



In an inspirational interview, Suse Moebius, member of the Board of Directors of the Society of Homeopaths, explores the success of the first ten years of the Homeopathic Research Institute (HRI). She explores from its humble beginnings to its current position as a major player in the promotion of, and advocacy for, high quality homeopathic research, with the founding member Dr Alex Tournier and CEO Rachel Roberts.

THE HRI : CELEBRATING THE FIRST TEN YEARS

Q: You both come from a strong science background and both were once sceptical. How did you each end up thinking, “Yes, I’ll study homeopathy”?

Alex: I had recently finished studying theoretical physics in Cambridge. I went to start my PhD in the quantum mechanics of living systems. Then I fell ill and was sleeping up to 19 hours a day. The doctors didn’t know what was wrong with me. Basically, they told me to just go home, so I tried a lot of therapies.

Homeopathy was one of the least impressive. You see a homeopath in her living room with big dusty books and she gives you three little pills. My homeopath told me, “Take when needed”. A few weeks later, it was pretty bad, so I thought “when needed” might be “now”. I took the packet out of the drawer, took a pill and went to sleep. Ten minutes later, literally, I woke up and I had a normal day. Nothing I had tried until then had remotely had an effect of this nature.

I was brought up in France, where homeopathy is normal, so I was open to the idea that it could work, but as a physicist, I knew it wasn’t

supposed to work. Now we know I had Lyme Disease, which at the time was pretty much unknown. Eventually, I fully recovered and I knew I wanted to research this.

Rachel: I would be called a skeptic now, as my view was 100% that there should be no alternative medicine. They’re quacks, preying on the public. Conventional medicine was it, the real thing.

Then I started to have experience of conventional meds failing spectacularly. I developed neuromas in my feet and I was in agony. I was told I was making it up by doctors. Finally, a doctor gave me the diagnosis. They operated, but the neuromas grew back.

At the same time, my husband at the time, an actor, was in a West End musical, and he said, “We have a woman called Diana who treats the actors”. He basically dragged me there. An hour later, I walked out and I was in less pain than I had been for years. Before this treatment, it was like walking on knives. She said, “Come back in six weeks, we can do this”.

A few weeks later, Diana was killed in a car crash. This one woman who I thought could maybe help me was dead. Then I knew that I wanted to find out what homeopathy was, and that that was what I wanted to do in my life.



About the author

Suse Moebius RSHom has been practising homeopathy since 2000, having studied at Purton House School of Homeopathy and the University of Westminster. She runs a private clinic from home and also provides free and low cost homeopathy services at two clinics in central London. Suse is a member of the Board of Directors of the Society of Homeopaths and is also chair of the Society's Research Committee, enhancing her long-standing interest in the promotion of scientific research into homeopathy. She has both fundraised for and collaborated with the Homeopathy Research Institute and has an active interest in the political and social landscape that informs healthcare and attitudes to CAM in the UK. Suse is a strong advocate for integrated healthcare and dreams of an NHS with a fully integrated CAM healthcare policy.



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The first book I could find on homeopathy was by a German medic. It was quite basic: this was this case, this is how I cured it, like it was normal. That's when I thought, “That's it, that's what I want to do”, so I went to the College of Homeopathy in Regent's Park and that was that.

Q: Alex, do you remember the spark that set you off?

Alex: It was in my third or fourth year. I knew I wanted to get involved in the research. The spark came from a chat with Marcus Fernandez, the head of the Centre for Homeopathic Education (CHE). Getting Peter Fisher, Liz Thompson and Clare Relton on board meant I was able to register the HRI as an institute in 2007. Then I met Charles Wansborough, our major donor. He was one of my lecturers and I went on to take his advanced lectures in homeopathy. After six months of me rambling on about my amazing institute that had all of £500-worth of funding, he decided that he was going to help; then it really started.

Q: Rachel, so you came on board a bit later. Apparently, we have your friends to thank.

Rachel: Yes, Clare Relton asked me directly. She knew me from my Society research consultancy role and she tried to persuade me, closely followed by Arlene [Line, HRI's first CEO]. I couldn't see how I could fit anything else in. I really loved the idea, and I could see it needed somebody really organised, but I thought “I am a homeopath and a lecturer, why on Earth would I want to run a charity?”

Q: At some point you moved the focus to include more advocacy. Tell me a little more, as this is now such an important aspect of HRI's work.

Rachel: HRI was set up to do these two things. It is about generating and promoting good quality research, and it is about correcting misinformation: communicating accurately about the research. We both saw it as these two important things that have to be done. We had no idea how much the advocacy side would take off.

Alex: We went down the advocacy route when we realised that we had to stand up for the science in homeopathy, and to say, “Wait a minute guys, it [research] is there and a lot more positive than people think.”

Rachel: At the Society, I'd been part of the team that handled the ASA

challenge. I wrote a submission for the ASA after I'd started working part-time with the HRI, so I had experience of a major submission. There is this line where the science, politics and law meet, and I began to realise that it's a complex jigsaw.

Alex: We have had many discussions about having balanced discourse when you present evidence. Eventually we realised that sometimes it is not about balance, it is about having an objective opinion about the evidence. This is the thing where the skeptics have had a hard time with us. We don't have a problem in saying if research is bad, if the evidence points that way. Conversely, if the skeptics say, “There is no evidence,” then we say, “Look guys, actually there is.”

Often the homeopaths themselves overstate the evidence. When you overstate the evidence, you weaken your position. And often the skeptics overstate, and this is where we can come back and say, “Wait a minute, this isn't true.”

Rachel: We know we've had to be unpopular with some people in the homeopathic community, because we've taken a stand for not overstating. If you're talking about credible evidence, if you're talking about sufficiently high-quality research, done well enough, so that it has meaning [in terms of mainstream science], there just isn't tons of it. Over time, keeping to this line has paid off and has given us the credibility to actually alter the perceptions of decision makers.

Q: Have you got any advice for homeopaths who would like to get a bit more into understanding and using research? How can we look at academic papers with a realistic eye and digest the information?

Alex: It takes training to develop an eye for statistics and methods. It's not easy sometimes to spot where there might have been a problem. The Shang, et al (2005)¹ study is a great example, if you want to train in critical reading and spot where a mistake was made, where they twisted the data.^a

Footnote:

a An analysis of Shang et al can be found on the HRI website at <https://www.hri-research.org/resources/homeopathy-the-debate/the-lancet-paper-by-shang-et-al/>



About Dr Alex Tournier

Dr Alex Tournier BSc DIC MAST Cantab PhD LCHE RSHom has a 1st class honours degree in Physics from Imperial College, and a Masters in Advanced Study in Theoretical Physics (a.k.a. part III) from Cambridge University. Alex wrote his PhD on the biophysics of water at the interface with biological molecules at the University of Heidelberg in Germany and also trained in homeopathy at the Centre for Homeopathic Education, London. Alex worked for ten years at Cancer Research UK (fifth institute worldwide for molecular biology) as a researcher working on problems at the interface between biology, physics and mathematics. In 2007 he founded the Homeopathy Research Institute.



Rachel: It helps to see research skills like anything else to learn, such as materia medica, or case taking. You can't expect to pick up a paper and understand it fully. Homeopaths who want to know more about research have to take that on like any other new topic.

As a service to homeopaths, we have our newsletter², run by the wonderful Angelina Mosley, where there is recommended reading in every issue. Angelina has the right background and skills, she picks out the best research and we put a focus on what we think is most relevant to colleagues. What is on the website and in the newsletters is very tightly controlled for quality.

Alex: It's worth mentioning that Rachel has worked hard on the FAQ section³ of the website. Those are arguments you can use pretty safely and they are really worked out. Through the website there is access to argumentation and news, with academic references and so on. It's worth using that material.

Q: Can I ask about funding? I remember, Rachel, how moved you were when the Hong Kong delegation at HRI London handed over their hard-won collective donation. What is the funding situation now?

Alex: We are under constant pressure and demand, so are constantly in need of more money. We've been stretched for many years. We need more resources.

Rachel: Sometimes we have a bit of spare money to spend, like when the Hong Kong Chinese just did that amazing fundraiser. Or we have someone with a rare academic skill set, like Petter Viksveen, but no money to pay them. He's a brilliant academic and a brilliant homeopath; if we'd been able to employ Petter the moment he got his PhD, imagine what we could have done working with him full-time.

That's the reality of our situation; we are constantly restrained by lack of money. Some lovely people come up and offer support, asking how they can help. Currently, we are reliant on people donating by choice, but we're hoping in 2020 to break the cycle, if we manage to get a part-time fundraiser.

Q: Can you each name your favourite pieces of homeopathy research?

Rachel: For years, my favourite was the Camerlink piglet study⁴ preventing E Coli diarrhoea in piglets. E Coli in pig farming is a major

veterinary clinical need, because of rising antibiotic resistance. It was an extremely high quality study; the effect of homeopathy was six times better than placebo.

The skeptics are now saying that if homeopathy works in animals then that's due to entanglement, so basically the intention of the prescriber working on the animal, but when you read this paper, you realise this is not a touchy-feely vet cuddling a pet, this is a farmer squirting the remedy on the sow's vulva before the piglets are born, yet it prevents diarrhea and it is placebo controlled.

My other favourite is the Macías Cortés depression and menopause study⁵ from Mexico. It was done in three groups, who received individualised homeopathy, or fluoxetine (Prozac) or placebo. The homeopathy group did better than the placebo group, but it also did better than the Prozac group for depression. This is moderate to severe depression, not the mild depression that we now know Prozac doesn't work well for.

Prozac helped only the depression, while the homeopathic treatment also helped with menopausal symptoms, so this study can explain a concept like 'holistic'. This study ticks so many boxes when I'm trying to explain homeopathy, when I'm trying to explain research and how it really does do well in high quality studies.

Alex: My favourite is Robert Mathie's individualised homeopathy review⁶. It proves that homeopathy as practised by a homeopath works. It is very well done and follows all the Cochrane guidelines for such reviews. It is positive whichever way you look at the data, addressing every bias and quality issue, showing that homeopathy, as practised by a homeopath using individualised treatment, works.

Nobody has been able to find any flaw in that study. I really urge homeopaths to make use of this. It uses the very techniques the skeptics say we should use. Whenever I consider – could the piglet study be a one-off? Is the depression study a fluke? – I come back to that particular meta-analysis and I can see it holds. The Mathie study is one the skeptics keep very, very quiet about.

Q: Do you anticipate a time where you would be able to demonstrate a working mechanism for homeopathy in such a way that it can no longer be denied?

Alex: Put it this way, given enough funding, it would not be very long. But by campaigning to make homeopathy seem 'implausible', detractors have in



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About Rachel Roberts

Rachel Roberts BSc(Hons) MCH RSHom FSHom FFHom(Hon) has a first class degree in Biological Sciences specialising in Physiology from the University of Birmingham. She graduated from the College of Homeopathy, London, in 1997 and was in private practice as a homeopath until 2012. Rachel has lectured in homeopathy and medical sciences at various colleges in the UK and overseas. She held the post of Research Consultant for the Society of Homeopaths from 2008-2012 and was awarded an Honorary Fellowship in 2013 to acknowledge her outstanding contribution to homeopathy. Rachel joined the HRI part-time in 2010, has worked for the Institute on a full-time basis since 2012 and is the CEO. In 2018 Rachel was awarded an Honorary Fellowship by the Faculty of Homeopathy for her highly regarded work in the field of homeopathic research.

effect shut down all sources of serious funding. The attacks were carefully targeted at the scientific community; by now no peer review committee will fund homeopathy-related projects, for the foreseeable future.

Even scientists who are genuinely interested aren't touch it. So many people have said, "I'd love to help you, I'd love to be involved, but I'll lose my job." There are former colleagues, people I used to work with in labs; some would love to help run experiments, but they tell me, "We can't touch homeopathy, it's career suicide."

We are hobbling along, and a lot of skeptics use that against us, as if, were there something there, we 'should' have found it by now. And we would have, if we had anywhere near the funds I used to have at Cancer Research.

Rachel: There is some good news too. There was a think tank in Paris in September 2019, with 14 top scientists in fundamental research from all over the world. Alongside homeopathy and ultra-high-dilution researchers, we had conventional water and nano-medicine scientists. We even had a specialist in entanglement theory. We had all these experts together in one room. They could look at all the theories and have frank conversations. We are still working on the outcomes of that meeting and eventually turning that into a white paper. The names on that paper will be quite impressive.

We got everybody to agree on experiments that should come next. This is now a wider collaboration. We are small, so we love to collaborate with people around the world. I'm pleased we managed to try to create a better future for the research. Hopefully this will invigorate the research, which should help speed up the timeline.

Q: This is the tenth anniversary interview. What do you hope to be telling me about at your 20th anniversary interview?

Rachel: There is a greater and greater need for homeopathy in the real world, so I can imagine a scenario where homeopathy becomes more mainstream. That is why the Australian report^b matters so much.

I want to prove effectively that there is systematic manipulation of data. To prove that, and then be able to go back to every instance where

“ We went down the advocacy route when we realised that we had to stand up for the science. ”

that report was used to shut down a homeopathy course, or to shut down access to homeopathy, and then to reverse those decisions and turn the tide on the way the evidence is being misused. If that tipping point is reached, then research will become acceptable again and we can go back into the universities. Then we will have a fair chance of actually clarifying how homeopathy works.

In addition, I hope that by 2029 we will have rallied enough resources from our own sector to do a decent set of clinical trials, followed by repetitions. We could focus on a handful of conditions, build an evidence base followed by a really nice systematic review that would be indisputable. Then we would have four or five trials on the same condition and the health services would have to recommend it. That is my 20-year dream.

Alex: We'll be popping the champagne, saying, "We've won! We've shown how it works!" ●

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Footnote:

- b. For more information on the Australia report, go to: <https://releasethefirstreport.com/the-full-story>