A DOUBLE BLIND PLACEBO CONTROLLED
PROVING AND COMPARATIVE
MATERIA MEDICA OF
UBIQUINONE

By
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DECLARATION

I hereby declare that this mini-dissertation represents my own work, both in concept and execution.

Mini-dissertation submitted in partial compliance with the requirements for the Master's Degree in Technology
In the Department of Homoeopathy
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DATE: 20/05/2015

Approved for Final Submission

Signature of Supervisor
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DATE: 20/05/2015
ABSTRACT

INTRODUCTION
Homoeopathy is based on the law of similars meaning the medicine that produces symptoms in a healthy individual will cure the same symptoms in a sick individual (Sankaran, 1991:5).

AIM
Conducting a proving on Ubiquinone 30CH will lead to an establishment of its therapeutic potential through the application of the law of similars thus adding to the Materia Medica and advancing Homoeopathy (Vithoulkas, 2002).

It was hypothesised that the 30CH potency of Ubiquinone would clearly produce observable signs and symptoms in healthy prover's. It was further hypothesised that a comparison of Ubiquinone to those remedies yielding the highest numerical value and total number of rubrics on repertorisation of the proving symptoms would elucidate differences and similarities between Ubiquinone and other Homoeopathic remedies to clarify its therapeutic indications. It was hypothesised that in this manner a better understanding of Ubiquinone and its relationship to other Homoeopathic remedies would be gained.

METHODOLOGY
The proving of Ubiquinone 30CH was a randomised, double blind placebo controlled study, using the 30th centesimal potency and a total of 26 participants who met the inclusion criteria. Each prover was provided with a journal to record their symptoms daily. The data extracted from the journals were added to the case histories and physical examinations to compile a proving profile.

The identity of the substance was revealed and the information was correlated after completion of the proving. The symptoms found were translated into Materia Medica and repertory language. Once the proving was concluded, a comparison to the remedies yielding the highest numerical
value and total number of rubrics on repertorisation - which is the technique of using a repertory to identify the Homoeopathic medicines whose Materia Medica corresponds most closely to the clinical picture of the patient and from amongst which a simillimum may be chosen (Swayne, 2000:183) - was compared to the proving symptoms.

RESULTS
The remedy’s main influence was on the mental and physical state. The most prominent symptoms seen in the mental sphere were extreme irritability and exhaustion. There was a sense of emotional fragility with a desire to be alone. On the physical side, headaches were common and weakening pains of the extremities were experienced. It can be concluded that the 30CH potency of Ubiquinone, if used precisely according to Homoeopathic principles, can be applied to a clinical setting, as the extensive range of symptoms produced during the proving suggests an equally wide array of application of the remedy Ubiquinone.

CONCLUSION
One of the downfalls of Homoeopathy is the limited number of provings being done, (Vithoulkas, 2002). Vithoulkas (2002:143) maintains that in order for Homoeopathy to advance, it is necessary to perform provings on new substances to expand the Homoeopathic armamentarium. Increasing the number of remedies in the Materia Medica facilitates greater accuracy and individualisation when treating patients (Wright, 1999). According to Herrick (1998) numerous cases cannot be solved because many of the most important remedies have not yet been developed.

The purpose of this study was to increase the knowledge of drug substances due to the limited amount of information in our current Materia Medicas, by investigating the therapeutic potential of Ubiquinone 30CH. The investigation supported the hypothesis that Ubiquinone would produce clearly observable signs and symptoms in healthy volunteers. It is essential that the proving symptoms be verified and expanded through clinical use and with further
proving of Ubiquinone in various potencies so that it becomes a well utilised remedy in the future.
DEDICATION

DEDICATED TO THE GRACE OF GOD THAT HAS BEEN
UPON MY LIFE
AND TO
MY LATE GRANDFATHER
MR. G. PILLAY
GONE BUT NOT FORGOTTEN
ACKNOWLEDGEMENTS

To my parents, thank you for the endless encouragements and patience. I am where I am today because of the sacrifice and the unconditional love that you have showered me with.

To Uncle Christy thank you for all your assistance and motivation in helping me to better myself.

To my gran for all your guidance and wisdom that you have bestowed upon me. Your kindness and gentle ways have made me a better person.

To my theatrical sister, thank you for all the craziness you have brought into my life and for bringing a smile to my face in the most serious of moments.

To Dr Botha and Professor Ross, for all your time dedicated to this research, your immense patience, unconditional support, encouragement and guidance which made this study a success. I greatly appreciate it.

To Biologische Heilmittel Heel GmbH, for the preparation and dispensing of the substance *Ubiquinone*. Your efficiency and involvement throughout the research process has been invaluable.

My lecturers I thank you all for your enthusiasm, passion and kindness throughout the years of my studies.

My dearest friend and colleague, Tharushka Pillay, for always uplifting my spirits. Thank you for being there for me when the sun was shining and when the storms were brewing.

Finally to all the prover’s, without whom this research would have not been possible. Thank you for your time and willingness to participate. It is much appreciated.
DEFINITION OF TERMS

Centesimal Potency
The sequential addition of 1 part of the previous potency to 99 parts of the diluents. The number of these serial dilutions each preceded by succussion indicates the centesimal potency (Swayne, 2000:36).

Law of Similars
‘Similia Similibus Curentur’ the fundamental principal of Homoeopathy (Swayne, 2000:193). Homoeopathy is based on the Law of Similars, or ‘like cures like’. This implies that a substance that produces certain symptoms in healthy people can cure the same symptoms in the sick. The homoeopathic remedy produces an artificial medicinal disease state that is similar and stronger than the natural disease but not the same. This is produced on the dynamic or energetic plane (De Schepper, 2001:26).

Placebo
A placebo is a presumably inactive substance used in controlled clinical trials for comparison with presumably active drugs or prescribed to relieve symptoms or meet a patient's demands for treatment (Beers and Berkow, 1999:2585).

Proving
Homoeopathic drug trials during which doses of a substance are administered to a healthy individual until a reaction the substance occurs. These symptoms are then recorded and compiled into the remedy picture or Materia Medica (Ullman, 1991:9-10).

Proving Profile
The complete view of a subject that is built up in the study both of an individual patient and of the Materia Medica of Homoeopathic medicine (Swayne, 2000:161).
**Prover**
A prover is a subject of a proving or Homoeopathic Pathogenetic trial. A person who should be in good health, who records changes in his or her condition during and after the administration of the substance to be tested (Swayne, 2000:173).

**Materia Medica**
A pharmacological text, a reference book containing a list of medicines and their uses (Hahnemann, 1997:325).

**Repertory**
A repertory is a source used in case analysis to identify the medicine indicated for the patient. This process is called repertorisation. A repertory is a systemic cross reference of symptoms and disorders to the Homoeopathic medicines in whose therapeutic repertoire (Materia Medica) they occur. The strength or degree of the association between the two is indicated by the type in which the medicine name is printed (Swayne, 2000:183).

**Rubric**
‘An individual entry in a repertory that describes a symptom’ (Rowe, 1998:158).

**Succussion**
Vigorous shaking with impact or elastic collision carried out at each stage of dilution in the preparation of a Homoeopathic potency (Swayne, 2000:201).

**Verum**
In the context of a Homoeopathic drug proving, it refers specifically to the substance that is administered to provers that is medically active in contrast to the medically inert placebo (Yasgar, 1997).
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CHAPTER 1
OVERVIEW

1.1 INTRODUCTION
Homoeopathy has the ability to stimulate a person’s healing process which is complementary to the wisdom of the body (Ullman, 1991: xxiv). When the vital force is out of balance illnesses develop, and using the law of similars allows for the restoration of harmony within the body. Individualisation is another principle in Homoeopathy where the sick individual is treated and not just the presenting disease. The challenge thus lies in selecting a remedy specific to an individual. This involves comparative Materia Medica whereby the Homoeopath is able to understand the similarities and differences between remedies and prescribe accordingly.

Drug provings of substances on healthy participants who are given a dose of the substance until symptoms are produced is the starting point. Provings are systematic experiments whereby substances are tested on healthy human beings in order to extract symptoms reflecting the action of a substance. Symptoms produced should be mild in nature and of short duration. If symptoms are extreme the prover will be anti-doted according to Homoeopathic principles of similimum, thus a remedy most closely resembling the symptoms experienced by the prover would be prescribed by the researcher under clinical supervision. The purpose of a Homoeopathic drug proving is to produce symptoms and not to illustrate the effectiveness of the drug in question. These symptoms then reveal the therapeutic application of the substance according to the law of similars (Ullman, 1991:10). The import of continually adding to the list of available remedies is clear when one realises that a well-proven remedy will be able to help in a range of cases that until then could only have been partially covered by the remedies at hand. Nothing can take the place of that remedy in the therapeutic context (Sherr, 1994:8-9).

1.2 OBJECTIVES OF THE STUDY
The first objective of this study was to determine the symptoms which are specific to the substance produced in healthy individuals when Uboquinaone in
the 30CH potency is administered. In doing so, this will establish its usefulness as a medicinal substance in treating people.

The second objective of this study was to compare the symptoms of the remedies, which on repertorisation produce the highest numerical value and total number of rubrics with the proving symptoms of Ubiquinone 30CH to obtain a comparative Materia Medica. The relationship between Ubiquinone 30CH and remedies with similar indications will allow for differentiating of this remedy from others. This will provide practitioners with a greater understanding of Homoeopathic remedies and offer a complete clinical picture to allow for better prescriptions.

1.3 THE HYPOTHESES
It was hypothesised that the 30CH potency of Ubiquinone would produce clearly observable signs and symptoms in the healthy participants.

It was further hypothesised that the comparison of Ubiquinone to those remedies in the Materia Medica that exhibit the highest numerical value and total number of rubrics on repertorisation of the proving symptoms would elucidate the similarities and differences between the remedies. It was proposed that this would aid in clarification of the therapeutic indications of Ubiquinone and gain a comprehensive understanding of this remedy and its relationship to other remedies.

1.4 LIMITATIONS OF THE STUDY
This study did not:

- Attempt to explain the mechanism of action of the Homoeopathic preparation in the production of symptoms in healthy individuals.
- Determine the effects of the substance in any potency other than the 30th centesimal potency.

1.5 THE ASSUMPTIONS
- The participants took the remedy in the dosage, frequency and manner required as stated in the proving protocol.
The participants conscientiously, precisely and truthfully recorded all symptoms observed.

The participants did not deviate from their normal lifestyle in a significant manner immediately preceding or for the period of the proving.

The randomisation code sheet was designed by an independent statistician using a computer software programme (SAS, Version 9.3) which was adhered to when the verum and placebo was allocated to the 26 participants.

The participants had complied with proving methodology as outlined in Appendix D, Instructions to Provers.
CHAPTER 2
REVIEW OF RELATED LITERATURE

2.1 PROVINGS

In aphorism 106 of the Organon of the medical art, Dr Samuel Hahnemann writes:

The entire disease-arousing efficacy of the individual medicines must be known; that is, all the disease symptoms and condition-alterations that each medicine is especially able to engender in healthy people must first be observed before one can hope to be able to find and select from among the proven medicines, the apt Homoeopathic remedy for most of the natural diseases (O’Reilly, 1996:144).

Thus the need for controlled trials or provings that assist in the process that Hahnemann spoke of is essential to the practice of Homoeopathy.

Provings are systematic experiments where substances are tested on healthy human beings to extract symptoms reflecting the action of a substance. This enables the defence mechanism to bring about cure (Vithoulkas, 2002:96). Provings are performed on humans and not animals because disease has two distinct forms of expression. One is change that occurs at a tissue level (objective) and the other that is felt such as emotions and sensations (subjective) (Sankaran, 1991:10).

2.1.1 HISTORICAL OVERVIEW

The concept of a proving has been in existence for many years. Provings are the logical extension of the law of similars - an idea known in the West at least as far back as Hippocrates in ancient times (Walach, 1994:129). For instance, in the second century AD Galen tested his medicines on the sick and on the healthy. In the sixteenth century AD Paracelsus observed the effect of substances on healthy people to determine their therapeutic properties, but neither he nor Galen undertook these activities systematically (Coulter, 1975:442). In the East, the court of Emperor Shen Nung is thought to have seen the first known provings of remedial agents on healthy people around 3000 BC (Little, 1998).
In 1790 Dr Samuel Hahnemann, the father of Homoeopathy (1755-1843), was dissatisfied with methods employed by orthodox medicine. He then went on to ingesting China bark (which contained Quinine) which was used to treat malaria. He discovered that after a few hours he produced malaria like symptoms. He deduced that China bark is therefore curative in malaria as it produces similar symptoms in a healthy individual. The basis of Homoeopathy was introduced with Like cures Like ‘Similia Simillibus Curentur’ (Bloch, Lewis, 2003:17). This reflected earlier knowledge from ancient Indian physicians who knew poisons to be the cure for poisons (Singara Tilaka: 57 BC). Hahnemann, with his various disciples and acolytes, investigated about 140 remedies in the course of his career (Wieland, 1997:229).

2.1.2 CURRENT PROVING METHODOLOGIES

History suggests that the concept of blinding was introduced into Homoeopathic proving methodology as early as 1843, when Gestrel carried out a proving of *Aconitum napellus* in which provers were unaware of the proving substance.

The double-blind technique was introduced by Demarque (1987) whilst proving *Atropa belladonna*. In this technique there is a placebo control whereby the substance is known to the researcher, but he is unaware as to which provers are taking the substance.

Sherr published *The Dynamics and Methodologies of Homoeopathic Provings* in 1994, in which he provides a basic and practical framework for conducting comprehensive provings. This is the first book devoted solely to provings and was pivotal in the resurgence of Homoeopathic provings throughout America and Europe (Herscu, 2002). Blinded provings are needed as they compensate for bias in the observer and participants. (Sherr, 1994:36). The need for blinding is to distinguish between placebo and substance responses which are widely accepted (Ullman, 1991:56). Placebo is a controversial issue but the main positive factor is its use to confirm symptoms of the active substance. An acceptable percentage of placebo
participants are 10 – 20 percent in a proving (Sherr, 2003:45). Wieland (1997) points out that the use of a placebo control in conventional clinical trials serves to demonstrate the effectiveness of the drug in the treatment of a specific ailment. Placebo provers show much milder symptoms than those of verum provers. This shows that proving Homoeopathic drugs are not a placebo response but are due to the administration of the substance that brings about noticeable symptoms in the participants. In the variability between provers, the inclusion criteria should be developed to ensure that participating provers possess the relevant experience. More experienced provers were shown to yield better quality symptoms. It is suggested that the screening process for prover inclusion be more thorough, favouring proving experience above all other factors. A better understanding of Homoeopathy also seems to be a positive quality in a prover, illustrated by senior Homoeopathic students and Homoeopathic practitioners being more effective and valuable provers. This can also show that a higher level of self-awareness is beneficial, as is more life experience, therefore proving symptoms are truly reliable (Sherr, 1994:37).

2.1.3 POTENCY
The 30CH potency produces the most emotional and physical symptoms which are needed in a proving as opposed to other potencies (Sherr, 1994:27). The dried part of the substance is dissolved in an alcohol/water solution in a standard chemical or botanical manner (Vithoulkas, 2002:102). One drop of this tincture is then diluted into 99 drops of 40 percent alcohol/water solution. This solution is then succussed with great force 100 times. One drop of the succussed dilution is then added to 99 drops of fresh solvent. This is then succussed 100 times again and diluted as before. This process can be carried out repeatedly, always increasing the therapeutic power while nullifying the toxic properties (Vithoulkas, 2002:102). According to chemistry laws there is a limit to the amount of serial dilutions which can be made without losing the original substance altogether. This limit is known as Avogadro’s number and roughly corresponds to the Homoeopathic potency of a 12C which has virtually no chance of containing even one molecule of the original substance (Vithoulkas, 2002:102).
2.2 COMPARATIVE MATERIA MEDICA

The comparative study of the Homoeopathic Materia Medica is not new. Farrington (1995) asserts that the comparison of drugs is as necessary as the analysis of the drug itself, and Roberts (1993:139) maintains that the analysis of proving symptoms is not complete until a comparison is made with those produced by other drug provings. Comparative Materia Medica allows for a clearer understanding of symptoms by comparing remedies. Provings have become the basis upon which remedies are chosen for patients where the symptom manifestation of the patient matches the symptom manifestations of the remedy. A complete picture of a remedy is only seen through the dynamic relationship between symptoms. According to Sankaran (1975), scientific Homoeopathic prescribers assert that there is a specific clinical relationship among Homoeopathic remedies and those prescriptions which conform to a certain sequence are therefore bound to be more successful. Compatible remedies are those which are able to coexist with or able to be used in combination with other remedies (Sankaran, 1975:1). There are also remedies that follow well after the administration of another remedy, and antidotal remedies which are used to counteract the effect of another remedy (Swayne, 2000:12). Comparative Materia Medica is used when minor symptoms in a study of a particular drug in a person becomes significant (Candegabe, 1997:xvii). Candegabe (1997) observed that with each repertorisation several remedies would have similar symptoms that were common with the similimum of the case. If a remedy is studied both in Materia Medica as well as the repertory a complete image will emerge (Candagabe, 1997:1).

This study evaluated the proving symptoms in terms of current trends in comparative Materia Medica to improve the knowledge of the similarities and differences between remedies (Candegabe, 1997: 5).

2.3 THE PROVING SUBSTANCE: **UBIQUINONE (CO-ENZYME Q10)**

2.3.1 DEFINITION OF **CO-ENZYME Q10**

Co-enzyme Q10 (CoQ10) is a vitamin-like nutrient that plays a vital role in cellular energy production. It is also known as *Ubiquinone* because its
chemical structure is that of Quinone. Ubiquinol is the reduced, active antioxidant form of Coenzyme Q10. Ubiquinol is produced naturally in the human body and is converted into a substance which is necessary for the use in cellular energy production. In addition it is one of the most powerful known lipid-soluble antioxidant that is available, protecting the body’s cells from damage caused by oxidative stress and free radicals. Any organism’s metabolism must provide a constant supply of energy to maintain vital functions. Consequently, disturbances in energy metabolism can impair energy supply. Catalysts speed up these biochemical processes on which life depends so that they are coordinated at the right time (Ernster et al., 1995:195).

2.3.2 DISCOVERY OF CO-ENZYME Q10

CoQ10 was discovered in the late 1950s by Dr Frederick L. Crane at the University of Wisconsin. This took place during his research on the biochemistry of the mitochondrial electron transport chain, also known as the respiratory chain. (Crane et al., 1957:220). The pure substance which was isolated from beef heart mitochondria was sent to Dr Karl Folkers at the pharmaceutical company Merck, for identification and clarification of its structure. It was elected coenzyme Q10 because of its Quinone structure and the ten isoprene unit side chain. During the same time frame, an additional group of scientists led by Dr R. A. Morton in England isolated the same substance from mitochondria and named it Ubiquinone because of its widespread occurrence in nature.

The vital role of CoQ10 in the electron transport chain was first described by Dr Peter Mitchell of England who was awarded the Nobel Prize for his work.

Figure 1 shows the structure of Co-enzyme Q10 Ubiquinone (2,3-Dimethoxy-5-methyl-6-decaprenyl-1,4-benzoquinone) followed by the structure of Ubiquinol (2,3-Dimethoxy-5methyl-6-decaprenyl-1,4-benzohydroquinone).
2.3.3 Chemical Description

Coenzyme Q10 which is also known as ubiquinone, is derived from the words ubiquitous, meaning everywhere, and quinone (Crane et al., 1957:220). This oil-soluble and vitamin-like substance is present in eukaryotic cells found primarily in the mitochondria and in lysosomes (Ernster et al., 1995:197). It is a component of the electron transport chain and participates in aerobic cellular respiration, generating energy in the form of adenosine triphosphate (ATP). In other words, ubiquinone is the oxidized form and ubiquinol is the reduced form of Coenzyme Q10. Ubiquinol is unstable in air and easily oxidized back to ubiquinone (Crane et al., 1957:220). The organs with the highest energy requirements - for example the heart, liver and kidneys - have the highest concentrations (Crane et al., 1957:220).
The oxidized structure of CoQ10 is shown in Figure 2. The various kinds of Coenzyme Q can be distinguished by the number of isoprenoid subunits in their side-chains. The most common Coenzyme Q in human mitochondria is CoQ10. Q refers to the Quinone head and 10 refers to the number of isoprene repeats in the tail. Figure 3 has three isoprenoid units and would be called Q3 (Ernster et al., 1995: 204).

Figure 2: Oxidized structure of CoQ10

![Figure 2: Oxidized structure of CoQ10](source)

Figure 3: Structure of 3 isoprenoid units called Q3

![Figure 3: Structure of 3 isoprenoid units called Q3](source)

2.3.4 PROPERTIES AND CHARACTERISTICS OF CoQ10

CoQ10 is an orange to yellow crystalline powder which is insoluble in water but partially soluble in alcohol and acetone (Ernster et al., 1995: 203). It also darkens when exposed to light. In Tables 1 and 2 the properties of *Ubiquinone* and *Ubiquinol* are summarised. The main differences evident are in their molecular weights and melting points.
Table 1: Properties of Ubiquinone (CoQ10)

<table>
<thead>
<tr>
<th>Property</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appearance</td>
<td>Orange crystals (at room temperature)</td>
</tr>
<tr>
<td>Empirical formula</td>
<td>C59H90O4</td>
</tr>
<tr>
<td>Molecular weight</td>
<td>863.358</td>
</tr>
<tr>
<td>Melting point</td>
<td>49°C</td>
</tr>
<tr>
<td>Solubility</td>
<td>Insoluble in water</td>
</tr>
<tr>
<td></td>
<td>Limited solubility in oils and fats</td>
</tr>
<tr>
<td></td>
<td>Soluble in nonpolar solvents</td>
</tr>
</tbody>
</table>

Source: Crane, 2001:20, 591-8

Table 2: Properties of Ubiquinol (CoQ10 H2O)

<table>
<thead>
<tr>
<th>Property</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appearance</td>
<td>White to very pale yellow crystalline</td>
</tr>
<tr>
<td>Empirical Formula</td>
<td>C59H92O4</td>
</tr>
<tr>
<td>Molecular Weight</td>
<td>865.37</td>
</tr>
<tr>
<td>Melting Point</td>
<td>49.5°C</td>
</tr>
<tr>
<td>Solubility</td>
<td>Practically insoluble in water</td>
</tr>
<tr>
<td></td>
<td>Limited solubility in oils and fats</td>
</tr>
<tr>
<td></td>
<td>Soluble in nonpolar solvents</td>
</tr>
</tbody>
</table>

Source: Crane, 2001:20, 591-8

2.3.5 Pharmacokinetics of CoQ10

CoQ10 is a fat-soluble substance and therefore it is absorbed like any other fat in our diet. Digestion helps in the release of dietary CoQ10 from the food matrix. For CoQ10 supplements that are based on pure CoQ10, gastric digestion may not be necessary (Bhagavan, Hemml, Chopra, Raj, 2006: 445). In the small intestine, secretions from the pancreas and bile facilitate emulsification and micelle formation that are required for the absorption of fats along the small intestine. There is no ‘active’ transport mechanism for the absorption of fats. Once CoQ10 is taken up by the intestinal mucosal cells, it is transported via the lymphatic system as part of the chylomicrons and eventually taken up by the liver for repackaging into lipoprotein particles and rereleased into the circulation (Bhagavan et al., 2006:446).

2.3.6 Uses in Orthodox Medicine

According to Bliznakov (1987) CoQ10 can be used orally for cardiac problems such as congestive heart failure, dilated cardiomyopathy and neurological problems like Huntington's and Parkinson's disease. It has also shown to help stimulate the immune systems of people with HIV/AIDS, treat
male infertility, migraine headaches and prevent ‘statin’ induced myopathy. Topically it can be used in treating periodontal disease.

2.3.7 NATUROPATHIC AND SUPPLEMENTAL USE
CoQ10 has an essential role in cellular bioenergetics and also as an imperative antioxidant, thus playing a vital role in our well-being. CoQ10 is readily available as a dietary supplement (Folkers, 1969:334). Supplementary doses for adults range from 30mg/day-120mg/day, which is significantly higher than the standard dietary intake (Folkers, 1969:334).

According to Bliznakov (1987) the main conditions in which CoQ10 are used are in supporting and maintaining cardiovascular health. The enzyme may assist people with a long standing history of heart failure to help reduce symptoms such as shortness of breath or swelling of the feet. Supplementation may also benefit those with high blood pressure. Coenzyme Q10 has also been studied for other conditions including Diabetes, Alzheimers, Parkinsons and Huntingtons disease.

2.3.8 TOXICOLOGY
Toxicity is not usually observed with high doses of CoQ10. A daily dosage of up to 3600 mg was found to be tolerated by healthy as well as unhealthy persons (Hyson, Kieburtz, Shoulson et al., 2010:1924). However some reactions in allopathic dosages can cause side effects such as nausea, vomiting, diarrhoea, epigastric discomfort, dyspepsia and dermatitis (Hyson, Kieburtz, Shoulson et al., 2010:1924).

2.4 CONCLUSION
From the literature reviewed it is evident that the proving of Ubiquinone 30CH may highlight several symptoms people experience when deficient in Coenzyme Q10. Hence a proving of Ubiquinone 30CH is imperative to clinicians to give them a better understanding of a patient’s symptoms and the nature in which the remedy can bring about healing.
CHAPTER 3
METHODOLOGY AND MATERIAL

3.1 EXPERIMENTAL DESIGN
The Homoeopathic drug proving of *Ubiquinone* 30CH was a double blind, placebo controlled study. Twenty six proving participants were selected as they met the inclusion criteria (Appendix B). Of the 26 participants, six received placebos according to the randomisation process, which an independent statistician using a computer software programme (SAS, Version 9.3) adhered to (one in every four).

Participants were unaware of the name and nature of the substance being proved or the potency. The remedy preparation was carried out by Biologische Heilmittel Heel GmbH and randomisation was conducted in such a manner that every set of five remedies would include one placebo and four verum doses. Only Heel, the statistician and Comed who assisted in the process as they were responsible for packaging the manufactured drug and placebo according to the randomization list were aware of who had been assigned to the proving substance group or placebo group.

In the run-in phase all participants needed to record their current state - which is considered normal - for a week before commencing with the substance/placebo doses (Vithoulkas, 2002:148-150). The recordings of symptoms were noted in a journal provided. Recording was done daily and added to their case histories and physical examination forms.

Symptomatology from the proving was reformatted and classified according to the standard Materia Medica and repertory conventions.

3.2 OUTLINE OF PROVING METHODOLOGY
3.2.1 PROVER RECRUITMENTS
- The proving was carried out by a Master’s student in Homoeopathy under the supervision of the appointed supervisor (Dr Izel Botha).
The researcher screened participants in order to ensure they met the inclusion criteria (Appendix B).

After screening of participants, they were invited to a prover training workshop.

### 3.2.2 Prover Training

The research student conducted a proving training workshop to provide a brief insight of Homoeopathy and explain the procedure of a proving. This was followed by issuing of consent forms (Appendix A & D) and participants were guided through the instructions to the provers document (Appendix D) and a proving information sheet (Appendix A & D), of which they received a copy.

The researcher carried out a thorough physical examination and case history (Appendix C) on each of the participants.

### 3.2.3 Confidentiality

Each participant was allocated a specific prover code by which they can be identified, a recording journal which was numbered with the same code, as well as a list of contact details of the researcher.

### 3.2.4 Preparation and dispensing of the proving substance

- The proving drug substance *Ubiquinone* 30CH was sponsored by Biologische Heilmittel Heel GmbH.
- Comed assisted in the process as they were responsible for packaging the manufactured drug and placebo according to the randomization list. The sealed containers were then shipped to us in order to conduct the proving.
- The drug substance was sourced according to the European Pharmacopoeia (Ph.Eur).
- The preparation of the proving substance was prepared by an independent laboratory technician in accordance with the standard procedures set out in the *German Homeopathic Pharmacopoeia* (GHP) (Benyunes, 2005).
The attenuation of dilutions up to 30CH was done according to Method 3.1.1, Ph. Eur. which is equivalent to Method 5a, GHP using different vehicles as prescribed.

The impregnation of the pillules followed method 10 in accordance to the GHP (Benyunes, 2005).

The final pillules 30CH were then filled in single dosage glass vials (10 pillules each) and labeled according to the requirements of the proving (in particular: proving code / randomization number).

The active substance/placebo was randomly assigned to the twenty six participants by an independent statistician using a computer software programme (SAS, Version 9.3).

3.2.5 DOSAGE AND POSOLOGY

Run in phase (1 week):

- Prior to commencing the substance the participants recorded their symptoms (pre-proving) for a duration of one week. This was considered their normal state and constituted the run in phase.

Active phase (6 weeks):

- Once the pre-proving symptoms were completed, the active phase commenced taking the proving substance for a maximum of three doses daily over five days or until symptoms appear. The substance was thus administered maximally on days one to five. The participants continued recording their symptoms throughout and were frequently contacted telephonically by the research student.

- The frequency of the telephonic contact was on days 1, 2, 3, 4, 5, 7, 10, 14, 21, 28, 35 and 42.

- If after five days of ingesting the remedy three times daily no symptoms were produced or noted, the participants continued to record their symptoms.

- The proving was regarded as complete when there had been no occurrence of symptoms for six weeks in that particular participant.

- Antidoting was carried out in keeping with Homoeopathic principles of similimum. The similimum would be found by taking a full case of the
participant with regards to the symptoms they produced. These symptoms would be repertorised and a remedy matching the participant’s symptoms would be prescribed as an antidote.

Run out phase (2 weeks):
- Recording of symptoms continued post-proving - which was the run out phase - for a duration of two weeks to ensure no re-occurrence of proving symptoms.
- A post proving case history (Appendix E) and physical examination was done and the respective journals collected along with the proving drug containers.

3.2.6 Data Transcription and Analysis
- Each prover’s journal was analysed separately at first. The purpose of this stage of the proving is to convert the provers’ written diaries into the format of the Materia Medica (Sherr, 1994:67).
- The substance was unblinded to the participants and researcher so a comparison of placebo to verum symptoms could be made.
- Verum and placebo symptoms were separately recorded after decoding and compared.
- This was the actual process of uniting all the fragments of the proving accounts into a comprehensive whole. The data first had to be ordered into relevant sections and subdivisions (mind, vertigo, head, etc.). Then each section from each prover was put together and sorted according to subject and time of appearance. Identical or similar symptoms from different prover’s were listed separately and consecutively once they had been sorted.
- The data were presented in Materia Medica and Repertory format

3.3 THE PROVER GROUP
3.3.1 Sample Size and Demographics
The proving was carried out on 26 healthy participants in keeping with the international recommendations (LMHI, 2014:13; Walach, 1994:130). The participants consisted of a well-balanced mixture of individuals. Some were
aware of Homoeopathic principles while others lacked knowledge of Homoeopathy, although Homoeopaths have proved to be better quality participants (Botha, 2010). The participants were recruited from fellow Homoeopathic colleagues, practicing Homoeopaths and the general public. Participation was voluntary and a balance of males and females between the ages between 18 - 60 were sought.

The active substance/placebo was assigned according to randomisation whereby six participants received placebos and the other 20 received the active substance. Only Heel, Comed and the statistician were aware which prover numbers were on the active substance/placebo until all data were collected and the phase one analysis completed. The participants were aware of the chance of receiving a placebo.

3.3.2 CRITERIA FOR INCLUSION OF A SUBJECT
The prover subjects were:
- Between the ages 18-60.
- Free of major physical or mental pathology determined on case history or physical examination (LMHI, 2014; Sherr, 1994; Walach, 1994; Riley, 1997).
- Willing and able to give written informed consent (Appendix B).
- Able to follow procedure with regards to the case history and physical examination (Appendix C) for the duration of the proving.

3.3.3 CRITERIA FOR EXCLUSION OF A SUBJECT
Potential participants were excluded when they:
- Were in need of specific medical treatment, allopathic, homoeopathic or other (Riley, 1997: 223).
- Had used the oral contraceptive pill or hormone replacement therapy within the past 6 months (Sherr, 1994:44; Riley,1997:233).
- Had undergone surgery in the past 6 months.
- Use recreational drugs (Sherr, 1997:44).
- Were pregnant or breast feeding (Sherr, 1997:44).
Consume more than two units of alcohol per day, more than three cups of coffee/tea per day and more than 10 cigarettes per day (Sherr, 2003:29).

3.3.4 Randomisation

The randomisation plan was drawn up by Heel’s designee, an independent statistician using a computer software program (SAS, Version 9.3) designed for this purpose. There were a total of 35 sets of remedies for this proving, including an additional nine sets to accommodate any drop-outs. There was a verum: placebo ratio of 4:1. Proving remedies were assigned in sequences to ensure that one placebo was included in units of five remedies. Ensuring the double-blind design, randomisation was completely concealed from the entire proving team including the researcher, supervisor, provers and all personnel at Heel involved in the conduct of the proving. Furthermore there was no communication between COMED Health or any Heel staff with knowledge or access to the randomisation code and those of Heel and at Durban University of Technology (DUT) staff involved with the conduction of the proving. The randomisation code schedule generated by Heel randomly comprised 32 verum and eight placebo allocations, i.e. there were a total of 40 proving drugs available. As it was planned to conduct the proving with only 26 provers, a total of 14 proving drugs were held in reserve (unallocated) which were administered to provers who were required to replace those who withdrew from the study prematurely. In such cases the ‘replacing’ prover was assigned to the same group (Verum or Placebo). This was achieved by involvement of the independent statistician who knows the randomisation plan. The Proving Coordinator informed the Clinical Project Manager at Heel on such a need for replacement. The Clinical Project Manager then asked the independent statistician which randomisation number should be used to replace the randomisation number of the prover who withdrew prematurely.

Three doses daily were taken over a five day period, which corresponded to the prover numbers and were numbered to the resultant schema. The
records of this schema were stored by the supervisor until all data were collected and unblinding had been done.

### 3.3.5 Lifestyle of the Participants During the Proving

The provers were advised to:

- Maintain their usual habits (Sherr, 1994:92; Maish et al., 1998:18).
- Store the proving substance in a cool dark place away from strong smelling substances, electrical equipment and cell phones (Sherr, 1994:92).
- Avoid antidoting factors such as camphor or menthol and to cease the use of it for two weeks prior to commencement of the proving (Sherr, 1994:92).
- Practice moderation with respect to work, alcohol, smoking, exercise, diet and sexual expression (Sherr, 1994:92).
- Avoid any medication including oral contraceptives, analgesics, anti-emetics and anti-diarrhoeal unless discussed with the researcher under clinical supervision.
- Consult a doctor, dentist or hospital in the event of a medical emergency and to contact their supervisor (the researcher) as soon as possible (Sherr, 1994:92).

### 3.3.6 Monitoring the Provers

The participants were in daily contact with the researcher at the commencement of the proving. This decreased to every second day in the second week, every third day in the third week and finally once a week in the fourth week for the duration of the proving.

The purpose of the contact between participants and the researcher was:

- To establish when the proving substance begins to act so that the prover may be instructed to stop taking any further doses.
- To ensure that the prover records are accurate and that participants do not forget to record all symptoms.
- To ensure the safety of the participant by closely monitoring for any reaction which may need to be antidoted.
Provers were given notice / a courtesy call to remind them to be present for their case and physical testing on their respective days.

3.3.7 WITHDRAWAL FROM THE STUDY
Participation in this study was purely voluntary and provers could withdraw at any time without having to provide any reason for doing so. Participants were excluded if they did not meet the inclusion criteria.

3.3.8 CASE HISTORY AND PHYSICAL EXAMINATION
Each prover that met the inclusion criteria (Appendix B), attended the training workshop, read, understood and signed the consent form and the instructions to the provers (Appendix A). They had a scheduled 90 minute appointment with the assigned researcher for a standard homoeopathic case history and physical examination which included an assessment of the vitals, a cursory examination and a systemic specific examination (Appendix C).

3.3.9 DURATION OF THE PROVING
Each participant began to record their symptoms for a week prior to the commencement of the substance. Recordings were done at least three times a day. Pairs of provers commenced the pre-proving observation period, scattered over a three day interval to allow the researcher to closely monitor each participant. This ensured that good journaling habits were carried out.

3.3.10 COMMENCEMENT OF PROVING
After the pre proving recording was completed each participant began taking the powders with a maximum of three doses daily for five days or until first symptoms started to appear. If no symptoms appeared after taking all the doses no further doses were administered. Recording in journals still continued regardless.

Provers were monitored telephonically to establish the start of symptoms and journaled at least once daily for the duration of the proving.
3.3.11 Post Proving Observation

The proving was considered complete when there was no more occurrence of proving symptoms for seven weeks. Participants continued to record for a duration of one week once symptoms ceased. The journals were then collected and a post proving case history and physical examination were done.

The main purpose for the above was to confirm the return of the pre proving state.

3.3.12 Ethical Considerations

- The methodology of the study was approved by the Durban University of Technology’s Faculty of Health Sciences Ethics Committee (Ethics no: 48/12) before the commencement of the study. This was carried out to protect the welfare and safety of the participants.
- A proving information sheet was given to each participant along with an instruction letter providing clear, simple instructions pertaining to the proving as well as explaining the methodology.
- Informed consent was given to each participant, which was signed and handed back to researcher.
- The research involved no more than minimal risk to the participants, of which they were made aware prior to participation.
- Participants freely volunteered to participate in the study and no coercion was used to persuade them to partake.
- Participants were free to withdraw from the study at any given point and were previously made aware of this.
- Confidentiality was maintained throughout the research process.

3.4 Symptom Collection, Extraction and Evaluation

The most complicated phase of the proving was the extraction and collation of symptomatology as recorded in the journals. Symptoms were studied and validated or rejected according to the criteria below, then edited into a format which was coherent, logical and concise (Sherr, 1994:67).
3.4.1 Criteria for Inclusion of a Symptom as a Proving Symptom

- A new symptom unfamiliar to the prover occurring after taking the remedy (Riley, 1997:227; LMHI, 2014: 14).
- The symptom did not appear in a prover in the placebo group.
- A current or usual symptom for the prover intensifi ed to a marked degree (Sherr, 1994:70).
- A current symptom that was modified or altered with a clear description of current and modified component (Sherr, 1994:70).
- The symptom did not occur in the prover within the last year (Sherr, 1994:70).
- The symptom did not appear naturally during the proving (Sherr, 1994:70).
- Any symptom that occurred a long time previously, but that had not occurred for at least one year and that had no reason to reappear at the time of proving (Sherr, 1994:70).
- A present symptom that disappeared during the proving is marked as a cured symptom (Sherr, 1994:71).
- The frequency of the symptom (Sherr, 1994:72).
- The intensity of the symptom (Riley, 1997:227).
- The number of subjects experiencing a symptom. A symptom experienced in more than one subject (Sherr, 1994:71).
- A strange, rare or peculiar symptom for that prover. The knowledge and conviction of the prover that symptoms were foreign to the participant are a reliable and definite consideration (Sherr, 1994:72).
- The modalities, concomitants, localisations and timing associated with a symptom (Riley, 1997:227).
- Accidents and coincidences that occurred to more than one prover (Hahnemann, 1997:207).
- If the prover was under the influence of the remedy then all other new symptoms were proving symptoms (Sherr, 1994:70).
- The time of the day at which the symptom occurred was only included if there was repetition of such a time in another prover (LMHI, 2014:16).
- A symptom was excluded if it may have been produced by a change in life or other emotional cause (LMHI, 2014:16).
3.4.2 Manipulation of the Data

Collating and editing

This is to synthesise applicable proving symptoms from the proving participant into a singular structured composition (LMHI, 2014:14). Similar symptoms were sorted into subgroups and then combined within broader groupings according to the schema below.

Throughout editing it was imperative that the proving was easily comprehensible and logical. The language of the provers was maintained but cumbersome sentences and needless details were omitted (Sherr, 1994:77). Identical and similar symptoms from different provers appeared separately and consecutively under the various headings relating to an area of the body, for example, mind, generals, chest and so forth (Sherr, 1994:77). Simple language and the basic vocabulary of the prover were retained in the provers own words. Contemporary terminologies that may not be understood in the future were avoided (Sherr, 1994:67). In terms of chronology, the times at which a symptom was experienced by a prover was recorded by the researcher using the format of ‘DD:HH:MM’ (Sherr, 1994:73).

Formatting

Applicable proving symptoms were recorded in Materia Medica format compiled in standard modern Homoeopathic text. The symptomatology was translated into rubric language according to the same hierarchical format.

Comparative Materia Medica

On completion of collation and editing of symptoms a group of symptoms were selected that were seen to form the essence of the remedy, the ‘minimum characteristic syndrome’. This is said to be comprised of five to ten symptoms that are essential to the dynamic of the remedy (Candagabe, 1997). The symptoms that encompass the minimum characteristic syndrome were repertorised and only the remedies that shared at least fifty percent of these essential symptoms were considered for comparison (Candagabe, 1997). The symptoms were repertorised using the computer programme
RADAR (version 9.0) and the remedies that were numerically the highest and included the most symptoms corresponding to the ‘minimum characteristic syndrome’ were compared to *Ubiquinone* 30CH, highlighting the similarities and differences that exist.

**Reporting the data**

The data collected from this study were recorded in two different standard homoeopathic formats, namely the Materia Medica and Repertory. It is hoped that this will ensure that *Ubiquinone* may effectively be used in clinical homoeopathic practice.

**Materia Medica**

The proving symptoms of *Ubiquinone* were presented in standard Materia Medica format. The symptoms are listed under sections that are common to most Materia Medica and correspond to those of the *Synthesis: Repertorium Homeopathicum Syntheticum - edition 9.1* (Schroyens, 2001).

This is the standard head to toe schema compiling the Materia Medica

<table>
<thead>
<tr>
<th>Mind</th>
<th>Vertigo</th>
<th>Head</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eye</td>
<td>Vision</td>
<td>Ear</td>
</tr>
<tr>
<td>Hearing</td>
<td>Nose</td>
<td>Face</td>
</tr>
<tr>
<td>Mouth</td>
<td>Teeth</td>
<td>Throat</td>
</tr>
<tr>
<td>External throat</td>
<td>Stomach</td>
<td>Abdomen</td>
</tr>
<tr>
<td>Rectum</td>
<td>Stool</td>
<td>Bladder</td>
</tr>
<tr>
<td>Kidney</td>
<td>Prostate gland</td>
<td>Urethra</td>
</tr>
<tr>
<td>Urine</td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Larynx</td>
<td>Respiratory</td>
<td>Cough</td>
</tr>
<tr>
<td>Expectoration</td>
<td>Chest</td>
<td>Back</td>
</tr>
<tr>
<td>Extremities</td>
<td>Sleep</td>
<td>Dreams</td>
</tr>
<tr>
<td>Chill</td>
<td>Fever</td>
<td>Perspiration</td>
</tr>
<tr>
<td>Skin</td>
<td>Generalities</td>
<td></td>
</tr>
</tbody>
</table>
Repertory
Rubrics are recorded according to the standard rubric – sub-rubric – sub-sub-rubric convention adopted in Synthesis 9.1 Edition (Schroyens, 2001) using the chapter schema as described above.

3.5 CONCLUSION
The described methodology was implemented and the results are presented in Chapter 4.
CHAPTER 4
RESULTS

4.1 INTRODUCTION
The symptoms attained during the proving of Ubiquinone 30CH were extracted from the provers' journals and presented in two subsections.

In the first subsection of Materia Medica the symptoms are presented in the prover’s own words as elicited from their diaries and were arranged according to recognized sections of the Materia Medica. The lists of symptoms presented below are a revised version of the full symptoms picture, highlighting only the most important themes.

In the second subsection of repertory the symptoms have been reworded into repertory language and format and grouped into sections of the Synthesis 9.1 repertory (Schroyens, 2001). The list of rubrics was developed and edited to include the rubrics most relevant to the proving. The grading of the rubrics was done according to the full symptom picture.

4.2 MATERIA MEDICA
4.2.1 KEY
The symptoms are referenced as follows. The prover number followed by an F or M, indicates the gender. This will be followed by the DAY: HOURS: MINUTES after taking the first powder. After 24 hours, the minutes are considered unimportant and are replaced with XX.

After 2 days the hours become unimportant and are replaced with XX. Where the time is unclear it is represented as XX:XX:XX.

The symptoms denoted by * are those gained through one-on-one meetings, phone calls and the post proving meeting. Symptoms from the journals belonging to the placebo group were not considered. The symbols < and > indicated that symptoms are aggravated or ameliorated respectively by what follows it.
Table 3: Prover Lists

<table>
<thead>
<tr>
<th>PROVER NUMBER</th>
<th>GENDER</th>
<th>AGE</th>
<th>PLACEBO/VERUM</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>Male</td>
<td>29</td>
<td>V</td>
</tr>
<tr>
<td>002</td>
<td>Female</td>
<td>38</td>
<td>V</td>
</tr>
<tr>
<td>003</td>
<td>Male</td>
<td>45</td>
<td>V</td>
</tr>
<tr>
<td>004</td>
<td>Female</td>
<td>26</td>
<td>V</td>
</tr>
<tr>
<td>005</td>
<td>Female</td>
<td>24</td>
<td>V</td>
</tr>
<tr>
<td>006</td>
<td>Male</td>
<td>27</td>
<td>V</td>
</tr>
<tr>
<td>007</td>
<td>Female</td>
<td>21</td>
<td>V</td>
</tr>
<tr>
<td>008</td>
<td>Female</td>
<td>26</td>
<td>P</td>
</tr>
<tr>
<td>009</td>
<td>Female</td>
<td>21</td>
<td>V</td>
</tr>
<tr>
<td>010</td>
<td>Female</td>
<td>23</td>
<td>V</td>
</tr>
<tr>
<td>011</td>
<td>Female</td>
<td>25</td>
<td>V</td>
</tr>
<tr>
<td>012</td>
<td>Female</td>
<td>38</td>
<td>V</td>
</tr>
<tr>
<td>013</td>
<td>Female</td>
<td>29</td>
<td>V</td>
</tr>
<tr>
<td>014</td>
<td>Female</td>
<td>26</td>
<td>V</td>
</tr>
<tr>
<td>015</td>
<td>Male</td>
<td>20</td>
<td>P</td>
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<tr>
<td>016</td>
<td>Male</td>
<td>23</td>
<td>V</td>
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<tr>
<td>017</td>
<td>Male</td>
<td>21</td>
<td>V</td>
</tr>
<tr>
<td>018</td>
<td>Female</td>
<td>23</td>
<td>P</td>
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<tr>
<td>019</td>
<td>Female</td>
<td>21</td>
<td>V</td>
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<td>020</td>
<td>Female</td>
<td>21</td>
<td>V</td>
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<td>021</td>
<td>Female</td>
<td>21</td>
<td>P</td>
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<td>022</td>
<td>Female</td>
<td>24</td>
<td>V</td>
</tr>
<tr>
<td>023</td>
<td>Female</td>
<td>21</td>
<td>V</td>
</tr>
<tr>
<td>024</td>
<td>Female</td>
<td>27</td>
<td>V</td>
</tr>
<tr>
<td>025</td>
<td>Male</td>
<td>27</td>
<td>V</td>
</tr>
<tr>
<td>026</td>
<td>Female</td>
<td>24</td>
<td>P</td>
</tr>
<tr>
<td>033</td>
<td>Female</td>
<td>40</td>
<td>P</td>
</tr>
</tbody>
</table>
As depicted above there were more females than males who participated in the proving.

**4.2.2 Symptoms of Ubiqinone 30CH**

**Materia Medica - Ubiqinone**

**4.2.2.1 Mind**

**Increased energy and happiness**

Today was an amazing day, was happy full of energy, did not let anything get me down, not even the strikes at campus. Just starting to feel a little tired now [20h30]. 02F 00:XX:XX

I noticed it earlier but didn’t pay too much attention to it, because I do usually have a wrecked sense of humour: Death seems a funny concept. Making jokes and fun about it all the time. Being very facetious at every comment made in class. Being such a classroom clown. 09M 04:XX:XX

I had a complete burst of energy, was very giggly and happy. 14F 00:03:30

Today was a good day. Even though I was a bit rushed of my feet all day I still managed to stay focused and had maintained my high energy levels. 02F 08:XX:XX
I didn’t feel very stressed today even though I had a lot to do, I was quite relaxed. Just took everything one step at a time. 02F 00:XX:XX

Emotional disposition was affected the entire day with regards to feeling happy or cheerful with a upbeat spirit for no particular reason. 01M 00:XX:XX

We had a massive strike today but it didn’t affect my emotions much. Instead I feel calm and collected. 15F 01:XX:XX

It is now 22h30 and I am watching television and waiting for my parents to come home from their Valentine’s date. I am babysitting my brother. But today his tantrums don’t seem to bother me. 15F 01:XX:XX

Feeling lighter, relieved and carefree. It’s like a weight has been taken off me but I have no idea why. Feel free like a bird that is free to fly to any place in the world. I even felt some enthusiasm and excitement but I could not understand why I was feeling this way. I had this feeling from the morning right till going to bed. 08F 33:XX:XX

Today was another great day. Was in a happy cheerful mood all day. Just started to feel quite tired in the afternoon. 02F 01:XX:XX

Today was another fantastic day. Was in a great mood all day and my energy levels were quite high. 02F 03:XX:XX

Today was another day of happiness. Was in a great mood and stayed full for quite long. 02F 04:XX:XX

Another fantastic day. Great mood and happy all day. Noticed I am not getting very hungry anymore like how I usually do; feeling quite full and content after each meal I have. 02F 06:XX:XX
Today was a fantastic day. Just feel happy about life as a whole, feeling content and focused. Again not getting too hungry and staying relatively full. 02F 07:XX:XX

Although I still have these symptoms overall I feel stronger in my mind and good about myself. I am happy with who I am and my determination and will power has increased. 08F 26:XX:XX

So energetic and happy 26F 01:XX:XX

Feeling excited, energetic and happy [22h30]. I am feeling fragile and need a hug [23h00]. 26F 02:XX:XX

Feeling excited and soo fresh [20h45]; feeling sleepy but I cannot sleep early [21h00]. 26F 03:XX:XX

Woke up excited that it is Friday; kept myself busy by cleaning my room. Playing music and dancing. Sat on the floor and started to daydream about my future, when I’m working and earning money; how it will feel when I’m rich, owning things. Went and bought ice cream. Mmm, nice. The dream felt real, like I was already there. Miss having someone with me to talk to, so I talk by myself, which is much nicer. 26F 10:XX:XX

Went out with friends; I was so exciting and I had fun. I daydream a lot lately about success. Not hungry like other days. I guess it is the excitement. 26F 11:XX:XX

I feel energized and awake; happy, and like moving or getting some exercise. Better for movement and walking. 22F 12:XX:XX

Stress levels reduced, becoming more of my organised self. After lunch time, I feel relaxed, but extremely thirsty. 25F 06:XX:XX

Feeling happy; no reason just happy. 22F 02:XX:XX
I was feeling energetic, dancing to loud music, gospel. Trying not to be too serious and emotional [16h30]; missing my sister and needing a hug [17h00]. 26F 03:XX:XX

Felt great. I was in a bad mood, but then it changed. 22F 05:XX:XX
A general feeling of cheerfulness is felt for the entire day exactly the same as previous day. 01M 01:XX:XX

Woke up late, even though I slept early. Feeling quite overwhelmed with the day. Easily distracted. 25F 05:XX:XX

Today I woke up feeling good; was in a fairly good mood with high energy levels however as the day progressed I started to get really upset and my mood changed completely. I was very upset and did not want to eat much either. 02F 29:XX:XX

I have a feeling that I’m enormously muscular and not afraid of anything, even wild animals, but also a fear of sudden noise, even small noise. 19M 01:XX:XX

Woke up tired at 06h30. Homesick. Irritable, and still having some cravings. 25F 03:XX:XX

**Hypersensitivity and emotional fragility**
Noticed increase in focus, being aware of physical body even though doing something else, more detailed. More acute. 06M XX:XX:XX

I’m doing homework, trying to study, but everything is annoying me. I can’t handle noise. It’s only in the afternoon, at times, that I’m so happy and better, but there are always two sides to me. I’m either overly happy and excited, or depressed and angry, and it happens at any time of the day or night. I’m also alert at night. 22F 09:XX:XX
Shopping centre equals more noise, and has increased sensitivity to it, every
colour. 06M XX:XX:XX

About 22h00, I started to feel irritable and agitated. > for talking, hearing
people talking and light; < for silence and darkness. Headache making me
feel worse. Just want to take a pain killer and sleep. Taking out my anger on
my boyfriend. 12F 02:XX:XX

Starving at lunch time. Being homesick makes me seem to eat more. Feeling
quite motivated to do work. In need of company, but also doing well on my
own. 25F 04:XX:XX

My mood feels horrible. I’m wearing a warm translucent and a warm double
blanket to ease the pain but then I feel hot I have to open all the doors and
windows. Oh God, I feel so sweaty and hot my feet are aching. I want to lift
them up but I can’t now; still busy with work. I have to close the door because
the guys next door are smoking and the smoke is coming in. I feel so irritable,
awful, I feel like swearing the situation off, sometimes I wish I could take
medication to finish this. 05F 08:XX:XX

Resting day, sleeping till late. I feel lonely, fragile. 26F 20:XX:XX

I received a call early in the morning and just became so emotional and cried,
and sleeping made me to feel better. I woke up energetic, listened to music
and danced. 26F 23:XX:XX

Around 21h00, I started crying for no reason, lasted about 15 minutes, then
slept. 12F 00:XX:XX

I’m easily hurt. 26F 00:01:30

Woke up at 06h00, body sore and I’m exhausted, even though I slept well,
despite having been a little anxious about meeting a particular person during
the day. I miss my mom; I miss her hugs, and I’m even thinking about her. I
gave her a call but still I just want to see her and physically get a hug. 26F 06:XX:XX

Woke up early, around 08h00. I didn’t want to wake up; didn’t even want to go out and see people. At 10h30, I went out to a secondary school in an underprivileged area and my day turned out to be amazing and exciting. I was very playful and naughty 26F 07:XX:XX.

Woke up at 10h00, missing my mom. I want or need to have company, but at the same time I enjoy being alone. 26F 09:XX:XX

Very emotional and sensitive and in need of attention from my family and/or a friend; need of a little recognition. Instead, someone said something not right, so I cried on my own. She had no idea. Went and met up with a friend so I enjoyed myself, laughed, got the attention and recognition I needed. 26F 13:XX:XX

I don’t know what is wrong with me. I am so quiet; I don’t want to go out and see people; enjoying my company and being alone. 26F 14:XX:XX

I kept myself busy by cleaning my room and took a one-hour walk. I’m bored. I can’t wait to meet up with friends. I feel like having company, yet I enjoy being alone. 26F 16:XX:XX

I miss my mom. I miss being cuddled and feel all alone. I miss my sister. I feel like going out and visiting someone close to me, a friend, relative. I miss the attention and being appreciated. My friend came to visit. We had a lovely time; bonded. 26F 17:XX:XX

Slept well, but I feel like I’m troubled. I took a walk at 07h00 with a friend. The Bible is the only thing in which I find relief. When I’m reading. I slept the whole day, don’t feel like doing anything. At night I was awake and full of energy. Slept at 02h00. 26F 18:XX:XX
Lately I’m in need of company, especially family and close friends, but I don’t want to tell them that I need them. I’m just acting so brave. 26F 19:XX:XX

I miss my mom; being in the company of family members. Feeling anxious but don’t know why. I feel I’m not OK; so overwhelmed about the dream and I don’t know what it means. 26F 24:XX:XX

I hear people calling my name, firstly was my ex-girlfriend. 19M 00:XX:XX

I really miss my husband now. He used to put me in bed in blankets, make me a hot soup and cuddle me when I had a fever but that was a long time ago, I hardly had fevers or slow sickness but that the only warm fuzzy memory I have. 05F 09:XX:XX

I couldn’t sleep well. My mind is all over; kept myself busy by cleaning the room, started to cook and went to read. I felt tired but couldn’t sleep. I kept on eating rice and chicken livers. I was full but wanted to eat to keep myself busy and to concentrate on something else. I went to see friends. I was hurt that my friend didn’t give me attention; was hurt but was fine after some time. I’m too observant and easily draw conclusions. 26F 25:XX:XX

I don’t feel like being involved in any love relationship while feeling the need to be with my partner, just the two of us. Meanwhile I feel irritable by having to see even her; even talking to anyone saps my energy. 19M 00:XX:XX

There was an argument today that I got caught up in. Somehow there was a misunderstanding and I was spoken to in a harsh, uncultured, rude, arrogant manner. I feel like this act has sucked the sap out of me. Its as if my inner strength is gone. My inner drive is gone. I don’t have vitality. I don’t understand what happened or why it happened. I don’t know who’s to be blamed for what happened. I feel like I’ve been robbed of something but I don’t know what. I am not motivated to do anything. I am questioning whether I even belong in my class or doing what I am doing. I don’t want to return to class. I don’t want to see anyone or speak to anyone. I just want to be alone.
so I can think about what happened and figure out why it happened. 16F 08:XX:XX

I am going to campus and I am speaking to people against my will. I am putting on a front of being okay but I am really not okay. I am smiling and laughing on the outside but crying on the inside. I can’t even share this with anyone because they wouldn’t understand. I feel as if, if I shared it with anyone, they wouldn’t care or be able to help me in any way so there’s no point. I feel really disappointed in everyone around me. It’s as if people have lost the ability to love other people. They are so selfish and only think about how they can benefit themselves. They have no regard for others’ feelings and they don’t think before they speak. I am trying to understand why people are this way. 16F 09:XX:XX

I feel very emotional. I don’t know why I’m letting things that I don’t have control over affect me so much. I do feel a little better and I am more motivated about things but I still feel wronged. I still don’t understand why I was chosen as the one to take the fall for something I didn’t do while everyone else stood back and watched it happen. I do think that I just need to let it go and accept the fact that I cannot change what has already happened. I feel like I need to remind myself that it’s not good to let people get too close, because eventually they take advantage and it’s up to me to protect myself from that. 16F 10:XX:XX

It still bothers me that people have lost their “love” for others. I’ve been thinking about it a lot and I think something needs to be done about it. I’m beginning to understand that most people are usually nasty to other people because they have been wronged or hurt by someone else. This makes me think that it is a vicious cycle of cruelty and I wonder if things will ever change. How do we convince people to make the change that would impact everyone? 16F 11:XX:XX
I think I’m over being upset with the people in my class. I’m being friendlier and speaking to everyone again. I’m not angry anymore but I don’t think I will ever be able to trust certain people again. 16F 12:XX:XX

Dizziness and a feeling of not talking to anyone. Highly irritated by talking, and don’t have the effort to keep explaining myself. Cannot concentrate; feeling lazy, tired, while doing a little feels like a lot of work. During the day, I am experiencing a feeling of depression, and I don’t feel like talking to anyone or doing anything, even recording on the journal. Slight headache pains in the occipital region. I really don’t feel like talking or thinking; meanwhile having fears of noise even the smallest noise. 19M 01:XX:XX

Irritability and exhaustion
Started the day off rushed and was quite moody, irritable but this got better throughout the day and started feeling my happy self. Did not get to eat lunch today as a result felt very weak and tired. Also had difficulty to breathe today not so much difficulty but felt like I was too tired to breathe. Did not have a lot of energy today. 02F 17:XX:XX

Easily irritable, but calming myself down. 26F 12:XX:XX

Very irritable and exhausted. In no need of company, yet my concentration level is quite high. Stressed about finances. 25F 07:XX:XX

Very irritable and exhausted yet again. Really want to laze around. Finances still my worry. 25F 08:XX:XX

Woke up late again. Think my irritability is making me disorganized. Very tired but had a burst of energy during lunch time. In the mood for fixing notes and trying to keep up to date with school work. Slept late but relieved for having finished all my school work and gone over some things I do not understand. 25F 09:XX:XX
Today I woke up feeling tired and lethargic. I was moody, irritable, and just wanted to sit in a chair or lie in bed all day. These feelings improved throughout the day and I started to feel a little better, but I also felt quite weak and listless. I took an iron tablet and felt slightly better but still feel light headed, sleepy, also a bit nauseous but feeling better after I ate. 02F 24:XX:XX

My head is heavy and my face skin feels thick. I want to be left alone while I tend to fear loneliness. Feeling sleepy, dizzy and I’m perfectly unstable, highly irritable and cannot concentrate. I hate to be given orders. When looking around it seems as if people’s faces are changing, like a movie and it seems as they are talking slowly. 19M 00:XX:XX

It’s the morning and I feel tired, extremely tired, lazy to talk, walk, even to tidy my bed. After the remedy I feel lazy to talk, but not irritated by doing so; when altered to continuously talk and enjoy it. 19M 04:XX:XX

I feel tired, as if I could just do nothing at all, even talking or thinking. It’s still the morning and have to get ready for school, while in my thoughts it feels like it’s the weekend; as if I could just relax and do nothing. During the day irritability rules me to an extent that even being at lectures, with friends or anyone else irritates me. Being alone with no one to talk to and no one to keep on yelling at me feels quite a lot better. 19M 05:XX:XX

I am so annoyed; I wanted to shower and sleep but the geyser temperature was only 30°C. It was 46°C an hour ago! My gardener always uses soo much hot water even though we are in freaking summer!! Now Gran and I have to wait over an hour for the temperature to be warm enough for us to shower again. In context, usually when our family of five are home, 48°C is enough for all of us to shower with enough hot water. Argh! It’s annoying thinking about it; my mum has spoken to him numerous times. 13F 04:XX:XX

I do not swear, but I have been saying ‘shit’ and ‘f**k’. Not too often, but often enough to notice a difference. I don’t say it in front of others, but when
alone...yeah, those words describe how I feel. Yeah, I have already done that a few times in the journals. Before my brother was the only person who could make me swear and only when I am more than annoyed with him. Now, many things can annoy me more easily. 13F 11:XX:XX

Still feeling irritable though, and get upset over imagined trifles, arguments or situations. And feel weepy too. 09M 06:XX:XX

At about 20h00, I was incredibly angry with my significant other. Felt like I was bursting with anger, like I had to bottle it up or I would explode. 18M 05:XX:XX

Still tired as usual. Lazy and no desire to do anything constructive. Just want to recline on the couch and do f**k all [nothing]. 09M 06:XX:XX

First lecture in the morning is Anatomy dissection, and I can’t wait to be at the dissecting halls to continuously kill the cadaver. Later in the morning, and I feel aggressive. Even when talking to my roommates; just don’t have time to explain every bit to them. 19M 07:XX:XX

I just woke up from a nap [14h30]. I feel so horrible I want to strangle everyone. My nose is blocked on the left and runny on the right, watery catarrh, my right eye is tearing, my right ear had stabbing pains every time I blow my nose. My throat is so scratchy and dry, yet I’m not thirsty. I’m usually a very thirsty person, but not today even when I drink water to relieve the scratchiness in the throat, I don’t like water if not thirsty. Even my upper chest is starting to bother, I’m beginning to cough, my voice is going away it sounds scratchy, I feel as if my trachea is scratching and has catarrh. It is so hot outside, I’m so hungry yet I crave nothing in particular. I feel like strangling the student researcher, she is so tiny she would die if I strangled her, because if I wasn’t on proving I would be taking some medicine to boost my immune system, to shorten this misery. 05F 09:XX:XX
We had dinner: parents, gran, uncle and aunt. This damn lady walks up to us and speaks Afrikaans to us! Something like, ‘verskoon my, kan julle sagter praat want [Excuse me, could you speak more softly because] we are also customers sitting at that table…’ blah blah blah. Praat sagter [Speak more softly] blah blah blah verstaan julle? [do you understand?]. Damn. All the adults turned to me with a ‘what the hell just happened?’ expression. I told them she asked for us to talk softly, looked at her [and] said, ‘yes, we understand’ and she walked off smiling. That bitch, describes her totally, can speak English. I can hear her speaking English on her phone. She thinks it was funny to speak Afrikaans to us knowing very well no one understands. Clearly mocking us. She could have spoken English any day; flippin’ stupid of her. Even more rude. Technically, it was my gran who was speaking loudly. She has always, especially when she gets excited. If she came back it was going to be war. But we just chose to leave because she clearly wanted an argument, so we didn’t give her one. Want to tear her. My brother too. I have been holding this in for a while and with this lady, I am on an anger spree. My brother is in second year university staying in another city. I didn’t know what his problem is, but since he left Durban to university over a month ago he has not contacted us at all! When I try and talk to him even for his birthday, he talks to me with attitude as if he was more awesome than I was. Maybe it is this whole, ‘I am in second year, no longer first year’ attitude. I am bigger than you. Who does he think he is? On his birthday a week ago I was the first to write on his Facebook wall, all excited saying, ‘happy birthday dear brother, first to write to show you I love you’. His reply on [a telephone message service] was ‘oh, by the way, my university roommate said happy birthday first. Thanks anyways.’ He only called my mum once, as soon as he arrived back in South Africa. Not to say ‘hi’ or ‘I miss you’, but to ask her to buy something too expensive for him to afford. When I told him what happened with that lady, he replies ‘ok, nice to know’. What!! You[r] parents got told off by an Afrikaans lady, and you don’t give a damn about it. Hello? He has serious arrogant / or whatever issues. I so don’t want to talk to him until he’s back. If anyone gets in my way now, watch out! The lady has totally messed up my super awesome week. I am over the independent eagle idea [22h00]. All claws out. I’ve spent the last hour looking up all sorts of pictures.
of animals, growling, snarling, attacking, aggressive mainly wolf, lion, dog, tiger, leopards. Some photos were really scary. Definite kill face [23h00].

Really tired now. All that anger is draining. I don’t get angry easily so when I do its draining. Feel better after looking at all the pictures. 13F 15:XX:XX

I feel horrible [22h00], I open doors and windows then after 10 minutes, close them. I want to drink something, I don’t know what. My shoulder, upper back and upper chest near the sternum are so painful and aching, my right nostril is flowing watery catarrh, I feel like I want to kill my proving supervisor and everyone else. 05F 09:XX:XX

I’m still irritable, don’t want to talk to anyone I want to be alone but I prefer light so I’ve chased my kids to my bedroom. I feel like I’m a little bit depressed. I’m sad and down; don’t want to see people. 05F 21:XX:XX

I was irritated and annoyed with the strike at campus because I had travelled from a far distance to come to lectures and we only had 1½ hours of lectures and the rest was cancelled. When I was travelling in the car I felt nauseous. 08F 10:XX:XX

A class mate was really annoying me with comments in class. I can see where he is coming from, but I really got annoyed that he wasn’t understanding the topic and would not let go of the topic. Got so impatient and short tempered, I ended up finding proof and reading it to him so he could move on. Probably came across quite irritable in my tone. Felt quite bad. It’s very unlike me to speak like that, especially in front of others. I can usually keep myself reserved. 13F 23:XX:XX

I only found out just now that clinic this afternoon was cancelled. I told fourth years anyway, and it turns out they had no choice either. Then I realize the driver wasn’t informed. I realize the clinician supervising us there wasn’t informed either. Come on. Up your game, clinic. Can’t just do his to people. This entire week. Monday the driver wasn’t informed to fetch again and now no one was informed that it was cancelled. Good thing I happened to bump
into a clinician who told me, ‘oh, by the way…’ Come on! It is embarrassing and so inconsiderate, lame! Actually sending an email now. Now that I think of it, I have been really short tempered and impatient for the last few weeks. I almost feel like I am looking down on people whom I am not happy with. Oh my gosh, I can’t believe you did that, said that; can’t understand. Quite an arrogant vibe coming across. Horrible. I hate people like that, and I have been behaving that way. I apologized to my classmate today. 13F 23:XX:XX

I got added to a group discussion on youth camp; some people really confuse me. My brother is so getting on my nerves, talking to me like I am stupid [23h00]. Who does he think he is? His ego is radiating arrows out of him! 13F 34:XX:XX

My friends just asked me why I have been quite feisty recently. When I asked them to explain more, they said I have been speaking out a lot lately and not taking crap from others. They said it is a good thing because I used to be so subtle...I don’t know if that is a good or bad thing, but it is something I have noticed and sometimes I came across more harsh than I intend to.13F 34:XX:XX

Slept well, but I got up angry when someone woke me. Damn! I got the days mixed up, so not focused or caring about anything. Sleepy. 22F 05:XX:XX

Apathy and prostration
Not happy. I am a bit excited to see my friends. Didn’t do much, except sleep and walk around the house and eat loads of junk food. Did homework. Don’t want to go to campus. 22F 10:XX:XX

Don’t want to go to campus. Terrible sleep! Been studying! Hate it. Got symptoms of irritable bowel syndrome. Keep running to the toilet, can’t concentrate, nervous. Falling asleep in lectures. Came home early, started studying, drinking loads of coffee. Restless sleep. Mind too active and scared. 22F 11:XX:XX
Slept late because I can’t fall asleep. Got leg cramps, and I feel grumpy and tired. Just want to be left alone and to not have to think about anything. 22F 13:XX:XX

Didn’t go to campus. I needed to study. My friends are angry, but I have to study, and I feel stressed and tired and sleepy. 22F 14:XX:XX

Stressed, tired, and sick of studying. I can’t wait to write and get this over. Don’t feel like sleeping. Keep fighting it until I can’t anymore. 22F 15:XX:XX

So hot, I came home, ate finally, then threw it up. Feeling sick and fat and stressed about tomorrow, because my parents got mad because I came home late! I feel so terrible, and like a failure. Hate myself. Happy though because I went to the beach with my boyfriend. 22F 18:XX:XX

Just feeling of tiredness and restlessness. Had chocolate, felt better. I got nervous and felt depressed, threw up, then had a bath. Annoyed. 22F 19:XX:XX

Was feeling really sad and tired. 22F 04:XX:XX

Woke up late. I have this ‘no care’, carefree attitude. Not interested in studying, doing it extremely slowly. 22F 20:XX:XX

Didn’t go to campus. Love the weather. I have been feeling depressed after I eat, and when I eat junk food I feel like throwing up. I feel unhealthy, but can’t stop eating because I get really nervous, scared and annoyed when I think about tests. I basically ate and listened to music, and thought of my boyfriend, which annoys me more. 22F 20:XX:XX

Tired and stressed. I also feel like I don’t care about this paper. Feel better after I wrote it. I came home and was extremely tired, but couldn’t sleep because I have the birthday party in a few hours. Feeling a bit grumpy; hardly ate supper, had a lot of sweet stuff for supper then just sat and needed some
peace and silence. Stressed about going to campus tomorrow. Not sure I want to go, but my boyfriend and friends want me to go. Restlessness and no sleep. I had IBS. 22F 21:XX:XX

Extremely tired and forgetful. One moment I am tired, the next I have a burst of energy. 25F 02:XX:XX

Extremely tired, can’t concentrate. 22F 00:XX:XX

Forgetting how to do simple things: when spelling, I have to pause and think; driving: gearing up when I have to gear down and vice versa. I feel like a learner driver again. 09M 02:XX:XX

Constantly forgetting to do simple tasks: forgot to lock car, put car alarm on, putting in gear lock. Not paying attention on the road, nearly crashing at every turn. Seems I still have my mental symptoms…grrrr 09M 07:XX:XX

Travelling was difficult. Unable to ride fast on bike; took car and had same problem: had to turn music off to be able to concentrate. 06M XX:XX:XX

Gee, my mind was not focused this afternoon [16h00]. I was on dispensary duty today and had to think twice or more to focus. I even almost made the wrong remedy; not good. A guy left his number on my car today asking me to call back. He said he had knocked my back bumper today; I looked and didn’t notice too much. There are worse scratches on my car. Oh well, think I will let him go. I’m too tired to deal with that [17h00]. 13F 34:XX:XX

I’m a blonde today, I forgot a lot of things. 05F 29:XX:XX

Don’t want to do anything, extreme laziness. Just want to be alone. My brain feels like it is on standby. 21F 16:XX:XX

My mind feels like it’s separate from my body. Total absent mindedness. Feel brain dead, it’s just not functioning. Spacy and dreamy. Extremely sleepy,
feel like I can just sleep as soon as I close my eyes, I usually never sleep during the day. 21F 13:XX:XX

I feel emotionless. I don’t care for anything or anyone. My mind feels exhausted. I don’t want to write in this book anymore. 21F 26:XX:XX

Feel bored and sleepy. Can’t concentrate. Feel like I’m going to fall asleep during lectures. 21F 17:XX:XX

Writing a test tomorrow. Can’t concentrate. As soon as I read the notes I fall asleep, like by the first three words. Studying makes me very drowsy. Feel like nothing is going into my head. I have no order, I usually study in an orderly fashion but now I’m just flustering and jumping and skipping. But I don’t feel any stress or pressure around the fact that I’m writing a test, feel like there’s no motivation. 21F 19:XX:XX

Just read over my notes an hour before writing. Have a ‘don’t care’ attitude, like I’m over the entire thing. I just want to sleep. My eyes feel lazy and tired. 21F 20:XX:XX

Want to be alone, not because I’m irritated or don’t like people, I’m just so tired, I don’t have energy. I’m really reserved and quiet after the remedy. Don’t want to do anything. 21F 21:XX:XX

Sleepy, tired, can’t concentrate, don’t want to do anything. 21F 23:XX:XX

Can’t keep a proper conversation going anymore, I just answer in ‘hmm’, ‘ok’, ‘yes’ or ‘no’. I feel like I have a bad ‘don’t care’ attitude. 21F 27:XX:XX
Prefer to be alone, don’t care about anything. 21F 29:XX:XX

Can’t concentrate at campus. Feel sleepy, feel lethargic, keep yawning. Fell asleep by 20h00. 21F 30:XX:XX
Mind is messed up, tired not doing any work. Sleeping most of the time. Not exercising, too tired with difficulty waking up in the morning. 21F 37:XX:XX
I have no order, and have become messy, in writing and thought; there’s no flow. 21F 38:XX:XX

I’m so tired today and leaky menses. I don’t like this. I still have a headache at the base of my skull. My ears feel closed but then I feel as if water is splashing from the taps, yet nothing. I feel so down and depressed today, I have to go out shopping. 05F 30:XX:XX

Felt apathetic, unmotivated. 18M 12:XX:XX

I don’t care about anything. 21F 41:XX:XX

Apathy went away during last night’s sleep. Concerned about my phlegm production which doesn’t appear to be lessening. I no longer feel sick but I am still producing phlegm. 18M 13:XX:XX

Disposition is apathetic and unmotivated. Went to sleep around 22h00. 18M 15:XX:XX

Same as day before, just too damn lazy to write anything. 09M 08:XX:XX

Anxiety and paranoia
I can’t fall off to sleep. Delusion: I feel as though closing my eyes I will fall into a coma or die. Anxious on falling asleep [22h15]. 09M 01:XX:XX

Hungry, tired, and feeling agitated, stressed as if still writing my tests. All in morning. 22F 01:XX:XX

Starting to feel a sense of anxiety and panic. My chest feels constricted and starting to get heart palpitations, but strangely feeling fatigued from doing even the least bit of movement. Almost feels like a mild myocardial infarction. A little distressed from the reaction. 09M 00:01:30
I felt very hot in my face; upsetting feeling the entire evening as well. < thinking, > away from work. 08F 30:XX:XX

Constantly paranoid that I might have forgotten to lock up car or front door. Have absolutely no memory of doing it. 09M 02:XX:XX

I feel that this remedy helped me. Not sure exactly how but I feel good about myself, more confident and optimistic. I feel that I must take a stand for myself and not let people walk over me. I must do things that make me happy and what is most important is my happiness. For a few years, my self esteem has been low but I seem to have awakened and feel overall better and good about myself. The only fear that I have now is when I close my eyes: I can see a cobra or sometimes I can feel it is at a certain spot. I am afraid that it might bite me. It was my husband that lowered my self esteem and confidence in myself. 08F 11:XX:XX

I can still see the cobra when I close my eyes or feel as if it is around. I am very afraid when this occurs and I need company to overcome my fear. 08F 12:XX:XX

Becoming paranoid about people around me, messing with me. Want to be left alone; feel like being quiet [10h00-12h00]. 27M 00:XX:XX

Classmates say I don’t look well; as if I’m fighting something. Don’t look my usual self. Paranoid about people messing with my food. 27M 02:XX:XX

Fears of being rejected socially and of being failed by lecturers. 27M 17:XX:XX

I am feeling paranoid, embarrassed and suspicious. I have a fear of insanity. I blank out in class; zone out and get lost in myself. I am almost catatonic and non-responsive. I miss out on hearing things and am totally spaced out and not aware of how much time has passed. I feel awkward in class, as if the class realize something is wrong. 27M 27:XX:XX
Paranoid and embarrassed; not my usual self. I spent the day alone at home studying for test. I was quiet and not interactive with anyone. 27M 28:XX:XX

Embarrassed. 27M 29:XX:XX

Paranoid and fearful; fearing that everyone is messing with me. I am paranoid, afraid and avoidant. I am unable to control myself in class, and let out loud wretching noise in class. I tell my parents I'm not feeling well. 27M 30:XX:XX

I am paranoid and think everyone is messing with me. 27M 31:XX:XX

I am paranoid and afraid. I felt unwell and slept most of the day. I think everyone is messing with me; drugging me; calling me racist. 27M 32:XX:XX

Paranoid and confused. I rested most of the day. 27M 33:XX:XX

At night [23h00], it felt like someone was behind me, looking at me, but when I turned around I saw that there was no one there. I was afraid, closed my eyes and gradually fell asleep. 08F 16:XX:XX

I still feel as if someone is watching me but I only have this feeling at night. I get scared and close my eyes so I don’t have to see who is there. I feel safe when I close my eyes. 08F 17:XX:XX

At night I am still afraid, the feeling that I’m being watched persists. I like to be with company either my baby or husband. Then I’m not as afraid and maybe the person that is watching me might go away or this feeling go away. 08F 18:XX:XX

Now that’s it. I’m done. I have to see the student researcher and my supervisor. I can’t take this anymore, whether on placebo or not. I want out of the proving, I have to see a doctor. 05F 37:XX:XX
4.2.2.2 **VERTIGO**

Today I was OK. I still had difficulty breathing on morning fast or uphill and I had to stop and put my head down between my thighs to make it better. I was feeling dizzy. 05F 33:XX:XX

At about 15h00, I poured myself some lemon juice and went to work on computer. I noticed that I felt slightly dizzy and my limbs felt as if they were weak, as if I had a drop in my blood sugar levels. The weakness seemed to be present in my joints, as if it required effort to move my limbs. What made it odd was the accompanying sensation of cold on my skin. It felt as if I was in a paper thin wet suit; my skin felt cold. It was the same kind of cold I’d associate with a stressful situation. My skin felt clammy. Intensity not severe, but noticeable. The feeling went away after getting up and having a bite to eat and some coffee. 18M 01:XX:XX

Slight dizziness, feeling weak while wanting to do a lot of things which challenges my mentality. Now I’m thinking of crazy things like flying and I don’t feel like talking a lot, even explaining important things to others. Dizziness is better when I sleep/am sitting and doing nothing. 19M 00:XX:XX

4.2.2.3 **HEAD**

**Occiput**

My energy level increased after 12h00, but I had a right sided headache that started at the back of the head. 08F 04:XX:XX

Headache, on the right occipital lobe, pulsating; worse for thinking, mostly sleeping makes it better. 26F 03:XX:XX

I had an occipital dull headache [20h00], better for resting. Rested by sleeping and it was better. 26F 07:XX:XX

Today I’ve been better, except lower back pain when I’m standing for a long time. Now that it’s late I have a headache; it’s slightly different than before. It’s where the head joins the neck, at the back, the whole day there has been
tension pain there, massaging makes it better. Now the pain aching is worse, from the back of the head, through the base of the head to the temples, both, but the right eye movement upward still makes it worse. 05F 29:XX:XX

At 19h00, on my way to Mthatha, Eastern Cape, the headaches started. As usual, I took my jacket and wrapped it around my head to keep it dark, and used cold compression on my head to make it better, and switched off the music. Unfortunately I couldn’t sing, I was with my in-laws, so the headache took a long time. It was in the base of my skull, intense head, neck tension, worse with every movement or cough or right eye movement, as if the base of the skull were split right to the temples. This took almost an hour. 05F 31:XX:XX

While travelling in the car, about 15h00, to a wedding, I felt nausea which felt better when I came out of the car and was in the fresh air. While going home after the wedding I also noticed I was feeling nausea and my head was throbbing intensely. Again, it started from the back of the head to the top. My son did not want mummy sleeping. He wanted my attention but I could not focus on what he was saying. The nausea had stopped when I got [out] of the car. 08F 07:XX:XX

**Vertex**

At 14h00, I had a headache at the vertex. It was a throbbing headache. 08F 32:XX:XX

I took a nap because I had a throbbing headache on my vertex due to sunlight [15h00]. After the nap the headache was better [16h00]. 26F 02:XX:XX

Even the vertex of my head feels cold deep to the brain, I haven’t felt this in a long time. 05F 10:XX:XX
I’m still coughing and this brings on a splitting headache in the centre of the head. It’s very hot this morning and I’m sneezing and it makes my splitting head pain worse. My voice is becoming croaky like a frog. 05F 22:XX:XX

Last night I slept at 23h00. The headache was worse. It was worse on raising my head and standing, it was even difficult just to walk to the bathroom. I had to hold my head in both hands to make sure it doesn’t shake when I’m moving, to make it better. When I was sleeping, sleeping on my back or moving the head to the left side was a no-no pain; even moving my eyes upward or to the left side it caused a splitting pain right in the middle of the head as if a boning machine were working down to the centre of the brain and splitting it into pieces right to the sides, temples. 05F 22:XX:XX

The headache is still the same, better if I sleep on right side, facing down, worse if I move my head or eyes upward or to the right, better if I held my head between my hands and press to keep it still. Coughing and sneezing or blowing my nose makes it worse. If I’m sitting there is an aching from the centre of head to the right temple. 05F 22:XX:XX

It is now 22h19 and I am having a terrible headache. This pain is a grounding type of head pain. It is located in the middle of my head on the top. I just want to sit in the dark and put pressure to my head and push down. Even turning my head with a slight movement is causing more pain. My tummy is cramping. It feels as if my tummy is twisting. A twisting pain within my navel line. I feel so utterly tired now and just want to press my head down on a pillow in order to sleep. 15F 02:XX:XX

The headache is back now [18h00]: it’s from the centre of the head to the forehead and right temple. Touching the right eye or moving eyes upwards makes it worse. Every movement is like my head is splitting from the centre and my brain is falling forward, holding the head makes it better. I’ve also noticed that putting pillows above my head, so that no noise gets in, making the room dark, and singing makes my headache better. Strange that vibrations from within make it better but from the outside make it worse.My
nose have cleared, praise God, but I’m still coughing, though not that much. But every time I cough, I feel like my head is splitting in the centre of head down to the sides, both temples. 05F 21:XX:XX

Between 21h00 and 21h45, a thumping headache occurred at the top of my head, then moved behind my eyes, then only left to left eye then both temples only. 12F 02:XX:XX

**Temples**

Diffuse pain all over my head, but worse frontal temporal regions. Head feels heavy, < motion. Sensation: dull, heavy pressure from inside out. Not throbbing/pulsating; like a heavy object sitting there. Cannot think properly; thought feels slow. Just want to sleep and do nothing; > pressure, pushing on temples, warm. Pain, 4/10, just sits there. Annoying pain, <noise; want to be alone. I have just showered. It was still really bad just before shower. Much better after shower; warm hot water. Headache is lighter; sneezing less, nose still running. 13F 18:XX:XX

I had a stabbing headache on my left temple [09h00-10h00] as if my brain matter is about to explode into a thousand pieces. The only thing I could do was to compress the area. This headache took only < 5 minutes. I had stabbing pain in my back right around the right scapula. It only took 5 minutes. It was so sharp, causing difficulty breathing. I had to stop and not move; just listen to it. 05F 02:XX:XX

Too much noise is giving me a tingling headache at the temples, worse right side. 05F 09:XX:XX

During class I’m having a temporal headache that extends like an Alice band from temple to temple. It’s a high pressured headache that’s weighing me down. Draining me and giving me a very tired feeling. I can’t concentrate on class at all!! Feeling very tired. The air conditioner is high overhead and I’m coughing, a dry cough, sporadically. 15F 00:XX:XX
Today when I woke up the headache was better. It just feels like dull tension around the temples, < for noise and light, but when I lift my head, the aching increases in the centre of head. If I lift my eyes or move eyes to the left there is aching inside the eyeball sockets and centre of the head. 05F 22:XX:XX

In the morning, I had a terrible headache on the left, temporal, side, in the deep regions. The headache pains were shooting pains. 19M 01:XX:XX

I’m having pains in the left side of my head with numbness. 19M 05:XX:XX

Headache in the right temporal region, extending to the occipital region, pulsating, worse for light [22h58]. 26F 01:XX:XX

Tired. My eyes are red and I have a little bit of a headache in the temporal region; better when closing the eyes. I feel sleepy. After a bath, I felt better. 26F 19:XX:XX

**Forehead**

A minor headache strikes on the frontal aspect, especially when I am bending forward. 19M 07:XX:XX

Pulsating headache [13h00]. Also the forehead was sore and tender, with pain behind the eyeball. Worse for pressure 08F 10:XX:XX

Funnily enough, my glasses give me aches below my brow. It is like a blinding pain. Cannot focus my eyes on something for a long time. 25F 13:XX:XX

Also, sensitivity of the front part of the right side of the scalp. Worse for combing or pulling hair or pressure. Better for light touch. 08F 15:XX:XX

I have just woken up from sleep with the headache [14h00]. I’ve experienced the same headache the whole day. In the morning it was hard looking at the computer trying to do my research. I slept at night due to headache; woke up
at 11h00, I tried looking at the computer for 30 minutes, and that was it - I slept at 11h30. I have just woken up now and I haven’t done anything, and the kids are about to come home from school. I haven’t cooked at all. 05F 22:XX:XX

Today I have a really bad headache. It started around midday and got progressively worse, until I was able to lie down in the evening. Pounding headache, entire head but mostly frontal. Don’t know what caused it. Better if I lie down with pillows to support my head. Head feels very heavy. If I pick my head off the pillow I feel dizzy. 16F 04:XX:XX

When I came home finally, after two hours, the headache I had yesterday was back, looking at the computer screen made it worse; I had to take a nap. I woke up after the nap, at 15h00; headache better. 05F 23:XX:XX

My head is sore again. I can’t wait to sleep. 15F 05:XX:XX

The irritation and headache is starting [18h00] but it’s better than before and I already know that to make it better I have to be in a dark room, sing and put a cold towel on my forehead and stop moving or changing direction. 05F 24:XX:XX

Woke up with slight headache, nothing bad. Also feel flu-ish. Nose is blocked. I had good sleep. 22F 01:XX:XX

Headache sets in before sunset. 25F 13:XX:XX

Scalp dry; dandruff heavily present. Hair dry. 27M 01:XX:XX

4.2.2.4 EYES
It’s 01h00, and I’ve just finished washing the washing and blankets. Suddenly I had such an allergic reaction in my eyes, they are so itchy, I had to rub them, which make them better, but then they are red and swollen. I can hardly see. > eating sugar. 05F 02:XX:XX
My flu symptoms grow progressively worse as the day is dawning. My eyes are watery and burn. This is unusual for me as I usually have very dry eyes and they burn. 15F 01:XX:XX

Since I have woken up, I have felt a very slight pain on my right upper eyelid, in the right corner just above. I only feel it when I blink/move the eyelid. I cannot describe the pain, but it feels a lot like the feeling/pain when having a stye. I don’t see a stye now, but it is that feeling. I haven’t had a stye in years and years, maybe 12 years. 13F 20:XX:XX

I managed to catch 50 minutes sleep again, still so tired [08h00]. Eye thing is still there; not as obvious, not swollen. Doesn’t hurt if I press it, but it does when I stretch the eyelid. I’m rubbing my eyes. Pain isn’t even bad, 2/10; just there like a stye. I still have that strange stye-like pain on the eyelid; no difference [14h00]. That stye-like eye pain is still around [22h40]; more at the corner of my right upper eyelid. If I had to describe the pain: like the pain when pressing a bruise, intensity 3-4/10, only slightly more pain < touch. Whereas in the morning it was OK for touch/pressure. Not swollen, not red eye, looks normal; just a feeling. 13F 20:XX:XX

I can still feel that right eyelid pain [07h30], same bruised feeling. Same spot on corner of right upper eyelid pain, tending to a 3½-4/10 when I blink/touch it; no swelling. The eye doesn’t look any different. The eye pain timing is much better now. Didn’t have to pay much attention to it today. Now it doesn’t pain on blinking; only on pressing it. Intensity 2/10; same spot on right upper eyelid in corner. 13F 21:XX:XX

The eye pain is back to when I first wrote: no pain on blinking, pressure just if I rub and the skin is stretched. Pain 1-2/10; so chilled. Same place, same feeling, no physical changes. 13F 22:XX:XX
My eyes are becoming red but no pain is felt; the right molar tooth on the upper jaw is painful and draws pain to the left ear, but there is nothing wrong with hearing. 19M 02:XX:XX

Both my eyes are tickling as if there is hair stuck inside them, but more especially the left eye. 19M 03:XX:XX

Red eyes in morning [10h00]. 24F 02:XX:XX

Eyes, feel warm when closed [10h00]. 24F 06:XX:XX

Eyes feel warm when closed [23h00]. 24F 09:XX:XX

Eyes warm when closed [22h00]. 24F 10:XX:XX

Eyes warm when open [07h00], > staying closed. Slightly watery. 24F 22:XX:XX

4.2.2.5 EARS

My nose is still blocked [15h00], my temples feel tight and my chest feels tight. My ears are blocked and I have a feeling that there is sound of running water; keep asking my children to go check the taps. I feel like breath, mouth, nose is smelly rotten but kids are saying its not. 05F 13:XX:XX

In my ears, especially my right one, it feels as if I hear running water, and behind my ear my blood vessels is squishing blood movement, as if it’s boiling water compressed under a tight lid. My right side and lower jaw, and face on right side is painful, as if a nerve were compressed, even to the touch. 05F 26:XX:XX

4.2.2.6 HEARING

I’ve also noticed that noises from outside, after 18h00, are magnified. I can even hear a cat downstairs yet I’m on the 11th floor. I also hear imaginary running water, I’ve always asked the children to check if the taps are opened.
The children check if the taps are opened anytime of the day, ever since I started proving, maybe I have a fear of flooding the flat. 05F 23:XX:XX

Felt a slight deafness in my right ear, just for a very short while, maybe a minute maximum. 21F 00:XX:XX

My ears just go deaf from time to time. 21F 15:XX:XX

**4.2.2.7 Nose**

Nose feels weird, slightly itchy inside [10h00]. 24F 16:XX:XX

Nose itchy in the morning [08h00] 24F 18:XX:XX

Got up again [07h30] and had a bad sinusitis pain, in paranasal sinuses, with thick catarrh coming out of Eustachian tube, right side. Thick yellow-white mucus. Stinging, stitching pain from aperture of Eustachian tube to nose and right paranasal sinus. Frontal sinuses feel dull and achy with stupor [10h00]. 09M 03:XX:XX

My right ear canal, Eustachian tube and nasal catarrh, back of throat, on right side, keeps on itching since morning. Though in recent years I used to have this but it was both sides not right side only. 05F 07:XX:XX

Stuffy nose, slightly runny nose [08h00-22h00]. 27M 00:XX:XX

Slightly stuffy nose with sensation of warmth in nose. 27M 01:XX:XX

Stuffy, hot nose throughout morning. 27M 02:XX:XX

Cold and flu symptoms throughout morning; they started around 09h00: Sneezing which progressed to copious rhinorrhoea and the occasional cough. Rhinorrhoea was clear and watery; no burning. Discomfort around face and forehead. Better for rubbing, warmth, sunlight and fresh air. Worse
for air con, cold. Returned home and slept from 12h00-14h00. Symptoms improved towards the evening. 27M 09:XX:XX

Fever present. Spent entire day coughing and sneezing with an extremely runny nose. Nasal discharge was clear, watery and non-burning. Body ache predominantly in head, frontal region. Better for rest, cool air. Worse for heat. 27M 10:XX:XX

Runny nose and sneezing [09h40], stopped after 30 minutes. 27M 18:XX:XX

Wake up at 05h30; tired today and a little flu-ish. Watery catarrh flowing, both nostrils then OK in about an hour’s time. I think it’s because I did the washing late at night. 05F 03:XX:XX

I think I’m beginning to have flu. Now even my left nostril is clogged and I have a postnasal drip that’s nasty and makes me gag. I have a stabbing pain on left temple. 05F 08:XX:XX

My nostrils are still blocked [16h00], worse the left one; now I no longer have watery catarrh but a yellowish thick discharge that makes me want to vomit. 05F 10:XX:XX

Nose was completely blocked so I breathed through my mouth, even snored. I was totally unaware of it. Woke up with an itchy feeling at the back of my throat. 21F 14:XX:XX

I thought I was recovering today. My nose (both nostrils) is blocked and full of yellowish gunk that makes my sinuses and temples painful as I blow my nose. Mostly the root of my nose feels blocked. Then the fever started, it’s not even hot outside. Is it a fever or hot flush? But I feel very hot and sweat is dripping down my back. 05F 13:XX:XX

Now my right nostril is flowing with watery catarrh. 05F 22:XX:XX
My left nostril is blocked and there is tension at the base of my skull on my neck. 05F 37:XX:XX

My nose is stuffed up. I am battling to breathe outside in fresh air. 15F 00:XX:XX

Nose feels narrow on the inside, not stuffy, but the passage feels smaller. 21F 11:XX:XX

Nose feels funny, narrowed passage. 21F 23:XX:XX

Woke up with a stuffed nose. Nose passage feels narrow. 21F 41:XX:XX

Nose was still producing a lot of phlegm and I was spitting a lot as well to clear my throat. 18M 09:XX:XX

4.2.2.8 Face
I felt hot on my face and head, it reminded me of the ladies in menopause. 08F 00:XX:XX

Perspiration on head and face. 27M 30:XX:XX

When I woke up today [06h00] I wasn’t talking to anyone. Not that just I didn’t want to talk, but my lips wouldn’t open at all, my jaws were clenched shut. I didn’t feel like talking at all; the only thing I’m doing today since the kids have gone to school is sleeping. 05F 11:XX:XX

It feels like I have horns because of the two pimples on my forehead. 19M 03:XX:XX
I have cold sore on the corner of my left lip, but it’s not very itchy. 05F 18:XX:XX
Had a strange burning sensation on my upper lip. Lasted about 15 seconds. It was continuously tingling for the 15 seconds. It has completely disappeared now. 14F 02:XX:21

4.2.2.9 MOUTH
The back of my tongue near the back of my throat is bothering me. There is a pain. I can feel it even if I’m swallowing. It’s a deep sore pain on my right side. 05F 00:XX:XX

The sides of my tongue feel like they are sore [19h00]. 05F 06:XX:XX

Just in the morning, I had a dripping saliva running out of my mouth and I am extremely tired, exhausted and feeling dizzy and not wanting to talk to anyone, 19M 02:XX:XX

My mouth is horrible. My upper gum hurts on the right side, above my tooth, feels like I have an ulcer, but there is nothing there. Other parts of my gum feel torn and burns when brushing or when I drink fluids but everything is intact. 21F 14:XX:XX

I look in the mirror and I saw a big sore in my gum left side of the mouth right next to the last molar, the sore looks deep it’s about 1 x 1 centimetre. I suspect it’s the same thing on my pharynx because it’s sore as I swallow, the left side of my tongue is also sore just by closing the mouth. 05F 37:XX:XX

The itchiness now is worse. The inner corner of the left side of my mouth is swollen; the right inner ear is itchy. The left inner nostril is itchy and swollen. Now the whole mouth is itchy and swollen and my inner throat on the right side is starting to itch. Now the left back side of the tongue is itchy and swollen and outer left ear is starting to itch. My lower throat is itchy and I am wheezy and coughing. 05F 38:XX:XX

The allergy was so bad yesterday, I ended up in hospital because my mouth sides, upper lip, right side and back of tongue and pharynx were swollen, as well as right side of trachea and bronchi. I could feel it secreting catarrh and I
started coughing and couldn’t breathe. At hospital I was given an injection [23h00-00h00]. 05F 39:XX:XX

4.2.2.10 Teeth
Its 19h00, and my front upper teeth are painful from one incisor to another and all teeth in between. Worse when pressing them, I’m always pressing my teeth when my mouth is closed. I’ve never had painful teeth before. 05F 01:XX:XX

My teeth are so irritating me, vibrating worse with every time I blow my nose. All the front upper teeth. 05F 08:XX:XX

4.2.2.11 Throat
I feel pain on my right side [23h00], back of the throat feels as if a sore, worse when I swallow, whether food or drinking tap water. The pain is still pressing and becoming more pronounced. I’m starting to feel it, even though I’m not swallowing as time goes on. 05F 04:XX:XX

This morning when I woke up, I felt like I was coming up with flu, nothing specific, and I feel like there is a sore in my oesophagus, causing difficulty swallowing any food and saliva. 05F 34:XX:XX

I’ve been resting today, but pain sore on my pharynx as I swallow is increasing [22h00]. 05F 35:XX:XX

I went to buy fruit and yoghurt because the pain in the pharynx has increased up to the teeth: last molar, it’s on the left side, so I think I need to eat healthy food, get vitamins and brush my teeth a lot. 05F 36:XX:XX
I woke up with an itchy, scratch in the back of my throat. I feel very tired and unrefreshed. I just want to go back to sleep. Once I woke up and I showered I felt much better. 15F 01:XX:XX
My throat is getting sore as if someone is scraping the back of my throat with razor blades. My nose is a bit stuffed up and it is blocking me from breathing cleanly. I feel as if the air I’m breathing in is dirty. 15F 02:XX:XX
I woke up at 07h00 with a stuffed up nose. My throat feels swollen and every breath I take in I can feel. I feel as if my whole throat diameter has reduced and each breath taken in can be felt. It just feels tender. My voice has got more coarse and lower. 15F 03:XX:XX

Hoarse feeling in throat like a dryness, itchy feeling. 21F 09:XX:XX

Still have a slight funny feeling at the back of my throat. Coughing. I try to soothe the feeling, but it doesn’t. It feels as if I’ve been exposed to cold weather and rain. 21F 11:XX:XX

Throat feels a little scratchy better for sips of water. 21F 25:XX:XX

Woke with a hunger, my head was throbbing slightly and my mouth was dry, as if I had wiped it with a cloth. After coffee and breakfast I felt much better. My throat however was sensitive, as if someone was tickling it with a feather, the inside of my throat. The afflicted area was between my jugular notch and larynx. Aetiology: may have been because I was smoking last night, which I don’t do normally even when I’m out drinking. Modality: relieved by coughing and drinking. Around 21h00, the throat itchiness was worse and I was coughing a lot more. Started to generate phlegm, clear at first then changing to a little yellow. Had a headache which centred around my temples and throbbed. Went to sleep around 22h30. 18M 06:XX:XX

I definitely felt sick. Symptoms were similar to yesterday’s and as follows: Felt symptoms throughout the day. Throat was very sensitive, felt as if the inside was being tickled with a feather. Afflicted area was between jugular notch and larynx. Coughing was painful and felt like a scratching sensation afflicted area was below jugular notch. 18M 07:XX:XX

Noticed that the itchy feeling in my throat comes back whenever I breathe in cold air, like when I am in the anatomy museum at university, or at night. 18M 10:XX:XX
4.2.2.12 Stomach

Soo hungry. 13F 03:XX:XX

Have a bottomless appetite. 21F 38:XX:XX

Hungry! 22F 06:XX:XX

I felt hungry, and so thirsty [10h45]. 26F 00:01:15

Feeling so hungry; my appetite has increased. 26F 01:XX:XX

I’m so hungry, it’s like I never eat anything [14h30]. 26F 02:XX:XX

I was feeling so hungry, craving for beef panini [18h30]; still hungry [19h00].
26F 03:XX:XX

Woke up at 06h30, feeling so hungry, but can’t eat since it is early. 26F 05:XX:XX

I am very hungry; ate biscuit and rice and chicken curry [18h00]; was still hungry AGAIN, but just went to sleep [20h00] 26F 05:XX:XX

Increased appetite; I ate fried doughnuts but within minutes I was hungry. I am gaining weight due to eating more, but not that worried even though I still think about it. 26F 08:XX:XX

I also feel hungry, but if I eat I feel sick, so I don’t want to eat. Too full, bloated and nauseous. 16F 04:XX:XX

Feeling tired. I guess I’m eating more because of it. 22F 04:XX:XX

Empty sensations; hunger but irritable by having to think about what to eat and it feels like I have to think about what to eat. 19M 03:XX:XX
An empty sensation; hunger is what I feel, but the thought of eating makes me averse to eating and irritable. 19M 06:XX:XX

Huge appetite normally, now hungry for small quantities. Wants pickles and salt. 06M XX:XX:XX

I noticed that I don’t eat as much as I usually do, but whatever I do eat sustains me throughout the day. Also had a cappuccino with my lunch at 13h00 and stayed full all day; was not even hungry at dinner time at 19h00. 02F 03:XX:XX

Since taking the remedy I have noticed that my appetite has decreased. This is weird for me as I always feel hungry or peckish every two hours. For the last few days I’ve only had breakfast, and wait till after 17h00 to go home and eat. 15F 01:XX:XX

No appetite. Have to reminded about food. Craving nuts though. Weird, considering my poor appetite. 25F 08:XX:XX

Did not get hungry as I usually do and therefore did not eat too much food. 02F 04:XX:XX

Today was a fantastic day. Was in a great mood all day and again I did not eat much as I didn’t get hungry very often. Did not even have lunch today and I did not get hungry. 02F 05:XX:XX

Did not eat too much today. Did not feel hungry at all today. 02F 08:XX:XX

Again I did not feel too hungry and whatever I ate sustained me throughout the day. 02F 09:XX:XX

Felt nauseous as well stomach felt as if it was clenching. I had no appetite and had to force myself to eat. Salty foods I enjoyed, but sweet foods made my stomach churn. 18M 07:XX:XX
Feel nauseous when travelling in a car. 21F 27:XX:XX

Nausea and retching, with no vomiting for most of the morning. Associated with feeling of panic and an out of body sensation. I’m not sure of reality. 27M 31:XX:XX

Woke up in the morning, and just threw up everything I ate the previous night. Felt nauseous while travelling to campus by car. 21F 30:XX:XX

Nauseous especially during motion. Worse in the morning. 21F 36:XX:XX

Feel like throwing up after meals, even if I eat very little. 21F 10:XX:XX

Feel like throwing up after eating food. I have a horrible feeling in my stomach. It’s not necessarily a pain, it’s just discomfort which feels like it will be relieved after throwing up. 21F 12:XX:XX

Last night I ate then threw up. 22F 23:XX:XX

Have a very low appetite even to foods, low thirst for liquids, and I don’t visit the toilet often; when urinating very small amounts of urine leaves. 19M 01:XX:XX

Had severe dehydration, needed water. 22F 00:XX:XX

Thirsty but couldn’t drink cold water, normally I want cold water. 06M XX:XX:XX

Drank a lot of water today. 02F 05:XX:XX

I’m so thirsty and my mouth is very dry. I look at my water bottle; they are empty now I didn’t remember whether I drank all of my 2 litres of water, but I’m thirsty. 05F 02:XX:XX
I’m beginning to feel thirsty for cold water but not large quantities as I used to. 05F 19:XX:XX

I’m still not thirsty. I do drink water but I haven’t been able to finish my 2-litre of the day ever since the flu started. 05F 17:XX:XX

I have heartburn. It feels like a ball of painful heat is moving up and down between where the stomach and oesophagus join causing me to bleed. I just drank cold water; it’s better. 05F 12:XX:XX

I had a bit of indigestion towards the afternoon but it seemed to settle after a few hours. 02F 26:XX:XX

I slept late at 02h00 because I had heartburn, nothing could make it better. It was burning hot where the oesophagus joins the stomach even if I was sitting down but it’s better; this time there was no regurgitation. 05F 30:XX:XX

I still have heartburn from time to time, better to sit up and drink water, makes it better, and tiredness. I’m even sleeping; taking naps during the day. 05F 35:XX:XX

I started having heartburn after 10h00. I thought maybe it’s still the effect of breakfast. I had cutting pain above umbilicus after breakfast at 08h00. I didn’t know why, because I ate oats and apple, without sugar or milk which I know doesn’t agree with my body. The heartburn is feeling like a sore ball dragging up my oesophagus making me feel nauseous. Drinking cold water helps a bit. 05F 38:XX:XX

4.2.2.13 ABDOMEN
Cutting pain below the umbilicus on right side, in the region of the appendix which started under the right breast. I have to double up in pain, then the ball of pain and nausea right in the middle behind the sternum starts. Then, as that becomes better, cutting pains from side to side on the lower back start. Most importantly, besides the pain, this was embarrassing because I was in
church. Nothing seems to work to make it better; I just had to pray. 05F 38:XX:XX

Woke up with a dull right hypochondrial pain that extends to the back, < touch and pressure; > lying on affected side. 09M 01:XX:XX

I have a dull pain in the right hypochondrium. Liver feels enlarged with a dull ache radiating to the back. 09M 03:XX:XX

My tummy also feels inflamed and tender. Especially on my lower right quadrant of my abdomen. There are no other symptoms on my abdomen but there is no significant pain, just a bruised feeling. 15F 03:XX:XX

Woke up with a dull upper quadrant abdominal pain [07h30]. Liver sensation of being inflated, bouncing around like a ball, an inflated beach ball in my abdomen. It is irritating me. 09M 05:XX:XX

I feel some discomfort in my abdomen; bloated, especially right upper quadrant 26F 01:XX:XX

Irritable pain on my right lower abdomen. Feels better when I lean on the side. 25F 08:XX:XX

Pain in my lower right abdomen, but it is not severe. Feels uncomfortable when I move hastily. 25F 10:XX:XX

Abdominal pain again. The pain seems to worsen when walking a long distance. 25F 11:XX:XX
Pain in abdomen, as before, again. Lower right hand side, it is like a pulling and twisting pain. 25F 13:XX:XX

Appetite fairly good. Ate fruits most of the day. I feel comfortable when I snack a lot. But for some odd reason, today I am a little bit more flatulent than normal. 25F 13:XX:XX
After taking the remedy, I felt cramps in the abdomen 26F 00:XX:XX

Abdominal cramps at 12h40. Lasted five minutes; in the lower abdomen, disappeared on its own. 27M 03:XX:XX

Tummy cramps [05h00-07h00]: twisting and knotted pain; a stitch-like pain. I can’t walk or stand up straight; pain extends from right lower quadrant of tummy and radiates outwards, < eating, > lying down. Lower tummy is tender to touch. Extremely irritable. 24F 07:XX:XX

Tummy feels upset, churning sensation, < food. Tight feeling throughout day. 24F 40:XX:XX

Got symptoms of irritable bowel syndrome, and my eating is terrible. I’m mostly eating popcorn. 22F 14:XX:XX

I got IBS, and my tummy feels like it's going crazy. 22F 17:XX:XX

Feeling drowsy for most of the day. Having sleep and eating problems. I’m also getting IBS symptoms. 22F 24:XX:XX

There has been a slight cramping sensation in my intestines but only a 1/10 intensity. This lasted from about 15h00-18h00. 01M 04:XX:XX

A slight cramping sensation noted again, with 1/10 intensity, from morning on waking and has not changed after bowel movement. It lasted only during the morning. 01M 05:XX:XX

Sensation of increase in abdominal discomfort. Bilious gassy abdomen feels hard. 09M 01:XX:XX

Periumbilical pain, extending to suprapubic region. Belt too tight. Feels like an inflated ball is pushing outward onto the abdominal wall. Gassy, and
audible borborigmi. Periumbilical pain, continues even when undoing belt [17h00]. 09M 02:XX:XX

Around 15h15, craved coffee for the first time in such a long time. Between 15h30 and 15h45, tummy started making gurgling noises as if diarrhoea was settling in. Flatulence. 12F 00:XX:XX

I’ve noticed I have been a bit gassy tonight, smelly flatulence [23h30]. No other abdominal symptoms. It usually happens after I eat and the stuff is too oily. Could have been the crisps but I am thinking it was the awkward ice cream 13F 16:XX:XX

Flatulence again, similar to yesterday [17h30]. Must be the ice cream. Flatulence has stopped [19h00]; didn’t notice exactly when. 13F 17:XX:XX

I had a bit of flatulence a little while ago [17h00], most likely the sandwich. It pretty much only lasted a few minutes. Oh yeah, I did notice more flatulence tonight [22h00]. I am thinking it could still be the cheese sandwich. 13F 22:XX:XX

I noticed tonight that I was quite gassy [23h00]. I don’t know if it was the curry or Indian oily-ish snacks, or if it was the lemon cheese cake. At first I was burping a bit [18h00], then at 20h00 it became flatulence. Still is flatulence. I felt like passing stool; sat on toilet for a few minutes and only small hard stool came out. Maybe it just wasn’t my regular time. At 23h25, I felt a stitching cramping pain in my epigastric region, left centre area, intensity 5/10. It only lasted about five minutes after the stool. It wasn’t constant; just random cramping. 13F 26:XX:XX

Flatulence and burping at night. 13F 26:XX:XX

I noticed that I have been quite gassy again today; flatulence from around 15h00. I tried to pass stool again because I am still flatulating [19h30]. Couldn’t. Oh well, no pain or anything; just gassy. I’m still gassy/flatulence
[22h30]. I don’t quite know what I ate to be like this. Gassy from late afternoon; smell got worse from evening. 13F 34:XX:XX

Slight abdominal tingling. 21F 32:XX:XX

4.2.2.14 Rectum

Eating and drinking habits have been fairly consistent the past week or two. Not getting very hungry, however today I began to develop a little running tummy but not very bad. After each meal I needed to use the bathroom, I probably went 4-5 times today. 02F 14:XX:XX

This morning I went once it was OK, but after that every now and then throughout the day I had a vibrating sensation at the anus almost like that feeling before diarrhoea; that feeling of a weak sphincter. 13F 15:XX:XX

At about 14h15, I had diarrhoea with some flatus. There was no strong odour just the diarrhoea. 08F 01:01:15

Around 12h30 could feel bowel movements and the need to pass stool but held it in. I felt extremely hot and perspired profusely on face, neck, and chest. Could feel headache coming. Got worse as the day progressed. > outdoors and activities, e.g. walking, talking and eating. Felt extremely bloated and sick in stomach. Just wanted to pass stool. 12F 03:XX:XX

Pass stool: felt constipated, which took a few minutes for me to pass it, hard brown with a very bad odour. After passing stool, I felt relieved. 26F 14:XX:XX

I don’t feel good because I’m constipated. I can’t pass stool but I really want to. Straining doesn’t help. My day isn’t good if I don’t have a bowel movement in the morning. I feel full and bloated as if I am carrying waste, it’s unclean. I’m trying not to eat because I don’t want to fill my abdomen up any more. I would rather have a migraine than not have regular bowel movements. I am generally regular and pass stool around the same time everyday, so this is
very unsettling for me. I am constantly aware that I haven’t had a bowel movement and it makes me feel sad. Want to be alone and not talk to anyone. 16F 06:XX:XX

4.2.2.15 Stool
Violent bowel movement followed by hypervolemic spurting diarrhoea. Watery with intermittent gaseous flatus. Reaction painful, feels as though boring down, sensation rectum will prolapse. Faeces looks like muddy water mixed with a copious amount of yellow pus. Don’t know what it is, with faecal matter. Heart palpitations feel better after. 09M 00:01:30

At 09h00 I have had severe diarrhoea. My stool smelt smokey and looked like water mixed with brown rabbit poo. 15F 00:01:XX

There is blood in my stools [07h45]. Bright red today, yesterday was pale light red. I actually didn’t eat beetroot the day before, so it was blood yesterday. I did however eat beetroot yesterday, but that was definitely not the beetroot stools look. My stool had a bit of blood coated, but it was bright red on the tissue. No pain as yet. Stools have passed through quite easily both days too. Been eating loads of fibrous and raw vegetables these days. The only other times I have noticed blood when passing stool is when I get anal fissures, but that is always associated with constipation that only occurs when I’m too busy and missed the stool that day. The blood isn’t as red though either. 13F 03:XX:XX

Stool [05h55]: no blood this time, slightly more runny than usual and slight burning as it passed the anus; almost feel like after eating a chilli meal, but I didn’t eat spicy food yesterday. It wasn’t too runny to the extent of diarrhoea; between normal and diarrhoea. 13F 04:XX:XX

I was able to pass stool this morning, but that’s because there’s probably no more space left in my abdomen and it has to come out! Even though there was urge, the stool was hard, it felt hard, I had to still strain to pass stool when I did it was like tiny pellets. 16F 07:XX:XX
Passed a stool, hard brown. 26F 01:XX:XX

4.2.2.16 BLADDER
I woke up at 05h30 today with the urge to urinate. This is an unusual symptom for me as I usually wake up at 06h30 or 07h00 and normally the urge is not so great. This is also not normal as the last time I had anything to drink was at 20h30 the night before, and I went to the toilet to urinate last night just before I went to bed. 15F 02:XX:XX

Persistent need to urinate. Cannot seem to hold my urine for longer than an hour. 25F 04:XX:XX

I seem to be urinating a lot today, but didn’t drink a lot of water; every 30 minutes. It’s 12h30 and already I have urinated six times; urine clear. 26F 24:XX:XX

More frequent than normal this afternoon and very clear urine. I don’t recall drinking more than usual. Drink 1 ½ litres water. 13F 07:XX:XX

4.2.2.17 Male
Woke up with a dull ache in my left testicle extending to hip joint and buttocks [07h15]. 09M 02:XX:XX

I have a strong desire for sexual intercourse, but feel too irritable and lazy even to talk about it to my partner. 19M 01:XX:XX

Urination: its processes are normal, and I’ve noticed, when waking up in the morning, that there are no more erections due to increase in blood supply during the night. 19M 02:XX:XX

4.2.2.18 FEMALE
I have a vaginal discharge that is so fishy I can smell myself while walking, Yuk! 05F 02:XX:XX
My uterus and low back pain feel as if there’s a sore deep pain, and in the right ear it is beginning to ache, < with swallowing. My feet are aching. I don’t feel like talking to anyone. 05F 08:XX:XX

Hallelujah. I’m having menses today, I haven’t menstruated for the last 7 months, and then I’ve been spotting for the last 5 months. Though it’s horrible to menstruate I’m happy; I’m alive. The pains cutting from side to side above the pubic bone are killing me; < bending double. There is a heavy flow of red blood with red clots - even two pads at a time is not enough. 05F 11:XX:XX

I thought I had finished my menses yesterday but now I suddenly have a gush of red blood, no clots, but fishy smell. Horrible!. 05F 15:XX:XX

I’m menstruating a heavy flood. Red blood and dark big soft clots literally flows down my leg after an intense cramping or contracting pain in my lower back. Usually bathing with very warm water increases the flow, but makes the pain better. Now as I get into the water the pain and flow stop as soon as I step out of the water. I couldn’t even go jogging. 05F 16:XX:XX

I couldn’t go anywhere still today because of menses, I only accompanied my children to school, I came back wet and red. My libido is high 7/10, even though I’m menstruating. 05F 17:XX:XX

In the afternoon about 15h00 and 21h00 the menses were worse again. 05F 18:XX:XX

I’m still menstruating with heavy flow [13h00]. I’m even doing it at night but it’s worse during the day. 05F 19:XX:XX

Last night I had very heavy menstruation. I thought so, but today it is worse, I can’t even go out. I’ve never had such large blood clots in my entire life. My energy levels are so low, 3/10. I’m thirsty. I’ve been drinking a lot of water
alternating with juice the whole day to give me energy. I don’t feel hungry at all. So far I’ve eaten twice today and definitely not me. 05F 21:XX:XX

The irritation and the headache is beginning to bother me [18h00] and I’ve started spotting again. No no, not again. 05F 27:XX:XX

It seems like everything is starting again: blood clots, 5x2cm, dark red, are coming out everywhere I pee, but there is no pain. 05F 29:XX:XX

Now menstrual bleeding is worse, flowing through the legs. Taking a bath make it better. 05F 29:XX:XX

My menstrual cycle is messed up. I’m still spotting. 22F 22:XX:XX

I feel like my menstrual cycle is playing games; only spot in the mornings a little and sometime in afternoon. I’m getting annoyed. 22F 22:XX:XX

I’m spotting a brown discharge from my menstrual cycle. It started in morning and looks like it has ended. 22F 23:XX:XX

I still have droplet menses so I use a pad, I hate this. 05F 32:XX:XX

I’m still spotting. 05F 34:XX:XX

Spotting is increasing throughout the day, I don’t like this. 05F 35:XX:XX

Spotting has increased to such a point I consider it menstruation. 05F 36:XX:XX

I’m so not in the mood [07h30]. I woke up with heavy menstruation, the bed and linen is red. My menses are red with dark red blood clots, big. I’m so tired of this I can’t take it anymore. 05F 37:XX:XX

The menstruation pain I had at 18h00 was unbearable I was just on my way to the shops and had to come back. The pain made me double up, the
menses were so heavy I just had to sit down in the toilet and let everything flow for an hour. The blood clots were as huge as my hand [20h00]. 05F 37:XX:XX

I think my period is about to begin [22h30]; a very faint brown discoloration in my underwear. Will put a light pad on in case. If it really is then I am quite surprised. My physical PMS symptoms haven’t been too hectic; that is why I haven’t really been noticing, e.g. breast tenderness is almost always, and if normal was 100%, this time it is about 30%. You have to press on the breast to elicit the tenderness, unlike usually you can feel tenderness just on any movement. My skin hasn’t been too bad with larger pimples around my mouth either. 13F 08:XX:XX

I am getting my period. The discharge is very light brown tonight. Breast tenderness is about 30-40% today, slightly more than yesterday. Pimples on my chin and around my one lip have increased slightly in size. 13F 09:XX:XX

Blood dark brown, getting a more bright red colour. No clots, no pain. Just very, mild crampy feelings, but nothing severe enough to sit down/lie down to take medications. 13F 10:XX:XX

My tummy felt a little uncomfortable and was quite sore throughout the day. Normally pain is on the first two days of period. This pain is usually relieved by using a wheat bag on my tummy. 02F 23:XX:XX

I have two boils today on both sides of my vagina. I’ve never had them there in my life. When I was young I had them in the area between my anus and vagina. I want to kill the research student. The boils have a dull aching on pressure and feel as if there were huge balls underneath, though no heat. 05F 17:XX:XX

4.2.2.19 Respiration
I’m sweating on my forehead, body, I’m so frustrated. I feel like I’m suffocating I can’t breathe. 05F 08:XX:XX
Though I was breathing, I felt as if there is no air in my lungs. I’m not getting oxygen in my brain. I felt dizzy. I had to bow low so that my head is down and body up, and stop walking; as I walk fast. My heart is pounding fast, regular and sharp pains on my left shoulder and arm then the heartbeat slows down and I have difficulty breathing. 05F 19:XX:XX

I couldn’t breathe if I walked fast, pain aching on back of neck, back, shoulder inner left arm and area where heart is. I have to stop so many times to try and catch my breath. 05F 23:XX:XX

I felt better this morning, as I woke up. I’d decided to go to the University after accompanying my daughter to school, only to find that on my way I still have difficulty breathing. Though I’m drawing air in it feels no oxygen goes to my brain, and aching over my left shoulder neck and arm, I had to sit down, and my face was pouring with sweat, worse forehead. 05F 24:XX:XX

I have been so tired of getting sick I went jogging, because I was irritated at 18h00 and I could feel the headache starting. I thought since I have difficulty breathing when I walk fast, it’s going to be worse, but jogging was fine. Yes, my performance lessened. I did have difficulty breathing at the beginning, but then, as I continued and stopped inbetween, it wasn’t. 05F 25:XX:XX

When I went to church, for the first service [07h00], I had difficulty breathing. I had to stop in between. When I reached church I was puffing, sweating on my forehead with pain of my shoulder, neck, left arm and my heart was beating fast but regular. 05F 27:XX:XX

On my way to University I still had difficulty breathing and pain in my left shoulder and arm. 05F 28:XX:XX

My breathing is terrible. I guess my sinuses are not good today. 25F 12:XX:XX
My chest was feeling slightly tight around the centre [05h30]. Bronchi/tracheal bifurcation area, upper chest, throat was itchy just under the laryngeal area; coughing every now and then from the itchy throat. I can feel phlegm building in the itchy throat area. I think it was because I was warm in bed, then getting out to change when it was cooler, jumping in the car with the air-conditioning on. Itchy throat, tightish chest. Mild, subtle. It seemed to have stopped at 06h00, once the air was warmed and I had warmed up from morning. In lectures [10h30], especially on deep inspiration, my chest was feeling similar to the chest in the morning. Less tight chest, but itchiness in the trachea was present. Deep inspiration and itchiness could trigger a cough. Not severe, probably to counteract the itchy sensation. Could feel phlegm collecting in the trachea, but couldn’t really cough it out; < when air conditioner was on cold. I didn’t really notice but itchiness thing is better [11h30]. I’m not coughing, but can still feel itchy throat on deep inspiration. 13F 09:XX:XX

4.2.2.20 Cough
My upper chest, trachea and bronchus are so sore it’s like salt poured on an open wound, < with cold. I cough; it tastes as if I’m coughing blood; > warmth. 05F 10:XX:XX

I’m still coughing [21h00], a wet cough with accompanying pain as if there were a bleeding sore in the bronchi. 05F 17:XX:XX

My coughing is causing a pain in my rib cage each time I cough. When I cough my throat is being scratched by razor blades. Everything seemed to be exacerbated by the wind and cold rain. 15F 02:XX:XX

I have a slight random cough [08h00]. Same phlegm itchy sensation in the trachea, just below larynx. Not as itchy as previously, though cough just came up randomly. Mild symptoms 3/10. Not really coughing anymore [08h50]. 13F 11:XX:XX
A cough just popped up [08h40]. Similar spot as before; itchiness in trachea, just below larynx above sternal notch. Cough is dry, > drinking water. I don’t know if it is because I have been sitting in the car for half an hour; raining cold outside. 13F 16:XX:XX

I still have a nagging cough; it’s very irritating because there’s no reason for me to be coughing; < talking, exertion, night; > eating, drinking hot and cold. Dry hacking cough, no mucus no rattling, breathing fine. 16F 01:XX:XX

The cough has changed slightly. Spasmodic. I cough and cough and cough, and then I’m OK for a while. Then about an hour later I cough and cough, and so on; < night, talking, breathing cold air; > eating, drinking, not speaking. 16F 02:XX:XX

The cough is the same as yesterday. I feel very irritated that I have this cough. It is very inconvenient, especially if I am speaking or in public because I am coughing for no reason. I have to constantly have a sweet in my mouth so that I do not cough. This is really annoying. 16F 03:XX:XX

4.2.2.21 Expectoration
After prayer [19h30], my ears suddenly feel open, not blocked. The cough in my chest feels loosened such that I regurgitated a salty green sputum and nearly vomited. Even my nose is suddenly open, though the right feels slightly blocked. The top of my head feels icy cold. 05F 15:XX:XX

Phlegm production only starts once I wake up and get up from bed. Colour ranges from clear to yellow. No other abnormalities. 18M 14:XX:XX

4.2.2.22 Chest
I just came from jogging [09h00], today I was so tired, my heart was doing a somersault thumping so hard even my left arm and neck felt giddy and painful stabbing. I thought I was going to faint, so I was fast walking most of the time. Even my daughter was concerned. She has never seen me so tired
in jogging. I think it’s because last night I had a fever, but I thought I was OK this morning. 05F 09:XX:XX

Heart feels weak and fluttery but no arrhythmias [09h00]. 09M 01:XX:XX

Throughout today my heart felt like it was beating faster and I felt stressed. I’m usually a stressed person but usually the heart skipping faster lasts 5-10 minutes and stops. But today it was periodic. 15F 05:XX:XX

Heart still pounding [09h00]. 24F 12:XX:XX

Slight pain on right side of chest; more like pain. < sitting still. Lasts about a minute, then stopped. Dull pain. 24F 39:XX:XX

Feel a sharp pain in the middle of the chest around midday. Felt like a dagger. 25F 12:XX:XX

Pain seems to be coming from heart. Weakness; barely able to do work around house. Pain better from rest. 27M 35:XX:XX

My left breast is painful, on the left lower outer quadrant, better on wearing a bra, sore and bruised on pressure or letting them hang. Both breasts feel heavy, but right breast only bruised on pressure. 05F 04:XX:XX

4.2.2.23 Back

Today I woke up feeling a little better than yesterday but my lower back was extremely painful on the right on my spinous process. it was so tender I could not sleep on my back. 02F 13:XX:XX

Today the back pain is unbearable, an aching pain deep inside the backbone, lower back. Every movement is worse. It feels like I’m twisting the bones and they are grinding against each other. The right arm and shoulder are also painful. Even my uterus is aching right through to my sacral bone, pubic bone and buttocks. 05F 08:XX:XX
The back of my neck is sore; started on right, then left [18h00]. 05F 08:XX:XX

My neck always pains when I’m sitting. 22F 06:XX:XX

There are a few pains in the back, like postural pains on the right, close to the medial border of the scapula at the triangle of auscultation, but there’s nothing wrong with the breathing. 19M 03:XX:XX

At 06h45 today I went jogging; my back pain is very disturbing today. My strength has increased during jogging, though at the beginning I battle to breathe and cough a lot; still have flu. 05F 14:XX:XX

I am still drowsy [08h00], slept at 02h00, it’s difficult to wake up but I feel pain sharp stabbing pain under my left scapula, worse as I breathe in. I have to be still. 05F 05:XX:XX

My shoulders and back are very painful as if I’ve been beaten up. It’s the same thing I had when I started becoming sick two weeks ago. I think it’s because I went to the beach yesterday. Even then flu started after I went to the beach. But I didn’t swim at the beach, I just got into the ocean water just above my knees, because of the ‘Israelites crossing the Red Sea’ menstruation! The menses is better today. 05F 20:XX:XX

Back ache comes with slight irritation in the bowel. 25F 05:XX:XX

Back ache and bowel irritation persistent. 25F 06:XX:XX

Back itchy. 27M 00:XX:XX

4.2.2.24 Extremities

I slept at 07h00, and then woke to pee, with a deep aching pain in my left arm. It feels like it’s in my brachial artery near the cubital fossa. 05F 00:XX:XX
About half hour after taking the remedy my right arm had a dull pain but gradually subsided. 08F 00:00:30

My right shoulder is aching. 15F 02:XX:XX

My right shoulder and arm are sore and tender as if bruised. It’s also worse if I make any sudden movements on the right side. It’s also worse to lie down on my right. 15F 03:XX:XX

I wake up so tired today, my shoulder and arms are literally painful, a bruised feeling as if someone beat me up or I fell 3 feet down. Maybe it’s because I was at the beach yesterday, though swimming didn’t give me this feeling before. 05F 06:XX:XX

Today I woke with pain in a deep spot where the arm joins the shoulder, right side. It is sore, sore lifting my arm, makes me shudder with pain; massaging makes it better and worse. 05F 26:XX:XX

My back and right arm is still painful with a bruised feeling. 05F 06:XX:XX

My right arm and shoulder is still painful today [20h00]. 05F 07:XX:XX

Entire body is sore, all my muscles feel fatigued. My arms hurt just by carrying a small book. Want to stay in bed and not move. My right shoulder joint feels arthritic: it hurts especially on movement. Feels better with slight pressure but not too much. The pain is worst upon awakening and eases as the day progresses. 21F 14:XX:XX

Right shoulder hurts in the morning, pain subsides by midday. 21F 15:XX:XX
For the second time today my left elbow is painful right at the bones of the elbow, better for massage. 05F 00:XX:XX

My hands and feet are swollen worse on left side. I still have bruised pain on both of my shoulders, I feel like sleeping. 05F 09:XX:XX
My right knee is aching, usually it’s both knees before this time. 05F 07:XX:XX

I had leg cramps; haven’t been able to study much. 22F 17:XX:XX

Had leg cramps in the morning. 22F 23:XX:XX

I had leg cramps. 22F 24:XX:XX

My muscles keep cramping; worst ever cramp on my right bicep. I couldn’t move my arm from the straight position but couldn’t straighten the arm fully because it hurts so horribly. Also mild cramps in my right calf muscle, but not as bad. 21F 24:XX:XX

Woke up with a cramping left leg. Muscular, burning pain on the inside of my leg. < for hot shower. 12F 03:XX:XX

Also my ankle and calf muscle started to cramp at about 21h00. It was worse for being stationery and better for movement. I applied some Sloans ointment on it, which gave me some relief after a while. After applying the ointment I rested in bed. The cramp was severe. 08F 13:XX:XX

Muscle spasms twice in right lower leg. Sensation and feeling to rub face and eyes [09h15]. 27M 00:XX:XX

Left leg itchy, lateral malleolus. 27M 00:XX:XX

I have pains on my right ankle, especially when I put my feet down for a long time. It’s like I can stretch, nothing makes it better nor worse. 26F 14:XX:XX

Pain on my right ankle, dull pain, worse when I have put my feet down for a long time; worse for moving the feet, nothing makes it better. 26F 23:XX:XX
Joints felt very achy as if they were being tightened from the inside. Modality: felt better when cooking and moving around. 18M 07:XX:XX

It's like my bones are stuck together. 19M 02:XX:XX

When I was standing or walking in the morning, I felt pain on the heel of my right foot. It was sore. It was better if I was sitting or raised my legs. The pain in my right heel went away after a few hours [3-4 hours]. 08F 02:XX:XX

The heel of the right foot is sore, worse when putting pressure on it, like standing. The pain lasts for about an hour then goes away. Better when I raise my legs or when sitting. 08F 03:XX:XX

Still feel the right heel sore when I wake up in the morning but it goes away in about [30-60 minutes]. 08F 05:XX:XX

My feet were sore and it was worse when I was standing, better for sitting or raising the legs up. It also felt a little better after a warm bath. 08F 14:XX:XX

During the day, at 15h00, I was putting on lipstick. It felt so ticklish I laughed. Now it’s 01h30, my feet both of them, worse left foot, feel so ticklish and shaking of muscles. 05F 04:XX:XX

My feet are burning hot, < on top, my right then left. Below the scapula I have stabbing pains. 05F 08:XX:XX

As I was walking on the sand after yoga, I had a sharp pulling backwards type of pain on my heel under the foot, left, every time I plantar flexed. So I walked on the sand keeping my left foot flat. It only lasted about 2 minutes and I didn’t notice it again. 13F 09:XX:XX

My feet are so painful tonight [23h00], it has been a long time since they were. The legs both and feet are aching right inside the bone marrow.
Elevating the feet makes them better. I think the pain is because I’m stressed or anxious. 05F 03:XX:XX

There is a non-painful 1cm boil on the left side of my pubic bone and the side where my leg joins the vagina. It’s itchy, dry, flaky and red. Scratching makes it more red and sore. 05F 29:XX:XX

The development of a small cutaneous tumour on the palm of the left hand towards the thumb; it is slightly painful when pressed. 19M 01:XX:XX

My extremities are perfectly cold. It could be that there is a lack/shortage in blood circulation. 19M 08:XX:XX

Feeling hotter than usual [14h30] under arms. 24F 02:XX:XX

Hands and feet feel hot practically glowing like light bulb. No redness or sweating. 09M 00:XX:XX

4.2.2.25 SLEEP

I have found it difficult falling asleep. Not being tired enough and sleeping very light waking up easily. This morning I felt tired from disrupted sleep and even when tired at night I had difficulty falling asleep. Usually manage falling asleep when tired and will only wake up during heat when I am asleep. 01M 19:XX:XX

Coughed up a lot of phlegm. Climbed into bed around 22h00 but couldn’t sleep until 00h00. I kept tossing and turning. When I did get to sleep, I woke up at odd intervals to cough up phlegm. 18M 08:XX:XX

Difficulty falling asleep even when I am tired. Sleep easily disturbed for slightest noise or humidity. 01M 20:XX:XX

I hardly slept last night. It was terrible. I was so restless, and my tummy was upset. Slept a few hours. 22F 03:XX:XX
Feeling sleepy and hungry, but can’t eat since it is so late [23h00]. Went to sleep at 01h39 and woke up [02h00] because I was hungry; ate cakes together with cold milk. 26F 01:XX:XX

I tried to sleep [14h00]; was a little bit emotional, wanting to cry but trying not to. 26F 03:XX:XX

Sleep has been bad. During the weather when it’s hot, I notice I wake up drenched in sweat; like behind my neck its bad. Also my parents notice that I stress too easily, and my mum gave me something to calm down because she can’t handle me stressed and when I walk around trying to sleep. 22F 10:XX:XX

I’m enjoying being at home. I keep fighting my sleep because I like to wait till I can’t handle it anymore. 22F 14:XX:XX

I’ve never woken up this late. It’s about 10h45, and I still feel tired, as if I was in a soccer game. My head feels heavy and lying down makes it better, slight pains as if there were scrapings in the upper respiratory tract. My throat feels swollen. Ears are fine; tongue, teeth and gums seem fine. 19M 06:XX:XX

In the morning [05h00-05h30], I still feel very tired and have difficulty waking up. My eyes feel like closing. 08F 06:XX:XX

I still feel tired when awakening in the morning. The tiredness gets a little better during the day. 08F 07:XX:XX

Energy levels are low in the morning. Felt very tired by the afternoon and went to sleep at 18h00 and awoke at 21h15, but still felt sleepy and tired and went back to bed. 08F 08:XX:XX

Very sleepy. I had a full night of sleep, slept like the dead; uninterrupted. 21F 14:XX:XX
Took an afternoon nap and woke up tired. Slept late. 25F 11:XX:XX

Just want to stay in bed; I feel like I can sleep the entire day away. 21F 15:XX:XX

Usually never ever, ever sleep during the day, but with this remedy I keep feeling sleepy and if I have nothing very interesting to entertain me I fall asleep. Feel like I can just sleep forever. 21F 18:XX:XX

Can’t wake up in the morning it’s just so difficult. 21F 24:XX:XX

Bored, tired, sleepy. 21F 25:XX:XX

I overslept. I just couldn’t wake up; had to drag myself out of bed. 21F 28:XX:XX

I overslept; couldn’t wake up. Usually I have no difficulty waking up. Still feel tired. Body is sore, muscles feel over worked, and I can’t concentrate at all. Feel super sleepy. 21F 31:XX:XX

Oversleeping every single night. I usually sleep after 23h00 on week nights, but now I can’t keep my eyes open past 20h30. I just fall asleep around that time, and I don’t want to be disturbed. I’m usually a very light sleeper who gets up at the slightest of noises, but now I sleep like the dead. 21F 22:XX:XX

About 15h00, I had a nap because I was feeling so tired. I could not carry on anymore. If I did not rest. 08F 13:XX:XX

I’m so tired I’m going to sleep, I can’t even look at the computer or kids’ schoolwork. They have to look after themselves and prepare for school tomorrow. I’m tired, going to sleep. 05F 37:XX:XX
It is now 20h00 and I am quite tired and can’t wait to relax my aching body in bed. After my shower I feel much better. 15F 01:XX:XX

It is now 20h20 and I’m ready for bed, which is quite unusual as I only sleep after 22h30, but feeling quite tired today even though I woke up late. 02F 24:XX:XX

I was so drowsy [10h00] I literally slept through half of the sermon in church, even yesterday in the 20h00 movie at a local cinema complex. I slept through most of the movie. 05F 06:XX:XX

Can’t stay awake past 20h30. 21F 24:XX:XX

Tired, muscles aching, blocked nose when I woke up. Can sleep 24/7. Inactive; I’m losing my mind because I’m not getting anything done. 21F 39:XX:XX

Tired, sleepy, drowsy, nose blocked, nauseous and hungry all the time. 21F 40:XX:XX

I was very drowsy in church [11h00], even though I had slept early at 22h00. 05F 20:XX:XX

Woke up very tired today, took another two hour nap after the kids had gone to school at 07h00. 05F 28:XX:XX

Around 15h30-15h45, extreme weakness, lethargy and exhaustion. Just started falling asleep no matter how hard I tried to keep my eyes open. Felt nauseous, gassy, bloated and constipated. 12F 03:XX:XX

Woke at 06h30; earlier than I had hoped. I’m tired, lazing around, almost dozed off lying on the bed, so drained [13h00]. I have been soo tired these last three days since Sunday. All I wanted to do was nap nap nap, all day. If I didn’t go out today I would have been sleeping. I still feel tired after I wake.
Cannot do any work whatsoever, because I will definitely sleep earlier and move! I don’t know why. I have managed to cope OK-ish without a nap for a while now. Or maybe, I needed the naps and am wanting to catch up but still not. Anyway, I’ve just been tired. I dozed off on my bed first [23h30]. 13F 20:XX:X

Exhausted. No amount of sleep feels/seems to make me feel well rested. < standing, > sitting, reclining and lying down but then feel more awake, same for testicular pain. 09M 02:XX:XX

I woke up at 03h00 this morning feeling alert and fresh. Was in a great mood all day 02F 20:XX:XX.

**4.2.2.26 DREAMS**

**Pleasant**

Dreams water flowing 24F 00:XX:XX

Dreams, fire, smoke, sea water, sea sound, was terrified in dream, dog whining and weddings. 24F 02:XX:XX

Dreams of diving into swimming pools and not getting hurt; an intense blue pool. 24F 03:XX:XX

Dreams of stars, the sky, and eating. 24F 10:XX:XX

Dreaming of two women. 27M 02:XX:XX

Intense sexual dreams of older women in previous residence. 27M 04:XX:XX

Dreams, more colour in dreams. Complex mirror colour feeling texture. Grand purpose of the object, controlling the nature of the dream. Speech changed as well in dream talking like a woman, more descriptive, longer. 06M XX:XX:XX
**Nostalgic and Familial**

Slept early. Dreamed about a typical classroom situation. It was like I was thinking back about the day. 25F 12:XX:XX

Had dreams about arranged marriage and some camps I had been on when I was a baby/toddler. 22F 03:XX:XX

Dreams of friends and family; lots of girls. 27M 11:XX:XX

After the kids came back from school today I went to buy fruit and veggies. Then on my way back, I saw a belt, brown and white; as soon as I saw it, I thought it was a snake and I was startled. Then I saw it is a belt. This puzzled me because I have no fear of snakes. I'm afraid of them because they are poisonous, that’s all. This reminded me of a dream I had today when I slept this morning after taking the remedy. I dreamt that I was home in the Eastern Cape, my father’s home. The kids called me screaming about a snake. I came with the intention of picking up the snake and killing it to save my children. Mostly in my dreams I'm the survivor, I'm not affected. But before I picked up the snake my oldest son picked it up and it bit him in the hand. I woke up from the dream. During the dream I was frightened trying to reach my homoeopathic first aid kit though I knew he was going to die. So I woke up and prayed. Now, looking at the dream, I wonder if it has to do with the remedy. I trust the student researcher; she said it wasn’t a hectic remedy so it cannot be a snake. I think her supervisor, I’m almost sure if she is the one who allocated, she would give me a placebo. My supervisor, I don’t trust him; he has a twisted mind with a funny sense of humour. He may just give me the real remedy, a nasty one, just for the heck of it, because he knows I’m sensitive. 05F 00:XX:XX

I had a dream that I was in Mthatha, at my uncle’s place, but it was my home. There was a guest in the house but I was cleaning the yard. I was removing grass to make space for gardening and also to pave a walkway. The grass has deep big fertile white adventitious roots, the grass looks like kikuyu grass. I didn’t have the strength to dig up the roots so I asked my church
leader, husband and a coloured lady about my age whomever could help me dig up. The soil was sandy on top and deep black on the layer below. The coloured lady broke her heel and all of us were very thirsty for water. While I was still dreaming the phone rings to wake up [05h30] and prep kids for school. 05F 02:XX:XX

I dreamt I was in Mthatha, Eastern Cape. I met my friends there whom I haven’t seen in a long time and some I met in Durban. I met a group of people I didn’t know but I accidently told them that I usually dream dreams that come true and I resent that since some are bad dreams. So, since disclosing this, they classify me under a group of gifted people and together with other gifted people we had to enter a race in a deserted area. There we were to meet stones or dogs, but whatever we pick up it might be an enemy or a friend. We started running. My husband and I took a short cut to the end, then we discovered that there is no exit but many roads leading to nowhere. Then, in the dream, I remembered a Buddha’s saying that says that all ways do not lead to the outside but to the inside of ourselves, that’s where we’d find happiness. So I told my husband this and we called other people we were racing with to come together and live as family and love and protect each other instead of looking for a way out. I never picked up anything on the race because I wasn’t sure whether it would be friend or enemy. I woke up as if the dream were real, and it was 12h00 during the day. This was strange to me because I know nothing of the Buddhist ways or sayings; I’m a Christian. Strange. 05F 12:XX:XX

I had a strange dream about my brother-in-law. In the dream I saw him at a function and he told me that if my husband and I are not staying together and if I feel the marriage is not working out, then I must end it. It was strange because he always encourages couples to sort out their problems and not break their marriage, but in this dream, on the contrary, he told me to end my marriage. I was in shock and in total disbelief. I did not know what to think or wonder what was going on. 08F 14:XX:XX
Part 1: at a beach at night for a party with friends. I look along and there were really cool light structures in the water, like three or four giant square torches in the water. I walked up to have a better look. They were huge, two-storey high inflatable light up structures attached with a rope to a weight, to avoid it floating off. Groups of white people, girls and guys, were playing and practising routines on them. There were ropes attached to the top so people could climb up the structures. So people were practising synchronised performances with music. Looked amazing. Others were just playing and jumping off them from the top. Cool! Part 2: it was my cousin's matric dance yesterday. I dreamt we met with their family and other family friends at a hotel after his dance. We stayed at the hotel after his dance. We stayed at the hotel overnight. When I saw them, they were watching YouTube videos; the internet connection was really bad. Their default YouTube was YouTube China so I couldn’t find any videos that I wanted to show them that I knew were funny and that they would enjoy. The slightly repetitive part was every time I went in the elevator to and from a room, I would see the same man. He was a robust figure with a moustache and roughly square short hair cut. It was always really awkward, but we just said ‘hi’ when we saw each other. This part ended with me going out with friends, about to go shopping in a mall in Asia. Part 3: a very random scene. I think I was watching TV; an animal channel, National Geographic. They were explaining how a certain type of monkey, baboon-looking, the young males can have a penile issue. Sometimes the young male monkeys can suddenly have an overexcited penis. It becomes excited, it is painful, so they lie on the floor squealing in pain. Their penis also erects. The only way to help is by other apes/monkeys going up to it to rub the penis until it is calmed. They were saying this is serious and that it has killed baby apes of this species before. Their habitat was in a swampy area. Most of them were crossing shallow water in the scenes. As I said, very random. There was another part to the dream, but I can’t remember. 13F 24:XX:XX

Last night I had the weirdest dream!! The weird part is that my mother had a very similar dream with the same theme. I’m not sure if she could have symptoms but she was exposed to the remedy as she walks in and out of my
room. My dream was that I had an argument with one of my cousins whom I usually don’t like. Anyway, in my dream there was a chubby little baby. The baby was just a few months old as he couldn’t lift himself up or sit up. The baby had pooped and I was told by my aunt to change his diaper but she had already cleaned his bum and taken the old diaper away. For the rest of the dream I was attempting to change the diaper. The diaper was so complicated for me and I was so fascinated with it. My mum’s dream was also about changing the diaper, a towelling one, of someone else’s baby!! 15F 03:XX:XX

**Anxious and paranoid**

Came back from lectures to try and get some rest. Had an intense dream after sleeping for two hours [09h00-11h00]. The dream was about a man who was blind. I don’t know why, but he was important and had something of great value. Instead of sharing this object of great value with the world, he gave it to a painter in exchange for these amazing paintings. But the most amazing thing about the paintings was that you could see them when you ran your fingertips over their surface. The sensations I had from this dream were pity, for the blind man, and distrust for the painter who had a very sinister feeling about him. Spent the rest of the day trying to rest. 18M 08:XX:XX

Had a dream I was in the classroom and was asked to read but my voice wasn’t loud, I felt embarrassed. I dreamt of guys singing and dancing to rap music and I was a stranger wearing formal clothes. Woke up refreshed. 26F 02:XX:XX

Dreams of fighting with old high school friends at old house. 27M 32:XX:XX

Woke up hungry. I had dreamt of a coffin. I woke up worried because I have never dreamt of it before and I don’t know if it symbolizes death. 26F 08:XX:XX

Part 1: I was in a police van chasing robbers. Their car crashes and explodes, killing the victim. Only the victim’s feet remained, the robbers got out. Whole body wrapped in bandages, looked exactly like bandages. They were unharmed. Part 2: in clinic, listening to a discussion of a patient’s case.
Patient had Hepatitis B, haemorrhoids...then woken up by alarm. 13F 07:XX:XX

Dream very mixed. I just remember flashes of it. It was Indian-based though. One scene I remember was three Indian siblings, two brothers and a sister. I was a brother, I think. There was one of us getting married, our family are like secret protection services or something, like a secret agent. We were there at the wedding, but also out for something. I was the family member with a medical background too. Next scene; don’t know how it changed, but it became like an Aladdin scene: chaos and a fight or chasing a villain in the setting of the underground jewel place where Aladdin found the lamp under the lion sand figure. I was chasing a villain like Jafar on a magic carpet. Next second, the genie comes and takes Jafar outside, so I found out. The sultana, Jasmine, tied a tiger, genie, magic carpet and Jafar in handcuffs. The saltan was thanking us all for our help. There were also about four animals that helped out? So the sultan gave them power or something to turn into people. It was so confusing. Those were just the scenes. I tried to remember when dreaming. 13F 08:XX:XX

Dreams: running away, being chased, hiding from pursuer. Fear of being caught jumping over fence. 24F 07:XX:XX

Woke up 06h30. Sleep was broken and interrupted. I woke up screaming for help, ‘help me’, louder and louder. I felt something; a dark figure sitting on my chest. There was a cool breeze against my face. I woke in panic. I woke up and went to the bathroom. I had severe abdominal cramps, and went back to sleep. Dreams: unable to remember. 27M 27:XX:XX

Woke at 06h00. Generally quite a fearful night. Part 1 began with finding it difficult to fall asleep. When I was semi-asleep and half awake, I had a strange sensation/dream. It felt as though I floated up slightly off the bed; my limbs were tensing. I get a cold chill run through my body, I shiver for a second, then I return back in bed, then this repeated about three times. I opened my eyes to stop it because I knew it was a dream state. Then I
suddenly see three Brazilians circus performers next to my bed. 13F 34:XX:XX

Woke up from a dream about a terrible thunder storm, storm of the century [04h00]. < mentioned in dream, I was then struck by lightning on my back. Left rhomboids, trapezius muscle. Ears were ringing and felt drained of life from it. Woke up with a stiff cold back and bed wet from sweating profusely. Stayed up for 45 minutes and saw a thunderstorm out at sea. 09M 03:XX:XX

Woke up in the morning from fearful extreme nightmares; all sweaty and my heart is beating tremendously fast. 19M 09:XX:XX

Had a dream that gave me a fright; couldn’t stop thinking about it. 26F 24:XX:XX

**Repetitive**

I do not remember much, but I remember thinking to myself this is such a repetitive dream. Almost as if you play something, rewind, and play the scene again and again. One image I do remember was an image of a whale diving in and out of water. Just like the one I drew two days ago. I was staring at the picture a lot last night because I am not very happy with it, but I am giving it to someone so I was trying to convince myself that it is OK enough to give away as a gift. In the dream I could see the whale jump a few times, pause, rewind and play again. I kept thinking this was so repeatable. In between the whale images there was also another fairly repetitive scene. I was planning/discussing something with a small group of people.. I can’t really remember, but I think it was university-related with university friends. I really can’t remember the topic, but that scene kept repeating in between the whale images. We were discussing in a brown, darkish room, almost like an attic. I even woke up slightly in the middle of the night thinking why it is the same over and over. Another part of another dream that was repetitive: some university mates were discussing something else and some friends had two magic metal hoops that they were playing with, trying to figure out. These two hoops had a slight, small opening, so they weren’t totally closed circles. From
far they looked complete. So if you push the rings closely together at 90
degrees angles they would link together/pull separate as if it were magic.
That motion was repetitive because I took one to show my friends how it
worked and I eventually kept linking and pulling them apart over again when
talking with them. 13F 19:XX:XX.

It was another slightly repeatable dream, but this time it was different days so
there were slight variations. Our charity group, some main Durban members,
some local volunteers and I were doing an environmental awareness
promotion and or selling something. Either way, we went through a dodgy
part of the city and arrived at a small Asian mall. The shop assistant, at the
front store, had a long table and allowed us to set up on half of hers. Very
sweet. So we set up. Some charity members from Taiwan were here and
they gave a sign language performance everyday at the Asian mall. So as we
were setting up, the men came in, did a performance and left. We would walk
along to different people’s stores to promote environment protection,
recycling, vegetarianism, saving resources and energy etc. It is a fairly
common thing that we have done with this charity group, to go out to promote
environment awareness. Not only must we change others’ heads we must
look after the Earth too. When the day is finished we pack up and go back to
the car. It was repetitive because I dreamt of three or four days of doing the
same thing, just some slight changes, e.g. car would park in different areas;
microphone would break one day; the reaction of the shop assistant who lent
us their table would be slightly different, but always very polite and sweet; the
sign language performance would be slightly different. Although the same
performance, but they may do it differently like forget the next action one day
etc. Things changed like they would daily, but the same daily scenes were
repetitive. I saw a high school friend. It was her birthday yesterday, maybe
that is why she popped up. On the last day a university friend came as we
packed up, and we decided to go shopping in the Asian mall, mostly clothing
and shoes there. The shop assistants were slightly forceful, but I guess that
is how marketing works there, competitive. We ended up in a store selling
really nicely decorated tank tops. My friend picked one representing some
physical and emotional troubles she is going through. I was choosing
between a South African big five (I love the big five [lion, leopard, rhinoceros, elephant] or a colourful one of a love deer standing in a bright forest by a stream with the sunlight shining through the leaves. It caught my eye first. You pay, and the shop assistant prints it on the spot. I don't know how it ended. 13F 22:XX:XX

**Unremembered**
Slept well; had dreams, but hardly remember and don't want to try, though I could. 22F 06:XX:XX

I noticed that I am not dreaming too much. I usually dream even if I don't remember my dreams but I haven't in a while. 16F 05:XX:XX

**4.2.2.27 Fever**
My nose alternates between being stopped and running clear mucus. I'm a bit hot and sweaty, both balls of my feet are aching and hot, worse left leg, better cold water. I think I'm beginning to be feverish; I'm sweating on the face, my back and belly, armpits. I'm sneezing, pain in back around T10 and front around same place stabbing contracting pains. I don't think it's a remedy but I did start feeling feverish during the day. I think its low immune system, not sleeping, not eating fruit and veggies these days and washing the whole day in the cold. 05F 00:XX:XX

Fever in body with pain. I am tired and paranoid. My legs are painful and my back is also painful. 27M 32:XX:XX

After jogging home [10h00] I'm so hungry and I think I have fever again, my temperature is high, I'm sweating, my nose < left one is running clear catarrh. 05F 09:XX:XX

The fever is still raging in my body [17h00], my right nostril is dripping water as I try to read my Bible. I have put Vaseline in my nose, my right nostril feels very dry worse as I breathe in air yet is dripping. 05F 09:XX:XX
My temperature obviously is higher than normal, the breathing is all well. 19M 09:XX:XX

Feeling feverish. 27M 00:XX:XX

Feverish and paranoid. 27M 33:XX:XX

I still have fever. 05F 10:XX:XX

4.2.2.28 Perspiration
I’m so miserable I have been lying around naked the whole day, yet sweaty and cold sometimes. 05F 09:XX:XX

Perspiration: woke up hot and sweaty, especially on face. 24F 22:XX:XX

4.2.2.29 Skin
Skin hypersensitive to touch 24F 06:XX:XX

Skin feeling dry; not itchy 24F 22:XX:XX

My skin feels very dry, especially my legs and feet. On my left foot there is a fungal infection between the digit of the last 3 toes. It is very itchy and white in colour, and moist. Also, there are small vesicles, pimples on these toes and when I burst it, clear watery fluid comes out. 08F 06:XX:XX

The fungal infection was still present, but not as itchy as the previous day. The areas where the vesicles were on the toes were drying up and the skin in those areas was much darker. 08F 07:XX:XX

The fungal infection in the toes was extremely itchy and I scratched it, which made it itch even more. The white areas were moist with clear fluid on it. 08F 09:XX:XX
The fungal infection on the toes is drying in some areas and the skin had darkened in that area, black in colour, dry, scaly. 08F 13:XX:XX

My skin is itchy and sore in spots all over as if I have chicken pox blisters but I’m not. My scalp is sore, < with touch. 05F 09:XX:XX

As I took a bath I noticed that under both of my breasts and between my thighs it feels like a cut and it’s red. 05F 18:XX:XX

At 14h00 I ate homemade muffin, an apple and plum to try to alleviate heartburn. Instead, immediately, itchiness started. On my back, neck, armpits, ribcage, under the breasts, folds of arms, behind ears, folds of inner thighs, behind knees in the fold, in the hair, back of head, inner wrist especially left, and pubic bone. The itchiness was maddening, such that I had to go to the toilet at school to scratch because I was embarrassed at what people would think, it’s like I have pubic lice all over the body. After scratching the scratched parts feel swollen and inflamed. I had to go home. Then I noticed, that on my way home, that I’m still very tired, as if air is not reaching the lungs on going uphill, and that the itchiness stops in sunny places, but starts in shadowy places. 05F 38:XX:XX

The itchiness is worse [20h30], now even my hands, palms and around mouth. The hands are more itchy. I scratch until they are red, and still no relief. 05F 38:XX:XX

I came home and went straight to the bath because I can feel the menstruating cutting pains moving from side to side at the back and I’m itchy. Warm water causes more itchiness and cold water makes itchiness better. As I continue scratching skin on my wrist sloughs off, as if I’m shedding skin like a snake. The itchiness is even under the chin fold on the neck, < left side. 05F 38:XX:XX

After scratching on my arms there are little round wheals, crops of them, but under the breast they are bigger. 05F 38:XX:XX
4.2.2.30 Generals

Energetic
From 14h00-20h00, I was busy running around looking for Valentine’s Day preparations. I came home and baked and decorated. It is now 00h00… I actually had enough energy to stay up till now. 15F 00:XX:XX

Feeling better, even though I got up at 08h00. Feel like I’m full of energy and normal. 22F 04:XX:XX

Woke up at 06h30. Very ‘bright eyed and bushy tailed’. My sleep was deep. 25F 04:XX:XX

Today I woke up [05h30] very fresh and active physically and emotionally. Went jogging to ease back pain though it is better today. Still coughing. 05F 15:XX:XX

Woke up early with an amazing burst of energy. 25F 10:XX:XX

Woke up energetic. Appetite fairly good. 25F 11:XX:XX

I jumped in the pool for a bit [18h00]; so hot today. I actually wanted to go to the beach, but it was traffic time. Did a bit of exercise jogged around my pool for about 10 minutes. Trust me when I say that is a miracle. I hardly get to/feel like doing exercise. 13F 12:XX:XX

Body pain and exhaustion
Today I woke up tired and in pain. My muscles are still extremely tight and painful and have been feeling this way all day. Headache on the right in the sub-occipital area is still quite persistent and together with the tight muscles is becoming quite debilitating. Feeling drained and tired because of the pain. 02F 16:XX:XX

I tried stretching the tight muscles today but it was too painful. 02F 16:XX:XX
I feel really tired and the body aches. It felt a little better after I had a bath. The body felt sore as if someone has given me a good hiding. 08F 03:XX:XX

Woke up tired, body aching, feeling as if my bones were breaking. As the day progressed started feeling a little better. 08F 04:XX:XX

In the morning [05h30], I still feel tired to wake up and come out of bed. Feels as if my bones are breaking. Every part of my body feels sore. 08F 08:XX:XX

Woke up this morning with a lot of difficulty. Body feels really sore and had the bruised feeling. 08F 13:XX:XX

Woke up about 06h00, my body is sore, feeling as if my bones are breaking. Some bones actually cracked when stretching my body which gave me some relief. 08F 14:XX:XX

Body feels tender; < movement. 24F 21:XX:XX

My body also feels very sore. I feel like I have aged so much in these few days, my body feels like an old lady who complains of body pains. 08F 15:XX:XX

My whole body simply aches from exhaustion. After I showered I once again felt better. 15F 02:XX:XX

My body still ached. 15F 04:XX:XX

Today I’m feeling a bit tired; my body aches [18h00]. Felt better after having a bath. 08F 19:XX:XX

My body still aching feeling sleepy and tired. Body pains are worse for exertion either physical or mental. Just felt like lying in bed. 08F 20:XX:XX
Today I woke up feeling dreadful, my body was aching, my nose was stuffy and congested, my throat was scratchy and I felt awful. I woke up and carried on as normal hoping I’d feel better as the day progressed, but I started to feel worse and it got to a point where I was so unwell I went to the doctor and got an antibiotic. 02F 12:XX:XX

My body aches; feels so tired and I think I’m coming down with flu. I can feel my nose starting to get congested 05F 00:XX:XX

I’ve been sleeping the whole day because I have flu which has progressed [14h00]. Now I feel like my breath is smelling rotten, my nose is blocked with yellow catarrh, thick. My bronchi are so painful when I cough; a wet cough non-productive. Now I’m developing a wheeze. 05F 11:XX:XX

Really tired and exhausted, head feels heavy, eyes are exhausted. My left side gums are sore; not sure why. I’m too tired to do anything. 22F 01:XX:XX

General run down feeling. Muscle fatigue. Very lazy don’t want to do anything. 21F 34:XX:XX

Entire body feels tired and sore. 21F 20:XX:XX

Sleepy, tired, muscles are sore. 21F 41:XX:XX

Lack of energy and tired. 27M 18:XX:XX

I woke up tired again today. It feels like I wake into an aggravation. I have an aching, dull headache today and don’t feel like getting out of bed. 15F 05:XX:XX

Exhausted more than usual [07h30]. Every action and movement is a tremendous effort. 8/10. 09M 04:XX:XX

I slept most of the time today, my body was exhausted and the more I slept the more I got tired. I read the Bible to avoid sleeping. 26F 09:XX:XX
Exhausted, body sore and sleepy. 26F 12:XX:XX

Tired but feel good. Extremely lazy and sleepy, totally tired, can’t function. 22F 24:XX:XX

I still feel so tired. 08F 12:XX:XX

What is annoying is that starting from midday, I felt fluish again, body bruising pain, fatigue, my right nostril started to block and neck tension at the base of the skull. 05F 37:XX:XX

Oh my God, it’s like the whole process is starting again, for the third or fourth time without rest. I thought before [that] the flu started after coming from the beach, this time I didn’t. 05F 37:XX:XX

**Craving coffee and fats**

I had a craving for coffee today. I could smell the aroma of coffee and even taste it. It was such a strong desire to have coffee right now [14h00] but I did not have it. 08F 05:XX:XX

Been addicted to coffee. Been drinking lots of it. Diet is out the window; tried to be healthy. I feel OK though, like I don’t care. 22F 08:XX:XX

Craving salt and vinegar chips and brie [cheese]. 09M 01:XX:XX

Craving nearly everything that I smell. I order fried chips for supper. What a guilty pleasure. 25F 01:XX:XX

During the day I was craving something fatty and spicy I bought KFC. 05F 09:XX:XX

Appetite for fried foods. 25F 05:XX:XX
**Sensitivity to cold**

Don’t like ice water anymore. 21F 09:XX:XX

Not thirsty but I keep having sips of water because it feels nice. I prefer cooled water, not ice; ice water makes me cringe. 21F 23:XX:XX

Hate the cold, usually love it. 21F 16:XX:XX

Feeling very cold; my fingers and toes are ice. My nose is ice. I can’t stand cold weather. 21F 17:XX:XX

Sensitive to cold weather; can’t stand it, used to love it. Prefer room temperature drinks/ hot drinks rather than ice drinks. 21F 33:XX:XX

Extremely sensitive to cold, I usually love it, now I can’t stand it. Prefer room temperature beverages and food. 21F 38:XX:XX

Sensation of heat. 27M 00:XX:XX

**4.3 REPERTORY**

The conversion of proving symptoms to repertory rubrics was conducted in accordance with the principles laid down by Schroyens (2002:36-37). The method employed for grading of symptoms is a combination of grading according to frequency of symptom occurrence (Sherr, 1994:85) and grading according to the number of provers experiencing the particular symptom (Schroyens, 2002).

**4.3.1 KEY**

Rubrics are referenced as follow:

<RUBRIC> <SUBRUBRIC(S)> <DEGREE>

**4.3.2 RUBRICS FOR UBIQUINONE**

- Grade 4 rubrics are in BOLD TYPE, IN CAPITAL LETTERS
- Grade 3 rubrics are in bold type, in lower case
Grade 2 rubrics are in *italics*
Grade 1 rubrics are in plain type

4.3.2.1 MIND

MIND: Absentminded (2)
MIND: Absentminded, dreamy (2)
MIND: Abstraction of mind
MIND: Ailments from, embarrassment (2)
MIND: Ailments from, rudeness of others (2)
MIND: Ailments, discords between, friends; one’s

*MIND: Anger* (7)
MIND: Anger, evening
MIND: Anger, sudden
MIND: Anger, violent (3)
MIND: Anger, waking; on
MIND: Answering, monosyllables; in

*MIND: Anxiety* (7)
MIND: Anxiety, morning
MIND: Anxiety, anticipation; from
MIND: Anxiety, dreams; on waking from frightful (2)
MIND: Anxiety, money matters, about
MIND: Anxiety, sleep, going to, on
MIND: Bed, remain in bed; desire to
MIND: Brooding
MIND: Buoyancy
MIND: Caressed; being, wants to be caressed
MIND: Catatonia
MIND: Censorious

*MIND: Cheerful* (7)

**MIND: Company, aversion to** (10)
MIND: Company, aversion to, alone amel. When

*MIND: Company, aversion to, desire for solitude* (6)
MIND: Company, aversion to, fear of being alone; yet
MIND: Company, aversion to, sight of people; avoids the
MIND: Company, desire for
MIND: Company, desire for, alone agg., when
MIND: Concentration, active
\[ MIND: \text{Concentration, difficult} \]
MIND: Concentration, difficult, headache, with
MIND: Concentration, difficult, studying
MIND: Confidence, want of self-confidence
MIND: Confidence, want of self-confidence, failure, feels himself a
MIND: Confidence, want of self-confidence, self-deprecation
MIND: Confident
MIND: Confusion of mind
MIND: Content
MIND: Contradiction, intolerant of contradiction
MIND: Contrary
MIND: Cursing
MIND: Dancing
MIND: Darkness, agg.
MIND: Delusion, alone, being
MIND: Delusion, appreciated, she is not
MIND: Delusion, body, out of the body
MIND: Delusion, confusion; other will observe her
MIND: Delusion, criticized, she is
MIND: Delusion, drugged; as if
MIND: Delusion, enlarged, body is
MIND: Delusion, faces, see, distorted
MIND: Delusion, floating
MIND: Delusion, floating, air, in
MIND: Delusion, hearing, illusions of
MIND: Delusion, old, feels old
MIND: Delusion, people, behind him; someone is
MIND: Delusion, separated, body, mind are separated; body and
MIND: Delusion, snakes
MIND: Delusion, snakes, in and around her
MIND: Delusion, strong; he is
MIND: Delusion, suffered wrong; he has
MIND: Delusion, time, exaggeration of time
MIND: Delusion, watched, she is being
MIND: Despair
MIND: Despair, social position

MIND: *Dullness* (6)
MIND: Dwells, past disagreeable occurrences; on
MIND: Embraces, desire to be embraced

MIND: *Ennui* (6)
MIND: Excitement
MIND: Excitement, alternating with, sadness
MIND: Excitement, alternating with, sleepiness
MIND: Fear (3)
MIND: Fear, night
MIND: Fear, alone, of being
MIND: Fear, death, of, sleep, die if he goes to sleep; fear he will
MIND: Fear, failure, examinations; in
MIND: Fear, failure, of
MIND: Fear, insanity
MIND: Fear, noise, from
MIND: Fear, noise, from, sudden, of
MIND: Fear, opinion of others, of
MIND: Fear, people; of
MIND: Fear, poisoned, being poisoned; fear of
MIND: Fear, sleep, go to sleep; fear to
MIND: Fear, snakes
MIND: Fear, sudden
MIND: Fight, wants to

MIND: *Forgetful* (3)
MIND: Forgotten, something; feels constantly as if he had forgotten
MIND: Forsaken (3)
MIND: Haughty
MIND: Helplessness; feeling of

MIND: *High-spirited* (6)
MIND: Homesickness
MIND: Impatience (2)
MIND: Impulsive
MIND: Inactivity (5)
MIND: Indifference (8)
MIND: Indifference, duties, to (4)
MIND: Indifference, everything, to (2)
MIND: Indignation
MIND: Industrious
MIND: Insecurity, mental (3)
MIND: Intolerance
MIND: Introspection (2)
MIND: Irresolution
MIND: Irritability (11)
MIND: Irritability, evening
MIND: Irritability, night
MIND: Irritability, headache, during
MIND: Irritability, pain, during
MIND: Irritability, trifles, from
MIND: Jesting
MIND: Jesting, facetious; desire to do something
MIND: Laughing (2)
MIND: Laughing, serious matters, over
MIND: Laziness (5)
MIND: Laziness, physical
MIND: Memory, weakness (2)
MIND: Memory, weakness, done; for what he just has
MIND: Mildness
MIND: Mirth (4)
MIND: Mistakes; making (4)
MIND: Mistakes; making, time, in, conception of time; has lost the
MIND: Mood, agreeable (5)
MIND: Mood, changeable (3)
MIND: Mood, repulsive (2)
MIND: Morose  (2)
MIND: Music, amel,
MIND: Naked, wants to be
MIND: Noise, inclination to make
MIND: Optimistic
MIND: Playing, desire to play
MIND: Positiveness  (2)
MIND: Praying

MIND: Prostration of mind  (6)
MIND: Quiet disposition  (2)
MIND: Restlessness  (5)
MIND: Restlessness, night
MIND: Sadness  (4)
MIND: Sadness, constipation; with
MIND: Senses, acute
MIND: Sensitive  (4)
MIND: Sensitive, colours, to
MIND: Sensitive, external impressions, to all  (3)
MIND: Sensitive, mental impressions; to
MIND: Sensitive, noise, to  (2)
MIND: Sentimental
MIND: Shrieking
MIND: Shrieking, involuntarily
MIND: Shrieking, sleep, during
MIND: Spaced-out feeling  (2)
MIND: Stool, after, amel.
MIND: Strange, everything seems
MIND: Suspicious  (3)
MIND: Taciturn  (6)
MIND: Taciturn, morning  (2)
MIND: Thoughts, persistent
MIND: Thoughts, vanishing
MIND: Touched, aversion to be, ticklishness
MIND: Tranquillity  (4)
MIND: Unfortunate, feels
MIND: Violent
MIND: Vivacious
MIND: Weeping
MIND: weeping, causeless
MIND: Weeping, evening

4.3.2.2 VERTIGO

VERTIGO: Vertigo
VERTIGO: Afternoon
VERTIGO: Motion, head; of, agg.
VERTIGO: Rising, bed; from, agg.

4.3.2.3 HEAD

HEAD: Coldness
HEAD: Coldness, icy coldness
HEAD: Coldness, internally
HEAD: Coldness, Vertex
HEAD: Coldness, Vertex, icy coldness
HEAD: Constriction, Temples
HEAD: Dandruff
HEAD: Hair, dryness
HEAD: Heat
HEAD: Heat, accompanied by, Face; heat of
HEAD: Heaviness
HEAD: Heaviness, lying, amel.
HEAD: Heaviness, morning
HEAD: Heaviness, morning, waking; on

HEAD: Pain
HEAD: Pain, right
HEAD: Pain, left
HEAD: Pain, morning
HEAD: Pain, morning, waking; on
HEAD: Pain, afternoon
HEAD: Pain, evening
HEAD: Pain, accompanied by, nausea
HEAD: Pain, accompanied by, Neck, pain in, Nape of neck
HEAD: Pain, accompanied by, Nose, obstruction of
HEAD: Pain, accompanied by, numbness
HEAD: Pain, aching
HEAD: Pain, bending forward, agg.
HEAD: Pain, blowing the nose, agg.
HEAD: Pain, bursting pain
HEAD: Pain, bursting pain, fly to pieces; as if it would
HEAD: Pain, closing the eyes, amel.
HEAD: Pain, cold applications, amel.
HEAD: Pain, combing hair, agg.
HEAD: Pain, coryza, during
HEAD: Pain, cough, during, agg.
HEAD: Pain, cutting pain
HEAD: Pain, darkness, amel.

HEAD: Pain, dull pain

HEAD: Pain, extending to, Eyes
HEAD: Pain, grinding
HEAD: Pain, holding head, must hold head
HEAD: Pain, light; from, agg.
HEAD: Pain, lying, amel.
HEAD: Pain, mental exertion, agg.
HEAD: Pain, motion, agg.
HEAD: Pain, motion, agg., tearing pain
HEAD: Pain, motion, eyes; of, agg.
HEAD: Pain, noise agg.
HEAD: Pain, pressing pain
HEAD: Pain, pressing pain, weight; as from a
HEAD: Pain, pressure, agg.
HEAD: Pain, pressure, amel.
HEAD: Pain, pulsating pain
HEAD: Pain, pulsating pain
HEAD: Pain, raising head, agg.
HEAD: Pain, shooting pain
HEAD: Pain, singing, amel.
HEAD: Pain, sleep, after, amel.  
HEAD: Pain, sneezing, agg.
HEAD: Pain, standing, agg.
HEAD: Pain, sun, exposure of sun; from
HEAD: Pain, warmth, amel.
HEAD: Pain, turning head, agg.

**HEAD: Pain, Forehead** (6)
HEAD: Pain, Forehead, pulsating pain
HEAD: Pain, Forehead, extending to, Eyes, above
HEAD: Pain, Forehead, extending to, Eyes, behind
HEAD: Pain, Forehead, extending to, Eyes, behind, pulsating pain

**HEAD: Pain, Occiput** (5)
HEAD: Pain, Occiput, right  
HEAD: Pain, Occiput, evening
HEAD: Pain, Occiput, dull pain
HEAD: Pain, Occiput, extending to, Nape of neck  
HEAD: Pain, Occiput, extending to, Temples
HEAD: Pain, Occiput, extending to, Vertex
HEAD: Pain, Occiput, pulsating pain  
HEAD: Pain, Sides, right

**HEAD: Pain, Temples** (6)
HEAD: Pain, Temples, right  
HEAD: Pain, Temples, left  
HEAD: Pain, Temples, left, cutting pain
HEAD: Pain, Temples, cutting pain
HEAD: Pain, Temples, dull pain
HEAD: Pain, Temples, extending to, Occiput
HEAD: Pain, Temples, extending to, Temple to temple; from
HEAD: Pain, Temples, pressure, amel.
HEAD: Pain, Temples, pulsating pain
HEAD: Pain, Temples, shooting pain
HEAD: Pain, Vertex
HEAD: Pain, Vertex, extending to, Temples
HEAD: Pain, Vertex, pulsating pain
HEAD: Perspiration of scalp
HEAD: Perspiration of scalp, Forehead
HEAD: Sensitiveness, Scalp; of
HEAD: Sensitiveness, Scalp; of, right
HEAD: Sensitiveness, Scalp; of, touch; to
HEAD: Tingling, Temples

4.3.2.4 EYES
EYE: Discoloration, red
EYE: Discoloration, red, morning
EYE: Hair, sensation of hair in eye
EYE: Heat in
EYE: Heat in, closing the eyes, agg.
EYE: Heat in, closing the eyes, amel.
EYE: Itching
EYE: Itching, left
EYE: Itching, Lids
EYE: Itching, rubbing, amel
EYE: Lachrymation
EYE: Lachrymation, left
EYE: Pain
EYE: Pain, burning
EYE: Pain, rubbing, agg.
EYE: Pain, sore
EYE: Pain, touch, agg.
EYE: Pain, Lids
EYE: Pain, Lids, upper
EYE: Pain, Lids, upper, right
EYE: Rubbing the eyes, desire to
EYE: Styes
EYE: Styes, right
EYE: Styes, Upper
EYE: Swelling, Lids
EYE: Tired sensation

4.3.2.5 VISION
VISION: Dim
VISION: Dim, headache, during

4.3.2.6 EARS
EAR: Catarrh
EAR: Catarrh, Eustachian tubes
EAR: Itching
EAR: Itching, left
EAR: Itching, Meatus
EAR: Itching, Meatus, right
EAR: Itching, Meatus, right
EAR: Noises, rushing, water; as of
EAR: Pain
EAR: Pain, right
EAR: Pain, left
EAR: Pain, aching
EAR: Pain, blowing the nose agg.
EAR: Pain, swallowing, agg.
EAR: Stopped

4.3.2.7 HEARING
HEARING: Acute
HEARING: Acute, noise; to
HEARING: Illusions
HEARING: Impaired
HEARING: Impaired, right

4.3.2.8 NOSE
NOSE: Catarrh
NOSE: Catarrh, daytime
NOSE: Catarrh, followed by, Frontal sinuses; complaints of
NOSE: Catarrh, Postnasal (2)
NOSE: Constriction

**NOSE: Coryza** (6)
NOSE: Coryza, right (2)
NOSE: Coryza, morning (2)
NOSE: Coryza, discharge, with (3)
NOSE: Coryza, discharge, with, daytime

**NOSE: Discharge** (4)
NOSE: Discharge, clear (2)
NOSE: Discharge, copious (3)
NOSE: Discharge, mucus
NOSE: Discharge, thick (2)
NOSE: Discharge, watery (2)
NOSE: Discharge, yellow
NOSE: Discharge, yellowish white

NOSE: Dryness, Inside
NOSE: Dryness, Inside, right

NOSE: Heat in

NOSE: Itching
NOSE: Itching, inside

**NOSE: Itching, Inside, left**
NOSE: Itching, Posterior nares

**NOSE: Obstruction** (5)
NOSE: Obstruction, right
NOSE: Obstruction, left
NOSE: Obstruction, morning (2)
NOSE: Obstruction, morning, waking; on (2)
NOSE: Obstruction, alternating with, discharge
NOSE: Obstruction, breathing, mouth; must breath through
NOSE: Obstruction, Root, at

NOSE: Odors, putrid

NOSE: Pain

NOSE: Pain, stitching pain
NOSE: Pain, Posterior nares
NOSE: Pain, Sinuses
NOSE: Sneezing
NOSE: Sneezing, morning
NOSE: Sneezing, coryza, with
NOSE: Swelling, Inside

4.3.2.9 FACE
FACE: Clenched jaw
FACE: Eruptions
FACE: Eruptions, herpes
FACE: Eruptions, herpes, Lips
FACE: Eruptions, herpes, Lips, about
FACE: Eruptions, pimples
FACE: Eruptions, pimples, Forehead
FACE: Eruptions, vesicles
FACE: Eruptions, vesicles, Lips
FACE: Eruptions, vesicles, Lips, fever blisters
FACE: Eruptions, Forehead
FACE: Heat
FACE: Heat, flushes
FACE: Heat, sensation of
FACE: Pain
FACE: Pain, Lips, burning
FACE: Pain, Sinuses
FACE: Pain, Sinuses, Frontal
FACE: Pain, Sinuses, Maxillary
FACE: Perspiration
FACE: Perspiration, heat; during
FACE: Swelling, Lips
FACE: Tingling
FACE: Tingling, Lips
FACE: Tingling, Lips, upper
4.3.2.10 MOUTH

MOUTH: Dryness

MOUTH: Dryness, morning

MOUTH: Dryness, morning, waking; on

MOUTH: Dryness, thirst; with

MOUTH: Itching

MOUTH: Odor, offensive

MOUTH: Pain

MOUTH: Pain, burning

MOUTH: Pain, Gums

MOUTH: Pain, Gums, right

MOUTH: Pain, Gums, left

MOUTH: Pain, Gums, burning

MOUTH: Pain, Gums, sore

MOUTH: Pain, Gums, tearing pain

MOUTH: Pain, Gums, ulcerative

MOUTH: Pain, Tongue

MOUTH: Pain, Tongue, right side

MOUTH: Pain, Tongue, left side

MOUTH: Pain, Tongue, sore

MOUTH: Pain, Tongue, Root of

MOUTH: Pain, Tongue, Sides

MOUTH: Pain, Tongue, Sides, sore

MOUTH: Salivation

MOUTH: Salivation, morning

MOUTH: Salivation, profuse

MOUTH: Swelling

MOUTH: Swelling, Tongue

MOUTH: Taste, bloody

MOUTH: Taste, bloody, cough, during, agg.

MOUTH: Ulcers

MOUTH: Ulcers, Gums
4.3.2.11 TEETH
TEETH: Brushing, cleaning the teeth, agg.
TEETH: Clenching teeth together, desire to clench teeth together; constant
TEETH: Pain (2)
TEETH: Pain, evening
TEETH: Pain, blowing the nose, agg.
TEETH: Pain, pressure, agg.
TEETH: Pain, Incisors
TEETH: Pain, Incisors, Upper
TEETH: Pain, Molars
TEETH: Pain, Molars, right
TEETH: Pain, Molars, Upper
TEETH: Pain, Molars, Upper, right

4.3.2.12 THROAT
THROAT: Constriction
THROAT: Dryness (2)
THROAT: Hawk; disposition to
THROAT: Inflammation
THROAT: Inflammation, Pharynx
THROAT: Inflammation, Pharynx, left
THROAT: Irritation
THROAT: Itching (5)
THROAT: Mucus (3)
THROAT: Mucus, evening
THROAT: Mucus, clear
THROAT: Mucus, yellow
THROAT: Narrow, sensation
THROAT: Pain (3)
THROAT: Pain, right
THROAT: Pain, left
THROAT: Pain, night
THROAT: Pain, cough, during, agg. (2)
THROAT: Pain, cutting pain
THROAT: Pain, pressing pain
THROAT: Pain, raw; as if
THROAT: Pain, sore
THROAT: Pain, swallowing, agg
THROAT: Pain, Oesophagus
THROAT: Pain, Pharynx
THROAT: Scraping

THROAT: Scratching (4)
THROAT: Sensitive
THROAT: Swelling (2)
THROAT: Swelling, sensation of (2)
THROAT: Tickling

4.3.2.13 STOMACH

STOMACH: Acidity (2)
STOMACH: Appetite, capricious (2)
STOMACH: Appetite, constant
STOMACH: Appetite, diminished (4)
STOMACH: Appetite, diminished, menses, during, agg.
STOMACH: Appetite, easy satiety (2)
STOMACH: Appetite, increased (9)
STOMACH: Appetite, increased, morning (2)
STOMACH: Appetite, increased, night
STOMACH: Appetite, increased, accompanied by, nausea (2)
STOMACH: Appetite, increased, eating, not amel., by
STOMACH: Appetite, insatiable (2)
STOMACH: Appetite, ravenous
STOMACH: Appetite, wanting (7)
STOMACH: Appetite, wanting, accompanied by, nausea
STOMACH: Appetite, wanting, satiety, sensation of
STOMACH: Constriction
STOMACH: Emptiness
STOMACH: Epigastrium; complaints of
STOMACH: Eructations
STOMACH: Eructations, night
STOMACH: Gagging
STOMACH: Gagging, mucus in fauces, from
STOMACH: Heartburn
STOMACH: Heartburn, morning
STOMACH: Heat, sensation of
STOMACH: Heat, Epigastrium
STOMACH: Indigestion (2)

STOMACH: Nausea (9)
STOMACH: Nausea, morning (2)
STOMACH: Nausea, afternoon
STOMACH: Nausea, air; in open, amel.
STOMACH: Nausea, anxiety, with
STOMACH: Nausea, eating, after, agg. (2)
STOMACH: Nausea, eating, after, amel.
STOMACH: Nausea, motion, agg.
STOMACH: Nausea, riding, carriage; in a, agg. (2)
STOMACH: Nausea, vomit; sensation as if about to
STOMACH: Pain, burning
STOMACH: Pain, cramping
STOMACH: Pain, stitching pain
STOMACH: Pain, Epigastrium (2)
STOMACH: Retching

STOMACH: Thirst (6)
STOMACH: Thirst, extreme (2)
STOMACH: Thirst, large quantities; for
STOMACH: Thirst, menses, during, agg.
STOMACH: Thirst, small quantities; for
STOMACH: Thirst, small quantities; for, often; and
STOMACH: Thirstless (2)
STOMACH: Vomiting (2)
STOMACH: Vomiting, morning
STOMACH: Vomiting, eating, after, agg.
4.3.2.14 ABDOMEN

ABDOMEN: Ball, sensation of (2)
ABDOMEN: Ball; sensation of, ascending
ABDOMEN: Clothing; sensitive to
ABDOMEN: Distension (4)
ABDOMEN: Distension, Hypochondria, right
ABDOMEN: Enlarged, Liver
ABDOMEN: Flatulence (4)
ABDOMEN: Flatulence, afternoon (2)
ABDOMEN: Flatulence, evening
ABDOMEN: Flatulence, night
ABDOMEN: Fullness
ABDOMEN: Fullness, sensation of
ABDOMEN: Hard
ABDOMEN: Inflammation, Colon
ABDOMEN: Knotted sensation

ABDOMEN: Pain (8)
ABDOMEN: Pain, morning (4)
ABDOMEN: Pain, morning, waking; on
ABDOMEN: Pain, afternoon
ABDOMEN: Pain, bending double, amel. (2)
ABDOMEN: Pain, bending double, must bend double
ABDOMEN: Pain, bending forward, amel.
ABDOMEN: Pain, bending forward, amel., cramping
ABDOMEN: Pain, cramping (5)
ABDOMEN: Pain, cutting pain
ABDOMEN: Pain, drawing pain
ABDOMEN: Pain, dull pain
ABDOMEN: Pain, eating, after, agg.
ABDOMEN: Pain, lying, amel.
ABDOMEN: Pain, motion, agg.
ABDOMEN: Pain, pressure, agg.
ABDOMEN: Pain, sore (2)
ABDOMEN: Pain, stitching pain
ABDOMEN: Pain, touch, agg.
ABDOMEN: Pain, twisting pain
(3)
ABDOMEN: Pain, walking, agg.
ABDOMEN: Pain, Hypochondria
(2)
ABDOMEN: Pain, Hypochondria, right
(3)
ABDOMEN: Pain, Hypochondria, right, cutting pain
ABDOMEN: Pain, Hypochondria, right, extending to, Back
ABDOMEN: Pain, Hypochondria, lying, painful side, amel.
ABDOMEN: Pain, Hypochondria, pressure, agg.
ABDOMEN: Pain, Hypochondria, touch, agg.
ABDOMEN: Pain, Liver
ABDOMEN: Pain, Liver, sore
ABDOMEN: Pain, Region of Umbilicus
(3)
ABDOMEN: Pain, Region of Umbilicus, morning
ABDOMEN: Pain, Region of Umbilicus, cramping
ABDOMEN: Pain, Region of Umbilicus, cutting pain
ABDOMEN: Pain, Region of Umbilicus, sore
(2)
ABDOMEN: Pain, Sides
(2)
ABDOMEN: Pain, Sides, right
(2)
ABDOMEN: Pain, Sides, sore
ABDOMEN: Perspiration
ABDOMEN: Rumbling
(2)
ABDOMEN: Rumbling, diarrhea would come on; as if
ABDOMEN: Shocks
ABDOMEN: Tension
ABDOMEN: Tingling, internal

4.3.2.15 RECTUM
RECTUM: Constipated
(4)
RECTUM: Constipation, difficult stool
(2)
RECTUM: Constipation, ineffectual urging
(2)
RECTUM: Diarrhea
(5)
RECTUM: Diarrhea, morning
RECTUM: Diarrhea, afternoon
RECTUM: Diarrhea, night
RECTUM: Diarrhea, painful
RECTUM: Dragging
RECTUM: Flatus
RECTUM: Flatus, evening
RECTUM: Flatus, night
RECTUM: Flatus, offensive
RECTUM: Flatus, stool, urging for stool, but only flatus is passed
RECTUM: Pain
RECTUM: Pain, boring pain
RECTUM: Pain, stool, during, agg.
RECTUM: Prolapsus
RECTUM: Prolapsus, stool, during, agg.
RECTUM: Urging
RECTUM: Urging, eating; after, agg.
RECTUM: Urging, stool, before
RECTUM: Weakness, weak feeling

4.3.2.16 STOOL
STOOL: Bloody
STOOL: Bloody, covered with blood
STOOL: Brown
STOOL: Burning
STOOL: Copious
STOOL: Flatulent
STOOL: Forcible
STOOL: Hard
STOOL: Mucus
STOOL: Mucus, yellow
STOOL: Muddy
STOOL: Odor, offensive
STOOL: Odor, smoky
STOOL: Sheep dung; like
STOOL: Small quantity
STOOL: Soft (2)
STOOL: Watery (2)
STOOL: Watery, brown

4.3.2.17 BLADDER
BLADDER: Urination, urging to urinate, constant
BLADDER: Urination, urging to urinate, morning
BLADDER: Urination, urging to urinate, morning, waking; on
BLADDER: Urination, urging to urinate, frequent (3)
BLADDER: Urination, urging to urinate, frequent, afternoon

4.3.2.18 URINE
URINE: Copious, drunk; more than is (2)
URINE: Scanty

4.3.2.19 MALE
MALE: Erections, wanting
MALE: Erections, wanting, morning
MALE: Erections, wanting, sexual desire, with
MALE: Pain, Testes
MALE: Pain, Testes, left
MALE: Pain, Testes, left, aching
MALE: Pain, Testes, aching
MALE: Pain, Testes, extending to, Hip
MALE: Sexual desire, increased

4.3.2.20 FEMALE
FEMALE: Eruptions
FEMALE: Eruptions, pustules
FEMALE: Leukorrhea
FEMALE: Leukorrhea, offensive
FEMALE: Leukorrhea, offensive, fish-brine; like
FEMALE: Menses, bright red (2)
FEMALE: Menses, bright red, clotted
FEMALE: Menses, brown (2)
FEMALE: Menses, clotted
FEMALE: Menses, clotted, dark clots
FEMALE: Menses, clotted, dark red
FEMALE: Menses, clotted, large clots
FEMALE: Menses, copious
FEMALE: Menses, copious, afternoon
FEMALE: Menses, copious, daytime
FEMALE: Menses, copious, evening
FEMALE: Menses, daytime only (2)
FEMALE: Menses, painful (2)
FEMALE: Menses, protracted (2)
FEMALE: Menses, return, ceased; after the regular menstrual cycle has
FEMALE: Menses, scanty (2)
FEMALE: Pain
FEMALE: Pain, cramping
FEMALE: Pain, cutting pain
FEMALE: Pain, menses, during, agg.
FEMALE: Pain, Uterus
FEMALE: Pain, Uterus, aching
FEMALE: Pain, Uterus, bending double, must bend double
FEMALE: Pain, Uterus, cramping
FEMALE: Pain, Uterus, cutting pain
FEMALE: Pain, Uterus, extending to, Pelvis
FEMALE: Pain, Uterus, menses, during, agg.
FEMALE: Pain, Uterus, menses, during, agg., cramping
FEMALE: Pain, Uterus, menses, during, agg., cutting pain
FEMALE: Pain, Uterus, side to side
FEMALE: Sexual desire, increased
FEMALE: Sexual desire, increased, menses, during, agg.

4.3.2.21 LARYNX
LARYNX: Mucus, Air passages, in the
LARYNX: Pain, Air passages, cough agg.; during
LARYNX: Voice, croaking
LARYNX: Voice, hoarseness (3)
LARYNX: Voice, low
LARYNX: Voice, rough

4.3.2.22 RESPIRATION
RESPIRATION: Asthmatic
RESPIRATION: Complaints of respiration
RESPIRATION: Difficult (2)
RESPIRATION: Difficult, morning
RESPIRATION: Difficult, accompanied by, vertigo
RESPIRATION: Difficult, ascending, agg.
RESPIRATION: Difficult, bending, forward, amel.
RESPIRATION: Difficult, exertion, after, agg.
RESPIRATION: Difficult, exertion, agg.
RESPIRATION: Difficult, motion, amel., rapid motion
RESPIRATION: Difficult, walking, rapidly, agg.
RESPIRATION: Impeded (3)
RESPIRATION: Impeded, constriction, Throat; of
RESPIRATION: Panting
RESPIRATION: Snoring
RESPIRATION: Wheezing

4.3.2.23 COUGH
COUGH: Cough in general (5)
COUGH: Morning
COUGH: Night (2)
COUGH: Asthmatic
COUGH: Breathing, deep, agg.
COUGH: Cold, air, agg.
COUGH: Drinking, amel.
COUGH: Dry (3)
COUGH: Dry, morning
COUGH: Dry, night
COUGH: Dry, drinking, after, amel.
COUGH: Dry, drinking, amel.
COUGH: Dry, eating, amel.
COUGH: Dry, talking
COUGH: Eating, amel.
COUGH: Exertion, agg. (2)
COUGH: Hacking
COUGH: Irritation; from, Air passages; in (2)
COUGH: Irritation; from, Bronchi
COUGH: Irritation; from, Chest; in
COUGH: Irritation; from, Throat; in
COUGH: Irritation; from, Trachea; in
COUGH: Itching, Throat; in
COUGH: Loose (2)
COUGH: Painful
COUGH: Paroxysmal
COUGH: Sleep, disturbing
COUGH: Spasmodic
COUGH: Talking, agg

4.3.2.24 EXPECTORATION
EXPECTORATION: Morning
EXPECTORATION: Copious
EXPECTORATION: Difficult
EXPECTORATION: Greenish
EXPECTORATION: Mucus
EXPECTORATION: Purulent
EXPECTORATION: Taste, salty
EXPECTORATION: White, albuminous
EXPECTORATION: Yellow

4.3.2.25 CHEST
CHEST: Angina (3)
CHEST: Constriction (3)
CHEST: Constriction, morning
CHEST: Constriction, coryza; during
CHEST: Constriction, Bifurcation of trachea
CHEST: Heart; complaints of the, accompanied by, respiration, difficult
CHEST: Heart; complaints of the, accompanied by, Upper limbs, left, pain
CHEST: Heat (2)
CHEST: Heat, sensation of
CHEST: Heat, Axillae
CHEST: Intertrigo, Mammae
CHEST: Intertrigo, Mammae, Beneath
CHEST: Mammae, complaints of
CHEST: Oppression (4)
CHEST: Oppression, anxious
CHEST: Pain (3)
CHEST: Pain, noon
CHEST: Pain, cold, air agg.
CHEST: Pain, dull pain
CHEST: Pain, motion, amel.
CHEST: Pain, raw, as if
CHEST: Pain, sore
CHEST: Pain, stitching pain
CHEST: Pain, Heart
CHEST: Pain, Heart, Region of
CHEST: Pain, Mammae
CHEST: Pain, Mammae, left
CHEST: Pain, Mammae, sore
CHEST: Pain, Middle of chest
CHEST: Pain, Ribs
CHEST: Pain, Ribs, cough agg; during
CHEST: Pain, Sides, right
CHEST: Palpitation of heart (4)
CHEST: Palpitation of heart, morning (3)
CHEST: Palpitation of heart, anxiety, with
CHEST: Palpitation of heart, tumultuous
CHEST: Palpitation of heart, vertigo; with
CHEST: Perspiration
CHEST: Perspiration, Axillae
CHEST: Weakness, Heart, About the heart; sensation of weakness (2)

4.3.2.26 BACK
BACK : Pain
BACK, Pain, stitching pain
BACK: Coldness
BACK: Itching
BACK: Pain
BACK: Pain, right
BACK: Pain, accompanied by, Abdomen, pain
BACK: Pain, aching
BACK: Pain, contracting
BACK: Pain, cutting pain
BACK: Pain, extending to, Arms
BACK: Pain, extending to, Shoulder
BACK: Pain, extending to, Uterus
BACK: Pain, lying, back; on, agg.
BACK: Pain, morning
BACK: Pain, motion, agg.
BACK: Pain, sore
BACK: Pain, stitching pain
BACK: Pain, Cervical region
BACK: Pain, Cervical region, right
BACK: Pain, Cervical region, aching
BACK: Pain, Cervical region, sitting, agg.
BACK: Pain, Dorsal region
BACK: Pain, Dorsal region, right
BACK: Pain, Dorsal region, contracting
BACK: Pain, Dorsal region, stitching pain
BACK: Pain, Dorsal region, Scapulae
BACK: Pain, Dorsal region, Scapulae, right
BACK: Pain, Dorsal region, Scapulae, right, Between spine and right scapula
BACK: Pain, Dorsal region, Scapulae, stitching pain
BACK: Pain, Dorsal region, Scapulae, Below
BACK: Pain, Dorsal region, Scapulae, Below, left
BACK: Pain, Dorsal region, Scapulae, Below, inspiration, agg.
BACK: Pain, Lumbar region
BACK: Pain, Lumbar region, right
BACK: Pain, Lumbar region, aching
BACK: Pain, Lumbar region, cutting pain
BACK: Pain, Lumbar region, lying, back; on, agg.
BACK: Pain, Lumbar region, motion, agg.
BACK: Pain, Lumbar region, standing, agg.
BACK: Pain, Lumbosacral region
BACK: Pain, Lumbosacral region, extending to uterus
BACK: Pain, Spine
BACK: Pain, Spine, aching
BACK: Perspiration
BACK: Perspiration, Cervical region
BACK: Perspiration, Cervical region, Nape of neck
BACK: Stiffness
BACK: Stiffness, Cervical region, headache, during

**BACK: Tension**

**BACK: Tension, Cervical region**

**BACK: Tension, Cervical region, extending to, Nape of neck**

### 4.3.2.27 Extremities
EXTREMITIES: Coldness
EXTREMITIES: Coldness, icy cold
EXTREMITIES: Coldness, Fingers
EXTREMITIES: Coldness, Toes

**EXTREMITIES: Cramps**

EXTREMITIES: Cramps, Calves
EXTREMITIES: Cramps, Calves, right

EXTREMITIES: Coldness, 2
EXTREMITIES: Coldness, icy cold
EXTREMITIES: Coldness, Fingers
EXTREMITIES: Coldness, Toes
EXTREMITIES: Cramps, Calves
EXTREMITIES: Cramps, Calves, right

EXTREMITIES: Coldness, 2
EXTREMITIES: Coldness, icy cold
EXTREMITIES: Coldness, Fingers
EXTREMITIES: Coldness, Toes
EXTREMITIES: Cramps, Calves
EXTREMITIES: Cramps, Calves, right

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EXTREMITIES: Cramps, Calves, night
EXTREMITIES: Cramps, Calves, motion, amel.
EXTREMITIES: Cramps, Legs
EXTREMITIES: Cramps, Legs, morning
EXTREMITIES: Cramps, Legs, left
EXTREMITIES: Cramps, Upper limbs
EXTREMITIES: Cramps, Upper limbs, right
EXTREMITIES: Dryness, Feet
EXTREMITIES: Dryness, Lower legs
EXTREMITIES: Eruptions
EXTREMITIES: Eruptions, boils
EXTREMITIES: Eruptions, desquamating
EXTREMITIES: Eruptions, itching
EXTREMITIES: Eruptions, pustular
EXTREMITIES: Eruptions, vesicles
EXTREMITIES: Eruptions, Feet
EXTREMITIES: Eruptions, Feet, fungus
EXTREMITIES: Eruptions, Feet, vesicles
EXTREMITIES: Eruptions, Hands
EXTREMITIES: Eruptions, Hands, left
EXTREMITIES: Eruptions, Hands, Palms
EXTREMITIES: Eruptions, Thighs
EXTREMITIES: Eruptions, Toes, vesicles
EXTREMITIES: Eruptions, Toes, Between
EXTREMITIES: Eruptions, Toes, Between, fungus
EXTREMITIES: Excoriation, Thighs, between
EXTREMITIES: Heat
EXTREMITIES: Heat, Feet
EXTREMITIES: Heat, Feet, burning
EXTREMITIES: Heat, Hands
EXTREMITIES: Itching
EXTREMITIES: Itching, Ankles
EXTREMITIES: Itching, Ankles, Malleoli; around
EXTREMITIES: Itching, Feet
EXTREMITIES: Itching, Feet, tickling
EXTREMITIES: Itching, Toes, Between

**EXTREMITIES: Pain**

- EXTREMITIES: Pain, morning (3)
- EXTREMITIES: Pain, night
- EXTREMITIES: Pain, aching (3)
- EXTREMITIES: Pain, burning (2)
- EXTREMITIES: Pain, dull pain (2)
- EXTREMITIES: Pain, motion, agg.
- EXTREMITIES: Pain, motion, amel.
- EXTREMITIES: Pain, pressure, amel.
- EXTREMITIES: Pain, sore (2)

- EXTREMITIES: Pain, Ankles
- EXTREMITIES: Pain, Ankles, right
- EXTREMITIES: Pain, Ankles, motion, agg.
- EXTREMITIES: Pain, Ankles, sitting, agg.
- EXTREMITIES: Pain, Bones
- EXTREMITIES: Pain, Elbows
- EXTREMITIES: Pain, Elbows, left
- EXTREMITIES: Pain, Elbows, rubbing, amel.

- EXTREMITIES: Pain, Feet (3)
- EXTREMITIES: Pain, Feet, left
- EXTREMITIES: Pain, Feet, aching
- EXTREMITIES: Pain, Feet, burning
- EXTREMITIES: Pain, Feet, drawing pain

- EXTREMITIES: Pain, Feet, Heels (2)
- EXTREMITIES: Pain, Feet, Heels, right
- EXTREMITIES: Pain, Feet, Heels, morning
- EXTREMITIES: Pain, Feet, Heels, drawing pain
- EXTREMITIES: Pain, Feet, Heels, sore
- EXTREMITIES: Pain, Feet, Heels, standing, agg.
- EXTREMITIES: Pain, Feet, Heels, walking, agg.
- EXTREMITIES: Pain, Feet, Soles
- EXTREMITIES: Pain, Feet, Soles, aching
EXTREMITIES: Pain, Joints
EXTREMITIES: Pain, Joints, aching
EXTREMITIES: Pain, Joints, motion, amel.
EXTREMITIES: Pain, Knees
EXTREMITIES: Pain, Knees, right
EXTREMITIES: Pain, Knees, aching
EXTREMITIES: Pain, Legs (3)
EXTREMITIES: Pain, Legs, burning
EXTREMITIES: Pain, Shoulders (3)
EXTREMITIES: Pain, Shoulders, right (3)
EXTREMITIES: Pain, Shoulders, right, aching
EXTREMITIES: Pain, Shoulders, right, sore (2)
EXTREMITIES: Pain, Shoulders, morning
EXTREMITIES: Pain, Shoulders, aching
EXTREMITIES: Pain, Shoulders, lying, side; on, painful side, agg.
EXTREMITIES: Pain, Shoulders, motion, agg
EXTREMITIES: Pain, Shoulders, pressure, amel.
EXTREMITIES: Pain, Shoulders, raising, arm, agg.
EXTREMITIES: Pain, Shoulders, sore (2)
EXTREMITIES: Pain, Upper limbs (3)
EXTREMITIES: Pain, Upper limbs, morning
EXTREMITIES: Pain, Upper limbs, right (3)
EXTREMITIES: Pain, Upper limbs, left
EXTREMITIES: Pain, Upper limbs, left, aching pain
EXTREMITIES: Pain, Upper limbs, aching pain
EXTREMITIES: Pain, Upper limbs, dull pain
EXTREMITIES: Pain, Upper limbs, sore (2)
EXTREMITIES: Swelling
EXTREMITIES: Swelling, Feet
EXTREMITIES: Swelling, Feet, left
EXTREMITIES: Swelling, Hands
EXTREMITIES: Swelling, Hands, left
EXTREMITIES: Tension, Joints (2)
EXTREMITIES: Tumour
EXTREMITIES: Weakness

4.3.2.28 SLEEP

SLEEP: Comatose

SLEEP: Deep (2)

SLEEP: Disturbed (4)

SLEEP: Disturbed, cough, by

SLEEP: Disturbed, dreams, by

SLEEP: Disturbed, noise; by the slightest

SLEEP: Falling asleep, difficult

SLEEP: Falling asleep, early (4)

SLEEP: Interrupted (4)

SLEEP: Light

SLEEP: Need of sleep, great (3)

SLEEP: Restless (2)

SLEEP: Short

SLEEP: Sleepiness (13)

SLEEP: Sleepiness, morning (8)

SLEEP: Sleepiness, afternoon (5)

SLEEP: Sleepiness, daytime (5)

SLEEP: Sleepiness, evening (3)

SLEEP: Sleepiness, accompanied by, complaints; other (2)

SLEEP: Sleepiness, complaints causing sleepiness

SLEEP: Sleepiness, headache, during (3)

SLEEP: Sleepiness, indolence, with (3)

SLEEP: Sleepiness, lying, inclination to lying down

SLEEP: Sleepiness, nausea, with

SLEEP: Sleepiness, overpowering (7)

SLEEP: Sleepiness, weariness; with (5)

SLEEP: Sleeplessness (5)

SLEEP: Sleeplessness, night (2)

SLEEP: Sleeplessness, anxiety, from

SLEEP: Sleeplessness, fear; from (2)

SLEEP: Sleeplessness, midnight, 0h; until
SLEEP: Sleeplessness, midnight, before
SLEEP: Sleeplessness, restlessness, from
SLEEP: Sleeplessness, sadness, from
SLEEP: Sleeplessness, thoughts, activity of thoughts; from
SLEEP: Sleeplessness, weariness, in spite of weariness (5)
SLEEP: Unrefreshing (7)
SLEEP: Waking, difficult (2)
SLEEP: Waking, difficult, morning (2)
SLEEP: Waking, early; too (2)
SLEEP: Waking, frequent
SLEEP: Waking, hunger, from
SLEEP: Waking, late; too (4)
SLEEP: Waking, night, after midnight, 3h
SLEEP: Waking, perspiration, from
SLEEP: Waking, slept one’s fill; as having
SLEEP: Yawning
SLEEP: Yawning, frequent
SLEEP: Yawning, sleepiness, during

4.3.2.29 DREAMS
DREAMS: Accidents
DREAMS: Amorous
DREAMS: Animals (2)
DREAMS: Anxious (4)
DREAMS: Body, wrapped in bandages
DREAMS: Children; about (2)
DREAMS: Children; about, newborns
DREAMS: Coffins
DREAMS: Colored
DREAMS: Confused
DREAMS: Daiper, changing
DREAMS: Death
DREAMS: Death, relatives
DREAMS: Eating
DREAMS: Embarrassment
DREAMS: Events, forgotten, long
DREAMS: Events, previous, day; of the previous
DREAMS: Explosion
DREAMS: Family, own (3)
DREAMS: Fantastic (3)
DREAMS: Fire
DREAMS: Floating
DREAMS: Friends (3)
DREAMS: Friends, old (3)
DREAMS: Frightful (4)
DREAMS: Gardens
DREAMS: Grass
DREAMS: Hiding, danger; from
DREAMS: Lightning
DREAMS: Lightning, struck by lightning, being
DREAMS: Men, blind man
DREAMS: Music
DREAMS: Nightmares
DREAMS: Nostalgic
DREAMS: Paintings
DREAMS: Paintings; braille; as if
DREAMS: Pleasant
DREAMS: Pursued, being
DREAMS: Pursuing; of
DREAMS: Quarrels
DREAMS: Relatives (4)
DREAMS: Religious
DREAMS: Repeating
DREAMS: Robbers
DREAMS: Running
DREAMS: School (3)
DREAMS: Sea
DREAMS: Sexual
DREAMS: Shopping
DREAMS: Sick people
DREAMS: Snakes
DREAMS: Stars
DREAMS: Thirsty, being
DREAMS: Thunderstorm
DREAMS: Unpleasant
DREAMS: Unremembered (3)
DREAMS: Water (2)
DREAMS: Wedding (3)
DREAMS: Women

4.3.2.30 FEVER
FEVER: Fever (4)
FEVER: Night
FEVER: Catarrhal fever
FEVER: Perspiration, heat; with

4.3.2.31 PERSPIRATION
PERSPIRATION: Perspiration in general (3)
PERSPIRATION: Night
PERSPIRATION: Clammy
PERSPIRATION: Cold (2)
PERSPIRATION: Cold, vertigo, with
PERSPIRATION: Profuse (4)
PERSPIRATION: Profuse, night

4.3.2.32 SKIN
SKIN: Coldness
SKIN: Coldness, icy
SKIN: Coldness, sensation of
SKIN: Desquamating
SKIN: Discoloration, blackish
SKIN: Discoloration, white
SKIN: Dry

SKIN: Eruptions

SKIN: Eruptions, boils

SKIN: Eruptions, desquamating

SKIN: Eruptions, dry

SKIN: Eruptions, itching

SKIN: Eruptions, pustules

SKIN: Eruptions, urticaria

SKIN: Eruptions, urticaria, scratching; after

SKIN: Eruptions, vesicular

SKIN: Excrecences

SKIN: Intertrigo

SKIN: Itching

SKIN: Itching, scratching, agg.

SKIN: Itching, scratching, must scratch

SKIN: Itching, scratching, unchanged by scratching

SKIN: Itching, spots

SKIN: Itching, warm, bathing, agg.

SKIN: Moisture

SKIN: Sensitiveness

SKIN: Sensitiveness, touch; to

SKIN: Thick, sensation as if skin were thick

4.3.2.33 GENERALS

GENERALS: Morning

GENERALS: Side, left

GENERALS: Side, right

GENERALS: Sides, right, then left side

GENERALS: Activity, increased

GENERALS: Air, open air, amel.

GENERALS: Bathing, amel.

GENERALS: Bending double, agg.

GENERALS: Cold, agg.
GENERALS: Cold, air, agg.  (4)
GENERALS: Cold, air, aversion to
GENERALS: Covers, amel., desire for; and
GENERALS: Energy, excess of energy  (7)
GENERALS: Evening
GENERALS: Exertion; physical, agg.
GENERALS: Faintness, palpitations, during
GENERALS: Food and drinks, cheese, desire
GENERALS: Food and drinks, cheese, desire, brie
GENERALS: Food and drinks, coffee, desire  (3)
GENERALS: Food and drinks, cold drink, aversion  (2)
GENERALS: Food and drinks, cold drinks, amel.
GENERALS: Food and drinks, fat, desire
GENERALS: Food and drinks, fried, desire  (2)
GENERALS: Food and drinks, ice, agg.
GENERALS: Food and drinks, nuts, desire
GENERALS: Food and drinks, pickles, desire
GENERALS: Food and drinks, popcorn, desire
GENERALS: Food and drinks, potatoes, desire, fried  (2)
GENERALS: Food and drinks, salt, desire  (2)
GENERALS: Food and drinks, spicy, desire
GENERALS: Food and drinks, sugar, amel.
GENERALS: Food and drinks, sweet, agg.
GENERALS: Food and drinks, vinegar, desire
GENERALS: Heartburn, drinking, amel.
GENERALS: Heat, sensation of  (3)
GENERALS: Inflammation
GENERALS: Inflammation, Mucus membranes
GENERALS: Inflammation, Sinuses  (2)
GENERALS: Influenza  (5)
GENERALS: Lassitude  (12)
GENERALS: Lassitude, menses, during, agg.
GENERALS: Motion, agg.
GENERALS: Motion, agg., rapid motion
**GENERALS: Pain, aching**  
(4)

GENERALS: Pain, beaten; as if

GENERALS: Pain, cutting pain

GENERALS: Pain, motion, agg.

GENERALS: Pain, rheumatic

**GENERALS: Pain, sore**  
(4)

GENERALS: Pain, Muscles

GENERALS: Pain, Bones, broken; as if

GENERALS: Pain, Muscles, aching  
(2)

**GENERALS: Pain, Muscles, sore**  
(5)

GENERALS: Pulse, frequent  
(3)

GENERALS: Raising, affected limbs, amel.  
(2)

GENERALS: Rest, amel.

GENERALS: Restlessness

GENERALS: Rubbing, amel.

GENERALS: Sleep, after sleep, agg.

GENERALS: Sleep, amel.

GENERALS: Stool, after, amel.  
(2)

GENERALS: Tension, Joints; of  
(2)

GENERALS: Tension, Muscles; of

GENERALS: Uncovering, amel

GENERALS: Warm, agg.

GENERALS: Warm, amel.

GENERALS: Warm, bathing, agg.

GENERALS: Warm, bathing, amel.

GENERALS: Warm; becoming, amel.

**GENERALS: Weakness**  
(11)

GENERALS: Weakness, afternoon

GENERALS: Weakness, sudden

GENERALS: Weakness, vertigo, with  
(2)

GENERALS: Weakness, Muscular

**GENERALS: Weariness**  
(13)

**GENERALS: Weariness, morning**  
(4)

GENERALS: Weariness, morning, waking; on  
(2)
GENERALS: Weariness, afternoon (2)
GENERALS: Weariness, waking; on (2)
GENERALS: Wind, agg.
CHAPTER 5
DISCUSSION OF PROVING RESULTS

5.1 INTRODUCTION
This chapter aims to deliberate and present an overview of the proving in its totality. Prominent mental as well as physical themes will be discussed which were exceptional throughout the proving. Sherr (1994) explains the importance of viewing the entire proving group as if they were one individual experiencing the whole symptom picture. Thus this chapter will amalgamate the fragmented parts of this proving into a whole, to give a descriptive understanding of the remedy *Ubiquinone 30CH* in its totality.

It was hypothesised that the proving of *Ubiquinone 30CH* would produce clearly observable signs and symptoms in healthy volunteers. The data from this study provided no evidence to contradict the hypothesis and it is therefore concluded that this hypothesis is valid.

The data collected from the proving of *Ubiquinone 30CH* provided a total of 1159 rubrics. The majority of the rubrics were found in the Mind, Extremities and Head. The distribution of rubrics according to repertory sections can be seen below in Table 4.

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</table>
This information is further illustrated in Figure 5 to present a visual means for quantitative analysis of the representation of **Ubiquinone 30CH** throughout the various repertory sections.

Figure 5: The distribution of rubrics according to sections of the repertory

5.2 ABBREVIATION OF THE REMEDY

The recommendations made by Schroyens in the *Blueprint for a New Repertory, Synthesis Repertorium Homeopathicum Syntheticum* (2001:39-41) proposes some general rules for abbreviating remedies so as to remove the ambiguities as have been found in Kent’s repertory, and to improve further on the work started by Barthel and Klunker who were the first to
attempt such clarification. These recommendations have been adhered to here and thus the proposed abbreviation for Ubiquinone is Ubiq.

5.3 SUMMARY OF SYMPTOM OVERVIEW
At this point in the discussion it is essential to deal with the proving material as if the symptoms were all found in a single prover, hence painting the remedy picture of the patient who fits the remedy perfectly or which the ideal prover might generate (Sherr, 1994).

5.3.1 Mind
The proving of Ubiquinone 30CH produced a wide array of symptoms on the mental and emotional spheres, a number of which were largely distinct. The main themes that were displayed amongst the provers were:

- Increased energy and happiness
- Hypersensitivity and emotional fragility
- Irritability and exhaustion
- Apathy and prostration
- Anxiety and paranoia

Increased energy and happiness
Many of the provers experienced an increased amount of energy. Despite many negativities going on around them the provers were unaffected by these and still managed to keep in high spirits. There was a link between energy and happiness. Their high energy levels lead them to being in good esteem with themselves and the surrounding environment. The provers felt carefree, relieved and light as if a weight has been lifted from them (08F 33:XX:XX). Many external factors were going on around them which in normal circumstances would have altered their mood or changed their reaction to the situation but most of the provers were not bothered and still remained content. Much cheerfulness was also seen.

Hypersensitivity and emotional fragility
While being cheerful and content there was also extreme hypersensitivity and emotional fragility. With regards to being hypersensitive, provers were more
sensitive than usual to external factors such as noise and felt themselves being more in focus with what they were actually doing. With all this sensitivity being experienced this led to much irritability and an overwhelming sense of being. Everything and everyone seemed to bring on some annoyance. There was a need for attention from loved ones, wanting recognition and a human touch. They also felt lonely and isolated from others but on the other hand provers wanted to be alone and did not want company or to see people’s faces as this would increase the agitation they were feeling. This was the main contradictory symptom seen with regards to the mental state. The modalities seen were worse for talking, hearing people talk and light, while being better for silence and darkness. Provers felt fragile and broke down in tears emotionally for no particular reason, however they did feel better after they had cried.

Many felt directly attacked in confrontations where the arrogance of others made the prover feel as if their ‘sap’ had been sucked out of them, with their inner strength and drive being gone (16F 08:XX:XX).

Irritability and exhaustion
Provers were highly strung and extremely irritable, yet high concentration levels were maintained in some while others struggled to focus. Irritability levels even brought out vulgarity in a prover showing the extent of their mood (13F 11:XX:XX) along with them being short tempered and impatient. They tended to get upset easily and were weepy in situations. An aversion to people was seen and not wanting to participate in any goings on of the day. It felt easier to be by oneself with no need to converse. Along with such irritability, tremendous exhaustion was experienced. Provers were tired and had a sense of weakness. They longed to stay in bed or just relax and do absolutely nothing constructive. Many of them felt an improvement of energy levels through the course of the day but energy slowly decreased as the day progressed. With such exhaustion this led to them being quite disorganised during the day or with tasks as there was an inability to even gather their thoughts to think or talk to others. The anger and irritability levels seemed to drain their energy levels (13F 15:XX:XX).
Apathy and prostration
The mind felt exhausted. There was much restlessness which made the provers unable to get much done. They found it hard to concentrate and had a carefree, emotionless attitude towards things they would normally consider stressful. Apathy was shown towards studying and other people, with them still wanting to be on their own. They lacked motivation for the task they needed to complete with their minds being muddled with no flow or order in their thoughts. Forgetfulness of simple undertakings such as locking the car door (09M 07:XX:XX) was also revealed.

Anxiety and paranoia
A sense of anxiety and distress was felt in the provers. An unsettling feeling in general which was worse for thinking and better for being away from work (08F 30:XX:XX). Constant paranoia was experienced along with some delusions of the mind.

Symptoms of paranoia that one has forgotten to lock the car door, front door (09M 02:XX:XX), or that people around are messing with them or their food (27M 00:XX:XX) were shown. In situations like these the prover felt better being alone and quiet. Along with being paranoid this made them feel embarrassed and more suspicious of others. There was also a sense of being watched which occurred in the evening and the provers felt safe when their eyes were closed or if they were in the company of others (08F 16:XX:XX). The main fear that were seen was of being socially rejected (27M 17:XX:XX). One of the provers also had a fear upon closing her eyes that she would see a cobra which might bite and was quite fearful with a need for company (08F 12:XX:XX).

5.3.2 Vertigo
There were sensations of vertigo amongst three of the provers. The feeling was best described as a sense of dizziness along with weakness in the limbs. This was a short lived occurrence in which it did not hamper them from doing whatever was required at time.
5.3.3 Head

Headaches were very prominent in the provers and were experienced in different areas of the head.

**Occiput**

Headaches mainly started at the back of the head or at the base of the neck moving up to the back of the neck. Mainly the right occipital lobe was affected. The pain was dull, aching and pulsating. The headache was worse with any form of movement including the eyeballs and better from resting, applying pressure, the dark and cold compression.

**Vertex**

The headache was starting at the top of the head radiating down to the temples. A throbbing type of pain was felt where the head felt cold, cold down to the brain. The pain was so intense that the head felt like it was splitting down the middle to the temples and the brain was going to fall forward.

All pain was worse for movement, coughing, sneezing, moving the eyeballs and sunlight. The pain eased up and the pressure was lessened by holding the head between both hands, the dark and sleeping.

**Temples**

Temporal pain was experienced on both left and right side or radiating from one side to the other. The head felt heavy, dull, and stabbing as if the brain matter would explode into a thousand pieces. The pain also extended like an Alice band on the head from temple to temple. The provers could not focus or concentrate with the pain and it made them feel extremely drained. The pain was worse with noise, motion, light and lifting the head. The pain improved upon sleeping, being alone, having a warm shower and pressure.

**Forehead**

The frontal region of the head was also affected, mainly the forehead. The frontal area was sore, tender with a pulsating and pounding pain being felt. Yet again we see the pain linked to movement of the eyeballs, worse with
pressure, the head feeling heavy and moving the head increased the discomfort. The pain is better for rest, sleeping, being in a dark room and applying a cool towel to the forehead.

The scalp was also seen to be dry along with dandruff.

5.3.4 **Eyes**
There was eye pain to some degree particularly in prover 13F. The pain was located in the right upper lid in the right corner. The exact pain cannot be described, only a sensation or a feeling of having a stye even though one is not present. “If I had to describe the pain: like the pain when pressing a bruise, intensity 3-4/10, only slightly more pain which is worse for touch” (13F 20:XX:XX). Other accompanying pains that were experienced in the other provers were mainly redness with a itchiness which was better for rubbing (05F 02:XX:XX), watery, burning sensation(15F 01:XX:XX) and eyes feeling warm especially upon closing (24F 06:XX:XX).

5.3.5 **Ears**
One of the provers in particular had a blocking of the ears (05 F) along with a blocked nose. A sense of compression of the ear was felt mainly on the right side along with the intensity which was compared to that of boiling water under a tight lid. Pain extended down to the jaw and face of the prover which was also right sided. The most peculiar occurrence whilst having a blocked ear was the feeling of hearing the sound of running water.

5.3.6 **Hearing**
Acute hearing was noted, noises seem to be magnified. “I can even hear a cat downstairs yet I’m on the 11th floor” (05F 23:XX:XX). There was another mention of being able to hear imaginary running water from the same prover. Slight deafness was also experienced for a short period of time, mainly in the right ear (21F 00:XX:XX).
5.3.7 Nose
Many experienced itchiness of the nostrils which extended to the Eustachian tubes. “My right ear canal, Eustachian tube and nasal catarrh, back of throat, on right side, keeps on itching since morning” (05F 07:XX:XX). There was a lot of coryza, typically with a thin, watery, clear discharge that was non burning but did turn to a yellowish colour (05F 13:XX:XX). A dull congestion of the sinuses mainly paranasal and frontal sinus was experienced (09M 03:XX:XX) along with tension at the base of the skull at the neck.(05F 37:XX:XX). Flu like symptoms were present such as a blocked stuffy nose, having to breathe through the mouth (21F 14:XX:XX) along with sneezing and coughing. There was also a fever present (05F 13:XX:XX).

5.3.8 Face
There were a number of sensations in the face area. A sensation of heat and perspiration was on the head and face. (27M 30:XX:XX). Not wanting to speak as the jaw was clenched tight, the prover’s lips would not allow them to engage in any conversation. A burning sensation of the lips was also felt along with some tingling. A cold sore appeared in one of the provers but was not very itchy (05F 18:XX:XX).

5.3.9 Mouth
One of the provers (05F 37:XX:XX) had severe mouth symptoms. Mainly pain on both sides of the tongue was felt, which led to swelling and itchiness of the mouth and tongue. The itchiness extended down to the right inner ear and throat. (05F 38: XX:XX). The gums felt torn and burnt upon brushing. An ulcer was found on the gum on the left side of the mouth right next to the last molar (05F 37:XX:XX). Much discomfort was experienced even when swallowing. The allergic reaction was so intense that this prover landed up in hospital because the sides of the mouth, upper lip, right side and back of the tongue and pharynx were swollen, as well as the right side of the trachea and bronchi. She started coughing and could not breathe. She was given an anti-histamine injection at the hospital [23h00-00h00]. 905F 39:XX:XX). Beside these mouth symptoms one other prover experienced dripping saliva that was running out of the mouth. (19M 02:XX:XX).
5.3.10 **Teeth**
A sensation of pain deep in the teeth was felt. The pain was situated in the upper front region radiating from one incisor to another. A feeling of vibration was felt in the teeth which was worse upon blowing of the nose.

5.3.11 **Throat**
Pain was experienced in the back of the throat especially upon swallowing whether it was solids or liquids. (05F 04:XX:XX). The pain was described as a pressing type of discomfort moving to the oesophagus and pharynx (05F 04:XX:XX). An intense scraping at the back of the throat as with razors was also felt (15F 02:XX:XX) with a sensation of the diameter of the throat decreasing with every breath (15F 03:XX:XX). A hoarse dry, itchy feeling of the throat was felt (21F 09:XX:XX) which improved with for sips of water (21F 25:XX:XX). A sensitivity of the throat was in prover (18M 06:XX:XX) as if someone was tickling the throat with a feather. The afflicted area was between the jugular notch and larynx (21F 25:XX:XX) and was relieved by coughing and drinking. The itchy feeling seemed to come back when in contact with cold air (18M 10:XX:XX)

5.3.12 **Stomach**
Appetite was notably affected. There was an initial increase in appetite. A bottomless hunger was felt (21F 38:XX:XX), and even after eating the provers still felt hungry and dissatisfied as if they had never eaten. This was followed by a striking decrease in the appetite with an aversion to eating along with irritability (19M 03:XX:XX). Small portions of food were then wanted and seemed to sustain the patients for the entire day (02F 03:XX:XX) with a sense of feeling fuller for longer (02F 09:XX:XX).

A strong sense of nausea amongst the provers was experienced with a clenching feeling in the stomach (18M 07:XX:XX). The nausea seemed to be more pronounced with motion (21F 27:XX:XX).

Vomiting especially after meals was experienced, even if small quantities were eaten. They felt relieved after vomiting (21F 12:XX:XX).
There was a slight increase in thirst, mainly for cold water but not large quantities of it (05F 19:XX:XX). Some provers experienced heartburn and indigestion (05F 12:XX:XX, 02F 26:XX:XX). It was described as a painful heat that moves up and down between the stomach and oesophagus (05F 12:XX:XX). Drinking cold water seemed to alleviate the pain.

5.3.13 ABDOMEN

With regard to the abdomen, the right side was mainly affected. A dull right hypochondrial pain that extended to the back was mainly experienced. The pain was also said to be a cutting like pain below the umbilicus towards the appendix. The discomfort caused the prover to double up in pain, was worse for touch, pressure and better for lying on the affected side. A sensation of the liver feeling enlarged, bloated or as if an inflated beach ball is in the abdomen with a dull ache extending to the back was felt.

Abdominal cramps were also presented in the lower part of the abdomen along with a twisting, knotted type of pain. An increase in flatulence was noted with audible borborigmi.

5.3.14 RECTUM

Overall there were four provers who experienced a change in stools. They had slight diarrhoea with no strong odours. They felt the need to go to the toilet after every meal. (02F 14:XX:XX, 13F 15:XX:XX, 08F 01:01:15, 12F 03:XX:XX). Relief was felt after the passing of the stools.

On the other hand two of the provers experienced constipation (26F 14:XX:XX, 16F 06:XX:XX). One of the provers felt very unsettled for not being regular and passing a stool. This made her quite sad and withdrawn (16F 06:XX:XX)

5.3.15 STOOL

Stools varied, being described as watery, muddy or smoky in appearance (09M 00:01:30, 15F 00:01:XX). One of the provers had bright red blood in her stools with no pain, just a burning sensation as if she had eaten a spicy meal
(13F 03:XX:XX). The other set of stools were hard and brown. Some straining took place in order for the stool to be passed. (16F 07:XX:XX, 26F 01:XX:XX).

5.3.16 BLADDER
There was a discrepancy in urine output as compared to liquid intake. (26F 24:XX:XX, 13F 07:XX:XX). The urine was clear. Along with the frequent need to urinate there was also a sense of urgency even if there was a long interval before the next liquid intake.

5.3.17 MALE
A dull aching pain upon waking up in the left testicle extending to the hip joint and buttocks [07h15]. 09M 02:XX:XX) was experienced. An increase in libido along with a sense of irritability was mentioned, to the extent of not wanting to engage in a conversation with their partner about how they feel.

5.3.18 FEMALE
One of the provers experienced quite severe symptoms with regard to her menstruation. She did not menstruate for 7 months and only experienced spotting for 5 months prior to the proving (05F 11:XX:XX). This was followed by a heavy flow of blood with red clots. The flow was quite intense, as the prover described it as it being a gush of blood (05F 15:XX:XX) literally flowing down her legs. Clots were large in size and the flow was worse during the day and eased up at night along with a fishy odour. The pain was a cutting pain from side to side above the pubic bone which was better for bending double. The prover also developed 2 boils on both sides of her vagina. They had a dull ache with pressure and felt as if there were huge balls underneath, but no heat was felt in the surrounding area (05F 17:XX:XX).

Other female provers had disrupted cycles with much spotting being seen (22F 22:XX:XX). A faint brown discoloration was experienced which slowly progressed to a bright red colour. The only discomfort that was felt was cramping in the abdomen (13F 10:XX:XX, 02F 23:XX:XX).
5.3.19 Respiration
There was difficulty breathing along with breathlessness. The respiration was best described as battling to get enough oxygen into the lungs (05F 19:XX:XX). Even though the provers were breathing adequately it felt as if no air was getting into the lungs. A rapid heart rate was experienced. The breathlessness was exacerbated by walking fast or running. Many had to stop what they were doing in order to catch their breath or recover. A tight feeling over the chest area was felt especially on deep inspiration (13F 09:XX:XX). Other accompanying symptoms with the breathlessness was sweating on the forehead (05F 24:XX:XX) and a sharp, aching pain in the left shoulder, back, arm and neck (05F 23:XX:XX). The other was the build up of phlegm at the back of the throat which was itchy and brought on a cough (13F 09:XX:XX).

5.3.20 Cough
The coughs produced ranged from a wet to a dry cough. The wet cough caused much pain as if the throat was being scratched by razor blades with each cough (15F 02:XX:XX) The pain was mainly in the upper chest, trachea and bronchi (05F 10:XX:XX) and the rib cage each time they coughed. The cough seemed to be exacerbated by the wind and cold rain. (15F 02:XX:XX).

The dry cough caused itchiness in the trachea, just below the larynx above the sternal notch. The main modalities were worse for talking, exertion, night and better for eating, drinking, hot and cold (13F 16:XX:XX)

5.3.21 Expectoration
Phlegm from a salty green colour (05F 15:XX:XX) to a yellow colour (18M 14:XX:XX) was produced. Even though there was a production of sputum, one of the provers felt a sense of relief as their nose and ears became unblocked (05F 15:XX:XX).

5.3.22 Chest
There were chest pains with accompanying palpitations. The pains were described as stabbing (05F 09:XX:XX), dull (24F 39:XX:XX) and sharp like a
dagger (25F 12:XX:XX). The pain seemed to be coming from the heart (27M 35:XX:XX) and even extended down to the left arm and neck (05F 09:XX:XX). Pains were better for rest (27M 35:XX:XX). The palpitations were pounding ([09h00] 24F 12:XX:XX) and the heart was beating faster than usual (15F 05:XX:XX). The chest pain also seemed to affect the left breast, bringing about a bruised feeling (05F 04:XX:XX).

5.3.23 Back
There was some degree of back ache along with neck pain. The pain was described as being deep, aching and was mainly located in the lower back, the scapula, shoulders and the back of the neck. The back was so tender that one could not lie on the back (02F 13:XX:XX) and the pain was worse for movement. One of the provers described the pain as if the bones were twisting and grinding against each other (05F 08:XX:XX) showing the intensity and discomfort being experienced. A sharp stabbing pain under the left scapula was also felt (05F 05:XX:XX) along with itchiness of the back (27M 00:XX:XX).

5.3.24 Extremities
With regards to the extremities pain was mainly experienced on the right hand side and less on the left hand side.

The right arm showed a deep aching pain extending up to the shoulder. The arm and shoulder were tender with a bruised feeling as if the body was beaten up. Pain was mainly worse upon movement, early morning, or carrying anything and was better for massage, as the day progressed, or adding some pressure to the area.

The entire body along with the muscles was fatigued. The muscles, especially the calves, had many cramps. A burning sensation inside the calf muscle was felt and seemed to be better for movement and worse when the legs were stationary. Pain extended down to the ankles and all the joints felt quite achy as if they were being tightened from the inside of the muscle.
The heel and soles of the feet had a burning feeling which was worse when standing on the feet, better on raising the feet or when sitting. The hands along with the feet seemed to experience a sensation of heat on them, while some of the provers had icy cold hands and feet.

5.3.25 Sleep
The majority of the provers experienced difficulty in falling asleep. They felt tremendously tired and exhausted, yet they still battled to fall asleep. Once asleep, the sleep was very light and disrupted as they awoke many times and some were even hungry upon waking.

Many of the provers needed naps throughout the day as they were so worn out. They made referrals to wanting to sleep the entire day away or wanting to stay in bed all day long as this would make them feel better.

The sleepiness was seen throughout the day and they battled to keep their eyes open. Upon waking many of the provers awoke unrefreshed and were still drained. It took much effort to get up out of bed to start their day.

5.3.26 Dreams
The dreams experienced were placed into themes. The main themes that were seen were:

Pleasant
Dreams were pleasant. No harm was brought to anyone in the dreams. Many of the dreams featured around water, stars and the sky. The dreams had more colour and texture to them.

Nostalgic and familial
Many of the dreams were about known people in their lives. There were mainly family members in the dreams saying or doing odd random things.

Anxious and paranoid
Here there were many nightmares that were quite frightening to the provers. Dreams centred on fights, a coffin, being chased and thunderstorms.
Repetitive
One of the provers had dreams which were the same every night for a few
nights. There were slight variations each night but the dreams were the same
whereby she was performing the exact same things.

5.3.27 Fever
Three of the provers experienced a fever. Sweating on the face, back,
abdomen and armpits was shown (05F 00:XX:XX). Along with the fever were
body aches and pain (27M 32:XX:XX), a paranoid feeling (27M 33:XX:XX)
and flu like symptoms with a runny nose (05F 09:XX:XX).

5.3.28 Perspiration
Two of the provers suffered with perspiration ranging from hot and sweaty on
the face (24F 22:XX:XX) to feeling miserable and lying around naked the
whole day, alternating between being sweaty and sometimes cold (05F
09:XX:XX).

5.3.29 Skin
With regard to the skin there was mainly itchiness along with dryness of the
skin.

A fungal infection was produced in one of the provers between the digits of
the left toes. Vesicular eruptions that were white in colour, itchy and with a
clear fluid discharge were also noted (08F 06:XX:XX). This led to the area
becoming dry and scaly. The other symptom from prover (05F 09:XX:XX)
was more like an allergic skin reaction. The skin on the back, neck, armpits,
ribcage, under the breasts, folds of the arms, behind the ears, folds of the
inner thighs, behind the knees in the fold, in the hair, back of the head, inner
wrist especially the left, and pubic bone (05F 38:XX:XX) were extremely
itchy. Intense itchiness which made the prover scratch more leading to the
areas becoming red and swollen (05F 38:XX:XX) was felt. The itchiness was
worse with warm water and better with cold water. Little round weals were
found on the arms after scratching (05F 38:XX:XX).
5.3.30 GENERALS
There are four main themes that were shown throughout the generals section:

**Energetic**
Increased amounts of energy were experienced. Provers were full of energy and were able to accomplish more than usual in a day. They also seemed to awake early in the mornings with a burst of energy (25F 10:XX:XX).

**Body pain and exhaustion**
Extreme exhaustion to the point whereby the provers could not function (22F 24:XX:XX). Much laziness was seen along with being quite sleepy and tired all the time. Even waking up was so tiring that they awoke into aggravation (15F 05:XX:XX). The exhaustion led to the muscles of the entire body aching (08F 03:XX:XX). Sensations that were experienced were a general run down feeling (21F 34:XX:XX), and a bruised and tight feeling of the muscles (02F 16:XX:XX, 08F 13:XX:XX). The body also felt as if the bones were breaking (08F 04:XX:XX). To describe the tenderness of the muscles, it was as if someone had given them a good hiding (08F 03:XX:XX). Body pains were worse for movement (24F 21:XX:XX, 08F 20:XX:XX, 09M 04:XX:XX)

The exhaustion and body aches led to muscle fatigue which also led to the onset of flu like symptoms for the provers (05F 00:XX:XX, 15F 05:XX:XX, 05F 37:XX:XX)

**Craving coffee and fats**
An intense craving for coffee was experienced which was so intense that the aroma of the coffee could be smelt along with the taste of it (08F 05:XX:XX). Another craving was for fatty fried foods such as fried chips or KFC (25F 01:XX:XX, 05F 09:XX:XX)

**Sensitivity to cold**
Sensitivity to cold weather was felt whereby the cold weather could not be tolerated and room temperatures were preferred instead (21F 33:XX:XX).
Also sensitivity to cold water and ice water made the prover cringe. 21F 23:XX:XX. They preferred hot drinks and food at room temperature (21F 38:XX:XX).

5.4 ANTIDOTE
None of the provers who took part in the research showed an intense or marked reaction to the proving substance, hence there was no need for any antidoting of the remedy *Ubiquinone* 30 CH.

5.5 THE REPERTORISATION OF THE PROVING SYMPTOMS AND SUBSEQUENT COMPARISON
This was done in order to ascertain the closest existing remedies to *Ubiquinone*. The most prominent symptoms were used to provide the core of the remedy. The results are seen below and in Appendix H.

5.5.1 RESULTS OF THE REPERTORISATION
Repertorisations of six symptoms were chosen as representing the fundamental nature of *Ubiquinone* 30CH as described above in the summary overview. This produced the following results. *Natrum muriaticum*, *Nux vomica*, *Sulphur*, *Gelsemium sempervirens* and *Pulsatilla pratensis* were shown to be the most prominent on repertorisation of the proving symptoms of *Ubiquinone* 30CH.

*Natrum muriaticum* and *Sulphur* are remedies from the mineral kingdom while *Nux vomica*, *Gelsemium sempervirens* and *Pulsatilla pratensis* are from the plant kingdom which correlated the best.

5.5.2 COMPARISONS
*Ubiquinone* and *Natrum Muriaticum*
From the repertorising of the remedies of the mineral kingdom the one that bears the most resemblance and similarities to *Ubiquinone* is *Natrum Muriaticum*, (Nat-mur) Chloride of Sodium.
In the mental sphere a similarity is seen in both *Ubiquinone* and *Nat-mur*. One of the themes in *Ubiquinone* was that of hypersensitivity and emotional fragility. Extreme irritability with an overwhelming sentiment was experienced. There was a need for attention from loved ones but at the same time they preferred to be alone and isolated as this would increase their agitation. In *Nat-mur* we witness a similar feeling. A *Nat-mur* detests consolation and comes across as being irritable (Vermeulen, 2000:684). They want to be alone to cry and appear to bid for sympathy yet become angry when they are consoled (Vermeulen, 2000:684).

An increase in energy with happiness was shown in *Ubiquinone* and differs in *Nat-mur* as more sadness is experienced which alternates between tears and laughter (Vermeulen, 2000:684).

Vertigo is experienced in both remedies but *Nat-mur* feels as if they are falling with some jerking in the head and is worse for standing near a window and better for lying down (Vermeulen, 2000:685). The vertigo experienced in *Ubiquinone* was that of weakness of the limbs and dizziness.

Headaches were very prominent and severe in the remedy *Ubiquinone*. All aspects of the head were affected. The occiput, vertex, temples and forehead had much pain. The pain was seen as being dull, pulsating and pounding, with such intensity that the head felt like it was splitting down to the temples and the brain matter would explode into a thousand pieces. In *Nat-mur* the headaches were of a throbbing nature and feel as if a thousand little tiny hammers were knocking on the brain, especially in the morning on waking. Headaches are bursting on coughing, heavy, and are over the eyes with disturbance to the vision (Vermeulen, 2000:685) The movement of the eyeballs in *Ubiquinone* caused much distress and worsened the intensity of the headache while *Nat-mur* shows headaches due to eye strain or menstruation (Vermeulen, 2000:685). Both remedies share the intensity of the headache worsening from sneezing and coughing. The main modalities seen in *Nat-mur* are worse with motion, even of the eyes which was shared in *Ubiquinone*, and worse with frowning, reading, cold air and anger. The
headache is better with pressure on the eyes, lying still and perspiration (Vermeulen, 2000:685).

In *Ubiquinone* many of the modalities are shared such as better for being still, for applying pressure and resting.

Not many symptoms are shared when it comes to the eyes apart from both remedies feeling a bruised sensation upon the eye. Burning, itchiness and redness of the eyes are also shared in both remedies. *Nat-mur* has much more intense symptoms such as seeing fiery, zig-zag appearances around objects, lids are swollen and experiences much more lachrymation (Vermeulen, 2000:685). Ulceration, inflammation and a feeling of sand in the eye along with agglutination in the morning is seen in *Nat mur* (Vermeulen, 2000:685) while *Ubiquinone* did not experience these.

The ear and hearing symptoms of *Nat-mur* are described as noises such as ringing, buzzing, humming and difficulty hearing. There is also a discharge from the ear along with some swelling (Vermeulen, 2000:685). In *Ubiquinone* there was blocking of the ears whilst experiencing the sensation of being able to hear running water. There was also compression of the ear which is not seen in *Nat-mur*. The main difference was *Ubiquinone* experiencing acute hearing whereby every noise and sound was magnified, whereas *Nat-mur* experiences difficulty in hearing.

The nose in *Nat-mur* has fluent coryza and stoppage of the nose making it difficult to breathe (Vermeulen, 2000:686). The discharge from the nose is thin, watery like the raw white of eggs. In *Ubiquinone* there was much itchiness within the nostril that extended to the Eustachian tube. A thin watery discharge that does not burn was a similarity to that of *Nat-mur* as well as the fluent coryza making it difficult to breathe. Congestion in the sinus cavities was experienced in *Ubiquinone* and is absent in *Nat-mur*.

The following similarities and differences were observed in the face, mouth and teeth of *Nat mur* and *Ubiquinone*. In *Nat mur* the edges of the lips have
fever blisters along with an intermittent fever. The lips and corners of the mouth are dry and ulcerated (Vermeulen, 2000:686). In *Ubiquinone* there was a sense of heat upon the face with a burning, tingling sensation along the lips which then led to cold sores appearing on the lip. The tongue in *Nat-mur* is mapped with a coating on it and red insular patches (Vermeulen, 2000:686) compared to *Ubiquinone* where there was much itchiness and swelling on the mouth and tongue extending down to the throat. In both remedies the gums bleed easily. The teeth in *Nat-mur* are sensitive to air and touch and pain is experienced in the teeth, which is worse on chewing with salivation in the morning (Vermeulen, 2000:686). In *Ubiquinone* a deep sense of pain in the teeth was felt. Pain was located in the upper front region radiating from one incisor to another. A vibrating feeling was also felt in the tooth which was worse for blowing the nose. One of the provers also showed salivation

In *Nat-mur* the throat hawks bitter salty mucus (Vermeulen, 2000:686). The throat is dry, sore, tickles and causes one to cough. Only fluids can be swallowed (Vermeulen, 2000:686). In *Ubiquinone* there was difficulty in swallowing both liquids and solids with an intense scraping of the back of the throat as if with razors. There was also a hoarse dry feeling of the throat like *Nat-mur* and a tickling of the throat with a feather was seen in *Ubiquinone*.

With regard to the stomach and abdomen, *Nat-mur* drinks large quantities of water, is hungry yet loses flesh and experiences heartburn with palpitations (Vermeulen, 2000:686). They also crave salty food and have an aversion to bread or slimy foods. They experience nausea in the morning, vomiting of food and have pain after eating. (Vermeulen, 2000:686). In *Ubiquinone* there was a bottomless hunger followed by a decrease in eating. Nausea was also seen in *Ubiquinone*, with vomiting bringing about relief. Heartburn and indigestion were also seen in both remedies but the palpitations were absent in *Ubiquinone*.

The right side of the abdomen in *Ubiquinone* was mainly affected with a dull hypochondrial pain and a cutting like pain towards the umbilicus. The liver felt
enlarged or bloated with abdominal cramps with a twisted knotted type of pain. In *Nat-mur* the only similarities that are seen is a cutting pain in the abdomen and distension (Vermeulen, 2000:686). The *Nat-mur* patient also experiences shooting pains in the region of the liver (Vermeulen, 2000:686).

The rectum of a *Nat-mur* patients experiences both constipation and diarrhoea. The stool is dry when constipated and has painless watery diarrhoea. (Vermeulen, 2000:687).

The diarrhoea in *Ubiquinone* was experienced after each meal and had no foul odour while the constipation just brought about an unsettling feeling. *Ubiquinone* had a discrepancy in urine output as compared to liquid intake. The urine was clear with a sense of urgency and an increase in frequency, while a *Nat-mur* patient suffers with pain, burning and itching after urination. There is also a thirst for large quantities of water (Vermeulen, 2000:686) that was not shown in *Ubiquinone*.

There was an increase in the male libido along with a dull aching pain in the left testicle. Yet in *Nat-mur* they experience mainly impotence and a retarded emission (Vermeulen, 2000:686). With regards to the female symptoms in *Nat-mur* and *Ubiquinone* we see that there was a shared symptom of having irregular and profuse menses. *Nat-mur* experiences more severe menstrual pains along with prolapse of the uteri and leucorrhoea that is watery and acrid (Vermeulen, 2000:686). *Ubiquinone* had a brown discharge changing into bright red blood with huge clots. Symptoms were better for doubling over and in *Nat-mur* bearing down pains were experienced which was worse in the mornings.

Respiratory symptoms in *Ubiquinone* were difficulty in breathing along with breathlessness. This was made worse by walking fast or running. Provers described the feeling as not being able to get enough oxygen into the lungs and had a tight sensation over the chest region. In *Nat-mur* the patient also experiences shortness of breath on going up stairs and suffers with many cough symptoms such as coughing with asthma, bloody expectoration or
even having a whooping cough present (Vermeulen, 2000:687). The cough seen in *Ubiquinone* was due to a build-up of phlegm at the back of the throat which was itchy and brought on the coughing. The cough and expectoration symptoms of a *Nat-mur* were mentioned above in respiratory symptoms. The cough is like that of whooping cough, coughing with asthma or palpitations (Vermeulen, 2000:687) and a cough with a bloody expectoration. Coughing is worse in winter, the morning, the evening, after lying down and from empty swallowing (Vermeulen, 2000:687). In *Ubiquinone* both dry and wet coughs were experienced. The wet cough had a razor like sensation at the back of the throat which was exacerbated by the wind and cold rain. The dry cough caused itchiness in the trachea with the modalities of being worse for talking, exertion and night and better for eating and drinking both hot and cold drinks.

The chest symptoms a *Nat-mur* patient experiences are stitches all over the chest (Vermeulen, 2000:687). There is tachycardia present along with the heart and chest feeling constricted. The pulse is either full and slow or weak and rapid (Vermeulen, 2000:687). There is a shared symptom where *Ubiquinone* also experienced a constricted feeling in the chest region. They had a more intense pain described as being dull, sharp and stabbing and the pain extended to the neck and down the left arm.

The back symptoms of both remedies differ. *Nat-mur* has pain in the back and desires firm support. They have a stiff neck with backache as if the back is bruised and feel better for lying on something hard, for pressure and lying on the back (Vermeulen, 2000:688). *Ubiquinone* experienced a deep pain in the back, neck and scapula. The pain caused such tenderness that one could not even lie on their back and was worse with movement.

The similarity in extremities seen in both remedies is of having a feeling of tightness in the calves. There is also coldness and warmth in the hands and feet. The main difference was that *Ubiquinone* experienced more pain on the right hand side whereas *Nat-mur* has neither side more affected. In *Ubiquinone* the entire body along with extremities were fatigued. The right arm had a deep aching pain extending down to the shoulders. *Nat-mur*
experiences more restlessness in the legs and feet with a numbness and tingling sensation (Vermeulen, 2000:688).

*Nat-mur* experiences chills between 9 and 11am (Vermeulen, 2000:688) and with the heat they have a violent thirst that increases with the fever (Vermeulen, 2000:688). In *Ubiquinone* the provers had a sensation of raging heat on their face and feeling miserable, and they wanted to lounge around naked the entire day. There was also an increase in perspiration on the back, chest and armpits.

The skin showed much itchiness and became red and swollen. A fungal infection that produced vesicular eruptions with a clear fluid expelled from them was seen mainly in *Ubiquinone*. This differs from *Nat-mur* in that *Nat-mur* produces urticaria that itches, burns and is better after exertion. The skin is unhealthy or yellow and shows eruptions of a ringworm nature that is better for warmth. *Ubiquinone* was worse with warm water and better with cold.

Sleepy but cannot sleep at night and awakes unrefreshed (Vermeulen, 2000:688) is seen in *Nat-mur*. They awake feeling weak and experience sleepiness during the day with frequent yawning (Vermeulen, 2000:688). In *Ubiquinone* a similar symptom was seen where the person awoke unrefreshed. *Ubiquinone* provers suffered with extreme exhaustion yet battle to sleep or sleep very lightly with many disruptions. Also seen in both remedies is the desire to sleep the entire day. No similarities were seen in the dream section beside *Nat-mur* dreaming of robbers (Vermeulen, 2000:688) while in *Ubiquinone* the theme of having anxious and paranoid dreams was seen.

In the generals we see the similarity where *Nat-mur* suffers with great debility, and show extreme weakness and weariness (Vermeulen, 2000:684). They also experience coldness and a high risk of catching a cold (Vermeulen, 2000:684). *Ubiquinone* had exhaustion to the point where the person cannot function. They had a rundown feeling along with the entire body feeling achy. A cold sensitivity is also shared, *Ubiquinone* could not
tolerate the cold and preferred room temperatures. With regards to cravings
*Ubiquinone* had an intense craving for coffee, fried and fatty foods. A
difference is noted in that *Nat-mur* craves salty, bitter, sour foods and has an
aversion to bread and anything slimy (Vermeulen, 2000:686). Another
difference that is seen in the generals is that *Ubiquinone* showed an increase
in energy and the ability to get more done in a day compared to *Nat-mur*
where not much energy is seen as they suffer with great weakness and
weariness (Vermeulen, 2000:684). *Nat-mur* only experiences great debility
where as *Ubiquinone* showed both, an increase in energy on one hand and
extreme exhaustion on the other.

*Ubiquinone* and *Nux vomica*

*Strychnos Nux vomica* (*Nux vom*) also known as the Poison-nut is one of the
greatest polychrests (Vermeulen, 2000:709). A *Nux-vomica* person is highly
irritable, being sensitive to all impressions (Vermeulen, 2000:709). They are
angry and impatient on the one hand and can be nervous and excitable on
the other (Vermeulen, 2000:710). The *Nux vom* individual leads a sedentary
life with sedentary habits. They are hypersensitive in the sense that they do
not want to be touched, they reproach others and are fault finding. Noises,
odours and even lights increase the irritability in *Nux-vomica* (Vermeulen,
2000:710). In *Ubiquinone* the emotional fragility stems from a feeling of being
overwhelmed. Provers were highly annoyed with the external environment
and with others, which led to the *Ubiquinone* person being irritable. External
factors such as noise and increased sensitivity can also be seen in *Nux-
vomica*. Both remedies become angry or irritable when consoled and prefer
to be on their own.

The *Nux-vomica* person has a fear of poverty and of knives as one feels they
would kill themselves or others (Vermeulen, 2000:710). They can be quite
melancholic and suffer with anxiety with an inclination to commit suicide but
they are afraid to die (Vermeulen, 2000:711). The main fears shown in
*Ubiquinone* were of being socially rejected with a paranoid feeling that they
are being watched. A lack of concern was seen in *Ubiquinone* as the mind
felt exhausted with no order of flow in thought processes. This can be
compared to *Nux-vomica* individuals who are unable to think connectedly, easily make mistakes and concentration is difficult while calculating (Vermeulen, 2000:711).

*Nux-vomica* experiences vertigo with a momentary loss of consciousness (Vermeulen, 2000:711). The only similarity seen between both remedies is the symptom of dizziness.

A similarity is seen in the headaches where both remedies suffer with an occipital headache which improves by resting and lying down. In *Nux vomica* there is a sensation as if the skull will burst (Vermeulen, 2000:711) while in *Ubiquinone* it was described as if the head and brain matter would explode into a thousand pieces. Shared modalities were mainly worse from moving the eyes and better from resting. Headaches in *Nux vomica* are of a congestive nature, and the individual experiences violent jerking or dull stitches on the left hand side of the brain from the orbit to the occipital region (Vermeulen, 2000:711) compared to *Ubiquinone* where headaches were on the right hand side with a dull, pulsating pain.

Symptoms of the eyes differed as *Ubiquinone* had a pain located in the right upper lid in the right corner. Only redness and itchiness followed. *Nux vomica* suffers with a great deal more, such as photophobia, optic neuritis and atrophy. Conjunctivitis is also experienced with burning and smarting as the lids of the eyes are sore and difficult to move (Vermeulen, 2000:711).

There is itching in the ear with tearing stitching pains. Noises such as ringing, roaring and hissing are heard in the ear with loud sounds and pain in a *Nux vomica* person (Vermeulen, 2000:712). In *Ubiquinone* the prover experienced noises that were magnified with a compression sensation in the ear. The ears felt blocked mainly on the right hand side.

The similarities between both remedies are that both produce coryza of a fluent nature. Blocked, stuffy noses with flu like symptoms are also seen. *Nux vomica* tends to have a stuffy nose after exposure to a dry, cold atmosphere
with an acrid discharge (Vermeulen, 2000:712) whereas *Ubiquinone* showed a non burning, yellowish discharge. There is also much itchiness seen with pain in the sinus cavities. *Nux vomica* suffers with violent sneezing with the margins of the nostril sore and ulcerated (Vermeulen, 2000:712) which was not seen in *Ubiquinone*.

The jaw in the *Nux vomica* person feels contracted or snapped shut and is stiff (Vermeulen, 2000:712). This was also seen in *Ubiquinone* where the person did not want to speak as their jaw felt clenched tight. A painful peeling of the lips is seen in *Nux vomica* while only a tingling sensation is felt on the lips in *Ubiquinone*. With regard to the mouth, mainly pain and swelling of the tongue was shown in *Ubiquinone*. Another shared symptom is that both remedies experience itchiness of the palate and the Eustachian tube (Vermeulen, 2000:712). A sensation as if the gums are torn when brushing are experienced in *Nux vomica* and gums are swollen and bleed easily (Vermeulen, 2000:712). There is an accumulation of saliva in both remedies. A vibrating sensation was felt in the teeth of *Ubiquinone*, similar to *Nux vomica* where it is described as there being chattering of the teeth (Vermeulen, 2000:712).

A feeling of scraping at the back of the throat with razor blades with a sensation of the diameter of the throat decreasing with each breath was shown in *Ubiquinone*. A similar symptom is seen in *Nux vomica*, a rough scraped feeling especially on inhaling cold air and a sensation of tightness, tension and the pharynx being constricted (Vermeulen, 2000:712). A sensation of tickling is present in both remedies. The tickling is experienced in the morning after waking in *Nux vomica* (Vermeulen, 2000:712) and came back when exposed to cold air in *Ubiquinone*.

A wet and dry cough was shown in *Ubiquinone*. The dry cough caused much itchiness in the trachea along with the cough being worse from talking, exertion, night and better from eating, drinking hot and cold drinks. The dry cough in *Nux vomica* was a tight, hacking cough with bloody expectoration (Vermeulen, 2000:714). The modalities showed the cough being better for
drinking, seen in *Ubiquinone* as well. The expectoration differed as it is of a bloody nature in *Nux vomica* while in *Ubiquinone* the phlegm was salty and green to yellow in colour.

There is shallow respiration with oppressed breathing in a *Nux vomica* patient. The heart feels tired along with palpitations on lying down or after a stimulant. The pulse comes across as being rapid and irregular (Vermeulen, 2000:714-715). The person feels a spasmodic constriction across the chest region and in the air passages. This is worse when walking or singing. The above symptoms bring on a cough as well (Vermeulen, 2000:714-715). In *Ubiquinone* breathlessness was also seen. Provers experienced difficulty in getting enough oxygen which caused shallow respiration like *Nux vomica*. The breathlessness was exacerbated by walking or running. In *Ubiquinone* there was also a tight feeling across the chest which was more pronounced on deep inspiration and is described as constriction in a *Nux vomica*. A build-up of mucus in *Ubiquinone* brought on coughing as an accompanying symptom.

Nausea and vomiting was seen in both remedies. *Nux vomica* experiences nausea in the morning after eating. They want to vomit but have difficulty in doing so. The nausea is better if only they can vomit (Vermeulen, 2000:713). This was also the case in *Ubiquinone* where the person has the need to vomit after every meal and feels better afterwards. A clenching pain is felt in the stomach region of *Ubiquinone* while *Nux vomica* has a fluttering sensation in the epigastrium. The dyspepsia in *Nux vomica* is mostly from drinking strong coffee and eating acidic and fatty foods (Vermeulen, 2000:713). A painful heat moving between the oesophagus and epigastric area is the type of dyspepsia exhibited in *Ubiquinone* which was better for drinking cold water. With regards to the appetite a ravenous hunger is seen in both remedies but differs as in *Nux vomica* the person is ravenous before the onset of heartburn and then becomes averse to foods (Vermeulen, 2000:713) while *Ubiquinone* initially had an increase in appetite and then a decrease in wanting small portions which sustained them for longer.
The main distinction between the remedies is that *Ubiquinone* experienced abdominal discomfort on the right hand side. A dull pain in the hypochondrium that extended to the back with a cutting pain below the umbilicus towards the appendix is shown. *Nux vomica* has a more bruised feeling of the abdominal walls. There is also weakness of the abdominal ring region leading to hernias which can occur (Vermeulen, 2000:713). The liver is engorged in *Nux vomica* (Vermeulen, 2000:713) while *Ubiquinone* had a sensation that the liver was enlarged as if a beach ball was in the abdomen. Increase in flatus and borborigmi is present in both remedies and is described as rumbling and gurgling in the abdomen in *Nux vomica* (Vermeulen, 2000:713).

Diarrhoea experienced in *Ubiquinone* had a muddy, smokey appearance. This happened after each meal with no foul odour to the stool. Constipation with urging was seen on a small scale in *Ubiquinone* while in *Nux vomica* constipation is a major symptom. The constipation in *Nux vomica* is an ineffectual urging with an incomplete feeling (Vermeulen, 2000:713) along with diarrhoea from the abuse of purgatives (Vermeulen, 2000:713).

In the male sphere the only comparable symptom was that in *Ubiquinone* a dull pain in the left testicle was experienced on waking. *Nux vomica* has a constrictive stitching pain in the testicles (Vermeulen, 2000:714). Female symptoms included irregularities in the menstrual cycle of *Ubiquinone*. A delay in the onset of the menses was seen followed by an increase in the menstrual flow, accompanied by huge clots. Different symptoms are revealed in *Nux vomica* as there are menses that are too early, prolonged and always irregular (Vermeulen, 2000:714). The discharge of blood was black in colour while in *Ubiquinone* bright red menses was seen. Cramps are experienced which extend to the entire body, pain in the sacrum with an urge to pass a stool (Vermeulen, 2000:714) in *Nux vomica* while the pain in *Ubiquinone* was of a cutting nature and was better for bending double.

In *Ubiquinone* the lower back was mainly affected along with the neck, shoulder and scapula. The nature of the pain was a deep pain and was
described as if the bones were twisting or grinding against each other. Movement and lying on the back increased the pain. The scapula experienced a stabbing pain with the back ache. In *Nux vomica* we see more of a burning, neuralgic pain in the spine (Vermeulen, 2000:715). The pains are described as being more bruised and tearing which is worse in the mornings (Vermeulen, 2000:715). A similarity is seen where *Nux vomica* also has difficulty lying on the back due to the extreme tenderness felt. The scapula region in *Nux vomica* has a bruised feeling as compared to the stabbing pain in *Ubiquinone*. Moving down to the extremities, pain was mainly experienced on the right hand side of the body in *Ubiquinone*. The right arm and shoulder had a deep pain with the body feeling bruised. This differs from *Nux vomica* as the arm suffers a paresis (Vermeulen, 2000:715). In the lower extremities both remedies show cramping in the calves. Cramps are worse at night in *Nux vomica* (Vermeulen, 2000:715) while *Ubiquinone* experienced a burning sensation in the calves.

With regard to perspiration and fever, the colder state predominates in *Nux vomica*. They suffer with rigors and blueness of the fingernails (Vermeulen, 2000:715). They are chilly and prefer to be covered during the fever (Vermeulen, 2000:715). There is also a dry heat of the body along with heat in the head and face. *Ubiquinone* experienced a fever with body aches. There was a resemblance in the perspiration on the face with that of *Nux vomica*, alternating to becoming cold and clammy.

Extreme itchiness of the skin with redness and swelling was seen in *Ubiquinone*. The itchiness was worse with warm water and better with cold water. Little round weals were present on the skin from scratching. This is not seen in *Nux vomica* as they produced acne with the skin being red and blotchy. A peculiar symptom is seen where there is urticaria with a gastric derangement (Vermeulen, 2000:716).

In the sleep section *Nux vomica* becomes drowsy after meals. They are able to fall asleep before bedtime and arise between 3-4am. They are sleepy after daybreak, leading to them awaking stupid and dull. They can even feel weak
and averse to rising (Vermeulen, 2000:715). The parallel in *Ubiquinone* showed tiredness with many sleep disruptions leading to them awaking unrefreshed, worn out and battling to get out of bed. *Nux vomica* tends to have dreams centred on hurriedness. They also experience anxious dreams where they can be pursued by animals or can involve more of the amorous dream settings (Vermeulen, 2000:715). The dreams are quite different in *Ubiquinone*, the only similarity being that *Ubiquinone* also dreamt about being chased and has a sense of paranoia along with anxiousness in the dreams.

With regard to the generals in both remedies we see sensitivity to cold. *Nux vomica* patients are chilled easily, their symptoms come on in the open air and are better when indoors (Vermeulen, 2000:710). In *Ubiquinone* there was the same sensitivity to the cold air and even to cold water. The craving of fats and coffee was another similarity in both remedies. In *Nux vomica* there is a need for stimulants like coffee which helps people to keep going due to all the activities and mental strain they take. This leads to a sedentary life in which they crave fatty foods but this brings on dyspepsia. *Ubiquinone* showed a strong craving for coffee and fatty foods so much so that the provers could smell the aroma and even the taste in their mouth.

Many pains of a twisting, jerking nature present in *Nux vomica*. The muscles experience a tense contracted sensation (Vermeulen, 2000:710). A general bruised feeling is felt in the mornings in bed with trembling of the hands (Vermeulen, 2000:710). In *Ubiquinone* extreme exhaustion is shown which led to the body having an overall run down feeling. The muscles experience a bruised tight feeling which is described as contracted in *Nux vomica* along with the bones having a sensation as if breaking.

**Ubiquinone and Sulphur**

In the mental facet of *Sulphur* we see the person being quarrelsome, irritable and impatient and nothing pleases them (Vermeulen, 2000:921). *Sulphur* can be selfish with no regard for others, can weep without cause and is worse from consolation (Vermeulen, 2000:921). This was quite prominent in
*Ubiquinone* as they wanted attention from loved ones but prefer to be alone. *Sulphur* tends to suffer with anxiety and a depressed mood preventing sleep and making one restless (Vermeulen, 2000:92). They can be very forgetful, with difficulty in thinking and confusion in the morning upon waking (Vermeulen, 2000:921). With regard to fears and delusions, *Sulphur* tends to fear ghosts, robbery, poverty and even starving (Vermeulen, 2000:921) along with delusions of thinking one’s rags are beautiful things with an indifference to personal appearances (Vermeulen, 2000:921). There is also a strong tendency towards religion and philosophical reveries which was not seen in *Ubiquinone*. Many differences are seen when we compare both remedies as there was an increase in the amount of energy in *Ubiquinone* where they felt light and carefree whilst in *Sulphur* there is a melancholic mood. Weeping for no reason was seen in both remedies as *Ubiquinone* provers experienced emotional fragility in which one felt better after weeping and in *Sulphur* where tears could also be brought on with the slightest provocation (Vermeulen, 2000:921). The mind of *Ubiquinone* felt exhausted which made it hard to concentrate and led to a lack of motivation to complete tasks. The thought process lacked order which is similar in *Sulphur* as they experienced difficulty in thinking and showed confusion (Vermeulen, 2000:921). Anxiety and an unsettling feeling were also experienced in Ubiquinone with one having a fear of being watched, socially rejected or being bitten by a cobra. Delusions and paranoia were centred on forgetting to lock car doors or people messing with their food.

The head of *Sulphur* has a constant heat on top of the head (Vermeulen, 2000:922). The headache ascends from the nape of the neck to the vertex where the vertex becomes hot, heavy and throbs with pain (Vermeulen, 2000:922). The pain is described as being deep in the brain or as if a band is around the head (Vermeulen, 2000:922). The head feels full with a rush of blood to the head especially in the mornings and evenings with pressure in the forehead (Vermeulen, 2000:922). There is also pressure in the temples in the morning after rising and in general a *Sulphur* headache can last for 2-3 days (Vermeulen, 2000:922). The headaches are worse for stooping, open air, light and are better for hot applications and being in a dark room.
In *Ubiquinone* there was a throbbing pain in the vertex with pain radiating down to the temples. The head felt cold with an intense pain as if it was splitting down the middle to the temples and the brain would fall forward. The pain was worse for movement and eased up when pressure was applied or when being in a dark room. The temples themselves had a stabbing pain with the head feeling heavy and dull as if the brain matter would explode. The pain was worse for light, motion, noise and lifting the head which improved when pressure was applied, when sleeping or when the person had a warm shower. The pain in the forehead had a pulsating, pounding nature with the same modalities as was seen in the other parts of the head.

In *Sulphur* one has vertigo while walking in the open air, on looking down and from rising from a seat (Vermeulen, 2000:922). This differs from the sense of dizziness experienced in *Ubiquinone* with weakness in the limbs. The vertigo is short-lived and does not prevent people from performing their activities.

Symptoms experienced in the eyes by the *Sulphur* patient includes burning ulcerations of the margins of the lids along with burning and heat in the eyes (Vermeulen, 2000:922). The pain is of a bursting nature with trembling of the eyes or of painful inflammation due to the presence of a foreign body (Vermeulen, 2000:922). Styes and tarsal tumours can also be found in *Sulphur* (Vermeulen, 2000:922). The eye in *Ubiquinone* had a bruised sensation which was felt in the right corner of the right upper lid. The eye felt as if a stye was present and was worse for touch. Redness and itching of the eyes was also present which was better for rubbing them. The eyes felt warm upon closing them which was one of the unusual symptoms experienced.

With regard to hearing, *Sulphur* experiences deafness which is preceded by sensitive hearing (Vermeulen, 2000:923). There is pressure along with a pain in the ear upon swallowing and sneezing as if the ear is ulcerated (Vermeulen, 2000:923). A ringing, roaring noise can be heard in the ear in the evenings with a rush of blood to the head (Vermeulen, 2000:923). *Ubiquinone* was unlike *Sulphur* in that the provers experienced magnified
hearing along with hearing imaginary running water. Slight deafness for a short period of time was also seen. A sensation of having compression within the right ear was felt which extended down to the jaw in *Ubiquinone*.

*Sulphur* is overly sensitive to odours (Vermeulen, 2000:923). A fluent and burning coryza is present along with frequent sneezing in the morning and evenings (Vermeulen, 2000:923). The discharge is thick, yellow, purulent mucus with itching and burning of the nostrils (Vermeulen, 2000:923). *Ubiquinone* on the other hand provided a fluent coryza that was non excoriating with a clear discharge which can turn to a yellow colour. There was itchiness of the nostrils like in *Sulphur* but in *Ubiquinone* the itching extended down to the Eustachian tube. A dull congestion at the base of the skull and sinuses were also experienced.

In *Ubiquinone* a burning, tingling sensation was felt on the lips followed by a fever blister. Heat was felt in the face with the jaw being clenched closed. This is similar to *Sulphur* where the lips are dry, red and burning with herpes at the corners of the mouth (Vermeulen, 2000:923). There is a drawing, jerking pain in the lower jaw as well as swelling in the parotid and submaxillary glands (Vermeulen, 2000:923). Moving into the mouth area, *Sulphur* has a bitter taste with the tongue being white and having a red tip and borders (Vermeulen, 2000:923). The tongue of *Ubiquinone* was painful, red and swollen with extreme itchiness of the tongue and mouth which could extend further down to the right inner ear and throat. An accumulation of saliva in the mouth, especially after eating, is seen in *Sulphur* (Vermeulen, 2000:923) alongside *Ubiquinone* that also had an increase in salivation that ran out the mouth. The teeth in *Ubiquinone* had a vibrating feeling within the teeth and pain radiating from one incisor to another. In *Sulphur* this is experienced as a boring, throbbing toothache with swelling of the gums (Vermeulen, 2000:923). The gums in *Ubiquinone* felt torn and burnt upon brushing of the teeth.

A pressing discomfort along with pain whether swallowing solids or liquids was seen in the throat of *Ubiquinone*. The throat was hoarse, dry and itchy
with a scraping at the back which felt like razor blades. In Sulphur there is burning and dryness of the throat with a swollen sensation (Vermeulen, 2000:923). There is a pressure as from a lump, splinter or hair in the throat (Vermeulen, 2000:923). Sulphur experiences stitches in the throat upon swallowing along with the tonsils feeling swollen (Vermeulen, 2000:923).

Quite a few similarities are observed in the stomach area of both remedies. Ubiquinone had a bottomless appetite with an increase in thirst. This was followed by a bloated feeling as well as being more tired. Later on there was a decrease in the appetite and small amounts of food left the person feeling fuller for longer in Ubiquinone. In Sulphur we see either a complete loss or an excessive appetite (Vermeulen, 2000:924). They tend to eat small quantities and drink much and have a feeling of fullness in the stomach after eating a little (Vermeulen, 2000:924) which was also seen in Ubiquinone. Sulphur suffers with great acidity and sour eructations with a burning weight like pressure in the stomach (Vermeulen, 2000:924). There is nausea along with vomiting of undigested food in Sulphur (Vermeulen, 2000:924) or sour vomiting whereas in Ubiquinone they experienced nausea upon motion and vomiting of foods after every meal. Heartburn was also experienced in Ubiquinone which felt like a painful ball of heat moving between the stomach and oesophagus.

The abdomen in Sulphur has an internal feeling of rawness and soreness with the abdomen being sensitive to pressure (Vermeulen, 2000:924). The liver is sore and seems swollen with stitches in the spleen region which is worse for coughing or deep inspiration (Vermeulen, 2000:924). Cutting and griping pains in the lower abdomen and soreness of both the hypochondria with flatus is also seen in Sulphur. Similarly in Ubiquinone there was hypochondrial pain but it was located on the right and extended to the back region. Cutting pains around the umbilicus also appeared in Ubiquinone. The liver felt enlarged or bloated with twisting cramps and an increase in flatus and borborigmi.
Constipation and diarrhoea are experienced in *Sulphur*. There is a frequent, unsuccessful desire to pass a stool which is hard and knotty as if it is burnt (Vermeulen, 2000:924). The diarrhoea is painless and drives the person out of bed. The stool has an odour to it and is watery, greyish and frothy which is worse on drinking milk (Vermeulen, 2000:924). Burning and a pressure in the rectum during a stool or even after a stool are also experienced. In *Ubiquinone* the likeness was seen as constipation while diarrhoea is also experienced. The diarrhoea was painless, odourless and was passed after each meal. The stools had a muddy and smoky appearance. With regard to the constipation, some straining took place with burning in the anus especially after a spicy meal. Stools were hard and brown while some had bright red blood in them. No pain was experienced.

In the bladder section *Sulphur* has frequent micturition especially at night (Vermeulen, 2000:925). There is a sense of hurriedness with the urge to urinate with great quantities of colourless urine (Vermeulen, 2000:925). In *Ubiquinone* there was an urgency and frequency to urinate despite the intake of liquids being less. The urine was also colourless like *Sulphur*. Male symptoms of *Sulphur* include mainly stitches in the penis and involuntary emissions with burning of the urethra (Vermeulen, 2000:925). A hydrocele is also present with pressure and tension in the testicles and spermatic cord (Vermeulen, 2000:925). In *Ubiquinone* a dull aching pain was experienced in the left testicle which extended down to the hip joint and buttocks. There was also an increase in libido in *Ubiquinone*. Female symptoms in *Sulphur* include much itchiness and burning of the vagina (Vermeulen, 2000:925). The menses are late, short, scanty and difficult (Vermeulen, 2000:925). Leucorrhoea is also present and is burning, excoriating as well as slimy and milky (Vermeulen, 2000:925). A bearing down pain in the pelvis is experienced which is worse on standing with the mammae having a sharp burning discomfort (Vermeulen, 2000:925). In *Ubiquinone* this differed as menses were of a spotting nature at first, followed by a heavy flow with clots. The pain experienced was of a cutting character from side to side above the pubic bone which is better for bending double. Cramping in the stomach was also felt with the discharge having a fishy odour.
With regard to respiration Sulphur experiences difficulty and wants the windows open (Vermeulen, 2000:925). There is shortness of breath from talking or when walking in the open air (Vermeulen, 2000:925). The chest feels oppressed with a burning heat-like sensation throughout the area (Vermeulen, 2000:925). The heart feels large as if a load is present along with palpitations which are worse on lying in bed at night. The pulse is more rapid than normal in the mornings and evenings with stitching pains in the heart region (Vermeulen, 2000:925). Similarity was seen in Ubiquinone as they also experienced breathlessness and battled to get enough oxygen into the lungs. This was worse for walking or running which is also seen in Sulphur. Breathlessness accompanied by sweating and a sharp aching pain in the shoulder, back and arm was experienced. The chest had a tight feeling over the area with pains like daggers. Palpitations were also present as in Sulphur but were of a pounding nature and were better for rest.

Coughing was experienced in both remedies. A dry violent cough is experienced in the night while loose coughs in the mornings are seen in Sulphur. The dry cough comes on with hoarseness and dryness of the throat along with a watery coryza and pain in the sternum (Vermeulen, 2000:925). The expectoration is greenish and purulent which is sweetish in taste (Vermeulen, 2000:925). In Ubiquinone the wet cough felt as if razor blades were scraping the throat with each cough while the dry cough caused much itchiness in the trachea. The phlegm was of a green to a yellow colour which was salty in taste.

In the back region Sulphur suffers with pain in the lumbar region with backache at night and the small of the back feeling bruised which prevents sleep (Vermeulen, 2000:926). The pain is so intense that the person walks bent and can only straighten up once in motion (Vermeulen, 2000:926). There is a tensive pain and heat between the scapula when in motion and lying down with stiffness of the nape (Vermeulen, 2000:926). The limbs also experience a sense of weakness with a drawing pain (Vermeulen, 2000:926). In Ubiquinone the lower back or lumbar region was also affected. A deep aching pain was found in the neck, shoulders, scapula and lower back. The
sensation was as if the bones were twisting and grinding against each other. The pain was worse when lying on the back. In the left scapula region *Ubiquinone* also experienced a sharp stabbing pain as compared to *Sulphur* which showed a tensive pain.

Going on to the extremities, we see that in *Sulphur* there is a general feeling of having a band around the bones (Vermeulen, 2000:926). In the upper extremities there is a weakness and weariness in the arms as well as a paretic feeling with numbness of the fingers (Vermeulen, 2000:926). In the upper arms of *Ubiquinone* the right arm experienced a deep aching pain which extended down to the shoulder. The body had a general bruised and fatigued sense. The lower extremities in *Ubiquinone* experienced burning in the calves which was better with movement and worse when the legs were stationary. This extended down to the ankles with the joints feeling achy, like they were being tightened on the inside. The soles of the feet had a burning sensation which was worse for standing. In *Sulphur* there is stiffness of the knees and ankles with a heaviness in the feet (Vermeulen, 2000:926). Cramps in the calves are also seen in *Sulphur* as if the muscles are short as well as burning of the soles and hands, mainly at night. This was also found in *Ubiquinone* but lacked a certain timing in which the burning was worse.

*Sulphur* has flushes of heat which can result in fainting (Vermeulen, 2000:927). The heat is felt throughout the body with perspiration of single parts (Vermeulen, 2000:927). A strong odour can be detected in a *Sulphur* person (Vermeulen, 2000:927). A chill can also be experienced that spreads up the back followed by a rush of blood (Vermeulen, 2000:927). In *Ubiquinone* a fever was experienced with perspiration on the face, back, abdomen and armpits. This could alternate with a cold sweat or with a sense of heat especially on the face. With the fever the body ached with pain and flu like symptoms.

*Sulphur* has very dry, scaly unhealthy skin (Vermeulen, 2000:927). All injuries to the skin suppurate. There is itching and burning of the skin which is worse on scratching and washing (Vermeulen, 2000:927). Eruptions can
either be nettle-like or have a fine papular appearance with offensive odours (Vermeulen, 2000:927). This slightly differed to Ubiquinone as vesicle eruptions with a clear fluid were seen. Itchiness of the skin is present as well as the skin being dry and scaly in Sulphur. The skin in Ubiquinone could become red and swollen due to scratching which was worse from warm water and better with cold water.

Sleeping patterns in Sulphur are quite disruptive as there is a frequent breaking of the sleep and the person becomes wide awake (Vermeulen, 2000:926). The slightest noise can awaken the person along with them awaking unrefreshed (Vermeulen, 2000:926). The main time in which a Sulphur person cannot sleep is between 2am and 5am. Similarly we see in Ubiquinone a difficulty in falling asleep despite how exhausted the person is. They awoke many times in the evening at no specific time so the person also awoke unrefreshed and yawns throughout the day, wanting to sleep. Dreams are of a vivid nature in Sulphur (Vermeulen, 2000:926) as opposed to Ubiquinone where dreams centre on being familial, repetitive, nostalgic or even anxious and paranoid.

**Ubiquinone and Gelsemium sempervirens**

*Gelsemium sempervirens* is also known as Yellow Jasmine. A Gelsemium person suffers with a dullness of mental faculties (Vermeulen, 2000:449). They have a desire to be quiet, to not engage in any conversation or have anyone near them (Vermeulen, 2000:448). This is to some extent similar to Ubiquinone where a need for attention and recognition was seen in the proving, yet at the same time they wanted to be alone and isolated from others. Being in the company of others caused much agitation whilst being silent or in the dark improved their irritability.

*Gelsemium* has a sense of apathy regarding their illness (Vermeulen, 2000:448). They experience emotional excitement or fear which bring on physical ailments (Vermeulen, 2000:448). A Gelsemium has many fears such as appearing in public, death, ordeals, losing self-control and pains (Vermeulen, 2000:449). They have a lack of courage and anticipation of any
ordeal results in diarrhoea (Vermeulen, 2000:449). In this state languor and listlessness is seen (Vermeulen, 2000:448). There is an incapability to think, a vacant feeling on attempting to concentrate, or a vanishing of thoughts upon mental exertion (Vermeulen, 2000:449).

In *Ubiquinone* much anxiety and paranoia was seen. A prover was paranoid that they have forgotten to lock the car, or someone was watching them or even messing with their food. The fears that were experienced were of being socially rejected and of seeing a cobra if one closed their eyes. No comparison can be drawn from the two remedies with regard to the above. Apathy and prostration was seen in *Ubiquinone*. The mind felt exhausted, they lacked motivation with an inability to focus on the tasks at hand. There was no flow or order in their thought processes which was one of the main similarities with *Gelsemium* as there is a dullness of mental faculties (Vermeulen, 2000:449).

In the occipital region of the head *Gelsemium* experienced heaviness with a sensation of a band around the head (Vermeulen, 2000:449). This extends over the eye which was worse with a tight cap and better for shaking the head or after urination (Vermeulen, 2000:449). In *Ubiquinone* the pain started on the right hand side at the base of the neck. The pain is described as being dull, aching and pulsating. The pain intensified with any movement including movement of the eyes and was better for resting, applying pressure or being in the dark. *Gelsemium* has a dull heavy ache and heaviness of the eyelids. There was a bruised sensation which is better for pressure also seen in *Ubiquinone* and better on lying with the head high (Vermeulen, 2000:449).

The vertex has a pressing pain in *Gelsemium* (Vermeulen, 2000:449) while in *Ubiquinone* the pain was of a throbbing, splitting like nature as if the head was splitting down the middle to the temples and the brain was going to fall forward. The fontanels pulsate strongly in *Gelsemium* and can be worse at night (Vermeulen, 2000:449). The frontal region of the head in *Ubiquinone* also suffered a pulsating, pounding feeling which is better for resting, the dark and cold applications. With regard to headaches in *Gelsemium* we see
that the eyeballs experience much pain and headaches can be preceded by blindness (Vermeulen, 2000:449). Similarly the movement of the eyeballs in *Ubiquinone* intensified the headache regardless of the area of the head.

The *Gelsemium* person has vertigo with visual disturbances. There is light headedness and dizziness. The main modalities seen are the vertigo being worse for sudden movement and walking (Vermeulen, 2000:449). Dizziness was also found in *Ubiquinone* with the only difference in that a weakness in the limbs was experienced with the vertigo in *Ubiquinone*.

The eyes in *Ubiquinone* presented with pain in the right corner of the right upper lid. There was a sensation of having a stye in the eye even though it was not present which was worse for touch. The symptoms in *Gelsemium* differed as the eyelids are heavy (Vermeulen, 2000:449). The eyes suffer with double vision, ptosis and deep serous inflammations (Vermeulen, 2000:449). The only other accompanying symptoms of *Ubiquinone* which are not seen in *Gelsemium* are redness, watering, burning and itching of the eyes.

There is a sudden loss of hearing in *Gelsemium* for a short duration along with rushing and roaring sounds in the ear (Vermeulen, 2000:449). This is similar to *Ubiquinone* where blocking of the ear was experienced. A sense of compression is felt as if there was boiling water under a tight lid, mainly on the right hand side. Another peculiar symptom was that the *Ubiquinone* person had a feeling of hearing running water despite the blockage.

A coryza is present with a thin watery discharge from the nostrils. Fluent but non burning coryza with yellow mucus was seen in *Ubiquinone*. This differs from *Gelsemium* as there is fullness at the root of the nose with a watery, excoriating discharge (Vermeulen, 2000:449). A dull congestion of the sinus cavities with tension at the base of the skull was shown in *Ubiquinone* while in *Gelsemium* a dull headache follows with a fever (Vermeulen, 2000:449). The fever was also present in *Ubiquinone*. Itchiness of the nostrils extending
to the Eustachian tube was present in *Ubiquinone*. This is absent in *Gelsemium*.

Both remedies experience warmth in the face. In *Ubiquinone* it was described as heat and perspiration on the head and face. A hot, flushed confused look is seen in *Gelsemium* (Vermeulen, 2000:450). Another similarity is that *Gelsemium* have contracted facial muscles around the mouth while in *Ubiquinone* it was described as the jaw being clenched tightly. This stopped the person from engaging in a conversation. A burning, tingling sensation of the lips with a cold sore was present in *Ubiquinone*, which is different from *Gelsemium* where the lips are dry with dark mucus (Vermeulen, 2000:450).

In the mouth *Gelsemium* suffers with a putrid taste and breath. Their tongue is numb and thickly coated (Vermeulen, 2000:450). There was much more itchiness and swelling of the tongue and mouth area extending to the nostrils and ears in *Ubiquinone*. The dryness of the mouth in *Gelsemium* (Vermeulen, 2000:450) was opposite to *Ubiquinone* where saliva was increased and running out the mouth.

Both remedies experience difficulty swallowing. Gelsemium has difficulty swallowing warm foods (Vermeulen, 2000:450) while *Ubiquinone* had difficulty with both solids and liquids. Gelsemium experiences itching and tickling of the soft palate and nasopharynx with a feeling of a painful lump in the throat. The throat feels rough and burns (Vermeulen, 2000:450). A hoarse dry, itchy feeling of the throat with a sensation as if someone was tickling the throat with a feather. There was an intense feeling that razors are scraping the back of the throat creating the sensation that the diameter is decreasing with each breath.

Gelsemium has an emptiness and weakness at the pit of the stomach or a sensation of oppression that feels like a heavy load which is worse for the pressure of clothing (Vermeulen, 2000:450). They have a minute appetite but can still take in food or drinks (Vermeulen, 2000:450). *Ubiquinone* was different in that there was a ravenous hunger at first which rapidly diminishes
and small portions of food seems to sustain the *Ubiquinone* person. In *Gelsemium* the person is not usually thirsty or has a thirst with a sweat (Vermeulen, 2000:450) as compared to *Ubiquinone* where there was a thirst for cold water but not for huge quantities.

In the abdominal region *Ubiquinone* had a sensation that the liver was enlarged with a dull pain in the right hypochondrium that extended to the back. The pain was also described as a cutting pain beneath the umbilicus radiating to the appendix. *Gelsemium* suffers with a passive congestion of the liver with a spasmodic pain in the upper region of the abdomen which in turn leaves a sensation of contraction (Vermeulen, 2000:450). There is also a sense of soreness in the abdominal walls (Vermeulen, 2000:450).

A *Gelsemium* person mostly suffers with diarrhoea from emotional excitement, a fright or even bad news (Vermeulen, 2000:450). The stool is a cream or a tea green colour and is easily passed (Vermeulen, 2000:450). *Ubiquinone* experienced both diarrhoea and constipation. The diarrhoea was passed after each meal and brought some relief with no strong odour. The colour varied from being muddy to a smoky brown.

Due to the *Gelsemium* state of anxiety there is constant urination. The urine is profuse, clear along with chilliness and trembling (Vermeulen, 2000:450). There can also be incontinence from excitement (Vermeulen, 2000:450). A similarity was seen in *Ubiquinone* where there was frequency and an urgency to urinate. The urine was clear even when not much liquid was taken in.

With regard to male symptoms there is a dragging pain in the testes and all sexual power is exhausted in *Gelsemium* (Vermeulen, 2000:450). In *Ubiquinone* there was a dull aching pain in the left testicle that extended down to the hip joint and buttocks with an increase in the libido. In the female aspect symptoms differ between the both remedies. Dysmenorrhoea and a scanty flow with the menses being delayed are exhibited in *Gelsemium* (Vermeulen, 2000:450). There is a sensation as if the uterus is being squeezed (Vermeulen, 2000:450). In *Ubiquinone* a delay was seen in the
menses followed by an excessive flow of blood which was red in colour. The pain was described as a cutting pain from side to side above the pubic bone which was improved by bending double.

In *Gelsemium* there is a slowness of breathing with great prostration (Vermeulen, 2000:451). Along with the breathing there is an oppression of the chest whereby it feels as if there is a lump behind the chest region (Vermeulen, 2000:451). The person feels that he needs to be in constant motion or the heart would cease to beat (Vermeulen, 2000:451). Palpitations are present, with the pulse being soft and weak, but accelerated on activity (Vermeulen, 2000:451). In *Ubiquinone* there was breathlessness as opposed to the slowness of breathing in *Gelsemium*. Prover’s felt that they were battling to get enough oxygen into the lungs with a tight feeling in the chest especially on deep inspiration. The pulse was of a rapid nature and symptoms intensified when walking or running fast. The chest area, besides having a tight feeling, also experienced dull, sharp stabbing pains which came from the heart region extending down to the left arm and neck. This is not seen in *Gelsemium* as they only have pain in the heart region on rising from a seat (Vermeulen, 2000:451).

*Ubiquinone* suffered with both a dry and a wet cough. In *Gelsemium* only a dry cough is seen with a sore chest and fluent coryza. The cough is also produced from a tickling in the Eustachian tube (Vermeulen, 2000:451). There is burning in the larynx and chest upon coughing (Vermeulen, 2000:451). The dry cough in *Ubiquinone* caused much itchiness in the trachea which was worse for talking, exertion and in the night.

A dull aching pain in the lumbar and sacral region is seen in the back symptoms of a *Gelsemium* (Vermeulen, 2000:451). The muscles including the neck feel bruised with more of a deep seated pain in the hips and lower extremities. Pain is also felt under the scapula (Vermeulen, 2000:451). A comparable pain was seen in *Ubiquinone* as they also suffered deep aching pains in the back, neck and shoulder region. The pain was worse for any movement and for lying on the back. Prover’s suffered a sharp stabbing pain
in the scapula. Moving down to the extremities, in *Ubiquinone* the right hand side was more affected than the left hand side. The right arm had a deep aching pain extending down to the shoulders while in *Gelsemium* cramps are felt in the forearms (Vermeulen, 2000:451). There is a loss of power of muscular control with excessive trembling and weakness of all the limbs in *Gelsemium* (Vermeulen, 2000:451). The lower limbs of *Ubiquinone* suffered with cramps and there was a burning sensation inside the calves which was better with movement. This sensation travelled down to the soles of the feet with aching in the ankles and joints.

In both remedies a fever is experienced with perspiration on the face and body. The fever brought about aches and pains in the body with a general feeling of being miserable in *Ubiquinone*. Some did show a cold sweat. In *Gelsemium* it is mostly a chill that is experienced. There is chilliness up and down the back with a small amount of perspiration (Vermeulen, 2000:451). Heat can come about with one being drowsy and prostrated. Paroxysms of fever recur from 3pm to 5pm in the afternoon in *Gelsemium* (Vermeulen, 2000:451).

There is dry skin in both remedies. The skin of *Gelsemium* is hot, dry, and itchy with an eruption similar to measeels (Vermeulen, 2000:452). The skin in *Ubiquinone* was dry and itchy. There was an eruption of vesicles that was white in colour with a clear fluid oozing from it.

In *Gelsemium* the person cannot get fully to sleep (Vermeulen, 2000:451). They suffer with insomnia from exhaustion or uncontrollable thinking (Vermeulen, 2000:451). The same was seen in *Ubiquinone*. There was a tremendous amount of exhaustion yet they battle to fall asleep. In the morning the *Ubiquinone* person awoke unrefreshed and drained and they preferred to stay in bed.

*Gelsemium* has a general feeling of prostration. There is great dizziness, drowsiness, dullness and trembling present (Vermeulen, 2000:448).
They have a tired feeling with muscular weakness or a lack of muscular coordination (Vermeulen, 2000:448). An aching and soreness is felt in the muscles of the extremities (Vermeulen, 2000:448). *Gelsemium* patients are sensitive to cold and dampness which bring on many complaints. They can get a cold at the slightest change of weather (Vermeulen, 2000:448).

In *Ubiquinone* a similarity seen with regards to the generals was that there was a cold sensitivity. The cold weather could not be tolerated as well as any cold drinks. *Ubiquinone* showed much exhaustion with body aches. There was a general run down feeling with the muscles being tight and bruised. One of the main differences in the generals was that *Ubiquinone* had increased amounts of energy whereby they were able to accomplish more in a day. *Gelsemium* lacks the energy and has more prostration and a dullness of mental faculties (Vermeulen, 2000:449).

**Ubiquinone and Pulsatilla pratensis**

The *Pulsatilla* character is a very timid, emotional and tearful being (Vermeulen, 2000:797). Extreme hypersensitivity is seen where one can be moved from laughter to tears whether it be a joyful or sorrowful occasion (Vermeulen, 2000:797). On the other hand *Pulsatilla* can be quite irritable and easily offended along with wandering thoughts, and is much better for being consoled (Vermeulen, 2000:797). Anxiety can be experienced which improves with the open air and motion (Vermeulen, 2000:797). The main fears found in *Pulsatilla* is of being afraid to be alone, insanity and of the dark. She wants to hide and run from ghosts and there is a delusion of being alone in the world (Vermeulen, 2000:797). When compared to *Ubiquinone*, we see hypersensitivity along with irritability with the external environment and to people around them. Provers were worse for being in the presence of others and prefered to be on their own. A contradictory symptom was shown whereby *Ubiquinone* had a need for recognition and attention from loved ones yet they had an aversion to people. The mind and body of *Ubiquinone* showed excessive exhaustion with the individual wanting to rest the entire day and not being able to focus on the tasks at hand. Anxiety was also found in *Ubiquinone* but differed from that of *Pulsatilla*. The anxiety and paranoia
centred on a feeling that one is being watched, someone is messing with their food and forgetting to lock the car doors. The main fear of *Ubiquinone* was of being socially rejected and the need for company in order to overcome their fear.

Headaches vary in nature in the *Pulsatilla* person. Headaches can be brought on from overwork, suppressed sexual excitement and indigestion (Vermeulen, 2000:797).

The head seems heavy and one cannot hold it upright along with a dull aching pain in the eyes. (Vermeulen, 2000:797). The headache can also be of a pulsating nature, and is better for pressure or tight bandaging (Vermeulen, 2000:799). There is a neuralgic pain in the temporal region, in the right temple accompanied by scalding lachrymation (Vermeulen, 2000:797). Pain is shooting in nature (Vermeulen, 2000:797). Pain in *Ubiquinone* began at the top of the head and radiated down to the temples. A throbbing pain was felt where the head feels cold, with the sensation that it would split down the middle with the brain falling forward.

The occipital area in *Pulsatilla* aches and is worse from coughing while the vertex area experiences pressure upon it (Vermeulen, 2000:797). In *Ubiquinone* the occipital head pain started at the base of the skull moving up to the neck. The pain was of a dull pulsating nature that was worse with any form of movement. *Pulsatilla* also experiences a bruised, pressing sensation felt in the forehead and above the orbits, the pain was worse on raising the eyes with a headache on one side as if the brain would burst and the eyes will fall out (Vermeulen, 2000:797). This is different in *Ubiquinone* as the frontal region has a pulsating, pounding feeling and is worse for any eye movement and pressure.

Vertigo is accompanied by nausea, gastric disturbances or menstrual disorders in *Pulsatilla* (Vermeulen, 2000:797). The vertigo is worse for sitting, looking up, stooping or in the morning and is better for the open air. The
Vertigo experienced in *Ubiquinone* was a sense of dizziness, which was short lived, along with weakness in the limbs.

*Pulsatilla* has thick, yellow, bland discharges with profuse lacrymation (Vermeulen, 2000:798). The lids are inflamed and agglutinated with burning and itching of the eyes. In *Ubiquinone* a resemblance was seen where the right upper lid in the right corner experienced some degree of pain with burning and itching. Styes are recurrent in the upper lids of *Pulsatilla* (Vermeulen, 2000:798) while *Ubiquinone* described the pain as of having a stye even though one was not present.

There is difficulty in hearing in *Pulsatilla* as if the ears were stuffed (Vermeulen, 2000:798). There is a sensation as if something was being forced outwards (Vermeulen, 2000:798). A resemblance in *Ubiquinone* ear symptoms was seen as there was a blocking of the ear with a sense of intense compression which was compared to a sensation of boiling water under a tight lid. This indicated the intensity of the compression. Hearing was also magnified in *Ubiquinone* as opposed to the difficulty in hearing experienced in *Pulsatilla*.

Coryza is present in both remedies. In *Pulsatilla* there is a pressing pain at the root of the nose with a loss of smell (Vermeulen, 2000:798). Mucus is mainly a yellow to a green colour with frequent sneezing (Vermeulen, 2000:798). Nose symptoms are worse for lying down, being indoors and are better for being outdoors (Vermeulen, 2000:798). In *Ubiquinone* a fluent coryza with a clear watery, non-burning discharge that turns yellow was seen. A dull congestion in the paranasal and frontal sinus was experienced with tension at the base of the skull.

A sense of heat in the face was shown in *Ubiquinone* along with a clenched jaw. The lips had a burning, tingling sensation and the appearance of a fever blister as *Pulsatilla* on the other had a right sided neuralgia with lacrymation (Vermeulen, 2000:798). *Pulsatilla* frequently licks their lips along with cracks being present in the middle of the lower lip (Vermeulen, 2000:798).
Ubiquinone provers experienced an allergic reaction in the mouth. Swelling and itchiness of the mouth and tongue were experienced. The gums had a torn feeling and burnt upon brushing. Pulsatilla has a dry mouth with a yellow or white tongue covered with tenacious mucus (Vermeulen, 2000:798). They have an alteration of taste with the tongue feeling scalded (Vermeulen, 2000:798). The gums are sore with a gnawing pain as opposed to having a torn feeling in Ubiquinone. A similarity is seen as Pulsatilla has tenacious saliva like frothy cotton (Vermeulen, 2000:798) and in Ubiquinone we saw increased amounts of saliva dripping out of the mouth. A toothache is present in Pulsatilla. The pain is sharp, shooting, drawing and jerking as if the nerve was stretched and then let loose (Vermeulen, 2000:798). The toothache is better for holding cold water in the mouth and worse for the warmth of the bed or warm air. In Ubiquinone pain was felt in the front upper region of the tooth radiating from one incisor to another. A sensation of vibration was also felt in the tooth which was worse upon blowing the nose.

Pulsatilla has a dry sore throat. The throat is covered with tenacious mucus and feels raw and scraped (Vermeulen, 2000:799). Upon swallowing there is pressure and tension in the throat (Vermeulen, 2000:799). Ubiquinone had a hoarse dry throat and experienced pain on swallowing both liquids and solids. The pain was described as a pressing type of discomfort along with an intense scraping of the back of the throat as from razors. There was also a sensation that the diameter of the throat was diminishing with each breath.

The Pulsatilla patient has a very sensitive stomach. There is a desire for tonics with an aversion to fatty and warm foods as well as warm drinks (Vermeulen, 2000:799). They suffer with heartburn and a lot of bloatedness after a meal in which they must loosen their clothing (Vermeulen, 2000:799). There is vomiting of food which has been eaten long ago with the stomach experiencing cramps and pressing pains after eating (Vermeulen, 2000:799). A lack of thirst is also seen with all complaints in a Pulsatilla person (Vermeulen, 2000:799). In Ubiquinone a limitless appetite was seen at first. The person was never satisfied after a meal and felt as if more could be eaten. This was followed by a decline in the appetite and small meals were
sufficient to satisfy hunger for longer. Nausea was experienced which was worse upon motion and vomiting of food, even after a small meal brought about relief. An increase in thirst was shown in *Ubiquinone* while this differs in *Pulsatilla* where there is no thirst. Heartburn was another symptom experienced which was described as a sensation of heat that moved between the stomach and oesophagus and was better for drinking cold water.

The abdomen of *Pulsatilla* is distended with loud rumbling noises (Vermeulen, 2000:799). There is cutting, drawing and bearing down pains in the lower abdomen (Vermeulen, 2000:799) along with the abdominal wall being sensitive and swollen (Vermeulen, 2000:799). *Pulsatilla* also experiences much flatus which moves around in the abdomen (Vermeulen, 2000:799). *Ubiquinone* on the other hand suffered with a dull right hypochondrial pain that extended to the back. The pain was of a cutting nature similar to that of *Pulsatilla*. The liver also had an enlarged feeling with pain that radiated to the back. An increase in flatus with audible borborigmi was noted in *Ubiquinone*.

Diarrhoea and constipation are present in both remedies. Diarrhoea in *Pulsatilla* consists of watery stools with much rumbling that is worse at night (Vermeulen, 2000:799). There can be dysentery with mucus and blood. Stools can be green and bilious along with a discharge of blood from the rectum without a stool being present (Vermeulen, 2000:799). In *Ubiquinone* diarrhoea was mainly after every meal. A loose, smoky, muddy appearance of the stool with no foul odour was noted. Bright red blood in some stools were also seen. With regard to constipation, difficult evacuation with a painful pressure in the back is seen in *Pulsatilla* (Vermeulen, 2000:799). Much straining with an unsettling feeling was experienced in *Ubiquinone*. Stools were hard and brown compared to *Pulsatilla’s* where white mucus is mixed with the stool (Vermeulen, 2000:799).

A dull aching pain in the left testicle extended to the hip joint and buttocks upon waking was exhibited in *Ubiquinone*. In *Pulsatilla* the testicles suffer
with pain and swelling extending to the spermatic cord especially on the right hand side (Vermeulen, 2000:800). A tearing pain in the testicles which also extends upwards can be seen (Vermeulen, 2000:800). On the female aspect _Pulsatilla_ suffers with amenorrhoea (Vermeulen, 2000:800). Menses are suppressed, late and scanty. The discharge can be thick, dark, clotted and intermittent (Vermeulen, 2000:800). A downward bearing down pressure is felt with pain in the back and exhaustion (Vermeulen, 2000:800). A comparable symptom was noted in _Ubiquinone_ as the menses are firstly suppressed and delayed. This later changed and a vast amount of blood was expelled. A heavy flow with clots was seen with pain of a cutting nature from side to side above the pubic bone which was better for bending double.

A dry cough in the evening in which one has to sit up in bed to get relief is seen in _Pulsatilla_ (Vermeulen, 2000:800). The cough is short and dry which is worse on becoming warm and aggravates after sleeping (Vermeulen, 2000:800). Dryness from the larynx and trachea increases the cough and the cough is made worse when eating and when lying down (Vermeulen, 2000:800). _Ubiquinone_ also experienced a dry cough which caused itchiness in the trachea just below the larynx above the sternal notch. The main modalities were worse from talking, exertion, night and better from eating and drinking both hot and cold liquids. Expectoration was copious, bland, thick and bitter in _Pulsatilla_ (Vermeulen, 2000:800) whilst being salty and yellowish and green in colour in _Ubiquinone_.

_Pulsatilla_ experiences shortness of breath with anxiety and palpitations, especially when lying on the left hand side (Vermeulen, 2000:800). There is a pressure and soreness upon the chest as from a load (Vermeulen, 2000:801). The pain is behind the sternum as if ulcerated, and the person can suffer with stitches in the chest and sides when lying down, at night or from inspiration or coughing (Vermeulen, 2000:801). All chest symptoms are worse for lying on the painful side whilst shortness of breath is better with pressure of the hand and walking (Vermeulen, 2000:801). This differed from _Ubiquinone_ as they suffered with breathlessness which was exacerbated by walking or running. Stabbing pains were felt in the chest region which
extended down the neck and left arm. A tight feeling over the chest area which was worse on inspiration along with palpitations and a rapid pulse was also present.

In the back region *Pulsatilla* has a shooting pain in the nape of the neck, back, between the shoulders and the sacrum, especially after sitting (Vermeulen, 2000:801). There is a sensation as if cold water is being poured down the back, along with backache from prolonged stooping which is worse with lying on the back and better on lying on one’s side or changing positions (Vermeulen, 2000:801). The back feels bandaged, with stiffness in the muscles and difficulty in moving the neck (Vermeulen, 2000:801). This differs in *Ubiquinone* where the backache was described as a deep ache in the lower back, neck, shoulders and scapula and not a shooting pain. The provers described the pain as so tender that one could not lie on their back, which is also seen in *Pulsatilla* and was worse for any movement. The sensation in *Ubiquinone* was of the bones feeling like they were twisting and grinding against each other.

In the extremities, *Pulsatilla* experiences pains in the limbs that shift rapidly and are worse at night, for warmth and better for uncovering (Vermeulen, 2000:801). There is a drawing, tense pain in the thighs and legs (Vermeulen, 2000:801). The arms feel broken and dislocated and the joints are red and swollen (Vermeulen, 2000:801). In the lower limbs the legs feel heavy and weary. The knees are swollen with tearing, drawing pains (Vermeulen, 2000:801). There is numbness in the legs when standing for a long period of time and red hot swelling of the feet which ascends up the calves with a shooting pain (Vermeulen, 2000:801). In *Pulsatilla* coldness of the hands and feet is felt or a feeling of heat in the feet leading the person to uncover them (Vermeulen, 2000:801). In *Ubiquinone* the pains in the extremities were different. The right side was more afflicted. The right arm experienced a bruised, deep pain which extended down to the shoulders. All muscles in the body had a general fatigued feeling, with the joints aching as if they had been tightened from the inside. The calves had a burning feeling compared to the shooting pain in *Pulsatilla*. A similarity between the remedies is seen in the
feet as the heels had a burning sensation which was worse for standing and provers also described an icy cold feeling in *Ubiquinone*

*Ubiquinone* experienced sweating on the face, back and abdomen. There was a fever along with body aches and pains. Perspiration ranged from being sweaty and miserable to being cold at times. *Pulsatilla* experiences more of a chilliness even in a warm room which is worse in the evenings (Vermeulen, 2000:802). There is heat in parts of the body with coldness in others. They can suffer with an intolerable burning heat at night with distended veins (Vermeulen, 2000:802).

Urticaria, especially after rich food, is seen on the skin of *Pulsatilla* (Vermeulen, 2000:802). The skin itches when becoming hot and is worse in the evening and when in bed and feels better when scratched. The entire body burns on becoming warm in bed and is worse for scratching (Vermeulen, 2000:802). The skin in *Ubiquinone* was dry and itchy. Extreme itchiness led to the skin becoming red and swollen. Little round weals were found on the arms after scratching. The itchiness was worse for warm water and better for cold water. Vesicular eruptions were also seen with a clear fluid oozing from it.

Both remedies share the symptom of having great sleepiness during the day (Vermeulen, 2000:802). *Ubiquinone* and *Pulsatilla* both awake unrefreshed in the morning with frequent yawning throughout the day (Vermeulen, 2000:802). Once asleep there is much restlessness experienced. The only difference seen is that *Pulsatilla* talks or whines during their sleep and can experience a sensation of heat. Dreams are of a frightful, disgusting and confused nature in *Pulsatilla* (Vermeulen, 2000:802). While *Ubiquinone* experienced a few dreams that were of an anxious and paranoid nature.
CHAPTER 6
CONCLUSION AND RECOMMENDATIONS

6.1 CONCLUSION
The homoeopathic drug proving of *Ubiquinone* 30CH produced a wide array of symptoms in the mental, emotional and physical spheres. There were a number of exceptionally strong symptoms that occurred in the vast majority of provers as discussed in subsection 5.3 of Chapter Five of this document. Most particularly, these were symptoms relating to the mind, the head and those affecting the extremities.

From this proving it can be seen that *Ubiquinone* 30CH has the potential to provide a profound acting cure for patients with an assortment of conditions. It is hoped that further provings and clinical applications of *Ubiquinone* 30CH will provide verification and prove it to be of such significance that nothing else will be able to take its place, just as nothing else can take the place of the better known remedies widely used today (Sherr, 1994:9).

6.2 RECOMMENDATIONS
6.2.1 FURTHER PROVINGS OF *UBIQUINONE*
Vithoulkas (1980) believes that a remedy cannot be considered fully proven until the proving of that substance is conducted in low (6CH or 9CH), medium (30CH) and high (200CH or 1M) potencies. Sherr (1994:65) explains how a proving is only complete when the latest provings repeat the previous ones. It is thus recommended that these studies should include not only the 30CH potency but that higher and lower potencies should also be used. This would produce a full remedy picture and expand the Materia Medica attained through these provings. Another advantage of using numerous potencies would be to note the relative sensitivities of individuals to particular potency levels.

It will also be in the best interest for the verification of symptoms that the provers should consist of individuals with a good knowledge of provings, and therefore not the general public. At the outset it might be believed that a wider range of people would offer a larger set of symptoms. This, however, is
not the case as many members of the general public are not very aware of the functioning of their bodies. This would lead to the evaluation of their symptoms being very indistinct and generalised as opposed to if all the provers were Homoeopaths or student Homoeopaths. Lastly, a comparative study can be carried out between this study and other similar remedies.

**Clinical information**

It is important that the remedy be used by practitioners in the field in order for the various symptoms to be clinically verified. The range of symptoms produced in the proving of *Ubiquinone* 30CH is indicative of clinical conditions that this remedy can possibly treat. This nevertheless has to be confirmed through additional provings by treating the various clinical conditions with *Ubiquinone* 30CH. Listed beneath are conditions and disorders that can be treated through the application of the similitude principle where the condition corresponds to the symptomatology in this proving.

- Chronic Fatigue Syndrome due to the decrease in energy experienced.
- Anxiety since irritability and emotional fragility were present in many of the provers.
- Headaches and migraines, especially of a dull, pulsating origin and affecting the eyes.
- Sinusitis due to the fluent coryza of clear fluid and pain in the sinuses.
- Nausea, dyspepsia and sudden changes in appetite.
- Difficulty in breathing, palpitations and changes in the pulse rate.
- Back pain and pain in the extremities.

**6.2.2 Publication of the Substance**

*Ubiquinone* 30CH has produced varied symptoms in the mental, emotional and physical spheres. The knowledge of this remedy for other practicing Homoeopaths throughout the world has to be recognised and thus I suggest that the results of this new remedy be published in articles and journals and be added to Sherr’s (2006) online catalogue of new remedies, once more provings are done.
REFERENCES


INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) LETTER OF INFORMATION:
PRELIMINARY INFORMATION LETTER

Title of the Research Study: A double blind placebo controlled proving of Substance X 30CH with subsequent comparison to existing Materia Medica.

Principal Investigator/s/researcher: Keshia Naidoo, M: Tech. Homoeopathy
Co-Investigator/s/supervisor/s: Dr Izel Botha, D: Tech, Homoeopathy

Brief Introduction and Purpose of the Study: A homoeopathic drug proving is a study in which people who are in a relatively good state of health, take a homoeopathically prepared substance in order to observe and record any symptoms they may experience. These symptoms are then said to form the drug picture for that substance and can be used as basis for prescription, according to the Law of Similaris, when a patient displays a similar symptom picture. Provings are vitally important to homoeopathy as they represent the only truly accurate manner in which to ascertain the action of the homoeopathic drugs and allows one to gain a practical and experimental understanding of homoeopathic medicines.

Outline of the Procedures:
1. Once you have read and understood this information letter fully and had the opportunity to ask questions you will be asked to sign a preliminary consent form which allows the researcher to take you through the preliminary stage of this research.
2. After signing the preliminary consent form the researcher will determine if you meet the required criteria for this study this will take place in the form a of a set of questions about your lifestyle and medical history.
3. If you meet the required criteria in order to participate the next process can begin.
4. The researcher will conduct a homeopathic case history; this is a detailed interview where the researcher asks detailed questions about your health.

5. The researcher will then conduct a general physical examination and measures things such as blood pressure, pulse, height weight etc.

6. After all of the above are conducted (which should take about 1 hour to perform) the researcher will provide feedback on her findings and then if all the necessary criteria are met you will be invited to a prover training workshop at where all provers will be trained on how to conduct the proving.

At any stage in this preliminary process you are free to change your mind and withdraw without having to provide any reason for doing so. All of the above will be conducted at the Homeopathic Day Clinic at Durban University of Technology; the researcher will be under the constant supervision of a homeopathic doctor.

**Risks or Discomforts to the Participant:** There is no risk to participation or risk of discomfort in this preliminary stage of the proving, no medicine is tested at this stage

Prospective provers are only screened for suitability as provers at this preliminary stage of the proving.

**Benefits, remuneration and costs:** Although there is no direct benefit to participating in this preliminary stage of the proving, you will receive an in depth assessment of your health status which may be of indirect benefit to you, there will be no charge for this assessment. No remuneration will be offered to participants who are requested to partake voluntarily.

**Reason/s why the Participant May Be Withdrawn from the Study:** Participation in this study is purely voluntary and provers can withdraw at any given time. Participant will be excluded if they do not meet the inclusion criteria. If participants fall ill and require allopathic treatment they will also be withdrawn from the study.
Confidentiality: All of the above will be conducted in private; and all information is kept strictly confidential, only the researcher and her supervisor will have access to the information and at no stage will your name be mentioned in the research process. Only the researcher will be present during your physical examination.

Persons to Contact in the Event of Any Problems or Queries: Please contact the researcher: Keshia Naidoo (084 5820 546.), my supervisor Dr Botha (031 3732917/082 697 2525) or the Institutional Research Ethics administrator on 031 373 2900. Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or dvctip@dut.ac.za.

General: Participation is purely voluntary and you can withdraw from the study at any given time. A total number of 26 participants will be involved in this proving. If you have any questions or require any information please feel free to contact the researcher or supervisor on the above contact details.

INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) CONSENT
Statement of Agreement to Participate in the Research Study:

• I hereby confirm that I have been informed by the researcher, ____________ (name of researcher), about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number: ____________.
• I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
• I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
• In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
• I may, at any stage, without prejudice, withdraw my consent and participation in the study.
• I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
• I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

____________________  __________ __________ _______________________
Full Name of Participant Date Time Signature / Right Thumbprint

I, ______________ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

____________________  __________ __________ _______________________

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References:
Department of Health. 2006. *South African Good Clinical Practice Guidelines.* 2nd Ed. Available at:
http://www.nhrec.org.za/?page_id=14
APPENDIX B

SCREENING FOR SUITABILITY AND INCLUSION IN THE PROVING*

ALL INFORMATION WILL BE TREATED AS STRICTLY CONFIDENTIAL

Surname: .................................................................

First Names: ...........................................................

Age: .............. Sex: M F Telephone: 

• Are you between the ages of 18 and 60 years? YES NO

• Are you on or in need of any medication?
  Chemical /allopathic YES NO
  Homoeopathic YES NO
  Other YES NO

• Have you been on the birth control pill or hormone replacement therapy in the last 6 months? YES NO

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• Are you pregnant or breastfeeding?  

YES | NO

• Have you had surgery in the last six weeks?  

YES | NO

• Do you use recreational drugs such as cannabis, LSD or Ecstasy (MDMA)?  

YES | NO

• Do you consume more than:
  Two measures of alcohol per day?  

YES | NO

(1 measure = 1 tot spirit / 1 beer / ½ glass of wine)

10 cigarettes per day?  

YES | NO

3 cups of coffee or tea per day?  

YES | NO

• Do you consider yourself to be in a general state of good health?  

YES | NO

• If you are between the ages of 18 and 21 years do you have consent from a parent/ guardian to participate in this proving?  

YES | NO

Are you willing to follow the proper procedures for the duration of the proving (including journal-keeping, consultations with your supervisor and blood tests)?  

YES | NO

*This appendix has been adapted from Wright, C. (1999) A Homoeopathic Drug Proving of *Bitis arietans arietans*
APPENDIX C

INITIAL CASE HISTORY & PHYSICAL EXAMINATION *

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1. Past Medical History:

(Please list previous health problems and their approximate dates:)

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Do you have a history of any of the following? [Please tick relevant blocks]

- Cancer
- HIV
- Parasitic infections
- Asthma
- Pneumonia/Chronic bronchitis
- Tuberculosis
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<th>Glandular fever</th>
<th>Boils/ Suppurative tendency</th>
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<td>Bleeding disorders</td>
<td>Smoking</td>
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<td>Eczema/ Skin conditions</td>
<td>Oedema/ Swelling</td>
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<td>Warts</td>
<td>Haemorrhoids</td>
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### 2. Surgical History:
(Please list any past surgical procedures [e.g. tonsils, warts, moles, Appendix etc.] and their approximate dates:)

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### 3. Family History:

Is there a history of any of the following within your family?  
*(including siblings, parents and grandparents)*

- Cardiovascular disease *(incl. hypertension, heart disease, etc.)*
- Cerebrovascular disease *(incl. stroke, transient ischaemic attacks, etc.)*
- Diabetes mellitus
- Tuberculosis
- Mental illness *(incl. depression, schizophrenia, suicide, etc.)*
- Cancer
- Epilepsy
- Bleeding disorders

Please list any other medical conditions within your family:

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4. Background Personal History:

Allergies:

Vaccinations:

Medication (including supplements):

Estimation of daily consumption:

Alcohol:

Cigarettes:

5. Generalities:

Energy:
Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.
Sleep:
Quantity:
Quality:
Position:

Dreams:

Time modalities:

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Weather modalities

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Temperature modalities:

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Perspiration:


Appetite:

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Thirst:


Bowel habits:

Urination:

Menstrual cycle and menses:

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Pain:

6. Head-to-toe and Systems Overview:

Head:

Eyes and Vision:

Ears and Hearing:
Nose and Sinuses:

Mouth, Tongue and Teeth:

Throat:

Respiratory System:

Cardiovascular System:

Gastro-intestinal System:

Urinary System:
Genitalia and Sexuality:

Musculoskeletal System:

Extremities:

Upper:

Lower:

Skin:

Hair and Nails:

Other:
7. Psychic Overview:

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8. The Physical Examination:

a) Physical Description

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<table>
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<tr>
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<th>Skin texture:</th>
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b) **Vital Signs**

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<td>Respiratory rate:</td>
<td>breaths/min</td>
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<td>Temperature:</td>
<td>°C</td>
</tr>
<tr>
<td>Blood Pressure:</td>
<td>/ mmHg</td>
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</table>

c) **Findings on Physical Examination**  
*Tick positive blocks*

- Jaundice
- Anaemia
- Cyanosis
- Clubbing
- Oedema
- Lymphadenopathy
- Hydration

**Specific System Examinations**

**Consultation**

<table>
<thead>
<tr>
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APPENDIX D

INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) LETTER OF INFORMATION:
MAIN INFORMATION LETTER

Title of the Research Study: A double blind placebo controlled proving and comparative Materia Medica of Substance X 30CH

Principal Investigator/s/researcher: Keshia Naidoo M: Tech Homoeopathy  
Co-Investigator/s/supervisor/s: Dr Izel Botha D: Tech Homoeopathy

Brief Introduction and Purpose of the Study: Thank you for agreeing to take part in this proving. We are grateful for your willingness to contribute to the advancement and growth of homoeopathic Science, and are sure that you will derive benefit from the experience. A homoeopathic drug proving is a study in which people who are in a relatively good state of health, take a homoeopathically prepared substance in order to observe and record any symptoms they may experience. These symptoms are then said to form the drug picture for that substance and can be used as basis for prescription, according to the Law of Similars, when a patient displays a similar symptom picture. Provings are vitally important to homeopathy as they represent the only truly accurate manner in which to ascertain the action of the homeopathic drugs and allows one to gain a practical and experimental understanding of homeopathic medicines. In addition to contributing to the homoeopathic profession in the form of understanding a new homoeopathic medicine, the study is of commercial interest to an international homoeopathic pharmaceutical company who has sponsored the research and has entered into a contractual agreement with DUT to perform the research on its behalf.

Outline of the Procedures:

Before the proving:

Ensure that you have:
• signed the *Main Informed Consent Form*
• had a *case history* taken and a *physical examination* performed
• attended the pre-proving *training session*
• an assigned *prover number*, and corresponding *journal* and
• read and understood these *Instructions*

The principal investigator will contact you with the date that you are required to commence the pre-proving observation period, and the date that you are required to start taking the remedy. You will also agree on a daily contact time for the researcher to contact you.

**Should there be any problems, or anything you do not fully understand, please do not hesitate to call your proving supervisor.**

**Beginning the proving:**

After having been contacted by your supervisor and asked to commence the proving, record your symptoms daily in the diary for one week prior to taking the remedy. This will help you to get into the habit of observing and recording your symptoms, as well as bringing you into familiarity with your normal state. This is an important step as it establishes a baseline for you as an individual prover.

**Taking the remedy:**

All the remedies used during this process have been prepared by an independent company. The active substance/placebo has been assigned according to randomisation whereby 6 participants will receive placebo and the other 20 will receive the active substance.
Begin taking the remedy on the day that you and your supervisor have agreed upon. Record the time that you take each dose. Time keeping is an important element of the proving.

The remedy should be taken on an empty stomach and with a clean mouth. Neither food nor drink should be taken for a half-hour before and after taking the remedy. The remedy should not be taken for more than 3 doses a day for five days \((15 \text{ doses maximum})\). In the event that you experience symptoms, or those around you observe any proving symptoms, **do not take any further doses of the remedy. This is very important.**

By proving symptoms we mean:

- **Any new symptom**, i.e. ones that you have never experienced before
- **Any unusual change or intensification of an existing symptom**
- **Any strong return of an old symptom**, i.e. a symptom that you have not experienced for more than one year.

If in doubt phone your supervisor. Be on the safe side and do not take further doses. Homoeopathic experience has repeatedly shown that the proving symptoms begin very subtly – often before the prover recognises that the remedy has begun to act.

**Lifestyle during the Proving:**

Avoid all **antidoting factors** such as coffee, camphor and mints. If you normally use these substances, please stop taking them for two weeks before, and for the duration of the proving. Protect the medicine you are proving like any other potentised remedy: store them in a cool, dark place away from **strong smelling** substances, **chemicals**, **electrical equipment** and **cellphones**.
A successful proving depends on your recognising and respecting the need for moderation in the following areas: work, alcohol exercise and diet. Try to remain within your usual framework and maintain your usual habits. Avoid taking medication of any sort, including antibiotics and any steroid or cortisone preparations, vitamin or mineral supplements, herbal or homoeopathic remedies.

In the event of medical or dental emergency of course common sense should prevail. Contact your doctor, dentist or local hospital as necessary. Please contact your supervisor as soon as possible.

Confidentiality:

It is important for the quality and the credibility of the proving that you discuss your symptoms only with your supervisor. Keep your symptoms to yourself and do not discuss them with fellow provers.

Your privacy is something that we will protect. Only your supervisor will know your identity and all information will be treated in the strictest confidence.

Contact with your Supervisor:

Your supervisor will telephone you to inform you to begin your one-week observation period, and then daily from the day that you begin to take the remedy. This will later decrease to 2 or 3 times a week and then to once a week, as soon as you and the supervisor agree that there is no longer a need for such close contact. This will serve to check on your progress, ensure that you are recording the best quality symptoms possible and to judge when you need to cease taking the remedy.

If you encounter any problems during the proving, please do not hesitate to call your supervisor.

Recording of Symptoms:

When you commence the proving note down carefully any symptoms that arise, whether they are old or new, and the time of the day or night at which
they occurred. This should be done as vigilantly and frequently as possible so that the details will be fresh in your memory. Make a note even if nothing happens.

Please start each day on a new page with the date noted at the top of each page. Also note which day of the proving it is. The day that you took the first dose is day zero.

Write neatly on alternate lines, in order to facilitate the extraction process, which is the next stage of the proving. Try to keep the journal with you at all times. Please be as precise as possible. Note in an accurate, detailed but brief manner your symptoms in your own language.

Information about location, sensation, modality, time and intensity is particularly important.

- **Location:** Try to be accurate in your anatomical descriptions. Simple, clear diagrams may help here. Be attentive to which side of the body is affected.

- **Sensation:** Describe this as carefully and as thoroughly as possible e.g. burning, shooting, stitching, throbbing, and dull etc.

- **Modality:** A modality describes how a symptom is affected by different situations/stimuli. Better (>) or worse (<) from weather, food, smells, dark, lying, standing, light, people etc. Try different things out and record any changes.

- **Time:** Note the time of onset of the symptoms, and when they cease or are altered. Is it generally > or < at a particular time of day, and is this unusual for you.

- **Intensity:** Briefly describe the sensation and the effect on you.
• **Aetiology:** Did anything seem to cause or set off the symptom and does it do this repeatedly?

• **Concomitants:** Do any symptoms appear together or always seem to accompany each other, or do some symptoms seem to alternate with each other?

This is easily remembered as:

C - concomitants
L - location
A - aetiology
M - modality
I - intensity
T - time
S - sensation

On a daily basis, you should run through the following checklist to ensure that you have observed and recorded all your symptoms:

- MIND / MOOD
- HEAD
- EYES / VISION
- EARS / HEARING
- NOSE
- BACK
- CHEST AND RESPIRATION
- DIGESTIVE SYSTEM
- EXTREMITIES
- URINARY ORGANS
- GENITALIA
- SEX / MENSTRUATION
- SKIN
- TEMPERATURE
- SLEEP
- DREAMS
- GENERALITIES
Please give full description of dreams, and in particular note the general feeling or impression the dream left you with.

Mental and emotional symptoms are important, and sometimes difficult to describe – please take special care in noting these.

Reports from friends and relatives can be particularly enlightening. Please include these where possible. At the end of the proving, please make a general summary of the proving: note how the proving affected you in general; how has this experience affected your health?; would you do another proving?

As far as possible try to classify each of your symptoms by making a notation according to the following key in brackets next to each entry:

(RS) – Recent symptom i.e. a symptom that you are suffering from now, or have been suffering from in the last year.

(NS) – New symptom

(OS) – Old symptom. State when the symptom occurred previously.

(AS) – Alteration in the present or old symptom (e.g. used to be on the left side, now on the right side)

(US) – An unusual symptom for you.

If you have any doubts, discuss them with your supervisor.

Please remember that detailed observation and concise, legible recording is crucial to the proving. One reads in *The Organon of the Medical Art*, paragraph 126:

*The person who is proving the medicine must be pre-eminently trustworthy and conscientious…and be able to express and describe his sensations in accurate terms."

*(Hahnemann, 1997: 200)*
**Risks or Discomforts to the Participant:** You may develop mild, functional symptoms in response to taking the proving substance; due to the very high dilution of the proving medicine though these symptoms are not permanent and disappear when the proving medicine is stopped. Whilst taking part in the proving you will be closely monitored by the researcher and the research supervisor; in the unlikely event that proving symptoms persist upon withdrawal of the proving medicine an antidote will be provided.

**Benefits, costs and remuneration:** Although there is no direct benefit to participating in this proving, you will receive an in depth assessment of your health status which may be of indirect benefit to you, there will be no charge for this assessment. No remuneration will be offered to participants who are requested to partake voluntarily.

**Reason/s why the Participant May Be Withdrawn from the Study:** Participation in this study is purely voluntary and provers can withdraw at any given time. Participant will be excluded if they do not meet the inclusion criteria. If participants fall ill and require allopathic treatment they will also be withdrawn from the study.

**Confidentiality:** It is important for the quality and the credibility of the proving that you discuss your symptoms only with your supervisor. Keep your symptoms to yourself and do not discuss them with fellow provers. Your privacy is something that we will protect. Only your supervisor will know your identity and all information will be treated in the strictest confidence.

**Persons to Contact in the Event of Any Problems or Queries:** Please contact the researcher: Keshia Naidoo (084 5820 546), my supervisor: Dr Botha (031 373 2917/ 082 697 2525) or the Institutional Research Ethics administrator on 031 373 2900. Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or dvctip@dut.ac.za.

**General:** Participation is purely voluntary and you can withdraw from the study at any given time. A total number of 26 participants will be involved in this proving. If you have any questions or require any information please feel free to contact the researcher or supervisor on the above contact details.

**INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) CONSENT**

**Statement of Agreement to Participate in the Research Study:**

- I hereby confirm that I have been informed by the researcher, ____________ (name of researcher), about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number:
• I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
• I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
• In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
• I may, at any stage, without prejudice, withdraw my consent and participation in the study.
• I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
• I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

Full Name of Participant Date Time Signature / Right Thumbprint

I, ______________ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

Full Name of Researcher Date Signature

Full Name of Witness (If applicable) Date Signature

Full Name of Legal Guardian (If applicable) Date Signature

References:
Department of Health. 2006. *South African Good Clinical Practice Guidelines*. 2nd Ed. Available at:  
http://www.nhrec.org.za/?page_id=14
## FOLLOW UP CASE HISTORY & PHYSICAL EXAMINATION*

### ALL INFORMATION WILL BE TREATED AS STRICTLY CONFIDENTIAL

### PROVER NUMBER:

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### 1. Background Personal History:

**Allergies:**

________________________________________________________________________

**Vaccinations:**

________________________________________________________________________

**Medication** *(including supplements):*

________________________________________________________________________

**Estimation of daily consumption:**

**Alcohol:**

________________________________________________________________________

**Cigarettes:**

________________________________________________________________________
5. Generalities:

Energy:
Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

Sleep:
Quantity:
Quality:
Position:

Dreams:

Time modalities:

| > |< |

Weather modalities

| > |< |

Temperature modalities:

| > |< |

Perspiration:
**Appetite:**

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**Thirst:**


**Bowel habits:**


**Urination:**


**Menstrual cycle and menses:**

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<td>Pain:</td>
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**Head-to-toe and Systems Overview:**

**Head:**


223
Eyes and Vision:

Ears and Hearing:

Nose and Sinuses:

Mouth, Tongue and Teeth:

Throat:

Respiratory System:

Cardiovascular System:

Gastro-intestinal System:
Urinary System:

Genitalia and Sexuality:

Musculoskeletal System:

Extremities:

Upper:

Lower:

Skin:

Hair and Nails:
7. Psychic Overview:

**Disposition:**


**Fears:**


**Relationships:**


**Social Interaction:**


**Ambition / Regret:**


**Hobbies/Interests:**


8. The Physical Examination:

d) Physical Description

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e) Vital Signs

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<td>beats/min</td>
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<td>Respiratory rate:</td>
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<td>°C</td>
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<td>Blood Pressure:</td>
<td>/ mmHg</td>
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g) Findings on Physical Examination [Tick positive blocks]

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<tr>
<th>Jaundice</th>
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<td>Cyanosis</td>
<td>Hydration</td>
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Clubbing

Specific System Examinations
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APPENDIX F
FLOW CHART

PRE CLINICAL PHASE

- Preliminary Consent
  - Screening:
    - In- and exclusion criteria
  - Initial homeopathic case history, F2F
  - Physical examination

Prover Training Workshop
- Proving Information
- Prover Training
- Signing of Main ICF
- Allocation of random no;
- Numbered prover journal
- Schedule
- Proving Drugs

Invitation to the workshop

Baseline data acquisition phase/Recruitment phase

CLINICAL PHASE

- First Participant In
- Last Participant Out

Run-In Phase
- Contact on DAYS 01*, 02*, 03*, 04*, 05*, 07, 10, 14, 21, 28**
- max 5 days

Administration Phase
- Contact on DAYS 35, 42
- 2 weeks

Post Administration Phase

Run-Out Phase

Active Phase = 4 weeks

Daily journaling over a duration of 7 weeks

* 3 times daily during drug-intake period
** DAY-28 = End of active phase
**“Normal” Symptoms during Active Phase for two Weeks**

*3 times daily during drug intake period

---

**DAY 14 or 21:** Discretion on forwarding to Run-Out Phase

- Run-In Phase
  - 7 days
  - max 5 days
- Administration Phase
- Post Administration Phase
- Run-Out Phase
  - 2 weeks

**Active Phase = 2 - 4 weeks**

---

**Daily journaling over a duration of 5 - 7 weeks**

---

**FOLLOW-UP CLINICAL PHASE**

- Transcribing of journals to electronic format
  - Distinguishing of experimental symptoms by prover
    - Unblinding
  - Comparison of placebo to verum symptoms
    - Preliminary Materia Medica

---

**2nd F2F Meeting**
- Physical Examination
- Case History
- Return of journal
- Return of proving drug containers
- Antidote if necessary with weekly follow up until resolution

---

Placebo participants notified that they had taken Placebo and the Verum participants are telephoned for final follow up after 6 weeks after end of Run-Out Phase

---

FINAL FOLLOW UP for VERUM

---

Follow-up Phase

(=6 weeks after end of Run-Out Phase)

---

FINAL participant close out visit
ARE YOU A HEALTHY INDIVIDUAL BETWEEN THE AGES OF 18-50??
AND WILLING TO PART TAKE IN A HOMOEOPATHIC PROVING??

FOR MORE INFO CONTACT
KESHIA AT: 0845820546 / 0721800782
### APPENDIX H

RESULTS OF REPERTORY

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1. **MIND - COMPANY - aversion to**

2. **MIND - IRRITABILITY**

3. **HEAD - PAIN**

4. **EXTREMITIES - PAIN**

5. **GENERALs - WEAKNESS**

6. **GENERALs - WEARINESS**

---

(297) 1 |

(645) 1 |

(767) 1 |

(401) 1 |

(916) 1 |

(368) 1 |