

RESPECTING HISTORY

Byplay series

Edzard Ernst and the ultimate delusion

Carol Boyce

Abstract

Homœopathy's critics deny all evidence of its efficacy and the mounting evidence for potentization, on the basis of implausibility. They call for increased regulation of homœopaths on the basis of its dangerous placebo effect.

Edzard Ernst is on a roll

Maurice Laing, of the U.K. building company Laing, may be ruing the day he expressed his philanthropic inclinations by funding the first chair in complementary and alternative medicine (CAM) at a British university. Sadly, he will have to content himself with turning in his grave.

It was to much fanfare this year that two books in the anti-CAM genre were published within two months of each other.

In April 2008, Bantam Press released its *Trick or Treatment: Alternative Medicine on Trial*, by Edzard Ernst, who holds the U.K.'s only chair of CAM, and Simon Singh, science writer behind a sting of homœopaths carried out by Sense about Science in collaboration with the BBC's "Newsnight" programme in 2006.¹ Their book has been heralded as a rigorous scientific analysis of the evidence (or lack thereof) in support of CAMs. It would finally put to rest all the questions and confusions the public might have about CAMs in general, and in particular about the "big three": homœopathy, acupuncture and chiropractic. The two authors, neither with verifiably credible

training in CAMs, have written what is rapidly becoming the definitive guide on the subject.

Reviewing CAMs from A to Z, the co-authors claim, amongst other things, that there is no evidence to suggest that homœopathy is more effective than placebo; that chiropractic is ineffective and dangerous, with serious risk of spinal injury or subsequent stroke; that acupuncture may offer some help in pain relief and nausea but is otherwise ineffective and possibly dangerous, since the needles may pierce a nerve or organ: that though some herbal products may be effective, most are not and some are potentially dangerous; and so on.

The Sunday Times's view of the book was:

Fearless, intelligent and remorselessly rational, the authors exemplify the same Enlightenment spirit of criticism that animated *The Lancet* in its early days.²

By "early days", the reviewer presumably means a time before *The Lancet* published a meta-analysis, that of Shang et al.³, widely criticised as biased and deeply flawed, pronouncing homœopathy to be no better than placebo (a detailed rebuttal of the Shang meta-analysis is worth

reading⁴); a time before *The Lancet* article demanding that the World Health Organisation's 2005 report favouring homœopathy be withdrawn for revision (in mid 2008, still unpublished); a time before *The Lancet's* editor renounced Dr. Andrew Wakefield's previously published peer-reviewed paper on the potential link between MMR and autism.

The site spiked-online.com ran a piece, "Trick or treatment? The truth about homœopathy. Continuing our debate on 'The Best and Worst of Medicine', Michael Baum and Edzard Ernst call for homœopathy to be put in the sin bin of history".⁵

On Amazon.com, Baum — professor emeritus of surgery, leading oncologist, well-known vocal homœopathy critic, and, apparently, occult investigator — upheld the tradition of mutual endorsement by writing a glowing review:

This book shines the light on the ignoble practices of alternative medicine... The light that illuminates the book is that of the scientific



method. The first chapter beautifully describes the transparency and intellectual honesty of this approach... others who might earn a living by practicing [sic] these dark arts might avoid the truth for fear of recognizing their self delusions,

— and, referring to Prince Charles, to whom the book was pointedly dedicated — “... some politicians or members of the nobility might wish to ignore these truths out of political expediency...” — and, after referring to the papal legates who refused to look through Galileo’s telescope —

Anyone who refuses to read this book in case it might damage their faith in homœopathy for example, falls into the same bracket.

Perhaps most telling was Baum’s parting remark —

This book serves us well by setting a limit to our ignorance about the nature of disease and its *palliation*

(my italics).⁶

Baum’s review was followed by one from John Garrow, emeritus professor of Human Nutrition at London University and vice-chairman of HealthWatch⁷ (the quack-busting organisation that awarded Ernst the 2005 prize for his “honest appraisal” of CAMs). In it, Garrow asserted:

What was needed was a thorough audit by competent unbiased clinical scientists to see if these myth-based treatments actually did the patient any good. This book is the auditor’s report.⁸

It’s unclear whether well-known journalist Rosie Shapiro rushed her own book, *Suckers: How Alternative Medicine Makes Fools of Us All* (published by Harvill Secker), to print in order to tap the market

ahead of Ernst and Singh’s or in order to pave the way for it (since a journalist can say things that scientists must, in the interests of objectivity, refrain from saying). What is clear is that both books have kept CAM in the public eye and precipitated a flurry of articles in the press. More importantly, both mark a distinct shift in the anti-CAM dialogue.

The books’ titles give the first clue to the shift; the tone of the reviews, the second. The Amazon.com synopsis of Rosie Shapiro’s book tells us:

What [CAMs] have in common is that there is no hard evidence that any of them work. Treatments like homœopathy, acupuncture and chiropractic are widely available and considered reputable by many. Ever more bizarre therapies, from naturopathy to nutraceuticals... are increasingly favoured... Its global market is predicted to be worth \$5 trillion by 2050... In short, it is an industry that preys on human vulnerability and makes fools of us all. *Suckers* is a calling to account of a social and intellectual fraud; a bracing, funny and popular take on a global delusion.⁹

The Guardian describe *Suckers* as a “vigorous polemic”;¹⁰ *The Independent* says,

The ferocious assault on the evidence-free mountebanks who peddle alternative medicine, and the dupes who fund them, is a bracing tonic... It does, however, note: “She mounts a terrific defense of science against superstition. But something’s gone wrong with the tone — a sneery arrogance...”¹¹

The title alone might deter many consumers from admitting that they use CAMs. The accusation is

made that CAM practitioners are on the take and earning a fortune (\$5 trillion annually by 2050).

For the general public searching for balanced information, perhaps the greater cause for concern is that both books were written by authors who appear not to understand the fundamentals of the subject. In the homœopathy section of *Suckers*, Shapiro recounts the story of *Rudolph* Steiner scattering the ashes of rabbit organs on farmland in 1924 to rid the land of a rabbit infestation and the Nazis’ use of the same approach with the ashes of young Jewish men, scattering them across the length and breadth of Germany. Without doubt this was a tragic piece of history, but given that it has nothing to do with homœopathy, it must cast some doubt on the quality of her research for the book.

Creative accounting

Shapiro’s book has been described as a “calling to account”. Ernst and Singh’s *Trick or Treatment: Alternative Medicine on Trial* represents itself as a scientifically credentialed audit. Another writer for *The Independent* describes the book as “well-researched”, and the co-authors claim to have come to their “unbiased” conclusions only after weighing all the available scientific evidence.

When first appointed to his position at Exeter University as the U.K.’s first professor of CAM, Ernst announced that it was important to support CAMs with hard evidence and proposed a series of clinical trials, an announcement welcomed by the CAM community. With more than a thousand published papers to his credit, he has since been elevated by the press to being the world authority on the scientific evidence for CAMs, and his opinion is quoted as fact.¹²

Citing lack of funding, Ernst’s department has conducted no trials for the last several years and has restricted itself to the systematic reviews and meta-analyses that form the basis of the book. Rationality is said to be the currency, but



much of the evidence he quotes is the work of his own department — and the methodology of the trials on homœopathy is poor. His investigation of the efficacy of the medicine *Arnica* is a good example.¹³ Ernst chose to test *Arnica* in patients following wrist surgery, and then concluded that *Arnica* was no better than placebo. A student with a first-aid homœopathy course under her belt would know that *Arnica* is most effective for soft-tissue contusions. In surgery, especially on a joint, other homœopathic medicines would be better indicated, such as *Ruta graveolens* for damage to tendons and periosteum; *Rhus toxicodendron* for muscle damage; and *Hypericum* for nerve damage. (Yet a rebuttal by Dr. Peter Fisher et al.¹⁴ of the conclusions of Ernst's *Arnica* trial showed that even in this context, when the results were properly analysed, *Arnica* still performed better than placebo.)

It is unclear whether Ernst can really be this ignorant about the homœopathic method or has another agenda.

Intemperate tone

An interesting new term has recently made its way into the anti-CAM vernacular. Playing on the split between rational science and the “delusion” of religion is the critics’ use of “faith based medicine” as a descriptive for CAMs in general. All attempt at a measured tone has fallen by the wayside, and although many of the recent articles in the press were laughably outrageous, all were potentially damaging of CAMs and of homœopathy in particular in the minds of those without the means to critically assess them.

Simon Hoggart typified the tone in his op-ed piece in *The Guardian*: discussion of a Malaysian cult that worships a teapot led straight into three paragraphs beginning: “Another quasi-religion - a belief system that requires faith without evidence — is homœopathy”. Describing *Trick or Treatment*, Hoggart continues,

“It’s a dispassionate look at alternative medicines from aromatherapy to qijong [*sic*] and shiatsu. Not surprisingly, they conclude that the only real value of homœopathy is as a placebo...”.

Also unsurprisingly, he analogised potentization to dilution in Lake Superior.¹⁵

In the same week, *The Times* ran an article titled “Homœopathy — what a waste of time”, in which Singh, referring to the Tunbridge Wells Homeopathic Hospital, began:

... perhaps for the first time in history, there was a round of applause at the announcement of a hospital closure. I was speaking at a seminar organised by *Skeptics in the Pub...*

(my italics) and continued,

There have been more than 200 trials investigating homœopathy and the overall result is that its remedies are utterly bogus.

He took great delight in the “huge drop in the number of referrals to the hospital”, the direct result of pressure on Primary Care Trusts to withdraw funding for the same, and ignored the fact that patient pressure had just won the hospital a reprieve.¹⁶ Meanwhile *The Economist* reported the news of the new regulatory Complementary and Natural HealthCare Council (CNHC) in an article titled “Trust me, I’ve got a licence: Regulating the quacks”.¹⁷

A distinctly new kind of criticism for homœopathy arrived with the suggestion that homœopathy is actually capable of harm. Damian Thompson, (author of, *Counterknowledge: How We Surrendered to Conspiracy Theories, Quack Medicine, Bogus Science and Fake History*, Atlantic Books), writing for *The Telegraph* “The last rites for alternative medicine?”, made a series of inflammatory and

inaccurate statements that included:

“[R]espectable” British homœopaths continue to turn a blind eye to the prescription of lethal homœopathic Aids [*sic*] treatment by their maverick colleagues,¹⁸

presumably referring to some members of the Faculty of Homeopathy, who, in an apparent attempt to distance themselves from what has been portrayed by the media as the worst excesses of homœopathy’s “delusion”, have publicly denounced the suggestion that homœopathy has any part to play in the treatment of AIDS or the prevention of malaria.

As I write, Ernst and Singh are at the prestigious annual Hay Literary Festival promoting *Trick or Treatment* and, according to *The Guardian*’s science correspondent, lambasting Boots, the U.K.’s largest retail pharmacy chain. In the article, apparently written ahead of the festival, we discover that Ernst,

Britain’s leading scientific expert on alternative therapies... *is to criticize* the company for selling alternative medicines, in particular more than 50 homœopathic remedies that are shown by clinical trials to be no more effective than sugar pills... Ernst accuses the company of breaching ethical guidelines drawn up by the Royal Pharmaceutical Society of Great Britain, by failing to tell customers that its homœopathic medicines contain no active ingredients and are ineffective in clinical trials.

Ernst asserts that though Boots is a trusted brand,

when you look behind the smokescreen, when it comes to alternative medicines, that trust is not justified... Boots seems to be fast becoming the biggest seller of quack remedies in U.K. high streets.²⁵

Homœopaths are caught in the pincer grip of politics masquerading as hard science: homœopathic remedies, goes the argument, *must* be merely placebo; therefore homœopathic pharmacies are *by definition* unethical and homœopaths are dangerous; and the public, unable to think for themselves, need to be protected. The entire argument for this approach is predicated on the Shang meta-analysis having been a significant piece of unbiased research, which it clearly was not⁴, and on an obsession with Avogadro's number and the dilution factor in potentization¹. Highly respected scientists have replicated experiments demonstrating that high dilutions are biologically active and very different from plain water,¹⁹⁻²⁴ but their work is dismissed as irrelevant or conveniently ignored.

Interestingly, the same article goes on to tell us that

In 2006, Sir Martin Rees, president of the Royal Society, said the possibility of a medicine working in this way would "entail some fundamentally new scientific principle with amazingly broad ramifications".²⁵

Exactly.

In a follow-up article about Ernst's lecture at the Hay Festival, the same *Guardian* writer reports²⁶ that a GP who has prescribed homœopathic remedies for years, often with remarkable results, asked Ernst,

"Am I ignorant, stupid, gullible, or so dangerous I should be reported to the General Medical Council?"

to which Ernst replied,

Physicians used to think bloodletting helped save patients lives too. They weren't particularly ignorant or stupid, they were simply wrong. So it is with homœopathy.

Thus it has become the norm amongst critics of homœopathy, especially those with scientific or medical credentials, to negate the clinical experience of their homœopathic peers, and to counter assertions that evidence of efficacy does exist, by dismissing the science behind it as implausible and hence the evidence as invalid.

Admissions

The strongest criticism levelled at homœopathy remains the assertion that there is no evidence that homœopathy works in random controlled trials of its use in any *named* condition. In 2003 Allen Roses, the chief executive of GlaxoSmithKline (GSK), was quoted as saying that

more than 90% of drugs only work in 30 to 50% of people,

while announcing GSK had more than "20 potential \$1 billion-a-year blockbuster drugs in development". In the same article, Richard Ley, a spokesman for the Association of the British Pharmaceutical Industry, told BBC News Online,

It's not news to anyone that not all drugs work in all people all the time. Sometimes the government and the National Institute for Clinical Excellence want to try to find one drug for a particular condition. This shows quite clearly that is [*sic*] not a viable approach. A medicine might work well in one person, and not at all for another.²⁷

Ernst, as the UK's "leading scientific expert" on CAMs, need no longer reference the Shang meta-analysis, but simply state as accepted fact that homœopathy is placebo and homœopaths are duping the gullible public. Yet a cursory literature search and honest analysis quickly clarify that this is not the case. Even with the constraint of a specific diagnostic label, evidence of

homœopathy's efficacy is readily to be found. Bell and Pappas²⁸ explicitly detail the subtlety of research design required to adequately test homœopathy. Their criteria include individualisation of prescription; the need to change remedy and dosage according to patient response; continuing accordance with the Law of Cure's requirement that older and more trivial symptoms disappear last; and understanding that a genuine cure may take longer than the average length of a study.

According to the critics, the greatest danger posed by homœopathy remains that patients seeking help from a homœopath might lose valuable time, as they should be consulting an allopathic doctor. On 17 June 2008, Ernst described homœopathic treatments as a "public health problem" and called for tighter regulation. His comments came as a U.K. Government report called for "urgent" controls on herbalists, acupuncturists, and traditional Chinese medicine (TCM) practitioners "amid fears over patient safety".²⁹ Whether the government ministers have been alarmed by the "scientifically controlled audit" of Ernst and Singh's bestseller or this is simply another coincidence is difficult to ascertain. Meanwhile, the rate of iatrogenic disease is fast becoming the leading cause of death in the U.S., and unprecedented numbers of pharmaceutical drugs are recalled after causing devastating side-effects.³⁰

The irony will not be lost on the CAM world.

Amongst cynical media lacking interest in positive stories, the homœopathic profession has found it almost impossible to find a publication willing to publish balanced articles about homœopathy or rebuttals of inaccurate and inflammatory pieces such as that in *The Telegraph* by Damian Thompson. The tone used by the critics has shifted, from righteous indignation and/or ridicule to that of paternalistic psychiatrist, sympathetically

bringing homœopathy's "delusions" to attention, while advocating strong measures to ensure that homœopaths are prevented from harming the vulnerable public. It is but a small step from there to specific legislation to "protect" the public.

Update from the U.K.

In the continuing debate about whether the UK National Health Service (N.H.S.) should continue to provide homœopathy (when a small but powerful group of doctors assert it is no better than placebo), there was cause for celebration at the Tunbridge Wells Homeopathic hospital. The concerted effort of its loyal patients and their supporters secured a one-year reprieve for its scheduled closure, and thus continued provision of homœopathy to its patients. The Bristol and Liverpool homœopathic hospitals *are* still functioning, albeit as outpatient clinics in small separate premises: a stark contrast to the busy hospitals they once were, but at least for now, still able to offer N.H.S. homœopathy.

Just as pressure from a small but powerful group of critics is forcing the piecemeal withdrawal of funding for N.H.S. homœopathy, Sir Richard Branson, ever the rebel, announced plans to set up a series of Health Clinics in the U.K. offering a range of modalities, including homœopathy. The pro-homœopathy populace should be cautiously optimistic.

The U.K.'s professional homœopathic organisations are confident that the standards required by the regulatory CNHC will be lower than the standards already required by the homœopathic organisations themselves. (But time will tell whether allowing a government-funded body to dictate the standards of training, without consultation with the profession itself, sets a dangerous precedent in the current climate.)

There is no good news from the Royal London Homeopathic Hospital, now squeezed into just one floor of its building,

and that shared with all other complementary therapies and support staff. Threat of closure of even this small provision still looms large despite fully booked clinics, and morale is low. The Primary Care Trusts responsible for its funding are expected to give their final decision at any time.

The Alliance for Natural Health, the U.K. group that has doggedly challenged the restrictive Codex Alimentarius regulation of natural health products in the European Courts, is working with a group of scientists to thoroughly investigate the validity of applying the "gold standard" of Evidence Based Medicine to the CAM world. Homœopaths should await their findings with interest.

Anti-democratic capitalism

Another legislative trend, this time in Canada, is exemplified in the tabling of Bill C-51 in April 2008 by the Canadian Health minister, a bill now before the Canadian parliament. Health Canada, the official government website, states clearly that neither Codex nor Bill C-51 will affect regulation of Canada's natural health products since they are not considered food and are already defined as a subset of "drug" with separate regulations. But in C-51, "drug" would be replaced by the term "therapeutic product", and the word "sell" would be extended to mean "distribute to one or more people", thereby potentially including a whole range of natural health products under the same definition as pharmaceutical drugs.

In addition, the bill extends powers of enforcement and, perhaps most crucially, shifts decisions from elected officials to administrative bodies in closed meetings. Codex remains the most obvious example of this recent legislative trend, but other current examples include allowing administrators to decide funding withdrawal for U.K. N.H.S. homœopathy, and giving the (non-elected) U.S. Federal Advisory Committee the power to set regulations governing a major

increase in the state's mandatory vaccination schedule (proposed New York Assembly Bill 10942 currently on the table). A strong Canadian grassroots campaign has successfully mobilised a call for clarification of Bill C-51's possible effect on access to natural health products, and, if necessary, opposition to its ratification. Initially the CAM community's sensitivity to the changes in terminology was dismissed as a question of semantics, but in the face of public pressure, the Canadian government has been forced to make amendments to the bill, including a clearer definition of "natural health products".³¹ Major concerns about the Bill remain, and the scene is still potentially set to restrict all things natural in favour of all things pharmaceutical and to remove the public's power to influence the decisions directly affecting its health.³² Grassroots opposition continues to make headway and provides a great example of the power of consumers to effect change.

A positive article appeared in a U.K. national magazine in the second week of June, just in time for Homœopathy Awareness Week. In the article, titled "Follow The Stars And Opt for Some Homœopathy", OK Magazine listed current celebrities who use homœopathy and reminded readers that 30 million Europeans use homœopathic medicine. An extensive article, it gave a surprisingly good overview of homœopathy and a list of resources and drew attention to a new first-aid kit and book available from the School of Homeopathy, Devon.³³

In the same week, Ernst and Singh threw down the gauntlet in a publicity stunt reminiscent of James Randi's million-dollar challenge. Reported in the press as "a former homœopath", Ernst has offered GBP 10,000 of his own money "to the first person who can show the controversial treatment is better than a placebo in a scientifically controlled trial" that is published via the independent Cochrane Collaboration (a group

dedicated to the systematic review of randomised controlled trials in medicine). Echoing the insight shown in 2006 by Sir Martin Rees of the Royal Society, Singh observed that “If homœopathy could be proven to be effective it might earn the researcher a Nobel Prize in Medicine... He or she would also deserve Nobel prizes in chemistry and physics because the laws of science would need to be rewritten.” The British Homeopathic Association (providing information for the general public about medical homœopathy) has wisely rejected the challenge as a gimmick tied to increasing sales of *Trick or Treatment*.³⁴

There is no sign that the anti-homœopathy — indeed, anti-CAM — movement is running out of steam. It is clearly active at media level, as exemplified by the negative articles in the press of which the publications referenced in this article are but a selection; but given the pressure exerted on Primary Care Trusts to withdraw N.H.S. funding for homœopathy and given the legislation currently under examination in Europe and Canada, it is also equally active, and potentially much more dangerously so, at administrative and governmental level.

Philosopher Arthur Schopenhauer is credited with the observation that a new idea undergoes several phases before acceptance. First it is ridiculed; then it is vehemently opposed; when support begins to gather, it is described as possible but not relevant; still later it is admitted to be true and relevant but not original, whereupon former critics claim credit for it; eventually it is criticised as being too obvious to warrant mention. It may be worth considering where homœopathy lies on that continuum.³⁵

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Back

Pain lumbar.

Extremities

Petæchiæ extensor surfaces.

Coldness feet.**Skin**Cool clammy. **Eruptions****scarlatiniform. Desquamation.**

Flushed. Mottling. Red spots.

Fever**Chill****Perspiration.****Sleep**

Sleeplessness.

General

Anorexia. Bleeding. Cyanosis.

Disgeusia. **Hyperæsthesia.***Myalgia. Myositis. Bone pains.*Prostration. Rapid and weak pulse.
Rhabdomyolysis.**To be concluded in the next edition****Suriyakhatus Osman**, MBBS, DHom.,
FKHom, practises in the Klinik Taqwa
Masjid Tanah Melaka, Malaysia.**Edzard Ernst's ultimate delusion**

(cont. from page 45)

- Sainte-Laudy J, et al. Histamine dilutions modulate basophil activation. *Inflamm Res* 2004;53:181–8.
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- Carol Boyce**, MCH, CCH, RSHom(NA), U.K. homœopath, teacher, and writer, is currently based in the U.S.

CORRIGENDA

Due to changes in web sites and an editorial misunderstanding, the following changes are applicable to Carol Boyce’s article “Homœopathy and humbug” in *Similia* 19(2):

In text, on page 29:

- (1) move reference **7d** to follow the acronym “AIDS”;
- (2) replace reference **9** by reference **8**.

In reference list, on page 31:

- (1) let reference **7d** read as follows:

Two rejoinders by Prof. Chaturbhujaya Nayak, Director, Central Council for Research in Homeopathy, India, to the Lancet article “Homeopathy Booming In India”, <<http://ccrhindia.org/lancet.asp>>;

- (2) Insert reference **7e** as follows:

Rastogi D.P. et al. Homeopathy in HIV infection: A trial report of double-blind placebo controlled study. *BHJ* 1999;88(2)49–57.

With apologies from the editor.