Homeopathy ‘for Mexicans’: Medical Popularization, Commercial Endeavors, and Patients’ Choice in the Mexican Medical Marketplace, 1853-1872

Abstract
This paper focuses on homeopaths’ strategies to popularize homeopathy from 1850 to 1870. I argue that homeopaths created a space for homeopathy in Mexico City in the mid-nineteenth century by facilitating patients’ access to medical knowledge, consultation, and practice. In this period when national and international armed conflicts limited the diffusion and regulation of academic medicine, homeopaths popularized homeopathy by framing it as a life-enhancing therapy with tools that responded to patients’ needs. Patients’ preference for homeopathy evolved into commercial endeavors that promoted the practice of homeopathy through the use of domestic manuals. Using rare publications and archival records, I analyze the popularization of homeopathy in Ramón Comellas’s homeopathic manual, the commercialization of Julián González’s family guides, and patients’ and doctors’ reception of homeopathy. I show that narratives of conversion to homeopathy relied on the different experiences of patients and trained doctors, and that patients’ positive experience with homeopathy weighed more than the doctors’ efforts to explain to the public how academic medicine worked. The fact that homeopaths and patients used a shared language to describe disease experiences framed the possibility of a horizontal transmission of medical knowledge, opening up the possibility for patients to become practitioners. By relying on the long tradition of domestic medicine in Mexico, the popularization of homeopathy disrupted the professional boundaries that academic physicians had begun to build, making homeopaths the largest group that challenged the emergent medical academic culture and its diffusion in Mexico in the nineteenth century.

Keywords: homeopathy, popularization of medicine, domestic medicine, patients’ choice, nineteenth century, Mexico

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On 17 August 1901, Anastasia Rodríguez, a 55-year-old woman, sought Francisco I. Madero’s medical advice to cope with maladies that had been upsetting her for the last three months. A rich hacendado in northern Mexico who had enjoyed an elite education in Paris and Berkeley, California, during the last decade of the century, Madero would be known for his political campaign to defeat Porfirio Díaz’s regime and for his ultimate triumph in 1910. Earlier in the decade, he sought to make the family business prosper, which included attending his workers' health needs. With few or no doctors in the region, Madero followed the family’s tradition to use homeopathic first-aid kits and spiritual healing to treat those around him. Madero thought that Anastasia suffered from ‘rheumatism and attacks', describing her as ‘crippled’ and unable to move. He prescribed Rhus toxicodendron, a homeopathic remedy which, according to Julián González’s Family Guide, was used to treat several diseases and symptoms, including rheumatism, gout, bone pain, muscle rigidity, several type of fevers, and head numbness. Three days later, Anastasia was cured of the attacks, but the rest of her symptoms persisted. Later that month, her mobility improved, yet the attacks resumed. Madero persisted in his prescription. One month later he prescribed ‘magnetized water’, a remedy which made her vomit. Noticing that Anastasia suffered from stomach congestion, he prescribed Arnica. When attacks resumed, Madero shifted to ‘magnetized sugar’ diluted in water. A few days later, Anastasia ‘notified [him] that precisely when she started drinking the magnetized water, attacks receded.’

Madero’s and Anastasia’s experiences with homeopathy were not uncommon during the last quarter of the century in Mexico, when academic doctors were scarce in urban centers and

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1 Madero’s clinical records in the Historical Archives of the Ministry of Treasury, Francisco I. Madero, 41, 66.
2 Julián González, Tratado práctico de homeopatía y guía de las familias, 4th ed. (México: Tipografía del hospicio, 1899), 177-78.
more or less nonexistent in the countryside. A German medical system formalized in 1810 by Samuel Hahnemann, homeopathy entered the Mexican medical marketplace in the mid-nineteenth century.\(^3\) By the late 1900s, 40 out of 540 licensed physicians in the medical registry, almost ten percent, were homeopaths, and the Mexican government sustained a homeopathic school and a hospital.\(^4\) However, most homeopathic practitioners did not have academic medical training and so were not accounted for by the government, yet Juan Antiga Escobar, a Cuban doctor who migrated to Mexico and became a homeopath in the early 1890s, estimated that there were around 250 of these informally-taught homeopaths distributed all over the nation.\(^5\) Madero was one of them, and without a formal medical education and a license to practice medicine, he offered relief and medial succor to his family and workers.

When homeopathy came to Mexico, medical institutions were going through a process of transformation, but the medical profession was far from consolidated. In the 1830s, a decade after Mexico became an independent nation, liberals founded the National School of Medicine (NSM) and the Superior Board of Health (SBH) to substitute the Catholic and Pontificate University and the Protomedicato under the control of the Catholic Church and the Spanish monarchy, respectively. The school’s curriculum introduced French pathological anatomy, replacing Hippocratic and Galenic humoral medicine. The new approach privileged the clinical observation of the body to locate the material cause of disease over descriptions of symptoms.

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\(^4\) ‘Lista de médicos, farmacéuticos, parteras, dentistas, veterinarios legalmente autorizados.’ Archivo de la Secretaría de Salud (AHSS), Salubridad Pública (SP), Ejercicio de la medicina (EM), 4, 1.

The Medical Faculty (later SBH), responsible for medical licensing, sanctioned the school’s curriculum by examining ENM graduates. But national and international armed conflicts kept medical institutions shifting from the colonial to the liberal model as conservative and liberal governments came and went. Similarly, professional medical societies were ephemeral and failed to unify the few doctors across the country. Only after 1867, when liberals triumphed, did the NSM, the SBH, and medical societies emerge as institutions that began to establish a modern academic medical culture.

In nineteenth-century Mexico, as in many other Latin American countries, licensed practitioners, who generally included physicians, pharmacists, midwives, phlebotomists, and dentists, represented an elite minority that failed to meet the health needs of the population. Despite the exponential growth of licensed physicians in Mexico City from 30 in 1830, to 160 in

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1859, and to 526 in 1900, people living in the capital of the nation had poor access to them.\textsuperscript{10} The ratio of licensed physicians per inhabitants in the capital didn’t change from 1859 to 1910 (9.9 per 10,000). The statistic was far worse for the whole nation (1.99 per 10,000) in 1910, indicating the poor access to formally trained doctors in the rest of the country.\textsuperscript{11} Consequently, most patients sought health care with unlicensed practitioners.

Reliable statistics for unlicensed practitioners in nineteenth-century Mexico are absent; however historians classify them in three groups that had changed little since the late colonial period.\textsuperscript{12} Empirics who relied on recetarios or domestic medicine manuals to treat the ill and charge for their services joined colonial practitioners, who have had some training in medicine but who did not have a license. Itinerant herbalists or merolicos, who modernized Native American traditions, creating tonics, nostrums, and other remedies that they advertised, prescribed, and merchandized, added to the ranks of colonial curanderos, who often syncretized Native American with Catholic healing and religious practices. Priests and others operating within the Catholic Church hierarchy continued offering relief from disease. In nineteenth century Mexico, the diverse array of unlicensed practitioners increasingly used domestic medicine manuals, commercialized botanical remedies, and offered homeopathy to tend the needs of their patients.

\textsuperscript{10} Hernández Sáenz, \textit{ibid.}, 230. The SBH’s medical registry of 1859 listed also 17 surgeons, 49 pharmacists, 12 dentists, 7 phlebotomists, and 14 midwives. José María Reyes, ‘Médicos, cirujanos, farmacéuticos, dentistas, flebotomianos, y parteras’, \textit{La sociedad}, 25 February 1859, 2.


Health care generally happened at home, where patients fought their illnesses with remedies they have learned by oral tradition. Occasionally, families summoned unlicensed practitioners when patient’s got worse. Only would a small number of wealthy families call licensed doctors in. Throughout the nineteenth century, traditional medical knowledge was Mexicans’ first resource against disease. This traditional knowledge combined indigenous, African, and European medical cultures. This syncretism allowed exchanges where natural and supernatural explanations of disease, religious beliefs, and botanical remedies coincided, clashed, and turned into new approaches to healing that persisted throughout the colonial period.13 Spanish friars, naturalists, and doctors captured these exchanges when they compiled volumes with the rich botanical remedies they found in the Americas, but only in the eighteenth century, with the Enlightenment tendencies to popularize medical knowledge, did they begin to publish indigenous remedies in recetarios, domestic manuals, and gazettes.14 Several domestic manuals


circulated in Mexico in the eighteenth century. Spanish translations of French and English domestic manuals included *Obras medico-chirurgicas de Madama Fouquet* (1748), William Buchan’s *Medicina Domestica* (1785), and Simon André Tissot’s *Aviso al pueblo sobre la salud* (1790). Juan de Esteyneffer’s *Florilegio Medicinal* (1712) and Juan Manuel Venegas’s *Compendio de la medicina: ó medicina práctica* (1788) are two examples of domestic manuals published in New Spain that included indigenous remedies and considered the particularities of the American environment and American patients. At the turn of the century, the *Gazeta de México*, the major daily publication of eighteenth-century New Spain, began to publish remedies that *curanderos* used and licensed physicians sanctioned, as well as European medical products. This trend increased during the second half of the nineteenth century. Anthropologist Paul Hersch Martínez has identified seven domestic medicine manuals that were either printed or in use in Mexico during the nineteenth century. Historian Claudia Agostoni has shown that medical advertising increased during the last third of the century and that patients had an unprecedented access to diverse products that improved their health, including medicines and medical books. Historians and anthropologists have examined these and other sources to highlight the importance and dynamism of domestic medicine in the colonial and early independent period in Mexico.

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18 Agostoni, *op. cit.* (note 12).
Connecting the newly-arrived practice of homeopathy in the mid-nineteenth century to the long tradition of domestic medical practices in Mexico is critical to understanding homeopathy’s popularization and legitimation. However, aligning with traditional narratives in the history of medicine, historians of homeopathy in Mexico have focused on describing how, following trends imposed by academic medical institutions, homeopaths professionalized their practice in the last two decades of the nineteenth century. These historians have minimized the role of unlicensed homeopathic practitioners like Madero in spreading homeopathy among the Mexican population. Moreover, while anthropologists and historians have emphasized the important role of domestic manuals and domestic medicine in offering medical resources to the population, they do not mention the increasing presence of homeopathic domestic manuals and products. But, homeopathy emerged as a professional medical option sanctioned by the state because a few licensed homeopaths sought to demarcate their professional situation from the widely disseminated practice of domestic homeopathy. Homeopathy appealed to Mexicans. They consulted homeopaths, consumed the increasingly available homeopathic literature, advocated and popularized homeopathy through professional and commercial means, and eventually, offered homeopathic remedies to their own patients. Homeopathy offered an unconventional path to learn and practice medicine, a path that licensed practitioners tried to undermine. Knowing how homeopathy was introduced and disseminated in the 1850s and 60s will help use better understand the successful establishment of homeopathy as a state sanctioned medical option in Mexico in the 1870s and 80s.

19 Carrillo, ¿Indivisibilidad o bifuración de la ciencia?: La institucionalizacion de la homeopatía en México', op. cit. (note 3); Flores, op. cit. (note 3); and Carrillo, 'Profesiones sanitarias y lucha de poderes en el México del siglo XIX', op. cit. (note 3), 161-63.
20 Hersch Martínez, op. cit. (note 17); Agostoni, op. cit. (note 12).
Following anthropologists’ use of domestic manuals as a window to make visible what they call ‘invisible medicine’, I analyze rare homeopathic pamphlets, propaganda, and family guides, as well as rare publications and archival records of academic medicine dealing with homeopathy to reveal the conflicts, negotiations, and exchanges between popular and academic medicine that took place in mid-nineteenth-century Mexico. I treat homeopathic family guides, pamphlets, and advertisements as ‘intercultural regions of refuge’ from which we can rescue popular voices that expose the tensions in the process of demarcating the popular medical culture from the academic one. This paper focuses on homeopaths’ strategies to popularize homeopathy from 1850 to 1870. I argue that homeopaths created a space for homeopathy in Mexico City in the mid-nineteenth century by facilitating patients’ access to medical knowledge, consultation, and practice. Homeopaths’ reframing of homeopathy as domestic and commercial allowed patients to learn about it, consume homeopathic products, and prescribe them to family members, friends, and even some clients. By adapting homeopathy to patients’ needs and demands, homeopaths carved out a niche that positioned them as the most important group which, despite sharing some characteristics and traits with academic medicine, challenged the emergent academic medical culture and its diffusion among the Mexican population.

I first examine Ramón Comellas’s strategies to advertise homeopathy in Mexico City, offering patients a modern, European, and gentle therapeutic approach framed in the language of symptoms and personal experience. Homeopathy’s proximity with patients’ experiences turned

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some of them into homeopathic practitioners, who offered their services mostly at home, though sometimes to the public. Second, I analyze the commercialization of homeopathy by Julián González. Through family guides and first-aid kits, González popularized and diffused homeopathy beyond Mexico City and to an extent that raised academic doctors’ concerns. The third section explores patients’ and academic doctors’ reception of homeopathy. While patients turned to homeopathy in response to its 'miraculous' healings, trained doctors were convinced by closely scrutinizing homeopathic clinical cases. Homeopathy inhabited the blurry line between medical facts, expert and lay medical practices, and personal and professional duty. Because they were accustomed to domestic medical practices, patients were open to it; trained doctors, on the other hand, who sought to regulate medical practice, severely criticized it. Yet, domestic homeopathy won a place among the Mexican public that homeopaths used to carve out a space in the nineteenth-century Mexican medical marketplace.

**Medicine ‘for Mexicans’: Ramón Comellas and the Popularization of Homeopathy in the 1850s**

A Spanish native, Comellas came to Mexico in 1853 and started to practice medicine. He registered his medical degree with the SBH, wrote his book *Reseña de la homeopatía dedicada a los mexicanos*, and advertised his services in local newspapers.22 While following conventional means to establish his practice, Comellas used his position as a foreign doctor, homeopathy’s therapeutic novelty, and patients’ critique to uncomfortable conventional therapies to earn patients’ trust and enlarge his clientele.23 The new doctor, whose ‘reputation earned in Spain and

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22 Historical Archives of the NSM, SBH Collection, 30, 6; Pablo Fuentes Herrera, 'Para la historia de la homeopatía en México', *La homeopatía*, 15 (1942); Ramon Comellas, *Reseña sobre la homeopatía, dedicada a los mexicanos* (México: Adrés Boix, 1853).
23 Compare to Constantine Hering in the US, José Peregrino Sanmiguel in Colombia, and others who introduced homeopathy in Latin American countries. Naomi Rogers, *An Alternative Path: The Making and Remaking of Hahnemann Medical College and Hospital of Philadelphia* (New Brunswick, Jersey:
Cuba’ preceded his arrival in Mexico, made sure to let his public know that he was a doctor in surgery and medicine, a former professor of medicine at the University of Valencia in Spain, the founder of the Medical Institute in Valencia, and a member of numerous scientific and medical societies in Spain.\(^{24}\) According to Comellas, homeopathy was a ‘medical doctrine that was cultivated and cared for in the majority of the civilized world’ but was ‘unknown in [Mexico].’ His purpose was to make it available to the Mexican public so that everyone ‘knew about its principles and the means through which it promptly, softly, and certainly healed chronic and acute diseases without the need to make the patient drink any repugnant beverage, use bloodletting or leeches to weaken the patients’ body, or torment the patient with mustard plasters, cupping, caustics, setons, etc.’\(^{25}\)

In sum, his advertising of homeopathy positioned the new system’s therapeutic approach in opposition to orthodox ones, juxtaposing ideas of European progress and civilized medical practices with tacit assumptions about Mexico’s uncivilized nature, the lag of national medical progress, and Mexican doctors’ outdated therapies.

Comellas’s *Reseña* is a work of popularization that had an ambivalent relationship with the intellectual trajectory of academic medicine in mid-nineteenth-century Mexico. Parallel to Mexican doctors’ trend to revisit the Hippocratic medical tradition in the light of emerging medical sciences coming from France in this century, Comellas introduced homeopathy as a reform to Hippocratic ideas that predated the homeopathic system. He introduced Samuel Hahnemann as the doctor who, through extensive experimentation and systematization,
formulated the modern homeopathic law of similitude.\textsuperscript{26} Hahnemann was, however, a German doctor and Mexican doctors were suspicious of romantic German medicine.\textsuperscript{27} Consequently, Comellas relied on a French work that summarized Hahnemann’s elaborated system, perhaps with the intention to appeal to both medical and lay audiences that regarded France as the cultural center to which Mexicans aspired. Comellas extracted and translated a list of twenty-eight axioms from the ‘work of Guyard’ in the Reseña and reserved Hahnemann’s foundational works, the Organon of the Art of Healing and Chronic Diseases, for people who wanted to study the system in some depth.

The difference in structure between the Organon and the Reseña demonstrates the popular nature of Comellas’s work. Hahnemann’s Organon explained in detail the genealogy of the concept of similitude in medicine. After describing the status of therapeutics and the unintended use of the law of similitude to treat diseases effectively in the late eighteenth century, the Organon became a philosophical treatise that explains in 294 axioms a system for determining therapeutic remedies for specific diseases based on a theory of disease and


knowledge of the therapeutic properties of different drugs.\textsuperscript{28} In contrast, Comellas explained the most basic elements of the system in his \textit{Reseña}. He combined vitalism and Hippocratic notions of balance, explaining that disease was a natural phenomenon that led to life rather than death. Accordingly, ‘life was the result of … an invisible, immaterial, dynamic, or virtual principle, called vital force’, which reacted against agents that disturbed the body’s balance. This ‘vital reaction’ was expressed in symptoms that constituted disease.\textsuperscript{29} Having carried out extensive experimentation, homeopaths had produced long lists of symptoms that, when correlated to the symptomatology of patients, allowed them to select the right medicinal substance. Homeopaths called this the principle of similitude. Additionally, they diluted the homeopathic substance to the level where it tilted the balance in favor of the vital force’s reaction against the agent, helping to restore the body’s balance.\textsuperscript{30} Correctly predicting the subtle vital forces of the patient and medications required a detailed knowledge of both. For this reason, the booklet required patients to provide extensive accounts of their symptoms and follow a strict hygienic regime to avoid exposure to environments or substances that disturbed the body’s delicate balance.

The \textit{Reseña} was a manual with ambivalent aims. It was both an instructional text and homeopathic propaganda. It conformed to domestic manuals because it was intended for people with no medical knowledge, but it was not a \textit{recetario} because it did not have a list of medicines correlated to the symptoms they produced. Rather, it explained the homeopathic system and provided advice on how to ‘fruitfully consult a homeopathic physician, at least by a letter or a text’\textsuperscript{31}, detailing the regime patients needed to follow and the symptoms they needed to pay attention to, if they were considering seeking the advice of a homeopath. Comellas fashioned the

\textsuperscript{28} Samuel Hahnemann, \textit{Organon del arte de curar; o, exposicion de la doctrina medica homeopatica}, Higinio G. Pérez (trans.) (Mexico, D. F.: Muñoz y Serra, 1910).
\textsuperscript{29} Comellas, \textit{op. cit.} (note 22), 8.
\textsuperscript{30} \textit{Ibid.}, 10-13.
\textsuperscript{31} Emphasis mine. 'Reseña de la homeopatía dedicada á los mexicanos', \textit{op. cit.} (note 24).
Reseña’s content and form to appeal to the public, profiting from the people’s religious sensibilities, fear of harsh therapeutic interventions, and likely difficulty in consulting a physician. Comellas, therefore, presented Hahnemann as a figure parallel to Jesus Christ and homeopathy as a medical system that proposed a metaphysical entity, ‘the vital force’, responsible for health and healing. Highly diluted, homeopathic doses promised a more gentle therapeutic intervention than either heroic drugs or even mechanical interventions. Finally, homeopathy’s symptomatic approach allowed an actual conversation between patient and doctor, since they used a common language to describe bodily changes. While not a retetario, Comellas designed his Reseña to fit the religious values, bodily sensitivities, and personal communication that Mexican patients found comfortable, in a fashion that resembled traditional healing interactions patients had at home with their families, priests, curanderos or other unlicensed practitioners.

Additionally, Comellas advertised his manual as being for domestic consumption, suggesting that it promoted an exclusive and personal homeopath-patient relationship. The conventional doctor-patient relationship was based on careful direct observation of and follow-up with patients, and so demanded physicians’ physical presence to diagnose patients. In the homes of their typically wealthy patients, physicians closely followed patients’ natural history of disease and prescribed accordingly. Patients and their families then had to fulfill the prescription with the apothecary, making the whole interaction time consuming. In contrast, homeopaths did not need to be physically present to make a diagnosis, prescribe homeopathic remedies, or give them to their patients. Though interactions sometimes happened at homeopaths’ consulting

offices, the prospect of homeopathic consultations by mail promised to shift these interactions to
the privacy of homeopaths’ studies and patients’ homes. With the expectation of a reformed and
modern mail system, Comellas advertised medical consultations by mail, offering means by
which patients could interact with physicians even when they did not have immediate access to
one.  

While Comellas’s popularization of homeopathy was explicitly designed to carve him a
niche in the medical marketplace of mid-nineteenth-century Mexico, in general he conformed to
the expectations of academic medicine. He was authorized to practice homeopathy in Mexico
City, and he also associated with pharmacist Nicolás Tinoco y Mijares to organize a
homeopathic society and with Dr Rafael Degollado to open a homeopathic hospital in
Guanajuato.  
His Reseña explained homeopathy to his patients and even increased his clientele,
yet he required that patients consult with him individually. Comellas’s popularizing efforts
followed a traditional vertical approach whereby he educated the public and the public
acknowledged his authority. Comellas’s popularization of homeopathy did not encourage
patients to practice homeopathy themselves. While appealing to the public and promoting
domestic healing interactions, the Reseña was not a domestic manual or a recetario. How, then,
did homeopathy turn into a form of domestic medicine?

33 In the 1850s and 60s, the Mexican government formalized delivery routes, reorganized the
administration, and established the mail stamp to make deliveries and tariff collection more efficient.
While mail services widely covered central Mexico and touched the Pacific and Gulf coasts, bad road
conditions and insecurity made that mailed items frequently failed to reach their destinations. Political
stability in the 1870s allowed the expansion, growth, and regulation of the national mail system. Alicia
Gojman de Backal and Laura Edith Bonilla, Historia del correo en México, (México, D.F.: SEPOEMEX,
Miguel Ángel Porrua, 2000), 57-106; José J. Álvarez and Rafael Durán, Itinerarios y derroteros de la
República Mexicana (México: José A. Godoy, 1856), 456-460.
34 'Carta dirigida al organizador Dr. Carroll Dumham de la Convención Mundial de Homeopatía,
Filadelfia, 1875', La reforma médica, 1, 12 (1875); and Fuentes Herrera, op. cit. (note 22).
The transformation of Mexican homeopathy from a peculiar therapeutic tool offered by licensed physicians through conventional means into domestic medicine advertised, consumed, and practiced at home or publicly by patients without academic credentials took place during the 1860s, when the triumph of liberals produced a new constitution (1857) that gave unprecedented educational and professional liberties to Mexican citizens. At the same time, liberals’ triumph brought reforms that attacked the Catholic Church’s power position within Mexican Society, which led to the transformation of Mexico City from the seat of the colonial Viceroyalty into a modern city. New neighborhoods were built and sanitation projects aimed to make the city a healthier place to live. A major railroad system connected the city with major ports and border cities. The urbanized area grew five times larger and its population doubled, accompanied by a parallel growth of its economic activities and spaces for advertising.35

The community of homeopaths as well as the services they provided grew exponentially. By the late 1850s, there were around sixteen homeopaths in Mexico City, most of them Spanish immigrants, and two of them licensed.36 The liberality of the Constitution of 1857 allowed for the proliferation of homeopaths and their services, including consulting offices, dispensaries, and pharmacies, which in turn enlarged the provision of homeopathic services and products. José

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36 ‘Carta dirigida…’, op. cit. (note 34); Fuentes Herrera, op. cit. (note 22); and David Flores Toledo, Iniciación a la homeopatía (México: Porrúa, 1995), 315.
Carbó opened a homeopathic dispensary in 1857.\textsuperscript{37} Pascual Bielsa arrived to Mexico City in 1856 and started selling first-aid kits in his homeopathic dispensary in 1858.\textsuperscript{38} Similarly, Mariano Omedes de Viela began to offer homeopathic services at his dispensary in 1867.\textsuperscript{39} Bielsa, Pablo Fuentes y Herrera, Rafael Navarrete, and Manuel Aguas created the Homeopathic Society of Mexico in 1861 and published the medical journal \textit{La Gaceta}.\textsuperscript{40} The ‘General Agency of the Leipsik [sic] Central Institute of Homeopathy’ and the ‘Deposit of Homeopathic Medicines’ offered homeopathic books, medicines, and other materials for the homeopathic practitioner in the mid-1870s.

Homeopathy’s popularity led pharmacies, stores, and bookstores to advertise their services and products to consumers of homeopathic medicine. For instance, \textit{Don} Anselmo Vicente praised Dr Comellas’s recommendation to use homeopathic camphor to prevent and cure cholera in 1853. A few days later the homeopathic remedy made its way into the General Deposit of Pharmaceutical Specialties of Paris in Mexico City and became the centerpiece of the pharmacy’s publicity.\textsuperscript{41} By the late 1850s, companies started to produce commodities that fulfilled homeopathy’s strict food regimes. \textit{La Victoria}, a new chocolate shop, sold chocolate authorized by the homeopathic faculty without the scents and substances that opposed the homeopathic regime. Another chocolate shop also sold a type of ‘homeopathic chocolate’.\textsuperscript{42}

\textsuperscript{37} 'Dispensario homeopático', \textit{Diario de Avisos}, 12 November 1857, 3. See also October and November.
\textsuperscript{38} His dispensary remained opened at least until 1871. Correspondence, AHSS, SP, EM, 3, 53.
\textsuperscript{39} It remained open at least until 1870. 'Dr. M. Homedes de Viela. Médico cirujano homeópata', \textit{El Constitucional}, 17 September 1867; 'Dispensario homeopático del doctor M. Omedes de Viela', \textit{idem.}, 14 December 1867; and 'Dispensario homeopático del Dr. Omedes', \textit{El Ferrocarril}, 2 June 1870.
\textsuperscript{40} John Hill, 'Informe suplemental sobre homeopatía en México', \textit{La Homeopatía de México}, 15, (agosto, 1942).
\textsuperscript{41} Anselmo Vicente, 'Preservativo y curativo del cólera', \textit{El Universal}, 1 November 1853, 3; 'Depósito General', \textit{El siglo diez y nueve}, 15 November 1853, 4; and subsequent ads during November and December.
\textsuperscript{42} 'Importante', \textit{Diario de Avisos}, 10 March 1860; 'Chocolate homeopático', \textit{idem.}, 21 August 1860; 'Antigua y acreditada fábrica de chocolate superior, esquina de las calles de Cordobanes y segunda de
Bookstores in Mexico City began to sell translations of homeopathic guides. At the end of the 1850s, the Librería Universal distributed Spanish versions of Ruoff’s Guide of the Homeopath, Hering’s Homeopathic Medicine, and Hartman’s Practical Treatise of Homeopathic Therapeutics. Throughout the 1850s, the city became a place where homeopathy, its practitioners, and its products began to prosper, but the increasing demand pushed homeopathy outside the boundaries of professional medical practice.

In contrast to Comellas’s Reseña, foreign homeopathic manuals and guides translated into Spanish were structured as recetarios. Ruoff’s guide, for instance, was a catalogue that linked contemporary classifications of disease with specific homeopathic remedies using symptomatic descriptions. The link between symptoms and technical medical terms to describe specific diseases allowed patients access to what seemed to be expert medical knowledge, simply by personal observation or experience of disease symptoms. Since Ruoff’s guide linked symptomatic descriptions, technical terms for diseases, and specific homeopathic prescriptions, any literate person could potentially use it at home without consulting a physician. Moreover, Constantine Hering explicitly crafted his Homeopathic Medicine so that patients could ‘treat [themselves] with homeopathy in most cases, and, in those urgent or serious ones, provide efficacious first aids to those who suffer from a disease until a homeopathic physician arrives.’

A person who read Ruoff or Hering’s guides learned how to diagnose diseases and prescribe

Santo Domingo, idem., 21 August 1860; and 'Chocolate superior de las clases siguientes', idem., 22 September 1860.

43 La Sociedad, 1 May 1858, 4; 16 February 1859, 4; and Diario de Avisos, 4 April 1860, 3.

44 The Librería Universal advertised the work as Medicina homeopática. It most likely referred to Constantine Hering, Medicina homeopática doméstica ó guía de las familias para que sus individuos puedan tratarse por si mismos homeopáticamente en la mayoría de los casos, y en los urgentes y graves prestar auxilios eficaces á los enfermos hasta la llegada de un médico homeópata, Leon Merchant and Tomás Pellicer (trans.), 2nd ed. (Madrid: Carlos Bailly-Bailliere, 1856). Hering’s manual went through fourteen editions in the US, two in England, thirteen in Germany, and was translated into French, Spanish, Italian, Danish, Hungarian, Russian, and Swedish. See ‘Constantine Hering’, in Thomas Lindsley Bradford, The Pioneers of Homeopathy (Philadelphia: Boericke & Tafel, 1897), 348.
homeopathic remedies to treat them. In other words, translations into Spanish of foreign homeopathic manuals gave the literate public in Mexico City the tools to take their health in their own hands, potentially avoiding consultation with academic doctors.

Julián González took advantage of this market expansion and aligned his pharmaceutical business with domestic manuals that he called ‘family guides’ to reach a larger number of patients and consumers. A Spanish immigrant who came to the capital in 1850, González had chronic enteritis that no doctor had been able to cure. As a last resource, he sought Comellas’s homeopathic advice. González’s unexpected healing motivated him to open a homeopathic dispensary in 1850. By the early 1860s, he turned his dispensary into a ‘deposit of pharmaceutical specialties’ that offered, among a wide variety of tonics, nostrums, and proprietary medicines, ‘homeopathic first-aid kits along with a booklet that provided instructions to use them’, perhaps imitating Hering’s approach. In the late 1860s, González began to consolidate his homeopathic section. Shortly after that, he used the homeopathic first-aid kit with booklet to launch his publicity machine. In 1871, he published several homeopathic pamphlets, but his *Tratado práctico de homeopatía y guía de las familias* became his greatest marketing success; the fourth edition was published in 1899. In 1873, he started advertising his

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46 He changed locations several times until he settled in a final location in the early 1860s. García Sadas and Romero, *ibid*.
dispensary as a ‘Homeopathic Drugstore’, offering ‘a great variety of homeopathic first-aid kits and portable drugstores’.  

González used the popularity of homeopathy to transform his drugstore into the most important provider of homeopathic guides and medicines in Mexico for people who did not want or could not have a consultation with an academic physician. He advertised his booklets, guides, and first-aid kits as a means through which people could entirely appropriate management of their own health, rather than simply as an aid to consulting a homeopathic physician. His publicity explicitly focused on scenarios where doctors were absent. For instance, he offered his products as particularly ‘useful for travelers, rural populations, and haciendas that are not always in the condition to receive professional medical assistance.’ He rhetorically asked,

‘[W]ho could travel from one point to another, with an allopathic drugstore, or [who] could even use it without being a professional pharmacist or physician? This would be unattainable for a family. But a complete homeopathic first-aid kit, no matter how big, can be carried along any distance by a single person who in order to use it needs no more than to carefully and persistently consult the manual.’

González offered a wide variety of kits containing six, twelve, twenty, thirty, and thirty-five bottles. The price varied according to the number of bottles, one peso each. He also sold

49 'Botica homeopática', El siglo diez y nueve, 10 October 1873, 4.; 'Botica homeopática', El eco de ambos mundos, 27 May 1873. The latter newspaper advertised González’s pharmacy throughout August, 1873.
50 M. Omedes de Viela followed a similar career path as González. He offered homeopathic consultations in the 1860s, but a decade later he used homeopathy as a brand. 'Dr M. Homedes de Viela. Médico cirujano homeópata'; and La Colonia Española, 3 December 1875.
51 'Medicinas', El Combate, 3 February 1878; and 'Medicinas', idem., 15 August 1878. González advertised his drug store in La Colonia Española during December and January 1878-9.
52 González, op. cit. (note 2, 1899), xvii.
individual bottles with instructions. But, for rural peons of haciendas, who were accustomed to in-kind payments, and the urban working class, both with an average daily minimum wage of 0.33 pesos during the Porfiriato, such products were unaffordable. It was, rather, the tiny middle class, mainly constituted of merchants, shopkeepers, professional men, government officials, and wealthy hacendados, who purchased them. As patients, the illiterate rural peons and urban workers might have learned how homeopathic remedies worked, sharing this knowledge with their families and communities. But, while literacy may have not been an impediment to learn homeopathy, income might have represented an obstacle for the lower classes to purchase homeopathic remedies. Whether literate or illiterate, patients who learned homeopathy through González’s family guides or the oral transmission of these guides’ recipes could become homeopathic practitioners. González’s project aligned with the liberal values of education free from dogma, and of professional liberties for all Mexicans, but it also challenged the project of academic medicine to train physicians in French pathological anatomy at medical schools regulated by the SBH and to monopolize the provision of health care.

In contrast to Comellas’s, González’s approach to popularize homeopathy was horizontal. Homeopathic family guides offered Mexicans an alternative way to learn about their own diseases and ways to overcome them, making them healers who did not require the presence and expertise of a doctor. These homeopathic healers then shared their experiential knowledge of homeopathy, whether by sharing the manual or simply by word of mouth. Access to homeopathic knowledge gave these homeopaths the tools to treat themselves or their families for free and avoid the doctor’s fees, or to charge for their consultations and make a living doing so.

53 González, op. cit. (note 48, 1871), iv.
In both cases, domestic homeopathy undermined the academic medicine’s goal to give licensed practitioners the authority over the health care of Mexicans.

González’s commercial approach posed another threat to academic medicine, a threat where financial motives might be privileged over scientific reasons to regulate medical training and practice. Since González's was the major house selling homeopathic products, he stood to benefit financially from the endeavor. In order to strengthen the growing homeopathic body, González turned his pharmacy into the headquarters of emerging homeopathic institutions, which promised to professionalize domestic homeopathic practice. By the late 1860s, homeopaths gathered in González’s drugstore to discuss homeopathy, publish a journal, and offer free consultations and medicines. In 1869, González organized the Mexican Homeopathic Institute along with fifteen other homeopaths, both academic doctors and domestic practitioners. One year later, he offered his drugstore facilities to host the Institute’s meetings and to organize a dispensary, where homeopaths could offer free consultations and González would provide free medications. He also funded the Institute’s publication, *El propagador homeopático*. His increasing support led to a change in the Institute’s regulations, allowing people whom the Institute certified as having passed examinations on all courses offered by the NSM to occupy positions in the Institute’s Board. This allowed González, who was not trained at the ENM, to become the institute’s treasurer in 1871, a position originally reserved for ENM graduates who

55 Francisco Pérez Ortiz, 'Discurso pronunciado por el señor vicepresidente del Instituto', *El propagador homeopático*, 1, 6 (1871).
56 A. G. B. [Alfredo G. Bianchi], 'La homeopatía', *El Ferrocarril*, 10 July 1871; 'Carta dirigida.....', *op. cit.* (note 34); and ‘Lista de los Médicos, Farmacéuticos, Dentistas y Parteras residentes en el Distrito Federal [ca. 1871]’, AHSS, SP, SE, 3, 61.
57 In 1870, homeopaths offered 3,425 consultations. In 1871, 1,432 patients sought homeopathic services. 'Estadística', *El propagador homeopático*, 1, 7-8 (1871); and 'Estadística', *idem.*, 1, 8 (1871).
59 Francisco Pérez Ortiz and Pablo Fuentes y Herrera, 'REGLAMENTO del Instituto Homeopático Mexicano', *El propagador homeopático*, 1, 6 (1871).
practiced homeopathy. This regulatory change made González the target of critiques (see below) and divided the homeopathic community.\textsuperscript{60} The conflict led to an investigation by the SBH about whether he met the legal requirements to be in charge of his own drugstore.\textsuperscript{61} A full analysis of this professional conflict lies beyond the scope of this paper. However, the vigor of the critiques from academic doctors and of the conflict with sanitary authorities signals the influence that homeopathic family guides had in popularizing homeopathy and therefore indicates the challenge that González’s practices posed to the emerging academic medical culture. González’s and Comellas’s guides would not have been successful had the public not responded positively to their domestic manuals.

‘Enlightening’ Homeopathic Patients: Narratives of Conversion and the Popular Response to Therapeutic Choice in Mexico

The history of homeopathy is a history of conversions and convenience.\textsuperscript{62} Homeopaths need to convince patients and doctors who use conventional medicine of the effectiveness of homeopathic treatment. They do so by curing patients with homeopathy. Healings leave a deep mark on patients, whose positive experiences turn them into converts. In Mexico, some patients published detailed descriptions of their recoveries in the 1850s and 60s. Others became domestic practitioners. A few, such as González, used institutional and commercial means to support homeopathy, create a network of homeopaths, and increase the number of converts. Doctors generally converted to homeopathy as a result of successful homeopathic clinical cases witnessed

\textsuperscript{60} ‘La junta directiva del instituto debe funcionar [...]’, ibid., I, 4 (enero, 1871), 64. José Puig y Monmany and Pascual Bielsa, two physicians registered at the SBH and founders of the institute, left the institute. ‘Informe reunión extraordinaria. 9 de abril de 1871. Discurso del vicepresidente Francisco Pérez y Ortiz’, El propagador homeopático, 1, 6 (1871).

\textsuperscript{61} Correspondence, AHSS, SP, EM, 3, 54 and 58.

by someone they trusted or even themselves. Patients narrated their conversions in either
dramatic terms—as cases of illness unsuccessfully treated by conventional medicine and
surprisingly cured with homeopathy—or in more straightforward terms—as when they used
homeopathy because it was readily accessible and experienced successful results. Comellas’s and
González’s popularizing efforts were effective because they used patients’ narratives of
conversion to advertise homeopathy. In Mexico, where domestic medicine was widespread and
people shared medical knowledge by word of mouth, popular narratives of successful
homeopathic healings had more influence than doctors’ academic arguments against it.
Eventually, homeopathic doctors used these narratives to bring more academic doctors into the
ranks of homeopathic practitioners and to test homeopathy’s effectiveness.

It is difficult to find first-person accounts from homeopathic patients in their own voices.
When patients' experiences are available, they are typically filtered through the eyes of the
practitioners who reported their patients’ experiences. Sometimes practitioners explained their
own experience as patients. If we count practitioners as patients, we can surmise that
homeopathic patients in Mexico came from diverse social backgrounds, including the working
class and the poor sector, although only a few middle-class poets, newspaper editors, merchants,
and doctors left record of their experiences. In the 1850s, most patients were Spanish and lived in
the capital city; a few lived in provincial cities. Two decades later, most were nationals living in
Mexico City or in provincial cities such as Puebla, Veracruz, Orizaba, Yautepac, and
Tenancingo.63 By the last decades of the century, even rich hacendados such as Madero used

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63 The journal of the Mexican Homeopathic Institute, *La Reforma Médica*, kept records of the members. See 2, 5, (1877); 2, 8, (1877); 3, 7, (1879); and 3, 16, (1879).
homeopathy and consumed González’s homeopathic products.64 Juan Antiga y Escobar argued in the early 1890s that the spread of homeopathy was the result of ‘hard and industrious laborers [referring to homeopathic practitioners] who living in the shadows diffused the benefits of [homeopathy] in the countryside and small towns’, suggesting that patients in the rural countryside consumed homeopathy.65

The absence of patients’ records poses difficulties for evaluating the constituency of homeopathic patients in Mexico City. Madero left records of his homeopathic practice with his *hacienda* workers and neighbors in 1901 and 1902.66 As far as I am aware, this is the only existing record of a domestic homeopath. Though still valuable for understanding the demography of homeopathic patients, it only gives a picture of a distant *hacienda* in northern Mexico, where the population density was much lower than in Mexico City. Madero had 235 patients. Sixty per cent were women and forty per cent men, ranging from two months of age to seventy-five years, with an average age of forty.67 Most of the time, he registered from one to five entries for one single day, though there were exceptional days when he entered up to sixteen different cases. Madero’s notes indicate that some patients came back to explain changes in their

66 Historical Archives, *op. cit.* (note 1).
67 The gender ratio was similar in rural Germany. Robert Jutte, ‘The Paradox of Professionalisation: Homeopathy and Hydropathy as Unorthodoxy in Germany in the nineteenth and early twentieth century, in Robert Jutte, Guenter B. Risse, and John Woodward (eds), *Culture, Knowledge, and Healing* (Sheffield: European Association for the History of Medicine and Health, 1998).
symptoms or to inform him about their total recovery. While most patients directly reported their symptoms to Madero, sometimes intermediaries did so. Comellas’s patient reports in Mexico City suggest that patients’ interaction with homeopaths in urban contexts was similar.68 Although the sevenfold number of consultations in González’s drugstore two decades before Madero initiated his practice evidences the difference in homeopathic services’ demand between domestic practitioners and institutional dispensaries.69

In Mexico City, patients published their support for Comellas and homeopathy in local newspapers. Their reports varied according to their social backgrounds. Patients and entrepreneurs frequently praised homeopathy’s successful treatments.70 Academic physicians generally rejected both homeopathy’s theoretical foundations and homeopaths’ entrepreneurial approach.71 Patients’ narratives frequently portrayed the adverse effects of conventional therapies and the dramatic recoveries produced by homeopathic treatments. Mirroring Comellas’s uplifting, life-enhancing narrative, patients reported how unbelievably pleasant, quick, and effective homeopathy was. For instance, Gertrudis Rodríguez, Comellas’s patient, described how she had lost her sight, and how no doctor, even famous European ones who visited Mexico City, could improve her condition.72 When she learned about Comellas, she

69 See ‘Estadística’, op. cit. (note 57).
70 For praise of Comellas’s book see ‘Noticias nacionales’, El siglo diez y nueve, 24 July 1853, 3; and ‘Homeopatía’, El siglo diez y nueve, 27 July 1853, 3; and ‘El Dr. Comellas’, El Universal, 12 May 1854, 3. For the entrepreneurial use of Comellas’s homeopathic remedies see Vicente, op. cit. (note 41). For patients see Gertrúdiz Rodríguez, ‘Portentosa curación’, El universal, 11 December 1853, 3; for other reports with a similar narrative see A. B. op. cit. (note 68). For the positive patients’ reception of homeopathy in other countries see Martin Dinges, Patients in the history of homeopathy, Network Series (Sheffield: European Association for the History of Medicine and Health, 2002); and Gijswijt-Hofstra, op. cit. (note 62).
71 F. M. offered a critique of homeopathy in F. M., ‘Remitidos’, El siglo diez y nueve, 23 August 1853, 2.
72 Rodríguez, op. cit. (note 70).
visited him to receive a consultation, and after four days of having drunk a tablespoon of what
seemed to her to be only water, she noticed improvement.

The public also reacted positively to González’s products and advertisements, and he
used positive outcomes and reactions to promote his homeopathic business. Patients saw
González’s effort to give free consultations and medicines as a proof of ‘generosity,
detachment,… charity,… kindness[, and] philanthropy’, as an effort that ‘benefited all the classes
of society’ by bringing health to the population.73 Generally, those who consumed González’s
homeopathic products were patients like Luis Alva, who, like González, had been successfully
treated with homeopathy and dedicated his life to understanding how it worked, popularizing its
use, and providing homeopathic treatment.74 In order to boost his publicity around homeopathy,
González used his patients’ reports as well as successful clinical results to prove homeopathy’s
effectiveness. For instance, he advertised that homeopathy healed patients deemed incurable by
famous doctors, and his statistics listed the number of positive outcomes: ‘4000 of blood
impurities, 230 of skin diseases, 414 of stomach diseases, 102 of urinary diseases, 60 of eye
diseases, and 534 of unidentified diseases.’75

Reports in newspapers were generally more dispassionate than the ones by González and
his supporters; yet they nevertheless added another layer of publicity, perhaps one that appealed
to enlightened sensibilities, since they emphasized the emotionally detached and therefore
presumably rational position of the witness. For example, the reporter who narrated Comellas’s
successful cases pointed out that he originally thought homeopathy was ‘an absurd thing’, given

73 González, op. cit. (note 2, 1899), 539-40; ‘Tratado práctico homeopático’, El Combate, 4 May 1879;
and Sadas and Romero, op. cit. (note 45).
74 Luis Alva, La homeopatía y la alopatia ante la humanidad doliente y ante la razón (México: Manuel S.
Gutierrez, 1883).
75 ‘Botica homeopática’, op. cit. (note 49).
the highly diluted doses that it prescribed.\textsuperscript{76} Similarly, in an 1871 newspaper report of a successful homeopathic treatment on a child by Rafael Navarrete, the reporter clarified that he was not particularly fond of homeopathy, but, having seen evidence of the ‘practical results’, ‘palpated facts’, and ‘happy healings’, he felt compelled to acknowledge homeopathy’s effectiveness.\textsuperscript{77} The construction of credibility was based on the reporters’ intellectual distance from the homeopathic system, and hence, their nature as impartial observers. However, these reporters were not necessarily present in the consulting office nor had they witnessed the clinical trajectory of the diseased person. Rather, they often heard such stories from patients’ close friends or family, as in Navarrete’s case, where the reporter confessed to having learned about the case from a friend. The use of outstanding homeopathic clinical successes to legitimate homeopathy continued until the first decade of the twentieth century, at which time government officials from all over the country also provided certificates to homeopathic practitioners who healed and ‘saved thousands of people, most of them with terrible prognostics, without having any deaths.’\textsuperscript{78}

Homeopaths and their therapeutic methods gained patients’ trust against all odds. Patients willingly continued homeopathic treatments in spite of the most adverse medical situations. In 1874, Juan Fenelon, a member of the National Academy of Medicine, reported on a case of uterine bleeding.\textsuperscript{79} After consulting several physicians, the patient was diagnosed with a mass of cells that grew in the uterus and caused the bleeding. Facing surgery, the patient and her family

\textsuperscript{76} A. B., \textit{op. cit.} (note 68).
\textsuperscript{77} A. G. B., \textit{op. cit.} (note 56).
\textsuperscript{79} Fenelon, ‘Carta del señor Fenelon sobre varios puntos de cirugía’, \textit{Gaceta médica de México}, IX, 17 (1 de septiembre, 1874), 117-8, 321-3.
decided to consult a homeopath, who, according to Fenelon, fed the patient’s and her family’s fears and offered them ‘a miraculous healing’. When the family sought Fenelon’s opinion, he found the patient in a state close to death, yet ‘they were not determined to abandon homeopathy.’ Fenelon even highlighted that Navarrete, the homeopath treating the woman, had especially emphasized not bathing the patient, a situation that worsened the infection she suffered. Fenelon did not report the final outcome, but was surprised that patients preferred to stay with homeopathy and face death rather than surrender their bodies to physical examination or surgical intervention. He assumed that they were probably waiting for the unexpected and surprising recovery that homeopathy offered. This patient's preference is but one example of homeopaths’ convincing power to attract customers and keep them faithful to homeopathy.

Alarmed by these cases, academic doctors sought to undermine the narratives of extraordinary healings that increased homeopaths’ faithful clientele. For academic doctors, patients’ preference was a problem of public perception rooted in the people’s lack of education. Therefore, they critiqued homeopaths’ strategies to educate the public about medical science, hoping to make people understand how academic medicine worked, how homeopathic medicine was not based on scientific facts, and how proper experimentation dismissed homeopathy’s arguably successful results. They hoped that educating the public about medical science would reorient people’s preference away from homeopathy and towards conventional medicine. In the early 1860s, the most systematic and influential critique came from the positivist Gabino Barreda, an academic doctor who studied medicine in Paris, became Minister

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80 Rafael Navarrete, perhaps. 'ACADEMIA DE MEDICINA. Sesión del 8 de febrero de 1882.', *ibid.*, XVII, 5 (1 de mayo, 1882), 78.
81 Claudia Agostoni has argued that doctors aimed to transform the public perception of their image and practice in the *Porifirato*. Claudia Agostoni, 'Médicos ecuestres, el arte de curar y los galenos en la historia nacional (Ciudad de México, 1877-1911)’, *Ciênc. saúde coletiva Ciência & Saúde Coletiva*, 13, 3 (2008), 979-82; and Agostoni, *op. cit.* (note 12), 18-21.
of Public Education in 1867, and founded the National High-School, where he promoted Comte’s positivist philosophy in Mexico. Barreda thought that homeopathy was a ‘new means to deceive naïve people’. He believed that, thanks to homeopathy, people in the city with poor education for judging medical matters were talking inaccurately about medicine, which in turn was misleading them to use homeopathy. Barreda believed in the people’s liberty to decide on their families’ wellbeing, but he also believed that they needed to be ‘enlightened’ in order to make better-informed decisions. He endeavored to ‘effectively combat charlatanism [through] the diffusion of lights’.

Acknowledging the Hippocratic origin of the law of similitude, Barreda attacked the corollaries that homeopaths deduced from it, using facts acknowledged by contemporary academic medicine. He detailed the difference between a symptomatic description of disease and the organic lesion that produced a disease, indicating that the latter was the subject matter of academic medicine. Since homeopathic principles dismissed the organic lesion and homeopathic medications were immaterial, ‘homeopathy was not and could not be a science’. Barreda knew that patients trusted their families and friends’ personal experiences with homeopathy and that they would not simply dismiss their favorable opinions for those offered by academic physicians. Consequently, he used European cases to discredit patients’ accounts, which he believed had resulted from unsystematic observations. In the cases he presented, doctors and sanitary staff...

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82 For an academic response to Comellas’s Reseña see F. M., 'Remitidos', El siglo diez y nueve, 23 August 1853, 2-3; ‘Variedades’, El Plata. July 1 1855, 159-160; and ‘Guerra a la Homeopatía’, El Constitucional, May 3 1860, 4.
83 Gabino Barreda, La homeopatía o juicio crítico sobre este nuevo medio de engañar a los cándidos (Mexico: Nabor Chavez, 1861).
84 Barreda, ibid., 1-2.
85 Barreda’s critique of the homeopathic system centered on three aspects: 1) the etiology of disease caused by a disruption of the vital force, 2) the set symptoms that resulted from pure experimentation, 3) the content and effect of highly diluted doses, and 4) the generalization of all symptoms without paying attention to their immediate cause.
authorities had publicly shown that homeopathic treatments were either not effective or less effective than conventional methods. Barreda blamed academic doctors for giving patients alarming diagnoses and even more alarming prognoses, or for failing to inform patients about how a particular prescription would work. Anxious patients looked for, found, and used alternatives that other patients praised, even if these alternatives produced only a slight, rather than a complete recovery. Therefore, Barreda concluded, patients’ willingness to be healed deceived them about the healing process and the therapeutic method that produced such healing.

Throughout the nineteenth century, the community of academic doctors embraced Barreda’s idea of domestic homeopaths’ lack of education and homeopathic patients’ naiveté. In a veiled attack against Julián González’s sponsorship of homeopathic institutions in the early 1870s, José Galindo, a graduate from the NSM, critiqued González’s philanthropy as a means to turn medical training and practice into ‘robbery’. In Galindo’s view, a person such as González who studied homeopathy in a manual, opened a homeopathic drugstore, and offered free consultations and medicines to gain clientele, undermined medical and state institutions. Galindo thought that homeopaths such as González were ‘speculators’ of health because their business had a ‘low risk’ and was ‘profitable’:

‘[A homeopath …] invests 22 pesos in Freleigh’s manual and first-aid kit, the most expensive and complete one, and assuming that he treats two patients a day who pay 2 pesos for the homeopathic consultation, he earns 120 pesos a month. With his practice, he recovers the

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86 Barreda’s pamphlet was reprinted in 1877 and 1902. Sociedad Metodófila Gabino Barreda (ed.), Opúsculos, discusiones y discursos coleccionados y publicados por la Sociedad Metodófila Gabino Barreda (México: Imprenta del Comercio, de Dublán Chávez, 1877); and Gabino Barreda, 'La homeopatía o juicio crítico sobre este nuevo sistema', Revista positiva, científica, filosófica, social y política, 17 (Mayo, 1902).
87 José Galindo, 'El médico en la sociedad', El observador médico, II, 17 (junio) (1873).
Homeopathic practitioners invested very little time, education, and funds, and yet made a living out of homeopathy, according to Galindo. The contradiction between the professional and educational liberality of the Constitution of 1857 and government measures to regulate medical training and practice during the last three decades of the century obliged Galindo to frame his opposition to homeopathic practice in ethical terms. He believed that domestic homeopaths were naïve people who believed that just because ‘Hahnemann had studied homeopathy… they did not need to study anatomy [and] physiology.’ In this sense, these ‘charlatans’, as Galindo labeled them, were harmful to Mexican society without knowing it. In his line of reasoning, academic homeopaths were ‘dishonest’ and ‘immoral speculators’ because, having medical knowledge and possessing a medical degree, they adopted an unscientific therapeutic system to fulfill their patients’ fancies.

Barreda’s and Galindo’s critiques, nevertheless, had little impact on patients’ preference for homeopathy or patients’ inclinations to become domestic homeopaths. During the final decades of the nineteenth century, many patients still regarded doctors as distant, antipathetic, despotic, and symbols of death. After hearing other patients’ narratives of successful homeopathic treatments and conversion narratives such as González’s, and with the availability of homeopathic domestic manuals, family guides, and first-aid kits, literate people in Mexico City and perhaps in the rest of the country chose to take their health in their hands. For some, the decision to use homeopathy meant having access to medical services in the absence of trained

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88 José Galindo, ‘La homeopatía,’ El observador médico II, 18, 20, 21 and 22 (1873).
89 Ibid.
90 Agostoni, op. cit. (note 81), 978-79.
doctors or the money to afford them. For others, it meant an opportunity to make a living. But for all of them it implied that medicine was not beyond their reach.

**Conclusion**

Spanish homeopaths conquered the medical marketplace in Mexico City during the 1850s and 60s because they transformed public perception of homeopathy from a therapeutic tool that doctors used to treat their patients into a domestic medicine that everyone could use to treat their own or another person’s ailments. Initially, homeopathic doctors, such as Ramón Comellas, appealed to patients’ sensibilities, emphasizing homeopathy’s foreign origin, milder effects on the body, symptomatic approach to disease, convenience of consulting by mail, connection with patients’ everyday experiences with disease, life-promoting language, and exclusionary therapeutics. These characteristics contributed to homeopathy’s positive reception and adoption by literate, middle, and upper-class patients, but these strategies also perpetuated the traditional doctor-patient relationship, helping homeopathic doctors retain their authority. As a result of modernizing legislation, urbanization projects, and economic expansion during the last three decades of the nineteenth century, the commercialization of homeopathy through domestic manuals and first-aid kits diffused an already well-received therapeutic approach even further, reaching the larger population of illiterate, working, and poor-class patients. However, these homeopathic products transformed homeopathic practice in ways that those who introduced homeopathy did not foresee. Domestic manuals and first-aid kits gave every literate man the opportunity to turn into a homeopathic practitioner, giving him the opportunity to rise to positions formally trained doctors sought to monopolize. Homeopaths’ original efforts to make homeopathy available to the public while still preserving the authority of the homeopathic doctor turned into commercially-funded efforts to give patients access to homeopathic knowledge. The
result was the blurring of the line between expert and lay practitioners, between formally and informally trained homeopaths. Domestic homeopathy, therefore, challenged the boundaries of professional medical training and practice that the medical establishment began to implement in the mid-nineteenth century.

These changes impacted the structure of homeopathic manuals. Comellas’s manual resembled the structure of the Spanish translation of Buchan’s domestic manual. Both were in line with the Hippocratic and Galenic tradition, emphasizing the role of the environment and personal regimes of feeding, exercise, sleep, and even sexual activity, to preserve health, but Comellas explained the basics of the homeopathic method so patients could effectively have a consultation with a homeopathic physician. González followed the trend of European and American homeopaths such as Hartman, Ruoff, and Hering, who, in addition to what previous homeopathic manuals offered, included lists of diseases with their clinical descriptions and lists of substances with symptoms resulting from pure experimentation. This particular organizational structure allowed patients to use homeopathic domestic manuals as recetarios. With them, they medicated themselves and others, in order to supplement the lack of physicians in cities and towns or to bypass physicians altogether. With physicians unavailable or unnecessary, many unlicensed homeopaths were even able to make a living from their medical practice.

It is unlikely that an individual had to be literate to turn from a patient into a domestic homeopathic practitioner. In Mexico, the dissemination of popular medical knowledge mostly by word of mouth, the fluid exchange of medical ideas between academic and popular practitioners, and the tradition of recetarios and domestic medical manuals, created fertile ground for homeopaths’ strategies to disseminate and popularize a new medical system to Mexican audiences. It is true that only literate citizens (about twenty per cent of the population fifteen
years or older in 1895) participated in the production and consumption of homeopathic domestic manuals, but Flores y Troncoso’s critiques of domestic medicine suggest that patients aware of particular symptoms who witnessed a diagnosis and treatment could and did establish the link between particular sets of symptoms and particular medications without having read any manual. Indeed, this description perfectly applied to domestic homeopathy, suggesting that illiterate people could have learned, used, and shared homeopathic knowledge by word of mouth without a printed manual. Moreover, the healing power popularly attributed to water matched the appearance and results of homeopathic remedies. In Mexican folklore, water is believed to 'cure any sickness, [including] those known to be fatal or incurable', taking only ‘some tablespoons every half an hour', a description parallel to one offered by one of Comellas’ patients describing homeopathic medicines. In both rural and urban contexts, patients who trusted in homeopathy could purchase at local drugstores homeopathic remedies they have learned by word of mouth were used to treat a specific set of symptoms and then use them on their own patients, or they could just use water to treat symptoms that were difficult to eradicate, as Madero did with Anastasia.

The extent of the transmission and use of homeopathy among the illiterate population during the second half of the nineteenth century in Mexico is hard to quantify, because homeopaths with a formal training in medicine rarely criticized domestic practitioners of homeopathy, and when they did, the labels they used conflated social and economic status, ethnicity, literacy, academic medical training, and therapeutic choice, making it difficult to distinguish when they were referring specifically to an illiterate practitioner. When academic

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homeopaths aimed to professionalize homeopathic practice, they described the domestic practice of homeopathy as 'harmless', in order to bring more supporters to their ranks. However, they sometimes adopted the vocabulary that graduates from the ENM used to label practitioners with no formal training, who endorsed unorthodox medical theories, or who offered unconventional therapeutic approaches. Not only did the labels of empirics, merolicos (quacks), or curanderos disqualified practitioners as naïve and ignorant in medical matters, distinguishing between the ones with a formal academic medical training and those who lacked it, but these labels referred indirectly to other class distinctions such as wealth, social status, professional activity, ethnic background (European or indigenous), and education. With these labels, ENM graduates distinguished socially well-positioned and highly educated doctors, middle-class, literate, but trade-oriented itinerant nostrum sellers, and indigenous healers with poor or no formal education, to follow Flores y Troncoso’s categorical clear-cut classification, though many more combinations were possible. The point is that these labels were derogatory terms with multiple referents, only one of which was illiteracy. Therefore, ENM-graduate homeopaths’ 'brujos' who achieved 'marvelous healings' using homeopathic remedies may refer to rural, illiterate, and indigenous practitioners who healed with homeopathy; to urban, literate, and working class homeopaths whose successful practice attracted patients that ENM graduates did not have; or even to academically trained doctors who achieved unexpected yet positive outcomes with homeopathy.93

The fact that we are able to provide multiple interpretations to an expression with which homeopaths described the practice and practitioners of homeopathy suggests the level of homeopathy’s popularization in the 1850s and 60s in Mexico. During these decades, homeopathy

93 Flores, op. cit. (note 3), 29. For similar expressions see Antiga, op. cit. (note 65); and Jorge F. Hernández, Setenta aniversario de Similia. Una sombra luminosa. (México: Farmacia Homeopática Nacional, 2006), 34.
truly became the medicine ‘for Mexicans’, to borrow a phrase that Comellas used to advertise homeopathy. In the absence of strong regulatory institutions, homeopaths distributed their novel therapeutic system widely, whether through instructional manuals, as Comellas did, through homeopathic products such as domestic manuals and first-aid kits, as González did, or by word of mouth. Through them, Mexicans learned about homeopathy, identified homeopathic products and services, and learned how to offer primary medical care to those who needed it.

Homeopathic knowledge spread in multiple directions, sometimes vertically, other times, horizontally, and in many other occasions following unpredictable trajectories. This model of transmission built upon the tradition of domestic medicine and recetarios, helping homeopaths become the single organized group that most strongly challenged the professionalization of medicine in Mexico.

Homeopathy’s challenge to academic medicine in the transition towards modern medical institutions in mid-nineteenth century Mexico is signaled by Barreda’s critique to homeopathy. Historians of medicine have regarded the creation of the NSM, the SBH, or the National Academy of Medicine as the keystones that marked the transition towards a modern medical profession, because they functioned as centers of professional unity. These institutions sought to define the boundaries between expert and lay medical communities, boundaries that the popularization of homeopathy sometimes blurred. A few years after the Constitution of 1857 imposed limits on such institutional boundaries and liberalized education and professional practice from colonial corporations, Barreda sought to establish the limits between scientific and lay medical knowledge by introducing positivism to Mexico in his 1861 critique of homeopathy.94 Academic doctors used Barreda’s critique to solidify their unity against

homeopaths throughout the nineteenth century. It is significant that, in demonstrating positivist epistemology, Barreda targeted a therapeutic approach that Mexicans had begun to prefer over academic medicine. Academic doctors’ widespread concern about the popularization of homeopathy in Mexico suggests an alternative reading of the professionalization of medicine in Mexico, which considers the creation and consolidation of liberal medical institutions, such as the ENM, the SBH, and professional medical societies, as necessary steps for the professionalization of medicine. Contrary to this narrative, Barreda’s critique and its adoption by the academic medical community suggests that the popularization of homeopathy was the driving force prompting the ideological unification of academic doctors, a decade before the NSM and the SBH resumed the regulation of medical training and practice in the 1870s. After that point, academic doctors such as Galindo framed their critique to homeopathy on the grounds of formal medical training, the possession of a NSM-issued medical degree, and its registration with the SBH. Galindo’s critiques marked the transition to a medical reform, a new period in the history of homeopathy in Mexico.

Press, 1989); and Natalia Priego, Ciencia, historia y modernidad: la microbiología en México durante el Porfiriato, (Madrid, España: CSIC, 2009), 28-42.