

Shore / Gray

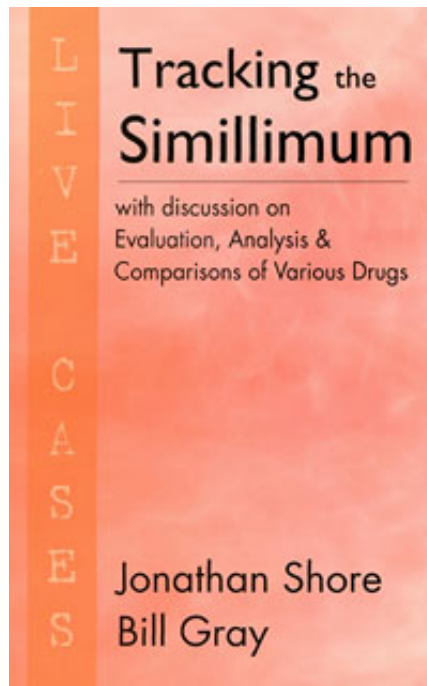
Tracking the Simillimum - Live Cases

Leseprobe

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von [Shore / Gray](#)

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INTRODUCTION

This is a continuation of the seminar from last year (1988, The Netherlands.)

CASE-TAKING

B: We will take a case and we will discuss point by point: -
Which is a symptom and which is not.

-How to decide which symptoms are important to use and which are not, in that particular case.

This is because in taking the totality of all of the symptoms, we will probably not get much of a picture that will be clear to people. But if we start analyzing it carefully we can eliminate certain things and include other things until we get it down to the basic picture: that is, the patient; it can't be cut down any further without violating who that patient is. Then we can go to the process of repertorization and decide what the remedy is.

JONATHAN SHORE

B: Jonathan is one of the main faculty members in the Hahnemann College of Homoeopathy. He is a very enthusiastic, zealous and energetic member. At the same time, he is a very wisely balanced practitioner, between his understanding of essences and his understanding of how to use the data, and to put it all together in a balanced fashion.

He has an extensive history prior to homoeopathy: oriental medicine, acupuncture and other aspects of oriental medicine. So he can also bring in that kind of focus. Now he has been primarily focused on homoeopathy for at least eight years.

B: Jonathan is one of the founders and one of the key movers in the very beginning of the Hahnemann College of Homoeopathy.

I think he should be proud of the contribution he has made to that. If it weren't for about two or three people, including him, I don't think it would ever have happened. It has been a very big effort and it is having increasing effects in the United States. So it is reaping its own reward.

J: Maybe I will just say a few words about myself. I will keep it short, but I am not well-known. I am Jonathan Shore and I was born in Cape Town (South Africa) in 1943. I graduated from medical school there in 1968. After that, I gave up medicine. I found it was just no good and I decided that I would go in search of health, because I found out that I had learned everything except what it was to be healthy.

J: I took a back-pack and travelled through the Middle East and then went to America. I didn't tell anyone that I was a doctor. I pretended not to be and I worked in a residential treatment centre for psychotic adolescents as a child care worker, for a few years. But what I found was that my interest really was in medicine. I couldn't escape from it and as hard as I tried, it seemed to be my fate.

J: So I looked around for things to practice with. I came upon Chinese medicine and I also used the pendulum for some things. People who used the pendulum used homoeopathic remedies, so I started to read about homoeopathic remedies. I read Kent and I was very impressed; it seemed that he was an honest, God-fearing man. He was claiming to be able to do certain things. So I started to investigate and for years I didn't get any result. I would use the pendulum and would give this and that remedy.

J: Then one day I was in a cafe somewhere in the south of California and there was another man in line in front of me, who had the same name. His name was Shore. We sat down and started to talk and he had studied some homoeopathy. He said: "You have to use the repertory." I said: "The repertory, forget it, who can use the repertory ..." He said: "You have to use the repertory."

J: So when the next case came along I sat down and I repertorized the case; it turned out to be Sulphur. Of course I gave Sulphur, and it was a miracle! It was a sixteen year old boy, he had had asthma his whole life; I gave him these few little pellets and

his asthma was gone! I cried, it was such a striking thing. You see, I suppose that when God wants someone to be a homoeopath, he gives them a sort of encouragement. Of course after that, it wasn't so easy. But I was very serious, I read Kent and studied my cases. Then, I think it was in 1978, Vithoukaskas came. I heard him talk and I thought: "Now here is something." Then in 1981 I studied with Bill Gray.

J: I was doing a lot of acupuncture at that time. I was a serious student, I lived in Taiwan for three months and I went to medical school there and studied acupuncture. But I found that in the end I got better results with homoeopathy. So I stopped practicing acupuncture and just concentrated on homoeopathy. That is what I have been doing.

DEFINITION OF HEALTH (by Bill Gray)

B: There has to be a frame of reference in order to decide, when a patient says something. For instance the patient says: "I am a political activist." What do you need to know?

A: What does she do as a political activist?

B: She marches in the street and complains against inhumane treatment of animals.

B: Is it unhealthy to be a political activist? Not in itself. Let me describe the definition of health.

This definition of health is a critical piece of information that first needs to be known, in order to be able to treat:

-Goal. Why are you treating people? What is your goal?

-Treatment effective. It is your way of knowing whether your treatment (homoeopathy, or other treatment), is being effective or not.

I attribute the definition of health completely to George Vithoukaskas. In the history of homoeopathy-Hahnemann, Hering, Kent: nobody had as clear an understanding of what our goal is, what we are actually trying to accomplish. I think you will agree with me, when you think about the definition of health (the way

Vithoulkas puts it), it is (in spite of everything else that he has contributed to homoeopathy) probably the most significant and lasting contribution that he has made.

If you had to put the definition of health in one word, it is: freedom, freedom from limitations of freedom. We recognise in homoeopathy the totality of the person; so it is not just the physical organism, or psychological organism. There are physical, emotional and mental planes.

-To the extent that our therapies are focussing on one plane (as in allopathic medicine) and not on the other - the rest of the person, we are missing the point.

-To the extent that we are purely psychotherapists, without paying attention to the physical plane, we are also missing the point.

A. PHYSICAL

The definition of health, on the physical plane, is freedom from having our attention bound by the presence of any physical state or feeling on the physical plane. We can have pain, or tingling, or numbness, or paralysis, or weakness, or twitchings, or hunger, or any other physical sensation. The presence, or absence of the symptom in itself, is not a measure of whether that person at that moment is well, or sick. It is what it does to their attention, it is whether they are focused on it.

For instance you have haemorrhoids and you are sitting on a hard chair; the presence of the haemorrhoids doesn't mean that you are sick, that there is something inherently wrong. But if it is hard for you to pay attention, then that is a limitation of your freedom as a whole being.

In that sense the physical symptom becomes what we call pathology, significant symptomatology: something that we use.

B. EMOTIONAL

The definition of health on the emotional plane is similar; it is freedom from being bound by any particular (or even range of) emotional state(s).

Getting angry is not in itself a sign of illness. It is an appropriately healthy thing to occur, in certain circumstances. If there is an injustice that is done, then the anger is appropriate. But the key to the definition of health on the emotional plane here is that that person, when the moment is over:

-Can choose to let go of that anger and be free of it. -

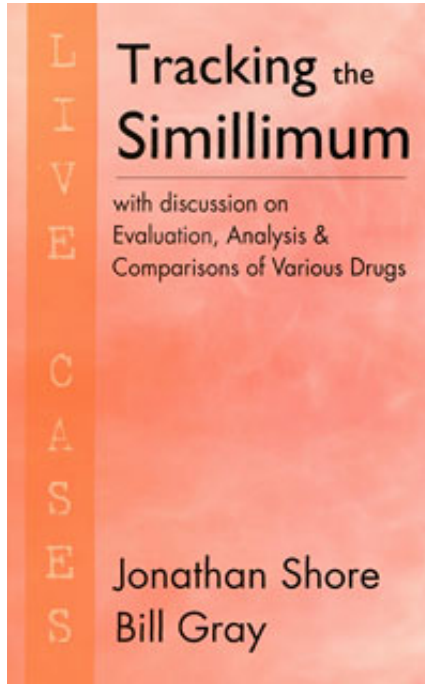
Can choose to stay in it.

For instance the boss asks you (the employee) at the job, to work over the weekend, he tells you just now. And you were planning to come to the seminar and that is unfair. Naturally you get angry. Getting angry in that circumstance in itself, is not a sign of pathology. Now the situation is, you have got a problem. The problem has to be resolved. So you get angry, you discuss it with the boss. The conflict is resolved and the boss finally says: "Oh, I see, I understand, you are right, it is unfair. Go ahead and go to the seminar. I will work something out with somebody else."

What happens with your anger is an important measure then, of the level of health you have. If you have the freedom to leave that anger, you also have the freedom to stay with the anger. If you are healthy, you have the freedom to stay with that anger, because that is a free choice. At first it sounds as though there is only one side to the choice: after it is resolved, you drop the anger. That is the natural, logical thing. But (if you are free) you can choose to stay with it anyway.

Freedom of choice is meaningless, unless both choices are really possible. It is not a choice, if there is really only one choice. "A choice that you can't refuse" (as they said in the Godfather). A choice you can't refuse, is not freedom. Freedom implies that you are free to make the choice, either way. Whether to stay with that anger, or not.

What I would look for then is, if you really choose to come here (you are not here against your will) and you want to pay attention, but you find yourself stuck in that anger. That is what is going on in your mind, and important things that you want to learn are not filtering, you are not listening as carefully as you would. To me that would be a limitation of freedom, a pathology. In that case there



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