

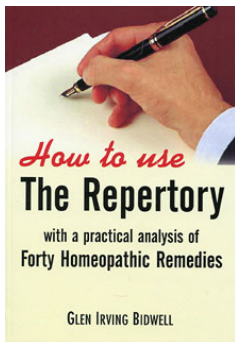
Glen Irving Bidwell

How to use the Repertory

Leseprobe

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von [Glen Irving Bidwell](#)



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HOW TO USE THE REPERTORY

PART I

There are three things which merit the most careful consideration of the homoeopathic practitioner—the taking of the case, the selection of the remedy and the administration of the remedy. The relations of these three steps are so closely intermingled, the one with the other, and the results of the one so dependent upon the care and accuracy with which the preceding steps have been taken, that I have presumed to call them the "Homoeopath's Trinity."

TAKING THE CASE

Let us consider a moment the first division—that of taking the case. If we hope to attain even the smallest degree of success in the curative action of **our** remedies we must observe this first step closely and follow the instructions in the *Organon* (Sees. 83-104) carefully. If our case is indifferently taken or the wrong symptoms recorded we surely cannot proceed with the second step. No matter what process we take to arrive at the remedy, unless we have our case well taken we shall only have failure for our pains. Let us consider this most important step. What does it mean to take the case? I hear many answers to this: that everyone knows how to take the case, as it is simply a matter of recording **the**

HOW TO USE THE REPERTORY

symptoms found in your patient. True, but what symptoms are you to look for and which are you to record? I will say with the utmost belief that less than one man in a hundred practising Homoeopathy today knows how to take a case properly. You may think this is a pretty strong statement, but from my experience I think if any error has been made it is that I have placed the number too high. Many times I have had cases sent to me for repertory analysis with page after page of symptoms found in this patient, and out of this vast collection not one upon which a prescription could be hung, not one to differentiate this case from hundreds of others suffering from the same disease. There is the rub. There is the stumbling block. They all make a diagnosis and many of the cases sent to me would make fine text-book descriptions of the disease, but it is not the disease we want to make a record of; it is the individualized diseased patient. No man can make a homoeopathic prescription from diagnostic or pathognomonic symptoms. The whole aim of the physician is to secure the language of nature. It is necessary to know sickness not from pathology, not from physical diagnosis, no matter how important these branches are, but by symptoms the language of nature.

In studying homoeopathic philosophy as given in the *Organon*, the *Chronic Diseases* and Kent's *Lectures* we are struck by the fact that many of the main points are emphasized by arrangement of the ideas in groups of three, and it may not be out of place to review them briefly.

THREE INJUNCTIONS

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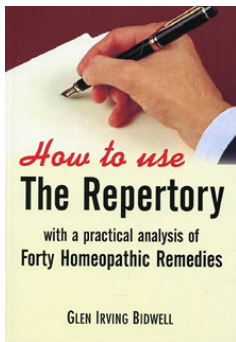
Looking at the first two sections of the *Organon* we find the three injunctions—to cure promptly, mildly and permanently. Thus Hahnemann states the highest ideal of a cure which is the rapid, gentle and permanent restoration of health or removal of disease in its whole extent in the shortest, most reliable and harmless way. Let us consider what we mean by a cure. The physician who has been trained in homoeopathic philosophy answers that a cure consists of the disappearance of the pathological state. Does it? We believe not. For instance, does the removal of haemorrhoids constitute a cure of the patient? If so, why do so large a percentage of operated cases return? Does the removal of the carcinomatous breast cure the patient? If so, why do they return so frequently? Does the removal of eruptions on the skin constitute a cure? If so, why are they followed by various internal disorders which local measures fail to relieve? No these are not cures. They are simply the removal of the visible symptom and one symptom does not make a picture of the diseased patient. We must go behind this manifest symptom to the totality of this patient's symptoms and take these into consideration when making our prescription, and restore to health by removing these symptoms; then the external manifestations will disappear. There should always be an inward improvement when an external symptom has been made to disappear. If the removal of symptoms is not followed by restoration to health it cannot be called a cure. In Sec. 70 we

HOW TO USE THE REPERTORY

find the following: "All that a physician may regard as curable in diseases consists entirely in the complaints of the patient and the morbid changes of his health perceptible to the senses; that is to say, it consists entirely in the totality of symptoms through which the disease expresses its demand for the appropriate remedy; while, on the other hand, every fictitious or obscure internal cause and condition, or imaginary material, morbid matter are not objects of treatment."

THREE DIRECTIONS OF CURE

Another question that arises is: How can we demonstrate that we have cured and how may we know that our remedy is acting curatively? This leads us to consider the *three directions of cure*. We find that in order to produce a permanent cure symptoms must disappear from above downward—from within outward, and in the reverse order of their coming. All homoeopaths who understand the art know that in order for the cure to be permanent the symptoms must go away in these directions. It is these directions that we must keep in mind when we treat an eruption of the skin, and see that the symptoms do not leave the skin and go to the brain, for if such a course is taken we know a mistake has been made, and if something is not done to make the symptoms take a proper course and go from the brain (centre) to the skin (circumference) we are going to have a death certificate to fill out. Then when we treat a case of endocarditis, and after the administration of the remedy we observe a



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