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## Preface by Richard Pitcairn

## The Development of the Repertory

As many remedies were studied, even in Hahnemann's time, it was evident there needed to be a way to organize the information. Few people could keep in memory all the detail that was accumulating. The repertory was invented as an organizational tool. The flow of information then was like this: provings \& poisonings $\rightarrow$ materia medica $\rightarrow$ repertory. You can see that by the time the information appeared in the repertory it had gone through three translations:

1. Perception/interpretation of the provers’ symptoms as reported to the observer.
2. Organization of symptom information into sentences in the materia medica.
3. Fragmentation of materia medica into separate rubrics of a repertory.

Here is an example of how that is done, picking a proving at random, for Aconitum.
"19. Dr. Wurstl, aet. [aged] 39, sanguine temperament, suffered in former years frequently from articular rheumatism, toothache, and on the slightest chill diarrhoea, but has been quite well latterly. 22nd February, 8 am, 6 drops of tincture. Immediately slight scraping in throat, for 5 m[inutes], nothing else. 23rd, 9 am, 12 drops. Somewhat more severe but transient scraping in throat. About 11 am suddenly giddy when walking, thereafter slight throbbing in frontal region towards both eyes, for some m [inutes]. Otherwise well, as he was also the next 2 days, when he took 12 and 15 drops. 6th March, 8:30 am, 15 drops. All day a slight coolness, which about 6 pm passed into chilliness, often recurring in course of evening; at same time rumbling in belly and itching in rectum compelling scratching. Next day no medicine; symptoms continued. 8th, nine am, 20 drops; forenoon, frequent vertigo; noon, slight chilliness (lasting till evening); afternoon, a soft stool; at night, frequent waking, without dreams. The chilly feeling, the loose bowels, and tickling in anus lasted 3 days; in addition three vesicles came on tip of tongue, which burnt for 4 days. 12th, 8 am, 30 drops. After 2 hours great confusion, throbbing and vertigo in head. After midday soup, heat in head for $1 / 2$ hour. After noon, again chilly; evening both knees are icy cold, with occasional transient stitches in them; night, frequent waking, but he soon goes to sleep again." ${ }^{1}$
Let's look at some of the information in this part of the proving:
"...forenoon, frequent vertigo; noon, slight chilliness (lasting till evening); afternoon, a soft stool at night, frequent waking, without dreams. The chilly feeling, the loose bowels, and tickling in anus lasted 3 days; in addition three vesicles came on tip of tongue, which burnt for 4 days."

We can see that there are a number of symptoms that occur together and it is obvious that a direct matching of proving report to a (new) patient would be most accurate if that patient communicated the same pattern that was very much like this report - the vertigo, chilliness, soft stool, frequent waking, tickling in the anus and vesicles on the tip of the tongue. So if we saw a patient with all or most of this symptom complex we would know that Aconitum was the similar remedy.
It becomes immediately obvious that this is difficult to keep in memory, or even keep in this form in a materia medica (though some of the older ones did try to do that, as for example, those of Jahr or Knerr) especially considering this is just one fragment of many pages of provings from several people. The answer to this practical challenge is the repertory. Information is extracted and grouped for easy access but it is important to know that the pattern is broken up and the various parts are put in different places, scattered throughout the repertory.

In finding the remedy for the patient, the reverse is done - we find the separate parts of this pattern and re-assemble them for the patient at hand. You can see that the accuracy of this re-assembly is critical.

[^0]
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As an example of how the information is entered, or not entered, let's take the selected phrases above and see where we can find them in Kent's Repertory.

| Proving Symptom | Repertory Rubric | Comments |
| :---: | :---: | :---: |
| Forenoon, vertigo | Vertigo; FORENOON (25): acon., agar., ambr., atro., bry., calc., camph., etc. | Aconitum present. |
| Frequent vertigo | Vertigo; VERTIGO (277): abies-c., abies-n., absin., acet-ac., acon., act-sp., etc. | Aconitum present in the general rubric for "vertigo" but there is no rubric for "frequent" or any similar words. |
| Noon, slight chilliness lasting to evening | Chill; CHILLINESS (128): abrot., acon., aesc., aeth., agar., alum., am-c., am-m., etc. | Aconitum present in "chilliness" but there is no rubric for "slight" or for "starting at noon and extending to evening." |
| Soft stool in afternoon | Stool; SOFT (203): acon., aesc., aeth., agar., agn., ail., all-c., all-s., aloe, etc. | Aconitum present for "soft stool" but no rubric for "soft in afternoon." |
| Soft stool in afternoon | Rectum; URGING, desire (173): abrot., acon., Aesc., aeth., Agar., all-c., aloe, alum., alumn., anac., apis, arg., arg-n., arn., ars., ars-h., ars-i., arum-t., asar., asc-t., atro., aur., aur-m., bar-c., etc. | A similar rubric that may apply is "urging, desire" and Aconitum present there in lowest grade but there is no rubric for "in the afternoon" or "urging in afternoon." |
| Frequent waking without dreams | Sleep; WAKING; frequent (156): acon., aeth., agar., agn., all-s., Alum., am-c., etc. | Aconitum found in "frequent waking" but there is no rubric for "waking without dreams." |
| Tickling in anus (another prover's description had it as "itching in anus lasting all day.") | Rectum; ITCHING (153): acon., aesc., agar., agn., all-c., aloe, alum., alumn., etc. | Aconitum present in "rectum, itching" but there is no rubric for "anus, tickling" and Kent cross references from the word "tickling" to this rubric. |
| Vesicles on tip of tongue with burning | Mouth; VESICLES; Tongue (73): acon., am-c., am-m., ant-c., apis, arg., ars., etc. | Aconitum found in "tongue, vesicles" but the rubric for "vesicles, tip of tongue" does not include Aconitum. |
| Vesicles on tip of tongue with burning | Mouth; PAIN; burning; Tongue; tip (53): acon., agar., am-c., am-m., arg., etc. | Aconitum present in "burning, tip of tongue" but there is no rubric for "vesicles, burning, tip of tongue." |

So we can see that the proving symptoms are broken up and parts of the entire symptom are put in various sections of the repertory. In addition, some of the detail that defines the proving most clearly is simply not found when we look for it - it was left behind. From this perusal of what has been
included and what was left out, we can see that not all material is carried over to the repertory. We don't know if Kent was working from a materia medica that did not have all of this information or if Kent himself decided, on studying the proving, that not all was necessary to include. In either case, there was a decision as to what is important to the prescriber and it is this decision that is reflected in how the repertory is to be used.

Let's look at this from another angle. In this next table we list the symptom fragments that we are considering from the table above and see if we can find them in a number of representative repertories. If "Yes" then there is such a rubric and Aconitum is found in it. If "-" then either there is no such rubric or there is a rubric but Aconitum is not present in it.

| Symptom | Kent | Boenninghausen <br> (Boger edition) | Synthesis <br> Edition 7 | Complete <br> 2009 |
| :--- | :---: | :---: | :---: | :---: |
| Vertigo, forenoon | Yes | - | Yes | Yes |
| Vertigo, frequent | - | - | - | - |
| Vertigo, paroxysmal | - | - | - | - |
| Chilliness, noon | - | - | - | - |
| Chilliness, slight | - | - | - | - |
| Stool, soft in afternoon | - | - | - | - |
| Stool, urging, afternoon | - | - | - | - |
| Waking, frequent | - | - | - | - |
| Waking, not from dreams | - | - | - | Yes |
| Anus, tickling | Yes | - | - | - |
| Anus, itching | - | - | - | Yes |
| Anus, itching all day | - | - | - | - |
| Tongue, vesicles, with burning | Yes | - | - | - |
| Vesicles, at tip of tongue | - | - | Yes | - |
| Vesicles, at tip of tongue, burning | - | - | Yes | Yes |
| Tongue, burning | Yes | Yes | - | - |
| Tongue, burning, tip | - | - | - | - |

We can see at a glance that only a minority of the information is included. This is practical: if every detail were included, we could not lift the book or we would get lost in the computer file; with simply too much information, a repertory loses its purpose of easy symptom access. Nonetheless, if we were trying to find this remedy for a patient, and assuming that the patient was showing the exact concatenation that we are working with here, it would be difficult to clearly define Aconitum as the match.

Here is how it would look as an analysis graph based on what we have available to us in the Kent Repertory. We see that Aconitum features in this analysis but certainly not prominently.


## Repertory Philosophy

Of necessity then, all the repertories that have been produced have a plan, a way of organizing the information, certainly, but also an expected way to access that information and re-assemble the symptom. There have been many repertories over the 200 years of homeopathic development and they vary considerably in the way they approach this. For our purpose here, the construction and use of two major repertories will be considered: Kent’s "General Repertory" and the Boenninghausen Repertory as edited by C. M. Boger. I discuss below their usefulness for veterinary practice in the light of my clinical experience over the past three decades.

## Kent's Method

When I began to study homeopathy with some seriousness, in 1978, I first learned to use the Kent Repertory and that was my reference text for about ten years. This is a very good repertory, one that I still use, often on a daily basis. However, for animal patients Kent's organizational approach has some drawbacks.

The method of Kent is to emphasize the mental and the general symptoms, working from these, then including the modifying factors (the modalities), using particular symptoms as appropriate to differentiate. Understandably some details of the mental and emotional state as well as sensations are included in sub-rubrics.

With animals these mental and emotional symptoms and the sensations are just not available. We can recognize emotions in animals but they are much more broadly categorized than in a person. We can say "fear" but not the details of the fear. We can say "anger" but not the type of anger and cannot be sure that we are accurately identifying anger instead of fear or irritability or rage.

A common example is the dog that is afraid of thunder. There is a rubric that is specific for this fear of thunder and sometimes it seems to be accurate to apply it to the fearful dog in this situation. But in my experience, more often than not, the more accurate way to understand it is "fear of noise" of which thunder happens to be a more dramatic example.
Another difference in evaluating animal conditions is the difficulty in separating the general symptoms (affecting the whole individual) from the particular symptoms (affecting just a part). If it was a person they could tell us, but this must be inferred from observation of the animal.

So we see that the method of Kent, though very good, does not really work so well in animal cases because we just do not have the same accuracy of information, especially the style of information that his repertory is designed to use.

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Coupled with the increase in cases of chronic disease presenting in modern homeopathic veterinary practice (as opposed to acute injuries, toxicities and infectious diseases) we can appreciate the challenge we face in doing this work. These chronic cases are almost never presented to us in their nascent or unmodified form. Often, the homeopathic veterinarian is turned to only after the use of other treatments that have muddled the appearance of the patient's condition; this makes seeing the similar remedy even more difficult than it would be otherwise. As Kent has told us, with non-curative treatment the first symptoms to go are the characteristic ones - the most useful symptoms, the very ones we need to be certain of our remedy selection. These animals have pathology, often advanced pathology, and we also know that pathology is the least useful guide to finding the remedy that is needed.

## The Newer Repertories on Kentian Lines

With time, other repertories came along as general interest in homeopathy developed, notably the "Synthetic Repertory" by Barthel and Klunker, and a version of Kent’s "General Repertory" edited by Künzli. These were very helpful and I used them quite a bit. Then even more expanded repertories began to appear, such as "Synthesis" by Frederik Schroyens and "The Complete Repertory" by Roger van Zandvoort.

At some point during these repertory developments I began to feel a shift in my work. As the number of rubrics increased and their size grew with further remedy additions, I could see my analyses were not as definitive as they had been and I felt less satisfied with the outcomes. Simply put, there was too much information and it was confusing. I do find that these larger, more inclusive repertories are very useful in some cases, especially where I am searching for a particular symptom or a detailed emotional state. However, in most of my animal cases they are not advantageous. They are excellent repertories but more suitable for the patient in which the symptoms can be rather clearly defined.

I pondered the situation and came to the realization that there were two possible approaches in developing a repertory. One was to expand it as much as possible, adding maximum information so that the repertory was almost as complete as the materia medica itself (the trend of those we have just considered).

The other possibility was the opposite. Rather than strive for completeness of the rubrics by putting in every possible remedy, the large available inventory of remedies is assessed for usefulness through clinical application; only the remedies clinically confirmed as most often needed, mostly the polychrests, are kept in the repertory. After all, 200 years of clinical experience identifying the most useful remedies is an extraordinary resource for rubric construction.

As an example, consider that for a particular condition such as the common cold, the materia medica contains hundreds of remedies that would seem to have some similarity - the "Complete Repertory" 2009 has 577 for this condition. However, in clinical practice it becomes apparent that really only about 30 remedies are usually needed; a remedy outside this group is only occasionally applicable in rarer instances. In fact, it may be that just 8 to10 remedies will handle $90 \%$ of what is commonly seen.

So in constructing a rubric for this condition, we have the choice of a very large rubric of hundreds of remedies that will be difficult to narrow down to a small group for materia medica study, or alternatively a limited rubric of just the 30 to 40 most often needed, appreciating that this will likely cover $98 \%$ of the cases we see.

## The Boger-Boenninghausen Repertory

Coming from this latter perspective I spent some time using a variety of other repertories and came to the conclusion that the one repertory that best demonstrated this "winnowing" approach was the Boenninghausen Repertory as edited by Boger.

Before starting the search just described I had assumed that the rubrics in the Boger-Boenninghausen Repertory were smaller because at the time it was written there was insufficient remedy information and clinical experience, with perhaps fewer remedies available. However, as I used it, and came to understand the philosophical basis for it, I found it to be extraordinarily useful and accurate for all my cases - animal and surprisingly even human ones. I came to the realization that it had been deliberately designed to be a compilation of the most likely remedies in each rubric.

It may be more clear to put it like this: if we match an important symptom from the patient, (based on the corresponding intensity, persistence, or recurrence of that symptom in the case) to the corresponding rubric, there is a very high probability that the rubric will contain the remedy needed. In itself, this is a focus that is very practical. As a result of realizing this, for the last 10 years or so the Boger-Boenninghausen Repertory has been the reference I turn to first and use most often in the great majority of my cases.

## Experience from Teaching

A parallel influence, from 1992 on, came when running a one-year post-graduate training program for veterinarians in the use of homeopathy. From this teaching experience, I could appreciate the difficulty the students had in using the repertories arranged for working with human patients. They include much information that only a human being can report - sensations, types of pain, locations, detailed mental and emotional symptoms. One can, of course, learn to ignore this information (as I did) but I began to think how agreeable it would be to have a repertory geared towards veterinary use.

## The Boenninghausen Method

So these two influences came together, and I found the strategy of Boenninghausen stood us in good stead in our animal work and in our efforts to create a veterinary repertory. The Boenninghausen "method" was developed early on, in the time of Hahnemann. Boenninghausen worked with both people and animals and as his experience grew, he proposed an accurate, efficient way of analyzing cases, close to Hahnemann's understanding described in the "Organon." Significant symptoms of different types could be collected from the case as a whole, so that in a balanced combination they would allow accurate remedy selection. The repertory was divided into separate sections for:

1) Mind and Disposition
2) Locations (with symptoms specific to particular body parts and organs)
3) Sensations and Complaints (objective and subjective, in general then applying to glands, bones and skin, rather than individual locations)
4) Sleep and Dreams
5) Fevers
6) Aggravations and Ameliorations (changes in symptoms due to time, circumstances and position) ${ }^{2}$

Boenninghausen gave an example of how in toothache, the pain site appears in section 2, the kind of pain in section 3 , the modalities in section 6 , with any associated symptoms, called Concomitants, appearing in various sections as relevant.

## The Idea of Concomitants

In his "Therapeutic Pocketbook" repertory, Boenninghausen emphasized the importance of these Concomitant symptoms, along with Modalities, as an extremely useful tool for remedy differentiation. He recognized a pattern in both patients and in those doing provings, an association of symptoms that would arise right before or at the same time as the main complaint. That association, the two symptoms

[^1]
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together, was able to very much narrow the choice of remedies as there were fewer remedies that would have that association (think back to the proving fragment we have already discussed). He called these associated symptoms concomitants. ${ }^{3}$

## Generalized Modalities and Concomitants

Many have praised Boenninghausen's repertories. For example, Nash commented that: "If Boenninghausen had never done anything but give us his incomparable chapter on aggravations and ameliorations, this alone would have immortalized him. It seems to me, after profiting by them in a practice of over thirty years, it is impossible to over-estimate them." ${ }^{4}$

However, his division of symptoms has also attracted criticism, and suffered to some extent from misrepresentation. Kent objected to the idea that you could separate symptoms and complete them by analogy - that you could assemble composite symptoms from proving, clinical and case information. It was wrong, say, to assume a left-sided headache invariably implied a left-sided toothache or general left-sidedness. As his Generalities chapter testifies, Kent himself was happy to make generalizations, provided he felt there was sufficient evidence across the case totality. Boenninghausen was fully aware of the perils of over-generalization; but, with due care in symptom selection, his approach offered great flexibility and could be applied to cases featuring undocumented or partial symptoms. Attention to precise grading within his rubrics and remedy concordances, based on thorough research over several decades, was an additional and often overlooked counterbalance here.

While Boenninghausen listed separately his Aggravations, Ameliorations and Sensations as stand-alone sections, Boger also included such "generals" within each chapter of his repertory. In his Respiration chapter, for example, alongside the alphabetical list of symptoms you find sections headed:

- Impeded by
- Time
- Aggravation
- Amelioration
- Concomitants

It is intended that these listings will apply to all the other symptoms in the Respiration section of the repertory. For example, a modality that aggravates bronchitis would also be likely to aggravate other respiratory symptoms in the patient. In other words, modalities and concomitants can reliably be generalized to other conditions affecting the same part or function of the patient. This is based on Boenninghausen's original assessment that important modalities and concomitants would apply in a wide range of disease pictures. By including these more general symptoms in the Respiration chapter, Boger was to some extent bridging the approaches of Boenninghausen and Kent. We follow Boger's approach in the "New World Veterinary Repertory."

## Examples of the Boger-Boenninghausen Method

Here is an example of applying one of the modalities in the Respiration section to the symptoms and conditions included in the alphabetical listings. In the Aggravation grouping there is the rubric:

Respiration; Agg.; Anger, vexation, etc.: Ign., ran-b., STAPH.
There are three remedies in this rubric and each of them could apply to any of the following symptoms. For example, if a patient had difficult breathing (one of the rubrics in the Respiration section) and it was observed that they were made worse by getting upset, getting angry, then one could turn to the

[^2]modality listed above and consider these three remedies, Ignatia, Ranunculus, and Staphysagria, as a possible fit for this patient.
Observing this modality in the patient is a hint that one of these remedies could be appropriate. Although they may not necessarily be indicated (since a complete symptom requires location, sensation, modalities of time, position and circumstances, as well as concomitants), it is certainly worth considering the possibility. However, and here is what is different, the patient could, instead of having difficult breathing, have rattling of mucus (another rubric) that was also worse when emotionally upset by becoming angry. Then, again, the same modality rubric featuring the three remedies would apply and be worth perusing.
The same approach is used with concomitant symptoms. In the Respiration section, there is a rubric Concomitants without any sub-rubrics, unlike the extensive listings under Aggravation. It is interpreted like this: The respiratory condition in our patient is attended with other symptoms occurring right before or at the same time as the respiratory symptom of interest. The details of such concomitant symptoms are not specified by this Concomitants rubric, so the meaning is this: just having any concomitant symptom, regardless of what it is like, is enough to apply this rubric.
In some sections, the concomitants list is quite extensive. In the Cough chapter, for example, there are many detailed concomitants. A specific example for that chapter would be a patient with a hacking cough (over 50 remedies) accompanied by anxiety or fear (8 remedies).

So we see that the Boger-Boenninghausen Repertory arranged the concomitant symptoms to be used in the same way as the modalities.

## Summary of the Boger-Boenninghausen approach

In the Boger-Boenninghausen Repertory, the modalities and concomitants are arranged in a more generalized grouping for each repertory section, rather than being listed under specific individual rubrics.

At first glance, one would think this cannot be accurate, as it is an assumption beyond the information that has been gathered in provings (and of course there are obvious exceptions). However, Boenninghausen's original observations were indeed based on clinical experience as well as on the study of provings, extended by analogy to facilitate accurate remedy selection. For instance, one could have a patient with a specific respiratory condition markedly worse for cold, without that particular combination being described previously. Nonetheless, the "generalized" modality rubric could still be successfully applied to that patient in finding the suitable remedy.

I was not sure about this suggestion of Boenninghausen when I first starting using the BogerBoenninghausen Repertory but I found that my experience also confirmed this as a good approach, often solving cases for me that no other method did. Like any method it is not perfect, nonetheless, it is surprisingly useful and reliable.

## Kent's Approach in Comparison

This is quite different from the way Kent structured his repertory. There you will find in the various repertory sections that the modalities are assigned to individual symptoms and you will see these modalities listed as sub-rubrics under specific symptoms. For example, in the Respiration section of Kent, there is the rubric "Accelerated" and under that, as a sub-rubric, there is "Lying down, while." So we understand, from the way it is arranged, that the modality of worse from lying down applies to just the symptom of accelerated respiration. There are many other places in the Respiration section where this modality of worse lying is given, however always under specific headings, involving detailed symptoms such as accelerated respiration. This is the way that Kent preferred it, thinking it more accurate, and it is indeed a very useful arrangement and likely more accurate in some cases.

## Animal Cases

In working animal cases we find the Boenninghausen method particularly useful. With animals, it is applied in a similar way as above, except that we usually cannot include "sensations," though occasionally we can make a reasonable guess at one.

An example that comes to mind is the dog that will suddenly turn and begin to chew frantically at a place on the skin. They act just as if bitten by a flea and sometimes it is accurate to use a skin rubric such as "biting sensation" or "stinging sensation." However, most of the time we have to work without this idea of semi-certainty. So our emphasis, by necessity, is on:

- Location
- Modalities
- Concomitants
- Generals

Mental symptoms can sometimes be used, as I described above, but most often after other symptoms have narrowed down to a remedy group and we are making our final differentiation by bringing in the mental/emotional behavior as a help in deciding our remedy choice. This actually matches Boenninghausen's original recommendation to consider only the most prominent aspects of the mind and disposition, since these symptoms are liable to be overlooked or misinterpreted.

## The Editing Process

In using the Boger-Boenninghausen repertory as our foundation, Wendy Jensen and I went through an editing that retained the philosophical structure that Boenninghausen introduced and Boger applied further. We removed what was not useful to our work and also brought in information from Kent, Boger (mainly the "Synoptic Key") and Jahr (the "New Manual") as our primary sources, as well as useful information from other repertories such as Knerr, Boericke, Hering's "Guiding Symptoms" and Allen's "Encyclopedia" that would add remedies to some of the most important rubrics for us as veterinarians.

## Cleaning up

So the first part of the editing process was "cleaning up" the Boger-Boenninghausen Repertory by taking out information not useful to us in our veterinary work - the sensations, the details of pain, and the symptoms that simply could not be recognized in animals.

## Adding rubrics

Then, that done, we were especially interested in adding rubrics from other sources, especially Kent, that we would often want to refer to for our animal work.

An example that comes to mind is a rubric to cover "a greenish discharge from the nose." Another is a rubric that characterizes the very frequent condition of "ear irritation with excessive oily wax production" in dogs (these days often diagnosed as "yeast infection"). So we searched for these rubrics or, if we could not find existing rubrics, created new ones from the search of materia medica.

## Enlarging some rubrics

In some instances a rubric of veterinary interest was already in Boger-Boenninghausen but the rubric could be enlarged from other sources to our advantage. There are a number of such rubrics frequently used in the clinic for which we would love to have more information on possible remedies to consider; based on our experience in practice we paid special attention to these.

So when more than one rubric was found in other sources for the symptom of special interest, we would combine them including the remedies from two or more rubrics and retaining the highest grading for the remedies that were duplicated.

The addition of remedies from other sources has increased the range of remedies to consider for cases. The Boger-Boenninghausen repertory has 342 remedies, while Kent has 624 . So we will see in this new veterinary repertory some remedies that are not in the original Boger-Boenninghausen.

## A Case Example

Moses, a 5 year old male cat, has recently become ill. He is very lethargic and has completely lost his appetite. If made to stand, he cries out. He has not moved for 24 hours. There is a fever going from $103.5^{\circ} \mathrm{F}$. $\left(39.7^{\circ} \mathrm{C}\right)$ to $105^{\circ} \mathrm{F} .\left(40.6^{\circ} \mathrm{C}\right)$. Blood analysis shows a normal WBC count, normal neutrophil levels but very low lymphocyte and monocyte numbers-suggesting a marked migration of these cells to some extravascular site. These values are also elevated: SGOT, CPK (very high), direct bilirubin, \& blood glucose. The SGPT is normal, as are BUN and Creatinine.

The remedy which cured this cat was Bryonia 30c given as single pellets on a four-hourly schedule for four doses (until response evident). After this treatment, he quickly went on to a full recovery that was confirmed at a follow-up appointment.

Let's start with a workup of the case using the Kent Repertory.

|  | $\dot{\oplus}$ | え் |  |  |  | نí |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Analysis |  |  |  |  |  |  |  |  |  |
| Fever; INFLAMMATORY fever (33) | 3 | 3 | 1 | 1 | 1 | 1 | 1 |  |  |
| Fever; MOTION; agg. (19) | 1 | 1 | 3 | 2 | 1 | 2 | 1 | 2 |  |
| Generalities; LYING; amel. (102) | 3 | 3 | 1 | 3 | 2 | 1 | 1 | 1 | 3 |
| Mind; SHRIEKING (78) | 2 | 1 | 2 | 1 | 2 | 1 | 1 | 3 |  |

We see that Bryonia is definitely in the top group for consideration. There are seven remedies that are similar enough to be in all of the rubrics chosen for the analysis. So it would not be difficult with a quick perusal of the materia medica (if even necessary) to choose Bryonia out of this group.

Just for comparison we can see the greater challenge if we were to use the Complete Repertory 2009.


Here we still have Bryonia in the second position but now the remedies for consideration have increased to 18. Doable, but more work.

Lastly, here is the analysis in the Boger-Boenninghausen repertory.


Bryonia is clearly at the top of the list and the only remedy that is in all rubrics.
Note that this analysis started with the "inflammatory fever" but then drew on a modality from the Fever chapter as well as two concomitants: "fever, with inclination to lie down," and "fever with shrieking, crying out." So you can see here how the method of generalized modalities and concomitants is used — and to advantage.

## Repertory Use

In closing, here is a suggested way to use the "New World Veterinary Repertory."
Identify the focus of the condition in your patient. Use that location as your base for starting your analysis. The "location" need not be an anatomical region - it could be a function such as fever in the example case above.

Then bring in the modalities and the concomitants that you have available. Use them to narrow the grouping of remedies for consideration.

If there is not a corresponding modality in the repertory section you are focusing on, then use modalities from the Generals section of the repertory.
Use few rubrics in your analysis. The more rubrics you use, the more likely the remedy needed will be lost in the listings. Pick them carefully.

The important symptoms to use are those that are intense (especially in acute conditions), that are persistent or recurrent (in chronic conditions), or are unusual in some way - either by appearance or in association with the rest of the case.

If you do not have the information needed - the modalities, concomitants, the generals - then pick the one rubric that most accurately characterizes the chief complaint. Assume it is highly likely that the remedy you need is in that list. Then work with the list by adding one other symptom, one that is affecting a different region or function. See if that more clearly defines the remedy choices.
You may need to add a second rubric, delete it, add another — back and forth until you are satisfied.
In some very difficult cases, there is no other option than considering carefully every remedy in the one rubric list.

## Limiting the Remedy Choices

It does help, in the chronic cases, to limit remedy considerations to those suitable for chronic disease. This can bring the remedies under consideration to a reasonable number. We do this by using Hahnemann's and Boenninghausen's list of remedies suitable for treatment of the chronic miasmatic conditions. This list is from Hahnemann's book, "The Chronic Diseases," and Boenninghausen's "A Systematic Alphabetic Repertory of Homoeopathic Remedies."

This limitation is not always appropriate but it can be a useful technique when it appears the patient we are dealing with is strongly affected by one or more miasms.

## In Summary

What we have here is the first edited truly veterinary repertory, worked from the ground up, with the intention of best meeting the practical needs of those working with animals. It will serve you well to practice using it with some cases for which you already know the curative remedy. That way you can try various approaches in analysis, using different rubrics, and gain some familiarity with how cases are worked out with this approach.
Good luck with using this repertory. I think you will find it both interesting and very useful.

GENERAL, in: Acon., agar., agn., alum., am-c., am-m., ambr., ANAC., ang., ant-c., ant-t., arn., ARS., asaf., asar., AUR., bar-c., BELL., bism., bor., bov., bry., calad., Calc., camph., cann-s., canth., caps., carb-an., carb-v., Caust., Cham., chel., chin., cic., cina, clem., Cocc., coff., colch., coloc., Con., croc., cupr., cycl., dig., dros., dulc., euph., euphr., ferr., Graph., guai., hell., hep., HYOS., IGN., iod., ip., kali-c., kali-n., kreos., LACH., laur., led., lil-t., LYC., mag-c., mag-m., mang., meny., Merc., mez., mosch., mur-ac., NAT-C., Nat-m., nit-ac., nux-m., Nux-v., olnd., Op., par., petr., ph-ac., PHOS., PLAT., plb., PULS., ran-b., ran-s., rheum, rhod., rhus-t., ruta, sabad., sabin., samb., sars., sec., sel., seneg., Sep., Sil., spig., spong., squil., stann., staph., STRAM., stront-c., sul-ac., Sulph., tarax., teucr., thuj., valer., VERAT., verb., viol-o., viol-t., zinc.

## TIME:

Morning: Acon., agar., all-c., aloe, alum., am-c., am-m., ambr., anac., ang., ant-t., arn., ARS., asaf., asar., aur., bar-c., bell., bism., bor., bov., bry., Calc., canth., caps., carb-an., carb-v., caust., cham., chin., cic., clem., coc-c., cocc., con., gels., Graph., guai., hep., hyos., ign., ip., kali-bi., kali-c., kali-n., kali-p., lach., led., lyc., mag-c., mag-m., merc., mez., nat-c., nat-s., nit-ac., Nux-v., petr., ph-ac., phos., phyt., plb., ran-b., Rhod., Rhus-t., rumx., ruta, sabin., samb., sars., sel., seneg., sep., sil., squil., stann., staph., sul-ac., sulph., tarax., tarent., thuj., verat., zinc.
Forenoon: Am-m., anac., ars., aur., calc., cann-s., canth., carb-an., Carb-v., cic., lach., lyc., mag-c., mag-m., mosch., nat-c., nat-m., ph-ac., phos., sars., sep., sil., sul-ac., sulph., zinc.
Noon: Ars., bell., tab.
Afternoon: Aloe, alum., anac., ang., ars., asaf., aur., bor., bov., bry., bufo, calc., cann-s., canth., carb-an., carb-v., chin., cina, cocc., con., dulc., ferr., graph., hell., hyos., ign., kali-c., kali-n., laur.,
lyc., mag-c., mag-m., mang., mur-ac., Nat-c., nat-m., nit-ac., nux-v., petr., ph-ac., phos., plat., plb., rhus-t., ruta, sabin., sars., sep., staph., teucr., viol-t., Zinc.

Evening: Acon., agar., aloe, alum., Am-c., am-m., ambr., anac., ant-t., arn., ars., aur., bar-c., bell., berb., bism., bor., bov., bry., cact., calad., Calc., carb-an., Carb-v., caust., cham., chin., clem., cocc., croc., cycl., dig., dros., euphr., ferr., graph., hep., ign., ip., kali-c., lach., laur., LYC., mag-c., mag-m., merc., mez., mosch., nat-c., nat-m., Nit-ac., Nux-v., ph-ac., phos., plat., plb., Puls., ran-b., ran-s., rhus-t., ruta, sabin., sars., Sep., Sil., spig., stann., stront-c., sul-ac., Sulph., valer., verat., viol-t., Zinc.

Night: Acon., alum., am-c., am-m., ant-c., arg., arn., Ars., aur., bar-c., Bell., bry., CALC., cann-s., canth., carb-an., Carb-v., caust., cham., Chin., cic., cina, cocc., coff., con., dig., dulc., ferr., Graph., hell., Hep., hyos., ign., iod., jal., kali-br., kali-c., lyc., Mag-c., merc., nat-c., nat-m., Nit-ac., nux-v., petr., phos., plb., puls., ran-s., rhus-t., sabad., sep., Sil., spong., sulph., Verat., zinc.
Midnight, after: Ars.

## AGG.:

## Abdominal:

complaints, with: Asaf.
pain, with: Acon., alum., am-m., ant-t., Ars., aur., bell., bor., bov., bry., Carb-v., cham., cic., coff., coloc., cupr., hep., ign., lyc., merc., mosch., nux-v., Phos., plat., puls., rhus-t., sec., sep., sul-ac., sulph., Verat.

Activity, after: Ars.
Addressed, when: Cham.
Admonition, kindly: Bell., chin., ign., nux-v., plat., stann.

Air, open, in: Agar., arn., ars., cina, con., lach., nit-ac., nux-m., nux-v., petr., ph-ac., phos., plat., rhod., rhus-t., sep., sulph.
Anger, from: Verat.
Approach of persons: Con., ign., lyc., stry.
(mind; anthropophobia):
Ascending (stairs): ARS., iod., Nit-ac.
Bathing feet, after: Lyc., nat-c., nat-m., phos., sep., zinc.
Bed, in: Am-c., Ars., caust., graph., kali-c., mag-m., phos., rhod., Sep.
(lying):
Breakfast, before: Calc.
Chastisement: Ign.
Company: Ambr., arg., aur., Bar-c., bell., bry., calc., carb-an., chin., cic., con., cupr., cycl., dig., graph., hell., Ign., led., lyc., mag-c., mag-m., meny., nat-c., nat-m., nux-v., petr., phos., plb., Sep., stann., stram., sulph.
(mind; amel.; alone, when):
(mind; alone; disposed to be):
(mind; company; averse to):
(generalities; agg.; company):
(generalities; agg.; society):
(generalities; amel.; alone, being):
Consolation: Aur., bell., chin., hell., ign., kali-p., Nat-m., nux-v., plat., sabal, sabin., sep., sil., sulph.
(mind; agg.; sympathy):
(generalities; agg.; consolation):
Constipation, during: Aloe, NAT-M., nux-v.
Convulsions, after: Cic.
Coryza, suppressed: Lyc.

## Coughing:

while: Kali-c., nat-m.
after: Cina, Rhus-t.
Dark, in the: Phos., Puls., STRAM.
Dentition, during (of young): Acon., Cham., Coff., Nux-v., Rhus-t.

Descending: BOR., Gels.
Digestion, during: Iod.
Drinking: Bell., Cocc., con.
Dyspepsia: Kali-bi.

## Eating:

before: Calc.
while: Aur., carb-v., caust., hep., kali-c., lyc., mag-m., merc., mez., olnd., ph-ac., plat., ran-b., sep., sul-ac., sulph.
after: Agar., alum., am-c., ambr., anac., arg., arn., ars., asaf., asar., bar-c., bell., bov., bry., calc., cann-s., canth., caps., carb-an., carb-v., caust., cham., chel., Chin., cocc., Con., ferr., graph., hyos., iod., ip., kali-c., lach., Lyc., mag-m., meny., merc., nat-c., Nat-m., nit-ac., nux-m., NUX-V., petr., ph-ac., Phos., plb., Puls., rhus-t., sabin., sars., sel., sep., sil., sulph., teucr., thuj., viol-t., zinc.

## Emotions:

(generalities; agg; emotions):
after: Arg., hyos., kali-c., lyc., nat-c., nat-m., phos., plat., sep., zinc.
depressing: Nat-m.
Excitement: ACON., Phos., sel.
Exertion, physical: Plb.
during: Agar., ars., calc., caust., cocc., hyper., nat-c., senec., sep., sulph., ther., verat.
after: Benz-ac., iod., kali-c., sel., spong., zinc.
Epilepsy, after: Cic., verb.

## Estrus:

around the time of: Ferr.
absent: Cocc., puls.
before: Am-c., calc., caust., cocc., con., cupr., hyos., kali-c., lach., lyc., mag-m., mang., NAT-M., nit-ac., phos., sep., Stann.
beginning of: Acon., ferr., lyc., Nat-m.
tips: Acon., agar., AM-M., ambr., ang., ant-c., Ant-t., ars., asaf., bar-c., bell., bism., bor., calc., canth., caust., cham., Chel., chin., coff., colch., con., Croc., cupr., dros., ferr., hell., hep., Kreos., lach., laur., merc., mez., mur-ac., olnd., ph-ac., Phos., puls., ran-b., ran-s., rhus-t., sabad., sabin., sars., Sec., sel., sep., Sil., Spig., spong., stann., Staph., stront-c., sul-ac., Sulph., tarax., TEUCR., THUJ., valer., verat., verb., zinc.
between the: Am-m., ambr., ars., aur., camph., caust., cycl., ferr., GRAPH., Hell., lach., Laur., nit-ac., plb., Puls., ran-s., rhod., rhus-t., SEL., sep., sul-ac., zinc.

Nails: Alum., am-m., ambr., ant-c., arg., arg-n., ars., bar-c., bell., bism., bor., bov., calc., carb-v., Caust., chel., chin., cocc., colch., CON., CROT-H., dig., dros., ferr., ferr-m., Graph., hell., HEP., iod., KALI-C., kali-n., LACH., lyc., m-aust., merc., mez., mur-ac., Nat-m., nit-ac., par., petr., ph-ac., phos., plat., puls., ran-b., rhod., ruta, sabad., SEP., SIL., squil., stann., staph., sul-ac., SULPH., teucr., thuj.
(extremities, posterior; feet; nails): (skin; nails):
brittle: Alum., ambr., ant-c., ars., calc., cast-eq., clem., dios., $f l-a c$., Graph., merc., nit-ac., Psor., sep., sil., squil., sulph., thuj.
(extremities, posterior; foot; nails; brittle):
(skin; nails; brittle):
crippled: Alum., caust., Graph., nit-ac., sabad., sep., Sil., sulph., thuj.
(extremities, posterior; foot; nails; crippled):
(skin; nails; deformed, thickened):
discharge around: Con., nat-s., ph-ac.
discolored: Graph., nit-ac.
(skin; nails; discolored):
eruptions about: Eug., merc., sel.
exfoliation: Alum., ant-c., apis, ars., cast-eq., chlor., crot-h., form., Graph., hell., merc., rhus-t., sabin., sec., sep., sil., squil., sulph., thuj., ust.
(extremities, posterior; foot; nails; exfoliation):
(skin; nails; exfoliating):
hardness: Ars.
inflammation: Kali-c.
(felon):
around: Con., nat-m., nat-s., ph-ac.
root of: Нер., stict.
loose: Apis
slow growth: Ant-c.
(extremities, posterior; foot; nails; grow; do not):
(skin; nails; growing; slowly):
thick: Alum., Graph., sabad., sep., sil., sulph.
(extremities, posterior; foot; nails; thick):
(skin; nails; thick):
tough: Chin-s.
JOINTS: Acon., agar., Agn., alum., Am-c., am-m., Ambr., anac., ang., ant-c., ant-t., arg., arn., ars., asaf., asar., aur., bar-c., bell., bism., bor., Bov., Bry., calad., CALC., camph., canth., caps., carb-an., Carb-v., CAUST., cham., chel., chin., cic., cina, clem., cocc., coff., colch., coloc., con., croc., cupr., cycl., dig., Dros., dulc., euph., euphr., ferr., Graph., guai., Hell., hep., hyos., Ign., iod., KALI-C., Kali-n., kreos., lach., laur., LED., LYC., mag-c., mag-m., Mang., meny., MERC., mez., mosch., mur-ac., nat-c., Nat-m., nit-ac., nux-m., nux-v., olnd., op., par., Petr., ph-ac., Phos., plat., plb., Puls., ran-b., ran-s., rheum, Rhod., RHUS-T., Ruta, sabad., Sabin., samb., sars., sec., sel., seneg., SEP., Sil., Spig., spong., squil., Stann., Staph., Stront-c., Sul-ac., SULPH., tarax., teucr., Thuj., valer., verat., verb., viol-o., viol-t., Zinc.
(generalities; articular affections):
(generalities; muscles):
(generalities; joints):

Shoulder: Acon., agn., am-c., am-m., Ambr., ant-t., arg., arn., Asaf., asar., bism., Bov., BRY., CALC., canth., caps., carb-an., Carb-v., caust., cham., chel., chin., cic., cocc., coloc., Croc., dig., dros., euph., FERR., ferr-p., graph., hell., hep., hyos., IGN., iod., kali-bi., KALI-C., kali-i., kreos., lach., laur., led., lyc., mag-c., mag-m., mang., MERC., mez., mosch., mur-ac., nat-c., NAT-M., nit-ac., nux-m., nux-v., olnd., op., Petr., ph-ac., phos., PULS., ran-b., rhod., RHUS-T., ruta, sabad., sabin., sang., sars., SEP., sil., spig., stann., STAPH., Stront-c., sul-ac., SULPH., teucr., thuj., valer., verat., viol-t., zinc.
Elbow: Acon., agar., agn., alum., am-c., am-m., Ambr., anac., ang., Ant-c., ant-t., Arg., arn., ars., asaf., aur., bar-c., bell., bov., bry., calad., calc., camph., canth., caps., carb-an., carb-v., CAUST., chel., chin., cic., cina, clem., cocc., colch., coloc., con., croc., cupr., dig., dros., dulc., euphr., graph., hell., Hep., hyos., ign., iod., KALI-C., Kali-n., kreos., laur., led., Lyc., mag-c., mag-m., mang., meny., Merc., mez., mur-ac., nat-c., nat-m., nux-m., nux-v., olnd., par., petr., ph-ac., phos., plat., puls., ran-b., ran-s., rheum, rhod., RHUS-T., ruta, sabad., sabin., samb., sars., sec., seneg., SEP., spig., spong., stann., staph., stront-c., sul-ac., SULPH., tarax., teucr., thuj., valer., verat., verb., viol-o., viol-t., zinc.
bend, of: Agn., alum., am-m., Anac., ant-c., Arn., bar-c., bell., calc., canth., carb-an., Caust., cic., cina, clem., colch., con., cupr., dros., dulc., graph., hell., hep., hyos., iod., KALI-C., kali-n., Laur., lyc., meny., mur-ac., petr., ph-ac., Phos., Puls., Sep., spig., staph., Sulph., teucr., thuj., valer., verat., zinc.
tip, of: Agar., alum., arg., asaf., bar-c., bry., carb-an., carb-v., caust., dulc., graph., HEP., hyos., kreos., lyc., merc., mur-ac., nat-m., olnd., ph-ac., puls., rhus-t., sabin., sars., sep., spig., spong., Stann., sul-ac., valer.

Carpus: Acon., agn., alum., AM-C., am-m., ambr., Anac., ant-c., ant-t., arg., arn., ars., Asaf., asar., aur., bar-c., bell., bism., BOV., Bry., CALC., Calc-p., canth., caps., carb-an., carb-v., CAUST., cham., chel., chin., cic., cina, clem., colch., coloc., con., croc., cycl., dig., dros., dulc., euph., euphr., Graph., guai., hell., hep., hyos., ign., iod., KALI-C., Kali-n., kreos., Lach., laur., led., lyc., mag-c., mag-m., mang., meny., merc., mez., nat-c., nat-m., nit-ac., nux-v., petr., ph-ac., phos., plb., puls., ran-b., ran-s., rheum, Rhod., RHUS-T., RUTA, sabad., SABIN., samb., Sars., sec., sel., seneg., SEP., sil., spig., spong., squil., stann., staph., stront-c., sul-ac., SULPH., tarax., teucr., thuj., valer., verb., viol-o., zinc.

Toe (finger): Acon., agn., alum., am-c., am-m., ambr., anac., ang., ant-c., ant-t., arg., arn., ars., asar., aur., bar-c., bell., bism., bor., bov., bry., CALC., calc-f., camph., canth., caps., carb-an., carb-v., Caul., Caust., Cham., chel., chin., cina, clem., cocc., coff., colch., coloc., con., croc., cupr., cycl., dig., dros., dulc., euphr., ferr., Graph., Hell., hep., ign., iod., Kali-c., Kali-n., kreos., lach., Led., Lith-c., Lyc., mag-c., mang., meny., merc., mosch., nat-c., Nat-m., nit-ac., nux-m., nux-v., olnd., par., petr., ph-ac., phos., plat., plb., Puls., ran-s., rheum, rhod., Rhus-t., ruta, sabad., sabin., samb., sars., sec., seneg., SEP., Sil., SPIG., spong., stann., staph., stront-c., sul-ac., SULPH., teucr., verat., verb., zinc.

BONES: Acon., agar., alum., am-c., am-m., anac., ang., ant-t., arg., arn., ASAF., Aur., bar-c., bell., bism., bov., Bry., calc., canth., carb-an., Carb-v., caust., Cham., Chel., Chin., COCC., coloc., con., cupr., cycl., dig., Dros., dulc., euph., euphr., hell., hep., ign., ip., kali-bi., kali-c., kali-n., Lach., laur., led., Lyc., mag-c., mag-m., Mang., Merc., mez., Nat-c., nat-m., nit-ac., olnd., par., petr., Ph-ac., phos., plat., plb., Puls., ran-s., rhod., RHUS-T., Ruta, sabad., Sabin., samb., sars., sep., Sil., spig., spong., Stann., Staph., stront-c., sul-ac., sulph., teucr., Thuj., valer., verat., verb., zinc.

## periosteum, elevated: $P h-a c$., RHUS-T., SULPH.

VEINS: Puls., thyr.

## TIME:

Morning: Alum., Am-c., am-m., ambr., arn., ars., aur., bar-c., bell., bov., bry., Calc., canth., carb-an., carb-v., caust., cham., cina, clem., coff., croc., cupr., dulc., ferr., hell., ign., iod., kali-c., kreos., lyc., mag-c., MAG-M., merc., mez., nat-c., nat-m., nit-ac., nux-m., Nux-v., petr., phos., plb., puls., ran-b., ran-s., rhod., rhus-t., sep., sil., Staph., sulph., tab., teucr., thuj., valer., Verat., verb., zinc.
every other: Nux-v.
Forenoon: Alum., am-c., ars., chel., fl-ac., laur., mag-c., merc., ph-ac., phos., plb., Sabad., staph., zinc.

Afternoon: Alum., am-c., Am-m., ant-c., asaf., bov., calc-p., canth., cham., chel., cocc., euphr., graph., kali-n., Laur., mag-c., merc., nux-v., Phos., puls., sars., spig., stront-c., sulph., teucr., valer., zinc.
Evening: Acon., agn., alum., am-c., am-m., ambr., anac., ang., ant-c., ant-t., arn., ars., asar., bor., bry., calc., canth., caps., carb-v., caust., chel., chin., colch., con., dulc., ferr., hell., hyos., ign., ip., kali-bi., kali-c., kali-n., kreos., lach., laur., Led., lith-c., lyc., mag-c., mag-m., mang., meny., merc., mez., mosch., nat-c., nat-m., nit-ac., nux-m., nux-v., par., petr., phos., plb., PULS., ran-b., Ran-s., Rhod., RHUS-T., sabad., samb., sars., sep., sil., stann., staph., stront-c., sulph., teucr., thuj., Valer., zinc.

Night: Aloe, alum., am-c., am-m., ambr., anac., ant-c., arg., ARS., aur., Bell., Bry., Calc., canth., carb-v., caust., cham., chin., coff., croc., cupr., dig., ferr-p., hep., hyos., Ign., kali-bi., kali-c., kali-n., kalm., LYC., Mag-c., mag-m., mang., Merc., mur-ac., nat-c., nit-ac., nux-v., petr., ph-ac., phos., puls., rheum, rhod., rhus-t., ruta, sabad., sel., SEP., SIL., stront-c., sulph., thuj., valer., viol-t., zinc.

Midnight:
before: Ang., cham., Led., Puls., rhus-t., valer.
after: Ambr., cham., Nux-v., ran-s.
AGG.:
Air, open, in: Bry., cham., Cocc., ign., laur., Nux-v., rhus-t., spig.
(warm; open air, in):
Alternating sides: Caust., plat.
Ascending: Sul-ac.
Backward, moving foreleg: Ign.
Bed, in: Hell., ign., IOD., kali-c., kali-n., MAG-M., petr., sil., stront-c.

## Bending or turning:

(motion):
head, the: Nux-v., puls.
limb, the: Acon., agn., ang., ant-c., arg., arn., bell., bov., bry., carb-an., carb-v., chel., chin., cina, coff., con., croc., dros., dulc., iod., kali-bi., mag-c., merc., mez., mur-ac., nat-m., nit-ac., petr., ph-ac., puls., rhus-t., sabad., sel., seneg., spong., stann., teucr., thuj., zinc.
backward: Anac., bov., calc., dros., dulc., Ign., kali-bi., nat-m., plb., Puls., sanic., sep., teucr., thuj.
inward: Am-m., Ign., staph., verat.
Bent, holding it: Hyos., spong., teucr., valer.
(bending or turning):
Breakfast, after: Cham., nux-v., plb.
Cold: Agar., am-c., cham., cist., kali-c., nat-m., nit-ac., nux-m., RHUS-T., Sabad.
air: Acon., bry., cocc., ign., kali-bi., nux-m., rhus-t., spong.
becoming: Arn., coсc., lyc., nit-ac., nux-v., RHUS-T., sil.
damp weather, during: Dulc., Rhod.
taking: Acon., bry., cham., ign., nux-v.
water: Calc., phos., sul-ac.
Dampness: Nat-s.
East wind (dry): Carb-v.

## Eating:

while: Bism., canth., Cocc., kali-bi., olnd., puls., stram.
after: Ant-t., bry., canth., cham., chel., chin., Cocc., con., ferr., ign., nux-v., puls., ruta

## Emotions: Nat-m.

Estrus, during: Am-c., am-m., bell., bry., cham., graph., kali-c., lyc., mag-c., mag-m., nit-ac., nux-m., nux-v., petr., phos., puls., stram., verat., zinc.

Fright: Phos.
Hang down, letting foreleg: Alum., ang., cina, ign., nat-m., nux-v., par., ph-ac., phos., plat., puls., ruta, Sabin., stront-c., sul-ac., thuj., valer.

Hunger, ravenous, during: Olnd.
Injury, after: ARN., lach., puls., RHUS-T., Ruta

## Lying:

affected part, on: Am-c., AMBR., anac., ars., Bar-c., calc., croc., dros., graph., hep., ign., kali-c., mag-c., mag-m., petr., rheum, rhus-t., SIL., sulph.
back, on: Cham., kali-n., nux-v.
bed, in: Alum., am-c., am-m., ambr., arn., ars., asaf., asar., aur., bar-c., Bry., Calc., carb-an., Cham., chin., con., croc., dulc., euph., ferr., hell., ign., kali-c., led., Lyc., Mag-c., mang., merc., mez., mosch., nat-c., nat-m., nit-ac., nux-v., olnd., petr., phos., Puls., Rhod., Rhus-t., ruta, sep., Sil., spig., spong., staph., stront-c., sul-ac., sulph., teucr., valer., zinc.
customary side, on: Ars., hep., Ign., mang., nux-v., puls., rheum, rhus-t., Sil.
down, after: Ang., hep., ign., ip., mosch., nux-v., Puls., rhus-t., sabad.
painful side, on: Ign., Nux-v., spong.
painless side, on: Bry., cham., fl-ac., ign., mag-m., nux-v., puls.

Motion, in general: Acon., agar., agn., alum., am-c., am-m., anac., ang., ant-t., arg., Arn., Bell., bov., BRY., bufo, caps., carb-v., caust., chel., Chin., cic., cocc., colch., coloc., croc., dros., euph., hep., hyos., ign., kali-bi., kali-c., kalm., led., lyc., mag-c., mag-m., mag-p., merc., mez., nat-c., Nat-m., nit-ac., Nux-v., ph-ac., phos., plat., puls., ran-b., rhod., ruta, sabad., sabin., sars., Sep., sil., spig., spong., squil., stann., STAPH., sulph., verat.
(bending or turning):
beginning of: Cupr., ferr., puls., rhus-t.
after: Hyos., puls.
forelegs, of: Anac., ang., asar., calc., caust., chel., chin., cocc., coff., con., croc., cycl., dig., dros., dulc., ign., kali-c., mag-c., meny., Merc., nat-n., nit-ac., nux-m., petr., ph-ac., plat., Puls., Rhus-t., sabad., sabin., sars., sil., stann., Staph., sulph., verb.
head, of: Cupr.
Overheated, being: Acon., bry., ign., nux-v.
(warm):
(warmth from):
Pressure on, affected part: Am-m., ant-c., bov., bry., canth., caust., chel., Cina, dig., iod., kali-bi., mang., merc., nat-m., ruta, sars., spig., staph., teucr., thuj., valer., verat.

Propping, or leaning upon: Alum., am-m., ang., asar., camph., caust., cina, con., croc., graph., mag-m., nat-m., phos., plat., rhus-t., ruta, sabin., samb., Sil., spong., squil., stann., sulph., valer.

Rest: Acon., am-c., Am-m., ambr., anac., ang., arn., asaf., aur., bell., bism., bry., calc., carb-v., cham., chel., chin., cina, Cocc., coloc., con., cupr., cycl., dros., dulc., euph., Ferr., graph., ign., kali-n., Lyc., mag-c., mang., meny., merc., mur-ac., ph-ac., phos., plat., Puls., ran-b., Rhod., RHUS-T., ruta, Sabad., sabin., samb., sars., sep., SPIG., spong., stann., Tarax., Valer., viol-o., viol-t.

## Rising from:

bed, after: Am-m., cina, dulc., euph., kreos., mez., nux-m., nux-v., Olnd., puls., Rhus-t., Staph.
sitting: Carb-v.
Rubbing: Alum., am-m., nat-c., spig.
Sitting: Aloe, am-m., anac., ant-c., ant-t., calc., cham., chel., chin., cycl., dros., ferr., meny., mur-ac., phos., puls., rhus-t., ruta, sabad., sabin., staph., sul-ac., tarax., teucr., viol-t.
after: Puls., ran-b.

## Sleep:

during: Acon., ant-t., caust., croc., cupr., dig., hyos., ign., puls., rheum, rhus-t., Stram., sul-ac., viol-t.
after: Acon., bry., chin., cocc., ign., nux-v., sel.
waking from: Caust. (waking, on):
Standing: Agar., alum., am-m., arn., mag-c., puls., rhus-t.
Stretching out limb: Am-c., am-m., anac., ang., arg., bry., canth., caust., chin., cina, clem., dig., dulc., ign., kali-c., laur., lyc., mang., merc., mur-ac., nux-v., plat., puls., rhus-t., ruta, sabin., sel., stann., staph., sulph., thuj., verat.

Touch: Acon., Agn., anac., ang., arg., arn., asaf., bell., bov., Bry., canth., cham., Chin., cina, cocc., colch., Cupr., cycl., dros., ferr., fl-ac., hep., hyos., iod., ip., kali-bi., kali-c., lyc.,
mang., merc., mez., mur-ac., nat-c., nux-v., par., petr., ph-ac., puls., rhus-t., sabad., Sabin., sars., sil., spig., spong., STAPH., stront-c., verat., verb., zinc.
of hair: Ign.
Waking, on: Alum., aur., bry., calad., caust., croc., Ign., iod., kali-bi., kali-c., Mag-m., nat-c., nat-m., nit-ac., Nux-v., petr., phos., puls., rhus-t., ruta, thuj.
(sleep; waking from):
Walking: Agar., ang., arn., bell., bry., calc., cocc., dig., ign., merc., nux-v., ran-b., sep., spig., staph., verat., viol-t.
open air, in: Am-m., anac., arn., calc., chin., clem., con., dulc., Hell., ign., mez., Nux-v., rhod., staph., sul-ac., Sulph., tarax., thuj.
after: Am-m., ang., croc., ferr., hep., led., nux-v., phos., rhus-t.
rapidly: Olnd., spig., sul-ac.

## Warm:

becoming: Bry., puls., sabad. (overheated, being):
bed, in: Ant-t., cham., LED., nux-v., PULS., Rhus-t.
open air, in: Dulc.
(air, open, in):
room, in: Bry., caust., Croc., laur., nux-m., nux-v., Puls., sep., spig., squil., verat., verb.

Warmth, from: Calc., caust., dulc., Fl-ac., stront-c., zinc. (overheated, being):
Washing, after: Am-c., carb-v., clem., lyc., phos., sep., Sulph., tab.

## Water, pouring over part: Stront-c.

Weather, rough, during: Rhod.
Window, when at: Chin.
Winter, in: Petr., Rhus-t.

## AMEL.:

Bathing, tips of toe: Lol.
Bending limb (turning): Arg., cham., chin., mang., mur-ac., puls.
(turn inward):
backward: Kali-c.
inward: Am-m.
Eructation, after: Mag-c., sep.
Hang down, letting forelegs: Acon., anac., arn., asar., bar-c., bor., bry., caps., chin., Con., cupr., ferr., graph., lac-d., lach., led., lyc., mag-m., phos., plb., ran-b., rhus-t., sulph., teucr., thuj.
Licking, with tongue: Mang.

## Lying:

back, on: Bry., Ign., puls.
bed, in: Am-m., bry., canth., Nux-v., Olnd., sep.
down, after: Am-m., Nux-v., olnd., spig.
side, on:
accustomed: Carb-an.
painful: Ambr., arn., bry., cham., Ign., lyc., nux-v., Puls.
painless: Ign., Nux-v.
Moistening, the part: Spig.
Motion: Acon., alum., Am-m., anac., ang., arg., asaf., aur., bism., calc., cham., chin., cina, cocc., con., cycl., dros., dulc., euph., ferr-p., hyos., ign., kali-bi., Lyc., mang., meny., merc., mosch., mur-ac., nat-m., ph-ac., phos., plat., psor., puls., rhod., rhus-t., ruta, Sabad., sars., sep., stann., staph., stront-c., valer., Verat., verb., viol-t.
continued: Caps., dros., ferr., puls., sabad., samb.
forelegs, of: Acon., agn., calc., cham., puls., rhus-t., samb., squil.

Perspiring, after: Bov., canth., cham., nux-v., puls.

Pinching tips of toe: Apis

Pressure, external: Ambr., arg., Bell., bov., bry., canth., cina, ign., laur., mang., meny., puls., verat.

Rest: Arn., Bry., chel., cic., meny., nat-m., Nux-v., phos., sars., sep., sil., staph., sulph., verb.

Rising:
after: Kali-c., nux-v., puls., ran-b., sep.
from bed: Carb-an., chin., led., sep., verat.

Room, in: Bry., cham., nux-m., nux-v., stann.

Rubbing: Alum., am-m., ang., ant-c., canth., chel., chin., kali-n., laur., nit-ac., olnd., phos., plb., staph., tarax., zinc.

Scratching: Camph., cina, mag-c.
Sitting: Agar., calc.
Standing: Calc., ruta, tarax.
Stool, after: Asaf.
Touch: Anac., bism., calc., cycl., euph., kali-c., meny., tarax., thuj.
Walking in open air: Ambr., croc., euph., hep., meny., petr., Puls.

Warm, becoming in bed: Bry.
Warmth, from: Bry., rhus-t., sabad., staph.
external: Cham., hell., lach., nux-m., nux-v.

Washing: Asar., rhod., spig.
Water: Asar., spig.
Wrapping up the feet: Hell.
ABDUCTED, spasmodically, toe: Glon., lac-c., Sec.

ABSCESS: Anan., sil.
(suppuration):
Proximal foreleg: Agar.
Elbow: Crot-h.
Distal foreleg: Plb.
Forefoot: Anan., lach.
dorsum, of: Plb.

JAUNDICE: ACON., ambr., arn., ars., aur., bell., bry., calc., canth., carb-v., caust., Cham., chel., CHIN., Chinin., cina, cocc., con., Croc., crot-h., cupr., dig., ferr., Hep., ign., iod., Lach., laur., mag-m., MERC., nit-ac., Nux-v., op., phos., plb., puls., ran-b., rhus-t., sec., sep., spig., sul-ac., SULPH., tarax., verat.
(skin; color; yellow, jaundice):
after chagrin (distress or embarrassment from failure or humiliation): Cham., lach., Nux-v., sulph.
(agg.; emotions):
JERKS, jerking:
(twitchings, jerks):
convulsions, as in: Acon., agar., alum., Ambr., ant-c., arg-m., arn., ars., bell., bry., calc., camph., cann-s., caps., carb-v., Caust., cham., chin., cic., coloc., cupr., dig., dros., dulc., hep., hyos., ign., ip., kali-c., lach., laur., lil-t., lyc., mag-c., meny., merc., mez., mur-ac., nat-c., Nat-m., nit-ac., nux-v., op., petr., phos., plat., Plb., ran-b., rhod., sabad., sec., sep., sil., squil., staph., stram., stront-c., sul-ac., sulph., thuj., verat., viol-t., zinc.
muscles: Acon., alum., Anac., ant-c., ant-t., arn., ars., asar., bar-c., bell., bry., calc., caps., cham., chin., CIC., cocc., Colch., coloc., dulc., euph., euphr., ferr., graph., ip., mag-c., meny., merc., merc-c., mez., nat-m., nit-ac., nux-m., Nux-v., olnd., op., petr., ph-ac., Phos., Plat., Puls., Rhus-t., ruta, sabad., sabin., SEP., sil., Spig., Stann., staph., stram., SUL-AC., SULPH., valer., viol-t., zinc.
(chorea):
(convulsive movements, spasms):
(motion, movements):
(muscles; twitching of):
(spasms):
(twitchings, jerks):
pain, with the: Cina, croc., crot-h., Daph., dulc., lact., nat-c., nat-m., olnd., plat., puls., squil., stann., tarax., valer.
paralyzed parts: Arg-n., merc., nux-v., phos., stry.
sleep, during: Agar., aloe, alum., ambr., anac., ant-t., arg-m., ars., bell., bry., cast., cham., cimic., cob., colch., con., cor-r., cupr., daph., dulc., hep., ign., ip., kali-c., lyc., merc., nat-c., nat-m., nat-s., nit-ac., op., phos., puls., ran-s., rheum, rhus-t., sel., sep., sil., stann., staph., stront-c., sul-ac., sulph., thuj., viol-t., zinc.
sleep, on going to: Acon., agar., alum., arg-m., Ars., cob., hyper., ign., Kali-c., phys., ran-b., sel., sil., stront-c., stry., sul-ac., sulph., zinc.

## JOINTS:

(articular affections):
(extremities, anterior; joints):
(extremities, posterior; joints):
cracking, in: Acon., am-c., anac., ang., Ant-c., ant-t., bar-c., bry., calad., calc., Camph., CAPS., caust., cham., chin., cic., Cocc., coloc., con., Croc., euphr., hep., ign., ip., Kali-bi., kali-c., kali-n., LED., lyc., m-arct., m-aust., mag-s., meny., Merc., mez., nat-c., nat-m., NIT-AC., Nux-v., PETR., Phos., puls., ran-b., Rhus-t., Sabad., sabin., sars., sel., seneg., spong., stann., SULPH., Thuj., verat., zinc.
(extremities, anterior; cracking, joints):
(extremities, posterior; cracking, joint):
creaking, in: Agn., Caps., con., Ferr., Led., nat-m., petr., plb., puls., rhus-t., sulph.
distorted: Am-p., benz-ac., calc., caust., guai., kali-i., led., lith-c., rad-br., sil., sulph., thuj.
dropsical: Apis, arn., bov., bry., canth., cedr., chin., chin-s., iod., kali-i., kali-m., ran-b., samb.
dryness in: Canth., lyc., nux-v., puls.
extensors, sides of: Anac., card-m., kreos., merc., sabin.
flexures, of: Cupr., graph., kali-c., kreos., led., nat-m., nux-v., phos., psor., sep., zinc.
gritty feeling: Con.
inflamed: Acon., apis, bell., benz-ac., bry., calc., caust., dulc., ferr-p., fl-ac., form., kali-i., led., lith-c., merc., phyt., puls., rhus-t., sabin., sil.
small joints: Act-sp., aloe, benz-ac., carb-an., CAUL., colch., kali-bi., led., lith-c., nat-c., rhod.
loose: Calc-p., carb-an., caust., nat-c., ph-ac.
pain in: Bar-m., berb., Colch., Led., mez., ph-ac., phos., Ruta, sil.
small (affected): Caul., colch., kali-bi., lith-c., rhod.
suppuration, of: Calc-p., merc., phos., psor.
swelling, pale (white swelling): Ant-c., ars., coloc., iod., kreos., merc., rhus-t., sil., sulph.
ulcerated: Coloc., hep., ph-ac., sep., sil.
water in: Sulph.
weak: Calc., caust., sep., sulph., tab.

## KNOTS:

(induration):
(lumpy effects):
(nodes):
LACTATION, complaints from: Acon., ars., BELL., bor., bry., Calc., carb-an., carb-v., CHAM., chin., cina, con., dulc., graph., ign., ip., kali-c., lach., lyc., MERC., nat-m., nux-v., ph-ac., phos., PULS., rham-cal., rhus-t., samb., SEP., SIL., stann., staph., zinc.
(nursing, young):
LAMENESS: Aesc., alum., anac., ang., arg., arn., ars., asar., bar-c., berb., bry., calc., calc-p., canth., carb-ac., carb-an., carb-v., caust., cham., chin., cimic., cocain., cocc., con., dios., dros., dulc., echi., ferr., fl-ac., graph., grat., helo., hydr., iod., kali-bi., kali-br., kali-c., kreos., lob., lol., lyc., mang., meph., merc., mez., mur-ac., nat-m., nit-ac., nux-m., nux-v., op., phos., phyt., pic-ac., pyrog., rhus-t., ruta, sars., sel., sep., sil., stann., staph., stram., sulph., tab., uran-n., valer., verat., zinc.
(extremities, posterior; lameness):
limbs: Aesc., anac., grat., kali-br., lol., nux-v., uran-n., zinc.
tremulous: Merc., phos., zinc.
LASSITUDE, physical: Alum., am-c., Ant-c., Ant-t., apis, asaf., bell., Bism., calc., canth., caps., Carb-v., Caust., chel., CHIN., cic., Cocc., coff., Colch., coloc., con., hyos., ign., iod., kali-bi., kali-c., kali-n., lach., Laur., Lyc., mag-c., meny., mosch., nat-m., nux-m., Op., petr., PH-AC., phos., phyt., plb., ran-b., rhod., sel., Seneg., Spong., stann., stram.,
Teucr., Valer., viol-t.
(enervation, sense of):
(exhaustion):
(lie down, inclined to):
(relaxation, physical):
(sluggishness, of the body):
(torpidity):
(weakness):
morning: Am-c., ant-c., lyc., nat-c., nat-p., nux-v., sumb.
forenoon: Alum., ran-b.
afternoon: Arg-n., gels., lyc., thuj.
evening: Am-c., ars., carb-v., Caust., graph., naja, nat-m., spig., thuj.
alternating with activity: Aloe, aur.
coition, after: Calc.
eating, after: Lyc., mur-ac., Ph-ac., sel.
estrus, before: Calc., lyc.
lie down before dinner, must: Mez.
motion, on: Phos.
sleep, after: Sil.
stool, after: Mag-m.
stormy weather: Psor., sang., tub.
walking in open air amel.: Alum., am-c.
warm room: Iod.
warm weather: Nat-p.
LAZINESS (lack of effort or activity): Acon., Alum., am-m., ARS., Bar-c., Bell., Bry., CAPS., carb-an., chel., CHIN., cocc., dulc., Guai., hell., ign., iod., kali-c., LACH., mag-m., meph., mez., mur-ac., NAT-C., NAT-M., NUX-V., op., petr., ph-ac., phos., plb., Puls., ruta, sec., SEP., stann., thuj., verb.

LEAD, poisoned by: Alum., alumn., ars., bell., Caust., cham., chin., nux-v., OP., Plat., sul-ac., sulph.
LEAN patients: Ambr., arg-n., bry., Calc-p., caust., ign., iod., lach., lyc., nit-ac., nux-v., phos., Sec., sep., sil., Sulph., tub.
(bony body):
(emaciation; thinness):
(thinness, spare habit):
LEUKEMIA: Acet-ac., ars., calc., calc-p., carb-v., carbn-s., chin., crot-h., ip., kali-p., Nat-ar., nat-m., nat-p., Nat-s., nux-v., pic-ac., sulph., thuj.

LIE down, inclined to (lethargy, listless): ACON., Alum., am-c., ambr., anac., Ant-c., ant-t., apis, arn., ARS., asar., bapt., Bar-c., bell., bism., bor., bry., CALAD., calc., canth., caps., carb-an., carb-v., caust., CHAM., Chel., chin., Chlol., cina, Cocc., coff., colch., con., croc., cupr., Cycl., dig., dros., Dulc., ferr., form., GELS., graph., Guai., Ign., ip., Kali-br., kali-c., kali-n., Lach., led., lil-t., Lyc., mag-c., mag-m., Merc., merc-c., mez., mur-ac., nat-c., nat-m., nat-s., nit-ac., nux-m., NUX-V., olnd., op., ox-ac., petr., ph-ac., phos., phyt., PIC-AC., psor., puls., ran-b., Rhus-t., ruta, sabad., Sel., Sep., sil., Spong., Stann., staph., Stram., stront-c., sulph., tarax., teucr., thuj., verat., zinc.
(enervation, sense of):
(exhaustion):
(lassitude, physical):
(reclining, half):
eating after: Ant-c., caust., Chin., lach., nat-m.

LIMBS, extended: Alum., am-c., bell., canth., chin., cina, clem., croc., ign., led., mez., nat-c., ph-ac., phos., ruta, sabad., sul-ac., verb., viol-o.
(extension):
(stretch, impulse to):
LOOKED at, averse to being: Ant-c., calc., cham., cina

LOSS of fluids: Agar., alum., anac., ant-c., ant-t., arg-m., arn., ars., ars-i., bell., bor., bov., bry., calad., Calc., Calc-p., cann-s., canth., caps., carb-an., Carb-v., carbn-s., caust., cham., Chin., Chin-s., cina, coff., con., crot-h., cupr-acet., dig., dulc., ferr., ferr-ar., Graph.,
hep., ign., iod., ip., kali-c., kali-p., led., lyc., mag-m., merc., mez., mosch., nat-c., nat-m., nat-p., nit-ac., nux-m., nux-v., petr., Ph-ac., phos., plb., Puls., ran-b., rhod., rhus-t., ruta, sabad., samb., sec., Sel., Sep., sil., spig., squil., stann., Staph., sulph., thuj., valer., verat., zinc.
(weakness; loss of animal fluids, after):
LUMPY effects, discharges (tissue changes): Aeth., aloe, ant-c., calc-s., cham., chin., coc-c., croc., graph., Kali-bi., kreos., Lyc., merc., merc-i-f., Plat., rhus-t., sep., sil., stann.
(discharge; hardened pieces):
(induration):
(nodes):

## LUXATION, spontaneous:

(dislocated or wrenched easily, spontaneous):
(sprains, dislocations):
LYMPHATIC constitutions (pale, flabby, or sluggish): Am-c., arn., ars., bar-c., Bell., CALC., Carb-v., Chin., dulc., ferr., graph., Kali-c., Lyc., MERC., Nat-m., Nit-ac., nux-v., petr., Phos., Puls., rhus-t., Sep., Sil., SULPH., thuj.

MALIGNANCY (very virulent or infectious): Crot-h., lach., nit-ac., tarent.
MARASMUS (severe undernourishment, underweight): Alum., arg., ars., bar-c., calc., calc-p., carb-an., carb-v., caust., chin., con., graph., helo., hydr., iod., kali-bi., kali-i., kreos., Lyc., mang., merc., mur-ac., nat-m., nit-ac., petr., phos., plb., pyrog., sel., sep., sil., stann., staph., sulph., zinc.
(emaciation; atrophy in general):
(starvation, effects of):
senile: Ambr., anac., bar-c., carb-v., con., $f l-a c .$, nit-ac., op., phos., rhus-t., sec.

## MEDICINES:

(drugs, abuse of):
abuse of: Cham., Nux-v.
susceptibility to, excessive: Asar., cham., Chin., Ign., NUX-V., PULS., teucr., Valer.
susceptibility wanting: Laur., Mosch., OP., stram.
(irritability; lack of, to medicine): (reaction poor, want of):
MEMBRANES, mucous: Acon., all-c., ant-t., apis, arg-n., ars., bell., bor., bry., caps., cham., dulc., euphr., hep., hydr., ip., kali-bi., kali-c., merc., nux-v., phos., puls., seneg., stann., sulph.
serous: Acon., apis, bry., canth., hell., kali-c., ran-b., squil., sulph.
METASTASIS (a change in the seat of disease): Apis, ars., calc., hep., kreos., lach., lyc., merc., sep., sil.
(eruptions, suppression of):
MILD disposition: Ambr., Bell., calad., cic., Cocc., Ign., lyc., M-arct., PULS., Sil., sulph.
(mind; gentle, mild, tender):
(mind; mildness):
(mind; yielding disposition):
MOBILITY, exaggerated: Alum., arn., Bell., camph., caust., cocc., Coff., con., cupr., hyos., ph-ac., Stram.
MOISTNESS, fluidity in general, discharges increased: Ant-t., ars., Calc., carb-v., cham., chin., dulc., ferr., graph., hep., ip., jab., lyc., med., Merc., nat-s., nux-v., op., ph-ac., phos., puls., rhus-t., samb., sel., Sep., sil., squil., stann., stroph., sul-ac., Sulph., thuj., verat.

MOLASSES, like: Croc., ip., mag-c., phos.
MOTION, movements:
absent, of affected parts (immobility):
Acon., agar., alum., am-c., am-m., ambr., anac., ang., ant-c., arg., arn., ars., asar., aur., bar-c., Bell., bov., bry., calc., canth., caps., carb-v., Caust., cham., chel., chin., cic., COCC., colch., coloc., con., cupr., cycl., dig., dros., Dulc., euphr., ferr., gels., graph., guai., hell., hep., hyos., ign., iod., ip., kali-c., lach., laur., led., lyc., meny., merc., mez., mur-ac., Nat-m., nit-ac., nux-m., Nux-v., olnd., op., petr., ph-ac., phos., Plb., puls., rhod., RHUS-T., ruta, sabin., sars., sec., sel., seneg., sep., Sil., spig., stann., stram., stront-c., sul-ac., Sulph., tarax., Verat., zinc.
(stiffness and want of suppleness in joints and extremities):
agility: Coff., stram.
automatic: Bell., lyc., stram.
aversion, to: ACON., alum., am-c., ambr., anac., ant-c., ant-t., arn., ARS., asar., bapt., Bar-c., bell., bor., BRY., CALAD., calc., canth., Caps., carb-an., carb-v., caust., cham., Chel., chin., cina, Cocc., coff., con., croc., cupr., Cycl., Dig., dros., dulc., ferr., graph., GUAI., hyos., Ign., ip., kali-c., lach., led., lyc., mag-c., mag-m., merc., Mez., mur-ac., nat-c., NAT-M., nit-ac., NUX-V., op., petr., ph-ac., phos., puls., ruta, sep., stann., stront-c., sulph., tarax., teucr., thuj., zinc.
continued: Anac., cob.
desire or impulse, for: Acon., agar., alum., am-c., Ambr., arg., Arn., ars., asar., aur., Bell., bism., bor., bry., calc., canth., CHAM., CHIN., coff., coloc., con., Cupr., euphr., FERR., hyos., ign., iod., ip., kreos., lyc., mag-c., mag-m., mang., merc., mosch., mur-ac., nat-c., nit-ac., nux-m., nux-v., op., ph-ac., phos., puls., ran-b., rhod., RHUS-T., ruta, samb., sec., sep., sil., squil., stann., staph., stront-c., sulph., Teucr., valer., verat.
(restlessness):
difficult: Acon., agar., alum., am-c., am-m., ambr., anac., Ang., ant-c., ant-t., arg., arn., Ars., asar., aur., bar-c., BELL., bor., bov., Bry., Calc., camph., canth., caps., Carb-an., carb-v., CAUST., Cham., chel., chin., Cic., cina, Cocc., coff., colch., Coloc., con., croc., cupr., cycl., dig., dros., dulc., euph., euphr., ferr., Gels., Graph., guai., hell., hep., hyos., Ign., ip., Kali-c., kali-n., kreos., lach., laur., led., LYC., mag-c., mag-m., mang., meny., Merc., mez., mosch., mur-ac., nat-c., Nat-m., nit-ac., nux-m., Nux-v., olnd., op., par., PETR., ph-ac., phos., plat., plb., psor., Puls., ran-b., rheum, rhod., RHUS-T., ruta, sabad., sars., sec., sel., seneg., SEP., Sil., Spig., squil., stann., Staph., stram., stront-c., sul-ac., Sulph., tarax., Thuj., valer., Verat., zinc.
(agg.; motion):
(stiffness and want of suppleness in joints and extremities):


[^0]:    ${ }^{1}$ Richard Hughes, MD and J. P. Dake, MD, A Cyclopedia of Drug Pathogenesy - Volume I, page 95. The date of the proving would seem to be 1843.

[^1]:    ${ }^{2}$ In Kentian terms these broadly equate to Mentals (1), Physical Generals (3 to 6) and Physical Particulars (2).

[^2]:    ${ }^{3}$ The dictionary meaning is "naturally accompanying or associated."
    ${ }^{4}$ E. B. Nash, MD, Expanded Work of Nash, B. Jain Publishers, New Delhi, 1995, page 572.

