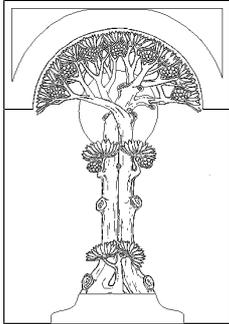


Centre for Integrative Medical Training
In Association with London Integrated Medical Health Education



Intermediate Course in Medical Homeopathy

A Blended Course in Homeopathic Medicine for Healthcare Professionals

Unit 29

Materia Medica Studies and Therapeutic Pointers for Week 9

Introduction

Welcome to the first Unit of Month 3.

We will begin with a series of activities which will help you become familiar with some Ear, Nose & Throat (ENT) therapeutics.

For the activities on the following pages you will require access to a Repertory. The individual questions are designed to help you become more familiar with the structure of the repertory, in addition to introducing some of the most important remedies for ENT conditions.

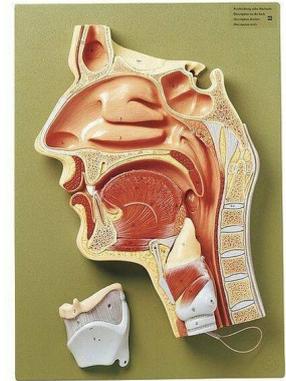
Exemplar answers or explanatory texts are provided at the end of each section. Please do not be tempted to look forward at these until you have attempted the repertory searches for yourself.

Your tutor will cover some of this content in the zoom tutorial scheduled in the following week. Please make a note of any questions arising from this activity, so that these can be clarified during the discussion.

The tables overleaf can be filled in on screen. Be sure, however, to download the pdf and save it under a new file name before you start to enter any data. Continue to save your data as you go along.

If, before considering homeopathic ENT Therapeutics, you wish to revise the anatomy and CT imaging of the nose and sinus structures the website link below provides very clear orientation:

<https://startradiology.com/internships/otolaryngology/paranasal-sinuses/ct-sinus/>





Therapeutics of the nose, nasopharynx and related structures

Before we consider the homoeopathic therapeutics of the nasopharynx, let us quickly review the main functions of the nose and its related structures and organs.

What main functions do you associate with the nose and nasopharynx?

1.
2.
3.
4.
5.
6.

2. Maintaining functional integrity (in a vulnerable front line organ)

What are the main regulating features in the nasal cavity?

A
B
C
E
F
G

Extrinsic triggers to altered or disrupted function

What are the main extrinsic or environmental challenges to homeostasis in the nasopharynx?

--

Some thoughts on these questions are given overleaf.
Do not turn over until you are ready to go on.

Therapeutics of the nose, nasopharynx and related structures

Now that we have completed the first activity of the week let us consider inflammatory conditions of the nasopharynx, and sinuses.

The mammalian nasopharynx is a complex, multi-functional organ. Like almost every other multifunctional organ it can develop complex disturbances which are maintained either by systemic compensations or disturbances of the organ's internal functional relationships.

In terms of therapeutics:

Internal decompensation often requires a local remedy
Systemic decompensation often requires a polychrest
Aetiological and isopathic prescriptions can be relevant to both categories

1. Summary of the functional aspects

Functionally the nasopharynx (1) warms inspired air, and (2) represents a primary locus of immune sampling. The senses of taste and smell (3) are integral to normal function. The nasopharynx and sinuses are vocal resonators (4) and so are integral to the mechanics of communication. Barometric equilibration with the middle ear depends on the patency and efficiency of the eustachian tube (5). Eating and drinking require coordinated pharyngeal and palatal movement (6).

2. Maintaining functional integrity (in a vulnerable front line organ)

The nasal mucosa is a highly active membrane, which requires a (A) healthy surface flora and an (B) efficient, reactive immunology to function. Physiologically, the nasal mucosa needs to be able to maintain a degree of invariance in spite of a wide range of operating environments. Adaptive perfusion (C), healthy mucus production (D) and physical integrity (E) are vital to healthy operation.

Sensorineural networks and reflex feedback (F) are involved in local homeostasis. Surface immunity integrates with (G) systemic humeral immunity via (H) lymphatic systems and nodal networks, including the (I) tonsils, (J) adenoids and (K) cervical chains.

These modalities of form and function are variously reflected in illnesses which involve the nasopharynx and upper respiratory tract.(1-6).

Similarly, it is possible to consider the homeopathic therapeutics of this region, in terms of the physical and physiological relationships operating between and within the structures of the nasopharynx (A-K).

Extrinsic triggers to altered or disrupted function

Inevitably the nasal mucosa is frequently challenged by chemical irritants; viruses; bacteria; sudden changes of temperature and humidity; and various air-borne particles of potential allergenicity.

It is the hosts adaptive ability to maintain a degree of operational invariance, that determines whether these assaults cause only transient local compensations, or progress down a chronic pathway of increasing decompensation and pathology.

On the following pages we will examine each of the functions outlined (1&2 above) and discuss the materia medica implications of short and long-term disruptions in the physiology of the nasopharynx.



Associating the materia medica with modalities of disturbed function

Functionally the nasopharynx warms inspired air ...

1. Temperature

What rubrics in the repertory reflect disturbances of thermostatic regulation or sensitivity in the nasal cavity?

1b. Weather, humidity etc.

Find some rubrics which reflect the effects of other environmental variables

Some thoughts on these questions are given overleaf.
Do not turn over until you are ready to go on.



Associating the materia medica with modalities of disturbed function

Function 1 (see summary on previous page)
Functionally the nasopharynx warms inspired air ...

1. Temperature

Disturbed thermal responses:

warm air < apis, merc.
warm room < iodine salts, hydr, phos, puls, sulph
cold < ars., kali salts., nux-v., phos

1b. Humidity:

Wet/damp: < dulc, hep., lemna-m., merc., puls.
Dry < acon., spong.



Hydrastis can.

Hydrastis canadensis

- Botany and headline herbal properties

<https://youtu.be/OP4vmYhfoPw>

- Homeopathic keynotes

https://youtu.be/KyT89jsRs_U



2. Immunological aspects

Functionally the nasopharynx represents a primary locus of continuous immune sampling...

2a Inflammatory states: acute

From the materia medica you know already, can you predict what remedies might appear in rubrics for acute inflammation in the nasal cavity?

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Which rubrics in the repertory reflect acute inflammatory states in the nose and nasopharynx?

What are the main (black, bold type) remedies that appear ?

--



2. Immunological aspects

2b& c Inflammatory states: subacute and chronic

From the materia medica you know already, can you predict what remedies might appear in rubrics for subacute or chronic inflammation in the nasal cavity?

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Which rubrics in the repertory reflect chronic inflammatory states in the nose and nasopharynx?

What are the main (black, bold type) remedies that appear ?

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Are you aware of a class of remedies which are toxicologically associated with humeral immunosuppression? Can you spot them in the rubrics you have examined?

--

Some thoughts on these questions are given overleaf.
Do not turn over until you are ready to go on.



2. Immunological aspects

Functionally the nasopharynx represents a primary locus of immune sampling...

2a Inflammatory states:

acute:

acon., apis., arum-t., bell., borx., bry., canth., crot-h., euphr., hep., lach., merc salts., puls., rhus-t., sabad.

nosodes: oscillococcinum, streptococcinum,

subacute:

caust., con., merc, puls., samb., sep., sulph.,

nosodes: bacils-10, morb., syc.

chronic:

ars., ammonium salts, calc salts., kali-salts, natrum salts, merc., sil.

nosodes: med., syc., syph., tub.



Arum triphyllum

2b. Humeral immunosuppression:

aurum, cadmium, manganum, mercurius



3. Taste & Smell

The senses of taste and smell are integral to normal function in the nose.

What local phenomena can affect the sense of smell?

3a Loss or diminution of sense of smell

Can you find the rubric(s) for impairment of the sense of smell?

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Identify remedies associated with impairment for the following reasons:

1. <i>catarrhal:</i>
2. <i>head injury:</i>
3. <i>inflammatory causes:</i>
4. <i>loss of moisture:</i>
5. <i>neurological:</i>
6. <i>psychoneuroendocrine:</i>



3b Accentuated: acute sense of smell:

Find a rubric that reflects increased sensitivity to odours or hyperacuity of the sense of smell:

--

What main remedies are associated with increased acuity / hypersensitivity?

--

3c Perverted / illusory / altered sense of smell:

Can you identify some rubrics which represent a perverted perception of odours?

List a few remedies associated with illusory or altered perception:

--

Some thoughts on these questions are given overleaf.
Do not turn over until you are ready to go on.

3. Taste & Smell

The senses of taste and smell are integral to normal function in the nose.

3a Loss or diminution of sense of smell (74 remedies):

- corollary reasons for loss of smell:

- i) *catarrhal*: kali salts, puls
- ii) *head injury*: hell
- iii) *inflammatory*: apis, china,
- iv) *loss of moisture*: alumina, bry.,
- v) *neurological*: bell., caust., hyos., nat-m., nux-v., op., plb., sep.
- vi) *psychoneuroendocrine*: ign., nat-m., staph.

3b Accentuated: acute sense of smell:

acon, cham., cocc., coff., hyper., ign., lyc., nux-v., phos., plat., sep.

3c Perverted / illusory / altered sense of smell:

chel., kali-bi., sulph., nux-v., par., thuj., puls., sep



Kali bichromicum



4. Altered vocal resonance:

The nasopharynx and sinuses are a vocal resonators and so are integral to the mechanics of communication.

barium salts. (various proliferative changes - incl. T&As), caust., kali salts (especially kali-bi.) lach., most of the catarrhal remedies.

Nosodes: morbilinum, syc-co., tub.

5. Eustacian os. / tube

Barometric equilibration with the middle ear depends on the patency and functional integrity of the eustacian tube.

ars., asar., calc salts., ferr-p., hydr., kali salts, merc., petr, puls., sil.

(any isopathic allergen may also be relevant)



Silicea

6. Deglutition / reflux of food into nose:

apis., ars., caust., gels., lach., naja., plb., sec.