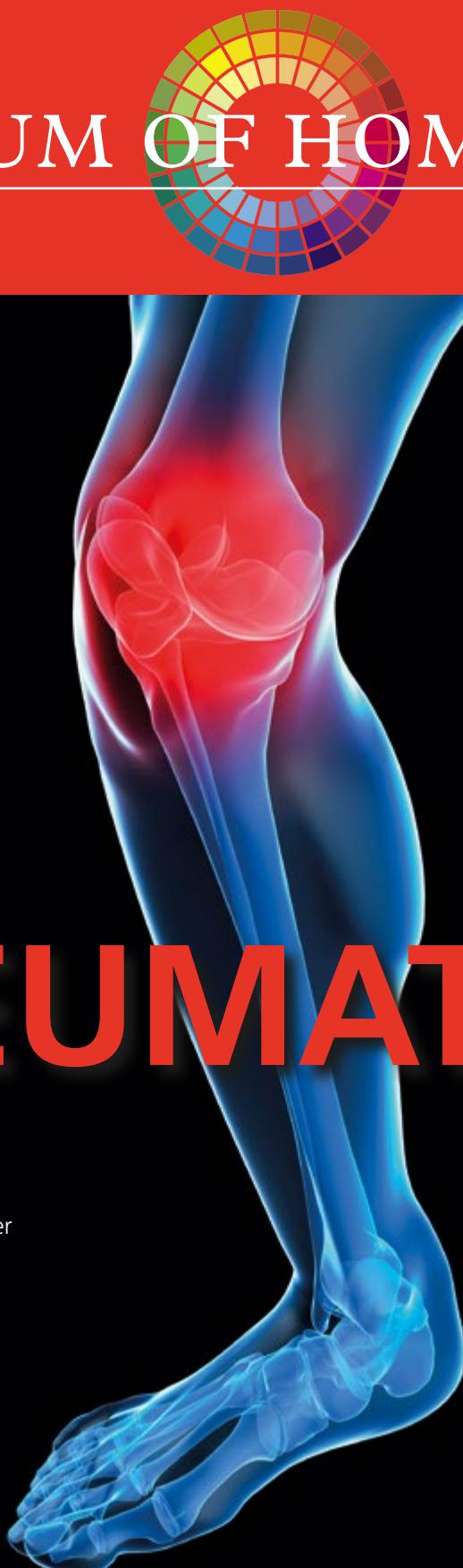


# SPECTRUM OF HOMEOPATHY

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## RHEUMATISM

Jürgen Hansel  
Urvi Chauhan  
Artur Wölfel  
Tali Levi  
Heidi Brand & Norbert Groeger  
Massimo Mangialavori  
Franz Swoboda  
Heinz Wittwer  
Anton Kramer & Jan Scholten  
Christina Ari  
S. Chidambaranathan  
Reinhard Flick  
Peter Gregory

# EDITORIAL

*Dear readers,*

Almost 10 of the German population suffers from rheumatism, a widespread and multifaceted disease. Rheumatic disorders include around 240 various illnesses with differing symptom pictures and treatment modalities. The number of homeopathic remedies that can be used to treat rheumatism is even larger. We have chosen a selection of remedies to highlight certain trends, at the same presenting various homeopathic approaches in the treatment of patients with rheumatism.

Obviously there is a number of classic homeopathic remedies for rheumatism which are frequently used in practice. One of these is *Ruta graveolens*. Jürgen Hansel's case of incipient rheumatoid arthritis shows how the remedy picture of Rue encompasses not just the physical symptoms of chronic polyarthritis but also the typical personality traits of rheumatism patients. In the Rue remedy family, *Ruta* is assigned to the cancer miasm. It is therefore no coincidence that the contributions of our authors repeatedly refer to this miasm. The pain, the restricted movement, and the deformation of the joints indicate, according to *Tali Levi*, rigid thought patterns and inner fixations: „The blockage starts in the head“ is her pithy description.

Artur Wölfe's patient with lupus erythematoses demonstrates another aspect of the cancer miasm. Her basic attitude is: „Fitting in with the wishes of others. I'm a perfectionist.“ Since starting treatment with *Carcinosinum* she has been able to stop all the immunosuppressants and biotechnology treatments, and the severe collagenosis involving multiple organs has now been in remission for over five years. A similarly positive result is seen in Urvi Chauhan's case of seronegative polyarthritis with the Papaveraceae plant family remedy from the cancer miasm. *Opium* causes the unbearable joint pains to recede and permits previously repressed feelings to be expressed.

Taciturnity, emotional repression, an emphasis on rational understanding and a tendency to perfectionism are personality traits frequently found in rheumatism patients and Massimo Mangialavori says this can point to the Primrose family: „They tend not to be open but they suffer greatly and do not easily show themselves.“ If the reserve and the lack of emotional expression go deeper to the point of isolation and depression, and if this state of inner rigidity is expressed in painful stiffness and deformation of the joints, a precious stone remedy should generally be considered, specifically *Lapis lazuli*. This tip comes from Franz Swoboda following his long odyssey through the *materia medica*. Only when his patient's joints are already severely deformed and after several operations can he find the right homeopathic path with the help of her dream of starving.

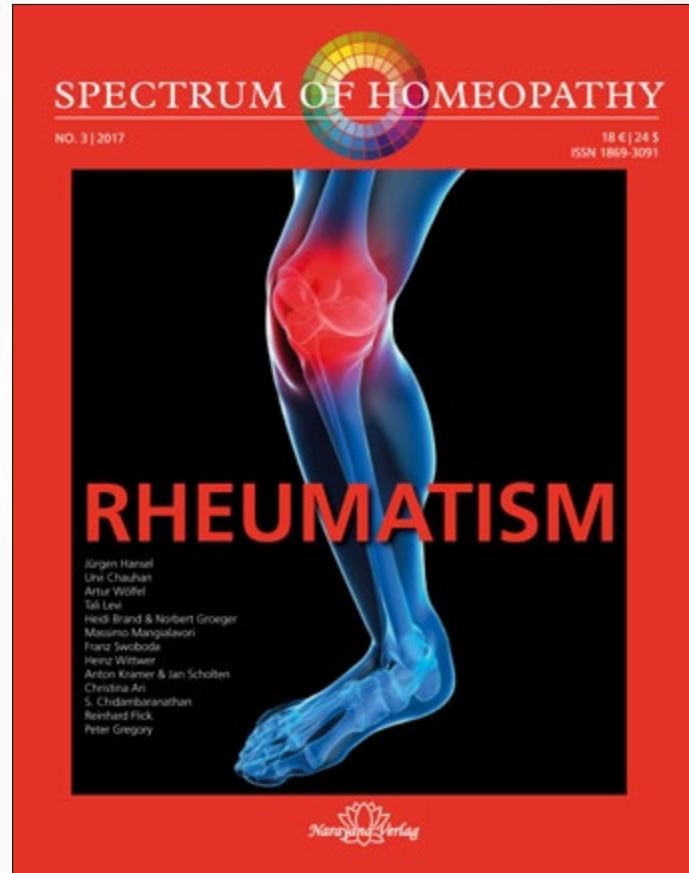
Even if many case histories in this issue of SPECTRUM share common characteristics, there are also some very different patterns found in rheumatism patients, such as *Tali Levi*'s patient who experiences unbearable pain all over her body after the death of her mother. In her primitive dependence on her mother she is like a foetus. She describes her pain as something that restricts you like a rubber band, preventing any independent movement. Here we can also recognize a specific correspondence between the inner state and the physical symptoms. In Heinz Wittwer's patient too, the mother-daughter relationship is characterised by dependence, here experienced as restrictive. She also experiences her illness in terms of restriction. The healing in such cases involves an inner process of clarification, as shown by Norbert Groeger and Heidi Brand in their case of *Chara intermedia*, an alga with purifying power.

The short path to the simile is described by the vet Peter Gregory, who offers an overview of homeopathic 'rheumatism remedies' with his examples of limping dogs. The classic rheumatism remedy is of course *Rhus toxicodendron*, for which Reinhard Flick provides a case history. S. Chidambaranathan presents his experience with *Bryonia* for joint complaints in connection with a raised anti-streptolysin titre. The Lanthanides have also proved to be of great use when the rheumatic illness is based on autoimmune disturbance. In the practice of Jan Scholten and Anton Kramer, Neodymium salts are very often prescribed. Hormonally-caused rheumatic complaints, especially in the menopause, frequently react well to the sarcode *Folliculinum* according to Christina Ari. The tried-and-tested remedies obviously work best when the similarity to the person holds at all levels.

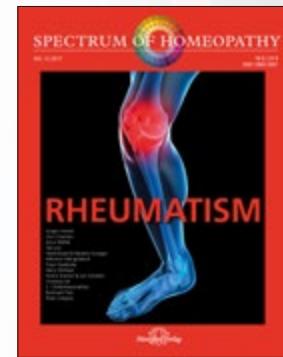
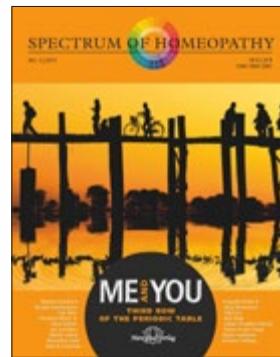
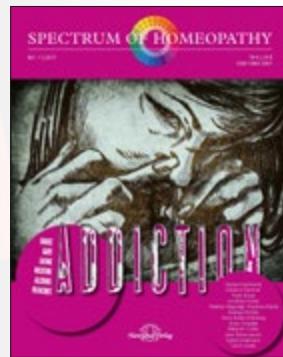
**Christa Gebhardt & Dr Jürgen Hansel**

Chief editors

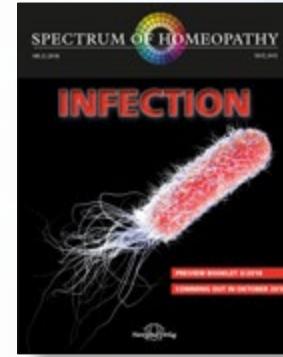
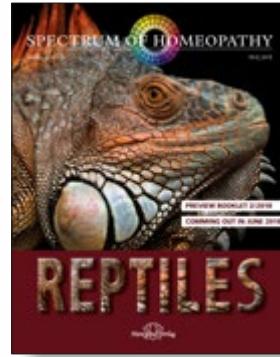
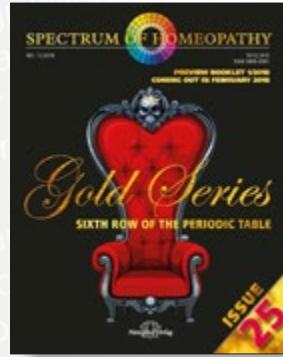




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Page 62

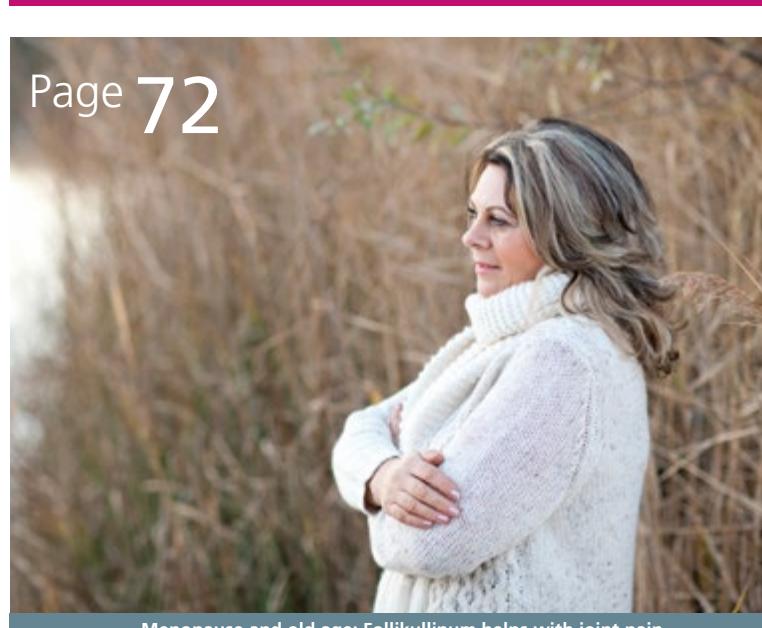


Page 12



Lack of self-confidence: the themes of self-worth and care indicate the Lacs.

Page 72



Unbearable pain: the lack of control indicates the cancer miasm.

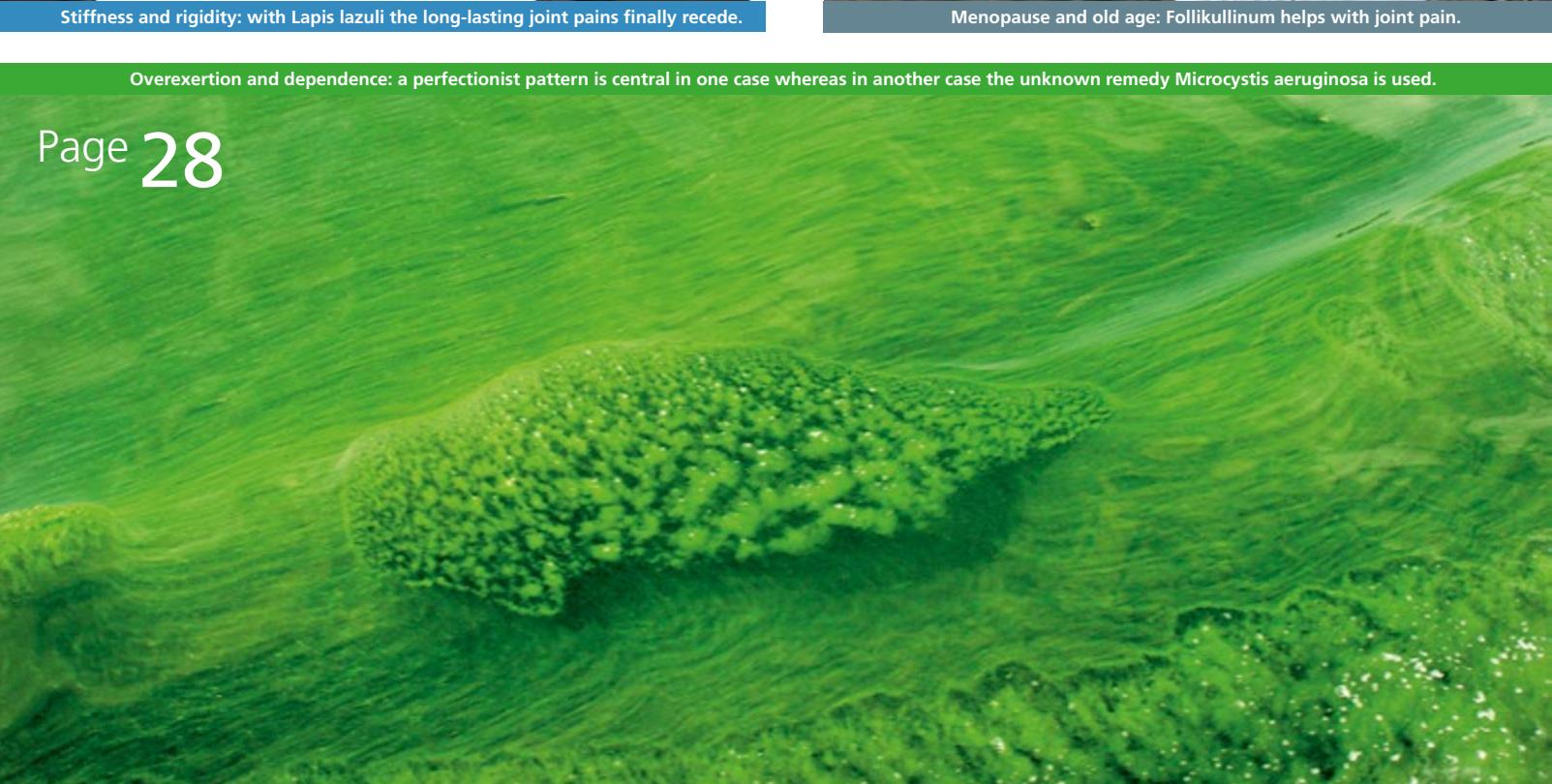
Page 54



Stiffness and rigidity: with Lapis lazuli the long-lasting joint pains finally recede.

Overexertion and dependence: a perfectionist pattern is central in one case whereas in another case the unknown remedy *Microcystis aeruginosa* is used.

Page 28



# CONTENTS

## EDITORIAL : RHEUMATISM

Jürgen Hansel

**DISAPPOINTED, UPSET, DEEPLY HURT**

Ruta graveolens for incipient rheumatoid arthritis

Page 1

Urvi Chauhan

**AT PEACE WITH ONESELF**

Opium in a case of seronegative rheumatoid arthritis

Page 4

Artur Wölfel

**I CAN'T FUNCTION**

Carcinosinum for systemic lupus erythematoses

Page 12

Tali Levi

**THE BLOCKAGE STARTS IN THE HEAD**

Cyanobacteria and Carcinosinum for rheumatic complaints

Page 22

Heidi Brand / Norbert Groeger

**I'M A PIECE OF DIRT**

Chara intermedia for osteoarthritis and tendomyopathy

Page 38

Massimo Mangialavori

**I WON'T GIVE ANYTHING AWAY**

Primula veris for rheumatism with involvement of the skin

Page 47

Franz Swoboda

**THE WOMAN WHOSE HANDS**

I DIDN'T SAVE

Lapis lazuli – stiffness and resolution of the joints

Page 54

FLAG

Page 61

Heinz Wittwer

**OVERPROTECTED AND CONSTRAINED**

Lac humanum for rheumatoid arthritis

Page 62

Anton Kramer / Jan Scholten

**THE BARRICADED HEART AND**

**FEMALE AUTONOMY**

Neodymium salts for rheumatic illness

Page 66

Christina Ari

**THE FEMALE COMPLAINT RHEUMATISM**

Folliculinum for hormonally caused joint complaints

Page 72

S. Chidambaranathan

**STOPPED IN ITS TRACKS**

Bryonia alba stops the rheumatic process at an early stage

Page 80

Reinhard Flick

**GET MOVING!**

Rhus toxicodendron – the classic remedy for joint complaints

Page 89

Peter Gregory

**LIMPING DOGS**

A vet's classic rheumatism remedies

Page 94

**PANORAMA**

BOOKS

Page 106

Massimo Mangialavori in collaboration with Krista Heron, John Sobraske and Betty Wood:  
**Milk Remedies**

*Reviewed by Krista Heron*

Mahesh Gandhi

**Homeopathy and Psychiatry**

*Reviewed by Deborah Collins*

Peter Tumminello

**Psyche and Structure**

*Reviewed by Deborah Collins*

**REPORT**

Page 110

**The State of Homeopathy in Poland**

*Report by Anna Furmaniuk*

**SEMINAR**

Page 112

**Spring Seminar 2017 in Utrecht**

**with Jan Scholten**

*Rebort by Deborah Collins*



# DISAPPOINTED, UPSET, DEEPLY HURT

Ruta graveolens for incipient rheumatoid arthritis

AUTHOR | Jürgen Hansel

**SUMMARY:** The remedy *Ruta graveolens* resembles the symptom picture of rheumatoid arthritis both at the physical as well as the emotional level. A typical example of this is presented in which a patient does not display his emotions and feels little aggression while reacting to deep disappointment with physical complaints of an auto-aggressive illness. The sensation of being beaten with an iron bar is associated with the feeling of being unable to function.

**KEYWORDS:** arthritis, cause, psychosomatic, rheumatism, rheumatoid arthritis, *Ruta graveolens*, Rutaceae, vital sensation





*Ruta graveolens*, commonly known as Rue, is a plant species from the genus Ruta in the Rutaceae family. It is primarily a medicinal and aromatic plant used in the Middle Ages and sometimes grown as a decorative plant.

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The most common multi-system illness associated with autoimmune reactions is chronic polyarthritis or rheumatoid arthritis, which is primarily chronic. It affects around 1% of the population. Even though the synovia of peripheral joints are the main areas affected by the associated chronic inflammation, we frequently find extra-articular manifestations. Typically there are rheumatoid nodules on tendons, bursae or other connective tissue structures. In rare cases the autoimmune process can impact blood vessels, the eye or the pericardium.

**Difficult prognosis:** From the point of view of homeopathic treatment it is interesting to note the spontaneous course and prognosis of the illness. In general we can say that the course of rheumatoid arthritis is very variable and it is therefore difficult to give patients an individual prognosis. Most patients experience a persistent but fluctuating level of illness, which can also progress in episodes with a varying level of joint deformation. Yet there are certain parameters that influence the prognosis, such as the number of affected joints, the radiological evidence of bone erosion, the level of erythrocyte sedimentation rate (ESR) and rheumatoid factor and the occurrence of rheumatoid nodules or severe concomitant illness.

### A WINDOW OF OPPORTUNITY FOR HOMEOPATHY

Around 15% of patients with rheumatoid arthritis have a brief illness with minimal inflammation and without subsequent functional impairment – these patients in particular do not display the markers typical of more severe forms of the disease mentioned above. It is self-evident that successful homeopathic treatment for rheumatoid arthritis as well as other autoimmune illness tends to conventionally be explained by referring to this small group with spontaneous remission.

This could also be true of the case discussed below, which involves the initial stage of chronic polyarthritis with currently minor clinical and humoral activity, according to the diagnosis of the rheumatologist. At such an early stage we do not know where things are heading. Rheumatologists maintain that the symptom pattern at the start of the illness has no predictive power for the development of functional impairment. For we homeopaths, however, this means that we can more favourably influence the course of the illness at an early stage compared to cases in which the patients have already been treated with cortisone and immunosuppressants.

In the last ten years the conventional medical approaches to rheumatoid arthritis have dramatically shifted towards early and aggressive intervention. The former president of the German Society of Rheumatologists (Deutsche Gesellschaft für Rheumatologie), Prof Dr Elisabeth Märker-Hermann, maintained as early as 2005 at the rheumatology congress: "The new treatment approaches have been made easier thanks to the availability of new immunosuppressive medication such as methotrexate, leflunomide and cyclosporine as well as the TNF-alpha inhibitors. It has been shown that these disease-modifying anti-rheumatic

drugs (DMARDs) must consistently be used as early as possible in the window of opportunity to prevent or effectively delay inflammation, joint destruction and severe functional disturbances. A recent study demonstrated that the outcome after five years was significantly worse after just three months' delay in commencing DMARD treatment."

Due to this new strategy of rapidly deploying aggressive anti-arthritis treatments, the homeopathic window of opportunity to pre-empt the immunosuppressives, the TNF-alpha blockers and other biotechnology treatments has shrunk further and we need to use it quickly and effectively.

---

### CASE: 60-year-old man with incipient rheumatoid arthritis

The patient comes from the rheumatologist with a suspected diagnosis of seropositive chronic polyarthritis. The test results show clear signs of inflammation with an ESR of 41 / 60 mm/h (normal range for males is 0-22mm/hr) and a CRP of 23.0 mg/l (normal value < 3.0). The rheumatoid factor is 13.0 IU/l (normal value < 8.9). X-rays of the hands and feet show no signs of erosion.

**Casetaking:** The complaints started gradually three months earlier with pain and swelling in the left wrist and then the right too. Later the middle joint of the right ring finger, the metatarsus of the left foot and the left ankle were also affected. On the metatarsus there is pressure-sensitive pain where the patient broke the bone 30 years ago. The pain, which is associated with stiffness, is worse in the morning and improves during the day: "By midday I don't need to limp anymore." The pain in the wrists bothers him most. It goes from the outside to the inside with a feeling of someone hammering him with an iron bar or a wooden stick. The pain goes from the outside inwards and he feels it most during twisting movements, such as opening or turning a door handle, which is very painful for him.

He suffers greatly from the restriction caused by the rheumatic complaints. He used to be very active in house and garden, liked to chop wood and take long walks but now he feels condemned to inactivity. He has always been an active person, involved in various voluntary works in the church and local area, and works in the caring professions. While he is professionally involved with the feelings of other people, he is reluctant to discuss his own feelings, remaining taciturn and matter-of-fact. He says he does not tend to feel annoyance or aggression and describes himself as yielding. His aim in life is to "live a holy life without thinking the grass is greener on the other side." Complaining and moaning is not his style. He can put up well with difficulties – such as a heart attack several years ago, which he did not make much of a fuss about.

**Emotional hurts:** In the period before eruption of the illness, there were nevertheless two events that strongly disconcerted him. The first is that the institution where he has worked for the last 30 years and which he has been leading for a long time

## PSYCHOSOMATIC ASPECTS OF RHEUMATISM

There is a series of psychological studies looking at the specific personality characteristics of patients suffering from chronic polyarthritis and the possible triggers preceding the outbreak of the illness or relapses. The inhibited aggression seen in those suffering arthritis is a psychological phenomenon that is generally recognized and can often be observed in our practices. It is not so much that these patients consciously repress their aggression – they simply do not feel it in the first place.

This was shown in an American study observing 300 patients suffering from arthritis over a period of 30 months: the patients who stated that they only rarely felt rage or could not remember such feelings, suffered arthritic episodes significantly more often than patients who could remember a recent episode of rage. So the high levels of inhibited rage seem to be less an expression of the illness than of a predisposing personality type. The inhibited aggression is frequently associated with a general blockage in the expression of emotions.

The failure to live out one's aggression is compensated at the physical level. Rheumatism patients frequently report a strong tendency to physical activity in the period before the outbreak of their illness. When people with such a personality type and a genetic predisposition to rheumatoid arthritis are subject to particular emotional burdens, the result can be an outbreak of the illness. Such burdens primarily concern events that signify a loss of personal security – such as job loss, financial difficulties or family disputes.

Evidently the symptom picture of rheumatoid arthritis is associated not just with typical physical symptoms but also with specific personality characteristics. For homeopathy this means that – even if not doing clinical homeopathy – we can expect to frequently encounter certain specific remedy pictures or remedy families that cover these characteristic psychophysical symptom patterns.

is threatened with closure, which greatly upsets and unsettles him. Just a few years before retirement, he now feels that his life work is threatened. Yet he can do nothing about it – he simply has to wait and see how things turn out.

He is similarly disturbed by the fate of his son, who has had a child "thrust on him." His son is deeply affected and hurt that the woman has set him up in this way. When the patient as father says: "My son can no longer do what he wants," the patient is in fact the one suffering most of all because there is nothing he can do to ameliorate his son's crisis. His emotional reaction to the threat to his job and his son's predicament is a feeling of profound disappointment. Never before in his life has he felt such a sense of disappointment.

## ANALYSIS

In this case we recognize a striking correspondence between the emotional and the physical sensations. The patient experiences two major disappointments. He is most of all disturbed by the fate of his son, with whom he strongly identifies. He himself is disappointed, upset and deeply hurt about what has happened to his son and this profound emotional disturbance is reflected physically, since he finds great difficulty otherwise expressing his emotions: his wrist feels like it has been hit by a metal bar and severely injured.

What is the effect on him of this emotional hurt and physical pain? He becomes literally unable to function and suffers most of all from being unable to do anything. This state of being unable to function, as if someone has smashed him on the wrist, can be repertorised in Kent.

**The typical symptom:** The essence of this case can be crystallized in this symptom: Extremities – lameness – wrist – bruised; as if; calc-p., **RUTA**.

This symptom combines the localization, type and depth of the pain with the effect – the inability to function or lameness. It is a very specific rubric – not just for this symptom picture but also for the remedy *Ruta graveolens*. It is obviously dubious to prescribe a remedy solely on a single rubric. Yet the rubric in this case is sufficient to examine *Ruta* more closely. We know this remedy especially from its organotropic connection to the eyes, tendons, cartilage, periosteum and joints. It is above all the wrist where the effect of *Ruta* can be seen. It is a major remedy for complaints of the wrist, specifically for rheumatic illness. Therefore the quality of the pain is very typical: soreness, as if smashed or broken. We can see this clearly in *Hahnemann's* remedy proving:

- Paralytic pressure on the outside of the right forearm
- Tearing pressure in the right wrist, worse with strong movement
- He has pain in the left wrist, as if shattered, even at rest
- The bones of the wrist and the back of the hand are painful as if smashed, at rest or in movement

## THE RUTACEAE FAMILY

**Rutaceae according to Sankaran:** According to Sankaran, this type of pain is typical of the entire remedy Rutaceae family. The Indian homeopath describes the vital sensation of the Rue family as 'squeezed, then crushed.' 'Squeeze' means squeeze (out), press (out), or jam. And figuratively it means to go to the limits of one's strength. 'Crush' of course is even stronger, meaning to squash, pound, squelch, shatter, or break to pieces.

**Rutaceae according to Scholten:** The squeezing and going to the limits of one's strength, according to Jan Scholten, characterise the entire picture of this family, to which the citrus plants also belong. Scholten compares this to a glass of orange juice, which in the morning confers energy and good spirits for the

## DIFFERENTIAL DIAGNOSIS ANGUSTURA VERA

	Total	Ang.	Ruta	Xan.	Ptel.	Regle.	Jab.	Baros.	Regle-f.	Atista	Cit-a.	Piloc.
Rubrics	20	18	4	2	3	3	2	1	1	1	1	1
Kingdoms	6	6	2	2	1	1	1	1	1	1	1	1
generalities; INFLAMMATION; joints, arthritis (255)		■										
generalities; PAIN; joints, articulations (958)		■	■	■	■	■	■	■	■	■	■	■
generalities; PAIN; squeezed, as if (253)		■	■		■							
generalities; PAIN; blow, as after a (156)		■	■		■							
generalities; PAIN; broken, as if (200)		■	■		■							
extremities; STIFFNESS; joints, articulations (166)		■	■									

Along with Ruta, Hahnemann proved a second but less well-known remedy from the Rue family. It is extracted from the bark of Angustura trifoliata, a South American tree. The currently valid botanical name is Galipea officinalis, although homeopathically it is still generally known as Angustura.

The outstanding symptom, which we often use in our practices as an indication for this remedy, is a pronounced desire for coffee. In the corresponding repertory rubric since Kent it is the only three-grade remedy. With such excessive coffee consumption it is not surprising that those affected show typical Coffea symptoms such as 'great irritability, tense cheerfulness and mental activity'<sup>1</sup>. They often have extravagant ideas and constantly enthuse about new projects that never get implemented. The coffee also encourages the particular quality noticed by Scholten in Rutaceae patients of going through the day in an energetic way and in a good mood, persevering despite being at the brink of exhaustion.

Angustura is one of the most bitter substances in the homeopathic *materia medica* and indeed the bitterness can be seen in the remedy picture: the bitter taste in the mouth, bitter eructations, but above all a deep-seated feeling of bitterness. In Hahnemann's *Materia Medica Pura* we find the symptom: 'Minor slights fill him with bitterness'<sup>1</sup>. This bitterness is not, however, expressed in outbreaks of rage and aggression similar to the equally bitter *Nux vomica* but rather like that found in the other Rutaceae: 'Moroseness, discontent with his position, displeasure at jokes'<sup>1</sup>.

At the physical level we find a similar affinity to muscles, tendons and joints as seen in Ruta. In the muscles there is stiffness and cramps at a level like that found in tetanus. But Angustura is, precisely like Ruta, 'a remedy for rheumatic states with fatigue and stiffness of the limbs approaching paralysis'<sup>2</sup>. And just as pronounced as in Ruta, there is the vital sensation of Rutaceae described as: 'Crushed, squeezed, shattered'<sup>3</sup>. In the repertorisation<sup>4</sup> of the case in this article, Angustura covers the joint symptoms even better than Ruta.

If we only look at the physical symptoms, Angustura would certainly have been an option in this case. The decision was made to give this patient Ruta, however, due to the Ruta-specific cause at the mental level, with the double experience of deep disappointment and the feeling of being betrayed and cheated.

Sankaran's miasmatic classification also helps with the differential diagnosis in this case between the two similar Rues. Ruta is assigned to the cancer miasm whereas Angustura is assigned to the malaria miasm. The latter is associated with severe but intermittent attacks whereas the cancer miasm is characterized by chronic progressive disease, against which one is relatively impotent despite one's best efforts, hence the feeling of powerlessness and loss of control. In the malaria miasm the patient complains and moans about their miserable situation whereas in the cancer miasm the emotional expression tends to be blocked. Even though these aspects point to Ruta, in this case it is not possible to make a clear differential diagnosis based on the miasmatic classification, since the patient's feeling of being blocked in his activity and unable to function can just as much be an aspect of the malaria miasm as the bitterness that we see in him, which is very typical of Angustura.



The work ethic of the German Chancellor – straight-backed, persevering and enduring – corresponds to the picture of *Ruta*. 'Merkel's rhombus' has now become one of the most famous gestures in international politics, frequently the subject of speculation and symbolic interpretation.

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entire day. Like the Iron series, these people completely lose themselves in their work, forgetting themselves and their own needs and feelings. They do more for others than for themselves. They are therefore easily exploited by others, often literally squeezed out and discarded like a lemon. They accept this for long periods without aggression until they are completely worn out. Such people are like the poor horse in the saying 'to ride a horse until it drops' – although they are figuratively also the person doing the riding since they drive themselves to exhaustion. The pathology, both physical and mental-emotional, kicks in only when their energy is exhausted and when they have overexerted themselves and completely overdone it. So *Ruta* typically displays complaints from overexertion, especially in the locomotor system and the eyes.

**Squeezed out like a lemon:** The mental symptoms developed by the *Ruta* patient, which we can look up in the *matéria medica*, are relatively non-specific: 'Annoyed, discontented, downcast, discontented with themselves and others, tend to get involved in arguments and contradictions, are irritable.' The only striking aspect is that these descriptions contradict Scholten's personality profile. What Scholten describes is the premorbid personality of *Ruta* patients, which can easily be recognized in

the case discussed above. The mind symptoms that we see in the proving, however, show what happens when the last straw has broken the camel's back i.e. the decompensated *Ruta* patients who are exhausted, squeezed out like a lemon, despondent and embittered.

**Ruta in Hahnemann's proving:** One of Hahnemann's provers described in this state a very interesting sensation: 'Annoyed and distrustful the whole day; he no longer trusted even his best friends and believed he was constantly being cheated'. In the repertories Synthesis and Complete we find this relevant rubric: 'Delusion he is being deceived, cheated.' This rubric is a key pillar supporting the prescription of *Ruta* in this case since it represents the CAUSE at the level of mind, the feeling of disappointment encompassing both the patient's current problems in life and representing the exact situation of his son, which is experienced as such a burden by the patient. *Ruta* is therefore also found in the mind rubric 'Complaints from disappointment.'

**Summary:** Various authors conceive the remedy picture of *Ruta* to include the premorbid personality structure seen in this patient. In addition we see the CAUSE of the current feelings. We also see the pathology of both the rheumatic inflammation of the wrist and the complaints of the metatarsus, which he traces back to an old fracture. And we find the vital sensation as formulated by Sankaran, the highly typical pain sensation of *Ruta graveolens*. Last but not least the repertorisation confirms the choice of remedy. Such a high degree of concordance makes us hopeful that the remedy will have a good effect.

**Prescription:** *Ruta graveolens* LM 6, 2 x 5 drops a day. Due to the ongoing chronic complaints, I choose a regular dose of an LM potency rather than a single dose of a high potency.

**PROGRESS**

**Follow-up after two weeks:** The patient talks of a clear positive trend. When asked, he rates this at around 30%. Some days he is completely complaint-free but occasionally he has relapses. He is once again optimistic that he will overcome the illness.

**Prescription:** *Ruta graveolens LM 6, 1 x 5 drops a day.*

**Follow-up after six weeks:** Continued improvement: the complaints in the foot have completely disappeared and are 50% better in the hand. He is only impacted by the rheumatism when doing heavy work. He again has more energy and, although the situation at work has become even more uncertain, he is less bothered about it than before.

**Prescription:** *Ruta graveolens LM 7, 5 drops a day (since the wrists have not improved decisively with LM 6 in the last four weeks).*

**Follow-up after nine weeks:** The inflammation in the wrists has completely gone and he can use them almost as normal again. Yet the central joints of the fingers swelled up when he kneaded the dough too heavily while making bread.

**Prescription:** *Ruta graveolens LM 7, 3 drops every other day*

**Follow-up after 12 weeks:** He often no longer thinks about the rheumatism. It is very, very much better but not completely gone. He feels this when he makes a fist or when he exerts himself for long periods. If he takes *Ruta* it is always a little worse the next day.

**Prescription:** *Ruta graveolens LM 7, 3 drops twice a week, later reducing to once a week*

**Follow-up after 20 weeks:** He is generally complaint-free. Occasionally he feels a little pain after exertion. He has recently still been taking *Ruta* once a week.

Then I heard nothing more from him. After such a history this is generally a good sign but not necessarily. So I called him after a year to ask how he is doing.

**DR JÜRGEN HANSEL**

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**Follow-up after one year:** He no longer has any complaints and is not restricted at all in his flexibility and tolerance. A regular check-up found that his test results, ESR and CRP, were absolutely normal. All this pleasantly surprises him because he knows colleagues with similar complaints who feel worse and worse as time goes by.

Of course we cannot know what the spontaneous progress of the illness would have been. Yet this is true for both homeopaths and rheumatologists when they make best use of the available window of opportunity.

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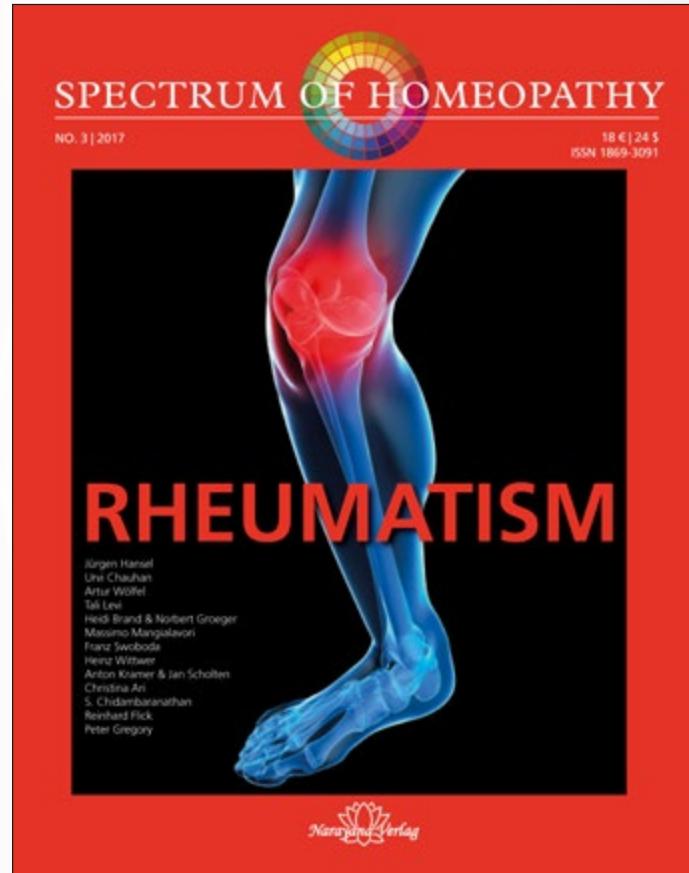
Total Rubrics Kingdoms	Ruta	Calc.	Rhus-t.	Colch.	Puls.	Sep.	Euphr.	Valer.	Hydr-ac.	Stann.	Bell.	Dig.	Mur-ac.	Spong.	Verb.	Calc-p.	Aur.	Acon.	Alum.	Ang.
	11	7	6	5	5	5	3	7	5	5	4	4	4	4	4	3	3	2	2	2
	5	3	3	3	3	3	3	2	2	2	2	2	2	2	2	3	2	2	2	2
mind; DELUSIONS, imaginations; deceived, is (10)																				
mind; ACTIVITY (225)																				
extremities; LAMENESS; sore, bruised, wrists (2)																				
extremities; PAIN; rheumatic; wrists (66)																				
extremities; PAIN; squeezed, as if; upper limbs (65)																				

Repertorisation with MacRepertory 8.3.2.0 / Complete Repertory 2011

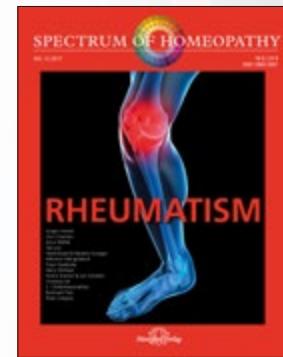
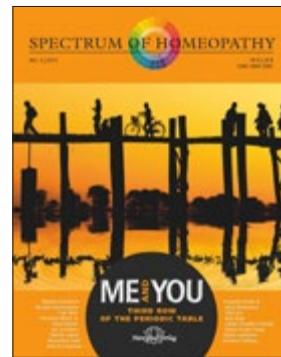
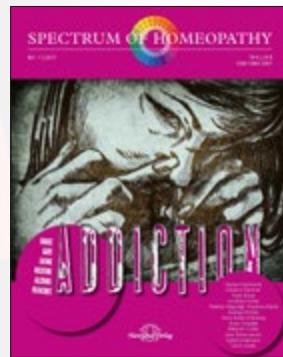


The term angostura or angostura bitter denotes a cocktail bitter which, along with gentian root, can also contain bitter orange, cloves, cardamom, cinnamon and cinchona. The bitter is used to flavour spirits as well as for making cocktails.

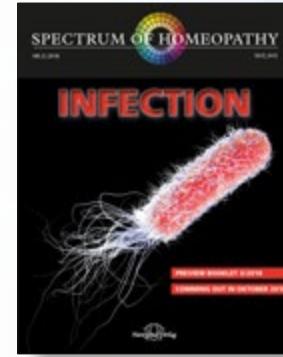
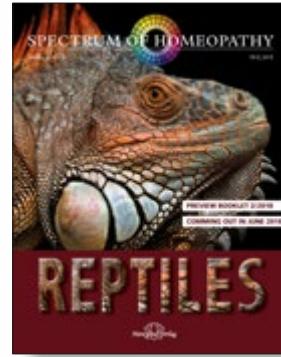
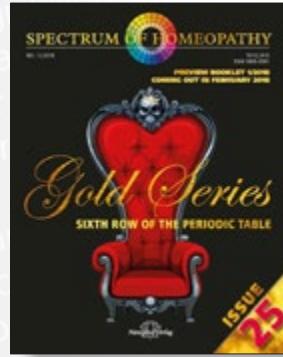
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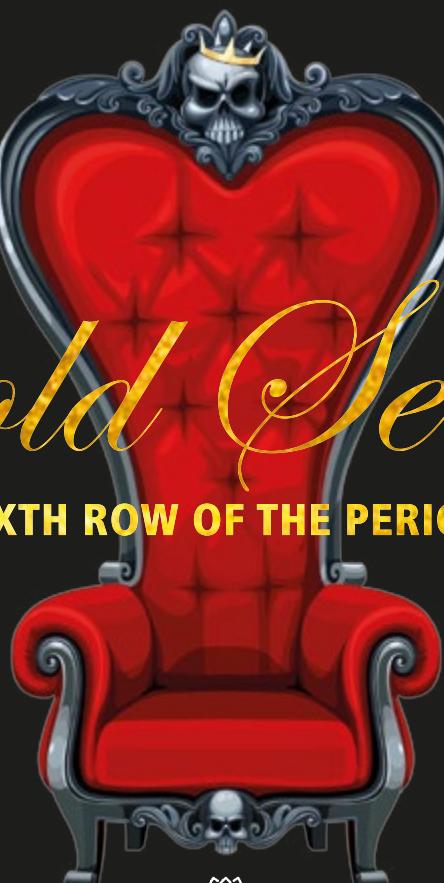


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