



AN ART OF HEALING

JV'n Dr. Rakesh Sharma

JAYOTI VIDYAPEETH WOMEN'S UNIVERSITY, JAIPUR

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A HAND BOOK ON CASE TAKING

AN ART OF HEALING

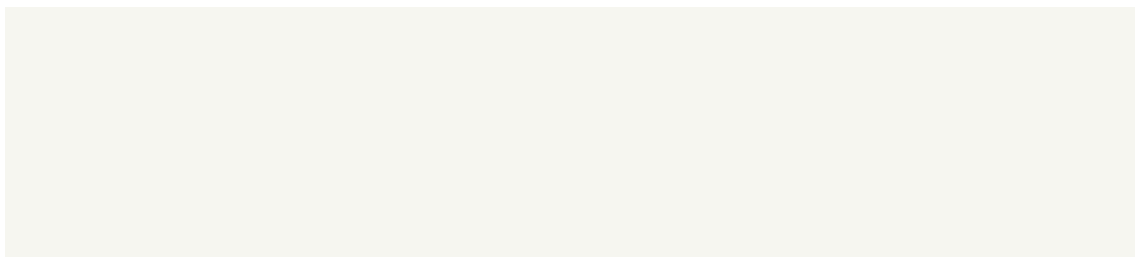
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INTRODUCTION-

The Homoeopathic System of Medicine is a time-tested system, but the need of the hour is to make it evidence-based. How to take a case, case analysis and prescription have been described by many, but that information lies scattered in various books authored by the stalwarts of Homoeopathy. Handbook on 'Homoeopathy: Case taking to Prescribing' is a good compilation, which present the annals of prescribing in a packaged form to beginners.

The first chapter on 'Case taking,' deals with the technique of proper case taking and recording the case in a standardization format for both acute and chronic case. The second chapter on 'Case Analysis and Evaluation of Symptoms' forms the foundation required to treat a case. It describes how the symptoms obtained during case taking can be classified into common and uncommon symptoms for the purpose of diagnosis of the disease, individualization and selection of medicine.

The chapter on 'Miasmatic Analysis' describes the different types of miasms, their manifestations and how to apply the concept of miasm in homoeopathy.

The selection of medicine after evolving the totality of symptoms is described in the chapter 'Totality of Symptoms,' where the need for repertorization is also made clear. Once the similimum is selected, the criteria to select the potency and repeat the dose are highlighted in the following chapter. The last chapter on the 'Follow-up' illustrates what reactions are expected after administration of a remedy and how these reactions have to be determined and interpreted.

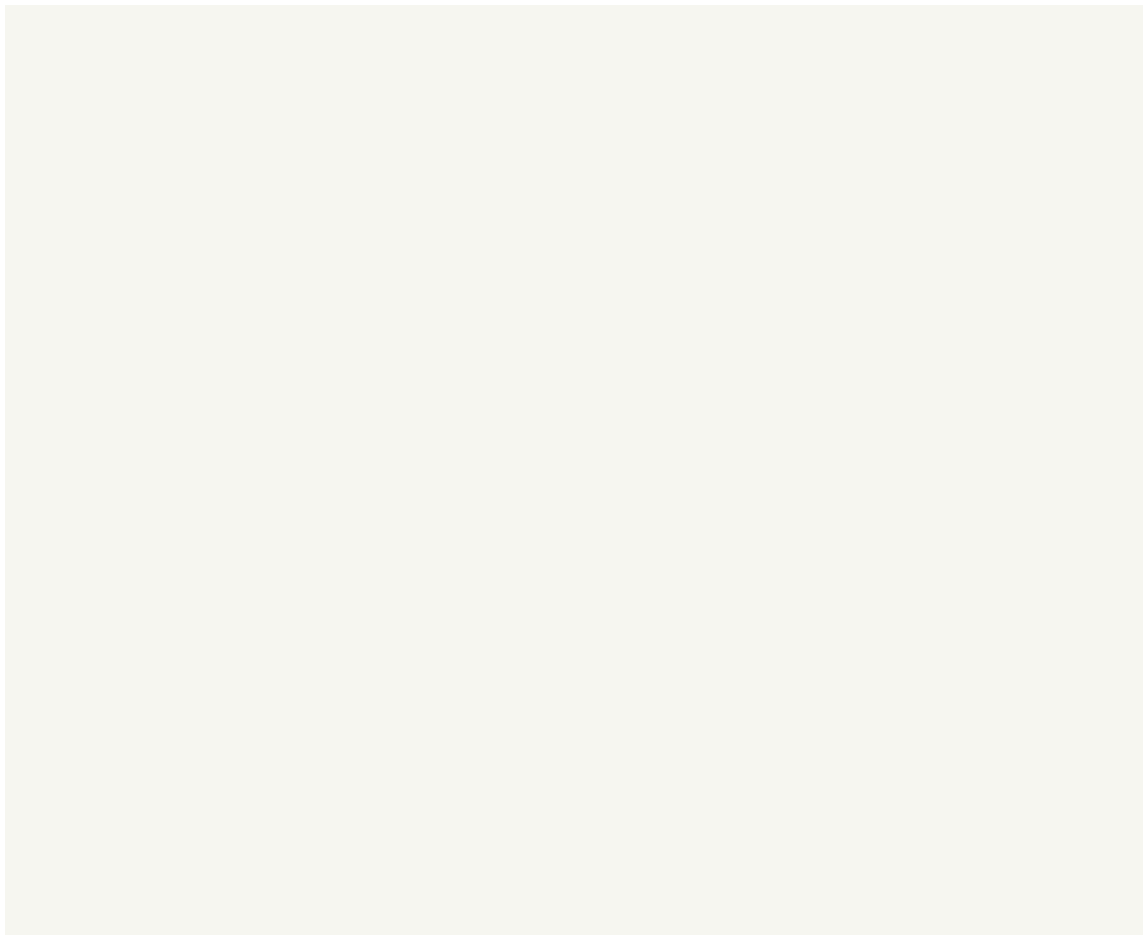
Some of the excellent parts of the book are, the section of 'Occupation' in the case taking chapter which is very well-described, the section on 'Physical Generals' is well-explained, the specimen questions given for eliciting the symptoms of mind are very suggestive, the tabulations done in the case-taking format simplify the storage of data as well as make the retrieving of data very convenient during follow-up. The information under 'Selection of potency' is very clear and well-fortified with examples.

The quality of the book can be further enhanced if proper reference numbers are given in the Bibliography section. For example, it would have been interesting to know which part in 'Case-Taking' has been taken from 'The Lesser Writings' of Hahnemann.

Under the chapter 'Case Analysis and Evaluation of Symptoms,' the evaluation techniques of Kent, Boenninghausen and Boger are discussed. Here, it would have been appropriate to write about Dr. Hahnemann. For a beginner, emphasis should be given on what the 'Father of Homoeopathy' did and after him other names should come. The seven cardinal principles of homoeopathy are nowhere listed out in the book, and they definitely form the strongest basis of every moment from 'Case-taking to Prescribing'. Until these seven are hammered into the minds of nascent graduates of homoeopathy, they will miserably fail in their practice. 'Miasmatic Analysis' is mostly taken from the book by Phyllis Speight, wherein, some original ideas or cases can be cited. Under the chapter on 'Selection of Medicine', finding of Genus epidemicus has been put under the non-reportorial approach. However, once that total symptom list of the prevalent epidemic are in hand, the symptoms can be well-repertorised to arrive at the probable group of medicines, and definitely Materia Medica will be finally consulted for the selection of Genus epidemicus, as in any reportorial approach.

PARTS OF CASE TAKING:

- A. PRELIMINARY DATA.
- B. PRESENT ILLNESS.
- C. PAST HISTORY.
- D. PRESENT HEALTH STATUS.
- E. FAMILY HISTORY.
- F. CLINICAL EXAM AND DIAGNOSIS. ELICITATION OF MENTAL SYMPTOMS.
- G. VALUATION & TOTALITY OF SYMPTOMS.



CASE TAKING IN ORGANON OF MEDICINE FROM APHORISM 83 TO 104

APHORISM §83

This individualizing **EXAMINATION OF A CASE OF DISEASE**, for which I shall only give in this place general directions, of which the practitioner will bear in mind only what is applicable for each individual case, demands of the physician **NOTHING BUT FREEDOM FROM PREJUDICE AND SOUND SENSES**, attention in observing and fidelity in tracing the picture of the disease.^[1]

Hahnemann says about the need of individual examination of every patient and gives some directions that every physician should follow these for tracing the picture of disease. These are some directions;

1. Unprejudiced observer
2. Keen observer
3. Good senses
4. Devotion

APHORISM §84

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. He writes down accurately all that the patient and his friends have told him in the very expressions used by them. Keeping silence himself, he allows them to say all they have to say, and refrains from interrupting them^(81) unless they wander off to other matters. The physician advises them at the beginning of the examination to speak slowly, in order that he may take down in writing the important parts of what the speakers say.^[1]

Hahnemann says in this aphorism that listen carefully the complaints of the patient along with physician should observe the behavior with the doctor and his attendants during consultation and in waiting room and notices by using sense any peculiar, unusual thing in his/her behavior, conduct.

Physician should write down precisely noted down all information collect from patient, relatives and friends in patient words because if physician changes the word in writing then chances of change the exact feeling of the symptoms.

Physician should be quiet while patient is telling his complaints and encourage the patient to tell all things and don't interfere patient while he is telling. So physician have to listen attentively, carefully without disturbing the patient, if physician interfere during this may be the chances of forgetting something which previously he wanted to tell.

Physician should advise the patient about speaking slowly so that he can write down important things precisely.

APHORISM §85

He begins a fresh line with every new circumstance mentioned by the patient or his friends, so that the symptoms shall be all ranged separately one below the other. He can thus add to any one, that may at first have been related in too vague a manner, but subsequently more explicitly explained^[1]

Hahnemann says in this aphorism that physician while writing down the complaints of the patient; he starts to write down with fresh line to other complaints, so that if physician requires some more information about the complaint then he can add to this. And another reason is that he can arrange complaints properly.

APHORISM §86

When the narrators have finished what they would say of their own accord, the physician then reverts to each particular symptom and elicits more precise information respecting it in the following manner; he reads over the symptoms as they were related to him one by one, and about each of them he inquires for further particulars: E. G., at what period did this symptom occur? Was it previous to taking the medicine he had hitherto been using? Whilst taking the

medicine? Or only some days after leaving off the medicine? What kind of pain, what sensation exactly, was it that occurred on this spot? Where was the precise spot? Did the pain occur in fits and by itself, at various times? Or was it continued, without intermission? How long did it last? At what time of the day or night, and in what position of the body was it worst, or ceased entirely? What was the exact nature of this or that event or circumstance mentioned—described in plain words?^[1]

When patient have completed to say all information according his own way then physician should ask the patient about anything you want to say. Now the physician's may start to ask more information to complete the symptoms like;

- Physician should read all the symptoms carefully one by one and to ask more precise information to complete the symptom e.g., what is the exact sensation of pain, at which time it becomes worse or better.
- Pain occurs at paroxysms or in continuous manner.

APHORISM §87

And thus the physician obtains more precise information respecting each particular detail, but without ever framing his questions so as to suggest the answer to the patient, ^(82) so that he shall only have to answer yes or no; else he will be misled to answer in the affirmative or negative something untrue, half true, or not strictly correct, either from indolence or in order to please his interrogator, from which a false picture of the disease and an unsuitable mode of treatment must result.^[1]

So in this manner physician gets more complete information of each symptom, but regarding this physician follow some precaution;

He should not ask such suggestive questions because there is no choice for patient to give answers in yes or no.

There is a less chances of getting true answers, due to this getting true totality of symptoms is impossible.

APHORISM §88

If in these voluntary details nothing has been mentioned respecting several facts or functions of the body or his mental state, the physician asks what more can he told in regard to these parts and these functions, or the state of his disposition or mind; ⁽⁸³⁾ but in doing this he only makes use of general expressions, in order that his informants may be obliged to enter into special details concerning them.^[1]

Hahnemann says that after getting the voluntary information from the patient but some information is lacking related to other functions and mental disposition. Then physician ask more about in regard to these parts, functions or the state of disposition.

APHORISM §89

When the patient (for it is on him we have chiefly to rely for a description of his sensations, except in the case of feigned diseases) has by these details, given of his own accord and in answer to inquiries, furnished the requisite information and traced a tolerably perfect picture of the disease, the physician is at liberty and obliged (if he feels he has not yet gained all the information he needs)! to ask more precise, more special questions. ⁽⁸⁴⁾^[1]

Hahnemann says in this aphorism that after collecting the all required information to complete the totality of symptoms then physician (if he feels unsatisfied about information) has the liberty to ask more precise information's.

APHORISM §90

When the physician has finished writing down these particulars, he then makes a note of what he himself observes in the patient, ⁽⁸⁵⁾ and ascertains how much of that was peculiar to the patient in his healthy state.^[1]

Hahnemann says in this aphorism that physician should make a note about patient what he observe in the patient, what is peculiar, characteristic in the patient.

APHORISM §91

The symptoms and feelings of the patient during a previous course of medicine do not furnish the pure picture of the disease; but, on the other hand, those symptoms and ailments which he suffered from **BEFORE THE USE OF THE MEDICINES, OR AFTER THEY HAD BEEN DISCONTINUED FOR SEVERAL DAYS**, give the true fundamental idea of the **ORIGINAL** form of the disease, and these especially the physician must take note of. When the disease is of a chronic character, and the patient has been taking medicine up to the time he is seen, the physician may with advantage leave him some days quite without medicine, or in the meantime administer something of an unmedicinal nature and defer to a subsequent period the more precise scrutiny of the morbid symptoms, in order to be able to grasp in their purity the permanent uncontaminated symptoms of the old affection and to form a faithful picture of the disease.^[1]

If a patient comes for treatment of chronic disease and he has taken medicines for it then it is very difficult to obtain pure picture of the disease. It is better to get the pure picture of disease physician should get the picture of disease before taking the medicine or he had been left the medicine for several days, so in this way physician get the pure picture of the disease. Or if patient is taking medicine continuously then physician advises to left the treatment for some days so that physician get the true picture of the disease and mean while he can give placebo.

APHORISM §92

But if it be a disease of a rapid course, and if its serious character admit of no delay, the physician must content himself with observing the morbid condition, altered though it may be by medicines, if he cannot ascertain what symptoms were present before the employment of the medicines,—in order that he may at least form a just apprehension of the complete picture of the disease in its actual condition, that is to say, of the conjoint malady formed by the medicinal and original diseases, which from the use of inappropriate drugs is generally more serious and dangerous than was the original disease, and hence demands prompt and efficient aid; and by thus tracing out the complete picture of the disease he will be enabled to combat it

with a suitable homeopathic remedy, so that the patient shall not fall a sacrifice to the injurious drugs he has swallowed.^[1]

Hahnemann says, but in some disease conditions where some urgency is required, serious disease conditions then he advises the physician to prescribe medicines on the present morbid condition of the patient although this present picture of disease is contaminated with medicine. This present condition of the disease is mixer of medicinal disease and original disease.

APHORISM § 93

If the disease has been brought on a short time or, in the case of a chronic affection, a considerable time previously, by some obvious cause, then the patient – or his friends when questioned privately – will mention it either spontaneously or when carefully interrogated.¹

¹ Any causes of a disgraceful character, which the patient or his friends do not like to confess, at least not voluntarily, the physician must endeavor to elicit by skillfully framing his questions, or by private information. To these belong poisoning or attempted suicide, onanism, indulgence in ordinary or unnatural debauchery, excess in wine, cordials, punch and other ardent beverages, or coffee, – over-indulgence in eating generally, or in some particular food of a hurtful character, – infection with venereal disease or itch, unfortunate love, jealousy, domestic infelicity, worry, grief on account of some family misfortune, ill-usage, balked revenge, injured pride, embarrassment of a pecuniary nature, superstitious fear, – hunger, – or an imperfection in the private parts, a rupture, a prolapsed, and so forth.^[2]

Hahnemann says in this aphorism that in some disease conditions which originate from such disgraceful character then physician have to ask skillfully so that he can obtain the complete picture of the disease.

APHORISM § 94

While inquiring into the state of chronic disease, the particular circumstances of the patient with regard to his ordinary occupations, his usual mode of living and diet, his domestic situation, and so forth, must be well considered and scrutinized, to ascertain what there is in them that may tend to produce or to maintain disease, in order that by their removal the recovery may be prompted.¹

¹ In chronic diseases of females it is especially necessary to pay attention to pregnancy, sterility, sexual desire, accouchements, miscarriages, suckling, and the state of the menstrual discharge. With respect to the last-named more particularly, we should not neglect to ascertain if it recurs at too short intervals, or is delayed beyond the proper time, how many days it lasts, whether its flow is continuous or interrupted, what is its general quality, how dark is its color, whether there is leucorrhoea before its appearance or after its termination, but especially by what bodily or mental ailments, what sensations and pains, it is preceded, accompanied or followed; if there is leucorrhoea, what is its nature, what sensations attend its flow, in what quantity it is, and what are the conditions and occasions under which it occurs?^[2]

In case of chronic diseases physician should inquire about the surrounding circumstances of patient in relation with occupation, life-style and diet, domestic circumstances. The purpose behind it to search a cause which is related to his disease state.

In case of females physician should know about her pregnancy, sterility, miscarriage, suckling and menses and other abnormal discharges. Menstrual history of female patient should be known in details along with if she is suffering from leucorrhoea then physician have to know its complete nature.

APHORISM § 95

In chronic disease the investigation of the signs of disease above mentioned, and of all others, must be pursued as carefully and circumstantially as possible, and the most minute peculiarities must be attended to, partly because in these diseases they are the most characteristic and least resemble those of acute diseases, and if a cure is to be affected they

cannot be too accurately noted; partly because the patients become so used to their long sufferings that they pay little or no heed to the lesser accessory symptoms, which are often very pregnant with meaning (characteristic) – often very useful in determining the choice of the remedy – and regard them almost as a necessary part of their condition, almost as health, the real feeling of which they have well-nigh forgotten in the sometimes fifteen or twenty years of suffering, and they can scarcely bring themselves to believe that these accessory symptoms, these greater or less deviations from the healthy state, can have any connection with their principal malady.^[2]

While tracing the picture of chronic disease there are many minute complaints for many years and patient becomes habituated for that, so patient does not mention these in front of physician he thinks these are minor troubles and no need to share with physician. So in condition physician have to ask more about these minor troubles because these are very important for deciding the similimum. These minor troubles often show connection with the main remedy.

APHORISM § 96

Besides this, patients themselves differ so much in their dispositions, that some, especially the so-called hypochondriacs and other persons of great sensitiveness and impatient of suffering, portray their symptoms in too vivid colors and, in order to induce the physician to give them relief, describe their ailments in exaggerated expression.¹

¹ A pure fabrication of symptoms and sufferings will never be met with in hypochondriacs, even in the most impatient of them – a comparison of the sufferings they complain of at various times when the physician gives them nothing at all, or something quite un medical, proves this plainly; – but we must deduct something from their exaggeration, at all events ascribe the strong character of their expressions when talking of their ailments becomes of itself an important symptom in the list of features of which the portrait of the disease is composed. The case is different with insane persons and rascally feigners of disease.^[2]

Physician has to meet with many dispositions of patient while taking the case like, hypochondriac, hypersensitive, impatient. The difficulty in this case they exaggerate his complaints for getting prompt relief, for attention to prescribe good medicine. The only way to deal with such patients is to prescribe placebo so that physician can get the true picture of the disease.

APHORISM § 97

Other individuals of an opposite character, however, partly from indolence, partly from false modesty, partly from a kind of mildness of disposition or weakness of mind, refrain from mentioning a number of their symptoms, describe them in vague terms, or allege some of them to be of no consequence.^[2]

But opposite of these above there are some patients, they did not feel importance to give complete information of disease because of indolence, false modesty, mildness, poor memory.

APHORISM § 98

Now, as certainly as we should listen particularly to the patient's description of his sufferings and sensations, and attach credence especially to his own expressions wherewith he endeavors to make us understand his ailments – because in the mouths of his friends and attendants they are usually altered and erroneously stated, – so certainly, on the other hand, in all diseases, but especially in the chronic ones, the investigation of the true, complete picture and its peculiarities demands especial circumspection, tact, knowledge of human nature, caution in conducting the inquiry and patience in an eminent degree.^[2]

To get the pure, true picture of the chronic disease physician has the quality, tact, knowledge of psychology, patience.

APHORISM § 99

On the whole, the investigation of acute diseases, or of such as have existed but a short time, is much the easiest for the physician, because all the phenomena and deviations from the health that has been put recently lost are still fresh in the memory of the patient and his friends, still continue to be novel and striking. The physician certainly requires to know everything in such cases also; but he has much less to inquire into; they are for the most part spontaneously detailed to him.^[2]

In case of acute diseases, the investigation is much easier and less laborious than chronic diseases because of all alterations in health are fresh in mind of patient. So all important characteristic things in diseases physician can get easily.

APHORISM § 100

In investigating the totality of the symptoms of epidemic and sporadic diseases it is quite immaterial whether or not something similar has ever appeared in the world before under the same or any other name. The novelty or peculiarity of a disease of that kind makes no difference either in the mode of examining or of treating it, as the physician must any way regard to pure picture of every prevailing disease as if it were something new and unknown, and investigate it thoroughly for itself, if he desire to practice medicine in a real and radical manner, never substituting conjecture for actual observation, never taking for granted that the case of disease before him is already wholly or partially known, but always carefully examining it in all its phases; and this mode of procedure is all the more requisite in such cases, as a careful examination will show that every prevailing disease is in many respects a phenomenon of a unique character, differing vastly from all previous epidemics, to which certain names have been falsely applied – with the exception of those epidemics resulting from a contagious principle that always remains the same, such as smallpox, measles, etc.^[2]

Hahnemann says in this aphorism about in cases of epidemic and sporadic diseases. He says every epidemic or sporadic disease has an peculiarities although they had been appeared in

past, so p-physician has to consider each epidemic and sporadic disease as a new disease and has to investigated completely.

APHORISM§101

It may easily happen that in the first case of an epidemic disease that presents itself to the physician's notice he does not at once obtain a knowledge of its complete picture, as it is only by a close observation of several cases of every such collective disease that he can become conversant with the totality of its signs and symptoms. The carefully observing physician can, however, from the examination of even the first and second patients, often arrive so nearly at a knowledge of the true state as to have in his mind a characteristic portrait of it, and even to succeed in finding a suitable, homeopathically adapted remedy for it.^[3]

For the treatment of epidemic disease Hahnemann advises to physician for selecting the perfect homoeopathic medicine, physician has to investigate several patients of similar disease then he make a collective totality of symptom of epidemic disease. Only this is way of curing epidemic diseases rapidly in short time by which physician can find the perfect homoeopathic medicine.

APHORISM§102

In the course of writing down the symptoms of several cases of this kind the sketch of the disease picture becomes ever more and more complete, not more spun out and verbose, but more significant (more characteristic), and including more of the peculiarities of this collective disease; on the one hand, the general symptoms (e.g., loss of appetite, sleeplessness, etc.) become precisely defined as to their peculiarities; and on the other, the more marked and special symptoms which are peculiar to but few diseases and of rarer occurrence, at least in the same combination, become prominent and constitute what is characteristic of this malady.¹ All those affected with the disease prevailing at a given time have certainly contracted it from one and the same source and hence are suffering from the same disease; but the whole extent of such an epidemic disease and the totality of its symptoms (the knowledge whereof, which is essential for enabling us to choose the most suitable homoeopathic remedy for this array of symptoms, is obtained by a complete survey of the morbid picture) cannot be learned from one single patient, but is only to be perfectly

deduced (abstracted) and ascertained from the sufferings of several patients of different constitution.

1 The physician who has already, in the first cases, been able to choose a remedy approximating to the homoeopathic specific, will, from the subsequence cases, be enabled either to verify the suitability of the medicine chosen, or to discover a more appropriate, the most appropriate homoeopathic remedy. ^[3]

APHORISM§103

In the same manner as has here been taught relative to the epidemic disease, which are generally of an acute character, the miasmatic chronic maladies, which, as I have shown, always remain the same in their essential nature, especially the psora, must be investigated, as to the whole sphere of their symptoms, in a much more minute manner than has ever been done before, for in them also one patient only exhibits a portion of their symptoms, a second, a third, and so on, present some other symptoms, which also are but a (dissevered, as it were), portion of the totality of the symptoms which constitute the entire extent of this malady, so that the whole array of the symptoms belonging to such a miasmatic, chronic disease, and especially to the psora, can only be ascertained from the observation of very many single patients affected with such a chronic disease, and without a complete survey and collective picture of these symptoms the medicines capable of curing the whole malady homeopathically (to wit, the antipsorics) cannot be discovered; and these medicines are, at the same time, the true remedies of the several patients suffering from such chronic infection.

APHORISM§104

When the totality of the symptoms that specially mark and distinguish the case of disease or, in other words, when the picture of the disease, whatever be its kind, is once accurately sketched, the most difficult part of the task is accomplished. The physician has then the picture of the disease, especially if it be a chronic one, always before him to guide him in his treatment; he can investigate it in all its parts and can pick out the characteristic symptoms, in order to oppose to these, that is to say, to the whole malady itself, a very similar artificial morbid force, in the shape of a homeopathically chosen medicinal substance, selected from

the lists of symptoms of all the medicines whose pure effects have been ascertained. And when, during the treatment, he wishes to ascertain what has been the effect of the medicine, and what change has taken place in the patient's state, at this fresh examination of the patient he only needs to strike out of the list of the symptoms noted down at the first visit those that have become ameliorated, to mark what still remain, and add any new symptoms that may have supervened.

1 The old school physician gave himself very little trouble in this matter in his mode of treatment. He would not listen to any minute detail of all the circumstances of his case by the patient; indeed, he frequently cut him short in his relation of his sufferings, in order that he might not be delayed in the rapid writing of his prescription, composed of a variety of ingredients unknown to him in their true effects. No allopathic physician, as has been said, sought to learn all the circumstances of the patient's case, and still less did he make a note in writing of them. On seeing the patient again several days afterwards he recollected nothing concerning the few details he had heard at the first visit (having in the meantime seen so many other patients laboring under different affections); he had allowed everything to go in at one ear and out at the other. At subsequent visits he only asked a few general questions, went through the ceremony of feeling the pulse at the wrist, looked at the tongue, and at the same moment wrote another prescription, on equally irrational principles, or ordered the first one to be continued (in considerable quantities several times a day), and, with a graceful bow, he hurried off to the fiftieth or sixtieth patient he had to visit, in this thoughtless way, in the course of that forenoon. The profession which of all others requires actually the most reflection, a conscientious, careful examination of the state of each individual patient and a special treatment founded thereon, was conducted in this manner by persons who called themselves physicians, rational practitioners. The result, as might naturally be expected, was almost invariably bad; and yet patients had to go to them for advice, partly because there were none better to be had, partly for fashion's sake. ^[3]

PURPOSE OF CASE TAKING IN HOMOEOPATHY -

- For knowledge of the disease
- To recognize the pure dynamic state of the patient.
- To detect the totality of symptoms.
- To understand the type of the disease therefore it is acute or chronic, curable or incurable.
- To detect the cause of the disease.
- To detect the development of the symptoms.
- To analyze and evaluate the case.
- To obtain important characteristic, peculiar symptoms for repertorization.
- For prognosis and nosological diagnosis of the case.
- For miasmatic diagnosis.

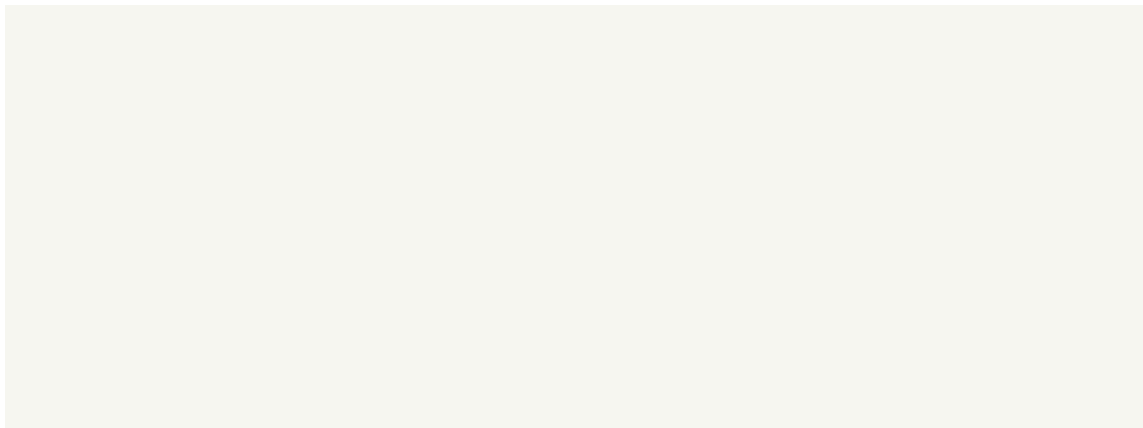
SUMMARY

Case taking or case receiving is a distinctive skill of obtaining into discussion examination and gathering details from patient also from attendants to characterize the patient as a person and the disease.

Each case is distinctive in all consideration only true individualized perspective can investigate the real picture and assist a physician to complete the totality. Each individual person is distinct in health and also in disease and so every case should be investigate individually and considering the peculiar, characteristic, unique expressions both in health and diseases.

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