

Bismillah-hirahmaan-niraheem

**A homoeopathic drug proving of *Carcharhinus leucas* 30CH with a subsequent  
comparison to the Doctrine of Signatures**

By

Ismaeel Firdaus Khan

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By

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Dissertation submitted in partial compliance with the requirements of the  
Master's Degree in Technology: Homoeopathy in the Faculty of Health  
Sciences at the Durban University of Technology

I Ismaeel Firdaus Khan do declare that this dissertation is representative  
of my own work, both in conception and execution.

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# **Dedication**

To the light of my life  
my parents  
Ashraff Oosman and Fiona Mohamed Khan  
and family

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Dr Naude:

There is no amount of praise that can equal the expanse of work you have put into developing in me the skills required to complete this task, and the values, order and structure you have instilled in my life.

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To All I express my heartfelt gratitude  
May Allah bless you abundantly

## Abstract

When one thinks of a homoeopathic proving one is overwhelmed with the idea of a well-defined and revised linear structured process governing a select group of participants of various racial, sex and age variation, spanning a period of time no shorter than a month with strict parameters for optimum perception of experience. One anticipates the result being a compendium of thoughts and actions and processes constructive and destructive, all documented and confined to a small black book carried and completed by the prover and assembled meticulously by the researcher guided through the experienced hand of the research supervisor.

This research followed this impeccable oft repeated and fine-tuned standard. This research seeks to reinforce the efficacy of the established proving process by utilising the methodology as a guide to maximally elicit the numerous symptoms of a new unproved substance of a kingdom that has yet to truly be explored, understood, and conquered.

### Aim

The true goal of this research is that through learning and understanding and growing one develops and seeks new avenues of cure in the homoeopathic profession, which is ultimately to the benefit of a fledgling developing science, and to humanity, with the aim of activating a true cure.

The topic being investigated is a homoeopathic proving of *Carcharhinus leucas* 30CH followed by a subsequent comparison to the Doctrine of Signatures.

The idea behind this topic was a colleague and co-researcher's interest with the shark species which then developed into a passion and has, through diligence and timeous effort of both researchers, led to a new avenue of understanding and a wealth of ideas in terms of a possible cure.

The sea kingdom itself although rich and bountiful in species of sea inhabitants and vegetation has been a scarce source of homoeopathic remedies with few major remedies being derived from this abundant reservoir. This study, then, can help fill this gap.

## Methodology

On initiating any new proving the methodology has to be of the strictest standard. The process has to be simple, clearly defined, and easily followable, so that the symptoms produced are clear and well defined to provide the best possible materia medica. This can then serve as a strong base for reference and further study and experimentation in clinical practice, as well as a basis for variations of the proving to seek different answers.

The proving process followed a standard procedure to regulate the process to provide an optimum environment for the extraction of symptoms for defining a materia medica. The study was a double-blind placebo controlled clinical homoeopathic proving with a sample of 30 provers in good health. On completion of the proving a further task of comparing the proving results to the Doctrine of Signatures was undertaken to reaffirm the knowledge gained through the proving process.

## Result

All of which, after assembly, has resulted in another homoeopathic materia medica production, an Iliad overflowing in new knowledge to propel a generation of homoeopaths in a progressive direction of further enlightenment and, Allah willing, greater curative capacity.

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## **Definition of Terms**

### **Doctrine of Signatures**

A hypothesis developed in the Middle Ages which suggests that external features and characteristics (including colour) of a substance indicate therapeutic action and effects (Yasgur, 1998: 70).

A doctrine which corresponds characteristics of a plant or substance to that of a disease as an indicator for therapeutic abilities of a plant or substance (Swayne, 2000: 192).

### **Homoeopathy**

Developed by Samuel Hahnemann, the medical science employs the law of similars to treat the sick using minute amounts of preparations derived from the various plant animal and mineral kingdoms that have been through a potentization process (Yasgur, 1998: 112).

### **Law of Similiars**

Forming the fundamental basis of homoeopathy, the principle states that if a substance administered to a healthy individual produces a set of symptoms, then the same substance can be used to treat diseases and disorders which manifests similarly (Swayne, 2000: 193).

### **Materia Medica**

Or 'medical matter', is the science of a drug substance, and refers to a collection of remedies and their therapeutic action which are derived from homoeopathic provings (Yasgur, 1998: 144).

## **Miasm**

The theory described by Hahnemann refers to an infectious principle, or virus, which may produce a specific disease when taken into the organism (Yasgur, 1998: 153).

## **Pharmacopoeia**

A manual which contains monographs describing the composition, properties, manufacture quality control and dispensing of drug substances which are formed by various national authorities (Swayne, 2000: 159).

## **Placebo**

In homoeopathy, placebo refers to an inert inactive drug or substance given as a control in research or to satisfy the patient (Yasgur, 1998: 187).

## **Potency**

Through the method of potentisation or dynamisation a homoeopathic remedy is developed in various stages of dilution. The ascending degrees of dilution by which the strength of the medicine is measured becomes the potency of the medicine (Swayne, 2000: 159).

## **Potentisation**

Introduced by Hahnemann, potentisation is a multi-step process by which homoeopathic remedies are prepared using serial dilution and succussion (Yasgur, 1998: 198).

## **Provers**

A person of good health who volunteers to participate in a homoeopathic proving where a test substance is administered during which the volunteer notes down the symptoms which ensue (Swayne, 2000: 174).

## **Proving**

Administration of a substance either in crude form or potency to a healthy individual to determine its curative, medicinal properties. Symptoms experienced by the individual are then recorded (Yasgur, 1998: 201).

## **Remedy**

A homoeopathic remedy that is used to relieve or cure a disease or symptom (Swayne, 2000: 182).

## **Repertory**

An indexed collection of disease symptoms derived from materia medica which cross references the symptoms of disease to their homoeopathic therapeutic remedy (Yasgur, 1998: 214).

## **Rubric**

This is the repertory term used to identify a symptom or disorder along with the particulars of that symptom and is associated with a list of homoeopathic remedies that has produced and is curative, to that symptom (Swayne, 2000: 186).

## **Succussion (Dynamization)**

In preparation of a homoeopathic potency, each stage of the dilution requires a process of vigorous shaking followed by an impact or elastic collision which is known as succussion (Swayne, 2000: 201).

# CHAPTER 1 : INTRODUCTION

## 1.1 INTRODUCTION

Homoeopathy incorporating all of its various facets of similimum, minimal dose and potentisation, Law of Similars and Doctrine of Signatures, is truly eternal and ever present. Homoeopathy is an expansive quantum entanglement of art and medical science existing and being practised through various names and figureheads, originating centuries prior to its establishment and systematic development 200 years ago into a formal medical format by Samuel Hahnemann, a pioneer in confirming and applying the Law of Similars to bring about cure (Sankaran, 1991a: 09). Developing significant momentum over recent years due to clinical success, media and social propagation, homoeopathy is continuously expanding and growing exponentially. Homoeopathy and its medicines are utilised as a stimulant to the bodies vital force, igniting the natural curative ability of the body driving out and throwing off illness (Sankaran, 1991a: 06).

“Similia Similibus Curentur” (like cures like) is a principle whose origin is attributed to Hippocrates, the father of medicine, proposes that a disease can be cured by a substance that can produce it This forms the basis of homoeopathic prescription and is deeply rooted in its philosophy and methodology (Sankaran, 1991a: 08).

Samuel Hahnemann (1755-1843) founded and practised homoeopathy for several decades until his death, using the Law of Similars and homoeopathically prepared remedies. Homoeopathic remedies are derived from various sources such as animals, minerals and plants which are diluted numerous times until there is no presence of the original substance. This dilution process creates safe and gentle remedies, which, when correctly prescribed according to similimum, are able to cure a compendium of diseases (Wauters, 2007: 6).

After timeously preparing a homoeopathic remedy through dilution and potentisation, the therapeutic index of the substance requires to be identified. The procedure formulated and refined over the years to investigate this matter is called a “proving”.

A descendant of the German word ‘*Pruefung*’ meaning a test or trial, provings are delineated as the systematic administration of a substance either in crude form or homoeopathic potency to a healthy individual to determine its curative, medicinal properties. The aim is to record symptoms experienced by the individual (Yasgur 1998: 201).

A proving is based on a healthy individual being administered the homoeopathic drug substance and noting as precisely and simply the symptoms as they appear. Hahnemann personally proved an amazing 99 substances which, together with numerous later provings, has resulted in the compilation of an extensive homoeopathic materia medica (Sankaran, 1991a: 10).

Provings remain unrivalled as being the only reliable means of predicting the effect of any given substance as a homoeopathic remedy, with any degree of accuracy (Sherr, 1994: 7). This strengthens and emphasises its central place in homoeopathy as the science grows.

The unstoppable transformation of disease processes, symptoms and miasms result in the necessity to either alter the orthodox therapeutic routine or create an ever-increasing armamentarium of remedies, derived only through this tedious proving process.

In defining parameters for such a process, one looks towards the philosophical backbone of homoeopathy in the Organon of Medicine for guidance when attempting such a daunting feat and finds it in aphorism 108 which describes how in conducting a proving one requires to examine first the physical and chemical properties of the substance as a prelude to administering a small amount to the participant after which every change is examined and noted (Hahnemann, 1989: 99).

As explained specifically in aphorisms 127 and 128, and more so in other aphorisms, the provings require to be conducted via both male and female participants in order to provide gender relevant information. The potentised substance requires to be taken in several doses for several days in the 30<sup>th</sup> potency optimally with water. Crude substances do not express the complete range of symptoms thus remedies require to be diluted and potentised to enhance the therapeutic effect (Hahnemann, 1989: 111).

South Africa's enveloping oceans boast a vast cornucopia of indigenous aquatic species with an expansive clinical healing potential tantamount to, even surpassing in volume, the current *materia medica*. These indigenous substances which have not yet been homoeopathically proven possess a substantial therapeutic value (Taylor, 2004: 8). In trying to understand the process of cure one would argue that the development of a disease would not exist simultaneously without the cure. That being mentioned, a useful remedy should preferably be a local one within close proximity to the patient, as nature will always provide an accessible cure (Sherr, 1994: 49). This suggests that South African homoeopaths should utilise more indigenous substances as sources of homoeopathic remedies (Wright, 1999: 3).

Close examination of the *materia medica* outlines a scarcity of aquatic remedies (Grimes, 2000: 7). To date there has only been one proving of a shark in the form of the liver of *Galeocerdo cuvier hepar* (tiger shark liver) by Melanie Grimes (2000). The ocean itself is unexplored territory and as a result is vastly unknown, posing a challenge to aspiring homoeopaths. It is believed that several substances derived from the animal kingdom, including those derived from the many existing fish species, would be useful if they are well proved as homoeopathic remedies (Sherr, 1994: 49).

The archetypal multifaceted *Carcharhinus leucas* which is the basis for this is one of the most dangerous sharks in existence, and was chosen for its rich established background. This is a remarkable species with a reputation for aggression, diverse food habits, and flexible distribution. Antineoplastic alkylglycerols, squalene and

squalamine can be extracted from liver oils, making this powerful predator a formidable aquatic subject of research (Moss, 1984: 15).

Thus, the homoeopathic proving study of *Carcharhinus leucas*, which is indigenous to South African waters, undertook the challenge of defining the curative potential and therapeutic index of the substance in an attempt to expand the materia medica.

## **1.2 AIM OF THE STUDY**

- ❖ The aim of the study is to conduct a double-blind placebo controlled homoeopathic proving of *Carcharhinus leucas* 30CH with a subsequent comparison to the Doctrine of Signatures.

## **1.3 OBJECTIVES OF THE STUDY**

- ❖ The primary objective is to conduct a homoeopathic proving of *Carcharhinus leucas* 30CH to determine and document symptoms of the substance.
- ❖ The secondary objective is to compare the symptoms of *Carcharhinus leucas* 30CH to the Doctrine of Signatures in relation to its behaviour, functioning, lifestyle, and physical characteristics.

## **1.4 THE HYPOTHESES**

- ❖ It is hypothesised that conducting a proving with a 30CH potency of *Carcharhinus leucas* would result in the formation of clearly observable signs and symptoms in healthy proving volunteers.
- ❖ It is hypothesised that the comparison of the proving symptoms of *Carcharhinus leucas* 30CH to the Doctrine of Signatures associated with *Carcharhinus leucas* will elucidate the similarities between the remedy and the doctrine.



## 1.5 THE DELIMITATIONS

The study did not:

- ❖ Attempt to explain the mechanism of action of the homoeopathic preparation of *Carcharhinus leucas* in its production of symptoms in healthy proving volunteers.
- ❖ Determine the effects of different potencies of the substance other than that of the thirtieth centesimal (30CH) potency.
- ❖ Attempt to perform multicentre trials of the drug.
- ❖ Attempt to compare the proving to other provings of shark species.

## 1.6 THE ASSUMPTIONS

- ❖ The method of the German Homoeopathic Pharmacopoeia (GHP) (fifth supplement to the 1<sup>st</sup> edition, British Homoeopathic Association 1991) used to prepare the 30CH potency was correct.
- ❖ The proper procedures as determined by the proving methodology outlined in the Appendix D, Letter of Information were complied with and adhered to by the provers.
- ❖ The prover neither significantly deviated from their normal lifestyle or dietary habits immediately prior to or during the proving.
- ❖ The prover practised conscientious and accurate self-observation and symptom recording.
- ❖ The remedy was taken by the prover in the dosage, frequency and manner in accordance with strict proving guidelines instructed by the researcher.

## CHAPTER 2 : REVIEW OF RELATED LITERATURE

### 2.1 PROVINGS

#### 2.1.1 Introduction

The German word *pruefung* means to investigate, inspect, test or trial, and is the origin of the word 'proving' we so commonly use presently in homoeopathy (Gaier, 1991: 390). The word proving is used to delineate a process which involves the systematic administration of a substance either in crude form or homoeopathic potency to a healthy individual to determine its curative, medicinal properties and to record the symptoms experienced by the individual (Yasgur, 1998: 201). Vithoukas explains a proving as being a systematic process whereby a substance is tested on healthy human individuals solely for the purpose of elucidating symptoms that will express the therapeutic action of that substance (Vithoukas, 1980: 96). From this we can understand that the proving process itself has various components. These are the collection and preparation of a substance, followed by interaction of the prepared substance with the individual, resulting in sequela which are then analysed and grouped according to their category of symptom.

There are many arguments in favour of homoeopathic provings with many established homoeopaths in support. The homoeopathic history, philosophy and clinical practice stand firmly upon and are developed from the foundation of homoeopathic provings. The basis of materia medica and repertory written work used in diagnosis and prescription are formed overwhelmingly and predominantly through provings (Delinick, 2006). Provings provide for the reliable and accurate description and recognition of symptoms which is a pillar of homoeopathic practice (Sherr, 1994: 7). This sentiment is echoed by Vithoukas (2004: 143) who believes it is well suited as a tool for expansion of the collective homoeopathic remedial therapeutic knowledge. This approach is considered to be the only reliable source of attaining and understanding the action of a substance to be utilised as a homoeopathic treatment (Dantas, 1996: 230). Through drug provings we acquire

knowledge of the positive effects and the pathogenic capability of the drug substance in relation to living organisms (Banerjee, 2006: 397-398).

The future of homeopathic substances is challenging. Due to agricultural changes and various environmental factors impacting the growth of substances, the subjective nature of substance effects have possibly evolved as well, which will require periodic re-proving of previous substances (Gaier, 1991).

Hahnemann formulated and structured the initial proving protocol, exhaustively investigating drug effects on healthy human individuals including himself. This was followed by collating subjective and objective symptom information collected. He believed that only through proving a considerable number of medicinal substances on healthy individuals with careful symptom recording after administration of a potency, could one derive a true materia medica. In aphorism 145 of his Organon of the Medical Art he wrote that a considerable volume of proven homoeopathic remedies is required to cure the numerous disease states presenting in nature. In aphorism 141 he discusses his belief that all practitioners should be involved in provings, this being the best method to learn and truly comprehend materia medica (Hahnemann, 1996: 161-162). The process of detailing such pathogenic developments has evolved to increase scientific rigour through the years of its practice, introducing a placebo control group to the format. (Gaier, 1991: 390-391).

### **2.1.2 History and development**

There are various historical figureheads who have been instrumental in the development of the medical science profession that require mention.

The flow starts from the Greek Island of Cos which gave birth to Hippocrates (460-370 BC) undisputedly regarded as the being the “Father of Modern Medicine”. He detailed disease in patients in terms of diet, environment and person, and developed numerous understandings and doctrines of disease, medicine and possible methods of cure. In particular he articulated the process of curing through the Law of Similars “*similia similibus curentur*” or antagonistically through the Law of

Contraries/Opposites “*contraria contrariis curentur*” (Banerjee, 2006; Delinick, 2006: 13; Eizayaga, 1991). The contrasting doctrines led to differing schools of thought which still dominate medical science today.

The Greek physician Galen (129-199 A.D.) is credited with developing the allopathic fraternity by applying the Law of Contraries/Opposites. The Swiss physician Paracelsus (1493-1541) applied the Law of Similarities and then Hahnemann (1755-1843) fully developed this into homoeopathy as we know it today (Goel, 2002).

Having a curious nature and wanting to experiment and understand, Hahnemann conducted his first experimental investigations while translating the Scottish physician Cullen’s (1710-1790) A Treatise of Materia Medica in 1796. He ingested *Cinchona officinalis* Peruvian bark and shortly thereafter developed an intermittent fever, circulatory symptoms and prostration among others, akin to those produced in malarial pathology but without harbouring the actual parasitic infection. He repeated the dose to confirm the phenomenon (Lockie and Geddes, 1995).

Quinine the active principal abundant in *Cinchona officinalis* is mentioned by Cullen to be curative in the treatment of malaria. This investigation would be deemed his first proving, sowing seeds for the modern systematic drug provings, leading to the development and strengthening of the Law of Similars whereby *Cinchona officinalis* produced malarial symptoms in a healthy individual was deemed able to cure it if administered in minute doses. This is a concept originating from Hippocrates yet fashioned through Hahnemann to benefit the populous (Bloch and Lewis, 2008: 17; De Schepper, 2001; Vithoulkas, 2004: 92; Sankaran, 1991a; Resch and Gutmann, 1987: 18).

In aphorism 108 of the Organon of the Medical Art, Hahnemann emphasises the need to test the therapeutic capability of substances in healthy individuals to ascertain their range of action in changing a person’s state of health, this was also a unique idea in medicine at the time, although he does acknowledge in a footnote the Swiss physician Albrecht von Haller who wrote about this in 1771 (Hahnemann, 1996: 145; Jütte, 1997). Developing scientific structure and systematic methodology

to this process resulting in concrete clinical data Hahnemann gained significant merit in the field from conducting provings. Hahnemann rigorously documented his methodology for “investigating the pathogenetic power of the medicines” in aphorisms 105-145 (Hahnemann, 1996: 144-163; Riley, 1996: 4; Walach 1994).

Provings were a practice followed stringently by his numerous homoeopathic disciples namely Von Boeninghausen (1785-1864), Hering (1800-1880), Kent (1849-1916), and Clarke (1853-1931) (Goel, 2002: 363). In the current era, Sankaran and Sherr among others are well known for conducting provings (Sherr, 1994: 9).

### **2.1.3 Contemporary provings**

The methodology of provings has evolved rapidly over the years, resulting in varying interpretations and expressions of the process, as discussed below.

#### **2.1.3.1 The C4 trituration provings**

Ehrler expanded on The Organon reference to the C3 trituration, continuing to the C4 and C5 trituration levels. His view was that the trituration process develops a certain intimacy between substance and prover leading to the manifestation of physical, emotional and mental symptoms (Botha 2010: 31).

Through experience the following understanding has been formulated distinguishing the various levels of trituration from each other:

- ❖ C0- describes the physical level of the substance, having little or no action.
- ❖ C1- conveys a physical level of symptoms and knowledge.
- ❖ C2- conveys an emotional level of symptoms and knowledge.
- ❖ C3- conveys a mental and psychic level of symptoms and knowledge.
- ❖ C4- conveys a spiritual level of symptoms and knowledge.
- ❖ C5- conveys a collective unconscious level of symptoms and knowledge.

(Botha, 2010: 31)

### **2.1.3.2 Dream provings**

Proving studies conducted over a short period focusing on dreams produced by the provers is the premise for this methodology. Initiated by Jurgen Becker 30 years ago in the Bad Boll Seminars (Dam, 1998; Botha 2010: 16), the dream provings vary greatly in methodology with placebo control being used in some and absent in others. Administration of dose varies as well with any of the various forms of exposure to the substance such as powders or pillule administered the night (Dam, 1998; Botha, 2010: 17). The resulting 'symptoms' produced correlated significantly to Hahnemannian provings of the same substance (Wright, 1999).

Sankaran believed dream provings represented an authentic source of knowledge being a raw natural expression of emotions and actions, unhindered and unregulated by the conscious psyche (Sankaran, 1998: 146). He conducted a multitude of such provings with his students during his Mumbai seminars (Dam, 1998: 130).

### **2.1.3.3 Meditative and seminar provings**

Meditative Provings and Seminar provings involve groups of people proving simultaneously at a single location for a prescribed time

These various methods of proving yield complementary results whether the route of administration is internal or merely by contact. Although they vary in expression of the output or results, the domain of the remedy (usually administered in potencies of 30CH, 200CH and 1M) remains constant throughout all methods. However, certain authors have questioned these methodologies, regarding them as being poorly defined scientifically, and are unhappy that they deviate from the Hahnemannian golden mean (Sankaran, 1998; Ramnarayan, 1998).

### **2.1.3.4 Proving methodology**

The six volumes of Hahnemann's Materia Media Pura are the product of 37 provers proving 61 medicinal substances between 1825 and 1833, and demonstrates his

efforts to perfect his proving methodology (Fisher, 1995). The only question mark is the absence of a control group (Fisher, 1995: 129). Hahnemann was known to use up to 64 provers in his provings but he employed no blinding or placebo control in his technique (Wagner 2007: 8). His methodology yielded reliable symptoms and results and set a benchmark in experimental design lasting through to the 21<sup>st</sup> but his age-old method is no longer considered on par with the current approach to clinical trials which now incorporate placebo, substance blinding, and randomisation in an attempt to scientifically authenticate results (Wieland, 1997: 229; Smal, 2004: 7).

Following its establishment and institutionalisation in homoeopathy, provings have been conducted globally through different methodologies, sometimes using substandard material, and frequently deviating from the Hahnemannian golden standard. Such approaches can result in inadequate proving symptomatology and data. Dream provings, meditative provings, seminar and personal provings among others have been identified as deviating from the norm, taking a more casual, partial experimental approach to the process (International Council for Classical Homoeopathy [ICCH], 1999: 33). Due to these variations in methodology, many provings lack the refinement and keen observation necessary to complete the process in the correct manner as per Hahnemann (ICCH, 1999: 33; Sherr 1994: 9).

Observing a decrease in quality of modern present day provings and deducing a gradual deterioration over time, Sherr (1994: 9) set about developing a proving guideline in the form of The Dynamics and Methodology of Homoeopathic Provings (1994). Recognising that complete perfection although ideal was rarely attainable, he sought a dynamic harmony between science and art in his design. Drawing from Hahnemann's original guidelines, work and aphorisms, related homoeopathic literature and comprehensive field involvement with provings he developed a contemporary proving construct of high calibre focused on practicality. This methodology soon became widely accepted and adhered to by the homoeopathic community (ICCH, 1999; Sherr 1994: 12). In his work, the more controversial aspects of provings such as substance double-blinding, placebo control, and potency selection are confronted. Double-blinding refers to blinding or hiding specific aspects of the research to both proving participant (proving substance and placebo

distribution between provers) and researcher (placebo distribution between provers). This concept is utilised in the attempt to overcome any bias arising from either researcher or prover. The introduction of placebo into the experimental design differentiates remedial effects from any effect that may arise from the proving process itself (Sherr, 1994: 36-37).

In due course the International Council for Classical Homoeopathy (ICCH, 1999) developed Recommended Guidelines for Good Provings based on Hahnemann's aphorismic recommendations in an attempt to standardise and implement correct proving methodology stressing the need for correctly proven remedies to produce the highest reliable standard of work (ICCH, 1999). They confirmed the use of placebo as a means to make provers more reliable and attentive (ICCH, 1999: 34).

In the Science of Homoeopathy (1986), Vithoukas challenged the perception of provings. He created rigorous and detailed guidelines of what he believed to be a reliable proving methodology wherein the substance is tested on a larger sample (50-100 provers) of different nationalities in different locations at different altitudes extending over longer periods of time (even years) using a range of multiple potencies from 1X to 50M. This approach clearly produces a wide range of symptomatology but is lacking in practicality of execution and prover compliance (Vithoukas, 2004: 147-152).

Over the years various guidelines produced have been adjusted and refined through the hand of the European Committee for Homoeopathy (ECH), resulting in the Homoeopathic Drug Proving Guidelines version 1.1 June 2011. More recently the Liga Medicorum Homoeopathica Internationalis (LMHI) and ECH have produced a joint guideline, Homoeopathic Proving Guidelines Version 1, May 2014, approved and published by the LMHI and ECH.

#### **2.1.3.5 Blinding and placebo**



Branded as an unnecessary deception and shunned by Hahnemann in his practice of homoeopathy and provings (Haehl, 2003; Ross 2011: 75), blinding and placebo is by no means unexplored territory by the homoeopathic profession.

A deeper look into the short history of homoeopathy shows that placebo was absent in over a century's worth of provings involving thousands of cases and produced clinically efficient results which have lasted throughout the ages (Sherr, 1994; Naidoo, 2008: 10; Walach, 1994: 130). Although placebo and blinding were enacted originally in 1835 (Stolberg, 2006; Ross, 2011: 41), it is believed that Bellows during the 1906 re-proving of Belladonna formally introduced and perfected the concept and application of placebo and double-blinded trials (Demarque, 1987; Smith, 1979; Botha, 2010: 11). Placebo was a concept which Kent in his memoirs explained gained favour and popularity and was routinely applied in provings by the 1900s (Kaptchuk, 1997: 50; Naidoo, 2008: 10).

As elaborated by Sherr, Demarque and numerous others, the placebo controlled double-blind process of hiding the nature of the intervention/substance from the proving subjects and its randomisation/assignment (being handled by a third party) from the assessors, investigators and trial participants, attempts to prevent knowledge of the substance and placebo randomisation from interfering with and influencing the study process, protecting against bias (Demarque, 1987; Sherr, 1994: 35; Kaptchuk, 1997). This is an attempt to differentiate if any effect resulting from an administered intervention can be attributed to the intervention, the placebo, the experimental process itself (Walach, 1997) or even psychological components such as hope and expectancy (Davidson, 1995: 64; Naidoo, 2008: 11).

Many writers have questioned the use or validity of placebo or blank (an inert substance indistinguishable from the verum), as a control measure in homoeopathic provings (Swayne, 2000: 162). The placebo in a proving serves a different purpose to that of placebo clinical drug trials. Homoeopathic provings were developed to extract symptoms exposing the curative nature of a substance while placebo controlled clinical drug trials demonstrate the efficacy of a therapeutic intervention to specific ailments (Wieland, 1997). The placebo is administered to a minor portion of

the proving group in order to decrease expectations and promote efficacious conscientious judgement and symptom recording (Pistorius, 2007: 8; ICCH, 1999: 34). Utilising a placebo control and double-blinding in provings promotes a self-critical attitude among the provers and the investigator (Riley, 1996: 5).

Research has been conducted to illustrate and illuminate the purpose of placebo use and blinding and their beneficial application in provings, leading to an understanding that during a proving term the number of symptoms of those of the actual substance exceeds those on placebo in both typical and atypical symptoms (Walach, Sherr, Schneider, Shabi, Bond and Rieberer, 2004; Ross 2011: 41). Research has also shown that fewer mental symptoms persist in placebo groups compared to verum groups (Signorini *et al.* 2005; Ross, 2011: 42).

Various homoeopathic figureheads and institutional bodies have attempted to provide guidelines for optimal placebo use, with Vithoulkas (1980: 151) suggesting the use a 25% placebo population. Sherr (1994: 57) suggested a 10-20% placebo population is sufficient, believing that a smaller placebo percentage would prevent wastage of good provers. The ICCH (1999: 34) suggested a 10-30% placebo group. The most recent recommendation to appear is from LMHI and ECH (2014: 11) and is for a minimum of 10% control group with a minimum of two provers on placebo.

Blinding may occur at three levels including the name of the substance, the randomisation, and the potency of the substance (LMHI and ECH, 2014: 12). Triple-blinding recommends blinding the observer researcher and prover from the nature of the substance and its randomisation, providing very stricter parameters to verify clinically unbiased results (Raeside, 1972; Naidoo, 2013: 10). This method being applied by various homoeopaths, including Sherr and Riley, in their provings (Wright, 1999: 7; Naidoo, 2013: 10).

The homoeopathic drug proving in modern times is being relabelled as a homoeopathic pathogenic trial (HPT) and seeks to acquire subjective symptomatology produced through administration of a potentised homoeopathic substance to a healthy patient. The clinical trial on the other hand seeks to measure

drug efficacy and its action on a specific disease and is compared to a placebo. While the two processes do overlap on certain points the two overwhelmingly different processes are incorrectly compared to each other, having different aims and yielding different results (Figure 2.1).

**Table 2.1: Tabulated and summarised below are key differences between early phase 0 and phase 1 clinical trials and homoeopathic provings**

	Phase 0	Phase1	Proving
Aim	Assess whether a high-risk drug behaves as would be expected from pre-clinical studies	Derive Pharmacokinetic and Pharmacodynamic data and determine safety	Collect subjective symptoms for formulation of a homoeopathic drug picture
Volunteers	Patients, with few or no other therapeutic options	Healthy volunteers	Healthy volunteers
Volunteers	Patients, with few or no other therapeutic options	Healthy volunteers	Healthy volunteers
Number of Volunteers	10-15	20-100	Any
Placebo Control	No	No	Not essential
Dose	Micro-doses	Single ascending dose Multiple ascending dose	Repeated micro-dose until symptoms occur. Predefined maximum number of doses
Safety	Unknown, not a purpose	Variable, some risks prevented by pre-clinical Studies	Almost perfect, toxic levels excluded. Concept of first safe dilution
GCP/ICH Guidelines	Under development by EMA and FDA. Concept of IND (Investigational New Drug) studies	Exist, used by Ethical Boards	No official guidelines, but ECH/LMHI Guidelines conform to GCP/ICH guidelines
Indication specified	Yes	Yes	No
Demonstrative purpose	To confirm biological activity in line with early pre-clinical indications, ahead of formal phase I-IV studies	To ensure safety of drug in healthy human subjects, ahead of efficacy testing in subsequent phases	To investigate the therapeutic potential of a substance. No subsequent experimental phases

Source: LMHI and ECH (2014: 8-9)

### 2.1.3.6 Prover sample

The prover sample bears great significance on the symptoms produced during the proving. Vithoulkas in an attempt to manage age, cultural, racial, and sexual variation, suggested an ideal prover population of between 50-100 encompassing a thorough proving (Vithoulkas, 1980: 152). Sherr (1994: 45) arguing against this believed that copious numbers resulted in common symptoms dominating the materia medica. Sherr believed a group of 15-20 provers was sufficient. Of like mind, the ICCH similarly recommended 10-20 provers (ICCH, 1999: 34)

In recent times, the LMHI and ECH have jointly published an optimal prover number guideline promoting an optimal experimental group of a minimum of 10 provers and a maximum of 20 provers reflecting a positive burden/benefit ratio. The decision on number of ultimately depends on the expertise and discretion of those involved (LMHI and ECH, 2014: 13)

The current proving research was conducted utilising methodology derived in part from the internationally acclaimed work published by Sherr (Sherr, 1994: 41-89) as well as guidelines provided by the ICCH, LMHI and ECH.

Being one of two universities credited with conducting homoeopathic provings in South Africa this proving research utilised 30 provers based on a strict standard adhered to by many provings undertaken prior to produce a comprehensive remedy picture (Ross, 2009: 1). The provers were divided into verum and placebo control groups of which 24 provers (80%) received verum while six provers (20%) received placebo (Ross, 2009: 10).

### 2.1.3.7 Potency

Due to an awareness of the different actions of different potencies on various tissues and centres, great precaution is exercised when prescribing a specific potency.

Hahnemann's experienced directions were crystal clear. Administration initially took the form of the crude substance then in various forms of substance diluted and in tincture and in potency until via aphorism 128 he recommended oral administration of the 30<sup>th</sup> potency [30th Centesimal Hahnemannian (30CH)] of a remedy on an empty stomach, perceiving it to produce the most beneficial outcome and results (Hahnemann, 1996: 154; Ross, 2011: 44; Walach, 1994; Walach, 1997; Walach *et al.*, 2004), with resulting symptoms after administration being attributed to the remedy (Hahnemann, 1996: 58)

Vithoulkas originally recommending the use of the lower potencies 1X-12X (Vithoulkas, 2004; Ross, 2011: 44) then later recommended that a more encompassing spectrum of multiple potencies from 1X- 50M be used for a holistic picture (Vithoulkas, 1980: 151).

Jeremy Sherr used a range of potencies in his provings (Sherr, 1994; Ross, 2011: 44). His widely-acknowledged *Hydrogen* proving utilised the 6CH, 15CH, 30CH and 200CH (Sherr, 2003: 56), although he reaffirmed the validity of using a single potency. The end result of the *Hydrogen* proving led to the awareness that the abundance of mental and emotional symptoms was proved predominantly from the 30CH potency (Sherr, 1994: 27).

The ECH and LMHI provide various guidelines in this regard and recommend potencies above and including the 12CH or equivalent ideally using potencies between 12CH-30CH. Variations below and above this are at the discretion of the Principal Investigator and require thorough motivation and description (ECH and LMHI, 2014: 10).

For these reasons, the choice of potency employed in this proving and commonly in other provings conducted at the Durban University of Technology is the 30CH.

#### **2.1.3.8 Ethical considerations**

The moral principles that govern how an activity is conducted play a vital role in the protection of the volunteers. The ethical review board consisting of the Faculty Research Committee (FRC) and Institutional Research Ethics Committee (IREC) among others scrutinised and approved the proving research methodology in keeping with DUT approved protocols to provide an optimal standard beneficial to both researcher and participant prior to commencement of the research.

The LMHI and ECH in their proving guidelines emphasise various ethical steps such as the use of Informed Consent Forms with complete disclosure clearly outlining the process and purpose and risks, duly completed and signed by all proving participants. Volunteer provers are given the right to withdraw at any time without consequence or prejudice. In addition, confidentiality is upheld via the investigator with an independent adviser supervising over the process (LMHI and ECH, 2014: 13-14)

The Declaration of Helsinki developed by the World Medical Association has the health of the patient as the first concern, as well as protection of life, caution in conduct, lawful procedures and assessment of predictable burden and risk to participants. This sentiment is echoed throughout the various statutory bodies involved in regulation of the proving research (Declaration of Helsinki WMA, 2016: 1).

The proving substance is administered to the participant in the 30CH potency as mentioned in the methodology. At this level, the remedy is considered to be of a high potency. No actual chemical constituent of the substance is present at this level resulting in no side effects and/or the possibility of toxicity. In contrast to modern allopathic conventional medicine, there is no pharmacodynamic effect of the substance on the prover. The short period of administration until possibly producing

a proving symptom or aggravation, minimises the possibility of any adverse effects (Sherr, 2003: 62).

Due to the nature and objective of the proving the possibility of experiencing mild transient functional symptoms seems unavoidable. Symptoms often disappear once the remedy has completed its range of effect. Provers were informed of the possible risks involved in the process. Antidoting was as an elective option at the discretion of the prover should he/she deem it necessary or should symptoms become unbearable (Sherr, 2003: 63).

All the research parameters defined by the various bodies were upheld throughout the proving process and were strictly documented.

## **2.2 COMPARISON TO DOCTRINE OF SIGNATURES**

### **2.2.1 Doctrine of Signatures**

Signature, derived from the Latin *signatura* (sign manual) or *signare* (to sign, mark), is commonly used in the medical field to denote the component of a medical prescription intent on giving instruction of the use of the drug or medicine prescribed (Pearsall, 2002: 1334).

As a patient is given a signature through the physician in the prescribed physic, similarly the physician through nature is given an instructive guide. The Doctrine of Signatures is a hypothesis constructed during the Middle Ages which states that the external features and characteristics (including colour) of a substance indicates its therapeutic action (Yasgur, 1998: 70), associating corresponding distinctive characteristics identifying a substance to a similar disease as an indicative guide for therapeutic aspirations (Swayne, 2000: 192). Initially postulated through the Greek Dioscorides (40-90AD) and Galen (129-199 AD), the Doctrine of Signatures correlates similarities of plant animal and mineral presentation, interaction and manifestation to human disease symptomatology, ultimately enhancing the understanding of a substance and illuminating its therapeutic indication (Richardson-

Boedler, 1999: 172-173). Understanding of the doctrine was fortified through Paracelsus (1493-1541) who believed that disease and cure (with indications thereof) exist simultaneously, and utilised the doctrine as an advisory tool in remedy prescription (Delenick, 2006: 14-15; Lockie and Geddes, 1995: 11; Pujol, 1990: 24).

The following are some examples of how the doctrine is used:

- Bloodroot (*Sanguinaria canadensis*) – in bleeding and arterial disease.
- Chaste Tree (*Agnus castus*) – menstrual and female symptomatology.
- Eyebright (*Euphrasia officinalis*) – eye symptomatology.
- Knitbone (*Symphytum officinale*) – traumatic bone pathology (Boericke, 2013).
- Bamboo (*Bambusa arundinacea*) – vertebral complaints (Yasgur, 1998: 70).

Although the doctrine lacks a scientific foundation, it presents a seemingly universally obvious and easily comprehensible principle resonating with aphorism 2. It is intuitive easily distinguishable throughout nature when looking for it. The Doctrine of Signatures features prominently in numerous cultures and healing/medical professions, increasingly so in current times (Pujol, 1990: 24).

## **2.3 PROVING SUBSTANCE**

The sample used for this proving was derived from a frozen specimen of a juvenile bull shark liver of whole mass 8kgs (designation R. B14022) caught during December 2014 in Richards Bay with a total weight of 72.5kgs (Figure 2.1 and Figure 2.2). Retrieved from the KwaZulu-Natal Sharks Board, Durban.





**Figure 2.1: Sample of the shark liver used in proving**



**Figure 2.2: Sample of the shark liver placed in an hour glass**

### **2.3.1 Classification**

Kingdom: Animalia

Phylum: Chordata

Sub-Phylum: Vertebrata

Super class: Gnathostomata

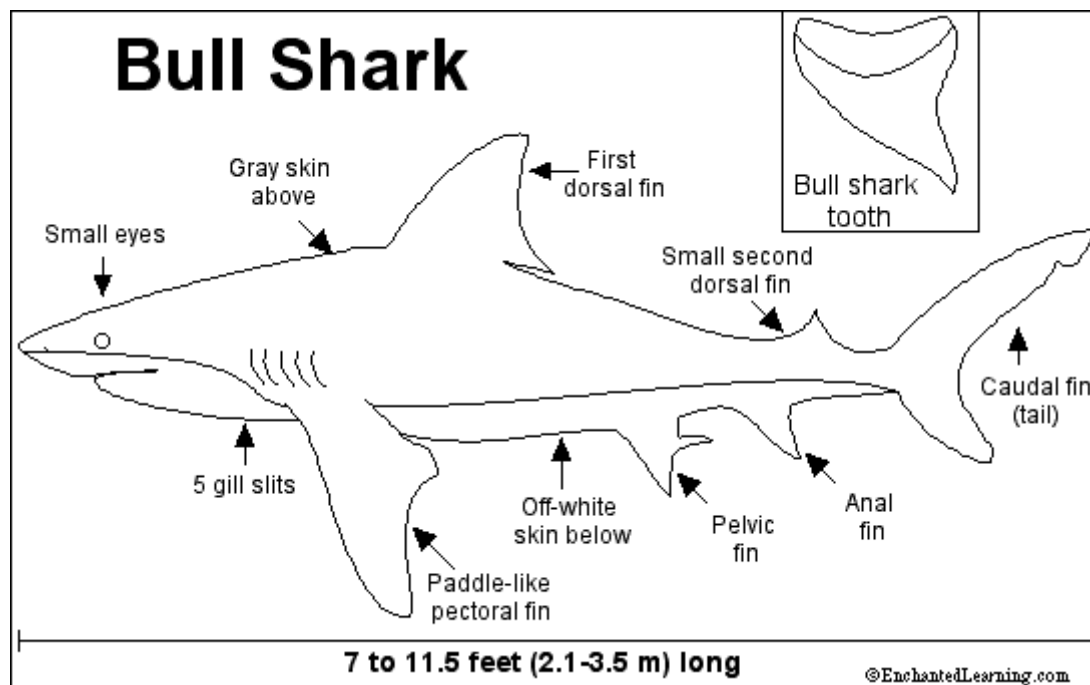
Class: Chondrichthyes  
Order: Carcharhiniformes  
Family: Carcharhinidae  
Genus: Carcharhinus  
Species: Carcharhinus leucas

Common Names:

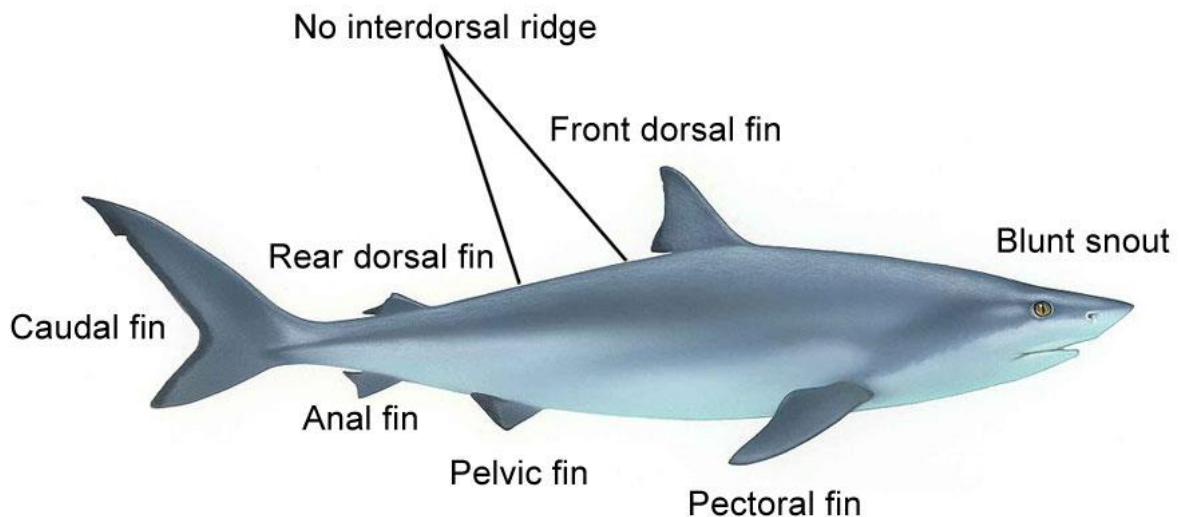
- Bull shark
- Zambezi shark
- Swan River shark
- Lake Nicaragua shark

### 2.3.2 Description

Figure 2.3 and Figure 2.4 present images of the bull shark with labels describing the various aspects.



**Figure 2.3: Bull shark description (1)**  
Source: Planet Deadly (2013)



**Figure 2.4: Bull shark description (2)**  
Source: Enchanted Learning (2000)

### 2.3.2.1 Appearance

The *Carcharhinus* family have a streamlined body tapering in front of the tail, pointed and rounded snouts, a curved mouth line laden with sharp teeth, a distinct triangular dorsal fin, five gill slits and a nictitating membrane on the eyes (Bannister 1989: 10). The *Carcharhinus leucas* presents as a grey topped off-white under bellied marine inhabitant covered externally by minute thorn like backward facing denticles. The skeleton of the shark is comprised of flexible cartilage only. The robust stocky body in juveniles has dusky fin tips, which fade as the shark ages and develops. The snout of the shark is short and round with the nostrils having a blunt, triangular lobe. No inter dorsal ridge is present. There are broad based infero-lateral pectoral fins located behind and below gills, the slits of which are always erected to promote stability and motion. The paired pelvic fins located about midpoint of the underside of the shark are modified and specialised in males forming erectile claspers utilised in copulation to hold onto females during sperm transfer. Anal and dorsal fins prevent rolling. The caudal heterocercal tail fin has a larger upper lobe than lower lobe and bears great importance in swimming. The perpendicular height of the second dorsal fin divides into the perpendicular height of the first dorsal fin three times or less

allowing the bull shark to be differentiated and distinguished from other species in the family *Carcharhinus* (Wallett, 1983: 159).

#### **2.3.2.2 Habitat**

The bull shark is a warm water shark and inhabits numerous warm shallow waters from the southern Mozambique coast along the east coast of Africa to KwaZulu-Natal. The *Carcharhinus leucas* species is unique in that it not only travels and swims across fresh water but also lives in it as well with their presence being recorded in numerous rivers such as the Ganges, Tugela, Zambezi, and Limpopo around the world. Movement into estuaries to drop of their young are short lived as they soon return to the sea (Wallett, 1983: 160).

The shark was once believed to have two variations of the species; one which dwelt in the seas while the other was land-locked until it was discovered that *Carcharhinus leucas* is capable of moving between fresh and seawater through mechanisms that allow them to regulate urea and salt levels in their blood and body fluid preventing dehydration. They are able to maintain a viable osmotic balance to changes in aquatic environment with only minor alterations in water content and intracellular and extracellular changes. This is done mainly through a specially adapted excretory system that retains nitrogenous waste ultimately maintaining total osmotic pressure and allowing them to function normally in salt brackish and fresh water (Steel, 2009: 108).

#### **2.3.2.3 Diet**

Sharks are apex predators at the top of the food chain, being vital in the regulation of other aquatic populations and maintaining the ocean ecosystem (Benchley 2002: 112). Considered to be one of the most dangerous shark species in the world, this carnivore feeds principally on a multitude of fish, and secondarily on various rays, skates, squids, crustaceans and other smaller shark species including hammer heads, and are known for various attacks on humans (Wallett, 1983: 160). Being described as a species that would eat almost anything, it is known to even eat young

of its own kind either its own or other offspring (Readers Digest, 1990: 176). The shark presents with a long gut system starting with a mouth and ending in an anus. Components such as an elastic stomach digest food while the short intestine absorbs nutrients (Bannister, 1989: 17).

#### **2.3.2.4 Reproduction**

Mating like that of other mammals occurs through introduction of sperm from a male directly into the female reproductive tract via male sex organs called claspers allowing internal fertilisation to take place (Readers Digest, 1990: 26). Pregnant females prefer warmer waters. Females carefully choose nursery environments which can provide food, security and protection from being eaten by other sharks, and a suitable temperature to give birth to young and to allow development of the juvenile state (Steel, 2009: 103). Young are born in summer months in the large estuaries of Northern KwaZulu-Natal and the litter size varies in number from six to twelve pups. The young are born when they reach an embryo size of between sixty to seventy centimetres. Young grow up without nursing. Males' mature when reaching approximately 220cm while the females mature at a slightly longer length of 225cm. The sharks reach a maximum-recorded length of around 300cm (Walleit, 1983: 160).

#### **2.3.2.5 Seasonality**

During the summer seasons, the bull shark range increases southward but rarely if ever reaches Cape waters (Walleit, 1983: 160). They occupy shallow waters or surface layers preferring warmer climates and frequent fresh water (Steel, 2009: 105). Along the South African coast between December and March when the Zambezi, Limpopo and other estuaries are in flood, the bull shark congregates in large numbers to scavenge food carried by the rivers (Bannister, 1989: 88).

### **2.3.2.6 Nature of the animal**

The bull shark is beautiful and efficient, having survived for hundreds of millions of years, but the bull shark has accrued a bad reputation over the years. It has been described as fearless, aggressive, dangerous and territorial (Benchley, 2002: 56), and is responsible for a minimum of 21 documented cases of attacks on humans, with many other attacks attributed to the species throughout the world. Therefore, the bull shark is very dangerous to humans (Readers Digest, 1990: 20).

The *Carcharhinus* family are known to have bigger brains among sharks. They learn play and are even able to be trained on a reward basis. They are sentient having the five senses of taste, touch, smell, sight, and hearing, and can detect electromagnetic waves beyond human range (Bannister, 1989: 21).

### **2.3.2.7 Movement**

The *Carcharhinus leucas* is an elegant sinuous swimmer with a hydro dynamically efficient body. Movement takes place via the various paired and unpaired fins strategically situated throughout the body of the shark both superiorly and inferiorly, and caudal tail.

The shark moves between rivers, lakes and oceans. They may occur as far as 3700km from sea. They negotiate rapid waters and return to sea. Is often abundant in areas where large amounts of people use the sea or rivers (Readers Digest, 1990: 176). Implementations of shark nets have dramatically reduced movements and human attacks.

### **2.3.2.8 Teeth and hunting apparatus**

The shark has a keenly developed sense of smell, excellent adjusting eyesight and efficient hearing particularly sensitive to low frequency sounds which can travel long distances in the sea. These enhance hunting capacity allowing the shark to frequently hunt at night (Steel, 2009: 105). The jaw muscles are powerful and bite easily. The razor-sharp enamel covered teeth of the predator used for seizing and

cutting are larger in the upper jaw being broadly triangular and narrower in the lower jaw. Sharks teeth are continuously being replaced throughout their lives. Teeth form behind the jaw cartilage and push forward replacing worn or loose teeth that drop out at the front of the jaw (Bannister 1989: 16). Tooth formula:  $= \frac{13-2-13}{12-2-12}$  (Wallett, 1983: 159).

### 2.3.2.9 Mythology

Among the oldest of mythology associated with sharks are the legends narrated by the Warran Indians of South America and “the missing leg of Nohi-Abassi”. Legend has it that Nohi-Abassi rid himself of his mother-in-law by teaching a shark to attack and devour her. This resulted in Nohi-Abassi’s sister-in-law being angry and retaliating by transforming herself into a shark and severing his leg with a single bite. Consequently, he bled to death and his leg lay adrift in one part of the heavens and his body in another. If you look up at the star filled night sky you may be able to identify and bear witness to this truth now being identified through Greek nomenclature as the constellation of Orion the Hunter (Cafiero and Jahoda 1994: 22).



**Figure 2.5: Orion the Hunter star constellation**

In Japanese mythology, the God of Storms is described as a shark-man bearing the name Same-Hito. Traditional Japanese legends of sharks were so terrifying that

during conflicts that sharks with teeth were painted on military vehicles such as aeroplanes.

An ancient underwater amphitheatre in which Hawaiian kings ordered gladiators armed with a dagger made of shark teeth to fight sharks was discovered during the construction of Pearl Harbour.

Among other regions, the Solomon Islands regard sharks as deities. Special provision is made for them to occupy underwater grottoes carved out especially for them in coastal regions.

Vietnamese fishermen till today still pray to the whale shark as “Lord Fish”. (Cafiero, and Jahoda, 1994: 22).



## **CHAPTER 3 : PROVING METHODOLOGY AND MATERIALS**

### **3.1 EXPERIMENTAL DESIGN**

The defining methodology in which this initial research of a new substance was conducted, was a double-blind placebo controlled proving study.

In accordance with the Homoeopathic Proving Guidelines harmonised by LMHI and ECH approved and published by the LMHI and the ECH in May 2014 (Jansen and Ross, 2014), 30 provers were recommended of which 24 participants receive the proving substance and six receive a placebo.

Each participant on initiation into the study was provided with a unique prover designation in the form of a number in accordance to the sequence of agreeing to participation and a randomisation code was further assigned through an independent third party. Medication was administered as granules included with powder in an envelope package identical in nature to the placebo to strengthen the double-blind nature of the study. Verum and placebo were randomly assigned and proving participants were not informed as who was receiving verum or placebo.

After a physical examination proving material including a journal and stationery were given to participants to be utilised in diarising signs and symptoms throughout the prescribed time. Other items given included a research letter of information, which clarified instructions and provided finer details for the proving process and contact information. Finally, six proving powders were given which were sufficient doses for two days administered at a rate of one powder three times a day. The powders were administered following a baseline recording of one week. A five-week proving period then ensued. On conclusion of such time, the returned completed journals were collected and the acquired data was then timeously processed and collated into materia medica and concurrently into repertory format by the researcher. The result of which culminated in a totality of symptoms or remedy picture for the research substance. This similimum picture was then further analysed, and refined through comparison with the Doctrine of Signatures.

### **3.2 THE PRINCIPLE INVESTIGATORS**

The proving process was conducted through two researchers, namely I. F. Khan and N. Naidoo.

The prover sample of 30 participants was divided between the two researchers. As a result, each researcher was allocated 15 proving participants of which 12 participants received verum while the remaining three received placebos. After completion of the proving, data was shared between the researchers.

### **3.3 OUTLINE OF THE EXPERIMENTAL METHOD**

- ❖ The process was initiated through recruitment of keen participants throughout the university and locality via advertisements strategically placed throughout the campus premises and through communication channels and networking.
- ❖ All participants were then invited to a pre-proving assembly at a faculty venue and informed in detail regarding the process that is known as a proving and were enlightened regarding the nature of homoeopathy. This was followed by a question and answer session.
- ❖ Randomisation of the proving remedy and placebo was done via a third-party faculty member (a lecturer appointed by the Department Research Committee (DRC) at the Department of Homoeopathy) before being administered to provers.
- ❖ On completion of a compiled register of participants, the participants were processed and transitioned into the proving process via a pre-proving consultation.
- ❖ Permissions for consultation and participation in the form of signed consent was taken, suitability criteria were addressed and an efficient complete history taking followed by a physical examination at the university clinic under supervision of the clinician present
- ❖ Prover numbers and randomisation numbers were assigned to each participant along with proving material including journal, pens, daily checklist,

and appointment card. A letter of information containing detailed instructions and emergency contact details of both supervisor and researcher was provided upon acceptance to proceed with proving.

- ❖ Proving participants were prescribed a set of six powders the contents of which were undisclosed, due to the blinding process. The powders looked identical and were placed in identical envelopes labelled with proving specific details such as proving number, date of production, researcher details.
- ❖ Projected dates for baseline week, remedy taking and follow up consultation were calculated and detailed on an appointment card given to participant.
- ❖ Provers were then sent off to record a preliminary pre-proving week in the journals detailing habits and symptoms to serve as a control baseline comparator to the post remedy administration period.
- ❖ Upon completion of the first preliminary week of journaling, the remedy provided was taken by the participant at a rate of three doses per day for two days then carefully and acutely observing and diarising all symptomatology for a further five weeks.
- ❖ Appearance of a symptom during the first two days due to the administration of the remedy resulted in immediate discontinuation of the remedy.
- ❖ Regardless of perceived appearance of symptoms due to remedy administration or not, provers were required to diarise symptoms daily until the end of the allocated five-week period.
- ❖ Communication between researcher and prover was maintained towards the evening in a prescribed manner over the duration of the process. The researcher was informed if any adverse symptoms were experienced by the prover and action taken accordingly.
- ❖ All proving symptoms were required to be completed in totality using concomitants, location, aetiology, modalities and sensations (CLAMITS) classification as efficiently as possible for the duration of the symptom.
- ❖ Communication between researcher and participant followed the following pattern:
  - Every day in the first week after baseline recording;
  - Every second day during the second week after baseline recording;
  - Every third day during the third week after baseline recording;

- Every fourth day during the fourth after baseline recording; and
- Once during the final week.
- ❖ The entire proving process required a period of six weeks and consisted of a preliminary one-week pre-proving period and a post remedy five-week period.
- ❖ In conclusion, of the proving process a follow up consultation with the prover was undertaken by the researcher, which included a complete history confirmed through examination after which journals were returned.

### **3.4 THE PROVING SUBSTANCE**

#### **3.4.1 Potency**

The liver specimen of the *Carcharhinus leucas* which was utilised as the proving substance was manually triturated to a 3CH potency following which it was manually diluted and succussed up to a 30CH potency remedy and then impregnated in lactose granules.

#### **3.4.2 Collection, preparation, and dispensing of the proving substance**

The source substance: a dead frozen liver sample obtained from a *Carcharhinus leucas* caught in Richards Bay was obtained from the KwaZulu-Natal Sharks Board.

Physical Address:

1a Herrwood Drive, Umhlanga, KwaZulu-Natal

Postal Address:

Private Bag 2, Umhlanga 4320, South Africa

Telephone: +27 (031)566-0400

Fax: +27-(031)566-0499

Preparation followed the procedural guidelines of the German Homoeopathic Pharmacopoeia (Benyunes, 2005: 36-39), according to method 6, method 8a and method 10. Potencies of the *Carcharhinus leucas* were prepared from a frozen liver sample by the researcher and co-researcher in the homoeopharmacological laboratory of the Department of Homoeopathy, Durban University of Technology.

The verum was dispensed as lactose granules (Source: CoMed as Comed Unmedicated Granules, Batch nr 13RO8002 Exp 08.2016) which were triple, impregnated at 1% v/v with *Carcharhinus leucas* 30CH in 96% alcohol (Source: anhydrous alcohol 99.9%, Illovo- 72 Ballantree road Merebank Durban 4052. IMO shipping, ethanol, Hazchem code: 2 SE, PRODUCT REFERENCE: 500, BATCH NUMBER 52/12/67, CLASS3, 25 LT, UN NUMBER: 1170). The placebo was dispensed as lactose granules as above but impregnated only with 96% alcohol.

### **3.4.3 Dosage and posology**

Six proving powders were given to each proving participant as individually sealed powders in an envelope. The prover was instructed to take one powder sublingually at timed intervals every six hours in the morning, midday and evening. Powders were taken for a total period of two days or until the onset of symptoms. The proving participant ceased taking the remedy after the onset of symptoms. The mouth required to be hygienic 20 minutes pre-and proceeding remedy administration. All antidoting substances as per Appendix D taken via any route in any form were to be avoided throughout the proving.

## **3.5 THE PROVER SAMPLE**

### **3.5.1 Sample size and demographics**

Total participating provers: 30

Locality of selection: KwaZulu-Natal

Demographic group: students from the Department of Homoeopathy and the wider university student population. The group included homoeopaths, people with knowledge of homoeopathy, the public.

The participants were recruited by word of mouth and advertisements (Appendix J). The participants were divided into two groups between both the researchers. Thus, each researcher supervised 15 provers with 12 provers receiving verum and three

receiving placebos. In total, 24 provers received verum and six provers received placebo.

### **3.5.2 Randomisation**

The 30 participants were randomly assigned to either a verum or a placebo group via a prover number. A roster was drawn up by a third-party faculty member whereby each of the thirty participants were randomly assigned either verum or placebo according to the numerical order in which they participated. The prover numbers were allocated through separate written pieces of paper placed in a container and mixed.

Independent randomisation enforced the double-blinding process resulting in neither researcher nor prover knowing who belonged to which group, enhancing the research. Further blinding was promoted through provers not being informed of either the potency or nature of the proving substance.

Dispensing of the powders took place at the DUT homoeopathic day clinic according to the randomisation sheet, facilitated through the laboratory technician, ensuring neither party involved in the research were aware of the grouping of each prover. The envelopes once dispensed were identical in appearance.

### **3.5.3 Inclusion and exclusion criteria**

- ❖ The proving participants must be between the ages of 18 and 75 years old (Jansen and Ross, 2014: 13).
- ❖ The proving participants must be in a generally good state of health with no gross physical or mental pathology, determined through a case history and physical examination (Sherr, 1994: 44).
- ❖ The proving participants must not be on any medical treatment conventional, homoeopathic or other.

- ❖ Female proving participants must not have used the oral contraceptive pill or hormone replacement therapy for six months preceding the study (Sherr, 1994: 44).
- ❖ Female proving participants must not be either pregnant or breast-feeding (Sherr, 1994: 44).
- ❖ The proving participants must not use recreational drugs (Sherr, 1994: 44).
- ❖ The proving participant must not have had surgery in the preceding six weeks.
- ❖ The proving participant must not consume more than two measures of alcohol per day, 10 cigarettes per day or three cups of coffee or tea per day.
- ❖ The proving participant must not be suffering from hypersensitivity diseases such as asthma, hay fever, allergies, or food sensitivities (Vithoulkas, 1980).

#### **3.5.4 Lifestyle of provers during the proving**

The following guidelines were required to be adhered to by all provers:

- ❖ Coffee, camphor, mints and other strong substances which antidote the remedy are to be avoided and provers are to discontinue the use of these substances for two weeks before, and for the duration of the proving (Sherr, 2003: 92).
- ❖ The remedy powders have specific requirements such as requiring to be stored in a cool, dark place avoiding contact with any strong-smelling substances, chemicals, and electric equipment including cellular phones (Sherr, 2003: 92).
- ❖ The following areas required to be practised in moderation: work, alcohol, exercise and diet (Sherr, 2003: 92).
- ❖ All varieties of medication including antibiotics and steroid preparations; vitamins or mineral supplements, and herbal or homoeopathic remedies must be avoided throughout the process (Sherr, 2003: 92).

### **3.5.5 Monitoring of the provers**

- ❖ To ensure accurate journaling and that provers were complying with the general proving methodology regular telephonic contact was maintained between researcher and prover.
- ❖ Prover telephonic contact for symptom discussion followed a timeline of daily contact during the first week of the proving, being reduced to every alternate day in the second week, every third day in the third week and every fourth day in the fourth week respectively. All proving symptoms were recorded continuously until disappearance of all symptoms.
- ❖ Antidoting of proving state due to intolerable symptoms became applicable if the prover decided to discontinue participation in the study. The ensuing procedure requiring a detailed case history in the provers present active state resulting in the prescription of a homoeopathic remedy.

### **3.5.6 Ethical considerations**

Strict IREC and other DUT approved protocol standards were complied with throughout the research. Complete disclosure of involved risks was explained prior to attaining full permission from participants. The ECH-LMHI proving guidelines recommend constant close prover supervision, which was strictly adhered to throughout this study. Due to the nature and objective of a proving the possibility of experiencing mild transient functional symptoms seems unavoidable, antidoted at any time by choice of the prover should he or she deem this to be necessary should symptoms become unbearable.

Privacy was protected throughout the research. Only the research supervisor knew the identity of the prover and all information was treated in the strictest of confidence. No personal details were mentioned in the research and provers were assigned a prover code and randomisation code. Proving data was recorded only in relation to the prover number and gender to promote anonymity.



Participation in this proving was purely voluntary and provers were given the opportunity to withdraw at any given time without prejudice. Participants were excluded if they did not meet the inclusion criteria and if participants fell ill and required allopathic treatment, they were withdrawn from the study.

### **3.6 DURATION OF THE PROVING**

#### **3.6.1 Case history and physical examination**

Meeting of the inclusion criteria resulted in an invitation to a pre-proving meeting hosted by the researchers and supervisors. After this a pre-proving consultation, later was scheduled. This entailed a thorough case history followed by a general physical examination. The entire documented pre-proving process formed a landmark baseline state by which the prover symptoms are compared following ingestion of the proving powders.

#### **3.6.2 Pre-proving observation**

The pre-proving observation was a specific one-week period during which the prover detailed their normal state in the journal provided familiarising themselves with the proving process of self-observation analysis and diarising in the process of expressing their standard state. This served as a meridian by which all other deviations of health were compared. Guidance via the researcher through telephonic contact promoted compliance and accuracy in symptom recording

#### **3.6.3 Commencement of the proving**

Succeeding the pre-proving observation week period. The prover was guided telephonically prior to ingestion of the first powders recording any symptoms they might encounter. Occurrence of any symptoms minor or major determines if the consecutive powders are administered, with the basic rule being that the prover continues to take the remedies at a rate of three powders per day at regular timed and noted intervals until symptoms occur and stops ingesting the powders when he

or she experiences symptoms. After taking the doses, the prover continued to journal whether they had experienced symptoms or not and communication was maintained with the researcher throughout. If severe symptomatic aggravation necessitated antidoting, the data obtained was still included in the research study. Daily journaling continued for the prescribed four weeks. A prerequisite to journaling required the patient from inception to journal symptoms in relation to date and time in association to the ingested powders (Sherr, 2003: 73).

#### **3.6.4 Post-proving observation**

In conclusion, a subsequent one-week journaling period was further completed under the guise of a post-proving observation period for the purpose of general observations. Daily journaling terminated after the prescribed five weeks, after which a follow up case history including physical examination was conducted and the journal collected by the researcher, rendering the proving process complete.

#### **3.6.5 Group meeting**

Ultimately a post-proving meeting was held with all participants to wrap up the proving component of research. The objective of this was to gain clarity regarding the proving between provers and the researcher through discussion.

### **3.7 DATA COLLECTION BY PROVERS**

#### **3.7.1 Symptom evaluation and extraction**

Following journal collection, data was categorised into sections such as mind, sleep, generals etc. The differentiated data in its varying sections was extracted from each prover and arranged according to the subject and time of appearance (Sherr, 1994: 70). Identical or similar symptoms derived from the various provers were consecutively listed in accordance to the following criteria:

- ❖ Symptom nature;
- ❖ The prover;

- ❖ The sequence development of the symptom; and
- ❖ The time of appearance of the symptom.

Prover symptoms, which constantly recurred were grouped together. Symptoms covering multiple body regions/systems in totality were listed under the most central heading. The total symptom comprised components which appear under secondary headings as a local symptom and concomitant symptoms (Sherr, 1994: 78) The generals section included general symptoms consisting of: body side, modalities, recurring symptoms, and times of day repeated more than three times.

### **3.7.2 Inclusion criteria of a symptom as a proving symptom**

Valid proving journal symptoms were extracted and converted into materia medica format (European Committee for Homoeopathy [ECCH] and International Council for Classical Homoeopathy [ICCH], 1999: 35; Jansen and Ross, 2014: 14-16). The following consistent set of symptom criteria determined whether a symptom was considered 'valid' and thus determined the acceptance or rejection of a symptom into a proving substance's materia medica:

- ❖ An unfamiliar new symptom occurring after the prover took the remedy (Riley, 1997: 227; ECCH and ICCH, 1999: 36).
- ❖ The symptom did not appear significantly in a prover in the placebo group (Ross, 2011: 102).
- ❖ Intensification of a current, usual or normal symptom to a marked degree (Sherr, 1994: 72).
- ❖ The frequency of the symptom (Sherr, 1994: 73).
- ❖ The intensity of the symptom (Riley, 1997: 227).
- ❖ The number of subjects experiencing the symptom. Symptoms being experienced in multiple subjects (Sherr, 1994: 71, Riley, 1997: 71, Riley, 1995a Riley, 1995b)
- ❖ The symptom duration (Riley, 1995a; Riley, 1995b).
- ❖ The modalities, timing, localisation and concomitants associated with the symptom (Riley, 1997: 227; Riley, 1995a; Riley, 1995b).

- ❖ The symptom is strange rare or peculiar either for that prover or in general (Sherr, 1994: 72; Riley, 1995a; Riley, 1995b).
- ❖ The disappearance of a pre-existing chronic symptom during the proving. This was designated as a 'cured symptom' (Sherr, 1994: 71; Riley, 1997: 227).
- ❖ A current symptom is modified or altered with a clear description of the current and modified component (Sherr, 1994: 70; ECCH and ICCH, 1999: 36; Jansen and Ross, 2014: 14-16).
- ❖ The symptom did not occur in the prover within the last year (Sherr, 1994: 70; Riley, 1997: 227).
- ❖ During the proving the symptom did not appear spontaneously or naturally i.e. did not have an extraneous cause (Sherr, 1994: 70).
- ❖ The occurrence of a coincidence or accident in more than one prover (Hahnemann, 1996).
- ❖ The time of day that a symptom occurs in provers is included only if through repetition it occurs in another prover (ECCH and ICCH, 1999: 36; Jansen and Ross, 2014: 14-16).
- ❖ A symptom that occurred a long time ago (five or more years) and there is no reason for its reappearance at the time of the proving (Sherr, 1994: 70).

### **3.7.3 Data Collating and editing**

- ❖ The proving data was collected through prover journals utilised to record symptoms during the proving.
- ❖ Repertory inclusion required journal entries to be converted into materia medica format then into homoeopathic rubrics.
- ❖ Every symptom was analysed against the criteria for inclusion of a proving symptom.
- ❖ Due to the subjective nature of the qualitative data, traditional statistical methods of analysis would prove ineffective, requiring the data to be analysed according to themes and trends to make materia medica and repertory inclusions. This was further required for the comparison to the Doctrine of Signatures which was thematic in nature.

### 3.8 COMPARISON TO THE DOCTRINE OF SIGNATURES

Prover symptoms derived from this study formed the basis for the comparison of the *Carcharhinus leucas* proving symptoms to the Doctrine of Signatures. Using the Doctrine of Signatures, a detailed analysis of the *Carcharhinus leucas* and its life was conducted comparing the symptomatology to the appearance, nature, lifestyle and behaviour among other facets of the subjects' life. Through exposing the close correlation of symptom and subject matter to the doctrine, not only is the doctrine reaffirmed and its theory strengthened, but a greater comprehension of the topic under study is achieved promoting efficient clinical accuracy in prescription of this remedy.

### 3.9 REPORTING THE DATA

#### 3.9.1 Repertorisation

A compiled index of rubrics in the form of The Essential Synthesis 9.1 (Schroyens, 2012) was the format into which all data was assembled, resulting in rubrics of a compatible composition. The headings under which the symptoms were divided for use both in the materia medica and repertory are as laid out in Table 3.1.

**Table 3.1: Repertory symptom headings**

Mind	Stomach	Cough
Vertigo	Abdomen	Expectoration
Head	Rectum	Chest
Eye	Stool	Back
Vision	Bladder	Extremities
Ear	Kidneys	Sleep
Hearing	Prostate Gland	Dreams
Nose	Urethra	Chill
Face	Urine	Fever
Mouth	Male genitalia/sex	Perspiration
Teeth	Female genitalia/sex	Skin
Throat	Larynx and Trachea	Generals
External Throat	Respiration	

### **3.9.2 Materia medica**

Materia medica, the body of collected knowledge of the therapeutic properties of remedial substances used in homoeopathy incorporating its various headings is the configuration into which accepted symptoms were transcribed.

## CHAPTER 4 : RESULTS

### 4.1 INTRODUCTION

This chapter presents the results derived from the proving of *Carcharhinus leucas* 30CH and comprises an extensive compendium of relevant subjective prover journal entries and interview data meticulously extracted, collated and contextualised into two distinct homoeopathic referencing formats namely a Materia Medica section and detailed rubrics, a repertory section akin to that of *The Essential Synthesis* Edition 9.1 (Schroyens, 2012). This to clarify themes and pictures defining the remedy.

### 4.2 THE PROVER POPULATION

Thirty healthy provers participated in the proving of *Carcharhinus leucas* 30CH and the emerging symptomatology was analysed. Twenty-four provers received the verum while six provers received a placebo as part of a control which is tabulated below. The provers varied in ages, gender and racial diversity (Table 4.1). The ages of the provers ranged from 18 to 60 with the average age being 21. There was an almost equal ratio of males to females. These details are represented in the table below. Racial distribution shows diversity with a predominance of Blacks and Indians. The lower case “a” in correlation to the prover number represents a replacement prover due to the original participant removing themselves from the proving due to various reasons.

**Table 4.1: Prover details**

No	Age	Gender	Race	Verum/Placebo	Reference Base
1a	18	F	Black	Verum	Homoeopathic
2	26	M	Black	Verum	Non-Homoeopathic
3	24	F	Indian	Verum	Non-Homoeopathic
4a	18	F	Black	Verum	Homoeopathic
5a	18	F	Black	Placebo	Homoeopathic
6	25	F	Black	Verum	Non-Homoeopathic
7a	19	M	Black	Verum	Homoeopathic
8	18	F	Black	Verum	Homoeopathic

9	20	M	Indian	Verum	Homoeopathic
10	18	M	Indian	Verum	Homoeopathic
11	21	M	Black	Verum	Non-Homoeopathic
12	18	F	Black	Verum	Homoeopathic
13	20	M	Black	Placebo	Homoeopathic
14	18	M	Black	Verum	Homoeopathic
15	19	F	Indian	Verum	Homoeopathic
16	34	M	Indian	Verum	Non-Homoeopathic
17	60	M	Indian	Placebo	Non-Homoeopathic
18	22	F	Indian	Verum	Non-Homoeopathic
19	19	F	Black	Verum	Non-Homoeopathic
20	18	M	Indian	Verum	Non-Homoeopathic
21a	24	F	Indian	Placebo	Non-Homoeopathic
22	18	M	Indian	Verum	Non-Homoeopathic
23	18	M	Black	Placebo	Homoeopathic
24	18	F	Coloured	Verum	Non-Homoeopathic
25	18	F	Black	Verum	Non-Homoeopathic
26	19	F	Black	Verum	Non-Homoeopathic
27	18	M	Black	Verum	Homoeopathic
28	19	F	Coloured	Verum	Non-Homoeopathic
29	18	F	Black	Placebo	Non-Homoeopathic
30	19	F	Black	Verum	Non-Homoeopathic

#### 4.3 **THE MATERIA MEDICA OF *CARCHARHINUS LEUCAS* 30CH**

After the collection of the proving symptomatology of *Carcharhinus leucas* 30CH, the data was assembled into sections akin to traditional materia medica, inclusive of relevant headings and sub-headings. Symptoms were transcribed and referenced in correlation to the blueprint laid out by Sherr (2003: 78):

Prover Number – Gender– Onset of Symptoms (Day: Hours: Minutes)

The referencing of time is taken in relation to, and from, the first dose and specifies the number of days, hours and minutes since dosing. After 24 hours, the minutes are considered unimportant and represented by XX. The hours also become unimportant after a few days. Unclear time or poorly recorded time by the prover, is represented as XX: XX: XX.



The utmost precaution has been taken to maintain the proving journal entries verbatim. To ensure that the essence of the entries was captured, the sentence structure grammar and spelling remained predominantly unaltered.

The placebo prover group symptoms were not taken into consideration and have been excluded from this materia medica.

#### **4.3.1 Mind<sup>1</sup>**

##### **Affection Increased**

Mood: Warm friendly better than before.  
03F 06: XX: XX

##### **Anger**

These days I get irritated very easily. I wasn't myself in the evening. I was frustrated and angry. Due to being unable to find my friends for study I got frustrated to the point I had a headache. I chilled out waited for them to come back when they did I just slept or at least I tried to. I woke up pissed. I didn't want anything, so I woke up and just went out to get some fresh air. I was angry very angry. I couldn't deal with having someone around I guess and I had my personal conflicts combined. Going out helped me as I got to relax.  
01F 34: XX: XX

When I got in my room I realise that my money was not there and that broke my heart. I didn't tell anyone. So I slept earlier and I held my anger inside me.  
12F 10: XX: XX

Bad day I went to my boyfriend's room and he was with a girl. I think they are dating because it was dark in the room. And I am angry my chest feels very hot. I have lots of energy, I am trying to take my mind off from the pain I am feeling.  
30F 19: XX: XX

Today I had a real bad day, my boyfriend was with another girl in his room. Watching movie. I was very angry. My chest was feeling hot, my stomach was changing it was also hot. I was in pain, cause my heart was broken.  
30F 20: XX: XX

Had a very angry outburst to a situation that upset me.  
09M 07: XX: XX

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<sup>1</sup> Font size and line spacing have been reduced slightly from here until section 4.4 in order to reduce the overall number of pages of the dissertation.

In the evening I was okay. I got pissed off by the littlest thing. These days I get irritated easily and I try by all means not to burst out of irritation to that person. I just went out and cooled myself and tried to enjoy the rest of my day.

01a F 32: XX: XX

And I feel super angry like beating something anything.

07a M 05: XX: XX

I woke up angry and just been feeling ugly and I don't want to be around people...

24 F 26: XX: XX

Time to go to class my mood just changed and I was irritated and angry because I felt like I was forced to do something I didn't want to do.

24 F 06: XX: XX

### **Anxiety**

Feeling slowly started fading and felt anxious. This grew in magnitude.

09M 15: XX: XX

Feelings of anxiety mixed with excitement.

18 F 20: XX: XX

Feel worried and I have to go to Mutare, my little brother just told me he is not feeling well. I'm so uneasy.

06F 11: XX: XX

Felt a bit anxious and stressed out as I make the final plans for my journey.

06F 04: XX: XX

When I woke up in the morning I was very nervous about the test I was about to write. I didn't eat anything and it was a very hot day.

04aF 06: XX: XX

### **Aversion to Company & Desires solitude**

Had a family supper for grandfather's birthday but was not at all in a sociable mood.

03F 10: XX: XX

Am feeling a bit irritable just don't feel like dealing with people.

03F 14: XX: XX

Have a deep appreciation for being alone sometimes. Loneliness is different from solitude.

03F 24: XX: XX

Relatives say I've become moody and unsociable which is unusual for me.

15F 02: XX: XX

I do not feel like eating anything at all and I want to be alone.

19F 09: XX: XX

... I did not want to see people and I did not even like the boy I like today.

19F 24: XX: XX

I do not feel like facing anyone or eating anything.

19F 25: XX: XX

I first tried studying with a group of classmates but then I could not really gain any info from there so I asked to be excused and went to study alone. I have moments where I just feel like I work best on my own.

26F 26: XX: XX

Had the feeling of wanting to be alone.

09M 00: XX: XX

... I was happy that I was going to be alone at home.

24F 15: XX: XX

Had the feeling of wanting to be alone.

09M 00: XX: XX

Felt annoyed by friends. Wanted to be alone.

09M 04: XX: XX

During lectures all I wanted to do is get away and be alone.

09M 08: XX: XX

I was in a bad mood. I just needed to spend time alone today. I felt like people were annoying me without a reason.

12F 07: XX: XX

My mood is okay but I've been wanting to be alone all day.

19F 30: XX: XX

I woke up angry and just been feeling ugly and I don't want to be around people.

24F 26: XX: XX

Today I woke up in a bad mood I'm not sure why but all I want to be is alone my nephews were making a noise I was irritated by their mother.

24F 29: XX: XX

Felt annoyed by friends. Wanted to be alone.

09M 04: XX: XX

### **Aversion to Criticism**

Still listening to my mother's constant moaning and criticising so getting out the house will be a nice change in scenery.

03F 00: XX: XX

Very tired and overly sensitive to comments made towards me.

09M 00: XX: XX

### **Capriciousness**

The things I tend to like seem to change and be things I hate.

04aF 21: XX: XX

### **Cheerfulness**

I was happy nothing could bring me down as I went to church.

01a F 15: XX: XX

Happy mood. Feel humour again.

03F 24: XX: XX

I woke up feeling fresh and the weather was completely fine. I was so relaxed and I was happy.

04aF 15: XX: XX

I woke up feeling happy and blessed and the only thing I could think about is going to church.

04aF 16: XX: XX

The best day of my life. I woke up feeling happy and fresh. Everything seems alright, every time I hear my mom's voice I feel happy.

04aF 22: XX: XX

Felt happy, no stomach pains headaches or feeling lazy.

06F 18: XX: XX

Feel happy and energetic and had a good appetite.

06F 22: XX: XX

I am in my best mood today.

06F 30: XX: XX

I woke up fresh to start my week. I was in a good mood.

08F 4: XX: XX

Been described as being happier the past three days by my friends. I have not noticed any changes I feel normal. I do not feel this is true.

10M 3: XX: XX

Was in a happy mood had a great day.

10M 14: XX: XX

Today I am too happy to eat anything or take a nap.

19F 40: XX: XX

I felt happy I didn't know why.

12F 9: XX: XX

We listened to music and danced throughout the day. Felt really good today.

06F 32: XX: XX

Woke up in a good mood.

10M 17: XX: XX

### **Childish Behaviour**

Acted very childish and playful compared to usual.

09M 04: XX: XX

### **Confidence and Inadequate Confidence**

Woke up refreshed and scared as I wasn't sure how I was going to do as I was writing didn't trust the studying I did as if it wasn't enough.

01aF 11: XX: XX

I was done after writing as I hated myself for writing stupidly and wanted to change that as I now want to study more but still have to gain my confidence again as I know there must be something I am doing wrong when I study which I should fix.

01aF 11: XX: XX

I woke up feeling good and the weather was nice. I went to my first lecture feeling confident and I was so relaxed everything seems to be alright.

04aF 20: XX: XX

I felt pretty today from Wednesday my confidence for my appearance has improved.

24F 16: XX: XX

## **Confusion**

I woke up feeling stressed and I was not okay I hated myself for coming here. I kept asking many questions that I don't even understand.

04F 11: XX: XX

I generally feel confused and afraid, negative thoughts fill my mind used to be like this a long time ago.

15F 00: XX: XX

Unusual Symptom – confusion.

15F 02: XX: XX

Had strange lucid dreams. Feel slightly disconcerted. In the dream I was looking for something which could not be retrieved. Feel a bit confused.

03F 14: XX: XX

Mind feels fuzzy after all the reading.

03F 05: XX: XX

## **Delusion**

### **Body Ugly**

I woke up angry and just been feeling ugly and I don't want to be around people.

24F 26: XX: XX

### **Dirty**

Still felt very horrible due to damp dirty feeling.

09M 20: XX: XX

### **Feeling Alone**

I felt alone in the world.

04a F 09: XX: XX

### **Distortion of Time**

Feeling the days fly by and at the same time it seems to stand very still.

03F 32: XX: XX

### **Floating**

Wake up feeling 'floaty'.

03F 08: XX: XX

After coming from him I couldn't sleep I can't say I was happy or sad I was floating what I feel is good, it's a feeling like this I wouldn't regret. It was just perfect I just wanted to be with him.

24F 23: XX: XX

### **Guilty**

I woke up feeling bad like I did something bad yesterday.

12F 30: XX: XX

### **Increased Sexual Appeal**

I don't know what is wrong but somehow I am more attracted to women today. It's not a usual thing. I'm attracted to them but today it's like they read my thoughts they keep checking me out.

07aM 31: XX: XX

### **Lost**

I am always stressed and I have my fears. I fear about my school work, fear about life and everything. I think I am lost.

04a F 10: XX: XX

Ever since I started taking the remedy I feel like I am losing part of myself.

04F 08: XX: XX

### **Malevolent Spirit Present**

I had felt a strange presence in my room. I was asleep but I could hear breathing and could feel this presence over me. I was not afraid because I knew God was in control and would not allow this evil presence to hurt me in anyway. I kept my eyes closed and didn't want to look. I was sleeping alone. Felt like I was going to be killed. I prayed and it went away. I chose not to move. It felt very real.

16M 30: XX: XX

### **Separated Head**

The same day after taking the remedy I was feeling hot and I was feeling a little bit dizzy. And I felt like my head was going to come out.

04aF 01: XX: XX

### **Desire for Company**

Just wanted to be with my friends.

09M 04: XX: XX

Met my friend (mid-morning) to do some work. Was productive but just having company was better.

03F 05: XX: XX

### **Desire to go Home**

I was so excited when I woke up today. It's my last day in DURBAN. Finally.

06F 05: XX: XX

Slept like a baby. Don't know if I was dreaming or thinking I was just seeing myself at home with everyone.

06F 05: X: XX

### **Determination**

Woke feeling determined got straight up to start my day.

09M 10: XX: XX

### **Difficulty Concentrating, Decreased Focus and Distraction**

During the past few days I have been concentrating less and have been having no appetite.

07M 32: XX: XX

Today I don't feel so good nor do I look forward to the day and my testicles itch. I'm having less or no concentration when my testicles itch.

07M 33: XX: XX

I've been very noisy this evening I don't know why and lost concentration completely.

07M 37: XX: XX

Could not focus the whole day and had an early night.

09M 03: XX: XX

Even though I started learning a long time ago but I wasn't focused enough.

12F 30: XX: XX

Thoughts were scattered and cannot seem to focus.

03F 04: XX: XX

It was hard to focus on anything for a long time.

06F 00: XX: XX

I could feel my concentration shifting away from the paper.

07M 28: XX: XX

Felt very distracted, did not pay attention during lectures.

09M 07: XX: XX



Could not pay attention during lectures felt very tired most of the time.

09M 11: XX: XX

I studied again at 07: 00pm but for the life in me I was tired nothing was staying in my head but I carried on trying until I couldn't do it anymore and slept at 10: 00pm.

24F 04: XX: XX

Again I planned on getting work done but when I went to school I was distracted.

24F 28: XX: XX

I was tired all day, I couldn't study well in class.

30F 03: XX: XX

### **Disappointed Love and Heart Broken**

Back at work. Had lunch with a friend and cried my heart out. Something in me just broke. My body feels completely broken from the crying. simply exhausted. Nothing else to say except that I feel like a zombie. I don't even have the energy to pick myself up.

03F 26: XX: XX

...I saw the boy that broke my heart. The Lord knows my heart I was crushed. My heart literally felt like it was heavy and squeezed I was struggling for air I thought I was going to fall. My heart was literally sore. My mood was like I let go of everything I'm tired what I felt was too heavy. I had that feeling when you cry too much my chest was heavy and drained.

24F 02: XX: XX

For some reason I got sad I started listening to music and I cried I was missing him so much it hurt I just can't understand that he acts like he cared about me but he hurt me in the most painful way.

24F 20: XX: XX

Today I woke up with swollen eyes and I can't tell how I feel it's like I'm numb.

24F 21: XX: XX

Bad day I went to my boyfriend room and he was with a girl. I think they are dating because it was dark in the room. And I am angry my chest feels very hot. I have lots of energy, I am trying to take my mind off from the pain I am feeling.

30F 19: XX: XX

Today I had a real bad day, my boyfriend was with another girl in his room. Watching movie. I was very angry. my chest was feeling hot, my stomach was changing it was also hot. I was in pain, cause my heart was broken.

30F 20: XX: XX

...I was really not okay throughout the day I was emotionally hurt and I walked out and sorted out my issues.

04F 04: XX: XX

I don't know I couldn't put my finger on why I was feeling like this but I did need some attention from him. Well I wanted some attention he hasn't asked me for my number that frustrates me.

24F 00: XX: XX

I seem sad but I'm not just needing love.

24F 01: XX: XX

### **Disappointment**

Felt very disappointed with myself so fell asleep.

09M 09: XX: XX

We got our dp's for biotics today and that put me down I got 75 for my dp and I was disappointed cause I thought I done better than that an then I started feeling stressed out like what if I don't pass at the end of the year and just I have been trying to be first in class but I feel like my efforts are for nothing and that really sucks.

24F 31: XX: XX

### **Disorientation**

Felt very moody and disorientated from the morning.

09M 09: XX: XX

### **Elation**

I took my first powder this morning which made me feel elated but tired in a way.

28F 00: XX: XX

Felt a euphoric feeling.

09M 00: XX: XX

Felt usual happy feeling and talkativity.

09M 01: XX: XX

Spending the day with the girls. They make me feel alive and I am grateful for them.

03F 00: XX: XX

I feel happy to see all the people I haven't seen in about 6 months, others over a year.

06F 10: XX: XX

I slept for only 4 hours because I was celebrating all day.

08F 20: XX: XX

## **Fear**

### **General**

I generally feel confused and afraid, negative thoughts fill my mind used to be like this a long time ago.

15F 00: XX: XX

General fear in me.

15F 01: XX: XX

I am always stressed and I have my fears. I fear about my school work, fear about life and everything.

04aF 10: XX: XX

### **Dead**

I am so afraid of dead people I can't even look at them. I'm so afraid of cutting but I always try to overcome my fears. I don't want to see food near me I think that the smell from mortuary is all over me.

04aF 19: XX: XX

### **Fear Failure**

My personality is shy and passive and I have a fear of failure.

12F 00: XX: XX

I am a shy person with a fear of failure in a good relationship. I can't associate with people in relation to my social interaction.

12F 01: XX: XX

Fear of failure.

15F 00: XX: XX

Every time I go to write a test I make sure that I read and understand everything but when I get to a test room I feel scared and I lose control.

04aF 12: XX: XX

### **Narrow Spaces**

Claustrophobic all the time.

15F 04: XX: XX

Usually I get a claustrophobic feeling when I have a lot of work to do and that feeling does not go away until the work is complete.

28F 02: XX: XX

## **Self**

I am even scared of myself because I will end up doing wrong things.

04aF 14: XX: XX

## **Unknown**

Irrational unknown fear inside.

15F 03: XX: XX

Fear of the unknown.

15F 04: XX: XX

## **Forsaken Feeling**

Felt like the world was against me and felt very weak.

09M 06: XX: XX

My mood was too bad. I was feeling like no one cares about me. I don't know why I felt like that.

12F 08: XX: XX

I was going to study but I had a change in mood. I felt alone in the world.

04aF 09: XX: XX

I feel very distant from everyone around me and I am still constipated.

19F 09: XX: XX

## **Hatred of Self**

I woke up feeling stressed and I was not okay I hated myself for coming here. I kept asking many questions that I don't even understand.

04aF 11: XX: XX

I am no longer a good person to be around. I am always shouting at everyone now people think that I am crazy. I am even scared of myself because I will end up doing wrong things.

04aF 14: XX: XX

## **Hopeful**

Woke up hopeful. Don't know why. Had a long sleep.

01aF 21: XX: XX

## **Horror Movies**

I enjoy watching movies but recently I started watching horror movies. I never thought I would enjoy them but I do.

08F 34: XX: XX

## **Hurry**

Hurried in doing the major things and finished early.

01aF 05: XX: XX

First meal for the day at 2pm at Indian restaurant. Afterwards felt like a blob for wolfing down so fast.

03F 09: XX: XX

## **Impatience**

Retail hours does not suite me at all. I am already miserable. It's this sterile petty environment that I cannot wrap my head around. I have no patience at all.

03F 19: XX: XX

Feeling increasingly more impatient and irritable.

03F 30: XX: XX

Emotion: Irritated easily, at small things, unusual, impatient and short.

25F 08: XX: XX

## **Insecurity**

My skin is horrible and I feel restless and insecure and emotionally drained.

03F 05: XX: XX

## **Irritability**

Am feeling a bit irritable just don't feel like dealing with people.

03F 14: XX: XX

Feeling increasingly more impatient and irritable.

03F 30: XX: XX

The weather was hot and everything around me was annoying me.

04aF 09: XX: XX

Felt irritable and was in a bad mood for most of the day.

10M 10: XX: XX

Unusual symptom – Irritability.

15F 00: XX: XX

Unusual symptom – Can't fall asleep, irritable.

15F 01: XX: XX

Unexplained irritability no desire to do anything.

15F 02: XX: XX

Relatives say I've become moody and unsociable which is unusual for me.

15F 02: XX: XX

Time to go to class my mood just changed and I was irritated and angry because I felt like I was forced to do something I didn't want to do.

24F 06: XX: XX

Today I woke up in a bad mood I'm not sure why but all I want to be is alone my nephews were making a noise I was irritated by their mother.

24F 29: XX: XX

I was doing my assignment whole morning in the lab and I just got irritated because people were disturbing so that they can print their work.

24F 34: XX: XX

Felt very moody and disorientated from the morning.

09M 09: XX: XX

Woke up sweaty and grumpy.

09M 12: XX: XX

Woke up a bad mood lasted till midday.

10M 16: XX: XX

Slept in a really bad mood.

10M 15: XX: XX

I was so annoyed about my life seems as if everything is not going according to the way I had planned it would.

04F 12: XX: XX

Felt very thirsty and annoyed by a few friends and everything at campus.

09M 11: XX: XX

I have this headache: C – feel agitated, weakness in limbs – empty feeling in stomach; L – Right side – feels pain is on inside; A – came on recently; M - > sitting still – worse trying to concentrate; S – like this dull pain that makes me drowsy.

18F 14: XX: XX

Today I felt irritated I fought with everyone.

24F 18: XX: XX

I was just in a very moody mood and took it out on everyone that said something I didn't want to hear.

24F 07: XX: XX

These days I get irritated very easily.

01F 34: XX: XX

Was irritable for most of the morning. It seems like a trend for the past few days. My day starts with off with me being irritable and in a bad mood which is elevated by the slightest of things.

10M 11: XX: XX

I felt like people were annoying me without a reason.

12F 06: XX: XX

Emotion: Irritated easily, at small things, unusual, impatient and short.

25F 08: XX: XX

### **Increased Concentration**

...I was able to concentrate on things for a longer time.

06F 01: XX: XX

When I had taken the remedy I showed high energy in concentration and focus and was learning quickly.

07a M 05: XX: XX

### **Laughter**

I ate breakfast had a lot of laughing with my room mates.

08F 04: XX: XX

I laughed a lot and kept myself busy make sure I did.

01aF 20: XX: XX

### **Laziness**

Had a lot of energy but I felt lazy didn't want to do anything but just sit and relax.

01aF 14: XX: XX

Apart from feeling lazy and tired no usual symptoms to report.

03F 24: XX: XX

I am so lazy when doing anything whenever I read or practice I keep on forgetting everything that has happened to me.

04aF 08: XX: XX

I felt so lazy to go to school.

04aF 12: XX: XX

No desire to do anything.

15F 01: XX: XX

### **Loquacity**

Was told I had much more energy and talked more often.

09M 00: XX: XX

13: 00 Was very talkative again after taking proving powder.

09M 00: XX: XX

Felt full of energy and talkative just as before.

09M 01: XX: XX

Felt usual happy feeling and talkativity.

09M 01: XX: XX

Very talkative during lectures.

09M 07: XX: XX

I've been very noisy this evening I don't know why and lost concentration completely.

07aM 37: XX: XX

### **Love Towards Family**

I had a light dream for the first time I could dream. Like I was very shocked and my dream made me realise that I should be with my mommy and reconnect with her as she is far from me. I really miss my mom.

04aF 15: XX: XX

### **Mood Irregularities**

#### **Agreeable**

Felt quite energetic and happy.

06F 03: XX: XX

My mood is great.

19F 01: XX: XX



My mood has improved and today we had an exercise session so I was tired but my chest never felt tight or sore.

19F 03: XX: XX

### **Alternating**

It is a little bit cold and I've been having mood swings very bored then all excited.

07aM 37: XX: XX

Meditated on the day and realised that my mood kept jumping from sad to happy to sad to happy. This happened every hour. At times I would feel very annoyed and come close to having an outburst.

09M 12: XX: XX

My day starts with off with me being irritable and in a bad mood which is elevated by the slightest of things. But from 12pm onwards I'm my happy self.

10M 11: XX: XX

### **Changeable**

I am showing a lot of mood swings from feeling happy to feeling down now. And I feel super angry like beating something anything.

07aM 05: XX: XX

Took note of the various mood changes. Happy to sad to annoyed to aggressive to happy.

09M 07: XX: XX

Still having mood swings.

10M: 12: XX: XX

Mood swings no other pain. Slept in a really bad mood.

10M 15: XX: XX

### **Obligation to Others and Helping Others**

Woke up and went to help my friend with research, although utterly exhausted just pushing myself to try and help her.

03F 05: XX: XX

Don't even feel like waking up but have already committed myself to helping someone today.

03F 10: XX: XX

This was probably the worst day emotionally. I had to leave to leave my friends and boyfriend for my sick brother. At the same time I wanted to be with them. I had to make the tough choice and live with it. I had made it, but the hard part was actually going through it.

06F 12: XX: XX

### **Occupation Ameliorates**

Occupied myself with a few house chores and packing. Feeling a bit more relaxed now. Kind of used to the environment.

06F 14: XX: XX

Cleaned or attempted to clean notes/room managed to get some order.

03F 09: XX: XX

### **Overwhelmed (Helplessness)**

I felt so lazy to go to school I felt like I could just disappear from this world. I was not okay at all. I was so annoyed about my life seems as if everything is not going according to the way I had planned it would. I have so much pressure that I cannot deal with it. I am so lost. Life just brought the worst things in my life. I am always stressed and scared.

04aF 12: XX: XX

Feel overwhelmed.

18F 20: XX: XX

While I was in the toilet I cried cause I just feel overwhelmed like my body is literally feeling stressed my back is sore like I'm carrying something heavy and I'm just thinking about a lot of things that's hurting me.

24F 31: XX: XX

### **Patience**

What I have noticed is that I'm starting to be more patient because back in the day I hated queues but now I seem to be more patient about them.

12F 29: XX: XX

### **Physical Exertion Ameliorates**

I woke up and went for jogging to make my body feel fresh.

12F 13: XX: XX

### **Positivity of Mind**

Felt very awake and positive.

09M 01: XX: XX

### **Prostration (Exhaustion)**

Woke up and went to help my friend with research, although utterly exhausted just pushing myself to try and help her.

03F 05: XX: XX

Really really exhausted. Don't even feel like waking up but have already committed myself to helping someone today. If I put my head back on the pillow I will fall asleep.

03F 10: XX: XX

Worked for 9: 30 - 1: 30pm quite drained mentally.

03F 10: XX: XX

Feeling very emotionally drained today and over the last few days.

03F 11: XX: XX

It's been an exhausting year feeling physically mentally and emotionally drained.

03F 12: XX: XX

I came home exhausted more emotionally then physically.

03F 23: XX: XX

I slept for 6 hours. I was actually tired today because I was writing my test and it drained me.

08F 28: XX: XX

### **Religious**

I woke up feeling happy and blessed and the only thing I could think about is going to church.

04F 16: XX: XX

I felt so blessed at church and my day was awesome.

12F 16: XX: XX

Woke up and went to the temple. The sense of calm and stillness is phenomenal and I wanted to start off the last month on a good note.

03F 18: XX: XX

### **Sadness**

I wasn't that all smiles. I was questioning myself a lot about school work. I was just down tried to hide it but I wasn't myself.

01F 09: XX: XX

Feeling very down and heading to bed.

07M 31: XX: XX

I was feeling down and tired.

19F 14: XX: XX

Unusual symptom – Extremely emotional sad.

15F 00: XX: XX

### **Stressed**

I am always stressed and scared. Every time I go to write a test I make sure that I read and understand everything but when I get to a test room I feel scared and I lose control.

04aF 12: XX: XX

I'm writing a test tomorrow and I was so stressed.

All day and I felt so nervous.

08F 26: XX: XX

I have a lot of stress due to the upcoming case on the 13<sup>th</sup> of the April.

14M 25: XX: XX

### **Taciturn**

I did not feel like talking to anyone.

26F 11: XX: XX

I feel like not talking.

27M 05: XX: XX

### **Tranquillity**

I was relaxed which stressed me as I should be panicking as I was writing the next day.

01aF 10: XX: XX

I woke up feeling fresh and the weather was completely fine. I was so relaxed and I was happy.

04aF 15: XX: XX

I woke up feeling good and the weather was nice. I went to my first lecture feeling confident and I was so relaxed everything seems to be alright.

04aF 20: XX: XX

After taking my second powder I still had that sense of calm but I didn't pay much attention to it and thought it was from the morning.

28F 00: XX: XX

### **Weak Memory**

It was hard to study cause I couldn't memorise anything.

24F 29: XX: XX

It's my first morning at my Aunties place in Harare.

Everything feels different, sometimes I kind of forget where I am.

06F 08: XX: XX

Woke up with a feeling of being lost.

Everything has changed. All the kids, houses, trees look different. I can't even recognise some of the people anymore, made me feel like I don't belong but I was home.

06F 13: XX: XX

### **Weeping**

For some reason I got sad I started listening to music and I cried I was missing him so much it hurt I just can't understand that he acts like he cared about me but he hurt me in the most painful way. I try not to think of him but I can't help but miss him, he's the boy I compare all the other boys to and just wish he would check up on me. I cried so much that my chest started feeling heavy and sore. I fell asleep crying this happened in a long time but I just really miss him.

24F 20: XX: XX

## **4.3.2 Vertigo**

### **Aetiology**

The only problem is to take a taxi because I get sick when I'm in a taxi. Caused by the petrol smell.

12F 15: XX: XX

So we travelled for 8 hours and I was sick in the car I felt dizzy. Caused by the petrol.

12F 23: XX: XX

### **Concomitants**

I am at a lecture now feeling dizzy and my nose is still blocked.

14M 12: XX: XX

## **Nausea**

On my way home I felt dizzy and as if I was about to vomit.

12F 15: XX: XX

So we travelled for 8 hours and I was sick in the car I felt dizzy, with a headache and felt as if I was going to vomit.

12F 23: XX: XX

## **Perspiration**

On my way home I felt dizzy and as if I was about to vomit. I started sweating.

12F 15: XX: XX

## **Modality**

### **Water Ameliorates**

On my way home I felt dizzy and as if I was about to vomit. I started sweating. I drank more and more of water. I got home safely ...felt better for cold water.

12F 15: XX: XX

So we travelled for 8 hours and I was sick in the car I felt dizzy, with a headache and felt as if I was going to vomit. Felt better for cold water.

12F 23: XX: XX

### **Eating Ameliorates**

I had breakfast at 7: 00 then the dizziness went away.

08F 01: XX: XX

All my systems were normal except that I felt dizzy but it went away after eating.

08F 01: XX: XX

### **Motion Aggravates**

The only problem is to take a taxi because I get sick when I'm in a taxi. On my way home I felt dizzy and as if I was about to vomit. I started sweating. I drank more and more of water. I got home safely.

12F 15: XX: XX

So we travelled for 8 hours and I was sick in the car I felt dizzy, with a headache and felt as if I was going to vomit.

12F 23: XX: XX

### **Sitting Ameliorates**

Better for closing eyes and sitting or lying down on my stomach.

08F 01: XX: XX

This time I experienced very sleepiness then feeling lightheaded. It felt better when I sat down.

20M 00: XX: XX

### **Sensation**

All my systems were normal except that I felt dizzy but it went away after eating, was worse with eyes felt like the earth was spinning.

08F 01: XX: XX

### **Time**

#### **Morning**

I took the remedy at 6: 00am, I felt dizzy after taking it.

08F 01: XX: XX

#### **On Waking**

I woke up feeling dizzy and sick.

4aF 26: XX: XX

### **4.3.3 Head**

#### **Aetiology**

These days I get irritated very easily. I wasn't myself in the evening. I was frustrated and angry. Due to being unable to find my friends for study I got frustrated to the point I had a headache.

01aF 34: XX: XX

#### **Concomitants**

During the evening I had a headache and I was sneezing and I felt tired then I had chips with biscuits and Oros juice.

04aF 33: XX: XX

Drove from Empangeni to Durban while driving eyes started to water and headache was severe.

15F 05: XX: XX

sStrong smells: I would get nauseous, a headache on my right temple, it was a poking pain and felt better when I sat down.

25F 08: XX: XX

...I realised some sneezing and headache as some flu sign.

26F 11: XX: XX

I woke up with a huge headache and my eyes were swelling The weather was cold and I was freezing while having headache with swelling eyes.

04aF 18: XX: XX

Today I woke up at about 6: 30am and I was in so much pain. My period pain had started again and now they were accompanied by a terrible headache. It was as if someone was pulling on my uterus from the inside and someone else is knocking on my entire head with a hammer.

26F 01: XX: XX

## **Location**

### **Forehead**

Before that I had a headache from my forehead then moved towards the top of my head.

16M 35: XX: XX

Towards evening headache was around eyes forehead back of head and neck is stiff.

15F 5: XX: XX

Terrible constant headache feels like a migraine (return of old symptom) front of head around eyes. Causing right eye to be smaller.

15F 02: XX: XX

Woke up lethargic, slight headache front of head around eyes.

15F 05: XX: XX

My headache is worse. It is located in the forehead and sides.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot.

27M 04: XX: XX

I had a headache, the pain was still on the front but it was only for a few minutes. My nose is still blocked.

30F 04: XX: XX



I had a headache, it started around 18: 45. It was just a small pain in front, I had it for only few minutes then it was gone.

30F 24: XX: XX

Today I had a headache but it was just a little pain, the pain didn't last that long it was only for few minutes then it disappeared. The pain was on the front, my head was burning.

30F 11: XX: XX

Before that I had a headache from my forehead then moved towards the top of my head. It was a throbbing type of pain – pulsating; exploding sensation. I thought sleeping would help but it made it worse. This was the first time I had a headache like this.

16M 35: XX: XX

I woke up with some headache pains (forehead and sharp) today.

26F 12: XX: XX

### **Occiput**

Got to Durban lay down for 10 minutes. Got up and headache got really bad moved to back of head neck.

15F 05: XX: XX

Body: Slight headache. Back of my head. Whole head. 2/3x in the week. Exploding pain; right temple; pain was progressive. It is worse for exertion.

22M 02: XX: XX

### **Sides**

At school afternoon 13: 35 Having a bad headache lateral in both hemispheres and a runny tummy.

07aM 13: XX: XX

I went home at about 4: 00pm and I had some minor headache pains on both sides of my head.

26F 07: XX: XX

My headache is worse. It is located in the forehead and sides.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot.

27M 04: XX: XX

I have a heavy headache on the right side of my head and I have a sharp pain on my abdomen.

12F 11: XX: XX

## **Temples**

Body: Very bad headache while playing soccer. Front area of temple.

22M 03: XX: XX

Strong smells: I would get nauseous, a headache on my right temple, it was a poking pain and felt better when I sat down.

25F 08: XX: XX

Body: Slight headache. Back of my head. Whole head. 2/3x in the week. Exploding pain; right temple; pain was progressive.

22M 02: XX: XX

## **Modality**

My headache is worse. It is located in the forehead and sides. It is better in open air and for being alone.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot. Better: open air, not listening to music.

27M 04: XX: XX

I drank water but after a while I got a headache, it was like I had a head rush I closed my eyes to calm my insides. Then I went for fresh air it helped.

24F 06: XX: XX

I drank water but after a while I got a headache, it was like I had a head rush I closed my eyes to calm my insides. Then I went for fresh air it helped.

24F 06: XX: XX

Have been experiencing daily headaches possibly due to air-conditioning.

03F 19: XX: XX

Body: Very bad headache while playing soccer.

22M 03: XX: XX

Constant headache getting worse with light.

15F 03: XX: XX

Body: Slight headache. Back of my head. Whole head. 2/3x in the week. Exploding pain; right temple; pain was progressive. It is worse for exertion. And worse for sleeping and watching television. Lasted a couple hours. Went away for 1-2days and came back worse.

22M 02: XX: XX

Today I woke up at about 6: 30am and I was in so much pain. My period pain had started again and now they were accompanied by a terrible headache. It was as if someone was pulling on my uterus from the inside and someone else is knocking on my entire head with a hammer.

26F 01: XX: XX

Drove from Empangeni to Durban while driving eyes started to water and headache was severe.

15F 05: XX: XX

My headache is worse. It is located in the forehead and sides. It makes me go crazy. I even forgot where my recording book is, I thought I lost it. My forehead is hot. It is Worse: with noise; indoors with warmth.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot. It is worse with warmth, and after listening to music.

27M 04: XX: XX

Strong smells: I would get nauseous, a headache on my right temple, it was a poking pain and felt better when I sat down.

25F 08: XX: XX

Whole head, heavy ball sensation and better for pressure.

28F 14: XX: XX

I have this headache: C – feel agitated , weakness in limbs – empty feeling in stomach; L – Right side – feels pain is on inside; A – came on recently; M - > sitting still – worse trying to concentrate; S – like this dull pain that makes me drowsy.

18F 14: XX: XX

Symptoms I'm experiencing are: headache, discharges from my nose, and aching of the skin around my nose. I feel like not talking. The headache is better with sleeping.

27M 05: XX: XX

Have a headache from the heat.

03F 29: XX: XX

Before that I had a headache from my forehead then moved towards the top of my head. It was a throbbing type of pain – pulsating; exploding sensation. I thought sleeping would help but it made it worse. This was the first time I had a headache like this.

16M 35: XX: XX

## **Sensation**

### **Dryness**

Symptoms: fatigue, dry scalp.

03F 10: XX: XX

### **Heat**

My forehead is hot.

27M 00: XX: XX

My forehead is hot as if I'm catching a fever.

27M 04: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon.

I can feel my forehead is hot.

27M 04: XX: XX

### **Heaviness**

After a while my head felt big and heavy the baddest thing is that I was still at church and not feeling okay.

04aF 00: XX: XX

Whole head, heavy ball sensation and better for pressure.

28F 14: XX: XX

### **Pain**

Took my third powder at 21: 31 had a minor migraine it lasted for about 5-6 minutes.

01aF 01: XX: XX

I just had a minor headache when I woke up. I still had the headache in the afternoon. It only got better around 4 - 4: 30. It was like a pounding sensation on my left side.

01aF 06: XX: XX

Got a headache but it didn't last that long as I didn't have it in the evening.

01aF 17: XX: XX

I had a minor headache in the evening. It didn't last for long.

01aF 20: XX: XX

I had a little headache but It was okay for a while.

04aF 07: XX: XX

I woke up early and I had flu and headache was really hurtful to me.

04aF 32: XX: XX

When I get to class I had a huge headache that I couldn't control. It was so painful but I forced myself and continued with class.

04a F 34: XX: XX

I had headache and a sharp pain between my 8<sup>th</sup> and 12<sup>th</sup> rib. It lasted for 2hrs.

12F 08: XX: XX

The headache came back from 4 - 6pm but it ended before 7pm.

14M 21: XX: XX

Towards evening headache was around eyes forehead back of head and neck is stiff.

15F 05: XX: XX

Body: Slight headache. Back of my head. Whole head.

22M 02: XX: XX

Body: Headaches.

22M 18: XX: XX

I drank water but after a while I got a headache, it was like I had a head rush I closed my eyes to calm my insides. Then I went for fresh air it helped.

24F 06: XX: XX

Symptoms I'm experiencing are: headache, discharges from my nose, and aching of the skin around my nose.

27M 05: XX: XX

Today I woke up at about 6: 30am and I was in so much pain. My period pain had started again and now they were accompanied by a terrible headache. It was as if someone was pulling on my uterus from the inside and someone else is knocking on my entire head with a hammer.

26F 01: XX: XX

I woke up with a slight headache at 10: 00am.

26F 29: XX: XX

Had a mild headache in the afternoon took one panado. I have a very low threshold for pain. Feel extremely fatigue.

03F 14: XX: XX

During the evening I had a headache and I was sneezing and I felt tired then I had chips with biscuits and Oros juice.

04aF 33: XX: XX

Drove from Empangeni to Durban while driving eyes started to water and headache was severe.

15F 05: XX: XX

Strong smells: I would get nauseous, a headache on my right temple, it was a poking pain and felt better when I sat down.

25F 08: XX: XX

...I realised some sneezing and headache as some flu sign.

26F 11: XX: XX

I woke up with a huge headache and my eyes were swelling The weather was cold and I was freezing while having headache with swelling eyes.

04aF 18: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot. Better: open air, not listening to music .

27M 04: XX: XX

I drank water but after a while I got a headache, it was like I had a head rush I closed my eyes to calm my insides. Then I went for fresh air it helped.

24F 06: XX: XX

These days I get irritated very easily. I wasn't myself in the evening. I was frustrated and angry. Due to being unable to find my friends for study I got frustrated to the point I had a headache.

01aF 34: XX: XX

I woke up with a heavy headache. I couldn't even open my eyes so I decide to keep them closed.

12F 03: XX: XX

I drank water but after a while I got a headache, it was like I had a head rush I closed my eyes to calm my insides. Then I went for fresh air it helped.

24F 06: XX: XX

Have been experiencing daily headaches possibly due to air-conditioning.

03F 19: XX: XX

I just had a minor headache when I woke up. I still had the headache in the afternoon. It only got better around 4 - 4: 30. It was like a pounding sensation on my left side.

01aF 06: XX: XX

My head pain lasted for several hours and it faded away.

14M 19: XX: XX

Constant headache getting worse with light.

15F 03: XX: XX

Constant headache.

15F 04: XX: XX

I have a headache and I am coughing non-stop. It lasted for 3 minutes.

14M 11: XX: XX

11: 00am Headache very dull around eyes.

15F 00: XX: XX

I have this headache: C – feel agitated , weakness in limbs – empty feeling in stomach; L – Right side – feels pain is on inside; A – came on recently; M - > sitting still – worse trying to concentrate; S – like this dull pain that makes me drowsy.

18F 14: XX: XX

At school afternoon 13: 35 Having a bad headache lateral in both hemispheres and a runny tummy.

07aM 13: XX: XX

I have a heavy headache on the right side of my head and I have a sharp pain on my abdomen.

12F 11: XX: XX

Body: Slight headache. Back of my head. Whole head. 2/3x in the week. Exploding pain; right temple; pain was progressive. It is worse for exertion. Went away for 1 - 2 days and came back worse.

22M 02: XX: XX

Body: Very bad headache while playing soccer. Front area of temple. I couldn't finish the game, was the same as before but worse.

22M 03: XX: XX

My headache is worse. It is located in the forehead and sides. It makes me go crazy. I even forgot where my recording book is, I thought I lost it. My forehead is hot. It is worse: with noise; indoors with warmth.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot. It is worse with warmth, and after listening to music.

27M 04: XX: XX

Symptoms I'm experiencing are: headache, discharges from my nose, and aching of the skin around my nose. I feel like not talking. The headache is better with sleeping.

27M 05: XX: XX

Have a headache from the heat.

03F 29: XX: XX

Before that I had a headache from my forehead then moved towards the top of my head.

16M 35: XX: XX

Towards evening headache was around eyes forehead back of head and neck is stiff.

15F 5: XX: XX

Terrible constant headache feels like a migraine (return of old symptom) front of head around eyes. Causing right eye to be smaller.

15F 02: XX: XX

Woke up lethargic, slight headache front of head around eyes.

15F 05: XX: XX

My headache is worse. It is located in the forehead and sides.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot.

27M 04: XX: XX

Today I had a headache but it was just a little pain, the pain didn't last the long it was only for few minutes then it disappeared. The pain was on the front, my head was burning.

30F 11: XX: XX

Before that I had a headache from my forehead then moved towards the top of my head. It was a throbbing type of pain – pulsating; exploding sensation. I thought sleeping would help but it made it worse. This was the first time I had a headache like this.

16M 35: XX: XX

I woke up with some headache pains (forehead and sharp) today.

26F 12: XX: XX

Got to Durban lay down for 10 minutes. Got up and headache got really bad moved to back of head neck.

15F 05: XX: XX

At school afternoon 13: 35 Having a bad headache lateral in both hemispheres and a runny tummy.

07aM 13: XX: XX

I went home at about 4: 00pm and I had some minor headache pains on both sides of my head.

26F 07: XX: XX



My headache is worse. It is located in the forehead and sides.

27M 00: XX: XX

I also have headache. It is located in front of the head in the sides. It started in the afternoon.

I can feel my forehead is hot.

27M 04: XX: XX

### **Perspiration**

Perspiration: Yes, while dreaming – Chest and head.

22M 01: XX: XX

### **Shaking**

Head feels loose shaky.

15F 02: XX: XX

### **Time**

#### **Afternoon**

Had a mild headache in the afternoon took one Panado. I have a very low threshold for pain.

Feel extremely fatigued.

03F 14: XX: XX

Headache is a recent symptom. It worse in the afternoon.

27M 04: XX: XX

#### **Morning**

Today I woke up at about 6: 30am and I was in so much pain. My period pain had started again and now they were accompanied by a terrible headache. It was as if someone was pulling on my uterus from the inside and someone else is knocking on my entire head with a hammer.

26F 01: XX: XX

#### **Waking On**

I woke up with a slight headache at 10: 00am.

26F 29: XX: XX

I woke up with some headache pains (forehead and sharp) today.

26F 12: XX: XX

#### **4.3.4 Eye**

##### **Concomitants**

##### **Lachrymation During**

I don't feel well today, It like am having a flu. One side of my nose is blocked. My nose is itchy. My eyes were having water most of the time, and they were painful it was like I needed to sleep.

30F 01: XX: XX

##### **Location**

##### **Inner Canthi**

Sensation, irritating feeling as if something is constantly rubbing against the eyeball. Most of the medial part of the eye is swollen, inner part of the eyelid is red.

10M 08: XX: XX

##### **Left**

The area surrounding my left eye was painful. It was more of a staying pain not striking but feeling way better.

07aM 19: XX: XX

##### **Left Eye Lid**

Woke up with a slight pain in my left eye. Right eye is painless but swollen and now the pain has moved to the left below the lower eyelid.

10M 14: XX: XX

Left eye pain became severe. Feels like a bubble is forming.

10M 15: XX: XX

##### **Lower Eyelid**

Right eye is sore again. This time there's a bubble under the lower eyelid. Eyelid is red almost as if it were inflamed.

10M 18: XX: XX

##### **Right**

Woke up with extreme pain in my right eye. It is becoming worse every day.

10M 20: XX: XX

## **Right Eyelid**

Eye is still sore. Right eye is starting to hurt below the lower eyelid.

10M 16: XX: XX

Right eye is sore again. This time there's a bubble under the lower eyelid. Eyelid is red almost as if it were inflamed.

10M 18: XX: XX

## **Modality**

### **Closing Eyes Aggravates**

My eyes are aching, also I have non-irritating watery discharge in my nose. The discharge is clear. Worse: In the morning and night when closing eyes.

27M 10: XX: XX

### **Closing Eyes Ameliorates**

All my systems were normal except that I felt dizzy but it went away after eating, was worse with eyes felt like the earth was spinning. Better for closing eyes and sitting or lying down on my stomach.

08F 01: XX: XX

### **Light Aggravates**

From 5pm onwards I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball. Made worse by moving my eye, bright light e.g. cell phone, sunlight, slight pressure.

10M 08: XX: XX

### **Motion Aggravates**

From 5pm onwards I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball. Made worse by moving my eye, bright light e.g. cell phone, sunlight, slight pressure.

10M 08: XX: XX

### **Pressure Aggravates**

From 5pm onwards I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball. Made worse by moving my eye, bright light e.g. cell phone, sunlight, slight pressure.

10M 08: XX: XX

### **Touch Aggravates**

Woke up with no pains. Eye is much better only hurts when touched.

10M 11: XX: XX

Eye looks bad but only hurts when touched.

10M 13: XX: XX

Eye is only sore when touched.

10M 17: XX: XX

### **Warmth Aggravates**

My eyes are aching, they are worse with warm water (shower).

27M 04: XX: XX

### **Warm Application Ameliorates**

From 5pm onwards I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball. Made worse by moving my eye, bright light e.g. Cell phone, sunlight, slight pressure. Made better with warm water.

10M 08: XX: XX

### **Sensation**

#### **Heat**

It's not burning but feels hot – Only the right eye.

18F 02: XX: XX

#### **Heaviness**

My right nostril feels congested and my right eye feels like there's something in it – It feels heavy.

18F 02: XX: XX

#### **Inflamed**

I feel like its swelling or getting smaller because the eye itself is getting swollen – If that makes sense.

18F 02: XX: XXX

Today I woke up with swollen eyes and I can't tell how I feel its like I'm numb.

24F 21: XX: XX

## **Itching**

My sinus is worse than ever. It has been a long time since I had this. My eyes are itching...

27M 18: XX: XX

## **Irritation**

Sensation, irritating feeling as if something is constantly rubbing against the eyeball. Most of the medial part of the eye is swollen, inner part of the eyelid is red.

10M 08: XX: XX

## **Pain**

From 5pm onwards I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball.

10M 08: XX: XX

Woke up with extreme pain in my right eye. It is becoming worse every day.

10M 20: XX: XX

The area surrounding my left eye was painful. It was more of a staying pain not striking but feeling way better.

07aM 19: XX: XX

My eyes are aching, also I have non-irritating watery discharge on my nose. The discharge is clear.

27M 10: XX: XX

## **Photophobia**

Sensitive to light (constant).

15F 02: XX: XX

Sensitive to light.

15F 03: XX: XX

From 5pm onwards, I developed a pain in the medial part of my right eye. This may not be a symptom of the proving substance. The pain is concentrated at the medial part but also extends throughout the eyeball. Made worse by moving my eye, bright light e.g. cell phone, sunlight, slight pressure.

10M 08: XX: XX

## **Red**

My eyes are better, but they are completely red.

27M 11: XX: XX

## **Smaller**

Terrible constant headache feels like a migraine (return of old symptom) front of head around eyes. Causing right eye to be smaller.

15F 02: XX: XX

I feel like its swelling or getting smaller because the eye itself is getting swollen – If that makes sense.

18F 02: XX: XX

## **Stye**

Eye is just as sore as it was yesterday. Eye pain persisted throughout the day. The swelling got worse. Bubble is forming under upper eyelid.

10M 09: XX: XX

Left eye pain became severe. Feels like a bubble is forming.

10M 15: XX: XX

Eye is only sore when touched. The swelling is still present. The bubble under eyelid is a lot bigger.

10M 17: XX: XX

Right eye is painless but there is a ball like structure below the eyelid less swelling.

10M 12: XX: XX

## **Swollen**

I feel like its swelling or getting smaller because the eye itself is getting swollen – If that makes sense.

18F 02: XX: XX

Right eye is less swollen. Left eye is more swollen.

10M 15: XX: XX

Sensation – Irritating feeling as if something is constantly rubbing against the eyeball. Most of the medial part of the eye is swollen; inner part of the eyelid is red.

10M 08: XX: XX

## **Time**

### **Morning**

Woke up with my eye severely sore and swollen. Right eye is progressively getting worse.

10M 19: XX: XX

I woke up early in the morning my eyes were blinking and they were itchy and hurting, I couldn't apply anything or use medicine. I handled every pain that I was feeling and let it pass.

04aF 27: XX: XX

#### **4.3.5 Vision**

##### **Blurry**

Unusual symptom. My vision seems blurry.

15F 00: XX: XX

#### **4.3.6 Nose**

##### **Concomitants**

##### **Cough with Congestion**

My blocked nose caused me to cough a lot.

14M 15: XX: XX

##### **Sleepiness**

I took a shower and I was sneezing and I was feeling tired.

04aF 26: XX: XX

##### **Aetiology**

##### **Cold**

But I was sneezing a bit, I think from the cold weather.

06F 19: XX: XX

##### **Modality**

##### **Open Air Ameliorates**

Discharge from the nose is clear. Sneezing is worse in doors, better in open air.

27M 03: XX: XX

##### **Cold Ameliorates**

At night when I was in bed, both my nostrils got blocked. Worse with warm because the heater was on. Better for cold, after I switched it off and I got better.

27M 20: XX: XX

### **Heat Aggravates**

At night when I was in bed, both my nostrils got blocked. Worse with warm because the heater was on. Better for cold, after I switched it off and I got better.

27M 20: XX: XX

### **Motion Ameliorates**

I'm producing discharges on my nose. They are clear and watery. Modalities: worse: In the morning, when sitting down and face down. Better: In motion, with warmth.

27M 09: XX: XX

Watery discharge in my nose. Worse in the morning after a shower. Better: As the day progresses and better when in motion.

27M 17: XX: XX

### **Warmth Ameliorates**

I'm producing discharges on my nose. They are clear and watery. Modalities: worse: In the morning, when sitting down and face down. Better: In motion, with warmth. 27M 09: XX: XX

### **Sensation**

#### **Congestion**

I am only having a blocked nose.

07aM 03: XX: XX

Its hot in the morning. I am having a blocked nose. I think it's because I ate ice cream and I wear only a vest and shorts.

07aM 11: XX: XX

I'm having a blocked nose and left sided back and neck pain. Only the left side of the nose is blocked.

07aM 16: XX: XX

Nose feels like its clamped closed.

15F 04: XX: XX

Nose stuffy both nostrils.

15F 05: XX: XX

Nose is still stuffy.

15F 05: XX: XX



My right nostril feels congested and my right eye feels like there's something in it – It feels heavy.

18F 02: XX: XX

My voice was also very weird, it was as if my chest and nose were blocked. My nose was slightly blocked but my chest felt fine.

26F 12: XX: XX

My nose felt more blocked than yesterday.

26F 13: XX: XX

One side of my nose is blocked.

30F 01: XX: XX

I was tired all day, I couldn't study well in class. Am having a running nose all day and it still blocked.

30F 03: XX: XX

I had a headache, the pain was still on the front but It was only for a few minute. My nose is still blocked.

30F 04: XX: XX

My blocked nose caused me to cough a lot.

14M 15: XX: XX

At night when I was in bed, both my nostrils got blocked. Worse with warm because the heater was on. Better for cold, after I switched it off and I got better .

27M 20: XX: XX

My nose is still blocked one side on the left it blocked more at night.

30F 02: XX: XX

My blocked nose eased before I fell asleep.

14M 19: XX: XX

I woke up with a blocked nose I could not inhale properly and had mucous all over my nose.

14M 12: XX: XX

I had a normal night. I slept for 5 hours due to studying woke up with a blocked nose again and coughing.

14M 13: XX: XX

My ears and eyes are fine and hearing and vision is ok my head has increased temperature my nose is still blocked and my throat is fine.

14M 18: XX: XX

## **Coryza**

My nose has blocked and a lot of mucous is coming through.

14M 11: XX: XX

I woke up with a runny nose, which lasted the whole day plus some of the night.

10M 18: XX: XX

## **Discharge**

I'm having discharge from my nose and I'm sneezing.

27M 03: XX: XX

I have discharges from my nose.

27M 04: XX: XX

Symptoms I'm experiencing are: headache, discharges from my nose, and aching of the skin around my nose.

27M 05: XX: XX

Am only having a running nose.

30F 05: XX: XX

The discharges are worse in the morning and aching of the nose is worse after shower.

27M 05: XX: XX

I'm producing discharges on my nose. They are clear and watery. Worse in the morning, when sitting down and face down.

27M 09: XX: XX

My eyes are aching, also I have non-irritating watery discharge on my nose. The discharge is clear.

27M 10: XX: XX

Watery discharge in my nose. Worse: In the morning after a shower.

27M 17: XX: XX

Discharge from the nose is clear. Sneezing is worse in doors, better in open air.

27M 03: XX: XX

Am having a running nose all day and it still blocked.

30F 03: XX: XX

Sinus overproduction of mucous lasted for about an hour.

10M 14: XX: XX

My nose has blocked and a lot of mucous is coming through.

14M 11: XX: XX

I woke up with a blocked nose I could not inhale properly and had mucous all over my nose.

14M 12: XX: XX

### **Dryness**

My mucous membrane of the nose feels dry.

27M 23: XX: XX

### **Heaviness**

Nose feels heavy – It's turned red because of the excessive sneezing.

18F 00: XX: XX

### **Itching**

I don't feel well today, It like am having a flu. One side of my nose is blocked. My nose is itching.

30F 01: XX: XX

### **Pain**

Symptoms I'm experiencing are: headache, discharges from my nose, and aching of the skin around my nose.

27M 05: XX: XX

The discharges are worse in the morning and aching of the nose is worse after shower.

27M 05: XX: XX

I woke up with sinusitis and it was hurting on the left side. It felt like I was going to die.

04aF 31: XX: XX

### **Sneezing**

I took a shower and I was sneezing and I was feeling tired.

04aF 26: XX: XX

...I'm having discharge from my nose and I'm sneezing.

27M 03: XX: XX

Sneezing worse in the morning after shower, better in the afternoon.

27M 06: XX: XX

Discharge from the nose is clear. Sneezing is worse in doors, better in open air.

27M 03: XX: XX

But I was sneezing a bit, I think from the cold weather.

06F 19: XX: XX

Continued with sneezes for the rest of the day but no runny nose.

06F 20: XX: XX

Nose feels heavy – It's turned red because of the excessive sneezing.

18F 00: XX: XX

I could not sleep with my sneezing.

18F 01: XX: XX

My sinus is very intense today. If I'm in the room with no air entering, I sneeze so much.

27M 23: XX: XX

My sneezing is very intense and it is back to back sneezing.

27M 23: XX: XX

I tried doing some studying for a few minutes but the sneezing was really bad so I went back to bed at 9: 30pm.

26F 11: XX: XX

I smell very destructive indescribable smell on my nose. It's like damp carpet. It has made me sneeze once but that lasted for only couple of minutes.

14M 37: XX: XX

## **Time**

### **Morning**

I woke up with a runny nose, which lasted the whole day plus some of the night.

10M 18: XX: XX

The discharges are worse in the morning and aching of the nose is worse after shower.

27M 05: XX: XX

I'm producing discharges on my nose. They are clear and watery. Worse in the morning, when sitting down and face down.

27M 09: XX: XX

Watery discharge in my nose. Worse: In the morning after a shower.

27M 17: XX: XX

I woke up with a blocked nose I could not inhale properly and had mucous all over my nose.

14M 12: XX: XX

Sneezing worse in the morning after shower, better in the afternoon.

27M 06: XX: XX

## **Night**

At night when I was in bed, both my nostrils got blocked. Worse with warm because the heater was on. Better for cold, after I switched it off and I got better.

27M 20: XX: XX

My nose is still blocked one side on the left it blocked more at night.

30F 02: XX: XX

## **4.3.7 Face**

### **Description**

Skin – Dark blue around the eyes.

12F 02: XX: XX

### **Location**

#### **Facial Eruptions**

I had a pimple develop on my right cheek just below the zygomatic bone. It is a big pimple reddish in colour.

14M 13: XX: XX

I have developed a pimple on my mandible on the chin. It's painful when I touch it or move my lower lip.

14M 18: XX: XX

New crop of cystic pimples on sides of forehead.

03F 16: XX: XX

Pimples small around nose sore to touch red.

15F 02: XX: XX

### **Sensation**

#### **Facial Pain**

Pimples small around nose sore to touch red.

15F 02: XX: XX

I slept for 10 hours when I woke up my jaw on the left side hurt. It lasted for 20-25 minutes.

14M 12: XX: XX

TMJ pain still gives some grief but pain not as bad as before.

16M 33: XX: XX

#### **4.3.8 Mouth**

##### **Sensation**

In the early hours of the morning roughly 5am, I woke up to drink water because I was feeling really thirsty. I felt better for drinking cold water and my mouth was dry.

20M 04: XX: XX

I had a good day though my gums were swollen.

01aF 34: XX: XX

The blocked nose did not stop and i could not taste things like juice properly. They tasted sour.

14M 07: XX: XX

Lump under my tongue but painless.

12F 00: XX: XX

The lump is worse for pressing it with my tongue.

12F 00: XX: XX

#### **4.3.9 Teeth**

##### **Sensation**

Mouth teeth and tongue – I took out my tooth because it was loose. It was painless.

12F 02: XX: XX

#### **4.3.10 Throat**

##### **Concomitants**

My body is tired and I am having a sore throat with coughing.

14M 12: XX: XX

##### **Modality**

Sneezing has started and when I sneeze, I can feel the rawness in my throat almost as it hurts to sneeze, haven't experienced that before.

18F 02: XX: XX

After 4<sup>th</sup> powder continued my day well (OS) drank cold water in the afternoon and it hurt when I swallowed.

01aF 01: XX: XX

## **Sensation**

### **Constriction**

Feels like my throat is closing up when I swallow liquids.

18F 02: XX: XX

### **Dryness**

I have taken another now my throat feels very dry. I have been drinking water but still.

07aM 00: XX: XX

I feel as if I have something on my throat. It feels dry.

07aM 01: XX: XX

My throat (middle) was also really sore and felt dry.

26F 12: XX: XX

I am feeling miserable today, my throat is painful, and it very dry most of the time.

30F 02: XX: XX

### **Pain**

Sore throat, going into ear, not intense.

15F 00: XX: XX

I have just woken up, I am still feeling energetic but the pain in my throat has not ended. Its symptoms are becoming clearer and clearer as it continues to hurt.

14M 10: XX: XX

Today I woke up and I am having a sore throat. My whole throat is sore.

14M 09: XX: XX

### **Rawness**

Sneezing has started and when I sneeze, I can feel the rawness in my throat almost as it hurts to sneeze, haven't experienced that before.

18F 02: XX: XX

### **Scratching**

Feels better – Throat still a lot scratchy but I'm okay.

18F 03: XX: XX

## **Time**

Today I woke up and I am having a sore throat. My whole throat is sore.

14M 09: XX: XX

I have just woken up, I am still feeling energetic but the pain in my throat has not ended. Its symptoms are becoming clearer and clearer as it continues to hurt.

14M 10: XX: XX

### **4.3.11 External throat**

#### **Sensation**

Symptoms: slight neck stiffness and tension headache.

03F 31: XX: XX

### **4.3.12 Stomach**

#### **Concomitants**

##### **Emptiness with Burning**

It's this burning, empty sensation – It's difficult to explain.

18F 13: XX: XX

##### **Emptiness with Weakness**

Empty sensation in my tummy. Ate but the sensation is still there, accompanied by weakness in legs.

18F 13: XX: XX

#### **Modality**

##### **Eating Aggravates**

Felt a little bloated from all the food I ate the previous day.

06F 33: XX: XX

#### **Sensation**

##### **Appetite Diminished**

Didn't eat much as I didn't even get hungry that much.

01aF 10: XX: XX



Didn't eat that much, don't seem to eat that much anymore as I sometimes go without breakfast or supper.

01aF 14: XX: XX

Ate in the evening. After cooking as I hadn't eaten anything since morning but just biscuits.

01aF 15: XX: XX

My appetite has dropped. I don't eat as much.

01aF 18: XX: XX

Went through the morning and afternoon without proper food and I wasn't or didn't feel hungry in the morning.

01aF 20: XX: XX

I still didn't have any appetite for anything only ate proper supper of which I couldn't even finish.

01aF 21: XX: XX

These days I don't feel like having breakfast.

04aF 10: XX: XX

I felt like not eating anything.

04aF 18: XX: XX

The fact that I don't have appetite anymore it doesn't feel alright. These days I don't like food I don't even get thirsty.

04aF 21: XX: XX

Didn't eat much today didn't even feel hungry very anxious.

06F 04: XX: XX

I am literally sweating and all I want is to drink water, I don't feel like eating at all.

06F 08: XX: XX

I don't feel like eating at all.

06F 25: XX: XX

I didn't feel like eating. Only had a glass of juice.

06F 33: XX: XX

During the past few days I have been concentrating less and have been having no appetite. Just don't feel like eating.

07aM 32: XX: XX

I do not feel like eating anything at all and I want to be alone.

19F 09: XX: XX

Today my day was horrible, I felt down, the period pains were horrible, I didn't feel like eating, I did not want to see people and I did not even like the boy I like today.

19F 24: XX: XX

I didn't feel like eating but I forced myself to have two slices of toast and some coffee.

26F 01: XX: XX

....my appetite was not that good so I ate a little.

26F 23: XX: XX

I think my appetite loss is due to the exam stress am undergoing.

26F 24: XX: XX

....I did not feel like eating. I had an apple instead and went to sleep at 8: 00am.

26F 30: XX: XX

I woke up feeling ready to start my day but my appetite was really low. So I didn't take anything for breakfast.

12F 05: XX: XX

I woke up in the morning feeling tired. With a low appetite. I ate apple for breakfast and went to school.

12F 12: XX: XX

### **Appetite Increased**

Was extremely hungry when I got to campus. Had a fruit juiced and peach.

03F 10: XX: XX

Been getting very hungry at work and eating lots of cheese pastry.

03F 19: XX: XX

Been getting hungry very often and constantly snacking on junk.

03F 23: XX: XX

No stomach pains at all today and I didn't feel sleep at all. Had a good appetite.

06F 02: XX: XX

Woke up almost at mid-morning. Felt so hungry and craving some eggs.

06F 29: XX: XX

I woke up feeling fresh with high appetite I could eat anything. I was not craving for something though but I just felt like eating I ate breakfast.

08F 02: XX: XX

I had 5 meals today and drank a lot of tea.

08F 06: XX: XX

I was craving too much. My appetite was so high.

12F 08: XX: XX

High appetite and headache.

12F 08: XX: XX

Ate lot throughout the day.

15F 00: XX: XX

I have been feeling really hungry and thirsty since last night.

19F 07: XX: XX

I notice I'm eating more than I do maybe because I'm at home.

24F 04: XX: XX

We went for lunch I had fried chips, bread and mineral. I ate 4 slices that's how hungry I was around about 12. 45pm that made me full I usually eat 3 slices the most but I wanted to just eat today.

24F 12: XX: XX

Appetite: Increased with frequent hunger – Unusual.

25F 08: XX: XX

Woke up feeling very hungry and moody/grumpy.

09M 06: XX: XX

I woke up feeling fresh, with high appetite I was craving fruit and spicy food.

12F 04: XX: XX

I woke up hungry.

28F 02: XX: XX

I ate a lot even when I was full I ate.

08F 20: XX: XX

Ate a lot of fruit but feeling unusually hungry and unsatisfied.

03F 05: XX: XX

Ate quite a lot but didn't feel satisfied.

06F 20: XX: XX

Ate breakfast and still had this feeling of this never ending hunger.

09M 06: XX: XX

### **Distension**

Felt a little bloated from all the food I ate the previous day.

06F 33: XX: XX

### **Emptiness**

It's this burning, empty sensation – It's difficult to explain.

18F 13: XX: XX

Empty sensation in my tummy. Ate but the sensation is still there, accompanied by weakness in legs.

18F 13: XX: XX

### **Fullness**

Felt a little bloated from all the food I ate the previous day.

06F 33: XX: XX

### **Heaviness**

Have a strange heaviness in my solar plexus.

03F 05: XX: XX

### **Nausea**

I had severe cramping pains in my uterus and was feeling nausea. I realised that my monthly period had started and I was having menstrual pains. The pains lasted for about 15 minutes then went down as I slept.

26F 27: XX: XX

### **Pain**

Stomach cramps but just for a minute @around 8: 15.

02M 00: XX: XX

Still felt a bit of stomach cramps here and there but i was generally ok today.

06F 00: XX: XX

I had a reaction with my ulcers that started with a burning sensation. This was due to eating spicy food. The pain lasted throughout the night and changed from a burning pain to a cramp the pain level of the cramp was about a 7/8. I couldn't walk or consume food or any liquid.

28F 14: XX: XX

Feeling much better can still feel a few stomach cramps but it okay. I feel a bit nauseous though.

06F 28: XX: XX

## **Thirst**

Woke up feeling tired and thirsty.

09M 01: XX: XX

Woke up feeling very tired extremely thirsty.

09M 02: XX: XX

Had trouble waking up with a high thirst level.

09M 04: XX: XX

Woke up feeling very thirsty and grumpy.

09M 07: XX: XX

Something weird and unusual happened last night, I woke up in the middle of the night (at about 01: 00am) feeling really thirsty. It was the first time I got that thirsty in the middle of the night.

26F 06: XX: XX

Could not focus the whole day and had an early night. I craved cold water so it would quench my endless thirst.

09M 03: XX: XX

I felt better for drinking cold water and my mouth was dry.

20M 04: XX: XX

Symptoms: Just been very thirsty and want chocolate.

03F 06: XX: XX

Drank a lot of water upon waking feeling parched.

03F 14: XX: X

Drank a lot of water and juice – It was hot and I had a lot of walking today. Was exhausted at the end of the day but it was worth it.

06F 03: XX: XX

Felt very thirsty and annoyed by a few friends and everything at campus.

09M 11: XX: XX

My thirst was high I just want more water to drink.

12F 06: XX: XX

I am thirsty and have drank a lot of water.

14M 18: XX: XX

I have been feeling really hungry and thirsty since last night.

19F 07: XX: XX

In the early hours of the morning roughly 5am, I woke up to drink water because I was feeling really thirsty.

20M 04: XX: XX

Felt thirst here and there as it was hot.

06F 02: XX: XX

It very hot outside. I am literally sweating and all I want is to drink water, I don't feel like eating at all.

06F 08: XX: XX

I drank a lot of juices and cold drinks.

08F 20: XX: XX

I have a small headache caused by dehydration. I drank small amounts of water.

14M 23: XX: XX

### **Thirstless**

I am not thirsty and generals are okay.

14M 08: XX: XX

No thirst.

25F 00: XX: XX

### **Ulcers**

I had a reaction with my ulcers that started with a burning sensation. This was due to eating spicy food.

28F 14: XX: XX

### **Vomiting**

The pain lasted throughout the night and changed from a burning pain to a cramp the pain level of the cramp was about a 7/8. I couldn't walk or consume food or any liquid. The vomit was a mixture of liquids, food and bright red blood. I also had an extremely bad tension headache that remained throughout the night.

28F 14: XX: XX

### **4.3.13 Abdomen**

#### **Location**

##### **Hypochondria Right**

During the night I woke up to a stinging pain just under my right breast.

19F 05: XX: XX

At 18. 50PM I felt the stinging pain under my breast on the right again and it lasted for less than two minutes.

19F 06: XX: XX

I just felt the pain under my right breast again and it lasted a bit longer than usual.

19F 07: XX: XX

It is 03: 45am and I've been woken up by a really sharp pain below my right breast, it lasts for about 4 seconds and goes away for a few minutes but then comes back again.

19F 09: XX: XX

I woke up at 04: 15am because of pain under my right breast.

19F 14: XX: XX

Today I woke up at 04: 00 because of pain under my right breast.

19F 19: XX: XX

It is 20h00 and the pain under my right breast is there but not as painful as always.

19F 21: XX: XX

##### **Pelvis**

Pain in pelvic area (anterior) sharp piercing pain. Lasted 10 minutes. Intensity was 8/10.

15F 00: XX: XX

#### **Modality**

Sharp pain on my abdomen between 8<sup>th</sup> and 12<sup>th</sup> rib. It was worse if I try rest on my back.

12F 08: XX: XX

#### **Intensity**

Pain in pelvic area (anterior) sharp piercing pain. Lasted 10 minutes. Intensity was 8/10.

15F 00: XX: XX

## **Sensation**

### **Bloating**

Experienced some abdominal bloating but nothing serious.

03F 22: XX: XX

Can't pinpoint it but I feel uneasy and awful. No stomach cramps feeling lazy or headaches.

Rather feel bloated and sweaty.

06F 24: XX: XX

Still feel awful and bloated.

06F 25: XX: XX

My stomach felt like it was full of air as if constipated.

26F 06: XX: XX

I had a lot of wind cause I felt bloated.

24F 12: XX: XX

I felt so bloated my stomach looked big too and my lower back was aching and I could feel each time my periods came out.

24F 13: XX: XX

### **Flatulence**

I went for body practical we were doing our stomach massage (abdominal massage) and I was full of gas but I just had to hold it in.

24F 11: XX: XX

I was feeling bloated so I went to the toilet but before I was farting a lot.

24F 14: XX: XX

I needed to pee and had wind that was poking me. I had to hold my stomach to feel better but when I got up ouch! it was sore....

24F 10: XX: XX

### **Pain**

Experienced abdominal tenderness/ discomfort.

03F 11: XX: XX

Slight abdominal discomfort.

03F 16: XX: XX

Slight abdominal cramping for a few hours in the morning.

10M 00: XX: XX



Woke up with slight abdominal cramps lasted for about an hour.

10M 02: XX: XX

I needed to pee and had wind that was poking me. I had to hold my stomach to feel better but when I got up ouch! it was sore....

24F 10: XX: XX

I had a headache and a sharp pain between my 8<sup>th</sup> and 12<sup>th</sup> rib. It lasted for 2hrs.

12F 08: XX: XX

I have a sharp pain on my abdomen.

12F 11: XX: XX

#### **4.3.14 Rectum**

##### **Aetiology**

I had the urge to go to the toilet when I woke up. Upon getting there, I realised two things. My menstruation flow was now getting lighter as it had been five days already I also realised that my tummy was slightly paining and I released a runny watery stool. This was because of the spicy briyani I had last night.

26F 03: XX: XX

##### **Concomitants**

At school afternoon 13: 35. Having a bad headache lateral in both hemispheres and a runny tummy.

07aM 13: XX: XX

##### **Modality**

I went to the toilet, had to press a little my stool were solid, dark whole stools, had a sour smell.

24F: 17: XX: XX

....I went to the toilet I had to push my stools out that my eyes even got watery, my stools came out a bit dryer than normal and it was stinking...

24F 20: XX: XX

## **Sensation**

### **Burning Pain**

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

### **Constipation**

I feel a little constipated from all the food I ate the previous day.

06F 27: XX: XX

Before I went to sleep I went to the toilet and I was constipated so I drank a lot of water before I went to bed.

19F 08: XX: XX

The constipation was the same as before I took the remedy but it was more frequent this time.

19F 08: XX: XX

I feel constipated, I drank milk as it is said to help but I feel no different.

19F 10: XX: XX

The constipation ruins my appetite so I did not have lunch.

19F 10: XX: XX

I still feel constipated though and my mood isn't great.

19F 11: XX: XX

I am in pain because of constipation.

19F 17: XX: XX

Today I still feel constipated. But I have not felt any pain.

19F 23: XX: XX

I did not feel any pain but still constipated.

19F 36: XX: XX

At 8: 30pm I went to the toilet it was hard for my stools to come out I was a bit constipated when it did come out it was more on the dry side, it was dark in colour and came out solid, it had a normal smell.

24F 28: XX: XX

I was still feeling a little constipated in the morning.

26F 07: XX: XX

My stomach was feeling a bit constipated.

26F 17: XX: XX

### **Diarrhoea**

I was going to church and all of my body, my eyes and my immune system was very weak.

All I wanted to do was sleep I was feeling tired and had a running stomach. I was visiting the toilet minute after minute.

04aF 00: XX: XX

I had the urge to go to the toilet when I woke up. Upon getting there, I realised two things.

My menstruation flow was now getting lighter as it had been five days already I also realised that my tummy was slightly paining and I released a runny watery stool. This was because of the spicy briyani I had last night.

26F 03: XX: XX

I ate food made with flour and my stomach was painful and running.

12F 18: XX: XX

### **Insufficient Stool**

Something that was new however, was my stool when I got home this afternoon. It was not as hard as usual, it was a bit softer and not much actually came out.

26F 00: XX: XX

I went to the toilet to urinate and release some stool. The urine was still a slightly bloody colour and the stool was still soft and not much came out.

26F 01: XX: XX

I got the urge to go the toilet. A small amount of stool came out. It was slightly brownish in colour. My stomach had the same constipated feel as yesterday.

26F 07: XX: XX

### **Pain**

I still feel constipated though and it really hurts when I go to the toilet.

19F 14: XX: XX

I am in pain because of constipation.

19F 17: XX: XX

I ate food made with flour and my stomach was painful and running. It was a burning pain.

12F 18: XX: XX

## **Stinging Pain**

Stinging pains after passing the stool.

19F 08: XX: XX

It's a stinging pain after I pass the stool.

19F 14: XX: XX

## **Urging**

I got the urge to go to the toilet after that but when I got there, nothing came out.

26F 06: XX: XX

## **4.3.15 Stool**

### **Sensation**

#### **Dark Colour**

I got out of bed about 06: 00am and went to use the toilet, my stools were darker than usual not runny or hard, they came out in long drolls no pressing to hard it came out with ease.

24F 01: XX: XX

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

At 8: 30pm I went to the toilet it was hard for my stools to come out I was a bit constipated when it did come out it was more on the dry side, it was dark in colour and came out solid, it had a normal smell.

24F 28: XX: XX

Colour: Dark brown – Darker than usual stools.

25F 08: XX: XX

#### **Dry**

....I went to the toilet I had to push my stools out that my eyes even got watery, my stools came out a bit dryer than normal and it was stinking...

24F 20: XX: XX

At 8: 30pm I went to the toilet it was hard for my stools to come out I was a bit constipated when it did come out it was more on the dry side, it was dark in colour and came out solid, it had a normal smell.

24F 28: XX: XX

## **Granular**

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

## **Light Colour**

After that I went to the toilet no pain stools were lighter in colour, solid, smelled normal the tissue from my womb was coming out as well just bleeding a lot.

24F 15: XX: XX

## **Odours**

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

....I went to the toilet I had to push my stools out that my eyes even got watery, my stools came out a bit dryer than normal and it was stinking...

24F 20: XX: XX

Something that was new however, was my stool when I got home this afternoon. It was not as hard as usual, it was a bit softer and not much actually came out. This did not bother me much as there were no pains in my stomach. Also the smell was a bit stronger than yesterday's.

26F 00: XX: XX

I went to the toilet, had to press a little my stool were solid, dark whole stools, had a sour smell.

24F 17: XX: XX

## **Small Quantity**

Something that was new however, was my stool when I got home this afternoon. It was not as hard as usual, it was a bit softer and not much actually came out. This did not bother me much as there were no pains in my stomach. Also the smell was a bit stronger than yesterday's.

26F 00: XX: XX

I went to the toilet to urinate and release some stool. The urine was still a slightly bloody colour and the stool was still soft and not much came out.

26F 01: XX: XX

I got the urge to go to the toilet. A small amount of stool came out. It was slightly brownish in colour. My stomach had the same constipated feel as yesterday.

26F 07: XX: XX

### **Soft**

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

Something that was new however, was my stool when I got home this afternoon. It was not as hard as usual, it was a bit softer and not much actually came out. This did not bother me much as there were no pains in my stomach. Also the smell was a bit stronger than yesterday's.

26F 00: XX: XX

I went to the toilet to urinate and release some stool. The urine was still a slightly bloody colour and the stool was still soft and not much came out.

26F 01: XX: XX

### **Undigested**

I went to the toilet at like 07: 00pm. My stools were dark brown semi solid and had like small pieces of grains because it felt rough. I had a burning bruised sensation after and the toilet was smelling strong.

24F 06: XX: XX

### **Watery**

I had the urge to go to the toilet when I woke up. Upon getting there, I realised two things. My menstruation flow was now getting lighter as it had been five days already I also realised that my tummy was slightly paining and I released a runny watery stool. This was because of the spicy briyani I had last night.

26F 03: XX: XX

## **4.3.16 Bladder**

### **Time**

I picked up that I seem to go to the toilet for a number one more than usual now, especially in the mornings.

20M 15: XX: XX

I would normally go to the toilet for a number 1 before bed and when I wake up the next morning, but recently I go more often, I go before bed, then early hours of morning (around 7am) then when I wake up again (between 9 - 10am).

20M 15: XX: XX

### **Sensation**

#### **Frequent**

I picked up that I seem to go to the toilet for a number one more than usual now, especially in the mornings.

20M 15: XX: XX

I noted that I urinated more frequently than usual today throughout the day.

26F 29: XX: XX

### **4.3.17 Urine**

#### **Sensation**

##### **Greenish Colour**

Urine was a lime green colour with a pungent smell.

09M 00: XX: XX

##### **Strong Odour**

Urine was a lime green colour with a pungent smell.

09M: XX: XX

### **4.3.18 Male genitalia/sex**

#### **Location**

My right testicle is now itchy at first it was the left. It seems like symptoms have shifted.

07aM 26: XX: XX

I'm at school and my left testicle is very itchy. It is hot and I've been sitting for 5 hours now.

07aM 20: XX: XX

I'm only having an itch in my pubic region and axilla.

7aM 03: XX: XX

### **Modality**

This itchy feeling/ symptom happens after eating. It might be meat (chicken) that activates it. That I am sure of.

07aM 23: XX: XX

I'm about to write my test and my testicles started itching, so annoyed. I could feel my concentration shifting away from the paper. All my thoughts flowing down to my testicles. I couldn't scratch in class. I ate mix vegetables it aggravates it.

07aM 28: XX: XX

Already up since 1am my testicles start being itchy when it is hot.

07aM 28: XX: XX

Both my testicles itch aggravated by heat, especially when I'm bathing in luke warm water. It just seems to be worse. I could scratch for even 15 minutes.

07aM 35: XX: XX

### **Sensation**

I've noticed something, it's not usual but my scrotum itches a lot lately from Monday until now. It happens after eating and when I sit down or lay in bed. It's not something that happens during school hours. It does not happen in the morning.

07a M 19: XX: XX

I'm at school and my left testicle is very itchy. It is hot and I've been sitting for 5 hours now.

07aM 20: XX: XX

Today I don't feel so good nor do I look forward to the day and my testicles itch. I'm having less or no concentration when my testicles itch.

07aM 33: XX: XX

## **4.3.19 Female genitalia/sex**

### **Concomitants**

#### **Fever**

Had my period today, I don't feel good at all. My tummy is aching.

I don't feel like eating and I feel sleepy. Spent the whole day in bed. Didn't see how the day went by, feel feverish and nauseous.

06F 26: XX: XX



## **Nausea**

Had my period today, I don't feel good at all. My tummy is aching. I don't feel like eating and I feel sleepy. Spent the whole day in bed. Didn't see how the day went by, feel feverish and nauseous.

06F 26: XX: XX

## **Location**

### **Uterus**

I had some minor light pains on my uterus though. It was as if the start of my period but I knew it was not that as I had gone to my period for this month.

26F 11: XX: XX

## **Modality**

### **Ameliorated by Bending Double**

Didn't expect to have period pains as it was cold but I did. And it was unbearable, did things I usually do when I have them: like lying on the floor and drinking cold water but that just stopped it for a while and after that the pain continued. It only helped when I slept on the bed and crawled up and folded myself.

01aF 12: XX: XX

### **Ameliorated by Motion**

The period pain came back in the evening but for a short time as I kept myself busy by moving around it went away.

1aF 13: XX: XX

### **Ameliorated by Warmth**

...When I was done I felt good but the period pains were still there but I kept warm so it weren't that bad.

24F 12: XX: XX

### **Aggravated by Cold**

Even when I was sitting on the steel chairs at school they were cold and caused me to have pains those sharp pains shooting up my body every time it did I jumped up that's how painful it is and I had a lot of wind cause I felt bloated.

24F 12: XX: XX

## **Prolonged Pain**

I'm no longer on my period but I still feel pain. I kept waking up at night because of the period pains.

19F 26: XX: XX

...the period pains came back so I went home, I could not take it.

19F 27: XX: XX

I had some minor light pains on my uterus though. It was as if the start of my period but I knew it was not that as I had gone to my period for this month.

26F 11: XX: XX

## **Sensation**

### **Bright Red**

I woke up late and I was better than yesterday but I had period pains they were really painful and the blood that was coming out was thick and pure red.

04aF 33: XX: XX

### **Clotted**

...I could feel that my flow was heavy and I realised that some really large deep red coloured lumps were coming out.

26F 01: XX: XX

### **Copious Leukorrhoea**

When I got home my bladder was full I ran to the toilet just to find out I didn't get my period it was just a lot of discharge.

24F 10: XX: XX

### **Copious Menses**

I had a bath my periods was heavy bleeding a lot it's the third day today my lower back was just aching non-stop felt like I was carrying something heavy on my back.

24F 14: XX: XX

After that I went to the toilet no pain stools were lighter in colour, solid, smelled normal the tissue from my womb was coming out as well just bleeding a lot.

24F 15: XX: XX

...I could feel that my flow was heavy and I realised that some really large deep red coloured lumps were coming out.

26F 01: XX: XX

## **Pain**

I didn't eat anything because I was not okay and I had period pains which were really painful and I was tempted to take pain block and some medicine but I didn't.

04aF 04: XX: XX

I woke up late and I was better than yesterday but I had period pains they were really painful and the blood that was coming out was thick and pure red. I changed my pads four times. I really had the worst pain ever. I was sleeping on the floor because it seems better and it was fine.

04aF 33: XX: XX

I had my period but this time I had pain, although not as painful as I usually have. I didn't vomit either. So I was happy with that.

12F 24: XX: XX

Today my day was horrible, I felt down, the period pains were horrible, I didn't feel like eating, I did not want to see people and I did not even like the boy I like today.

19F 24: XX: XX

But tonight the period pains are worse.

19F 25: XX: XX

Didn't expect to have period pains as it was cold but i did. And it was unbearable, did things I usually do when I have them: like lying on the floor and drinking cold water but that just stopped it for a while and after that the pain continued.

01aF 12: XX: XX

I'm no longer on my period but I still feel pain. I kept waking up at night because of the period pains.

19F 26: XX: XX

....the period pains came back so I went home, I could not take it.

19F 27: XX: XX

## **Pain – Menstrual Sharp**

Even when I was sitting on the steel chairs at school they were cold and caused me to have pains those sharp pains shooting up my body every time it did I jumped up that's how painful it is and I had a lot of wind cause I felt bloated.

24F 12: XX: XX

### **Pain – Uterine Cramping**

On my way to campus, I started feeling some cramp pains on my uterus. They were sharp cramping pains and were very unusual unlike the ones I get when am about to go into my periods.

26F 13: XX: XX

I slept for about two hours and woke up with the same sharp cramps I had in the morning. They were still on my uterus and I thought that maybe my period had come early this month. My sister advised me to drink warm water and I did. After 30 minutes the pains did go away.

26F 13: XX: XX

I had severe cramping pains in my uterus and was feeling nausea. I realised that my monthly period had started and I was having menstrual pains. The pains lasted for about 15 minutes then went down as I slept.

26F 27: XX: XX

### **Pain - Uterine Pulling**

Today I woke up at about 6: 30am and I was in so much pain. My period pain had started again and now they were accompanied by a terrible headache. It was as if someone was pulling on my uterus from the inside and someone else is knocking on my entire head with a hammer.

26F 01: XX: XX

### **Pain Uterus Sharp**

On my way to campus, I started feeling some cramp pains on my uterus. They were sharp cramping pains and were very unusual unlike the ones I get when am about to go into my periods.

26F 13: XX: XX

I slept for about two hours and woke up with the same sharp cramps I had in the morning. They were still on my uterus and I thought that maybe my period had come early this month. My sister advised me to drink warm water and I did. After 30 minutes the pains did go away.

26F 13: XX: XX

### **Thick**

I woke up late and I was better than yesterday but I had period pains they were really painful and the blood that was coming out was thick and pure red.

04a 33: XX: XX

## **Time**

### **Copious Menses at Night**

I saw that my bleeding had been excessive during the night.  
26F 29: XX: XX

### **4.3.20 Cough**

## **Concomitants**

### **Chest Pain**

I have a cough out of the blue. It is strong and I feel chest pain.  
07aM 21: XX: XX

### **Heat**

When I cough, my throat still hurts and a surge of heat comes over me for a moment after a cough – Like the cough brings about a “heat wave”.  
18F 02: XX: XX

### **Mucous**

I am having lumps of mucous as if I have a cold.  
07aM 02: XX: XX

I’m well but still coughing mucous lumps and now I’m feeling all energetic.  
07aM 02: XX: XX

## **Time**

### **Morning**

4am in the morning already awake and the cough only lasted for 30 minutes after which it disappeared.  
07aM 22: XX: XX

### **4.3.21 Chest**

## **Concomitants**

Have been having intermittent panic attacks which I can’t exactly account for. Sometimes it’s a pounding heart and sometimes it’s a vice-like grip in my core that causes me to catch my breath.  
03F 02: XX: XX

## **Sensation**

### **Pain**

My boobs were swollen and sore and my body felt numb from the pain.

24F 12: XX: XX

### **Palpitations**

Heart beat is rapid.

15F 01: XX: XX

Have been having intermittent panic attacks which I can't exactly account for. Sometimes it's a pounding heart and sometimes it's a vice-like grip in my core that causes me to catch my breath.

03F 02: XX: XX

### **Constricted**

My chest feels tight, I think it is asthma and so no church today.

19F 30: XX: XX

Today I woke up with a tight chest and had to attend gym class at 10: 00am. I had an asthma attack and I was rushed to the clinic to get nebulised.

19F 31: XX: XX

I had a tight chest last night at 23h15 and I was already in bed.

19F 37: XX: XX

## **Time**

### **Night**

I had a tight chest last night at 23h15 and I was already in bed.

19F 37: XX: XX

### **On Waking**

Today I woke up with a tight chest and had to attend gym class at 10: 00am. I had an asthma attack and I was rushed to the clinic to get nebulised.

19F 31: XX: XX

#### **4.3.22 Back**

##### **Concomitants**

Towards evening headache was around eyes, forehead and back of head and neck is stiff.  
15F 05: XX: XX

##### **Location**

##### **Cervical Region**

I was tired. I woke up tired and continued my day like that. My neck and back hurt.  
01aF 19: XX: XX

My neck feels so sore. I need it to be adjusted. There's so much of tension.  
I can't handle the neck pain.  
18F 14: XX: XX

I'm having a blocked nose and left sided back and neck pain. Only the left side of the nose is blocked.  
07aM 16: XX: XX

Towards evening headache was around eyes forehead back of head and neck is stiff.  
15F 05: XX: XX

##### **Left Side**

10: 27 I'm having a blocked nose and left sided back and neck pain. Only the left side of the nose is blocked.  
07aM 16: XX: XX

##### **Lumbar Region**

I am very tired and my lower back hurts a bit.  
14M 22: XX: XX

There is just some pains on my lower back.  
14M 28: XX: XX

My lower back is a bit painful and I am tired.  
14M 36: XX: XX

Slept with low back pain during night.  
16M 24: XX: XX

Usual pain in low back area – burning to sharp pain.  
16M 09: XX: XX

## **Right Scapula**

Woke up with a back pain. Feels like I have a knot. Just below my right scapula.

10M 09: XX: XX

## **Modality**

I felt so bloated my stomach looked big too and my lower back was aching and I could feel each time my periods came out.

24F 13: XX: XX

I had a bath my periods was heavy bleeding a lot it's the third day today my lower back was just aching non-stop felt like I was carrying something heavy on my back.

24F 14: XX: XX

## **Sensation**

### **Burning**

Usual pain in low back area – burning to sharp pain.

16M 09: XX: XX

Low back pain still evident upon awakening. Burning sharp kind of pain.

16M 21: XX: XX

Woke up with low back pain – Burning, aching type of pain.

16M 24: XX: XX

### **Pain**

I was tired. I woke up tired and continued my day like that. My neck and back hurt.

1aF 19: XX: XX

While I was in the toilet I cried cause I just feel overwhelmed like my body is literally feeling stressed my back is sore like I'm carrying something heavy and I'm just thinking about a lot of things that's hurting me.

24F 31: XX: XX

10: 27 I'm having a blocked nose and left sided back and neck pain. Only the left side of the nose is blocked.

07aM 16: XX: XX

### **Perspiration**

I had sweated in the afternoon on my back only.

01aF 02: XX: XX



## **Time**

### **Morning**

5: 00am already up feeling a little tired and a lot of back pain but besides that I'm fine.  
07aM 33: XX: XX

### **Waking On**

Woke up with a back pain. Feels like I have a knot. Just below my right scapula.  
10M 09: XX: XX

Low back pain still evident upon awakening.  
16M 21: XX: XX

### **Night**

Slept with low back pain during night.  
16M 24: XX: XX

## **4.3.23 Extremities**

## **Location**

### **Feet**

12: 00pm after taking the remedy I had a red hot spot on my right foot and my right leg started to pain.  
12F 01: XX: XX

After that I prepare everything for Friday I was so exhausted my feet felt like there were swelling. I think it's because I spent much time standing.  
12F 22: XX: XX

### **Forearms**

At 22: 00pm – I felt a pain on my right forearm mainly on my ulna bone of the forearm. It was a strong hot sharp pain.  
12F 14: XX: XX

### **Hands**

Constant stabbing pain on right arm and hand (entirely) seems to get worse with movement.  
15F 02: XX: XX

## **Legs**

Woke up tired, slight lower leg pain

10M 07: XX: XX

My muscles were especially tense. Muscle tense on my right leg – pain.

12F 01: XX: XX

I feel tired because it was a long day but the lameness and pain I can feel in my right leg – When I lifted my right leg now, I could feel the pain.

18F 02: XX: XX

10: 00 I tried to get off the bed and I felt this tremendous pain on my right leg it felt like if I took a step forward it will break.

12F 03: XX: XX

If felt as if my leg muscles were pulling everything when I walked.

01aF 19: XX: XX

Woke up with a slight leg pain. Made better by a hot bath.

10M 03: XX: XX

Around 5: 00pm afterwards – leg pain. Better for heat. Worse for movement.

10M 04: XX: XX

Slight lower leg pain got better after a hot bath.

10M 13: XX: XX

## **Lower Limbs**

Dull pain in bones (lower limbs) feel as if it's cold.

15F 01: XX: XX

## **Shoulders**

I feel so tired on my shoulders it must be because of the heavy load I was carrying the day before.

01aF 00: XX: XX

The pain on my shoulders is still there.

01aF 01: XX: XX

## **Toes**

Small toe on right foot. Burning type of pain.

16M 08: XX: XX

My left toe is still a little painful if I press it but it is now bearable.

01aF 17: XX: XX

At night my toes were itching as they started swelling it was nothing new so didn't give much attention to it but just stretched and it was okay. It didn't require me to stretch a lot but just a little.

01aF 15: XX: XX

Even In the evening the swelling was still there, I had changed my shoes but still. I tried to press against my right middle toe nail and discharge came out. I wiped it and left it immediately. This was new as my toes only swelled up before. At night still continued my day And it still itched but not a lot. I had even forgotten at some time that my toes were swollen. Up until I walked down the stairs it was sore but then I was sitting for long hours studying so it had to happen. I left my toes as they were took some pictures and continued my night.

01aF 16: XX: XX

## **Thighs**

20: 00 in the evening I still have the dry throat but after I finished bathing my thighs started itching also my pelvic region anteriorly but not the penis.

07aM 01: XX: XX

Tense thigh muscle. On my right leg.

12F 02: XX: XX

The pain is on my left thigh to the knee. It feels like my femur is tied. When I walk it feel like it's going to break. It's like there is something pressing so hard on it.

12F 03: XX: XX

I have tense thigh muscle on my right leg. Caused by standing. Better if I'm lying straight. It is an on and off pain. It lasted all day. It's like my leg is tired.

12F 02: XX: XX

## **Upper Limbs**

Constant stabbing pain on right arm and hand (entirely) seems to get worse with movement.

15F 02: XX: XX

## **Modality**

### **Bending Aggravates**

During the day around 11: 00am I felt pain on my knee. It is most painful when I walk or bend my knee.

12F 05: XX: XX

### **Cold Aggravates**

Leg pain from knee downwards made worse from overnight cold. The pain went down as the day progressed.

10M 05: XX: XX

### **Laying Ameliorates**

I have tense thigh muscle on my right leg. Caused by standing. better if I'm lying straight. It is an on and off pain.

12F 02: XX: XX

### **Motion Aggravates**

Around 5: 00pm afterwards – leg pain. Better for heat. Worse for movement.

10M 04: XX: XX

I feel tired because it was a long day but the lameness and pain I can feel in my right leg – When I lifted my right leg now, I could feel the pain.

18F 02: XX: XX

Constant stabbing pain on right arm and hand (entirely) seems to get worse with movement.

15F 02: XX: XX

### **Motion Ameliorates**

The pain on my shoulders is still there. Need to stretch.

01aF 01: XX: XX

### **Pressure Ameliorates**

12: 00pm after taking the remedy I had a red hot spot on my right foot and my right leg started to pain. My muscles were especially tense. It is better if I straighten my leg and apply pressure.

12F 01: XX: XX

The pain is on my left thigh to the knee. It feels like my femur is tied. When I walk it feel like it's going to break. It's like there is something pressing so hard on it. It is located on my right femur is caused by walking and feels better when I apply pressure. It is a sharp pain.

12F 03: XX: XX

My day was perfect with no symptoms. At 18: 00 I went to a function that was held at sport centre everything was perfect. At 22: 00pm I felt a pain on my right forearm mainly on my ulna bone of the forearm. It was a strong hot sharp pain. It was better for application of pressure.

12F 14: XX: XX

### **Sitting Down Ameliorates**

Extremities: Upper. Heaviness. Biceps. Right and left. High intensity. Time: 10.30. 30 minutes after taking the medication. Duration: lasted for 2 hours. I sat down on the floor and the heaviness was subsiding.

25F 00: XX: XX

### **Sleep Ameliorates**

Paralysis lower down. Waist down. Just this intense feeling of weakness in my legs as if I would fall if I stand for too long. If I stand, the weakness overwhelms me. Seems to ease when I sleep.

18F 15: XX: XX

### **Standing Aggravates**

12: 00pm after taking the remedy I had a red hot spot on my right foot and my right leg started to pain. My muscles were especially tense. It is better if I straighten my leg and apply pressure.

12F 01: XX: XX

Paralysis lower down. Waist down. Just this intense feeling of weakness in my legs as if I would fall if I stand for too long. If I stand, the weakness overwhelms me. Seems to ease when I sleep.

18F 15: XX: XX

### **Walking Aggravates**

During the day around 11: 00am I felt pain on my knee. It is most painful when I walk or bend my knee.

12F 05: XX: XX

### **Warmth Ameliorates**

Woke up with a slight leg pain. Made better by a hot bath.

10M 03: XX: XX

Around 5: 00pm afterwards – leg pain. Better for heat. Worse for movement.

10M 04: XX: XX

Slight lower leg pain got better after a hot bath.

10M 13: XX: XX

## **Sensation**

### **Heaviness**

I felt some changes in my body but I ignored them. The changes I had was my feet were a bit heavy couldn't stand for a long time had no balance.

04aF 01: XX: XX

Extremities: Upper. Heaviness. Biceps. Right and left. High intensity. Time: 10.30. 30 minutes after taking the medication. Duration: lasted for 2 hours.

25F 00: 00: 30

### **Itching**

At night my toes were itching as they started swelling it was nothing new so didn't give much attention to it but just stretched and it was okay. It didn't require me to stretch a lot but just a little.

01aF 15: XX: XX

12: 00pm after taking the remedy I had a red hot spot on my right foot and my right leg started to pain. My muscles were especially tense. The sensation is itchy and painful.

12F 01: XX: XX

20: 00 in the evening I still have the dry throat but after I finished bathing my thighs started itching also my pelvic region anteriorly but not the penis.

07aM 01: XX: XX

### **Lameness**

I feel tired because it was a long day but the lameness and pain I can feel in my right leg – When I lifted my right leg now, I could feel the pain.

18F 02: XX: XX

### **Pain**

During the day around 11: 00am I felt pain on my knee. It is most painful when I walk or bend my knee.

12F 05: XX: XX

Woke up with a slight leg pain. Made better by a hot bath.

10M 03: XX: XX

Around 5: 00pm afterwards – leg pain. Better for heat. Worse for movement.

10M 04: XX: XX

Slight lower leg pain got better after a hot bath.

10M 13: XX: XX

The pain is on my left thigh to the knee. It feels like my femur is tied. When I walk it feel like it's going to break. It's like there is something pressing so hard on it. It is located on my right femur is caused by walking and feels better when I apply pressure. It is a sharp pain.

12F 03: XX: XX

My left toe is still a little painful if I press it but it is now bearable.

01aF 17: XX: XX

### **Burning**

When I hold my phone for too long my hand starts to burn a deep aching pain.

03F 15: XX: XX

Small toe on right foot. Burning type of pain.

16M 08: XX: XX

### **Hot**

12: 00pm after taking the remedy I had a red hot spot on my right foot and my right leg started to pain. My muscles were especially tense. Intensity – Hot pain.

12F 01: XX: XX

At 22: 00pm – I felt a pain on my right forearm mainly on my ulna bone of the forearm. It was a strong hot sharp pain.

12F 14: XX: XX

### **Intermittent**

I have tense thigh muscle on my right leg. Caused by standing. better if I'm lying straight. It is an on and off pain.

12F 02: XX: XX

### **Pressing**

The pain is on my left thigh to the knee. It feels like my femur is tied. When I walk it feel like it's going to break. It's like there is something pressing so hard on it.

12F 03: XX: XX

### **Pulling**

If felt as if my leg muscles were pulling everything when I walked.

01aF 19: XX: XX

## **Sharp**

At 22: 00pm I felt a pain on my right forearm mainly on my ulna bone of the forearm. It was a strong hot sharp pain.

12F 14: XX: XX

The pain is on my left thigh to the knee. It feels like my femur is tied. When I walk it feel like it's going to break. It's like there is something pressing so hard on it. It is located on my right femur is caused by walking and feels better when I apply pressure. It is a sharp pain.

12F 03: XX: XX

## **Stabbing**

Constant stabbing pain on right arm and hand (entirely) seems to get worse with movement.

15F 02: XX: XX

## **Paralysis**

Paralysis lower down. Waist down. Just this intense feeling of weakness in my legs as if I would fall if I stand for too long. If I stand, the weakness overwhelms me. Seems to ease when I sleep.

18F 15: XX: XX

## **Shaking**

Woke up feeling the same. My legs feel so jittery and weak.

18F 14: XX: XX

## **Swelling**

At night my toes were itching as they started swelling it was nothing new so didn't give much attention to it but just stretched and it was okay. It didn't require me to stretch a lot but just a little.

01aF 15: XX: XX

Even In the evening the swelling was still there, I had changed my shoes but still. I tried to press against my right middle toe nail and discharge came out. I wiped it and left it immediately. This was new as my toes only swelled up before. At night still continued my day And it still itched but not a lot. I had even forgotten at some time that my toes were swollen. Up until I walked down the stairs it was sore but then I was sitting for long hours studying so it had to happen. I left my toes as they were took some pictures and continued my night.

01aF 16: XX: XX



## **Tired**

I have tense thigh muscle on my right leg. Caused by standing. better if I'm lying straight. It is an on and off pain. It lasted all day. It's like my leg is tired.

12F 02: XX: XX

## **Warts**

I noticed warts on my hands small ones on my right index finger I noticed them 2 weeks ago they haven't been paining or anything.

24F 34: XX: XX

## **Weakness**

Woke up feeling the same. My legs feel so jittery and weak.

18F 14: XX: XX

Paralysis lower down. Waist down. Just this intense feeling of weakness in my legs as if I would fall if I stand for too long. If I stand, the weakness overwhelms me. Seems to ease when I sleep.

18F 15: XX: XX

## **Time**

### **Morning**

10: 00 I tried to get off the bed and I felt this tremendous pain on my right leg it felt like if I took a step forward it will break.

12F 03: XX: XX

### **4.3.24 Sleep**

## **Concomitants**

### **Daytime Dreaming**

I went early to bed and I discovered that I don't dream at night its either I do dream at night and forget. But I dream a lot when I sleep during the day.

04aF 24: XX: XX

## **Fever**

I am having very high temperatures on my head. They are causing me to be sleepy and nauseous.

14M 13: XX: XX

## **Perspiration**

5: 00 Woke up sweaty and grumpy. Was asleep until I hit my head against my desk due to excessive movement in my sleep. This resulted in a very painful headache to form.

09M 12: XX: XX

## **Modality**

### **Fever Aggravates**

I am having very high temperatures on my head. They are causing me to be sleepy and nauseous.

14M 13: XX: XX

### **Position Abdomen**

Sleep pattern – good sleep. I sleep on my stomach and I am unable to remember my dreams.

12F 00: XX: XX

I had a good sleep and I sleep on my stomach.

12F 01: XX: XX

I went straight to bed and slept on my stomach.

12F 21: XX: XX

Frequently sleeping during the day and at night. Position: lying on the stomach.

25F 00: XX: XX

Sleep: Position: lying on the stomach.

25F 08: XX: XX

### **Position Changed Frequently**

5: 00 Woke up sweaty and grumpy. Was asleep until I hit my head against my desk due to excessive movement in my sleep. This resulted in a very painful headache to form.

09M 12: XX: XX

I had a short night sleep I slept facing all sides. Dreamt realistic dreams about my suspension.

14M 18: XX: XX

## **Sensation**

### **Early Waking**

Woke up early today around 5am as I continue with preparations to go home.

06F 03: XX: XX

### **Falling Asleep Easy**

Although my day started on a bad note, I actually went to bed feeling much better and relaxed. I did not have any struggles falling asleep.

26F 01: XX: XX

### **Frequent Waking**

I had a sleepless night I fell asleep about 09: 00pm then I remember getting up 01: 22am fell asleep again woke up at 03: 32am fell asleep again woke up at 04: 00am then stayed awake.

24F 01: XX: XX

After waking up after that dream last night I didn't sleep right through I woke up about 3 times again after every dream and every time I woke up I was dead tired.

24F 04: XX: XX

### **Difficulty on Waking**

5: 30 Had trouble waking up with a high thirst level.

09M 04: XX: XX

Really battled to wake up, no leg pain no wrist pain.

10M 10: XX: XX

### **Disturbed**

Had disrupted sleep last night.

16M 09: XX: XX

### **Energy**

5: 00 Woke up with more energy than the last few days.

09M 05: XX: XX

### **Restless**

Did not sleep well at all last night. Was very restless and unsettled.

03F 11: XX: XX

Had a very restless sleep. Woke up at 3: 00am and could not go back to sleep. Eventually slept around 4/5am and woke up tired and unfulfilled.

03F 12: XX: XX

### **Short**

General: Bad sleep. Up to 4hrs.

22M 01: XX: XX

General: Bad sleep. Up to 4hrs.

22M 12: XX: XX

General: Bad sleep. Up to 5 hrs.

22M 19: XX: XX

General: Bad sleep. Up to 4hrs.

22M 21: XX: XX

### **Sleepiness**

All I wanted to do was sleep I was feeling tired and had a running stomach.

04aF 00: XX: XX

Felt drowsy a few times but it went away after taking a nap in the afternoon.

06F 27: XX: XX

I took the first dose at 06: 15am and I was feeling sleepy by 08: 00am when I got to campus.

19F 03: XX: XX

19: 00PM I just took the third dose and I feel sleepy again.

19F 05: XX: XX

After taking the 2<sup>nd</sup> dosage, I felt lightheaded again, about 15 minutes after and lasted for about 15 minutes. I also became really sleepy for a while then it wore off.

20M 00: XX: XX

Woke up feeling tired and thirsty.

09M 01: XX: XX

Woke up feeling very tired extremely thirsty.

09M 02: XX: XX

9: 00 Woke up feeling very tired out of it.

09M 03: XX: XX

5: 00 Woke up feeling very tired but was very happy to be awake.

09M 08: XX: XX

Struggled to get out of bed woke up tired.

10M 06: XX: XX

17: 30 Fell asleep on the way home.

09M 04: XX: XX

Felt a bit sleepy, slept very early (8: 20pm).

06F 20: XX: XX

Sleep: Quality sleep. More than usual hours. I slept 11 hours. I still woke up tired.

27M 04: XX: XX

### **Sleeplessness**

I couldn't sleep though. I couldn't get sleepy until it was late.

01aF 16: XX: XX

I woke up early I had sleepless nights the sun came out while I was watching it and I went to take a shower and had chocolate as my breakfast after which I went to class.

04aF 13: XX: XX

I went to study then came back late and went to sleep. I couldn't sleep I couldn't even close my eyes.

04aF 27: XX: XX

Didn't really sleep, don't know or remember how I fell asleep all I know it was late.

06F 11: XX: XX

Sleep: I couldn't sleep. I changed my position of sleeping.

12F 06: XX: XX

General: Bad sleep. Up to 4hrs.

22M 01: XX: XX

General: Bad sleep. Up to 4hrs.

22M 12: XX: XX

General: Bad sleep. Up to 5 hrs.

22M 19: XX: XX

General: Bad sleep. Up to 4hrs.

22M 21: XX: XX

Woke up around 3am just couldn't sleep and fell asleep around 5am again.

06F 26: XX: XX

23: 45 Could not fall asleep, woke up and started watching a movie.  
09M 15: XX: XX

Had such a bad night. I could not sleep with my sneezing. Felt like I was drowsy or sleepy but could not sleep. So tired.  
18F 01: XX: XX

I was in a bad mood. I just needed to spend time alone today. I felt like people were annoying me without a reason. Sleep: I couldn't sleep. I changed my position of sleeping.  
12F 06: XX: XX

There was no one outside but I heard a noise and ran inside thinking it was the bears. When I woke up from that dream I was very scared, I woke up at 4: 30am and couldn't fall asleep again so I just laid in bed.  
24F 19: XX: XX

Can't fall asleep, irritable.  
15F 01: XX: XX

11: 00 Felt very groggy with very tired eyes throughout the entire day from this point. 13: 00 Felt very normal after this moment in time. 23: 00 Couldn't sleep even though I felt tired.  
09M 08: XX: XX

Felt like I was drowsy or sleepy but could not sleep. So tired.  
18F 01: XX: XX

After waking up after that dream last night I didn't sleep right through I woke up about 3 times again after every dream and every time I woke up I was dead tired.  
24F 04: XX: XX

### **Unrefreshing**

I was tired. I woke up tired and continued my day like that. My neck and back hurt.  
1aF 19: XX: XX

Had a very restless sleep. Woke up at 3: 00am and could not go back to sleep. Eventually slept around 4/5am and woke up tired and unfulfilled.  
03F 12: XX: XX

Woke up so early feeling like I didn't even sleep.  
06F 12: XX: XX

I woke up feeling tired and not ready to start a day.  
12F 18: XX: XX

Woke up lethargic, slight headache front of head around eyes.  
15F 05: XX: XX

## **Waking Cheerful**

5: 00 Woke up feeling very tired but was very happy to be awake.

09M 08: XX: XX

5: 00 Woke up feeling very good and happy with a feeling of being able to do anything.

09M 15: XX: XX

## **Time**

### **Afternoon**

17: 30 Fell asleep on the way home.

09M 04: XX: XX

### **Catnaps**

Spent the afternoon with my mother then had an afternoon nap. Felt more drained when I woke up.

03F 10: XX: XX

Took a nap for about 1 hour around midday.

06F 01: XX: XX

Took a nap at midday for about 2 hours.

06F 09: XX: XX

Took a nap at midday for about 2 hours.

06F 15: XX: XX

Felt drowsy a few times but it went away after taking a nap in the afternoon.

06F 27: XX: XX

Took a 2hr nap just after midday.

06F 28: XX: XX

Slept at 12: 00 to 14: 00 because I came early from school.

08F 06: XX: XX

13: 00 Fell asleep and woke up at 17: 00.

09M 03: XX: XX

I took a nap around 12: 00PM and I did not wake up feeling tired as I usually do after naps.

19F 01: XX: XX

Frequently sleeping during the day and at night.

25F 00: XX: XX

### **Daytime**

11: 00 Fell asleep during a lecture.

09M 04: XX: XX

### **Evening**

Felt a bit sleepy, slept very early (8: 20pm).

06F 20: XX: XX

### **Morning**

After taking the remedy in the morning I was feeling tired and I forced myself to go to church.

04aF 01: XX: XX

4: 30 Woke up feeling tired and thirsty.

09M 01: XX: XX

8: 00 Woke up feeling very tired extremely thirsty.

09M 02: XX: XX

9: 00 Woke up feeling very tired out of it.

09M 03: XX: XX

5: 00 Woke up feeling very tired but was very happy to be awake.

09M 08: XX: XX

Struggled to get out of bed woke up tired.

10M 06: XX: XX

### **Night**

Woke up around 3am just couldn't sleep and fell asleep around 5am again.

06F 26: XX: XX

23: 45 Could not fall asleep, woke up and started watching a movie.

09M 15: XX: XX

Had such a bad night. I could not sleep with my sneezing. Felt like I was drowsy or sleepy but could not sleep. So tired.

18F 01: XX: XX



### **Night Awake with Day Sleeping**

I am not a night sleeper any more I am a daylight sleeper. I prefer to sleep during the day.  
04aF 21: XX: XX

### **Prolonged**

I wanted to sleep all the time.  
06F 00: XX: XX

Slept like a baby for more than 9hrs.  
06F 29: XX: XX

Sleep: Quality sleep. More than usual. I slept 10 hours, I usually sleep 8 hours.  
27M 03: XX: XX

Sleep: Quality sleep. More than usual hours. I slept 11 hours. I still woke up tired.  
27M 04: XX: XX

### **Too Early**

I woke up early around 4: 30am which is not my waking time I was dreaming even though I don't remember but it was a nightmare.  
12F 06: XX: XX

### **Waking On**

Sleep: Quality sleep. More than usual hours. I slept 11 hours. I still woke up tired.  
27M 04: XX: XX

## **4.3.25 Dreams**

### **Animals**

I had a normal quality sleep. I dreamt an unusual scary dream of crocodiles.  
14M 15: XX: XX

I remember me having a dream about dogs I got so scared that I woke up and rebuked my dream in the name of Jesus.  
24F 20: XX: XX

I had a dream but I can't remember the first part but the second part I was at home with my family and all of a sudden there were monkeys in the house and we were outside and a monkey pulled my 2 year old nephew inside and I tried to pull him but I was weak my left arm I couldn't lift it and my right arm I barely had strength, I tried to call one of my family members but my voice was also going I couldn't scream. But eventually someone saw me trying to scream and then ran into to save me. I got up after the dream.

24F 13: XX: XX

I kept on waking up after every dream I had and my dreams were about presentation I'm having today and I remember having dreams of bears they were outside my house and my dogs were tied up I was scared they would hurt my dogs. My family and I blocked every window and door when I couldn't see them I went outside to see if there is still people. There was no one outside but I heard a noise and ran inside thinking it was the bears. When I woke up from that dream I was very scared, I woke up at 4: 30am and couldn't fall asleep again so I just laid in bed.

24F 19: XX: XX

### **Animation**

I slept very well dreamt a stupid dream of cartoons.

14M 05: XX: XX

### **Body Parts Removed**

I woke up at 10: 30pm cause I had a dream of Bronwyn and about cutting my index finger off.

24F 03: XX: XX

### **Clairvoyant**

I had a dream of the presentation I will be doing tomorrow and I done great I just hope I do great in reality.

24F 18: XX: XX

### **Companionship**

I had a dream that I finally found my own girlfriend and that she was everything I had hoped for and prayed about. (NS). It was great. First dream I've had like that – Longing for companionship. Don't want to be alone. Wanting to be happy. Fulfilment to get relationship. I didn't want to wake up and when I did, I was sad and disappointed.

16M 18: XX: XX

### **Computer Games**

I dreamt a lot of games and computer games.

14M 07: XX: XX

### **Confusion**

Had strange lucid dreams. Feel slightly disconcerted. In the dream I was looking for something which could not be retrieved. Feel a bit confused.

03F 14: XX: XX

### **Desired**

I had quality sleep slept for 7 hours and some minutes and had unusual dream of girls that want me.

14M 10: XX: XX

### **Happy**

Had happy dreams in a good mood.

10M 20: XX: XX

Had a dream about my friends in high school but couldn't remember everything. But I was happy and excited in the dream.

06F 31: XX: XX

### **Involving People**

I took a nap and while sleeping I had a dream and it was not a scary dream. Dreamt about my family it was like a family related dream.

04aF 25: XX: XX

I had a long peaceful night dreamt my high school friends and I woke up at 5 though.

14M 20: XX: XX

Tuesday morning I remembered I had a dream of a girl in my class which I don't like and I told her off because she was controlling me, my next dream when I walked out of the class into a mall and there was this little boy with 2 babies and I stopped him and I was playing with the babies.

24F 11: XX: XX

Today I dreamt of me being pregnant I didn't see my stomach but my dad was angry that I was pregnant and said I'm doing the same thing my cousin done. I felt trapped because having a baby is a big responsibility but I can't abort my baby and will never do that so I felt like the world is on top of me.

24F 12: XX: XX

### **Missing Tests**

Slept well and had a DREAM: being at school (DUT) – I was at the clinic and we were supposed to write a test. I was prepared and missed it. I couldn't remember what the subject

was though. But I was in serious trouble for missing it. I was supposed to go for the disciplinary hearing and then I woke up.

06F 23: XX: XX

### **Nightmares**

I woke up early around 4: 30am which is not my waking time I was dreaming even though I don't remember but it was a nightmare.

12F 06: XX: XX

### **Robbery**

I had a dream of the boy who broke my heart and a dream of my phone being stolen it was like a déjà vu dream because I have seen this place in my dreams before.

24F 30: XX: XX

### **Searching for Loved Ones**

Had a long abstract dream about an ex. Was in a school and continued to look for her because I felt like I needed her in that instance in time.

09M 09: XX: XX

Woke up feeling very distracted due to yet another dream: of an ex with the aspect of looking for them. Felt confused and sad as I awoke to start my day.

09M 11: XX: XX

### **Snakes**

I woke up at 07: 15am scared cause I had a dream about a lot of snakes all types.

24F 16: XX: XX

Had a dream about a snake. Haven't had a dream about a snake in a while. Same as always. Running away from snake.

03F 20: XX: XX

I had a short night and had a bad dream of snakes and scary things.

14M 08: XX: XX

Dreams: Bad dream – Snake was attacking me and looking at me.

22M 01: XX: XX

### **Strength**

Sunday morning I woke up and the dream that I had was about my big brother there were men that was after him and I was standing in a crowd on a field and I knew the guys plans to get my brother. Then they started shooting so everyone laid on the floor and these guys found me and dragged me around the corner the thought that was running through my mind

was that they will use me to get to my brother so I pretended that I fainted. Then the guy that was watching me was trying to wake me up pointing the gun to my head threatening me. As he went on and said he we bury me next to my mother I all of sudden had loads of strength I got up and hit him. I hit this man in the face I was so angry he said that I just continued hitting him, I even hit him in the private part the way I was angry then I woke up from my dream.

24F 09: XX: XX

### **Unfortunate Events**

Dreamt realistic dreams about my suspension.

14M 11: XX: XX

### **Unremembered Dreams**

Slept very well didn't dream or I just don't remember if I dreamt at all.

01aF 02: XX: XX

Woke up at 8: 00 had a strange dream cannot recall exact details.

03F 02: XX: XX

Woke up feeling quite strange. cannot remember any particular dreams.

03F 09: XX: XX

My morning seems fine and feeling good though a little lazy and having bad dream and can't remember it.

07aM 30: XX: XX

Woke up feeling perfectly fine had a great night sleep. Body feels refreshed. Don't remember any dreams.

10M 01: XX: XX

Can't remember dreams.

10M 12: XX: XX

Sleep pattern – good sleep. I sleep on my stomach and I am unable to remember my dreams.

12F 00: XX: XX

I think I had dreams but just can't remember any of them.

24F 01: XX: XX

I had a dream but can't remember it.

24F 06: XX: XX

Today I don't feel good I've been having dreams but I just can't remember them.

24F 26: XX: XX

I also couldn't remember any dreams.

28F 14: XX: XX

### **Water and Tsunami**

I experienced a strange dream, I was at the beach with family and friends playing volleyball, when all of a sudden we saw this huge wave approaching us, it was a (ste..) tsunami. We all began to run up the sand bank, the first person made it up, then I struggled to make it but eventually I made it. The last of us was really struggling to make it, almost as if it was meant for him to not make it up the sand bank. The wave was approaching and I made sure I stayed behind and helped him. I just managed to pull him up before the wave hit, it was one weird, strange dream. I was caught off guard and it was unexpected. I felt threatened by the water. I was scared at the possibility of dying. Only I could swim that's why I stayed to help the others.

20M 20: XX: XX

### **4.3.26 Fever**

#### **Concomitants**

I am having very high temperatures on my head. They are causing me to be sleepy and nauseous.

14M 13: XX: XX

#### **Sensation**

##### **Sleepy**

I am having very high temperatures on my head. They are causing me to be sleepy and nauseous.

14M 13: XX: XX

#### **Time**

##### **Night**

Fever: temperature is high at night.

12F 01: XX: XX

### **4.3.27 Perspiration**

#### **Concomitants**

##### **Nervousness**

... we had a nutrition presentation to do so I was nervous, perspiring a lot under my armpits...

24F 12: XX: XX

##### **Location**

##### **Back**

I had sweated in the afternoon on my back only.

01aF 02: XX: XX

##### **Modality**

I slept when I came back and sweated which is something I hardly do.

07aM 30: XX: XX

##### **Sensation**

##### **Profuse**

I have been sweating a lot and wash my hair every day because oily hair makes me look and feel dirty.

03F 17: XX: XX

I sweat a lot.

12F 02: XX: XX

Excessive perspiration.

15F 03: XX: XX

##### **Time**

##### **Afternoon**

I had sweated in the afternoon on my back only.

01aF 02: XX: XX

#### **4.3.28 Skin**

##### **Location**

##### **Forehead**

Slight abdominal discomfort and new crop of cystic pimples on sides of forehead.

03F 16: XX: XX

##### **Head**

I feel a lot calmer than usual but am worried about the horrible pimples cropping up so quickly in hairline and even neck.

03F 01: XX: XX

##### **Sensation**

##### **Itching**

Skin itched constantly possibly from cat hair and experienced abdominal tenderness discomfort.

03F 11: XX: XX

I still have a blocked nose and my skin is itchy on my upper body.

14M 16: XX: XX

##### **Warts**

I noticed warts on my hands small ones on my right index finger I noticed them 2 weeks ago they haven't been paining or anything.

24F 34: XX: X

#### **4.3.29 Generals**

##### **Concomitants**

##### **Heat with Vertigo**

The same day after taking the remedy I was feeling hot and I was feeling a little bit dizzy. And I felt like my head was going to come out.

04aF 01: XX: XX

##### **Weakness with Vertigo**

I woke up and wanted to go to my tutorials but I was very weak and feeling dizzy.

04aF 22: XX: XX



## **Modality**

### **Aggravation**

My stomach was feeling a bit constipated. I think it's because of the broad beans.

26F 17: XX: XX

Avocado makes me feel light and fresh but bread makes me feel heavy and lethargic.

03F 17: XX: XX

For breakfast I had Milo cereal it made my stomach turn a little because of the milk.

24F 18: XX: XX

Worse for oats: cramps below my belly button.

25F 08: XX: XX

### **Spices**

I had the urge to go to the toilet when I woke up. Upon getting there, I realised two things.

My menstruation flow was now getting lighter as it had been five days already I also realised that my tummy was slightly paining and I released a runny watery stool. This was because of the spicy briyani I had last night.

26F 03: XX: XX

I had a reaction with my ulcers that started with a burning sensation. This was due to eating spicy food.

28F 14: XX: XX

### **Amelioration**

#### **Warm Drinks**

Feeling much better can still feel a few stomach cramps but it okay. I feel a bit nauseas though. Drank a cup of warm water and it went away.

06F 28: XX: XX

### **Aversion**

Thirst: Put off coffee and craved water.

25F 08: XX: XX

## **Desire**

### **Cake**

12: 00PM And I've been craving red velvet cake today.  
19F 02: XX: XX

Cravings: Red velvet cake.  
25F 08: XX: XX

### **Cheese**

I got up at 08: 00am I had coffee and a sandwich with cheese cause I was wishing for cheese the previous night.  
24F 04: XX: XX

### **Chocolate**

Symptoms: Just been very thirsty and want chocolate.  
03F 06: XX: XX

Cravings/Food wishes: chocolate all the time.  
03F 06: XX: XX

Woke up at 2pm this morning desperately craving chocolate lucky I had some at hand.  
03F 11: XX: XX

Am craving chocolates and confectionery very much.  
03F 15: XX: XX

Got to school was studying the whole morning I was wishing for Smarties but the shops didn't have so I bought Astros.  
24F 33: XX: XX

### **Coffee**

When I woke up I just had to have coffee my body was craving it.  
24F 21: XX: XX

### **Cold Water**

Don't remember craving for anything but cold water, but I think it was because of the heat.  
01aF 4: XX: XX

I get thirsty for ice water more.  
30F 02: XX: XX

## **Eggs**

Woke up almost at mid-morning. Felt so hungry and craving some eggs.

06F 29: XX: XX

I've been craving eggs mixed with nice Aromat.

30F 02: XX: XX

## **Fried Chips**

I also wish for fry chips I love it it's one of the food I enjoy eating and don't take so long eating it.

24F 05: XX: XX

## **Fruit**

I was having chips for lunch and I am craving fruit. I like eating fruit daily.

04aF 11: XX: XX

Ate well actually felt like eating a lot of fresh fruits. I picked some grapes from the garden tasted great.

06F 19: XX: XX

Green tea and craving fruit.

12F 00: XX: XX

Just craving fruit. My mood was good.

12F 28: XX: XX

## **Lemon**

Craved tea with lemon and any food with salt.

06F 20: XX: XX

Still craving tea with lemon.

06F 21: XX: XX

## **Oranges**

... I was wishing for curry powder, salt, sugar and vinegar with an orange so I made it.

[24F 02: XX: XX][24F 09: XX: XX][24F 30: XX: XX]

## **Salt**

Have been eating a lot of chips recently. Feeling for salty food a lot. Have also been eating a lot of fried food – McDonalds chips.

03F 27: XX: XX

Craved tea with lemon and any food with salt.  
06F 20: XX: XX

### **Sour**

I have been eating a lot and I am craving Amasi.  
07aM 01: XX: XX

### **Spices**

Craving spicy food.  
12F 01: XX: XX

I've been craving eggs mixed with nice Aromat.  
30F 02: XX: XX

... I was wishing for curry powder, salt, sugar and vinegar with an orange so I made it.  
[24F 02: XX: XX][24F 09: XX: XX][24F 30: XX: XX]

### **Tea**

Craved tea with lemon and any food with salt.  
06F 20: XX: XX

Still craving tea with lemon.  
06F 21: XX: XX

### **Vinegar**

... I was wishing for curry powder, salt, sugar and vinegar with an orange so I made it.  
[24F 02: XX: XX][24F 09: XX: XX][24F 30: XX: XX]

### **Water**

I've been feeling thirsty lately I keep a bottle to drink water when I need to. Normally if I don't have water in sight I don't drink water but lately I look for water.  
24F 34: XX: XX

Thirst: Put off coffee and craved water.  
25F 08: XX: XX

### **Sensation**

#### **Activity**

I was happy refreshed and full of energy.

01aF 07: XX: XX

Had a lot of energy as I woke up.

01aF 13: XX: XX

Woke up refreshed but a bit lazy and I just lay in bed and wanted to regain my energy.

01aF 08: XX: XX

## **Cold**

I enjoyed today's raining and cold weather even though I had to attend lectures. So wish I could have just stayed in my bed the whole day.

08F 06: XX: XX

The weather makes me feel better dull cold and wet weather.

10M 04: XX: XX

I took a cold shower, I just felt like cold water for some reason. This is unusual as I only take cold showers in real hot/humid days and today it was not that hot in the morning.

26F 14: XX: XX

11: 00 Felt very miserable because of my feet becoming cold and wet.

09M 05: XX: XX

## **Energy**

Had a lot of energy as I woke up.

01aF 13: XX: XX

Woke up and cleaned my room and had a lot of energy.

01aF 28: XX: XX

Felt quite energetic and happy.

06F 03: XX: XX

Feel happy and energetic and had a good appetite.

06F 22: XX: XX

12: 00 I'm well but still coughing mucous lumps and now I'm feeling all energetic

07aM 02: XX: XX

Was told I had much more energy and talked more often.

09M 00: XX: XX

Felt full of energy and talkative.

09M 00: XX: XX

Felt full of energy and talkative just as before.

09M 01: XX: XX

Feel as if I have a lot of energy hungry.

15F 00: XX: XX

I was full of energy I finished dressed early that I even had time to feed my dogs and pick up their stools.

24F 10: XX: XX

### **Faintness**

It felt like I was going to collapse.

20M 00: XX: XX

After 1<sup>st</sup> dosage of taking the remedy, I began to feel lightheaded very slightly.

20M 00: XX: XX

After 3<sup>rd</sup> dosage I again experienced a very mild light headedness and felt very sleepy again for a while.

20M 00: XX: XX

### **Fullness**

I haven't eaten anything but feel very full.

07aM 32: XX: XX

### **Heat**

I feel hot almost like a heat wave has come over me and I'm quite cold sensitive normally.

18F 02: XX: XX

Hot flushes started superior and moved inferior I just started to breathe deeply and felt deeper.

15F 00: XX: XX

Dose 4 taken at 10: 00am While taking dose hot flushes arise around the entire superior part of my body more intense each time.

15F 01: XX: XX

Felt a bit cold but the weather was warm.

06F 20: XX: XX

Experienced a sensitivity to heat.

09M 00: XX: XX

This was coupled with a hypersensitivity to heat. This feeling persisted throughout the day with no other visible symptoms.

09M 02: XX: XX

The same day after taking the remedy I was feeling hot and I was feeling a little bit dizzy. And I felt like my head was going to come out.

04aF 01: XX: XX

### **Inflammation**

The weather was fine, I woke up having sinusitis and was not feeling okay because it was really bad and hurtful.

04aF 04: XX: XX

I woke up with sinusitis and it was hurting on the left side. It felt like I was going to die.

04aF 31: XX: XX

My sinus is worse. I usually have it in the morning. But this time it is worse in the evening. Worse in the room, and for odours. Better for open air, with sneezing.

27M 19: XX: XX

### **Numbness**

My boobs were swollen and sore and my body felt numb from the pain.

24F 12: XX: XX

### **Pain**

8: 00 I am having lumps of mucous as if I have a cold. My muscles hurt and I can't move as usual. I feel like my bones are dislocated.

07aM 02: XX: XX

### **Pressure**

8: 44 The sensation of having my shoulders and neck squeezed was very pleasant.

09M 00: XX: XX

### **Pulse**

Feel flush, high pulse.

15F 05: XX: XX

### **Swelling of Glands**

The lymph nodes in my neck flared up.

03F 27: XX: XX

## **Warmth**

### **Aggravation**

Heat is unbearable, breathing shallow.

15F 04: XX: XX

Just felt very hot and sweaty.

06F 35: XX: XX

### **Amelioration**

I took a warm bath which made me feel better.

26F 12: XX: XX

I took a warm relaxing bath. I really enjoyed that bath.

26F 15: XX: XX

### **Weariness**

My energy level is very low.

30F 02: XX: XX

I woke up and wanted to go to my tutorials but I was very weak and feeling dizzy.

04aF 22: XX: XX

I was feeling weak I woke up feeling like I could just go away everything was not right.

04aF 14: XX: XX

I woke up feeling really drained today for some reason I don't know.

26F 24: XX: XX

Have definitely noticed a dwindling in my energy levels. Getting very tired after small and trivial tasks.

03F 02: XX: XX

Symptoms: fatigue, dry scalp.

03F 10: XX: XX

It's been an exhausting year feeling physically mentally and emotionally drained.

03F 12: XX: XX

My body feels tired in general. Wishing for a massage.

03F 28: XX: XX

The worst day of my life I always feel tired with no reason.

04aF 24: XX: XX



14: 00 I am feeling tired. I even went out of the class to get some fresh air.  
07aM 03: XX: XX

I was very tired during the afternoon but a bit better now.  
14M 28: XX: XX

Tiredness in the afternoon during 3pm until late.  
25F 08: XX: XX

Just felt a little tired from all the walking around town buying groceries for the family with my brother.  
06F 15: XX: XX

Have been waking up feeling extremely exhausted and worn out lately.  
03F 11: XX: XX

### **Weather**

Beautiful day but too hot. Uncomfortable hot and sticky.  
03F 22: XX: XX

I woke up in the morning looking at the window and I saw that it was raining. I was so happy because I really really love the rain.  
12F 10: XX: XX

The weather makes me feel better dull cold and wet weather.  
10M 04: XX: XX

#### 4.4 The Repertory of Carcharhinus leucas 30CH

The Essential Synthesis Edition 9.1 (Schroyens, 2012) was used as a guideline for transcribing the proving symptomatology into repertory rubrics. In doing so the symptoms were grouped and graded according to frequency of symptom occurrence (Sherr, 2003: 86) and number of provers experiencing the symptom (Schroyens, 2012).

Rubric gradings as defined according to Ross (2011: 164) and are interpreted as shown in Table 4.2.

**Table 4.2: Rubric grading system**

Number of Provers	Average Percentage	Grading
2 or less	7 - 13	1
3 - 7	20 - 47	2
8 – 15	53 and above	3

Grade 1 - rubrics are in plain type

Grade 2 - rubrics are in *italics*

**Grade 3 - rubrics are in bold type, lower case**

New rubrics are underlined and denoted with an NS

This elaborate meticulously represented repertory consists of three columns composed of detailed rubrics appearing in order, divided by chapter headings identical to those of The Essential Synthesis Edition 9.1 (Schroyens, 2012). The first column details the rubric, the second column designates a grading and the third column lists either the Synthesis repertory page number, new symptom (NS) or cured symptom (CS).

##### 4.4.1 RUBRICS of Carcharhinus leucas 30CH

Rubric and subrubric/s

Grade Page/NS/CS<sup>2</sup>

###### 4.4.1.1 Mind

Mind AFFECTIONATE	1	3
Mind AILMENTS FROM – anger	1	3

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<sup>2</sup> Font size and line spacing have been reduced slightly in order to reduce the overall number of pages of the dissertation.

Mind AILMENTS FROM – anger – suppressed	1 4
<b>Mind AILMENTS FROM – love; disappointed</b>	<b>3 5</b>
Mind ANGER – contradiction; from	1 9
Mind ANGER – love; from disappointed	1 10
Mind ANGER – sudden	1 10
Mind ANGER – trifles; at	1 10
Mind ANGER – violent	1 10
Mind ANGER – waking; on	1 11
Mind ANXIETY	1 14
<u>Mind ANXIETY – dreams, after</u>	<u>1 NS</u>
Mind ANXIETY – health; about others; of	1 19
Mind ANXIETY – present, about	1 20
Mind ANXIETY – travelling; before	1 21
Mind ANXIETY – waking, on	1 21
Mind AVERSION – friends, to	1 23
Mind CAPRICIOUSNESS	1 27
<i>Mind CHEERFUL</i>	2 29
Mind CHEERFUL – causeless	1 30
Mind CHEERFUL – dancing, laughing, singing; with	1 30
Mind CHEERFUL – waking, on	1 31
Mind CHILDISH behaviour	1 31
<i>Mind COMPANY – aversion to</i>	2 34
Mind COMPANY – aversion to – alone amel; when	1 34
<i>Mind COMPANY – aversion to – desire for solitude</i>	2 34
Mind COMPANY – desire for	1 34
Mind COMPANY – desire for – amel in company	1 34
Mind COMPLY to the wishes of others; feeling obliged to	1 35
Mind CONCENTRATION active	1 35
<i>Mind CONCENTRATION – difficult</i>	2 36
<i>Mind CONCENTRATION – difficult – attention, cannot fix</i>	2 36
Mind CONCENTRATION – difficult – studying	1 36
Mind CONFIDENCE – inadequacy; feeling of	1 37
Mind CONFIDENCE – want of self-confidence	1 37
Mind CONFIDENT	1 37
Mind CONFUSION of mind	1 37
Mind CONFUSION of mind – reading, while	1 40
<u>Mind CRITISISM – aversion to</u>	<u>1 NS</u>
Mind DELUSIONS – alone, being	1 50
Mind DELUSIONS – dirty – he is	1 51
Mind DELUSIONS – body – ugly; body looks	1 53
Mind DELUSIONS – floating – air, in	1 61
Mind DELUSIONS – floating	1 62
Mind DELUSIONS – head – separated from body; head is	1 64
<u>Mind DELUSIONS – lost, she is</u>	<u>1 NS</u>
Mind DELUSIONS – person – present; someone is	1 72
Mind DELUSIONS – person – room; another person is in the	1 72
Mind DELUSIONS – time – earlier; time seems	1 79

Mind DELUSIONS – time – exaggeration of time	1 79
Mind DELUSIONS – watched, she is being	1 82
Mind DELUSIONS – wrong – done wrong; he has	1 83
Mind DETERMINATION	1 85
Mind DISCONTENTED – himself, with	1 86
<i>Mind ELATED</i>	2 93
Mind ESCAPE, attempts to – run away, to	1 95
Mind EXERTION – physical – amel	1 98
Mind FASTIDIOUS – cleanliness; for	1 100
Mind FEAR	1 100
MIND FEAR – corpses; fear of	1 103
Mind FEAR – everything, constant of	1 104
Mind FEAR – failure, of	1 106
Mind FEAR – failure, of – examinations; in	1 106
Mind FEAR – narrow place, in	1 109
Mind FEAR – self – control, of losing	1 111
Mind FEAR – unknown; of the	1 113
Mind FORGETFUL	1 115
Mind FORSAKEN feeling	1 116
Mind FORSAKEN feeling – isolation; sensation of	1 116
Mind HATRED of self	1 NS
<i>Mind HELPLESSNESS; feeling of</i>	2 122
Mind HOME – desires to go	1 123
Mind HOPEFUL	1 123
Mind HORROR MOVIES – love	1 124
Mind HURRY duties; as by imperative	1 124
Mind HURRY – eating; while	1 124
Mind HURT; easily – mentally hurt	1 125
Mind IMPATIENCE	1 127
Mind INSECURITY; mental	1 135
<i>Mind IRRITABILITY</i>	2 136
Mind IRRITABILITY – daytime	1 136
Mind IRRITABILITY – morning – waking on	1 137
Mind IRRITABILITY – night	1 137
Mind IRRITABILITY everything causes	1 138
Mind IRRITABILITY – headache, during	1 138
Mind IRRITABILITY – people; with	1 139
Mind IRRITABILITY – spoken to, when	1 140
<i>Mind IRRITABILITY – trifles, from</i>	2 140
Mind LAUGHING	1 143
Mind LAUGHING – immoderately	1 145
<i>Mind LAZINESS</i>	2 145
<i>Mind LOQUACITY</i>	2 148
Mind LOVE family; for	1 149
Mind MEMORY – weakness of memory	1 153
Mind MEMORY – weakness of memory – persons, for	1 154
Mind MEMORY – weakness of memory – places, for	1 154

Mind MOOD – agreeable	1 160
<i>Mind MOOD – alternating</i>	2 160
<i>Mind MOOD – changeable</i>	2 160
Mind OCCUPATION amel	1 165
Mind ORIENTATION; sense of – decreased	1 165
Mind PATIENCE	1 166
Mind PLAYFUL	1 167
Mind POSITIVENESS	1 168
Mind PROSTRATION of mind	1 169
Mind PROSTRATION of mind – writing, after	1 170
Mind RELIGIOUS AFFECTIONS	1 173
Mind RELIGIOUS AFFECTIONS – want of religious feeling	1 173
Mind SADNESS	1 181
Mind SADNESS – night	1 182
Mind SADNESS – extreme	1 183
Mind SYMPATHY from others – desire for	1 205
Mind TACITURN	1 205
Mind TIMIDITY	1 211
Mind TIMIDITY – company, in	1 211
<i>Mind TRANQUILLITY</i>	2 212
Mind WEEPING	1 212

#### **4.4.1.2 VERTIGO**

Vertigo MORNING	1 225
Vertigo MORNING waking; on	1 225
Vertigo CONGESTION; from	1 228
Vertigo DRINKING – water – amel	1 229
Vertigo EATING – after – amel	1 229
Vertigo MOTION – agg	1 232
Vertigo NAUSEA – with	1 233
Vertigo NAUSEA – with-morning	1 233
Vertigo NAUSEA – with – waking; on	1 233
Vertigo OIL, fumes of	1 233
Vertigo PERSPIRATION	1 234
Vertigo SITTING – amel	1 235
Vertigo TURNING; as if – everything were turning in a circle; as if	1 237

#### **4.4.1.3 HEAD**

Head DRYNESS	1 250
Head HEAT – Forehead	1 259
Head HEAVINESS	1 260
Head HEAVINESS – headache; from	1 261
<b>Head PAIN</b>	<b>3 271</b>
Head PAIN – morning – hammering pain	1 272

Head PAIN – morning – waking – on	1 273
Head PAIN – afternoon	1 274
Head PAIN – sneezing; frequent	1 277
Head PAIN – accompanied by – lachrymation	1 277
Head PAIN – accompanied by – nausea	1 277
Head PAIN – accompanied by – sneezing; frequent	1 277
Head PAIN – accompanied by – Eye complaints	1 278
Head PAIN – accompanied by – Eye complaints – inflammation of eyes	1 278
Head PAIN – air; in open – agg	1 279
Head PAIN – air; in open – amel	1 279
Head PAIN – anger; after	1 280
Head PAIN – closing the eyes – amel	1 283
Head PAIN – cold – air – agg	1 283
<i>Head PAIN – constant, continued</i>	2 284
Head PAIN – cough – during – agg	1 285
Head PAIN – dull pain	1 286
Head PAIN – diarrhoea – during	1 287
Head PAIN – exertion – agg	1 287
<u>Head PAIN – heavy</u>	1 NS
Head PAIN – increasing – gradually	1 289
Head PAIN – light; from – agg	1 290
Head PAIN – light; from – artificial light – agg	1 290
Head PAIN – menses – during – agg	1 292
Head PAIN – motion – agg	1 293
Head PAIN – noise – agg	1 295
Head PAIN – odours – strong odours agg	1 295
Head PAIN – pressure – amel	1 298
Head PAIN – sitting; from – amel	1 299
Head PAIN – sharp	1 300
Head PAIN – sitting – amel	1 301
Head PAIN – sleep – after – amel	1 301
Head PAIN – sleep – amel	1 301
Head PAIN – surging	1 304
Head PAIN – warmth – agg	1 308
Head PAIN – extending to – Vertex	1 311
Head PAIN – Eyes	1 313
<i>Head PAIN – Forehead</i>	2 313
Head PAIN – Forehead – burning	1 317
Head PAIN – Forehead – pulsating pain	1 321
Head PAIN – Forehead – sleep – after – agg	1 322
Head PAIN – Forehead – waking – on	1 324
Head PAIN – Occiput	1 335
<i>Head PAIN – Sides</i>	2 346
Head PAIN – Sides – right	1 347
Head PAIN – Temples	1 354
Head PAIN – Temples – right	1 354
Head PAIN – Temples – right – bursting pain	1 354

Head PERSPIRATION of scalp – sleep – during	1 371
Head SHAKING sensation	1 378

#### 4.4.1.4 EYES

Eye CLOSING THE EYES – amel – vertigo during	1 NS
Eye DISCOLORATION – red	1 395
Eye HEAT in – right	1 400
Eye HEAVINESS	1 400
Eye INFLAMMATION	1 401
Eye INFLAMMATION – morning	1 401
Eye INFLAMMATION – Lids – Lower	1 404
Eye IRRITATION	1 405
Eye ITCHING	1 405
Eye ITCHING – morning	1 405
Eye PAIN – right	1 411
Eye PAIN – left	1 411
Eye PAIN – aching	1 414
Eye PAIN – closing the eyes – agg	1 415
Eye PAIN – lachrymation – during	1 417
Eye PAIN – light; from – agg	1 417
Eye PAIN – motion – agg	1 418
Eye PAIN – pressure – slight – agg	1 419
Eye PAIN – touch – agg	1 422
Eye PAIN – warm – applications – amel	1 422
Eye PAIN – warmth – agg	1 422
Eye PAIN – Canthi – Inner – right	1 424
Eye PAIN – Canthi – Inner – foreign body; as from a	1 424
Eye PAIN – Lids – right	1 426
Eye PAIN – Lids – left	1 426
Eye PAIN – Lids – Lower – right	1 427
Eye PHOTOPHOBIA	1 429
Eye PHOTOPHOBIA – light; from – artificial light – agg	1 429
Eye PHOTOPHOBIA – light; from – sunlight – agg	1 429
Eye SMALLER; sensation as if	1 431
Eye STYES – appearing gradually	1 433
Eye STYES – Lid – Upper – right	1 433
Eye SWELLING – right	1 434
Eye SWELLING – left	1 434
Eye SWELLING – Canthi – Inner	1 434

#### 4.4.2.5. VISON

#### 4.4.1.5 Vision

Vision BLURRED	1 443
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#### 4.4.1.6 NOSE

<b>Nose CONGESTION</b>	<b>3 507</b>
Nose CONGESTION – accompanied by – cough	1 NS
Nose CONGESTION – cold – amel	1 NS
Nose CONGESTION – heat – agg	1 NS
Nose CONGESTION – night	1 507
Nose CORYZA	1 508
Nose CORYZA – morning – waking; on	1 508
Nose DISCHARGE	1 513
Nose DISCHARGE – morning	1 513
Nose DISCHARGE – clear	1 514
Nose DISCHARGE – constant	1 514
Nose DISCHARGE – copious	1 514
Nose DISCHARGE – motion – amel	1 NS
Nose DISCHARGE – warmth – amel	1 NS
Nose DISCHARGE – watery	1 517
Nose DRYNESS – Inside	1 519
Nose HEAVINESS	1 525
Nose ITCHING	1 525
Nose PAIN – Outer part	1 534
Nose PAIN – Sinuses	1 536
Nose SNEEZING	1 538
Nose SNEEZING – morning	1 539
Nose SNEEZING – air; in open – amel	1 539
Nose SNEEZING – cold air agg	1 539
Nose <i>SNEEZING – frequent</i>	2 540
Nose SNEEZING – odours – agg	1 540
Nose SNEEZING sleepiness, with	1 540

#### 4.4.1.7 FACE

Face DISCOLORATION – bluish – Eyes – Around; circles	1 551
Face ERUPTIONS – acne	1 560
Face ERUPTIONS – pimples – Chin	1 565
Face ERUPTIONS – pimples –Forehead	1 565
Face ERUPTIONS – pimples – Nose	1 565
Face ERUPTIONS – Nose – Around	1 569
Face PAIN – Jaws – waking; on	1 NS
Face PAIN – Jaws – extending to – Joints	1 587

#### 4.4.1.8 MOUTH

Mouth DRYNESS – morning – waking; on	1 620
Mouth SWELLING – Gums	1 647



Mouth TASTE – sour	1 654
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#### 4.4.1.9 TEETH

Teeth LOOSENESS of – falling out	1 665
Teeth LOOSENESS of – painless	1 NS

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#### 4.4.1.10 THROAT

Throat CONSTRICTION	1 685
Throat DRYNESS	1 688
Throat PAIN – extending to – Ear	1 698
Throat PAIN – morning – waking; on	1 698
Throat PAIN – cough – after	1 700
Throat PAIN – dryness; with	1 701
Throat PAIN – raw; as if	1 702
Throat PAIN – sneezing – agg	1 702
Throat PAIN – sore	1 702
Throat PAIN – swallowing – after – agg	1 703
Throat SCRATCHING	1 709
Throat SWALLOWING – difficult – liquids	1 711

#### 4.4.1.11 EXTERNAL THROAT

External Throat STIFFNESS of sides	1 720
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#### 4.4.1.12 STOMACH

<i>Stomach APPETITE – diminished</i>	2 723
Stomach APPETITE – diminished – morning	1 724
<b>Stomach APPETITE – increased</b>	<b>3 724</b>
<i>Stomach APPETITE – increased – morning – waking; on</i>	2 724
Stomach APPETITE – increased – eating – after	1 725
Stomach APPETITE – insatiable	1 726
Stomach APPETITE – ravenous	1 726
Stomach DISTENSION – eating – after – agg	1 733
<u>Stomach EMPTINESS – accompanied by – burning</u>	<u>1 NS</u>
Stomach EMPTINESS – accompanied by – weakness	1 734
Stomach EMPTINESS – eating – after – agg	1 734
Stomach FULLNESS, sensation of – eating –after – agg	1 745
Stomach HEAVINESS	1 747
Stomach NAUSEA – menses – during – beginning of menses – agg	1 760
<i>Stomach PAIN – cramping</i>	2 769
Stomach PAIN – nausea – during	1 774
Stomach THIRST – morning – waking; on	1 785

Stomach THIRST – night	1 786
Stomach THIRST – cold – water – amel	1 787
<i>Stomach THIRST – extreme</i>	2 787
<u>Stomach THIRST – heat – aggravated by</u>	1 NS
Stomach THIRST – heat – during	1 787
Stomach THIRST – large quantities; for	1 788
Stomach THIRST – small quantities; for	1 788
Stomach THIRST – unquenchable	1 788
Stomach THIRSTLESS	1 788
Stomach ULCERS – painful – burning	1 790
Stomach VOMITING – blood – bright	1 797

#### 4.4.1.13 ABDOMEN

<i>Abdomen DISTENSION</i>	2 809
Abdomen DISTENSION- menses – during – agg	1 810
Abdomen FLATULENCE	1 814
Abdomen PAIN	1 826
Abdomen PAIN – cramping	1 832
Abdomen PAIN – flatus; from	1 836
Abdomen PAIN – flatus; passing – before	1 836
Abdomen PAIN – lying – back; on – agg	1 838
<u>Abdomen PAIN – sharp pain</u>	1 NS
Abdomen PAIN – Hypochondria – right	1 847
Abdomen PAIN – Pelvic region	1 869

#### 4.4.1.14 RECTUM

<i>Rectum CONSTIPATION</i>	2 898
Rectum CONSTIPATION – insufficient	1 900
Rectum CONSTIPATION – painful	1 901
Rectum CONSTIPATION – travelling, while	1 901
Rectum DIARRHOEA	1 902
Rectum DIARRHOEA – food – farinaceous, after	1 908
Rectum DIARRHOEA – headache – during	1 908
Rectum DIARRHOEA – pain; from	1 909
Rectum DIARRHOEA – spices, from	1 910
Rectum PAIN – stool – after – burning	1 927
Rectum PAIN – stool – after – agg – stinging	1 928
Rectum URGING	1 935
Rectum URGING – stool – during – agg	1 936

#### 4.4.1.15 STOOL

Stool DARK	1 941
Stool DRY	1 941

Stool GRANULAR	1 942
Stool LIGHT COLOURED	1 943
Stool ODOUR – offensive	1 945
Stool ODOUR – sour	1 945
Stool SMALL quantity	1 946
Stool SOFT	1 946
Stool UNDIGESTED	1 948
Stool WATERY	1 948

#### **4.4.1.16 BLADDER**

Bladder URINATION – frequent	1 962
Bladder URINATION – frequent – daytime	1 963
Bladder URINATION – frequent – morning	1 963
Bladder URINATION – frequent – night	1 963

#### **4.4.1.17 URINARY**

Urine COLOUR – greenish	1 1002
Urine ODOUR – strong	1 1006

#### **4.4.1.18 MALE GENITALIA/SEX**

Male genitalia ITCHING – Scrotum	1 1024
<u>Male genitalia ITCHING – Scrotum – eating after</u>	<u>1 NS</u>
<u>Male genitalia ITCHING – Scrotum – left</u>	<u>1 NS</u>
<u>Male genitalia ITCHING – Scrotum – right</u>	<u>1 NS</u>
<u>Male genitalia ITCHING – Scrotum – sides alternating</u>	<u>1 NS</u>
Male genitalia ITCHING – Scrotum – warm, agg; when	1 1025
Male genitalia ITCHING – Thighs, between	1 1025

#### **4.4.1.19 FEMALE GENITALIA/SEX**

Female genitalia/sex LEUKORRHEA – copious	1 1054
Female genitalia/sex MENSES – bright red	1 1060
Female genitalia/sex MENSES – clotted	1 1060
Female genitalia/sex MENSES – copious	1 1061
Female genitalia/sex MENSES – copious – night	1 1061
<i>Female genitalia/sex MENSES – painful</i>	<i>2 1064</i>
Female genitalia/sex MENSES – painful – accompanied by – nausea	1 1064
Female genitalia/sex MENSES – painful – bending double – amel	1 1064
Female genitalia/sex MENSES – painful – cold – agg	1 1065
Female genitalia/sex MENSES – painful – fever; with	1 1065
Female genitalia/sex MENSES – painful – motion – amel	1 1065
<u>Female genitalia/sex MENSES – painful – warmth – amel</u>	<u>1 NS</u>

Female genitalia/sex MENSES – thick	1	1067
Female genitalia/sex PAIN – menses – after – agg	1	1074
Female genitalia/sex PAIN – menses – sharp	1	1075
Female genitalia/sex PAIN – Uterus	1	1079
Female genitalia/sex PAIN – Uterus – cramping	1	1080
<u>Female genitalia/sex PAIN – Uterus – pulling pain</u>	1	NS
Female genitalia/sex PAIN – Uterus – sharp	1	1082

#### **4.4.1.20 COUGH**

Cough MORNING – early	1	1135
Cough ACCOMPANIED BY – Chest – pain	1	1138
Cough HEAT – after	1	1149
Cough MUCOUS – Chest; in	1	1151

#### **4.4.1.21 CHEST**

Chest CONSTRICTION	1	1183
Chest CONSTRICTION – night	1	1184
Chest CONSTRICTION – waking – on	1	1185
Chest PAIN – Mammae	1	1229
Chest PALPITATION of heart	1	1250
Chest PALPITATION of heart – anxiety – with	1	1251
Chest PERSPIRATION – Axilla	1	1256

#### **4.4.1.22 BACK**

Back PAIN	1	1282
Back PAIN – left	1	1282
Back PAIN – morning	1	1282
Back PAIN – waking – on	1	1292
Back PAIN – extending to – Scapula	1	1294
Back PAIN – Cervical region	1	1294
Back PAIN – Cervical region – left	1	1294
Back PAIN – Lumbar region	1	1315
Back PAIN – Lumbar region – morning – waking; on	1	1316
Back PAIN – Lumbar region – night	1	1317
Back PAIN – Lumbar region – burning	1	1318
Back PAIN – Lumbar region – menses – during – agg – aching	1	1321
Back PERSPIRATION	1	1338
Back STIFFNESS – Cervical region – headache during	1	1342

#### **4.4.1.23 EXTREMITIES**

Extremities ERUPTIONS – Feet	1	1387
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Extremities ERUPTIONS – Feet – itching	1 1387
Extremities HEAVINESS – Feet	1 1410
Extremities HEAVINESS – Upper limb	1 1412
Extremities INFLAMMATION – Feet	1 1413
Extremities ITCHING – Thighs	1 1421
Extremities LAMENESS – Legs	1 1426
<u>Extremities PAIN – hot pain</u>	<u>1 NS</u>
Extremities PAIN – pressure – amel	1 1442
Extremities PAIN – standing agg	1 1444
Extremities PAIN – Forearms – right	1 1477
<u>Extremities PAIN – Forearms – hot pain</u>	<u>1 NS</u>
Extremities PAIN – Forearms – pressure – amel	1 1479
<u>Extremities PAIN – Forearms – sharp pain</u>	<u>1 NS</u>
Extremities PAIN – Hands – right	1 1482
Extremities PAIN – Hands – burning	1 1483
Extremities PAIN – Knees – bending – agg	1 1502
Extremities PAIN – Knees – walking – agg	1 1506
Extremities PAIN – Legs	1 1510
Extremities PAIN – Legs – right	1 1510
Extremities PAIN – Legs – morning – waking; on	1 1511
Extremities PAIN – Legs – cold agg; becoming	1 1512
Extremities PAIN – Legs – motion – agg	1 1513
<u>Extremities PAIN – Legs – pulling pain</u>	<u>1 NS</u>
Extremities PAIN – Legs – warmth – amel	1 1515
Extremities PAIN – Lower limbs	1 1521
Extremities PAIN – Shoulders	1 1532
Extremities PAIN – Shoulders – motion – amel	1 1536
Extremities PAIN – Thighs – right	1 1540
Extremities PAIN – Thighs – left	1 1540
<u>Extremities PAIN – Thighs – continuous</u>	<u>1 NS</u>
<u>Extremities PAIN – Thighs – intermittent</u>	<u>1 NS</u>
Extremities PAIN – Thighs – lying – amel	1 1543
Extremities PAIN – Thighs – pressing pain	1 1543
Extremities PAIN – Thighs – pressure – amel	1 1544
<u>Extremities PAIN – Thighs – sharp pain</u>	<u>1 NS</u>
<u>Extremities PAIN – Thighs – tied</u>	<u>1 NS</u>
<u>Extremities PAIN – Thighs – tired; as if</u>	<u>1 NS</u>
Extremities PAIN – Toes – burning	1 1554
Extremities PAIN – Toes – left	1 1554
Extremities PAIN – Upper limbs – motion – agg	1 1572
<u>Extremities PAIN – Upper limbs – stabbing pain</u>	<u>1 NS</u>
Extremities PARALYSIS – Lower limbs	1 1581
Extremities SHAKING – Lower limbs	1 1591
Extremities SWELLING – Feet – itching	1 1599
Extremities SWELLING – Toes – right	1 1603
Extremities WARTS – Fingers – First	1 1623
Extremities WEAKNESS – Legs	1 1628

Extremities WEAKNESS – Legs – sleep – amel	1 1629
Extremities WEAKNESS – Legs – standing – agg	1 1629

#### 4.4.1.24 SLEEP

Sleep DISTURBED	1 1643
Sleep DREAMING- daytime, during sleep	1 1644
Sleep FALLING ASLEEP – easy	1 1646
Sleep POSITION – abdomen, on	1 1648
Sleep POSITION – changed frequently	1 1649
Sleep PROLONGED	1 1650
Sleep RESTLESS	1 1650
Sleep SHORT	1 1652
<i>Sleep SHORT – catnaps, in</i>	2 1652
Sleep SHORT – waking; on	1 1652
<i>Sleep SLEEPINESS</i>	2 1652
Sleep SLEEPINESS – daytime	1 1652
Sleep SLEEPINESS – morning	1 1652
Sleep SLEEPINESS – morning – waking; on	1 1653
Sleep SLEEPINESS – afternoon – 17.30h	1 1654
Sleep SLEEPINESS – evening – early	1 1654
Sleep SLEEPINESS – fever – during – agg	1 1656
Sleep SLEEPINESS – waking – on	1 1658
<i>Sleep SLEEPLESSNESS</i>	2 1658
<i>Sleep SLEEPLESSNESS – night</i>	2 1659
Sleep SLEEPLESSNESS – night – sleeps by day	1 1661
Sleep SLEEPLESSNESS – dispute, after	1 1663
Sleep SLEEPLESSNESS – dreams; from	1 1663
Sleep SLEEPLESSNESS – irritability; from	1 1664
<i>Sleep SLEEPLESSNESS – accompanied by – sleepiness – with</i>	2 1666
<i>Sleep UNREFRESHING – morning</i>	2 1667
Sleep WAKING – cheerful – after	1 NS
Sleep WAKING – difficult – morning	1 1669
Sleep WAKING – early; too	1 1669
Sleep WAKING – frequent	1 1669
Sleep WAKING – excess energy, with	1 NS
Sleep WAKING – perspiration, from	1 1671

#### 4.4.1.25 DREAMS

<u>Dreams ANIMATIONS</u>	1 NS
<u>Dreams BODY; PARTS OF – removed</u>	1 NS
Dreams CHILDREN – newborns	1 1679
Dreams CLAIRVOYANT	1 1679
Dreams COMPANIONSHIP	1 NS
Dreams COMPUTER GAMES	1 NS

Dreams CONFUSED	1	1679
Dreams CROCODILES	1	1680
Dreams DOGS	1	1682
Dreams DESIRED, he is	1	NS
Dreams EVENTS – unfortunate	1	1683
Dreams EXAMINATIONS – missing an exam	1	1683
Dreams FAMILY, own	1	1684
Dreams FRIENDS – seeing friends	1	1685
Dreams HAPPY	1	1686
Dreams MONKEY	1	1688
Dreams NIGHTMARES	1	1689
Dreams PREGNANT – being	1	1690
Dreams PURSUED, being – animals – wild	1	1691
Dreams ROBBED, being	1	NS
Dreams SEA	1	1692
Dreams SEARCHING – someone; for	1	1692
<i>Dreams SNAKES</i>	2	1693
<i>Dreams UNREMEMBERED</i>	2	1695
Dreams VIOLENCE	1	1695
Dreams WATER	1	1696
Dreams WATER – danger – in water; from danger	1	1696

#### **4.4.1.26 FEVER**

Fever ACCOMPANIED BY – nausea	1	NS
Fever INTENSE heat – night	1	1726

#### **4.4.1.27 PERSPIRATION**

Perspiration AFTERNOON	1	1735
Perspiration NERVOUS	1	1740
<i>Perspiration PROFUSE</i>	2	1741
Perspiration SLEEP – during – agg	1	1743

#### **4.4.1.28 SKIN**

Skin ERUPTIONS – pimples	1	1763
Skin ITCHING	1	1776
Skin WARTS – painless	1	NS

#### **4.4.1.29 GENERALS**

Generals ACTIVITY – increased	1	1798
Generals ACTIVITY – desire for	1	1798
Generals COLD – air – amel	1	1812

Generals COLD – bathing – desire for cold bathing	1	1813
Generals COLD; BECOMING – Part of body agg – Feet	1	1814
<i>Generals ENERGY – excess of energy</i>	2	1838
Generals FAINTNESS	1	1839
Generals FAINTNESS – vertigo; with	1	1843
Generals FOOD and DRINKS – beans – agg	1	1846
Generals FOOD and DRINKS – bread – agg	1	1847
<u>Generals FOOD and DRINKS – cake – desire</u>	1	NS
Generals FOOD and DRINKS – cheese – desire	1	1848
Generals FOOD and DRINKS – chocolate – desire	1	1849
Generals FOOD and DRINKS – coffee – aversion	1	1849
Generals FOOD and DRINKS – coffee – desire	1	1849
Generals FOOD and DRINKS – cold drink, cold water – amel	1	1849
Generals FOOD and DRINKS – cold drink, cold water – desire	1	1850
Generals FOOD and DRINKS – eggs – desire	1	1851
Generals FOOD and DRINKS – French fried potatoes – desire	1	1853
<i>Generals FOOD and DRINKS – fruit – desire</i>	2	1853
Generals FOOD and DRINKS – lemons – desire	1	1854
Generals FOOD and DRINKS – milk – agg	1	1855
Generals FOOD and DRINKS – oatmeal – agg	1	1856
Generals FOOD and DRINKS – oranges – desire	1	1857
Generals FOOD and DRINKS – salt – desire	1	1858
Generals FOOD and DRINKS – sour drinks – desire	1	1859
Generals FOOD and DRINKS – spices – agg	1	1859
<i>Generals FOOD and DRINKS – spices – desire</i>	2	1859
Generals FOOD and DRINKS – tea – desire	1	1861
Generals FOOD and DRINKS – vinegar – desire	1	1861
Generals FOOD and DRINKS – warm drinks – amel	1	1861
Generals FOOD and DRINKS – water – desire	1	1862
Generals FULLNESS; feeling of – Internally	1	1863
Generals HEAT – flushes of	1	1865
Generals HEAT – flushes of – extending to – Downwards	1	1866
Generals HEAT – lack of vital heat	1	1866
Generals HEAT – sensation of	1	1867
<u>Generals HEAT – flushes of – accompanied by – vertigo</u>	1	NS
Generals INFLAMMATION – Sinuses; of	1	1875
<u>Generals INFLAMMATION – Sinuses; of – air; in open – amel</u>	1	NS
<u>Generals INFLAMMATION – Sinuses; of – odours – agg</u>	1	NS
Generals NUMBNESS – pain – during	1	1893
Generals PAIN – Muscles	1	1915
Generals PRESSURE – amel	1	1925
Generals PULSE – frequent	1	1925
Generals SITTING DOWN – amel	1	1939
Generals SWELLING – Glands; of	1	1947
Generals WARM – agg	1	1961
Generals WARM – air – agg	1	1961
Generals WARM – bathing – amel	1	1962



**Generals WEARINESS****3 1973**

Generals WEARINESS – afternoon

1 1974

Generals WEARINESS – air; in open – amel

1 1974

Generals WEARINESS – waking – after – agg

1 1974

Generals WEARINESS – waking; on

1 1974

Generals WEATHER – hot – agg

1 1975

Generals WEATHER – rainy – amel

1 1975

Generals WEATHER – wet weather – agg

1 1976

The concluding proving data derived from the proving of *Carcharhinus leucas* 30CH presented a total of 594 rubrics. The majority of these rubrics were situated in the mind section (129), generals section (65), head section (55), extremities section (50), and eye section (34). Table 4.3 shows the distribution of rubrics according to sections of the repertory. Table 4.4 shows the distribution of journal entries per repertory section per prover.

**Table 4.3: The rubric distribution in relation to repertory sections**

SECTION	TOTAL	NEW	SECTION	TOTAL	NEW
Mind	129	4	Bladder	4	
Vertigo	13		Urine	2	
Head	55	1	Male genitalia/sex	7	4
Eye	34	1	Female genitalia/sex	19	2
Vision	1		Cough	4	
Nose	30	5	Chest	7	
Face	8	1	Back	14	
Mouth	3		Extremities	50	10
Teeth	2	1	Sleep	32	2
Throat	12		Dreams	31	4
External Throat	1		Fever	2	1
Stomach	28	2	Perspiration	4	
Abdomen	11	1	Skin	3	1
Rectum	13		Generals	65	4
Stool	10				

**Table 4.4: Prover and section distribution of journal entries**

Section	1aF	2M	3F	4aF	6F	7aM	8F	9M	10M	11M	12F	14M
<b>Mind</b>	13		36	31	17	11	7	34	11		17	2
<b>Vertigo</b>				3			4				9	1
<b>Head</b>	7		5	7		2					5	3
<b>Eye</b>				1		1	1		26			
<b>Vision</b>												
<b>Nose</b>				3	2	4			2			10
<b>Face</b>			1								1	3
<b>Mouth</b>	1										2	1
<b>Teeth</b>											1	
<b>Throat</b>	2					2						4
<b>Ext Thro</b>			1									
<b>Stomach</b>	6	1	8	3	14	1	5	9			5	2
<b>Abdomen</b>			3		2				2		3	
<b>Rectum</b>				1	2	1					2	
<b>Stool</b>												
<b>Bladder</b>												
<b>Urine</b>								2				
<b>Male</b>						12						
<b>Female</b>	2			4	2						1	
<b>Cough</b>						4						
<b>Chest</b>			1									
<b>Back</b>	3					3			2			3
<b>Extremities</b>	8		1	1		1		6			24	
<b>Sleep</b>	2		4	6	13		1	15	2		7	2
<b>Dreams</b>	1		5	1	3	1		2	3		2	8
<b>Fever</b>											1	1
<b>Perspiration</b>	1		1			1					1	
<b>Skin</b>			3									1
<b>General</b>	7		14	8	13	5	1	8	2		4	1
<b>TOTAL</b>	53	1	83	69	68	49	19	76	50	0	85	42

15F	16M	18F	19F	20M	22M	24F	25F	26F	27M	28F	30F	TOTAL
16	2	3	9			22	2	3	1	3	3	243
				1								18
12	3	2			14	4	5	7	16	2	4	98
3		5				1			5		1	44
1												1
2		5						3	27		7	65
2	1											8
				1								5

												1
1		5						1			1	16
												1
1		3	4	2		2	2	6		4		78
1			7			6		1				25
			11			4		8				29
						12	1	7				20
			1	4				1				6
												2
												12
			4			6		11				30
		1										5
1			4			2						8
1	5	1				3						21
4	1	8				1	1					56
2	1	2	3	1	8	4	3	1	3			80
	1			3	1	13				1		45
												2
1						1						6
						1						5
5		2	1	3		16	6	7	4	3	5	115
53	14	37	44	15	23	98	20	56	56	13	21	1045

## CHAPTER 5 : DISCUSSION OF THE RESULTS

### 5.1 INTRODUCTION

After listing an inventory of symptoms produced during the proving, the purpose of the current chapter is to discuss the research findings coalescing all the fundamental facets into a clarified picture of *Carcharhinus leucas* 30CH. In reconciling the symptomatology, the most prominent symptoms were deliberated upon subsequent to a comparison of the Doctrine of Signatures. *Carcharhinus leucas* will be discussed in relation to objectives and hypotheses as explained in Chapter 1 where it is hypothesised that conducting a proving with a 30CH potency of *Carcharhinus leucas* would result in the formation of clearly observable signs and symptoms in healthy proving volunteers as well as that the comparison of the *Carcharhinus leucas* to the Doctrine of Signatures would elucidate the similarities between the remedy and the doctrine.

The acquired proving and materia medica data sets of 1044 symptoms and 594 rubrics corroborated the respective hypotheses and justifies the proving of the substance. Also, remarkable and noteworthy is that the proving results showed numerous symptoms and vital sensations similar to those of other aquatic remedies.

### 5.2 ABBREVIATION OF THE REMEDY

The remedy abbreviation as per Schroyens (2012) is derived from the Latin or scientific substance name. The name is divided into a unique root which represents the Genus as 'Carch' and an extension '- l' which denotes the species.

*Carcharhinus leucas* will be abbreviated as: Carch-l.

## 5.3 THE SYMPTOMS

*Carcharhinus leucas* represented by its rubrics seems to act principally on the mind (129), head (55), extremities (50), and eyes (34). From the 594 rubrics produced, 45 new rubrics emerged further defining the remedy. What follows is an amalgamation of the main effects, themes and polarities expressed through the rubrics, unifying the symptomatology into one cohesive prover experience allowing for a clearer understanding of the remedy essence for potential clinical therapeutic indications (Sherr, 1994: 32).

### 5.3.1 Mind

In the mind section, we find 243 symptoms which were noted by Provers 1a, 3, 4a, 6, 7a, 8, 9, 10, 12, 14, 15, 16, 18, 19, 24, 25, 26, 27, 28, 30 resulting in the development of 129 rubrics.

#### **Anger and Irritability**

Anger and irritability arose as a prominent theme in the materia medica of *Carcharhinus leucas*. Several provers expressed the feeling of anger and irritability, being of similar expression and sensation in different intensities manifesting in various results. The anger which originated due to numerous reasons manifested on different levels and planes ranging from just a thoughtful reflection to irritation and frightfully so, in extremes or more intense cases, the physical need to be violent and express violence.

In the following symptom entries, the provers directly express irritation for unknown and specific causes to surroundings and people [3F 14], [3F 30], [4F 09], [10M 10], [15F 02], [15F 02], [15F 00], [24F 06], [24F 29], [24F 34], [9M 09], [9M 12], [10M 16], [10M 15], [4F 12], [9M 11], [18F 14], [25F 08], [24F 07], [1F 34], [10M 11], [12F 06], [24F 18]. The irritation resulted in unsociable behaviour the desire to be alone and aversion to people in general and Prover 15 [15F 01] details the inability to sleep as a resultant of irritation.

Anger had more precise triggers and was expressed for various reasons such as anger from a broken heart [30F 19], [30F 20]. Prover 1a [01F 34] expressed irritation which easily grew to anger that manifested through physical symptoms. Prover 12 expressed anger over theft and loss [12F 10]. Provers 9, 1, 7 all expressed anger which culminated in physical outburst or the need to outburst [9M 07], [1aF 32], [7a M 05]. Prover 24 experienced anger on a level where she felt her rights and personality were being infringed upon [24 F 06]. Again, Prover 24 [24 F 26] expressed anger which manifested in the emotional plane expressing ugliness.

### **Aversion to company and Desires solitude vs Desire for company**

Numerous polarities have emerged during this proving. One such polarity is associated with people and social interaction. On the one hand, an aversion is seen, while on the other hand there is a desire for company and interaction. The following symptoms are a direct expression for a need to be alone underlining an aggravation from social interaction possibly with a desire to escape [19F 09], [3F 14], [3F 24], [15F 02], [3F 10], [09M 04], [19F 25], [26F 26], [9M 00], [24F 15], [9M 00], [9M 04], [9M 08], [12F 07], [19F 30], [24F 26], [24F 29], [19F 24].

In Prover 15 [15F 02] the symptom of aversion is apparent and noticeable and expressed by others to the prover. Provers 9, 12, 24 proclaimed the reason for their aversion to be due to direct interaction with people [9M 04], [12F 07], [09M 04], [24F 29].

As can be seen with Prover 3: “Have a deep appreciation for being alone sometimes. Loneliness is different from solitude”, there is a marked difference between an aversion to company, and solitude. The majority of provers experiencing this symptom directly expressed the desire to be alone. On the other side of the scale Provers 3 and 9 in symptoms [3F 05], [9M 04] expressed happiness with meeting friends and socialising.

## **Confusion**

Confusion which is present with regard to space and time was experienced by Provers 3, 4a and 15. Prover 4a and 15 [15F 00], [4F 11], [15F 02] express a generalised confusion. Prover 3 experienced confusion on numerous levels. relating to dreams of the future and after exertion in symptoms [3F 05], [3F 14], [3F 11]. Prover 4a experienced confusion in terms of personal identity and loss of the self [4F 08].

## **Delusion**

A wide spectrum of delusions was experienced. Prover 9 and 24 experienced a delusion of ugliness and dirtiness causing a withdrawal from others [24F 26], [09M 20] while Prover 7a in contrast experienced a heightened psycho-sexual connection to the opposite sex [7aM 31]. Prover 4a experienced loneliness [04a F 09] while Prover 16 experienced the presence of a malevolent spirit [16M 30]. Prover 3 expressed a diverse distortion of time [03F 32]. Prover 3 and 24 both noted a sensation of floating [24F 23], [03F 08].

Prover 12 experienced delusion on a much more insidious level feeling as if she had done something bad with resulting guilt [12F 30]. Prover 4a experienced a quizzical separating of head sensation [4aF 01] and a confusion and a sensation of being emotionally and psychologically lost [4a F 10].

## **Desire to go home + Escape**

Prover 6 experienced nostalgia and excitement at the idea of returning home when she wrote "Slept like a baby. Don't know if I was dreaming or thinking I was just seeing myself at home with everyone" [06F 05], as well as "I was so excited when I woke up today. It's my last day in DURBAN Finally" [06F 05]. Prover 4a expressed a desire to escape [4aF 14].

## Love

The general theme of love and its various facets of disappointment, heart break, increased affection, familial love and weeping emerged in the proving, with experiences of feeling weighted and burdened: “My heart literally felt like it was heavy and squeezed” [24F 02], losing energy: “I don’t even have the energy to pick myself up” [03F 26] and feeling tired as well as resulting in physical pain and numbness: “I can’t tell how I feel it’s like I’m numb” [24F 21]. Disappointed love predominated among Provers 3, 24 and 30 [24F 20], [30F 20], [30F 19], [24F 01], [24F 00] where betrayal and heart break were also present.

Prover 3 experienced a rejuvenation of warmth and friendliness [03F 06]. Prover 4a experienced a rekindling of love toward her mother via a dream [4aF 15]. Prover also experienced weeping and crying as a sequela to loss of love [24F 20].

## **Happiness vs Sadness (Elation + Laughter + Cheerfulness & Weeping + Sadness)**

Another polarity seen is that between happiness and sadness. The following examples express and represent a good feeling akin to happiness on different levels and intensities.

General elation was expressed by Prover 28 due to ingesting the remedy: “I took my first powder this morning which made me feel elated but tired in a way” [28F 00]. Prover 9 also expressed this on several occasions, stating “Felt a euphoric feeling” [09M 01], “Felt usual happy feeling and talkativity” [09M 00]. Provers 3, 8, 6 and 26 [8F 20], [3F 00], [6F 10], [26F 07] all experienced excitement for various reasons such as celebrations, meeting with others and physical activity. Provers 1 and 8 expressed experienced laughter in symptoms [1aF 20] and [8F 04]. In the following symptoms, the provers expressed a happiness for unknown reasons and on waking [4aF 22], [6F 18], [6F 30], [8F 4], [10M 14], [12F 9], [10M 17]. In Provers 6 and 9 we see happiness manifesting through diet, with an increase in the diet and desire to eat [6F 22], [19F 40].



Prover 12 in symptom [12F 9] experienced happiness due to an unknown reason. Provers 1a and 4a expressed happiness in terms of God and happiness because of being brought closer to God [1aF 15], [4aF 16]. In Prover 10 [10M 3] we see the happiness perpetuated over a longer period of time which was observable by the prover's colleagues. In Prover 6 we see happiness expressed through and from dance and music in [6F 32].

In contrast to this, Prover 24 expresses sadness and the desire to cry [24F 20]. More so several provers experienced grief in the form of feeling down and emotionally hurt which resulted in fatigue [1F 09], [4F 04], [7M 31], [15F 00], [19F 14].

### **Fear + Horror**

A wide spectrum of fear was experienced in provers 4, 12, 15 and 28. Fears ranged from the tangible to the intangible. Prover 15 expressed a more general fear associated with confusion [15F 00], [15F 01]. Prover 4a expressed a fear of dead people and cutting [4aF 19]. Several provers professed a fear of failure [4aF 10], [12F 00], [12F 01], [15F 00], [4aF 12]. Provers 15 and 28 indicated a very distinct fear of closed or narrow places as claustrophobia [15F 04], [28F 02]. Fear of the unknown is verbalised by Prover 15 when he states: "Irrational unknown fear inside" [15F 03], and: "Fear of the unknown" [15F 04]. Prover 4a developed a fear of herself [4aF 14]. Excitement and enjoyment developed in Prover 8 towards movies in the horror genre [08F 34].

### **Forsaken feeling**

The topic of being abandoned and deserted was touched upon by Provers 9, 4, 12 and 19 where the provers felt alone: "I felt alone in the world" [04aF 09] and separated from everyone: "I feel very distant from everyone" [19F 09], "I was feeling like no one cares about me" [12F 08], to the point where they felt as if everyone was after them: "Felt like the world was against me" [09M 06].

## **Negative self-image**

The theme of a negative self-image emerged with components of insecurity, self-hatred, aversion to criticism and timidity being prominent. Prover 4a questioned herself continuously and expressed self-hatred [4aF 11]. Insecurity developed in Prover 3 from a poor self-image sparked by an acne outbreak [3F 05]. Prover 9 felt overly sensitive to personal remarks and criticism [09M 00], while Prover 3 showed a strong irritation to and aversion to criticism, desiring to escape [03F 00]. On several occasions prover 12 directly expressed a passive shy nature which hindered her socially: "My personality is shy and passive" [12F 00], [12F 01], [12F 00].

## **Confidence (Confidence + Determination vs Inadequate Confidence + Anxiety)**

Provers 4 and 24 experienced an increase in confidence [24F 16], [04aF 20]. Prover 9 experienced an increase in motivation and determination [09M 10]. By contrast, Prover 1a noted a want of confidence in intellectually demanding situations [01aF 11], [01aF 11]. Anxiety was expressed over numerous issues by several provers, ranging from general anxiety [9M 15], [18 F 20], [6F 23], [3F 10], [6F 04] to anxiety over others [6F 11] and anxiety in specific situations such as exams [4aF 06].

## **Overwhelmed vs Hopeful + Positivity of Mind**

Provers 4a, 18 and 24 expressed a sense of being overwhelmed and helpless [18F 20], [4aF 12], [24F 31].

Prover 1a was surprised on feeling hopeful on waking [1aF 21]. On the other hand, Prover 9 showed alertness and positivity [9M 01].

## **Hurry + Impatience vs Patience**

Both topics show an awareness of time and a desire to do more during that time or a sense of urgency. Provers 1a and 3 noticed hurrying during activities [03F 09], [1aF

05]. Prover 3 and 25 suggested a developing impatience [3F 19], [3F 30], [25F 08]. In contrast, Prover 12 developed an increase in patience during the proving [12F 29].

### **Mental activity**

Mental activity featured as a prominent theme in the mind section with facets of increased concentration, stress, weakness of memory, difficulty in concentration, decreased focus, and distraction developing during the proving. Provers 6 and 7 remarked at the increase in concentration they experienced, with enhanced learning [07a M 05], [06F 01]. Provers 4, 8, 14 expressed stress over exams and events [4aF 12], [14M 25], [8F 26]. Provers 6 and 24 marvelled at the loss of memory [6F 13], [6F 08], [24F 29]. Provers 3, 6, 7, 9, 12, 24, 30 experienced difficulties in concentrating with a tendency towards scattered thoughts and distraction [9M 03], [9M 07], [9M 11], [7M 28], [7M 32], [7M 33], [7M 37], [12F 30], [3F 04], [6F 00], [24F 04], [24F 28], [30F 03].

### **Physical activity (Occupation ameliorates + Physical exertion ameliorates vs Laziness)**

Prover 6 noted a desire to do house chores which relaxed her [6F 14]. Prover 12 similarly engaged in physical activity which made her feel better [12F 13]. On the other hand, several provers discussed feeling lazy on multiple occasions [15F 02], [3F 24], [4aF 08], [4aF 12], [15F 01], [1aF 14].

### **Mood fluctuations**

Agreeable:

Prover 19 and 6 perceived an improvement of mood [19F 03], [19F 01], [6F 03].

Changeable:

Provers 7, 9 and 10 experienced mood swings with multiple changes in mood. [9M 07], [10M 15], [10M: 12], [7aM 05].

Alternating:

Provers 7, 9 and 10 experienced distinct mood swings between two extremes with varying triggers [10M 11], [9M 12], [7aM 37].

### **Obligation to others & Helping others**

Prover 3 displayed an overwhelming obligation to help others regardless of the detriment to herself [03 F 10], [03 F 05]. In contrast, Prover 6 displayed a servile nature to help others [6F 12].

### **Communication (Loquacity vs Taciturn)**

Prover 9 on several days portrayed talkativeness in association with happiness and an increase in energy [9M 07], [9M 00], [9M 01], [9M 01], [9M 00]. Prover 7a curiously became noisy [7aM 37], while Prover 4a showed a verbally aggressive nature shouting at people [4aF 14]. Provers 26 and 27, in contrast, expressed an aversion to talking to others [26F 11], [27M 05].

### **Prostration(Exhaustion)**

Provers 3, more so than Prover 8, experienced severe exhaustion and being energetically drained on all levels [3F 05], [3F 10], [3F 10], [8F 28], [3F 12], [3F 23], [3F 11].

### **Religious**

In various cultures, we see that sharks' due to their size as well as attributes of speed and strength in the water and their violent nature instil fear among the populous and are seen and worshipped even today as Gods and protectors.

In line with this ideology we see the development of spiritual dispositions where Provers 3, 4 and 12 visited religious places of worship: "Woke up and went to the temple. The sense of calm and stillness is phenomenal and I wanted to start of the

last month on a good note” [3F 18], and: “I felt so blessed at church and my day was awesome” [12F 16], and expressed a heightened spirituality: “I woke up feeling happy and blessed and the only thing I could think about is going to church” [ 4F 16].

## **Tranquillity**

Provers 1, 4a, 28 all perceived a heightened feeling of relaxation and calm with an improvement in state [1aF 10], [4aF 15], [4aF 20], [28F 00].

### **5.3.2 Vertigo**

In the vertigo section, we find 18 symptoms noted by Provers 4a, 8 12, 14 and 20 resulting in the development of 13 rubrics.

Vertigo, motion and sea sickness, featured prominently, being a symptom common to other sea remedies. Provers expressed and noted that the vertigo was caused through long periods of travelling. Prover 12 contributed the vertigo also to the smell of petrol [12F 23], [12F 15]. Prover 12 experienced that the vertigo was accompanied by nausea and a headache [12F 15], [12F 23] as well as perspiration [12F 15]. Stimulation of the gastrointestinal tract through ingesting various items proved beneficial as Prover 8 was ameliorated by eating: “I had breakfast at 7: 00 then the dizziness went away” [08F 01] as well as: “I felt dizzy but it went away after eating” [08F 01]. Prover 12 was ameliorated by drinking cold water [12F 23], [12F 15]. Provers 8 and 20 were also ameliorated by sitting [20M 00], [8F 01].

Prover 8 described the sensation of the vertigo as: “felt like the earth was spinning” [08F 01]. A few time descriptions were noted with Provers 4 and 8 experiencing vertigo in the morning and on waking [4aF 26], [08F 01], suggesting a disposition for occurrence in the earlier part of the day.

### 5.3.3 Head

In the head section, we find 98 symptoms noted by Provers 1a, 3, 4a, 7a, 12, 14, 15, 16, 18, 22, 24, 25, 26, 27, 28, 30 resulting in the development of 55 rubrics.

Emotional and mental causes of headache predominated over physical causes as seen in Prover 1a who attributed the cause of a headache to anger and frustration [1aF 34]. Appearing in solitary as well as concomitantly, a multitude of provers experienced headaches with concomitants in the form of sneezing, fatigue, watery eyes, nausea, swollen eyes and period pain [25F 08], [15F 05], [4aF 33], [26F 01], [4aF 18], [26F 11], which also affected the intensity of the pain experienced.

The head being a somewhat smaller area and with fewer, well defined surfaces gave rise to pain in most of the regions with an abundance in the forehead/frontal region. Most provers experienced headaches located at the forehead [16M 35], [15F 5], [15F 02], [15F 05], [26F 12], [27M 04], [30F 04], [30F 24], [30F 11], [16M 35], [27M 00], some at the occiput of the head [15F 05], [22M 02], several on the sides of the head [12F 11], [26F 07], [27M 00], [27M 04], [7aM 13], and a few at the temples [22M 03], [22M 02], [25F 08].

Several modalities further differentiated and defined the provers' headaches which were ameliorated by cold fresh air [24F 06], [27M 04], [24F 06], [27M 00], closing eyes [12F 03], sitting down [25F 08], [18F 14], applying pressure [28F 14] and sleeping [27M 05]. Provers' symptoms were aggravated by cold air [03F 19], physical exertion [22M 03], [22M 02], light [15F 03], physical and mental exertion [22M 02], noise indoors and warmth [27M 00], music and warmth [27M 04], heat [3F 29], and sleep [16M 35].

Prover 27 is an example of a clear description of a with clearly defined modalities: "I also have headache. It is located in front of the head in the sides. It started in the afternoon. I can feel my forehead is hot. Better: open air, not listening to music".

Several sensations emerged in relation to the head such as dryness [03F 10], heat, experienced on the forehead [27M 04], [27M 04], [27M 00], swelling and heaviness [28F 14], [4aF 00]. Pain, being the defining symptom of headaches, was experienced in all regions of the head [1aF 01], [1aF 06], [1aF 17], [1aF 20], [22M 18], [4aF 32], [4a F 34], [12F 08], [14M 21], [15F 05], [22M 02], [4aF 07], [24F 06], [27M 05], [26F 01], [26F 29], [3F 14], [4aF 33], [15F 05], [25F 08], [03F 19], [4aF 18], [27M 04], [24F 06], [1aF 34], [12F 03], [24F 06], [26F 11], [1aF 06], [14M 19], [15F 03], [15F 04], [14M 11], [15F 00], [18F 14], [7aM 13], [12F 11], [15F 5], [22M 03], [27M 00], [27M 04], [27M 05], [3F 29], [16M 35], [22M 02], [15F 02], [15F 05], [27M 00], [27M 04], [30F 11], [16M 35], [26F 12], [15F 05], [27M 04], [26F 07], [27M 00], [7aM 13]

The times that the head symptoms occurred in the few instances that they were noted, varied. Several occurred in the afternoon [27M 04], [3F 14], and others in the morning and on waking [26F 12], [26F 29], [26F 01].

#### **5.3.4 Eye**

In the eye section, we find 44 symptoms noted by Provers 4a, 7a, 8, 10, 18, 24, 27, 15, 30 resulting in the development of 34 rubrics.

Prover 30 experienced lachrymation together with an itchy blocked nose [30F 01]. Provers experienced symptoms in various areas of the eye such as the inner canthi, right and left lower and upper eye lids and the eyes themselves [10M 16], [7aM 19], [10M 14], [10M 15], [10M 18], [10M 20], [10M 08].

The aggravations for eye symptoms outnumbered the ameliorations, with aggravations being caused by closing the eyes, light motion, touch, and application of pressure [27M 10], [08F 01], [27M 04], [10M 08], [10M 11], [10M 13], [10M 17], [10M 08]. Symptoms were ameliorated by closing the eyes and warm applications [10M 08], [08F 01].

The eye yielded a wealth of sensations such as irritation, heat, heaviness, inflamed, itching, redness, photophobia, pain, redness, sensation of shrinking, styes, and

swelling [10M 08], [18F 02], [18F 02], [18F 02], [24F 21], [27M 18], [27M 10], [10M 20], [7aM 19], [10M 08], [27M 11], [15F 02], [18F 02], [10M 09], [10M 15], [10M 17], [10M 12], [18F 02], [10M 08], [10M 15]. Very few time modalities were noted with some of the provers noting that the symptoms occurred in the morning [4aF 27], [10M 19].

Particularly prominent in the eye section we see sensations such as: “right eye feels like there’s something in it – it feels heavy” [18F 02], and: “It’s not burning but feels hot – Only the right eye.” [18F 02]. Here we see that heat and a sensation of something being present in the eye are a feature.

### **5.3.5 Vision**

In the vision section, we find one symptom noted by Prover 15 resulting in the development of one rubric. We see that Prover 15 experienced the unusual presentation and sensation of blurred vision on the first day of the journaling: “Unusual symptom. My vision seems blurry” [15F 00].

### **5.3.6 Nose**

In the nose section, we find 65 symptoms noted by Provers 4a, 6, 7a, 10, 14, 15, 18, 26, 27, 30 resulting in the development of 30 rubrics

The nose is a characteristic feature of the shark and is the feature from which the shark’s name is derived. Symptoms from this area would play a significant role in the shark symptomatology. Provers experienced concomitants of cough and sleepiness [4aF 26], [14M 15].

Nose symptoms were ameliorated by modalities such as exposure to air [27M 03], cold applications [27M 20], motion [27M 17], [27M 09], and application of warmth [27M 09]. Some symptoms were aggravated by heat [27M 20] and odours [14M 37]. Several sensations were experienced by the provers’ noses such as congestion [7aM 11], [7aM 03], [30F 02], [15F 04], [15F 05], [15F 05], [18F 02], [26F 12], [26F



13], [30F 01], [30F 03], [30F 04], [14M 15], [27M 20], [27M 20], [7aM 16], coryza [10M 18], [14M 11], nasal discharge [27M 05], [27M 03], [27M 04], [14M 12], [27M 05], [27M 09], [27M 10], [27M 17], [27M 03], [30F 03], [10M 14], [14M 11], [30F 05], dryness [27M 23], heaviness [18F 00], itching [30F 01], obstruction [14M 13], [14M 19], [14M 12], [14M 18], bad odours [14M 37], pain [4aF 31], [27M 05], [27M 05], and sneezing [4aF 26], [27M 03], [27M 06], [27M 03], [14M 37], [06F 20], [18F 00], [18F 01], [27M 23], [27M 23], [26F 11], [06F 19].

The predominance of the symptoms of discharge, itching and congestion produced by the nose give us a picture better described and associated with coryza, influenza even allergic rhinitis, and suggests an important area where the remedy might be beneficial due to the prevalence and volume of symptoms in this region.

Several symptoms occurring predominantly in the morning were noted by provers such as: “I’m producing discharges on my nose. They are clear and watery. Worse in the morning, when sitting down and face down” [27M 09], and [10M 18], [27M 06], [27M 17], [14M 12], [27M 05], while others noted symptoms at night [30F 02] [27M 20], giving us a clearer understanding and better defining of time modality.

### **5.3.7 Face**

In the face section, we find eight symptoms noted by Provers 3, 12,14,15,16 resulting in the development of eight rubrics.

The location of facial symptoms varied with provers experiencing symptoms all over the face including the forehead, around the eyes, the cheeks, mandible and around the nose [15F 02], [14M 13], [14M 18], [03F 16], [12F 02]. Facial symptoms were minimal with provers experiencing sensations such as facial discolouration: “skin – dark blue around the eyes” [12F 02], and facial pain due to acne: “Pimples small around nose sore to touch red” [15F 02], and irregularities with the jaw and the temporomandibular joint which is significant considering that the jaw one of the key identifying features of *Carcharhinus leucas*. Prover 16 writes: “TMJ pain still gives some grief but pain not as bad as before” [16M 33], and Prover 14: “I slept for 10

hours when I woke up my jaw on the left side hurt. It lasted for 20-25 minutes” [14M 12].

### **5.3.8 Mouth**

In the mouth section, we find five symptoms noted by Provers 1a, 12, 14, 20 resulting in the development of three rubrics.

Symptoms derived from the mouth region were few in number although various sensations of dryness and thirst [20M 04], swollen gums [1aF 34], abnormal tastes in the mouth such as sour [14M 07], and development of a lump under the throat [12F 00], [12F 00] were experienced.

### **5.3.9 Teeth**

In the teeth section, we find one symptom noted by Prover 12 resulting in the development of two rubrics.

Sharks are carnivorous predators with sharp triangular teeth that are continuously replaced, so when Prover 12 reports experiencing painless removal of her tooth after taking the remedy saying “I took out my tooth because it was loose. It was painless” [12F 02], we can naturally associate it with the continuous removal and renewal of shark teeth which occur at regular intervals for sharks.

### **5.3.10 Throat**

In the throat section, we find 16 symptoms noted by Provers 1a 7a, 14, 15, 18, 26, 30 resulting in the development of 12 rubrics.

Sore throat occurred concomitantly with fatigue and with a cough [14M 12]. Throat symptoms were aggravated by drinking cold water [01aF 01] and sneezing [18F 02]. Provers experienced a range of symptoms such as constriction [18F 02], dryness [26F 12], [7aM 01], [7aM 00], [30F 02], pain [14M 09], [14M 10], [15F 00], rawness

[18F 02], and scratching [18F 03]. The time of occurrence of symptoms on waking were noted by Prover 14 as on waking in morning [14M 09], [14M 10].

### **5.3.11 External throat**

In the external throat section, we find one symptom noted by Prover 3 resulting in the development of one rubric.

Prover 3 experienced the sensation of stiffness in the neck: “slight neck stiffness and tension headache” [03F 31].

### **5.3.12 Stomach**

In the stomach section, we find 78 symptoms noted by Provers 1a, 2, 3, 4a, 6, 7a, 8, 9, 12, 14, 15, 18, 19, 20, 24, 25, 26, 28 resulting in the development of 28 rubrics.

The stomach symptoms featured prominently in most provers. Prover 18 experienced emptiness with burning [18F 13], [18F 13]. Prover 6 was aggravated by, and felt bloated from, eating [06F 33].

Numerous provers experienced a multitude of sensations such as a diminished appetite [01aF 10], [01aF 14], [01aF 15], [01aF 18], [01aF 20], [01aF 21], [04aF 10], [04aF 18], [04aF 21], [26F 24], [6F 08], [06F 25], [06F 33], [7aM 32], [19F 09], [19F 24], [26F 01], [26F 23], [6F 04], an increased appetite [03F 10], [03F 19], [03F 23], [06F 02], [06F 29], [08F 02], [08F 06], [08F 20], [12F 08], [15F 00], [19F 07], [24F 04], [24F 12], [25F 08], [09M 06], [12F 04], [28F 02], [12F 08], [09M 06], [06F 20], [03F 05], distension [06F 33], emptiness [18F 13], [18F 13], fullness [06F 33], heaviness [03F 05], nausea [26F 27], pain [06F 28], [06F 00], [28F 14], [02M 00], thirst [09M 02], [09M 01], [09M 04], [09M 07], [26F 06], [09M 03], [03F 06], [03F 14], [06F 03], [09M 11], [12F 06], [09M 03], [19F 07], [20M 04], [6F 02], [6F 08], [08F 20], [14M 23], [14M 18], thirstlessness [25F 00], [14M 08], ulcers and vomiting [28F 14].

The sensations and variation of symptoms were many in number with several polarities and add to the idea that the remedy being made from the liver stimulated not just the liver in provers but played a role in manifestation of symptoms in the entire gastrointestinal tract.

### **5.3.13 Abdomen**

In the abdomen section, we find 25 symptoms noted by Provers 3, 6, 10, 12, 15, 19, 24, 26 resulting in the development of 11 rubrics.

Pain with a severe intensity was experienced by Prover 15: “sharp piercing pain. Lasted 10minutes. Intensity was 8/10” [15F 00]. Prover 19 experienced symptoms in the right hypochondrium [19F 05], [19F 06], [19F 21], [19F 09], [19F 14], [19F 19], [19F 07]. The presence of the symptoms in the liver region show the close association and affinity to the remedy, considering it was made from the liver of the bull shark. Prover 15 experienced symptoms in the pelvis [15F 00]. Prover 12’s pain was aggravated by back rest [12F 08]. Several provers noted experiencing a sensation of bloating [24F 13], [06F 24], [06F 25], [26F 06], [24F 12], [03F 22], flatulence [24F 10], [24F 11], [24F 14], and pain [12F 11], [03F 16], [10M 00], [10M 02], [24F 10], [12F 08], [03F 11].

### **5.3.14 Rectum**

In the rectum section, we find 29 symptoms noted by Provers 4a, 6, 7a, 12, 19, 24, 26 resulting in the development of 13 rubrics.

Prover 26 attributed her diarrhoea to spicy food [26F 03], while prover 6 attributed her constipation to travel. Prover 7a experienced a bilateral headache and diarrhoea concomitantly [7aM 13]. Prover 24 was ameliorated by pushing and pressing during defecation [24F 20], [24F: 17]. Numerous provers experienced constipation [06F 27], [26F 07], [19F 08], [19F 10], [19F 11], [19F 17], [19F 23], [19F 36], [24F 28], [19F 08], [26F 17], diarrhoea [12F 18], [26F 03], [4aF 00], a sensation of insufficient stool [26F 07], [26F 01], [26F 00], urging [26F 06] and various types of pain including

vague [12F 18], [19F 17], [19F 14] or particular, such as burning [24F 06] and stinging [19F 14], [19F 08].

The rectal glands and the rectum to a larger degree are important in the functioning of the shark regarding osmoregularity and urea regulation for buoyancy and movement between waters.

### **5.3.15 Stool**

In the stool section, we find 20 symptoms noted by Provers 24, 25, 26 resulting in the development of 10 rubrics.

Various sensations and alterations in stool were experienced such as a change in colour, becoming darker [24F 01], [25F 08], [24F 28], [24F 06] as well as lighter [24F 15]. Symptoms experienced included an increase in dryness [24F 28], [24F 20], granular sensation [24F 06], apparent and distinct strong odors [ 24F 17], [24F 20], [26F 00], [24F 06], small quantities [26F 00], [26F 07], [26F 01], soft stools [26F 01], [26F 00], [24F 06], undigested stools [24F 06], and watery stools [26F 03].

### **5.3.16 Bladder**

In the bladder section, we find six symptoms noted by Provers 19, 20, 26 resulting in the development of four rubrics

Prover 20 experienced an increase in frequency [20M 15]. Provers 20 and 26 experienced an increase in urination at different times of the day such as morning as well as throughout the day [20M 15], [26F 29].

### **5.3.17 Urine**

In the urine section, we find two symptoms noted by Prover 1a resulting in the development of two rubrics

Prover 9 experienced an alteration in colour and a strong odour: “7: 58 Urine was a lime green colour with a pungent smell” [09M 00], possibly related to fluid intake and ion regulation. This together with the other symptoms which form part of the genitourinary systems form a major component in understanding the various regulatory systems associated to a shark’s functioning.

### **5.3.18 Male genitalia/sex**

In the male genitalia/sex section, we find 12 symptoms noted by Prover 7a resulting in the development of seven rubrics.

The sample used for the liver remedy was taken from a male shark. There were thirteen males on the proving of which only one male prover produced or reported symptoms significant to the genitalia/sex. Prover 7a produced several symptoms over the course of the proving, perceiving an irritation in his testis and pelvic region which defined itself as being an irritation which was aggravated by various foods and heat [7aM 35], [7aM 28], [7aM 28], [7aM 23]. He described the irritation as a distractingly severe itch occurring several times throughout the day [7aM 33], [7aM 20], [7a M 19]. There was also the development of increased and heightened sexual awareness of himself and the opposite sex with an increase in libido: “I don’t know what is wrong but somehow I am more attracted to women today. It’s not a usual thing. I’m attracted to them but today it’s like they read my thoughts they keep checking me out” [7aM 3]. Heightened and increased sexuality were discussed and interpreted in the MIND section.

### **5.3.19 Female genitalia/sex**

In the female genitalia/ sex section, we find 30 symptoms noted by Provers 1a, 4a, 6, 12, 19, 24, 26 resulting in the development of 19 rubrics.

Prover 6 experienced her period together with a fever and nausea [06F 26]. Prover 26 experienced symptoms only in the region of the uterus [26F 11]. Symptoms were ameliorated by bending double, motion and warmth [1aF 12], [24F 12], [1aF 13] while being aggravated by the cold [24F 12].

Several descriptions and sensations were expressed such as that of bright red blood [4aF 33], clots [26F 01], copious leucorrhea [24F 10], copious menses [26F 01], [24F 15], [24F 14], and thick flow [04a 33].

Pain was one of the most common symptoms reported in the female region, associated mainly with menstruation and differentiated further into: general pains [4aF 04], [4aF 33], [12F 24], [19F 27], [19F 25], [1aF 12], [19F 26], [19F 24], and specific pains such as sharp menstrual pain [24F 12], prolonged pain [19F 27], [19F 26], [26F 11], uterine cramping [26F 27], [26F 13], [26F 13], pulling uterine pains [26F 01], and sharp uterine pains [26F 13], [26F 13].

Symptoms were noted to have been experienced at night [26F 29].

### **5.3.20 Cough**

In the cough section, we find five symptoms noted by Provers 7a and 18 resulting in the development of four rubrics.

Few symptoms were noted in this section. Provers noted a cough with chest pain [07aM 21], heat [18F 02], and mucus [7aM 02], [7aM 02]. Prover 7a took particular notice of the morning during which the cough occurred [7aM 22].

### **5.3.21 Chest**

In the chest section, we find eight symptoms noted by Provers 3, 15, 19, 24, resulting in the development of seven rubrics.

Prover 3 experienced chest pain and breathlessness as part of a series of panic attacks [03F 02]. Prover 24 nervousness resulted in a sympathetic neuronal response manifesting as perspiration [24F 12]. Sensations such as palpitations [03F 02], [15F 01], pain [24F 12], and constriction [19F 37], [19F 31], [19F 30] were present. Symptoms were prominent during the night [19F 37] and in the morning on waking [19F 31].

### **5.3.22 Back**

In the back section, we find 21 symptoms noted by Provers 1a, 7a, 10, 14, 15, 16, 18, 24 which resulted in the development of 14 rubrics.

Prover 15 experienced a headache with back stiffness [15F 05]. Back symptoms varied and presented in several areas with a higher rate in the cervical region [1aF 19], [18F 14], [7aM 16], [15F 05], left side [7aM 16], left scapula [10M 09], and lumbar region [16M 09], [14M 28], [14M 36], [16M 24], [14M 22]. Prover 24's back ache was aggravated by menstruation [24F 14], [24F 13]. Sensations varied from pain [1aF 19], [24F 31], [7aM 16], to burning pain [16M 09], [16M 21], [16M 24], and perspiration [1aF 02]. Symptoms manifested on waking [16M 21], [10M 09] in the morning [7aM 33] and at night [16M 24].

### **5.3.23 Extremities**

In the extremities section, we find 56 symptoms noted by Provers 1a, 3, 4a, 7a, 9, 12, 15, 16, 18, 24, 25 resulting in the development of 50 rubrics.

Various symptoms were elicited on the extremities namely the feet [12F 22], [12F 01], the forearm [12F 14], the hands [15F 02]. The legs [10M 07], [10M 13], [18F 02],



[12F 03], [1aF 19], [10M 03], [10M 04], [12F 01], the lower limbs [15F 01], the shoulders [1aF 00], [1aF 01] toes [16M 08], [1aF 17], [1aF 15], [1aF 16], thighs [12F 02], [7aM 01], [12F 02], [12F 03], and the upper limbs [15F 02].

Multiple aggravations and ameliorations cropped up describing numerous modalities such as the aggravation of bending [12F 05], cold [10M 05], motion [15F 02], [18F 02], [10M 04], standing [12F 01], [18F 15], and walking [12F 05]. Conversely there were many ameliorations such as that of laying down [12F 02], motion [1aF 01], application of pressure [12F 03], [12F 01], [12F 14], sleeping [18F 15], and the application of warmth [10M 03], [10M 13], [10M 04].

The extremities are a section where there were a higher number of symptoms in comparison to the other sections with a generous variety of sensations such as heaviness [25F 00: 00: 30], [4aF 01], itching [12F 22], [12F 01], [1aF 15], [7aM 01], lameness [18F 02], pain [1aF 17], [10M 03], [10M 04], [10M 13], [12F 03], [12F 05], a burning sensation [16M 08], [03F 15], heat [12F 14], [12F 01], intermittent pain [12F 02], pressing pain [12F 03], pulling pain [1aF 19], sharp pain [12F 03], [12F 14], stabbing pain [15F 02], paralysis [18F 15], shaking [18F 14], swelling [1aF 16], [1aF 15], tiredness of parts [12F 02], the presence of warts [24F 34], and lastly weakness [18F 14], [18F 15]. Only prover 12 differentiated a morning time for presentation of symptoms [12F 03].

### **5.3.24 Sleep**

In the sleep section, we find 80 symptoms noted by Provers 1a, 3, 4a, 6, 8, 9, 10, 12, 14, 15, 16, 18, 19, 20, 22, 24, 25, 26, 27 resulting in the development of 32 rubrics.

Provers experienced concomitants of daytime dreaming [4aF 24], fever [14M 13], and perspiration [09M 12] together with sleep symptoms. Provers complained of fever aggravating sleep [14M 13], sleeping on the abdomen [25F 08], [12F 01], [12F 21], [25F 00], [12F 00], and frequently changing position in sleep [09M 12], [14M 18].

Several sensations were reported, such as early waking [06F 03], easily falling asleep [26F 01], frequent waking [24F 04], [24F 01], difficulty waking [10M 10], [09M 04], disturbed sleep [16M 09], energy on waking from sleep [09M 05], restlessness [03F 12], [03F 11], short sleep [22M 21], [22M 12], [22M 19], [22M 01], sleepiness [4aF 00], [06F 27], [19F 03], [19F 05], [20M 00], [09M 01], [09M 02], [09M 03], [09M 08], [10M 06], [27M 04], [06F 20], [09M 04], sleeplessness [22M 12], [4aF 13], [4aF 27], [06F 11], [12F 06], [22M 01], [1aF 16], [22M 19], [22M 21], [06F 26], [09M 15], [18F 01], [12F 06], [24F 19], [15F 01], [9M 08], [24F 04], [18F 01], waking up un-refreshed [15F 05], [03F 12], [06F 12], [12F 18], [1aF 19], and waking up cheerful [09M 15], [09M 08].

Sleep symptoms and times were diverse and ranged from the afternoon [09M 04] to catnaps throughout the day [03F 10], [06F 01], [06F 09], [06F 15], [06F 27], [06F 28], [08F 06], [09M 03], [25F 00], [19F 01], daytime sleeping [09M 04], and evening sleeping [06F 20]. Symptoms occurred in the morning [09M 08], [09M 01], [09M 02], [09M 03], [4aF 01], [10M 06] and the night [18F 01], [09M 15], [06F 26]. Night wakefulness with day sleeping [04aF 21]. Prolonged sleep [27M 04], [06F 29], [27M 03], [6F 00]. Waking too early [12F 06] and symptoms on waking up [27M 04].

### 5.3.25 Dreams

In the dreams section, we find 45 symptoms noted by Provers 1a, 3, 4a, 6, 7a, 9, 10,12,14,16, 20, 22, 24, 28 resulting in the development of 31 rubrics.

Table 5.1 describes the themes that occurred in dreams.

**Table 5.1: Themes in dreams**

Animals	[14M 15] [24F 20] [24F 13] [24F 19]
Animation	[14M 05]
Body Parts Removed	[24F 03]
Clairvoyant	[24F 18]
Companionship	[16M 18]
Computer Games	[14M 07]
Confusion	[03F 14]
Desired	[14M 10]

Happy	[10M 20]
Involving people	[24F 12] [14M 20] [24F 11] [04aF 25]
Missing Exams	[06F 23]
Nightmares	[12F 06]
Robbery	[24F 30]
Snakes	[24F 16] [3F 20] [14M 08] [22M 01]
Searching for Loved ones	[09M 11] [09M 09]
Strength	[24F 09]
Unfortunate Events	[14M 11]
Unremembered dreams	[28F 14] [03F 09] [07aM 30] [10M 01] [10M 12] [12F 00] [24F 01] [24F 06] [24F 26] [03F 02] [01a F 02]
Water & Tsunamis	[20M 20]

It is significant that there are dreams of animals, particularly snakes, raising themes of the animal kingdom. Dreams of water and tsunamis directly relate to the ocean and aquatic remedies. The dreams of companionship, being desired, happy, searching for loved ones and involving people are associated to the group behaviour of animals as well as the heightened sexual nature attributed to animals (Sankaran, 2005).

### 5.3.26 Fever

In the fever section, we find two symptoms noted by Provers 12 and 14 resulting in the development of two rubrics.

Fever is primarily associated with the onset of an infection as well as an increase in hepatic metabolic activity again showing the influence and affinity of the remedy. Prover 14 experienced a fever with nausea and sleepiness: “I am having very high temperatures on my head. They are causing me to be sleepy and nauseous” [14M 13]. Prover 12 was the only prover to note a time in terms of the fever which was experienced at night [12F 01].

### 5.3.27 Perspiration

In the perspiration section, we find six symptoms noted by Provers 1a, 3, 7a, 12, 15, 24 resulting in the development of four rubrics.

Prover 24 experienced perspiration with nervousness [24F 12]. Prover 1a named the back as a location for perspiration [1aF 02], while sleep aggravated Prover 7a's perspiration [07aM 30]. Several provers experienced profuse sweating [15F 03], [12F 02], [03F 17]. Prover 1a noted the afternoon as a significant time of sweating [1aF 02].

### **5.3.28 Skin**

In the skin section, we find five symptoms noted by Provers 3, 14, 24 resulting in the development of three rubrics.

Few skin symptoms were noted. Prover 3 noted the development of acne on the head and forehead [03F 01], [03F 16]. A sensation of itchiness of the skin [14M 16], [03F 11] as well as the presence of warts were diarised [24F 34].

### **5.3.29 Generals**

In the generals' section, we find 115 symptoms noted by Provers 1a, 3, 4a, 6, 7a, 8, 9, 10, 12, 14, 15, 18, 19, 20, 24, 25, 26, 27, 28, 30 resulting in the development of 65 rubrics.

Heat and weakness appeared concomitantly with vertigo [04aF 01] [04aF 22]. Food featured distinctly in the materia medica as a part of generals, through the gastrointestinal tract, as well as being mentioned in modalities. Numerous food [25F 08], [03F 17], [24F 04], [24F 18], [26F 17] and spice items [28F 14], [26F 03] aggravated the body. Prover 6 was ameliorated by warm water [06F 28]. There was an aversion to coffee [25F 08] and several desires were noted such as those for cake [25F 08], [19F 02], chocolate [24F 33], [3F 06], [3F 11], [3F 15], [3F 06], coffee [24F 21], cold water [30F 02], [1aF 4], eggs [30F 02], [6F 29], fried chips [24F 05], fruit [12F 28], [06F 19], [12F 00], [4aF 11], lemon [06F 20], [06F 21], oranges [24F 02], [24F 09], [24F 30], salt [06F 20], [03F 27], sour items [7aM 01], spices [24F 02],

[30F 02], [12F 01], [24F 30], [24F 09], tea [06F 21], [06F 20], vinegar [24F 30], [24F 09], [24F 02], and water [25F 08], [24F 34].

Noteworthy is the prominence of sour themed food where sour and bitter present in the form of the cravings of lemon, oranges, salt, sour, vinegar which all fall in the repertory group of 'Sour' and is seen similarly in the materia medica of the homoeopathic remedy *Sepia* and *Natrium muriaticum*, 'craving for salt' (Boericke, 2013: 465)

Sensations experienced were those relating to increased and decreased energy and activity [1aF 08], [1aF 13], [1aF 07] relating to cold [9M 05], [10M 04], [26F 14], [08F 06], energy [1aF 13], [1aF 28], [06F 03], [06F 22], [7aM 02], [9M 00], [24F 10], [9M 01], [15F 00], [9M 00], faintness [20M 00], [20M 00], [20M 00], fullness [7aM 32], heat [4aF 01], [15F 00], [15F 01], [06F 20], [9M 00], [9M 02], [18F 02], inflammation [4aF 04], [4aF 31], [27M 19], numbness [24F 12], pain [7aM 02], amelioration from pressure [9M 00], change in pulse [15F 05], swelling of glands [03F 27], warmth [26F 15], [06F 35], [26F 12], [15F 04], weariness [30F 02], [04aF 22], [04aF 14], [26F 24], [03F 02], [3F 10], [03F 11], [03F 28], [04aF 24], [07aM 03], [14M 28], [25F 08], [06F 15], [03F 12], and affectations of weather [12F 10], [03F 22], [10M 04].

## **5.4 COMPARISON TO THE DOCTRINE OF SIGNATURES**

### **5.4.1 Doctrine of Signatures**

The Doctrine of Signatures was developed in the middle ages. It suggests and corresponds the external features and characteristics (including colour) of a plant or substance to that of a disease as an indicator of therapeutic abilities action and effects of a plant or substance (Yasgur, 1998: 70). In this research, we attempt to elaborate and consolidate the nature of the proving substance in relation to symptomatology derived from the proving study. This discussion will delve not only into the proving remedy substance which will be analysed in terms of its size, colour, shape, markings/patterns, consistency of secretions and constituents, but will also be interpreted in terms of the entire bull shark and its life, behaviour and prominent

features. Along with this we will discuss the associations to its habitat, the oceans and lakes, and to a more expansive degree themes of the animal kingdom and sea kingdom (as defined by Sankaran [2005] and Mangialavori [2002]) and other aquatic remedies which aid to define the sphere of action of the remedy. These all coalesce as integral components, significant to the Doctrine of Signatures.

#### **5.4.2 The physical substance**

The sample used for the proving was a piece derived from the lobe of a bull shark liver. The liver contains a multitude of minerals and fat-soluble vitamins especially Vitamin A and water-soluble vitamins as well as stores carbohydrates, fats, oils and it synthesises proteins from amino acids. In the bull shark, the liver accounts for up to 10% of the shark's total body weight and contains large amounts of oils which include squalene, pristane, triglycerides, diacyl glyceryl ethers among other molecular substances. Traditionally these oils have been used in physical dosage to treat respiratory and digestive system problems and heal wounds among other diseases and more commonly as a dietary supplement (Baldrige, 972: 306).

Being the largest organ of the shark body with significant regenerative properties, various elements associated to the liver are seen in the symptomatology of the *Carcharhinus leucas* proving. Specific to the liver we see the presence of pain in the right hypochondrium where the liver is located, and a myriad of gastrointestinal symptoms which are discussed below. A mental picture associated to the liver where anger and themes of confidence, courage and strong feelings and self-worth and self-image were present.

#### **5.4.3 The Bull Shark**

Bull sharks are known as euryhaline from Greek meaning they can tolerate a wide range of salinity (Oxford University Press, 1999: 492). They are also known as elasmobranch which describes how it is cartilaginous in nature with lateral and ventral gills, comprising the sharks, rays and skates. (Oxford University Press, 1999: 459; Anderson *et al.*, 2005: 1)

*Carcharhinus leucas* is described as an elasmobranch species in that they can live in both marine and fresh water environments. Responding to changes in salinity the species achieves osmoregulation through the kidney rectal gland and liver as well as gills which play key roles in this. This is believed to take place via several ion transporters in the form of ion pumps and exchangers (Reilly, 2011: 1). Correlating to this we see numerous bladder and urine symptoms in the proving with alterations in time and frequency as well as changes in urine colour and smell. The gastrointestinal tract was host to a wide variety of symptoms including nausea vomiting and pain among numerous others mentioned above particularly in association to the liver and its function. Similarly, more specific to the rectal region we see issues of diarrhoea and constipation with regulation of fluid.

The bull shark maintains its osmoregularity due to its ability to manage urea and electrolytes in the body fluids. Central to this is the regulation and influx of NaCl ions. In homoeopathy NaCl (sodium chloride) is known as *Natrum muriaticum*. In various literature such as Homoeopathic Materia Medica and Repertory (Boericke, 2013: 464) and Concordant Materia Medica (Vermeulen, 2015: 1473), *Natrum muriaticum* is described as predominantly a grief remedy as well as being a polychrest i.e. acting on many areas of the body. Throughout the proving various mental emotional and physical symptoms appeared which resemble *Natrum muriaticum*. In *Natrum muriaticum* we see themes of grief, sadness, isolation, depression and weeping where the person is irritable and gets into a passion about trifles. There are aetiologies of grief, anger and fright and a desire for isolation and wanting to be alone. There are also similarities to *Carcharhinus leucas* 30CH on the physical plain where we see numerous headaches and abundant watery coryza. A major theme seen is the idea of self-preservation where we find the provers isolating themselves and drawing away from people, ready to attack and scream and fight (Mangialavori, 2002: 99). Multiple provers experienced an increase in thirst closely resembling the materia medica of *Natrum Muriaticum* 'Unquenchable thirst' (Boericke, 2013: 465).

#### **5.4.4 Correlation of the animal kingdom themes to the nature and symptomatology of *Carcharhinus leucas***

As per Sankaran's Schema (2005) we see in the animal kingdom that mental themes are numerous and those that arise are associated with issues of survival, strength, weakness, competition, dominance, predatory instinct, conflict, and camouflage. There are also issues of sexuality and attractiveness in all facets of life even dressing, along with a killer instinct, contradiction of will, group behaviour and connection to the source.

The bull shark is one of the most violent and aggressive shark species with numerous attacks being associated with it. The anger and aggressive nature present in the shark is clearly manifest in the reports of the provers. Irritation presented as a precursor to anger in provers. Of note is the rapid onset of being irritated and the extreme intense nature of the remedy picture whereby provers were irritated by everyone and everything and experienced unusual, unexplained, irritability.

Anger featured prominently in the materia medica of *Carcharhinus leucas*, with its manifestation varying between provers. It presented with several provers getting angered easily, expressing very intense levels of anger, holding in anger as well as experiencing anger to such an extent that they experienced physical symptoms such as heat and pain. Some reaching close to the killer instinct where they were dangerously on the verge of expressing their anger in the form of violent outbursts and desiring to be physically violent. This is characteristic of an animalistic nature commonly seen in the animal kingdom.

In the animal kingdom, we find that specific keywords are expressed which define and shape the understanding of the kingdom. These keywords are reflected through the substances, which are potentised and administered as remedies. We find that active verbs such as 'jump' and 'beat' are used and introspection is present with questions pertaining to self-worth, winning and survival being asked (Sankaran, 2005: 2). In the proving of *Carcharhinus leucas* we see dramatic aggressive dreams with themes of attacking and violence. Words such as biting and screaming and



hitting are used which reaffirm the presence and influence of the animal kingdom over the remedy.

The phylum Mollusca is the largest marine phylum. In the behaviour and nature of this phylum we see a duality where if the outside is threatening they go into a shell to hide or retreat. Paradoxically they find that inside is claustrophobic (Sankaran, 2005: 48). This theme predominates throughout the materia medica of *Carcharhinus leucas*. We see that initially group behaviour which involves spending time with friends and family. Then there is a reaction of irritation, anger and outbursts with a desire to do violence in Provers 7a, 9 and 10. This results in the desire to be alone, withdrawal, and isolation often associated with grief. This is a cycle expressed by several proverbs. There is a suggestion of lack of trust with Prover 3 and her co-workers, and Prover 10 and his friend. The sensation of claustrophobia was also expressed by proverbs requiring open spaces due to feeling closed in. On an emotional level, we see emotional withdrawal due to heart ache and heart break more commonly in the female proverbs, feeling anger and desiring to escape.

#### **5.4.4.1 Self-worth**

A central theme in the animal kingdom is the perception of self and self-esteem. Love is quite a big theme present in the symptomatology. We see a strong desire for love and attention, and a movement between lack of confidence and over confidence. There is hatred of self, insecurity and aversion to criticism resulting in reactions or compensations such as anxiety and shyness. The presence of these issues points to an inner struggle in the prover to attain an inner stability and a desire to develop the self emotionally and intellectually

Animal kingdom remedies communicate in writing and speech in ways that seek to attract the attention of others by being bright and colourful, and being excited and animated moving at a moderate to fast pace. They show a more visceral emotional response and nature in comparison to the other kingdoms. Jumping between highs and lows, being affectionate, expressive, and communicative (Sankaran, 2005: 2).

#### 5.4.4.2 Dreams and interests

According to Sankaran (2005) the dreams of the animal kingdom show a specific pattern and theme which define the kingdom. In this proving we find dreams and interests of animals, snakes, pursuit, being attacked, amorous, flying which are all significantly associated to the animal kingdom. Dreams of animals were a very prominent feature manifesting during this proving where numerous animals were dreamt of as seen in Provers 14 and 24 including those of snakes in Provers 24, 3, 14, 22. The nature of the animals in the dreams were often aggressive and attacking. The theme of violence and being attacked resonated in Prover 24 who dreamt armed assailants were attacking her and her brother. Provers 9 and 14 experienced dreams of a more amorous nature during which Prover 9 searched for an ex-girlfriend and on two occasions stated that he “needed her in that instance in time”, while Prover 14 felt unusually desired, dreaming of “girls that want me”. Prover 16 dreamt of emotional fulfilment where he had “finally found my own girlfriend and that she was everything I had hoped for and prayed about”.

Sankaran (2005: 2) states that issues of attraction, competition and sexuality feature prominently in the animal kingdom. This is presented in many ways in this proving such as in the dreams but also innately in the disposition of the provers as seen in Prover 7a where he remarks: “I don’t know what is wrong but somehow I am more attracted to women today. It’s not a usual thing. I’m attracted to them but today it’s like they read my thoughts they keep checking me out.” Here we see a heightened sexual awareness of the opposite sex and possibly an increase in libido.

Provers 3 and 24 both experienced what they described as a ‘floaty’ or a floating sensation due to an improvement of mood. This can be associated with the issue of the liver being involved in buoyancy through urea and ion regulation which will be further elaborated on below (Sankaran, 2005: 2).

Two provers even dreamt of the beach waves and tsunamis. The dream of a tsunami involved visiting the beach and seeing large waves resulting in feeling threatened and fearful, with themes of survival and fight central to the animal kingdom.

Subconsciously one can say that such dreams are referring to the home of *Carcharhinus leucas*.

#### **5.4.5 Diet**

Sharks are apex predators at the top of the food chain (Benchley 2002: 112). feeding principally on a multitude of fish, and secondarily on various rays, skates, squids, crustaceans and other smaller shark species including hammer heads (Wallett, 1983: 160). They are described as a species that will eat almost anything – they known to even eat the young of their own kind, either their own or other offspring (Readers Digest, 1990: 176).

During the proving we saw many voracious appetites with numerous cravings. Many provers noted either an increase or a decrease in appetite and thirst (one of many polarities/opposites seen throughout the materia medica of this remedy). Provers experienced a myriad of gastrointestinal sensations and gastrointestinal symptoms associated to the bull shark having a through-gut system similar to humans. Provers craved for cake, chocolate, coffee, cold water, eggs, fried chips, fruit, lemon, oranges, salt, sour, spice, tea and vinegar. The gastrointestinal system presented with 62 rubrics altogether.

#### **5.4.6 Reproduction**

The euryhaline bull shark is viviparous and retains the young and nourishes them through a yolk-sac placenta, giving birth to them either in lakes or moves them to lakes shortly after birth (Jenson, 1976: 539). Sharks rarely display courtship behaviour, and mate outside the edge of lakes with breeding taking place throughout the year (Jenson, 1976: 554).

The theme of love and sex is central to the proving of *Carcharhinus leucas*. We see desire for love and attention by provers as well as an increase in sexual perception of the opposite sex and an increase in libido. Two dreams of babies and reproduction were noted by Prover 24 in which she exhibits an instinctual protective

motherly nature over her unborn baby and a playful affectionate nature towards babies.

#### **5.4.7 Buoyancy and floaty sensation**

The shark liver is rich in oils and fats which act as a fat reserve. The levels of fats may reach up to 90% of the total liver weight. The shark is able to use the liver oils and fats to modulate body density so as to regulate hydrostatic balance and buoyancy, as well as a blood purging agent for removing chemicals and toxins (Baldrige, 1972: 306).

As mentioned in Dreams and Interests we see Provers 3 and 24 both experience a 'floaty' or floating sensation due to an improvement of mood, associated with growing love which can be likened to this buoyancy effect experienced by the shark.

The regulation of plasma urea levels through hepatic function significantly contributes to the maintenance of bull shark's hydrostatic balance, buoyancy and osmoregularity. Research has shown that there is an increase in plasma urea concentration levels with an increase in salinity which was directly linked in part to increased hepatic urea production confirming its role in buoyancy regulation (Anderson *et al.*, 2005: 1). The process of urea regulation echoes strongly in the symptomatology seen in the proving through various systems such as the skin where we see profuse perspiration and perspiration at varying times due to varying neurogenic causes where urea is known to be excreted in perspiration. Similarly, this proving has numerous symptoms associated with the kidneys, bladder and urine which are also known to regulate water and electrolytes. Many other symptoms were expressed through the liver in this proving.

#### **5.4.8 Aetiology/causative factors**

Animal kingdom remedies often show a mode that is multifaceted and changeable with abrupt changes, so they are unsteady and restless. Causative factors and

aetiologies contributing to this state are often rejection, neglect, being looked down on, failure in competition, and defence or love and aggression (Sankaran, 2005: 3).

Arising in the Mind themes were issues of disappointed love and heartbreak which were experienced by several of the provers, predominantly the female provers. These were expressed as chest pain, heaviness, crying, emotional pain, heat, anger and the need for love and attention. Provers 12, 15, and 4 expressed a shyness and a fear of failure in general and in exams.

The symptoms and dreams presented by the provers show a close resemblance to the themes and sensations of the animal kingdom as well as more specifically the aquatic kingdom as per Sankaran (2005).

#### **5.4.9 Dentition**

Sharks teeth are continuously being replaced throughout their lives. Teeth form behind the jaw cartilage and push forward replacing worn or loose teeth which then drop out at the front of the jaw (Bannister 1989: 16). Prover 12 experienced a loosening of her permanent tooth and the painless removal of it in a remarkably similar pattern to that seen in sharks.

#### **5.4.10 Good vs evil and the connection to a higher source**

As mentioned above, in various cultures we see that sharks, due to their characteristic size as well as attributes of speed and strength in the water and their powerful violent nature, instil fear among the population and are seen and worshipped even today as Gods and protectors (Cafiero and Jahoda, 1994: 22). This knowledge and universal understanding is manifested in the proving as spirituality and dreams.

The developments of a religious disposition, a desire to be close to and connect with God, is present throughout the materia medica arising from the provers' symptoms. There is as desire to feel blessed and gain heavenly blessings and experience divine

serenity. Provers 3, 4a, and 12 visited religious institutions such as churches and temples and noted an improvement and elevation in mood, and a sense of calmness within. Prover 12 “felt so blessed at church”, [12F 16], and Prover 4a “woke up feeling happy and blessed” [04aF 16]. Prover 24 experienced a bad dream and rebuked her dream in the name of Jesus. On a different yet still associated level, Prover 20 experienced a terrifying dream of a God-created natural disaster in the form of a giant powerful wave or tsunami creating in her a fear of the water and fear of death. All of which serve to strengthen and substantiate the correlation of the symptomatology of *Carcharhinus leucas* with the Doctrine of Signatures.

#### **5.4.11 Losing oneself and being lost**

The metaphor of being lost literally and figuratively is present abundantly throughout the materia medica of *Carcharhinus leucas*. This is particularly evident in Prover 4a where she expresses: “Ever since I started taking the remedy I am losing part of myself” and expresses her fear for life and everything and a feeling of being lost. On a more physical level she says: “felt like my head was going to come out”, suggesting a physical loss of parts. Prover 6 in response to the changes that have occurred in her home town on returning, gets mentally lost forgetting where she is and on a separate occasion wakes up feeling lost, marvelling at how everything has changed and looks different. This makes her feel as if she does not belong at home [6F 13]. Likewise, Prover 24 had a dream [ 24F 03] where her index finger is being cut off. This is suggestive of her physically losing a part of herself in a violent and dramatic manner. This theme also draws attention to the capacity of a shark to gain a sense of direction and home in on their pray by being able to sense the electromagnetic fields emitted by other animals in the water through their own electrosensory structures (Fields, 2007: 74-81).

In analysing the oceans and seas we see a vast expanse of predominantly uncharted and unexplored territory. The sea is abundant in incalculable life, wealth and danger where many have been lost and even died. This danger has given rise to many fears and horrors which today are often expressed in literature, song, and film, as well as numerous sayings and folk tales.

“Until you have the courage to lose sight of the shore, you will not know the terror of being forever lost at sea.” (Charlie Cook)

**Table 5.2: Summary of the polarities of symptomatology that emerged in the proving of *Carcharhinus leucas***

Polarities Present	
Happiness	Sadness/Weeping
Increase in Appetite-Hunger	Decrease in appetite- Satisfaction
Restful Sleep	Sleep Un-refreshed/Disturbed
Thirst	Thirst less
Affection and Desire for Family & Friends	Aversion to Family and friends
Dirtiness	Cleanliness
Loneliness	Group Activity
Heaviness	Floating
Stomach Bloating/ Distension	Stomach Cramping

#### **5.4.12 Comparison of *Carcharhinus leucas* symptoms to the symptoms of the other sea related remedies**

Various aquatic remedies bear a marked resemblance to some of the symptoms presented in the materia medica of *Carcharhinus leucas* underlining a similar nature of symptoms the proving symptoms to this group of remedies.

*Sepia* contains ink which has an affinity for the liver and is used to treat liver affections and shows a natural relationship between the organ and cephalopod (Mangialavori, 2002: 124). As with *Carcharhinus leucas*, *Sepia* also has indifference and aversion to family and loved ones. This could be described as a need for independence, freeing them to do as they desire. There is also sadness and irritability with easy offence and anxiety. There is vertigo and headaches.

In the stomach, we see a similar recurrent theme in *Sepia* of sour and bitter mentioned above where everything “tastes too salty, and they long for vinegar acids and pickles”, constipation and diarrhoea as well as heaviness and bruising in the extremities (Boericke, 2013: 595). There are also numerous types of pain experienced, from dragging to weakening (Mangialavori, 2002: 124)

## 5.5 MIASMS

In analysing the materia medica of *Carcharhinus leucas*, characteristics of both the cancerinic miasm and the typhoid miasm present themselves. We will therefore differentiate the remedy in terms of both these miasms.

### 5.5.1 The typhoid miasm

These are the keywords Sankaran (2005: 7) uses to describe this miasm:

- ❖ Crisis
- ❖ Intense
- ❖ Sinking
- ❖ Recover
- ❖ Child
- ❖ Intense short effort
- ❖ Typhoid
- ❖ Sub-acute
- ❖ Emergency
- ❖ Homesick
- ❖ Intense Struggle
- ❖ Critical Period
- ❖ Collapse
- ❖ Reaching a position of Comfort
- ❖ Impatience
- ❖ Demanding



Examples of remedies in this miasm include *Nux vomica*, *Rhus toxicodendrom*, *Bryonia*, *Baptisia*, *Phosphoricum Acidum*, and *Carbo Vegetalis*.

As seen in the miasm, this proving also revealed a critical nature of reacting as well as a critical environment to the person. The person reacts as if in an intense struggle. The person struggles with development of the self, raising issues of the self-esteem, as well as issues of development with others. Every facet of their lives presents with an acute crisis whether it be professional or private with examples in the proving of crises related to love lives and exams. Reacting with intense emotion be it sadness and crying or the opposite, namely, elation and euphoria. We see a concentrated effort and struggle where there is a desire for physical activity, and occupation and physical activity ameliorates. Homesickness is clear and evident among several provers who desire to be home and with family. Numerous provers experience exhaustion and prostration and a drop, in energy levels. The attitude is childlike, getting easily upset and outbursts of anger and violence.

### **5.5.2 The cancerinic miasm**

These are the keywords Sankaran (2005: 7) uses to describe this miasm:

- ❖ Control
- ❖ Perfection
- ❖ Fastidious
- ❖ Beyond ones Capacity & Stretching beyond Capacity
- ❖ Superhuman
- ❖ Cancer
- ❖ Great Expectations
- ❖ Chaos
- ❖ Order
- ❖ Self-Control and Loss of Control

Examples of remedies in this miasm include *Carcinosinum*, *Staphysagria*, *Conium*, *Arsenicum*, *Ignatia*, *Nitricum acidum*, *Kalium arsenicum*, and *Anacardium*.

This miasm displays a feeling of weakness and incapacity within. The provers express numerous issues of self-hatred, insecurity, aversion to criticism, timidity, anxiety and issues of confidence. This results in the need to perform exceedingly well and live up to high expectations where they are shown to be overly helpful to others going beyond the call of duty even when unwell, desiring and showing an amelioration through physical activity and occupation. Numerous provers report a fear of failure and exams. We see the provers trying to gain control of their chaotic emotions and lives, isolating themselves and holding in emotions in situations. Several provers expressed feeling overwhelmed and being extremely exhausted as a result. Numerous provers expressed that they desired to be loved and worked towards that in relation to their companions and family, wanting attention and affection.

## **5.6 CLINICAL INDICATIONS FOR *CARCHARHINUS LEUCAS* 30CH**

From the proving of *Carcharhinus leucas* 30CH we can see that various symptoms appear in abundance while others, although with a smaller presence, are more prominent and intense. These symptoms give rise to a list of possible clinically indicated pathologies which the remedy could help address, as laid out below:

- ❖ Styes
- ❖ Headaches
- ❖ Fever
- ❖ Vertigo and motion sickness
- ❖ Congestion, coryza and allergic rhinitis
- ❖ Gastrointestinal disturbances involving appetite and thirst
  - ❖ Gastritis and cramping
  - ❖ Diarrhoea
  - ❖ Constipation
  - ❖ Tenesmus
- ❖ Bloating and flatulence
- ❖ Dysmenorrhoea
- ❖ Urinary tract infections
- ❖ Muscle and joint disorders

- ❖ Arthritis
- ❖ Back pain
- ❖ Torticollis
- ❖ Sleep disorders
  - ❖ Insomnia
  - ❖ Hypersomnia

## 5.7 SUMMARY

In conducting the proving of *Carcharhinus leucas* 30CH a clear and observable symptomatology was elucidated, identifying a close association between the physical proving substance, its nature and disposition and the proving symptoms developed. As discussed in this chapter, this close relationship to the Doctrine of Signatures confirms the first and second hypotheses as stated in Chapter 1. The comparison to the Doctrine of Signatures and proving substance though significant, is, however, still subjective, with numerous varying interpretations being possible.

## CHAPTER 6 : CONCLUSIONS AND RECOMMENDATIONS

### 6.1 CONCLUSION

The researcher endeavoured in this research to investigate and conduct a proving with a 30CH potency of *Carcharhinus leucas* in the hope of eliciting the formation of clearly observable signs and symptoms in healthy proving volunteers. Following the proving, the researcher compared the materia medica of *Carcharhinus leucas* to the Doctrine of Signatures to elucidate the similarities between the remedy and the doctrine. Both hypotheses as laid out in Chapter 1 were found to be supported by the investigation and found to be true and fruitful. The development of symptoms in the mental, emotional, and physical plane, and with the affinity of the remedy to specific tissues, suggests that the remedy may be beneficial in clinical applications and constitutional prescribing. This research has brought significant understanding and light to a new indigenous African remedy beneficial to the region and expanded the materia medica for a kingdom that is poorly represented.

### 6.2 RECOMMENDATIONS

#### 6.2.1 The prover population

In conducting a proving the result and calibre is predominantly based on the effort of the provers and the journaled symptomatology provided. In this double-blind placebo controlled clinical homoeopathic proving incorporating experimental design we see an array of participants being students, professionals, family and friends, from various cultural, racial and ethnic groups and of various ages.

Despite conducting a comprehensive pre-proving workshop during which a thorough explanation of philosophy and methodology was conveyed as well as a detailed explanation of procedures in a pre-proving consult, as well as informative and instructive handouts, it was observed that various inconsistencies and irregularities presented themselves throughout the journal work of the provers. Provers not only

had difficulties acting within the strict guidelines of the proving, but often did not describe and define symptoms properly. Times, modalities, descriptions and keynote features were often left out. Provers were either ambiguous, provided irrelevant information or were hesitant to provide details that seemed more private in nature. Provers had difficulty with identifying changes in state as well as difficulty in expressing themselves correctly in English. Provers skipped days of journaling and made errors in dating. Provers were hesitant to ask for help in writing journals. Provers with a homoeopathic background as well as those studying homoeopathy provided a much richer, more precise work than did the public.

Thus, it is recommended that provers be selected who are more proficient in English, and that more time be taken regarding prover induction. This should include conducting a longer pre-proving workshop and initial consultation. Fewer and simpler details should be given in the information letters. Although it is seemingly more beneficial to have provers with a background of homoeopathy, it is desirable to also have provers of a non-homoeopathic background to allow for variation in symptom perception and expression.

### **6.2.2 Prover age, ethnicity and gender**

From the 30 participants, the provers were chiefly of ages 18 and 19 with the age range being between 18 and 26 with one outlier of age 60. In the younger provers there is a stronger vital force reaction because they are healthier, therefore providing a rich materia medica, but they lack the understanding of disease and its facets and the ability to articulate the disease processes. Therefore, it is preferable to have a mixed range of ages.

In the KwaZulu-Natal region, we see a multitude of ethnic and racial groups as well as residents from other countries. During this proving, there were provers of Black [18], Coloured [2] and Indian [10] origin. An ideal sampling group would have also included the White and Chinese population present in the area which were absent during this proving and limited the spectrum of symptoms. Variation in race and ethnicity give rise to different dietary, cultural, religious, and physical attributes,

widening the perspective and providing information important and relevant to any proving. It is therefore recommended that a varied ethnic and race sampling group be used for optimum results.

Seventeen females and 13 males participated in the proving. As we see within the sphere of action of any remedy, there are both male and female symptoms present. It is therefore beneficial and suggested that an equal ratio of male and female proving participants be used to define and increase the possibility of gender associated symptoms being elicited.

### **6.2.3 Prover supervision**

To increase motivation and perseverance in journaling and to also improve efficacy it is suggested that future provings have more face to face consults at timed intervals during the course of the proving. In addition, a higher rate of phone communication would provide the prover with more attention and increase the understanding between researcher and prover, hopefully leading to less error.

### **6.2.4 Publication and media communication of clinical information**

The results of the proving of *Carcharhinus leucas* provided a wealth of symptoms on various planes with multiple beneficial clinical indications. It is therefore recommended that the material be made available for the homoeopathic as well as other medical communities, internationally and locally. This can be achieved through articles, homoeopathic journals, and the electronic media. After being verified and confirmed through a range of provings this information could be made available for inclusion in materia medicas, repertories, various software applications, and educational games.

### **6.2.5 Further provings of Carcharhinus leucas**

Although not the first shark proving (Grimes [2000] conducted a proving of *Galeocerdo cuvier hepar*], this proving is nevertheless pioneering, being the first of

its genus. In the process, the strictest of protocols were upheld. The proving was straight forward and but there is still much to be explored of the genus. These are some of the many ways in which the subject can be explored:

- ❖ A triple blind study to remove bias and prejudice and reaffirm symptomatology.
- ❖ A proving of different potencies of the *Carcharhinus leucas* ranging from the lower 3CH, 6CH, and 9CH potencies to the higher 200CH, 1M, and 10M potencies to understand the spectrum of symptoms associated with various potencies.
- ❖ Clinical trials using the substance to treat clinically indicated symptoms.
- ❖ Conducting provings of other species of sharks with comparison to *Carcharhinus leucas*.
- ❖ A comparative analysis of the themes and symptoms of the various species of sharks.
- ❖ A reproving of the substance using a fresh sample and comparing it to the original proving using a frozen sample to see if there are differences due to the cellular damage during the freezing process.

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# APPENDICES

## **APPENDIX A: Preliminary letter of information**



### **PRELIMINARY LETTER OF INFORMATION**

**Title of the Research Study:** A homoeopathic drug proving of XXXXXXXXXX 30CH with a subsequent comparison to the Doctrine of Signatures

**Principal Investigator/s/researcher:** Ismaeel Firdaus Khan (B. Tech: Homoeopathy)

**Co-Investigator/s:** Nalini Naidoo (B. Tech: Homoeopathy)

**Supervisor/s:** Dr. M Maharaj (M. Tech: Homoeopathy)

**Co-Supervisor:** Dr V Alwar (M Tech: Homoeopathy)

#### **Brief Introduction and Purpose of the study:**

A homoeopathic drug proving is a study in which people who are in a relatively good state of health, take a homoeopathically prepared substance in order to observe and record any symptoms they may experience. These symptoms are then said to form the drug picture for that substance and can be used as basis for prescription according to the Law of Similars, when a patient displays a similar symptom picture. Provings are vitally important to homoeopathy as they represent the only truly accurate manner in which to ascertain the action of the homoeopathic drugs and allow on to gain a practical and experimental understanding of homoeopathic medicines.

#### **Outline of the procedures:**

1. Once you have read and understood this information letter fully and had the opportunity to ask questions you will be asked to sign a preliminary consent form, which allows the researcher to take you through the preliminary stage of this research.
2. After signing the preliminary consent form, the researcher will determine if you meet the required criteria for this study, this will take place in the form of a set of questions about your lifestyle and medical history.
3. If you meet the required criteria in order to participate, the next process can begin.
4. The researcher will then conduct a homoeopathic case history; this is a detailed interview where the researcher asks detailed questions about your health.
5. The researcher will then conduct a general physical examination and measure things like blood pressure, pulse, height, weight, etc.
6. The researcher will also request a urine sample from all potential female provers– this is so that a routine pregnancy test can be conducted on this urine sample. The urine sample test will be done at the end of the physical examination and the researcher will give you feedback immediately thereafter.
7. After all of the above are conducted (which should take about 1 hour to perform) the researcher will provide feedback on their finding and then if all the necessary criteria are met you will be invited to attend a prover training workshop where all provers will be trained on how to conduct a proving.

At any stage in the preliminary process, you are free to change your mind and withdraw without having to provide any reason for doing so. All of the above will be conducted at the homoeopathic Day Clinic at Durban University of Technology.

**Risk or Discomforts to the Participant:** There is no risk to participation or risk of discomfort in this preliminary stage of the proving; no medicine is tested at this stage. Prospective provers are only being screened for suitability for the main part of the proving.

**Benefits:**

Although there is no direct benefit to participating in this preliminary stage of the proving; you will receive a comprehensive assessment of your health status, which may be of indirect benefit to you, there will be no charge for this assessment and there will be no remuneration for your participation – you are requested to volunteer your time accordingly.

**Reason/s why the Participant May Be Withdrawn from the Study:**

Participation in this study is purely voluntary and provers can withdraw themselves at any time should they wish to do so. Participants will however be excluded if they do not meet the inclusion criteria, in addition should participants fall ill or require orthodox or other medication during the study they may be excluded by the researchers.

**Remuneration:**

Participants will not be remunerated for participation in this proving.

**Costs of the Study:**

There will be no costs to the participants for partaking in this research.

**Confidentiality:**

All of the above will be conducted in private; and all information is kept strictly confidential, on the researchers will have access to the information and at no stage will your name be mentioned in the research process. Only the researcher will be present during your physical examination.

**Research-related Injury:**

Participation in this preliminary stage of the proving is highly unlikely to result in any injury, since the preliminary stage of the proving is merely a screening process, however all provers are covered by an insurance policy in the event that they incur any injury or harm.

**Persons to Contact in the Event of Any Problems or Queries:**

If you have any queries or concerns during the duration of this proving you may please contact the following individuals:

- Researcher: Ismaeel Firdaus Khan (078 054 2278)
- Supervisor: Dr. M. Maharaj (083 388 2688)
- Co-Supervisor:
- The institutional Research Ethics Administrator (031 373 2900)

Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or [dvctip@dut.ac.za](mailto:dvctip@dut.ac.za).

This appendix has been taken from: Ross, A.H.A. 2011. An Appraisal of Homoeopathic Proving Methodology as a Bridge between the Indigenous and Rationalist-Scientific Understandings of Medicinal Plants: The Case of *Strychnos henningsii*. M.Tech. Homoeopathic. Dissertation, Durban University of Technology



## PRELIMINARY CONSENT

Statement of Agreement to Participate in the research Study:

- I hereby confirm that I have been informed by the researcher, \_\_\_\_\_ (name of researcher), about the nature, conduct, benefits and risks of this study – Research Ethics Clearance Number: \_\_\_\_\_,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research, which may relate to my participation will be made available to me.

_____	_____	_____	_____
<b>Full Name of Participant</b>	<b>Date</b>	<b>Time</b>	<b>Signature/Right</b>
<b>Thumbprint</b>			

I, \_\_\_\_\_ (name of researcher) herewith confirm that the above participants have been fully informed about the nature, conduct and risks of the above study.

_____	_____	_____
<b>Full Name of Researcher</b>	<b>Date</b>	<b>Signature</b>

_____	_____	_____
<b>Full Name of Witness (If applicable)</b>	<b>Date</b>	<b>Signature</b>

This appendix has been taken from: Ross, A.H.A. 2011. An Appraisal of Homoeopathic Proving Methodology as a Bridge between the Indigenous and Rationalist-Scientific Understandings of Medicinal Plants: The Case of *Strychnoshenningsii*. M.Tech. Homoeopathic. Dissertation, Durban University of Technology

## **APPENDIX B: Screening for suitability and inclusion in the proving**

<b>PROVER CODE:</b>		
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**Screening for Suitability and Inclusion in the Proving**  
**ALL INFORMATION ON THIS PAGE WILL BE TREATED**  
**AS STRICTLY CONFIDENTIAL**

Surname: .....				
First Names: .....				
Age: .....	Sex:	Telephone: .....		
	<table border="1" style="display: inline-table;"><tr><td style="text-align: center;">M</td><td style="text-align: center;">F</td></tr></table>	M	F	
M	F			
Today's Date:    /    /				

**To be completed only after participant has signed the Informed Consent:**



/ /
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Informed Consent signed on:

(Date)

Date of Birth: .....

Occupation: .....

Initials: .....

Ethnicity: .....

Children: .....

Martial  
Status

S	M	D	W
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Proving Drug Randomisation Number	
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PROVER CODE:



- Do you consider yourself to be in a general state of good health?

YES

NO

- If you are between the ages of 18 and 21 years, do you have consent from a parent/ guardian to participate in this proving?

YES

NO

- Are you willing to follow the proper procedures for the duration of the proving (including journal-keeping, consultations with your supervisor)?

YES

NO

- If you have participated in a previous proving or any conventional clinical trial:  
Has there been at least a period of 6 weeks since the end of the last trial?

YES

NO

This appendix has been adapted from Wright, C. (1999) A homoeopathic Drug Proving of Bitisarietansarietans.

## **APPENDIX C: Initial Case History & Physical Examination**

PROVER CODE:		
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### **Initial Case History & Physical Examination \***

ALL INFORMATION WILL BE TREATED AS STRICTLY CONFIDENTIAL

#### **1. Past Medical History:**

(Please list previous health problems and their approximate dates:)

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Do you have a history of any of the following? ***[Please tick relevant blocks]***

Cancer	<input type="checkbox"/>	Asthma	<input type="checkbox"/>
HIV	<input type="checkbox"/>	Pneumonia/ Chronic bronchitis	<input type="checkbox"/>
Parasitic infections	<input type="checkbox"/>	Tuberculosis	<input type="checkbox"/>
Glandular fever	<input type="checkbox"/>	Boils/ Suppurative tendency	<input type="checkbox"/>
Bleeding disorders	<input type="checkbox"/>	Smoking	<input type="checkbox"/>
Eczema/ Skin conditions	<input type="checkbox"/>	Oedema/ Swelling	<input type="checkbox"/>
Warts	<input type="checkbox"/>	Haemorrhoids	<input type="checkbox"/>
Other	<input type="checkbox"/>		

## 2. Surgical History:

(Please list any past surgical procedures [e.g. tonsils, warts, moles, appendix etc.] and their approximate dates : )

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## 3. Family History:

Is there a history of any of the following within your family?

(including siblings, parents and grandparents)

Cardiovascular disease	<input type="checkbox"/>	incl.hypertension, heart disease, etc.
Cerebrovascular disease	<input type="checkbox"/>	incl. stroke, transient ischaemic attacks, etc.
Diabetes mellitus	<input type="checkbox"/>	
Tuberculosis	<input type="checkbox"/>	

PROVER  
CODE:

**Sleep:**

Quantity:

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Quality:

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Position:

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**Dreams:**

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**Time modalities:**

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**Weather modalities:**

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**Perspiration:**

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**Appetite:**

Cravings	
Aversions	
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**Thirst:**

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**Bowel habits:**

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PROVER CODE:



**Respiratory System:**

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**Cardiovascular System:**

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**Gastrointestinal System:**

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**Urinary System:**

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**Genitalia and Sexuality:**

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**Musculoskeletal System:**

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**Extremities:**

Upper:

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Lower:

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This appendix has been taken from: Ross, A.H.A. 2011. An Appraisal of Homoeopathic Proving Methodology as a Bridge between the Indigenous and Rationalist-Scientific Understandings of Medicinal Plants: The Case of *Strychnoshenningsii*. M.Tech. Homoeopathic. Dissertation, Durban University of Technology



PROVER CODE:



## 8. The Physical Examination:

### a) Physical Description

Frame / Build:			
Hair colour:		Complexion:	
Eye colour:		Skin Texture:	

### b) Vital Signs

Height:		m
Weight:		kg
Pulse rate:		Beats/min
Respiratory rate:		Breaths/min
Temperature:		C
Blood Pressure:		mmHg

### c) Findings on Physical Examination [Tick positive blocks]

Jaundice	<input type="checkbox"/>	Oedema	<input type="checkbox"/>
Anaemia	<input type="checkbox"/>	Lymphadenopathy	<input type="checkbox"/>
Cyanosis	<input type="checkbox"/>	Hydration	<input type="checkbox"/>
Clubbing	<input type="checkbox"/>		
<b>Specific System Examinations</b>			


<b>Consultation Date:</b>	<b>/ /</b>	<b>Signature of Investigator / Supervisor:</b>	
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## **APPENDIX D: Letter of information (IREC)**



### **INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) LETTER OF INFORMATION**

**Title of the Research Study:** A homoeopathic drug proving of XXXXXXXX with a subsequent comparison to the Doctrine of Signatures

**Principal Investigator/s/researcher:** Ismaeel Firdaus Khan (B. Tech: Homoeopathy)

**Co-Investigator/s:** Nalini Naidoo (B. Tech: Homoeopathy)

**Supervisor/s:** Dr. M Maharaj (M. Tech: Homoeopathy)

**Co-Supervisor:** Dr V Alwar (M. Tech: Homoeopathy)

#### **Good day proving participant**

**Brief Introduction and Purpose of the Study:** thank you for agreeing to take part in this proving. We are grateful for your willingness to contribute to the advancement and growth of homoeopathic Science, and are sure that you will derive benefit from the experience. A homoeopathic drug proving is a study in which people who are in a relatively good state of health, take a homoeopathically prepared substance in order to observe and record any symptoms they may experience. These symptoms are then said to form the drug picture for that substance and can be used as basis for prescription, according to the Law of Similars, when a patient displays a similar symptom picture. Proving are vitally important to homoeopathy as they represent the only truly accurate manner in which to ascertain the action of the homoeopathic

drugs and allow one to gain a practical and experimental understanding of homoeopathic medicines.

### **Outline of the Procedures:**

#### **Before the proving:**

Ensure that you have:

- attended the pre-proving **training session**
- read and understood these **Instructions**
- signed the **Informed Consent Form**
- had a **case history** taken and a **physical examination** performed
- an assigned **prover number**, and corresponding **journal** and

The Principal Investigator or any of the Co-Investigators/supervisors will contact you with the date that you are required to commence the pre-proving observation period, and the date that you are required to start taking the remedy. You will also agree on a daily contact time for the researcher to contact you.

Should there be any problems, or anything you do not fully understand, please do not hesitate to call your proving supervisor.

#### **Beginning the proving:**

After having been contacted by your supervisor and asked to commence the proving, record your symptoms daily in the diary for one week prior to taking the remedy. This will help you to get into the habit of observing and recording your symptoms, as well as bringing you into familiarity with your normal state. This is an important step as it establishes a baseline for you as an individual prover.

#### **Taking the remedy:**

The proving drug is a highly diluted homoeopathic medicine originating either from plants, minerals, animals, other chemicals or orthodox medicines.

An independent company has prepared all the remedies used during this process. The active substance/placebo has been assigned according to randomisation

whereby 6 participants will receive placebo and the other 24 will receive the active substance.

Begin taking the remedy on the day that you and your supervisor have agreed upon. Record the time that you take each dose. Time keeping is an important element of the proving.

The remedy should be taken on an empty stomach and with a clean mouth. Neither food nor drink should be taken for a half-hour before and after taking the remedy. The remedy should not be taken for more than 3 doses a day for five days. In the event that you experience symptoms, or those around you observe any proving symptoms, **do not take any further doses of the remedy. This is very important.**

By proving symptoms we mean:

- **any new symptom**, i.e. ones that you have never experienced before
- **any unusual change or intensification of an existing symptom**
- **any strong return of an old symptom**, i.e. a symptom that you have not experienced for more than one year.

If in doubt, phone your supervisor. Be on the safe side and do not take further doses. **Homoeopathic experience has repeatedly shown that the proving symptoms begin very subtly – often before the prover recognises that the remedy has begun to act.**

### **Lifestyle during the Proving:**

Avoid all **antidoting factor** such as **coffee, camphor** and **mints**. If you normally use these substances, please stop taking them for two weeks before, and for the duration of the proving. Protect the medicine you are proving like any other potentised remedy: store them in a cool, dark place away from strong-smelling substances, chemicals, electrical equipment and cellphones.

A successful proving depends on your recognising and respecting the need for moderation in the following areas: work, alcohol exercise and diet. Try to remain within your usual framework and maintain your usual habits.

Avoid taking **medication** of any sort, including antibiotics and any steroid or cortisone preparations, vitamin or mineral supplements, herbal or homoeopathic remedies.

**In the event of medical or dental emergency, of course common sense should prevail.** Contact your doctor, dentist or local hospital as necessary. Please contact your research supervisor or proving 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 Proving Supervisor:**

Your supervisor will telephone you to inform you to begin your one-week observation period, and then daily from the day that you begin to take the remedy. This will later decrease to 2 or 3 times a week and then to once a week, as soon as you and the supervisor agree that there is no longer a need for such close contact. This will serve to check on your progress, ensure that you are recording the best quality symptoms possible and to judge when you need to cease taking the remedy.

If you encounter any problems during the proving, please do not hesitate to call your supervisor.

### **Recording of Symptoms:**

When you commence the proving note down carefully any symptoms that arise, whether they are old or new, and the time of the day or night at which they occurred.

**This should be done as vigilantly and frequently as possible so that the details will be fresh in your memory.** Make a note even if nothing happens.

**Please start each day on a new page with the date noted at the top of each page. Also, note which day of the proving it is. The day that you took the first dose is day zero.**

Write neatly on alternate lines, in order to facilitate the extraction process, which is the next stage of the proving. Try to keep the journal with you all times. Please be as precise as possible. Note in an accurate, detailed but brief manner your symptoms in your own words.

Information about location, sensation, modality, time and intensity is particularly important.

- **Location:** Try to be accurate in your anatomical descriptions. Simple, clear diagrams may help here. Be attentive to which side of the body is affected.
- **Sensation:** Describe this as carefully and as thoroughly as possible e.g. burning, shooting, stitching, throbbing, and dull etc.
- **Modality:** A modality describes how a symptom is affected by different situations/stimuli. Better (>) or worse (<) from weather, food, smells, dark, lying, standing, light, people etc. Try different things out and record any changes.
- **Time:** note the time of onset of the symptoms, and when they cease or are altered. Is it generally > or < at a particular time of day, and is this unusual for you.
- **Intensity:** Briefly describe the sensation and the effect on you.
- **Aetiology:** Did anything seem to cause or set off the symptom and does it do this repeatedly?
- **Concomitants:** Do any symptoms appear together or always seem to accompany each other, or do some symptoms seem to alternate with each other?

This is easily remembered as:

<b>C</b>	–	concomitants
<b>L</b>	–	location
<b>A</b>	–	aetiology
<b>M</b>	–	modality
<b>I</b>	–	intensity
<b>T</b>	–	time
<b>S</b>	–	sensation

On a daily basis, you should run through the following checklist to ensure that you have observed and recorded all your symptoms:

- Mind / mood
- Head
- Eyes / vision
- Ears / hearing
- Nose
- Back
- Chest and respiration
- Digestive system
- Extremities
- Urinary organs
- Genitalia
- Sex / menstruation
- Skin
- Temperature
- Sleep
- Dreams
- Generalities

Please give full description of dreams, and in particular, note the general feels or impression the dream left you with.



Mental and emotional symptoms are important, and sometimes difficult to describe – please take special care in noting these.

Reports from friends and relatives can be particularly enlightening. Please include these where possible. At the end of the proving, please make a general summary of proving:

Note how the proving affected you in general; how has this experience affected your health? Would you do another proving?

As far as possible try to classify each of your symptoms by making a notation according to the following key in brackets next to each entry:

**(RS) – Recent symptom** i.e. a symptom that you are suffering from now or, or have been suffering from in the last year.

**(NS) – New symptom**

**(OS) – Old symptom.** State when the symptom occurred previously.

**(AS) Alteration** in the **present** or **old** symptom (e.g. used to be on the left side, now on the right side)

**(US) – An unusual symptom** for you.

If you have any doubts, discuss them with your supervisor.

**Risks or Discomforts to Participant:** you may develop mild, functional symptoms in response to taking the proving substance; due to the very high dilution of the proving medicine though these symptoms are not permanent and disappear when the proving medicine is stopped. While taking part in the proving you will be closely monitored by the researcher and the research supervisor; in the unlikely event that proving symptoms persist upon withdrawal of the proving medicine an antidote will be provided.

**Benefits, costs and remuneration:** Although there is no direct benefit to participating in this proving, you will receive an in-depth assessment of your health status that may be of indirect benefit to you, there will be no charge for this

assessment. No remuneration will be offered to participants who are requested to partake voluntarily.

**Reason/s why the participant May Be Withdrawn from the proving:** Participation in this proving is purely voluntary and provers can withdraw at any given time. Participant will be excluded if they do not meet the inclusion criteria. If participants fall ill and require allopathic treatment, they will also be withdrawn from the study.

**Confidentiality:** It is important for the quality and the credibility of the proving that you discuss your symptoms **only** with your supervisor. Keep your symptoms to yourself and do not discuss them with fellow provers.

Your privacy is something that we will protect. Only your supervisor will know your identity and all information will be treated in the strictest confidence.

Persons to Contact in the Event of Any Problems or Queries:

Please contact the researchers:

- Researcher: Ismaeel Firdaus Khan (081 3444 933)
- Supervisor: Dr. M. Maharaj (083 388 2688)
- Co-Supervisor:
- The institutional Research Ethics Administrator (031 373 2900)

Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or [dvctip@dut.ac.za](mailto:dvctip@dut.ac.za).

**General:** Participation is purely voluntary and you can withdraw from the study at any given time. A total number of 30 participants will be involved in this proving. If you have any questions or require any information please feel free to contact the researcher or supervisor on the above contact details.

This appendix has been taken from: Ross, A.H.A. 2011. An Appraisal of Homoeopathic Proving Methodology as a Bridge between the Indigenous and Rationalist-Scientific Understandings of Medicinal Plants: The Case of *Strychnoshenningsii*. M.Tech. Homoeopathic. Dissertation, Durban University of Technology



## **INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC) CONSENT**

### **Good day Proving Participant**

#### **Statement of Agreement to Participate in the Research Study:**

- I hereby confirm that I have been informed by the researcher, \_\_\_\_\_ (name of researcher), about the nature, conduct, benefits and risks of this study – Research Ethics Clearance Number: \_\_\_\_\_,
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research, which may relate to my participation will be made available to me.

- I have no objection (personal, religious or other) to the ingestion of the proving drug, which may be originally derived from plants, minerals, animals, other chemicals or orthodox medicines.
- I hereby consent to a pregnancy test during the physical examination (all prospective female provers of child bearing age)

---

**Full Name of Participant   Date   Time   Signature / Right Thumbprint**

I, \_\_\_\_\_ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

---

**Full Name of Researcher   Date   Signature**

---

**Full Name of Witness (If applicable)   Date   Signature**

#### **References:**

Department of Health: 2004. Ethics in Health Research: Principles, Structures and Processes

<http://www.doh.gov.za/docs/factsheets/guidelines/ethnics/>

Department of Health. 2006. South African Good Clinical Practice Guidelines. 2<sup>nd</sup> Ed. Available at:

[http://www.nhrec.org.za/?page\\_id=14](http://www.nhrec.org.za/?page_id=14)

## **APPENDIX E: Inclusion and exclusion criteria**



The inclusion and exclusion criteria below will determine whether any symptomatology should be included or excluded in the proving.

### **Inclusion Criteria:**

- An unfamiliar new symptom to the prover (1CCH,1999: 36)
- Intensification of a usual or present symptom to a significant degree (1CCH, 1999: 36).
- The modification or alteration of current symptoms using clear description of the present and modified components (1CCH, 1999: 36).
- The appearance of old symptoms that have not been present for at least one year. The time that the old symptoms occurred needs to be noted (1CCH, 1999: 36).
- The disappearance of current symptoms during the proving (1CCH, 1999: 36).
- If there is a repetition of the time of day at which a symptom occurs in one or more provers then only should it be included(1CCH,1999: 36).
- If doubtful about a symptom then include it in brackets. The symptom could be valid if another prover experiences the same symptom. However, it must be included (1CCH, 1999: 36).
- After taking the medication a symptom occurred twice during the homoeopathic drug proving.
- A symptom that was experienced when the proving commenced and which disappeared or has ameliorated significantly after the proving remedy has been administered. This can be classified as a symptom that is cured (Riley,1997: 227)
- All symptoms presenting in more than one prover (Riley, 1997: 227).

- All the new symptoms can be regarded as proving symptoms if all the provers are under the influence of the remedy in general (Sherr, 2003: 76).

### **Exclusion Criteria:**

- Symptoms will be excluded if they have occurred recently i.e. one year or less (Sherr, 2003: 76).
- The provers usual or present symptoms should be excluded if the validity of the symptom is seriously doubtful then it should be excluded (Sherr, 2003: 76).

All information will be collected, edited and collated. The collating procedure involves the combination of all the information that was received from every prover and assembling and structuring it together 'as if one person' (Sherr, 2003: 76). The information that is collated will be written in a materiamedica and repertory format, which will be included in the synthesis repertory. Homoeopaths can use XXXXXXXXX locally and internationally in clinical practice.

## **APPENDIX F: Follow up case history & physical examination**

<b>PROVER CODE:</b>		<b>Random NO:</b>	
-------------------------	--	-----------------------	--



### **Follow Up Case History & Physical Examination\***

*ALL INFORMATION WILL BE TREATED AS STRICTLY CONFIDENTIAL*

#### **Background Personal History:**

#### **Allergies:**

---

---

#### **Vaccinations:**

---

---

#### **Medication** (including supplements):

---

---

---

#### **Estimation of daily consumption:**

Alcohol:

---

Cigarettes:

---

**Generalities:****Energy:**

Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

**Sleep:**

Quantity:

---

Quality:

---

Position:

---

**Dreams:**

---

---

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---

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<b>PROVER CODE:</b>		<b>Random NO:</b>	
-------------------------	--	-----------------------	--



<u>Nature of bleed:</u>	Duration:	Days	
	Meno-	Metro-	
			<u>Post-menstrual:</u>
<u>Pain:</u>			

### Head-to-toe and Systems Overview:

#### Head:

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#### Eyes and Vision:

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#### Ears and Hearing:

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**Nose and Sinuses:**

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---

**Mouth, Tongue and Teeth:**

---

---

**Throat:**

---

---

---

**Respiratory System:**

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---

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<b>PROVER CODE:</b>		<b>Random NO:</b>	
-------------------------	--	-----------------------	--



Hair and Nails:

---



---

Other:

---



---

Mental Overview:

*Disposition:*


Fears:


Relationships:


Social interaction:


Ambition / Regret:
Hobbies/Interests:

<b>PROVER CODE:</b>		<b>Random NO:</b>	
-------------------------	--	-----------------------	--



<b>Consultation Date:</b>		<b>Signature Investigator/ Supervisor:</b>	
---------------------------	--	--	--

---

**FOLLOW UP:**


- ☐ There are no ongoing proving symptoms → Prover back to normal state
- ☐ There are ongoing symptoms, details / explanation:


<b>Final Consultation Date:</b>		<b>Signature of Investigator/ Supervisor:</b>	
-------------------------------------	--	---	--

## **APPENDIX G: Methods of preparation**



This appendix has been taken from: Ross, A.H.A. 2011. An Appraisal of Homoeopathic Proving Methodology as a Bridge between the Indigenous and Rationalist-Scientific Understandings of Medicinal Plants: The Case of *Strychnoshenningsii*. M. Tech. Homoeopathic. Dissertation, Durban University of Technology

### **Methods of Preparation**

[German Homoeopathic Pharmacopoeia (*Benyunes, 2005: 36-39*)]

#### **i) Method 6: Triturations**

Preparations made according to method 6 are triturations of solid basic drug materials with lactose as the vehicle unless otherwise prescribed. Triturations up to and including the 4<sup>th</sup> dilution are triturated by hand [*or machine*] in a ratio of [*1 to 10 decimal dilution or*] 1 to 100 (centesimal dilution). Unless otherwise stated, the basic drug materials are reduced to the particle size given in the Monograph (Mesh aperture). Quantities of more than 1000g are triturated by mechanical means.

The duration and intensity of trituration should be such that the resulting particle size of the basic drug materials in the 1<sup>st</sup> [decimal or] centesimal dilution is below 10µg at 80 percent level; no drug particle should be more than 50µg.

Triturations up to and including the 4<sup>th</sup> [decimal or] centesimal are produced at the same duration and intensity of trituration.

### **Trituration by hand:**

Divide the vehicle [**lactose 19.800g**] <sup>b</sup>into 3 parts and triturate the first part [**6.600g**] for a short period in a porcelain mortar. Add the basic drug material [**0.200g**] and triturate for 6 minutes, scrape down for 4 minutes with a porcelain spatula, triturate for a further 6 minutes, scrape down again for 4 minutes, add the second part [**6.600g**] of the vehicle and continue as above. Finally add the third part [**6.600g**] and proceed as before. The minimum time required for the whole process will thus be 1 hour. The same method is followed for subsequent dilutions.

*[For triturations above the 4x or 4c dilute 1 part of the dilution with 9 parts of lactose or 99 parts of lactose as follows: in a mortar, combine one third of the required amount of lactose until homogeneous. Add the second third of the lactose, mix until homogeneous and repeat for the last third.]*

### **ii) Method 8a: Liquid preparations made from triturations**

Preparations made by Method 8a are liquid preparations produced from triturations made by Method 6.

*[To produce a 6x liquid dilution, 1 part of the 4x trituration is dissolved in 9 parts of water and succussed. 1 part of this dilution is combined with 9 parts of ethanol 30 percent to produce the 6x liquid dilution by succession. In the same way, the 7x liquid dilution is made from the 5x trituration, and the 8x liquid dilution from the 6x trituration. From the 9x upwards, liquid decimal dilutions are made from the previous decimal dilution with ethanol 43 percent in a ratio of 1 to 10.]*

To produce a 6c liquid dilution, 1 part of the 4c trituration is dissolved in 99 parts of water and succussed. 1 part of this dilution is combined with 99 parts of ethanol 30 percent to produce the 6c liquid dilution by succession. [In the same way, the 7c liquid dilution is made from the 5c trituration, and the 8c liquid dilution from the 6c trituration.] From the 9c upwards, liquid centesimal dilutions are made from the previous centesimal dilution with ethanol 43 percent in a ratio of 1 to 100.

*[The 6x, 7x, 6c, 7c liquid dilutions produced from the above method must not be used to produce further liquid dilutions.]*

**Modified Method 8a:**

***To produce a 4CH liquid dilution, 1 part [0.200g] of the 3c trituration is dissolved in 49 parts [9.800g] of water and dissolved. To this is added 50 parts [10.000g] of ethanol 60% percent. This mixture is succussed to produce the 4c liquid dilution. 1 part of this dilution [30µl] is combined with 99 parts of ethanol 96 percent [2.970ml] to produce the 5CH liquid dilution by succession. From the 6CH upwards, liquid centesimal dilutions are made from the previous centesimal dilution with ethanol 96 percent in a ratio of 1 to 99.***

- a) *[italics]* indicates portions of the methods which are not applicable to the preparation of
- b) ***[bold italics]*** indicates specific detail applicable to the preparation of





*Would you like to participate in  
homoeopathic research?*

*By being a part of a discovery of a new medicine, you will  
be able to add to the medical field and benefit future  
generations!*

*Learn about the amazing workings of homoeopathy and at  
the same time, discover new things about yourself...*

*If you are between the ages of 18 and 75 years old and in a  
general good state of health, don't hesitate...*

*Contact:*

*Ismaeel F. Khan- 081 3444 933*

*Nalini Naidoo- 082 6632 465*

## **APPENDIX I: Classification of the substance**



### **Classification of the Substance:**

#### Carcharhinus Leucas Taxonomy

Kingdom: Animalia

Phylum: Chordata

Sub-Phylum: Vertebrata

Superclass: Gnathostomata

Class: Chondrichthyes

Order: Carcharhiniformes

Family: Carcharhinidae

Genus: Carcharhinus

Species: Carcharhinus leucas

## **APPENDIX J: Permission letter, Clinic Director**



### **Permission Letter:**

**TO:** Dr C Korporaal, Clinical Director  
Homoeopathic Day Clinic  
Durban University of Technology

**DATE: 1 February 2015**

**Re: USAGE OF FACILITIES AT THE HOMOEOPATHIC DAY CLINIC**

Good Morning

Dear Dr C Korporaal

I, Ismaeel Firdaus Khan, seek permission from you, Dr C Korporaal, to use the clinic facilities for the duration of my research in 2015. My study will last for up to seven weeks, with one consultation, and one physical examination before and after the proving process. I will need to use a room for consultation, the dispensary to dispense the medication, and the reception area to recruit my participants.

My research topic is "A Homoeopathic drug proving ofXXXXXXwith a subsequent comparison to the doctrine of signatures". I will use 15 participants that will be selected according to the inclusion and exclusion criteria.

### **INCLUSION CRITERIA:**

1. The prover can be between the ages of 18-75 years old.
2. The prover must be in a reasonable state of health with no gross pathology.
3. The prover should maintain a normal lifestyle and routine.
4. The prover must be willing to adhere to instructions given in the proving.

5. Consumption of tea/coffee, alcohol and smoking needs to be restricted as per the researcher's instructions.

**EXCLUSION CRITERIA:**

1. People who are taking medication.
2. Pregnant or breast-feeding mothers.
3. Person's on hormone replacement therapy or oral contraceptive pills for the last 6 months.
4. Persons who have undergone surgery in the past 3 months.
5. Person's on any recreational drugs

I eagerly await your response.

I F Khan  
5<sup>th</sup> Year Homoeopathy  
21143378

Contact Number: (031) 463 5205  
Cell phone Number: 081 3444 933  
Email: 786ifk@gmail.com

## **APPENDIX K: Quote for material**



DURBAN  
UNIVERSITY of  
TECHNOLOGY

P O Box 1334, DURBAN, 4000

## RESEARCH QUOTE

**DATE:** 13/06/2014

**NAME OF STUDENT:** Nalini Naidoo and Ismaeel Khan

Summary of medicines / consumables / equipment to be used from the Homoeopathy department for research purposes.

Item	Quantity	Unit price	Total
25ml Amber Glass Bottles	10	5-17	51-70
5ml Bottles	20	3-00	60-00
LACTOSE	30g	R10/100g	5-00
LACTOSE Powders	210	4-00	840-00
No. 10 vials	3	4-00	12-00
25ml GRANULES	2	25-00	50-00
TOTAL AMOUNT DUE			R1018-70

QUOTATION FOR THE ITEMS MUST BE OBTAINED FROM THE TECHNICIAN PRIOR TO SUBMITTING RESEARCH BUDGET.

GOODS WILL BE DISPENSED AND INVOICED ON BUDGET AND ETHICS APPROVAL

Ref: Research Quote

You are here : Catalogue Products >> Pharmacy & Health >> Dis-Chem >> Dis-Chem One Step Prenancy Test



## PREGNANCY TESTS

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DIS-CHEM ONE STEP PRENANCY TEST

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Discovery Miles 260

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## DIABETIC

DIS-CHEM LIFE STYLE

DIS-CHEM COMBI 9 + SG URINE TEST STRIPS

Item Code: 009863000EA

**R186.40**

OR PAY WITH

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Discovery Miles 1 864

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**Germiston**

In Stock

**Silver Lakes**

In Stock

**Strubens Valley**

In Stock

**APPENDIX L: Permission letter, homoeopathic clinic**



**Permission Letter:**

**TO:** Dr S Nienaber, Clinical Co-ordinator  
Homoeopathic Day Clinic  
Durban University of Technology

**DATE: 1 February 2015**

**Re: USAGE OF FACILITIES AT THE HOMOEOPATHIC DAY CLINIC**

Good Morning

Dear Dr S Nienaber

I, Ismaeel Firdaus Khan, seek permission from you, Dr S Nienaber, to use the clinic facilities for the duration of my research in 2015. My study will last for up to seven weeks, with one consultation, and one physical examination before and after the proving process. I will need to use a room for consultation, the dispensary to dispense the medication, and the reception area to recruit my participants.

My research topic is "A Homoeopathic drug proving of XXXXXX with a subsequent comparison to the doctrine of signatures". I will use 15 participants that will be selected according to the inclusion and exclusion criteria.

**INCLUSION CRITERIA:**

1. The prover can be between the ages of 18-75 years old.
2. The prover must be in a reasonable state of health with no gross pathology.
3. The prover should maintain a normal lifestyle and routine.
4. The prover must be willing to adhere to instructions given in the proving.



5. Consumption of tea/coffee, alcohol and smoking needs to be restricted as per the researcher's instructions.

**EXCLUSION CRITERIA:**

1. People who are taking medication.
2. Pregnant or breast-feeding mothers.
3. Person's on hormone replacement therapy or oral contraceptive pills for the last 6 months.
4. Persons who have undergone surgery in the past 3 months.
5. Person's on any recreational drugs

I eagerly await your response.

I F Khan  
5<sup>th</sup> Year Homoeopathy  
21143378

Contact Number: (031) 463 5205  
Cell phone Number: 081 3444 933  
Email: 786ifk@gmail.com

## **APPENDIX M: Post-Graduate Permission Letter**



### **Post-Graduate Permission Letter**

Dear Prof Moyo

I hope that you are well.

I am writing to seek permission for a Master's Student Ismaeel Firdaus Khan, Student Number 21143378 to conducted his study entitled "A homoeopathic drug proving of XXXXXXXX 30CH with a subsequent comparison to the doctrine of signatures".

There will be 15 participants selected according to the inclusion and exclusion criteria.

IREC has approved of this study and has urged that we seek your permission, as there is a possibility that some participants may be staff and students at DUT.

Supervisor: Dr. M Maharaj

#### **INCLUSION CRITERIA:**

1. The prover can be between the age of 18-75 years old.
2. The prover must be in a reasonable state of health with no gross pathology.
3. The prover should maintain a normal lifestyle and routine.
4. The prover must be willing to adhere to instructions given in the proving.
5. Consumption of tea/coffee, alcohol and smoking needs to be restricted as per the researcher's instructions.

#### **EXCLUSION CRITERIA:**

1. People who are taking medication.
2. Pregnant or breast-feeding mothers.
3. Person's on hormone replacement therapy or oral contraceptive pills for the last 6months.

4. Persons who have undergone surgery in the past 3 months.

5. Person's on any recreational drugs

I appreciate your time and this opportunity to motivate for this permission request.

I eagerly await your response.

**Mr I.F. Khan**

**5<sup>th</sup> Year Homoeopathy**

**21143378**

**Contact Number: (031) 463 5205**

**Cell phone Number: 081 3444 933**

**Email: 786ifk@gmail.com**

## **APPENDIX N: Editing certificate**

### **DR RICHARD STEELE**

BA, HDE, MTech(Hom)

**HOMEOPATH**

Registration No. A07309 HM

Practice No. 0807524

**Freelance academic editor**

Associate member: Professional Editors'

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031-201-6508/082-928-6208

Fax 031-201-4989

Postal: P.O. Box 30043, Mayville 4058

Email: rsteele@telkomsa.net

---

### **EDITING CERTIFICATE**

**Re: ISMAEEL FIRDAUS KHAN**

**For editing of Master's dissertation: A homoeopathic drug proving of  
*Carcharhinus leucas* 30CH with a subsequent comparison to the Doctrine  
of Signatures**

I confirm that I have edited this dissertation and the references for clarity, language and layout. I am a freelance editor specialising in proofreading and editing academic documents. My original tertiary degree which I obtained at the University of Cape Town was a B.A. with English as a major and I went on to complete an H.D.E. (P.G.) Sec. with English as my teaching subject. I obtained a distinction for my M.Tech. dissertation in the Department of Homeopathy at Technikon Natal in 1999 (now the Durban University of Technology). During my 13 years as a part-time lecturer in the Department of Homoeopathy at the Durban University of Technology I supervised numerous Master's degree dissertations.

Dr Richard Steele

**11 September 2017**

*electronic*