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## **XXI Century Pharmacotherapy**

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#### **Abstract**

The article is a plea to shifting from exclusive allopathic pharmacotherapy, practiced in the last 200 years, to the pharmacotherapy of the future, equally using the allopathic and homeopathic pharmacotherapy.

#### Rezumat

Articolul este o pledoarie pentru trecerea de la farmacoterapia exclusiv alopata, practicata in ultimii 200 de ani, la farmacoterapia viitorului, prin folosirea, in egala masura, a farmacoterapiei alopate si a celei homeopate.

## Introduction

Pharmacotherapy is the branch (the chapter) of pharmacology studying the **THERAPEUTIC** INDICATIONS of drugs in order to cure, ameliorate or prevent diseases. Therapeutic indications result from pharmacodynamic pharmacotoxicological drug actions. They are linked to the DRUG INSTRUMENT. For hands-on use of drugs in the medical practice, these data must be supplemented with elements of pharmacokinetics, pharmacography, pharmacoepidemiology. Bringing together all this knowledge forms a complex THERAPEUTIC METHOD, namely a

practical way to use the multiple properties of the instruments called drugs.

In the last 200 years, two types of medicines were developed: allopathic and homeopathic, which were the basis of two concrete therapeutic methods, allopathy and homeopathy.

## Early XXI century pharmacotherapy

The two therapeutic methods have many common aspects: they appeared in the same historical period, using the same kind of

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instrument, the drug, corresponding to a law of nature that equally substantiate (antagonistic phasic actions law, Arndt-Schulz law). The therapeutic methods present some differences, aspects of the opposite same phenomenon, the a relationship of complementarity. Logically, these differences should have brought them closer. However, over time, they have developed completely different; y. Moreover, they were perpetual rivals. In other articles I have discussed the negative aspects in greater extent.

# Early XXI century allopathic pharmacotherapy

It is only one taught in medical schools. Consequently, only allopathic medicines are known to practitioners. Surprising is that their use in teaching and nobody talks about being allopathic medicines. The vast majority of pharmacies release only allopathic drugs.

Allopathic therapeutic method is described in all clinical medical specialties books under the TREATMENT chapter, without clearly stting that it is PHARMACOTHERAPY and ALLOPATHY. Therefore, although physicians use allopathic pharmacotherapy and allopathy, nobody mentions these facts. There are no books on allopathy, nor any allopathic medical professional societies.

So, physicians learn and practice allopathy, patients receive allopathy, but nobody speaks about these realities. In daily life everybody is content to use allopathic medicines as something banal, that entered the everyday automatism.

# Early XXI century homeopathic pharmacotherapy

is There still no officially recognized homeopathic pharmacology as a medical science of the homeopathic drug, so there can homeopathic no pharmacotherapy, comparable to the allopathic one. In reality, there is a homeopathic pharmacotherapy, ever since the discovery of homeopathy. Homeopathy has been designed and remained, unfortunately until today, a therapeutic method. Classical homeopathy, correct called by some homeotherapy, is really what it official be. should homeopathic pharmacotherapy. It follows that homeopathic pharmacotherapy is practiced for over 200 years but no one talks about this reality. With the very strong emphasis that as the only isolated therapeutic method and totally ignoring the fact that it is based on homeopathic drug, it is not completed by the other components of pharmacology (pharmacokinetics, pharmacodynamics, pharmacoepidemiology). This is a major deficiency, which greatly lowers the potential therapeutic value of the method.

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Homeoptia is not taught in medical schools. Doctors do not know and do not prescribe homeopathic medicines.

Homeopathy is taught subsequent to the university studies, by a small number of doctors, in postgraduate training courses that are organized in some countries by people outside of field of medicine. Through its way of teaching of the therapeutic method, ignoring basic medical knowledge, these courses removes doctors away from practicing scientific medicine.

## Our proposals for the XXI century pharmacotherapy<sup>[1]</sup>

The proposals are based on objective reality that sooner or later will be accepted by the international medical community. Reality clearly shows that there is only one drug concept and a single medical science of the drug, pharmacology, with two branches, corresponding to the two specific forms of medicine, allopathic and homeopathic. Consequently, pharmacotherapy has two types of components: some are common to both branches, others specific to each one.

i. Classification of drugs from a pharmacotherapeutical point of view<sup>[2]</sup>

In order to guide the use of drugs by various therapeutic indications, it is useful to consider the classification of drugs in terms of pharmacotherapy. There are four categories.

- 1. Etiotropic action, on the cause of a disease (antibiotics, anthelmintics, antifungals, etc.)
- 2. Antipathogenical action, modifying the pathophysiological mechanisms that cause disease (digitalics, vasoconstrictor, etc.)
- 3. Symptomatic action, of reducing or removing symptoms (analgesics, antipyretics, etc.). Terms of symptomatic and pathogenic drug are use because of tradition. In reality, symptomatic drugs act on one of the pathogenic mechanisms. Therefore it would be closer to the truth to say symptomatic-pathogenic action.
- 4. Replacement of physiological factors action, in their absence or in hyposecretion (hormones, enzymes, etc.).

Analyzing this classification from the viewpoint of the two branches of XXI century pharmacology, one can make the following remarks:

- Etiotropic medication is found exclusively among allopathic medicines.
- Symptomatic-pathogenic medications can be both allopathic and homeopathic.
- Replacement medication is especially allopathic, but there are cases which respond equally well to the homeopathic.

## ii. Allopathic pharmacotherapy.

I believe that in the history of science, we can distinguish three phases: training, affirmation, confirmation. Allopathic pharmacotherapy has successfully covered the

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first two and is in the third action, to its end, they finally reaching full maturity. That is the reason why o the novelty pace is slowed down, innovation cost increasingly more, new drugs are becoming fewer and more expensive. A wise attitude would be maintaining expenditures at current levels or even lower them. Instead, part of allopathy resources, accumulated over the years, should be directed towards the development of homeopathy, to help it recover from the great fall behind allopathy. Part of the production capacities of allopathic medicines could reorganized for the production of homeopathic medicines. This would ensure a predictable increase in requests of homeopathic medicines and would avoid losses allopathic manufacturers.

## iii. Homeopathic pharmacotherapy

Keeping in mind the three stages of development of a science, homeopathy is between the first and second stage of training, certainly an immature one. Following 200 years of existence, it only has two branches of pharmacology (pharmacotherapy and pharmacotoxicological). other four branches are either inexistent, either are barely sketched on empirical bases. A huge volume of work has to be undertaken to complement thos on scientific basis. In this effort, a huge boost can and should come right from allopathy, which will redeem such mistakes of the past, the relations between the two sisters. Only when homeopathy

will reach adulthood, its huge therapeutic potential will be observed.

iv. Principles of scientific and rational use of medicines

## a. Therapeutic planning

An individualized treatment plan will be prepared, with the folloing objectives: "primum non nocere", maximum efficiency, easy to perform and supervise, economically viable for the paient and society. Sparing and boosting the defense capability and the recovery of the body will be considered.

### b. Diagnosis

pharmacotherapy Any recommendation should be based on a thorough knowledge of the patient and a complete diagnosis. In this sanse, all the sufferings patient should be mentioned, acute or chronic, the location and extent of each distress, the clinical shape, the history and evolutionary phase, the evolutionary trend, immediate and remote prognosis. Pathophysiological mechanisms must be understood. Case history (anamnesis), physical examination, laboratory tests should be used: biological (biochemical, functional tests), radiological tests, specialty examinations (endoscopy, catheter, biopsy, etc.). In the case of caused by pathogenic diseases biological agents (bacteria, viruses, fungi) their identification and their sensitivity antibiotics and

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chemotherapeutic agents will be followed. Attention should be given to patient history data proving the existence of a state of sinsibility or particular reactions to certain substances.

c. The decision on the need for administration of medication (pharmacotherapy)

Shall be based on three aspects:

- if drugs are really needed in that case, or whether there are other more suitable treatment methods (diet therapy, physiotherapy, etc.)
- would be the evolution of suffering without drugs being administered; wether or not it is a favorable and self-limited spontaneous evolution type of suffering
- what would be the recommended treatment. If either exclusive allopathic or homeopathic tratment can be performed or the combination of the two seems necessary. It will be taken into consideration that the therapeutic value of the two methods is virtually equal and the option for one or the other must be made solely on scientific considerations as follows:

Homeopathy must be the pharmacotherapy of choice for:

- acute, benign affections, including some virosis;
- light and medium functional disorders, stress related disorders, neurosis, reactive depression;
- chronic conditions, developed on the basis of some patients'

predisposition to illness (diathesis) and having a slow recovery or relapse (recurrent infections, allergies, chronic dermatitis, chronic rheumatism);

- pre or post birth, trauma, pre and post surgery.

Allopathy must be pharmacotherapy of choice for:

- serious acute or high intensity suffering, accidents, trauma etc.
- -in severe functional disorders with a potentially unfavorable outcome.

The association of the two therapeutic methods is necessary and useful, especially in the case of:

- serious distress produced by pathogenic biological agents (for which there is etiotropic allopathic medication) accompanied by functional disorders found in provings for homeopathic remedies
- incurable diseases where homeopathy can make a contribution to improving the quality of life.
- d. Determining the type of pharmacotherapy and the aim pursued

For acute sufferings, the treatment aims the immediate response reaction of the body to the pathogen and is a immediately reactive therapy. Orientation in choosing the remedy will take into account whether the pathological manifestations are predominantly local (ex.traumatism, sprain, hemorrhoids) or general, including psychological.

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In chronic diseases there can be two different aspects of homeopathic treatment. One consists of a immediately reactive therapy, similar to that of acute diseases, in cases where there are such events. The second is a slow reacting therapy which targets chronic disease fund, morpho-functional transformations that have been installed in the past and have evolved in time. This changes can be treated through homeopathy to reverse the route installation and disappearance or cure of chronic illness can sometimes be reached. It is the phenomenon of reversibility of certain chronic suffering, possible through an appropriate homeopathic treatment, even in the case of changes of anatomical structure formation (e.q. fibrom uterine, ovarian cvst).

When choosing homeopathic remedies, it should be considered that the body has two types of structures:

- Constitutional structures, which form the largest part of the body (muscles, bones, etc.). These structures respond to harmful agents with defense reactions or lysis. These structures and their reactions are influenced by homeopathic medicines.
- Genetic structures, consisting of nucleic acids. Not influenced by homeopathic medicines.

In chronic illness, etiological data, symptoms, individual grounds are all acountable. It is chosen between unicity and complexity. When complexity is preferred, one or more

remedies are chosen out of the components involved in this case: homeopathic remedy of the patient suffering, izopathy remedy of the suffering; homeopathic remedy of diathesis, izopathy remedy of diathesis, remedy draining.

e. Prioritization and staggering of different types of prescribed pharmacotherapy

The severity of each distress, the immediate and remote consequences will be taken into account and these will determine the types of pharmacotherapy and their management: only one type, their concurrent or successive combination.

## f. Selection of prescription drugs

The criterion for the homeopathic medicines is similitude. Both the classical similitude on the whole body and the modern molecular and cellular level similitude will be taken into account.

g. Selection of administration approach of medicines

For homeopathic medicines, potencies will be determined as recommended, as well as the dose for a single administration, the dose for 24 hours, the rate of administration.

## h. Effectivness control

Will be used: patient questioning, eventually family inquiring, clinical

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examination, laboratory tests, functional tests, etc.

## i. Dose adjustements

During treatment some situations arise that require dose adjustment of medications according to evolution.

- j. Discontinuing the drug treatment
- Is subject to obtaining the expected results (healing, maximum possible improvement, lack of response, worsening of evolution).

k. Training the patient and/or his family on several important issues:

The goal of the treatment, the expected evolution under the influence of treatment, the use of prescription drugs, the need for observation and communication of the evolution and other particular effects.

#### Refernces

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- 2. Dobrescu D., Farmacoterapie, Editura Medicala, Bucuresti, 1981, pg.94