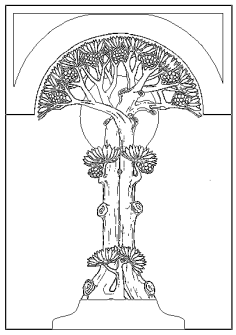
Centre for Integrative Medical Training
In Association with London Integrated Medical Health Education



Intermediate Course in Medical Homeopathy

A Blended Course in Homeopathic Medicine for Healthcare Professionals

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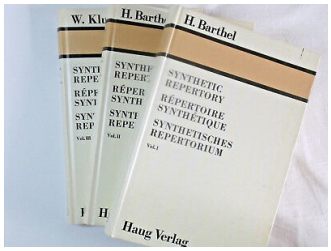
Unit 28

Pointers for Week 8

Notes on Repertory

Which Decision-Support Tool Best Suits Your Requirements



Barthel & Klunker

Up to this point in your studies you have relied mainly on patten recognition for our study cases, in terms of identifying a *Similimum*. It should be evident by now that, even within constitutions, there is a significant degree of variation. Each patient only exhibits a proportion of the indicating features of their optimal remedy and the whole remedy picture is never expressed fully in any one patient or proving subject.

As you know, the materia medica is a composite of provings and clinical data from many patients and, for this reason, pattern recognition is only practicable as a prescribing method for a minority of patients.

The study cases you have met so far have been selected for their value in the discussion of methodology and so you should not feel too dismayed if you haven't pattern-matched them all to the same remedies as the ones originally prescribed for them.

Unless we study the materia medica exhaustively and continuously, we can only ever rely on pattern recognition in those of patients who present us with the strong constitutional picture of a major polychrest.

Certainly the consistent reading of a materia medica like Vithoulkas' *Materia Medica Viva*, which runs to many volumes, can teach us to pattern recognise the essence features of many remedies.
For most practitioners, however, it is the repertory that provides the necessary guidance towards the similmum, in all those cases that present with a complex symptom picture or a highly individual constitutional make-up.

You will find that there are quite a number of different decision support tools available. Some of these have a long heritage of use and others have been introduced quite recently.

Overleaf, you will find a summary table which outlines the different resources past and present. Many of these remain in print or production and this list is not exhaustive. You will find new software publishers or repertory systems on-line.

The main developers in recent years have been:

Warkentin et al.	MacRepertory / Complete Repertory with add-ons
Schroyens et al.	RADAR Opus / Synthesis Repertory with add-ons
Vithoulkas et al.	Vithoulkas Compass
Frei et al.	Boenninghausen TPB and Polarity Analysis
Shah et al.	Hompath (11 modules, 300 searchable books)
Dolphin Cybernetic	Polychresta (5 repertories and 6 materia medicas)
Dhawale et al.	Organon '96 (Boenninghausen, Boger, Kent)

Classification of repertories

Book form

General

Hahnemannian	Clinical	Alphabetical	
		by section	*by rubric*
Concordance Gentry Knerr	Boericke Clarke Malcolm (Bowel Nosodes)	Murphy	Phatak Srivastava
Thematic Mirrili			
Systematic Boenninghausen Lippe Kent BBCR BTPB Boger (Synoptic key) Synthesis Complete			

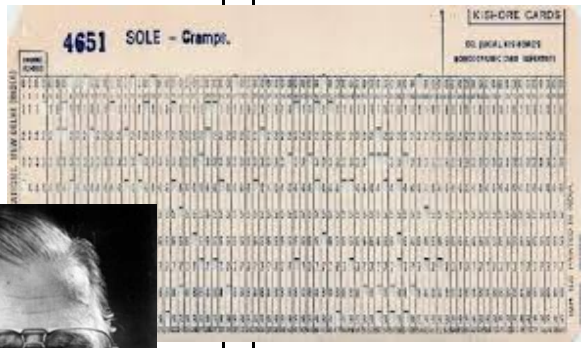
Regional

by organ/region	*by disease*
Eye: Berridge Norton	***Diarrhoea****:* Bell
Urinary organs Morgan	***Intermittent fever****:* Allen
Uterus Minton	***Rheumatological*** Roberts
Mind Hering	***Respiratory*** Nash
Synthetic	

Mechanical

Cards

Guernsey
Field
Boger
Jugal Kishore
Sharma
Sankaran, P.



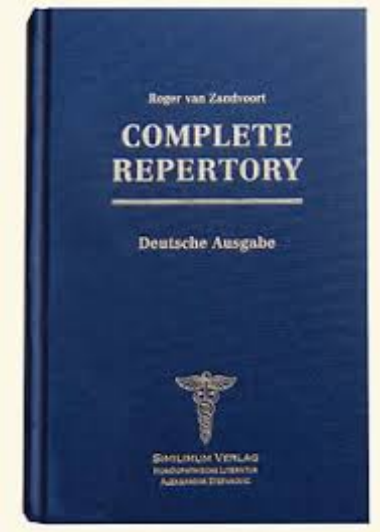
A Kishore Card

Jugal Kishore

Software

Cara
Hompath
MacRepertory
Organum 96
Polychresta
Radar (Schroyens)
Vithoulkas Compass
Boenninghausen TPB
Polarity Analysis (Frei)

Different decision-support tools are based on different methodological processes and these have arisen from different styles of practice. Most of the early repertories take the form of symptom indexes. In contrast, most of the recent analysis methods involve other forms of cross-matching and may incorporate various algorithms, filters and so-called 'expert' systems.



van Zantfoort's Complete Repertory

Broadly speaking, repertories fit into one of the following categories:

1. Hahnemannian and neo-Hahnemannian (Boger-Boenninghausen)

2. Kentian (neo-Kentian) including Synthesis and Complete Reps.

3. Pragmatic (including therapeutic indexes)

4. Hybrid or Specialist

Roger van Zantfoort

Additionally, some modern expert systems support a particular prescribing method:

- Essence prescribing (Boenninghausen, Vithoulkas and others)

- Group analysis - elements and minerals
  (Leeser, Scholten and others)

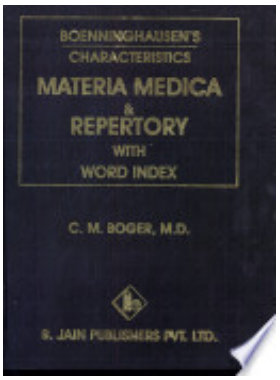
- Group analysis - plant and animal kingdoms
  (Computerised systems with filters)

- Group analysis - 'miasmatic' categories
  (Computerised systems with filters)

To a large extent, the repertorial system that you choose will depend on what you wish to achieve with homeopathy and the kinds of patients that you anticipate prescribing for.

We include a rough guide a the end of this summary, but there is no better way of familiarising yourself than checking out the demos and on-line presentations provided by the developers and/or distributors of these products.

1. Hahnemannian systems:



Boger-Boenninghausen

Boenninghausen's Therapeutic Pocket Book
and Boger-Boenninghausen (See Organon '96)

See also Muller: TPB (Red) if you can still obtain a copy.

Advantantages:

- meticulously compiled and strongly based on proving information
- a limited range of remedies, but very well balanced in their representation
- very well suited to the analysis of 'the complete symptom' (location, character, modalities)
- centred on the remedies that have had the longest culture of use and clinical confirmation.
- gives priority to symptoms that are most reliable (ie do not demand practitioner interpretation)
- the rules for remedy weighting within rubrics is applied consistently

Disadvantages:

- very few rubrics are divided into subrubrics, so rubric cross-matching cannot be done manually.
- does not include remedies introduced after Boeeninghausen's death in 1864
- requires history taking that is orientated to complete symptoms and their modialities and therefore:
- does not cater for the analysis of idiosyncratic and individualised mind pictures.

When to use:

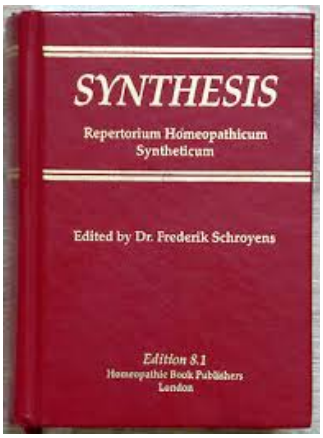
Use Boenninghausen TPB when your presentations are acute and/or where physical symptomatology is clear and qualified by clear modalities.

Boenninghausen predates Kent's constitutional thinking.
If the mind picture is central to your case consider a Kentian, or thematic method of analysis instead and use an appropriate neo-Kentian repertory or expert system.

Boenninghausen's repertory is included as an optional module in many of the leading computer repertories.

See also ***Polarity Analysis*** which is an important recent addition to analysis methodology which utilises Boenninghausen's Therapeutic Pocket Book. Polarity Analysis is available as a module within other repertory systems like RADAR.

2. Kent's General Repertory (see also neo-Kentian derivatives)



Work on Kent's General Repertory started as a collaboration between Edmond Lee and James Tyler Kent - a fact which is largely forgotten today. Fundamental disagreements led Lee to publish his Repertory of Mind and Disposition separately. But the influence of his work can still be seen in Kent's Repertory.

This mind-based individualising process in homeopathy, started by Lee and continued by Kent, took firm root and has irreversibly influenced the future course of this whole system of medicine.

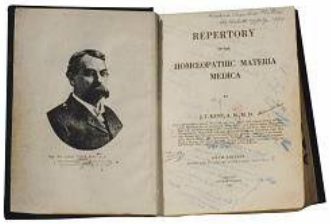
Frederik Schroyens

Advantages of Kent

- includes the 'new' remedies introduced after Hahnemann & Boenninghausen (up to around 1920)
- structured consistently by systems, ordered anatomically from head to foot and centre to periphery
- head rubrics are extensively subdivided to make hand repertorisation possible
- suitable for totality analysis where the Mind picture is analysed alongside locals and generals.
- creatively constructed to stimulate exploratory repertorisation rather than being a mere reference
- most modern computerised version have made many corrections and most have a good thesaurus to assist symptom searches.

Disadvantages of Kent

- enormous data set, including many entries not fully validated in practice
- disparity in the level of representation of remedies, resulting in probability bias (ie the best represented remedies nearly always seem to be best indicated in the case)
- mistakes in the original (remedies in subrubrics missing from head rubrics) - these have been corrected in most of the modern 'neo-Kentian' derivative works.
- incomplete subrubrics (remedies missing because the remedy data is not confirmed to the required level of detail). This is less of a problem in computerised repertorisation where large data fields can be amalgamated in the analysis, but when small specific rubrics are used in hand repertorisation, any missing entries can be critical.
- archaic language, including medical terminologies no longer in everyday use. A number of key words in MIND have changed their meaning (eg melancholia was not synonymous with sadness in Kent's time but indicated a more profound depression.)
- Unwieldy tome in book form. OK for the office, but not a book you'd want to carry around. However, Kent's repertory is available in the form of an app, however, and can be accessed inexpensively on-line.



Kent's repertory was the pre-eminent work in its class for more than 50 years and many of the most important modern repertories have been developed from its conventions and content.

If you are not sure about investing in a more modern repertory, you will find that Kent will serve adequately as a learning repertory for the duration of your membership course.

Consider that a deep study of this text was the foundation stone of practice for several generations of successful practitioners.

You can pick up an inexpensive copy of Kent's General repertory second hand and it will still serve well if used with insight and care an in tandem with the materia medica.

Vision is a relatively inexpensive entry-point computer repertory. See Miccant link below.

Links

CARA : https://www.miccant.com

Vithoulkas Compass: https://www.vithoulkascompass.com

RADAR : http://www.archibel.com/index.html

MacRepertory: https://www.synergyhomeopathic.com/macrepertory-and-referenceworks/

Hompath: https://hompath.com/zomeo

The Right Repertory for Your Work?

If you start with a text book you will probably wish to progress to computerised repertorisation at some stage. You should look at the on-line demos for the different systems and compare their features and costs before deciding which system to adopt.

Tentative notes on possible repertory choices for different professional specialities.

Dental Surgeons and allied professions

Dentists concerned with mainly surgical support and physical pathology consider Murphy's Repertory (Book / computer)

Dentists wishing to treat holistically, including functional problems like bruxism and dental phobia, and various atypical pain syndromes - consider Vithoulkas Compass

Specialists in Manual Medical Specialities

Physios / Osteopaths / Podiatrists / Orthopaedics and allied professions

If concerned with mainly rehabilitation and primary musculoskeletal presentations consider Murphy's Repertory or Vithoulkas Compass

If in specialist practice dealing with auto-immune and inflammatory conditions, where cases often display clear modalities then consider Polarity Analysis / Boenninghausen's Therapeutic Pocket Book
If your work includes atypical pain syndromes and functional states - add Synthesis or similar.

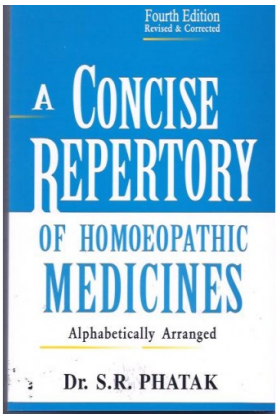
Clinical Psychologists / Psychiatrists

For a mixed general case load use Synthesis, MacRepertory or another neoKentian repertory.
For specialised Functional Medicine work, add Group analysis (Scholten and others) and Sensations method (studied after membership).
If predominantly in child psychology / psychiatry dealing with ADHD and allied conditions use Polarity Analysis with Heiner Frei's checklists and questionnaires.

Midwives

Use Murphy's Repertory

Nurses / Nurse Practitioners and allied professions



Phatak's repertory

Nurse prescribers in **General Medical settings** (non-specialist homeopathy):

Use Murphy's, Vithoulkas Compass, Synthesis or MacRepertory depending on what best suits your clinical setting.

Nurses:
Specialist nurse prescribers in secondary care or private homeopathic practice:

Become adept with Synthesis if catering for a mixed general caseload (advance to Group Analysis and Sensations method post-membership)

Asthma clinic nurses, Breast care nurses, Diabetic support nurses - consider Murphy's Repertory or Vithoulkas Compass.

Paediatric nurses - consider Murphy's, but if dealing with acute on chronic cases, or in child psychiatry consider adding Polarity Analysis (Boenninghausen's Therapeutic Pocket Book)

McMillan Nurses / palliative care nursing - use Murphy's Repertory or Vithoulkas Compass

Occupational therapists

For general mixed caseloads consider Murphy's repertory
If mainly supporting chronic degenerative conditions, including inflammatory arthritides - consider adding Polarity analysis or Vithoulkas Compass. Quick, simple direct prescribing - consider Phatak's repertory

Doctors

In General Practice and only with standard appointment arrangements - use Murphy's Repertory

In General Practice but running a dedicated homeopathic clinic - use a computerised repertory - perhaps Synthesis (RADAR) with the Boenninghausen Polarity Analysis module add-on, consider CARA, MacRepertory or one of the other leading systems, depending on your budget and the features you want to incorporate

Doctors practising non-specialist level homeopathy in secondary care use Polarity Analysis, consider your requirements for a more extensive computerised repertory as above.

Doctors in Homeopathic Practice working towards Faculty's Specialist Register (post-MFHom)

Purchase a computerised Repertory with a choice of expandable options (Polarity, expert systems etc.)

Psychiatrists - Use Synthesis (RADAR) with Polarity Analysis module if dealing with ADHD), consider MacRepertory suite as an alternative. Add Sensations Method and Group Analysis if working in specialised Functional Medicine setting.

Paediatricians - consider Murphy's Repertory, perhaps within the RADAR suite.

Paediatricians with a stated special interest in homeopathy - Use Polarity Analysis (see Heiner Frei's work), perhaps within RADAR suite.

Speech Therapists

Speech therapists - Use any neo-Kentian repertory that will embrace both physical, neurological and psychological dimensions.