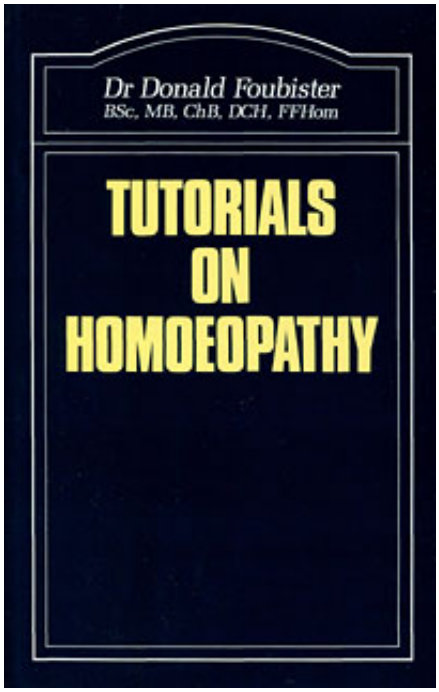
Donald Foubister
Tutorials on Homoeopathy - Imperfect copy

Reading excerpt

Tutorials on Homoeopathy - Imperfect copy
of Donald Foubister
Publisher: Beaconsfield



http://www.narayana-verlag.com/b13722

In the Narayana webshop you can find all english books on homeopathy, alternative medicine and a healthy life.

Copying excerpts is not permitted.
Narayana Verlag GmbH, Blumenplatz 2, D-79400 Kandern, Germany
Tel. +49 7626 9749 700
Email info@narayana-verlag.com
http://www.narayana-verlag.com

Chapter 7

Paediatric Case-Taking

One of the reasons why there is a reluctance to get to grips with case-taking is that Hahnemann's theory of chronic disease is at present neither fully accepted nor completely rejected, and there is no alternative comprehensive theory to replace it. Every experienced homoeopath recognises in his patients the images of Hahnemann's Psora, Sycosis and Syphilis, but as a rule not so accurately or consistently that this can be made the basis of his everyday practice. It is, however, generally agreed that the aim of homoeopathic treatment of chronic ill-health, apart from dealing with the end results of disease, is to treat the patient. The difference between an ordinary medical history and a 'homoeopathic' history is that the object of the former is to serve as a pointer to the pathological diagnosis, whereas the latter extends beyond this and includes information about the patient which may be utilised in the selection of similar remedies. The place of homoeopathy or other forms of treatment can best be assessed from the pathological diagnosis, but the application of homoeopathic treatment depends on a careful appraisal of the individual patient, on what might be termed a 'diagnosis of the patient'.

Special Features of Paediatric Case-taking

The chief difference between paediatric case-taking and that of older age groups is that the patient has to be regarded against a background of a norm which not only differs from the adult norm, but changes considerably from infancy to puberty. The mother, or someone with an intimate knowledge of the child, is the best person to give the history in infancy and early childhood. Even up to puberty the child does not readily look at himself objectively. An obvious advantage of having the mother is that she is able to give an account of the family history, has first-hand knowledge of pregnancy and labour, and has usually been in a position to observe any outstanding episodes in the child's early life, such as a severe reaction to vaccination, injury, severe acute infection or an

© Narayana Verlag, Blumenplatz 2, D-79400 Kandern, www.narayana-verlag.de

emotional upset. This does not mean to imply that the older child's evidence should be discarded, but even in apparently obvious things such as cravings or aversions to foods, the mother can usually give more accurate information.

The Mother's **History**

The mother should be allowed to tell the story in her own way without interruption, just as she might give her own history. Only in this way may certain invaluable clues be disclosed which might otherwise be lost. The emphasis given by the mother to various symptoms is noted in the same way that an adult history is appropriately underlined. The importance of obtaining really definite symptoms cannot be stressed too strongly.

Dr Tyler used to say in regard to homoeopathic case-taking that the longer she lived the less she wrote down. The homoeopathic materia medica is so vast, and there is so much overlapping, that the best way to accurate prescribing is to select really definite symptoms characteristic of the individual; one of the remedies which adequately covers these is likely to cover the rest of the case.

Classification of Constitutional Remedies

It is useful to keep in mind a rough classification of the ways in which similar remedies are used in constitutional treatment. I think of these as comprising three overlapping groups:

1) Remedies prescribed on the basis of a similarity between the psychosomatic make-up of the patient and the drug picture, such as Sepia or Sulphur.
2) Remedies administered with the object of antidoting some adverse influence of the past, including family history, the period of gestation, labour, and outstanding post-natal events.
3) 'Pathological', etc. This group comprises pathological remedies, the bowel nosodes, autogenous potencies, sarcodes, hormones, and vitamins. In history-taking we are mainly concerned with the first two groups.

Generals and Particulars

Whilst making a note of the history it is necessary to clearly separate symptoms pertaining to the patient, such as a craving for ice-cream or a tendency to sweaty feet, from those relating to the illness. If a child suffers from asthma, the group of symptoms relating to an acute attack must be kept separate from the symptoms reflecting the psychosomatic make-up of the patient. A remedy which covers the attack will abort it,

© Narayana Verlag, Blumenplatz 2, D-79400 Kandern, www.narayana-verlag.de

but no matter how often the attacks are cured, the tendency to have them is unaltered until the patient himself is treated constitutionally.

Interrogation of the Mother

The mother's history is clarified by questions on points she has raised, such as how definite a symptom is, and whether it can be taken to be outside the average pattern or not; if not, it is discarded as a repertorising symptom. Next, the picture is filled in by systematic questioning, and here arises a problem. Too long a list of questions leads to boredom and failure to achieve its ends, and too short a one could omit important symptoms and also end in failure. Whatever plan of questioning is adopted, it can only be effective with a background of knowledge of the materia medica.

If the following four headings are kept in mind - 'Foods', 'Environment', 'Mentals', and the 'Serial History' - sufficient information on which to base prescriptions will almost always be found.

Repertorisation

From the first three, the salient psychosomatic features of the patient can be delineated, and Dr Leon Vannier has pointed out that the most valuable and certainly the most useful symptoms on which to repertorise are those which he terms 'entrusted characteristics of the individual'. That is to say, symptoms which are not apparently related to hereditary or environmental influences. For instance, a craving for salt in a child whose siblings do not crave it, or a sensitivity to music in one child of an unmusical family, can be taken as an 'entrusted characteristic'. While it might be difficult or impossible to prove that neither hereditary nor environmental influences played a part in its causation, it is nevertheless an invaluable criterion to the selection of symptoms for repertorisation.

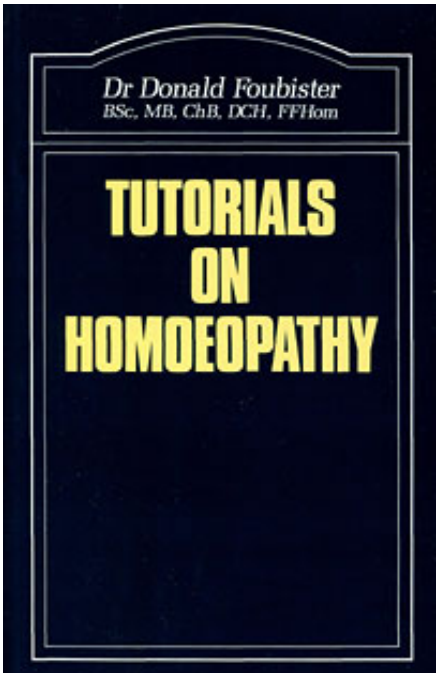
In dealing with the four symptom groups, only really definite symptoms should be taken and then they must be considered against what is normal for a child of the same age group.

Rather than deal with every detail, a selection of some of the main symptoms are considered here, with the object of pointing out the way in which symptoms are evaluated.

Foods

The mother should be given to understand clearly that what we are after is information about any definite cravings or aversions to food or drink. It is wise to run through a list of foods rapidly, so that she may pick on one or more items which stand out; otherwise she may waste time trying to be precise about irrelevant details.

© Narayana Verlag, Blumenplatz 2, D-79400 Kandern, www.narayana-verlag.de



Donald Foubister

Tutorials on Homoeopathy - Imperfect copy

224 pages, pb
publication 2001

order

More books on homeopathy, alternative medicine and a healthy life www.narayana-verlag.com