



HOMOEOPATHIC

CASE TAKING STRATEGIES - 3

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- ACUTE DISEASES – \$ 72

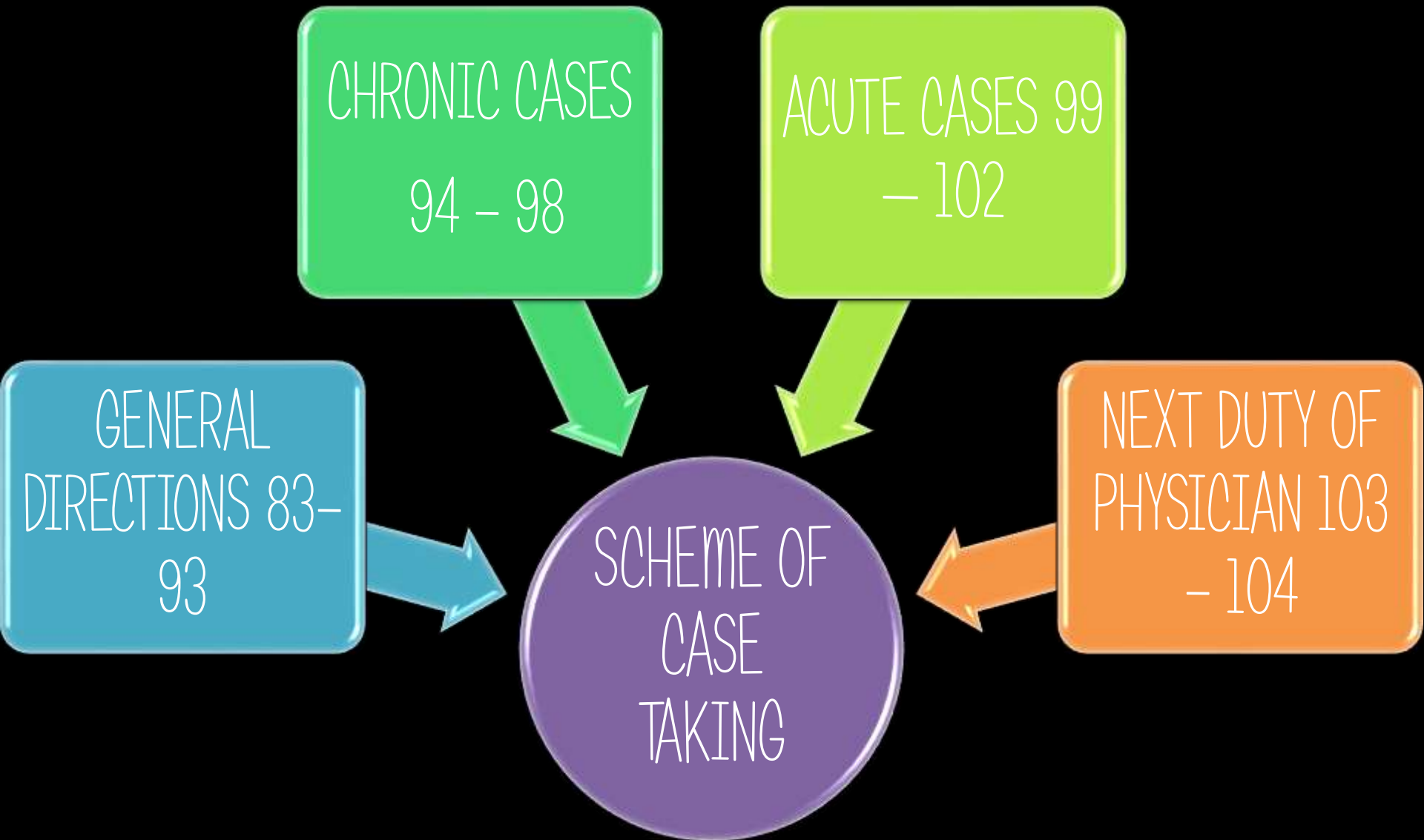
- Defn. – fatal & virulent
- Transient explosion of latent psora

- CHRONIC DISEASE WITH ACUTE EXACERBATION

- Acute totality

- ARTIFICIAL C/C DISEASE (\$ 74 – 76)

- Prolonged allopathic usage



- ONE SIDED DISEASE (\$ 172 – 184)
 - Only few s/m
 - Remedies in succession
- LOCAL MALADIES (\$ 185 – 203)
 - One sided ds. on external parts



ONE SIDED Ds. – 172
– 203 (Local Ds. – 185 –
203)

**EVERY CLOSED EYE
IS NOT SLEEPING;
AND EVERY OPEN
EYE IS NOT SEEING"**

African Proverb

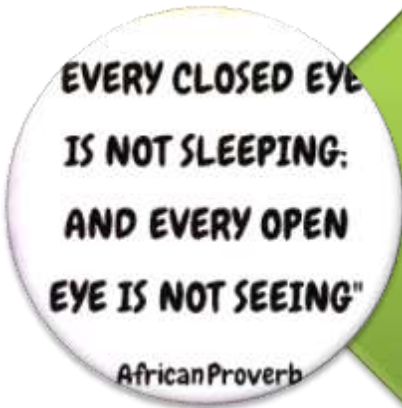
INTERMITTENT
DISEASES – 233 –
245



ONE SIDED Ds. – 172 –
203 (Local Ds. – 185 – 203)



MENTAL DISEASES –
210 – 230



INTERMITTENT DISEASES
– 233 – 245

- CASE TAKING IN ALTERNATING DISEASES

- \$ 231 – 232

- CASE TAKING IN INTERMITTENT DISEASES

- \$ 233 – 245

- INDISPOSITION

- \$ 7 FN, \$ 150

• CASES AFTER SUPPRESSION

- Suppression may develop s/m in some other form in deeper & more vital organs
- Enquire thoroughly about Treatment & Past history of pt to select suitable treatment
 - GENERALS – HISTORY; PERSONAL – medicine; of abuse of allopathic: (3)
Lach. Nux-v. Sulph.
 - GENERALS – HISTORY; PERSONAL – antibiotics; of use of: (3) carb-v.
mag-p. op.

- + abortion; of(6)
- + abscesses; of recurrent(25)
- abuse; of(1)
- antibiotics; of use of(3)
- birth trauma; of(3)
- + bite of animal(1)
- boils; of recurrent(24)
- bronchitis; of recurrent(7)
- + cancer; of(5)
- + chest complaints; of(1)
- + childhood diseases; of
- colds; of frequently recurrent
- complaints; of recurrent(22)
- cornea; of recurrent inflammation of the(2)
- coryza; of recurrent(14)
- croup; of recurrent(5)
- + cystitis; of recurrent(18)
- death of siblings when they are infants(1)
- diarrhea; of recurrent(3)
- diphtheria; of(4)
- + discharges; of
- dislocations(1)
- + domination by others; of
- + ear
- eczema(2)
- epididymis; recurrent inflammation(1)
- + epistaxis; of recurrent(14)
- + eruptions; of(1)

- infections; of frequent(1)
- inflammations; of frequent(1)
- + influenza; of
- laryngitis; of recurrent(3)
- lids; of recurrent tarsal tumors on the(3)
- liver; inflammation of(1)
- loss of fluids; of(3)
- + lungs
- + malaria; of(3)
- mammae; of recurrent inflammation of the(1)
- mastitis
- + measles; of
- medicine; of abuse of allopathic(3)
- mononucleosis; of(8)
- nose; of recurrent pimples on wings of(1)
- penis; of recurrent ulcers on(1)
- pharynx; inflammation of(6)
- pleuritis(1)
- pneumonia; of
- + puerperal fever; of
- + septic fever; of
- sexual abuse; of
- sinusitis; of recurrent(3)
- + stomach; of pain in
- + strain or injury; of(4)
- syphilis; of(1)
- throat; recurrent inflammation of(3)
- + tonsillitis; of recurrent(32)

DIFFERENT SPECIALITIES

&

CASE TAKING

PAEDIATRIC CASES

- Genuine interest in the welfare of pt
- Patience
- Observational skills
- History taking difficult
 - Proper judgement needed
- Detailed evolution of s/m (ANAMNESIS)
- Knowledge of ancillary measures – esp. in acute emergencies
- Alleviating anxiety of parents
- Very sensitive & susceptible to environment – assess the depth, counsel the family

- Events during birth, development of child, vaccination, infectious ds., medications, allergies, susceptibility to any ds.
- Character of child in relation with reactions & activities
- Psychic features of child
- History of mother – physical & emotional states during conception, pregnancy & labour

- Ante natal history
- Natal history
- Post natal/ Neonatal history
- Developmental history
- Dietary history/ Feeding History
- Immunization History

GERIATRIC CASES

- Obtaining an effective history demands
 - Increased skills
 - Time
 - Require patience of the physician.
 - Reliance on family members or caregivers.
 - Medical records that document the presence or absence of current symptoms.
 - Knowledge of individuals social circumstances

- Difficulties
 - Spouse having decreased physical stamina
 - They may have to surrender their own life style
 - Expenses
- Good case history very essential
- Physician alert for any difficult memory, hearing impairment, vision problem etc

- Once the problems have been identified, the physician may choose to make the initial intervention himself or may choose to refer the patient to a consultant (social worker, occupational therapist, physical therapist, geriatric home health nurse, geriatric evaluation clinic, etc.) or to a community agency from which additional information or services would be helpful.