The Routledge Handbook of Religion, Medicine, and Health

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Homeopathy and chiropractic in the United States and beyond

Publication details


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Published online on: 25 Nov 2021

How to cite: Holly Folk. 25 Nov 2021, Homeopathy and chiropractic in the United States and beyond from: The Routledge Handbook of Religion, Medicine, and Health Routledge

Accessed on: 28 Oct 2023


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Introduction: the cultural milieu of alternative medicine

In homeopathy, disease is understood as a derangement of the vital force. Homeopathic medications assist the body’s vitality, accelerating the healing process. Chiropractic focuses on the spine, regarded as the main conduit of life force. Treatment is believed to remove physical obstructions to the circulation of vitality, allowing the body’s healing to proceed unimpeded. Both homeopathic theory and chiropractic philosophy understand human beings to exist on parallel structures of material and metaphysical reality. The systems refract a spectrum of themes about religion in the modern world.

The nineteenth-century historical context is important for both homeopathy and chiropractic in their modern forms. Though not directly articulated today, both systems inherited vitalist ideas from eighteenth-century French medical theory (Warner 1998b). The core principle of vitalism is that a life force animates the body and is responsible for healing. Starting in the late eighteenth century in France, and soon propagated across Europe and North America, vitalist theories were an attractive alternative to ‘humoural’ medicine, which focused on bodily fluids and promoted ‘heroic’ treatments like bleeding and purging with chemical poisons (Warner 1998a). Reform-minded physicians proposed relying on the ‘healing power of nature’ (vis medicatrix naturae), and letting the patient recover without subjecting them to harsh therapies.

Historically, alternative medicine has been associated with anti-authoritarian subcultures. The phrase medical sect has been used to disparage both homeopathy and chiropractic. Yet the phrase was originally used self-referentially, by American health reformers who saw movements like botanic medicine and water cure as similar to the Methodist and Baptist churches whose growth was disrupting established Protestant denominations (Haller 2013). In the early nineteenth century, supporters of alternative medicine embraced the charged political rhetoric idealizing the American Revolution that characterized many cultural ventures in the Early Republic. Since then, health liberty, the belief that autonomy in medical choices is an inalienable right, has been a consistent theme for populist protest in the United States (Grossman 2013).

Like other alternative systems, homeopathy and chiropractic challenged established medicine in Europe and North America. They drew strength from the fact that many sciences were in a state of transition. Scientific discoveries had introduced unseen forces like sub-atomic...
particles and invisible disease pathogens. That professional science entertained the existence of such phenomena helped make Western culture receptive to metaphysical reinterpretations of scientific knowledge.

After 1870, vitalist theory lost its authority in Western medicine, when laboratory discoveries yielded new domains of knowledge about disease and the human body. Yet vitalist beliefs did not disappear from Western societies; rather there was a change in their social location. The Progressive Era saw the emergence of several religions devoted to healing, including Christian Science, Pentecostalism, the Emmanuel Movement, and Seventh-day Adventism. As Rennie Schoepflin has noted, the ‘spiritualization’ of vitalism was a response to the changing place of metaphysical ideas in regular medicine (Schoepflin 2003).

Most of the alternative health movements from the nineteenth century died out, though their causes sometimes were taken up by new organizations. Homeopathy and chiropractic are among a handful of systems with institutional continuity. Despite having spiritual content, neither practice became a ‘religion’ in the conventional sense of the word. The systems weathered enormous hostility from the American Medical Association and other antagonists, but experienced a resurgence starting in the 1970s, when they became identified with holism and a popular rejection of medical technologies (Fuller 1989). Today they stand as two of the most popular forms of alternative healing in North America. Data from the 2012 National Health Interview Survey indicated that 2.1 per cent of Americans had used homeopathy in the previous year, and 9.1 per cent consulted chiropractors. The 2017 NHIS survey did not ask about homeopathy, but in 2018 researchers found that chiropractic treatment had risen to 10.3 per cent (Dossett et al. 2016; Clarke et al. 2018). Yet in the United States and Canada, native-born white Americans use alternative medicine at higher rates than African Americans, Asians, or Latinos. In North America, use of complementary and alternative medicine (CAM) is highly correlated with the middle class, and homeopathy and chiropractic struggle with perceptions of class-based exclusion (Ward et al. 2013; Su and Li 2011).

There is little data comparing alternative medicine internationally, but many signs point to the growth of both chiropractic and homeopathy. In the context of globalization, the spread of alternative medical systems has resembled the experience of ‘religious multinationals’—religious organizations with international activities, but a centralized base in one country. The sociologist James Beckford found that missionizing groups need to adapt to the legal structures and cultural expectations of target countries, even as the groups themselves strive for uniformity in belief, practices, and operations (Beckford 1985). Similarly, the professionalized branches of chiropractic and homeopathy must navigate the health laws of individual countries, as well as ambivalent feelings about holistic treatments. Often, traditions are adapted to local contexts in ways that change aspects of their meaning or add new elements.

The origin and outlook of homeopathy

Homeopathy, which means ‘cure by the similar,’ was created by Samuel Christian Friedrich Hahnemann (1755–1843). A German physician, Hahnemann grew dissatisfied with conventional medical treatments after the deaths and illnesses of several family members, including his first wife. Hahnemann began to experiment with medicines, and he published his ideas in 1810, in the Organon of the Rational Art of Healing.

Arranged as a set of aphorisms, the Organon laid out the basic principles of homeopathy (Hahnemann 1836; Ullman 2007: 17–35). The Law of Similars asserts that substances causing certain symptoms in healthy people will trigger a curative process in a person suffering from an illness carrying those symptoms. Thus, a remedy for bee stings will include bee venom or
honey. The Law of Infinitesimals recommends that patients be given the minimum effective dose of a remedy. The Law of Infinitesimals undergirds the homeopathic belief in diluting therapeutic substances, then activating them by vigorously shaking the solution. This process, known as ‘potentization,’ is believed to create a lasting imprint on the molecular structure of the water or solvent in the homeopathic medication. Chemically, potentization makes homeopathic medicines more diluted, but homeopathic theory claims that it makes them stronger. The third principle, Single Remedy, proposes that only one homeopathic medication be administered at a time, and that the specific remedy chosen be attuned to both the person’s physical symptoms and manifestations of ‘character.’

Homeopathy understands human beings as highly individual in their natures. Finding the correct match between a person’s symptoms and the effective remedy requires careful assessment. In contemporary practice, this means the initial visit to a homeopath will include a long intake interview with all sorts of health-related questions posed (Owen 2007: 29–38). Homeopathic theory maintains that there are three levels of human existence: material, emotional, and spiritual. Illness has physical and psychic effects, and so psychological and emotional symptoms are as important as physical ones (Kirschmann 2004a: 16, 129). Further, homeopathy proposes that people have spiritual elements to their persona—spiritual ‘bodies’ that also can suffer ailments (English-Lueck 1990: 89). Drawing on metaphysical ideas that can be traced to the philosopher Emanuel Swedenborg, the spiritual body is understood as coextensive with the physical form, but on another plane (Haller 2009: 39–45). It is, on the one hand, what is innermost to the human being, but the spiritual body also is understood to radiate beyond the physical form to the auras around it. According to homeopathic theory, different ‘degrees’ of the spiritual body experience illness and healing progressively. The homeopath must be able to chart the progression of symptoms and their severity to determine the precise remedy. Treatment itself, however, is usually quite simple: the afflicted person takes a remedy of diluted and potentized natural substances—typically plants, but certain minerals as well (Owen 2007: 81–89, 153–162). Sometimes this is an infusion or tincture, but very often, the remedy is in pills, which are mostly sugar. Traditionally, homeopaths recommend the afflicted try the medication for thirty days and abstain from other treatment until the remedy can take effect.

Soon after emerging, homeopathy spread rapidly in Europe, but in the nineteenth century, the fortunes of practitioners depended on the variable sentiments of the royalty (Jütte 2006). Their patronage could promote and legitimate the new system, but the death of a popular general while under homeopathic care led to the banning of homeopathy in Austria from 1819 to 1835. Similarly, the Russian emperor outlawed the practice in the 1850s, after the death of his father (Ullman 2007: 284, 294). In Europe, homeopathy had a more genteel social profile than other health movements. Some historians believe that the immigration of European homeopaths shaped the practice in America, making it less sectarian, and more inclined to cooperate with regular medicine (Jütte et al. 1998).

**Homeopathy in the United States**

Homeopathy was brought to America in 1825 by Hans Burch Gram (1786–1840), a Danish-American from Boston who went to Copenhagen to study medicine. After learning about homeopathy, Gram returned to the United States and opened a practice in New York. The practice arrived in the United States at an opportune moment, when established therapeutics were being challenged. Homeopathy prospered from aligning with the ‘Nature Trusting
Heresy’—a rejection of the so-called heroic treatments like bleeding and purging. Homeopathic medications were palatable and without severe side effects. In the 1840s and 1850s, many American homeopaths were physicians in favour of drugless healing, dietary reform, and the holistic living practices associated with the hygiene movement (Haller 1999; Kaufman 1971). Homeopathic medical kits also were sold directly to consumers, whose use of the practice was an extension of domestic medicine. The practice was especially appealing to the middle class on the East Coast, who also embraced other manifestations of health reform.

In the early nineteenth century, homeopaths studied under doctors as ‘preceptors’ (Haller 2009). By the late nineteenth century, many homeopathic colleges had been established, yet homeopathic training also was offered to physicians in the form of post-graduate courses. The involvement of laypeople in homeopathy has alternately benefitted and troubled the profession. Homeopathy often was kept alive by domestic practitioners in times of scarcity, but the ability to self-treat has limited the clientele that could support the profession.

The growth of homeopathy in the United States was partly due to its use of the networks of alternative spirituality. Like Samuel Hahnemann, Hans Gram was a Freemason, and he recruited his first patients and practitioners through Masonic societies (Haller 2016). By 1829, the new system had grown large enough to sustain the incorporation of the New York Medical and Philosophical Society, the first American homeopathic organization.

Swedenborgianism and homeopathy

Swedenborgianism was influential in shaping homeopathy in the United States. Emanuel Swedenborg (1688–1772) was an eighteenth-century Swedish scientist whose religious visions inspired him to write new interpretations of Christian theology. In the nineteenth century, his writings were internationally popular among the middle class. In America, as many as 85 per cent of Swedenborgians became users of homeopathy (Kirschmann 2004a: 32–33).

There are affinities between many principles in homeopathic theory and Swedenborgian philosophy. The Swedenborgian doctrine of correspondence establishes co-existence across multiple dimensions of the cosmos, such as the relation of the human body to astrology. Homeopaths found this principle helpful in justifying the special properties of plants and other remedies.

The theories of Constantine Hering (1800–1880), a founder of the Allentown Homeopathic Academy in Pennsylvania, illustrate the arrival of Swedenborgianism into homeopathic thought (Coulter 1972). Hering believed the human body contained a ‘reactive force’ that made it respond to stress with certain symptoms. In homeopathic theory, ‘Hering’s Law’ predicts that symptoms appear and disappear in a specific order, and that symptoms move from the interior of the body to the exterior, and from head to toe. This conception of the progression of disease is closely tied to Swedenborg’s doctrine that the universe unfolded on different cosmic levels. Swedenborgianism holds that the divine manifests from the spiritual world into the material through a set of progressive ‘Degrees’ (Swedenborg 2003: 63–77).

The most influential Swedenborgian in homeopathy was James Tyler Kent (1849–1916), a professor at the Homeopathic Medical School in Philadelphia. Kent asserted that disease reflected the condition of one’s spiritual body. Kent influenced homeopaths in several countries, including Great Britain, Germany, and France. By the late nineteenth century, Swedenborgian-influenced ideas were so deeply embedded in the practice that they were recognized as ‘pure’ homeopathic theory (Weiner and Goss 1989).
At the same time, because its metaphysical dimensions appealed to harmonial users, engagement with Swedenborgianism strengthened the lay elements of homeopathy, and arguably weakened the power of professional authorities (Kirschmann 2004a).

Compared to other forms of alternative medicine, homeopathy has a distinct social profile. Homeopathy has been propagated by three types of practitioners: medical physicians who practise homeopathy as a specialty, holistic healers who sometimes combine homeopathy with other systems, and ‘laypeople’ who self-administer homeopathy as part of a regimen of domestic medicine. The involvement of laypeople in homeopathy has alternately benefitted and troubled the profession. Homeopathy often was kept alive by domestic practitioners in times of scarcity, but the ability to self-treat has limited the clientele that could support the profession. Furthermore, non-medical practitioners have tended to be more open to metaphysical interpretations than physicians (Kirschmann 2004b).

**Vitalism in diversifying homeopathy**

A leading example of the imbrication of homeopathy with spirituality is in the widespread propagation of ‘cell salts,’ discovered and first promoted by Wilhelm Schuessler (1821–1898) in the 1870s. Cell salts are not technically homeopathic medications; they are micro-doses of mineral supplements understood to interact with the body at the cellular level, via molecular vibration. For believers, cell salts affect bodily auras and assist the vital force in the body. Today, vibrational remedies are a widely used form of homeopathic medicine. One of the largest companies is Kroeger Herb Products in Longmont, Colorado. Its founder, Hanna Kroeger (1913–1998), came to believe that along with physical causes, illnesses could have spiritual factors behind them, such as imbalance of the human aura, neglect of the magnetic body, or spiritual ‘parasites’ (Kroeger 1984). She developed a new system, ‘Vibropathics,’ that used remedies intended to activate vibrations in the body (Hanna’s Herb Shop n.d.).

Homeopathy reached its apex in the mid-nineteenth century. The system’s decline in popularity began in the 1890s. Some historians believe that homeopathy lost ground to mental healing, which offered better psychological and spiritual consolation (Kirschmann 2004a: 145). By the first decade of the twentieth century, homeopathy was rapidly losing patients and practitioners. In 1900, there were twenty-two homeopathic schools in the United States. By 1923, only two homeopathic colleges were operating: Hahnemann Medical College in Philadelphia and New York Homeopathic College in New York (Kirschmann 2004a: 122). In response, the profession promoted ‘lay leagues’—associations for non-professionals to learn about and hopefully promote and advocate the practice.

In 1904, the American Medical Association (AMA) offered to let homeopaths, osteopaths, and eclectics who used regular medical treatments join the AMA as physicians. This had different effects on each movement. It hastened the demise of eclecticism and set conditions in osteopathy whereby the medical faction became dominant. In homeopathy, half the practitioners sought AMA membership, but the remaining practitioners strengthened their commitment to Hahnemannism (Coulter 1982). Through the twentieth century, although some physicians continued to see homeopathy as a medical specialty, much of the energy and interest in the system came from spiritually oriented practitioners. This stance rendered homeopathy socially vulnerable for several decades. Inter alia, the practice was targeted in the United States by the AMA in their Campaigns Against Quackery, and by governments in many other countries (Fisher and Ward 1994; Jütte 2006). Since the 1970s, however, there has been a resurgence of interest in the practice, as holism and alternative medicine have become more popular (Kirschmann 2004b).
Principles of chiropractic treatment

Chiropractic is best known as a therapy for back pain, and most patient visits are for spinal problems. The main premise of chiropractic theory, however, is that small vertebral displacements, known as subluxations, cause a broad range of health conditions. Chiropractors identify the locations where the spine has been displaced and use a variety of techniques to ‘adjust’ the vertebrae. Adjustments are believed to be helpful for a range of bodily conditions because the spine is the main channel for vitality and health.

As with homeopathy, the first visit to a chiropractor usually involves a long consultation with a complete health history. Bodily posture and mobility are assessed, and often a set of X-rays are taken to identify subluxated vertebrae. Many chiropractors use electronic scanners to measure the heat generated by inflamed tissue. Once the chiropractor has established which vertebrae need adjustment, the patient is asked to lie face-down on a padded table. Treatment involves pressing on spinal joints, but it also can include bending the torso and rotating limbs in their sockets. Adjustments can be gentle or delivered with great force, and sometimes a small burst of light pressure is administered with a device that is the size of a small pistol. Adjustment does not take very long, though patients are advised to rest in the chiropractor’s office for twenty minutes after treatment. A systematic review done in 2001 found half the people who received chiropractic adjustments had temporary side effects such as headaches, pain, and dizziness (Singh and Ernst 2008: 173). Many chiropractors forewarn their patients that such effects are part of the healing process. In contrast to homeopathy, where patients try the remedy for 30 days before a second visit, chiropractic patients are usually advised to return for follow-up appointments over the next several weeks, especially for back pain. Many patients complete the course of treatment for acute problems, and a small percentage become regular users of chiropractic for their primary healthcare.

The early history of chiropractic

Chiropractic theory can be traced to the ideas of its creator, Daniel David (D.D.) Palmer (1865–1913). The 1895 ‘discovery’ of chiropractic has been mythologized: it is said that while working as a magnetic healer (see Stein, this volume) in Davenport, Iowa, D.D. Palmer was able to restore the hearing of a man by pressing on his spinal protrusion and putting the displaced bone back into its natural position.

When chiropractic developed, homeopathy and many other forms of alternative medicine were in decline in the US. The largest and most successful healing alternatives were religions, including Christian Science, Seventh-day Adventism, and Pentecostal faith healing. Rather than cultivate a deeper religious ethic, D.D. Palmer continued to pursue a business model, but spirituality informed his chiropractic theory (Folk 2017: 124–127, 139–143).

In 1897, D.D. Palmer opened a proprietary college to teach chiropractic. The practice spread rapidly in the Midwest, the West Coast, and the southern states of Texas and Oklahoma, but not in the deep South or the Northeast. The early chiropractic movement suffered a rupture in 1902, when D.D. Palmer abruptly left Iowa to move to California. He left his twenty-one-year-old son Joshua Bartlett (B.J.) Palmer (1882–1961) in charge of the proprietary institute.

When D.D. Palmer returned to Davenport a few years later, the Palmers argued over ownership of the school, setting in motion the first of many conflicts in the profession about both leadership and chiropractic theory. Ultimately, D.D. surrendered his stake in the school and spent most of his remaining life in California. One of his last attempts to regain his status in the profession was to argue that, like Christian Science, chiropractic was a religion, and therefore
deserving of protection from government interference. Yet most chiropractors were not interested in creating a religious organization, and no movement emerged to support it.

**Chiropractic theory and principles**

Chiropractic theory has a distinct idiom, but its ideas are similar to the idealist philosophy upheld by harmonial religions: matter is a projection from the spiritual world; the mind of a person is a microcosm of the divine mind; and learning to control the relationship between the cosmic and individual beings confers many benefits. D.D. Palmer used a new term for vital force: Innate Intelligence. He claimed this bodily life principle drew its power from the cosmic consciousness that manifests the physical universe, which in the chiropractic idiom is known as Universal Intelligence. D.D. Palmer regarded conscious thought Educated Intelligence, as an obstruction to the important interactions between Innate and Universal Intelligence. As a result, in chiropractic theory the conscious mind is downplayed in comparison to New Thought or Positive Thinking.

B.J. Palmer worked extensively with his father’s theories, building them into what is known as ‘straight chiropractic philosophy.’ Straight chiropractors promote spinal adjustment not only for back pain and related bone and muscle problems but as a comprehensive form of healthcare. This is because straight theory regards Innate Intelligence as being of ultimate importance for all aspects of life and health. Innate is an indwelling divine element, understood in terms similar to those used in New Thought, to which early chiropractic has many connections. B.J. Palmer was a figure in the early Positive Thinking movement that blended New Thought with business advice. His advertising manual, *Selling Yourself*, became a model for later self-promoters (Folk 2017: 193, 241).

With the help of associates at Palmer School, B.J. Palmer sought to strengthen the physiological justifications for chiropractic efficacy. While some of his ideas have been discarded, ‘meric’ theory was a major development for the profession. Like the ‘nerve tracing’ done by magnetic healers, meric chiropractic holds that the nerves exiting the spinal column through the vertebral foramen are channels for bodily vitality, which forms the basis for the claim that chiropractic adjustment is beneficial for conditions other than spinal trouble. B.J. Palmer claimed meric chiropractic was a unique discovery, though diagrams tracing the nerves for healing date to the 1840s (Sherwood 1841). Yet despite the importance of meric theory to ‘super-straight’ practitioners, chiropractic philosophy continues to be contested in the profession.

Chiropractic inherited a therapeutic perspective that endows the central nervous system with special power. Historically, vitalist theorists had considered the nerves to be one of two conduits for life force, with the other being the blood. In the nineteenth century, the nerves became overwhelmingly the favoured model in both Europe and North America (Warner 1998a). ‘Nerve interference’ was thought to block the nutrition or function of bodily tissues and organs. Even before the creation of chiropractic, magnetic healers, hydropaths, and other practitioners considered the spine to be the main site of such obstructions.

**Professionalization and acceptance of chiropractic**

A notoriously cantankerous figure, B.J. Palmer both damaged the popular image of chiropractic and ignited public interest. His mercurial character and desire for personal recognition proved very divisive for the chiropractic movement. By the late 1920s, the profession had split into factions, with loyalty to B.J. Palmer one of the main points of division. Nonetheless, the Palmer School graduated the majority of chiropractors in the US and Canada from the early
1900s into the 1970s. Despite struggling for several decades, the chiropractic profession built the necessary infrastructure to be institutionally sustainable. Through the 1950s, most chiropractic colleges were proprietary, with some operating as correspondence schools. Since then, most have become non-profit institutions, with accreditation from the Council on Chiropractic Education, a professional consortium established to oversee chiropractic programs.

Through much of the twentieth century, the AMA targeted numerous alternative health fields with negative advertising. The AMA also forbid its members from professional collaboration with chiropractors, meaning that physicians were not allowed to make professional referrals. In 1976, a team of chiropractors filed a lawsuit for anticompetitive business practices. Litigation continued until 1990, when *Wilk versus American Medical Association* was decided in favour of Chester Wilk (b. 1930) and his co-plaintiffs in Federal Court. Judge Susan Getzendanner (b. 1939) found the AMA in violation of racketeering laws for their restrictions on physicians (Lenarz and St. George 2003). The decision did not rule on the efficacy of chiropractic as a treatment. Even so, it inspired the AMA to close down their anti-quackery activities. The absence of public criticism has made the past three decades very hospitable for both chiropractic and homeopathy.

A freer operating climate, however, has increased the ambiguity for how both science and spirituality should fit into chiropractic. The profession cultivates the image of chiropractors as local family doctors, offering natural but clinically sound treatments. At the same time, chiropractors frequently support patients’ antipathy to regular medicine, for example, by promoting the anti-vaccine movement (Campbell et al. 2000).

In addition, chiropractors sometimes adjust their practices situationally, so that religious ideas are not part of the treatment encounter. Some versions of straight chiropractic philosophy carry metaphysical ideas that potentially conflict with Christian theology. Practitioners do not always share their understanding of chiropractic philosophy with patients, which Candy Brown regards as an ethical problem of informed consent for consumers whose religious beliefs might preclude their seeking spiritually oriented healthcare (Brown 2010, 2013).

### Science and spirituality in homeopathy and chiropractic

Facing critics, proponents of alternative health have capitalized on framing their treatments as preferable alternatives to overly technologized care. Success requires activating both the categories of spirituality and science. ‘Subtle energy’ is an idea carried through both chiropractic and homeopathy that illustrates this tension. Subtle energy proponents believe the world is affected by forces usually undetectable to human senses (Albanese 1992). These are understood as energies whose power is thought to work through vibration. Subtle energy is invoked in some theories of homeopathic potentization, such as those of Arthur H. Grimmer (1874–1967), who believed vibratory remedies could even help treat cancer. In the 1930s, William Ernest Boyd (1891–1955) invented the Emanometer, a device that measures emanations from a homeopathic medication (Haller 2009: 56, 92).

Vibration also had an early appearance in chiropractic. Around 1910, D.D. Palmer advanced a new theory, asserting that Innate Intelligence, the chiropractic vital force, was carried through the body by the vibration of nerves (Palmer 1910). Though direct evidence does not exist, there is a strong possibility that D.D. Palmer was influenced by Theosophical ideas, especially the ‘vibratory physics’ created by Annie Besant and Charles Leadbeater (Besant and Leadbeater 1908). While residing in California, he made the acquaintance of the harmonial writer William Juvenal Colville (1862–1917), who likely inspired D.D. to reinterpret the activity of the nerves. The Third Theory, which understands chiropractic to work on the
nerves’ ‘tone,’ or tension in the spinal cord, resembles the ideas about vibratory physics that were popular in Theosophy, with which Colville was deeply engaged (Folk 2017: 162–166). Like the attempt to create a chiropractic religion, the Third Theory never became popular in the chiropractic profession.

Some practitioners claim the physical sciences provide support for their beliefs in the connection between vibration and health. In the 1950s, seeing a connection between homeopathy and atomic energy, the Brazilian homeopath Amaro Azevedo used modern physics to justify the dynamization of medicines. Roughly a quarter century later, following the popularity of Fritjof Capra’s The Tao of Physics (1975), George Vithoulkas (b. 1932), an important promoter of homeopathic education, used quantum physics to assert three levels of human existence—the physical, mental, and spiritual (Vithoulkas 1980). His work demonstrates an important paradox in modern holism: the use of science and technology to legitimate treatments intended to challenge their overuse. Other practitioners introduce more explicitly spiritual language into their practices. Vibratory theory is carried in Network Spinal Analysis (Reorganizational Healing), developed in the 1980s by Donald Epstein, who practises a form of ‘light-touch’ chiropractic. Like D.D. Palmer, Epstein sees individual human beings as microcosms of universal mind. Network Chiropractic aims to connect individual consciousness to the consciousness of the planet (Epstein 2010).

### Religious versions of homeopathy and chiropractic

When exploring their explicitly spiritual dimensions, it is important not to mischaracterize chiropractic and homeopathy, each of which include large numbers of practitioners who are not spiritually inclined. The straight movement is a minority in chiropractic, though in the United States it may be as large one-fifth of the profession. In the United States, the religious affiliations of chiropractors appear to track broadly with those of other Americans. Globally, there does not seem to be a dominant religious belief in either chiropractic or homeopathy.

While neither chiropractic or homeopathy officially affiliate with a religious tradition, many individual practitioners have engaged with metaphysical, esoteric, and new age spiritualities. For example, the Hermetic Order of the Golden Dawn counted as members the homeopath Edmund William Berridge (1843–1923), and Israel Regardie (1907–1985), a psychologist who later taught at Los Angeles College of Chiropractic. Homeopathic physician Wesley Harrington Ketchum was an early business associate of the trance medium Edgar Cayce. Clarence Wolsey Weiant (1897–1986), an important chiropractic activist, was an investigator of paranormal activity, as was the homeopathic physician Jacques Donnars (1919–2018).

The ‘attunement healer’ Lloyd Arthur Meeker (1907–1954) was especially influential on the chiropractic movement. In the 1930s, Meeker founded a spiritual school that later was incorporated as the Emissaries of Divine Light. Meeker inspired George Shears, who developed the God-Patient-Chiropractor (GPC) system, which understands God as the primary source of chiropractic healing. GPC chiropractic involves the laying-on of hands as well as spinal manipulation. Meeker also influenced Albert Ackerley, who came to believe that spiritual attunement could accomplish an adjustment without physically touching a patient (Melton 2001: 115). Other chiropractors followed Ackerley’s lead to become Attunement Healers, sometimes leaving chiropractic entirely.

There is a remarkable elective affinity between Rosicrucianism and alternative medicine. Rosicrucians appreciate the proximity of homeopathy to alchemy, and of chiropractic to subtle energy theory; nearly all the Rosicrucian orders practise some forms of spiritual or holistic
Alternative healing and new religions

Some new religious movements offer holistic healing as part of their spiritual ministries, and homeopathy is an especially popular choice. For example, Rudolf Steiner incorporated Kentian homeopathic theories about correspondences and ethereal bodies into his own system of Anthroposophic medicine (Steiner 1948). Swami Sathya Sai Baba (1926–2011), known as a philanthropist, established many homeopathic hospitals in India, where the practice has combined with Ayurvedic medicine. The founder of Aumism, Guru Hamsah Manarah (Gilbert Bourdin, 1923–1998) wrote a book on homeopathy. Homeopathy was practised at the Aumists’ Mandorom community in France, but it was held as a ‘lesser teaching.’ In the Order of the Solar Temple, a French and Canadian group that witnessed a series of suicides and murders between 1994 and 1997, homeopathy also was meant for low-level initiates. The practice was a topic in the recruitment talks offered by Luc Jouret (1947–1994), one of the leaders, who had studied homeopathy as part of his training as a holistic practitioner.

Their ties to new religious movements have extended the range of holistic health practices, but this also has invited the framing of alternative medicine as deviant religion. In several countries, including France, Belgium, and Hungary, anti-cult regulations have been applied to holistic practitioners (Susan Palmer 2011: 128–146). One target has been the American motivational speaker Eric Pearl (b. 1955). Formerly a chiropractor, Pearl has developed Reconnective Healing: a system of ‘non-touch energy healing’ that engages a ‘spectrum of frequencies . . . of energy, light and information’ (Pearl 2003). Like chiropractors, Pearl describes this energy as an Intelligence. In 2013, he was accused in a report made to the French government of practising brainwashing against his audiences (MIVILUDES 2015).

Alternative health and Western modernity

Both chiropractic and homeopathy show adaptations to consumer-based societies. For both professions, customer satisfaction is an important priority. Chiropractors and homeopaths are attentive to the individual needs of patients. The practices are noted for their long initial intake visits, though for each practice follow-up visits can be much shorter.

Homeopathy illustrates the commodification of holism in contemporary society. In 1853, Francis Edmund Boericke and Rudolph Tafel began selling homeopathic medications in their Philadelphia bookstore (Schmidt 1998: 156). The business quickly expanded to a chain of pharmacies across the United States. Today, Boericke & Tafel is the largest homeopathic manufacturer in America, and around the world, corporate manufacturers dominate the production of homeopathic remedies. Yet consumers of store-bought medications typically have no contact with a practitioner at all and, hence, no occasion to learn about the metaphysical potential of homeopathy.
Instead of retail sales, chiropractors are engaged with a different part of market society, offering a personal service for a fee. They promote the practice through advertising, direct mail, and introductory offers. Chiropractic suffers an image problem from its business practices. Medical doctors also charge for their fees but have generally refrained from advertising as part of a collective effort to preserve the altruistic image of the profession. The medical anthropologist Hans Baer found chiropractors’ use of advertising strategies to be a major antagonist in their relationship with physicians (Baer 1996).

Chiropractic and homeopathy have ridden the waves of optimism and disappointment associated with Western holism. Since the 1960s, alternative health has been associated with a perceived lack of empathy in regular medical care and a cultural rejection of technology. Following the Wilk trial, the 1990s saw a wave of anticipation about the prospects of alternative treatments. In the United States, a research centre was created at the National Institutes of Health to study complementary therapies. Since the mid-2000s, alternative medicine has faced greater scrutiny in Europe and elsewhere.

Both chiropractic and homeopathy have faced challenges on questions of efficacy, but with a key difference. Many studies have found spinal manipulation to be potentially helpful for the relief of back conditions. Chiropractic’s claims to a larger role in human health have fared less well, with the treatment found largely ineffective for conditions that are not musculoskeletal in nature, like asthma (Assendelft et al. 2003; Ernst and Canter 2006). Homeopathy has fared even worse in clinical trials. In recent years, the governments of many countries have issued reports stating that homeopathy was not effective (Ernst 2017). Since 2005, several European countries have removed homeopathic treatments from the registries of covered prescription medications. Yet because homeopathic compounds are diluted to the arguable point of inertness, they have been deemed safe enough for sale over the counter.

In Europe, homeopathy has come to be seen as ‘natural’ healthcare, patronized by people who are ‘spiritual but not religious.’ In an age of decongregationalized religion, bodily perfection is commonly understood as a religious goal. Complementary therapies have been described as spiritual alternatives in a secular age, but the beliefs and expectations of practitioners and consumers often do not align. Clients of holistic practitioners may have little interest in or even awareness of the metaphysical philosophies of alternative healthcare, even while they regard the use of such treatments as somehow connected to their own spirituality.

Chiropractic, homeopathy, and globalization

Chiropractic and homeopathy have had different patterns of cultural dissemination. Chiropractic grew first in the English-speaking world, and its major centres of popularity are there. The internationalization of homeopathy happened literally in the baggage of colonialism: in South America and elsewhere, Europeans brought domestic medicine kits with them. Alternative healing rides the currents of international sentiments about Western culture. Under communism, homeopathy was prohibited in some countries, reflecting state attempts to secularize society (Fisher and Ward 1994). Today, homeopathy and chiropractic are spreading internationally, and the propagation of Western holism has launched new hybridities that transgress cultural boundaries.

With more than 250,000 practitioners, India is the country where homeopathy is most popular (Prasad 2007). As in Europe, royal patronage helped introduce homeopathy to the general population. In the 1830s, after the Maharaja in Lahore was cured, the practice began to spread (Madhav University n.d.). In the early twentieth century, homeopathy was embraced by Indian
intellectuals who were in dialogue with Western esotericism. Rabindranath Tagore practised as a homeopath and funded a dispensary in his town of Shantiniketan (Bagchi 2000).

Much of the popularity of homeopathy in India is due to its having been combined with Ayurvedic medicine. One of the earliest unifiers of these systems was Benoytosh Bhattacharyya (1897–1964), an early twentieth-century scholar of Tantric Buddhism and Vedic Hinduism. Bhattacharyya used the Ayurvedic system of seven bodily tissues and the tridosha elemental system of fire, air, and water to reclassify homeopathic categories of disease and prescribed remedies (Bhattacharyya 1975). Its integration with Ayurveda is so strong that the Indian government now recognizes homeopathy as ‘traditional medicine.’

Historically, a large portion of homeopaths in India were unlicensed traditional healers (Chitkara 1973). Today, homeopathic certification requires three years of basic medical education, and while not every practitioner who calls themselves a homeopath has this credential, three-fourths are educated in homeopathic medical colleges funded by the Indian government. Many rural areas in India have inadequate numbers of physicians, and homeopaths are often used instead of medical doctors. Some practitioners even dispense pharmaceutical drugs instead of homeopathic remedies (Prasad 2007).

In Brazil, indigenization has entangled homeopathy with several religious traditions. As in India, homeopathy was first brought to South America by European settlers, but the practice was quickly incorporated into Afro-Brazilian polytheist religions, so that in 1890 homeopathy was banned in an attempt to suppress spirit possession. David Hess has pointed to how in Brazil both homeopathy and spirit possession transcend class lines (Hess 1991: 143–146). Today, in the Afro-Caribbean religions of Umbanda, Candomble, and Shango, the orisha Ossae (Ossanyn) is recognized as the guardian of healing plants; he also is known as the ‘Father of Homeopathy.’ (Morwyn 2001). Homeopathy also is popular among Kardecist groups practising Western-style spiritualism (Hess 1991). Furthermore, Rafael Shoji (2003) uncovered a Japanese-Brazilian priest of Shingon Buddhism who claimed to use homeopathy to heal. Afro-Caribbean religions have historically been patronized by oppressed populations and esotericism is popular among the Brazilian upper class. Across these diverse traditions, receitistas, or homeopathic mediums, channel messages from spirits, who are believed to be the figures prescribing the remedies.

The fusions with the Vedic tradition in India and with multiple faiths in Brazil show the potential for indigenization in homeopathy. In the growing cities of the developing world, indigenous healers have begun using the terms chiropractic and homeopathy to describe their traditional forms of bodywork and herbalism. In some locations, however the exact opposite is true: Western-style practitioners occasionally protect themselves by claiming to offer traditional healing. In Taiwan, for example, chiropractors must register as traditional massage therapists even if they use modern chiropractic treatments.

Chiropractic and homeopathy are established in Indonesia and Iran, and the popularity of homeopathy in Pakistan and Bangladesh shows that Muslim countries are not inherently opposed to alternative medicine (Das 2005). At the present, however, neither practice is well established in the Middle East, apart from in Israel. It is not clear why, although religious conservatism along with current political tensions between Islamic and Western societies may make Muslim-majority societies less receptive to holistic therapies. Yet cultural tensions likely sit atop the other reasons these systems struggle in certain parts of the world: poverty, geographic isolation, and state control. Western alternative medicine is sparse through much of Africa, though there may be as many as 2000 lay homeopathic practitioners in Nigeria (Das 2005).
Like religious multinationals, alternative medicine does not have predictable, easily replicable patterns for growth. Both chiropractic and homeopathy struggle under the reality that even in an age of homogenizing globalization, countries have different laws and cultural expectations. The future of both practices may rest in their ability to engage new worldviews without being eclipsed by them.

Notes

1 Many but not all the Progressive Era healing religions were part of what Sidney Ahlstrom labeled the harmonial tradition (Ahlstrom 1972: 1019–1020). The metaphysical movement and harmonialism are two common descriptors to the nineteenth-century idealist popular philosophies that were forebears of contemporary alternative spirituality. However, metaphysical also is a philosophical term, used to establish relations between the material and spiritual worlds. To avoid confusion, I will use ‘harmonial’ to refer to the Progressive-era religious groups, and ‘metaphysical’ for the philosophical concept. Esoteric refers to groups with initiatory rites and teachings restricted to advanced members—such as Theosophy and Rosicrucianism—and esotericism is a subset of harmonialism.

2 Unless otherwise noted, all information in this section comes from my book, The Religion of Chiropractic: Populist Healing in the American Heartland (Folk 2017).

3 Daniel David Palmer and his son Joshua Bartlett Palmer both used their initials as nicknames, and B.J. Palmer reversed his first and middle names.

4 Palmer College of Chiropractic was first known as Palmer Institute, then Palmer School. Today, the Davenport campus is part of Palmer Chiropractic University.

5 Osteopathy, originally a drugless healing system with affinal connections to chiropractic, was the most prominent expression of ‘circulatory vitalism’ in the Progressive Era.

6 One example is the eleventh principle in the Thirty-three Chiropractic Principles proposed by Ralph W. Stephenson, which states that Universal Intelligence (which corresponds to God), does not have ‘personal solicitude’ for individual beings (Stephenson 1946).

7 In 1921 Steiner, in collaboration with his student Ida Wegman, founded a homeopathic pharmaceutical company that is now one of the largest producers in Europe—Weleda International. While proponents of Anthroposophic medicine regard their system as separate from homeopathy, consumers do not make this distinction (Kienle et al. 2013).

8 A straight chiropractor once commented to me that most patients simply want to be ‘fixed,’ without learning about chiropractic philosophy.

9 Because homeopathy has a longer history outside Europe and North America, it has had more occasions for cultural exchange, and will receive more treatment in this article.

10 The Department of AYUSH regulates Ayurveda, Yoga, Unani, Siddha, and homeopathy (Sujatha and Abraham 2012: 285).

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