Nature Cure in Europe
The transatlantic journey from pragmatism to principles

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As one of the most ambitious publishing projects in the history of naturopathic medicine takes shape, those of us closely involved in its development are constantly reminded of the strong traditions on which naturopathic medicine has been built. The Foundations of Naturopathic Medicine (FNRM) Project aims, for the first time in almost 100 years, to produce a textbook which will, as its name implies, trace the principles on which these traditions were based through to their clinical, scientific, and policy applications in 21st century naturopathic practice.

Naturopathic medicine (in Europe, naturopathy) traces its origins to many cultures and traditions, giving it a global scope, relying, as it does, on the raw materials of nature to which all cultures and peoples have access. While Indian, Chinese, Arabic, African, Australian, and other indigenous systems of medicine have influenced modern naturopathic practice, it is to its European origins that we must turn to trace the growth of this approach to health restoration. The evolution of a coherent clinical theory of naturopathic medicine was assisted by a 2-way transatlantic migration of skills and personalities in the late 19th and early 20th centuries.

There were many traditional healers throughout Europe, but the acknowledged pioneers of “nature cure”—such as Priessnitz, Kneipp, Schroth, and Hufeland—were the ones whose followers emigrated to America to set up naturopathic sanitaria and schools. It was the graduates of these schools (such as those of Lust and Lindlahr), who, in turn, brought back nature cure to the United Kingdom when medical orthodoxy was becoming increasingly organized and regimented on both sides of the Atlantic.8 (Saks, 2003, p36)

The practical approaches of the Greeks and Romans were the antecedents of the 19th century naturopathy pioneers. They were the only forms of medicine available, and, to this extent, naturopathic and orthodox medicine had what Saks describes as “a relatively undifferentiated past.” Indeed, both schools of medicine claim Hippocrates as their progenitor. There is no doubt that Hippocrates set many of the principles we hold dear as naturopathic physicians; in particular, the concept of the healing power of nature (at least in spirit, the therapeutic approach was based on the healing power of nature—vis medicatrix naturae), although some writers maintain there is little evidence that the ancient Greeks actually used any form of medical practice.

Hippocrates used the term *physiēs*, the ability to heal oneself, or *nature in Greek.*4,5,6

Unlike Hippocrates, many of the most famous pioneers of nature cure in Europe did not concern themselves with principles and philosophy. They were artisans, in some cases uneducated, who hit upon pragmatic ways to restore health. Both Vincent Priessnitz (1799-1852) and his contemporary, Johann Schroth (1798-1856), were from farming backgrounds; Sebastian Kneipp (1824-1897) was a priest.1–5 (Kirkfeld & Boyle, 1994, Pitcairn-Knowles, undated). All of these persons based their success on the therapeutic use of water, either externally or internally, and enjoyed an enormous following from people in all occupations, including royalty and the aristocracy. Kneipp, in particular, also made use of herbal remedies. His most famous book, *My Water Cure* (1886), includes an extensive “Apologia,” in which he lists the therapeutic properties of many plants and “strengthening foods.”

An earlier advocate of eating a healthful, vegetarian diet was Christoph Hufeland (1762-1806) who coined the term *macrobiotic* for unrefined, indigenous plant foods. (The term was later adopted by Georges Ohsawa and integrated with the yin/yang philosophy.)

European Émigrés
Many practitioners were drawn to nature cure through personal experience in overcoming poor health. Among these were Benedict Lust (1872-1945) and Henry Lindlahr (1862-1924). Both of these men can be credited with systematization, synthesis, and document-ation of the principles of naturopathic medicine or nature cure that their European mentors (having concerned themselves with the practical demands of treating the sick) did not have the time to set forth. Lust held intellectual property rights over the term nature-opathy, forcing Lindlahr to adopt the term nature cure.6 (Kirkfeld & Boyle, 1940).

While Lindlahr and Lust’s treatments were based on European hydroopathic and dietary models, the emphasis of Bernarr Macfadden (1868-1955) was based on physical culture, although he also was a forthright proponent of fasting. Macfadden was born in the United States and, through prolific publishing, did much to popularize healthful living ideals. He also strongly influenced some naturopathic doctors who brought nature cure back to Europe as it was evolving in the United States.

The success of the spa treatments established by Priessnitz, Schroth, and Kneipp ensured their survival, albeit with some watering down of the nature cure principles.
The more eclectic practice of naturopathy, which is not statutorily regulated, became prominent in the United States, and from there, it spread to other parts of the world. One of the key figures in this movement was John H. Hygeia, who wrote extensively to popularize nature cure and the fundamentals of nature cure, the former predominantly through the medium of his magazine, Health for All. Lief and Thomson also were instrumental in establishing educational programs for naturopaths in the United Kingdom. Graduates of Thomson’s Edinburgh School of Natural Therapies formed the Independent Society of Registered Naturopaths and practiced what they called the strictest nature cure, bearing close parallels to the natural hygiene movement of Herbert M. Shelton in the United States, eschewing the use of such adjuncts as herbal or homeopathic medicine. Lief’s British College of Naturopathy (BCNO)—now the British College of Osteopathy and Naturopathy—taught a slightly more eclectic naturopathy, although adhering closely to the Lindlahr model of dietary control, fasting, hydrotherapy, rest, and exercise, with osteopathy emphasizing the soft-tissue techniques that Lief had refined. The BCNO graduated the first class of the General Council and Register of Naturopaths and British Naturopathic Association, which are the largest register and professional association of naturopaths in the United Kingdom. In the late 1980s, a small group of BCNO graduates, medical herbalists, and homeopaths formed the Research Society for Naturopathy to explore a wider range of treatment modalities. They ran seminars on such topics as humoral therapy, energetic medicine, orthomolecular therapy, and the first UK courses in cranial osteopathy.

Today, naturopaths in the United Kingdom and Europe practice a wide range of treatment modalities, with a strong emphasis on physical therapy (the majority of UK naturopaths are also DOs, and therefore, statutorily regulated), but also embracing the newer resources of energetic and nutritional medicine. Economic factors have forced the residential nature cure clinic out of existence and most naturopaths are in office practices. As people have become more disillusioned with the pharmaceutical domination of conventional medicine, there has been a rise in the demand for naturopathic therapies in the United Kingdom and North America. It is not always possible, however, to be sure if those are administered by qualified naturopaths or the many adjunctive therapy operators who have sprung up in the health care industry in the United Kingdom. A rash of reflexologists, iridologists, nutritionists, and aromatherapists may account for the European Federation for Naturopathy’s claim that there are 57,000 full-time practitioners in the European Union! (Gaier, 2009).

Naturopathic medicine has also benefited from the advantages and disadvantages of being defined and identified by its principles; such as medical herbalism, homoeopathy, and acupuncture. Important as we believe our principles and philosophy to be, we have to recognize the infirmity they may display to those viewing it from a more rationalist perspective. A House of Lords report on Complementary and Alternative Medicine (2000), for example, downgraded naturopathy to group 3 (along with such therapies as radionics and crystal therapy) which “cannot be supported unless and until convincing research evidence of efficacy, based upon the results of well defined trials, can be produced . . . for those therapies in our group 3, no such evidence exists at present.” It must be said that this damning verdict was a consequence of a poorly articulated presentation of evidence by the representatives of naturopathy in the United Kingdom. What it does emphasize is the critical importance of the Foundations Project to the future of naturopathic medicine. By bringing together the wisdom and experience of the leaders of the profession from around the world, the FNM hopes to make that essential connection between the practical application of nature’s healing resources, as used pragmatically by the early nature doctors, naturopathic principles, and their integration into the evolving world of modern, scientific, naturopathic medicine.