical landscape of Heilpraktiker and physicians working as competitors and co-workers.

Before the 19th century, medicine was shaped by bath therapies which are going back to the Indus Culture (2500-1000BC) and to Egyptians. Later Hippocrates of Cos (460-370BC) established medicine as a profession and hence he is considered as the father of Western Medicine. He was the first who stated that disease is the product of environmental factors, diet and living habits and not inflicted by gods^{1,2} (Hippocrates; Hippocrates). Furthermore, he regarded the whole person and not only the diseased tissue.³

In the Early Middle Ages the cloisters had hospitals where they applied herbs and healing plants. That medicine was based on the humoral pathology of Hippocrates and Galen. A very valuable relict of that time is the Lorsch Pharmacopeia (795) which is the oldest preserved book of monastic medicine in Germany. In recent years the nun and Saint Hildegard von

¹ (Hippocrates, The sacred disease p.845): "But if these things, when administered in food, aggravate the disease, and a fit be cured by abstinence from them, then is God not the cause at all; nor will purifications be of any avail, but it is the food which is beneficial and prejudicial, and the influence of the divinity vanishes. Thus, then, they who attempt to cure these diseases in this way, appear to me neither to recon them sacred nor divine. For when they are removed by such purifications, and this method of cure, what is to prevent them from being brought upon men and induced by other devices similar to these? So that the cause is no longer divine, but human. For whoever is able, by purifications and conjurations, to drive away such an affection, will be able, by other practices, to excite it; and, according to this view, its divine nature is entirely done away with it." (Hippocrates, The sacred disease)

² (Hippocrates, The "Sacred" Disease - The Methods and Origin of Medicine - A Public Health Record p. 307) „But this so-called sacred disease arises from the same causes as any other – the food that enters and the excretions that leave the body, cold weather, the sun, changes of climate – and all these things are divine. There is no need to think that there is anything more sacred about this disease than any other; all are divine in origin, all can be treated by men. Each, of course, has its own peculiarities, but none is beyond human understanding, and all are capable of cure. “

³ (Langholf p. 53) "The symptoms described can all be observed directly through the senses, partly by the physician who feels the body temperature, inspects the vomit, palpates the stomach, examines the skin, the lips, the eyes, and partly by the patient who feels rigor, headache, intestinal pain, heaviness and a disturbance of vision. There must have been a certain amount of questioning, and probably the physician was able to assess the patient's subjective symptoms (e.g. intestinal pain) by secondary signs (e.g. reaction during palpations.) With regard to the aetiology of the "livid disease", there is no speculation. What is significant is the observation of the restricted number of signs. "

Bingen (1098-1179) has become popular among feminist scholars. She collected plants from the Greek-Roman tradition combined it with folk medicine and holistic methods centred on the spiritual healing.

Only after 1348 medicine could be studied at the first medicinal faculty in Prague.

Phillipus, Aureolus Theophrastus Bombastus von Hohenheim better known as Paracelsus (1493–1541) was a radical reformist, a unconventional thinker and a very productive scholarly writer of articles about medicine, nature philosophy, theology, alchemy, pharmacy, astrology and invisible part of nature (Gantenbein). He tried to heal on several levels, the local physical symptom, the whole entity of symptoms, the emotional part, the astrological part, by use of magic and faith. As this seemed often unacceptable he was often pushed out of the village and hence he was constantly moving. Nevertheless he is considered the father of toxicology and one well known citation is “The dose makes the poison” (Paracelsus).

UNORTHODOX AND MAINSTREAM MEDICINE BEFORE 1945

The enlightenment emphasized reason and individualism rather than tradition and is closely tied to the scientific revolution with its discoveries which overturned many traditional concepts and introduced new perspectives on nature and men’s living which was also the beginning of the secularization with its search for meaning of life.

When the Industrial Revolution began and the traditional social structures were dissolving most people had no access to any physicians and pharmacies. Instead they were looking for assistance in pastors, teachers, local herb women, shepherds or lay healers. Lay healers were healers without an official authorisation of being a physician.

Among the physicians, wound healers, the precursor of the modern surgeon, and midwives the standardized education was first introduced only in 1852 in Prussia, the largest state in the German Empire.

Furthermore, one should also take into account that in the early 19th Century the concept of healing of lay healers *and* physicians was the humoral pathology of Hippocrates that means there was *no real difference* in their treatment. The physician worked mainly for rich or urban dwellers and mainly advised and counselled the sick person by adjusting diet or bringing order in their life as there was rarely a surgery or medicine available. In contrast lay healers were an alternative for the rural population and the poor using all kind of other often natural and folk treatment methods.

In the above described environment new healing methods were founded by chance:

Franz Anton Mesmer (1734-1815), a physician founded the MESMERISM. By chance he realized that he could heal a woman suffering from hysteria by laying on of hands initially with magnets and later without. Mesmerism attracted numerous followers in Europe and the United State until around the end of 19th century; yet right from the beginning he was regarded very controversial. In modern Germany Mesmerism is almost forgotten, however, nowadays, similar healing methods like Reiki are quite popular.

When **Samuel Hahnemann** (1755-1843) translated an article about the China bark he was puzzled about arguments why China should be useful in treating Malaria. Therefore, he ate China bark and experienced similar symptoms like a Malaria patient. Based on that experience he also tried poisonous elements however those needed to be diluted and succussed. Surprisingly the latter diluted and succussed substances were even more powerful. Homeopathy was born. In other words Homeopathy treats symptoms with a substance which creates the same symptoms in healthy persons. For example when cutting an onion the cutter’s eye is weeping and the nose might run. So if you have a cold with a runny nose and weeping eye the remedy Allium (Onion) might be the remedy of cure. In fact this method goes back to our ancestors.

Homeopathy is a medicine and science with an independent concept of science. Most criteria of conventional western medicine and natural science are not valid for it and are consequently not appropriate for the evaluation of homeopathy. (Dellmour) Therefore, right from the beginning there were constant doubts of its efficacy!

Three people, independently, experienced the power of water treatment. **Emil Osann** (1787-1842), a physician founded Balneotherapy, Bath therapy and bracing the climate. **Vinzenz Priessnitz** (1799-1851), a lay healer founded Hydrotherapy (Naturopathy), where he was using cold showers, water drinking, enema, and baths or sweating. And **Sebastian Kneipp** (1821-1897), a priest, hence lay healer, was using water treatment und herbs.

All three healing methods, mesmerism, homeopathy and water treatment, claimed that it could heal all diseases by strengthening the sick person’s vital force. They all had the desire to integrate body, soul and mind without dangerous drugs or methods available from the traditional physician. And indeed, they offered a real alternative for many parts of the population to the traditional physician. Hence many **lay movements** for Naturopathy and Homeopathy developed. As the methods were simple and effective travellers, aristocracy, pastor’s sons or theology students often spread those healing methods as well as estate owner and traders (Dinges).

Simultaneously, in mainstream medicine there were also huge developments with the discovery of ether (1840s), the formulation of the *germ theory of disease* by Louis Pasteur in 1864, the discovery of the Bacillus anthracis by Robert Koch in 1876, the development of the vaccines in 1890, the discovery of the X-rays by W. Roentgen providing new diagnostic tools and the availability of the synthetically produced substance of the bark of the willow tree, the famous pain killer “Aspirin” which was around 1900. The scientific community gained recognition and were able to declare disease as “*a pathological condition of a part, organ, or system of an organism...*”⁴, which implied “*every disease has a local beginning and one anatomical place in the body*”. That was the departure from medicine as an art of healing (Warner)!

Hence mainstream and alternative medicine diverged during the late 19th century. That also implied that alternative, unorthodox medicine became a real alternative for rich and urban dwellers as well as poor rural dwellers. However, unorthodox medicine was often offered by lay healers who were often part of the antimodernism movement, a movement which aimed for going back to nature away from industry and their achievements. They wanted to strengthen the vitalis, the inner vital force of the human with natural remedies, with baths, with order, with movements (eurhythmy). All approached the disease holistically, i.e. included body, soul and spirit.

As the unorthodox Medicine had better healing results in big epidemics without noxious side effects as the following Table 1 shows, it could grow further in popularity.

	Mortality among Homeopathy users	Mortality among the Mainstream Medicine
Typhus 1813 in Leipzig (Clarke 993)	0%	About 30%
Cholera 1831 in Russia (Hawley 536 f)	9%	40%
Cholera 1831 in Austria (Hawley 536)	8%	31%
Cholera 1854 in London (Cazalet)	16.4%	53.2%

⁴ The American Heritage Dictionary of English Language 4. Edition: “*A pathological condition of a part, organ, or system of an organism resulting from various causes, such as infection, genetic defect, or environmental stress, and characterized by an identifiable group of signs or symptoms*”

Cholera 1892 in Hamburg (Miner 819)	15.50%	42%
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Table 1: Mortality rates in epidemics in the 19th century among homeopathy users and mainstream medicine users

In contrast, mainstream medicine often used highly addictive medicine like the Heroine (for cough and pains (Uchatius)) or Morphine (for pain relief (Erlenmeyer p. IX)) which are now mainly forbidden or restrained.

Therefore, some physician also practiced homeopathy and naturopathy and some even taught homeopathy at universities (i.e. Samuel Hahnemann and Carl Gottlob Caspari in Leipzig, Joseph Benedikt Buchner in Munich, Friedrich Ludwig Fleischmann in Erlangen, Johann Joseph Roth in Munich, Ernst Bastanier in Berlin (Lucae p. 182)). Often those physicians tried to convey between mainstream medicine and unorthodox medicine. Recognition and rejection of unorthodox medicine was not dependent on the medicinal efficacy! Many people of the mainstream medicine were opposing the unorthodox medicine probably due to social conflicts (Faltin p. 206).

For many centuries there were no regulations about who can treat patients. But according to the Hippocrates oath the physician had the duty to cure whether the person was rich or poor, living in the rural or urban area. In 1851 Prussia introduced a law⁵ in which the duty to cure was legally regulated. However, as a treatment was often impossible due to distances the physicians worked on the legal level for the Kurierfreiheit – the freedom to cure - which was first introduced 1869 in Prussia and 1872 in whole German Empire. Yet that law didn't imply the legalization of the lay-healer! It only implied that treating patients for lay healers were not forbidden where lay healers were people who healed professionally without medical education from an university. Helpers or caring people were excluded as well as people who helped or healed people in the neighbourhood without money like pastors, teachers or other people in that definition. There were also some herb women or shepherd who would treat as well but would act usually as a loner (Faltin p. 211). However, as both physician and local government were not happy with those regulations there was an ongoing continuous discussion which tried to erode the Kurierfreiheit!

From the legal side nobody wanted quackery for the sake of the patient's health, there were medicinal regulations of prohibition of quackery (Verbot der Quacksalberei)^{6,7} depending of the kingdom inside the German Empire. However, most of them were focusing on the profitable selling of drugs or some Arcanum. Nonetheless, if a patient was hurt by some treatment the penalty for the healer was high!

⁵ According to § 200 (Unterlassene ärztliche Hilfeleistung), Prussian StGB (Preußisches Strafgesetzbuch von 1851) from April 14th 1851, the duty to cure (Kurierzwang) was legalized but abolished on June 21st 1869: "Medizinalpersonen, welche in Fällen einer dringenden Gefahr ohne hinreichende Ursache ihre Hülfe verweigern, sollen mit Geldbuße von zwanzig bis zu fünfhundert Thalern bestraft werden."

⁶ In Hamburg 1818, there was a medicinal regulations in Paragraph 99: "prohibition of quackery" (Verbot der Quacksalberei) or in Wuerttemberg there was a law of prohibiting lay healing from 1839. (Faltin p. 224).

⁷ § 199 (Kurpfuscherei) Prussian StGB (Preußisches Strafgesetzbuch von 1851): „Wer, ohne vorschriftsmäßig approbirt zu sein, gegen Belohnung, oder einem besonderen, an ihn erlassenen polizeilichen Verbote zuwider, die Heilung einer äußeren oder inneren Krankheit oder eine geburthülfflichen Handlung unternimmt, wird mit Geldbuße von fünf bis zu funfzig Thalern oder mit Gefangniß bis zu sechs Monaten bestraft. Diese Bestimmung findet keine Anwendung, wenn eine solche Handlung in einem Falle vorgenommen wird, in welchem zu dem dringend nöthigen Beistande eine approbirte Medizinalperson nicht herbeigeschafft werden kann.“

Therefore, in order to overcome the stigma of quack, lay healers founded associations and adjusted to modern medicine by continuous education and learning modern medicine!

The naturopaths, homeopaths and the balneopaths were not a *uniform group* but instead were discussing various points of alternative medicine in very different ways. Some thought that they just need to strengthen the vital force and hence the sick body may be able to overcome diseases. While many *Anti-modernistic Worldview* lay healers condemned all drugs including herbs and remedies, homeopaths were and are still thinking that remedies are necessary. Furthermore, they were very open to all kind of approaches including some superstitious methods. In addition, Kneipp healers and homeopaths accepted substances and worked with medical institutions while others avoided all cooperation with the established medicine.

Life reform movements

After the enlightenment, the secularization, the crumbling of old, the industrial revolution and the emerging of new structures created the *Life Reform Movements* with the Anti-modernism Worldviews. Among the Anti-modernism movements there were several new life reform movements which formed lay associations like the Naked movement, the Vegetarianism, the Anti-alcoholism movement, the Garden-city movement with ecological agriculture, the New religious movements (i.e. Free Pentecostal churches, Jehovah's witness), the Occult Worldview (which included occultism, astrology and Anthroposophy), the Anti-Semitism, racism and many more.⁸



Figure 2: Carl Gottlob Caspari Homeopathischer Haus und Reisearzt 1833

Homeopathy lay associations

As homeopathic remedies were rather cheap and not necessary everywhere available many of the lay association had their own homeopathic home care pharmacy kit. With self-care books and with the support of lay naturopath/lay homeopath or a homeopathic physician they were able to provide simple healing methods. Therefore, homeopathy was a good alternative to orthodox medicine. Many lay associations preferred a physician homeopath, but as not enough were available, lay homeopath were also asked. (Faltin p. 301)



Figure 1: Homeopathic Home remedy Kit from the Homöo-pathischen Central-Apotheke Hofrat V. Mayer, Canstatt" (around 1900) (Historische-Apotheke.de)

Especially, if one considers that the orthodox medicine often used heavy drugs like Heroin or Opium for pacifying, depressions, cough and headaches. Both were prescribed by physicians and distributed by Bayer from 1897 to 1930s.

By 1914, 2% of the Wuerttemberg's Population (small kingdom inside the German empire which is now part of the state Baden-Wuerttemberg) were members in one of the homeopathic associations. They offered social gatherings, leisure activities and homeopathic knowledge and treatment in form of self-care. About 444 associations were part of the umbrella lay organisation Hahnemannia, founded in Stuttgart in 1868, in the kingdoms of Wuerttemberg and Sachsen.

⁸ The Naturopathy lay movements and *homeopathic lay movements* weren't a real Weltanschauung but were only a part of the Life Reform Movements! (Faltin p. 71)

That means the lay associations were very strong and hence were able to prevent a law against the Kurierfreiheit in 1910 (Faltin p. 226)! In addition they were strong enough to push forward the acceptance, scientification and integration of naturopathy and homeopathy in mainstream medicine.

Health insurance

The first extensive health insurance law for workers was introduced in 1883. In that law the free treatment for everybody was formulated.⁹ As most physician were still more in the city the rural people had to pay the lay healer themselves (especially after the Kurierzwang was gone and with the introduction of the Kurierfreiheit 1872)¹⁰!

Lay Healers and Physicians

While at the beginning of the 19th century, especially for the poorer parts of the society, the lay healer was often the only option for receiving medical care by the end of the century the lay healer became a real alternative for all parts of the society (Faltin p. 207).

Lay healers (Faltin pp. 233) were mainly from the middle class, often spoke the language of their clients and used more time for the anamnesis of their clients. Although, the lay healers covered the same spectrum as the physician they often charged less – hence they hardly could survive from their work! As many lay healers were part of the anti-modernist movements and open for all kind of new approaches like occultism, spiritism, mysticism which was exactly the opposite of the exact science oriented medicine, many clients were attracted by those approaches. Nonetheless, lay healers tried to overcome the **stigma of quackery** by professionalization and by building associations. As there was no legal support for them and as the physicians continuously were fighting against them a real professionalization could not take place. Yet, many famous homeopaths were lay healers like Hahnemann's second wife Melanie Hahnemann and Clemens Boenninghausen (1785-1864).

Error! Reference source not found.¹¹ shows lay healers and physicians in Württemberg from 1872 until 1935. In 1872 only few lay healers treated clients in comparison to physicians. Over the next 40 years this changed considerably. In 1914, one third of the healing profession were lay healers and less than two third physicians. When in 1919, Prussia incorporated Naturopathy in the university the numbers physicians increased and lay healers declined!¹²

⁹ One third was paid by the employer and two third by the employee (§17, II, 1 of Reichsrankenversicherungsrecht, 1883) (Häpe p. 84). The employee received a sick payment after the 3rd day and 50% of the pay up to 13 weeks. The physician treatment cost, the medicine and medical aids (including glasses), hospital treatment, were also covered. Furthermore, there was also a maternity benefit and a death benefit. (§10, II, 1 of Reichsrankenversicherungsrecht, 1883) (Häpe p. 49)

¹⁰ Initially, lay healers were not excluded in that law, however, only few were accepted by the insurances. In 1914, in an additional law (Reichsversicherungsordnung) the lay healers were excluded from injured benefits (Faltin p. 231)

¹¹ The numbers are taken from (Faltin p. 251). In 1934: 5.8 Mio clients visited a Heilpraktiker and in 1938 70% of the people questioned in a poll of the society of consumer research had trust in the physician. That means about 1/3 of the poll rejected the orthodox medicine and would rather go to a lay-healer or use self-medication (Faltin p. 264).

¹² (Faltin 266): Even convinced follower of the Alternative Medicine would prefer a licenced physician who applies the healing method.

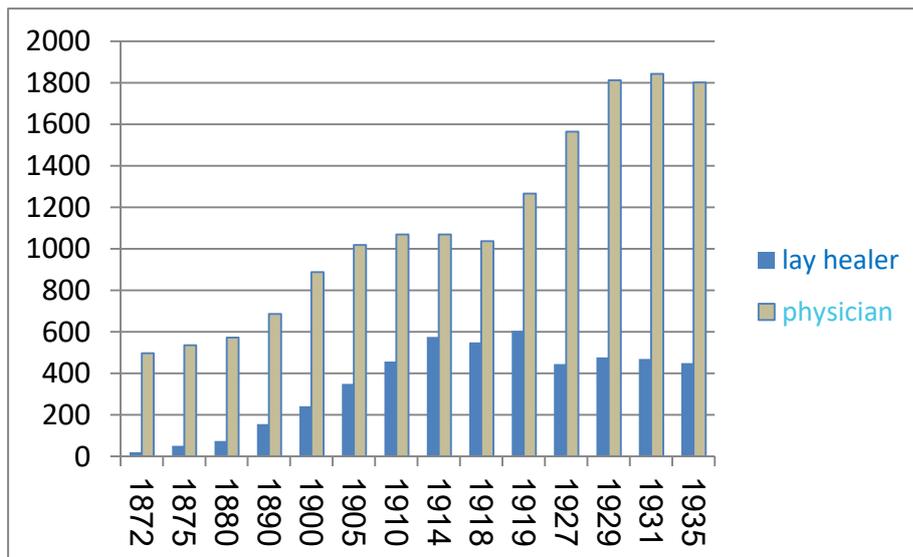


Figure 3: Lay healers and licensed physicians in Wuerttemberg

Naturopathy moves towards Mainstream Medicine

As Naturopathy and Homeopathy had very good results, physicians took over some parts of the unorthodox medicine and hence tried to introduce it on the university level as well. The first hospital in Naturopathy was founded in Berlin in 1901. In 1905, Professor Ludwig Brieger was called to be the first professor for physical and diet healing methods at the Friedrich Wilhelm's University in Berlin (Immanuel Krankenhaus Berlin. Naturheilkunde)¹³. By 23.5.1919 Prussia passed a bill to incorporate practical and theoretical naturopathy at all universities that means new chairs were created. By 1920 Prof Dr. med Franz Schöneberger was appointed the first chair in "General Naturopathy" at the Friedrich-Wilhelm's University in Berlin (Immanuel Krankenhaus Berlin).

Under the Nazi regime in 1933 all lay healer organizations were united and in 1934 *all* pharmacies had to have the homeopathic pharmacopoeia in Germany.¹⁴ Lay healers were legalized by law as Heilpraktiker although the education of lay healers was prohibited in 1939.

Even though the Heilpraktiker was not a well-defined profession he needed to be state-approved. Part of the approval was the basics of anatomy, physiology and pathology. He had to know his rights and duties and he could serve clients like a nurse with first aid, wound treatment, taking blood and giving injections. His fees were (and still is) determined in a table of charges!

UNORTHODOX AND MAINSTREAM MEDICINE AFTER 1945

After the war the Heilpraktiker law was based on the pre-war one from 1939 in West Germany. In Eastern Germany the Heilpraktiker law was displaced by the approbation of the physicians.¹⁵

¹³ Prof Brieger was professor for internal medicine and general therapy at the same university since 1890 (Immanuel Krankenhaus Berlin. Naturheilkunde).

¹⁴ Even today all pharmacies have to have the homeopathic pharmacopoeia!

¹⁵ Initially the education of lay healers in West Germany was prohibited as it was in the law of 1939 but after the constitutional court declared the denial of education as illegal in 1952 the profession had its clear legality! After the reunion of both German countries only 11 Heilpraktiker in East Germany were left!

After the end of Second World War new very potent drugs were introduced like the antibiotics. In 1955 the corticosteroid drug Prednisone and Prednisolone were introduced as an immunosuppressant drug. In the early 60s the Contraceptive pills became available. New potent drugs against Asthma and Cough were developed like Alupent (1961), Bisolvon (1963), Berotec (1972), Atrovent (1975), Berodual (1980). In 1963 the first psychoactive drug Valium (diazepam) and in 1973 the nonsteroidal anti-inflammatory drug Diclofenac/Voltaren were launched. Similarly, with the development of Sonography in the 1940s, the Computer Tomography (CT) in 1972 and the Magnet resonance tomography (MRT) in 1973, the diagnostic medical equipment developed rapidly as well.

It was a time where everything seemed possible. The Patient got the impression that Modern Medicine is able to treat all illnesses.

However, during those years of huge development in the pharmaceutical and diagnostics industry the German population experienced a dramatic increase of allergic diseases such as asthma, hay fever, or food allergies which causes rising treatment costs and an increasing burden for the national economy. Although the mortality rates of allergies are not very high, the patient experiences a considerable loss of quality of life (Böcking C.). Furthermore, as only the pathology, the place of the disease, was considered and hardly the whole being (pathogenesis) many clients began to questioning the narrow view.

Scandals in Mainstream Medicine

Many medicines were used like wonder drugs against many symptoms without knowing the side-effects. For example in 1961/62 it became clear that *Contergan*, a safe declared drug against morning sickness, sleeping pill and tranquilizer appeared as a medicine damaging the developing of the foetus and hence many children without extremities were born. Some years later, in 1968, *Menocil*, a wonder drug for reducing the appetite resulted in pulmonary hypertony with sometimes death. In 2001 Lipobay (Bayer), a medicine to lower cholesterol levels and preventing cardiovascular disease resulted in many deaths (renal failure and muscle damage). In 2004 *Vioxx*, A popular anti-pain medication probably had resulted in as many 55.000 deaths due to heart attack or stroke. In 2008, *Abilify*, a medicine against depression, bipolar disorder, was used for indications not approved.

Those scandals raised the awareness among patients and many were beginning to look for new ways of health care. The change in the perception of the patient is clearly visible in the rise of Heilpraktiker!

Figure 4 shows the development of Heilpraktiker after the World War II.

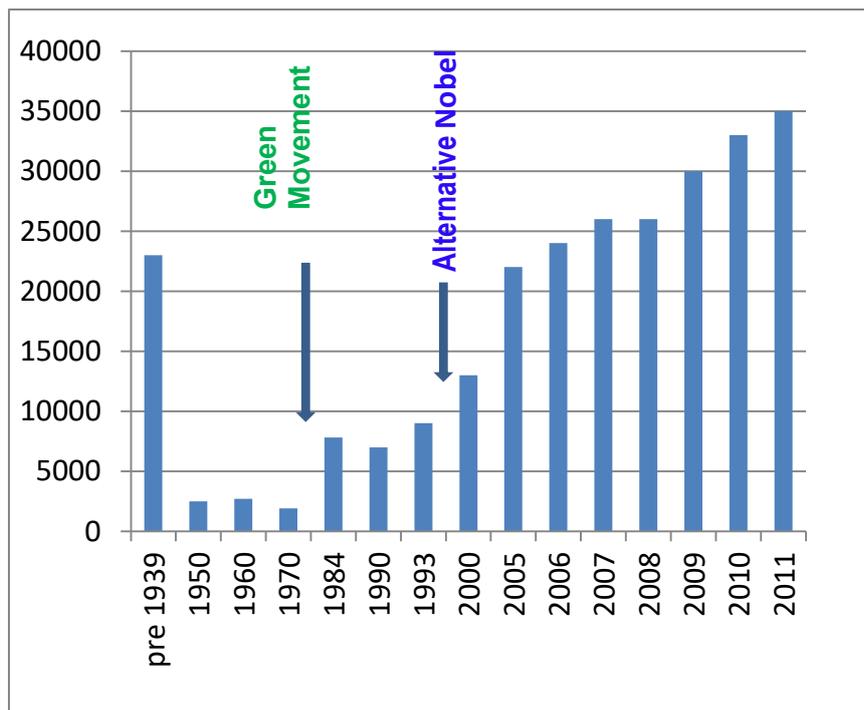


Figure 4: Number of Heilpraktiker after World War II in Germany

The Contagan (1961/62) and Menocil (1968) scandal just opened the perception but with the green movement in the late 70s and early 80s many things changed! It was a time when many began questioning the strategies of the government (security retrofitting) and the strategies of multinational companies like Nestle, which was marketing artificial Baby food in the developing countries. The populations began to criticize various project, they got proactive!

In 1996, Georg Vithoulkas, a well know lay homeopath, won the alternative Nobel Prize or the right livelihood reward “for his outstanding contribution to the revival of homeopathic knowledge and the training of homeopaths to the highest standards”. The reward made the German population even more aware of alternative treatment methods.

In 2010, Dr. Luc Montagnier, the French virologist who won the Nobel Prize in 2008 for discovering the AIDS virus, surprised the scientific community with his strong support for homeopathic medicine in a remarkable interview published in the *Science Magazine* December 2010 (Enserink). Alternative Medicine was all of a sudden part of the ongoing scientific research.

The demand for alternative healing methods rose among patients therefore the German Health Insurances adjusted as well. Currently, almost all statutory health insurance are covering the treatment cost of homeopathy if provided by physicians. Often other healing methods like Traditional Chinese Medicine (TCM), anthroposophic medicine¹⁶, phytotherapy and osteopathy are also covered if provided by physicians. Additional reasonable private health insurances, which cover the treatment costs of Heilpraktiker up to a certain limit, are also available.

¹⁶ Anthroposophical medicine is a form of alternative medicine that in part complements and in part replaces mainstream medicine. Founded in the 1920s by Rudolf Steiner (1861–1925) in conjunction with Ita Wegmann (1876–1943), anthroposophical medicine draws on Steiner's spiritual philosophy, which he called anthroposophy. Anthroposophical practitioners employ a variety of treatment techniques including massage, exercise, counselling and the use of anthroposophical medicine. The latter is also applied in their agricultural practice.

In Germany there are currently 15 hospitals or clinics offering Homoeopathy incl. geriatric department, internal medicine, psychiatry, 2 university hospitals, day clinics for psychiatric cases, children's hospital and a cancer Clinic (Switzerland) and 18 naturopathic clinics with 9 Anthroposophical clinics including hospitals, internal medicine and psychosomatic departments.

Support from big foundations in Germany

Robert Bosch and his own Robert Bosch foundation opened a homeopathic clinical and research hospital with about 200 beds in Stuttgart in 1940. However, in 1956 Homeopathy disappeared in the internal medicine department. By 1973 the homeopathic outpatient department was also closed. That means research aspiration could only be performed during the first few years. In 1980 the Institute of History of Medicine (IGM) of the Robert Bosch foundation was founded. This is the only extra-university institute of history of medicine in Germany.

The Karl and Veronica Carstens foundation, named after the former president of Germany Karl Carstens (1979-1984) and his wife Veronica Carstens is promoting Naturopathy and Homeopathy since 1982 especially on the university level. During the Winter semester 2014/15 homeopathy could be studied as elective subjects at 8 universities¹⁷.

Contemporary situation in Alternative Medicine

In 2009 and 2014 the *Institut für Demoskopie Allensbach*, a respected opinion and market research institute, performed a poll about "the usage of homeopathic remedies" among 1853 people over 16 years old. According to that poll, see Figure 5, about 60% of that population have taken homeopathic remedies in 2014 which is more than double from 1970 and 7% more than in 2009! (Allensbach)¹⁸

¹⁷ See <http://www.carstens-stiftung.de/artikel/wahlpflichtfach-homoeopathie-die-semesterplaene-der-universitaeten.html>.

¹⁸ As more immigrants and refugees from outside Europe are living in Germany the percentage of "haven't even heard of it" probably rose from 6% to 8% in the last 5 years.

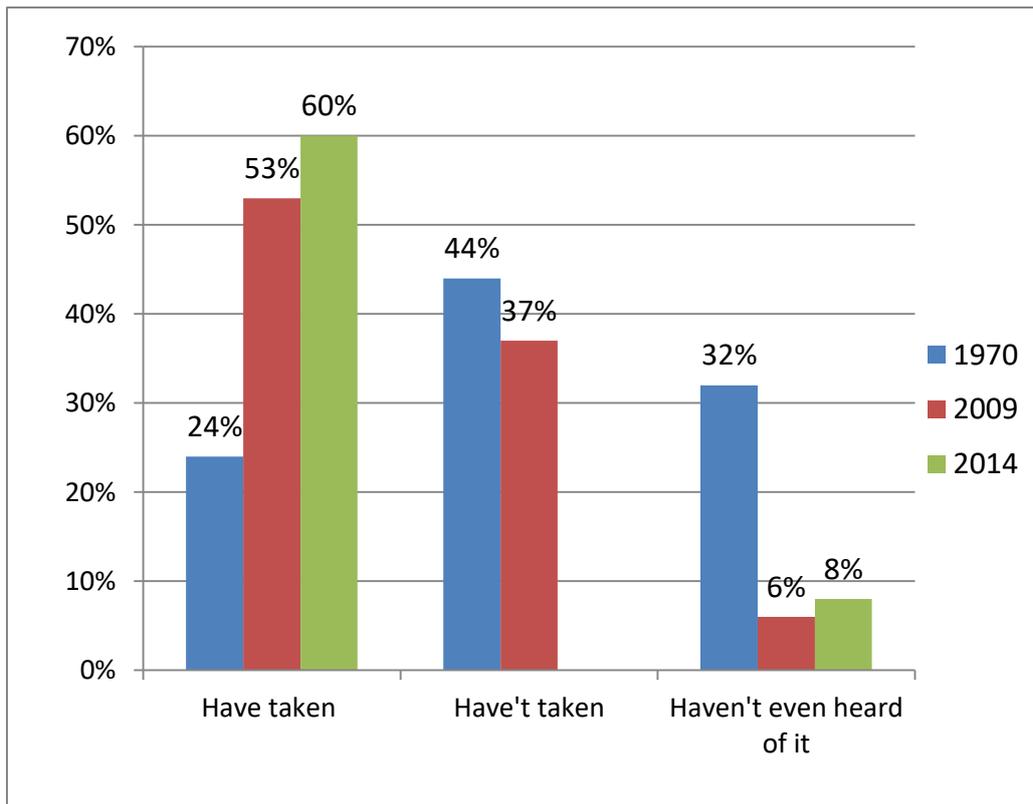


Figure 5: Have you ever taken homeopathic remedies? (Allensbach)

In German pharmacies the customers can buy health or beauty related products, prescriptive and over-the-counter drugs (which are only available in pharmacies).

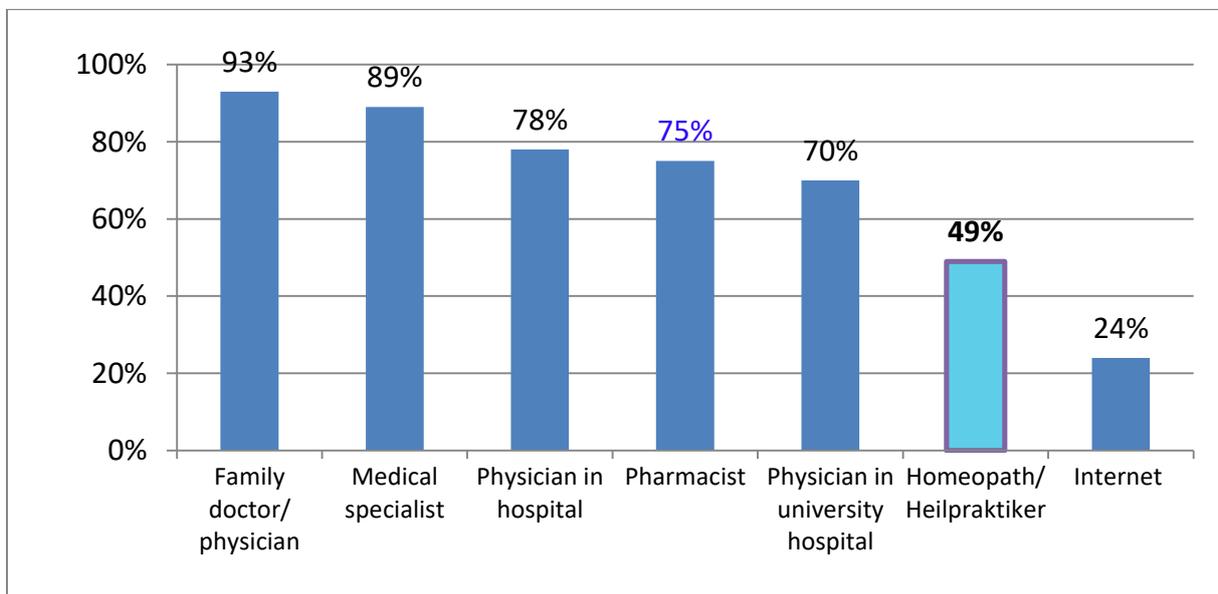


Figure 6: To whom do you confide in health issues? - Percentage of people questioned¹⁹

In health matters most patients rely on the family doctor, but many customers might go to the pharmacy and ask for suggestions. In fact 75% of the German population would go to the

¹⁹ Poll in Germany: Vaield Research Feb 2009; 2.000 people were asked from 18 years (Young p. 19),

pharmacist, even more often than visiting a physician in a university hospital. And almost half of the population, 49%, are visiting a homeopath or Heilpraktiker; see Figure 6 (Young).

Who are using Complementary Alternative Medicine (CAM)

Several studies are focusing on the profile of the patient population using CAM treatments. The following trend is noticeable: The average user is a health conscious female between 30 and 50 years hence younger than the non-CAM-users. The level of education and the income level are higher. (Gudrun Bornhöft p. 79)

In a recent study (Büssing A), intended to analyse the usage of specific CAM practices among a population of older German adults with health insurance coverage, it became clear that CAM is predominantly used for chronic diseases. However, healthy individuals also used it, probably to maintain or protect health. Most often it is applied by medical doctors (because of the study design). Therefore, the application by Nonmedical Practitioners (NMPs) is much lower in the analysed population, which was paid in most cases by the patients themselves.

Older individuals, particularly cancer patients, pray in search of additional resources of external help. In contrast, younger German patients suffering from chronic pain conditions, spirituality or religiosity can be resource to assist in coping (Büssing A).

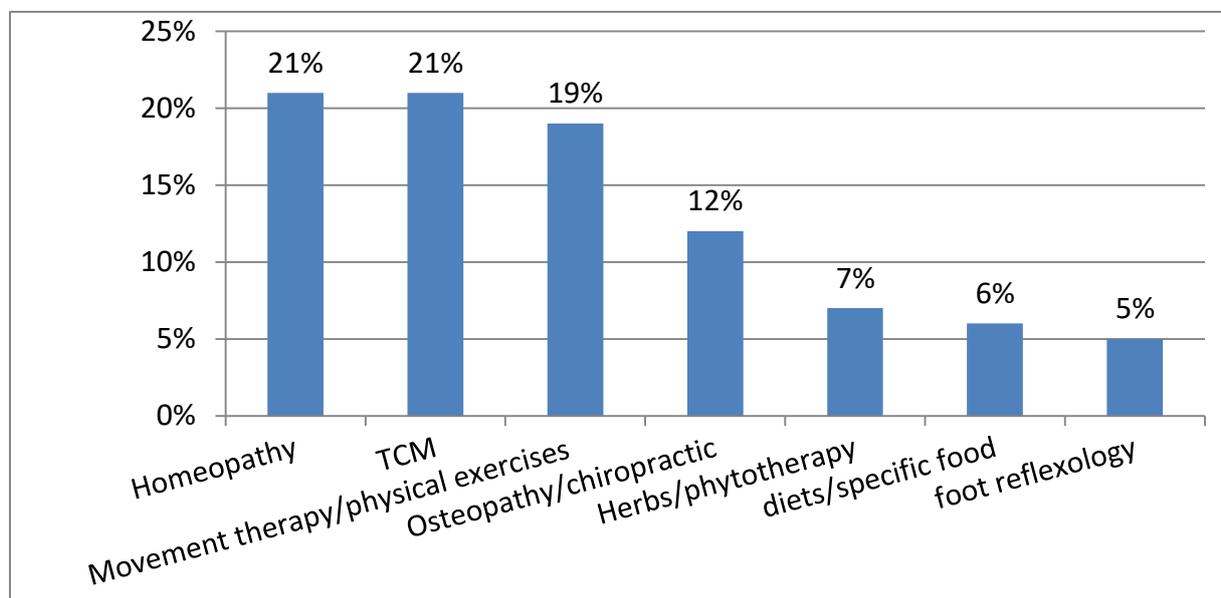


Figure 7: Alternative Treatment Methods of Older Individuals with health insurance coverage (Büssing A)

Figure 7 shows the alternative treatment usage among 5830 older individuals with health insurance coverage. Homeopathy and TCM were both used by 21% of the patients. (Büssing A).

According to the KBV²⁰ in 2000 about 10% of all physicians had some addition education in CAM – mainly in Naturopathy, Chiropractic, physical therapy and homeopathy, see Figure 8 (Marstedt Gerd p. 7)

²⁰ Kassenärztliche Bundesvereinigung (KBV), Table 2 in (Marstedt Gerd 7)

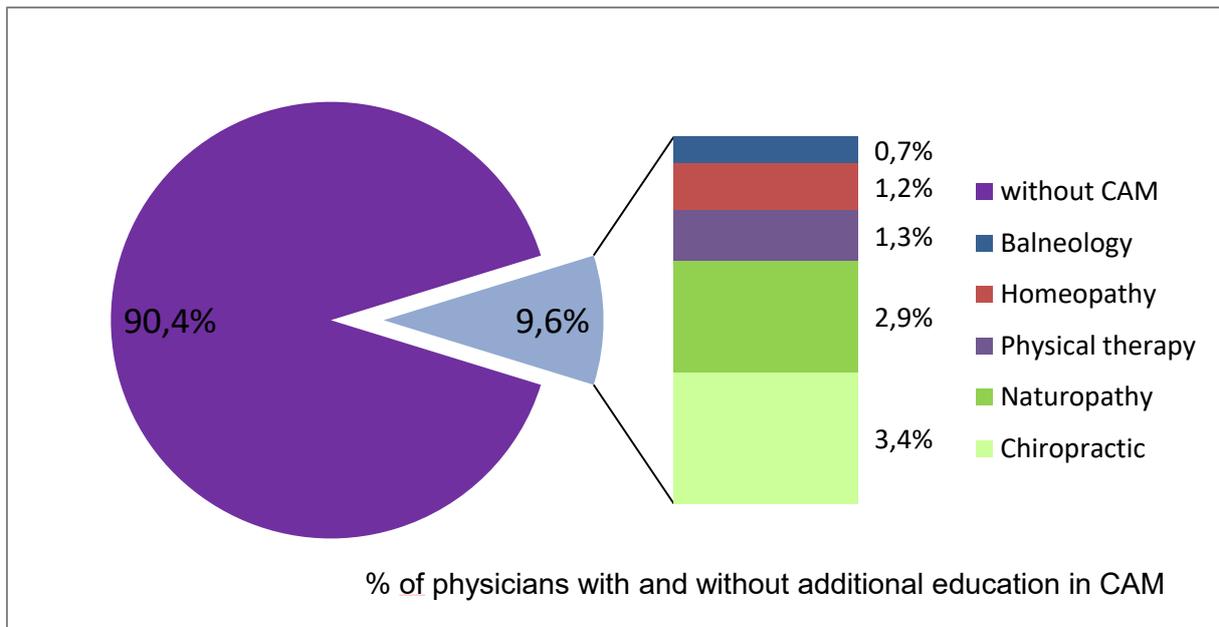


Figure 8: Integration of Unorthodox Medicine into Mainstream Medicine, Table 2 of (Marstedt Gerd)

Not every German person goes directly to the physician for receiving medicine in need. Often they use over the counter medicine (OVM).

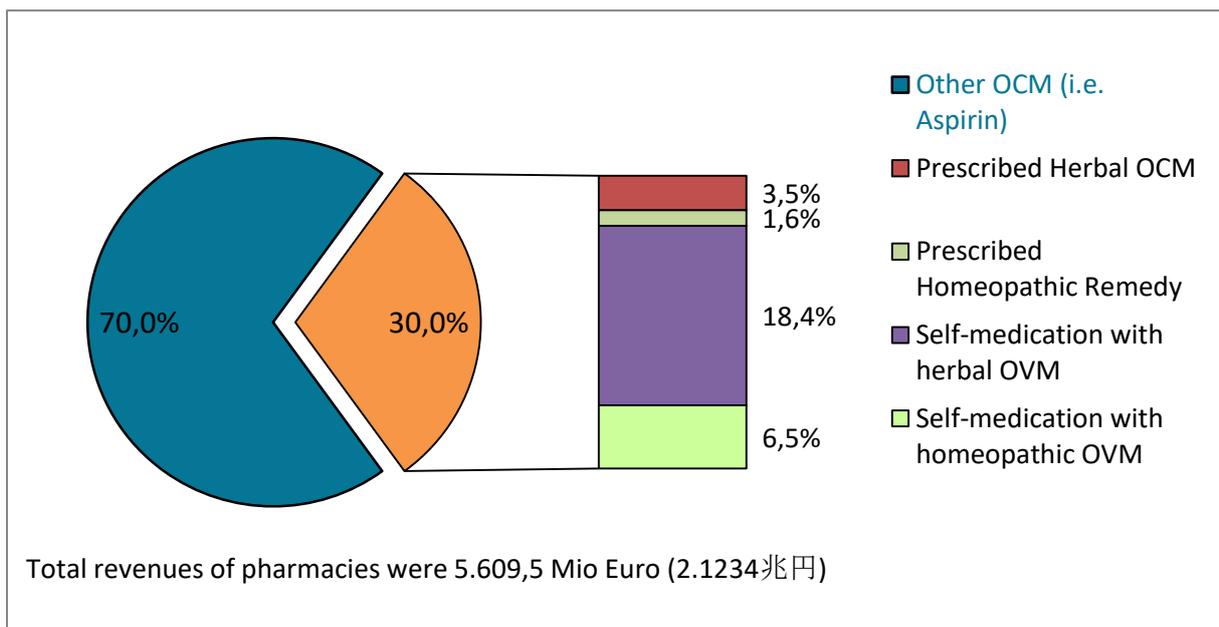


Figure 9: Over the counter medicines (OVM)(in 2013 in % of total revenues) (Arzneimittel-Hersteller Table 9)

In Figure 9 one sees that about 30% of all over the counter medicine is either herbal or homeopathic. That means that both have a big influence in the pharmaceutical market. The revenues for homeopathic medicine are rather low in comparison to herbal drugs (33%-50%), because of the low costs of the homeopathic remedies (Arzneimittel-Hersteller).

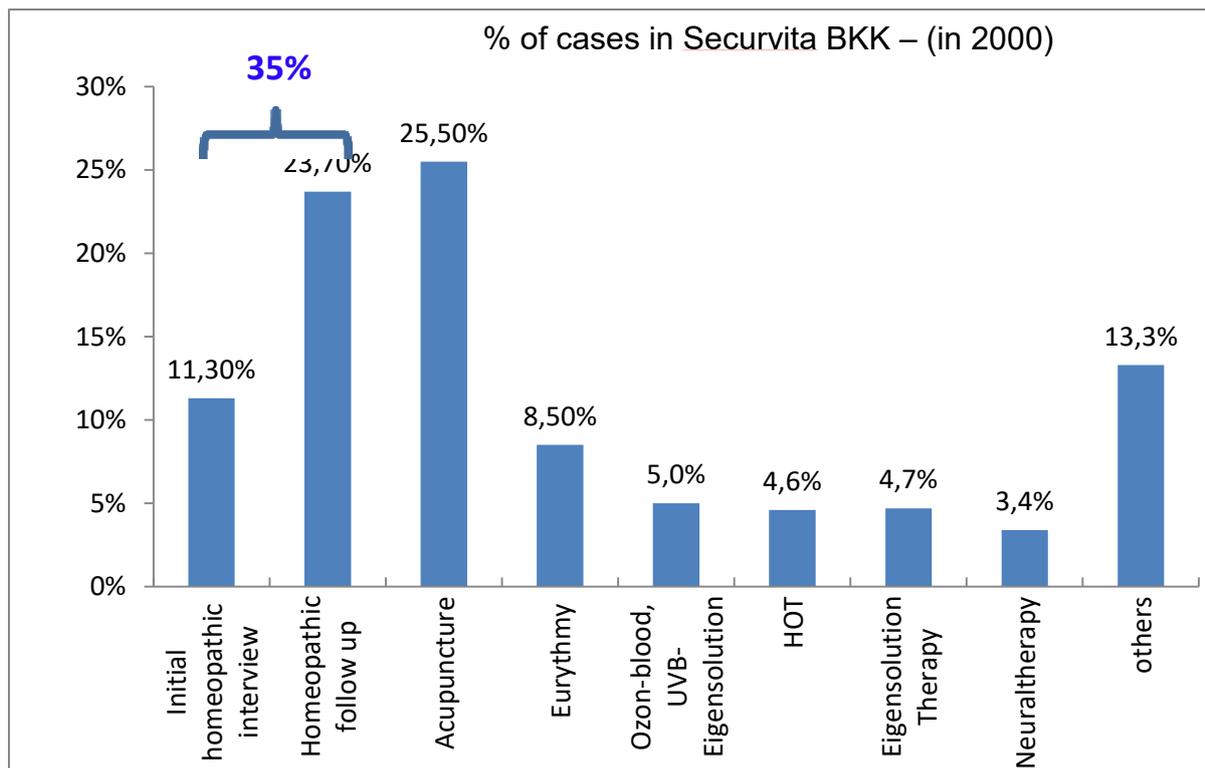


Figure 10: Special therapies provided by physicians with CAM (Marstedt Gerd Table 4),

One Private Health Insurance, SECURVITA BKK, well known for alternative treatment, covered a variety of treatment including initial and follow up of Homeopathic treatment, Acupuncture, Haematogenous oxidation therapy (HOT), Ozon-blood therapy, UVB-Eigensolution therapy and others²¹. That means, more than one third of all CAM treatments, see Figure 10, were homeopathic treatment²² among physicians with additional education in CAM (Marstedt Gerd Table 4). Therefore, medical sociological researchers recognize that the growing popularity of alternative healing methods is the first indication of an “erosion of medical care structures” (Kahrs M).

Do experiences with CAM have influence on the patient's acceptance of the suggested treatment method of the general practitioner? Marstedt et al in 2002 (Marstedt) found the following relationship: While only 23% of those who have no personal experience are looking for information regarding to illnesses, 52% of the people with many experiences with CAM methods would try to get more information regarding to illnesses. Similarly, only 17% of those who have no personal experience had declined a treatment method suggested by general practitioner, 52% of the people with many experiences with CAM methods had declined a treatment method suggested by general practitioner.

²¹ Other therapies includes painting therapy (2.2%), rhythmical massage according to Wegman (2.7%), Talking Gestalt (1.1%), Accupressure (1.6%) and others (5.7%).

²² either initial or follow up

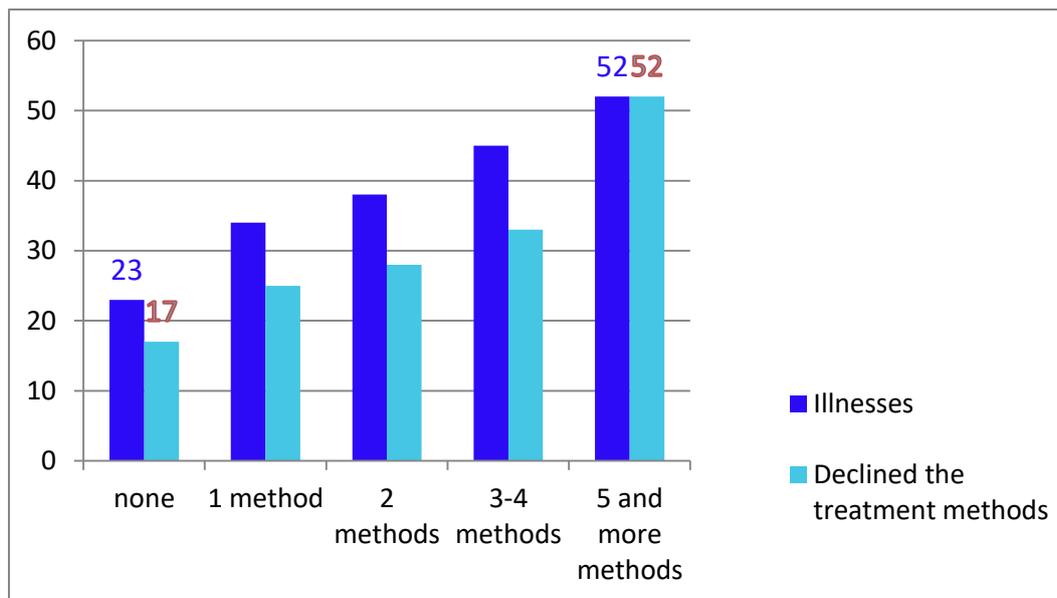


Figure 11: Information Interest to health issues according to the client's experience with CAM (Marstedt)

Regarding Health care and trust van den Brink-Muinen and Rijken (A van den Brink-Muinen) concluded that chronically sick clients turn their heads to alternative medicine, because chronically ill people have a relatively low level of trust in health care. The less trust patients have in health care, the more they will be inclined to use CAM, when controlling for socio-demographic and disease characteristics. However, they trust certified alternative practitioners less than regular health care professionals and non-certified alternative practitioners. Hence trust is a significant predictor of CAM use. Their conclusion is that trust in future health care is a significant predictor of CAM use. Chronically ill people's use of CAM may increase in the near future. Health policy makers should, therefore, be alert to the quality of practicing alternative practitioners, for example by insisting on professional certification. Equally, good quality may increase people's trust in public health care.

In fact the same was true at the end of the 19th century which resulted in the professionalizing of the lay healers. Today due to the pressure of the population the qualification of a Heilpraktiker is higher than 20 years ago.

Gerd Marstedt states that Clients are collecting all sorts of information regarding the causes of their illnesses and their therapy possibilities! (Marstedt) They accept that some symptoms are an expression of their state, *Salutogenesis*, and not necessarily a disease, *Pathogenesis*. Many desire more communication and social support in the medical care which may include sometimes low level psychotherapeutic elements. That means those health conscious patients desire a soft medicine and want to improve their own self-healing powers and they don't agree to only **one expert attitude**. They want to be actively included into their decisions finding process. Especially Patients who are better informed about the cause of their illnesses and its possibilities to treat it, they want to talk in the consultation with the physician (see Figure 11). They desire more communication and social support in the medical care. Sometimes they desire more pastoral care, or some kind of talking or psychotherapeutic elements. Furthermore, they all think that the western medicine is too speechless, too expertized, too authority oriented! Hence, they are just very disappointed of the Western medicine. However, the typical physician has no time and no training to deal with those patients!

In Germany apart from Heilpraktiker (=state-licences, non medical CAM practitioners), some general practitioner provide CAM in their practices. In a recent study about the role of CAM (Stefanie Joos) was investigated. The majority of participating GPs had integrated one or

more CAM therapies into their everyday practice. The paper aimed to explore the attitudes of GPs about the role of CAM in Germany, in relation to the healthcare system, quality of care, medical education and research. And they concluded that Heilpraktiker are partly seen as *competitors and partly as co-workers* filling the gap by providing services that focus on humanity, time and empathising with patients who often complain about the contemporary medical system. The overall costs of the healthcare system could be reduced by integrating CAM. Even though CAM-physicians were more expensive regarding consultations the expenditures for drugs were less compared to Non-CAM physician. The focus group of the study the opinion was "that the overall costs of the healthcare system could be reduced by integration of CAM" (Stefanie Joos pp. 11,12).

That means for the health insurances CAM is becoming an important factor for reducing the costs.

SUMMARY

The demand for unorthodox treatments in the past was covered by lay healers (**Heilpraktikers**) and later when reliable results were available physicians were taking over some of those achievements. Lay groups were vital for the development of CAM. On the hospital, university level and research level big foundations were important. The patient gradually changed from being passive to being proactive. The current medical situation in Germany is that Heilpraktiker and Physicians are *competitors* and co-workers.

LITERATURE

A van den Brink-Muinen, PM Rijken PM. "Does trust in health care influence the use of complementary and alternative medicine by chronically ill people?" *BMC Public Health*. 2006; 6: 188. n.d.: Published online Jul 18, 2006. doi: 10.1186/1471-2458-6-188 PMID: PMC1544335. <Published online Jul 18, 2006. doi: 10.1186/1471-2458-6-188>.

Allensbach, IFD. *Statista 2009*. n.d.

Arzneimittel-Hersteller, Bundesverband der. *Apothekenumsatz mit rezeptfreien homöopathischen und pflanzlichen Arzneimitteln nach Marktsegment in den Jahren 2011 bis 2013 (in Millionen Euro)*. Page 8: Krahe Druck, 2014.

Böcking C., Renz H., Pfefferle P.I. "Prävalenz und sozioökonomische Bedeutung von Allergien in Deutschland." *Bundesgesundheitsblatt - Gesundheitsforschung - Gesundheitsschutz* (2012, Volume 55, Issue 3): 303-307.

Büssing A, Ostermann T, Heusser P, Matthiessen PF. "Usage of alternative medical systems, acupuncture, homeopathy and anthroposophic medicine, by older German adults." *Journal of Chinese Integrative Medicine: Volume 9 Issue 8 2011*: 847-856.

Cazalet, Peter Morell & Sylvain. *The history of the London Homeopathic hospital* . n.d. <<http://homeoint.org/morrell/londonhh/outbreak.htm>>.

Clarke, John Henry. *A Dictionary of Practical Materia Medica*. New Dehli: B. Jain Publisher Ltd, 1921.

Dellmour, Friedrich. "Criticism of Homeopathy Part 3: The concept of Science of Homeopathy." *Homöopathie in Oesterreich* (2009): 19-25.

Dinges, Martin. *European History Online*. 3 12 2010. <<http://ieg-ego.eu/de/threads/europa-und-die-welt/wissenschaft/martin-dinges-homoeopathie>>.

Enserink, Martin. "Newsmaker Interview: Luc Montagnier, French Nobel Escapes "Intellectual Terror" to Pursue Radical Ideas in China." *Science* (2010): 1732.

Erlenmeyer, Albrecht. *On the treatment of the Morphine Habit*. Detroit Michigan, 1889.

- Faltin, Thomas. *Heil und Heilung*. Stuttgart: Medizin, Gesellschaft und Geschichte: Beiheft; 15, 2000.
- Gantenbein, Prof. Dr. Urs Leo. "Paracelsus, Theophrast von Hohenheim - Übersicht über seine Werke." Dane, Dr. Michaela. *Die Heilgeheimnisse des Paracelsus - Alchemistische Heilpraxis für unsere Zeit*. Berlin: Ullstein Buchverlage GmbH, 2008. 33-35.
- Gudrun Bornhöft, Peter F. Matthiesen. *Homeopathy in Healthcare - Effectiveness, Appropriateness, Safety, Costs*. Heidelberg: Springer-Verlag GmbH, 2011.
- Häpe, Georg. *Krankenversicherungsrecht nach dem Reichsgesetze vom 15. Juni 1883*. Leipzig: Roßberg'schen Buchhandlung, 1885.
- Hawley, W.M. "Article LIII - Report of Committee on Life Insurance." *The North American Journal of Homeopathy, Volume 14* 1866.
- Hippocrates. "The "Sacred" Disease - The Methods and Origin of Medicine - A Public Health Record." Paul L. MacKendrick, Herbert M. Howe. *Classics in Translation, Volume 1: Greek Literature*. Madison, Wisconsin: University of Wisconsin Press, 1952. p. 307.
- Hippocrates. "The sacred disease." Adams, Francis. *Genuine works of Hippocrates*. London: Sydenham Society, 1849. 843.
- Historische-Apotheke.de. *Homeopathic House Pharmacy*, <http://www.historische-apotheke.de/reiseapotheken/>. n.d. <https://encrypted-tbn0.gstatic.com/images?q=tbn:ANd9GcTrL1JMD4lvfihmYneJzP1hf2Az6jMCng_bWL-zxXM9tv_AFHMC1g>.
- Immanuel Krankenhaus Berlin. n.d. <<http://naturheilkunde.immanuel.de/einrichtung/ueberuns/geschichte/>>.
- Immanuel Krankenhaus Berlin. *Naturheilkunde*. 01 1903. <<http://archive-de-2014.com/openarchive/3465321/2014-01-04/0a80ef4aa3435bfc7cf7d6c83f>>.
- Joos Stefanie, Musselmann Berthold, Miksch Antje, Rosemann Thomas and Szecsenyi Joachim. "The role of complementary and alternative medicine (CAM) in Germany – A focus group study of GPs." 2008. *BMC Health Services Research* 2008, 8:127 doi:10.1186/1472-6963-8-127.
- Kahrs M, Marstedt G, Niedermeier R, Schulz T. "Alternative Medizin". Paradigma für veränderte Patienten-Ansprüche." *Arbeit und Sozialpolitik* 1-2 2000: 20-31.
- Langholf, Volker. *Medical Theories in Hippocrates: Early Texts and the "Epidemics"*. Hamburg: de Gruyter, 1990.
- Lucae, Christian. *Homoeopathie an deutschsprachigen Universitaeten: die Bestrebungen zu ihrer Institutionalisierung von 1812 bis 1945*. Heidelberg: Haug, 1998.
- Marstedt Gerd, Moebus Susanne. "Inanspruchnahme alternativer Methoden in der Medizin." Institut, Robert Koch. *Gesundheitsberichterstattung des Bundes Heft 9*. Robert Koch Institut, 2002.
- Marstedt, Gerd. "Die steigende Popularität alternativer Medizin – eine Suche nach medizinischen Gurus und Wunderheilern?" Böcken, J., Braun, B., Schnee, M. *Gesundheitsmonitor 2002, Die ambulante Versorgung aus Sicht von Bevölkerung und Ärzteschaft*. Gütersloh 2002: Bertelsmann Stiftung, 2002. 112-129.
- Miner, T. Potselueva & P.M. "Naturopathic interventions at the emergency situations." Glaznikov, Ravil Nigmedzyanov and Lev. *Situations, Victims in Emergency*. n.d. 783-867.
- Paracelsus. *Dritte Defensio*. 1538.

- "Preußisches Strafgesetzbuch von 1851." n.d.
<http://koeblergerhard.de/Fontes/StrafgesetzbuchPreussen1851.pdf>.
<<http://koeblergerhard.de/Fontes/StrafgesetzbuchPreussen1851.pdf>>.
- Uchatius, Wolfgang. *Vom Hustensaft zum Rauschgift*. 2008.
<<http://www.zeit.de/2008/12/Heroin-Kasten>>.
- Warner, John Harley. "The Art of Medicine in an Age of Science: Reductionism, Holism, and the Doctor-Patient Relationship in the United States, 1890-1960." *Healing Alternatives: Care and Education as a Cultural Lifestyle*. Osaka: Senri Ethnological Reports, 2014. 55-91.
- Young, Ernst and. "Gesundheitsbarometer 2009, Verbraucherbefragung zur Qualitaet der Gesundheitsversorgung in Deutschland." 2009. <http://www.leipziger-forum-gesundheitswirtschaft.de/phocadownload/2009_02_peter_lennartz.pdf>.