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Utility Of Clinical Repertory In Homoeopathy- A Case Report

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Abstract

The Clinical Repertories were born out of the need of the profession and the genius of the great homoeopathic practitioners. They are fruit of many years of labor and contain the hidden treasure of homoeopathic literature. Their immense usefulness in certain cases can not be ruled out. Medical men have got to study the human beings as a group as well as individuals, in health and in disease. Physician have to face both concrete realities with scientific abstractions. So the method of study should be based on phenomenology through sense perception. Observation of the physician are bound to be clinical. In Homoeopathy any remedy may be required in any case of any disease. The occurrence of the name of any remedy under the heading of any disease shows that in its action it has a general correspondence with the most marked feature of cases of that disease. It will frequently happen that the practitioner will have in mind a number of remedies which more or less closely correspond to a given case, and when he consults The Clinical Repertory this knowledge will enable him at once to pick out of the list there presented the most similar remedy to his case. The use of the nosological correspondence is one method by means of which a similar or the most similar remedy may be discovered. Another method is by ascertaining the similarity of specificity of seat. Some drugs have a predominant affinity for certain organs, and these drugs will often relieve a great variety of affections seated in, or arising from diseases of these particular organs. A case report was a 40 yrs old male suffering from dermatitis successfully treated with prescription of Psorinum remedy using the clarke's repertory i.e. a clinical repertory.

Key Word- Homoeopathy, Clinical Repertory, Clarke's Repertory, Dermatitis, Chicken Pox. **Corresponding Author*: Dr. Anjali Thakur,** Sri Ganganagar Homoeopathic Medical College Hospital & Research Institute, Sri Ganganagar, Rajasthan.

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INTRODUCTION

¹Clinical repertories are those repertories which contain clinical symptoms/ conditions and corresponding group of medicines. These repertories facilitate the selection of a remedy on the basis of pathological similarity, modalities and concomitants.

In other words we can say Clinical Repertory is an Index of Remedies applicable to various more or less fixed symptoms to which nosological terms can be given. These repertories can be used for repertorization of cases where the clinical condition mask the characteristic symptoms of the patient. In such cases physician finds the prominent common symptoms / clinical conditions, lacking in mental generals and physical generals with few modalities and concomitants.

Among the special repertories, the credit of authoring the first useful Clinical Repertory goes to Dr. J. H. CLARKE. Clarke's repertory is a General Clinical Repertory which help the practitioners to find a similar remedy.

CASE PROFILE

Preliminary data:

- a) Name of Patient GG
- b) Age 40 years
- c) Sex Male
- d) Address- Balajinagar, Pune
- e) Marital status- Married

f) Religion-hindu

Date - 08/07/2015

Present Complaints –

- 1) Eruptions in bends of elbow, hand and shoulder since 6 month but it aggravates more before 2 days, violent itching since 2 days < by warmth of bed and by scratching, eruptions reappear in every change of weather, moist eruptions with mild offensive discharge(especially after scratching), already had allopathic treatment but complaints reappear again.
- 2) Backache since 1 week no any modalities.
- 3) Extreme dullness, emaciation , hopelessness, weakness, no appetite, nervousness, restless person.

Past Medical history-

H/O Disease- had suffered from chicken pox when he was 20 years old.

Family history –

Father Not known(died in early age)

Mother - Hypertensive and Rheumatism

Sibling - Normal

Personal history -

Addiction - Alcohol

Diet - vegetarian

Occupation- Shopkeeper

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Accomodation- In city area

Single\Married - Married

H\O of milestone & development -

Normal

Physical generals -

Appetite - Decreased

Thirst - Normal

Desire – Not specific

Aversion – Not specific

Taste of mouth - Normal

Tongue - Slight white coated

Stool – Unsatisfactory

Urine – Normal

Sleep - Normal

Dreams - Daily routine, not memorable

Thermal reaction – Exceedingly cold but itching and eruption are agg. By warmth of

bed

Appearance - Thin

Fear- His disease is not curable

Perspiration- night (sometimes), least

exertion put him into a perspiration

Mental generals -

Delicate person, mental depression due to his skin disease. He thinks he will never recover, has lost all hope. Weakness

of memory.

Physical Examination –

Vital Sign -

Pulse - 100/min

Blood pressure - 130/90mmHg

 $R\R - 20/min$

Temp. - Normal

Height- 5 feet

Weight - 46 kg

General examination -

Pallor\Anemia - Pallor

Oedema – Absent

Lymphadenopathy – Absent

Icterus – Absent

Cynosis – Absent

Emaciation - Present

Build – Emaciated

Clubbing - Present

Tongue- Clear

Skin- Red eruptive

Provisional diagnosis – Dermatitis

Investigation – CBC

Miasmatic diagnosis -

The totality of symptoms and the past history strongly indicate this case as Syco-Psora with predominance of Sycosis. The family was also suggestive of hereditary Sycosis.

Totality Of Symptoms / Repertorization

- 1. Backache
- 2. Constipation
- 3. Debility
- 4. Eruptions
- 5. Itching
- 6. Memory weak
- 7. Alcohol habbit
- 8. Emaciation

Repertory used: Clarke's Repertory

Remedy given -

Rx -

PSORINUM 1M, 1 Dose

SL 1 Dram-4 globules/ BD For 7 days

Repertorial sheet

Repertorisation Table

Normal															
Repertorisation	Psor	Sulph	Zinc	Alet	Nat-m	Sanic	Sil	Aesc	Anac	Ant-s	Ars-me	Bry	Carb-v	Carl	Chin
Totality Symptoms Covered	11 5	10	8	7	7	7	7	5	5	5	5	5	5	5	5
[CL] [Clinical]Backache:		$\overline{}$	$\overline{}$		$\overline{}$	$\overline{}$	$\overline{}$	2	$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$	$\overline{}$
[CL] [Clinical]Constipation.:	3	3	(3	[3]	3	3	3	3	3	3	3	3	3	3	3
[CL] [Clinical]Debility:	2			2	2	2	2	$\overline{}$	2	$\overline{}$	$\overline{\Box}$	$\overline{}$	2	2	2
[CL] [Clinical]Eruptions:	2	2	2		$\overline{}$		2		$\overline{}$	$\overline{}$		2		$\overline{}$	
[CL] [Clinical]Itching:	2				$\overline{\ }$	2	$\overline{}$	$\overline{}$	$\overline{}$	2	2	$\overline{}$	$\overline{}$	$\overline{}$	
[CL] [Clinical]Memory:Weak:		3	3		$\overline{\ }$	$\overline{}$	$\overline{\ }$	$\overline{\ }$	$\overline{}$	$\overline{\ }$	$\overline{\ }$	$\overline{\ }$	$\overline{}$	$\overline{\ }$	
[CL] [Clinical]Alcohol habit:		2			$\overline{\ }$		$\overline{\ }$	$\overline{\ }$	$\overline{}$	$\overline{\ }$	$\overline{\ }$	$\overline{\ }$		$\overline{}$	
[CL] [Temperaments]Emaciated:				2	$\overline{2}$		$\overline{\Box}$	$\overline{}$	$\overline{\ }$	$\overline{\ }$	$\overline{\ }$	\sqcap	$\overline{}$	$\overline{}$	$\overline{}$
[CL] [Temperaments]Alcohol:Constitutions abused by:															

Comment: The totality including the clinical state was nicely covered by Psorinum which was given in 1M potency.

Follow up -

Date	Follow Up	Prescription		
8/7/2015	As per repertorization	Psorinum 1M/1Dose,		
		SL 1 Dram-4 globules/ BD		
		For 7 days		
14/7/2015	Relief in eruptions and	Psorinum 1M/1Dose		
	constipation, but itching is	SL 1 Dram-4 globules/ BD		
	still persist.	For 7 days		
23/7/2015	Redness in affected area,	Psorinum 1M/1Dose,		
	recurrency of itching	SL 1 Dram-4 globules/ BD		
		For 7 days		
15/8/2015	Mild itching	SL 1 Dram-4 globules/ BD		
		For 7 days		
24/8/2015	No eruption, no itching	SL 1 Dram-4 globules/ BD		
		For 7 days		

RESULT AND CONCLUSION –

After giving Psorinum in 1M potency patient feels progressively relieved in all complaints, recurrency of itching was found so i repeated my prescription without much changes. After 7-8 follow up itching and eruption are totally disappeared. Patient is not in my touch till now and not coming back.



BEFORE THE TREATMENT

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