HAHNEMANN IN RELATION WITH REPERTORY

In order to understand the importance in the role of repertory, as per Hahnemann, one has to go through the following comments:

Regarding homoeopathic repertory, from the comments given in the footnote of the aphorism 153 one can recognize how much Hahnemann emphasizes on the importance of repertory. These complimentary words are meant for Dr. Von Boenninghausen which are as produced below:

153 FOOTNOTE:

In Fifth Edition:

Dr. von Boenninghausen, who has already distinguished himself for his labours in connection with the new system of medicine, has lately increased our obligation to him by the publication of his important little book setting forth the characteristic symptoms, more particularly of the antipsoric medicines, entitled Uebersicht der Hauptwirkungs-Sphare der antips. Avz Munster, bei Coppenrath, 1833, and the appendix thereto (containing the antisyphilitic and the antisycotic medicines) at the end of the second edition of his Systematisch-alphabetisches Repertorium der antipsorischen Arzneien, bei Coppenrath in Munster.

In Sixth Edition:

Dr. von Boenninghausen, by the publication of the characteristic symptoms of homoeopathic medicines and his Repertory has rendered a great service to Homoeopathy as well as Dr. J.H.G. Jahr in his handbook of principal symptoms.

MATERIA MEDICA PURA:

From the introduction part of Materia Medica Pura of Hahnemann, we are able to understand his concept of repertory and method of repertorization by referring through the sample cases and the steps he had taken in those, to conclude with the suitable remedy. The explanation on behalf of the need of repertory, the development of such an index and its utilization is also given in the 'Preamble' of the book as follows:

For the convenience of treatment, we require merely to jot down after each symptom all the medicines which can produce such a symptom with tolerable accuracy, expressing them by a few letters (e.g. Ferr., Chin., Rheum., Puls.), and also to bear in mind the circumstances under which they occur, that have a determining influence on our choice; and proceeding the same way with all other symptoms, nothing by what medicine each is excited; from the list so prepared we shall be able to perceive which among the medicines homoeopathically covers the most of the symptoms present, especially the most peculiar and characteristic ones. – and this is the remedy sought for.

CHRONIC DISEASE:

While commenting about the mistakes done by homoeopathic physicians, Hahnemann criticizes about the demerit of depending upon those repertories existed, bypassing the usage of chronic disease as well as the Materia Medica Pura to find out a simillimum. The part constituting the criticism from 'Chronic Diseases' is as follows:

With the great conscientiousness which should be shown in the restoration of a human life endangered by sickness, more than in anything else, the homoeopath, if he would act in a manner worthy of his calling, should investigate first the whole state of the patient, the internal cause as far as it is remembered, and the cause of the continuance of the ailment, his mode of life, his quality as to mind, soul and body, together with all his symptoms (see direction in Organon), and then he should carefully find out in the work on Chronic Diseases, as well as in the work on Materia Medica Pura, a remedy covering in similarity as far as possible, all the moments, or at least the most striking and peculiar ones, with its own peculiar symptoms; and for this purpose he should not be satisfied with any of the existing repertories – a carelessness only too frequent; for these books are only intended to give light hints as to one or another remedy that might be selected, but they can never dispense him from making the research at the first fountain heads. He who does not take the trouble of treading this path in all critical and complicated diseases, and, indeed, with all patience and intelligence, and contents himself with the vague hints of the repertories in the choice of a remedy, and who thus quickly dispatches one patient after the other, does not deserve the honorable title of a genuine homoeopath, but is rather to be called a bungler, who on that account has continually to change his remedies until the patient loses patience; and, as his ailments have, of course, only been aggravated, he must leave this aggravation of diseases, there by the art itself suffers discredit rather than the unworthy disciple of art

SCOPE OF REPERTORY

In order to make our works more easier, we may use different tools or instruments. But, for a better outcome, one should work with them knowing what are the merits and demerits they possess. This is also true in case of using repertories and for successful treatment of cases.

- Repertory is an Index to the Materia Medica. Usage of the repertory avoids searching symptoms under the remedies page by page.
- It is impossible to keep in memory the vast number of symptoms of different remedies in different books of Materia Medica. Repertory can be used as a reference book to find out a remedy indicated for a symptom.
- By the process of repertorization, one can find out a simillimum which covers the totality of symptoms of the patient along with due reference to the Materia Medica.
- It helps to differentiate between two or more similar remedies.
- The rubrics and sub rubrics in each chapters of a repertory stimulate us to improve the method of Case taking, by giving new ideas in framing questions.

- Sub rubrics helps us to collect complete details of a symptom in different aspects such as location, sensation, modalities, and concomitants.
- Repertory inhibits the tendency to prescribe a remedy based on one or two characteristic symptoms.
- Usage of repertory keeps a physician unprejudiced.
- Even though the process of repertorization consumes more time than prescription based on keynotes, using computer repertories as a tool avoids time consumption.
- The grades of different remedies under a rubric can be observed in a repertory, which are differentiated based on proving and clinical verification.
- Different types of repertories are available, which can be selected according to the
 presence of symptoms in a particular case. Some of them are general repertories and
 embrace the entire field of symptoms and remedies. Others are confined to special
 ailments or parts of the body.
- Clinical and regional repertories can be approached for selecting a simillimum based on pathological changes and for cases with scarcity of symptoms.
- Proper use of repertory is indispensable to the prescriber, especially in complicated and in difficult chronic cases.
- The relationship of remedies available in a repertory helps for a second prescription to complete the cure.
- Repertory provides the study of Materia Medica by observing a single remedy under different rubrics.
- Repertory makes it possible for a comparative study of two or more drugs.
- Reference to Repertory helps to refresh the knowledge of Materia Medica.
- Frequent usage of repertory helps to improve the knowledge of therapeutics, as the physician gets a chance to observe each rubric and their remedies grouped under it.
- Repertory provides the scope for expansion by adding new symptoms and clinical experiences in forthcoming editions.

LIMITATIONS OF REPERTORY.

- Repertory is an Index to the Materia Medica, which can be used as a tool for reference. It
 does not mean that repertory can replace Materia Medica as well as the Physician's
 knowledge of Materia Medica.
- As commented by Boger "Every repertory is useful, unfortunately not one is complete", which means that we cannot substitute repertory with Materia Medica as they are more complete in information than Repertory.
- By using the repertory, we can narrow down to a small group of remedies. As repertory is not meant for selecting the final remedy, in order to prescribe the simillimum one should refer Materia Medica, those remedies in the shortlist.

- Each repertory by different author has his/her own plan and construction based on the philosophical background, which varies from each other. The utility of a repertory depends upon the thorough knowledge of these features.
- The gradation of remedies given in a repertory indicates the degree of reliability of its action on that symptom, procured by proving and clinical verification and not the intensity of its curative action.
- Gradation of remedies varies in different repertories.
- Most of the repertories have close running rubrics which are difficult to differentiate from one another, which makes confusion in selection of rubrics.
- Repertories do not provide the information about the potency to be selected and repetition of doses which are well explained in the Organon of Medicine and Philosophy.
- Even though a physician can depend on repertories to find out the indicated medicines for a symptom totality, the successful repertorization depends upon the skillful selection of symptoms.
- Physician should develop the ability to make proper case processing to reach a successful repertorial result even if we use a repertory.
- Use of a repertory is not recommended if a case clearly indicates a remedy.
- Repertory softwares minimizes the chance of a physician to develop his therapeutic knowledge by providing shortcuts.
- Searching a rubric is always difficult as the arrangement of rubrics may not be strictly followed throughout the book. Misplaced rubrics in the repertories also add to this demerit.
- Sources of information are not well represented in all repertories.
- The abbreviations for remedies used in different repertories are not uniform which makes confusion about the remedy represented.
- To use most of the repertories, symptoms have to be converted to rubrics, which may disfigure the original symptom.
- Misguidance in proper interpretation of rubric for a symptom leads to failure in selecting a simillimum. Most of the time, the physician feels doubtful whether the rubric selected is the one applicable for the symptom of his patient. .
- A physician cannot confine himself to the remedies indicated under a rubric as it may be awaiting an update in the future. Therefore, it is always better to match the remedy which mostly covers the totality of symptoms.
- The clinical and regional repertories keep the physician away from the concept of holistic approach.
- Nosodes and sarcodes are not well represented in most of the older repertories.
- Without proper judgement of the value of symptoms, the repertorial result always points towards polychrest remedies.