

Todd Rowe

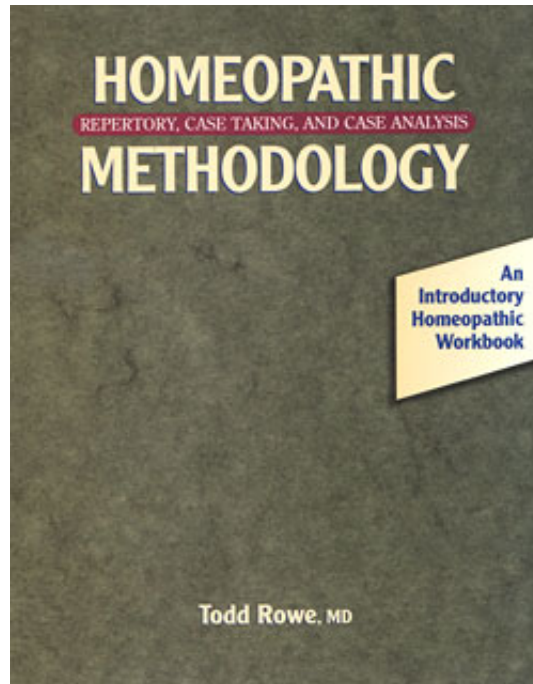
Homeopathic Methodology

Extrait du livre

[Homeopathic Methodology](#)

de [Todd Rowe](#)

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LESSON ONE

Casetaking Practical Aspects, PART ONE

Introduction

It has been said that a case well taken is a case half-cured. Casetaking is one of the central pillars on which homeopathic practice stands. A good case stands out and calls out the remedy. Consistent and reliable prescribing comes from the ability to take a good case. Lack of success in homeopathic prescribing is most often associated with poor casetaking rather than a lack of knowledge of materia medica or an inability to properly analyze the case.

There is no right or wrong way to take a case. Casetaking is unique to the individual. It is something that continuously evolves, even after many years of practice. There is always a next step to better casetaking. The best way to learn casetaking is to practice it. Observation of professional homeopaths taking cases is also helpful.

In the *Organon* Aphorism 83 Hahnemann describes the keys to casetaking: "This individualizing examination of a disease case.. demands nothing of the medical arts practitioner except freedom from bias and healthy senses, attention while observing and fidelity in recording the image of the disease."

First Aid/Acute/Constitutional

First aid is emergency aid or treatment given to someone injured or suddenly ill, often before medical services can be obtained. Generally, the condition comes on suddenly and violently.

The allopathic definition of acute is a crisis of severe symptoms, having a short course with a prodrome (forewarning) and a zenith, which is self-limited by cure or death. The homeopathic definition of acute is a self-limited illness with symptoms of a different character from the patient's usual illness. These symptoms are stronger and have more distinguishable characteristics or modalities. During the acute crisis the chronic symptoms usually go into remission. Acute diseases arise from specific causes cooperating with susceptibility. When there is an epidemic, only some people get sick, even though most people are exposed to the bacteria or virus. This is caused by the innate resistance or lack of susceptibility in certain people.

The allopathic definition of chronic is a series of symptoms that persist for a long time with very little or extremely slow progression. The homeopathic definition of chronic is a period of prodrome followed by a period of progress that can

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be quiescent but when aroused leaves the patient worse than before and with no tendency to recover if untreated. Hahnemann felt that most chronic diseases stem from the presence of miasms (see Lesson Ten).

Casetaking is similar for all three types of prescribing. What differentiates first aid casetaking, acute casetaking, and constitutional case taking is the depth and intensity with which the case is pursued. The difference is in degree and not in kind. First aid cases can generally be taken within a matter of minutes. An acute case often takes 15-25 minutes to complete. A constitutional case will take from 90-120 minutes.

In acute casetaking, the intention is to find the totality of symptoms that are departures from the constitutional state. The goal is to accelerate the process of healing and to reduce the risk of any lingering effects from the illness. Acute case-taking is often somewhat easier than constitutional casetaking because the symptoms are fresher and more vivid in the patient's mind. Hahnemann states in Aphorism 82: "Some distinction is to be made between sufferings that are acute, rapidly arising diseases and those that are chronic. In acute diseases, the principal symptoms become more rapidly conspicuous and discernible to the senses so that a much shorter time is needed to note down the disease image. Since most of the acute disease presents itself spontaneously, there is much less that needs to be asked. Gradually advanced chronic disease of several years duration are discovered far more laboriously."

Occasionally, acute cases can be confused with constitutional cases. For example, consider a case of a young man with chronic migraine headaches. A particular episode of the headaches are treated acutely with a resolution of symptoms, but then the headaches recur. A better treatment would be to take the constitutional case, treating the whole person and curing the underlying condition. With a case that is a mixture of acute and constitutional symptoms or is unclear, it is best to treat the person constitutionally or to wait until the case becomes more clear. The best prescription is often to wait.

Observation

One of the most critical aspects of good casetaking is careful observation. This has been much neglected in allopathic medicine. Medical doctors are taught to rely far more on laboratory studies or sophisticated diagnostic imaging techniques than the powers of careful observation. This was the one skill, coupled with the "power of deduction," that brought Sherlock Holmes to the level of greatness. In cases of children or cases of adults who cannot talk, careful observation may be the only way of uncovering the case.

Observation is defined as the act of perceiving or noticing. It involves not only paying attention to what is presented, but also to how it is presented. It is not just the song, but also the dance. We need to listen to the language that the patient uses.

What are the words that stand out or come up over and over in the case? What is their tone of voice? How do they communicate with you? How open or closed are they with you? How do they react to your presence? What is the quality of their emotions or mood? Is their affect congruent with their mood (some people may smile, representing their affect in the moment, but you sense that behind that smile is much sadness, representing their underlying mood)? Are they provocative? Are they present with you, or are they dissociated or only partly there? Are they on time?

We also want to observe the physical aspects of the patient. What is the texture or tone of their skin? What is their complexion like? Are their eyes dilated or constricted? Are they neat and well dressed or slovenly? How is their eye contact? What is the quality of their hand shake? How are they breathing? Are they perspiring? If so, where and how much? What kind of movements do they make during the case, and what does this tell you about them? Are they restless? What is their body language saying (some people may say one thing, but their body language is revealing something different on a deeper level)? What is their general energy level like? How is their posture? How do they walk in? What is their gait like? What are they doing when you first greet them? Are they busy doing work or reading *People* magazine? How do they react to the environment? How sensitive are they (e.g., someone who startles at the sound of a distant phone)? Are there any obvious physical abnormalities? What type of clothes are they wearing? What type of colors or patterns are found in their clothes?

It is often the little observations that lead to the prescription of the right remedy. It is important to pay attention to the details. The philosopher Spinoza once said: "God is in the details." Hahnemann states in the *Organon* Aphorism 95:

Chronically ill patients become so accustomed to their long sufferings that they pay little or no attention to the smaller, often very characteristic accompanying befallments which are so decisive in singling out the remedy. They view them as almost a part of their natural state, nearly mistaking them for health, whose true feeling they have fairly well forgotten during the course of their fifteen to twenty year long suffering. It hardly occurs to them to believe that these accompanying symptoms, these remaining smaller or greater deviations from the healthy state, could have a connection with their main malady.

Observations of oneself as a homeopath are also critical in taking a case.

Setting

It is important to pay attention to the setting of casetaking. Observation in the

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home environment is helpful, although not always practical. This provides a view of someone in their natural setting, which can give information about the person.

Whatever setting is used, it should be comfortable for someone to talk freely. It is only when someone is comfortable and trusting that they begin to open up and share their innermost thoughts and feelings. The setting must permit them to feel unhurried and listened to. If there is a waiting area, it is best to greet people there. What they are doing while they are waiting gives useful information about them.

The area for the interview should be private. It should be quiet, with minimal distractions. There should be no religious pictures present and no discernible odors. The temperature should be comfortable. It is best to sit directly in front of them if possible. Some homeopaths choose to sit behind a desk, for ease of access to books and repertory. This can have the effect of distancing yourself from the patient.

Another important aspect of setting is your own internal comfort. You should feel comfortable as a homeopath, or you won't be able to successfully take the case. This includes making sure that you are well rested and unhurried. Take as much time as you need. This is particularly important as a beginning homeopath.

How To Begin

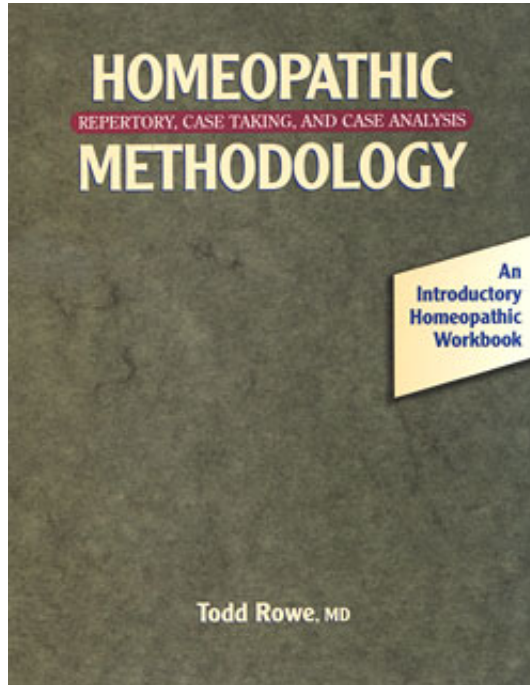
There is no right or wrong way to begin. This is very individual and you have to develop your own style. We must have a sense of trust that the vital force will express itself in a way that is best for the patient, if we are open to it. It may be necessary to set them at ease and make them comfortable before you start. With acute case-taking you have to be more directed and focused than with constitutional case-taking. Acute cases are less in-depth because psychological, emotional, and mental factors often play less of a role.

It is best to say very little at the start of a case. The most common mistake for beginning homeopaths is talking too much. Once you get them started, there will be time for more directed questioning later in the interview. Leading questions narrow and shut down what would otherwise come up spontaneously. An example of a leading question would be: "Do you have problems with constipation, yes or no?" The best symptoms in a case are the ones that come spontaneously and without specific questioning. Hahnemann states in the *Organon* in Aphorism #84: "The physician keeps silent, allowing them to say all they have to say without interruption, unless they stray off to side issues." Later in Aphorism #87 he says: "The physician should never be guilty of seducing the patient into giving false answers and making false statements with any leading questions of suggestions."

It is important to convey to someone that you are not only interested in what brings them to you but also who they are as a person. Examples of introductory statements include:

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- Tell me both about what brings you here and about yourself.
- Tell me everything.
- Tell me your story.



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