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Membership: Rich Petri **Marketing:** Marybeth Buchele-Moseman

Simillimum is a journal published by naturopathic physicians for all people interested in Homeopathy. It is dedicated to the practice of classical Homeopathy as formulated by Samuel Hahnemann in the *Organon of Medicine*. The editors encourage homeopaths of all professions and backgrounds to write. Accounts of cured cases, essays, articles and letters to the editor are welcomed.

The journal is published in March, June, September and December. Material must be submitted eight weeks prior to publication (the first of January, April, July, or October) to be considered for the coming issue.

General HANP membership is open to everyone, and includes a subscription to *Simillimum*.

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but my success was not
nearly as impressive."*

Massimo Mangialavori, Italy

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LETTERS TO THE EDITOR

Dear Editor,

I'm writing in regard to Liam McClintock's article, An Old Twist on Post-Partum Anxiety and Depression, in the Spring issue. I'm glad for his success with his approach, and in the cases noted. I certainly agree that focusing nearly exclusively on the patient's mental and emotional state can sometimes lead to the correct prescription(s). I'm troubled by his statement that "some homeopaths have been deluded into thinking that prescribing on the 'totality' of the case means that we must spend hours and hours probing each excruciating detail of each symptom and thereby risk losing the forest for the trees." Hahnemann tells us, in fact, to both probe each detail of each symptom of the patient in the course of complete case-taking, as well as to keep the whole forest in view--that's part of the requirement of the art and the science of homeopathy. The original provings indeed include "excruciating details" which, when encountered in the patient, have the potential for leading us to the correct remedy. I'd like for us not to mislead students to the contrary.

Nicholas Nossaman, MD

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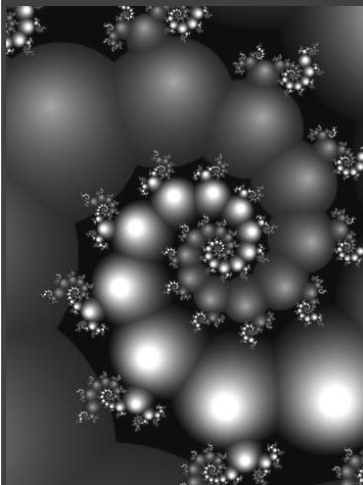
Tee Tree Oil, Many excellent videos.

Contact: Steven Olsen at: Steven@PineClinic.com

360-568-8002

The Executive Director and The Board of the HANP is pleased to announce that Liz Dickey, MSW, ND of Eugene, Oregon is our newest DHANP! She passed her Homeopathic Board Certification Exam with the CHC Multiple Choice Exam in March and completed her oral exam on her 5 cases with Bruce Dickson, ND, DHANP on April 22
Please join us in congratulating her.

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PRESIDENT'S REPORT

NEIL TESSLER ND, DHANP

The HANP was created fifteen years ago to establish an association of ND's with a special interest in homeopathy. There were several specific reasons that this need was felt:

- a) Our distinctiveness within the eclectic world of naturopathy, as ND's with a commitment to classical homeopathy.
- b) To strengthen our credibility in the homeopathic world while enhancing our opportunities for participation and contribution.
- c) To support a high standard of homeopathic training and practice in the naturopathic environment.

The HANP is not only the legacy of those who founded the HANP, but for those who have come into practice since, those who are in school now and those coming in the future. The HANP offers community to naturopaths with a special interest in homeopathy. It also grounds our professional relationship to both the general naturopathic community at large and the general homeopathic community. The maintenance and growth of the HANP is a statement of our individual commitment to homeopathy, while honoring our professional identity as naturopathic physicians.

The Homeopathic Academy of Naturopathic Physicians is one of many similar associations within the North American homeopathic community, such as the AIH, NASH, state and provincial associations, etc. Each is a group of individuals of common purpose or identity, whether defined by profession, geography or even methodology.

Besides the sense of community support that associations can engender, one of their greatest values is the opportunity, through united action, to make special contributions to the homeopathic profession. So far the HANP has served the homeopathic community through our case conferences, our journal, and our participation with other homeopathic organizations such as the AIH, CHC and CHE regarding professional issues.

Many individual diplomates of the HANP have made important contributions to homeopathy and the homeopathic and naturopathic communities. In doing so, they have advanced the cause for which the HANP was founded. A glance through the list at the back of the journal reads with the names of a number of teachers and authors as well as other contributors to the profession.

We have had the opportunity, through our conference and journal, to work hand in hand with various leaders in homeopathy support services such as booksellers, pharmaceutical and software companies. However, it has become clear that there is more that the HANP should do and must do to re-energize its image and its relevance.

Recently the HANP sponsored Krista Heron's presentation on the Conifer family in Portland. This seminar was an excellent learning and networking event and a perfect example of the kind of continuing education that we can offer, utilizing the experience of colleagues. This type of event works the middle ground between the super-teacher seminars and case conferences. Everyone who attended benefited and was clearly appreciative. We also had the opportunity to speak about the HANP and SIMILLIMUM to a general audience.

There is consideration being given towards developing seminars geared to the naturopathic community as well. Michael Traub, President of the American Association of Naturopathic Physicians, Past President and a founding member of the HANP, as well as Peter Bennett, a former President of the HANP, have urged us to find ways to make greater representation to the naturopathic community. This has been under discussion by the board and programs will be developed.

The day before the seminar, John Collins and I made a presentation to one of Durr Ellmore's classes at NCNM on the HANP and the journal. There was much appreciation and interest from the students. This kind of direct representation to the naturopathic colleges should be, in the future, a regular feature of our work. It means a lot to students with a strong interest in homeopathy to be approached directly and shown a path forward once they enter the profession.

On several occasions I have met diplomates or former diplomates who

felt that the HANP held no value for them. Given all that we have described and all that we can yet do, I would hope that in the future, there will be no question that the HANP has value for its diplomates, general members and all others who benefit from our journal, programs or affiliation.

The new structure of the HANP and new requirements for certification, create more meaningful standards, yet with a comfortable step-wise process that includes several preliminary designations or grades prior to diplomate status. This is an important accomplishment that restates our commitment to high standards for board certification and brings them more up to date with CHC standards.

All of this discussion leads us to two final points:

We need not review the difficulties of recent years, where there were strong disagreements over the direction of the journal and the organization. By the conclusion of that debate, we had lost a significant number of subscribers and with them an important portion of our income. While the freefall has finally stopped and the tide is gradually turning, there is a need to replenish our financial base so that we can bring our visions into action.

Where specifically could funds go now?

- 1) Making sure the journal is properly financed and promoted.
- 2) Making sure the conference is properly funded and promoted.
- 3) An expense account for travel requirements in order to make presentation to students or representation at major conferences and relevant meetings (CHC, CHE, etc.).
- 4) Funding the development and promotion of programs that serve the ongoing continuing education needs of homeopathic practitioners, as well as ND's seeking further homeopathic training.
- 5) The hiring of a part-time Executive Director. Brent Mathieu, our Past-President and current Executive Director, is doing a terrific job with extremely limited time and resources, but would like to move on from this position.
- 6) Regular updating and maintenance of our website.

I would like to emphasize that the organization is essentially solid – with an energetic, functioning board, new diplomates, a journal coming out regularly, new programs being planned and the conference ahead. Our choice is to plan on a gradual process of rebuilding, or catalyzing that process through actively seeking the support of the community.

We will be seeking to raise twenty thousand dollars, over and above other revenues, in the next six months. This will enable us to stabilize our position and advance our plans.

We are first appealing to our general members (as a subscriber you are a member of the HANP) and diplomates, to offer financial contributions to the organization, to help us regain our strength and move forward more rapidly and effectively. Through giving a little extra to the HANP at this time, you are affirming your support for our mission and our intentions. If you are not able to be involved in some other manner, a donation gives you the opportunity to show your appreciation and be counted.

We will also be seeking corporate support, inside and outside the homeopathic profession. All donors will be cited in *Simillimum*. I ask that each of you make some contribution, whether large or small, to help us realize our fund-raising goals.

The second issue is leadership. While the board has been functioning normally, with regular email discussion and teleconference meetings, there has been no President for a year now. To go forward with fund-raising, to maintain inter-professional relations, to focus the activities of the organization, it had become quite apparent, especially in our Portland discussions, that electing a President was a vital necessity.

After much consideration, upon returning home, I offered myself for this position. I did so because among the current board members, I am willing to give the time and to take a leadership role in this next phase. This suggestion was given warm support by those I had worked with in Portland. After due consideration the board unanimously agreed and so this issue has been resolved.

The difficult events of a year ago may have created new antipathies, while healing others. While I believe that the hard and conclusive debate was necessary for the life and health of the HANP, yet in spirit it was never intended to disrespect the persons involved. I respect the hard work and commitment of each and every practitioner and would be happy to work with any sincere person towards the goal of improving our organization and its services, while maintaining its commitment to a high standard of homeopathy.

*Homeopathy
is one of the
few disciplines that
allows us to comprehend
the very source of an
individual's disturbance.
That source results in the
myriad faces of illness in
body and mind.*

—Dr. Divya Chhabra



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1) Basic membership: Open to all and anyone. Subscription to Simillimum included.

2) HANP Candidate for Certification: Applicants may apply to take the CHC Multiple Choice exam with two hundred and fifty hours for \$175 to cover application and examination. Applicants must be graduates from a ND granting program or college recognized by the HANP board. To become a Candidate, applicants must pass the Multiple Choice exam. To remain active Candidates, they shall pay an annual fee, \$75, which would include a subscription to Simillimum and cover administrative expenses.

3) Fellow of the HANP (FHANP): To become a Fellow, applicants must be an active Candidate, and document a total of five hundred hours in homeopathy, be a licensed naturopathic physician, have been in practice for at least one year, and pay another \$175 application and examination fee. When these requirements are met, applicants may sit for the Case Analysis Exam. Once the Case Analysis Exam is passed they shall be granted recognition as a Fellow of the HANP. To remain active Fellows, they shall be required to renew annually for \$75, which includes a subscription to Simillimum. Fellows will receive a certificate and a separate directory listing.

4) Diplomate of the HANP: Applicants must be active fellows, submit two letters of recommendation from active DHANPs, submit five cases with at least one year follow-up, and successfully pass an oral examination based on those five cases with a DHANP. To remain active as DHANPs, they shall annually renew for \$125, and submit at least twelve Continuing Education credits.

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EDITORIAL

IN SEARCH OF THE PERFECT CASE

NEIL TESSLER ND, DHANP

Last summer, in our first editorial, we advocated a results based conversation across the gulf of philosophies of practice. In this regard, homeopaths look to cases to aid their learning of old and new remedies and discern the value of different methods.

It is always wonderful to receive a case that is well taken, has a thorough analysis, and a long, detailed follow-up. On the other hand, it is more often that one aspect or another needs discussion with the author to improve the quality and learning in the published case. In some instances, papers supposing to detail a clear cure, do not get published because the practitioner is unable to adequately illuminate their thinking process in a way that makes it a good learning experience for the reader. In others, the follow-ups leave a very unclear impression regarding the curative action of the remedy. It may have been clear to the practitioner, but somehow it does not translate to the reader.

Several of the cases in this issue have problematic follow-ups. Either the time period was not long, or the follow-up was mostly email, or all subsequent information came from the girlfriend. Yet each of these cases has something important to tell and the remedies have clearly been of tremendous value. I have always felt that making a hard and fast rule around the time acceptable in a follow-up, cuts out many valuable and interesting cases where the remedy had acted very well, but for one reason or another it was not possible to follow-up in a way that looks great in print. Many of the cases from old journals do not have the lengthy follow-up expected now days. We need to take care that there is room for more anecdotal, shorter cases where the cure is vivid just the same. Should we lose the learning value to maintain the principle? The issue created much consternation with our conscientious and diligent review board. In the end, each of these cases have been published and we hope that you will appreciate the insights and learning that they offer.

Chocolate is a plant-based substance that has made a dramatic ascension in its relationship to humans in the last three or four hundred years. It was a stroke of brilliance to prove it. Along with the invaluable proving of Jeremy Sherr, its clinical value has been indicated in many reported cases.

In this issue we look at this remedy through the lens of three of these.

The article by Dr. Pulford, taken from the transactions of the International Hahnemannian Association, is a gem of the twenties. The opportunity to study the journals of old is a very stimulating approach to learning materia medica, philosophy, case management, etc. Highly recommended reading!

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WITH A PAUCITY OF SYMPTOMS

ALFRED PULFORD M.D.

FROM THE HOMEOPATHIC RECORDER

MARCH, 1929



ALFRED PULFORD MD

1863 - 1948

The appended cases are cited, not to show any particular skill either in the selection of the remedy or in the art of prescribing, but to show what the indicated remedy will do in cases that do not get well otherwise or of themselves; and to show that frequent repetition and plusing are not necessary, that they too frequently spoil the case, and that a change of potency is only necessary in most cases because we have spoiled our cases by too frequent repetitions. We own up to this ourselves for we are as guilty of it as you are, but that does not lessen the crime any, and we are more to blame than you because we know better, and if you do not, you ought to.

CASE 1.

About 3 years ago V. C. H., a real estate dealer, walked into our office and said he had been referred to us by one of our patrons. After carefully taking his case, all that our efforts and questionings revealed was: for the past seven years he had every night without exception, a gnawing pain in the stomach, for which he had tried persistently to get relief. Numerous stomach specialists had been consulted but in vain. Money had been no consideration in the matter, neither had it been of any benefit up to the time he had found homeopathy. We took up Kent's Repertory, third edition, and turned to page 520 and there found tucked away in modest type: "Pain, gnawing, night: *Abrotanum*." He was given a 2 dram vial of the 30x to take one dose and repeat only if absolutely necessary. To date it has not been necessary to repeat and the pain has not returned. He has become a real booster for homeopathy. This case fully illustrates the futility of animal experimentation for medical prescribing. What animal proving would have furnished us a clue in this case?

CASE 2.

This case from the strictly prohibition town of Champaign, Ill., will best be illustrated by the patient's series of notes. The patient, a real estate dealer, about 60 years old, wrote May 15, 1926: "About seventeen years ago you treated a brother of mine and did him a lot of good. I was wondering if you could do anything for me. I have a chronic case of syphilis. Have taken treatments of mercury and salvarsan but without any benefit whatsoever. My case is of thirty years' standing. Have excruciating pains in hips, at night, no appetite, restless sleep, forgetful, mind becoming affected, and working makes me very nervous. Those are my symptoms. If you have any idea you can help me I will take treatment."

He was sent a dose of *Hepar. sulph.* 30x on two counts; first, the symptoms pointed to no remedy and he could not come to us and could not afford to have us come to him, and, secondly, as an antidote to the mercury and salvarsan. He had *Placebo* in the interim.

November 8th, 1926, he writes: "Have been gaining in weight and feel some better, but still have pains in my hips mornings, however not so severe, for which I am thankful." More *Placebo*.

December 20th, 1926: "Have gained in weight twenty pounds and pain in hips abating. I used to feel badly everyday, but now I have some good days." More *Placebo*.

February 5th, 1927: "No change from last report." One dose *Hepar* IM.

March 22nd, 1927: "I'm happy to report that I am feeling a great deal better everyday, thanking you for your interest in me." *Placebo*.

July 18, 1927: "I'm feeling a great deal better, for which I thank the Lord and yourself, as I was in awful shape until I began your treatment." More *Placebo*.

August 24th, 1927: "Have derived a vast amount of good from your treatment, but no change from last report." One dose *Hepar* 1OM.

November 3rd, 1927: "I'm feeling real well and my old self again. My sincere thanks to you, but think I ought to stay under your observation for a while yet." *Placebo*.

December 6th, 1927: "I'm feeling so good that I hate to quit you." Patient discharged. To date he has remained in the best of health and has needed no more medicine.

The above case is one of many that confirms these things; first, that the best results are obtained by a none-too-frequent repetition of the drug; that the true simillimum will stop the downward course of any remedially curable disease in any stage and start the patient on the road to recovery at once; that if you have to repeat at all, or at least too often, that you have perhaps a somewhat similar remedy, but not the true simillimum and, lastly, that the selection of the potency of the drug is based solely on the law of dynamics, i.e., the truer the force is directed to the object to be moved the less the power necessary to be developed at the source. In short, the nearer to the true simillimum, the higher the potency required to do the best work.

CASE 3.

About five years ago Miss B., aged 18 years, was brought to us. For about 10 years she had been the victim of diurnal enuresis, to the extent that she was unable to go anywhere. The least excitement or motion would start the urine to flow and other than this, no symptoms could be elicited. After three months of bungling treatment we found ourselves no better doctor than our predecessors. One day the mother turned to us and said, "What makes my daughter so thirsty at times? She will go a long time, then it seems that she cannot get enough to drink." Well, excitement causes motion, naturally, and *Bryonia* is decidedly worse from motion, but even that alone is not sufficient data on which to prescribe *Bryonia*, but, when you add to that the great characteristic: "Great thirst at long intervals," which is found under no other known remedy; there is absolutely no other choice. It is needless to state that a single dose of *Bryonia* 1M brought untold joy to all concerned, for now the young lady can go anywhere at any time.

CASE 4.

Is that of a special representative of the U. S. Steel Corporation, a man about 65, who developed a very choice specimen of carbuncle around the occipital region, which measured eight inches in diameter. A most malignant, foul, odorous mass of a dark, purplish hue, that stank to heaven and burned like fire. We started to make a thorough botch of this job. Nothing that we could get gave us a clue to the remedy. *Anthraxinum*, *Arsenicum*, *Lachesis*, *Rhus* and *Tarentula cubensis* were given, but for two weeks we got nowhere excepting a chance to lose our job. In order to keep down the odor and help us out in our bungling we had the part fomented with *Calendula* and then applied dry charcoal, but this got us nowhere and we were beginning to despair of being able to do anything. To add to the complications the nurse volunteered to the patient that she had nursed patients with what had been the largest carbuncles known, but that she had never seen one as large as this and that all those she had seen died.

Needless to say she lost her job. While things were going from bad to worse the patient volunteered this, "Whenever my bowels start to move the stool will get part way out and then will slip back and can only be expelled with the greatest difficulty." Needless to state he got a single dose

of *Silicea* 1M and *Placebo*. His pain was promptly relieved and a mass almost as large as a child's head suppurated out and left a cavern that was fearful to behold. He received two more doses of the 1M and one of the 10M and made one of the most brilliant and record-breaking recoveries we have ever seen and it is surprising how nearly the signs of the scar have been obliterated when one considers the extent and the jagged edges, for there are parts along the line almost invisible and the patient feels better than in years.

CASE 5.

This gentleman, an ice dealer, about 40 years of age, had about fifteen years ago a case of gonorrhea treated by that "ultra scientific method" - suppression. As soon as the discharge stopped, his bowels, which had always been regular before, became constipated, growing gradually worse and resisting every effort to rectify the condition. He spent money freely but in vain trying to find relief. He finally moved from Columbus to Toledo as his business interests were centered there. He was referred to us for a condition of his wife, and while here he volunteered: "I have never had any use for homeopathy myself, but since you have done so much for my wife I am going to let you see what you can do for me." His case was carefully taken but revealed nothing on which to base a prescription. On the knowledge of his suppressed gonorrhea he was given one dose of *Medhorrinum* 1M. The relief was prompt and to date has needed no repetition. This is the second case of this kind that has come to us with the same result.

CASE 6.

This young man who had inherited the tubercular diathesis came to us eight years ago, the victim of much mishandling, a poor, weak, scrawny, emaciated lad who was expected to die at any time. Auscultation revealed bubbling and crepitation all over the chest. There was thick, greenish expectoration, no cough, debilitating night sweats, especially after midnight and no other symptoms. He was under observation for three years. During the first three months he received each month one dose of *Tuberculinum bovinum* 30x and *Placebo* in the interim. From the very first dose improvement began.

He then received one dose of the 30x each three months thereafter until

discharged. The potency was never changed. The father was just recently at our office and tells us that the son has never had any other treatment than that we gave him; that he is now in the best of health and weighs 185 pounds and is one of the most promising commercial art students at the Ohio State University.

CASE 7.

This gentleman, about 35 years of age, of French birth and of tubercular inheritance, developed sinus trouble. Two operations and a regular attendance at the specialist's office twice a week for three years resulted in naught but financial benefit to the specialist. His tubercular inheritance; his constant desire to go somewhere; his thick green discharge; his aggravation from cold and damp and his debilitating night sweats after midnight tempted us to give him one dose of *Tuberculinum* 30x. The result was almost miraculous. There was a change within 24 hours. While he is still under observation there has been neither change of remedy nor repetition and the improvement is going on rapidly.

CASE 8.

Dr. G. Blase is reported by P. D. and Co. to show the superiority of vaccines in the treatment of whooping cough, to have treated fifty-two cases by the seral method and two hundred fifty cases by other methods. The cases received eight injections and recovered in eight to sixteen days, while those treated by other methods lasted three to five months. Contrast that doubtful method with homeopathy, which cures whooping cough while you wait. Mr. G., a patient of ours, just fresh from the ranks of allopathy, spoke of his little boy whom our allopathic friends had been treating for over two months for a fully developed case of whooping cough. All he could tell us was that "The boy woke regularly at 3 a. m. and on waking his upper eyelid puffed out. Could we send a remedy?" We sent a powder of *Kali carb.* 1M. The child had a slight cough that night and no cough since; is now in the best of health and has been the means of fully converting the mother to homeopathy.

CASE 9.

We were asked to see a little lad of about three years of age. Perhaps those who hold such veneration for allopathic diagnosis will be quite shocked when we say that we hold his diagnosis in contempt. This little lad had what we believe to have been a masked case of scarlet fever whose prodrome was said to be confusing, so much so, that it baffled the august skill of both the allopathic fraternity and the health board combined. The rash failed to show up properly and the allopaths unfortunately had no *Bryonia* to bring the rash to the surface. They started in to cure the rash, with the little patient going moribund as fast as he could go.

Here is what we found: A little, helpless, puny, whimpering, almost lifeless child whose little limbs were drawn up in a tension, his whole body was tense; parts ulcerated from head to foot; skin angry red, tense, and shiny over lower parts of thighs and knees; skin where not ulcerated looked like the skin of a ripe tomato that had been scalded prior to being peeled, desquamating in large sheets, one desquamation following another rapidly. Oxide of zinc ointment was used to heal up the ulcers and the body otherwise dusted with aristol powder and God alone knows what he had been given internally. It was one of the most pitiable cases we have seen in all our forty-three years' practice. We could hardly suppress the tears.

On top of all the suffering he was tortured with good scrubblings with soap and water. The nurse was shocked when we stopped the soap and water for moist cornmeal and the aristol for rice-flour. The little fellow was given a dose of *Sulphur* 30x with no result. As we could get no data on which to base a prescription, but feeling firmly in our own mind that it was a case of suppressed rash and that *Sulphur* was the only logical remedy, he got a single dose of the CC. The reaction to this dose was prompt. Within twenty-four hours there was a change in his disposition and in quick succession a rapid regaining of strength, a return of appetite, a more normal pink to the skin, a decrease in the size of the desquamations and a rapid healing of the ulcers. In two weeks the lad was almost normal, and that without change or repetition of the remedy. At the end of three weeks he was able to have his wish gratified that "he be allowed to go outdoors and dig in the dirt." All of this on a single dose of a single remedy.

CASE 10.

Mr. H. W., age 37, came to us with a beautifully complicated case of asthma, cold and stormy weather only, and a scaly eruption over the entire body which was extremely red, fingers cracked and bleeding and covered with vesicles and scales exuding a watery fluid, itching and burning intolerably causing him to scratch continually. His wife said that she got nearly a dustpan full of scales every morning from the bed before she could make it up. Aside from the asthma and what we could see, he could give no other symptoms. On April 13th he received one dose of *Arsenicum* 1M and has had no other medicine since. At the present writing the entire train of symptoms have improved rapidly and the skin is almost clean.

TOLEDO, OHIO.

DISCUSSION.

DR. UNDERHILL: I have a very interesting case of a girl, 12 years old, who came in with eczema of the scalp, all her hair had come out and it was dry and very scaly and this condition was of a year and a half standing. Upon the symptoms of the patient I gave her *Pulsatilla* 200; that began to work right away. Inside of six months there wasn't a vestige of eczema on her scalp, her hair came in, today she is perfectly well and healthy after about a year of prescribing. She had only had one dose when her mother came in with her and said: "Doctor, I am discouraged." I said, "Why?" "Well, Eleanore has the same old catarrh back again."

I had been negligent in taking the case in that I didn't find out about the catarrh, but I found out now about the catarrh and that she had had for years a persistent nasal catarrh, thick greenish, and greenish-yellow mucus. They had taken her to a specialist who had been very successful in "curing" the catarrh; in other words, he suppressed it. In about a month or two after the suppression the eczema came out. I said, "It is plain to be seen the eczema came out because the catarrh was suppressed. Now the eczema has been cured and the catarrh has come back. We will get after that and see what we can do." I repeated the *Pulsatilla* 200 and I think, since then, I have given her the 1M. She has no catarrh and no eczema at the present time.

DR. WRIGHT: Since we are reminiscing for a moment on cases of skin diseases, I might tell of a little boy of three whom I had in the outpatient department. His mother, who was the patient, said, "I wish you could do something for this child, his face has had this horrible eczema since he was two years old. I have had him to every doctor and they have given yellow salve, white salve and black salve and none of it has done any good."

I looked at the child. He had no symptoms of any suppression. Finally the mother remarked, "Every time he goes near the stove his face gets burning red and immediately I thought of *Antimonium crudum*. I gave him one dose of the 2C and by the end of five weeks that child was clear for the first time in a year and a half, and has stayed so.

DR. OLDS: In relation to this *Kali carb.* case of whooping cough, I want to confirm that, or to recall the time several years ago when we had an epidemic of whooping cough. A young lady came into the office. She had been taking care of some children who had whooping cough and she had started in with a very persistent cough that looked like the beginning of whooping cough. She had the identical symptoms as Dr. Pulford's case. It was a 2 am aggravation of the cough, and one dose of *Kali carb.* I don't remember what potency and in twelve hours it completely disappeared.

Another thing that came to my mind, while these cases, particularly that *Abrotanum* case, were recited, was a subject that I think has not been treated of in this convention, and that is on the poisoning of our patients with aluminum. I believe that a great many of our stomach cases at the present day, as well as others, are due to aluminum poisoning. I want to refer you to a book by Dr. Charles Betz of Toledo, Ohio, who has written quite extensively on this subject, and rather proves his case. In my own experience I feel that he is right, that we are bucking up against aluminum poisoning a great deal of the time. He has demonstrated that the ordinary individual who has all of his food cooked in aluminum utensils, his coffee made in an aluminum percolator, who uses all aluminum utensils and alum baking powders, is taking from 13 to 15 grains of aluminum hydroxide every day. That ought to be enough to poison anybody.

I have found in certain cases of stomach ulcer, that where those things are prohibited my case comes along very much better than it would otherwise. I think that is something for the membership to look into.

DR. PULFORD: Mr. Chairman, I wish to confirm what the doctor just said. Dr. Betz in Toledo proved his case through whatever he did on homeopathic methods and he is right on that.

DR. OLDS: I might say further, if anyone wishes to prove this thing out for himself, here is a very simple proof (as to the aluminum): Take a quart of water and boil it in an aluminum utensil for about twenty minutes. Boil it vigorously, pour that into a clear glass jar, then take some other utensil like agateware or porcelainware, and boil the same amount of water and pour it into another jar and let it stand all night and look at them in the morning. One will look like milk, the other will be clear.

CHAIRMAN DIXON: Any further discussion?

DR. PULFORD: Nothing excepting that in the present undeveloped state of homeopathy, we are having to zigzag a lot of cases around. We are having to use a lot of physiological remedies which we wouldn't if the thing was completed. It is up to us to go ahead and complete the unfolding of it. We are standing still, we are dormant, and we should be getting ahead and curing a lot of cases that we are zig-zagging from one remedy to another.



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A CASE OF HEARTBURN

JESSICA JACKSON L.Ac

On January 14, 2003 a man of forty was sent to see me by his girlfriend. His only complaint was of heartburn “even before my morning coffee. I drink between one to six cups each morning. I eat Pepsidaid all day long. It keeps me up all night. It’s worse from lying down like it’s working its way up. I sit propped up, retreat to the chair. It’s worse at my neck, feels like I’m choking, waking from a sound sleep. Whatever causes heartburn. I take Pepsidaid, Roll aids, Tumms daily. I try to chew gum. Chewing is a factor-- it can help the reflux. I smoke.”

Asked to tell about himself he says, “I love the outdoors. Sports. I’m not a big people person. I don’t enjoy crowds. I prefer people I know as opposed to crowds of strangers. I don’t have much troubles. I should have but I’m a live and let live sort of person. I don’t care for certain surroundings. I don’t dig a crowd scene. I wouldn’t enjoy a gay bar-- unless they were girls.”

“There’s not a lot I’m hung up on. My diet is good. I stay away from junk. I do have a weakness for ice cream at night. I chewed tobacco twenty years, recently quit. I exercise, workout.”

“I just got out of prison last year, doing time since ‘87. The heartburn started acting up about six or seven years ago. The prison docs say it’s stress you’re unawares of. There weren’t bad times all the while I was locked up. I didn’t like it but it wasn’t a big deal.”

“The first time I did drugs I was seventeen years old. I shot cocaine then heroine, then speed. Then I quit and drank heavily during those years. Being locked up most of thirteen-fourteen years, you don’t drink much. I drink beer now, not the hard stuff, not wine.”

“I love all my family, my girls. I don’t see them a lot-- the relationship with their mom-- I haven’t been there. We’re not mad at each other. I don’t do much to bring them into my life. I can’t get too worked up.”

When asked what he was up to when the heartburn began he said, “I started cooking crank. I got popped for conspiracy. I got eight years, did four and half. There were were lots of harmful chemicals in that stuff and I breathed it. Acids. Lye. Hydrogen chloride gas. Everything you put in is poison. There’s a skull and crossbones on everything you touch there. I’d been out awhile, was making money, cooking crank, foot loose and fancy free. I was neglecting things, responsibilities. It was a wild time until I got arrested while on parole.”

Neglecting what? “My kids. Myself. I was partying all the time. Didn’t eat or sleep at night. Just partying. I’d been divorced twice by then which didn’t really bother me, just missed my daughters. No place for them with me, with a gun in your pocket, dope in the car, cash... Taking off for ten days, two weeks until you crash out or get a belly full”.

Then what? “Go back out and do it again. Up to the mountains, hunting, fishing, doing guy stuff... Something without a whole lot of people around. Most people are just really no good. Being around ‘em is just asking for trouble. I’d rather be with people I know and care for in an out of the way place.”

What else? “I’ve been shot twice. Run over by a car. And in prison I was forced to deal with how many personalities a day?!”

Which meant? “I have no interest in any new people. I’m content with a few friends. The majority of people I’ve been around-- the prison system has done that. I’ve seen the other side-- locked up most of my adult life. It’s not a good caliber of people there... It’s a waste of time to meet new people. I’d be asking for trouble. Not knowing people’s backgrounds. I’m wary around strangers. I don’t wanna be around you!

“I’ve been forced. It’s my own fault. I’ve seen a lot of people supposed to be good guys-- turns out they have a thing for young kids. I’d hate to find that out about someone and I’d have to go do something ugly to him. You can’t let people like that walk around”.

Forced? “In prison, to be around people. This new guy came into my cell, a total dope fiend and coming down. My cell is my home. I kicked those habits. You have no say so. They’re shoveling people in and out. Being through that steered me from wanting to meet people. I’m not saying all people are bad. I just have no interest in new people. I got four or five good friends. I’ll keep them ‘til I have the big nap just fine.”

That new guy in your cell? “You’re outta here I said--We’re fighting! Pack your shit or I’ll beat you out. I don’t go for crap. The dope fiend thing. I kicked three habits and I’m not interested in being around it. I won’t. I refuse. Something will happen. We lock horns someone gets hurt.”

Because? “No manners! No respect. No compassion. It’s all about take, take, take. It’s not long before someone blows a gasket. There’s no point in stringing this out I told him. Just as soon as he came to my door. I’m trying to keep things calm.” He moves his hand out across the space in front of him. “That guy wants to keep things disturbed.”

How so? “It’s like a recovering alcoholic trying to live in a booth in a bar. I wasn’t trying to force religion on him. I don’t like being around that crap. Who’s around you? I like to know who’s around me. I feel safer. More secure. More fun.”

What other times when you don’t feel safe? “It was a madhouse in Vegas. Made me nervous. Reminded me of prison. Surrounded by people and couldn’t move. People with no manners, no respect.”

For example? “Young girls were getting grabbed. It was a bad place to be. People were going to get hurt. There were cops everywhere. It was just about ready for total chaos with so many people. As far as you could see-- a mass of people! I was squished and couldn’t do anything. Let’s get the hell out of here! Get to where it’s not so hectic.”

Total chaos means? “I think the worst. You can just tell something bad is going to happen. Someone gets stabbed, a riot starts. The idiots on the catwalks shooting at you. I been shot two times already. You can feel something bad going to happen. All the cops had guns.”

You got shot twice? “First time some idiot stole from my mom. I went to his house to beat him up. I ended up getting shot in the chest.” He points to the spot on his chest. “It went straight through the back and lung. Nothing broken but the lung punctured and a rib. It was my 20th birthday. I was drinking, being an idiot. Was meaning to make amends.”

Make amends? “There’s an unwritten rule in the old west. Never harm a woman or child. Anyone who did was hunted down and paid for what he done. If I’d befriended someone and found out they’d done that, I’d

have to do something. That crap isn't cool. Especially women and children--can't understand how someone could do that to someone weaker."

What do you mean? "The whole bully thing. I can't understand it."

What things do you enjoy? "I love westerns! The old John Wayne movies. They were having a blast. Sleeping out all the time. I love hunting and fishing too. Nothing bad comes from hunting and fishing. Just kicking it with your people. No loss. I quit school when I was 16... I got in trouble there, doing some robberies with a friend. I wouldn't tell who gave me the checks to cash. The judge said leave the state or join the military. So I left. Went to Florida. Everyone was shooting dope in Florida."

What else about growing up? "Dad did too much drinking and violence. Beat the wife and kids. Outta that crowd and into the country I was happier."

More about your Dad? "He was screwed up. Mom tells me to let that shit go but I don't trust him. I don't like him in large doses. You can't take the stripes off a zebra. He'll be back like he was before. He made bad decisions and it cost him. He doesn't mean a whole lot to me-- not ranked real high."

The worst thing about him? "His unnecessary roughness with my mom. His big bully status. I tried to fight him as a kid. Not a lot you can do. The bad part sticks."

Tell about the sensation in your stomach? "It burns. As if there's a pinched muscle." He points to the same spot on his chest where he had been shot twenty years before. "I can't sleep for nothing when it happens. If it comes on strong I take baking soda in warm water and that knocks it down."

The second time you got shot? "I was coming back from a fishing trip and some people thought we were ripping off their [marijuana] plants. I got shot in the leg. It went through my left thigh. I cleaned it, let it go. It healed in ten days."

Any dreams? "Of my Dad bringing a couch over. I didn't want it. He has a bad habit of collecting junk. I didn't want it."

He talked about being a parent himself. He is strict, wants his girls to be responsible, well mannered and respectful. He tells them to “kiss his ass” if they like being with their mom more than they like being with him because he is so strict. “My job is to be a good parent. You don’t have to like me. I didn’t get to do whatever it is they wanna do. I can’t handle rudeness in kids. It irks me-- the disrespect. They got kid rage!”

When do you get enraged? “Hearing about all these priests preying on young kids. They’re supposed to be people you can trust and look up to. That creep they convicted of doing what he did to that little girl really pisses me off. If I let that shit rent space in my head there’s no room for the good stuff.”

The worst stuff? “If I can’t control it or do something about it.”

For example? “Like they should have given that one mother a medal! The one who shot the guy in the courtroom-- the guy who molested her son. That’s justifiable revenge on these creeps!”

Justifiable revenge? “A guy could spend thirty-five years and taxpayers money in prison waiting to get executed. I say make sure he’s the guy and do him. Why does the family have to suffer? Do it overnight. To think a guy like that could get out. It agitates me. Tried and convicted of murder-- like the Polly Klaus guy. He should not be allowed to live! Like in the westerns, it’s why I love ‘em. They catch your ass and hang you.”

Analysis: This is an unusual case in my practice. I knew I would be prescribing a remedy I had never used before. How to find it?

The most peculiar aspect to me was the location of his heartburn being exactly at the site of the gunshot wound. Using Reference Works in search of a remedy with “wounds from a gun”, as well as “heartburn”, the following remedies revealed themselves:

Gunshot wound [rem] heartburn (21): *agar*, *Agri.*, *Am-caust.*, *apis*, *Aran.*, *arn.*, *Calen.*, *carb-v.*, *euphr.*, *Hyper.*, *Iod.*, *Lach.*, *led.*, *nit-ac.*, *plb.*, *Puls.*, *ruta*, *staph.*, *Sul-ac.*, *Sulph.*, *symph.*

The etiology of the heartburn is also rare. It started at the time he was “cooking crank” and using a number of noxious chemicals. There are 240 remedies listed in rubrics referring to poisonings from a variety of substances. Crossing this list with the remedies listed above showed the fol-

lowing remedies: *Am-caust.*, *Aran.*, *Hyper.*, *Euphr.*, *Led.*, *Sul-ac.*, *Iod.*, *Staph.*, *Agar.*, *Apis.*, *Arn.*, *Plb.*, *Carb-v.*, *Nit-ac.*, *Lach.*, *Puls.*, and *Sulph.*

In considering the remedies arrived at, *Ammonium causticum* loomed large and bold. The elements of *Causticum* burn through the case: the anarchy and lawlessness, the rage against the injustice of the strong preying on the weak, as well as the fear of something bad happening. Yet *Causticum* does not surface in the repertorization above; it has not been classified as a remedy for gunshot wounds.

My personal experience with the *Ammonium* remedies is minimal. I recall one *Ammonium muriaticum* prescription based on a dream the patient had of his head being on fire. He was hostile, misanthropic and described a number of malicious deeds he had perpetrated. My understanding derives primarily from that particular case as one who is abusive, even dangerous, and extremely angry and anxious, especially around certain people and family members.

Reviewing the rubrics of the Mind of *Ammonium muriaticum* reveals a fear of people; dreams of shooting, of being shot, the delusion a sword hangs over his head, and the delusion he will be murdered. This recalls the anxiety of the current case in question. When he was asked what total chaos means to him he spontaneously describes the situation of being in prison, "I think the worst. You can just tell something bad is going to happen. Someone gets stabbed, a riot starts. The idiots on the catwalks shooting at you. I've been shot two times already. You can feel something bad is going to happen. All the cops had guns." Here is the delusion in his case: Something bad is going to happen and he will be shot and murdered. Though he is out of prison and vacationing in Vegas his feeling is the same, as if he were still in prison, "It was a madhouse in Vegas. Made me nervous. Reminded me of prison."

Using twelve of the *Ammonium* salts in a MacRepertory search for the delusions of those remedies provides the following rubrics:

MIND; DELUSIONS, imaginations; animals, of; vermin; crawl about, sees (14)

MIND; DELUSIONS, imaginations; animals, of; worms; creeping of (12)

MIND; DELUSIONS, imaginations; bed; someone; under it (7)

MIND; DELUSIONS, imaginations; crime; committed, he had (32)

MIND; DELUSIONS, imaginations; crime; committed, he had; five pm. - six pm. (1)

MIND; DELUSIONS, imaginations; criminal, that he is a (31)
 MIND; DELUSIONS, imaginations; criminals, about (24)
 MIND; DELUSIONS, imaginations; dead; persons, sees (62)
 MIND; DELUSIONS, imaginations; die; about to; he is (69)
 MIND; DELUSIONS, imaginations; enemy; under the bed, is (1)
 MIND; DELUSIONS, imaginations; fire; head is surrounded by (1)
 MIND; DELUSIONS, imaginations; fire; sees (34)
 MIND; DELUSIONS, imaginations; grief; weighted upon him (2)
 MIND; DELUSIONS, imaginations; hearing, of (76)
 MIND; DELUSIONS, imaginations; murdered; he will be (28)
 MIND; DELUSIONS, imaginations; spectres, ghosts, spirits, sees (83)
 MIND; DELUSIONS, imaginations; sword is hanging over head (1)
 MIND; DELUSIONS, imaginations; troubles; impending, of (2)
 MIND; DELUSIONS, imaginations; water (25)

Some of the dreams of the *Ammonium* salts include the following:

MIND; DREAMS, danger; want, and (1)
 MIND; DREAMS, falling; danger of (3)
 MIND; DREAMS, falling; flood, into a (1)
 MIND; DREAMS, hung, hanged; being (2)
 MIND; DREAMS, shooting, shot, of being, soldier, a (1)
 MIND; DREAMS, soldier, soldiers; shot (1)

The lurid imagery within the dreams and delusions of the *Ammoniums* as represented in the Repertory, are of someone profoundly troubled with a sense of threat unto actual violence, of shooting and being shot, of criminals and criminality, of bad things creeping up on you from below.

Scholten's keywords for the *Ammoniums* are: Idealising, Disappointment, Resentment, Critical, Angry, Closed.

The expressions of this state are rage, hatred, criticism, resentment and grudges toward those who have injured or disappointed them [Scholten]. This sense of disappointment is a link to their unusual idealism, which Scholten views as a key feature of the *Ammoniums*.

In the present case this idealism is suggested by the patient's strong reactionary ethics as well as his idealization of westerns and the old west as a time when justice was swift and sure. In each *Ammonium* remedy, the stage most often perceived is where this idealism is wedded to embitterment. The specific direction in which this occurs is defined by the particular *Ammonium* salt.

The sensation of the *Ammonium*'s is familiar to anyone who's inhaled the fumes: there is severe burning.

After studying the *Materia Medica Ammonium causticum* appears to be a premier remedy for heartburn: "Heartburn. Heat and in chest; feeling as if on fire from stomach to mouth. Burning pain and in throat." --Allen's Handbook

"Acts as a powerful irritant to mucous membranes, either by inhalation or swallowing, and causes oedema and ulceration. Its chief symptoms are "a burning excoriating discharge from the nose," and "burning rawness down behind the sternum."" --Cowperthwaite's Textbook.

"As soon as she had drank it, she fell back insensible apparently, as if choked. He felt as if he was on fire from his stomach to his mouth." --Ward's Repertory

Ammonium causticum 1M was prescribed in a single dose. A large supply of sac-lac was provided for use as needed. One month later the patient did not show up for his follow-up. When I phoned he said he didn't see there was any need to follow-up. He had not had any symptoms of heartburn for weeks.

Two months later his girlfriend left an effusive message on the voice mail saying, "He would never think to tell you. His heartburn is a thing of the past. It helped so much and we are so grateful. He's better than he's been in years. He was skeptical of homeopathy at first but now he's a complete believer. Thank you so much."

Later I phoned to ask permission to share the case with colleagues and learned he was consuming much less alcohol and had started his own business which previously he had not the confidence to do.

In middle-May, four months after his original appointment, I spoke to his girlfriend, who reports that he's doing great, his attitude has changed profoundly. He drinks alcohol only rarely anymore, no stomach pains and he's calmer than he's been in years, if ever...

Jessica Jackson L. Ac., *has been practicing homeopathy in Sonoma county since 1990 and in San Francisco since 2000. She has participated in a number of provings including Haliaethus leukocapitus, Carbon dioxide, Sanguis soricis, Lac lupaninum, Corvus corax, Rosa gallica and Urs arcti. She is a grateful student of Drs. Stephen King, Nancy Herrick, Roger Morrison, Bill Gray, Jonathan Shore, Divya Chhabra, Rajan Sankaran, as well as her brilliant patients.*

Editors note:

There are many cases where the change is clear, profound and lasting within a fairly short time. Despite reasonable objections from the review board, due to the rather casual nature of the follow-ups and the short duration, I chose to publish this case as I felt the remedy acted convincingly and there is learning in it.

*While the provings of Ammonium muriaticum and Ammonium carbonicum have yielded some distinct emotional symptoms, there has in the past, been little clarity as to a pattern that might characterize the Ammonium remedies generally. George Vithoulkas, in his *Materia Medica Viva*, writes regarding Ammonium carb. "I would not prescribe this remedy for purely mental disorders in that a clear cut picture of the mental state is not yet available."*

My own observations, based on five cases, is that Scholten's ideas on the Ammoniums, as discussed in the article, may be very valuable in characterizing certain of the emotional patterns of the Ammoniums as a group. However, these must be compared to Manganum, Ignatia, the Magnesias, Natrums, and Nitric acid, among others, which can also yield the quality of embitterment or rancour. - NT



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DYSMENORRHEA AND IRRITABILITY WITH HER FAMILY

LIANNE SOUTH DC, ND, DHANP

I have had the excitement of getting to know a relatively unknown remedy – at least for me – with this case. Shelley, as I will call her, has done well on only this remedy, for different conditions for over three years.

I had known Shelley for five or six years previous to her coming to see me. I knew that she had terrible endometriosis and had had surgery. Whenever I saw her she was always very tired or in severe pain. Finally, in October 1999 she came to see me. She is a poet and 35 yrs old.

Her Case:

Numb right arm from shoulder to fingers – my writing arm! No better from massage or physiotherapy. First noticed it three weeks ago. What is bothering her now is her arm. No mention of the endometriosis.

Hate working part time, rushing home! My husband's been an asshole or I've been a bitch. Tears, tears. I get so angry, sometimes I vocalize it, sometimes I eat it. Shouting doesn't do any good, but it makes me feel better. I have lots of problems with anger. I was hyper-responsible. Lots of work, the oldest of four kids. From age ten, I was the babysitter and by thirteen, I was cooking all the meals for six of us.

Immediately we get an emotion packed story.

I remember younger childhood sitting on my grandmother's knee, being rocked. After she died, I fell apart. My mom and dad drank. It grosses me out. Sometimes I feel I'm my mom's mother, I've given her all the nurturing. She wouldn't be in my life, if she wasn't my mother.

She was mother to her siblings and to her mother.

Childhood? She told me what to do, never there emotionally. Never a hug or kiss or acknowledgement. I remember this from my grandmother, not

my mom. Cries. I thought I'd dealt with all this shit before! Tears, tears. So lucky to have my mother-in-law in my life, otherwise I wouldn't know how to be a mother. Hard crying. To be the kind of mother I want to be or wish I would've had.

Being a mom? The hardest is keeping everything organized; school, notes, lunches, appointments. All the mundane things. It's too much, too many things to keep track of. It's getting them organized to lead their lives, all the mundane things.

My mom left when I was eighteen. I did three years of mothering then dropped off planet earth. Dropped out of university. One time didn't leave the house for three months. I was in a daze. She left with another man, someone that I had baby-sat for. I was so angry. I told my dad who it was. I was at university, but came back home and I cleaned. I cleaned the stove, the fridge. I cleaned, cleaned and cooked and cooked. I did all the mundane things. A zombie, I didn't feel. I cut off all contact with my friends and held tight to my family.

She didn't feel; the first thing that she told us is that her arm is numb and she can't write which is her passion. She coped by cleaning.

I slept a lot. I can always sleep. I didn't talk to my dad. He was reeling from the loss of my mom. We lost the farm. I didn't speak to my mother for one year. That legacy, that birthright was gone. When I did speak to her, I just screamed and screamed. She made no effort to contact me. Even when I met my husband, she made no effort. Maybe I felt stronger with my husband beside me.

Dad and I got very close after mom left. I've seen him cry. I still can't fathom the idea my Dad will die before I do. I really admire him for what he did after mom left. I don't think many men could have done what he did.

He quit drinking and took care of the four girls.

I'm like my Dad body-wise and emotionally. Family is very, very important. Even my chosen second family. My best friend's mom was my second mom. I have close friends that are even closer than my sisters. People are very important to me.

I hate the cold. As long as there's sun it's OK. Gray and ugly days, miserable! I'd kill someone if I lived in Vancouver. I love the heat, but if I couldn't cool down, I'd probably kill someone. I sit in the shade at the beach.

She lives in the prairies where there is sun in winter and summer. Not much heat, but sun!

I love chocolate of any kind. Not much comes even close to that. What else? Pasta, pizza, roast beef and potatoes. Sweets in general. I really like food. < dairy which causes pain in right abdomen. Like a tightness, a stabbing. Get bloated, diarrhea eight hours after eating of any dairy. I avoid it at all cost now. I have to curl up and hold myself for days.

This last sentence is important.

I burp if I eat too much. Heartburn a lot, sometimes it even wakes me up in the middle of the night. Constipation around ovulation. I get such pain at ovulation; in the pubes, for two days and it extends into the sacrum.

Menses? Heavy, heavy, seven or eight days. Bright red blood with dime sized clots. I used to be regular, but in the past two years, it can be anywhere from three to six weeks. I get such pain in my abdomen an hour before it comes. Aching. I used to get bad, bad cramps when I first started menstruating.

I get PMS. Very on edge, shoulders go up and I walk around with everything irking me. I'm short, rude... a nasty bitch. And I like it. Snarky. I've been called a bitch all my life for speaking my mind. If I can catch myself, I'll go and hole up, go into myself. When I'm writing, it comes out. Highly charged.

Dream: In a war zone, babysitter getting shot at and I was her mother. She did get shot. We were running together, it was dark, shots were coming. She was shot and I was dragging her. Tried to bandage her, but she quit breathing. I woke up crying.

Another dream of being upstairs in my bedroom and I thought someone was in the house. A stalker was coming upstairs. I couldn't scream, then I could.

Fear of being safe. I do like being by myself. Fear that I'll end up being alone, like my mom now. She's 56 years old and has nobody. Greatest fear is to be my mother. She's really alone. Tears, tears. The worst insult is for someone to say, "You are just like your mother." I get angry immediately, hot, insistent, I blow up. I'm not a hitter. I'm starting to get mad at dogs. Big fear of dogs, of being bitten. Afraid of heights.

Diagnosed with endometriosis in 1986. Had surgery to remove endometrial tissue on right tube and right ovary. It didn't make any improvement. Now, I have a week of very, very bad cramps with my period. But the worst is mid-cycle.

I was on the pill for 4 years, then the IUD for two or three years. That's when I started having the cramping. I had continual vaginal yeast infections for years. Lots of UTI's.

Two pregnancies. I loved being pregnant! Deliveries were fine. Postpartum depression for two weeks after my second. Pap: CIN II and cone biopsy eleven years ago. Normal Paps since then. No breast symptoms, but tender right axillary lymph nodes for years.

I got a panic attack two weeks ago. I thought I was dying of a heart attack. My chest was really, really tight. It was in the middle of the night. I've had some hyperventilating panic attacks before, but not as bad as this one.

Had lots of chest problems. As a child, this was my weakness. Every winter I'd get a very bad chest cold with a cough that would last all winter. Cigarette smoke makes my eyes water and stuffs up my head. I have permanent sinus congestion. Have chronic low levels of iron forever.

For a long time, I was active in the feminist community. Making judgments on myself for wanting to stay home with my kids. I've never been good at partitioning myself, never. Even working full time is easier than part time. I'm an all or nothing person. When I walk in the door, it's the chaos at home. The whining, complaining and then I have to cook supper! I'm miserable. I hate being interrupted. Happy to see them, as long as they aren't whining and complaining. Then I think, "Why did I ever have children?" I get self-pitying and feel so sorry for myself. I'll be short and all that old shit of being a mom... turning into my mom who left and the mothering mom I had to become.

Analysis:

Right from the beginning we can follow the story of the patient:- family, specifically mother, being motherless, mother to her siblings, then a mother to her own children. What she admired in her father was that he could parent the family after his wife left.

Her comments about the difficulty with her children could be common symptoms, but where it leads is specific to her. Her biggest fear is to be alone, to have no one, like her mother is now. Turning into the mom that had abandoned her.

The dynamic of the case is the tension of being in or out of the family; to be together in the family to be held in her grandmother's lap, to be mothered, to be mothering, to learn from her mother-in-law, who she admires, to mother well - or to separate herself from the family, to drop off the planet earth, to turn into the mom who leaves. She herself says that she isn't good at partitioning herself; that it is easier to work full than half time, that she is an all or nothing person.

Rubrics:

It would be good to have rubrics that represented these two aspects:

Affectionate

Company, desires

Escape, attempts to; family and children, from her.

Children; aversion to or Irritability; children, toward.

The exciting cause for her is her mother leaving the home, abandoning the family and abandoning her.

Forsaken.

She tells us many times that she is angry and doesn't hold back, but actually enjoys it. This is a quality of spitefulness. Malicious. I came across the rubric Truth, tells, the plain while looking up the remedy, *Veratrum*. Vermeulen describes this as being devoid of consideration and tact. I thought that this fit her exactly.

Malicious and/or Truth, tells, the plain.

She came up spontaneously with liking chocolate.

Food, chocolate, desires.

The symptoms of her chief complaint, endometriosis, are very common and so not particularly useful. But the abdomen pain from eating dairy is unusual.

Abdomen, pain, stitching, sticking, hypochondria, right.

Remedy:

Chocolate 200C 3 doses in 24 hours.

Jeremy Sherr did the original proving and I was, by good fortune, taught the remedy by him.

Chocolate and cocoa are made from the edible seeds of the tropical American tree *Theobroma cocoa*. *Theobroma* has existed wild in tropical America (within 10 degrees of the equator) since 4000BC. The name *Theobroma* means 'food of the Gods'; cacao is derived from the Aztec name for the cocoa tree.

Originally grown by the Mayans, they took beans with them on their

migration south. They settled in lands eventually dominated by the Aztecs. Chocolate dominated every facet of Aztec life, from sexuality to their economy. Cocoa beans served as currency; you could buy a rabbit for 10 beans, a slave for 100 beans. They believed that cocoa was a divine gift from their god, Quetzalcoatl. Only the nobility were allowed to use it. It was valued high above everything else, including gold, much to the conquistador's astonishment.

Cortez took chocolate to Spain in 1528. Europeans didn't take to it initially, but when sugar, instead of the Aztec's hot chili peppers, began to be added to it, it became popular. Together with tea and coffee, "Chocolate became part of a new social activity in distinguished society."

In France, it was considered a medicine before becoming a drink of pleasure. Until the Dutch invented a press to force out much of the cocoa butter, it proved to be too difficult to digest for some people because of the high fat content.

Originally, chocolate was used only by the nobility. During the 16th century love potions were popular and "love sickness" was regarded as a specific disease. From reports of the conquistadors, the Spanish were convinced that it was an aphrodisiac. Casanova swore by chocolate and ate it as a prelude to lovemaking. The French King Louis XV's principal mistress, Madame du Barry, served exquisitely refined but essentially drug level chocolate to her various suitors.

Chocolate has been associated with love and romance ever since. The Cadbury brothers introduced chocolate in heart-shaped boxes in 1868. Chocolates are traditionally given on Valentine's Day, anniversaries and birthdays. Eating chocolate is a very sensuous experience; from the beautiful packaging with the images of seduction and pleasure, to the smooth, rich, enveloping taste in your mouth.

Theobroma cocoa grows in the shade of taller trees of the rain forest. The tree grows to 20 to 25 feet. The branches fan out from a central stem. Many small flowers grow from the older wood, but only one in five hundred flowers produces a mature fruit with pod. On average, a tree produces 20 mature pods per year. When ripe, the pod contains 10 to 20 seeds, known as beans, which are covered in whitish pulp. If separated from the capsule, they soon become infertile, but if kept therein, they retain their fertility for a long time. Making chocolate liquor is a very labor intensive process; involving fermenting, drying, repeated roasting and crushing. Chocolate liquor, when hardened and pressed, produces cocoa butter. In order to produce sweet chocolate, chocolate liquor is mixed with sugar, flavorings and cocoa butter; for milk chocolate, milk solids are added.

According to Jeremy Sherr these are the main ingredients in cocoa:

1. Caffeine. Stimulating to the nervous system, heart, blood vessels and kidneys.

2. Theobromine. Resembles caffeine in its action, but the action on the CNS is less powerful, but muscle, kidneys and heart more pronounced. This is considered the habituating constituent.

3. Phenylethylamine.

Biochemically, in states of euphoria such as being in love, the brain secretes phenylethylamine (a substance similar to amphetamine). People suffering from rejected love have lowered amounts of this substance in their body. It has often been speculated that the subconscious chooses chocolate as a substitute. It is common knowledge that many women crave chocolate before their menstrual period, which is usually a time when they are more vulnerable emotionally.

Chocolate: The Remedy

Although it is a plant, in the original proving by Sherr, provers used the word ‘animal’ a lot. There was a lot of animal consciousness and empathy to animals. His proving was done in England. Sujit Chatterjee did another one later, in 1995, in India. The animal theme not present in his proving.

In Sherr’s proving, Prover No. 1 had an image of a hedgehog’s face within hours of taking the first dose. Later that evening, she felt uncharacteristically unsympathetic to the children, “couldn’t cuddle them and thought that their father should look after them instead of her.” She much preferred to be outside roaming around. By the second day, she was having many thoughts and images of hedgehogs. She felt angry about being in the city and went to real estate agents to look at country houses. She wanted to hibernate and to curl up where it was warm and dry. By day five she felt her nose was growing longer and that she could twitch it and her face felt sharper; as she described it, “like a hedgehog.” For one week, she wanted to eat only berries and be outdoors with an increased awareness of dogs and birds.

After the proving, the connection to the hedgehog was made. The female hedgehog is a good mother, but she rears her young for twelve short weeks. Then she refuses to suckle them, turns her prickly back to them and goes off. We can say that there is a specific analogy between the mentality engendered by *Chocolate* in the provings and the social life of hedgehogs. Of course, it is rather striking and strange that hedgehog shaped chocolates are a perennial favorite. This odd and inexplicable relationship continues through other elements of the proving, as we shall learn further on.

This information about hedgehogs, plus the general feeling throughout the

proving provided the theme: one of nourishment and the relationship between mother and child, the mother/child bond.

"Feelings concerning the texture, smoothness, warmth and melting in the mouth qualities were often associated with nourishment, breast-feeding and motherly love.... These aspects seemed to revolve around family issues often in connection with nourishing and raising children." (Sherr).

There was lots of bristly anger in the proving. "Irritable with the kids, shouted a lot, slammed doors. Feeling very uncomfortable with my daughter near me... I wanted to leave and walk out of the door on them. Felt very unsympathetic to the children... Couldn't cuddle them... I thought that their father should look after them instead of me."

This is especially true towards older children. Children, aversion to. Escape, attempts to, family and children. Or they can be indifferent to the point of aversion to everyone, especially their children, husband and family. Estranged, family, from her.

There is a feeling that I can't be where I should be because of the children. This is brilliantly illustrated in a case by Julek Meissner in LINKS 1998. In it, a woman relates her dream, "...of running down a highway, trying to get somewhere fast as possible. Suddenly, my younger son appears. He starts leaning on me, slowing me down. I push him away. I can see my destination, but he prevents me from reaching it. It is very annoying."

The opposite is the feeling of bonding associated with cocoa. They can be wonderfully affectionate and loving. They relate very emotionally to their world. Vulnerable, emotionally. Good communicators who like being with people. In early Europe, they had chocolate houses, much like our coffee houses of today, where people socialized and talked the politics of the day.

According to Sankaran, *Theobroma cocoa* is a member of the Malvales family. He proposes that the inner feeling of the Malvales family is one of attachment and then detachment. Of being joined, being together and then being separated. In their actions and reaction to this feeling, they can be indifferent, averse to everything, but especially family or affectionate, communicative and happy in company.

Chocolate, as we have seen in the proving of Sherr's, has many symptoms of ambivalence with their children, husband and family, but from the adult's perspective. Sankaran reveals the feeling from a child's perspective: "It is the feeling of a child who was separated from her mother too early, while the need to suck at her mother's breast was still strong." This emphasizes the feelings of forsaken, estrangement from family. Being separated from her mother makes her feel as if she is separated from her world. Estranged, society, from. Delusion, separated, world, from the, that he is. They are

being left to fend for themselves, left to find nourishment, affection, love, warmth and contact.

In the proving, there were many references to babies and children. Dreams of being pregnant, giving birth, losing her family, lost at home, death of relatives.

Jeremy feels there is a dichotomy between our human, civilized behavior and our animal nature. The evolution of raising our young for long extended periods, often in social isolation contrasts with the animal instinct of expelling the young as soon as they can fend for themselves. One of our most animalistic, uncivilized remedies, *Lyssin* has a strong desire for chocolate, as does *Carcinosin*. *Carcinosin* has been called the remedy of over civilization. Food, chocolate, desires.

This dichotomy was also expressed in the proving as dreams or desires to abandon the city and urban environment. To return to a more simple or primitive existence. The desire to be connected to nature, roses around the door, cottage in the country, organic vegetables. There were dreams of selling fruit and vegetables. Strong desire to wander free and forage for food. Hedgehogs roam in the woods for miles at night. Two provers dreamt of gypsies. Dreams, journey. Travel, desire to. Wander, desire to.

There was the desire for sunlight and open spaces. Light, desire for. Or the opposite, to hibernate. Even the desire to stash chocolate away reminds us of hibernating animals.

A strong desire to curl up into a ball when distressed or in pain. Or the opposite, to stretch out backwards. The hedgehog has a very soft, vulnerable belly and with any threat, it immediately will curl into a prickly ball. *Chocolate* patients do best with hard pressure.

There were lots of insects, worms and cockroaches in the proving. The American Food and Drug Administration has published a monograph for chocolate manufacturers which specifies that up to 4% by weight of chocolate may legitimately contain 'cockroach parts', since it is apparently impossible to prevent these bugs from contaminating the vats in which chocolate is manufactured.

David Mundy reports that two patients did well from symptoms dating from either fleas or deer tick bites.

Chocolate has lots of sharp, spiky pains in the proving. Patients complain of stitching, stabbing pains. Also they have a sharp tongue; sarcastic and harsh when irritated. They will say that they tell it like they see it, that they will never lie. That they will tell someone the truth, no matter if it hurts them, to the point of being cruel. They see no need to curb their irritation with people around them. This was well described in the proving:

“A friend visited and I felt I wanted to tell her the truth. I didn’t agree with anything she said, but only once did I say so. I felt good when I saw the effect that it had on her. “I’m ready to speak my mind – I don’t care if people cease to like me.”

They can be very industrious with lots of creative activity or the opposite, complete lassitude with great indolence to work and indifference to everything. They care passionate about politics, the environment, social concerns and can argue heatedly to the point of abuse. At some point, they can cut people completely out of their life.

Sankaran has *Chocolate* in his acute miasm. Generals, sudden manifestations.

There were many dreams of accidents, cars and driving, murder, death, falling in the proving. Although they are cold, there are lots of heat sensations, after eating, with exertion, in the evening, at night. They love to be warm, to cuddle up under a blanket, or in bed, to be in the sun, to be dressed in many layers and have the window open. They like open fresh air and to walk in the open air. They are better from going for a walk. They do best in dry, warm air and are worse from cold, wet.

It is a big respiratory remedy. David Mundy feels that it is in the tubercular miasm. There is coryza > open air < warm room. The cough is < night. They wake from the cough, it’s dry and hard > drinking. There can be internal coldness and constriction of the chest.

As chocolate is a cardiac stimulant, we find lots of palpitations and a sensation of the heart being enlarged and bulging out through the ribs. They crave chocolate. Often they will tell you all about their chocolate addiction, which chocolate is the best, the merits of the different types, how they hide it from others, how they prefer it to sex. Others may be reluctant to tell you just how much chocolate they eat. They also like juicy fruits, cherries, berries, oranges with an aversion to cooked or solid, heavier foods.

Chocolate contains phosphorous and magnesium as well as iron and calcium. *Sepia*, *Phosphorous*, *Magnesiums* and the *Lacs* are all similar to *Chocolate*. *Sepia* has genuine lack of feeling, lack of motherly love. *Chocolate* does have maternal feelings, but just leave me alone. Get out of my way.

Follow ups:

November 1999

Sad and disappointed. I decided to resign from my Writer’s Board. People don’t know how to take me. I speak the truth. I got angry. My anger was a concern for them. I got people’s ire up. I got mad and blew up. I used a

bit of sarcasm I'll admit. Told the president that she wasn't half the woman I thought she was. I was called abusive. It pisses me off.

I don't have to put up with this. Better to leave or separate myself. I don't have to allow myself to be abused. At first there was disbelief, then anger. Who the F are you??? Treated unfairly makes me cry. Being not appreciated, abused is familiar. When I was a kid, a cousin and his brother were poking sticks at me. I told them to F-Off. My mother strapped me up one side of the body and then down the other. I screamed and cried. I couldn't believe that my mother hates me this much to hit me this much. I felt so alone, very, very alone in the world. Nobody came and asked if I was OK. I was left to cry alone.

Had a dream that I was a nectarine sharing with someone. Very juicy, very nice. Pleasing, almost sexy. Another one that was more hazy; a woman mentor was transmitting to me. She was saying, "It's OK, I'll make sure that your writing program will happen." I felt so comforted, warm, fuzzy feeling. Almost like she was an angel. It was so wonderful.

Right arm still sore, but mostly my hand. Finger and thumb still tingle.

You and husband? Good. He's been so supportive. That means I've changed. Showering me with affection.

December 1999

Shitty. Angry, sad, teary, stressed. Her favorite sister-in-law diagnosed with cancer and is very sick. Everything's been making me angry. I screamed so hard at the kids, I had a sore throat. Then I feel so guilty that I want to curl up in a ball and go away. Make it all go away. I want it away from me.

Dreams of confusion. Being left by my good friend in a restaurant. How will I get home? It was so crowded, too loud, too many people.

Noise drives me crazy. I get really high strung. I go crazy, berserk. It irritates me.

Dreams with flirting with a friend. Very aroused. Going to the bedroom and thinking he will come to see me, but I look and it's my husband coming in bed with me. I was shocked it wasn't my friend. Such sexual feelings!

What a difference with my period! No big gush, it came gradually. Last two periods have been 30 days apart. A different pain, not the low back pain, but like a tightening in the abdomen. It was very intense for two days prior and three days of the period. A bitch for the week before. That was much worse than usual.

The lymph node was < end of the period. It is more in the breast. Shoulder pain 2/10.

PLAN: *Chocolate* 200C BID 3 days.

January 2000

Flu, chest wheezing, coughing fits. Since Christmas. Taking Ventolin. Dry, hacking cough, < cold air, < dry air. Started with right ear, goes to throat and then I either beat it or it beats me.

Gall bladder attack Christmas Eve. Tightness around umbilicus.

On verge of falling apart. A lot of thinking, reassessing. I need to write. Explaining this is so hard. Cries. Nobody understands this.

Haven't been sleeping well. Wake up at midnight, wandering around. My mind goes constantly. My former friend, I'm fed up with her. She's a horrible, horrible mother. Makes me so mad. It's been like this for years. I'm ready to forfeit the friendship. I see my mom in her. If you aren't going to take care of yourself and the children, don't ask me to do it! She is too self-absorbed. Her life revolves around her family, but not in a healthy way.

Menses are normal. Come and go gently. A few little crampy days. Less bitchiness.

Right arm: tingling in thumb. No numbness. Small pain in right shoulder.

I'm emotionally healthier. Letting myself cry with the kids, instead of shouting at them, I can say how I feel. I don't just flip out. Before I'd just blow.

PLAN: *Chocolate* 200C

March 2000

Menses fine. Coming on gently and fading away. Regular. Mid-cycle bitchiness, I could easily bite someone's head off. Tender right breast for 4 or 5 days. No low back pain.

Heartburn on and off. Affects my right arm and right hip. This was like before my gall bladder attack when I was pregnant with my first child. Bladder pain on the left side of the pubes off and on. Some frequency.

Dream: I was dating someone else. Sneaking around on my husband. Where the heck is my husband? I'm worried about him and I. He's so far away and I work so hard to pull him in.

Had a cold one month ago. Only involved the head. No coughing, no ventolin.

May 2000

My hips are on fire, like before I was diagnosed with endometriosis. Terrible low-back pain. I was in tears. < my right hip and buttock. Menses was darker than usual. Nice easy start, but then lower pelvic floor pain. It was so, so bad.

Had a major blow out. There was no room to put supper on the table. I just dropped the dishes and ran out the back door. I knew exactly why my mother left. I stayed outside and knew it would be so easy to numb myself and leave, like she did. I went out for a drive. That night my husband and I talked. I feel, why are you here if you don't want to be? I feel neglected and insignificant.

Took the kids to the farm where I grew up. Nothing much is left. The house, barn is gone. Walked around telling stories. So hard to see it so bare. Everything's gone. Pissed off.

Blood values:

	October 1999	March 2000
Ferritin	38	61
Serum iron	4.3	7.4
Hbg	121	120

She has never been able to get her ferritin to change, no matter how much or what type of supplement she took.

Heartburn on and off. Gall bladder symptoms, back pain < dairy.

June 2000

I induced a gall bladder attack. I've been crying for two days. Laid an issue on the table with my husband and he hasn't responded. I'm making myself sick.

Called him on his drinking. How much longer do you think your liver will last? Lost two uncles to liver cancer, don't want to be a single parent. I get angry. This is the first time I've let this out. Everything is going well between us and then I have to open my big mouth. I brought it up, because it is time. I'm strong enough to deal with it. It's big. Cries throughout. Twelve years together. This remedy stuff is scaring me, Lianne. Fear that our relationship is over, I've pushed him too far. This morning, I started crying uncontrollably, just sobbing. It reminds me of my parents. I felt neglected, the only priority is the beer, the kids and I are secondary.

Dream: A friend and I come back home, my mom is there doing laundry. She's rummaging through cupboards trying to find things. I apologize for the mess. I'm standing at the stove and I think, it's time to renovate. I objected to my friend coming in because my house was such a mess. Discomfort of having someone see I'm very sloppy. I'm not a good person. I don't do housework. My mother taught me this cleanliness. I'm a rebel with that.

Plan: Wait

I felt that she is healthy in herself enough to risk family by bringing this difficulty up.

September 2000

I hurt so much. Started with August menses, pain in my sacral area. Fire, knives twisting, spread to right hip and down both legs. Unending. Nothing helped. Then with my September period it was even worse. Haven't had pain like that since 1996. It came from my right abdomen, throbbing, pushing through to the back.

Long talk about cleaning, keeping her house together. Only thing that is neat and tidy is my desk. My life, personal stuff is neat such as my writing area. I partitioned up the living room and told the kids, "This is my office and my space." I moved the furniture around to make the space more pleasant and usable. Did some curtains. I'm so content being here. Content where I'm going with the writing.

PLAN: *Chocolate* 1M

She kept an unimaginably untidy house. People didn't want to visit her because of the mess. Until this time, she was totally unrepentant about even thinking of doing anything different.

In February 2001, moved into a new and bigger house. "A step closer to my dream home. I just love it! The light! The light! So much more light. Shocked that the house means so much. Realized with the cleaning, it always kept me from a close relationship with my mom, it always came first. Now it makes so much more sense to know that I'm putting the kids first, not the cleaning."

She keeps her new house more tidy and orderly. There isn't the charge around cleaning as there was previously.

The last dose she's had is *Chocolate* 10M on August 2002. She has done well. She has had minimal endometrial pain and periodic gall bladder symptoms if she eats a lot of dairy. She has always responded favorably to the remedy.

She had one dream where she and a friend were riding their bikes and they stopped. Her face was covered with chocolate. Her friend licked it off and then gave her a great sensual kiss. Then they got back on their bikes. She felt shocked, but "a lovely kiss."

Her last email: "I'm just getting over a cold, but other than that, life couldn't be better."

Lianne South DC, ND, DHANP lives in Vancouver, Canada and practices at the Vancouver Centre for Homeopathy. She has been teaching at the Vancouver Homeopathic Academy for eight years and more recently at the Texas Institute for Homeopathy in San Antonio, TX.



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CASE OF POLYARTHRITIS

NADIA BAKIR ND, FCAH, DHANP

August 15, 2002: 55-year-old female presents with remitting chronic joint pain.

Appearance: bright looking, average height, brown hair, blue eyes. Pleasant and friendly attitude. Wearing a red top, black skirt with colorful flowers, silver earrings and jewelry. Of German background.

Case is presented in order of how it unfolded during the interview:

Joint pain started one week after returning from a trip to Ecuadorian jungle. When it started she felt totally “paralyzed”. “Crippled”.

She underwent cortisone injections, which helped initially but the pain, returned.

She then saw a naturopath who prescribed homeopathic *Sulphur*. Pain improved a lot. When she came to see me she was still taking Sulphur but said it is “letting me down now”. Each time goes up a strength (potency) she improves for 1-2 months. Went up to *Sulphur* MM.

The pain is in the arm, knee, ankle and shoulder joints. She says “mirror image all the way down” (bilateral).

Pain < rising on, > moving, < rotation movement: e.g. can’t play golf, < mosquito or spider bite.

Pain is “burning”. Feels as if no lubrication in the joints.

Burning pain starts “bang in the joints”.

First time the joints were “frozen”. Nothing moved at all. I literally could not get up. Husband took me to emergency

She says she has a high pain threshold e.g.: once walked with broken fingers and toes. Not afraid of pain.

DDX: Dr. ruled out tropical disease. Side effects of malarial medication-but doctors don’t think so.

Pain started within one week after returning from Ecuador (1998). Before that no complaints, healthy strong person.

Everyone gets odd pain here and there. If over 50 y.o. and no pain you are dead.

This pain is more specific and localized.

Always wanted to go to the jungle. My life dream. (Speaks very colorfully and enthusiastically about it-I can hardly keep up with the writing). All the unknown, the mysteries, wonderful life, interesting plants. Would go back in a shot.

{Pause}

What do you enjoy most about the jungle? Green, all varieties. Everything moves and shimmers. Sounds that come to you and you do not know the origin. Have to look for it with patience, because it is only visible to the patient eye.

All my life wanted to be somewhere where there are rivers and mysteries away from civilization. No disturbance. No cares, no pollution, no people but like being around people. The grandeur of nature. (speaks with zest)

I am a passionate gardener. It is the ultimate garden (later I found out that she has a garden that is wild and flourishing, somewhat like a jungle. Apparently quite the sight to see).

Tell me what you mean about ‘mysterious’? You cannot predict what you are going to see. You go to see the parrots but no parrots show up, instead you see monkeys. And they are there on their own terms.

I love the idea that animals stand on their own terms and nature does e.g.: went swimming with the dolphins in Honduras.

I like unusual locations: Ecuador was the best!

{Pause}

What is it about plants? I like the foliage more than the bloom. I do not like structured gardens. I like them to evolve where they like to be. My garden is a mini jungle. Trees around a pond and running water. To see the whole garden you have to make your way out. Not knowing where you will go or how to get there. Like mini mysteries.

I do not like stiff, formal things. Things that need a huge amount of interference.

Don't like perfection. I have a weed here or there and I don't spray for bugs. It is OK if living things are there and eat the plants.

{Pause}

How is your condition affecting you? It is limiting a whole bunch of activity:

1. Affects ability to work out (Likes to stay fit; concerned about her weight although she is not very overweight maybe a few pounds extra).
2. Affects my sleep: aware of pain when turns in bed. It sort of bubbles to the surface of consciousness. Don't really sleep through the night solidly: surface a little bit then go back to sleep (since early 40's or 50's).

Hysterectomy age 42 because of fibroids. Caused endless bleeding up to 3 weeks per month. D+C did not work

Menarche age 12. Regular cycle 30 d, menses 5-6 d. No dysmenorrhea, no PMS. When fibroids started they bled all the time. Ruined 3 symphony seats. Got pretty bad, pretty quickly.

Gynecologist said "Lets rip it out, you don't need it". Those were difficult times. We were obedient. I trusted him.

Husband's business (union lawyer) is not going fantastic. It is not as if my existence is at stake. Worries about his health (fx hx heart disease).

Happy childhood. Caring, loving parents. Grew up in Germany. Came to Canada age 25 on a whim. When I lived in Berlin I saw a film on Lake Superior. It was so beautiful, those forests, all that space! 1 week later left Germany for Canada. Knew no one.

I would not want to live in isolation away from the human community. I'd go crazy to live without support system: friends etc...I am an urban critter from Berlin. Like the best of both worlds.

Loves classical music and concerts, shows, exhibits, movies, cabarets etc
Top on list Chopin, Beethoven and likes Motown too.

Met husband 1 year later and have not looked back. Only draw back is our families are far away.

His (husband) mother is a very demanding, perfectionist. I get along with her well because I dance the dance: do not confront, do what she wants. I confronted her in the beginning when first married. I set the parameters of relationship: she had a choice to live with me or not have a son. (Husband is Jewish and she is Catholic; converted to Judaism after marriage). She does not like to be told how to run her household or raise her kids.

I have been really fortunate. Did not have a complicated life: good family, immigration worked out, found terrific partner; two great kids and love them to bits.

Hates to be in a position addressed as “The Mom”. Wants spontaneity in relationships. That permits everyone to be their own.

We often define ourselves in relationships we have nurtured in our lives. Everything shifts, no one is ever prepared. Everything revolves around someone else’s needs and schedules.

I am very good at taking time off for self when things get hectic: cup of tea and go into the garden: pull out dead plants or walk the dog.

Tend to overload schedule with volunteering cause love it. E.g.: therapy dog for ambulance, in charge of “meals out of the cold”, lead services at synagogue.

Volunteers always get more than the person on the receiving end.

About pain in joints: Something that physically bothers me that I can’t get a hold of. I know it ought to be fixed. Whatever crept into my joints or if it is an autoimmune problem. Every stupid spider bite resurfaces it. It is not going to keep me out of my plants.

Energy: 8/10

Sleep: Good. Need 8-10 hours. Face the world at 9:30 am. Position: On front. Can’t sleep LHS hurts the side (since always).

Dreams: Tend to be straight forward, about issues I solve.

Recurring nightmare: Sinking in a swamp and going to die because could not breath. Feeling I would always suffocate because the mud would go into my mouth. Felt helpless could not save self. In real life I actually sank in Ecuador and husband pulled me out. When it really happened I knew I would not die because the jungle floor does not have much topsoil. I sank, wearing tall rubber boots (cause of snakes), could not lift my feet out, had the feeling I was stuck, how am I going to get out of here? (Has not had that nightmare since this experience in Ecuador).

I can fly. Beautiful color.

{Pause}

-Night is when demons come. Every ridiculous problem loses proportion at 4 am and you don't seem to solve anything. Things take on an importance that they do not have in real life.

I was born at home during the war. No one was present. Mother escaped to a small island. Was sure husband (her father) was dead. He walked into the room and she went into labour. I do not know if I was an accident?

Temp: Toasty warm since menopause. Before spent most of life cold. Much more comfortable now and no more cold hands and feet.

Appetite: Good. On weight watchers since 2 years ago. Most of life slim. Started middle age and spread, did not like it. Felt blimpy all over. Felt as a Matron image problem: tight curls, gray hair, no waist, lack of sex appeal, an androgynous figure emerges; cultures where women do not pay attention to themselves.

Don't see myself as nonsexual. Matron you are not a woman, not sexy.

I want to perceive myself as desirable in our relationship (with husband). We see ourselves in our relationship with our partner, young and sexy. Relationships get better over time cause equalize, harmonize. You want then to stay.

Don't want anyone to call me mama: To be written off, become invisible. Want to be high-powered, energetic, haute.

The grandmother: means someone old, lost power of opinion, not considered important.

Like to be on a board of organizers. Don't like to be passive.

Cravings: CHOCOLATE! I rarely give in to it. Remembers first experience with chocolate: was 8 or 9 years old (describes this with great passion and zest). (Did not have chocolate earlier cause grew up in postwar Germany.

In the good old days could polish off a chocolate without good thought. Something in chocolate that speaks directly to our core. Never met a man who had a relationship to chocolate that women have. Chocolate is the ultimate console when your world is coming apart. Favorite is Toblerone milk chocolate with hazelnuts.

Last on the list is protein.

Do not like slippery food e.g.: peanut butter, raw oysters, avocado, coconut milk.

Aggravations: nausea < chocolate (3) e.g.: one small chocolate bar.

Thirst: Lots of water, since always. Wakes up thirsty and dry at night.

Other remedies/Treatments:

Carcinosin-no result

On HRT since 14-15 years

ASSESSMENT: My approach to this case was as follows:

- Read case over and pick out the recurring/repeating ideas and themes that run through the case. Write these on a piece of blank paper and draw a circle around each one making sure the size of the circle is proportional to the importance of the symptom in the case (Louis Klein circle method).
- Identify the strange, rare and peculiar symptoms in the case and sort them by CHI value (Andre Saine's valorization technique).
- Connect the symptoms to their appropriate circled theme or idea.
- Form an Imbegriff of the case (Imbegriff is a German word that Hahnemann apparently uses in his writings. It means "underlying motivational force". Louis uses it often in his teaching.)
- Choose 1-2 symptoms that you can with confidence translate into the repertory
- Repertorize these symptoms, forming a repertory chart.
- See if you can identify any of the remedies that show up high on repertorization and that fit the Imbegriff (Louis Klein) with help of *materia medica*.
- DDX top remedies and chose most appropriate.
- Chose appropriate posology for case.
- Themes in the case:
- Movement/freedom/spontaneous versus stuck/paralyzed/control/perfection/frozen
- Artistic/dance/color/music

- Lubrication versus drying up
- Water versus suffocation
- Impulsive/bang/shot/on a whim
- Dual nature/mirror: sexy versus motherly/matron
- Undisturbed/alone versus people/culture
- Repression versus independence
- Wild /jungle versus urban/civilized
- MYSTERY/UNKNOWN
- Matron/invisible/written off/accident versus shimmering

Imbegriff:

I feel stuck/limited in a predictable environment and I need to experience movement/freedom in a wild unpredictable way

Rubrics:

For theme of freedom and movement: Use all 3 rubrics as one:

1. Mind; TRAVEL, desire to (38) *
2. Mind; WANDER, desires to (19) *
3. Mind; COUNTRY, desire for, to go into the (7)

For theme of lubrication versus drying up:

1. Stomach; THIRST, night (91)

For theme of stuck/paralyzed/control/perfection/frozen:

1. Extremity Pain; GENERAL, joints (385) *
2. Mind; DREAMS, unsuccessful efforts to; do various things (28) *
3. Generalities; TURNING, agg., bed, in (59)
4. Generalities; PAIN, paralytic (123)

For theme of dual nature/mirror: Sexy versus motherly/matron and wild /jungle versus urban/civilized:

1. Mind; WILL, contradiction of (22)
2. Generalities; CONTRADICTORY and alternating states (40)

For theme of impulsive/bang/shot/on a whim:

1. Mind; WANDER, desires to (19) *
2. Generalities; SUDDEN, manifestations (60)

Additional rubrics:

Generalities; FOOD and drinks, chocolate, desires (69) *

Generalities; HEAT, sensation of (172) *

Mind; AFFECTIONATE (45) *

On repertorization using # of rubrics analysis, the following remedies score highest: # rubrics/remedy score

Lachesis 10/13

Chocolate 10/10

Bryonia 9/14

Calcarea 9/14

Lycopodium 9/14

Ignatia 9/13

Platina 9/11

On repertorization using small remedy analysis *Chocolate* scores the highest.

On reading *Chocolate* we see several features that relate to this patient:

#1 is her desire to travel to exotic places with Ecuador being her all time favorite. *Chocolate* has desire to wander and desire to be in nature and interestingly chocolate grows within 10 degrees of the equator.

#2 Aversion to the matron image, rejection of mother role; "After giving her warmth and affection initially, she shows the child her thorny side by turning her back towards her like a hedgehog" – Sankaran. In this case she compensates by trying to be a very good mother. I think this case is an expression or another way in which a mother who needs chocolate can reject her children.

#3 Craving chocolate with intensity.

#4 Jungle idea represents wild growth and non-orderly direction of growth and is mysterious. In a proving by Jeremy Sherr the aspect of wanting to go to the jungle was noted. During my 3 year course with Jeremy Sherr our class did a proving of *Chocolate*. One of the provers had a strong reaction to the proving. She expressed a feeling of being like a wild animal in the jungle. She went on to describe the feeling with a lot of emphasis on wild, untamed, mysterious feeling.

Chocolate grows best in the wild in the tropical forest. When it is cultivated the tree is only economically productive for almost half (60 years) its natural age (100 years).

This is my first *Chocolate* case. I have seen cases of *Chocolate* presented at seminars and this case did not resemble them. The remedies that immediately came to mind while I was taking the case and soon after were:

1) Milk remedies: *Lac-h.* (strong mother instinct and lack of connection with own mother because she was raised mostly by grandparents and aunts; mother not emotionally there? Mother went to university and became a career woman), *Lac-del.* (maternal instinct, playfulness, water dreams),

2) *Pulsatilla* (emotional sensitivity, maternal devotion, weight problem, prefers outdoors.)

I did not feel strong about any of the above remedies.

Based on all of the above *Chocolate* was the remedy prescribed.

PLAN: *Chocolate* 200C dry sublingual dose August 16, 2002

Follow up by email: August 23, 2002

- Pain in shoulders and elbows increase
- But pains in ankles and knees disappeared (unusual)
- Dreams of water running around feet and making stepping dangerous
- Dream climbing steep rock with friends, they manage more easily than I. I feel myself slipping. Feeling upset
- Sleeping better
- Hands feel very warm, warmer than rest of body
- More hungry for sweets: ate Nutella out of a jar (“but hey lets be honest I love sweets anyway and sometimes I just get tired of being a ‘good girl’ on weight watchers. Maybe my discipline is slipping a little.”)

Follow up live: Sept. 5, 2002

- Itchy skin rash appeared upper right arm and left forearm. Red and slightly raised. Itchiness is decreasing.
- Increased dreams: lots of water in dreams.
- Pains “definitely better”: no shoulder pain. Knee and ankle pain 50% less. Wrists and elbows pain 30% less.
- Sleep: better since one week; wakes up less often: once or twice a night now compared to 5 times a night before remedy. Less tendency to surface.
- Increased appetite “definitely for sweets more than usual.”
- Has not thought about chocolate craving. If has a sweet it does not have to be chocolate (where as before she would always go for chocolate first).

Follow up email: Oct. 9, 2002

“Dear Nadia,

Thank you again for finding the right remedy for my joint problems -I have had no need as yet to take more and am very happy not to be in pain. We had set another appointment for Thursday, November 7th at 2 p.m. but since I have no complaints or changes, I don't think it will be necessary to take up your time. If there are changes, I will of course get in touch with you but for the moment I am a happy camper.”

Follow up email: Jan. 3, 2003

"I am feeling great - that is why you have not heard from me - and yes, the remedy is working. I have taken two more over the course of the last months when I could feel the beginnings of sore joints and it worked like a charm. See how great chocolate is - it makes you feel better in every form!"

Follow up live: Jan. 31, 2003

"Doing great! Absolutely great! Amazing"

I have no pain 100%. It went steadily down after 3 doses

Feeling generally good. Good energy which is amazing because of the weather (we have) not (had) enough sun this winter. You want to hibernate and crawl in a corner when you do not have enough energy.

Still craves chocolate: "Chocolate symbolizes so much more than that little bit of taste in your mouth. Chocolate is a very special treatment. There is so much to it. The whole symbolism of saying Ok I am going to indulge. (When I feel) I deserve chocolate and (I) get some for myself eat it slowly and enjoy it. What is it with women and chocolate?"

Follow up email May 13, 2003

"I have not had any significant pain since taking my homeopathic and feel very good. I even have taken out my golf clubs and so far only the unseasonably cold weather has kept me from trying them out again. But hope springs eternal and I will take them with me to France and Spain at the end of the month when we hop across the Atlantic to visit family. All is well and I hope you have a great summer."

Conclusion:

Patient has had a positive response to homeopathic *Chocolate* on all levels. She initially experienced a worsening of some of the joint pains, skin rash and increased dreams. This was followed by complete amelioration of pain, and improvement in totality. The patients' daughter disclosed that before the *Chocolate* remedy was ever given, her mom had mentioned adopting a hedgehog and has decorated her garden with hedgehog orna-

ments (I only found this out in Feb. 2003). Comments from her daughter revealed that the patient's inner circle of friends were surprised to notice a transformation in her. She has become more forthright in meeting her needs and is less willing to please. This tells me that the patient is starting to let go of the compensated state. Although this case has not been followed-up for one full year, the response and consistent improvement with less and less need to repeat the remedy indicates that the remedy is a very good analogy (J. Sherr) for the patient's state.

Nadia Bakir ND, DHANP is a naturopathic doctor who has been in practice in Toronto since 1989 and has been part of CCNM's faculty since 1991. She is presently a fulltime associate professor and coordinator of the Postgraduate Homeopathy program at CCNM as well as a clinic supervisor at CCNM's Robert Schad Naturopathic Clinic. She has played an instrumental role in the creation and development of the homeopathic curriculum at CCNM and continues to improvise (e.g. homeopathy clinic shifts) and improve on the evolving clinical and academic curriculum. Early in her career Nadia completed a 2-year residency with Dr. Andre Saine. She has taken courses under the guidance of Jeremy Sherr, Louis Klein, and Massimo Mangialavori. Jan Scholten, Rajan Sankaran, Divya Chhabra, and Sujit Chatterjee have also influenced her homeopathic thinking. Nadia is a classical homeopath who keeps an open mind and is not afraid to test new ideas in the clinic laboratory. She believes that homeopathy is a complete system of medicine with a solid base but whose potential has not been fully developed.

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A SHORT CASE

MARYBETH BUCHELE-MOSEMAN

This is a small case with a healing response from *Chocolate*. The patient came to me with a specific complaint from which she had little relief with other forms of healing. *Chocolate* completely took the complaint away. While the case is short on analysis, being one of those rare and lucky cases where I felt justified to make a leap of faith, there may be something to learn about the remedy.

VR, female, age 57

First appointment, October, 2002

Blonde, soft voiced, business-like, friendly. Tall, relatively slim.

Has worked as a medical clinic administrator for 20+ years, enjoyed her work, but quit her job in January, 2002 to care for her elderly parents. Her mother is in a nursing home with Alzheimer's disease, her father lives with her brother, is frail, quite elderly. She take meals to her father because she does not feel her brother does a very good job caring for their dad.

Chief complaint: chronic leg pain which interferes with sleeping, many activities.

She has had this since she was peri-menopausal, age 52. It started during a cruise she took 5 years ago during which she and her husband did a lot of dancing and walking. The pain was unbearable. She thought it was because of the increased exercise on the cruise. At that time the pain came on with increased exercise, now it is present all the time. She can do aerobics without much pain during the exercising, but then the pain is much worse after exercising. In June, 2002, she went off HRT because of concern about its side effects. Within three months the leg pain increased, worse right leg, but also in the left leg, worse at night, worse after but not during exercise, especially walking and yoga, which are the two forms of exercise she likes best.

When she went back on the HRT, the leg pain decreased. On the HRT, the leg pain does not keep her awake, but she will wake up within 5 minutes of rolling on her side. Pain is better sleeping on her back, worse when she turns over. Pain is a burning ache, can be all down her leg, is not better or worse from heat or cold.

She also had skin eruptions on her elbows that then spread to her forearms and thighs, small bumps that itched at night, worse stress, dry weather, heat. One time she itched them until they bled when she had just started a new job. She said steroid cream improved the eruptions, but I asked her to call me before using it so we could discuss homeopathic alternatives to the steroids.

Her family of origin seems to have been mostly positive. She said she thanks her parents for doing a good job of raising her, particularly when she hears about other peoples' horrible childhoods. She was "the apple of my dad's eye" and "buted heads" with her mother because her mother favored her two brothers.

She wasn't allowed to date until age 18, she felt her parents were a bit strict in this area but she didn't rebel because she didn't "have a burning urge to go out with anyone." She has always had a low libido and has discontinued sexual relations with her husband because intercourse is painful for her. She said lubricants and topical estrogen creams applied to vaginal area do not help.

One striking aspect about this woman was her aversion to children. She got married with the intent to not have any children.

As a young teen she babysat to earn money for clothes because she had to buy her own clothing. But as soon as she could legally work, she worked at a downtown movie theater and felt relieved that she didn't have to take care of children anymore.

Her periods were very heavy, with very painful cramps the first couple of days of flow. She wouldn't miss work or school, but at times would be doubled over with pain. She was diagnosed with endometriosis in her early 20s, took high doses of birth control pills for about six months which made the cramps somewhat less, but still there. Her doctors told her she would probably never be able to get pregnant, which was fine with her because "I didn't care for children, particularly babies and toddlers." She said she didn't care for young children because they were a lot of work.

She unexpectedly got pregnant with her son about five years after she got married, he is now 25 years old. She considered aborting that pregnancy. He was a very demanding baby, crying almost constantly because she was told by her pediatrician to only feed him two ounces of formula every four hours. She let him cry because he did not want to be held, he stiffened and screamed if he was picked up. Then she changed pediatricians, the new one told her to feed her son as much as he wanted. She fed him four ounces of formula every two hours and he stopped crying almost immediately.

She does, however, like older children. She said her son got more interesting as he got older. Her expression relaxed while she was talking about him.

After her son's birth, her menses became even heavier, with huge clots. One time she stood up and the flow was so heavy that blood filled her shoes. After the flow started she would gain a great deal of "water weight," up to seven pounds all over her body, on her legs, stomach, hips, but not breasts. She felt like the skin on her calves would pop from the edema. The exercise instructor at her health club noticed that her body would change up to two clothing sizes, lasting for up to five days. But she experienced no PMS mood swings or irritability, no impatience, snapishness or crying.

She craves chocolate, the darker the better. She does not let herself have it very often, but when she has it she will set aside time to savor it. The dark, smooth kind is best, she said. We had a discussion about her opinions about the different brands of chocolate. During the discussion her face softened, her body relaxed and her eyes glazed over slightly.

The discussion about chocolate was the clue that led me to my copy of *The Homoeopathic Proving of Chocolate* by Jeremy Sherr.

Certainly *Sepia* would have been a logical choice, with her hormonal issues, aversion to sex and children, along with her love of dancing (motion ameliorates). But her detailed discussion about the different brands of chocolate was so striking that I couldn't ignore it. Jeremy Sherr suggests that about 40 percent of cases where we give *Sepia*, actually need *Chocolate*.

Quite frankly, I didn't even consider prescribing *Sepia*. Her chocolate discussion was so striking that I had to explore the aspects of *Chocolate*

that might relate to her symptoms and case. In looking at the *Chocolate* proving, I saw some miscellaneous leg pain, skin symptoms very similar to the ones she experienced and aversion to young children because they require so much care.

The fact that she is much more attached to her father than to her mother, generally only tolerating her mother, also is suggestive of *Chocolate*.

So *Chocolate* seemed to be a good possibility, one that I felt was worth prescribing.

RX: *Chocolate* 200C, one dose

FOLLOW-UP (seven weeks later):

She has changed her diet, stopped drinking wine at night, stopped drinking coffee and has lost about five pounds.

Leg pain is 80% reduced at night, has hardly had any pain all night. She can sleep on her side again, before the remedy she could not sleep on her side at all. But the night before the appointment she woke up with pain. And in the last week she has been eating 5-6 pieces of Hershey's chocolate per day even though she had been eating very little chocolate since taking the remedy.

Assessment: good remedy, needs to be repeated.

RX: *Chocolate* 200C, one dose

FOLLOW-UP (six weeks later):

Leg pain is gone. She has been exercising more, which in the past would have made the leg pain worse, but that hasn't happened now. She said she feels the leg pain is cured.

After eliminating the alcohol from her diet before the first follow-up appointment, she had an increased craving for sweets and particularly chocolate. This is not uncommon when people get off alcohol, as can be seen in most AA groups--basically substituting mood altering substances, albeit milder and more socially acceptable ones, for the alcohol.

Initially she managed that by not keeping any sweets or chocolate in the house. Now the cravings are gone, but once in a while she says she enjoys a small piece of very good dark Belgian chocolate.

Assessment: Remedy seems to have done its work

RX: none

I asked her if there were other things she wanted to work on, she couldn't think of any. So I suggested she call me if other things come up.

Was this a deep, life-changing cure? No, not at all. But *Chocolate* completely relieved chronic pain for which she had found no other satisfactory treatment. So she was very satisfied with what homeopathy had been able to do for her.

END OF STORY!

Marybeth Buchele-Moseman is a graduate of Northwestern Academy of Homeopathy, Minneapolis, MN and marketing director of SIMILLIMUM. She has homeopathic practices in St. Louis Park, MN, a suburb of Minneapolis, and in Menomonie, WI in western Wisconsin. She is currently studying with Jeremy Sherr and Louis Klein. She and her husband share nine children.

OPENING REMARKS

CONIFER SEMINAR

KRISTA HERON ND, DHANP

How I work

I have been in practice for 14 years and have found it to be one of the most therapeutic experiences in my life. Everyday I am touched by the human-ness of my patients, as they struggle to overcome difficulties in their lives through courage and creativity, and the defiant adherence to failed strategies.. As a result of loving and caring for my patients, I have learned compassion, and this has made me a better doctor.

Everyday my patients offer me their simillimum as they tell me their stories. I have learned about myself - my own anxiety, sadness and anger. I have learned about the myriad ways each of us view ourselves in relationship to the world. I have learned about forgiveness - forgiveness for my own failings, as an individual and as a homeopath.

The Therapeutic Field

When a patient first comes to see me, my intention is to enter into a relationship with them, creating a therapeutic field where I can truly come to know and understand them. I want to perceive and understand who they are and to understand the fundamental themes that weave through their lives. I do this by listening to their stories, but what I am most interested in is; who is the storyteller? How do they narrate their life? What do they tell, and what do they hesitate to reveal? What words do they choose? What posture do they assume? All of these mannerisms, as well as the content of their story, reveal to me the persistent and consistent themes of their life.

These themes are the patient's core delusions and strategies - their behaviors, perceptions and attitudes that have allowed them to survive the world they find themselves in. This may not be the same world that you and I live in - in fact it is not. Each of us has constructed beliefs about who we are and what the world is like, based on our life experiences.

Once I feel I have understood the patient, I attempt to find a remedy that will help my patients free themselves from their limited views and strategies; to help them do more than just survive their world, rather to help them thrive in the world. This means that I don't just work with symptoms, or phenomena, rather I try to understand the dynamic process behind the constellation of their symptoms.

I believe we are consistently ourselves. Whether we are walking across the street, petting a dog, or suffering from asthma, we are doing each of these actions in a manner that is consistent. If we closely examine each of these elements we should recognize the patient in each one. My intention is to deeply understand how each fragment speaks the patient's themes and the name of the patient's remedy.

As my patients struggle to tell their complicated stories - through words, gestures, silence and images - I try to listen with attentiveness, reflection, compassion and witness-ship. I believe this narration is the beginning of their healing process. To tell one's story, and have it listened to well, is healing.

What I do next is to attempt to find a remedy with the same fundamental themes as the patient. But how do we find the themes of a particular remedy?

What I have observed is that certain remedies do share characteristics and qualities with other remedies. Hahnemann observed this as well, when he developed the idea of miasms.

Perhaps it is human nature to correlate pieces of information. Working with the idea of families has helped me to organize the relationships I have observed between remedies. To some this is artifice, and I agree. The idea of a 'family' is a tool, or construct. And it is one that should be elastic, not fixed.

In 1996 I heard Steve Olsen present his proving of Douglas Fir (*Pseudotsuga menziesii*). As he described the remedy I realized that Douglas fir shared some symptoms with *Abies nigra* and *Abies Canadensis*, and this made sense to me. Why shouldn't remedies made from similar substances share symptoms, and not only symptoms, but also fundamental themes? Suddenly I was intrigued and excited that remedies made from trees bearing cones shared symptomatology.

This began my study of families. I was fortunate to encounter Massimo Mangialavori the following year, a homeopathic practitioner who has a deep understanding of human development and materia medica, who also utilizes the idea of families to understand remedies. I have continued to study with him these past 6 years.

My own process is very similar to Massimo's. I attempt to observe and learn the themes of a remedy by studying the provings, materia medica, clinical cases and the natural history of the substance. I am interested in the natural history because to understand how the substance best survives and adapts to its environment is one way to understand the substance's fundamental strategies and themes.

But the most valuable tool to understand a remedy is from our own cured cases. Once we have four or five *Kali carbonicum* cases, we have the opportunity to examine the underlying themes and characteristics of these patients. We begin to develop a template of our experience of the *Kali carbonicum* patient.

Not only do we want to examine our own cured cases, but those of other colleagues as well, because each of us perceives and experiences a remedy in a unique way. Imagine that we are outside a house looking in, each of us standing beside one of four windows. Each of us has a different vantage point of the room, and will perceive the room from this unique and particular view. The culture, age and temperament of our patients, as well as ourselves, color our perspective. We are all looking at the same room, but each from slightly different angles. This is one reason, I believe, why different practitioners can describe remedies in different ways. If we understand each of these angles, all of these perspectives, we can more accurately perceive the whole of the remedy.



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What is possible with homeopathy?

When I first began my practice I thought my patients would turn into 'white pieces of paper' after receiving their curative remedy; that patients would become free from all symptoms and neurosis. But after several years of practice I have learned that good health is the ability to move through life with greater freedom and grace. Now, what I hope for is that my patients learn to love themselves and others, live compassionately, feel and experience a full range of emotions with fluidity, and be as free from pain as possible.

This is a lot.

What are our expectations and limitations?

I think our task as homeopaths is fearsome. We are looking for the proverbial golden needle in a haystack. Not just an ordinary needle, but an extraordinary one. We expect so much from ourselves.

What complicates our task further is that we work with inadequate tools. We think it is our failing, our inability to find the right remedy, and many times it is our inexperience. But there may not be a remedy to help every patient. And not every remedy is well understood. Our repertories do not hold all the answers; do not list every symptom. We are working with limited tools. Certainly our provings – both old and new – hold valuable information. But it is untested. Once it is used in the clinic, once we have applied the information and understood what it means we can best understand the remedy.

I do not know if there is just one simillimum. Given what we know and what we have to choose from, really there is a best choice. Many remedies can touch a patient, but what we have to ask ourselves is at what level are we applying the Law of Similars? My intention is to address the fundamental or core themes in order to interrupt the patient's chronic disease process. On the other hand, sometimes I am just happy to have their urinary tract infection go away. I do my best, sometimes fail, or only palliate, and sometimes I find a remedy that opens doors.

CONIFER FAMILY MUST HAVES

KRISTA HERON ND, DHANP

I have several MUST HAVES for me to comfortably prescribe a member of the conifer family.

- 1) They long for a relationship, most often a romantic one that stems from some inadequate or unfulfilled love relationship with a parent.
- 2) They have a feeling of emptiness, and they feel this emptiness in their stomach or abdomen (longing centered in the gut).
- 3) They have some issue with food usually bulimia, intense hunger or mal-absorption.
- 4) They experience a profound loneliness. It is a sense of being alone - not necessarily forsaken; rather their loneliness is deeper than just circumstantial. They feel they stand alone; that no one is really connected to them, despite that there may be many who love them.
- 5) They may have mental weakness and fatigue. They may have difficulty studying or don't have capacity for much activity; they feel drained and tired. They often have spiritual feelings, more than religious. They are drawn to a quiet depth that gives them hope. They may not have a personal relationship to a figure like Christ or Buddha, rather they use words like Spirit, Nature or Soul.
- 6) When they go into depression they use words like "cut off", "dark and gray", "falling", "without an anchor."
- 7) They may have some resentment or bitterness they still hold towards the inadequate parent.

A CASE OF BLOATING AND CONSTIPATION

KRISTA HERON ND, DHANP

Heather A. 26 year old woman November 1994

I have very bad bloating of my stomach and constipation. I have good weeks and bad weeks. I get depressed and I have been in therapy for three years. I have been trying to work on the incest, trying to be honest and live my truth. I am still not where I want to be.

I still struggle with victimization. No! I am not going to be victimized any longer. It's like a big dark hand trying to pull me down, every time I struggle. I got the raw end of the deal; some people get support from their family from the very beginning and I never did. That is pretty crappy. My family is white trash and it is hard for me to believe I am better than that. It is hard for me to give myself credit and be more. I have been estranged from them for the last 3 years. I am getting ready to see them again soon. They never encouraged me to do stuff like go to school. They have been so limiting.

It is hard because I am different. They smoke and drank. I drank and was addicted to cocaine. It was hard on my body and spirit. I was the white sheep in a black sheep family. My family never understood me, so I set myself off from them and others. I have so many issues of worthiness, abundance and trust. I am in the process of rebuilding relationships. I am learning to trust women. My mom was involved in the incest too.

I feel like a fragment. I don't know what I want to do. I missed my chance. I am a failure because I didn't finish school. I don't have gumption. It is the fear thing. I am afraid of succeeding. It is so powerful to be aligned with the Universe, but I back off. It is sad. I feel sad that I never felt good enough to accept the good things in my life, and to know my parents didn't want good things for me either. They held me back so much; they kept me in a mold. I feel angry that I dealt with it the way I did. I am ashamed of my family. My mother called me a slut at such a young age. I get scared I will be like them.

I remember the incest as far back as when I was three years old. I have body memories from when I was two. My father had intercourse with me from the age of four until I was fourteen. When I was four I had to go to the hospital for bladder problems. I felt punished because it was shaming to have to take off my pants in front of the doctor.

We had foster kids in our family, and my parents abused them as well; maybe my sisters too. I tried to protect them from my parents. I started to drink when I was nine years old. My mother didn't like me. There were a few instances when she was in the room during the incest. That happened when I was about seven. Now my father tells me I am crazy.

There was no one there. My mother worked in a bar. I would come home and drink. My father would come into my room after work. My mother was never there for me. My father would always turn it around. He would act sincere and caring and say things like, "We don't know why you are acting like this." I was crying out for help and no one got it.

I hated school. I had one boyfriend for six years. We got together when I was fourteen. I lost all my friends because I was with him all the time. I did well in school.

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I went into therapy when I was fourteen. My sister tried to commit suicide three times during her high school years. All the family's focus was on her. I was invisible. I felt lost.

I broke up with my boyfriend when I was almost twenty. He smoked pot all the time and was verbally abusive, physically abusive twice. I got tired of it. I moved back home, then out again. I tried to go back to school but I had to work full time to pay for school.

I started to date a little, got into coke and started free-basing. I met my ex-husband because of coke. He was a dealer. We got sober, married. But I was taking care of him. I was the stronger one, the one who made the money. I married him to get away from Dad. I wanted my husband to take care of me.

Then I had an affair and we separated for two years. I went back into therapy. We filed for divorce in 1993. It was a tabloid divorce - guns, bail and debts. Afterwards, I had a big divorce party and drank. I had been sober for a while. Why did I drink? I am an alcoholic. I just sabotage my life.

Now life feels good most of the time. Sometimes it feels empty. I try to be normal, but I want to drink socially, like everyone else. I ski, run, swim, and go to the gym. I work. I don't like my job. I miss a lot of work. I don't take it seriously. I have good friends but something is missing. I am trying to figure out where to go. I am used to being on my own.

I feel empty because I don't have a connection to a higher power and because my parents weren't there. Maybe it is because I am divorced or because I am alone. I am a floating entity in an abyss; where do I go? Where do I go to meet a nice guy? Who do I trust? I always have this big wail, a hard edge. I'm trying to be softer, not Little Miss Tough.

I have a slump around two - four P.M. I am claustrophobic and afraid to live alone. I am afraid to depend on myself. I am afraid of the dark and of men. I am chilly, I like fresh air, and I don't like to have my face covered. I like chocolate ice cream, I hate milk and I am thirsty for cold drinks.

As a child I had dreams of falling into a bottomless pit. Now I have nightmares of men trying to rape me, and chase me, or men trying to hurt my dad and I.

I have regular menstrual periods and I have bloating and constipation. I have been taking a laxative for the last 5 years.

Plan: I prescribed several remedies over the course of one and a half years; none of them helped her deeply. These included *Natrum carbonicum*, *Aurum*, *Alumina* and *Stramonium*.

Compilation of visits from 1995 until June 1996, when the correct remedy was finally given:

I feel like there is a dark energy trying to pull me down.

My parents are getting a divorce and I feel like it is all my fault. I feel lonely, like I have nothing to live for. I feel suicidal. I want to destroy myself. I feel completely empty, like no one is here for me. I have no one to give to. It is a burning inferno without an outlet. I don't have anything. No one will notice if I am here or not. It feels very dark. I don't belong anywhere.

I don't feel understood; I don't feel like I fit in, like I don't belong anywhere. It is like a black hand or energy pulling me down. I see it on my left side. It makes me critical of myself and others. It makes me hate life. It feels negative, not evil. I am the problem child. Everyone else can cope with life. Why can't I?

I feel like there is a dark, black barrier that blocks me. I want to cut away, be by myself, retreat. I feel alone, lost, like I have tunnel vision and it is black all around. I don't know how to put it back right. I am making poor choices. I don't know where I belong. I don't fit in. I am without an anchor, a misfit, I feel wild inside. It's like I am seeing through a hole and I am suffocating. I feel unworthy, damaged, stuck. I am roaming around lost. I can't make decisions. I don't know what I want. I break plans. I have no backbone. I question everything. If someone offers another option I reconsider. I don't know who I am. I don't have a boyfriend or partner to share with; I am missing that major link, I am missing a bond.

I wonder what's wrong with me. I just want the connection. I don't seem to be attracting it. What is deficient? What can I change? Probably it would help if I could be more decisive. I feel lonely; I just don't have a connection. I feel really alone. Maybe I need to seek a spiritual connection, I feel cut off. I don't know what I believe in, is it all real anyway? I'm seeking comfort; something deep inside needs to be comforted.

I feel like I live in a shell. I feel like I am defective and I just want to run away. No one wants me and I feel so unworthy. I don't know how to bond, communicate or create intimacy. I don't think I am good at getting close to people. I close off. I am so afraid of being rejected. I'm afraid to try because I am not as good as anyone else. I have so much instability in my life. I am trying to learn. I feel worthless, insignificant, like I'll crumble.

I feel alone. It feels dark, gray, dismal and lifeless. I feel like a cloudy day in Seattle; dreary, where the charcoal gray clouds touch the gray water. No one is there. Friends have let me down. I count on them and they don't follow through.

My constipation is still a problem. My stool is soft, but it is very hard to expel. I have trapped gas and sometimes burning in my esophagus. I feel backed up. I binge, but I don't purge.

P: *Pseudotsuga menziesii* 30c

Summary of *Pseudotsuga menziesii*: Feels alone, rejected, and cut off from others. Fear to join the group. Critical of self and others. Easily insulted, resentful. Grief. May have bulimia or alcoholism.

Krista's themes:

Bleak loneliness and longing for deeper connection, perfect intimacy

Feels unsupported, neglected

Blames others, feels bitter

Separate themselves, isolation from others and the universe, feels cutoff, behind a wall

Feels lost emotionally and spiritually; as if in a tunnel, abyss, cave

Emptiness

Hardness, wants to be softer

Abyss, darkness, falling, suspended, bottomless pit

Bereft of an anchor, shallow roots

Self-centered, narcissistic

Weak, insecure, defective, unworthy, wrong

Shame

Constipation, amenorrhea, bulimia, stomachs are the center

While I did not, at that time, repertorize the case, here are some rubrics that may be considered:

Mind; ANGER; family, with her (3) :
 MIND; ANXIETY; alone, when (24)
 MIND; CONFIDENCE; want of self (120)
 MIND; DELUSIONS, imaginations; despised, is (11)
 MIND; FORSAKEN feeling (104)
 MIND; IRRESOLUTION, indecision (177)
 MIND; REPROACHES; himself (45)
 Mind; SADNESS, mental depression (548),
 STOMACH; APPETITE; increased, hunger in general (363)
 MIND; DREAMS; falling (84)
 MIND; DELUSIONS, imaginations; body, body parts; brittle, is (5)
 GENERALITIES; BONES, complaints of; general; crumbling of (29)
 RECTUM; CONSTIPATION; general (515)
 ABDOMEN; DISTENSION; general (427)
 MIND; BULIMIA (24) from Massimo's repertory

October 2, 1996

This is a great remedy, my stomach is great and I am really well and happy. I am finding out that I am not my things; everything I have is here inside me. I feel more balanced. This remedy agrees with me. My energy is good and I am eating decently. I have a greater sense of wellbeing. I am weeding out my friends, getting rid of people who aren't worth my time.

My sleep is good. I am handling stress better. I have met someone. I want to give it 6 months to see where it can go.

Her constipation is much improved, as is her bulimic behavior. She is no longer drinking and is in Alcoholics Anonymous.

September 9, 1997

I have taken three doses altogether over the last year. I can tell when it is wearing off because my constipation returns a bit. The remedy really helps my stomach. Most of the time it is perfect. It is the best it has ever been in my life.

I got married and we have just moved back to the States. It is hard, but we are trying to work things out.

P: Watch and Wait

March 3, 1998

I have left my husband. I am reconnecting with my family. I am trying to figure things out. The remedy is working great. Since I stopped drinking I am feeling the full effects of the remedy. I am so appreciative.

April 4, 1998

I have been doing a lot of work - reconciling with my family and my husband. I love him. We have been through so much.

I think the remedy is wearing off. I am having some constipation. Everything seems sluggish. I feel irritable with my menstrual period. All I want to do is bitch, especially with my mother. All we have is surface chatter. I am trying to live a spiritual connection. I am still in therapy.

I want to stop running from everything.

P: *Pseudotsuga* 32 c

May 27, 1998

My relationship is going much better. I didn't tell you but I had an abortion last December. I can't forgive myself. I want my baby. I feel I let all of us down. I didn't have faith that God would see me through this. I was selfish and scared. I didn't know it was OK to ask for help. I felt like I needed to do it all myself. I paid someone to kill my baby.

I have been sober for 10 months. I am still having constipation.

P: *Pseudotsuga* single dose of 200c

July 8, 1998 I am having regular bowel movements again.

I am still trying to work things out with my husband. My sister says we both need to be the center of attention.

P: Watch and Wait

November 5, 1998

Some symptoms returning.

P: *Psuedotsuga* 200c

March 24, 1999

I had been seeing a shaman, but she turned out to be a farce. She told me I would die, so I waited. I would rather be with the man I love then wait to die. I told her to leave me alone. My marriage has gotten better.

I have more belief in myself. I want to have a baby soon. That dark hole has been sucking all my energy. It is time for a change. I just want to be me. I am afraid someone will find out who I really am.

I am not having nightmares any longer.

P: *Pseudotsuga* 200c

November 7, 2000 A letter with photos of her new baby:

"I have been living in Florida. We were blessed with the birth of a perfect and beautiful baby boy in July. I am sending a photo, as I love to share my little jewel with everyone. Motherhood has been the most

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rewarding experience I have known thus far in my life. I only wish I'd done it sooner.

I haven't needed another dose of the remedy. I will keep in touch, but am hopeful that I won't need your professional services, although I always recommend homeopathy to everyone."

Case 2 (from *An Insight Into Plants* by Rajan Sankaran, 2002)

Case of Sarah (quoted in full), born in 1955, whom I have been seeing since October of 1996. Her main complaints have been bulimia, constipation and amenorrhea. Under another physician's care she experienced relief from various minor complaints and feeling a greater sense of well-being from *Natrum muriaticum*. However her eating disorder and constipation persisted and she had been amenorrheic since February of 1996.

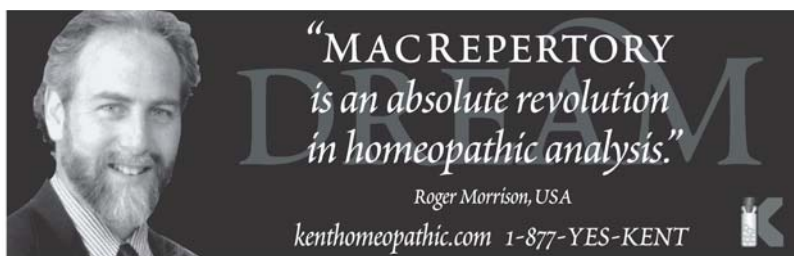
In January 1997 Sarah told me:

"I binged while I was visiting my parents in Montana. I was home alone and decided to act out, it was a game. The whole point was that it was a secret. I break the rules and eat for the sake of eating. I feel an unbearable emotional pressure and eating displaces that pressure. It's like a pit in my stomach. It's a feeling of being alone and detached in the universe. It's like a hydrogen balloon...it's fear...I don't think I can endure the feeling it's so unbearable. I feel I have to bear it myself because I forget there is help available. I have to do it myself, I comfort myself with a plan to eat. I feel a fire in my abdomen, a cave, a darkness. It's a fear that I've done something wrong, that someone has something I don't have and I should have it too, if only I was doing my life right. That creates this pressure. It's a kind of self-pity. I feel I have no resources. I am very judgmental towards others and very hard on myself. I feel a sense of isolation from others and from the universe. I have this image that my soul is an anchor, yet I don't feel connected, I need to trust."

I gave her *Pseudotsuga* 30 as a single dose and she came back six weeks later. She said, "I'm like a new person which is really just my old self. I'm having a bowel movement two times a day now, whereas before it was once a week. I am living in my body more than ever. I haven't binged and am eating three meals a day. Before I felt isolated, now I feel a sense of community. "

I saw her again in six weeks and she had one episode of bingeing for a week while visiting her parents. However there was still no relapse in her constipation. I waited. Another six weeks passed with the same story of another binge and still no reoccurrence of the constipation or feelings of isolation. Her menses continued to be absent however. I had just obtained a 200 potency of the remedy in June of 1998, so I gave it to her. She called two weeks later to tell me her menses had returned after two and a half years. She has continued to do well in all her complaints of constipation, bulimia, and her sense of isolation. She is having monthly menstrual periods as well. She had a second dose of *Pseudotsuga* 200c in November 1998.

Krista Heron ND, DHANP *has been in practice in Seattle, Washington since 1989 and has taught at Bastyr University for the last seven years. She has studied primarily with Massimo Mangialavori since 1997.*



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REPERTORY SEMINAR WITH ROGER VAN ZANVOORT

JUDY SCHRIEBMAN CCH, RSHom(NA)

What's the difference between Boger and Bönninghausen? Kent and Kunzli? Bay Area homeopaths were treated to an in-depth discussion on the difference between the philosophies and assumptions underlying the structures of the primary repertories this past March at a seminar given by Roger van Zanvoort. Presented by Homeopathy West and held on a fabulously gorgeous weekend in Tiburon (north of San Francisco), the seminar was a thorough introduction to repertorial history, study and case analysis. Roger van Zanvoort is tall, articulate and inarguably the homeopathic world expert on repertories. Very personable, warm and approachable, he made sure that everyone understood the sometimes complex material before moving on.

Roger began with a historical tour, based on Douglas Hoff's work, on the development of our many repertories. While all of us are familiar with the layout of Kent's repertory, many homeopaths are unfamiliar with Bönninghausen's great work and other important repertories of the past. This is unfortunate, as there is much valuable information contained within them. Roger's life work is to bring this information to light so that it can be used. This is a painstaking process, involving combing through countless original repertories, double-checking every rubric listed for typographical errors in the remedies, getting old texts translated and adding the handwritten notes in the margins from some of the great practitioners of the past which were never incorporated into newer versions. Roger talked about each one of these repertories and their authors with the casual familiarity of one who knows them intimately well, bringing out each one's strengths and weaknesses. These additions and corrections have been available to modern homeopaths in his "Complete" and "Millennium" Repertories. He is also working on the next leap forward, with his Repertorium Universalis. More on that at the end!

So what is the difference? Basically, there are three "styles" of repertories: Kentian, which lists symptoms in ever-increasing specificity;

Bönninghausen, which lists all symptoms as generals, and Boger, who refined Bönninghausen's repertory to create smaller and therefore more specific and useful generals. Kent based his repertory primarily on exact symptoms experienced by the provers and certain clinical symptoms that were confirmed in practice. These were listed in very specific rubrics, some of which are famous but hardly ever met with in practice, such as *Gelsemium*, "Chest, cease, heart would, motion, if not in." It also involves some very convoluted thinking on the part of the homeopath to even find it.

Bönninghausen, on the other hand, believed that remedies were applicable to a great many more situations than just those symptoms that arose in provings. A close associate of Hahnemann, he speculated that rather than having very specific, and ultimately very tiny rubrics that must match the situation at hand exactly, what if the clinical and proving symptoms could be broken down into their more general parts? Then by crossing the different parts of a complex symptom presented by a patient, one could arrive at a selection of remedies that would cover the symptom entirely. He also theorized that if a proving showed "right-sided shoulder pain," one could assume that the remedy had an affinity for both "right-sidedness" and "shoulders," and so the remedy would be added to both general rubrics. In our example above, the symptom for *Gelsemium* could easily be seen to contain "Fear," "Chest; cease, heart, would," and "Motion amel," which when crossed, gives us a nice selection of thirteen remedies to choose from, especially beneficial in a case where *Gelsemium* is given and doesn't work.

The "Fear" rubric, however, like many other big generals, contains every remedy that has any sort of Fear, which becomes too large to use successfully in many cases. Considered by many to be the finest homeopath of his time, Boger's genius was to refine Bönninghausen's approach and break down each one of these overly large generals into rubrics of a more workable size, which included separating out concomitants, amelioration and aggravation. Modern Brazilian homeopath, J.A. Mirilli, has also



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taken a refinement to Bönninghausen's approach by combining many different tiny rubrics of the Mind which he then sorted into 250 central themes (such as "Blood," "Ambition," "Betrayal," etc.) to make bigger, more complete rubrics. Mirilli also searched the original provings to get just the right shade of meaning, which often got lost when homeopaths first tried to fit the symptom to the established rubrics.

Bönninghausen's way of thinking is particularly useful in cases where the exact complete symptom is given by the patient with crystal clarity and you rush to the repertory, only to find it non-existent. With Kent, you can't use that symptom; with Bönninghausen, you can. A complete symptom is built out of a phenomenon, a location and one or more modalities plus possibly a concomitant or a time. By working with complete symptoms, central to the case and crossing parts, we are more likely to fit our repertory to our patients, rather than the other way around. This way of thinking was borne out consistently in Bönninghausen's practice and by other homeopaths of the time, including Kent, until he came out with his own repertory and denounced all other styles.

As an example, suppose someone came in terrified that their dog was going to catch fire in their absence. It ruins their life. But you know there's no such rubric in Kent. Do you throw it out? No--you take the parts "Fear", "Dog," and "Fire" as pure themes, mix and match and Voila! (Well, not quite. I had to use the general "Animals" as the only "Dog" is in "Dogmatic.") The other beauty of this approach is in the consistency of the remedies that appear. In our fictitious example, *Lyss.*, *Stram.*, *Cupr.*, *Hep. sulph.*, and *Psor.*, all cover this symptom. (You could also do your own search for every rubric having an affinity with Dog and combine them all together to form your own Bönninghausen/Mirilli-style "Dog" rubric.) No more polycryst soup!

The other difference between Kent and Bönninghausen was in the matter of grading remedies. From the introductions to the repertories, Roger has been able to discover the reasons behind the grading, which were not always followed, even by the authors of those rules. Kent used a 3 point system; Bönninghausen used 5. These grades were not based upon the intensity of the symptoms but upon the frequency seen in the proving and/or practice. Intensity is marked in the language of the rubric itself, e.g., Mind; anger, violent. Bönninghausen offers a bit more flexibility and precision with his wider range. For instance, Grade 1 is a proving symptom; Grade 2 is a proving symptom that showed up in 2 or more provers.

With Kent's system, the remedy could only be given Grade 1, conveying less information. Currently there is no agreed upon standard for how a remedy should be graded, which causes some confusion when adding in the new provings and when working between repertories.

What's also missing, Roger claims, is the excellent clinical information contained in the old American journals. And while there are many homeopaths practicing all over the world, the information they've confirmed and collected is not compiled in any one place. Our repertories, except for certain modern provings, have yet to be updated from Kent's time. To remedy that situation, Roger has developed his latest work, the *Repertorium Universalis*. A combination of the best of all repertories, with a consistent internal structure, he hopes to have this resource online, accessible and appendable so that practitioners can add in remedies from practice that have been found to cure symptoms. This repertory would also be available to practitioners and students to check these additions. The question of grading is also being dealt with by adapting Kent's system of 3 grades but with a bit of a twist:

- Third degree should only be based on clinical confirmations, from 8 clinical cases, from at least 3 different sources. Proving data are not necessary. (Especially useful for tuberculosis, et al, which seldom shows up in a proving).
- Second degree should be based only on clinical confirmations, but require fewer sources, and can include pathogenetic or toxicological symptoms.
- First degree should be documented cured symptoms, toxicological or pathogenetic symptoms or symptoms from other sources (e.g. Chinese medicine, gemology, herbal, aromatherapy, etc.). Just because these sources are not homeopathic does not mean they're invalid, but they will need to be confirmed in homeopathic practice to move up the grade.

He also hopes to include the number of times a certain remedy has been found to cure a certain symptom by a number of different sources so that remedies which clearly work (by having a higher number of confirmations) will stand out from those of lesser degrees.

A week after the seminar, our study group gave Bönninghausen's style of repertorizing a spin and we were impressed with the way it pinpointed a group of remedies that really hit the mark. As Roger pointed out, it's not the only way to get to the heart of a case, and sometimes the Kentian way will be better, but it's a great "new" tool to help analyze the case when Kent just doesn't seem to fit.

For upcoming Homeopathy West seminars, go to www.homeopathy-west.com. To contact Roger Van Zandvoort for updates on the Repertorium Universalis, go to www.morphologica.com.

Judy Schriebman CCH, RSHom(NA), CHt *practices homeopathy and hypnotherapy in San Rafael, CA. She is a graduate of the Hahnemann College of Homeopathy.*

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BOOK REVIEW

IMPOSSIBLE CURE: THE PROMISE OF HOMEOPATHY

AMY LANSKY PH.D
R.L. RANCH PRESS, PORTOLA VALLEY, CA
WWW.IMPOSSIBLECURE.COM

REVIEWED BY NEIL TESSLER ND, DHANP

Impossible Cure by Amy Lansky is a highly readable and thorough introduction to homeopathy for the general reader. Amy Lansky's own adventure from computer science and Silicon Valley research to the study and practice of homeopathy occurred through the remarkable cure of her autistic son. She is well positioned as an advocate and skillful as a writer.

The distinguishing feature of this book is really how much territory it covers – from the life of Hahnemann, to a detailed review of homeopathic methodology, through lengthy discussions of scientific and speculative ideas on micro-dilutions, the most current homeopathy research, testimonials of cure, legal issues, and beyond. This is a book that has most every facet that might be covered in a substantial introduction.

Amy seems to anticipate many of the questions readers might wish answered in a discussion of homeopathy. She includes discussions of homeopathic prophylaxis, and other spin-off systems, such as flower remedies, the Biochemic system of Schussler, anthroposophical medicine, etc.

There are contemporary influences in her discussions of technical homeopathy such as Vithoulkas, Sankaran and Scholten, that not all practitioners feel comfortable with promoting, so I am offering this forewarning to you. She includes discussions of Doctrine of Signatures and kingdoms. Around this office it is destined to become a waiting room hit and a definite addition to the several good books you might offer patients looking for a more detailed discussion.

CALENDAR OF EVENTS

Todd Rowe; Phoenix, Arizona; Live Patient Teaching Clinic;

JUN 20, 27, 2003, JUL 18, 25, 2003

AUG 22, 29, 2003, SEP 12, 19, 2003

OCT 24, 31, 2003, NOV 14, 21, 2003

DEC 12, 19, 2003, JAN 9, 16, 2004.

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SEPTEMBER 24 -30, 2003. 7-Day Clinical Workshop with Misha Norland and Janet Snowden Toronto, ON Contact: Christine Jambrosic Phone/Fax: 905 780 9885 christine@homeopathyschool.com www.homeopathyschool.com

SEPTEMBER 26 - OCTOBER 10, 2003 Rajan Sankaran, at Esalen, Big Sur, California Contact Melissa Fairbanks (415)457-2079
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OCTOBER 11-13, 2003 Melissa Assilem, Boston, Ma. FEMALE CYCLES, CIRCLES AND ARCHETYPES Contact: Sheila Parks, Ed.D. 617-731-5667 mailto:sheila.parks@verizon.net

OCTOBER 19 - 25, 2003 Four-Year Postgraduate Course Massimo Mangialavori at the Abbey, Stillwater MA Session four: Identifying with Society: Kali and Ammonium remedies Sponsored by New England Homeopathic Academy Contact: Betty Wood 978-635-0605 or mailto:bwood@igc.org

October 24, 2003 NASH Annual Meeting Fort Lauderdale, Florida
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October 31 - November 2, 2003 Annual HANP Case Conference
Speakers: Will Taylor M.D., Robert Ullman ND, DHANP, Lianne South ND, DHANP, Neil Tessler ND, DHANP, and more. Contact: HANP Executive Director Brent Mathieu info@hanp.net

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Advanced Clinical Management Course, Session 4 Clinical Materia Medica and long-term Management of Cases Contact: Tracey Arnold at (805) 496-0940 Bijan Haririan at (781) 221-2783

DECEMBER 6-7, 2003 Dr. Asa Hershoff: "Light versus Darkness: Remedies of the Nightshade Family" Sponsored by Teleosis School of Homeopathy Contact: Begabati Lennihan, RN, (617) 547-8500
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DECEMBER 13, 2003 Todd Rowe, PHOENIX, AZ Homeopathy and Film. Contact: Ron Long at 602-864-1776; Fax 602-864-2949; disch@igc.org; http://www.weteachhomeopathy.com

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Cases will be evaluated on individual merit by a peer review committee of qualified practitioners. The following guidelines are suggested to assist the author in the development of presentation and content.

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Case analysis, evaluation of symptoms and repertorization should be included. Please explain your reasoning behind the remedy selection and potency choice. Insights into difficulties or problems you encountered, mistakes you made, or things you might have done differently may be particularly valuable.

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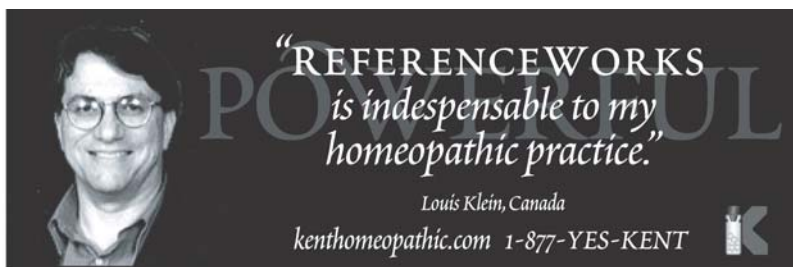
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