

Letters to the Editor

Send your letters to the Editor,
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Priority will be given to letters less than 500 words long.
Authors must sign the letter, which may be edited for reasons of space.

AN INAPPROPRIATE CHALLENGE

Sir, there is an interesting and ongoing debate about the ethics of using placebos in medicine, so I was disappointed that the response to *Unethical aspects of homeopathic dentistry*¹ has focused instead on disputing the overwhelming scientific consensus that homeopathy is baseless and unproven.²⁻⁵

It is well known that people are prone to trust experiences and evidence that support their preconceptions. It is therefore inappropriate to challenge such an established consensus in the letters and opinion pages, particularly by citing personal experiences, individual studies and one's own website. To make a convincing case, a large, unbiased systematic review is needed. The Cochrane Collaboration has already done this for several conditions,⁶⁻¹⁰ but has yet to find compelling evidence of any benefit. Usually, few or no well-conducted trials exist.

In the absence of evidence that homeopathy works, one is forced to estimate its *priori* plausibility as the homeopaths do – by comparing it to experience. The two founding principles of homeopathy are that a patient presenting with a given symptom is best cured by a substance known to cause that symptom, and that diluting medicine makes it stronger – including well beyond the point where no medicine remains. I wonder how your readers' clinical experiences compare to these principles.

A. Taylor, Manchester

1. Shaw D. Unethical aspects of homeopathic dentistry. *Br Dent J* 2010; **209**: 493-496.
2. Mellor T. Pretty powerful. *Br Dent J* 2011; **210**: 198.
3. Farrer S. Personal diatribe. *Br Dent J* 2011; **210**: 291-292.
4. Dymitr Z. Seek to understand. *Br Dent J* 2011; **210**: 292.
5. Eames S, Darby P. Homeopathy and its ethical use in dentistry. *Br Dent J* 2011; **210**: 299-301.
6. McCarney R W, Linde K, Lasserson T J. Homeopathy for chronic asthma. *Cochrane Database Syst*

Rev 2004; CD000353

7. McCarney RW, Warner J, Fisher P, Van Haselen R. Homeopathy for dementia. *Cochrane Database Syst Rev* 2003; CD003803.
8. Smith C A. Homeopathy for induction of labour. *Cochrane Database Syst Rev* 2003; CD003399.
9. Coulter M K, Dean M E. Homeopathy for attention deficit/hyperactivity disorder or hyperkinetic disorder. *Cochrane Database Syst Rev* 2007; CD005648.
10. Kassab S, Cummings M, Berkovitz S, van Haselen R, Fisher P. Homeopathic medicines for adverse effects of cancer treatments. *Cochrane Database Syst Rev* 2009; CD004845.

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USEFUL REMEDIES

Sir, I was delighted to read the excellent defence of homeopathy in dentistry by Drs Eames and Darby in the recent *BDJ* (*BDJ* 2011; **210**: 299-301).

I have used homeopathy very successfully in my practice for many years and wouldn't like to be without it.

There are particularly useful remedies for aphthous ulcers and cold sores which get rid of these troublesome conditions within a day or so.

Nat mur 200 is astonishingly good for developing cold sores at the vesicle stage – they disappear within 24 hours and don't return for weeks. Arnica is famous for its usefulness in bruising and general trauma – fantastic after a difficult extraction.

My patients really appreciate this small but very useful aspect of my practice. We may not understand how homeopathy works (and many other things too for that matter) but there's no doubt that it does. One day we'll have the explanation.

D. G. Horobin, Bexleyheath

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A SUBSTANTIAL GAP

Sir, I write in regard to *Homeopathy and its ethical use in dentistry* (*BDJ* 2011; **210**: 299-301). Any ethical practice involving homeopathy must necessarily begin by telling the patient that it is

scientifically implausible; for homeopathy to be valid most of what we know about chemistry and physics would have to be not just wrong but spectacularly wrong. Unfortunately this would undermine the placebo effect and the counselling nature of the consultation.¹

Science has advanced in the last 200 years in a way that homeopathy simply has not; indeed, one (possibly the most) prominent homeopath, George Vithoulkas, has chided homeopaths for failing to follow the letter of Hahnemann's 'Organon'. In a comment on the Nature blogs, Vithoulkas says: 'to tear down a therapeutic system by examining and evaluating its theory instead of its therapeutic results is quite inappropriate. Until a few years ago, we did not know how aspirin works, yet it was the most frequently prescribed drug in conventional medicine.'

The point not noticed by Vithoulkas or made in the article is this: with drugs, no principles of science are violated; while the mechanism may be unknown in detail, it is plausible and consistent with other branches of knowledge, so the hierarchy of evidence may safely place clinical trials at the apex because the basic premises on which the proposed intervention are based are widely understood and accepted, the evidence gap is small and specific. With homeopathy the gap is substantial.

Disease is not caused by 'miasms' as Hahnemann believed and the basic principles of homeopathy, 'the law of similia', 'potentization' and 'the law of infinitesimals' are articles of faith, not laws of nature. There is no credible evidence that any one of them is a valid generalisable principle. Are we really to believe that powerful healing can result from forces unmeasurable by any scientific instrument?

In order to be persuasive we therefore need evidence massively more compelling than the studies cited, because we'd have to discard everything we have learned about physics and physical chemistry since Avogadro. As it turns out, systematic reviews of the research show that the more positive results are from methodologically weaker studies, while stronger methodology tends inexorably toward the conclusion of placebo plus experimenter bias.²⁻⁵

As the House of Commons Science and Technology Committee concluded, there is no robust evidence that homeopathy is effective beyond placebo.⁶ To pretend otherwise is unethical as it violates the principle of informed consent. In a world where it is seriously being promoted for the treatment of cancer and radiation poisoning, and the prevention of malaria and typhoid, with provably devastating results, I am afraid your publication of this article is cause for serious concern.

G. Chapman, Reading

1. Brien S, Lachance L, Prescott P, McDermott C, Lewith G. Homeopathy has clinical benefits in rheumatoid arthritis patients that are attributable to the consultation process but not the homeopathic remedy: a randomized controlled clinical trial. *Rheumatology* 2011; **50**: 1070-1082.
2. Kleijnen J, Knipschild P, ter Riet G. Clinical trials of homeopathy. *BMJ* 1991; **302**: 316-323.
3. Linde K, Clausius N, Ramirez G *et al*. Are the clinical effects of homeopathy placebo effects? A meta-analysis of placebo-controlled trials. *Lancet* 1997; **350**: 834-843.
4. Linde K, Scholz M, Ramirez G, Clausius N, Melchart D, Jonas W B. Impact of study quality on outcome in placebo-controlled trials of homeopathy. *J Clin Epidemiol* 1999; **52**: 631-636.
5. Cucherat M, Haugh M C, Gooch M, Boissel J P. Evidence of clinical efficacy of homeopathy. A meta-analysis of clinical trials. HMRAG. Homeopathic Medicines Research Advisory Group. *Eur J Clin Pharmacol* 2000; **56**: 27-33.
6. Evidence check: Homeopathy, House of Commons Science and Technology Committee, 20 October 2009.

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QUACKERY RISK

Sir, I am sure I am not the only reader to be exasperated by the editor's acceptance of the opinion piece *Homeopathy and its ethical use in dentistry* (*BDJ* 2011; **210**: 299-301). I assume an opinion piece slips past the peer review process. This is no reason uncritically to accept arguments lacking in analytic rigour.

There are numerous unsubstantiated and selective claims in the piece. Unfortunately, its inclusion will permit future references by homeopaths to the *BDJ* as

if the journal, and by connection the BDA, dental academics and clinicians, viewed homeopathy as having some clinical validity.

I remember being told, as a dental student, that to engage with such quackery simply allows it to benefit from the illusion of scientific debate. This is what we risk here.

On the positive side, however, I am always happy to be reminded of the tale of the homeopath who forgot to take his medicine and died of an overdose.

R. Levy, London

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IMPECCABLE ARTICLE

Sir, my thanks to the *BDJ* for allowing Britain's homeopaths a forum to argue their case in a recent, impeccable article (*BDJ* 2011; **210**: 299-301).

I found it encouraging to read that dental professionals now have a further avenue for research through which they can add to the evidence base on which we practise. The potent placebo effect of homeopathic medication is one we can now look to embrace and should indeed 'maximise it for the benefit of our patients'.

The heartening fact that the remedies are so biologically inert that through adopting them in our everyday practice we can seek to 'minimise the amount of potentially dangerous medication used', removes one of the few quandaries I had whilst witnessing their prescription during previous employment in a busy British dental hospital.

Indeed, the article's links to the British Homeopathic Association provided me with the knowledge I was lacking regarding the theory of water's 'memory', which underpins homeopathic practice. Thankfully I discovered that they use distilled water (which I'm assuming has had its memory wiped) to formulate their medications. My concerns lay in that if common tap water was used in these potions then they may still possess a latent memory of the infinitesimally small amounts of faeces and urine which would have previously passed through it. Of course, doing that would be silly.

N. Stanford, Newcastle-upon-Tyne

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ETHICALLY UNACCEPTABLE

Sir, I write regarding *Homeopathy and its ethical use in dentistry* (*BDJ* 2011; **210**: 291-292). In addition to the article there are two quite long letters in support of its use.

Lest your readers begin to think that there may be possible benefits of homeopathy I would draw their attention to the excellent article by Dr Kevin Smith.¹ In this he looks at all the aspects of homeopathy but the critical part of his summary is 'A utilitarian analysis of the utilities and disutilities leads to the conclusion that homeopathy is ethically unacceptable and ought to be actively rejected by healthcare professionals'.

K. G. Isaacson

By email

1. Smith K. Against homeopathy – a utilitarian perspective. *Bioethics* 14 February 2011. DOI: 10.1111/j.1467-8519.2010.01876.x (Epub ahead of print).

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RESTORATION FRAGMENTS

Sir, we present a unique case of a foreign body reaction in a 52-year-old male patient presenting with pain in the lower right quadrant and a large destructive area of bone loss in the body of the mandible. This was subsequently attributed to an intra-osseous foreign body reaction as a result of amalgam displaced into the socket during an extraction several months ago.

Physical examination revealed slight facial swelling present at the right body of the mandible with no cervical lymphadenopathy or trismus. The patient had no neurological deficits including intact lip sensation.

Intraoral examination revealed a firm palpable swelling in the buccal sulcus around the lower right second premolar region, with no mobility or tenderness to percussion of the adjacent teeth.

Panoramic radiograph (Fig. 1) showed a diffused irregular radiolucent area in the right side of the body of the mandible with residual amalgam residue present within the affected bone leading to significant root resorption of the lower right canine, first premolar and first molar teeth. The pathological area was explored, debrided and curettage of the area was performed under local anaesthesia with extraction of the L44 and L46.