Talk 4 : Summary : Discussion Session Talk I to III

-Case: Can I do it, can I not do it.
Case of a young man diagnosed as a very severe case of nummular eczema on his leg.

-Case: Something from outside comes, pulls her out and finishes her.
Case of a 20-yr-old girl with polycystic ovarian disease, with a huge cyst that is 9 cms in diameter and having severe dysmenorrhea.

-Case: Fight till the finish.
Case of a patient with central serous retinopathy

-Case: She had a mask, a façade
Case of a 40-yr-old female with autoimmune hepatitis and systemic lupus erythematosus.

-Case: Make me feel inferior but I am loyal
Case of a 32 yr old female having Rheumatoid arthritis

-Case: I will not strike unless provoked
Case of a 30-yr-old male with cardiomyopathy.

-Case: Forced out sensation with erroneous ideas of body
Case of a 22-yr-old girl with idiopathic thrombocytopenic purpura.

- In practice one needs to use the whole range of tools. The Sensation Approach has only added more tools and increased the range and the depth of our vision, of our perception of the patient.

-Every approach has its limitation. And the best results will be obtained when we combine more than one way of seeing the patient. We have to be flexible in our approach.

-What is important in any approach is to get to the very basic idea, whether it be a rubric or a sensation.

-case 50) this case was given in the summary of the last lecture for you to solve.

Case of a young 12 yr old boy diagnosed as autoimmune arthritis having pain in the joints with swelling of ankle joints, interphalangeal joints, fingers and calf muscles.

The Beauty of this case is that we arrive to the same remedy by any of the several different approaches. With The repertory approach, the materia medica and symptoms approach and the Kingdom and The Sensation approach we still come to the same remedy.

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Question and Answers on the integration of the old and new methods:

1. When someone compares themselves to others, is that usually animal kingdom? In a plant patient sensitivity, the people around them might bother them. How would their representation be different from animal?

2. As you explained that the Rows represent the stages of development, if a person has separation issues and is given a Row-2 remedy, then is it possible that they move on from this stage? They could have been stuck here and the remedy helps them separate. Could their remedy then change? Especially if it is an adolescent, as they move through teenage years and then become young adults.

3. How do you use hand gestures to locate rubrics?

4. Can we go through Sensation method without HG?

5. How do we know when the patient needs a nosode?

6. Explain the changing of the remedy during life? How often does that happen?

End of Summary.