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TEN CASES

Nine cases, all of the same family, three generations, obsessive thinking in all three generations, or at least in two generations in which you can see "obsessive thinking". We are going through these cases. There are a lot of lessons to be learned from this. First of all, you can see from nine cases in one family the evolution of disease. How it evolved and how it manifests in several members of the same family.

It helps you understand the different forms a certain remedy can take among several different patients and also in times in terms of generation, from one generation to the next. It will be important to help you understand more about obsessive compulsive tendencies, but also specifically the evolution of disease from one generation to the other and the materia medica for these remedies.

CASE 1: GW 25 years old, female teacher

I saw her September 14, 1989. Never been well since being treated with Arsenicum album 30 C, TID (ed: terin d’i’e = three times a day) during three weeks, two years ago. Two years now she had been having the symptoms that we are going to talk about.

Fears she is a different person. Has palpitations, had extreme fear of death during her pregnancy two years ago. Thought that she was going to kill herself. She saw another homeopathic physician, who prescribed several remedies over a period of two years. She saw one physician that gave her Arsenicum album TID for three weeks. She then developed a whole complex of symptoms. She has had those symptoms since then more or less unchanged, in spite of the following prescription from the second homeopath. He prescribed Pulsatilla 200, one dose. Aurum metallicum, one dose. Capsicum 200, one dose. Thuja 200, one dose. Phosphorus 200, one dose and other remedies she didn't know.

She had an aggravation from each remedy but didn't feel much improvement. Except that with Aurum she felt 'a door opening and the dirtiness came out of me'. Her chief complaint is: "I just feel hollow, I want to break", since Arsenicum. She feels that her bones and skin are hollow especially the hands and wrists, distal forearms and feet. (The number you see is the intensity of the symptom. Three means "highest intensity"). It feels as if she is going to break. 'It feels like wind is going through the bones'. She has the fear of becoming insane, very intense fear (3). 'I constantly think of falling through the window. If I see a window without a screen I have the impulse to jump. I don't sit on the porch or even going near it, because of this impulse. I have
fear of knives. I have the impulse to kill myself. I'm scared to take a bath, because my (ed.: the missing word is probably aunt) died in the bath'.

This is a very good example of a neurotic patient. She also has other persistent intruding thoughts. The thoughts are usually related to what we previously witnessed or heard. 'When in a group I have the thought that I will take off my wig and throw it away'. She has the constant thought that she will take a knife and stab herself. That she will jump out of the window, car or bus. For this reason she doesn't even take the bus any more. That the baby will jump out of her arms and out of the window. That is the image she has that the baby will jump out of her own hands. That she will become crazy. All the above symptoms are (3). 'I'm always thinking about what I am thinking'. Try to do that. How is thinking about what you are thinking? It is quite a job. Overactive. 'I fear to be bored, I always do something. I like to be hyperactive. I'm the same as my father. He is happy when he is doing things for others. I hate and also don't want to relax'. Anxiety felt in stomach. Apprehension felt in chest. "As if I'm in a fog from the chest up".

With anxiety she has burning lips, hunger and insomnia. She has chronic recurrent sore throats since childhood. Nothing peculiar about it.

Temperature: warm-blooded. She is a warm-blooded individual, this is very important. 'I keep my coat open in the winter,' and that is in Canada, it is cold. In Montreal, so that is even colder. Worse warm room (2), worse in the heat of the summer (2), worse from the sun (-) and headaches from the sun (2).

Energy: low, 4 on the scale of 0 to 10. Ten is very good energy, 0 is no energy at all. Her energy is worse from 4 to 7 p.m. (1). She feels better later in the evening, until 1 a.m.

She has had recurrent nightmares since childhood. Nightmares about robbers, war, rarer since homeopathic treatment. So she has had some benefit from homeopathic treatment, even if she says she didn't feel any benefit, but here we find a bit of benefit. She sleeps on her side (2). She sees people and things as soon as she closes her eyes, disappearing when she opens them again. She sleeps with the window closed.

Her appetite: always desired sweet (3), ice-cream (3), and fat (2). She used to desire bread and butter. Aversion to milk (2), worse from wheat (2) and sweet (2). For two to three days after sweet she has a swollen tongue, burning lips, palpitations, worsening of the hollow feeling, especially in the wrist and general weakness.

Her thirst: thirsty for large quantities, but rarely. In other words, she would drink two or three glasses at once, but only once every other day. Aversion: to cold drinks and foods in general (2).
Her period: 'normal', always 26 days. Is that normal for us? 26 days is a bit of a short cycle. Chilly during menses. Bearing down sensation (2). 'I feel that something wants to burst'. Pre-menstrual symptoms: most of her symptoms get worse before her menses, especially the thoughts. Drawing sensation behind the right knee, which she also experienced during pregnancy. ... burning her ... (ed.: could not be clearly understood on the tape), worse from sweets, yeast and carbohydrates in general (CHO means carbohydrates = starch and sugar. You could include alcohol, but she doesn't drink alcohol or anything).

Personality: She describes herself as very sensitive (3). She can't take criticism (3) and becomes sad very easily (3). When I say her "personality" this is her spontaneous description of herself. She feels very guilty (3). 'I always feel that I've committed a sin. I always feel better when I give of myself, or if something good happens to others'. This is a strange feeling she has. 'I always fear that I've done a sin, I always feel better when I give of myself, or if something good happens to others', so this is a real guilt feeling. Always reproaches herself (3). She likes to help others, likes to be complemented and liked. She is a perfectionist in appearance. Fastidious about order (2). She describes herself as being sympathetic, not a crying person. She says she can't even imagine someone being hurt (2). Very fearful if she hears a story of someone who has committed suicide. She is affected for a few days afterwards.

Is that sympathetic? She describes spontaneously that she is sympathetic, and I say, what do you mean? She answers: "I cannot imagine someone being hurt". Very fearful if she hears a story of somebody who has committed suicide, she is affected for a few days afterwards. Is she caring for the person that gets hurt? She fears for herself. "Hypochondriacal anxiety". If she hears about somebody that has a certain disease or has been hurt, she thinks that it will happen to her. That is also another aspect of obsessive compulsive disorder, they have a tendency to have hypochondriacal anxiety. In other words: if somebody gets hurt, they think: "it may happen to me". Obsessively they will think about this: "it may happen to me". "I will have to be careful, maybe it will happen to me". So it is not sympathy.

She keeps her emotions to herself. Great fear of falling (3). Fear of high places (3), fear of high buildings (3). She says: "How come people are not falling out?" Fear of thunderstorms (3) and anxiety at night when alone (2). Hypochondriacal anxiety (3). 'If someone has a heart-attack, I feel I will have it'. Not even "think", "I feel it", now she is going to have it. Before Arsenicum album she used to have great fear of dying, fear of the dark, always fear something bad is going to happen. As a kid she always had anxious thoughts. She would say "My mother is late, something is wrong", that kind of anxious thinking. 'What will I do if there is an accident? My mother is late, something is wrong'. She has the following delusion: "I feel someone is going to hit me. Someone is going to hit me between the shoulder blades (2)."
Generality: all her symptoms are worse before going to bed.

Here we describe a patient in five minutes where it took one hour and a half to take the case. In an hour and a half the brain of the person taking the case is doing a lot of work that you don't have the time to do right now. There is a process of elimination and pointing to a certain remedy and elimination of others and it is almost impossible to do that in five minutes, because the information comes slowly as you do the case. It is more difficult for you plus you don't see everything.

Objectively, here is what I can describe for you: the patient has dark hair with a pliethoric face. She wore a wig, but the natural colour of her hair was dark. It was often difficult to get a clear description of her symptoms. She could not explain her feelings very easily. She was contradictory and confusing. I had to be very careful to write any symptom down. I didn't write a symptom down until I really had a sense of what she was saying, unless it was a quote. She was so confused in her own mind. How could she describe herself as not a crying person? Three or four times during the interview she became teary. So that is confusing. She says she is not weeping and here she had tears a few times. Physically there is almost nothing, very little physical symptoms to observe.

She had an indented tongue (1). She had fungus on four toenails and on the right temple. So you can see very little physical symptoms in this case, mostly mental symptoms. A well developed case of neurosis, especially of the obsessive type.

She belongs to a religious group. When persons gets married, they have all their hair cut, so if they want to be adulterous, they will be recognised easily, because they don't have their natural hair. In other words, when you get married in that religious community and you are a woman, you don't have no more natural hair ever; you wear a wig, usually made of your own hair. They use your own hair to make a wig, but that is it. That is once in your lifetime, then you don't grow any more hair. These are idiosyncrasies of human nature. Each religion has their myths and believes and rituals. In the history of humanity all kind of rituals were done and this is one of them. It is part of us as human beings to have belief in rituals and they do it like this.
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