

# Importance of Analysis & Evaluation of Symptoms in Homoeopathy

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## Introduction

We have seen in our experience that fresher's and even good Homoeopaths encountered with great difficulty on this topic due to abundance of symptomatology in patient/s as well as in the pathogenesis making up the Materia Medica. Even in our present Homoeopathic Medical Education, the Teachers avoid this topic as student feels it boring. They feel themselves confused, reason being there are many different schools by which one can take symptoms, evaluate the same and comes to the similimum.

### Dr. Hahnemann in Organon of Medicine writes:

*"In this search for a homoeopathic specific remedy, that is to say, in this comparison of the collective symptoms of the natural disease with the list of symptoms of known medicines, in order to find among these an artificial morbid agent corresponding by similarity to the disease to be cured, the more striking, singular, uncommon and peculiar (characteristic) signs and symptoms of the case of disease are chiefly and most solely to be kept in view; for it is more particularly these that very similar ones in the list of symptoms of the selected medicine must correspond to, in order to constitute it the most suitable for effecting the cure. The more general and undefined symptoms: loss of appetite, headache, debility, restless sleep, discomfort, and so forth, demand but little attention when of that vague and indefinite character, if they cannot be more accurately described, as symptoms of such a general nature are observed in almost every disease and from almost every drug."*

So, for the selection of medicine these, *"striking, singular, uncommon and peculiar (characteristic) signs and symptoms of the case of disease are chiefly and most solely to be kept in view."* Many Homoeopathic Physicians have overlooked and not understood practical utility of these instructions and so have many failures in their day to day practice.

Hahnemann's *"striking, singular, extraordinary, and peculiar symptoms"* are basic miasmatic ones, always: hence the wonderful curative effects produced by remedies selected upon such symptoms; they are capable of reaching down deep enough to extinguish or what is in better term, to separate their miasmatic bond from the life force.

"The needs of the patient are seen in the signs and symptoms (Kent)", but a thorough knowledge of these signs and symptoms is only possible from the knowledge of the chronic miasms. (Dr.J.H. Allen)."

"Every disease has its beginning, which precedes the stage at which so called pathological changes are in evidence. Homoeopathy meets these conditions in their symptomatology with the remedy corresponding to it in its pathogenesis, and can thus prevent the disease going on to pathological manifestations, or cure the patient of both the symptomatology and pathology where cure is at all possible (Dr. E.B. Nash)."

If cure is to be established in chronic diseases we have to observe Hering's "Law of Direction of Symptoms: from within out, from above downwards, and in reverse order of their appearance." And, to achieve this we have to understand, perceive and follow the human sickness, in the order of importance of symptoms as follows according to Dr. Kent:

- From centre to circumference
- From head to feet
- From within out
- From highest to lowest
- From vital centers to the periphery.

## Defining a Symptom...

***"The word symptom means any change in the health of the body and of the mind which is felt by the patient himself; remarked by those around him and observed by the physician" (Aphorism 6, Organon)***

We include under the term "Symptom" every phenomenon presented by the patient which is a deviation from or an addition to, his condition when in average health. It includes symptoms objectively brought to our aid by every instrument of observation which the ingenuity of man has contrived. It should be noted that the word "symptom" in Homoeopathic literature includes signs. Hahnemann recognizes, *three* kinds of symptoms: **"Symptoms, signs and accidents"**

1. Symptom refers to disease; subjective symptom.
2. Sign refers to objective symptom.
3. Accident is a symptom which has nothing to do with a chronic miasm or acute miasm; it is something that comes from an external source. Burning the hand is an accident. It is not a symptom. Also, bee stings, prick of a needle, poison; all are accidents.

In the evolution of a picture of disease, symptoms precede signs. A fact of prime importance for us to remember at the outset of our inquiry is this: that as in nature there are no accidents, so there can be no symptom which is not directly the result of some immediate cause operating in the organism of the patient; no abnormal appearance or condition of any tissue or organ which does not proceed from a modification of its cell structure, its nutrition, or of the normal proportion of the tissues which compose it; no abnormal sensation experienced by the patient which is not the result of some change, either appreciable in some tissue of the body, or assumed to exist therein, or referred to the indefinite realm of dynamics, the convenient habitat of functional derangement for which we have not as yet discovered any structural substratum. (Dr. C Dunham)

"Symptoms and signs result from deranged dynamis even before or without pathological tissue changes."

"In many obscure, difficult and masked cases by drugging, homoeopathic or otherwise we may have to "go back through the life of the patient to childhood and note all symptoms which preceded the pathological change that now obscures the image of your case. "Symptoms that existed in childhood and since childhood and those present before any pathology existed are the corresponding symptoms of Causes; as all Causes are continuous into effects. They give us an image of the case from causes to pathological endings. These symptoms through childhood down to present are greatly important and describe the progress of sickness." No symptom, then, is to be passed over as unimportant.

Homoeopathy, indeed, distinguished more than eighty different types of symptoms. Subjective and objective, accidental, organic or functional, psychosomatic, mental or physical, physiopathognomonic or individual, occasional isolated or concomitant, latent, masked, submerged or suppressed, acute or chronic, general, fractional and partitioned, local or localized, particular and peculiar, characteristic, unusual, rare, essentials or common, vague, blurred or distinct, etiological or ultimate, principal or subsidiary, primal, original or secondary, old or new, superficial, spurious or deep seated, external or internal, morbid or pathogenetic, similar, dissimilar, contrary or opposed, artificial or natural, variable, contingent, alternating or fixed, eliminative, dubious, stable or progressive, exceptional or frequent, heterogeneous, weak, or strong and well-defined, mortifying, mutated or new, transient or persistent, clinical, generic, basic, determinative, strange and rare, absolute, pathognomonic, accessory, chief, consecutive, curative, direct, disturbing, drug or tautopathic, hereditary, imaginary, incomplete, induced, paradoxical, pathological, perceptive, periodical, persistent, present, reflex, recent, trifling, vital, withdrawal, chemical, mechanical, dynamic, specific etc.

All symptoms and conditions are not of equal importance in Homoeopathy. "The interpretation of a symptom depends upon the accuracy of the patient's expression and also upon the doctor's ability to correlate them and give each its due importance and not to put undue importance upon any one that does not deserve it."

A symptom becomes a complete one only when it is qualified by three essential elements or factors according to Boenninghausen i.e:

- Location
- Sensation
- Modalities
- Concomitant

## Defining a Symptom...

According to Kent the following six elements or factors are necessary to have a complete symptom whatever and whenever possible, i.e.

- Laterality or side
- Time
- Modification
- Extension
- Location
- Character or sensation

Once the entire case has been taken, then the next task is to grasp the totality of the patient's symptomatology. "The totality of symptoms means all the symptoms of the case which are capable of being logically combined into a harmonious and consistent whole having form, coherency and individuality. Technically, the totality is more than the mere numerical totality of symptoms; it includes the 'concomitants' or form in which symptoms are grouped." Dr. Close Stuart.

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## Analysis of Symptoms...

Classification of the symptoms into various groups is called analysis. The following classification of the symptoms is being followed according to Dr. Kent with slight alteration or variation.

### Nature Of Symptoms:

- Generals
- Particular
- Common
- Characteristic, Rare, Uncommon, Strange, Striking, Peculiar, Unique in General, Particular& Common.

Since the discovery of Homoeopathy world over Homoeopaths follow Hahnemann, Boenninghausen and lastly Kent in our approach to symptomatology.

Each of the groups though have different philosophy and approach on symptomatology, at least do agree on the "symptom complex" that express the totality of symptoms which leads to final application of the law of similars. All the symptoms of the case can be classified into two groups:

- Symptoms of the disease: Pathognomonic. These are the symptoms which help us to arrive at a diagnosis. Homoeopathically these symptoms have less therapeutic value.\*
- Symptoms of the patient: Non-Pathognomonic. These are the classical symptoms of the disease and more value for deciding the prescription. \*

*\* I have observed that one can get the best results if both the groups were evaluated together. Now a days with the advancement of Medical technology, there are many diseases which gives such symptoms which do not respond to homoeopathic prescription if evaluated only on Non-Pathonomonic basis.*

Symptoms of the disease help us to diagnose the disease. Symptoms of the patient help us to select proper Homoeopathic medicine or the similimum. **So prescription should be based on Diagnosis and individual patient's totality of symptoms.**

Symptoms classified by Dr. Hahnemann which are modified by Kent can be Mental General, Physical General, Particular and Common. At times a Common symptom may become Peculiar or Uncommon e.g. profuse micturition is in many disease and drugs but when profuse micturition relieves headache, it is Peculiar symptom of Gelsemium.

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## Analysis of Symptoms...

According to Dr. Boenninghausen, patient's symptoms are to be considered from the group aspect of Locality, Sensation, Modality and Concomitant. Dr. Boenninghausen considered the totality to be represented by the sum total of all the Characteristic features of the case that helped to distinguish one particular patient from another suffering from an apparently similar condition.

In Kent's method both symptoms and remedies are graded, while in Boenninghausen's method only remedies are graded and evaluated in his book, "Therapeutic Pocket book."

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## General Symptoms...

The general symptoms are those that affect the patient as a whole showing the picture of his disease and not the disease, in the mental and physical planes, about which he or she speaks in terms of "I" or in first person. Things that relate to the ego are always *Generals*. And because of this very fact, they are of a higher value than the particulars which affect a given organ. For example: I am thirsty, I am sleepy, I hate cold. I hate fat, I am burning all over, I feel hot etc

In Kent's *Generals*, he includes all things that are predicated of the patient himself. Things that modify all parts of the organisms are those that relate to the general state. The more they relate to internals that involve the whole man the more they become *Generals*, his desires and aversions are *Generals*. The things that are general are the first in importance.

The General symptoms as such are often not expressed by the patient or are not always to be recognized at first to be so; but on examining a group or series of particular organs we find a certain modality or feature which runs so strongly through them that it may express the patient himself. Here we have a General composed of a series of Particulars. This most often happens under character of pains, as cramping, burning, etc, or in conditions associated with pains as heaviness, numbness etc. Here a symptom may be raised from a particular or even a common to a common General.

All sensations or symptoms that the patient predicates of him self, or in the relating of which he uses the first personal pronoun, are general symptoms. To be a General, the symptoms must belong to the patient himself.

Please do not mix up, "General to particular i.e. the general rubric and particular rubric in the Repertory; as Dr. Kent writes; "by general groups and rubric it is not to be understood as the generals of the remedies.

The General Symptoms are divided into two:

- Mental Generals
- Physical Generals

### Mental Generals

The complete homoeopathy revolves around the mental symptoms with exceptions. Symptoms in the Mind section in Dr. Kent's Repertory *have always been the most difficult* to understand and learn. It requires hard work & time to master and interpret these symptoms in the patients and remedies, for their use for similimum prescriptions. Who does not understand the value of mental symptoms fails to understand Homoeopathic philosophy in right perspective and most of the time fails in his practice. All mental symptoms are to be classed as *Generals*, because they reflect the inner self or innermost part of man and the individuality of the patient. Mental symptoms are very peculiar, they really represent the patient and in Homoeopathy it is really the main thing to match or try to match. If you do not touch the emotional aspect of the patient, you do not get the SIMILIMUM.....Dr. Kent.

The recent trend to classify mental symptoms of the patient as if for the purpose of medical diagnosis is different and dangerous. For Homoeopathic prescribing we do not follow symptoms which classify mental diseases. Let us be warned when Dr. Kent writes; "Mental abnormalities may be classified by their common manifestation by the alienist, but the classification is never useful to the Homoeopaths while searching for a remedy. The classification is made up from common symptoms of the mental disease symptoms for the purpose of medical diagnosis, but *the peculiar symptoms in each and every morbid mental case must guide to the prescription*, and these prevent classification. The symptoms that represent the *morbid constitution or disorder of the*

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## General Symptoms...

*individual* are the ones that the skillful prescriber always seeks. The medicine that does not correspond to the symptoms of man mental symptoms shall not cure the symptoms of the physical being.

These symptoms are naturally the most difficult to elicit, for people, as a rule, shrink from revealing their innermost thoughts and motives, their hatred and yearnings, their evil tendencies, and their delusions, etc. It requires the greatest tact, a full knowledge of human nature to win the confidence of patient, and so understand his deepest thoughts.

Fresh graduates used to always first ask the mental symptoms, but very soon they feel they were mistaken. In fact, an unknown patient, knowing nothing about Homoeopathy, feels hurt or resents this type of interrogation about his character when he comes to see you for headache, a sty or an enlargement of his prostate. Very often too, he imagines that you are mistaking him for mental case, and that you are making a disguised psycho-analysis. We are all aware of the importance of more common mental states, and their influences, consciously or unconsciously in the choice of our remedies.

According to Dr. Kent, mental symptoms are classified and graded as under:

- **Will:** changes of the Will and Emotion come first e.g.; loves and hates, loathing, suicidal tendencies, lasciviousness, revulsion to sex, sexual perversions, fears, greed, various impulses, attitudes towards company, family, friends etc., jealousy, suspicion, obstinacy, depression, weeping, loquacity, hurry, impatience etc. These are of first importance in individualizing your case for repertory study. Will again has two components:
    - **External will,** which is voluntary & is always responsive to the external influences, tempting the person to do evil, to do acts of violence and injustice.
    - **Internal will,** the 'Conscience' which is pure, unchanging and restrains the person from doing evil. The internal will is the deepest and cannot be affected by medicines.
  - **Emotions:** The affections preeminently are deranged; the intellect sphere is only secondarily changed. Affections are emotional states.
  - **Intellect / understanding:** The man's intellectual nature keeps the man in contact with the world; but his affections are largely kept to himself. The affections can not be seen, but man's intellect is subject to inspection. He cannot conceal his intellect. Mental symptoms can occur or can be found in acute or chronic disease, and these can be characteristic or peculiar and common. "Irritability, sadness, fear are common to many diseases, many patients, and also many remedies." 'But aversion to company', 'loss of affection for wife or children', 'restlessness only while at work', 'weeps when relating symptoms', are typical examples of mental characteristics (peculiarities).
  - **Memory:** In sickness the patient's nature often becomes changed; the mental symptoms are manifest. They may be quarrelsome, angry, irritable, tearful, they may hate their loved ones, they may be tearful, intolerant of sympathy. These are often the most difficult of all symptoms to obtain as they are most often concealed from the world, from friends and their physician. Among symptoms of this group you will find ailments from anger, bad news, grief, love, joy, reproach, sexual excesses, contrariness, cursing, cowardice, hatred, irritability, jealousy, loquacity, quarrelsomeness, indifference, sadness, etc.
- Dr. Gallavardin studied throughout his life **only mental symptoms** and cured many patients only by the mental symptoms. It was his hobby to study mental symptoms and pick out the remedy only on the mental symptoms. No other symptoms only mental symptoms. Now a days Dr. Sehgal's school is advocating the same thing with new facelift which Dr. Gallavardin did long ago.
- **Dreams:** All sleep symptoms are important they are closely related to the mind. Dreams reflect the unconscious drives and aspirations. They provide a clue to the mental state. For in sleep man is off his guard, and his subconscious self can assert itself, and under, such circumstances the veil is often lifted a little, so that we are able to apprehend in some degree the deep and hidden mysteries of that disordered life we call disease. Of course, such dreams must be regular and persistent to make them of value and great care must be taken to eliminate the effect of all external influence. Dreams are so closely allied to the mental state that he may well say, "I dreamed last night; that is a general state."

## General Symptoms...

Dreams are "a highly charged emotional material". Hence dreams should follow in classification of symptoms after **emotions**, to know emotional background, if we interpret properly. To utilize dreams in analysis and evaluation we have to study the life situation of the patient. Dreams of everyday affairs have very little or no value as such dreams are common from childhood to old age. There are clear and distinct dreams. "We know from our own experience that the mood in which one wakes up from a dream may last for the whole day; doctors have observed cases in which a mental disease has started with a dream and with a delusion originating in the dream has persisted; historical figures are reported to have embarked on momentous enterprises in response to dreams". Again, "Dreaming is evidently mental life during sleep, something which has certain resemblance to waking mental life but which, on the other hand, is distinguished from it by large differences." "Children dreams are not senseless. They are intelligible, completely valid mental acts. The dream is the reaction of the child's mental life in his sleep to the experience of the previous day, which has left behind it regret, a longing, a wish that has not been dealt with."- Dr. Sigmund Freud.

It is being noticed that dreamer's own eye appears in every dream and hence dreams are much more 'a mental unconscious life' of the patient. In drug proving dreams were produced in provers and any attempt to interpret according to Psychiatry will change the meaning and motive of dreams and no useful purpose will be served as symptoms in completing the picture of the patient and for repertory analysis.

### Physical Generals

These are symptoms which are referring to the body as a whole with regard to various physical conditions or circumstances, indicating that the patient generally or as a whole is Aggravated or Ameliorated under certain conditions e.g., time, temperature and weather, rest, position, menses, discharges, sleep, emotions, sides, general pathological changes etc.

Dr. Bidwell has slightly different opinion regarding Physical General than others including Kent, Tyler, Wright, etc. He sub - divided into three groups:

- The highest rank should be given to perversions of the sexual sphere, including menstrual generals symptoms found under this group would be those with aggravations before, during and after menses; effect of coition, urination, etc.; character of discharges.
- Symptoms pertaining to appetite, food desires and aversions and thirst. (Eating and drinking as they affect the stomach are particular, but as they affect the body as a whole are general.
- Things affecting the entire physical body, weather and climatic influences, foods that aggravate, extremes of temperature, positions, motions, etc., as they affect the body as a whole are all generals as found in this group.

Many physicians including Dr. Kent, Dr. Bidwell, Dr. M. Tyler and Dr. Weir have disagreed with Dr. Boenninghausen's views which he incorporated and advocated in the Therapeutic Pocket Book. Their argument is that "the modalities of the part and of the generals are mixed together, to work your case to one remedy. It is over done. However if we can understand properly symptoms with limitations we can make up Physical General from series of particulars, the same characteristic symptom appearing in different parts of the body and in various ailments is classed as a general.

According to Dr. Kent, "Any rubric that modified so many particulars that the very patient himself seems to be modified must be classed as General. Things that apply to all the organs may be predicated of the person himself. Things that modify all parts of the organism are those that relate to the general state". Further he stated "after you have gathered the particulars of every region of the body and you see there are certain symptoms running through the particulars, those symptoms that run through the particulars have become generals, as well as particulars.



## Particular or Local Symptoms...

Particular symptoms are those which are related or referred to various parts or organs or function of the body *apart from the whole man*. These are the symptoms that seem to disturb the patient most and for which generally he consults, yet they do not have much importance in the selection of the remedy.

The more the symptoms relate to the anatomy of the parts, the more external they are; the more they relate to the tissues, the more likely they are to be particular. Many of the symptoms of regions are both common and particulars, particular because they are of regions and common because they describe a state. These are of lower value in Repertory analysis than the Generals. Strong Generals often contradict or ignore them because particulars deal with the disease and not the patient as a whole. The symptoms that are predicated of a given organ are things in particular. The symptoms that can-not be explained are often very peculiar.

But the particular or local symptoms, assume importance in a case where Generals are not well marked or when they point to more than one remedy or when there is acute local disturbance. They are of considerable importance when qualified by location, sensation, modalities and concomitant if there is e.g.; Stomach pain, Burning, > by heat, warm food or drink, eructation or flatus, or < by cold, meat, etc.

In the Repertory, these are classified under particular symptoms but, the desire and aversion of patient as regards food and drink and symptoms of sleep and the dreams and in women symptoms of the menstrual states are considered very important and equivalent to Generals or Mental symptoms in rank. These symptoms are classified in Physical Generals as it affects the person as a whole. It must always be remembered that before a particular symptom can be considered as General it will have to be experienced in more than three or more similar particulars to make a General.

Dr. Kent writes as follows for their utility in considering Repertory analysis:

"In ninety nine cases out of a hundred you can leave out the particulars, for the particulars are usually contained within the generals". One strong general can over rule all the particulars you gather up, I do not think it is possible for all Homoeopathic Physicians as most of the patients come with particulars and less of generals. Hard working and masterly Homoeopathic Physicians with no time can probably achieve right remedy without particulars. But, sometimes you may miss the correct remedy.

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## Common Symptoms...

Common symptoms are those which are common to any patient suffering from a certain disease or complaint. They are of the least importance because they will be found in almost every drug or disease in one form or the other. These symptoms are valueless from the point of view of homoeopathic prescribing unless qualified by modalities.

Under common symptoms we find, "All those which are common to both the drug and disease. That which is pathognomonic is always common. For in-stance, if we had a pleurisy it would be a common thing to want to keep the chest wall quiet and you would get the symptom worse from motion, one of the key notes of Bryonia; but if there were no other symptoms of Bryonia present we could not make a prescription on that rubric alone. Again, if we had an abscess it would be a common thing for it to be sensitive, and if pus was forming we could have throbbing pains and redness, but Belladonna could not be given on these common symptoms if there were no other Belladonna symptoms present. You can readily see how the common symptoms have no place in our Repertory work. You need not bother with the common symptoms, for when you have worked your case out from the Generals and Particulars turn to your Materia Medica and you will find the remedy will contain most of the common symptoms. e.g: Vomiting in a gastroenteritis case, Blood and mucus in the stool in a case of dysentery, Rash in measles, Thirst in a case of fever etc.

Common symptoms may become rare, uncommon, peculiar, strange where their circumstances are peculiar as; trembling during stool, before a storm, during menses, Constipation or diarrhea before menses, Chilliness, stool before or during; menses before or during etc.

A common symptom may assume the importance of a characteristic by virtue of its intensity, unexpected association with other symptoms or on account of a peculiar grouping) One can utilize common symptoms to confirm the remedy, if generals and particulars have that remedy.

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## Strange , Rare or Peculiar or Characteristic Symptoms...

Dr. Hahnemann in Organon, vide aphorism 153 writes; "In this search for a homoeopathic specific remedy, that is to say, in this comparison of the collective symptoms of the natural disease with the list of symptoms of known medicines, in order to find among these an artificial morbid agent corresponding by similarity to the disease to be cured, the more **striking, singular, uncommon** and **peculiar** (characteristic) signs and symptoms of the case of dis-ease are chiefly and most solely to be kept in view; for it is more particularly these that very similar ones in the list of symptoms of the selected medicine must correspond to, in order to constitute it the most suitable for effecting the cure. The more general and undefined symptoms: loss of appetite, headache, debility, restless sleep, discomfort, and so forth, demand but little atten-tion when of that vague and indefinite character, if they cannot be more accurately described, as symptoms of such a general nature are observed in almost every disease and from almost every drug.

Further, Dr. Hahnemann in Organon vide aphorism 154 writes; "If the antitype constructed from the list of symptoms of the most suitable medicine contain those peculiar, uncommon, singular and distinguishing (characteristic) symptoms, which are to be met with in the disease to be cured in the greatest number and in the greatest similarity, this medicine is the most appropriate homoeopathic spe-cific remedy for this morbid state; the disease, if it be not one of very long standing, will generally be removed and extinguished by the first dose of it, without any considerable disturbance.

Strange Rare or Peculiar symptoms are those about which no explanation is possible and which are peculiar to a few remedies and to a few patients suffering from similar diseases. Their presence cannot usually be explained on the basis of the diagnosis and the pathological changes that have occurred.

They reveal the "**Individuality**" of the patient and the drug and are therefore important provided the Kent's Generals agree with them. You can not individu-alize unless you have that which characterize. Dr. Hahnemann advises that we should be particularly and almost exclusively attentive to those symptoms that are pecu-liar or char-acteristic of the patient and not those, that are common to the disease.

It is the peculiar way that the same disease affects different patients that makes the symptoms strange, peculiar and rare. Is it possible that " A group of common diagnostic features of a disease represents to us the response induced by the factors that have directly brought on the illness. A group of differentiating features however develops on the basis of inherent constitutional differences. **The source of the disease can be the same, the nature of complaints can be the same, but if the modalities of two persons are different, the remedy shall be different.**

Again, "Discharges are common to inflamed mucous membranes of ear, nose, throat, trachea, vagina, etc., and as such each is only a particular but the part or the inflammation' does not cause it to be green, bloody or viscid. Therefore this must be due to some change in the whole system which makes it general and increases the value of the symptom from common to peculiar, and therefore changes the view of the case.

Dr. Kent puts it, "strange, rare and peculiar, there-fore among the highest Generals; because strange, rare and peculiar must apply to the patient himself." Again, Kent says though it goes against Hahnemann's views, "get the strong, strange peculiar symptoms and then see to it that there are no Generals in the case that oppose or contradict ." Because he sounds a note of warning, "if the keynotes are taken as final and the Generals also do not confirm, then will come the failure ." However these symptoms may form the characteristic features, and may occur among Mental, Physical Generals or Particulars on which their ranking depends.

The strangeness or peculiarity of the symptom may be exhibited in several ways. The strangeness may be in:

- Location.
- Sensation
- Modality
- Concomitant,
- Causation,
- Extension.
- Mode of onset.
- Circumstances or Absence of expected symptom in a case.



## Strange , Rare or Peculiar or Characteristic Symptoms...

### Examples:

- Location:
  - Symmetrically bilateral eruptions (Arnica).
  - Crack behind the ear (Graphites).
  - Crack in the middle of the lip (Natrum Mur).
- Sensation:
  - Sensation as if he had no head (Asarum)
  - Teeth feel long (Antim Crude).
- Modalities:
  - Pain < by slight pressure but> hard pressure (Lachesis).
  - Burning pain > by hot application (Arsenic alb).
  - Coryza > by cold bath (Cal. Sulph).
  - Headache > by eating (Anacardium, Psorinum).
- Concomitant:
  - Polyuria with headache (Gelsemium).
  - Cough ends in sneezing (Belladonna).
- Causation:
  - Convulsions from anger (Chamomilla).
  - Dyspnoea from slightest fit of anger (Ranunculus Bulb).
- Extension:
  - Pain spreading diagonally (Agaricus mus).
  - Diseases begin on the left and go to the right (Lachesis).
- Mode of onset:
  - Pain appearing suddenly and disappearing gradually (Pulsatilla).
  - Pain appears suddenly and disappears suddenly (Belladonna).
- Circumstances:
  - Sleeplessness although sleepy (Pulsatilla).
  - Thirstlessness although mouth is dry (Nux.Mos).
- Absence of expected symptoms in a case:
  - Vomiting without nausea (Apocyanum).
  - Painlessness of ulcers (Opium).
  - Fever without thirst (Pulsatilla).

In analyzing the case, very valuable symptoms, besides mental, are those pertaining to the aggravations and ameliorations, because the aggravations and ameliorations are the natural modifiers of diseased states and are the definite reaction of the man himself. We must take into consideration that every symptom of note has these modifying conditions of aggravation and amelioration, as to time, the time of day, the time of season, the time of the moon, the aggravation or amelioration from thermic conditions, from motion or rest of the part affected or of the conditions as a whole; from lying down or sitting or standing, and the positions taken during such conditions,

## Strange , Rare or Peculiar or Characteristic Symptoms...

waking or sleeping, and the aggravation and amelioration from such position in motion that aggravate or ameliorate, the desires or aversions, to eating and drinking, especially in feverish conditions, aggravations from certain foods and drinks. These are all modifications that are of the utmost importance in evaluating the symptoms. The symptom often becomes peculiar or characteristic through modalities.

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## Other Symptoms...

**Subjective Symptoms:** are those which the patient feels and speaks about and communicated to the physician. The physician may not know these symptoms unless told about them. These are of the patient's own consciousness. Among them are all the varieties of pains and abnormal sensations which accompany the disease condition. Subjective symptoms can be of mind or of the body. Everybody knows that pains and various sensations are different from those of health; make up a large and important part in every case of illness. Every physician and intelligent person knows by observation and experience, that pains and abnormal sensations almost always precede any material or organic evidence of disease. The first evidence of nearly all diseases consists of subjective symptoms from where a physician takes a lead for his diagnosis and correlate with these symptoms in the determination of the treatment.

**Objective Symptoms:** symptoms are morbid signs and phenomena perceived and observed by the physician and those around the patient or objective symptoms are those symptoms which the physician observes or sees and those around the patient, sees or observe and therefore, consist of physiological findings, laboratory findings and his observations. The physician derives a knowledge of these symptoms by the use of his own senses i.e., by sight, touch, hearing, smell, taste; percussion and by clinical examinations. These symptoms can be seen by the patient himself or others who attend on him. These symptoms are more common in various patients suffering from the same disease and they are grosser manifestations of more advanced stages of a disease. These symptoms characterize the disease more than they characterize the individual patient, but they are of great value in authentically ascertaining the nature of the disease and its changes in the course of treatment.

Objective symptoms are valuable in cases where subjective symptoms cannot be obtained or relied upon such as in the unconscious, insane or imbecile patients and in children.

The objective symptoms are valuable indications for the remedy, just in proportion as they have been observed in proving drugs, so as to afford a ground of comparison; and just in proportion. These symptoms can be considered at times in Physical General, otherwise they are common.

**Concomitant Symptoms:** symptoms are those which are accompanying the main complaint. They are also called Auxiliary symptoms, or associated symptoms. They do not have any physiological or pathological relation to the main symptoms but they have definite relationship to the case. These symptoms cannot be explained according to theories of pathology and hence they are sometimes more striking and peculiar symptoms. These symptoms many a time help to individualize the patient and the remedy. Dr. Boenninghausen was the first to notice these symptoms.

**Examples:** Cough (main symptom) accompanied by:

- Bleeding from the eyes or blood shot eyes
- Pain in the head or at distant parts
- Involuntary passing of stool or urine

Dr. Kent in his Repertory has left out the majority of concomitants and has only retained those few that abundant clinical experience has demonstrated to be frequently associated. The mental concomitants are of immense value in physical ailments while the physical concomitants assume great importance in mental ailments.

**Keynote Symptoms:** are among the peculiar that we find the so-called keynotes that are used by so many prescribers who take three or many are content with but one characteristic outstanding symptoms, ignoring all others and overlooking the fact that there must be a general relation between the symptoms of the patient and those of the remedy. Keynote method of prescribing is highly attractive to many minds, because it looks so easy and does away with all tedious comparison of drugs and also from the fact that many brilliant cures were made by

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## Other Symptoms...

means of the keynote in the hands of Dr. Lippe, Allen and many other advocates of this method. Keynotes point out to a small group of remedies. A group of at least three keynotes is essential before one can pick up satisfactorily the similar remedy. This is what Dr. Allen has said "*Three Legged Stool*". The great trouble with the keynotes is that they are so often misused. Keynotes are often valuable characteristic symptoms, but if these keynotes are taken as final and the Generals do not confirm, then failures will definitely come.

**Basic or Absolute Symptoms or Pathognomonic Symptoms:** symptoms are those that appear in every proving and diseases and are of general nature which is usually important for diagnosis. They are of little value to determine the specific homoeopathic drug indicated but taken together furnishing a suggestive beginning. Basic symptoms are the common diagnostic and pathologic. Such symptoms are malaise, headache, weakness, fever, pain, anorexia etc. These symptoms can be considered as common symptoms. Pathognomonic symptoms have no value in repertorization unless they have modalities.

**Determinative or Non-Pathognomonic Symptoms:** are strange, rare or peculiar symptoms of the patient or of the drug. They form the basis for Repertory and Materia Medica study. They are individual or personal ones if found in a patient or characteristic or keynote, if found in a drug's Pathogenesis. By determinative symptoms we distinguish drugs as well as diseased individuals. *They consist of:*

- Mental symptoms.
- Modalities.
- Rare, strange and peculiar symptoms.
- Qualified basic symptoms.

These symptoms are General and Qualified particulars.

**Pathological Symptoms & Pathological Generals:** symptoms are those symptoms that pertain to the ultimate or results of diseases. They are basic symptoms. e.g. Tumor, Warts, Anemia, Hypertension etc. At times these are included in Physical General otherwise they are common, or particulars. These can be referred in Dr. Boenninghausen's characteristic and Repertory by Dr. Boger, CM under constitutions and also in General Analysis. Pathological General when interpreted in the light of the underlying constitutional state, predicative of a generalized disturbance in human economy. In Radar 9 Software these are included in general laboratory findings.

***Can we ignore pathology or Pathological symptom/s? NO,*** In my personal experience it is necessary to make Diagnosis before incorporating patients individual symptoms for selecting the remedy. I have seen many famous homoeopaths failing to select a remedy only on the basis of individual symptoms as they have a bias/ close mindset against clinical investigations. They blindly follow the interpretation of Organon of Medicine aphorisms for understanding the patient's symptoms. They always forget that at the time of Dr. Hahnemann's thesis, there was no advanced technology available to understand pathology. But one should appreciate that Dr. Hahnemann on those days by virtue of observing the individual symptoms of a patient formulated a method of complete treatment.

**Clinical Symptoms:** these are symptoms which a physician, standing at the bedside of the patient, perceives directly with suitable instruments or which are communicated to him by the patient or his attendants. In homoeopathy, we observe that clinical symptoms has not been observed in the proving of a remedy, but which, as distinct symptoms of a case of a disease, disappears on the employment of that remedy for other purpose, is said to be its clinical symptom. A clinical symptom is one which is not caused or produced in proving but cured again and again in patients. Our Materia Medica includes many clinical symptoms. It is to be assumed that had the proving been extensive enough, such a symptom would have been produced. These are third grade symptoms and it can be included in Mental or Physical General or Particulars.

**Alternating Symptoms:** At times the clinical record indicates two groups of symptoms which keep alternating with each other. This indicates alternating group of remedies, the classical example being that of Rhus tox and Bryonia in the treatment of Typhoid. However, when a similar situation occurs in a chronic case when apparently unrelated complaints alternate, perhaps in different seasons, or the one appears when the other is ameliorated, a special note of this alternation has to be made and an appropriate reference made to the Repertory. According to Kent, a successful prescription is impossible unless this feature is taken into consideration. Prescribing two sets of remedies for alternation is not the right way to treat the case. These symptoms are classed as strange, rare, uncommon,

## Other Symptoms...

peculiar & striking.

Dr. Farrington has put these as Physical Generals. "Alternations of definite ailments belong to the general class, e.g:

- headache in winter, diarrhea in Summer (Aloe)
- weeping alternating with laughter (Ignatia)
- alternation of constipation and diarrhea, (Sulphur, Aluminum, Nux. Vomica)

**Eliminating Symptoms:** are those symptoms which throw off all the medicines that are not needed for the patient and bring home only those medicines which are required for the patient.

Eliminating symptom, to compare with all the subsequent rubrics you consult; from which you can often discard the drugs that do not appear in this first essential list. With this guide, this strong eliminating symptom, straight from "the heart of the patient's heart," as it were you can go through the rubrics of the patient's symptoms in their order. i.e, mentals, first, then generals, then particulars with modalities, taking from each list only the remedies that appear in this first rubric (insane, jealousy, or whatever it be), but taking all these jealous, remedies from every subsequent list. In this way you can work rapidly down, till you are satisfied that you have found the remedy that fits the patient as a whole.

But this means much! To eliminate with safety, you must take symptoms seriously, not lightly. You must be absolutely sure that your symptoms are real and marked; that they do actually express the patient. You will have to ask many questions in order to elicit a few telling symptoms; and you must be quite sure that you and your patient, mean the same thing. There are many pitfalls.

Dr. Margaret Tyler, Weir, Templeton and others in England, advocates the use of certain large general rubrics, such as lack of vital heat (chilly), as eliminative symptoms, which some Kentians consider it dangerous.

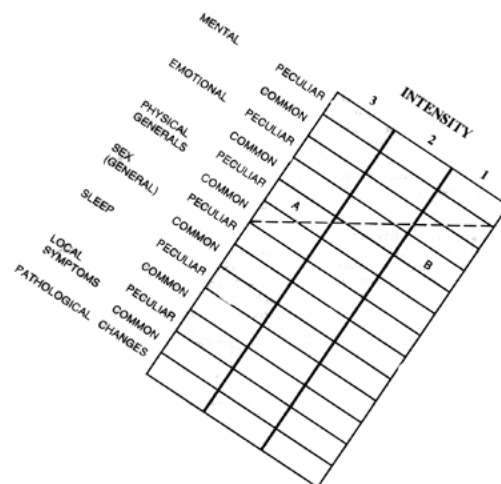
## Evaluation of Symptoms...

Having taken the case in accordance with the directions of Hahnemann, we are prepared to analyze it for repertory study, and just here a knowledge of the philosophy is of value, to indicate *the relative value of Symptoms*, for selecting the proper rubrics with which to start the study. In applying the law of similars we have to know the relative values of symptoms. *Evaluation of symptoms implies the principle of grading or ranking of different kinds of symptoms in order of priority, which are to be matched with the drug symptoms.* in order to cover the characteristic totality in a natural disease condition with that of the drug disease.

The evaluation of symptoms is, perhaps, the most important part of the Homoeopathic technique and to the beginner, one of the most difficult owing to the terminology of modern medicine and the exposes that patients have received from the allopathic doctors, the emphasis which the patient himself places upon symptoms is often entirely misleading. The Homoeopathic physician must correlate the diagnosis and common symptoms together. As stated earlier the common symptoms are valueless from the point of Homoeopathic prescribing unless modified by modalities.

Dr. George Vithoulkas gives interesting illustration of gradation and degree of intensity of symptom as under:

The symptoms of most importance are found at the apex of the diagram, and those of least significance are found at the bottom. A mental symptom of great intensity, which is also very peculiar, is given the most weight in the evaluation of symptoms; for example, such a symptom might be Irritability only when alone, or Irritability only while reading or Anxiety which is Ameliorated by Cold Drinks. (See Figure)



## Evaluation of Symptoms...

**Three main factors are involved in grading symptoms:** the location in the hierarchy of the organism, the degree of peculiarity, and the intensity of the symptoms. Thus symptom **A** can be more important than symptom **B** because it is peculiar and highly intense, even though physical symptoms are usually considered less important than emotional ones. Some of the common emotions like anger, sadness, indifference, etc. are of little value in remedy selection as they indicate a large number of remedies. But, if such an emotion is experienced in an intense manner or if additional information about its occurrence or about any peculiarities associated with its expression is available, then its value in remedy selection is considerably enhanced.

The intensity of the symptoms will be determined by the patient's sensitivity in general.....the intensity of symptoms assumes in homoeopathic practice an added importance in view of the matching of symptoms in the patient with those of the remedy in the homoeopathic Materia Medica. It will be apparent that matching will necessarily include the consideration of the intensity so that the picture that is composed is not flat..

**Dr. Weir has suggested "take the minimum symptoms of maximum importance".**

Dr. Kent uses three classes; General, Particular and Common and in his Repertory he divides each into three grades.

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## Grading of Drug Symptoms...

There are many degrees of comparative value but for practical purposes the value of symptoms is divided into three grades i.e. first, second and third. In Kent's Repertory one finds, **Bold** or **Capitals** for the first or highest grade, *italics* for the second and plain or Roman type for the third.

- **First Grade Symptom:** A symptom recorded in the majority of proving or brought out in every prover confirmed by several reprovings and verified upon the sick, is related to the First Grade. It is printed in Kent's Repertory in **BOLD** or (**Black** or **Capital**) Type.
- **Second Grade Symptom:** A symptom brought out by a few of the provers, it does not run through the whole family of provers but it has been confirmed and occasionally verified by reproving and upon the sick is classified under *second grade*. It is printed in Kent's Repertory in *italics*.
- **Third Grade Symptom:** A symptom brought out by a few of the provers, not confirmed by reproving or verified by curing a patient but standing out very prominently, is being classified as third grade symptom, "or it has been verified by having cured sick folks or on the other hand it is admitted as a clinical symptom. It is printed in Kent's Repertory in ordinary or plain or Roman type.

Certain symptoms are not in the proving but yielding to a particular remedy and confirmed again and again by others in clinical experience and admitted as clinical symptoms, are included or classified into the third grade symptoms.

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## References...

- The Art of Case taking & Practical Repertorization in Homoeopathy By. Dr. RP Patel.
  - Organon Of Medicine & Lesser Writing By Dr. S Hahnemann
  - Homoeopathic Philosophy & Lesser writing by Dr. Kent.
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