

**INFORMATION GIVEN IN REPERTORY IS NOT ALWAYS GOSPEL TRUTH !!!**

The purpose of a repertory is to facilitate the search for the most similar remedy or remedies corresponding to a given set of symptoms. The repertory should guide us to the proven and reliable symptoms associated with a medicine with certainty and at the same time show us the relative importance of the symptoms.

Unfortunately, these requirements are not met by even the best and most famous repertories. There are a large number of errors of omission as well as commission in Kent's great Repertory of the Homoeopathic Materia Medica. Kent knew that his repertory was in a state of infancy, but he may not have been specifically aware that it contained numerous unreliable symptoms. These arose from a somewhat indiscriminate use of the works of earlier writers of repertories.

Naturally, all repertories which are founded on Kent's Repertory carry over all these mistakes. The nature of the errors and reasons for them become clear when we study the history of Homoeopathic repertories. Therefore, we start with the following outline of the history.

All said and done I honestly use repertory in my practice daily but at the same time I keep it as my slave and not as my master.

The most important use in my practice of repertory is to learn materia medica and prepare my notes, this is such a useful tool .

The next best use is to understand which group of remedies come forward in a given case, once you know the group of remedies is known it then becomes a simple task to extract materia medica and see the actual symptoms.

remember symptoms in repertory are not always reliable until and unless you do not confirm it with provings and reliable materia medica like Guiding Symptoms of Hering.

let me give you an example I once saw an acute relapse of chronic migraine the following rubrics were considered

- HEAD - PAIN - sun - exposure to sun; from
- HEAD - PAIN - pressure - hard - amel.
- HEAD - PAIN - night
- HEAD - PAIN - increasing - gradually
- HEAD - PAIN - fasting agg.
- HEAD - PAIN - evening
- HEAD - PAIN - cold - washing - amel.
- HEAD - PAIN - cold - applications - amel.
- HEAD - PAIN - cold - air - amel.
- HEAD - CONSTRICTION - pressure - amel.
- HEAD - CONSTRICTION
- MIND - ANXIETY - health; about - own health; one's

Now when I analysed the symptoms using the repertory I found that Sulphur , Belladonna and Nitric acid, Lobelia came in forefront getting equal marks and covering the same amount of rubric, how do we come to conclusion?? the answer is simple reading materia medica and going through the provings helped me to select lobelia inflata which reduced pain in few hours, do you really think I would have prescribed Lobelia inflata without using repertory? the answer is no for sure.

The next best use is using the concordance section of Boger Boeninghausen repertory. You cant imagine how useful is this in my practice ,let me give you an example of a simple remedy like China.

When I have used china as a constitutional remedy in a chronic case, the same person after some time if he undergoes stress or any mental trauma he will mostly require Iganatia or Pulsatilla, but the same person if he develops any joint or bone problem he will mostly develop symptoms of Merc-sol. or the same person if he develops skin disease then he may require Rhus-tox or Sulphur. This is so true the never once I was let down by using the remedies mentioned under concordance section of Boeninghausen repertory.

The biggest disadvantage of repertory is to use pathological rubrics esp. cancer and related rubrics. Most of the repertories give a wrong interpretation of pathology let take an example of Leukaemia.

Leukaemia as a disease has been known for a long time, but its pathology was not clearly defined until lately. Homoeopaths suggested a number of remedies for the treatment of leukaemia which they based on their vague understanding of its pathology. This was accepted without any critical assessment on the part of the homoeopaths and found its way into the repertory. Even today this rubric exists in the repertories with the full array of the proposed remedies. This disease was ascribed to the hydrogenoid constitution of Grauvogl. That is why Natrum sulph was put forward as one of the most important remedies, but also Thuja is there. Other than Thuja und Natrum sulph a whole series of remedies was put together which have a deeper relationship to sycosis or the hydrogenoid constitution. We note parenthetically that not all these remedies are to be found in Kent. In the whole of the homoeopathic literature Leukaemia is hardly dealt with. That is to say that there are no almost no reports of cures for this disease. And I would say for good reasons – because most of the drugs mentioned in the repertory have no relationship to the pathology of leukaemia. They cannot cure this disease and therefore the homoeopaths have no cases to present. Documented cases of true cures I have as yet to find in the journals. My experiences have shown the importance of just a few more remedies like Benzenum, Bothrops -atox and Ferrum -pic etc. but which have to be still properly proved in practice. Certainly Natrum sulph and Thuja do not belong among them.

Any repertory built on the basis of Kent's Repertory and not considering the above points will carry over all the mistakes. I have checked other older repertories, which have their own unreliability's. To make additions from these repertories we need to do good screening and reverification. A good repertory should have a structure which clearly delineates the suppositions and the unproven from the proven. Well founded suppositions are valuable. They give a direction for further research which will decide the extent to which this symptom is significant. Each drug has certain basic symptoms, symptom complexes, which can be general or specific, and then each drug has specific pathological conditions, which belong only to this remedy. All these pathological relationships and symptom complexes have to be added to the repertory. They are missing in the repertories.

Let me illustrate this with the following example involving Calcarea sulph and the symptom of being thirsty. Spongia and other medicines have been written about in the materia medica as thirsty, but in my experience Spongia is only thirsty in the very beginning. And then after sometime there appears without doubt a strong thirstlessness, even for a drop of water. These are very important points, especially regarding stages or phases of an illness, as we treat disease conditions and not a conglomeration of symptoms in homoeopathy. Coming back to Calcarea sulph we find quite the reverse than with Spongia and other remedies, it is thirsty throughout all the stages. This symptom I discovered very early in my practice and verified it repeatedly. I have often cure with Calc sulph cases in which Pulsatilla was first tried unsuccessfully. This symptom of thirsty has sometimes been enough, if no other medicine was clearly indicated. This has now been incorporated in my synthesis repertory as a „reliable and distinguishing“ symptom. The treasure trove of homoeopathy develops from the practice, and consists of the proven and reliable symptoms and symptom complexes which we mostly find in the journals. The problem with the repertories came up because the authors of the repertories indiscriminately put in any symptom they felt like from the unstructured diversity of the homoeopathic literature. This led to ever more unreliable and false symptoms being integrated in a repertory. Once it was in the repertory it was considered to be God's Word. We have talked about suppositions. These as we have said are legitimate, but have to be proved in practice. Let us take the example of Cocculus, one of Hahnemann's remedies. One had great hopes in its curative powers in neurological diseases. Unfortunately Cocculus did not live up to its promise. Newer ones have lived up even less to their supposed curative powers. T. F. Allen in his Preface to The New American

Edition of Boenninghausen's Pocket Book wrote: "it must be confessed that most of our new symptomatologies have not borne the searching light of clinical experience so well as those left us by Hahnemann." Therefore we have to re-think the pathological action of a medicine if it does not fulfil its original promise, or, as Burnett called it, its range of action. But if these suppositions are allowed into the repertory, and they have been, then they have to be proved to be allowed to stay in there. If nobody makes these corrections because everybody thinks it is true, then the inaccuracies remain in the repertory. There are innumerable examples of this. For the purpose of illustration we again take the example of Indigo. Indigo and other medicines were being given for supposed cases of epilepsy. It is found in the repertory under Epilepsy, But the truth is that Indigo has to my knowledge not once cured epilepsy. This is true for a great number of medicines. Many of the cases cited as cures of epilepsy just did not fulfil the criteria of epilepsy. They were just epileptiform type of cases. Even though there were voices against it all these medicines were included in Kent's repertory. Therefore sometimes even experienced homoeopaths using these rubrics were unable to cure many of the cases of epilepsy. The remedies which are capable of curing this disease have to have the basic nature of the pathology of epilepsy. The number of such remedies is not very large. Many more examples can be given. When we stop to think that many tens of thousands of symptoms of Hahnemann and his co-workers were missing in Kent's Repertory then we can have a certain idea of the vastness of what needs to be done. Because it is not just sufficient to merely add these symptoms to a repertory. Each of these symptoms has to be evaluated exactly according to its worth. The correctness of the repertory of Boericke has also been taken for granted. Even if Oscar Boericke states that the symptoms have been verified, we will find similar kind of mistakes as with Kent's repertory and also other kinds. Just the example of abscess will make this clear. In those days the homoeopaths put everything into one pot – pustules, boils, carbuncles, abscesses, suppuration. It is certainly legitimate to think that a deep acting remedy, which produces suppuration, should also be able to have some kind of curative action on abscesses. But this has to be confirmed in practice. Most of the drugs for abscess found in the repertory have cured only for pustules or boils!!!!