Erik van Woensel
Classical Homeopathy Evidence Based Medicine vol. 1

Leseprobe

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What this book has to offer you

- **Clear instructions** about how to **analyse** the information coming from the homeopathic consultation and how to **synthesize** this outcome into a homeopathic prescription.

- **Insight** in how to make a **prognosis**, considering:
  - what has to be treated as to **pathology**,
  - what the **condition of the defence mechanism** is and the patient’s **level of health**,
  - possible **causative** and disease-maintaining **factors**,
  - the patient’s personal and family **medical history**,
  - the patient’s **functioning** as a **human being**: mentally, emotionally and socially,
  - the **clearness** of the **remedy pattern**.

- Information that enables you to better **estimate** the **duration** and **complexity** of the **treatment**.

- The ability to **judge** the **symptoms** presented in the case as to their **peculiarity** and how to find the **distinctive** characteristic symptoms of the case.

- A **well-structured schedule** about the **different strategies** that can be used to arrive at a homeopathic prescription, enabling you to choose the **right strategy** in order to make the **correct prescription**.

- Knowledge how to **differentiate** the appropriate **remedies** and select the most similar one.

- Guidelines along which you can select the **right potency** to start the treatment with.

- Practical tips helping you to **correctly evaluate** the **reaction** to the **prescribed remedy**.

- **Fifty-one cases**, with a **long-term treatment** up to more than **twenty years**, to practise your knowledge on prognosis, case analysis, materia medica, potency selection and evaluation of the case.
1. THEORETICAL PART

Introduction

The main goal of homeopathic analysis is to find the homeopathic remedy that is the closest match to the symptom pattern that has been developed by the defence mechanism as a reaction to the disturbance that is threatening the organism. If the remedy is correct then the defence mechanism will be positively stimulated and therefore able to protect the organism more adequately by halting or restraining the disease promoting processes. To those who are not familiar with the homeopathic method of analysing a case, it may seem strange that the selection of a homeopathic remedy is usually not done only by using the pathological diagnosis that the patient received. In contrast, in most cases the final choice is made by using those symptoms that are not pathogenic at all but that are peculiar for the condition we are going to treat in this particular patient - in other words, for the individual response by the defence mechanism to the disturbance that threatens the organism. For instance, a patient may present with a chronic bronchitis but the curative remedy is chosen by the following symptoms: the cough is worse around 1:00 hours in the afternoon, the patient has a tendency towards depression, loves salty fish and can only sleep on the right side. The reason why these symptoms are used is because the defence mechanism, in its attempt to correct the ongoing disturbance, can produce symptoms in every aspect of the patient, whether mental-emotional or physical, general or local and not only in that anatomical part where the main complaint is seated. The symptoms needed to find the corresponding homeopathic remedy are usually recognised because they distinguish this case from another with the same pathology or complaint.

Thus, in order to find the correct homeopathic remedy, the homeopath must search in the totality of the symptoms (see Totality page 42) those that are characteristic for each individual case. A characteristic symptom can be recognised by looking for the peculiar or intense elements in a case. In the example mentioned above, we see peculiar symptoms for this particular case, but there are other cases where there are no such peculiar symptoms. In cases like these, we are often guided by the most
The prognosis

enough then the new layer will be clearly recognisable. If the organism is in a less good condition, then the layer will be less clear or even unclear. It is also possible that there are more remedy layers, especially if there are more causative factors. If a causative factor is very strong and the overall state of health is not good, then it is possible that more than one remedy is needed to counteract the effect of one causal factor.

It should be clear that when the overall energy has become low and/or the symptom pattern has been changed the treatment will take longer. The remedy will need to be repeated more often or more remedies will be needed.

Family medical history

Genetic (or hereditary) predisposition

This subject is important because:

1. The prognosis can be worse when the same or a similar pathological condition as the one the patient has runs in the family.
2. The condition of the family and the ancestors can provide information about the overall state of health of the patient.

The condition of the patient’s defence mechanism is dependent on the level of health of the parents at the moment of conception. In the same way, the health of the ancestors determines the level of health of someone’s parents. It is therefore important to pay attention to the medical history of the patient’s family as it can provide information on the condition of the defence mechanism and the overall state of health of the patient we are going to treat. The stronger the genetic predisposition, the worse the prognosis can be. Patients from families with many deep pathologies (mental-emotional or physical), many long-lasting chronic diseases or severe complaints arising at an early age, can be more difficult to treat.

The hereditary predisposition is listed among the other causes of disease (see Causative factors page 25) but the difference with the other causal factors is that this one is an endogen maintaining cause, while the others are exogen triggering causes.

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The more each one restrains the tendency to carelessness in prescribing and in method, the wiser he becomes in artistic effects and materia medica work. The two features of prescribing must go hand in hand, and must be kept in a high degree of balance, or loose methods and habits will come upon any good worker.¹

**Totality**

The word ‘totality’ has given rise to a lot of confusion amongst homeopaths. What S. Hahnemann meant was that we do not prescribe for a local symptom only, because of the danger of suppression. This was one of the major mistakes made by his contemporary allopathic colleagues and still is the main problem of allopathic medicine nowadays. Therefore the homeopath will, apart from the complaint for which he has been consulted, also take into consideration the other local complaints (even when they are not important to the patient), the general symptoms and the disease maintaining and causative factors. From these we extract those that are useful for a homeopathic analysis. So by the word ‘totality’ we do not mean all the symptoms of a case, but those that can be used from all the information gathered during the consultation because they are characteristic and distinctive.

The totality can be divided into the following three parts:

- Psychological symptoms (mental and emotional).
- Physical generals.
- Local symptoms.

**Using the components of totality for the prescription**

For patients who have a good overall state of health and a well-functioning defence mechanism, we can easily find the homeopathic remedy. In such patients we can make a prescription on totality, which means that we can find the remedy no matter how we analyse the case. The characteristics are found in every part of the symptoms - local or general - and give the same result.

If, however, the defence mechanism is weakened in some way, then prescribing on totality will become more and more difficult. If the defence mechanism works in a less orderly manner, but the overall energy is still

birth the heart rhythm was normal. The delivery went smoothly, without problems. His physical development is normal.

So far he has only had breast milk because he refuses all other kinds of food. His stools are normal.

He easily gets nasal colds [1]. This started when he was three weeks old. The nasal discharge is greenish [2].

His feet are often cold [1]. He does not perspire a lot.

The mother has had eczema since the birth of her sons. The father suffers from sleeping disorders and lack of self-confidence. Vaccinations did not aggravate the child’s situation.

Case 40: Skin complaints in a dog - Anamnesis

The owner of a 3-year-old male Dalmatian asks for my help for a skin eruption the dog has. The eruption is mainly situated on the lower part of the front legs. The skin becomes very red [3] and probably itches because the dog bites and licks the sore areas until they bleed [2/3]. His left hind leg is less developed than his right one. That is why he starts limping when he has to walk a long distance. His appetite is good, but he does not drink much. He does not tolerate cold very well, but he neither likes the sun.[2] Although this is a male dog, he is good-tempered by nature [2] and is never aggressive. The dog is timid and does not go up to strangers [2]. He is naive in that he does not recognise dangerous situations [2]. The owner says that she has problems training the dog. He does not seem to learn from things [3], for example, he recently has stumbled four times over the same piece of barbed wire.

Case 41: Eruptions after playing near a chemical factory - Anamnesis

A 3,5-year-old boy has red, purulent crusts in his nose and around his nostrils.[2] They appeared after he had played near a chemical factory. All the other children playing there also developed these crusts for a few days. With this boy, however, they did not go away. For a little while now, he has also had a little spot on his right cheek and on the right corner of his mouth. The family doctor was unable to make a diagnosis.
slightly burning. The recovery continued and on the third day hardly any
inflammation was visible. There has been no relapse or complication in
the past seven years.

Case 36: Shortness of breath - Analysis

Prognosis

*Depth of the disturbance*

The disturbance in this case is on the physical plane and is not situated
very deeply. The child develops recurrent coryza, a complaint situated in
the upper part of the respiratory tract. This is favourable for the
prognosis. We do see, however, that lately dyspnoea has developed.
This shows that the complaint has the tendency to become more severe.
On the other hand the defence mechanism is able to persist in producing
skin complaints which is a good sign.

*Personal medical history*

In this case we see a clear reaction to vaccinations. At the time that this
case was treated, the first vaccination had been given at three months of
age. This is the age at which the boy’s complaints appeared. Both
reactions were not very strong ones, not with high fever, and therefore
they can have left a lasting disturbance.

Apart from this, we see a strong emotional stress period for the mother
at the end of the pregnancy. This sometimes has an influence on the
condition of the unborn child, which can still play a part after birth.

*Family medical history and hereditary predisposition*

The child’s complaints are connected to a predisposition in the family as
the mother herself suffers from respiratory complaints. This may make
the treatment more intensive, meaning that it may last longer or that it
will require several remedies.

*Conclusion*

In this case we should take careful note of the reaction to the
vaccination, because a new disturbance may have originated from the
vaccination, bringing on a new symptom pattern related to a causal remedy. It is also possible that it has weakened the defence mechanism in another way, so that the still dormant hereditary predisposition becomes active more quickly. (see *Suppressive therapies and vaccinations* page 27) In this case we already see a connection with the hereditary predisposition through the respiratory complaints of the mother.

Furthermore, there is the strong emotional stress the mother has gone through at the end of the pregnancy. We have to take into consideration that it can influence the development of the unborn child in a negative way and therefore may produce another causal layer that needs to be treated separately. But because the current disease is so strongly related to the hereditary predisposition and the child is emotionally balanced, this does not seem very likely here.

In general the homeopathic treatment of this child’s complaints should not present us with any problems. However, this depends on the extent to which the vaccinations and the hereditary predisposition have been able to weaken the defence mechanism. This could slow down the cure and prolong the treatment for reasons described above. (see *Conclusion for causative factors* page 28)

By applying the knowledge of the levels of health we can get more specific insight in the condition of the defence mechanism and make a better prognosis. This child has recurrent acute diseases with high fever. This puts him in group B. As the acute diseases are superficial, presented as coryza, he is most probably in level 4. This means that the defence mechanism has been weakened to a certain extent but not very severely. This is in favour of the prognosis. However, we see that the child has developed dyspnoea for the first time. This shows that the defence mechanism already has difficulty to maintain the present balance.

**Selection of symptoms**

**Peculiar symptoms**
- Great thirst.
- Desire for oranges and mandarin oranges.
- Sleeping position on the knees, increased during shortness of breath.
Selection of symptoms

Peculiar symptoms
• Eruptions on the lower part of the front legs that are red and itch.
• Aggravation from cold and warmth.

Intense symptoms
• Bites or licks until the legs bleed.
• Good-tempered by nature, timid.
• Naive, difficult to learn things.

The under-developed hind leg is not taken as a symptom as it cannot be treated. It is purely a sign of the hereditary predisposition. I do not take the aversion to strangers as a symptom, as this is normal in a timid nature.

Repertorisation and selection of remedy

The anatomical part of the dog where the eruption is situated matches the human hand. As the skin complaint consists of redness, I also use the rubric Extremities - discoloration - hand - redness.

Difficulty with learning things is found under Mind - studying. This may sound a bit odd, but for an animal its training is mental exertion.
Case 40: Skin complaints in a dog - Analysis

Repertorisation with filter ‘Vithoulkas view 2006’

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Differentiation of remedies

Although *Sepia officinalis* scores high on totality, it has no keynote or essence in this case.

*Sulphur* is one of the main remedies for the treatment of skin eruptions, especially when they itch a lot. There are no other keynotes or psychological essence to confirm it.

*Arsenicum album* is in bold for scratching until it bleeds, but cannot be confirmed otherwise.

*Natrium muriaticum* has aggravation by the sun as a keynote. The psychological essence cannot be confirmed.

In *Phosphorus* we expect the opposite of what we see here. Primarily it has symptoms such as being extroverted and bright.

*Pulsatilla pratensis* has aggravation from the sun as a keynote. We can see timidity as part of the psychological essence.

*Carbo vegetabilis* is the main remedy for the local complaint for which we were consulted according to the repertory, but it is not a keynote of the remedy in the materia medica. The essence is not confirmed.
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