

# Isaac Golden

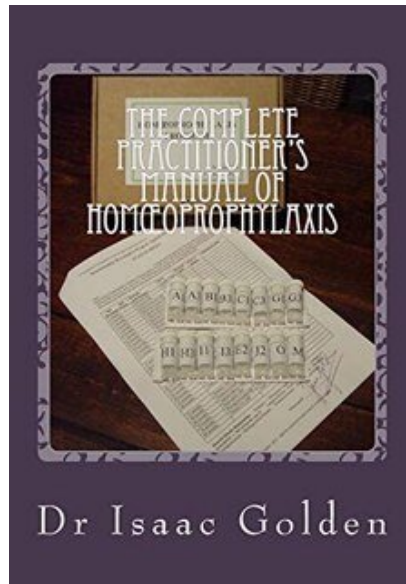
## The Complete Practitioner's Manual of Homoeoprophylaxis - Mängelexemplar

Extrait du livre

[The Complete Practitioner's Manual of Homoeoprophylaxis - Mängelexemplar](#)

de [Isaac Golden](#)

Éditeur : Emryss Publisher



<https://www.editions-narayana.fr/b30566>

Sur notre [librairie en ligne](#) vous trouverez un grand choix de livres d'homéopathie en français, anglais et allemand.

Reproduction des extraits strictement interdite.

À Narayana Verlag GmbH, Blumenplatz 2, D-79400 Kandern, Allemagne

Tel. +33 9 7044 6488

Email [info@editions-narayana.fr](mailto:info@editions-narayana.fr)

<https://www.editions-narayana.fr>



# **The Complete Practitioner's Manual of Homœoprophylaxis**

Dr Isaac Golden, PhD

**Emryss**

## **Foreword**

It is a great pleasure to be able to offer a foreword to Isaac's new text. This is an urgently needed book. Even though it is primarily aimed at and pitched for practitioners, it is also needed by students, sceptics, media and bureaucrats.

It is more than ironic that homeopathy, currently finding itself at the fringes of complementary medicine (CAM) and struggling against consistent and orchestrated attacks, is receiving significant validation from data coming out of research into homœoprophylaxis (HP). Controversial even to homeopaths, HP sends some medics and opponents of CAM apoplectic. Little about homeopathy is more poorly understood than this area. It has been like this from the outset. Over the years misuse of terms has been prevalent and there has been a profound lack of listening by those on different sides of the debate. Vaccination is a complex issue which cannot be addressed in any short discussion. It requires time and depth. There is significant debate about the effectiveness and long-term safety of certain vaccines, but its suggested alternative – HP – that is a perfect storm of controversy.

Some homeopaths are not against vaccination itself, as it is based on a very similar concept to homeopathy, yet raise concerns about possible long-term side-effects caused by toxic substances used in vaccines, such as aluminium oxide. Most homeopaths do not give direct advice on vaccinations. They recommend that patients discuss vaccination with their GP as well as specialist organisations that can provide information about the pro and cons of vaccination, so the patient can make an informed choice. But it must also be acknowledged that some other homeopaths are obstinately against vaccination and embrace all sorts of alternatives. They will not move from that position. They perceive vaccine damage as being a common occurrence in daily practice. They also point to the positive evidence suggested by HP programs. But some take it further, lazily making maverick statements and claims for which there is no credible evidence and going head to head with government agencies. This book will assist in understanding what can and cannot be claimed, what research has been undertaken to date, and what the gaps are in the research.

Then there are those who shy away from the HP debate because of its red hot inflammatory reaction from the conventional medical profession. It needs to be understood that HP puts medical homeopaths in an unenviable position. As vaccination and homœoprophylaxis are so politically sensitive, they often seek to minimise any discussion on these topics in the media. For those medical homeopaths that absolutely recommended the vaccination schedule and are actively against HP this book will also provide food for thought.

But as well as homeopaths, sceptics and critics of homeopathy would benefit from reading and exploring Isaac's research. Equally lazy statements about homeopathy having no credible research can no longer be sustained in the light

of the latest developments in robust, high-end research into homeopathy found here. Further, the media need it for when they weigh into the debate. Pro and anti-vaccination networks need it to establish some clarity on just what each side is saying. Bureaucrats in regulatory settings in the halls of government need it. And professional organizations representing homeopathy and complementary medicine need it. Policy decisions need to be made and these tend to fall on the extremely conservative side.

Homeopathy as a whole, and advocates of homœoprophyllaxis have benefited significantly from the results of recent research that suggest that it may be effective in countering epidemic disease. In this work, Isaac explores the unqualified success of an HP intervention programme led by Dr Bracho in Cuba in 2007, which involved a homeopathic medicine being given to 2.3 million people at high risk of infection with the potentially fatal disease Leptospirosis. The results suggest that the homeopathic medicine lead to a “drastic reduction” in the number of cases of the disease, “resulting in complete control of the epidemic.” This study was carried out by the Finlay Institute – a company with decades of experience in the development and production of conventional vaccines. This evidence, coupled with Isaac’s own research in the field of HP for children’s infectious diseases make a compelling case for more exploration.

This book explores history, theory, philosophy, opinion and research. There is immense value in Isaac sharing his experience. But in addition, he has spent decades now collating and drilling down into the data. His personal experience and insights are set against the research publications and academic work he has engaged in. It is important to have such clear statements about what HP is and isn’t. From the opening paragraph the language used is careful and accurate. The debate is also placed in its historical context. I value that the time has been taken to explore the historical roots and application of HP. I find it intriguing to learn that the debate goes to the origins, to understand that HP was first employed in 1798 and vaccination in 1796.

Yet while measured in the most part, there is also a resilient position and a line drawn in the sand. There are some big statements too. HP in Isaac’s or a skilled homeopaths hands may have ‘provided unambiguous safety’, and his research points to this, but homeopathy is not a level playing field. Within countries like Australia and certainly worldwide there are clearly different levels of proficiency in practice and understanding and application of the theory of homeopathic medicine. In fact in the application of HP there have been some scary practices that have done nothing but harm to homeopathy in pushing the debate forward.

Isaac has strong opinions. Not everyone agrees. On the one hand, Isaac is not shy from butting heads with Professor George Vithoulkas or Dr Peter Fisher who don’t share his views from within the homeopathic community. Some homeopaths recommend that patients follow the recommended vaccination schedule, unless it is contra-indicated. Nor is he backward from taking on

interviewers on Chanel 10 breakfast television in Australia. Moreover he is fine going up against medical professors and sceptics. In doing so, some homeopathic scholars and academics might disagree with his interpretation and emphasis of homeopathic history. In addition, he advocates empowering parents. Some public health officials in the halls of power would counter that parents don't have the capacity or skills to untangle the issues and that public servants are in the best seat to determine protection against epidemic disease.

In his protocol he uses high potencies in the main. Not all homeopaths would agree. The challenge with protocols, even within natural medicine settings is that they are designed for the normal person, but where is that person, and do they exist? Often I have been asked to provide remedies for travel or domestic HP and have provided them along with the relevant literature, but I continue to get calls and emails about management issues; what to do for this acute or that drama that has come along and intervened in the process.

What is clear about Isaac is that politics don't matter so much. Isaac is a follower of the Truth. That vaccination is a modern sacrament of modern medicine is no grounds for leaving it alone because it might court controversy or hot media attention. For him, in truth there is clarity and simplicity.

Ultimately this is an important book for more than just practitioners, but proponents of and opponents of homeopathy. The debate about vaccination is so emotionally laden. Those who are "pro" accuse those who are "anti" of killing babies by leaving them unprotected. Those who are "anti" accuse those who are "pro" of ruining the chronic health of entire populations. No one who passionately cares about health (and both sides of the debate do) wants to hear this. The only way forward is through dialogue, research and unemotional observation of the evidence. This work takes us firmly in that direction.

Isaac explains the theoretical and conceptual framework of the homœoprophylactic approach. He provides the historical context. He discusses the observable data. The conclusion is clear – based upon this body of work, more research into the long-term effects of conventional vaccines and the effectiveness of potential homeopathic alternatives is essential.

Alastair Gray  
Endeavour College of Natural Health, Sydney  
2012

# Acknowledgements

I would like to thank the following colleagues who have reviewed earlier drafts of this manual:

Dr Gustavo Bracho (Cuba); Moniek Brands (Holland); Dr Nick Goodman (Australia); Dr Avraham Grundl (Israel); Peter Guinee (Holland).

And my friends and colleagues in Australia:

Elvian Drysdale; Alaistar Gray; Suzanne McQueen; Valerie Probert.

A special thanks to Ananda More (Canada) for a most thorough review.

And thanks again to an old friend, Dr Mary-Faeth Chenery, for tidying up the text and making me look more literate than I really am.

Any remaining errors and omissions are my responsibility alone.

## STYLE NOTES:

1. From now on, homœoprohylaxis will usually be referred to as **HP**.
2. The Harvard system of referencing will be used, where the name of the author and the year of publication will be referred to, with full details provided in the Bibliography at the end of the book.
3. I have chosen to use the following spellings; *homeopathy* and *homœoprohylaxis*. Although not my purpose, I know this will irritate both those who prefer the American spelling using “*eo*” and those who prefer the traditional European spelling “*æo*” consistently in both words. I prefer “*æo*” but recognise that this is fading from common usage, so I have compromised. Further, I know that some believe that we should use “*eo*” when Nosodes are used and “*æo*” when genus epidemicus remedies are used for prophylaxis. I won’t pursue this debate further in this book as my programs contain both types of remedies and so consistent use of either option will still be regarded as incorrect. May I ask that you mentally substitute your preference where appropriate?

## Preface

The title is both pretentious, and has dual meaning.

I hope that this work will describe all there is to be known about homœoprophylaxis (HP), thus making it complete. I have been using and researching HP for nearly 30 years and this book is an attempt to record that knowledge and pass it on to others.

I also believe that a practitioner needs to be fully aware of what HP has to offer to be a complete practitioner (especially a homeopathic practitioner). I am not saying that they need to agree with, or personally use HP, only that they need to understand the principles and practices of the method and the choices which HP offers parents who are deciding whether to protect their children against targeted infectious diseases, and what options are available.

It seems with hindsight that part of my dharma (or purpose) this life has been to try to support one part of Hahnemann's homeopathy that has been accepted by some, but greatly neglected and indeed shunned by other members of the international homeopathic community. I believe this has largely been due to a combination of ignorance and fear, and the proven way of dispelling both is by providing factual information.

And that is the clear purpose of this book – to fully explain what HP is, its history, and how to use the method in practice for both short-term and long-term prevention (Chapters 1-4); its proven and measured safety and effectiveness (Chapters 5 and 6); as well as to address various philosophical considerations about HP (Chapter 7); and finally to suggest a mechanism of action (Chapter 8). A brief Appendix comparing vaccination and homœoprophylaxis is included.

This Manual is principally a resource for health practitioners from any modality, not just homeopaths, but of course may be of value to others with a deep interest in the topic. It is also intended to be a reference book for students of homeopathy who often receive inadequate training in HP.

# Introduction

I began clinical practice in 1984. I came to this with awareness that vaccination had the potential to cause damage to recipients due to the experience with one of my own children. I had no idea that homeopathic medicine had anything to offer in terms of (a) treating vaccine damage, and (b) eliminating the need to vaccinate by providing an historically tested method of infectious disease prevention.

When I first read Hahnemann's article describing his experience with both treating and preventing scarlet fever I was very excited, as well as disappointed that I had not been taught this during my studies. I knew, as a parent, there was a need to offer parents an option to vaccination and now saw that homeopathic medicine offered this option.

I collected all the references that I could about HP, which were very few indeed given that I had no access to old journal articles. But an excellent little booklet by Sankaran summarising the experience of around 100 practitioners (Sankaran P, 1961), plus some references in the writings of Hahnemann, Kent and Boenninghausen, among others, gave me confidence to proceed.

I released my first 5-year HP program in 1985/86. It was unashamedly intended to be a direct alternative to the then current vaccination program in Australia. My early training in economics and statistics proved to me the need for objective data-based research in this area and was invaluable in conducting this ongoing research. So accompanying the instructions for how to use the HP program was a questionnaire for parents to complete concerning their child's experience with the program.

The accumulating responses to the questionnaire have formed the basis for progressive articles and books which I have written on the topic since 1986, when my very first article appeared in *Nature & Health* magazine in Australia (Golden, 1986). The first edition of my main book for parents then titled *Vaccination: A Review of Risks and Alternatives* was published in 1989 (Golden, 1989). Successive editions and rewrites of this book appeared up to the 5<sup>th</sup>.

In 2005 I published the 6<sup>th</sup> edition, which involved a total re-write and restructuring of the book, with a slightly different emphasis that was reflected in the new title, *Vaccination & Homœoprophylaxis? A Review of Risks and Alternatives*. It was updated in 2007 (Golden, 2007b). This



followed my Doctoral research into HP at Swinburne University in Melbourne from 2000 to 2004. The 7<sup>th</sup> edition was released in 2010 and involved a comprehensive updating of references plus the inclusion of data from the Cuban HP interventions.

This research also informed the changes I made to the program in 1993, 2004 and 2012 which are discussed in Chapter 4.

These days **I call for the implementation of a dual system of immunisation, where parents are free to choose between vaccination and HP.** Ideally, the choice of either immunisation option would be supported by orthodox authorities.

It has been a long, interesting and challenging journey. I have been opposed and investigated by the orthodox authorities in Australia, and questioned by colleagues within the homeopathic community. I have also received numerous letters and emails from grateful parents who are overjoyed and relieved that a safe and relatively effective alternative to vaccination exists.

So I now come to this new book: my aim is to offer to homeopaths as well as practitioners from any modality, including orthodox practitioners, my accumulated experience into how to design a structured homœoprophyllaxis program for short or long term prevention of targeted infectious diseases.

Two points need to be made clear from the beginning:

1. Nothing on the planet can guarantee 100% protection against infectious diseases. Vaccination doesn't; homœoprophyllaxis doesn't; and even getting the infectious disease once doesn't ensure that a person won't become infected a second time.
2. There is no such thing as **homeopathic vaccination**. Homeopaths do not vaccinate, but we do offer a method of immunising against future infections. Homeopathic immunisation (or homœoprophyllaxis) is not an attempt to mimic the vaccination pathway. It is a completely different and unique method of reducing the likelihood of developing the symptoms of an infectious disease if exposed to it.

Vaccination was first used by Dr Edward Jenner in 1796.

Homœoprophyllaxis was first used by Dr Samuel Hahnemann (the founder of homeopathy) in 1798.

The two methods were developed independently of each other. Vaccination is currently a huge money earner for orthodox practitioners and particularly for pharmaceutical companies. It is literally a billion dollar business. Homœoprophylaxis offers very modest returns for both practitioners and homeopathic pharmacies. Possibly the differences in financial returns explain why one is much more commonly used than another. But economic considerations are not central to this work.

Homœoprophylaxis has an unambiguous history of providing a strong level of protection, and a clear record of long-term safety. It is controversial, but this is mainly because it is not well understood, including by some teachers of homeopathy. The purpose of this book is to provide clear and proven direction of how to implement both short-term and long-term homœoprophylaxis programs.

It is a practical book, but also covers the main conceptual and philosophical aspects of the immunisation decision.

## **Table of Contents**

Foreword.....	v
Acknowledgements.....	viii
Preface.....	ix
Introduction.....	x
Table of Contents.....	xiii
List of Tables and Figures.....	xvi
<b>PART 1: PRACTICAL PREVENTATIVE PROGRAMS</b> .....	<b>1</b>
1. What is Homœoprophylaxis?.....	2
2. Do We Really Need Homœoprophylaxis?.....	4
3. Short Term Homœoprophylaxis in Practice.....	7
<b>3.1.</b> The Historical Use of Short-Term Homœoprophylaxis.....	7
<b>3.2.</b> Remedies Commonly Used for Short-Term Homœoprophylaxis....	14
<b>3.3.</b> HP Remedies for Common Acute Conditions.....	14
<b>3.4.</b> HP Remedies for Overseas Travel.....	16
<b>3.5.</b> Instructions for Short-Term HP and Travel Protection Remedies ...	18
<b>3.6.</b> The Nosode vs. the Genus Epidemicus Remedy in Short-Term Prevention.....	20
<b>3.7.</b> The Potency and Frequency for Short-Term Prevention.....	21
<b>3.8.</b> Practical Problems with Short-Term Prevention.....	22
<b>3.9.</b> The Comparative Advantage of HP in Changing Epidemic Conditions.....	25
4. Long Term Homœoprophylaxis in Practice.....	27
<b>4.1.</b> Long-Term HP in Practice.....	27
<b>4.2.</b> Not all HP Programs are the Same.....	35
<b>4.3.</b> Commonly Asked Questions Regarding Long-Term HP.....	38
<b>4.4.</b> The HP Consultation: Patient Education.....	54
<b>4.5.</b> The Selection of Remedies in a Long-Term HP Program.....	56
<b>4.6.</b> Antibodies and Homœoprophylaxis.....	57
<b>PART 2: THE EVIDENTIARY BASIS OF HOMŒOPROPHYLAXIS</b> .....	<b>60</b>
5. The Effectiveness of Homœoprophylaxis.....	61
<b>5.1.</b> Four Types of Evidence Supporting Homœoprophylaxis.....	61
<b>5.2.</b> The Historical Effectiveness of Homœoprophylaxis.....	61
<b>5.3.</b> The Effectiveness of Epidemic or Short-Term Homœoprophylaxis	62
<b>5.4.</b> The Effectiveness of My Long-Term Homœoprophylaxis Program	63
<b>5.5.</b> Effectiveness of Massive Regional and National Homœoprophylaxis Interventions.....	68
<b>5.6.</b> A Summary of the Effectiveness of Homœoprophylaxis.....	79
<b>5.7.</b> RCTs v's Comprehensive Data Analysis.....	80
6. The Safety of Homœoprophylaxis.....	84
<b>6.1.</b> The Safety of Homeopathic Medicines in General.....	84
<b>6.2.</b> The Safety of Golden's Long-Term HP Program.....	85

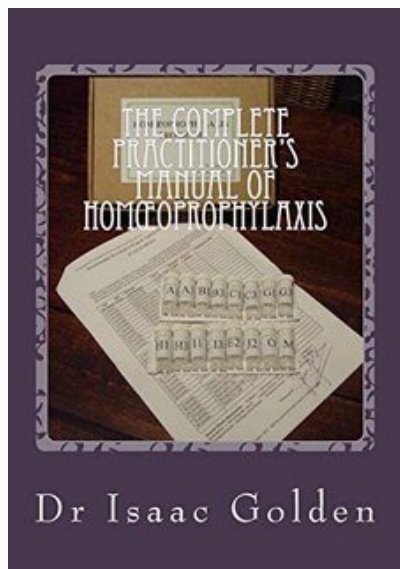
6.3.	Short-Term Reactions to Golden’s HP Program.....	85
6.4.	The Long-Term Safety of Golden’s HP Program .....	91
6.5.	Final Conclusions Regarding the Effectiveness and Safety of Golden’s Long-Term HP Program.....	94
PART 3: THE PHILOSOPHICAL BASIS OF HOMŒOPROPHYLAXIS ..		95
7.	Philosophical and Practical Concerns Regarding Homœoprophyllaxis ..	96
7.1.	Treatment, Not Prevention .....	96
7.2.	Epidemics Only .....	98
7.3.	The Genus Epidemicus Only.....	99
7.4.	Nosodes and Isodes .....	100
7.5.	The Risks of Homœoprophyllaxis; Potency and Frequency .....	101
7.6.	Prevention or Treatment.....	103
7.7.	Prevention or Palliation .....	104
7.8.	The Length of Prevention.....	106
7.9.	Conclusions Regarding Philosophical Aspects of HP.....	107
8.	An Explanation of How Homœoprophyllaxis May Work .....	108
8.1.	The Proving Model of Protection.....	109
8.2.	The Energetic Model of Homœoprophyllaxis.....	110
8.3.	Concluding Comments on the Mechanism of Action of HP.....	115
8.4.	Concluding Comments on the Conceptual Basis of HP.....	115
9.	Conclusions.....	117
10:	Appendices.....	118
10.1:	Appendix 1: A Brief Comparison of HP and Vaccination .....	118
10.2:	Appendix 2: 2012 Kit Instructions.....	120
10.3:	Appendix 3: Some Characteristics of Targeted Infectious Diseases ...	129
10.3.1	Chicken Pox (Varicella-Zoster).....	131
10.3.2	Cholera .....	132
10.3.3	Dengue Fever.....	133
10.3.4	Diphtheria .....	134
10.3.5	Haemophilis influenzae type b (Hib) .....	135
10.3.6	Hepatitis A.....	137
10.3.7	Hepatitis B .....	138
10.3.8	Hepatitis C .....	140
10.3.9	Human Papiloma Virus .....	141
10.3.10	Influenza .....	142
10.3.11	Japanese encephalitis.....	144
10.3.12	Leptospirosis.....	144
10.3.13	Measles .....	145
10.3.14	Meningococcal disease .....	147
10.3.15	Mumps.....	149
10.3.16	Pertussis (Whooping Cough).....	150
10.3.17	Pneumococcal disease .....	151
10.3.18	Poliomyelitis.....	152
10.3.19	Rotavirus.....	155

10.3.20	Swine Flu.....	156
10.3.21	Rotavirus.....	157
10.3.22	Rubella.....	158
10.3.23	Swine Flu.....	159
10.3.24	Tetanus .....	159
10.3.25	Tuberculosis .....	162
10.3.26	Typhoid.....	163
10.4:	Appendix 4: Reactions to HP Remedies.....	164
10.5:	Appendix 5: General Comments by Responding Parents.....	174
	Significant References .....	208
	General Bibliography.....	211

# List of Tables and Figures

Table 3.1: Remedies for Short-Term Homœoprophylaxis ..... 15 (Australian example)..... 15	15
Table 3.2: Remedies for Overseas Travel (Australian example)..... 16	16
Table 3.3: Instructions for Short-Term HP and Travel Remedies ..... 18	18
Table 3.4: Covering Letter for Overseas Travel ..... 19	19
Figure 4.1: The Long-Term HP Program Packaging..... 29	29
Table 4.1: My Current (2012) Long-Term Homœoprophylaxis Program... 32	32
Table 4.2: The Status Sheet of the Current (2012) Program..... 33	33
Table 4.3: Remedy Changes Between the 1993 and the 2004 Programs ..... 34	34
Table 4.4: Comparison of HP Programs ..... 36	36
Table 4.5: Comparative Results of HP Programs: ..... 37 Golden and Not-Golden ..... 37	37
Table 5.1: Some Measures of the Effectiveness of Homœoprophylaxis ..... 62	62
Table 5.2: Summary of Findings of Long-Term HP Research ..... 65	65
Table 5.3: National Attack Rates and the Efficacy of HP ..... 66	66
Table 5.4: Tests to Validate the Results Reporting the Efficacy of Long- Term HP ..... 67	67
Map 5-1: Cuba, Showing the Intervened Region..... 69	69
Figure 5-1: Leptospirosis, IR and RC, 2004-2008 Monthly Average Weighted per Head of Population..... 69	69
Figure 5-2: Leptospirosis in IR and RC, 2007, Weekly Cases ..... 70	70
Table 5.5: November and December Totals 2000-2007 ..... 71	71
Table 5.6: Hurricanes in Cuba in 2008 ..... 71	71
Figure 5-3: Leptospirosis Confirmed Cases per Month in IR and RC from 2004 to 2008 ..... 72	72
Figure 5-4: Leptospirosis in 2007, Actual and Predicted Incidence ..... 73	73
Table 5.7: Japanese Encephalitis Incidence in Andhra Pradesh 1991-2004. 78	78
Table 5.8: Japanese Encephalitis in 2001 in some states in India ..... 79	79
Table 5.9: Research Parameters Needed to Evaluate HP ..... 83	83
Table 6.1: Reactions to Remedies in Golden’s Long-Term HP Program..... 86	86
Table 6.2: A Summary of the Intensity and Duration of Reactions to the Series 11-15 HP Program, by Respondent Who Provided Details ..... 88	88
Table 6.3: Time Profile of Definite Reactions to Program Medicines by Respondent..... 90	90
Table 6.4: Summary of Evidence of the Safety of Long-Term HP ..... 91	91
Table 6.5: The Long-Term Safety of HP and Other Immunisation Methods 92	92
Table 10.1.1: Comparison of Vaccination and Homœoprophylaxis..... 118	118
Table 10.3.1: Summary of Disease Characteristics ..... 129	129

Table 10.3.2 Studies on the Effect of Daily Administration of (I.V.) 1000mg of Ascorbic Acid as Supplement to Conventional Treatment on the Recovery of Tetanus Patients.....	161
Table 10.4.1: Reactions to HP Remedies - Series 1-5 .....	164
Table 10.4.2: Reactions to HP Remedies - Series 6-10 .....	166
Table 10.4.3: Reactions to HP Remedies - Series 11-15 .....	170
Table 10.5.1: General Comments by Responding Parents - Series 1-5 .....	174
Table 10.5.2: General Comments by Responding Parents - Series 6-10 ...	181
Table 10.5.3: General Comments by Responding Parents - Series 11-15 .	190



Isaac Golden

[The Complete  
Practitioner's Manual of  
Homoeoprophylaxis -  
Mängelexemplar](#)

A Practical Handbook of  
Homeopathic Immunisation

242 pages,  
publication 2012



**acheter maintenant**

Plus de livres sur homéopathie, les médecines naturelles et  
un style de vie plus sain [www.editions-narayana.fr](http://www.editions-narayana.fr)