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## INTRODUCTION

During case-taking a classical homoeopath is not merely collecting symptoms from the diseased individual but his aim is to perceive the man in disease, or the constitution in the disease. Hence, the process of receiving the information from the patient rather is called as case-perceiving.

Hahnemann talks about case taking in Organon of medicine in following aphorisms 43 – 104, 139 –141, 147 – 171.

But some other aphorisms are more important. We will see these.

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## **AIMS & OBJECTIVE**

So we see that the sole aim & objective of case-taking is to identify and understand the man in disease who is front of us. The aim is not to identify the disease.

## **WHAT CONSTITUTES MAN**

After taking the case one should be able to understand the individual patient at the level of:

Mind;

Physical body;

Speed;

Miasm;

Response & tolerance -

- Environmento-socio-built up (Mind)

- Response in disease (Mind & Body);

- Thermals

- Thirst

## **PERCEIVING THE MAN IN DISEASE**

Every patient has a story to tell that tells us about the constitution that we are dealing with. This story helps in individualize this patient from other patients who have similar story.

Perceiving the man in disease begins even before the patient enters our consultation room.

The process of case-taking is divided into 3 steps:

1. Pre-interview;
2. Interview; and
3. Post-interview.

## **PRE-INTERVIEW**

Case-taking starts before the patient enters our consultation room or even before we have asked our first question to the patient.

The first-interaction, whether by phone, letter or in person, even if at any other place than consultation room is important.

The tone and words used by the patient in first-interaction are very important.

These can be definite pointers to the state or disposition of mind. For example, one of my patients, when calling for the first time used following words "Sir, please give me your appointment, I am suffering from asthma. Please give me appointment any time you like."

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## **INTERVIEW**

Always start the interview with an open ended – indirect question. However, best is to maintain silence and allow the patient to start.

### **Interview**

According to many authors man just communicates only about 10 – 15 % by the method of verbal communication. The aim should be to get all this 10 – 15% information provided by the patient by the means of verbal communication during the interview. Key is to allow the patient to speak without any interruptions.

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As is clear from aphorism 83, during the interview, a classical homoeopath has to play at least three roles:

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All the three roles require classical homoeopaths to be passive but alert.

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Once patient has told you what ever he wants, he may stop talking. When long pauses, even after your response yield no spontaneous reaction from the patient, close the interview and move ahead with post interview session.

## POST-INTERVIEW

Once you have closed the interview, come to the post-interview session.

Remember for the patient this post-interview session is a part of the main interview. Post-interview session starts when long pauses, even after your response yield no spontaneous reaction from the patient. Post – interview session has two main objectives.

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Dr. Hahnemann talks about post-interview session in aphorism 86. He writes.....

Usually, in the post-interview three types of questions can be asked from the patient. These are:

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After collecting all the information that was incomplete; and confirming what was to be confirmed, we move to next step that is case-analysis.

## **CASE-TAKING: METHODOLOGIES**

Every patient has a story to tell that tells us about the constitution that we are dealing with.

To understand the man in disease who is front of us during the case-taking we use four different methodologies. These are

1. Silent listening;
2. Observation;
3. Deduction; and
4. Induction.

## **SILENT LISTENING**

### **Silent listening**

The word silence denotes a state of not speaking or making any noise. Listening is a state of giving attention by hearing.

Silent listening is a state of attentively hearing what the patient is communicating to us.

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Example No.1. Patient, "Doctor, I felt very happy last week when I won the first prize in the competition organized by a newspaper. I beat so many contestants and was adjudged the best among them. It was a great honor. But you know doctor; I took the help of internet. It was bad on my part to download information from internet. I feel I won the prize by cheating. I am really depressed about it. ....

Myself, "But others may also have taken the help of internet."

Patient, "Yes, all my friends did. But still I feel I should not have taken the material from internet. I won by unfair means."

Myself, "But when everyone else used internet how can you say that you have cheated. You did what other contestants were doing."

Patient, "That is why I am proud and very happy to beat all of them. After all I was very fair with everyone."

Now listening to the above dialogues, what can you infer in repertorial language?

Listening to the above dialogues, we can infer to following rubrics:

1. Confusion;
2. Antagonism, herself with;
3. Contradictory and alternating states.

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Silent listening is the first important methodology employed by classical homoeopaths in case-taking. All other methodologies come after silent listening. I call it is the first methodology as the patient wants doctor to attentively listen to his complaints.

Example case **A Case Requiring Liver Transplant**

**Presenting Complaints**

An 8 year old patient came on 23/03/07 with following complaints:

1. Recurrent jaundice,
2. White stools,
3. High colored urine
4. Fever & malaise since Jan 07
5. Itching all over body

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Let us see another case where silent listening was the methodology used.

### **Presenting complaints**

A female patient of 23 years of age came with following complaints:

1. Weight is decreasing-in one year from 68 kgs came down to 47 kgs.

2. Headaches

3. Sinusitis since 10 yrs

4. Fever, Irritation, Vomiting every week

5. Recurrent Sneezing < dust

6. Skin became rough and dark

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## **OBSERVATION**

Observation is second methodology applied during case taking. Observation is study of patient by surveillance, viewing, watching and monitoring him.

Aphorisms 83 and 142 are two main aphorisms in which Dr. Hahnemann talks about observations.

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Remember what we observe is definitely more reliable.

Example No.1. Mother or father is having difficulty in controlling or holding the child. The child may be hyperactive / Restless.

Example No.2. A paper flies off your table or pen is about to fall from table and patient immediately holds it – Alert.

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At times an unusual observation may open up the pathway to the remedy. Let us understand with following example.

**Presenting complaints**

A young boy of 14 years, son of one of my patient was brought to me on Saturday, 24/07/04 as an emergency case.

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### **Observation**

This boy was brought by both his parents, father supporting the boy. He appeared to be very weak. There were six other patients waiting in the waiting room. I can see what ever is happening in the waiting room through glass. Suddenly this boy got up and killed a mosquito. When the patient entered my chamber I observed his clothes were not ironed or properly buttoned. Eyes were deep yellow. He appeared very weak

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## DEDUCTIONS

The word deduction comes from the word deduce. Deduction is interpretation or assumption or presumption based logical or reasonable inference.

One can deduce from

1. Observations,
2. Past history,
3. Life-style; and
4. By the method of inductive deduction.

### Deduction from observations

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Example No.9 A patient does not accept what doctor says and advances certain arguments to contradict what the doctor is saying - Contradict, disposition to.

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### **Deductions from past history**

At times, one can deduce a reliable trait from the past history or from the history of presenting complaints.

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### **Deductions from life-style**

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At times deduction may be the only the pathway to the remedy. Let us understand with following example.

A case of Super-high triglyceride level.

### **Presenting complaints**

This patient, mother in law of one of my patient, was brought to me on 10/03/05. She had following complaints:

1. Snoring;

## INDUCTION

In induction method one initiates or stimulates the patient to generate the history. While using the methodology induction, the doctor stimulates the patient to come out with some more details of some aspect of his personality or history.

Common means of inducing a patient to reveal his history in the clinic are:

1. Hitting at the observed trait directly;
2. Hitting at the observed trait in opposite;
3. Inducing him to speak what he likes about himself and other;
4. Inducing him to speak what he dislikes about himself and other; etc.

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As written above, in induction method one initiates or stimulates the patient to generate the history. Let us understand with following example.

Case of renal cortical cyst.



## **WHEN IS CASE-TAKING COMPLETE**

A 35 year old lady patient came to on 18/01/08. She presented with following complaints:

### **Presenting complaints**

1. Low back pain since 1 ½ month
2. Secondary Infertility

### **Investigations done**

MRI LUMBAR SPINE: Central mild disc bulge noted at L4-L5, L5-S1, causing indentation over thecal sacs. Bilateral neural recess narrowing with no significant compromise.

### **Past history**

1. Appendectomy – 10 years of age
2. Patient married in 2000 at the age of 27 years.

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In this case the history taking was completed on the day the patient spoke about her bad experience. This bad incident had been the focal point around which the history was revolving and on which the remedy was based. Though Phosphorus was the remedy after repertorization, Sepia was given as it has tendency to antidote the effects of homoeopathic medicines. Later on Phosphorus based was given.

#### Example 2

On 3-10-2007 female patient of 15 year presented with following complaints.

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The above two examples show that case-taking may not end in first visit. It may continue till we are able to identify that constitution that we are dealing with.