



SLOVENSKI STANDARD

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Zdravstvene storitve, ki jih opravljajo zdravniki z dodatno kvalifikacijo iz homeopatije - Zahteve za storitve zdravstvenega varstva, ki jih opravljajo zdravniki z dodatno kvalifikacijo iz homeopatije

Services of Medical Doctors with additional qualification in Homeopathy (MDQH) - Requirements for health care provision by Medical Doctors with additional qualification in Homeopathy

Dienstleistungen von Ärzten mit Zusatzqualifikation in Homöopathie - Anforderungen an die Gesundheitsversorgung durch (Ärzte mit Zusatzqualifikation in Homöopathie)

Services de santé des docteurs en médecine ayant une qualification complémentaire en homéopathie - Exigences relatives aux prestations de soins de santé fournies par les docteurs en médecine ayant une qualification complémentaire en homéopathie

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11.020.10	Zdravstvene storitve na splošno	Health care services in general
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EUROPEAN STANDARD

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Services of Medical Doctors with additional qualification in Homeopathy (MDQH) - Requirements for health care provision by Medical Doctors with additional qualification in Homeopathy

Services de santé des docteurs en médecine ayant une qualification complémentaire en homéopathie - Exigences relatives aux prestations de soins de santé fournies par les docteurs en médecine ayant une qualification complémentaire en homéopathie

Dienstleistungen von Ärzten mit Zusatzqualifikation in Homöopathie - Anforderungen an die Gesundheitsversorgung durch Ärzte mit Zusatzqualifikation in Homöopathie

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European foreword

This document (EN 16872:2016) has been prepared by Technical Committee CEN/TC 427 “Project Committee - Services of Medical Doctors with additional qualification in Homeopathy”, the secretariat of which is held by ASI.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by April 2017, and conflicting national standards shall be withdrawn at the latest by April 2017.

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Introduction

Homeopathy was developed over 200 years ago by a German physician, Dr. Samuel Hahnemann, and has since evolved into a sophisticated practice of case-taking, diagnosis, prescription and long term care management. It is based on the principle of similars – “let like cure like” – which has been recognized by some physicians and philosophers for centuries, but it was Hahnemann who recognized the universality of this principle and made it the basis of a complete system of medicine with an own concept of health and disease described in his standard work *Organon of the Medical Art* [1]. Homeopathy which has evolved from and within the science of western, and particularly European, medicine, is practiced nowadays in more than 70 countries worldwide.

This European Standard was developed to specify minimum quality standards for homeopathic care in a medical context, ensuring high standards in the education, training and practice of homeopathy by medical doctors. Patients who choose homeopathy should be ensured of the quality and standard of care they will receive.

In addition, this standard aims at harmonizing professional standards in homeopathic practice by medical doctors across Europe and integrating high-quality homeopathy into European healthcare. It will help health care leaders to develop solutions that contribute to a broader vision of health and patient autonomy as recommended by the WHO *Traditional Medicine Strategy 2014-2023* [2].

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1 Scope

This European Standard specifies the minimum requirements for medical doctors with additional qualification in homeopathy and their services.

This European Standard is not applicable to services provided by persons not being medical doctors, nor to the preparation of homeopathic medicines, nor to the methodology and practice of homeopathic provings.

2 Terms and definitions

For the purpose of this document, the following terms and definitions apply.

2.1

acute disease

rapid pathological process which has a tendency to finish its course more or less quickly, but always in a moderate time

[SOURCE: Hahnemann, The Chronic Diseases: Their Peculiar Nature and Their Homeopathic Cure]

2.2

chronic disease

disease, often with an imperceptible beginning, which dynamically affects the living organism to gradually deviate from the healthy condition

[SOURCE: Hahnemann, Organon of the medical art, §72]

2.3

constitution

pattern of physical and psychological characteristics that identify an individual, including physical and psychological reactions to stimuli and circumstances that occur in everyday life

2.4

direction of cure

progressive improvement in the patient's state indicated by directional changes in the disease process, namely from above downwards, from within outwards, from more important to less important organs and from the mental level to the physical level, and symptoms resolve in reverse order of their onset

Note 1 to entry: Direction of cure may be determined by changes in the disease process.

2.5

general symptoms

generals

phenomenon of a disease concerning the patient as a whole relating to more than one area or aspect

EXAMPLE Fever, sweat or weakness.

2.6

homeopathic medicine

homeopathic medicinal product prescribed according to the principle of similars

[SOURCE: 2001/83/EC as amended by 2004/27/EC, Art. 1(5)] [3]

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2.7

homeopathic medicine selection

comparison and differentiation of the homeopathic medicines in question in order to find the most appropriate homeopathic medicine for each patient based on the principal of similars

2.8

homeopathic proving

method used in homeopathy by which the symptom profile of a homeopathic medicine is determined by the administration of doses of the substance in homeopathic potency to healthy volunteers that can elicit symptoms

Note 1 to entry: Corresponds to homeopathic pathogenetic trial.

2.9

homeopathy

medical approach aimed at improving the patient's health by the administration of homeopathic medicines

2.10

materia medica homeopathica

body of collected knowledge about the therapeutic properties of any substance used for healing in homeopathy

2.11

Medical Doctor with additional Qualification in Homeopathy**MDQH**

medical doctor additionally trained in homeopathy and qualified to integrate homeopathy into patient care within the context of general medical practice, conventional specialist practice or full-time homeopathic practice

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2.12

miasmatic theory

Hahnemann's theory explaining the aetiology and development of chronic or recurrent disease states which may be acquired or inherited and which may bring about a predisposition to a particular disease

2.13

modality

factor which aggravates or ameliorates a symptom or the whole clinical state of a patient

2.14

potency

degree to which a homeopathic medicine has been potentized

2.15

potentization**dynamization**

method of preparing a homeopathic medicine by means of trituration or succussion in between each serial dilution

2.16

principle of similars

therapeutic use of substances to treat symptoms similar to those which they can induce in a healthy person

2.17**repertorization**

technique of using a repertory to identify the homeopathic medicines whose materia medica corresponds most closely to the totality of the symptom picture of the patient

2.18**repertory**

systematic cross reference of symptoms and disorders to the homeopathic medicines

2.19**repertory rubric**

heading in the repertory that links the symptoms or signs or clinical diagnosis to the corresponding homeopathic medicines

2.20**suppression**

treatment against the direction of cure

2.21**totality of symptoms**

complete clinical picture including the mental, general and local symptoms of the patient

3 Competences

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3.1 General

Homeopathy offers a different approach to the concept of illness and its relationship to the patient. MDQHs work in the same way as their conventional colleagues but integrate homeopathy into patient care. The MDQH shall bring to the consultation all the ethical and professional values, competence and responsibilities that are expected of a medical practitioner, forming an all-round assessment of the patient's needs, and cooperating with other health care practitioners whose care the patient is already receiving or may need.

3.2 Required knowledge and understanding

In addition to their conventional training the MDQH shall have knowledge and understanding of:

- a) the scope and value of homeopathy, and the ability to understand and integrate its contribution into patient care,
- b) health and of the dynamics of illness, together with an extended comprehension of chronic disease,
- c) communication skills, especially with regard to the characteristics of homeopathic case taking,
- d) the patient as an individual,
- e) the individual's capacity for self-regulation and self-healing, and the possibility of stimulating these processes,
- f) the importance of the therapeutic encounter itself,
- g) the scientific implications of the subject, its evidence base, and the arguments that underpin it,
- h) the limitations of homeopathy,

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- i) the use of homeopathy as a complementary therapy in preventive, prophylactic and palliative care, and
- j) the need to operate within a safe medical context and within a broader care plan, which includes, as a must, the knowledge of medical diagnosis, prognosis, and conventional treatments.

3.3 Required abilities and skills

The MDQH shall be able to:

- a) obtain appropriate informed consent for providing homeopathic care,
- b) derive comprehensive data since prescribing of homeopathic medicine is based on a holistic assessment, as well as pathological indications, and all aspects of the case and of the patient are important,
- c) elicit symptoms and identify signs on a physical, emotional and mental level using case-taking, examination and all necessary additional analysis to select the homeopathic medicine,
- d) communicate clearly with patients, their families, and other healthcare professionals, and
- e) ensure patients are fully informed about their treatment choices and care.

3.4 Relationship between conventional and homeopathic approaches

The MDQH chooses the best medical approach for the patient, which may be conventional, homeopathic or both. The MDQH should know the indications and limitations of homeopathy, which, in part, depends on their education and experience. As a medical method, homeopathy may be used in both general and specialized medicine.

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4 Clinical practice**4.1 Homeopathic case taking**

A complete homeopathic case taking is the most important diagnostic instrument in homeopathy. During the homeopathic case taking, the indication for homeopathic treatment shall be assessed. In homeopathic case taking, the MDQH shall:

- a) understand the signs and symptoms of the condition in the sense of a conventional medical diagnosis and
- b) determine the data for a qualified homeopathic medicine selection.

The service requirements of homeopathic case taking shall comprise:

- c) registering spontaneously visible findings, behaviour and gestures,
- d) recording the patient's spontaneous report,
- e) identifying the symptoms in their totality in a guided report,
- f) exploring more precisely the most important details: mind and emotions, general and local symptoms including modalities,
- g) a complete case-taking, including medical, biographic and social history, and
- h) a complete family history.

In the context of homeopathic case taking, a careful physical examination shall be performed in order to detect, and describe in more detail, all physical signs and symptoms including externally visible signs.

4.2 Homeopathic case analysis

In homeopathic case analysis, the MDQH shall judge the symptoms and findings according to homeopathic principles.

The MDQH shall, in particular:

- a) identify the symptoms that are characteristic of each individual patient,
- b) assess the symptoms that are relevant for the medicine selection,
- c) identify the symptoms that are important for therapy monitoring (progress-relevant symptoms),
- d) analyse and assess the progression using the progress-relevant symptoms, considering the spontaneous progression to be expected and the principles of the direction of cure known in homeopathic practice,
- e) compare and differentiate the homeopathic medicines prioritized using the materia medica,
- f) be aware of the different approaches, methods and tools for finding the appropriate homeopathic medicines,
- g) be aware of how to use a repertory, and the limitations of its use.

4.3 Follow-up and case management

In the follow-up, which is the most important diagnostic instrument during the ongoing homeopathic treatment, the MDQH shall:

- a) ascertain whether the therapy plan of the last consultation has been followed and the homeopathic medicine has been appropriately taken,
- b) determine changes in symptomatology with regard to the homeopathic medication, self-medication and other influences,
- c) analyse and assess the changes,
- d) evaluate therapeutic success,
- e) check and modify the therapy plan if necessary, and
- f) decide on any further course of action.

4.4 Requirements for documentation of medical records

Documentation of medical records shall include the clinical state at the onset of a therapy, its changes during the course of treatment, any decisions made and therapeutic measures taken, and the clinical progression. This enables another MDQH with practical experience to understand the case. All consultations shall be chronicled.