

Potency Selection

Low potency, high frequency of administration

High potency, low frequency of administration

LOW

1^{1x}
1x 2x 3x 4x 5x 6

1c 2c 3c 4c 5c 6c 7c 8c 9c 10c 11c 12c

LOW POTENCY DECIMAL SCALE
for tissue pathology with low physiological reactivity

LOW POTENCY CENTESSIMAL SCALE
for tissue pathology with physiological reactivity
or as stat doses in sensitive infants (eg 9c,12c)

Low potencies are usually repeated, up to
four times daily and are administered
over weeks or months in chronic cases.

HIGH

HIGH POTENCY CENTESSIMAL SCALE
Informational stimulus in reactive states and
multilayered cases with mental / emotional
disturbance. Stat doses or repeated in acutes.

12c 30c 200c

MILLESSIMAL
SCALE: mental /
emotional disturbance,
and some acute states.

1M 10M 50M CM

MOLECULAR
THRESHOLD

Notes on potency choice:

Remember that the choice of remedy is more important than the potency choice.

High potencies are usually only effective if they represent the similimum for the patient.

Low potencies can be effective at a local level, even if they are not optimally chosen.

Low potencies of an inappropriate remedy rarely aggravate - they are merely ineffective.

High potencies may aggravate symptoms. (Most commonly the presenting complaint.)

Take care in infants and sensitive children - particularly if you are treating them for skin conditions or asthma - it is advisable not to give the first prescription higher than a 12c in an infant.

30c is usually considered a safe potency in nearly all other prescribing circumstances.

The elderly may not respond as effectively to high potencies, using medium or low potencies at more frequent intervals will usually be of greater value.