

EDITORIAL

Dear Readers,

As Dr Kent says

“Hahnemann made the Materia Medica and it is for us to examine it, as at that time for there was none to examine, we now have the instruments before us to examine, we have the proved remedies.

Hahnemann searched the literature of the day to find out what other effects of China had been discovered accidentally, and accepted such as were in harmony with what he had discovered.

We have already referred to the fact that Hahnemann was able, after proving china, to see that in its action it closely resembled the intermittent fevers that had existed through all time; that there was the most abundant relation of similitude between China and intermittent fever.”

As Dr E.A. Farrington emphasizes “When we come to speak of a drug, the effects of the drug on the system can be studied in three categories, increase, alteration and decrease.” Then he suggests take note of all the findings in reports, increase and decrease in elimination of urates, phosphates etc (we can also consider the changes a drug can bring or corrects like changes in blood reports like haemoglobin, platelet etc). These are facts and are invaluable. He also emphasizes to note the changes at the mental level.

When we study any drug we have to understand the drug in various aspects, the mental, physical and characteristics etc. now if we have the information that a particular sphere of action, it is always helpful to find the remedy and also adds to a reliable factor while prescribing. For example the action of ophidia remedies on blood, the action of calcarea on glands etc.

Clinical information of a drug is a very important aspect and this is one sector we all have to add data by gathering information from our cases and add value to the already existing information. It can be physical

characteristic, pathological findings, or characteristic findings. This is very close to evidence based practice. There are two reasons why I say that we have to add the peculiar findings in our clinical confirmations from practice. Firstly because homeopathy is an individualized system of medicine and if we only give pathological confirmations and do not add the peculiar features which we have found in those cases, the data will remain incomplete and misleading for anybody who wants to use it further. The second reason why I say so is the evidence based medicine recognizes to note all characteristic features or trends other than pathological findings what we see in practice for a given case or question is study and identifies that such trends are present and to be brought to notice. As stated in definition of Evidence based medicine it says “Evidence based practice is an approach to health care wherein professionals use the best evidence possible i.e. the most appropriate information to make the clinical decision of individual patients. Evidence based medicine values, enhances, and builds on clinical expertise, knowledge of disease mechanism, and pathophysiology. It involves complex and conscientious decision making based not only on available evidence but also on patient characteristic, situations and preferences. It recognizes that health care is individualized and ever changing and involves uncertainties and probabilities.

This issue has some beautiful collection of clinical confirmations from day to day practice with references quoted. Dr Bipin Jethani’s work is very interesting with references being cited from our base books.

We hope this collection of cases helps you gather information useful for your practice and guides you to a path of discovering newer ways of practice.

Dr Geeta Rani Arora
Editor



Unbolt yourself ...		
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