

An evaluation of the homoeopathic drug proving of
Sutherlandia frutescens in the light of a
doctrine of signatures analysis.

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Mini-dissertation

An Evaluation of the Homoeopathic Drug Proving of

Sutherlandia frutescens in the light of a

Doctrine of Signatures Analysis.

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Mini-dissertation submitted in partial compliance with the requirements for the

Master's Degree in Technology: Homoeopathy in the Department of

Homoeopathy at the Durban Institute of Technology.

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

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ACKNOWLEDGEMENTS:

I would like to thank:

All my family and friends for all their love and support during this research and the entire course. Without you I would not have been able to get this far or enjoy doing so. Thank you.

Be grateful to the flame for the light it provides, but do not forget the pedestal upon which the lamp rests; it stands in the shadow with faithful patience.

-Rabindranath Tagore.

ABSTRACT:

The first objective was to investigate the effect of Sutherlandia frutescens 30CH on healthy provers and to record the signs and symptoms produced, so that it could be prescribed according to the Law of Similars, as required by homoeopathy. The second objective was to analyze the symptoms obtained from this proving according to the doctrine of signatures. It was hypothesized that Sutherlandia frutescens 30CH would produce observable signs and symptoms in healthy volunteers which would correlate to a doctrine of signatures analysis of the plant.

A double blind proving of Sutherlandia frutescens 30CH was conducted. 24 provers were selected and randomly divided into two groups, the first consisted of 18 provers who received medicated powders and the second consisted of the remaining six who received placebo. The subjects were unaware of the nature of the substance that they took nor the potency thereof as an added control measure. Provers were examined and kept journals before, during and after administration of the remedy so as to serve as their own control. This information, along with data collected by the researchers from case histories and physical examination, was then assessed on completion of the proving. The researchers then translated the symptoms elicited into Materia Medica and repertory language and formulated a homoeopathic picture of this remedy. Data was analyzed by qualitative methods, as the data was not amenable to standard

statistical analysis. This homoeopathic picture created was then analyzed according to the doctrine of signatures.

A large number of observable symptoms arose from this proving. 784 were included in to the Materia Medica, and, of these 109 were in the mind, 42 in the stomach, 41 in the female system, 82 in the back, 136 in the extremities and 44 were generals. It appears that Sutherlandia frutescens 30CH had a definite effect on the provers' mental state. Notable effects were seen in the skin, female urogenital-, musculoskeletal-, and digestive systems.

A definite link between the proving of Sutherlandia frutescens and the doctrine of signatures was observed. A correlation was noted in many symptoms produced during this proving.

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DEFINITIONS OF TERMS

PROVING- The systematic procedure of testing substances on healthy human beings in order to elucidate the symptoms reflecting the action of the substance (Vithoulkas 1986:96). A translation of the German 'Prüfung', meaning to test or assay (Gaier 1991:390).

DOCTRINE OF SIGNATURES- This doctrine draws a comparison between characteristics of the plant used medicinally and organs in need of treatment in the human. Paracelsus refers to the idea that plants with shapes resembling human organs or structures should be regarded as healing agents for those body parts (Pujol 1990:24).

PLACEBO- A dummy treatment administered to the control group in a controlled clinical trial in order that the specific and non-specific effects of the experimental treatment can be distinguished (Taylor *et al* 1988:1298). For the purpose of this study, placebo took the form of lactose pillules impregnated with 70% ethanol at a rate of 1%v/v.

PHARMACOPOIEA- A standard book containing a list of drugs and medicines with information about the sources, habits, descriptions, collections and identification of the drugs. It also provides directions for their preparation, combining, compounding and standardization. (Hopkins, 2000).

POTENCY- The stage of altered remedial activity to which a drug has been taken by means of a measured process of deconcentration, with succussion, or by trituration, of the medicinal substance, which is thus brought to a state of diminutive or infinitesimal subdivision (Gaier 1991:432)

PROVERS- ...people of average health (who) take repeated doses of drugs until subjective or objective symptoms of a disturbance appear (Whitmont 1991:15)

THIRTIETH CENTESIMAL POTENCY (30CH)- The thirtieth step of serial deconcentration on a 1:100 scale with succussion at each step, having an effective concentration of 1×10^{-60}

LAW OF SIMILARS- "Similia Similibus Curentur", the fundamental law of homoeopathy, formulated by Hahnemann, meaning: Let Likes Be Cured (or Treated) By Likes. (Gaier 1991:123) Any substance, which can produce a totality of symptoms in a sick human being (Vithoulkas 1986:92).

MATERIA MEDICA- A pharmacological text, a reference book containing a list of medicines and their uses (Hahnemann 1997:325).

CHAPTER ONE

1.1 INTRODUCTION

The importance of provings:

Most homoeopaths agree on the great importance of provings. The number of different people in the world and the number of varying complaints which they present greatly outweighs the number of remedies at our disposal. In order to cure more cases we need to prove more remedies. The more remedies that are proven the more people can be helped; this is an important motivation for conducting a proving.

According to Cook (1989:93), extension of the homoeopathic Materia Medica by proving new drugs is one of the three main areas around which homoeopathic research is centered. Vithoulkas (1986:143), another great homoeopath, believes that provings are the best way to accurately predict the effects of substances as homoeopathic remedies and are vital to the expansion of the therapeutic knowledge of homoeopathic remedies. Whilst Sherr (1994:7), another famous homoeopath, states that provings are the pillars upon which homoeopathic practice stands.

Provings are necessary because they are the only way of identifying new remedies that may be added to the Materia Medica. On proving a remedy it can be used to cure cases that were previously only partially covered by existing remedies (Wright 1999:2).

South Africa is very rich in indigenous flora and fauna and it was thus believed to have a vast healing potential. Proving Sutherlandia frutescens was considered to be advantageous as it would utilize this potential as well as expand the Materia Medica. According to Sherr (1994:49) a useful remedy should be a local one, within reach of the patient, as nature will always provide an accessible cure. We have therefore explored a remedy that could prove extremely important to South Africans health in particular, which served as further motivation for conducting this proving.

Although not yet homoeopathically proven Sutherlandia frutescens has been used therapeutically for hundreds of years. Sutherlandia frutescens is a plant greatly respected for its medicinal use and was introduced to the colonists by Khoikhoi as a wonderful remedy for a variety of ailments (Gericke, et al. 1997:154). This made it an interesting plant to investigate homoeopathically.

At the moment, South African homoeopaths still rely heavily on Europe and the United States as sources for crude drugs, as is evidenced by consulting any pharmaceutical company's catalogue. It would be advantageous if, in future, South African homoeopaths could rely more on indigenous substances as sources of homoeopathic remedies. Wright (1999:3) felt that South African homoeopaths should commence the systematic proving of substances

indigenous to our community. Since Wright's proving of Bitis arietans arietans more provings have indeed been conducted but the need for more is still present.

The doctrine of signatures:

Paracelsus first proposed the concept of the doctrine of signatures almost 500 years ago. It was one of the many discoveries of the Swiss alchemist and physician that enabled him to improve pharmacy and scientific experiments and thereby revolutionize European medicine. This doctrine draws a comparison between characteristics of the plant used medicinally and organs in need of treatment in the human. Paracelsus refers to the idea that plants with shapes resembling human organs or structures should be regarded as healing agents for those body parts (Pujol 1990:24). The doctrine enabled doctors to predict the symptoms that would be treatable by looking at the physical attributes of the plant in question and provided a better understanding of the medicinal substance.

This doctrine is practiced all over the world by various different cultures and South Africa is no exception. African herbalists have an extraordinary ability to perceive likenesses between plants and man when judging the use of any plant for the treatment of diseases (Pujol 1990:24). Sutherlandia frutescens is a plant greatly respected for its medicinal use and was introduced to the colonists by Khoikhoi as a wonderful remedy for a variety of ailments (Gericke, et al. 1997:154).

Due to Sutherlandia frutescens' being an indigenous species to an area so rich in the history and practice of the doctrine of signatures it seems relevant to include this aspect as a complement to this proving.

1.2 THE HYPOTHESES

1. The first hypothesis was that Sutherlandia frutescens 30CH would produce clearly observable signs and symptoms in healthy provers.
2. The second hypothesis was that the proving of Sutherlandia frutescens would produce symptoms that would correlate to the doctrine of signatures.

1.3 THE DELIMITATIONS

The study did not:

- seek to explain the mechanism of action of the homoeopathic preparation in the production of symptoms in healthy individuals.
- determine the effects of potencies or deconcentrations of the plant other than the thirtieth centesimal.

1.4 THE ASSUMPTIONS

- the remedy used in the study has been prepared accurately according to the German Homoeopathic Pharmacopoeial standard (methods number 6 and 8a).
- the provers would take the remedy in the dosage, frequency and manner required.
- the provers would conscientiously and closely observe themselves for the effects of the drug.
- the provers would conscientiously, accurately and honestly record all symptoms observed
- the provers would not deviate from their normal lifestyle or dietary habits in a significant manner immediately prior to or for the duration of the proving.

CHAPTER TWO

THE REVIEW OF THE RELATED LITERATURE

2.1 INTRODUCTION

There is no doubt about the importance of provings. According to Samuel Hahnemann (1997:144), the founder of homoeopathy, "there is no other possible way to unerringly experience the peculiar actions of medicines upon the human condition - there is no single, surer, more natural arrangement for this intent than to administer each single medicine experimentally, in a moderate amount, to healthy persons in order to learn what alterations, symptoms and signs of its impinging action each medicine particularly brings forth in the condition of body and soul, that is, what disease elements each medicine is able to and tends to arouse."

As provings are a fundamental part of the philosophy and practice of homoeopathy they have often been mentioned in homoeopathic literature. Unfortunately, a lot of this writing consists of theoretical, second-hand knowledge, which is passed on from generation to generation of homoeopaths. (Wright 1999:5) It is Campbell's (1994) opinion that little of the outdated proving literature would stand up to serious criticism today. According to Wieland (1997) Hahnemann's methodology could not be considered reliable by current standards for clinical trials, as Hahnemann did not conform to all of the modern guidelines pertaining to provings.

Proving is now more structured and methodologically sound thanks to the introduction of double-blind placebo controlled proving is and the contributions of more recent homoeopaths.

2.2 HISTORICAL PERSPECTIVE

The concept of proving is has been in existence for many years. Although very simple, proving is were conducted a long time ago. Galen (b: 129A.D.) was one of the first people to test medicinal substances on healthy people. Another forerunner of this practice was Paracelsus (b: 1493A.D.) who determined the therapeutic properties of substances by observation of their effects on healthy people.

Later Samuel Hahnemann (1755-1843) gave credit to von Haller for observing the method of proving is. Hahnemann did, however, rationalize and systematize the concept of proving is. It was while translating Cullen's *"A Treatise on Materia Medica"* into German, that Hahnemann disagreed with Cullen's explanation of the mechanism of action of Cinchona bark (quinine) in the cure of malaria.

Hahnemann then decided to take large amounts of quinine and found to his surprise that he developed symptoms of malaria, which ceased as soon as he stopped taking the quinine. (Nagpaul 1987:76) This led him to further experimentation on himself and others, and six years later, he published his landmark essay *"A New Principle for Ascertaining the Curative Power of Drugs"* in which he enunciated for the first time the fundamental principle of

homoeopathy - The Law of Similars (Cook 1989:8). Over fifty years Hahnemann conducted provings on himself and 64 volunteers, and investigated the effects of 101 remedies. Hahnemann (1997:147) concluded that medicinal substances act in their morbid alteration of the healthy human body according to definite, eternal natural laws and, by virtue of these, are able to engender certain, reliable disease symptoms, each substance engendering particular ones, according to its peculiarity.

During the nineteenth century, provings multiplied in Germany, France, England and especially in the United States under the powerful influence of Hering (Demarque 1987:71).

2.3 PROVING METHODOLOGY

According to Fisher (1995), the reliability of the earlier provings is in doubt, the most serious flaw being that they were uncontrolled. The subsequent refinement of the methodologies has made provings more reliable by introducing new methods such as the double blind and placebo controlled methods, which reduced bias from provings. The concept of blinding was introduced into homoeopathic proving methodology as early as 1843, when Gerstel carried out a proving of *Aconitum napellus* in which the provers were unaware of the proving substance.

In 1906 Bellows introduced the double-blind technique whilst reproving *Atropa belladonna* (Demarque 1987). In this technique there is placebo control, the nature of the substance is unknown to the subjects and known to the observer. The observer does not, however, know which particular provers receive placebo and which receive the proving substance.

In more recent times the double-blind placebo controlled method has gained much support (Davidson 1994, 1995; Nagpaul 1987; Vithoulkas 1986).

Raese (1972) introduced the concept of a treble-blind design. This means that there is placebo control; the observer is blind and the nature of the substance is unknown to both the subjects and the observer. Both Riley (1995a,b) and Sherr make use of this method in their provings. (Wright 1999:7)

Due to the many different variations of homoeopathy there are different points of emphasis in modern provings. Some homoeopaths such as Sherr (1994) lay more emphasis on extracting mental and emotional symptoms from the provers while others such as Jouanny (1993) focus on toxicological data.

2.3.1 MODERN DEVELOPMENTS

In 1980, Vithoulkas published his landmark work, *The Science of Homoeopathy*, in which he devoted an entire chapter to the proving process. However, were all of Vithoulkas' elaborate controls to be instituted, every proving would become an

extremely expensive and time-consuming exercise. (Wright 1999:8). Some of the time-consuming methods he prefers are: at least one month's preparation time before the proving, during which the provers should note down whatever symptoms they experience; observation period of at least another three months; and conducting the proving in low potency (e.g., 1X), later in a higher potency(e.g. 30CH) and still later in an even higher potency(e.g. 1M). Vithoulkas also prefers more complicated methods such as conducting three different experiments, in three different locations, on three different nationalities as well as a treble-blind method(Vithoulkas 1986:150, 151, 152).

After Sherr's experience with provings of *Adamas*, *Androctonus amarexii* *hebraues*, *Chocolate*, *Germanium*, *Hydrogen* and other substances he published "*The Dynamics and Methodology of Homoeopathic Provings*" in 1994. This book focuses on all aspects of homoeopathic provings and provides a practical framework for comprehensive modern provings, which other homoeopaths have been using with positive results.

Wieland (1997) discussed the need for good homoeopathic proving guidelines, while Walach (1994, 1997) has, for the first time, made moves towards quantitative analysis of symptoms in provings.

In 1999 Wright conducted a proving of the venom of *Bitis arietans arietans* at Technikon Natal. His work has paved the way for future provings at this

institution and will ensure that his wish for further provings to be conducted on indigenous South African fauna, flora and minerals (Wright 1999:112) takes place.

2.3.2 THE POTENCY OF THE PROVING SUBSTANCE

Hahnemann claimed the 30CH was the best potency to use for provings (Hahnemann 1997:154). On contesting this in 1842 the Vienna Society came to the same conclusion and endorsed the use of the 30CH potency (Kent 1990:221). Although Sherr (1994) uses a wide range of potencies he maintains that it is equally valid to use only one potency, such as 30CH.

Koppers (1987) carried out experiments in a range from mother tincture (crude substance) to the 30CH and found that the 30CH produced the most comprehensive and most peculiar symptoms and above all also affected the mental changes. Subsequent to this he almost always used the 30CH, thereby confirming Hahnemann's assertion (Koppers 1987:81). Therefore the 30CH was used in this proving.

2.3.3 PROVER POPULATION AND PLACEBO

There is much debate about the optimum number of provers and the percentage placebo to be used in a proving. Hahnemann initially used 64 provers without

any receiving placebo and reprovings of the same substances have had very similar results to his (Kent 1990:221).

Sherr (1994) believes that more than 100 provers are far too many and simply overcrowds the repertory and inflates the remedy out of proportion to the others. He claims his experience shows that 15 to 20 provers will produce a very full remedy picture and uses between 10 and 20% of these as placebo controls. Nagpaul (1987) uses 25 to 30% placebo of a group of between 20 and 30 provers.

2.4 DOCTRINE OF SIGNATURES

Pujol (1990:24) explains the African use of the doctrine of signatures very well. The information that follows is an overview of that explanation. African healers administer most herbal remedies based on what is known in Europe as the doctrine of signatures. Paracelsus (born 1493) first proposed the concept of the doctrine of signatures almost 500 years ago. It was one of the many discoveries of the Swiss alchemist and physician that enabled him to improve pharmacy and scientific experiments and thereby revolutionize European medicine. This doctrine draws a comparison between characteristics of the plant used medicinally and organs in need of treatment in the human. Paracelsus refers to the idea that plants with shapes resembling human organs or structures should be regarded as healing agents for those body parts.

For instance, a plant resembling a heart would be used to treat heart complaints. A milk producing plant invokes the universal nursing mother and would thus be used for breast-related conditions.

The doctrine of signatures has since become a rather distorted science in Europe and has gradually drifted away from the medical science, however, in Africa it remains untouched. The Zulu healers (Inyangas and Sangomas) believe that God created identical structures in man and plants so they could recognize the healing herbs for the benefit of all mankind. The herbalists who remain in touch with instinctive nature and are able to recognize healing plants are an integral part of the world of healing.

2.4.1 ANTHROPOSOPHICAL APPROACH TO MEDICINE

Anthroposophy is an extension of medical thinking or practice on the basis of a comprehensive view of the human being. It is another outlook on medicine, using a new and holistic perspective. It views health and disease (and thus treatment and cure) from a different perspective. Rudolf Steiner (1861-1925) was responsible for much of the development of this approach. (Hopkins, 2000).

An essential factor must be added to carbon dioxide and water, for example, in order to form living substances; this factor is light. Light has a supersensible quality as well as its visible aspect. Thus, to form a living substance, two elements must work together: terrestrial materials and cosmic force. The

organizational principle underlying life is called the etheric body in the spiritual science of Rudolf Steiner. The etheric body is of a supersensible nature; Paracelsus used the term "*archaeus*", which approximately corresponds to the etheric body. The ethereal body of the plant regulates growth and form, and determines the way terrestrial materials combine. The etheric body uses those materials in a way that corresponds to a structural plan.(Husemann, 1982)

Humans are said to have a three-fold existence, which must be understood in order to apply it to disease, and thus cure it. The 'nerve-sense system' is involved with the absorption and analysis of all information- whether it be from the external or internal environment. Rest is an essential state required in letting the information flow inwards as unaltered as possible. This process is passive with little metabolic activity involved. A cell representing this system is a nerve cell, which loses the capacity to divide almost immediately after birth. This system is associated with catabolism and occurs consciously and mostly by day. Diseases originating from and effecting this area are 'cold', such as degeneration and sclerosis.

The opposite pole of humans is the 'metabolic-limb system'; it is responsible for metabolism, transformation and movement. These active processes require and create much energy. The foci of metabolic transformation are the muscles, liver, kidneys and blood. This system is associated with anabolism and occurs without

conscious control and mostly at night. Diseases due to imbalances in this system are 'hot', such as inflammation and fever.

Between these two poles is the rhythmic area, which prevents the poles from negating each other and actually enhances the actions of each. The rhythmic area is the mediator of health.

The relationship of plants with man helps in the choice of a cure. The head or 'nervous-sense system' of man is likened to the roots of a plant. They both absorb- information, and nutrients and water respectively. Both processes are passive. They are also both protected- humans by the skull and plants by soil. The 'metabolic-limb system' correlates to the plants reproductive system (namely the flower). Both systems have great activity and metabolism associated with them. The 'rhythmicity system' is likened to the stem of a plant- separating the poles and allowing communication, thus bringing about harmony.

Anthroposophically speaking one can predict the areas that would be most effected in man by looking at the ratio of the different parts of the plant in question. A high root to flower ratio, for example, would therefore imply that a plant would have a greater effect on the 'nerve-sense system' than the 'metabolic-limb system' when administered to humans. (Hopkins, 2000).

2.5 LEGUMINOSAE FAMILY IN HOMOEOPATHY

Sutherlandia frutescens is a member of the Leguminosae family. This family contains many homoeopathic remedies and has been successfully utilized to treat a vast number of ailments over the years.

Remedies belonging to the same family generally share many traits, and common themes often run throughout the remedies of a family. Being aware of the themes of a family gives one an idea of what may occur in the proving of a substance belonging to that particular family. One manner in which a sense of the themes of a family may be ascertained is to do an extraction on the MacRep program. This enables one to find all the rubrics in the complete repertory which contain several members of a specified family.⁵

The mental picture associated with the Leguminosae family has some very interesting themes. A strong theme is that of confusion, with a feeling of dullness and difficulty with concentration, as though intoxicated. Remedies of this family are indicated in patients who have a weak memory and experience prostration of the mind. This stupefaction leads to indolence and aversion to work. As with many remedies the exact opposite pole can also be experienced, remedies of the Leguminosae family are also indicated for irritability, restlessness, excitement and hysteria (although not to as great an extent as the former theme). Linking to the intoxicated theme is the theme of delusions accompanied by a vivid imagination.⁵ These themes are strongly present in a member of the

Leguminosae family, namely Baptisia tinctoria. Characteristic symptoms of this remedy are confusion, delirium and many delusions. Patients can feel they are divided into two or three parts; that their limbs are separated from their body; that their body is spread all over the bed and that they must try and get it all together (Murphy, 1988:80).

Linked to the dullness is the indifference and the resulting indisposition to talk. Associated with this is the great sadness of the Leguminosae family with the tendency to be morose and tearful. ⁵

The head is a body part greatly influenced by the Leguminosae family. Many remedies from this family can be used to treat congestion of the head, with a full and enlarged sensation. The rubrics representing heaviness and pressing sensation of the head contain many members of this family. ⁵ Melilotus officinalis is a member of the aforementioned family that is strongly indicated for acute localized congestion, especially of the head (Jouanny, 1984:247). Head pain is treatable with many of the remedies belonging to the Leguminosae family. ⁵ Melilotus officinalis is also strongly indicated for throbbing, congestive headaches (Jouanny, 1984:247), whilst Robinia psuedacia (another member of this family) is often used to treat migraines (Jouanny, 1984:348).

Many eye conditions require a member of the Leguminosae family for treatment. The rubric for eye pain contains a multitude of remedies of this family. ⁵

Physostigma venenosum is a remedy belonging to this family and is very useful for the treatment of ocular symptoms ranging from paresis and paralysis due to strain and fatigue to spasms of the eye and orbital muscles (Jouanny, 1984:308).

Members of the Leguminosae family are extremely useful for sneezing, coryza and annual hayfever.⁵

The sensation of flushes of heat felt in the face is a symptom common to several remedies in this family⁵ and it is especially marked in Melilotus officinalis (Jouanny, 1984:247).

Many remedies in the Leguminosae family are useful in treating pain and inflammation of the throat.⁵

The Leguminosae family has a strong effect on the digestive system, many of its remedies are associated with both increases and decreases in appetite and thirst. Heaviness, heat and pain of the stomach are often effectively treated with one of its' members.⁵ Robinia psuedacia and Senna are known to have a marked influence on the stomach (Jouanny, 1984:348,368).

Abdominal distension and fullness are both symptoms commonly treated with a number of members of the Leguminosae family.⁵ Baptisia tinctoria in particular gives great results in the treatment thereof (Jouanny, 1984:62).

Both rectal tenesmus and frequent urging to urinate are often treated with a member of the Leguminosae family. ⁵

Back pain is strongly associated with this family. Physostigma venenosum in particular is well indicated for spasmodic or paralytic phenomena, especially in the muscles of the back, as well as tenderness of the spine (Jouanny, 1984:308).

Perhaps one of the largest spheres of influence of the Leguminosae family in general is that of the extremities. On extraction of rubrics common to this family this section was best represented. Rubrics that were present represented burning, coldness, cramping, eruptions, itching, numbness, paralysis, pain and weakness. ⁵ Baptisia tinctoria and Physostigma venenosum are both well indicated for muscular affections specifically, pain or stiffness; and spasmodic or paralytic phenomena respectively (Jouanny, 1984:62,308).

Sleep is affected by remedies of the Leguminosae family, both sleepiness and sleeplessness are treatable with remedies of this family which is understandable when noting the polar effects they have on the mental state in general. ⁵ Whilst Baptisia tinctoria is strongly indicated for extreme tiredness Senna on the other hand is indicated for insomnia (Jouanny, 1984:62,368).

There are a few traits relating to the generals that appear in the family. Profuse perspiration is treatable with several remedies from the Leguminosae family. On extraction the family appears to be generally ameliorated by the cold⁵, on closer inspection it is noted that Physostigma venenosum is averse to cold water whilst Baptisia tinctoria desires it. (Jouanny, 1984:308,62). Several remedies occurred in the rubric representing general coldness whilst others appeared in the rubric representing general flushes of heat.⁵ The theme of weakness is quite strong within the Leguminosae family and the family appears to be well indicated for paralysis and prostration in general.⁵

2.6 SUTHERLANDIA FRUTESCENS



2.6.1 CLASSIFICATION

- Genus: Colutea
- Family: Fabaceae
- Genus: Sutherlandia
- Species: Sutherlandia frutescens
- Common names: Scarlet Bladder-senna

Cancer bush

- Synonyms: Colutea frutescens L.

- Modern Genus: Sutherlandia
- Modern Species: Sutherlandia frutescens
- Modern Family: Leguminosae⁷

2.6.2 DESCRIPTION

Sutherlandia frutescens is a perennial woody shrub, native to South Africa.⁸

It is an attractive small shrub that grows up to 1 metre in height. Its grey-green leaves are slightly to densely hairy and are deeply divided into small leaflets (Gericke, et al. 1997:246). The leaflets are linear to oblong-ovate in shape (Moshe, 1998:18).

Sutherlandia frutescens has large red flowers in summer. The flowers have a tubular structure and are pollinated by sunbirds. The petals are large and showy with boat-shaped keel petals. (Moshe, 1998:24). The flowers are followed by characteristic bladder-like, papery pods. (Gericke, et al. 1997:246). The fruit and pods are ovoid in shape (Moshe, 1998:26).

Sutherlandia frutescens is widely distributed in Southern Africa, found at low and high altitudes and common on disturbed areas, especially along roadsides. It is found on the coast or inland (Moshe 1998:86). It is a widely distributed plant and shows remarkable regional variation (Gericke, et al. 1997:246).

Extra care is required for cultivation of Sutherlandia frutescens, the seed has an impermeable testa, scarification is highly recommended and fire treating may improve germination. They grow best in full sun, in dryish soils and with a metre distance between individual plants.⁸

Sutherlandia frutescens is a very hardy, opportunistic plant. If it rains enough after a drought it can suddenly start growing again. When farming this plant harvesting time depends largely on the seasons rainfall. ⁴

The leaves are aromatic yet very bitter. In spite of this bitterness they are still relished by browsing sheep and cattle (Gericke, et al. 1997:246).

The species were grown as ornaments in England as early as 1683 (Curtis 1792:6). To this day, Sutherlandia plants are popular in gardens in many parts of the world (Bailey 1976:1085). It is in high demand as a horticultural oddity and decorative garden plant. ⁸

2.6.3 HISTORY OF THERAPEUTIC USAGE

Sutherlandia frutescens is regarded as the most profound and multipurpose of the medicinal plants in Southern Africa. Because of its efficacy as a safe tonic for diverse health conditions it has enjoyed a long history of use by all cultures in South Africa. It powerfully assists the body to mobilize its own resources to cope with diverse physical and mental stresses, and it should therefore be more correctly known as an adaptogenic tonic.

The traditional Tswana name "*Phetola*" means "it changes", meaning that the plant changes the course of many illnesses into a favourable outcome. The North Sotho name "*Lerumo-lamadi*" means "the spear for the blood" meaning that it is a powerful blood-purifier or all-purpose tonic.¹⁰

South Africa's indigenous San people called it "*Insisa*" meaning "the one that dispels darkness". They used it as an energy booster and a powerful anti-depressant. Zulu traditional healers know it as "*Unwele*", the great medicine that was used to treat gonorrhea and syphilis. It was also used to ward off the effects of the devastating 1918 influenza pandemic.²

It is traditionally believed to shorten the duration and severity of their illness and it can also be taken as a convalescent tonic for post-'flu debility.⁵¹⁰

The shrub has been used therapeutically for hundreds of years. *Sutherlandia frutescens* has been used as supportive treatment in mental and emotional stress, including irritability, anxiety and depression. It has been used in both prevention and treatment of asthma. The shrub has been used for centuries to treat the symptoms of TB and bronchitis. It has been used to treat gastritis and peptic ulceration. Leaf infusions are used to treat stomach, intestinal and uterine ailments (Smith 1895:60; Gericke, et al. 1997:246), to relieve eye ailments and chicken pox (Watt and Breyer-Brandwijk 1962:649) and most interestingly to treat internal cancers (Smith 1895:60; Dykman 1908:145; Gericke, et al. 1997:246).

Sutherlandia frutescens has traditionally been used to treat gout, rheumatoid arthritis and osteoarthritis.¹⁰

2.6.4 CURRENT THERAPEUTIC USE

The contemporary uses of Sutherlandia frutescens include use as a tonic for:

- Enhancing well being
- Immune support
- Longevity
- Stress, depression and anxiety
- Wasting from cancer, TB, and AIDS
- Quality-of-life tonic for cancers, HIV/AIDS and TB
- Appetite stimulant in wasted patients
- Influenza
- Chronic Fatigue Syndrome, ME Syndrome and Yuppie Flu
- Viral hepatitis
- Asthma and bronchitis
- Type 2 diabetes
- Mild to moderate hypertension
- Rheumatoid arthritis
- Peptic ulcer, gastritis and reflux oesophagitis

Hot flashes and irritability of menopause²

Sutherlandia gel is used as a topical treatment for:

- Acne
- Eczema
- Shingles
- Herpes
- Ringworm
- Athletes foot

Nappy rash³

Preliminary scientific research, published peer-reviewed scientific research, and clinical experience suggests that key phytochemicals in select chemotypes of *Sutherlandia* varieties are:

- Immunodulatory
- Anti-inflammatory
- Vaso-dilatory
- Analgesic
- Anti-viral, anti-fungal and anti-bacterial
- Anti-cancer

Inhibitors of Tumour Necrosis Factor (TNF). Excess production of TNF is known to drive the wasting process in cancer, TB and AIDS patients.¹⁰

2.6.5 USE IN HIV POSITIVE AND AIDS PATIENTS

A South African indigenous medicinal plant may hold the key to the treatment of millions of people living with HIV and AIDS, helping them relieve the symptoms of AIDS. Anecdotal evidence is already mounting, suggesting that this plant can improve the quality of life of thousands of people both with HIV and full-blown AIDS. ²

Improvements in appetite, weight –gain, sleep, exercise tolerance, anxiety and overall sense of well being can be expected. Researchers anticipate that there will be a decline in progression of HIV into AIDS, and actual remission of the disease is hoped for. This will require compliance of appropriate doses of the correct selection of Sutherlandia taken on an ongoing basis, in addition to meticulous attention to diet. Alcohol, recreational and other drugs that damage the immune system should be avoided. Most patients show and increase in weight within six weeks of starting treatment. Weight gains of 10-15kg have been documented in wasted cancer and AIDS patients. Improvements in CD₄ (the crucial blood-borne component of the body's defence shield) counts and decreases in the viral load in AIDS patients taking Sutherlandia have been reported by clinicians in South Africa and Australia. These promising clinical anecdotes need to be validated by an independent controlled clinical trial, and a cooperation in this regard is under discussion with the Medical Research Council of South Africa. ¹⁰

Phyto Nova, the company which makes Sutherlandia, is owned by Professor Ben-Erik van Wyk, head of botany at the Rand Afrikaans University, botanist and GP Dr Nigel Gericke and pharmacologist and cancer researcher Dr Carl Albrecht.⁹

The unconventional alliance of South African scientists and traditional healers is frantically trying to spread information about this indigenous plant- before the pharmaceutical industry markets it in expensive drug form. Sutherlandia frutescens looks like a small gladiola, grows like a weed, tastes horrible but costs next to nothing. For the millions of South Africans infected with the AIDS virus but unable to get access to expensive drugs, the plant may be a chance of turning HIV into what it is already in rich countries- a chronic rather than fatal illness. Gericke said the plant's principal, visible property is to prompt weight-gain in patients with full-blown AIDS, enhance energy levels, and improve their mood. The plant, said Gericke, is a "portfolio of beautiful chemicals" which has been widely used for a range of illnesses for centuries.¹

Phyto Nova has approached the South Africa Government in a bid to persuade them to grow the plant on a massive scale for use in public treatment. So far they have had no response.²

The team, mindful that unless it acts quickly the pharmaceutical industry will cash in, has therefore started treating hundreds of people and distributing seeds to

whoever will have them. ¹ More than 1000 South Africans are already using Phyto Nova's Sutherlandia tablets for HIV/AIDS symptoms. ⁴

Anne Hutchings, an ethno-botanist and lecturer at the University of Zululand, has been using Sutherlandia (together with other indigenous plant medicines) to treat AIDS patients. She has 176 patients who all testify that Sutherlandia has helped them to live a fuller, healthier and more productive life. ²

Sutherlandia contains high levels of canavanine, pinitol and GABA-already individually patented by drug firms as treatments for cancer, fungal infections, diabetes and anxiety. ¹

2.7 SUMMARY

There are many different opinions about provings and proving methodologies. Each opinion has its own merits and weaknesses but most authors agree on the following points:

- the necessity for further provings
- the use of healthy provers
- the use of placebo controls and a blinding procedure
- non-repetition of the substance once proving symptoms have begun
- recording of all symptoms: mental, emotional and physical.

All of the abovementioned points will be found to be integral parts of this investigation (Wright 1999:11).

CHAPTER THREE

MATERIALS AND METHODS

3.1 THE EXPERIMENTAL DESIGN

A double blind proving of *Sutherlandia frutescens* 30CH was conducted. 24 provers were selected and randomly divided into two groups, the first consisted of 18 of the provers who received medicated powders and the second consisted of the remaining six who received placebo. The subjects were unaware of the nature of the substance, which they took, nor the potency thereof as an added control measure as is suggested by Demarque (1987), Sherr (1994) and others. Provers were examined and kept journals before, during and after administration of the remedy so as to serve as their own control (Vithoulkas 1986:150). Provers entered all symptoms and sensations experienced into their diaries in as much detail as was possible. This gave the researchers a "base-line" from which to work with for each prover. This information, along with data collected by the researchers from case histories and physical examination, was then assessed on completion of the proving. The researchers then translated the symptoms elicited into Materia Medica and repertory language and formulated a homoeopathic picture of this remedy. Data was analyzed by qualitative methods, as the data was not amendable to standard statistical analysis. This homoeopathic picture created was then analyzed according to the doctrine of signatures. The proving symptoms were assessed according to their correlation to this doctrine. This provided us with another method of assessing this remedy as well as a better understanding of it.

3.2 AN OUTLINE OF THE METHOD

- The proving was conducted by four M.Tech homoeopathy students.
- Each researcher conducted interviews in which potential provers were screened for suitability and checked against the inclusion criteria. (**Appendix A**).
- The provers were randomly divided into four equal groups with each researcher responsible for a group of provers(i.e. 6 provers each).
- The provers attended a pre-proving training course during which all aspects of the proving were explained to them as well as what was required of them.
- The provers signed a consent form (**Appendix B**).
- A thorough case history (**Appendix C**) and physical examination was performed on each prover by the researcher.
- Provers were each assigned a prover code, a list of instructions (**Appendix D**), a journal, a list of contact telephone numbers, a starting date and medication in the form of 6 powders.
- The provers commenced recording their symptoms at least three times daily in their journal for one week prior to taking the remedy (Sherr 1994:60). This established a baseline for the provers.
- The provers commenced taking the powders a maximum of three times a day for two days or until the first symptoms appeared while continuing to record their symptoms. The researcher was in daily contact by telephone with each prover.

- The prover ceased to take the powder as soon as she/he or the researcher noted the onset of proving symptoms.
- If no symptoms were noted after the completion of the medication, the prover ceased to take the substance, but continued to record their symptoms.
- The provers continued to record their symptoms until all proving symptoms abated.
- After the first week, contact frequency decreased from daily to every two, then three days and then weekly.
- When no symptoms had occurred for three weeks, the proving was considered complete.
- A two-week post-proving observation then occurred.
- All the journals were then recalled and a case history and physical examination was then repeated with each prover.
- Each group discussion took place with the respective researcher present.
- The proving was then unblinded to the researchers so that they could distinguish between placebo and proving groups.
- Extraction and collation of the data then occurred.
- The proving was then written up into Materia Medica and repertory format.
- The symptoms obtained from this proving were then analyzed according to the doctrine of signatures.

3.3 CRITERIA FOR INCLUSION OF A SUBJECT IN THE PROVING

The subject:

- was between the ages of 18-60
- was neither on, nor in need of any medication (chemical, homoeopathic or otherwise) (Walach et. al. 1995:219; Riley 1995a:45,b:144).
- had not been on the birth control pill or hormone replacement therapy (HRT) in the six months prior to the proving (Koppers 1987:81; Sherr 1994:44; Riley 1995a:45,b:144).
- was not pregnant or nursing (Sherr 1994:44; Riley 1995a:45, b :144).
- had not had surgery in the last 6 weeks (Riley 1995a:45, b :144).
- was not a user of recreational drugs such as Cannabis or LSD (Sherr 1994:44; Walach et.al 1995:219).
- did not consume more than 2 measures of alcohol, 3 cups of caffeine-containing beverages or herb teas or 10 cigarettes per day (Koppers 1987:81; Sherr 1994:44; Walach et.al 1995:219).
- was in a general state of good health as judged by the researcher and the subject her/himself (Koppers 1987:81; Riley 1995a:45,b:144).
- had no gross physical or mental pathology determined at case history and on physical examination (Sherr 1994:44).
- did not suffer from hypersensitivity diseases such as asthma, hay fever, allergies or food sensitivities (Vithoulkas 1986:150).
- was willing to follow the proper procedures for the duration of the proving.

3.4 THE PROVING SUBSTANCE

3.4.1 THE POTENCY, DOSE AND POSOLOGY

- The remedy was proved in the 30CH potency.
- One powder was dissolved sublingually three times a day for two days.
- No powders were taken after the prover or the respective researcher determined the onset of symptoms that were not present prior to taking the proving substance (Sherr 1994:53). This was in accordance with the rule of drug non-repetition in pathogenetic experiments, expressed as: There was no repetition of the dose until symptoms have run their course and completely abated from the dose already administered (Gaier 1991:267).
- Nothing was taken by mouth for twenty minutes before and after each dose.

3.4.2 PREPARATION AND DISPENSING OF THE REMEDY TO BE PROVED

A live sample of Sutherlandia frutescens was obtained from Robyndale nursery.

Potencies were prepared, using the method specified in the German

Homoeopathic Pharmacopoeia (methods number 6 and 8a), using the whole plant whilst flowering.

The substance was triturated by hand up to 3CH according to method 6 of the German Homoeopathic Pharmacopoeia. The substance was then triturated up to 30CH according to method 8a of the German Homoeopathic Pharmacopoeia.

The remedy was dispensed in the form of lactose granules (which had been impregnated at 1% volume/volume with Sutherlandia frutescens 30CH in ethanol 73%) in lactose powder. The placebo was dispensed in the form of lactose granules (which had been impregnated with 73% ethanol and were indistinguishable from those used for the Sutherlandia frutescens 30CH) in lactose powder.

The dispensing was done in such a manner that the researcher was unaware of which provers received placebo or Sutherlandia frutescens. The Homoeopathic Day Clinic's Laboratory Assistant randomly assigned placebo to 25% (i.e. six of the 24 provers) and kept this information from the researchers until the provers had ceased recording information.

3.5 THE DURATION

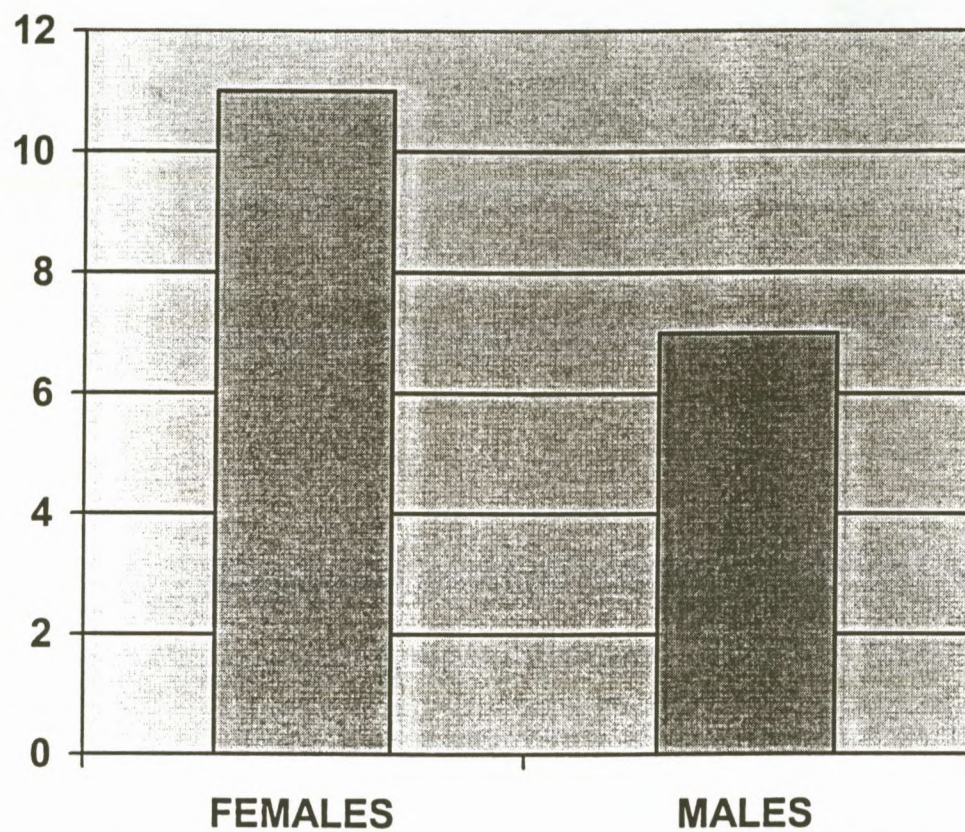
A one-week observation period preceded the commencement of proving of each prover. They continued to record their symptoms until they abated and the proving was considered complete when no symptoms had occurred for three weeks (Sherr 1994:58). A two-week post-proving observation period followed (Riley 1995a,b). The duration of the proving itself was approximately four months.

3.6 PROVER POPULATION AND PLACEBO

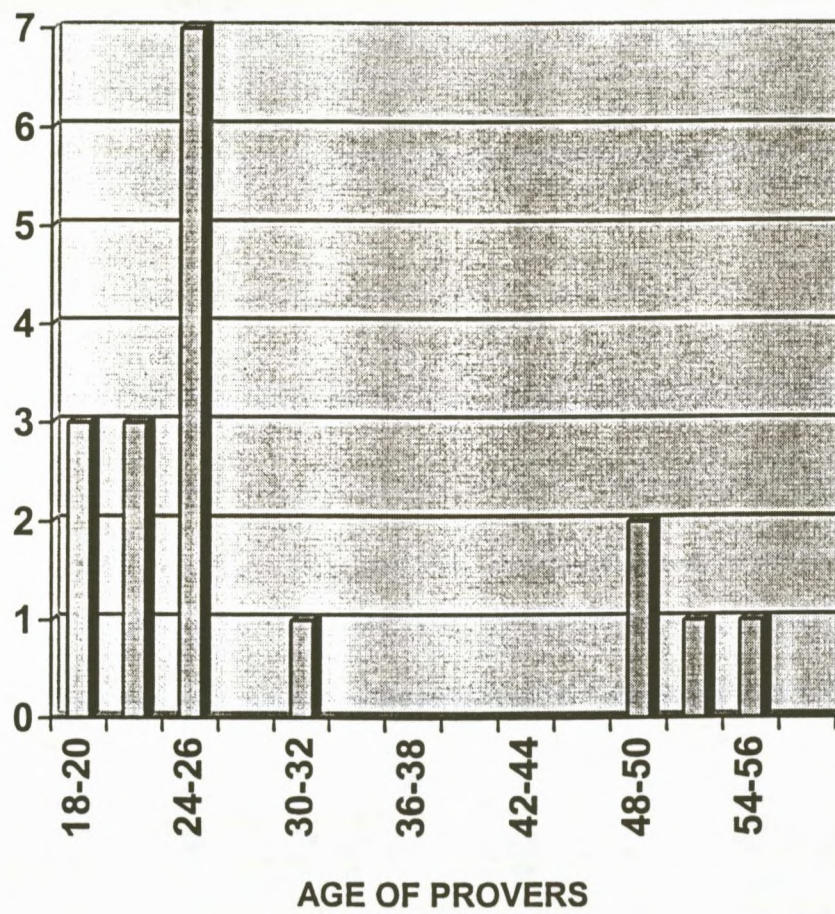
In this double blind homoeopathic proving, 24 provers were used, 25% of which (i.e. six of the 24 provers) were assigned placebo in a randomized manner so as to act as placebo controls. The Homoeopathic Day Clinic's Laboratory Assistant, who then kept the list until the proving was completed, did this. This left 18 provers on Sutherlandia frutescens, which corresponded well with Sherr's assertion that 15 to 20 provers will produce a very full remedy picture (Sherr 1994:45).

Of these 18 provers eleven (61%) were female and nine (39%) were male, giving a fairly even sex distribution. (See Graph 4.1). Hahnemann (1997:154) stated that testing on males and females is necessary in order to bring to light gender-related condition-alterations. The age distribution of the provers is illustrated in Graph 4.2.

GRAPH 4.1
SEX DISTRIBUTION OF PROVERS



GRAPH 4.2
AGE DISTRIBUTION OF PROVERS



3.7 MONITORING OF THE PROVERS

The researcher was in daily contact by telephone with each of the provers during the initial stages of the proving. As the symptoms began to abate, contact frequency decreased to every two, three and then seven days (Sherr 1994:58). This ensured that the researcher could ascertain when the substance had begun to act so that he could inform the prover to cease taking the remedy; the prover had not neglected a symptom and the provers were closely monitored for any reaction which needed to be antidoted by another remedy.

3.8 CHRONOLOGY

The provers were responsible for indicating when each symptom occurred. They noted down the time elapsed since the beginning of the proving with each symptom (Hahnemann 1997:116).

The format of DD:HH:MM was used, where DD indicated the number of days since the beginning of the proving (i.e. day 1 was 00), HH indicated the number of hours and MM the minutes. After 24 hours, the minutes became redundant and were represented by an XX. After 2 days, the hours were considered redundant and were also represented by an XX. In instances where the time was insignificant or unclear, XX:XX:XX was used. When symptoms occurred after each dose, the time was marked from that dose. Actual time of the day was only included in the proving if it was definite, significant and causal to the

symptom. All irrelevant time data was erased in the initial extraction. (Sherr 1994:73).

3.9 GROUP DISCUSSION

When all the journals were handed in after the proving, group discussions, where the provers and researchers met, was held. Sherr (1994:04) found this to be a valuable source of information. He maintains that group discussions add a deep and dynamic dimension to the proving experience and that without them, may valuable symptoms would be lost. Group discussion clarifies issues and allows the researcher to validate or discard doubtful symptoms (Sherr 1994:6).

3.10 SYMPTOM COLLECTION, EXTRACTION AND EVALUATION

This was the stage of the research where the provers' written diaries were converted into Materia Medica format. Symptoms were scrutinized, validated or rejected according to the criteria detailed below by the researcher, then edited into a proving format that was coherent, logical and unrepetitive (Sherr 1994:67).

3.10.1 CRITERIA FOR THE ACCEPTANCE OF A SYMPTOM AS A PROVING SYMPTOM

Sherr (1994:08) describes this as the most difficult stage of the proving. The following criteria were used together as a whole rather than individually, as suggested by Sherr (1994). This is an area in which the qualitative analysis of symptoms, using these criteria as guidelines (Sherr 1994:70), is of the utmost importance and outweighs any quantitative analysis – only embryonic methods of which exist at present (Walach 1997:129).

- The symptom did not appear in a prover in the placebo group.
- The symptom occurred shortly after taking the medication (Riley 1995a: 45, b: 144).
- The intensity of the symptom (Nagpaul 1987:76; Sherr 1994:71; Riley 1995a: 45, b: 144).
- The duration of the symptom (Nagpaul 1987:76; Riley 1995a: 45, b: 144).
- The number of subjects experiencing a symptom (Riley 1995a: 45, b: 144).
- The modalities and concomitants associated with a symptom (Riley 1995a: 45, b: 144).
- The symptom was strange, rare or peculiar, either in general or for that prover (Riley 1995a: 45, b: 144).
- The cure of a pre-existing chronic symptom (Sherr 1994:71; Riley 1995a: 45, b: 144).

- If a prover is under the influence of the proving substance (as can be seen by a general appearance of symptoms), then all other new symptoms are proving symptoms (Hahnemann 1997:158; Sherr 1994:70).
- The symptom was not usual or current for the prover, unless intensified to a marked degree (Sherr 1994:70).
- The symptom did not occur in the prover for the last year (Sherr 1994:70).
- The symptom did not appear naturally or spontaneously i.e. did not have a clearly explainable cause extraneous to the proving (Sherr 1994:70).
- A current symptom that has been modified or altered – the current and modified parts will be clearly described. (Sherr 1994:70).
- Accidents, coincidences and synchronistic events, which occur to more than one prover (Hahnemann 1997:158; Sherr 1994:71).
- The symptom occurred a long time previously (especially 5 or more years ago) and there is no explainable reason for its recurrence at the time of the proving (Hahnemann 1997:158; Sherr 1994:70).

3.11 COLLATING AND EDITING

All the separate proving accounts were united into a comprehensive whole in this process. This gave an ordered and structured picture of the symptom-complex created by *Sutherlandia frutescens* 30CH in healthy provers.

Once the data from each prover had been collated in to the relevant subdivisions (e.g. mind, stomach, extremities etc.), all the subdivisions from all the provers were put together and sorted by subject and time of appearance. Identical or similar symptoms from different provers appear separately and consecutively and were sorted by the following criteria:

- the nature of the symptom
- the prover
- the sequence of development of the symptom
- the time of appearance of the symptom (Wright 1999:24).

3.12 REPORTING OF THE DATA

The information was now written into the formats of the Materia Medica and Repertory so that the data gained from this research project could be useful to homoeopaths.

3.12.1 THE REPERTORY

Data arising from the proving was converted into rubrics of a form compatible with the modern repertory: *Synthesis – Edition8*, edited by Schroyens (2001).

3.12.2 THE MATERIA MEDICA

To ensure standardization and ease of reference the proving symptoms were written into Materia Medica format, which closely adheres to the sections of Synthesis – Edition8 (2001).

Symptoms were entered under the following main headings:

- | | |
|-------------------|-------------------------|
| - mind | - rectum |
| - vertigo | - stool |
| - head | - bladder |
| - eye | - urine |
| - vision | - male genitalia/ sex |
| - ear | - female genitalia/ sex |
| - hearing | - larynx and trachea |
| - nose | - respiration |
| - face | - chest |
| - mouth | - back and neck |
| - teeth | - extremities |
| - throat | - sleep |
| - external throat | - dreams |
| - stomach | - generals |
| - abdomen | |

CHAPTER FOUR

THE RESULTS

THE MATERIA MEDICA AND REPERTORY OF SUTHERLANDIA FRUTESCENS

4.1 KEY

The symptoms are grouped by Materia Medica section and are referenced in the following format:

<PROVER NUMBER><SEX><DAY:HOURS:MINUTES>

Rubrics are listed in the order in which they would be found in Synthesis ed.8 (2001), and are presented in the following format:

<RUBRIC><SUBRUBRIC/S><DEGREE><SYNTHESIS PAGE NUMBER>

A capital 'N' is appended to new rubrics, i.e. additions to the repertory – in the form of rubrics – that are suggested as a result of this proving. These rubrics are also underlined.

- **Grade three (3) rubrics are displayed in bold print.**
- *Grade two (2) rubrics are displayed in italics.*
- Grade one (1) rubrics are displayed in plain type.
- New rubrics are underlined.

A separate list of grade **three** and grade *two* rubrics is presented in the manner of Wright (1999:26).

4.2 PROVER LIST

Tabulated information of provers receiving *Sutherlandia frutescens*.

PROVER NUMBER	AGE	SEX
01	21	M
02	26	F
03	24	F
05	31	M
07	25	F
09	24	M
10	56	F
11	19	F
12	50	F
13	24	M
14	25	F
15	20	F
17	24	F
18	19	M
20	21	M
21	21	F
22	52	F
23	50	M

4.3 MATERIA MEDICA

1. MIND:

DELUSIONS AND SENSATIONS:

It felt as though I was coming onto drugs. (Observation by partner: He feels strange. He can't stand the noise and people in Beanbag Bohemia, but usually loves it, jazzy music His thinking is different. The symptoms appeared rather quickly. He complains, talks about it, he mentions often that it feels like coming onto drugs. Now, he says tension - emotional tension. I think it is more like an anxiety attack, but not physically).

01M 01:XX:XX

It seemed as though things around me were different, making me uneasy. (* It felt as if the environment had changed, an outside feeling that made me feel different. Things felt ominous, the atmosphere felt ominous, it seemed so much darker than it was. Something wasn't right around me, almost like tension in my soul)

01M 01:XX:XX

* This was not a written symptom. Relayed by the prover at the post -proving meeting.

I feel as though I talk funny. It sounds as if I have a sweet in my mouth while talking. I feel as though I have to push my speech out and force myself to say something. And, when I do speak it doesn't sound like me, it sounds different and not what I'd normally say, or not how I'd normally explain things. The talking differently coincides with the dryness in my throat, where words feel strange and unusual coming out of my mouth through my throat.

01M 03:XX:XX

I definitely did not think straight, especially when it came to conversation and forming words. Where I'd normally want to say something and felt I had something to say, I couldn't think of it or put it into words.

01M 03:XX:XX

I have no interest in anything really; feel paranoid about people and what they think, especially of me. I don't feel like I belong around people. It's as if they're against me, the way they looked at me, talked to me. They didn't want me around.

01M 03:XX:XX

I felt distant and detached from everyone and everything, including my parents and my girlfriend. It was terrible to feel so far from her and she asked me a few times where I was and when am I coming back. I was also paranoid of people around me and their thoughts and felt like I did not belong and they didn't want

me around. I was afraid of what people thought of me. I almost felt inferior to others.

01M 03:XX:XX

I feel like I am sitting outside my body, almost as if I have drunk too much coffee.

A stimulatory effect

02F 00:02:45

I am sensing a spacey disorientation as if I'm stoned. This disassociation can be localized to the space between my skull and my frontal lobe. I feel positively stupid.

05M 00:XX:XX

I feel spacey and tired

05M 00:XX:XX

Feel very dreamy and lost in my body. Feel separated from others with a desire to be alone. Want others to leave me alone.

18M 02:06:45

FEELINGS OF ISOLATION AND SOLITUDE:

I'm not listening or concentrating on people around me or the music playing, it is busy and crowded. Almost claustrophobic inside. Can't stand the noise and the

people. Less desire to talk to others and less desire to listen to them. Very unusual as normally I don't mind noise or music. It feels as the environment and things around me are different.

01M 01:XX:XX

I feel much better for leaving that environment. I walked in the park and felt much better, maybe for feeling cooler, open, fresh air.

01M 01:XX:XX

I have been in anatomy practical and around crowds and noise. I had the same feeling as last night. The people and the chatter were getting too much and I just wanted/ needed to leave. The noisy atmosphere had me feeling uneasy, like I didn't want to be there, and as I sat it became more intolerable.

01M 02:XX:XX

Not able to communicate as I usually do and did not feel myself. All chat and humor was not interesting or funny and I couldn't return conversation so well.

01M 02:XX:XX

Desire to be alone and happy to be alone. Do not want to talk to anyone or be talked to. I am at home and feel better to be alone, but I feel uneasy.

01M 02:XX:XX

I find that I can't communicate easily, even though I want to. I was speaking to you (supervisor) and still I had some trouble explaining and talking, had to almost force it out.

01M 02:XX:XX

I have no interest in anything really; feel paranoid about people and what they think, especially of me. I don't feel like I belong around people. It's as if they're against me, the way they looked at me, talked to me. They didn't want me around.

01M 03:XX:XX

I felt distant and detached from everyone and everything, including my parents and my girlfriend. It was terrible to feel so far from her and she asked me a few times where I was and when am I coming back. I was also paranoid of people around me and their thoughts and felt like I did not belong and they didn't want me around. I was afraid of what people thought of me. I almost felt inferior to others.

01M 03:XX:XX

I had quite a detached feeling the whole day today. I did not really feel like socializing. I just wanted to go to tech, do what needed to be done and come home. No faffing, which usually I'm a queen at.

02F 02:XX:XX

Feeling oversensitive and sad. Over reacting to things, taking things personally.
Averse to company, don't want to go out and see people (unusual). Getting upset easily. Alternating with happiness. Pondering and thoughtful.

03F 02:XX:XX

Want to be alone except for a few people who know my problems so that I don't have to talk about them. Don't want to talk to anyone.

17F 00:XX:XX

Deep in thought over life matters , the future , what I want .Very emotional.
Started sobbing after conversation with boyfriend , couldn't stop crying for about an hour afterward. Had to leave situation .Feel very sad and overwhelmed by emotion. Feelings of selfworthlessness, loneliness and isolation.

17F 00:XX:XX

Feel despondent and homesick (for parents).

17F 11:XX:XX

Feel very dreamy and lost in my body. Feel separated from others with a desire to be alone. Want others to leave me alone.

18M 02:06:45

CONFUSION:

I feel dazed and confused. I was told I look dazed and confused. Also told I look pale and sedated. I wasn't surprised.

01M 01:XX:XX

Desire to be alone and happy to be alone. Do not want to talk to anyone or be talked to. I am at home and feel better to be alone, but I feel uneasy.

01M 02:XX:XX

I definitely did not think straight, especially when it came to conversation and forming words. Where I'd normally want to say something and felt I had something to say, I couldn't think of it or put it into words.

01M 03:XX:XX

My mind is wandering so much I can't concentrate. I'm looking forward to the weekend.

02F 04:XX:XX

Forgetful, decreased memory, unfocussed, not concentrating.

03F 01:XX:XX

I am sensing a spacey disorientation as if I'm stoned. This disassociation can be localized to the space between my skull and my frontal lobe. I feel positively stupid.

05M 00:XX:XX

The speed, acuity and convulutedness of my thoughts are reduced and limited

05M 00:XX:XX

I feel spacey and tired

05M 00:XX:XX

SE: horrible, foreboding feeling

11F 06:XX:XX

Thinking clearer as though a fuzziness has gone.

17F 04:XX:XX

Can't cry in a situation where I normally would be able to. It's like a delayed reaction and only later when I'm by myself thinking about the situation I'm overwhelmed by emotion and cry.

17F 07:XX:XX

Feel very dreamy and lost in my body. Feel separated from others with a desire to be alone. Want others to leave me alone.

18M 02:06:45

SADNESS:

I almost feel depressed in a way.

01M 02:XX:XX

I woke up with a dry mouth and throat, still feeling depressed. I seem to have a lack of interest in anything.

01M 03:XX:XX

I felt depressed or sad. Didn't want company or to listen to what people had to say, including people who are close to me as well as subjects I'd normally find very interesting.

01M 03:XX:XX

A bit dreary. Cried. Just thinking about day, day worries, they are just getting me down today – not even really sure what I was crying about. Feeling fine the next moment. Changing moods

3F 00:XX:XX

Feeling oversensitive and sad. Over reacting to things, taking things personally.

Averse to company, don't want to go out and see people (unusual). Getting upset easily. Alternating with happiness. Pondering and thoughtful.

03F 02:XX:XX

Feel sad, gloomy, oversensitive and overreacting. Cried about 10 times today.

Bad day everything going wrong. Short tempered and irritable

03F 06:XX:XX

Depressed on waking

10F 20:XX:XX

Depressed

11F 13:XX:XX

Want to be alone except for a few people who know my problems so that I don't have to talk about them. Don't want to talk to anyone.

17F 00:XX:XX

Deep in thought over life matters , the future , what I want .Very emotional.

Started sobbing after conversation with boyfriend , couldn't stop crying for about an hour afterward. Had to leave situation .Feel very sad and overwhelmed by emotion. Feelings of selfworthlessness, loneliness and isolation.

17F 00:XX:XX

Overcome by waves of emotion, just have to cry like life is too much. Feel better afterwards ,but after half an hour I'm sobbing and feel total despair. Cry very easily.

17F 02:XX:XX

Can't cry in a situation where I normally would be able to. It's like a delayed reaction and only later when I'm by myself thinking about the situation I'm overwhelmed by emotion and cry.

17F 07:XX:XX

Feel despondent and homesick (for parents).

17F 11:XX:XX

INDIFFERENCE:

I woke up with a dry mouth and throat, still feeling depressed. I seem to have a lack of interest in anything.

01M 03:XX:XX

I felt depressed or sad. Didn't want company or to listen to what people had to say, including people who are close to me as well as subjects I'd normally find very interesting.

01M 03:XX:XX

I have no interest in anything really; feel paranoid about people and what they think, especially of me. I don't feel like I belong around people. It's as if they're against me, the way they looked at me, talked to me. They didn't want me around.

01M 03:XX:XX

I had quite a detached feeling the whole day today. I did not really feel like socializing. I just wanted to go to tech, do what needed to be done and come home. No faffing, which usually I'm a queen at.

02F 02:XX:XX

ANGER:

I feel different. I'm told I look serious and sound serious. I feel serious although I don't have serious thoughts. My girlfriend says I'm defensive, a bit touchy – I don't know, but outside opinions do count.

01M 03:XX:XX

Got very angry. The dog ran away. I was furious. Cried and clenched my jaw in anger at the dog. Short tempered.

03F 01:XX:XX

Feel irritable over nothing, angry and resentful.

03F 04:XX:XX

Feel sad, gloomy, oversensitive and overreacting. Cried about 10 times today.

Bad day everything going wrong. Short tempered and irritable

03F 06:XX:XX

Feel hot and flustered and hurried and impatient and irritable when indoors, better when outside.

18M 02:06:45

Slightly irritable for a short while mid-afternoon

22F 03:XX:XX

Angry with co-worker's "blunders"

23M 14:XX:XX

HAPPINESS:

Feeling positive.

07F 03:XX:XX

Calm and relaxed.

07F 16:XX:XX

Cheerful mood

07F 18:XX:XX

Feeling undecided about everything. Felt better after kickboxing class, calmer, happy and determined. Have been very domestic since taking the remedy, cooking and cleaning

17F 03:XX:XX

Very excitable and hyperactive with lots of energy, can't sit still

17F 05:XX:XX

Happy mood but very very tired

20M 00:XX:XX

My mood is very excited and happy (despite my headache).

21F 04:XX:XX

Went for a walk this afternoon- felt really good afterwards.

22F 03:XX:XX

Feels good to be home.

23M 06:XX:XX

FEARS:

Fear that house will be burgled

11F 13:XX:XX

Woke feeling very claustrophobic

12F 00:XX:XX

AMELIORATION FROM ACTIVITY:

Feeling undecided about everything. Felt better after kickboxing class, calmer, happy and determined. Have been very domestic since taking the remedy, cooking and cleaning

17F 03:XX:XX

Went for a walk this afternoon- felt really good afterwards.

22F 03:XX:XX

Felt good after walk.

22F 04:XX

Went for a walk this afternoon and felt good afterwards.

22F 07:XX:XX

When busy today I never noticed any symptoms.

22F 08:XX:XX

Disappointed to miss walk.

22F 08:XX:XX

Walked on the beach this afternoon- felt good.

22F 10:XX:XX

Walked at lunch time- felt good afterwards.

22F 12:XX:XX

Went for a walk this morning and felt good afterwards.

22F 13:XX:XX

Morning "flatness" gone with walk.

23M 02:XX:XX

Starting to get bored with lack of activity.

23M 04:XX:XX

Feels good to do something constructive (working on odd jobs around home).

23M 05:XX:XX

Found swim in the sea exhilarating and morning "flatness" gone afterwards.

23M 06:XX:XX

Feels good to mow the lawn.

23M 07:XX:XX

Great time in the pool- very physical.

23M 08:XX:XX

Bored, need mental and physical exercise.

23M 12:XX:XX

Motivated to exercise

23M 12:XX:XX

Feel great after walking

23M 14:XX :XX

Hectic day- feels great- good day.

23M 15:XX:XX

OTHER:

On going to sleep I decided to only drink fluids tomorrow because I am feeling so full.

22F 11:XX:XX

2. VERTIGO:

Feel dizzy and sick with headache. Vertigo with driving in a car, have to sit very Still.

17F 04:XX:XX

3. HEAD:

PAIN:

Dull aching headache. Frontal. Feel tired.

03F 01:XX:XX

Headache frontal and sinus. Heavy aching, now also occipital.

03F 01:XX :XX

Dull headache coming on sides of head, above ears, not very bad.

03F 02:11:30:XX

Headaches have almost disappeared. They were: throbbing, gradually increasing in intensity at the base. > rubbing <exertion.

07F XX:XX:XX

Pain on waking.

10F 01:XX:XX

Pain at midday.

10F 02:XX:XX

Dull, aching pain in sinuses.

11F 07:XX:XX

Woke up with very odd head pain , experienced in back lower right quadrant only. Intermittent pain. Relieved by applying very hard pressure to area, almost by banging on head with my hand. Sensitive or light touch made it worse. Pain gets gradually better through the day, less in the evening.

13M 05:XX:XX

Have a dull headache . Headache with eyestrain.

17F 00:02:XX

Sick headache, have to sit very still, feel dizzy. Pain is unbearable. Pain is better for lying down or sitting, worse for exertion.

17F 04:XX:XX

Splitting headache from driving in the sun.

20M 00:XX:XX

Headache at night (feels like a sinus headache) at 22:30.

20M 01:XX:XX

Sinus headache (slight).

20M 02:XX:XX

Sinus headache the whole day.

20M 03:XX:XX

Slight sinus headache.

20M 06:XX:XX

I had a headache this morning around me eye area but by 12:00 it was gone.

21F 11:XX:XX

Slight headache on right side this morning.

22F 02:XX:XX

Had a slight headache after watching a movie this afternoon.

22F 13:XX:XX

Slight dull headache this afternoon, lasted approximately an hour.

22F 15:XX:XX

PRESSURE/CONGESTION:

Frontal lobe (brain) on either side feels pressurized, but not sore or painful, just as though pressure is exerted from the top.

01M 00:14:XX

Sensation of fullness

12F 01:XX:XX

Feels like head is buzzing. Head feels full. Head does not feel clear, but congested. Base of skull feels heavy like it is waterlogged.

14F 01:XX:XX

SENSATIONS OF SKIN:

Have prickly sensation on head and back of neck (skin). My skin feels strange, like a buzz.

01M 00:06:30

Experiencing tingling on skin on back of head, back of neck and upper back. It seems to tingle in separate patches over these areas constantly when still and not as much when moving. The tingling occurs in patches on extremities as well, but not as constant as on upper back and neck.

01M 00:14:30

Skin of back of neck and upper back : tingling sensation, which is better for movement and increases in intensity when still/inactive (lying, standing, sitting). Tingling sensation appears on skin randomly and mildly on all parts of the body especially extremities.

01M 00:XX:XX

Itching scalp better for voluptuous scratching.
09M 12:XX:XX

Scalp itching – scratch until raw.

11F 10:XX:XX

Itchy bumps on scalp.

17F 15:XX:XX

Itchy scalp and right arm for short period this evening.

22F 14:XX:XX

4. EYE:

PAIN:

Pain behind the eyes.

09M 16:XX:XX

Pain, burning.

10F 22:XX:XX

Pain in right eye on waking.

11F 12:XX:XX

Eyes feel thick and heavy as if been crying all night. Eyes are irritated and strained, feel like I need to close them, but they sting on the inside when I close them.

17F 02:XX:XX

Left inner canthus tender as if a sty were forming.

17F 12:XX:XX

My eyes are paining.

21F 00:XX:XX

Pain around eyes in the morning.

21F 11:XX:XX

HEAVINESS/CONGESTION:

"Tired" EYES.

10F 22:XX:XX

Eyes feel heavy from crying. Feels as if they could cry on their own even without emotion attached to them.

17F 01:XX:XX

Eyes feel thick and heavy as if been crying all night. Eyes are irritated and strained, feel like I need to close them, but they sting on the inside when I close them.

17F 02:XX:XX

Eyes are puffy.

17F 06:XX:XX

ITCHING:

Itchy eyes.

22F 00:XX:XX

Eyes were a bit itchy this morning.

22F 01:XX:XX

Eyes a little itchy this morning.

22F 03:XX:XX

Eyes slightly itchy when I woke up.

22F 04:XX:XX

Eyes itchy when I woke up.

22F 05:XX:XX

Eyes a little itchy this evening.

22F 11:XX:XX

Itchy eyes when I woke up.

22F 13:XX:XX

Eyes a bit itchy.

22F 16:XX:XX

DRYNESS:

Eyes are dry.

17F 03:XX:XX

5. VISION:

Vision blurred when head is turned and slight nausea. Can't seem to focus.

18M 00:13:XX

6. EAR:

PAIN:

Pain in left ear.

10F 19:XX:XX

Short-lived stabbing pain in right ear , lasting a couple of seconds.

16F 00:XX:XX

Ears feel tight as if something's around them.

17F 00:01:XX

ITCHING:

Slight itch in my left ear at night but was not persistent.

20F 01:XX:XX

Itch in left ear.

20F 02:XX:XX

7. NOSE:

SNEEZING:

Sneezing in the morning.

07F 06:XX:XX

Sneezing in the morning.

09M 00:XX:XX

Hay fever.

09M 04:XX:XX

Sneezing frequently, in the morning.

10F 02:XX:XX

Sneezing frequently, in the morning.

11F 05:XX:XX

Sneezing throughout the day.

12F 00:XX:XX

Nose stuffy. Sneezing often. Feel like an allergic reaction to something in the air.

Feeling of allergic rhinitis coming on.

17F 00:01:XX

Feels like there is something in my nose. Sneezing often.

17F 04:XX:XX

Sneezing a lot.

22F 00:18:00

Disturbed sleep due to sneezing and blocked nose.

22F 00:XX:XX

I was sneezing in the morning.

21F 12:XX:XX

Lots of sneezing at 9 am.

22F 02:09:00

Slight sneezing early in the morning.

22F 03:XX:XX

Slight sneezing in the morning.

22F 04:XX:XX

Sneezed a bit on waking.

22F 05:XX:XX

Bit of sneezing when I woke up.

22F 06:XX:XX

Sneezing this evening.

22F 11:XX:XX

Sneezing this morning.

22F 13:XX:XX

Sneezing this morning.

22F 15:XX:XX

CORYZA:

Nose running in the morning.

09M 00:XX:XX

Running.

11F 05:XX:XX

Running.

12F 00:XX:XX

Slight occurrence of mucous, but not runny.

20M 01:XX:XX

HEAVINESS/CONGESTION:

Sensation of heaviness in sinuses.

10F 05:XX:XX

Stopped up.

10F 20:XX:XX

Stopped up.

11F 07:XX:XX

Nose congested. Feels like a crust formation on the septum.

14F 05:XX:XX

Nose stuffy. Sneezing often. Feel like an allergic reaction to something in the air.

Feeling of allergic rhinitis coming on.

17F 00:01:XX

Nose blocked, really itchy on the inside of my left nostril. Have to sniff.

17F 02:XX:XX

Nose slightly blocked.

20M 07:XX:XX

Disturbed sleep due to sneezing and blocked nose.

22F 00:XX:XX

Nose very blocked and feeling warmish to me.

22F 00:XX:XX

Blocked nose feeling much better in the afternoon.

22F 01:XX:XX

SENSATIONS:

Nose feels burning like it is on fire.

14F 01:XX:XX

Nose congested. Feels like a crust formation on the septum.

14F 05:XX:XX

Nose dry and burning.

14F 06:XX:XX

Nose stuffy. Sneezing often. Feel like an allergic reaction to something in the air.

Feeling of allergic rhinitis coming on.

17F 00:01:XX

Nose itchy.

17F 01:XX:XX

Nose blocked, really itchy on the inside of my left nostril. Have to sniff.

17F 02:XX:XX

Feels like there is something in my nose. Sneezing often.

17F 04:XX:XX

Feels like there are little vesicles around my nostrils, very itchy and can't stop scratching and rubbing.

17F 07:XX:XX

Feels like there are tiny bugs up my nose and I can't stop rubbing and scratching.

Sensation as if something is moving around inside my nostrils.

17F 12:XX:XX

Nose very blocked and feeling warmish to me.

22F 00:XX:XX

8. FACE:

PAIN:

Tender, painful, ugly pimples on my face.

17F 00:XX:XX

Face very sensitive, when hair touches my face it tickles excessively and feels like there are lots of little hairs falling on my face. Feel I want to cut my hair off so that it doesn't tickle my face.

17F 16:XX:XX

Broke out in pimples, all on left side of face, chin and cheek area

Very sensitive pimples.

20M 03:XX:XX

ERUPTIONS:

Tender, painful, ugly pimples on my face.

17F 00:XX:XX

Broke out in pimples, all on left side of face, chin and cheek area

Very sensitive pimples.

20M 03:XX:XX

Pimple under left eye (in sensitive region).

20M 02:XX:XX

Pimple under left eye still there (after 6 days).

20M 08:XX:XX

Pimples on face gone after 5 days.

20M 08:XX:XX

LIPS:

Feel like I'm getting a cold sore on my top lip. Lips constantly dry.

17F 00:01:30

Top lip feels tender as if berg wind/ sun has burnt it.

17F 01:XX:XX

Top lip, right side numb.

17F 03:XX:XX

9. MOUTH:

STRANGE TASTES:

Stale taste in mouth even after gargling.

14F 01:XX:XX

Horrible "dirty" taste in mouth.

22F 05:XX:XX

SENSATIONS:

Numbness of tongue and buccal mucosa lasting about two days. No speech difficulties. Worse for brushing teeth with toothpaste.

15F XX:XX:XX

Itchy gums. Little itchy bumps on my pallet.

17F 12:XX:XX

DRYNESS:

Mouth very dry.

17F 08:XX:XX

10. THROAT:

PAIN:

Feels slightly scratchy.

07F 08:XX:XX

Pain: SE of razors slicing.

10F XX:XX

Pain, scratching.

11F 18:XX:XX

Pain: SE of razors slicing

11F 08:XX:XX

Pain: scratchy on left side.

12F 00:10:XX

Pain: SE of burning.

12F 00:XX:XX

A dry, hacking cough causing a stabbing pain in the back of my throat.

18M 02:07:15

DRYNESS:

Throat feels dry and rough in the front (trachea on both sides). It feels dehydrated, although I have been drinking liquids.

01M 00:13:XX

Throat still dry and uncomfortable. Definitely a feeling of dehydration. My body is not dehydrated at all.

01M 02:XX:XX

Throat remains dry. Seems to be getting more intense as the day moves on. Not unbearable, but very irritating as I keep wanting to drink. It does feel better for drinking, especially cold drinks (as opposed to tap water). It soothes for a while and then becomes dry again.

01M 01:XX:XX

Throat dry and dehydrated again. Uncomfortable to talk as throat is so dry.

01M 02:XX:XX

"SCRATCHY" SENSATION:

"Scratchy" throat in evening.

23M 16:XX:XX

"Scratchy" throat persists next morning and is better by that evening.

23M 17:XX:XX

HEARTBURN:

Heart burn. I've never had it before. Similar to the burny feeling in stomach, but rising up esophagus. Felt slightly nauseous. Lasted 15 minutes.

03F 01:XX:XX

11. STOMACH:

BURNING:

Burny feeling in stomach, better for eating.

03F 00:XX:XX

Burning tummy. Better eating. Hungry.

03F 01:10:30

Heart burn. I've never had it before. Similar to the burny feeling in stomach, but rising up esophagus. Felt slightly nauseous. Lasted 15 minutes.

03F 01:XX:XX

Heartburn, uneasy acidy feeling, not as severe as yesterday, but at the same time.

03F 02:XX:XX

Heartburn in the morning but lasted +/- 2 minutes and not as intense as has been.

Uneasy burning in stomach > eating. Heartburn from stomach rises to esophagus. Nauseous. Varying appt.

03F 03:XX:XX

INCREASED THIRST:

Woke thirsty and unrefreshed.

03F 01:XX:XX

Thirst increased (esp. for tea).

08F 02:XX:XX

Was quite thirsty the whole day and nothing quenched it.

20M 01:XX:XX

Very thirsty after my morning walk.

22F 14:XX:XX

DECREASED THIRST:

Not as thirsty as normal.

03F 00:XX:XX

Decreased thirst.

03F 03:XX:XX

INCREASED APPETITE:

Burning tummy. Better eating. Hungry.

03F 01:10:30

Huge appetite. Seemed unquenchable.

09 21:XX:XX

Increased appetite.

11F 06:XX:XX

Appetite very good (I can eat a horse).

I have only now realized that throughout this proving I have been eating like a pig.

20M 07:XX:XX

Appetite still big.

20M 08:XX:XX

Still eating like a pig.

20M 09:XX:XX

Ate constantly the whole day.

20M 10:XX:XX

Still eating ravenously.

20M 11:XX:XX

Good appetite.

20M 13:XX:XX

I have been hungry so I ate so much today that I feel lethargic.

21F 11:XX:XX

DECREASED APPETITE:

Appetite decreased. Easy satiety.

03F 00:XX:XX

Not hungry for breakfast (unusual).

03F 01:07:XX

After lunch noticed decreased appetite.

03F 01:XX:XX

Easy satiety at lunch.

03F 02:XX:XX

Easy satiety.

03F 03:XX:XX

My appetite is reduced, even thinking of food makes me want to grab my tummy
and rub it.

05M 00:XX:XX

Food...the thought and smell is off-putting.

05M 00:XX:XX

Lack of appetite.

11F 02:XX:XX

Not very hungry at lunch time - not normal for me.

22F 10:XX:XX

Not really that hungry this evening- but still ate normally!

22F 15:XX:XX

NAUSEA:

Heart burn. I've never had it before. Similar to the burny feeling in stomach, but rising up esophagus. Felt slightly nauseous. Lasted 15 minutes.

03F 01:XX:XX

Sensation of being queasy.

09M 13:XX:XX

Stomach feels bloated like food is sitting on my chest. Want to throw up.

14F 12:XX:XX

Slight nausea and blurred vision with turning my head.

18M 00:13:XX

Feeling very nauseas on waking , feels as if the stomach is very heavy and bloated. This feeling is better outside.

18M 01:XX:XX

FULLNESS:

Stomach feels bloated like food is sitting on my chest. Want to throw up.

14F 12:XX:XX

Feeling very nauseas on waking , feels as if the stomach is very heavy and bloated. This feeling is better outside.

18M 01:XX:XX

Too much to eat at lunchtime - bloated full feeling all afternoon.

22F 11:XX:XX

12. ABDOMEN:

PAIN:

Had cramping in my bowels tonight. It started quite insidiously building to a burning sensation. The pain came and went. It felt like gas build up or an upset tummy. I had to take deep breaths and pace around to make it feel better.

05M 01:XX:XX

I am still plagued by the cramping. I cannot eat. It is like a hot fist in my epigastrium. I have to stop whatever it is that I am doing, take some deep breaths and let the attack subside. Motion/ walking about brings it on rather aggravates it. Sitting or being still helps but does not stop the cramping.

05M 02:XX:XX

Had a stomachache in the evening (with sharp lower back pain).

21F 00:XX:XX

The entire day I felt really bloated and my stomach was so sore. It is cramping all day now and not just in the evening.

21F 02:XX:XX

BLOATING:

Stomach feels bloated like food is sitting on my chest. Want to throw up.

14F 12:XX:XX

Feeling very nauseas on waking, feels as if the stomach is very heavy and bloated. This feeling is better outside.

18M 01:XX:XX

The entire day I felt really bloated and my stomach was so sore. It is cramping all day now and not just in the evening.

21F 02:XX:XX

Too much to eat at lunch time-bloated full feeling all afternoon.

22F 11:XX:XX

Going to bed feeling very full tonight- maybe tomorrow only drink fluids.

22F 11:XX:XX

13. RECTUM:

LOOSE STOOLS:

Stool loose and unformed during menses.

14F 15:XX:XX

Stools are loose, not as solid as normal, but not watery.

18M 02:XX:XX

FREQUENCY:

Had a bowel movement at 15:15 today - not usual to have two a day.

22F 01:XX:XX

Feeling of constipation although tummy worked twice today.

22F 05:XX:XX

Have just realized tummy did not work this morning (usually does every morning).

22F 11:XX:XX

14. STOOL:

Stool loose and unformed during menses.

14F 15:XX:XX

Stools are loose, not as solid as normal, but not watery.

18M 02:XX:XX

15. BLADDER:

Increased urination. Went to the toilet 3 times at work. I do drink a lot of water, but urination much greater than amount drunk.

03F 00:XX:XX

Woke up at 3.33 am went to toilet (urination). Fell straight back to sleep (unusual).

03F 01:XX:XX

Woke at 5 am needed to urinate.

03F 02:XX:XX

Still increased urination.

03F 03:XX:XX

16. FEMALE:

LATE MENSES:

(day 1 of cycle) Menses very late, over 40 day cycle. Dark, string blood . Very hot blood! Menses now very scanty. Severe abdominal cramps, abdomen feels bloated and clothes feel too tight.

14F 13:XX:XX

(day 1 of cycle) Menses delayed, 33-day cycle. Brown blood, medium flow. Cramps, which feel like uterus, are contracting. Uterus feels twisted.

14F 46:XX:XX

EARLY MENSES:

I started my period today

It is very light and is more like spotting

It is two weeks early.

21F 03:XX:XX

Prolonged period

Spotting 8th - 12th (four days)

Normal period 12th - 15th (three days)

Spotting 15th - 23rd (6 days)

Normal period 23rd - 27th (four days)

Period two weeks early.

22F 13:XX:XX

DARK MENSES:

(day 1 of cycle) Menses delayed, 33-day cycle. Brown blood, medium flow.

Cramps, which feel like uterus, are contracting. Uterus feels twisted.

14F 46:XX:XX

(day 2 of cycle) Heavy flow of dark blood, almost black with little red spots.

Painful period pains, better for pressure. Hot blood. Many clots which are dark.

14F 14:XX:XX

(day 3) Light flow. Dark, black blood. Blood is string and very hot. Stool is

loose and unformed during menses.

14F 15:XX:XX

(day 2) Heavy flow of hot, string blood. Bright red blood. Cramps severe, desire

to sit bent double. Cramps better for massaging lower abdomen.

14F 47:XX:XX

HEAVY MENSES:

(day 2 of cycle) Heavy flow of dark blood, almost black with little red spots.

Painful period pains, better for pressure. Hot blood. Many clots which are dark.

14F 14:XX:XX

(day 2) Heavy flow of hot, string blood. Bright red blood. Cramps severe, desire to sit bent double. Cramps better for massaging lower abdomen.

14F 47:XX:XX

Bearing down pains, which disappear with sitting down. Pains are better if using pads and worse for using tampons. Desire to lie down with pains. Legs feel weak and tired .I feel cold and clammy and sick. Menses profuse and dark red.

17F 06:XX:XX

PAINFUL MENSTRUATION:

(day 1 of cycle) Menses very late, over 40 day cycle. Dark, string blood . Very hot blood! Menses now very scanty. Severe abdominal cramps, abdomen feels bloated and clothes feel too tight.

14F 13:XX:XX

(day 2 of cycle) Heavy flow of dark blood, almost black with little red spots. Painful period pains, better for pressure. Hot blood. Many clots which are dark.

14F 14:XX:XX

(day 1 of cycle) Menses delayed, 33-day cycle. Brown blood, medium flow. Cramps, which feel like uterus, are contracting. Uterus feels twisted.

14F 46:XX:XX

Bearing down pains, which disappear with sitting down. Pains are better if using pads and worse for using tampons. Desire to lie down with pains. Legs feel weak and tired .I feel cold and clammy and sick. Menses profuse and dark red.

17F 06:XX:XX

CLOTTED MENSES:

(day 2 of cycle) Heavy flow of dark blood, almost black with little red spots.

Painful period pains, better for pressure. Hot blood. Many clots which are dark.

14F 14:XX:XX

(day 3) Medium flow, hot reddish brown blood. Lots of clots even when bathing.

Clots are dark brown.

14F 48:XX:XX

LIGHT FLOW:

(day 3) Light flow. Dark, black blood. Blood is string and very hot. Stool is loose and unformed during menses.

14F 15:XX:XX

(day 4) Slight spotting of brown blood. Menses duration has decreased from 6 days to 4 days.

14F 16:XX:XX

(day 5) Spotting of dark blood.

14F 50:XX:XX

I started my period today

It is very light and is more like spotting

It is two weeks early.

21F 03:XX:XX

Prolonged period

Spotting 8th - 12th (four days)

Normal period 12th - 15th (three days)

Spotting 15th - 23rd (6 days)

Normal period 23rd - 27th (four days)

Period two weeks early.

22F 13:XX:XX

HOT MENSES:

(day 1 of cycle) Menses delayed, 33-day cycle. Brown blood, medium flow.

Cramps, which feel like uterus, are contracting. Uterus feels twisted.

14F 46:XX:XX

(day 2 of cycle) Heavy flow of dark blood, almost black with little red spots.

Painful period pains, better for pressure. Hot blood. Many clots which are dark.

14F 14:XX:XX

(day 3) Light flow. Dark, black blood. Blood is string and very hot. Stool is loose and unformed during menses.

14F 15:XX:XX

(day 2) Heavy flow of hot, string blood. Bright red blood. Cramps severe, desire to sit bent double. Cramps better for massaging lower abdomen.

14F 47:XX:XX

(day 3) Medium flow, hot reddish brown blood. Lots of clots even when bathing. Clots are dark brown.

14F 48:XX:XX

ITCHING:

Old itching thrush has returned.

17F XX:XX:XX

NO MENSTRUATION:

(day 4) No flow, cycle has changed.

14F 49:XX:XX

PROLONGED PERIOD:

Prolonged period

Spotting 8th - 12th (four days)

Normal period 12th - 15th (three days)

Spotting 15th - 23rd (6 days)

Normal period 23rd - 27th (four days)

Period two weeks early.

22F 13:XX:XX

17. COUGH:

Phlegm.

11F 10:XX:XX

A dry, hacking cough causes a stabbing pain in the back of my throat.

18M 02:07:15

Coughing slightly, a bit of discomfort over upper right back area (where scar is)
when I cough.

22F 02:XX:XX

Slight cough still with slight discomfort in back (over scar area).

22F 03:XX:XX

Slight cough this morning.

22F 12:XX:XX

18. CHEST:

Pain in heart region, retrosternal, towards left. Aching pain. Pain became sharp.

Area 4th and 5th intercostals space. I feel I must hold my chest in specific spot, better for. No radiation.

03F 02:XX:XX

When I went to sleep I had a funny feeling in my chest - sort of short of breath.

22F 03:XX:XX

Same short of breath feeling in chest this evening when going to bed.

22F 04:XX:XX

19. BACK:

PAIN:

Pain between shoulder blades especially on the right, a sharp shooting pain .Can locate the pain with my finger, very localized.

Soreness of neck.

14F 00:XX:XX

Pain between shoulder blades start on the right and move to the left. This pain radiates down arms. Pain along spine , mainly cervical and lumbar region.

Drawing pain in clavicle. Left neck pain with associated shoulder pain.

14F 01:XX:XX

Neck stiffness, need to crack neck to release pressure.

Lower back pain, feels tight, desire to press spot.

14F 02:XX:XX

Nagging lower back pain especially on the right.

14F 03:XX:XX

Pain in right side of neck.

Pain on right side of back, very painful and tender to touch.

Nagging pain between shoulder blades.

14F 06:XX:XX

Lower back sore, worse for sitting for entire day. Nothing makes it better except for hard pressure on the spot.

14F 08:XX:XX

Lower back pain better for massage and pressure .

Neck stiffness, SCM feel tight.

14F 09:XX:XX

Neck stiff, SCM and trapezius muscles feel sore.

Mid-back pain on right, muscles feel chordy.

14F 10:XX:XX

Lower back pain is killing me! Localized spot excruciating to touch.

14F 27:XX:XX

Lumbar back pain which is dull. Comes in episodes. Worse for bending. Lasts a half hour in morning and again in afternoon at about 2pm.

15F 00:XX:XX

Neck tight.

17F 00:03:XX

Neck stiffness. Neck pain from trapezius to occiput to ears and into eyes.

17F 04:XX:XX

A dull pain in lower back, feels deep, on right and left. Could it be kidney pain?

Pain is localized.

18M 02:09:XX

Pain persists, body feels sore all over, numb just beneath the surface. Any pressure increases the intensity.

18M 02:14:XX

Neck pain (upper neck) - may be from roller coaster rides.

20M 01:XX:XX

In the evening I experienced a sharp back ache at the bottom of my spine (with a Stomachache).

21F 00:XX:XX

I am still experiencing this strange backache. It is a very sharp pain at the bottom of my spine. It's getting really bad. I can't sleep well because every time I turn it hurts.

21F 01:XX:XX

Still coughing slightly - a bit of discomfort over upper right back area (where my scar is) when I cough .

22F 02:XX:XX

Slight cough still with slight discomfort in back (over scar area).

22F 03:XX:XX

STIFFNESS:

Neck stiffness, need to crack neck to release pressure.

Lower back pain, feels tight, desire to press spot.

14F 02:XX:XX

Lower back pain better for massage and pressure .

Neck stiffness, SCM feel tight.

14F 09:XX:XX

Neck stiff, SCM and trapezius muscles feel sore.

Mid-back pain on right, muscles feel chordy.

14F 10:XX:XX

Neck tight.

17F 00:03:XX

Neck stiffness. Neck pain from trapezius to occiput to ears and into eyes.

17F 04:XX:XX

SENSATIONS:

Have prickly sensation on head and back of neck (skin). My skin feels strange, like a buzz.

01M 00:06:30

Experiencing tingling on skin on back of head, back of neck and upper back. It seems to tingle in separate patches over these areas constantly when still and not as much when moving. The tingling occurs in patches on extremities as well, but not as constant as on upper back and neck.

01M 00:14:30

Skin of back of neck and upper back: tingling sensation, which is better for movement and increases in intensity when still/inactive (lying, standing, sitting). Tingling sensation appears on skin randomly and mildly on all parts of the body especially extremities.

01M 00:XX:XX

Both arms and legs and back of neck a little itchy this afternoon - didn't last long.

22F 16:XX:XX

20. EXTREMITIES:

PAIN:

Doing aerobics – cramp in R foot, went up into calf on the inside. Also very uncoordinated (unusual).

03F 01:XX:XX

Cramping of right inner thigh.

09M 10:XX:XX

Pain in the inner side of the left elbow.

09M 25:XX:XX

Pain over right Pisiform bone <pressure (healed symptom).

10F XX:XX:XX

Pain in shoulder (bruised sensation).

11F 04:XX:XX

Muscles feel sore especially thighs.

14F 00:XX:XX

Shoulder muscles feel tight. Pain between shoulder blades radiates down arms.

Left ankle pain.

14F 01:XX:XX

Shoulder pain radiates to left shoulder, a very definite and localized spot. Pain is better for massage.

14F 03:XX:XX

Sharp pain in left elbow, moves upward to left arm. Deep bone pain, worse for straightening the arm, lasts about 5 minutes.

15F 01:XX:XX

Pain in inner right knee at 13:30, lasted about a minute, sharp pain.

20M 05:13:30

Pain in right knee, sharp 5:30 am, lasted a few seconds.

20M 06:05:30

Right big toe a little sore this evening (about 19:00).

22F 04:XX:XX

Right big toe sore again this evening.

22F 05:XX:XX

Right big toe sore again this evening.

22F 06:XX:XX

Right big toe sore again this evening.

22F 10:XX:XX

Shoulder is sore and feels like it a good pounding by a physiotherapist.

23M 03:XX:XX

STIFFNESS:

Shoulder muscles feel tight. Pain between shoulder blades radiates down arms.

Left ankle pain.

14F 01:XX:XX

Stiffness in right hip area after sitting.

22F 02:XX:XX

Back of legs a little stiff - probably because I haven't walked for a week.

22F 04:XX:XX

Right hip feeling stiff again this evening- after lying on the couch then getting up to go to bed.

22F 04:XX:XX

Stiffness in right hip again this morning - not last long.

22F 13:XX:XX

Stiffness from exercising day before- good to feel stiff.

23M 13:XX:XX

SENSATIONS:

Experiencing tingling on skin on back of head, back of neck and upper back. It seems to tingle in separate patches over these areas constantly when still and not as much when moving. The tingling occurs in patches on extremities as well, but not as constant as on upper back and neck.

01M 00:14:30

Skin of back of neck and upper back: tingling sensation, which is better for movement and increases in intensity when still/inactive (lying, standing, sitting). Tingling sensation appears on skin randomly and mildly on all parts of the body especially extremities.

01M 00:XX:XX

Sensation that the hair on my arms is standing on end (but it isn't)- tingling feeling.

07F 03:XX:XX

SKIN ERUPTIONS:

Slight rash between right thumb and index finger.

12F 03:XX:XX

Have blisters at the back of my right foot.

22F 05:XX:XX

Have an itchy rash on back of left upper arm.

Lots of red raised little bumps next to each other.

22F 05:XX:XX

Left upper arm rash is still itchy.

22F 06:XX:XX

Right upper arm not itchy anymore, but still has the rash.

22F 07:XX:XX

Itchy scalp and right arm for a short period this evening.

22F 14:XX:XX

Legs felt a little itchy this afternoon, but not for long.

22F 15:XX:XX

Both legs and arms and back of neck a little itchy this afternoon- didn't last long.

22F 16:XX:XX

HEAVINESS:

Legs feel heavy.

14F 05:XX:XX

SWELLING:

Slight swelling of both ankles in lateral malleolus area, went down by morning.

15F 04:21:XX

21. SLEEP:

WAKING EARLY:

Woke up at 3.33am, went to toilet (urination). Fell straight back to sleep

03F 01:XX:XX

Woke at 5am, needed to urinate.

03F 02:05:XX

Early waking.

11F 02:XX:XX

Woke up at 2am, disturbed sleep until 4:30am and then got up

22F 12:XX:XX

Woke early (5:30 am - unusual), fought it off and slept until 8am

23M 04:XX:XX

WAKING LATE:

Slept late

08F 01:XX:XX

Difficulty waking

10F 05:XX:XX

Difficulty waking.

11F 12:XX:XX

Slept most of the day because it was raining and I felt lazy.

20M 04:XX:XX

Slept late (14:00), like a log.

20M 05:14:00

Lazy morning, dozed on and off (not like me to sleep in)

22F 04:XX:XX

QUALITY:

Restful, easier to get up in the morning.

09M 01:XX:XX

Very restless sleep. Feel tired, but can't sleep.

14F 02:XX:XX

Sleep very restless.

14F 03:XX:XX

Sleep restless, can't find good position to sleep in, too hot.

14F 05:XX:XX

Body feels sore, restless sleep.

14F 06:XX:XX

Very restless sleep and can't get comfortable. Bed feels too hot, need cool sheets.

14F 08:XX:XX

Can't sleep due to too much back pain. Very restless sleep. Tossing and turning all night – wake with bedcovers and clothes all over. Very restless legs in bed. Very hot, constant need to cool down, continually replace pillows for colder ones. Muscles feel tired and aching with great desire to stretch the whole night.

14F 09:XX:XX

Wake surprisingly unrefreshed.

17F 01:XX:XX

Slept solidly.

20M 00:XX:XX

Took about a half an hour to sleep but slept well.

20M 01:XX:XX

Slept well (many dreams)

20M 02:XX:XX

Slept like a log

20M 03:XX:XX

Slept well with many dreams

20M 04:XX:XX

Slept peacefully

20M 07:XX:XX

Good sleep

20M 08:12:00

Slept well

20M 10:XX:XX

Sleep good

20M 12:XX:XX

I can't sleep well because every time I turn my lower back hurts

21F 01:XX:XX

Disturbed sleep due to sneezing and blocked nose.

22F 00:XX:XX

Slept well last night and dreamt just before waking.

22F 01:XX:XX

Good sleep - dreamt again just before waking

22F 02:XX:XX

Slept well

22F 03:XX:XX

Had a good sleep

22F 04:XX:XX

Sleeping well with many dreams

22F 08:XX:XX

Disturbed sleep. Woke up screaming from nightmare. Took a while to go back to sleep and then woke up at 8am

22F 15:XX:XX

Slept well(unusual)

23M 02:XX:XX

SLEEPLESSNESS:

Battled to get to sleep, had restless legs.

09M 17:XX:XX

Restless, tossed and turned very violently.

09M 18:XX:XX

Restless

10F 16:XX:XX

Sleeplessness due to: cough.

11F 12:XX:XX

Sleeplessness due to: Itching scalp.

11F 12:XX:XX

Can't sleep due to too much back pain.

14F 09:XX:XX

Took about a half an hour to sleep but slept well.

20M 01:XX:XX

SLEEPINESS:

Sleepiness.

11F 06:20:XX

SENSATIONS:

When I went to sleep I had a funny feeling in my chest - sort of short of breath.

22F 03:XX:XX

Same short of breath feeling in chest this evening when going to bed.

22F 04:XX:XX

22. DREAMS:

PEOPLE AND PLACES FROM THE PAST:

Of the dead, but alive in dream – family.

10F 05:XX:XX

Of the dead, but alive in dream – pets.

10F 13:XX:XX

Of an old friend, now wearing her pajamas.

11F 17:XX:XX

DANGER:

Was being chased, although I was in no danger, I did not want to be caught.

09M 20:XX:XX

Dreamt I was going to town across a way bridge, there was a big hole in the bridge without warning. I had to turn back and 2 crowns fell out of my mouth. I swallowed one and kept the other. The dentist was on the other side of the bridge. I went back to look at the hole and there was a magnetic pull towards the hole. I had to pull myself away.

22F 01:XX:XX

Dreamt were all visiting Henry Honiball to watch a rugby match - he organized plates and plates of snacks. We got lost somewhere on the way home and couldn't get home again.

22F 02:XX:XX

Woke up screaming. Dreamt I was with my mother somewhere and an unknown person was hiding from us, but we knew they were there. I was very frightened.

Took a while to go back to sleep.

22F 16:XX:XX

ISOLATION:

Dreamt I was going to town across a way bridge, there was a big hole in the bridge without warning. I had to turn back and 2 crowns fell out of my mouth. I swallowed one and kept the other. The dentist was on the other side of the bridge. I went back to look at the hole and there was a magnetic pull towards the hole. I had to pull myself away.

22F 01:XX:XX

Dreamt were all visiting Henry Honiball to watch a rugby match - he organized plates and plates of snacks. We got lost somewhere on the way home and couldn't get home again.

22F 02:XX:XX

Woke up screaming. Dreamt I was with my mother somewhere and an unknown person was hiding from us, but we knew they were there. I was very frightened.

Took a while to go back to sleep.

22F 16:XX:XX

OTHER:

Vivid, aerobics class that was so over crowded you couldn't even move. Made me feel irritated and confined. Kept turning around with arms stretched out / trying to move freely, but couldn't.

03F 02:XX:XX

Dreamt I was at school and the change rooms where fancy with spa's and sauna's.

09M 07:XX:XX

Dreamt about pepper steak pies.

09M 15:XX:XX

Scattered in time (backwards and forwards).

10F 09:XX:XX

Of contact lens in mouth and accidentally biting it.

11F 09:XX:XX

Of hurting her tooth.

11F 10:XX:XX

Of yellow nails.

11F 10:XX:XX

Had a dream that my mother was pregnant . Felt disgusted , she is too old and she already has three children .Felt it was unfair of her to have another child.

17F 02:XX:XX

Many dreams throughout proving

20M:XX:XX

Many dreams

22F 06:XX:XX

23. PERSPIRATION:

Profuse.

09M 02:XX:XX

Sticky.

09M 10:XX:XX

Resulting in itching.

09M 24:XX:XX

24. SKIN:

ITCHING:

The skin around my wart has become very itchy and raised, the more I scratch it,
the more it seems to itch.

02F 01:XX:XX

The skin around my wart is raised and very itchy. It feels itchy deep inside. It feels like it is just about ready to fall off.

02F:02:XX:XX

My skin feels dry and itchy

02F: 05:XX:XX

Itching scalp is better for voluptuous scratching.

09M 12:XX:XX

Red, raised, itching eruptions

11F 20:XX:XX

Intense itching of scalp, prevents sleep and "drives her crazy" >scratching

11F XX:XX:XX

Skin around nostrils itchy, can't stop scratching and rubbing. Little vesicles around nostrils.

17F 07:XX:XX

Skin on hands very dry and itchy .Old scar on finger suddenly itchy again. Little vesicles have developed where I'd previously had a rash from a plaster .

17F 07:XX:XX

Scars of old warts have become itchy and irritated.

17F 10:XX:XX

Old warts seem to have returned, red and itchy around the old scars.

17F 14:XX:XX

Very itchy mosquito bites.

22F 01:XX:XX

Itchy rash.

Lots of red raised little bumps next to each other.

22F 05:XX:XX

Itchy again for short while and then stopped but rash remained.

22F 07:XX:XX

DRYNESS:

My skin generally feels quite dry, more than usual.

02F:02:XX:XX

My skin feels dry and itchy

02F: 05:XX:XX

Peeling on soles of feet. Dry, scaly and flaky. Feet are usually dry, but this is excessive. Flakes are tiny. Looks like soles of feet are peeling.

03F 02:XX:XX

Feet still dry, but no longer peeling.

03F 03:XX:XX

Skin on hands very dry and itchy .Old scar on finger suddenly itchy again. Little vesicles have developed where I'd previously had a rash from a plaster .

17F 07:XX:XX

ERUPTIONS:

Red, raised, itching eruptions

11F 20:XX:XX

An old eczema on the inside of my right leg seems to have come up again , worse for clothing , worse after gym when I've been wearing leggings.

17F 02:XX:XX

Skin around nostrils itchy, can't stop scratching and rubbing. Little vesicles around nostrils.

17F 07:XX:XX

Skin on hands very dry and itchy .Old scar on finger suddenly itchy again. Little vesicles have developed where I'd previously had a rash from a plaster .

17F 07:XX:XX

Scars of old warts have become itchy and irritated.

17F 10:XX:XX

Old warts seem to have returned, red and itchy around the old scars.

17F 14:XX:XX

Hard skin has formed over the warts.

17F 16:XX:XX

Pimple under left eye (in sensitive region).

20M 02:XX:XX

Broke out in pimples, all on left side of face, chin and cheek area

Very sensitive pimples.

20M 03:XX:XX

Pimple under left eye still there (after 6 days).

20M 08:XX:XX

Pimples on face gone after 5 days.

20M 08:XX:XX

Blisters on back of right foot.

22F 05:XX:XX

Rash remained but itch left.

22F 07:XX:XX

Itchy again for short while and then stopped but rash remained.

22F 07:XX:XX

SENSATIONS:

Sensation that the hair on my arms is standing on end (but it isn't).

07F 03:XX:XX

SUN:

Sun burnt today but have no pain

20M 13:XX:XX

Told I got sun burnt but hadn't felt it (looked in mirror and realized I was burnt).

22F 04:XX :XX

OTHER:

Skin is not healing well.

17F 05:XX:XX

25. GENERALS:

ENERGY:

Dull aching headache, frontal and feel tired.

03F 01:10:XX

Uncoordinated while doing aerobics.

03F 01:XX :XX

Overly tired.

03F 01:XX:XX

Low energy, tired.

03F 03:XX:XX

Feeling quite energetic.

07F 03:XX:XX

Feeling lethargic.

09M 06:XX:XX

Recovering from exercise more quickly than usual.

09M XX:XX:XX

Very excitable and full of energy.

17F 05:XX:XX

Energy level very high

20M 01:XX:XX

High energy levels

20M 03:XX:XX

Very lazy day, slept most of it away because it was raining.

20M 04:XX:XX

I feel very tired- for no reason.

21F 00:XX:XX

I felt a bit tired in the afternoon.

21F 02:XX:XX

I felt a bit tired this morning.

21F 07:XX:XX

Feel very tired this afternoon (lethargic form all the food I ate today).

21F 09:XX:XX

HEAT:

Alternating hot and cold. Can't make up mind whether want to wear a jersey or not.

03F 00:XX:XX

Sleep restless , too hot .

14F 05:XX:XX

Bed feels too hot , need cool sheets .

14F 08:XX:XX

Very hot in bed, constant need to cool down, continually replace pillows with colder ones.

14F 09 :XX:XX

Feel very hot like I'm burning up inside , going to self-combust . Feels like body is on fire.

14F XX :XX:XX

Body felt very hot during morning and again in afternoon at about 2pm.

15F 00:08:XX

Feel hot and flustered and impatient and irritable when indoors , better when outside .

18M 02:06:45

Hot flushes return.

18M 02:07:40

Hot flushes return.

18M 02:08:15

Feel very hot today.

22F 01:XX:XX

Hot and thirsty this morning.

22F 02:XX:XX

APPETITE

Had an unusual craving for ice-cold coca-cola.

13M 05:XX:XX

Kentucky Fried Chicken craving, craving the fried, crispy, spicy aspect.

14F 01:XX:XX

Desire chicken!

14F 02:XX:XX

Craving Chinese food.

14F 05:XX :XX

Craving spicy chicken.

Coca cola does not relieve thirst for icy drinks (always normally does)

14F 06:XX:XX

Very thirsty. Had a lot of energy at work and wasn't tired afterward.

17F 00:XX:XX

Need to drink constantly, feel very thirsty.

17F 08:XX:XX

WEATHER:

Driving in the sun gave me a splitting headache

20M 00:XX:XX

Slept most of the day because it was rainy and I felt lazy.

20M 04:XX:XX

Relaxed mood because of rainy weather.

23M 00:XX:XX

OTHERS:

Weight gain.

07F XX:XX:XX

Weight gain (8kg in 11 days!) Normally can't put on any weight.

20M 11:XX:XX

Stiffness from exercising day before- good to feel stiff.

23M 13:XX:XX

Glands under left arm slightly painful.

03F 03:XX:XX

Retrosternal pain only once today and didn't last long

03F 03:16:30

4.3 RUBRICS

MIND:

Mind, absentminded. 1. S. 1.

Mind, absorbed. 1. S. 1.

Mind, activity; desires. 1. S. 2.

Mind, air; mental symptoms amel. In open. 1. S. 7.

Mind, anger. 1. S. 8.

Mind, anger, easily 1. S. 9.

Mind, anger, trifles; at. 1. S. 11.

Mind, biting, lip, his. 1. S. 26.

Mind, brooding. 1. S. 27.

Mind, cheerful. 1. S. 30.

Mind, cheerful, alternating with, sadness. 1. S. 31.

Mind, cleaning, desire to clean. 1. S. 32 N.

Mind, cooking, desire to cook. 1. S. 43 N.

Mind, confidence, want of self-confidence. 1. S. 37.

Mind, company, aversion to. 3. S. 33.

Mind, company, aversion to, desire for solitude. 2. S. 34.

Mind, concentration, difficult. 1. S. 36.

Mind, confusion of mind. 1. S. 37.

Mind, conversation, aversion to. 2. S. 43.

Mind, delusions, alone, being. 1. S. 52.

Mind, delusions, being alone, world, alone in the. 1. S. 52.

Mind, delusions, body, out of the body. 1. S. 55.

Mind, delusions, criticized. 1. S. 58.

Mind, delusions, division between himself and others. 2. S. 60.

Mind, delusions, far off; as if. 1. S. 64.

Mind, delusions, separated, world, from the, he is separated. 1. S. 79.

Mind, delusions, body, lost in his body. 1. S. 55 N.

Mind, delusions, alone, being, world, alone in the. 1. S. 52.

Mind, delusions, changed, environment has. 1. S. 56 N.

Mind, delusions, changed, everything has. 1. S. 56.

Mind, delusions, despised, is. 1. S. 58.

Mind, delusions, looked down upon, she is. 1. S. 70.

Mind, delusions, outcast; she were an outcast. 1. S. 75.

Mind, delusions, strange, speech. 1. S. 82. N.

Mind, delusions, strange, everything is. 1. S. 82.

Mind, delusions, strange, familiar things seem strange. 1. S. 82.

Mind, delusions, strange, surroundings seem strange. 1. S. 82.

Mind, delusions, strange, voice seemed strange, her own. 1. S. 82.

Mind, detached. 1. S. 91.

Mind, discontented, himself, with, good for nothing; sensation of being. 1. S. 92.

Mind, dissociation from environment. 1. S. 94.

Mind, despair. 1. S. 89.

Mind, despair, life, of. 1. S. 90.

Mind, dream as if in a. 1. S. 94.

Mind, drugs, as if had taken. 1. S. 95. N

Mind, dullness. 1. S. 95.

Mind, emotions, waves of, overcome by. 1. S. 100. N.

Mind, excitement. 1. S. 101.

Mind, exertion, physical, amel. 1. S. 104.

Mind, exertion, physical, desires. 1. S. 104.

Mind, fear, happen, something will, horrible; something. 1. S. 112.

Mind, fear, narrow place, in. 1. S. 114.

Mind, fear, narrow place, in; waking on. 1. S. 114.

Mind, fear, robbers, of. 1. S. 115.

Mind, fear, opinion of others, of. 1. S. 114.

Mind, forebodings. 1. S. 199.

Mind, forgetful. 1. S. 119.

Mind, forsaken feeling, isolation, sensation of. 2. S. 120.

Mind, going out; aversion to. 1. S. 124.

Mind, handle things anymore, cannot, overwhelmed by stress. 1. S. 125. N

Mind, homesickness. 1. S. 127.

Mind, hurry, haste. 1. S. 128.

Mind, ideas, deficiency of. 1. S. 131.

Mind, impatience. 1. S. 132.

Mind, indifference, apathy. 1. S. 134.

Mind, indifference, everything to. 1. S. 134.

Mind, indignation. 1. S. 136.

Mind, introspection. 1. S. 140.

Mind, irresolution, indecision. 1. S. 140.

Mind, irritability. 1. S. 141.

Mind, irritability, causeless. 1. S. 143.

Mind, loathing, himself; at. 1. S. 153.

Mind, memory, weakness of memory. 1. S. 158.

Mind, memory, weakness of memory, expressing oneself; for. 1. S. 159.

Mind, mood, changeable. 2. S. 167.

Mind, occupation, amel. 1. S. 172.

Mind, offended, easily. 1. S. 172.

Mind, overwhelming, feeling overwhelmed. 1. S. 172.

Mind, restlessness. 1. S. 182.

Mind, sadness. 2. S. 187.

Mind, sadness, waking, on. 1. S. 188.

Mind, sadness, aversion to company, desire for solitude. 2. S. 190.

Mind, sensitive. 1. S. 194.

Mind, sensitive, noise, to. 1. S. 195.

Mind, sensitive, noise, to, aversion to. 1. S. 196.

Mind, sensitive, opinion of others, to the. 1. S. 196.

Mind, serious, earnest. 1. S. 197.

Mind, slowness. 1. S. 202.

Mind, spaced out feeling. 1. S. 202.

Mind, spaced out feeling, skull and frontal lobe, between. 1. S. 202. N

Mind, speech, difficult, inarticulate. 1. S. 203.

Mind, speech, forcible. 1. S. 203.

Mind, speech, strange. 1. S. 204.

Mind, strange, everything seems. 1. S. 207.

Mind, stupefaction. 1. S. 208.

Mind, taciturn. 1. S. 214.

Mind, thoughts, thoughtful. 1. S. 218.

Mind, thoughts, vanishing of. 1. S. 219.

Mind, thoughts, vagueness of. 1. S. 219.

Mind, weeping. 3. S. 228.

Mind, weeping, alone when. 1. S. 229

Mind, weeping, amel. 1. S. 229.

Mind, weeping; anger, during. 1. S. 229.

Mind, weeping, causeless. 1. S. 229.

Mind, weeping, easily. 1. S. 230.

Mind, weeping, delayed reaction. 1. S. 230 N.

Mind, weeping, despair. 1. S. 230 N.

Mind, weeping, past events, thinking of. 1. S. 231.

Mind, weeping, sobbing, weeping with. 1. S. 232.

VERTIGO:

Vertigo, accompanied by, head, pain in head. 1. S. 236.

Vertigo, riding, carriage in a. 1. S. 242.

HEAD:

Head , buzzing sensation in. 1. S. 248. N.

Head, congestion. 2. S. 250.

Head, eruptions, itching. 1. S. 257.

Head, eruptions , vesicles. 1. S. 258.

Head, fullness. 2. S. 259.

Head, heaviness, occiput, water, as if full of. 1. S. 269. N.

Head, heaviness, pressed forward, brain, weight on brain, like a. 1. S. 267.

Head, heaviness, pressed forward, head, like a weight on. 1. S. 267.

Head, itching of scalp, accompanied by, right arm, itching. 1. S. 270. N.

Head, itching of scalp, evening. 1. S. 270.

Head, itching of scalp, scratching amel. 1. S. 270.

Head, itching of scalp. 3. S. 270.

Head, pain. 3. S. 274.

Head, pain, bursting, sun from. 1. S. 319. N.

Head, pain, dull pain, forehead, frontal eminence. 1. S. 326.

Head, pain, dull pain, forehead. 1. S. 326.

Head, pain, dull pain, forenoon. 1. S. 326. N.

Head, pain, dull pain, occiput. 1. S. 326.

Head, pain, dull pain, sides. 1. S. 327.

Head, pain, dull pain. 1. S. 326.

Head, pain, exertion, body, etc of. 1. S. 283.

Head, pain, exertion, eyes, of the. 1. S. 283.

Head, pain, forehead, eyes, above, forenoon. 1. S. 302.

Head, pain, forehead, eyes, above, morning. 1. S. 302.

Head, pain, forehead, eyes, above. 1. S. 301.

Head, pain, forehead, eyes, behind. 1. S. 303.

Head, pain, forehead, frontal eminence. 1. S. 300.

Head, pain, forehead in, extending to, occiput 1. S. 300.

Head, pain, forehead in. 1. S. 296.

Head, pain, intermittent pains. 1. S. 284.

Head, pain, lying amel. 1. S. 285.

Head, pain, night, midnight before, 22h. 1. S. 277.

Head, pain, night. 1. S. 277.

Head, pain, noon. 1. S. 276.

Head, pain, occiput, pressure amel. 1. S. 305.

Head, pain, occiput, right. 1. S. 304. N.

Head, pain, occiput, touch agg. 1. S. 306.

Head, pain, occiput, waking on. 1. S. 306. N.

Head, pain, occiput. 1. S. 303.

Head, pain, pressure external, amel, hard amel, hitting head hard amel. 2. S. 288. N.

Head, pain, pressure external, amel. 1. S. 288.

Head, pain, sides, forenoon. 1. S. 308.

Head, pain, sides, morning. 1. S. 308.

Head, pain, sides, right, morning. 1. S. 308. N.

Head, pain, sides, right. 1. S. 308.

Head, pain, sides. 1. S. 307.

Head, pain, sitting amel. 1. S. 290.

Head, pain, touch, agg, light touch agg. 1. S. 292. N.

Head, pain, waking on. 1. S. 276.

Head, pain, bursting. 1. S. 318.

Head, prickling. 1. S. 363.

Head, tingling, lying agg 1. S. 372. N.

Head, tingling, motion amel. 1. S. 372. N.

Head, tingling, Occiput. 1. S. 372.

Head, tingling, sitting agg. 1. S. 372. N.

Head, tingling, spots 1 S372 N

Head, tingling, standing agg. 1. S. 372. N.

Head, tingling. 1. S. 372.

EYE:

Eye, pain. 2. S. 391.

Eye, pain, burning. 1. S. 396.

Eye, tired sensation. 1. S. 412.

Eye, pain, right. 1. S. 392.

Eye, pain, morning, waking. 1. S. 392.

Eye, heaviness Lids. 1. S. 383.

Eye, closing the eyes, desire to. 1. S. 376.

Eye, closing the eyes, desire to, stinging pain on. 1. S. 376. N.

Eye, strain. 1. S. 410.

Eye, dryness. 1. S. 380.

Eye, swelling. 1. S. 411.

Eye, swelling, lids. 1. S. 411.

Eye, styes, canthi, inner. 1. S. 410.

Eye, pain, morning. 1. S. 392.

Eye, itching. 1. S. 387.

Eye, itching, morning. 1. S. 388.

Eye, itching, morning, waking on 1. S. 388. N

Eye, itching, evening. 1. S. 388.

VISION:

Vision, blurred. 1. S. 417.

Vision, blurred, accompanied by, nausea, turning head on. 1. S. 417. N.

Vision, blurred, afternoon. 1. S. 417.

Vision, blurred, turning head. 1. S. 417. N.

EAR:

Ear, contraction, sensation of. 1. S. 434.

Ear, itching. 1. S. 439.

Ear, itching, meatus. 1. S. 439.

Ear, itching, meatus, left. 1. S. 439.

Ear, itching, meatus, night. 1. S. 439.

Ear, pain. 1. S. 449.

Ear, pain, left. 1. S. 450.

NOSE:

Nose, burning sensation, as if on fire. 1. S. 471 N.

Nose, coryza. 1. S. 472.

Nose, coryza, morning. 1. S. 473.

Nose, discharge, crust, sensation of, septum on. 1. S. 478 N.

Nose, dryness, inside. 1. S. 482.

Nose, hayfever. 1. S. 486.

Nose, foreign body, sensation of a. 1. S. 486.

Nose, formication. 1. S. 486.

Nose, heaviness, sinuses. 1. S. 487.

Nose, movement, sensation of, insects moving inside. 1. S. 487 N.

Nose, itching. 1. S. 487.

Nose, itching, inside, left. 1. S. 488.

Nose, itching, rubs. 1. S. 487.

Nose, obstruction. 1. S. 488.

Nose, obstruction, alternating sides. 1. S. 488.

Nose, sneezing. 3. S. 498.

Nose, sneezing, morning. 2. S. 498.

Nose, sneezing, morning, waking, on. 1. S. 499.

Nose, sneezing, evening. 1. S. 499.

Nose, sneezing, sleep, during. 1. S. 500.

Nose, sneezing, sleep, during. 1. S. 500 N.

Nose, snuffles. 1. S. 500.

Nose, warm, inside. 1. S. 502 N.

Nose, warm. 1. S. 502.

Nose, vesicles, sensation of, nostrils around. 1. S. 502 N.

FACE:

Face, dryness, lips. 1. S. 513.

Face, numbness, lips. 1. S. 530.

Face, numbness, lips, upper. 1. S. 530.

Face, pain, lips. 1. S. 543.

Face, eruptions. 1. S. 514.

Face, eruptions, cheek. 1. S. 514.

Face, eruptions, cheek, left. 2. S. 514.

Face, eruptions, pimples. 1. S. 519.

Face, eruptions, pimples, painful to touch. 1. S. 519.

Face, eruptions, chin. 1. S. 514.

Face, eruptions, chin, painful to touch. 1. S. 514.

Face, eruptions, pimples, chin. 1. S. 519.

Face, eruptions, pustules. 1. S. 520.

Face, eruptions, pustules, cheeks. 2. S. 520.

Face, eruptions, pustules, chin. 1. S. 520.

Face, eruptions, vesicles, sensation of, nostrils around, compelled to scratch and rub. 1. S. 522 N.

Face, expression, confused. 1. S. 523.

Face, expression, dazed. 1. S. 523.

Face, expression, sedated. 1. S. 524 N.

Face, heat, flushes. 1. S. 526.

Face, heat, flushes, morning. 1. S. 526.

Face, heat, flushes, afternoon. 1. S. 526.

Face, heat, burning. 1. S. 526.

Face, sensitive. 1. S. 544.

MOUTH:

Mouth, dryness. 1. S. 566.

Mouth, eruptions, palate. 1. S. 569.

Mouth, itching. 1. S. 572

Mouth, itching, gums. 1. S. 572

Mouth, itching, palate. 1. S. 573

Mouth, numbness. 1. S. 575.

Mouth, numbness, tongue. 1. S. 575.

Mouth, taste, bad. 1. S. 593.

Mouth, taste, bad, menses during. 1. S. 594.

Mouth, taste, putrid. 1. S. 597.

Mouth, taste, putrid, menses during. 1. S. 597.

Mouth, taste, stale. 1. S. 599.

TEETH:

Teeth, biting, lip. 1. S. 603.

Teeth, clenching, teeth together, anger in. 1. S. 603.

THROAT:

Throat, dryness. 1. S. 624.

Throat, dryness, accompanied by, roughness. 1. S. 624.

Throat, dryness, drinking does not ameliorate. 1. S. 624.

Throat, pain. 2. S. 631.

Throat, pain, left. 1. S. 632.

Throat, pain, coughing on. 1. S. 632.

Throat, pain, drinking, ameliorates. 1. S. 632.

Throat, pain, drinks, cold, ameliorates. 1. S. 632.

Throat, pain, burning. 1. S. 634.

Throat, pain, burning, esophagus. 1. S. 635.

Throat, pain, cutting. 1. S. 636.

Throat, pain, scratching. 1. S. 637.

Throat, pain, sore, coughing on. 1. S. 638.

Throat, pain, stitching. 1. S. 638.

Throat, pain, stitching, coughing on. 1. S. 639.

Throat, roughness. 1. S. 640.

Throat, scratching. 2. S. 641.

Throat, scratching, evening. 1. S. 641.

Throat, scratching, morning. 1. S. 641.

STOMACH:

Stomach, heat. 2. S. 637.

Stomach, heat, eating ameliorates. 1. S. 637.

Stomach, acidity. 1. S. 653.

Stomach, appetite, diminished. 2. S. 653.

Stomach, appetite, diminished, daytime. 1. S. 653.

Stomach, appetite, diminished, noon. 1. S. 653.

Stomach, appetite, diminished, evening. 1. S. 653.

Stomach, appetite, diminished, eating, when time for. 1. S. 653.

Stomach, appetite, easy satiety. 2. S. 653.

Stomach, appetite, increased. 3. S. 654.

Stomach, appetite, increased, alternating with loss of appetite. 1. S.
654.

Stomach, appetite, increased, pain in stomach, with. 1. S. 655.

Stomach, appetite, increased, insatiable. 1. S. 655.

Stomach, appetite, ravenous. 2. S. 655.

Stomach, appetite, wanting. 2. S. 656.

Stomach, appetite, wanting, morning. 1. S. 656.

Stomach, heartburn. 1. S. 672.

Stomach, heartburn, nausea, with. 1. S. 672.

Stomach, heartburn, morning. 1. S. 672.

Stomach, heat, eating ameliorates. 1. S. 673.

Stomach, heaviness. 1. S. 673.

Stomach, heaviness, morning. 1. S. 673.

Stomach, heaviness, morning, waking on. 1. S. 673.

Stomach, heaviness, nausea, during. 1. S. 674.

Stomach, nausea. 2. S. 678.

Stomach, nausea, morning. 1. S. 678.

Stomach, nausea, morning, waking on. 1. S. 679.

Stomach, nausea, eye symptoms, with. 1. S. 681.

Stomach, nausea, inability to vomit. 1. S. 682.

Stomach, nausea, pain, during. 1. S. 683.

Stomach, nausea, pain during, abdomen, in. 1. S. 683.

Stomach, pain. 2. S. 685.

Stomach, pain, eating ameliorates. 1. S. 686.

Stomach, pain, burning. 2. S. 690.

Stomach, pain, burning, eating ameliorates. 1. S. 691.

Stomach, pain burning, extending to esophagus, up the. 1. S. 691.

Stomach, pain burning, extending to, upward. 1. S. 691.

Stomach, thirst. 2. S. 703.

Stomach, thirst, morning. 1. S. 703.

Stomach, thirst, unquenchable. 1. S. 705.

Stomach, thirst, unquenchable, walking after. 1. S. 705.

Stomach, thirstless. 2. S. 705.

ABDOMEN:

Abdomen, distension. 2. S. 721.

Abdomen, distension, afternoon. 1. S. 721.

Abdomen, distension, afternoon, eating, after. 1. S. 721.

Abdomen, distension, eating after. 1. S. 722.

Abdomen, distension, painful. 1. S. 722.

Abdomen, fullness, sensation of. 2. S. 726.

Abdomen, fullness, sensation of, afternoon. 1. S. 726.

Abdomen, fullness, sensation of, eating, after. 1. S. 727.

Abdomen, fullness, sensation of, night. 1. S. 727.

Abdomen, fullness, sensation of, lying, while. 1. S. 727.

Abdomen, heaviness. 1. S. 729

Abdomen, pain. 2. S. 733.

Abdomen, pain, evening. 1. S. 734.

Abdomen, pain, accompanied by, lumbar region, pain in. 1. S. 734.

Abdomen, pain, burning. 1. S. 749.

Abdomen, pain, cramping. 1. S. 751.

Abdomen, pain, cramping, evening. 1. S. 752.

Abdomen, pain, cramping, night. 1. S. 752.

Abdomen, pain, cramping, menses, before. 1. S. 753.

Abdomen, pain, cramping, motion, ameliorates. 1. S. 753.

Abdomen, pain, cramping, motion, on. 1. S. 753.

Abdomen, pain, cramping, sitting, ameliorates. 1. S. 754.

Abdomen, pain, cramping, walking, ameliorates. 1. S. 754.

RECTUM:

Rectum, constipation, insufficient. 1. S. 791.

Rectum, diarrhea. 1. S. 792.

Rectum, diarrhea, menses, during. 1. S. 798.

Rectum, fullness, stool, after. 1. S. 803.

Rectum, inactivity of rectum. 1. S. 806.

Rectum, inactivity of rectum, morning. 1. S. 806.

Rectum, urging, frequent. 1. S. 818.

STOOL:

Stool, thin. 1. S. 827.

Stool, watery. 1. S. 827.

BLADDER:

Bladder, urination, frequent. 1. S. 842.

URINE:

Urine, copious. 1. S. 872.

Urine, copious, drunk more than is. 1. S. 873.

FEMALE:

Female, itching , vulva. 1. S. 914.

Female, itching. 1. S. 913.

Female, pain, bearing down, menses during. 1. S. 939.

Female, pain, bearing down, uterus and region, menses during, sitting amel. 1.

S. 940. N.

Female, pain, bearing down, Uterus and region, menses during. 1. S. 940.

Menses, black, with clots. 1. S. 923.

Menses, black. 1. S. 923.

Menses, clotted, dark clots. 1. S. 923.

Menses, clotted. 1. S. 923.

Menses, copious, short duration, and of. 1. S. 925.

Menses, copious. 1. S. 924.

Menses, dark, with clots. 1. S. 925.

Menses, dark. 1. S. 925.

Menses, early, too, two weeks. 1. S. 925. N.

Menses, early, too. 1. S. 925.

Menses, hot. 2. S. 926.

Menses, irregular. 2. S. 926.

Menses, irregular, long and variable intervals. 1. S. 926.

Menses, late, too, scanty. 1. S. 927.

Menses, late, too, ten days. 1. S. 926.

Menses, late, too, two days. 1. S. 926.

Menses, late, too. 1. S. 926.

Menses, membranous. 1. S. 927.

Menses, pain constricting, contracting, uterus. 1. S. 941.

Menses, pain constricting, contracting. 1. S. 941.

Menses, pain cramping, uterus, double up, compelling her to. 1. S. 941.

Menses, pain cramping, uterus, massage amel. 1. S. 941. N.

Menses, pain cramping, uterus, menses during. 1. S. 941.

Menses, pain cramping, uterus. 1. S. 941.

Menses, pain twisting, uterus. 1. S. 947. N.

Menses, painfull. 2. S. 928.

Menses, painfull, chill with. 1. S. 928.

Menses, painfull, flow amel. 1. S. 928.

Menses, painfull, lying amel. 1. S. 928.

Menses, painfull, pressure amel. 1. S. 928. N.

Menses, protracted, eighteen days. 1. S. 929.

Menses, protracted. 1. S. 929.

Menses, ropy, tenacious, stringy. 1. S. 929.

Menses, scanty. 1. S. 929.

Menses, short, too. 1. S. 930.

Menses, stool, menses during , loose and unformed stool. 1. S. 930. N

RESPIRATION:

Respiration, difficult. 1. S. 973.

Respiration, difficult, bed, in. 1. S. 974.

Respiration, sleep, falling asleep, when. 1. S. 978.

COUGH:

Cough, dry. 1. S. 992.

Cough, hacking. 1. S. 996.

Cough, morning. 1. S. 985.

Cough, pain, back, dorsal region, right, coughing when. S. 1003 N.

Cough, pain, larynx, stabbing pain, coughing when. S. 1003 N.

CHEST:

Chest, pain, cutting. 1. S. 1060.

Chest, pain, pressure, amel. 1. S. 1048.

Chest, pain, heart, region of, pressure, amel. 1. S. 1050 N.

Chest, pain, sides, left, pressure, amel. 1. S. 1052.

Chest, pain, cutting, heart, region of. 1. S. 1062.

BACK:

Back, formication, cervical region, motion amel. 1. S. 1099. N.

Back, formication, cervical region, sitting agg. 1. S. 1099. N.

Back, formication, cervical region, spots 1. S. 1099. N.

Back, formication, cervical region, standing agg. 1. S. 1099. N.

Back, formication, cervical region. 1. S. 1098.

Back, formication, dorsal region, lying agg. 1. S. 1099. N.

Back, formication, dorsal region, motion amel. 1. S. 1099. N.

Back, formication, dorsal region, sitting agg. 1. S. 1099. N.

Back, formication, dorsal region, spots. 1. S. 1099. N.

Back, formication, dorsal region, standing agg 1 S1099 N

Back, formication, dorsal region. 1. S. 1099.

Back, formication, cervical region, lying agg. 1. S. 1099. N.

Back, itching, cervical region, afternoon. 1. S. 1101. N.

Back, itching, cervical region. 1. S. 1101.

Back, Itching. 1. S. 1101.

Back, pain. 3. S. 1103.

Back, pain, cervical region. 2. S. 1108.

Back, pain, cervical region, extending to, clavicles. 1. S. 1109.

Back, pain, cervical region, extending to, shoulders. 1. S. 1110.

Back, pain, cervical region, left. 1. S. 1108.

Back, pain, cervical region, rheumatic. 1. S. 1109.

Back, pain, cervical region, right. 1. S. 1108.

Back, pain, cervical region, sore. 1. S. 1109. N.

Back, pain, dorsal region, coughing. 1. S. 1110.

Back, pain, dorsal region, extending to, arms. 1. S. 1110.

Back, pain, dorsal region, scapulae, between, stitching. 1. S. 1113. N.

Back, pain, dorsal region, scapulae, between. 1. S. 1112.

Back, pain, dorsal region, scapulae, extending to, arm. 1. S. 1112.

Back, pain, dorsal region, scapulae, right, extending to, arm. 1. S. 1110.

Back, pain, dorsal region, scapulae, right, followed by left. 1. S. 1111.

Back, pain, dorsal region, scapulae, right. 1. S. 1110.

Back, pain, dorsal region, scapulae. 1. S. 1110.

Back, pain, dorsal region. 1. S. 1110.

Back, pain, dull, lumbar region, afternoon. 1. S. 1134. N.

Back, pain, dull, lumbar region, bending agg. 1. S. 1134. N.

Back, pain, dull, lumbar region, morning. 1. S. 1134. N.

Back, pain, dull, lumbar region, pressure agg. 1. S. 1134. N.

Back, pain, dull, lumbar region. 1. S. 1134.

Back, pain, dull. 1. S. 1134.

Back, pain, extending to, arms. 1. S. 1107.

Back, pain, lumbar region. 2. S. 1113.

Back, pain, lumbar region, afternoon. 1. S. 1114.

Back, pain, lumbar region, bending agg. 1. S. 1114. N.

Back, pain, lumbar region, dull. 1. S. 1114. N.

Back , pain, lumbar region, evening. 1. S. 1114.

Back , pain, lumbar region, morning. 1. S. 1113.

Back , pain, lumbar region, pressure agg. 1. S. 115. N.

Back , pain, lumbar region, pressure amel. 1. S. 1115.

Back , pain, lumbar region, right. 1. S. 1113.

Back , pain, lumbar region, rubbing amel. 1. S. 1115.

Back , pain, lumbar region, sitting , long after. 1. S. 1115.

Back , pain, lumbar region, touch agg. 1. S. 1116. N.

Back , pain, lumbar region, unbearable. 1. S. 1116. N.

Back , pain , pressure agg. 1. S. 1105 N.

Back , pain, pressure amel. 1. S. 1105.

Back , pain , right , extending to left. 1. S. 1103. N.

Back , pain, rubbing amel. 1. S. 1106.

Back , pain, sitting , long after. 1. S. 1106.

Back , pain, sleep during. 1. S. 1106.

Back , pain, sore, cervical region. 1. S. 1139.

Back , pain, sore. 1. S. 1138.

Back , pain, spine, evening. 1. S. 1120.

Back , pain, spine, stitching, accompanied by, epigastrium, aching pain in. 1. S.
1121. N.

Back , pain, spine, stitching. 1. S. 1121. N.

Back, pain, spine, turning agg. 1. S. 1121. N.

Back, pain, spine. 1. S. 1120.

Back, pain, spot. 1. S. 1106.

Back, pain, stitching, dorsal region, scapulae, between. 1. S. 1144.

Back, pain, stitching, dorsal region, scapulae, right. 1. S. 1144.

Back, pain, stitching, dorsal region, scapulae. 1. S. 1143.

Back, pain, stitching, dorsal region. 1. S. 1143.

Back, pain, stitching, spine, evening. 1. S. 1147.

Back, pain, stitching, spine, turning agg. 1. S. 1147. N.

Back, pain, stitching, spine. 1. S. 1147.

Back, pain, stitching. 1. S. 1142.

Back, pain, touch agg. 1. S. 1107.

Back, pain, unbearable. 1. S. 1107.

Back, prickling, cervical region. 1. S. 1150.

Back, stiffness, cervical region, headache during, extending to, eyes. 1. S. 1153

N.

Back, stiffness, cervical region, headache during. 1. S. 1153.

Back, stiffness, cervical region. 1. S. 1153.

Back, stiffness. 1. S. 1152.

EXTREMITIES:

Extremities, cramps. 2. S. 1177.

Extremities, cramps, right. 2. S. 1178.

Extremities, cramps, lower limbs. 2. S. 1179.

Extremities, cramps, lower limbs, right. 1. S. 1179.

Extremities, cramps, lower limbs, walking, while. 1. S. 1179.

Extremities, cramps, lower limbs, extending to, leg. 1. S. 1179.

Extremities, cramps, leg. 1. S. 1180.

Extremities, cramps, leg, exertion, on. 1. S. 1180.

Extremities, cramps, thigh. 1. S. 1180.

Extremities, cramps, thigh, right. 1. S. 1180.

Extremities, cramps, thigh, inner side. 1. S. 1180.

Extremities, cramps, leg, calf. 1. S. 1181.

Extremities, cramps, leg, calf, right. 1. S. 1181.

Extremities, cramps, leg, calf, dancing. 1. S. 1181.

Extremities, cramps, leg, calf, exertion, after. 1. S. 1181.

Extremities, cramps, ankle. 1. S. 1182.

Extremities, cramps, ankle, extending to, calf. 1. S. 1182.

Extremities, cramps, foot. 1. S. 1182.

Extremities, eruptions. 2. S. 1191.

Extremities, eruptions, blisters. 1. S. 1191.

Extremities, eruptions, rash. 1. S. 1192.

Extremities, eruptions, elevations. 1. S. 1191.

Extremities, eruptions, itching. 1. S. 1191.

Extremities, eruptions, red. 1. S. 1192.

Extremities, eruptions, upper limbs. 2. S. 1192.

Extremities, eruptions, upper limbs, elevations. 1. S. 1192.

Extremities, eruptions, upper limbs, rash. 1. S. 1192.

Extremities, eruptions, upper limbs, itching. 1. S. 1193.

Extremities, eruptions, upper limbs, rash. 1. S. 1193.

Extremities, eruptions, upper limbs red. 1. S. 1193.

Extremities, eruptions, upper arm. 1. S. 1194.

Extremities, eruptions, upper arm, itching. 1. S. 1194.

Extremities, eruptions, upper arm, rash. 1. S. 1195.

Extremities, eruptions, hand. 1. S. 1196.

Extremities, eruptions, hand, rash. 1. S. 1197.

Extremities, eruptions, hand, between index finger and thumb. 1. S.
1199.

Extremities, eruptions, foot. 1. S. 1204.

Extremities, eruptions, foot, back of. 1. S. 1205.

Extremities, heaviness. 1. S. 1215.

Extremities, heaviness, lower limbs. 1. S. 1216.

Extremities, heaviness, legs. 1. S. 1218.

Extremities, itching. 2. S. 1221.

Extremities, itching, evening. 1. S. 1221.

Extremities, itching, afternoon. 1. S. 1221.

Extremities, itching, left. 1. S. 1221.

Extremities, itching, upper limbs. 1. S. 1221.

Extremities, itching, upper arms. 1. S. 1222.

Extremities, itching, lower limbs. 1. S. 1225.

Extremities, itching, lower limbs, afternoon. 1. S. 1225.

Extremities, itching, lower limbs, evening. 1. S. 1225.

Extremities, itching, upper limbs, afternoon. 1. S. 1225.

Extremities, pain. 3. S. 1244.

Extremities, pain, afternoon. 1. S. 1244.

Extremities, pain, pressure aggravates. 1. S. 1245.

Extremities, pain, joints. 2. S. 1247.

Extremities, pain, joints, afternoon. 1. S. 1248.

Extremities, pain, upper limbs. 2. S. 1249.

Extremities, pain, upper limbs, left. 1. S. 1249.

Extremities, pain, upper limbs, right. 1. S. 1249.

Extremities, pain, upper limbs, extending to, downward. 1. S.
1250.

Extremities, pain, upper limbs, pressure aggravates. 1. S. 1250.

Extremities, pain, shoulder. 1. S. 1251.

Extremities, pain, shoulder, right. 1. S. 1252.

Extremities, pain, shoulder, extending to, arm. 1. S. 1253.

Extremities, pain, shoulder, pressure ameliorates. 1. S. 1253.

Extremities, pain, upper arm. 1. S. 1253.

Extremities, pain, upper arm, bone. 1. S. 1254.

Extremities, pain, elbow. 1. S. 1255.

Extremities, pain, elbow, left. 1. S. 1255.

Extremities, pain, elbow. 1. S. 1255.

Extremities, pain, elbow, left. 1. S. 1255.

Extremities, pain, elbow, bend of, stretching arm, on. 1. S. 1256.

Extremities, pain, hand. 1. S. 1257.

Extremities, pain, hand, right. 1. S. 1257.

Extremities, pain, lower limbs. 2. S. 1261.

Extremities, pain, lower limbs, afternoon. 1. S. 1261.

Extremities, pain, hip. 1. S. 1265.

Extremities, pain, hip, right. 1. S. 1265.

Extremities, pain, hip, lying, after. 1. S. 1266.

Extremities, pain, hip, standing. 1. S. 1266.

Extremities, pain, thigh. 1. S. 1267.

Extremities, pain, knee. 1. S. 1268.

Extremities, pain, knee, right. 1. S. 1269.

Extremities, pain, knee, afternoon. 1. S. 1269.

Extremities, pain, ankle. 1. S. 1273.

Extremities, pain, ankle, left. 1. S. 1273.

Extremities, pain, toes. 1. S. 1276.

Extremities, pain, toes, right. 1. S. 1276.

Extremities, pain, toes, evening. 1. S. 1276.

Extremities, pain, toes, first. 1. S. 1276.

Extremities, pain, toes, first, right. 1. S. 1276.

Extremities, pain, toes, first, evening. 1. S. 1276.

Extremities, pain, aching. 1. S. 1277.

Extremities, pain, aching, elbow. 1. S. 1278.

Extremities, pain, cramping. 1. S. 1290.

Extremities, pain, cramping, lower limbs. 1. S. 1290.

Extremities, pain, cramping, leg. 1. S. 1290.

Extremities, pain, cramping, calf. 1. S. 1290.

Extremities, pain, cramping, foot, motion, on. 1. S. 1290.

Extremities, pain, shooting. 1. S. 1314.

Extremities, pain, shooting, shoulder. 1. S. 1314.

Extremities, pain, shooting, shoulder, right. 1. S. 1314.

Extremities, pain ,sore. 1. S. 1316.

Extremities, pain, sore, exertion after. 1. S. 1316.

Extremities, pain ,sore, joints. 1. S. 1317.

Extremities, pain ,sore, upper limbs. 1. S. 1317.

Extremities, pain, sore, overexertion after. 1. S. 1317.

Extremities, pain ,sore, shoulder. 1. S. 1318.

Extremities, pain, sore, lower limbs. 1. S. 1320.

Extremities, pain, sore, thigh. 1. S. 1321.

Extremities, stiffness. 2. S. 1373.

Extremities, stiffness, right. 1. S. 1373

Extremities, stiffness, morning. 1. S. 1373

Extremities, stiffness, sitting, after. 1. S. 1374.

Extremities, stiffness, joints. 1. S. 1374.

Extremities, stiffness, joints, morning. 1. S. 1374.

Extremities, stiffness, joints, painful. 1. S. 1374.

Extremities, stiffness, lower limbs. 2. S. 1375.

Extremities, stiffness, lower limbs, painful. 1. S. 1375.

Extremities, stiffness, lower limbs, right. 1. S. 1376.

Extremities, stiffness, lower limbs, morning. 1. S. 1376.

Extremities, stiffness, hip, morning. 1. S. 1376.

Extremities, stiffness, lower limbs, sitting, after. 1. S. 1376.

Extremities, stiffness, hip. 1. S. 1376.

Extremities, stiffness, thigh. 1. S. 1376.

Extremities, stiffness, leg. 1. S. 1377.

Extremities, stiffness, calf. 1. S. 1377.

Extremities, swelling. 1. S. 1378.

Extremities, swelling, joints. 1. S. 1378.

Extremities, swelling, ankle. 1. S. 1382.

Extremities, swelling, ankle, evening. 1. S. 1382.

Extremities, swelling, ankle, malleoli, around. 1. S. 1382.

Extremities, tension. 1. S. 1383.

Extremities, tension, shoulder. 1. S. 1384.

Extremities, tingling. 1. S. 1388.

Extremities, tingling, upper limbs. 1. S. 1388.

SLEEP:

Sleep, bad. 1. S. 1411.

Sleep, bad, after sleepiness in evening. 1. S. 1411.

Sleep, deep. 2. S. 1412.

Sleep, deep, morning. 1. S. 1412.

Sleep, disturbed. 1. S. 1413.

Sleep, disturbed, dreams, by. 1. S. 1413.

Sleep, disturbed, nightmare, by. 1. S. 1413.

Sleep, disturbed, pain, by. 2. S. 1414.

Sleep, disturbed, heat, by. 2. S. 1414.

Sleep, suffocation, by. 1. S. 1414.

Sleep, prolonged. 1. S. 1422.

Sleep, exhausting. 1. S. 1416.

Sleep, exhausting, deep with dreams. 1. S. 1416.

Sleep, falling, difficult. 1. S. 1417.

Sleep, falling, early. 1. S. 1417.

Sleep, interrupted. 1. S. 1418.

Sleep, interrupted, restlessness, by. 2. S. 1419.

Sleep, interrupted, pain, from. 2. S. 1419.

Sleep, interrupted, heat, sensation of. 2. S. 1419.

Sleep, need of sleep, great. 1. S. 1419.

Sleep, restless, bed, driving out of bed from heat. 1. S. 1423.

Sleep, restless, from bodily restlessness. 1. S. 1423.

Sleep, restlessness, dreams, from. 1. S. 1423.

Sleep, restlessness, with pain. 1. S. 1423.

Sleep, sleepiness. 1. S. 1424.

Sleep, sleepiness, waking, on. 1. S. 1426.

Sleep, sleepiness, evening. 1. S. 1427.

Sleep, sleepiness – 20h. 1. S. 1427.

Sleep, sleeplessness. 2. S. 1432.

Sleep, sleeplessness, accompanied by sleepiness, daytime. 1. S. 1435.

Sleep, sleeplessness, bed, feels too hot. 1. S. 1436.

Sleep, sleeplessness, congestion from. 1. S. 1436.

Sleep, sleeplessness, coryza, from. 1. S. 1437.

Sleep, sleeplessness, cough, from. 1. S. 1437.

Sleep, sleeplessness, heat, during. 1. S. 1438.

Sleep, sleeplessness, itching, from. 1. S. 1438.

Sleep, sleeplessness, pains, from. 2. S. 1439.

Sleep, sleeplessness, pains from, back. 2. S. 1439.

Sleep, sleeplessness, pains from, body sore, whole. 1. S. 1439.

Sleep, sleeplessness, respiration, with difficult. 1. S. 1440.

Sleep, sleeplessness, restlessness, from. 1. S. 1440.

Sleep, sleeplessness, with urging to urinate. 1. S. 1442.

Sleep, unrefreshing. 1. S. 1443.

Sleep, unrefreshing, rising indisposed to. 1. S. 1443.

Sleep, waking, dreams, by. 1. S. 1444

Sleep, waking, early, too. 1. S. 1445

Sleep, waking, late, too. 1. S. 1446

DREAMS:

Dreams, frightful. 1. S. 1464

Dreams, frightful, waking him. 1. S. 1464

Dreams, rousing, the patient. 1. S. 1472.

Dreams, absurd. 1. S. 1453.

Dreams, animals. 1. S. 1454.

Dreams, cars. 1. S. 1457.

Dreams, disconnected. 1. S. 1460.

Dreams, confused. 1. S. 1458.

Dreams, danger. 1. S. 1459.

Dreams, dead, of the. 2. S. 1459.

Dreams, dead, relatives. 1. S. 1459.

Dreams, dead, woman coming back to life. 1. S. 1459.

Dreams, dancing. 1. S. 1459.

Dreams, people, crowds. 1. S. 1470.

Dreams, exertion, of physical. 1. S. 1462.

Dreams, exciting. 1. S. 1462.

Dreams, many. 2. S. 1467.

Dreams, lost, cannot find way home. 1. S. 1467. N.

Dreams, new scenes, of. 1. S. 1469.

Dreams, nightmares. 1. S. 1469.
Dreams, pursued, being. 2. S. 1471.
Dreams, family, own. 1. S. 1463.
Dreams, remembered. 1. S. 1471.
Dreams, restless. 1. S. 1471.
Dreams, seeing again an old schoolmate. 1. S. 1472.
Dreams, sick people. 1. S. 1473.
Dreams, strange. 1. S. 1474.
Dreams, teeth, of. 1. S. 1474.
Dreams, vivid. 1. S. 1476.
Dreams, youth, time of. 1. S. 1477.

PERSPIRATION:

Perspiration, evening. 1. S. 1512.
Perspiration, night. 1. S. 1512.
Perspiration, night, sleep, during. 1. S. 1512.
Perspiration, bed, in. 1. S. 1513.
Perspiration, exertion, during, slight. 2. S. 1515.
Perspiration, odour, absent. 1. S. 1516. N.
Perspiration, profuse. 2. S. 1517.
Perspiration, profuse, night. 1. S. 1518.
Perspiration, sleep, during. 1. S. 1518.
Perspiration, sleep, during. 1. S. 1519.

Perspiration, sticky. 1. S. 1519.

Perspiration, symptoms, agg, during perspiration. 1. S. 1520.

SKIN:

Skin, anesthesia, sunburn, after. 1. S. 1521.

Skin, dry. 1. S. 1526

Skin, eruptions, blisters. 1. S. 1527.

Skin, eruptions, desquamating. 1. S. 1529.

Skin, eruptions, dry. 1. S. 1530.

Skin, eruptions, eczema. 1. S. 1530.

Skin, eruptions, itching. 3. S. 1533.

Skin, eruptions, pimples. 1. S. 1533.

Skin, eruptions, pimples, painful. 1. S. 1534.

Skin, eruptions, pustules. 1. S. 1534.

Skin, eruptions, pustules, painful. 1. S. 1534.

Skin, eruptions, rash. 1. S. 1535.

Skin, eruptions, rash, itching. 2. S. 1535.

Skin, eruptions, rash, patches. 1. S. 1535.

Skin, eruptions, red. 1. S. 1535.

Skin, eruptions, scaly. 1. S. 1536.

Skin, gooseflesh. 1. S. 1542.

Skin, hair, end, stands on. 1. S. 1543.

Skin, itching. 3. S. 1544.

Skin, itching, night. 1. S. 1544.

Skin, prickling. 2. S. 1548.

Skin, itching, must scratch. 2. S. 1546.

Skin, itching, voluptuous. 2. S. 1546.

Skin, itching, violent. 2. S. 1546.

Skin, prickling, in spots. 1. S. 1548.

Skin, prickling, better movement 1. S. 1548. N.

GENERALS:

Generals, morning. 2. S. 1557.

Generals, evening, ameliorates. 1. S. 1559.

Generals, activity, increased. 2. S. 1562.

Generals, air, indoor air, aggravates. 1. S. 1562

Generals, air, open air, amel. 1. S. 1563.

Generals, air, open air, desire for. 1. S. 1563

Generals, change, position, desire for. 1. S. 1572.

Generals, cold, hot and cold. 1. S. 1577.

Generals, pain, cramping, muscles. 1. S. 1589.

Generals, eating, after amel. 1. S. 1593.

Generals, exertion, amel. 2. S. 1595.

Generals, food and drink, chicken, desire for. 1. S. 1605.

Generals, food and drink, coca cola, desire for. 1. S. 1605. N.

Generals, food and drink, cold drink, cold water, desire. 1. S. 1606.

Generals, food and drink, food, aversion to. 1. S. 1608.

Generals, food and drink, fried food, desire. 1. S. 1609.

Generals, food and drink, refreshing things, desire. 2. S. 1613.

Generals, food and drink, soda pop drinks, desire. 1. S. 1614.

Generals, food and drink, spices, desire. 1. S. 1615.

Generals, food and drink, sweets, aversion, to. 1. S. 1615.

Generals, heat, flushes of. 2. S. 1620.

Generals, heat, flushes of, air, amel, in open. 1. S. 1620.

Generals, heat, flushes of, bed, in. 1. S. 1620.

Generals, heat, flushes of, sleep, during. 1. S. 1621.

Generals, hunger, agg. 1. S. 1624.

Generals, inflammation, glands, of. 1. S. 1626.

Generals, inflammation, sinuses of. 1. S. 1627.

Generals, influenza. 1. S. 1627.

Generals, jerking, sleep, during. 1. S. 1630.

Generals, lassitude. 1. S. 1630.

Generals, lassitude, morning. 1. S. 1630.

Generals, lassitude, morning, in bed. 1. S. 1631.

Generals, lassitude, afternoon. 1. S. 1631.

Generals, lassitude, waking, on. 2. S. 1631.

Generals, lassitude, weather, wet. 1. S. 1631.

Generals, orgasm, of blood. 1. S. 1644.

Generals, orgasm of blood, at night. 1. S. 1645.

Generals, pains, glands of. 1. S. 1647.

Generals, pain, tingling. 1. S. 1660.

Generals, perspiration, during, agg. 1. S. 1664.

Generals, prickling, externally. 1. S. 1665.

Generals, restlessness. 1. S. 1674.

Generals, room, full of people agg. 1. S. 1675.

Generals, weariness. 1. S. 1711.

4.3.1 RUBRICS OF CHARACTERISTIC SYMPTOMS

Rubrics included here are those of second and third degrees only, for ease of reference.

MIND

Mind, company, aversion to. 3. S. 33.

Mind, company, aversion to, desire for solitude. 2. S. 34.

Mind, delusions, division between himself and others. 2. S. 60.

Mind, forsaken feeling, isolation, sensation of. 2. S. 120.

Mind, mood, changeable. 2. S. 167.

Mind, sadness. 2. S. 187.

Mind, sadness, aversion to company, desire for solitude. 2. S. 190.

Mind, weeping. 3. S. 228.

HEAD:

Head, congestion. 2. S. 250.

Head, fullness. 2. S. 259.

Head, itching of scalp. 3. S. 270.

Head, pain. 3. S. 274.

Head , pain , pressure external , amel ,hard amel ,hitting head hard amel. 2. S.
288. N.

EYE:

Eye, pain. 2. S. 391.

NOSE:

Nose, sneezing. 3. S. 498.

Nose, sneezing, morning. 2. S. 498.

THROAT:

Throat, pain. 2. S. 631.

Throat, scratching. 2. S. 641.

STOMACH:

Stomach, heat. 2. S. 637.

Stomach, appetite, diminished. 2. S. 653.

Stomach, appetite, easy satiety. 2. S. 653.

Stomach, appetite, increased. 3. S. 654.

Stomach, appetite, ravenous. 2. S. 655.

Stomach, appetite, wanting. 2. S. 656.

Stomach, nausea. 2. S. 678.

Stomach, pain. 2. S. 685.

Stomach, pain, burning. 2. S. 690.

Stomach, thirst. 2. S. 703.

Stomach, thirstless. 2. S. 705.

ABDOMEN:

Abdomen, distension. 2. S. 721.

Abdomen, fullness, sensation of. 2. S. 726.

Abdomen, pain. 2. S. 733.

FEMALE:

Menses, hot. 2. S. 926.

Menses, irregular. 2. S. 926.

Menses, painfull. 2. S. 928.

BACK:

Back, pain. 3. S. 1103.

Back, pain, cervical region. 2. S. 1108.

Back , pain , lumbar region. 2. S. 1113.

EXTREMITIES:

Extremities, cramps. 2. S. 1177.

Extremities, cramps, right. 2. S. 1178.

Extremities, cramps, lower limbs. 2. S. 1179.

Extremities, eruptions. 2. S. 1191.

Extremities, eruptions, upper limbs. 2. S. 1192.

Extremities, itching. 2. S. 1221.

Extremities, pain. 3. S. 1244.

Extremities, pain, joints. 2. S. 1247.

Extremities, pain, upper limbs. 2. S. 1249.

Extremities, pain, lower limbs. 2. S. 1261.

Extremities, stiffness. 2. S. 1373.

Extremities, stiffness, lower limbs. 2. S. 1375.

SLEEP:

Sleep, deep. 2. S. 1412.

Sleep, disturbed, pain, by. 2. S. 1414.

Sleep, disturbed, heat, by. 2. S. 1414.

Sleep, interrupted, restlessness, by. 2. S. 1419.

Sleep, interrupted, pain, from. 2. S. 1419.

Sleep, interrupted, heat, sensation of. 2. S. 1419.

Sleep, sleeplessness. 2. S. 1432.

Sleep, sleeplessness, accompanied by sleepiness, daytime. 1. S. 1435

Sleep, sleeplessness, pains, from. 2. S. 1439

Sleep, sleeplessness, pains from, back. 2. S. 1439

PERSPIRATION:

Perspiration, exertion, during, slight. 2. S. 1515.

Perspiration, profuse. 2. S. 1517.

SKIN:

Skin, eruptions, itching. 3. S. 1533.

Skin, eruptions, rash, itching. 2. S. 1535.

Skin, itching. 3. S. 1544.

Skin, prickling. 2. S. 1548.

Skin, itching, must scratch. 2. S. 1546.

Skin, itching, voluptuous. 2. S. 1546.

Skin, itching, violent. 2. S. 1546.

GENERALS:

Generals, morning. 2. S. 1557.

Generals, activity, increased. 2. S. 1562.

Generals, exertion, amel. 2. S. 1595.

Generals, food and drink, refreshing things, desire. 2. S. 1613.

Generals, heat, flushes of. 2. S. 1620.

Generals, lassitude, waking, on. 2. S. 1631.

4.4 The Abbreviation of the Remedy

It is suggested that the abbreviation *Suth-f* be used, in accordance with the binary system described in Synthesis ed.7 (1997).

As there are different species of Sutherlandia (e.g. Sutherlandia tomentosa and Sutherlandia microphylla) they could also be proved in the future and be given similar abbreviations (i.e. *Suth-t* and *Suth-m* respectively).

CHAPTER FIVE

GENERAL DISCUSSION

Firstly, it was hypothesized that Sutherlandia frutescens 30CH would produce clearly observable signs and symptoms in healthy provers. The second hypothesis was that the proving of Sutherlandia frutescens would produce symptoms that would correlate to the doctrine of signatures.

A significant number of clear symptoms arose from the proving. 784 symptoms were included in the Materia Medica and, of these, 109 were in the mind, 136 in the extremities, 82 in the back, 41 in the female system, 41 in the stomach and 44 were general symptoms. These were the areas quantitatively most affected by Sutherlandia frutescens 30CH. Appendix E illustrates this and other information graphically.

When the totality of symptoms was clear it was possible to analyze it in the light of a doctrine of signatures approach. Many symptoms were seen to correlate with this analysis of the plant.

5.1.1 THE SYMPTOMS

As an overview, Sutherlandia frutescens appears to have had a profound effect on the mind, skin, female urogenital-, musculoskeletal-, and digestive systems.

A summary of the main effects on each area follows:

MIND

The mind was one of the areas most influenced by this proving, with 109 rubrics pertaining to this section. A core mental theme produced in the proving was that of isolation. Provers felt alone in the world, had delusions of being an outcast and of a division between themselves and the world, they missed absent people and had vivid dreams of being lost, and reunited with people. Despite this sense of isolation they were averse to company and desired solitude. They were averse to conversation and did not want to go out. This sense of isolation links with their sense of being dissociated from their environment. The provers had a delusion that familiar things felt strange and experienced homesickness and great relief to be home.

The general mood of provers was profoundly affected, some provers were exceptionally happy whilst some experienced great sadness and much weeping. Provers experienced mental dullness, found concentration difficult, had vague thoughts and felt spaced out and drugged.

Repeatedly the provers mentioned feeling much better for any exertion or occupation.

HEAD

This proving produced many (58) symptoms in the head. Many of the provers experienced headaches. The modalities of these were quite different but the

remedy has a definite action on the head. Provers felt as though their heads were heavy and full, and had sensations of pressure and weight on their brains. Provers also experienced itching of their heads, correlating with the general itching produced by the proving.

EYES

Itching of the eyes was something that occurred frequently in the proving. Provers noted their eyes were often burning and painful. Many provers had a heavy sensation and swelling of the eyes.

NOSE

Many provers found they were sneezing a great deal whilst participating in the proving. Coryza was quite a strong symptom. Other provers experienced congestion of the nose and some had associated sinus headaches. Once again burning was experienced in the nose, as was the sensation of heaviness.

FACE

The skin of the face was affected in much the same manner as the rest of the skin and had eruptions and itching. The provers experienced flushes of, and great sensitivity to heat. Provers felt their expressions were altered, they reported appearing dazed, confused and sedated.

MOUTH

The general itching present throughout the rest of the proving was experienced in the mouths of provers whose palates and gums itched during the proving. A few provers noticed strange tastes in their mouths.

THROAT

Throat pain was a very common symptom experienced during this proving. The description of the nature of the pain varied from prover to prover and included cutting, scratching and burning. Dryness of the throat was also quite common.

STOMACH

The digestive system was one of the systems most influenced in the proving, with 42 rubrics pertaining to the stomach alone. Most provers' appetites were altered during the proving. There were more provers who experienced increased appetites than there were with a decrease in appetite but both were quite strong. Thirst was similarly affected, with both an increase and decrease in the thirst of provers, although not to such a great extent as the appetite was.

Pain and a burning sensation of the stomach were both marked and experienced by several provers. Various provers felt the sensation of heaviness in their stomachs. Nausea was a symptom that occurred in a few provers.

ABDOMEN

Abdominal distension was quite marked in several provers; they felt full and bloated after taking the remedy. Provers felt heaviness of the abdominal region.

FEMALE

The female reproductive system was profoundly affected in this proving. The 41 rubrics pertaining to this section is impressive, considering just over half the provers were females. The menstrual cycle was often interfered with and became irregular whilst participating in the proving. The nature of the menses was also altered and provers experienced clotting and heat of the menses, as well as dysmenorrhea.

BACK

The back was intensely affected, having 82 rubrics belonging to this section. Back pain was a frequently produced symptom. The pain was experienced in many different areas of the back and the modalities of the pain varied but general back pain was a symptom that was strongly experienced. Stiffness of the back was also quite a widespread symptom. Formication, prickling, and itching were also experienced.

EXTREMITIES

The 136 rubrics produced in this section indicate that the musculoskeletal system was one of the systems most affected by *Sutherlandia frutescens*; provers experienced a vast amount of symptoms in their extremities. Pain of many of the muscles and joints was a regularly reported symptom. The sensation of heaviness of the extremities was also noted. Itching and eruptions of the skin of the extremities were frequently experienced.

SLEEP

This proving resulted in many sleep-related symptoms. Some provers had great difficulty falling asleep, for various reasons including: restlessness, itching and being too hot. Some experienced disturbed sleep whilst others slept deeply. Some provers' sleep was interrupted and others had prolonged, exhausting sleep.

DREAMS

Several provers had a number of vivid dreams throughout the proving. There was a distinct theme of danger and fear present in many of these dreams. The sense of isolation and being lost was also experienced in their dreams. Several provers had dreams of being reunited with people such as: the dead, family and old schoolmates. Many dreams were of being confused and disconnected.

SKIN

The remedy appears to have a great affinity for the skin. Numerous provers developed an itch, a rash, or a combination of both after taking Sutherlandia frutescens. The site varied but appeared to affect most parts of the body. Some provers' skin became drier after taking the remedy. The skin became sensitive to the sun and was often more burnt than the provers had anticipated.

GENERALS

There were several sun-related symptoms during the proving. Some people got headaches from the sun, others got very sun burnt but there was definitely a general sensitivity to the sun.

Many of the provers were very sensitive the heat. There were many accounts of feeling exceptionally hot and being very heat sensitive throughout the proving. The sensation of burning was felt by many provers and in many locations; they experienced burning in their eyes, nose, stomach, throat and skin. Provers felt flushes of heat in their faces as well as their bodies in general.

Another significant theme in this proving was that of heaviness. Heaviness was experienced in the head, eyes, nose, stomach, abdomen, and legs. An additional example is the bearing down-sensation felt by some female provers. Itching was another huge theme encountered throughout this proving, it occurred in the eye, ear, head, mouth, female genitalia, back and extremities. This itching

was often very severe and caused some provers to scratch until raw and others to lose sleep.

Provers repeatedly mentioned feeling much better after exertion. Increased activity was noted and they preferred to be busy and occupied. Restlessness was also noted and was often marked enough to interfere with falling asleep. Some provers claimed to have more energy whilst participating, yet others felt as though they had been drugged. The latter provers felt confused and dull, their vision was blurred, they had dazed, confused and sedated expressions, felt sleepy, and their sleep was prolonged and exhausted.

Cramping was regularly reported; provers often experienced it both in the abdomen and extremities.

Weight gain also occurred quite often in the provers.

5.1.2 OTHER CONSIDERATIONS

As with Wright's research (1999:111) it was noted as a generalization, that the individuals who were more thoroughly acquainted with the principles of homoeopathy and in particular with the quality and detail of symptoms which were required by a homoeopath, made better provers. It is suggested that, in future, only highly trained and self-aware individuals be used as provers and,

preferably, a group of suitable and willing people should be formed which proving supervisors can draw upon for provings. This would help ensure high quality provings that yield reliable information.

Although difficult it is recommended that it be made possible to conduct treble-blind research - as introduced by Raeside (1972:203) - at Durban Institute of Technology in the future. It would be quite a task but would definitely benefit provings by eliminating any bias introduced by the researchers.

5.2 DISCUSSION IN LIGHT OF DOCTRINE OF SIGNATURES

MIND

A major mental theme produced in the proving was that of isolation. Provers felt alone in the world, had delusions of being an outcast and of a division between themselves and the world, they missed absent people and had vivid dreams of being separate and lost. The leaves of *Sutherlandia frutescens* are multi-foliate (Moshe 1998:16), meaning that they consist of many separate leaflets, and are thus isolated from each other; this is a physical characteristic linked to this theme of the proving.

This sense of isolation links with their sense of being dissociated from their environment. Provers had delusions that familiar things felt strange, experienced homesickness and a great relief on going home. This could be due to the fact that *Sutherlandia frutescens* is able to grow anywhere whereas the other species

of Sutherlandia are limited to either the coast or inland (this particular species is very adaptable and copes in both environments) as a result the plant does not belong to a specific region. This could have resulted in a feeling of being dissociated and of not belonging in a particular place being carried over into the proving.

Sutherlandia taxa have a very low genetic differentiation, this means they are very difficult to tell apart, so they are all very similar. This great similarity shared between the plants could be responsible for influencing the provers' sense of belonging and could be related to the feelings of isolation and separation that occurred throughout the proving.

Sutherlandia frutescens is largely made up of roots, from an anthroposophical perspective, this implies a great effect on of the minds of the provers. This effect was observed in the proving as 109 mental rubrics were produced. The extensive root system consists of many separate adventitious roots, which connects with the sense of isolation, and separation that arose from the provers.

The general mood of provers was often altered. Some provers were very happy and felt extremely positive. The colour red is commonly associated with happiness and vitality thus the flowers of the plant could represent this positive mood change. Other provers felt very sad and weepy. The manner in which the seed-heads droop off the plant could, in turn symbolize this opposing mood.

HEAD

As mentioned before, according to anthroposophical medicine the large ratio between the roots and the rest of the plant means a plant will have a great effect on the head of provers. The remedy did affect the head greatly, producing 58 rubrics in this region. Many provers complained of headaches whilst on the proving.

Some provers' heads felt full and heavy and as though there was a weight or pressure on their brain. This phenomenon can be seen to correlate with the distended appearance of the seed heads of Sutherlandia frutescens and the manner in which they hang off the plant.

Great itching of the head was experienced, fitting in with the generalized itching produced during this proving.

EYES

Many provers had eye complaints. The ovoid shape of both the leaves and pods is the same as that of eyes, hence it make sense that the eyes would be effected. The provers' complaints included burning, painful, heavy and itching eyes. The burning of the eyes correlates with another physical feature of Sutherlandia frutescens, namely the red colour of the flowers. The itch correlates with the hairiness of the leaves; the leaves are covered in many fine hairs, which

could be seen to be the cause of the itching in the eyes. The heaviness of the eyes relates once again to the drooping of the seed heads off the plant.

NOSE

The distension and drooping nature of the seed heads are characteristics of Sutherlandia frutescens that had many correlating symptoms in the provers; they are therefore often mentioned in this doctrine of signatures analysis. Another proving symptom linked to this distension and drooping is the congestion of the nose, which many provers experienced. They felt "stopped up", "heavy", "congested" and "blocked".

The burning sensation a few provers experienced in the nose correlates with the red colour of the flowers of Sutherlandia frutescens. Many provers found that they sneezed frequently whilst participating in the proving. Sneezing is caused due to irritation of the fine hairs inside the nasal passages, which has a similar appearance to the hairy leaves of the shrub.

FACE

Some provers experienced flushes of heat in their faces, this may be as a result of the colour of the flowers, or due to or the general sensitivity to heat of both Sutherlandia frutescens and the provers.

The skin of the face was affected in much the same manner as the skin of the rest of the body with itching and eruptions, which is mentioned under the skin heading.

MOUTH

Provers developed strange tastes in their mouths; this can be seen to correlate with the bitterness of the leaves. As with the rest of the body itching was experienced in the mouth, provers had itchy palates and gums.

THROAT

The keel-shape of the flowers of Sutherlandia frutescens indicates that there would be a strong effect on the throats of provers. The burning sensation experienced in the rest of the body were also found in the throat, this correlates with the red colour of the flowers.

STOMACH

Many appetite-related symptoms were produced by the proving, this proving symptom can be linked to a physical feature of Sutherlandia frutescens, namely the bitterness of its leaves. This correlates with the bitterness of the leaves of Sutherlandia frutescens. A very bitter powder can be ground from the leaves and branches of the shrub.¹¹ The bitterness of bile correlates to that of the leaves. This likens the leaves to bile, which aids in digestion, and thus explains the digestion-related symptoms induced (ranging from great hunger to indigestion to

lack of appetite). In the past bitterness was thought to be indicative of the potency of the medicine (Moshe 1998:60).

Thirst was definitely influenced by the proving. Many provers were intensely thirsty whilst some found they were less thirsty during the proving. This is interesting as Sutherlandia frutescens is quite particular about water and grows best in dryish soil (Gericke, et al. 1997:246).

The burning and sensations of heat experienced in provers' stomachs during the proving is attributable to the bright red colour of the flowers.

Some provers experienced a heavy sensation in their stomachs; this can be related to the hanging nature of the seed-heads. Whilst the sensation of heaviness and easy satiety was experienced by some, other provers felt they couldn't eat enough. These symptoms relate to the "elastic" nature of the stomach which would be influenced by a plant with balloon-like seed-heads.

ABDOMEN

Provers recorded feeling bloated and full, as well as having a heavy sensation in their abdomen during the proving. This relates to the balloon-like shape of the seed heads and their hanging nature respectively. The swollen shape and positioning of the seed-heads are physical features of Sutherlandia frutescens that correlate with the bloated and heavy feelings of the provers' abdomens.

BLADDER

The large inflated seed heads are often referred to as "bladder-like" so it was surprising not to find that many bladder-related symptoms produced by the proving. The bladder of only one prover was particularly affected. She had greatly increased urination (both in quantity and frequency), although it only affected her it was quite marked and thus deserves mentioning.

FEMALE GENITALIA/SEX

The 41 rubrics appearing in this section indicates that this system was greatly influenced in the proving. As well as symbolizing femininity the flower is a plants sexual organ. *Sutherlandia frutescens* has large red flowers with large showy petals (Moshe 1998:21). *Sutherlandia frutescens* is a very attractive plant and they have been grown as ornamentals in England as early as 1683 (Curtis 1792:6). With this information in mind it is hardly surprising to find the female sexual system was greatly influenced by this plant.

The cyclic nature of the large red flowers being followed by characteristic bladder-like papery pods described by Gericke, et al. (1997:246) can be likened to the menstrual cycle of the female - which was greatly influenced in the proving. The regularity of the menstrual cycle was affected, producing symptoms including early, and prolonged menstruation. The nature of the menses was also influenced and symptoms such as clotting and heat thereof were experienced.

Women experienced heavy and scant menstruation, dysmenorrhea and general symptoms relating to menstruation.

This great affinity for the female reproductive system makes sense from a doctrine of signatures perspective, as there is such a strong indication due to the symbolism of the physical features of Sutherlandia frutescens.

BACK

Sutherlandia frutescens appears to have a great affinity for the back as many back-related symptoms developed during the proving, resulting in the use of 82 rubrics. One means of explaining this great effect is by the fact that the leaflets have a 'spine' between them. Looking at the leaf one can see the analogy of the spine between the leaflets being the human spine and the leaflets branching off it being the ribs off our human spine. This similarity shows a link between the plants appearance and the back symptoms the proving produced.

The fact that the shrub is quite woody can also be seen to relate to the human spine, which gives structure and support to the body, and shows another link between the physical features of the plant and the symptoms it can produce, and thus cure, in people. The woody nature of the plant also relates to the back stiffness experienced by many provers.

The skin of the back was also affected; provers experienced prickling sensations, formication and itching. These can all be seen to relate to the hairy leaves of Sutherlandia frutescens.

EXTREMITIES

The provers' extremities were greatly affected. Provers felt much pain and cramping throughout their extremities. Looking at the plant it appears to consist of many long limbs. Anthroposophically the branches of a plant represent the limbs of a human. The long branches of this shrub correlate with the limbs of the human, it is thus not surprising to find the provers' extremities were so greatly affected.

Stiffness was a symptom experienced by many whilst proving this substance that has been used to treat rheumatic complaints traditionally. This stiffness is possibly due to the woody nature of the shrub. The woody branches are quite inflexible and stiff and this indicates that it could induce the same state in the provers.

The swelling encountered is another symptom related to the swollen seed heads. Many provers developed an itch or rash on their extremities. The rash was red and raised and this correlates with the red flowers and swollen seed heads whilst the itch correlates with the hairy leaves of the plant.

Once again, there was the sensation of heaviness, which, as has been explained, is due to the manner in which the seed-heads hang off the plant.

SKIN

Many provers developed skin symptoms whilst proving *Sutherlandia frutescens*.

One prover developed very large red pimples on taking the remedy; there is an obvious similarity between the appearance of pimples and the swollen seed heads.

Other provers developed an intensely itchy rash. The rash consisted of many red raised papules, which can be likened to the balloon-like seed heads and the bright red flowers of *Sutherlandia frutescens*. The skin symptoms (ranging from pimples, to blisters, to rashes) that occurred in the proving correlate to the "large, inflated and bladdery" fruit as described by Moshe (1998:85). The itch and prickling sensation can be ascribed to the hairiness of the leaves of the shrub.

Many provers found their skin got quite sun burnt. The red colour of the *Sutherlandia frutescens* flowers can be likened to the red skin of the sun burnt provers. The plant grows best in full sun; this sun-related issue is carried over into the proving in the skin as well as other areas.

Some provers noticed their skins became quite dry; this is interesting, as Sutherlandia frutescens grows best in dry soil.

GENERALS

The fact that Sutherlandia frutescens grows best in full sun (Gericke, et al. 1997:246) was carried through into the proving. There were many sun-related symptoms experienced during the proving. Some people got headaches from the sun, others got very sunburnt but there was definitely sensitivity to the sun.

Fire treating may improve germination of Sutherlandia frutescens (Gericke, et al. 1997:246). This is interesting as many of the provers were greatly effected by heat. There were many accounts of feeling exceptionally hot and being very heat sensitive throughout the proving. The sensation of burning was felt by many provers and in many locations; they experienced burning in their eyes, nose, stomach, throat and skin. Provers felt flushes of heat in their faces as well as their bodies in general. This widespread effect can be attributed to the fire treating and sun preferences of Sutherlandia frutescens, as well as the bright red colour of its flowers.

Another important theme in this proving was that of heaviness. Heaviness was experienced in the head, eyes, nose, stomach, abdomen, and legs. A similar symptom is the bearing down-sensation felt by some female provers. The

manner in which the large seed-heads hang off the plant seems to be responsible for this general theme.

Itching was another core theme throughout this proving, occurring in the eye, ear, head, mouth, female genitalia, back and extremities. This itching was often very severe and caused some provers to scratch until raw and others to lose sleep.

The itching could be as a result of *Sutherlandia frutescens*' hairy leaves.

Another general symptom produced in the proving was weight gain, which occurred quite frequently in the provers. This can also be linked to the appearance of the seed heads. The large, inflated, bladdery seed heads (Moshe 1998:85) correlates with the effect *Sutherlandia frutescens* had on the provers' physiques.

5.3 SUTHERLANDIA FRUTESCENS AS A MEMBER OF THE LEGUMINOSAE FAMILY

The delusions and vivid imagination occurring frequently in the Leguminosae family were observed on proving *Sutherlandia frutescens*. This remedy produced many delusions of isolation and separation in particular. Despite this sensation they were averse to company and desired solitude, which fits with the general Leguminosae traits of indifference and indisposition to talking. The tendency for the Leguminosae family to produce a sad and tearful state was also observed in this proving although some provers did mention experiencing great happiness. The proving of *Sutherlandia frutescens* produced great mental dullness, with

provers experiencing the difficulty in concentration and drugged sensation common to the Leguminosae family.

Both Sutherlandia frutescens and the Leguminosae family in general have an affinity for the head, with they symptoms of pain, heaviness and fullness in common.

Sutherlandia frutescens proved to be another of the many members of the Leguminosae family indicated for eye pain. This remedy produced great itching of the eyes, which is not a marked symptom of the Leguminosae family in general.

The sneezing and coryza experienced by the provers follows the general Leguminosae trend to produce these symptoms.

The flushes of and great sensitivity to heat produced in this proving correlates to the fact other members of the Leguminosae family are often indicated when flushes of heat are experienced in the face.

Many remedies of the Leguminosae family are useful for treating pain and inflammation of the throat and Sutherlandia frutescens appears to be no exception as the proving produced pain ranging from cutting, to scratching, to burning.

The great affinity of the Leguminosae family for the digestive system was carried through in the proving of this member. Great variations in appetite and thirst, as well as heat and pain of the stomach, were present in the proving and the general Leguminosae picture.

The abdominal distension experienced by provers matched that often treated with a number of members of the Leguminosae family.

Neither the rectal tenesmus nor the frequent urging to urinate associated with the Leguminosae family was clearly observed in this proving. On the other hand, the female urogenital system was more profoundly influenced by the proving than would have been expected from studying the general Leguminosae characteristics.

The back pain associated with this family was a symptom strongly produced by this proving. The proving profoundly influenced the extremities, as was expected from the great affinity the Leguminosae family has for the extremities. Symptoms common to both are cramping, eruptions, itching and pain of the extremities.

The proving of Sutherlandia frutescens resulted in various sleep-related symptoms that are also associated with the Leguminosae family in general, these include both sleepiness and sleeplessness.

Sutherlandia frutescens appears to have more of an affinity for the skin than the rest of the Leguminosae family. Many provers developed symptoms including itching and eruptions, which are not as noted in the general Leguminosae picture.

Many general symptoms produced by the proving matched those of the Leguminosae family. Profuse perspiration is treatable with many members of this family, and Sutherlandia frutescens proved to be no exception to this. The same is true for flushes of heat and general weakness.

The themes of itching and heaviness were very pronounced during the proving, yet are not strongly associated with the Leguminosae family. On the other hand, the amelioration from the cold and general coldness associated with the Leguminosae family was not clearly observed in this proving.

This comparison shows that Sutherlandia frutescens does share many similarities with the Leguminosae family but that it does have its' own particular sphere of action. It can thus be assumed that this remedy has a unique niche in the Materia Medica.

CHAPTER SIX

CONCLUSIONS AND RECOMMENDATIONS

6.1 CONCLUSION

Looking at the range of therapeutic uses for Sutherlandia frutescens it was not alarming to find that due to the symptoms produced in this proving it appears that Sutherlandia frutescens has the potential to become a significant homoeopathic remedy. It appears to be a remedy that would be considered in many conditions because of its wide range of symptoms produced.

It is essential that further provings and clinical verification occur to ensure that the Sutherlandia frutescens remedy picture becomes better known homoeopathically.

This proving is a step towards the development of the South African Materia Medica mentioned by Wright (1999:112) that will hopefully improve the health of the people of our country.

6.2 RECOMMENDATIONS

6.2.1 FURTHER PROVINGS IN DIFFERENT POTENCIES

It would be advantageous to the homoeopathic community to prove Sutherlandia frutescens in different potencies so as to fill out the remedy picture with symptoms that may be specific to other potencies. Lower potencies (e.g. 6CH) may create a slight variation of the remedy picture to 30CH, which in turn may

create a slight variation of the remedy picture of a higher potency (e.g. 200CH). Vithoulkas (1986, 152) advocates the use of many different potencies whilst proving a remedy in order to get a more complete picture of the remedy. He uses potencies ranging from 1X to 50M in his provings.

6.2.2 PROVINGS OF RELATED REMEDIES

As suggested by Wright (1999:113) provings of other South African substances must be conducted. More new provings of indigenous substances should be undertaken systematically and, ultimately, the results must be collated with the intent of producing a South African Homoeopathic Materia Medica.

The other species of Sutherlandia (e.g. Sutherlandia tomentosa and Sutherlandia microphylla) should be proven to get a better understanding of the Sutherlandia genus as a whole and to give an alternative to Sutherlandia frutescens.

6.3 CLINICAL INFORMATION

With the widespread use of Sutherlandia frutescens homoeopathically the reliability of the proving symptoms will be verified and additional depth can be added. New clinical symptoms will help add to the Materia Medica picture of the remedy.

Publication of cases successfully treated with Sutherlandia frutescens would definitely help to spread the information of the remedy.

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APPENDIX A

Suitability for Inclusion in the Proving

All information will be treated as strictly confidential.

SURNAME:

FIRST NAMES:

SEX: M / F

TELEPHONE NUMBER:

PLEASE CIRCLE THE APPROPRIATE ANSWER:

- Are you between the ages 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
- Are you pregnant or nursing? YES / NO
- Have you had surgery in the last six weeks? YES / NO
- Do you use recreational drugs such as cannabis, LSD or MDMA? YES / NO
- Do you consume more than:
 - two measures of alcohol per day? YES / NO
(1 measure = 1 tot/ 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
- Are you willing to follow the proper procedures for the duration of the proving? YES / NO

This appendix has been adapted from Wright, C. 1999. A Homoeopathic Drug Proving of the Venom of Bitis arietans arietans. M. Tech. Hom. Dissertation, Technikon Natal, Durban.

APPENDIX B

INFORMED CONSENT FORM

(TO BE COMPLETED IN DUPLICATE BY THE PROVER)

TITLE OF RESEARCH PROJECT:

A Homoeopathic Drug Proving

NAME OF SUPERVISOR:

Dr. AHA Ross B.Mus. (UCT): M. Tech. Hom. (TN)

NAME OF RESEARCH STUDENTS

Heather Webster, Colette Kell, Lisa Low, Nicolette van der Hulst

DATE:

PLEASE CIRCLE THE APPROPRIATE ANSWER:

1. Have you read the research information sheet? YES / NO
2. Have you had an opportunity to ask questions regarding this proving? YES / NO
3. Have you received satisfactory answers to your questions? YES / NO
4. Have you had an opportunity to discuss the proving? YES / NO
5. Who have you spoken to? _____
6. Have you received enough information about this proving? YES / NO
7. Do you understand the implications of your involvement in this proving? YES / NO
8. Do you understand that you are free to withdraw from this proving? YES / NO

A) At any time

B) Without having to give a reason for withdrawing, and

C) Without affecting your future health care

9. Do you agree to voluntarily participate in this study? YES / NO

10. Selection criteria: To participate in this proving you must meet all the inclusion criteria. They are as follows:

You must be between the ages of 18 and 60 years of age.

Must not need any medication, including chemical, allopathic, homoeopathic or other.

Must not be on or have been on the contraceptive pill or hormone replacement therapy in the last 6 months.

Must not be pregnant or breastfeeding.

Must not have had surgery in the last 6 weeks.

Must not use recreational drugs such as cannabis, LSD, MDMA (ecstasy).

Must not consume more than two measures of alcohol per day (1 measure = 1 tot / 1 beer/ ½ glass wine).

Must not smoke more than 10 cigarettes a day.

Must not consume more than 3 cups of coffee or tea a day.

Must be in a general state of good health.

Must be willing to follow the proper procedures for the duration of the proving.

Have you completed Appendix A which outlines in detail all the above stated inclusion criteria?

YES / NO

11. Discomfort may be experienced as a result of participating in the proving.

12. Benefits to provers: It is postulated that each proving undertaken strengthens the body's vital force (Hahnemann, 1997:208). Provers learn and develop the skill of observation and gain homoeopathic knowledge through direct involvement in a proving. A prover may be cured of certain ailments if the remedy is his / her similimum.

13. There is no expense to the prover for participating in the proving and no remuneration is offered to the prover.

14. Every prover is given the name and telephone numbers of the research student and the supervisor of the proving if problems or questions arise

Name:	Home Telephone :	Cellular number:	Homoeopathic Clinic
Dr. Ashley Ross (supervisor)		082 4586 440	2042514
Heather Webster	2668138		2042041
Nicolette van der Hulst	7005402		2042041
Colette Kell		082 879 3885	2042041
Lisa Low		083 6528 772	2042041

If you have answered "No" to any of the above, please obtain the information before signing.

I _____ hereby give consent for the proposed procedure to be performed on me as part of the above mentioned research project.

PROVER: Name _____ SIGNATURE _____

WITNESS: Name _____ SIGNATURE _____

RESEARCH STUDENT: Name _____ SIGNATURE _____

APPENDIX C

Case History Sheet

This appendix has been adapted from Wright, C. 1999. A Homoeopathic Drug Proving of the Venom of Bitis arietans arietans. M. Tech. Hom. dissertation, Technikon Natal, Durban.

Prover number:

Name:

Date of birth:

Marital status:

Occupation:

Sex:

Age:

Children:

Past medical history:

Please list previous health problems and their approximate dates:

Do you have a history of any of the following?

Cancer	Asthma	
HIV	Pneumonia /Chronic bronchitis	
Parasitic infections	Tuberculosis	
Glandular fever	Tendency to suppuration/boils	
Bleeding disorders	Smoking	
Eczema/skin conditions	Oedema/swelling	
Warts	Haemorrhoids	

Surgical history:

Please list any past surgical procedures and the approximate dates.
(Tonsils, warts, moles, appendix)

Allergies:

Vaccinations:

Medication (including supplements):

Estimation of daily consumption of:

Alcohol:

Cigarettes:

Family history:

Is there a history of any of the following within your family:

Cardiovascular disease	
Cerebrovascular disease	
Diabetes mellitus	
Tuberculosis	
Mental disease	
Cancer	
Epilepsy	
Bleeding disorders	

Please list any other medical conditions within your family:

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:

Weather modalities:

Temperature modalities:

Perspiration:

Appetite:

Cravings:

Aversions:

Aggravations:

Thirst:

Bowel habits:

Urination:

Description of menstrual cycle and menses:

Mind:

Head:

Eyes:

Ears:

Nose and sinuses:

Mouth, tongue, teeth:

Throat:

Respiratory system:

Cardiovascular system:

Digestive system (stomach,abdomen,rectum,anus):

Urinary system:

Genitalia and sexuality:

Musculoskeletal system:

Extremities:

Upper:

Lower:

Skin:

Hair and nails:

Other:

The Physical examination:

Physical description:

Frame/build:

Hair colour:

Eye colour:

Complexion:

Skin texture:

Weight:

Height:

Pulse rate:

Respiratory rate:

Temperature:

Blood pressure:

Findings on physical examination:

Jaundice:

Anaemia:

Cyanosis:

Clubbing:

Oedema:

Lymphadenopathy:

Hydration:

Specific system exams:

APPENDIX D

Instructions to Provers

Dear Prover

Thank you very much for taking part in this proving. I am sure that you will benefit from this experience in many ways.

Before the proving:

Ensure that you have the following:

- The correct journal
- Read and understood these instructions
- Had a case history taken and a physical examination performed
- Signed the informed consent form
- Attended the pre – proving training course

Your proving supervisor (Heather Webster, Colette Kell, Lisa Low or Nicolette van der Hulst) 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 supervisor to contact you.

Should there be any problems or anything you don't fully understand, please do not hesitate to call your supervisor.

Beginning the proving:

After having been contacted by the 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 get into the habit of observing and recording your symptoms, as well as bringing you into contact with your normal state. This is an important step as it establishes a baseline for you as an individual prover.

Taking the remedy:

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 two days (6 powders 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:

- 1) Any new symptoms, i.e. ones that you have never experienced before.
- 2) Any change or intensification of any existing symptom.
- 3) 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. Our experience has shown again and again 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 powders 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 a 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 1 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 have 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 effected 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 to 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 | - EXTREMITIES |
| - HEAD | - URINARY ORGANS |
| - EYES | - GENITALIA |
| - EARS | - SEX |
| - NOSE | - TEMPERATURE |
| - BACK | - SLEEP |
| - RESPIRATORY SYSTEM | - DREAMS |
| - DIGESTIVE SYSTEM | - GENERALITIES |
| - SKIN | |

Please give full description of dreams, and in particular note the general feeling or impression the dream left with you.

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 notion 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 the 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 Medicine 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).

Thank you for participating in this proving. We are sure you will find that there is no better way of learning and advancing homoeopathy.

Adapted from Jeremy Sherr – The Dynamics and Methodology of Homoeopathic Provings, second edition. 1994.

I, _____ ,

agree to participate in the proving outlined in Appendix D, and acknowledge that I have read and understand the instructions in Appendix D regarding the proving.

Prover: _____

Signature: _____

Witness: _____

Signature: _____

Researcher: _____

Signature: _____

Date: _____

APPENDIX E DISTRIBUTION OF SYMPTOMS

