

ACCURACY
OF
10 Ws IN
HOMEOPATHIC
CASE
TAKING

An Extension to the
7 Ws of Boenninghausen

DR SUNIL ANAND



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They have always supported the growth of homeopathy through their books over the years.

It is my good fortune to have my first book published by them. I remain indebted to their co-operation in seeing this book come to fruition.

May they continue to be torch bearers in the cause of homeopathy upliftment globally.

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Prologue

Every person's health care could be described as a journey. A healthy person becomes a trendsetter and sets a benchmark for others they come in contact with. From one person to several people, to a community, to a nation, and, finally, to global frontiers.

In that sense, every nation's health care could be depicted as a journey too. Happiness quotient and healthy living are intertwined. Concern about the very environment that sustains us is an idea that was triggered by a few people. Today it has become the need of the hour.

We are concerned about the danger of guns without understanding what has led to violent thoughts in the first place. We frown at addictive patterns without empathizing on why the void led people to such vices in the first place. On the reverse is a society built on trust, compassion, and inclusion. Some may consider this as a Eutopian thought, but a journey of a thousand miles starts with a step.

It's about creating a ripple effect. This book carries the same intent. Even though it is primarily based on the tenets of the science of homeopathy, it is not aimed to be a document limited to health, disease, and their remedial solutions only.

It refers to a healthy attitude in all walks of life. A medically fit individual may not necessarily be considered well in a holistic sense of the word. One needs to change the paradigm of health.

This applies to parenting, relationships, lifestyles, and even corporations.

An individual who is well in the true sense facilitates corporate wellness. This leads to nurturing and evolution at a very dynamic level. While profits are essential, ethics in industries has a sustained impact on the long-term objectives of a company.

Astute skills of observation and studying body language provide vital clues at times of a crisis.

The use of doodles as an entry point into grasping the root cause of a problem is another area explored.

In my experience, such subtle and yet effective strategies can be applied effectively to all walks of life, irrespective of gender, age, or profession.

This is the concept of the 10 vital Ws in the form of questions highlighted in the core of this book.

Keep asking yourself these questions at every stage of your life, and it will provide useful insights into where the real problem lies. So let's take a small step towards that journey.

Preface

Health and Dis-ease

In order to understand the disease, we need to take a step back and grasp what is health or ease.

Charaka, the father of Indian medicine, states: “The body and that which is called the mind are both considered to be abodes of disease, likewise of well-being. The cause of well-being is their harmonious or concordant interaction.”

Although Louis Pasteur in the early eighteenth century established the germ theory of infectious diseases, he was well aware of the effects of the environmental factors on the functioning of living organisms. He discovered the “seed” but also paid attention to the “soil” or the terrain by which he meant the internal and external environment of the host. Pasteur’s view of human diseases was an extension of the same idea that a bacteria causes damage only when the body resistance is weakened. This scientific study made him declare that it is often the case when the condition of the patient, his weakness and his mental state, form an insufficient barrier against the invasion of the infinitely small microscopic organisms.

It is this very depleted soil and disturbed mental state that a homeopath aims to recognize and address when a system that was at ease is now dis-eased.

Since every patient has a body and mind, every illness too has a mental/emotional component to it as well. This is the domain of psycho and soma from which was derived the concept of psychosomatic medicine and diseases. In the words of French-born American microbiologist Rene Dubos (February 20, 1901–February 20, 1982): “Whatever its precipitating cause and its manifestations, almost every disease involves both body and mind, and these two aspects are so interrelated that they cannot be separated from the other.”

Emotional Expressions

While describing our states of mind and how they affect our bodies, it is worth paying attention to the following commonly used expressions in daily lives. We suffer from a “heartache” when the heart is broken from disappointment. We can feel “paralyzed” by fear or go into a “stupor” following a shocking incident. We can become “blind with rage” or “flush” with indignation. While emotional disturbances can make us go “weak at the knees” or cause the “teeth to chatter.” Fear makes the body sweat, or go cold, or the mouth dry. Relief on the other hand is commonly expressed as “getting something off the chest.”

John Hunter (February 13, 1728–October 16, 1793) was a Scottish surgeon and one of the most distinguished scientists and surgeons of his day. He was an early advocate of careful observation and scientific methods in medicine. He had personal experience of the effects of the mind on the body and had said that his life was in the hands of any rascal who chose to make him angry since he noted how his attacks of angina pectoris were brought about whenever his mind was agitated by someone else.

To measure emotion, psychologists examine subtle physiological changes in the human system that are readily measurable. These normally include heart rate, blood pressure, breathing rate, and skin conduction. The electrical conduction of the skin, known as the galvanic skin response (GSR), offers an insight into one’s emotional feeling, particular when anxious. Any feeling of emotion is normally

associated with a change in GSR. This is also the principle upon which lie detectors and EEG are based.

This forms the basis of a deep homeopathic understanding of mind and body and the reasons behind needing to note the correlation between the two. Every patient has to be understood as a unique human being, and the emphasis from illness-centered medicinal approach needs to be shifted to one that is more holistic and patient centered instead. A mind that is in conflict is more easily susceptible to diseases. The mind comprises of two components: the objective and the subjective. For the mind to be harmonious, both these components need to be in sync with one another. Hence, for a homeopath, in the detailed examination of each patient, both these facets are valuable to comprehend and record.

In the chapters that follow, we will see further elaborations of how both objective and subjective symptoms are approached via case studies to clearly demonstrate how an alert and diligent homeopath uses systematic techniques to help his patients achieve optimum health.

Doctors and Humanities

There have been several incidents of doctors being made a victim of a patient's fury and dispute following a case gone wrong (or at least in the view of the patient and their family), mismanaged, or not attended to timely. Though this fallout between patient and doctor and the growing mistrust with those in the profession has been on the rise, one needs to understand this trend from a deeper perspective. We need to admit that the semi-god status that doctors had the privilege of is now a thing of the past. Who is responsible for this?

A typical medical consultation today is of less than ten minutes! And it consists of a few mechanical questions followed by a long list of investigations and medicines with minimal interaction as to what is the problem and how the doctor aims to address them. Such a paternalistic approach in a scientific discipline that deals with human

lives with a need for empathy and compassion needs to change.

Medicine is defined as the art and science of healing. Today, sadly the artistic humane side of this science is sorely lacking. There is no training imparted for right-side empathy and compassion. Is it surprising then that consumer courts and medical negligence case disputes are on the rise?

There is no denying that modern medicine is a miracle and has benefitted our lives, but it is a complete package that comes with its side effects as well. Fatal prescription drug errors or overprescribing alone kills more than one hundred thousand people at the least annually. In leading pharmacological companies, the food served to their employees are healthy beyond imagination. Very good! They also have special programs to help their workers from taking excess prescription drugs. Even better! But their business model for consumers is to take more drugs! It is time that consumers get aware of such conflicting practices.

Empathy at the Clinic

My dad who is a reputed pediatrician has always encouraged me in all my pursuits, even those out of the medical profession. But his profile and popularity within the profession and socially had subconsciously left a very high benchmark for me to emulate.

I kept trying to raise the bar, but it was not easy. He would often ask me how my day was at the dinner table, and that was a special family time. It was during the time of my internship where I needed to walk up a steep hill to get to my bus on my way back home. In spite of my fitness back then, it would leave me breathless and sweating. On that particular day, I happened to be next to a manual laborer who was huffing while pulling his heavy load on a hand cart. Without any hesitation, I helped him push it to the top, and when we stopped by the curb, he put down the cart and gave me a hug. I shared this incident over supper.

That day my dad shared with me the significance of empathy, especially

related to the medical profession. A value often first imbibed outside of the clinic or hospital setting. This then transitions with more ease at work too. A client may occasionally excuse a wrong diagnosis, but it's hard to overlook the lack of politeness and absence of bedside manners from the physician attending to them. As a homeopathic consult involves both mind and body correlation, it is but natural for such a physician to be empathetic to ones suffering. At the end of the session, every patient feels heard and cared for. Hence, such a method of dealing with patients should be made a mandatory part of medical instruction in all disciplines and not just in homeopathy. Modern medicine may be able to avert a crisis, but for long-term wellness, it is time that consumers seek out modalities that help boost their innate immune system. And it is time that governments and health insurance companies start to see this as a preferred trend of consumers gravitating toward such disciplines that work along with the body's self-healing system.

And lastly, it is not the patient that heals alone but the physician as well, in the knowing that the skills that he possesses are sacred gifts to him, and in the relief of human disease and suffering lies his own emancipation and liberation as well.

About the Author

Dr Sunil Anand is a graduate and Senior Lecturer of the prestigious C.M.P. Homeopathic College, Mumbai. He pursued his post-graduate studies from The Hahnemann College of Homeopathy, U.K.

As an Ex- Associate Professor Emeritus D.S. Homeopathic Medical College, Pune, he conducted a Pediatric OPD and was known as a popular and accessible teacher and mentor.

His stint as Dean Post Graduate Studies, Vancouver Homeopathic Academy provided an opportunity for students in North America to be trained under his able guidance.

His collaboration with Bajaj Auto, Pune led to the formation of the Prana Homeopathy Yoga Center, the first of its kind offering both streams of holistic treatments.

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- Visiting Faculty Teacher - Northwestern Academy of Homeopathy, Minneapolis
- Visiting Faculty Teacher - The Other Song Academy, Mumbai

He integrates right-brain centered tools such as the use of doodles, child play observations and Sleep-dreams to his unique style of case taking.

Physical fitness has been an ardent part of his life. He rose to the title of Assistant Instructor and Nidan, Okinawan Goju-ryu Karate-do Shobukan. Also a student of Iyengar Yoga, he integrates the teachings of both martial art and yoga disciplines into his way of life and thinking.

Dr Anand and his wife Alka currently reside in Toronto, Canada and continue their contributions to holistic health in their work.

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Publisher's Note

In this informative and innovative book, based on the basic tenets of homeopathy, the author carries the reader on a journey of understanding how their earliest life experiences result in patterned behaviours that form the lens from which they experience life - both in health and disease.

His unique holistic approach offers you a journey of exploring childhood moments, the hobbies dear to us, impactful incidents, memorable dreams and various right-brain activities like doodling to support greater self-awareness and healing.

For a practising homeopath or an eager student, this book will really help in learning the finer nuances of remedies and the art of case taking. He provides the reader glimpses of his role as a practitioner and teacher through case examples from his practice. He has introduced a unique understanding and approach of case taking and analysis based on the concept of Dr Boenninghausen's 7 W; and named it as "10 Ws".

This project could not have been completed without the support and guidance of our editorial team at B. Jain.

Hoping through this book one gets a refreshing viewpoint on solutions required for the restoration of health through homeopathy. Suggestions are always welcome.

Manish Jain

Director, B. Jain Publishers (P) Ltd.

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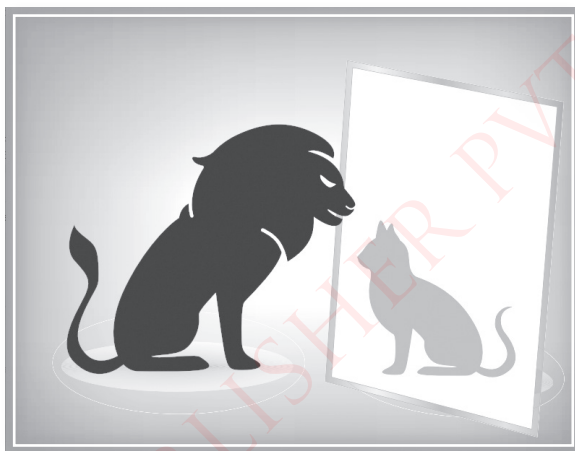
Chapter 1

Introduction

Keywords: pathology, source, group study, confluence point There are some basic parameters or methods that I invariably find myself using very often while working on cases and coming to a reasonable solution/similimum. This book is a compilation of some of these methods along with appropriate cases to support the same. When I begin a case, it becomes important for me to understand why a particular individual has developed a certain type of pathology. For instance, when the use of voice is imperative for a professional singer, we find some problems associated with the faculty of speech or voice projection as a presenting feature of his case. Whereas for an athlete, when he has to sprint with sudden bursts of speed in order to compete at a higher level, he suffers from easy spraining due to weak ankles or pain in the performance body part due to wear and tear of ligaments. A model with a need to look presentable will be in distress due to some pigmentation on her face that threatens her or interferes with her glamorous profession. So the presenting complaint or its location itself tells us a lot to begin or indicates the entry point in the initial stages of the case interview. When the person starts experiencing this reality in an exaggerated manner, he then moves from a situation of ease to a situation of disease. These exaggerated notions of reality or a sort of distortion of what is real (expressed in the form of signs and symptoms) is the next important area worth exploring! Here we

understand that he has a problem (in reality) that he perceives in a different way, which we term as delusion. The delusion is seen as a perceived distortion; hence, a large area in the mind section of our repertory is reserved for this.

Delusion and reality example: lion or cat in the mirror



For example, if a patient behaves/perceives as if his legs have been taken away from him, even though that may not be the case in the literal sense, he feels as if his legs are absent due to lack of an adequate support system, which in turn exposes his weakness and gives him a feeling as if people can see through his mistakes and make him a laughing stock. This is suggestive of Baryta carb. The delusions chosen for such an understanding are as follows:

- Delusion: legs are cut off
- Delusion: laughed at by others

Both rubrics(symptoms in homeopathy)have Baryta carb in them. From this, we understand that the so-called perceived or distorted reality becomes imperative for a sound prescription.

To add further, the way in which the patient experiences such perceptions is suggestive of the kingdom to which he belongs. In this

case example, the lack, the inadequacy, the weakness within himself indicates the mineral kingdom.

Let us take another example. A person who manifests a certain type of brittleness when disappointed in close relationships expresses a feeling of being shattered in a relationship. And at the same time, he is trying hard to conceal the cracked fragments due to a certain image that he has built up of himself in society. This gives us the precise feeling of the substance glass, which is made up of crystallized natrum and silica, giving us an insight into the remedy: Natrum silicatum, which are the two basic components for the manufacture of glass. Natrum represents the need for a relationship and yet the disappointment faced in trying to preserve it while silica represents the image. It isn't surprising that in the proving of Natrum silicatum many provers got dreams of mirrors!

An understanding of the substance gives us an insight into the remedies and the way people present themselves in our clinics who need these remedies.

Let me give you another example.

A need to appear attractive while feeling unattractive and holding people's attention by their vivacious behavior is one of the main features seen in *Crocus sativa* (saffron). Saffron as you know is used on the dining table to enhance the beauty of a dish through appearance and aroma besides having aphrodisiac properties. So it is not at all surprising why the bride and bridegroom in India are given milk laced with saffron when the newlyweds meet each other for the first time on their wedding night. What better way than saffron to warm and speed things up a bit!

Group study is a very helpful method to understand the lesser-known remedies represented through one or two remedies that one may be more familiar with. For instance, if a case presents with an obsession to perform and be the best in his profession while she has to meet heavy responsibility that is expected from him, one gets the feeling of heavy precious metal from the sixth row in the periodic table also

known as the gold series and the remedy we are most familiar with in that line is Aurum metallicum or gold itself! But what is also striking besides these aspects in this same patient is a foul temperament, which makes him overtly critical and offensive toward others. To make it more precise, he even has offensive secretions and a feeling of not being appreciated enough by those around him. This brings us to the remedy osmium, an offensive-smelling heavy metal in the gold series.

Let us take another example. We are familiar that the theme of debility arising out of over application in a specific area, which is a common theme seen in all acids. If there is debility arising out of an over-application of the mind resulting in brain fag, the remedy is picric acid. But if the debility is out of a persistent effort to have a progeny, to continue the family name, the remedy is oxalic acid that has the rubric: Desire to beget children - oxalic acid.

This is the importance of group study. One can extend this same application to the plant families or the animal kingdom and even subgroups within a certain animal kingdom. For instance, insects, as against the mammals, have their own unique characteristics while retaining what is common to the animal kingdom in a larger sense. The classification of patients as per the respective kingdoms will be dealt with in more detail under the specific remedy or chapter in further sections of the book.

The merging of the physical symptom with that of the main essence of a remedy can be termed as the confluence point of a case and is a very essential aspect of case taking. Let us take an example. When we encounter a patient who is so distressed and harassed by his cough, as it comes in the way of his every activity due to its persistent, violent intensity, we invariably find a personality type that in his emotional makeup matches the same intensity as well. This person feels a victim of his circumstances who is persecuted even by his closest friends. This is the remedy picture of Drosera. The story of an insect feeling trapped within a carnivorous plant. In a carefully explored case, this confluence point will always emerge and it is up

to us to see that correlation. This in turn will guide us to the indicated state accurately.

In recent years, what revolutionized homeopathy were clearer concepts to the approach of understanding remedies. While Dr. Jan Scholten helped map the mineral remedies as per their individual placing in the periodic table of elements, new remedy provings by Jeremy Sherr and Misha Norland introduced a wider range of substances to help deal with the range of diseases afflicting the masses. The plant family remedies remained a mystery for a while, and even while Farrington introduced the basic concept of group study, there were many botanical families that continued to be hard to recognize and penetrate. This affected accurate prescribing. Rajan Sankaran's brilliance and love for homeopathy once again was seen by his idea of the vital sensation. As the plants have a lot of mental and emotional symptoms, one can be easily misled by them. In order to avoid that, Rajan decided to understand the nonspecific human emotions as against the regularly used mental symptoms by attempting to understand the sensation rather than a symptom that permeates and is common to remedies belonging to a particular family. This he terms as the vital sensation of a case, and it is not restricted to plant kingdom remedies alone. In fact, every substance has its own vital sensation. For instance, the proposed sensation for glass from the above-mentioned understanding could be brittleness and sharpness as against the conifer family, which is fragile, brittle, and disconnected. Both appear very close, but on closer scrutiny, there are subtle differences. Glass can break into sharp pieces that can cut and, once shattered, unable or difficult to mend or for the crack to go unnoticed. The conifers on the other hand are fragile in the form of inherent weakness or inadequacy that they fear will get exposed.

The new sub-approach is to let the physicals spontaneously take you to the vital sensation. Through this technique, one can see the confluence point mentioned earlier, in the way the patient relates his sensation through the physical. For instance, a patient described his gastric ulcers with reflux esophagitis as, "Heat in the entire abdomen with

periods of sensation of a hot fluid that seems thicker in consistency than water; wanting to rise upwards with lateral pressure on either sides. At the same time, there is no easy outlet in the form of vomit which would relieve the patient.” Instead, an opposing force that pushes the fluid down, not allowing an easy outlet, while the lateral contraction and relaxation that the patient describes with a gesture of his hands continues adding to his distress. When asked to elaborate on this sensation further, the patient described the movement of a hot fluid like lava with tremendous pressure to find an outlet, and when it finally does, it is like the eruption of a volcano. Based on this sensation and the imagery, he got Hecla lava.

If one is familiar with the concept of the vital sensation, one may want to question in the above case as to why not a remedy from the Cactaceae family. It has the contraction alternating with relaxation as the main sensation. The answer to that is that the vertical opposing forces working against each other, along with the lateral relaxation and contraction, which is what makes the picture precise and complete. One must be aware of these subtle aspects while working with this method and exercise some caution while attempting to do so. The patient who was given Hecla lava went on to confirm his state and remedy by adding that he tries to suppress his anger at most times, but once it erupts it is like lava that can burn itself as well as whatever it comes in contact with. This is again the confluence point we talked about earlier but seen with the aid of the vital sensation that permeates the core of a case.

There may be many other techniques used by others during a case taking, but I generally restrict myself to one of the above. Every system is evolutionary. Let us now evolve together in the light of my clinical experience to the next frontier of flexible case-taking techniques.



Objective and Subjective Symptoms

Think and ponder on all that thou readest, judging and reasoning, analyzing, and comprehending, and evolving sound principles, till all objective truth is subjectified and assimilated to thy being and character.

— Shri Keshub Chander Sen, Nav-Vidhan

TOTALITY OF SYMPTOMS

Keywords: art, observation, accuracy, sound senses, tracing the picture of the disease.

What is subjective data?

This is the information we can gather using our fine senses (sight, smell, hearing, touch, and taste).

It is either a measurement or an observation. Temperature is a perfect example of objective data. The temperature of a person can be gathered using a thermometer. Other examples of objective data are

- heart rate,
- respiration,

- blood pressure,
- wound appearance, etc.

This is the information gathered from the patient telling the physician what the physician cannot measure with his five senses. If a patient says that she is constipated and has not had an urge for a bowel movement in three days, that is subjective and one cannot know that information any other way besides being told by the patient. Pain is subjective too because the patient is telling the physician what their pain is. This is very important in homeopathy as it is a unique alteration in the form of a symptom in an individual.

Aphorism 19

Since diseases are nothing but alterations of conditions in healthy people that express themselves through disease signs and since a cure is likewise only possible through an alteration of the patient's condition into the healthy state, then it is easily seen that medicines would in no way be able to cure if they did not possess the power to differently tune the human condition that resides in feelings and functions. Indeed, it is evident that the curative power of medicines must rely solely upon this: their power to alter the human condition.

Totality of Symptoms

This is when objective and subjective data complement one another. Such a compilation of data to trace the entire disease presentation and its curative solution too, in the form of a well-fitting remedy that represents the same disease picture perfectly. Prior to Hahnemann's time, two of the most frequently occurring and important groups of symptoms were practically ignored: the mental symptoms and the subjective symptoms. Under the new system of therapeutics devised by Hahnemann, the subjective symptoms naturally took their proper place in the study of the case.

How great advantage they offer to the prescriber can be appreciated

only when we are deprived of them, as in the case of infants, animals, and comatose patients.

Aphorism 83

“This individualizing examination of a disease case, for which I am giving only general instructions here demands nothing of the medical art practitioner except freedom from bias and healthy senses, attention while observing and fidelity in recording the image of the disease.”

When we collate objective data purely mechanically, we get only the medical information present. But when a homeopath uses an objective observation as an entry point, it leads to further reliable subjective symptoms, resulting in an accurate prescription as it is a systemic compilation of both objective and subjective data. Let us illustrate this point clearly with a relevant case. For instance, a homeopath makes an objective observation in a preverbal child that each time the child cries, he gets red in the face. Based on this objective data, as an entry point, further parental probing leads to the history of the child being severely constipated. This results in discomfort and redness of the face each time he strains with the urge, which is often ineffectual and requires mechanical removal. The child passes stools easier when propped up erect. Hence, a set of reliable subjective symptoms have been established and one can look at the exact rubrics and remedies that exist in these valuable symptoms. So one objective symptom leads to the following:

- Face discoloration, red, urging for stool during
- Constipation, removed mechanically, stool must
- Constipation, standing, passes stool, easier when

This inquiry and search narrows our selection to two remedies: alumina and causticum. On further history taking, the additional the information available is that due to lactation failure the child was started very early on formula milk and artificial baby foods.

This is all the confirmation required to select alumina over causticum.

Alumina (Phatak's Materia Medica): it is useful in delicate children, products of artificial babyfoods.

The above inference also implies that functional and sensational disturbances precede structural and organic pathology. This is prophylactic homeopathy at its best. If one can see alumina in a child, we can prevent the onset of deeper pathology revolving around the central nervous system such as Parkinson's, multiple sclerosis, or locomotor ataxia for which it is vastly indicated and used. Or when we prescribe sepia for a child, we need not wait to prescribe it later in a lady only once the facial chloasma for which it is known manifests. As when the chloasma appears, advances in uterine pathology has already set in.

Let us list below a chart comprising of more of such objective data along with their homeopathic subjective counterparts:

Objective Symptoms	Subjective Symptoms
<p>1. Temperature</p> <p>A temperature reading higher than the normal range indicates pyrexia and infection.</p>	<p>Temperature</p> <p>An abnormally rapid pulse that is discordant with s temperature reading is very characteristic of the homeopathic remedy Pyrogen.</p>
<p>2. A rapid heart rate suggests cardiac distress.</p>	<p>A state of anxiety along with irregular heartbeats, precipitated after eating is suggestive of the homeopathic remedy Cocculus indicus.</p>
<p>3. A high blood pressure suggests hypertension.</p>	<p>A high systolic pressure with a comparatively low diastolic tension is suggestive of the homoeopathic remedy Baryta muriaticum.</p>

4. Accelerated breathing suggests respiratory distress.	Respiratory distress along with coughing and yawning alternately is suggestive of the homeopathic remedy Antimonium tartaricum.
5. Bluish discoloration of wounds indicates toxemia.	Bluish discoloration of wounds along with muscular spasms at the sight of light or running water is suggestive of the homeopathic remedy Lyssinum.

Aphorism 84

“The physician sees, hears and notices through the remaining senses what is altered or unusual about the patient. He writes everything down with the very same expressions used by the patient and his relations. The physician keeps silent, allowing them to say all they have to say without interruption, unless they stray off to side issues.”

Such a posture reflects a true unprejudiced observer and prescriber. I clearly recollect a case of a child where several remedies could have been indicated, but I decided to just stay quiet and observe the phenomena unfolding before my eyes. And what was most peculiar was the insane high decibel of noise: both by shouting loudly as well as banging objects loudly in the clinic without the least perturb to the racket being created! This observation itself was the entry point to prescribe belladonna, and the other data gathered just confirmed the same.



Subjective and Objective Homeopathy

In Aphorism 84, Dr. Hahnemann states:

The patient details the history of his sufferings; those about him tell what they heard him complain of how he has behaved and what they have noticed in him; the physician sees, hears, and remarks by his other senses what there is of an altered or unusual character about him...Keeping silence himself, he allows them to say all they have to say and refrains from interrupting them unless they wander off to other matters.

This is an extract from Swami Chinmayanand's introduction to Bhagavad Gita:

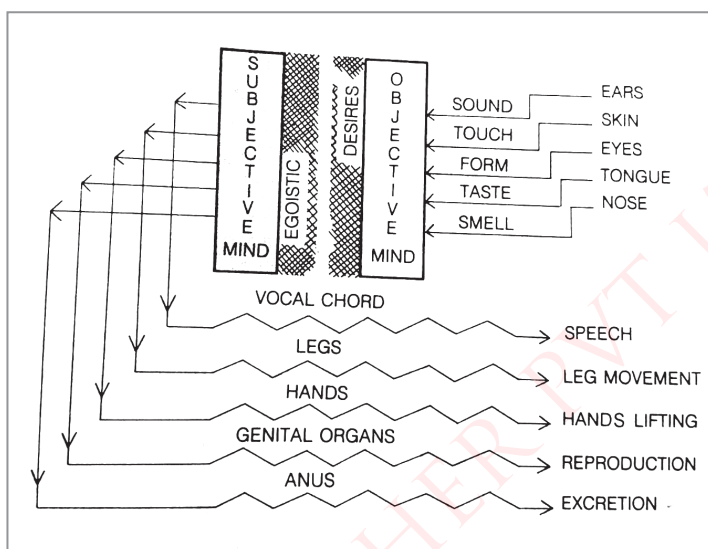
Mind is man. As the mind, so is the individual. If the mind is disturbed, the individual is disturbed. If the mind is good, the individual is good. This mind, for purposes of our study and understanding, may be considered as constituted of two distinct sides— one, facing the world of stimuli that reaches it from the objects of the world, and the other facing the “within” which reacts to the stimuli received. The outer mind facing the object is called the objective mind—in Sanskrit, we call it Manas—and the inner mind is called the subjective mind—in Sanskrit, the Buddhi.

That individual is whole and healthy in whom the objective and subjective aspects of mind work in unison with each other, and in moments of doubt, the OBJECTIVE MIND readily comes under the disciplining influence of the SUBJECTIVE MIND. But unfortunately, except for a rare few, the majority of us have minds that are split. This split between the SUBJECTIVE AND OBJECTIVE aspects of our mind is mainly created by the layer of egoistic desires in the individual. The greater the distance between these two phases of the mind, the greater the inner confusion in the individual, and the greater the egoism and low desires which the individual comes to exhibit in life.

Through the five “gateways of knowledge”, the organs of perception, all of us experience the world of objects around at all moments of our waking state. The innumerable stimuli that react with our sense organs (receptors), create impulses which reach the OBJECTIVE mind and these impulses filter deep down to the subjective stratum through the intervening layers of individual ego-centric desires. These impulses, thus reaching the SUBJECTIVE mind of a person, react with the existing impressions of his own past actions that are carefully stored away in the subjective layer and express themselves in the world outside through the five organs of action (effectors).

An unhealthy mind divided in itself, as we explained earlier, becomes an easy prey to a host of psychological diseases. Weakened in its constitution, it easily becomes a victim to all contagions.

Modern psychology exhausts volumes in describing to us the dreary results of suppression and repression of emotions. There are many moments in our lives when we knowingly suppress many of our emotions; but more often in our day-to-day life, we unconsciously/repress many of our sentiments. Repressed emotions accumulate a tremendous amount of dynamic energy which must necessarily seek a field for expression, and unless they are properly guided they would boomerang back to destroy the very individual.



Let me share with you how this journey began for me. I was invited to lecture in Germany in 2005. This was a turning point for me as I had been using the collective ideas of our Bombay group, inspired largely by Rajan in my practice but had not yet used it enough for patients from different cultures and countries. Due to this, a certain reservation of its practical use in such circumstances prevailed in my mind. The organizers, knowing that I work extensively with children, had lined up two children cases for me. Though it was a real challenge, they were great learning experiences for me and formed the basis of what was to follow in the form of subjective homeopathy. It also made it clear to me that the reliability of any method is its application with success among different cultures and environment. It was very reassuring for me to see that the method could withstand this acid test. As there was a genuine language barrier in spite of excellent translation, I realized that it was vital for me to observe and perceive the actions of the child rather than the history being offered by the parents.

CASE 1

The first case was of a four-year-old boy. He had bronchitis, eczema, and attention deficit disorder. While the mother was relating his history, I noticed that he was grimacing a lot. Also he was constantly protruding his tongue. There seemed to be a lot of attractive behavior, but on closer scrutiny, it was a need to perform and excel. For instance, he was fed up of the routine toys and drawing material that we offered him and preferred to do something more physical. This could be common in children with ADD (attention deficit disorder), but what he was doing was unique. Firstly, he was holding a mike like a show artist and imitating the sound of how the wind blows. Then he asked for the mike wire to be held up so that he could jump over it. Every time he could jump over a certain height, he wanted it raised higher. By now the picture of cuprum was clear in my mind by the following understanding and rubrics:

A need to perform (common theme of metals)

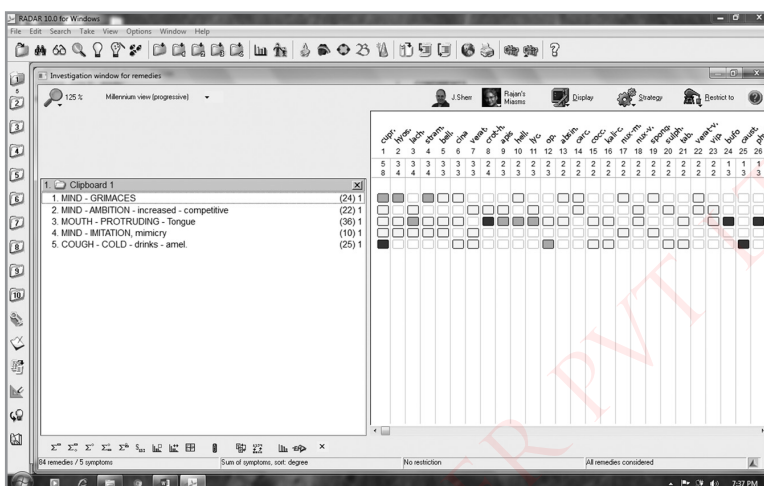
The constant protrusion of his tongue

[Complete Repertory] Mind; Imitation, mimicry [Complete Repertory] Mind; Grimaces

[Phatak's Repertory] Cough; Cold, drinks amel

The icing on the cake was the demonstration by his mother of a typical cough spasm where he would keep coughing till he was given cold water that relieved the spasm. Spasmodic cough is another good indication toward Cuprum met. Even though this was reassuring to me, the fact remained imprinted in my mind that it was the earlier observations that offered me an entry point into this case. Kindly refer to the rubric in the mouth section of the repertory, as protruded tongue, rapidly darting in and out like a snake's. You will find cuprum present in that rubric besides the Ophidia remedies that may come to the mind of the reader in this case.

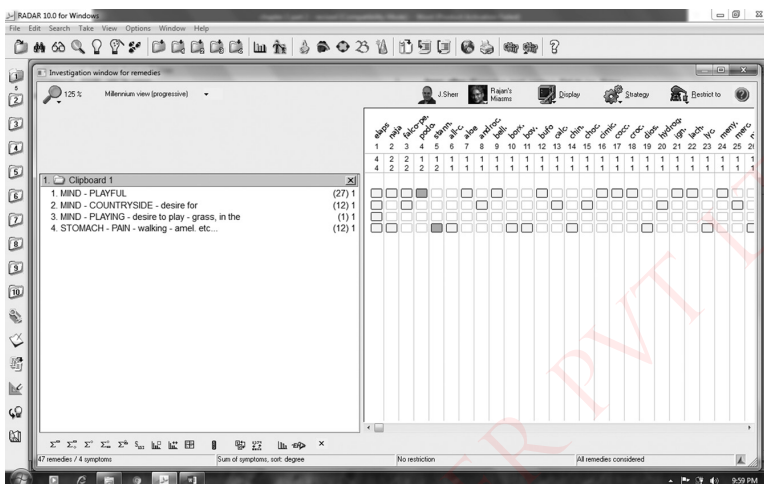
[Phatak's Repertory] Tongue: Protuded; Rapidly darting in and out like a snake: Cup; Lach; Lyc; Merc; Vip



The child did very well and was relieved within a few months with the remedy.

CASE 2

The second case was again a four-year-old boy with celiac disease. He was a very attractive-looking boy sitting on his father's lap all through the interview. The way in which the father would play and amuse the boy when he would feel uneasy with abdominal cramps is quite vivid in my mind to date. They shared a very special bond. When given a piece of paper to draw he drew a church on a hill and a snake. Drawings and their significance have been dealt with in a separate chapter as it plays a very important role in my children cases. While the interview was on, he started to draw our attention by moving his head from side to side. Also he loved the countryside and his abdominal cramps would get better by walking on the cold frosted garden in their backyard. I remembered a mention in Phatak's *Materia Medica* under "Elaps of oscillatory movements." This is precisely what the boy was doing in the form of moving his head from side to side like the oscillation of a wall clock. Also it was present in the following rubrics:



[Complete Repertory] Mind; Play, desire to

[Complete Repertory] Mind; Country desire for, to go into the
 [Complete Repertory] Stomach; Pain, general, walking amel, air in
 open [Complete Repertory] Mind; Play desire to; grass, in the: elaps
 (single remedy) The last two rubrics were merged. While the fact that
 it was the cold lawn that relieved his stomachache was also a factor
 in favor of the remedy as we are aware of the cold sensation typical
 of this remedy.

Once more it was primarily the observation that bailed me out in
 this case. The rest of the history was useful no doubt, and important
 too, but the early observation was spontaneous and definite. The
 other fascinating thing that I confirmed in both these cases was the
 significance of the state of either parent in a child's case. Both these
 cases were without any doubt stemming from their father's state. In
 the cuprum case, the father for some reason was absent during the
 interview; and when I inquired about his state and habits, the mother,
 a homoeopath herself, was convinced that he was a Staphysagria
 patient. But on further probing, she too was convinced that he needed
 the same remedy as well and was amazed by that fact. It is interesting
 that Staphysagria contains high traces of copper. This is mentioned

in Boericke's Pocket Manual of Homoeopathic Materia Medica: Cuprum metallicum - Relationship. This again is where a certain awareness and information about the substances in our Materia Medica proves to be useful.

Copper is found in Dulcamara, Staphysagria, and Conium, and in some other plants; also in king crab (Limulus).

The mother's state is as important especially during pregnancy. One need not be forceful while establishing a link between a child and his parent, but at the same time it is definitely worth exploring and once one gets tuned and comfortable with this idea,

the confirmations are too rewarding to ignore. This aspect will be highlighted in the children cases that will follow later in the book. Through this method, I was able to prescribe remedies that one had never imagined would need or feel confident using for children. It also worked in a prophylactic way as one could recognize states much before serious pathology set in.

This method also made me recognize states more accurately in adults through the same technique. This will be clarified in the cases to follow that are a fair mix of adult and children cases. So one needs to be clear at this point that this methodology is not restricted in its application to children cases alone. In fact, familiarity with the method is very useful when dealing with overcompensated adults. Once I returned to India, I decided to put my ideas to the test and refine them further. The results were very satisfactory. Based on this, I presented a paper at the National Congress in Ahmedabad, India. The paper was titled "Temperament - The importance of observations." It was very well received. Even though it was in a stage of inception then, I present to you extracts of this presentation in the form of cases as it was from this very paper that I moved on to become more certain about this method.

In my earlier years of practice, the parents of my pediatric patients would invariably be asked by me at some stage of the interview to keep the child waiting outside of the clinic. I was then in the false

assumption that a more focused and serious look at the child's case would be possible only if the child was not disturbing the session by his or her presence! Fortunately for me, I soon realized my folly and modified things drastically to suit my revised style of children case taking. The first thing I remember doing was making the chamber and the waiting area more child friendly. I must admit this was not too difficult a task for me as I was using the rooms of my father, a reputed pediatrician who possesses the most charming smile, and his wife, my mother, who ably assists him in his work. The two of them had already made the clinic a less intimidating place for children to look forward to want to come to. My wife, an artist, who soon after our marriage got hooked onto the fascinating world of homeopathy and would accompany me to the clinic part time, with her subtle touches, further added to the friendly ambience of the clinic. We made the room walls bright but yet soothing with the help of pastel colors and made rounded niches in walls designed by my architect brother. So it was a family contributed inspiration as you can see. As children find the task of going to any doctor either a scary or a boring experience, depending on their temperament, we decided to keep enough play bodies to keep them occupied as per their individual tastes. The idea was to encourage them to want to remain inside while the interview was proceeding. It served a dual purpose. The parents were more at ease that their child is within watching distance. At the same time, I was able to keep close scrutiny of their every action and response. One of the toys that were part of the lot that stayed in the children corner was an amazing wooden toy with blocks of various shapes that needed to be fitted into the respective compartment. The first case that I am mentioning has a big connection with this wonderful building block game.

CASE 3

Case of Septic Tonsils

This is a case of a four-year-old girl who was brought to see me by

her mother, who was also present throughout the entire interview. While the mother was narrating the child's history to me, the child got interested in the aforementioned toy. I noticed that she managed to fit in the blocks at a reasonably good speed for her age. But she kept at it. This intrigued me till it dawned on me that she was trying to better her speed of completing the game every other time. Once she felt she had reached her optimum, she turned the board around and started to make one beautiful design after another by assembling and reassembling the blocks. I found this very interesting, and once I was sure it was repetitive in the form of patterned behavior that was dying to tell me something, I decided to investigate as to what would be the appropriate rubric or rubrics to match what the girl had been doing. After some mechanical search (one did not have access to computers then), I came across these two rubrics that held my attention and left me satisfied:

[Complete Repertory] Mind; Quick to act: Coffea, Lachesis
[Complete Repertory] Mind; Activity, creative: Coffea, choc (only two remedies)

Building Blocks



Coffea appeared in both the above rubrics. But I was not very

confident then to prescribe this remedy for tonsillitis! At the same time, the aspects of the Ophidia group of remedies did not seem very obvious. I was in a bit of a dilemma. The mother, seeing me absorbed and giving so much emphasis on what her child was doing, made things a bit easier for me. She said that she was a textile designer and both she and her child could stay awake for hours till they could get on paper the design they felt satisfied with. I heaved a sigh of relief, and Coffea was back in the reckoning! She added further that when both of them were excited about something thrilling going to take place like a picnic or an outing, they could just not sleep due to the excitement. The sensation of the Rubiaceae family to which Coffea and China belong is an easily stimulated mind. But I did not have access to that understanding then. At the same time, the aspect of sleeplessness once an idea enters the mind is a well-known one of this remedy. It was relieving to find that the root of this remedy had been passed on to the child through her mother. The two of them were two sides of the same coin! I decided to explore further the pregnancy history of the mother while she was carrying this child. She told me, besides her sleep problem being an issue, the part that scared her most was during the labor pains. As much as she was prepared with antenatal classes and awareness through available literature on the subject, she remembered being sure that she would die due to the acute pains of the labor process. I was further fascinated to find the remedy in the following two rubrics: [Complete Repertory] Mind, Fear death of Parturition labor during

[Complete Repertory] Mind; Fear death of pain from

Even though Aconite was also present in the above rubrics, the theme of Coffea was confirmed in my mind along with the other aspects mentioned earlier. I felt more confident prescribing a single dose of Coffea IM to the child, and she responded quickly.

I learnt some important lessons with the aid of this case. Firstly, that repeated patterned behavior should be definitely given its due emphasis in any case. If the generals in a case indicate a remedy, do not be anxious in prescribing it even if the remedy is not known to cover