

A close-up photograph of a hand holding a black pen, writing on a medical form. The form is partially filled out and has various sections and checkboxes. In the background, a blue stethoscope is visible, resting on the form. The overall scene suggests a medical professional taking a patient's history or recording a case.

HOMOEOPATHIC

CASE TAKING STRATEGIES

Which Symptom Is Most Important?

- A 64 year old lady presents 1 month after her mother died.
- She has blond hair, blue eyes, is very weepy at presentation, and asks for the window to be opened to let some air in.
- She has a 3 week history of back pain, which is burning, > heat, < rest, and better once she gets it moving.
- She has angina, with left sided chest pain on minimal exertion.
- She craves pickles, is irritable with her family and describes a feeling as if her uterus might fall out.

Case taking serves the most essential part in the study of repertory

If case taking is imperfect



Data collection will be wrong



Wrong data → wrong result i.e. remedy



So we must be well conversant with the different aphorisms of Organon of medicine

\$ 71

- How is the physician to ascertain what is necessary to be known in order to cure the disease?

— CASE TAKING

- How is he to gain a knowledge of the instruments adapted for the cure of the natural disease, the pathogenetic powers of the medicines?
- What is the most suitable method of employing these artificial morbid agents (medicines) for the cure of natural disease?

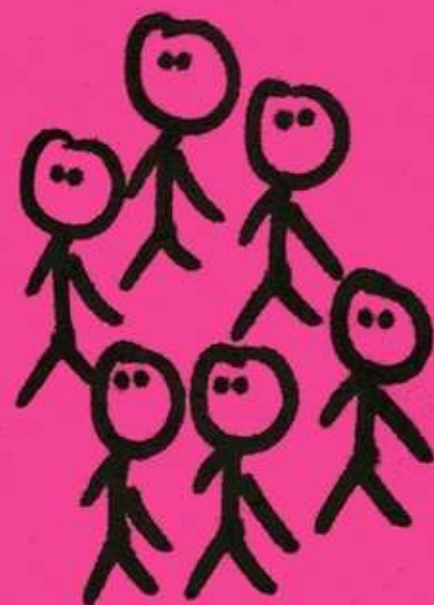
UTILITY

1. Trace out the image of the sickness of the individual person

— INDIVIDUALIZATION

- KNOWING INDIVIDUAL PERSONALITY (UNCOMMON PECULIAR S/M)
= THERAPEUTIC DIAGNOSIS
- TO GET NOSOLOGICAL DIAGNOSIS (COMMON S/M)

Observe

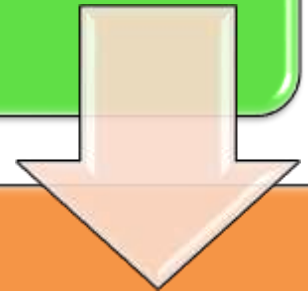


individualization.

Individualization



Tracing out image of patient



Therapeutic diagnosis

2. DIAGNOSIS

- Prognosis
- Management – Diet, life style, auxillary
- Curability of case
- Line of treatment – medicinal / surgical
- Classify s/m – common or uncommon
- Seat and Stage of disease
- Potency selection
- Evaluate new s/m
- Effect of treatment
- Natural or Artificial disease
- **REPERTORISATION**



- Case taking is a unique art of getting into conversation, observation and collecting information from patient as well as from bystanders to define the patient as a person and the disease.

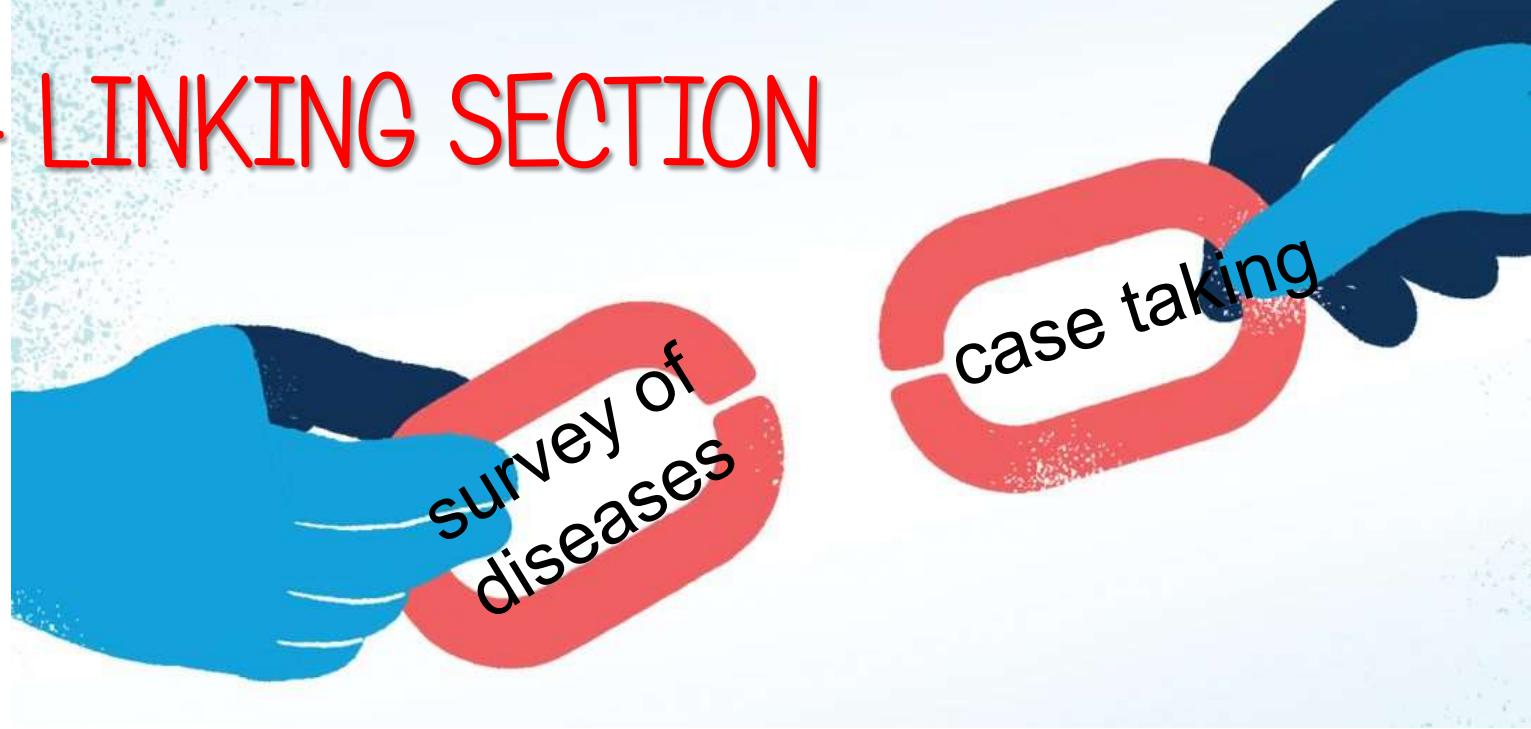
- Primary object of case taking

- collection of data, for a prescription on the basis of Homoeopathic philosophy.

\$5 – concise form of CT

- Useful to the physician in assisting him to cure are the particulars of the most probable **exciting cause of the acute disease**, as also the most significant points in the **whole history of the chronic disease**, to enable him to discover its **fundamental cause**, which is generally due to a **chronic miasm**. In these investigations, the ascertainable **physical constitution of the patient** (especially when the disease is chronic), his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, etc., are to be taken into consideration.

\$ 82 – LINKING SECTION



- Directions in the coming \$ pertain especially to c/c diseases & only partially to a/c diseases because in a/c diseases, symptoms are of striking nature

CASE TAKING

- GENERAL DIRECTIONS

—83 - 104



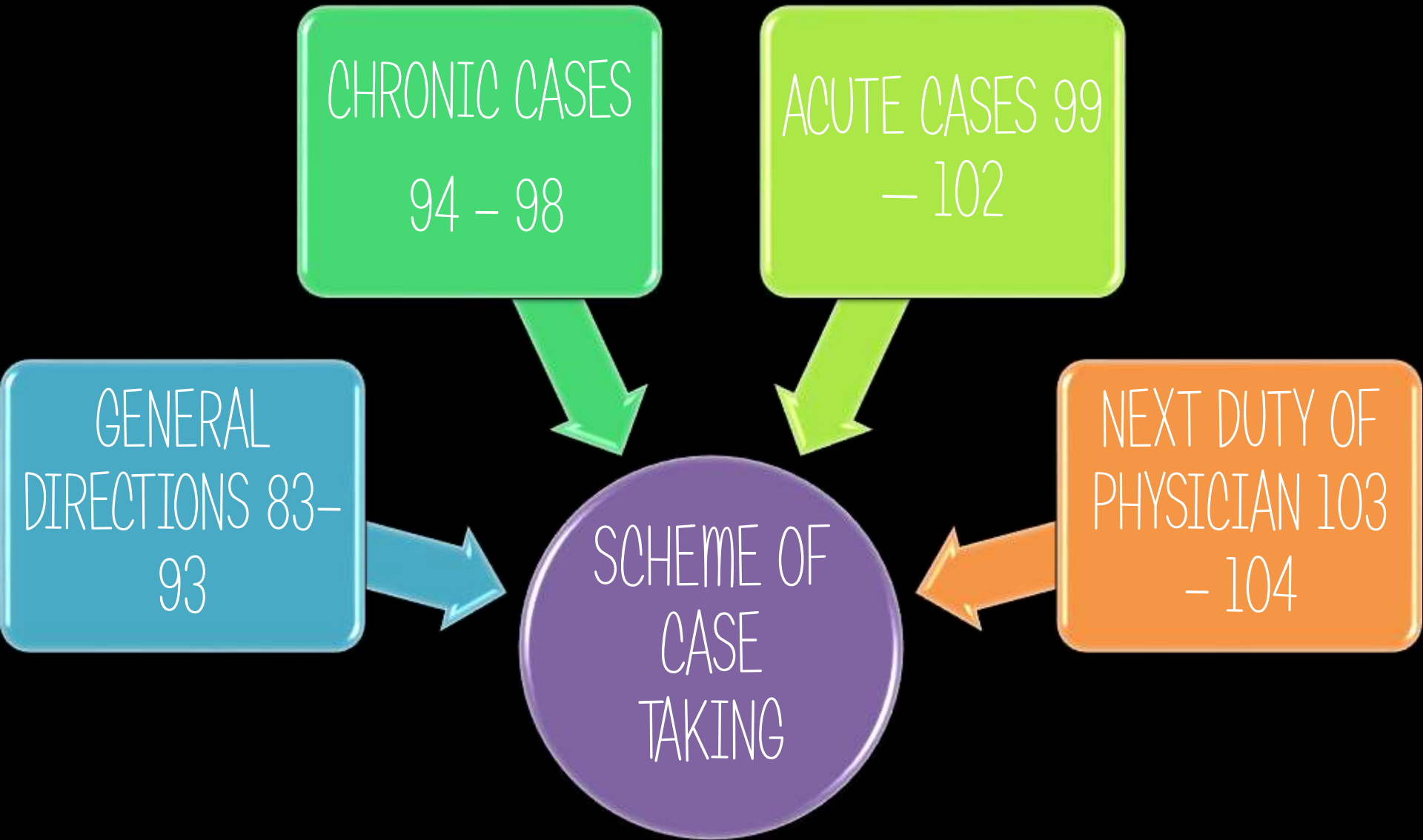
CHRONIC CASES
94 – 98

ACUTE CASES 99
– 102

GENERAL
DIRECTIONS 83–
93

NEXT DUTY OF
PHYSICIAN 103
– 104

SCHEME OF
CASE
TAKING



\$ 83 – KNOWLEDGE OF PHYSICIAN

- The physician should be free from prejudice.
- He must have sound sense.
- He should be attentive.
- He should faithfully record all the deviations
- **\$ 98 – ADDITIONAL QUALITY**

- Circumspection
- Tact
- Knowledge of human nature
- Caution on conducting inquiry
- Patience in an eminent degree.



\$ 84 – SOURCES OF SYMPTOMS



- Other directions given



– Write VERBATIM

– NO INTERRUPTION



– Advice to speak SLOWLY

– CR : \$ 6 – UNPEJUDICED OBSERVER

- \$ 85 – NEW CIRCUMSTANCE
– NEW LINE
- \$ 86 – DETAILING THE S/M NARRATED BY PATIENT –
ENQUIRY INTO
- \$ 87 – NO SUGGESTIVE QUESTIONS
- \$ 88 – QUERIES FOR PART HE HAS LEFT
- \$ 89 – MORE PRECISE & SPECIAL QUESTIONS
- \$ 90 – OBSERVATION BY PHYSICIAN
 - \$ 213 – PHYSICIAN MUST NOTE THE STATE OF MIND &
DISPOSITION AND SELECT MEDICINE
 - FN : CONTRAINDICATIONS GIVEN



GENERAL DIRECTIONS

PATIENT COMING DIRECTLY

83 – 90

PATIENTS FROM OTHER
PHYSICIANS

91 – 93

\$ 91

- understand the patient's state of

HEALTH BEFORE THE ILLNESS, the doctor has to

DISCOUNT those expression which were noticed after
the medication

– **DISCOUNTING S/M**

– **UN-MEDICINAL NATURE - PLACEBO**



❖ WARNING

\$ 92

- IF **VERY ACUTE** and **FULMINANT**

– CONJOINT MALADY

- DISEASE + MEDICINE

- KENT – For antidoting, more stress to be given to new medicinal

s/m



\$ 93

- OBVIOUS CAUSE OF C/C DISEASE

- Information can be obtained either from the
FRIEND OR ATTENDANT OR RELATIVE



- \$ 93 FN

- Any cause of disgraceful character to be
interrogated.

- About UNFORTUNATE INCIDENCE

SPECIAL DIRECTIONS FOR C/C CASE

PATIENT COMING DIRECTLY

REPORTED BY OTHERS

94 – 97

98

PATIENTS COMING DIRECTLY 94 – 97

ACCESSORY CIRCUMSTANCES – 94

LESSER ACCESSORY S/M – 95

HYPOCHONDRIAC PATIENT – 96

INDOLENT PATIENT – 97

\$ 94

- Patient's OCCUPATION, MODE OF LIVING, DAILY HABITS,

DIET, FAMILY SITUATION etc – may MAINTAIN c/c

disease

– removal to promote recovery.

– \$ 5

– FN \$ 5 n FEMALE PATIENTS.



\$ 95

- LESSER ACCESSORY SYMPTOMS

- Circumstances to which patient **IS USED TO & DOESN'T MENTIONS IT**

- More Characteristic
- Neglected because of the long suffering
- Least attention to it – as part & parcel of their life
- Very useful in the choice of remedy





FASTIDIOUS



LIES WITH LIMBS CROSSED



- ACCESSORY SYMPTOM OF MEDICINE – \$ 163
 - Partial similimum
- ACCESSORY SYMPTOM OF DISEASE – \$ 180
 - In one sided disease

my feet are
numbing, i'm
developing
diabetes!

am i losing
my hearing?

is this a
heart attack?

everything
is getting
worse!!!

is this rash going to
kill me?

am i dying?

is this a migraine, or a
silent stroke?

I can't breathe,
i'm having an
allergic reaction.

is this lump
normal or do
i have breast
cancer?

am i
anemic?

that mole
didn't use
to be there!

am i going
crazy?

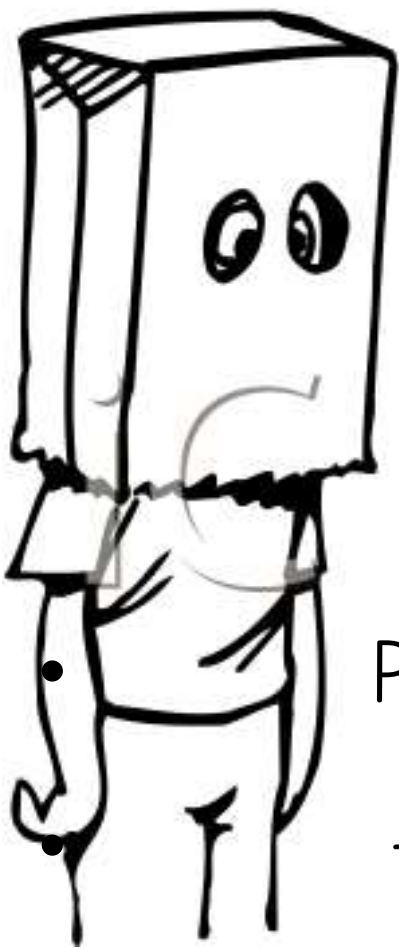


CRAZYHEAD
COMICS

\$ 96 – HYPOCHONDRIACS

- Differentiate from TRUE FABRICATORS or FEIGNERS
 - Give PLACEBO
 - COMPARE THEIR S/M in subsequent visits

\$ 97



Patients **WITHHOLDING** many s/m
from the physician for the

SAKE OF MODESTY

- Difficulty in c/c CT

DIRECTIONS FOR TAKING ACUTE / EPIDEMIC/ SPORADIC CASES

99- 103

INDIVIDUAL

- 99

SPORADIC & EPIDEMIC

- 100 - 102

SPORADIC & EPIDEMIC CASES 100 – 102

CONSIDERATION AS AN UNKNOWN ONE – 100

CHARACTERISTIC PORTRAIT TO BE OBTAINED – Totality of whole epidemic is completed from several pts – 101

102

\$ 102



- All the patients of epidemic are affected with the disease prevailing at a given time and have contracted it from one and the same source and hence suffering from the same disease BUT the whole portrait of the epidemic cannot be learned from single patient
- \$ FN 102 – Homoeopathic SPECIFIC MEDICINE

□ GENUS EPIDEMICUS

NEXT DUTY OF PHYSICIAN

103 – 104



103

- PSORA MUST BE INVESTIGATED

104

- PICTURE OF DISEASE RECORDING or RECORD KEEPING



\$ 104 – RECORD KEEPING

- A record is a collection of relevant data which will be useful for reference later.
- Dr. Hahnemann states, “The true homoeopathic physician could be recognized by his characteristic methods of enquiry in which he goes into the minutest details and put them down carefully in black and white not trusting his memory to do the job.”
- Dr Kent – “without case records you are at sea without compass or rudder”

MISSION OF PHYSICIAN

- help suffering humanity
- = CURE

CASE TAKING

- physician's actions from time to time in the course of treatment
- = DEFINITE ACTION PROGRAMME

RECORD KEEPING

- accommodate all collected information
- find any information whenever needed



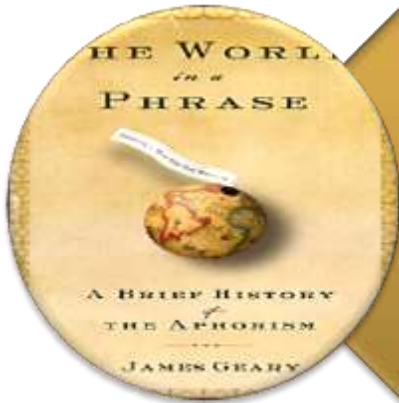
Ideal Case Record

- for disease diagnosis, person diagnosis, remedy diagnosis and recording the treatment
- provision for processing the collected information - > similimum
- for writing follow-up
- should be logically designed and planned
- based on definite philosophy

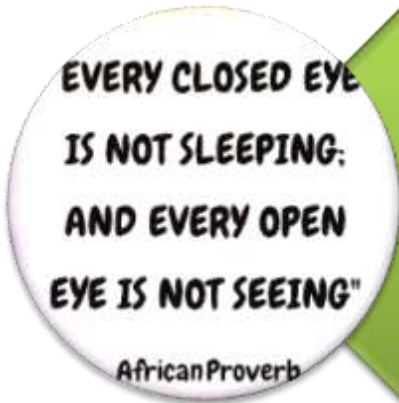
- (i) Chief complaints (location, sensation, modality, concomitants).**
- (ii) Associated complaints (L,S,M,C,); patient as a person; physical make up and deviation; mental make up; physical examination; diagnosis;**
- (iii) Processing section : Analysis and evaluation; totality; repertorial work; therapeutic planning and programming;**
- (iv) Prescription and follow-up section : Prescription, follow-up. It helps in systematic interviewing of a patient. It helps in recording of data at appropriate places so that a logical picture of the disease and person emerges while interacting with patients and noting down the narrations. It also helps the physician to understand the longitudinal sectional evolutionary totality and transverse sectional totality so that a constitutional and an acute remedy can be selected easily. Lastly/finally it helps in research work.**



ONE SIDED DISEASES –
172 – 230



MENTAL DISEASES – 210
– 230



INTERMITTENT DISEASES
– 231 – 244

ONE-SIDED DISEASES

(Diseases with too few symptoms and chiefly of chronic nature)

Principal symptoms

Internal Complaint

External Complaint

Physical Complaint Mental Complaint

Local Diseases
or
Local Maladies

Local Disease

- A kind of one sided disease in which the changes and ailments appear locally on the external parts of the body.

