ROH Books Series VII

Dr. Sehgal's

REDISCOVERY OF HOMOEOPATHY

By : Dr. M. L. Sehgal

First Edition 1999

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Sehgal Brothers
Head Office:-
19-A, POCKET-A, MAYUR VIHAR,
PHASE - II, DELHI - 110 091. (INDIA).
Ph. # 2474751
Fax # 2473362.
E-mail - yogesh.sehgal@rmy.sprintrpg.ems.vsnl.
Branch Office:-
93 - A, Mandir Baldev Park,
Delhi - 110 051
Ph. # 2247598

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Ph. # 91 11 5725444Fax # 91 11 5766699

FOR U.K.(CONTACT)
MRS SANGEETA MEHRA
S4mehra@orangenet.co.uk

Rs 100-

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PREFACE

Revolutionized Homoeopathy is an Indian version of Homoeopathy as it blends and conforms the principles of ancient medical science of Vedic era *Ayurveda* and Homoeopathy because both are in agreement with the thought that a persons condition of health depends on the efficiency of two major systems in the body i.e. of assimilation and elimination.

Before I elaborate the matter further I shall like to place on record my sentiments that whereas I feel, elevated and fortunate to have been commanded by my Master to write a preface for his VII th **Series** of ROH books which are already very popular among the truth seekers there I also feel embarrassed like a tiny star asked to throw light on the moon.

I am very fortunate to have been allowed by His kindness, to be in his company and learn as much as I want to, but it is earnestly and humbly submitted to the profession that I have not been able to take full advantage of the easy access to Him, due to my over involvement in my official duties as Assistant Director of Homoeopathy in Government of Delhi and other domestic affairs.

I am associated with him and his school of thoughts for the last 13 years and putting his teachings into practice. I have undertaken various research projects to verify the efficacy of prescribing purely on the present mental states in the treatment of different skin and other diseases in Nehru Homoeopathic Medical College and Hospital run by Government of Delhi with the help a few juniors with unbiased mind. The records are being maintained meticulously which confirm the efficacy of this new concept in clear terms. Some of the results have already been presented/published in various seminars/Journals. I intend to publish the remaining results very shortly. I can say with certainty that whatever little I have learnt from him I am very much satisfied with the results.

The usage of principle of similia in the treatment of humanity has passed through various stage from the time of *Hippocrates* when it was being applied vaguely. *Dr. Hahnemann* and his followers developed it into a regular system and gave it a name called Homoeopathy, deduced from the method of drug proving on healthy human beings and realizing the need for their potentisation matching it with the idea of existence of a spirit like substance in the body i.e. *vital principle* which represent the man in total. Over the last 200 years various stalwarts to name a few like, *Drs. Kent, Boger, Allen, Lippe* contributed in the compilation of different Materia Medicas and Repertories. All of them emphasized the usefulness of mental symptoms for accurate prescribing but have left a lot for us to understand and practice it properly. Our Master Dr. M. L. Sehgal discovered and evolved a new direction and put the concept of

Dr. Hahnemann on a sounder, scientific and logical ground like a true disciple through his Revolutionized way of prescribing. In this serial, he has proved with the help of case reports that the principle of Classical Homoeopathy required a drastic change and culling of its prejudices which makes the selection of medicines uncertain. He has tried to remove to a great extent the stigma of trial and error from the face of this great system.

He has come to the conclusion that each one of us is born with a particular bent of mind say sensitivity which in other words represent our nature or habit, of which we are slave and remain under its influence without any remorse because we find no fault with our own conduct while the people around us have a strong objection on to it. The conflict lies in clash of interest whereas the person himself finds convenience in the way he conducts himself in daily routine, those in his close contact feel inconvenience in what he does.

Out of them who get circumstances enough to keep their mind cool and unprovoked remain safe which is very rare. In most of the cases they meet with adverse atmosphere and over the time develop unforeseen and unexpected maladies with modern dreaded nomenclatures. The reason is that this type of mental stress creates inefficiency in the ability of the system to extract from the normal diet, a person takes a matter of daily routine the desired elements to keep the body fit - the mechanism of assimilation. Naturally the overall malnutrition thus caused results in weakening the elementary process also which leaves in the body the undischarged portion of the unwanted matter which rotten and converts itself into a ready ground for various types of infections and live organisms to breed. The Revolutionized Homoeopathy discovers that prescribing with the help of mental states regulates these two systems and thus restores health. It gives an average Homoeopath a better way of understanding the present mental state comprising of present, predominant and persistent signals of the center finding expressions through speech and actions. For short of space I shall mention a simple case to support my conviction that a person aged 65 years with lobar pneumonia was admitted in my unit. After the failure of specifics like Bryonia and Phosphorus, patient got cured with Stramonium on the indication that he was crying for help in delirious state of mind (Delirium crying for help) who was an hour before telling the people around why you people are unnecessarily worrying about me. I am strong enough to fight with the devil without any support from outside. Although his facial expression they say was conveying a different story (Affection).

Guided by the new concept causes of Psoriasis could be cured with drugs like Belladonna, Bryonia and Ignatia with no recurrence, which are not even mentioned in our literature for the treatment of Psoriasis. Likewise there are many more examples wherein the technique has been put to test and has been found quiet effective.

With gratitude to the master Dr. M. L. Sehgal and humble submission to profession in general.

Dr. R. K. Manchanda, M. D. (Hom)
Assistant Director (Homoeopathy)
Govt. of Delhi

FOREWORD

I think R.H. which has gained so much of popularity all over the world does not require any recommendation from any one of us (The devotees).

The question arises how best to learn it. I have been of the strong conviction that it can be done only by taking to apprentice ship- sitting by the side of the teacher to know as to how he works. But looking to the life as it is I realize that it is not possible for every student to come over to Delhi. There should be some alternative for them. I think the serial in hand perhaps fulfills that need.

We need to be thankful to Dr. M.L. Sehgal for the pains he has taken to make the concept crystal clear by the help of case reports.

I understand that he will never come out with any literature unless he verifies the truth himself and is certain about it. Perhaps he has taken his own time for which he seems to be justified inspite of the pressure from all of us dreaming to have had this serial from him long before.

Here a word of caution will be necessary. To quote the author this serial is of Advanced level. The beginners will be well advised to study the earlier series first to avoid disappointment, otherwise it will be like learning from Z backwards to A, instead of taking the right direction from A towards Z.

Dr. H.L. Chitakara

INTRODUCTION

I can foresee the reaction to this much belated and most awaited ROH series VII. First and foremost is from those who are in line with us and want SOMETHING NEW- SOMETHING EXCITING. They will be contented if I talk of any other medicine then ? (Bell.)They feel they had enough of it. Agreed.

I think this will be like confining things to ourselves amounting to selfishness and forgetting the mission of the school of spreading the truth to a mass of physicians and practitioners of Homoeopathy and through them to reach the vast suffering humanity with speed to heal.

THIS SERIES (with well-selected Lesson bearing case reports) IS MEANT:-

1. To demonstrate practically both sides of the new concept (selection of medicine and as well as management of case)to make home what exactly we mean through Belladonna and not the mere study of Belladonna as a drug.
2. To equip you (our followers) with a most neglected but formidable weapon in Belladonna so that you should be able to convince our fellow professionals about the imaginary biases found in our literature regarding our medicines which hamper the selection of a really indicated medicine.
3. To put down and to weaken the skeptical voices who are perhaps scared of facing the truth and are blocking our way just to hide their own weakness.
4. To counter the misinformation being spread by the lobbyists about our concept being one sided-dangerous and undependable and thus discouraging the seekers (of knowledge) to attend our seminar.

The purpose of our MISSION will be served not just by keeping silent but by voicing the truth verified and tested at its top repeatedly and as loudly as we can in comparison to dissension with intent.

To be true if you will carefully compare the previous lectures on Belladonna they were mere explanations on Kentanian style. This is an advanced version of it - fully developed into a personality having head, body and limbs.

When one has to advance one's knowledge of any subject to a UNIVERSITY LEVEL he has to be in touch with the basics studied in primary middle and high school so as to bring to one's mind crystal clear vividity of it.

That is why a need to give a brief review of the history of Revolutionized Homoeopathy has been felt. It is also necessary to restate things in a different form to retain interest.

Part I (Theory) is meant to keep fresh in your memory the important features of the new concept.

Part II (Case Reports) carefully selected, each bearing a Lesson for the reader.

In the end, this has been the history of my writings on the subject that it flowed from my pen only when a situation was thrust on me to give a seminar or in other words to take a test. This work is also the product of a seminar held in June 1994.

In the scheme of things to come, I feel, I shall be able to come out before the end of this year, with the remaining remedies listed under the head "QUIET wants to be, repose and tranquillity desires - Con. N.V, Sul. to be followed by other series with headings like EXCITEMENT, ENNUI, entertainment amel. (Aur. Lil- t., M-I-F., Piper-M.) etc..

How to study combination of remedies like MIF, merc+iod. Their nature as individuals. **Merc. as Merc. and Iod. as Iod.** Both are opposite in nature. Their child (mixture) inherits qualities of both yet have a different identity.

Likewise we have arg-m. which is a saint by nature but when combined with nitric-acid. It converts itself to be a deceitful person. (arg.nit).

I have an endless list of remedies in my mind, like my experience with various Nosodes but for want of space I don't think I shall be able to list them here.

In the end I assure you of my belief that in your satisfaction lies my success. Your kind suggestions are invited

M L. Sehgal

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It presents the practical demonstration of the concept of Revolutionized Homoeopathy

This case proves that if we allow our mind to be influenced by the name of the diseases like TB, Cancer etc. you would not be able to select the really indicated medicine.

No medicine is small even if it is Belladonna because it is capable of curing any disease.

Case # 2 79

Lesson

This case present the general nature of Belladonna where the person himself is not bothered about his disease, others have to take initiative for his treatment.

Case # 3 82

Lesson

This is also a case presenting the General nature of Belladonna but slightly different - he is compelled to take the treatment because his disease creates difficulty for him while communicating with others which results misunderstanding.

Case # 4 84

Lesson

This case denotes that nobody would have thought and believed that Belladonna - in just one dose would clear the case of its dimension which involves many diseases

Case # 5 86

Lesson

This case proves that the Belladonna covers almost 40% of the cases all over the globe irrespective of Nationality.

Case # 6 90

Lesson

This is a typical case of "FEIGNING sick" where a patient annoys you to the extent that you have to keep him at a distance.

Case # 7 90

Lesson

It is for the reader to find out why this patient could not be cured by the any other method employed in homoeopathy inspite of the fact that the patient is a staunch supporter of homoeopathy.

Case # 8 103

Lesson

A patient is a patient. He is to be treated just as a common human being and not as a person holding a status in society. A Miraculous cure - A single dose cures within two-three weeks

Case # 9 107

Lesson

How to convince a patient who does not believe in your method and is not much conversant with homoeopathy, to discipline him to co-operate with you while managing his case.

Case # 10 111

Lesson

A patient is a patient, one should be guided by his present mental state and not the status that he holds in the society. That is why it will be very necessary to advise the patient to present himself in his original form.

Case # 11 115

Lesson

As such no case is acute. Every acute state has a chronic base. No intercurrent medicine is needed to control the so called acute state. The medicine covers both the states. In this case potency had to be changed after 5 months.

Case # 12 122

Lesson

This is also Belladonna in a different shade confirming the concept of Revolutionized Homoeopathy - A single dose in 30^{c} potency clears the case. (13.11.1992 to 21.02.1994)

Case # 13 130

Lesson

This case also shows the benefit of prescribing according to the tenets of Revolutionized Homoeopathy which is free from imaginary biases through the rubric "FEIGNING sick".

Case # 14 134

Lesson

This case is an example of - How to take the mental state of an infant/child? The question which is generally asked by our students, followers and opponents.

Case # 15 138

Lesson

In spite of the warning by Dr. Kent that - All medicines including Nosodes should be prescribed only when the symptoms agree it has been seen that most of our homoeopaths use Tuberculinum merely on the basis that their patient has in inheritance phathisis.

Case # 16 143

Lesson

This case proves the power of Belladonna. A single dose lasting for three years.

This is the benefit of prescribing without any consideration of imaginary biases like - MIASMA, grades of medicine - whether they are deep of short-acting.

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REDISCOVERY OF HOMOEOPATHY
SERIES VII

1. A BRIEF REVIEW OF, HISTORY OF REVOLUTIONIZED HOMOEOPATHY.

How I Discovered this idea?

It is the history of many discoveries that they are incidental. No one doubts that *'necessity is the mother'* of invention and it compels man to search out ways and means to overcome its needs. The same is the case with Revolutionized Homoeopathy.

I had certain difficult cases in hand which were progressing very well but time and again Malaria used to creep in, for the treatment of which I consulted various eminent homoeopaths as well as every type of the homoeopathic literature but available on the subject without any success. As Malaria is a dreaded disease it is very difficult to persuade a person to wait longer for the action of the medicine. My mind did not accept that the homoeopathic medicine which is known for doing miracles couldn't cover malaria. It compelled me to conclude that the cures attributed to the system are perhaps lucky hits and not the result of any skill or law in prescribing. The word which is at the lips of even a common man that if and when homoeopathic medicine works it does wonder. This means that it does not work in every case. And there is another feeling that homoeopathy is a hit and trial method. What could be the right method, this question captured my mind. Incidentally a friend came to know about my practice and he approached me to treat him and some other members of his family who were suffering from Malaria. Taking the clue from Dr. Kent's teaching I decided to keeping these cases at my house and accordingly persuaded my friend that it will be necessary to

keep a watch on the cases round the clock. His son about 10 years of age was given precedence over the others as the frequency of fever in his case was on alarming increase. This case was typically different from the known symptomatology of Malaria fever. There was no shivering stage, no bone breaking or perspiration etc. , the usual course that malaria fever takes. The boy had only one symptom, that of stupor when the fever crossed 105 F. The fever would go as high as 107F . In Kent's repertory, in the generalities section, there is a rubric "PAINLESSNESS, of complaints". "Hell. Stram., Op. " are enlisted under it. None of them worked. Being a staunch follower of Dr. Kent, strictly adhering to the master's instructions, I used to look for at least one reliable mental symptom, to be certain about the remedy before prescribing. This habit led me to search out the mental state of the patient. It was quiet unusual to find the boy of 10, to remain with me (away from his home and family) without any complaint. Whenever questioned as to how he felt he would reply, "alright" . "But you are suffering from fever do you think about it," he would say, "No". The fever used to come on alternate days. It was noticed that even on the day of recess (of fever) he used to remain in bed. At the most he would like to enjoy songs but he would not take interest in anything else, demand anything and create any problem for anyone around him or for himself. Three rubrics came to my mind :-

1. BED, remain in desire to.
2. INDIFFERENCE, complain, does not.
3. WELL, says he is, when very sick.

"Hyos" appeared as common to the three rubrics and this did wonder. The fever returned thrice thereafter touching a maximum of 105 F in the first instance and 103 F in the second

round and finally it became normal. For the last many years the family was getting distressed as the recurrence of the fever was on the increase. Earlier it used to be once a year, thereafter twice a year and now it was four times i.e. after every three months. Impressed by the success in his son's case the father also offered himself to be treated for his Malaria fever. His symptoms were, during the fever 'now covers now uncovers'. Earlier to this, these for me, used to be typical symptoms of Nux-vom. during fever. Those days I used to generalize physical symptoms in this way. The actual rubric in the repertory is INEFFECTUAL, desire for stools, but it used to work if interpreted in a generalized way, e.g. INEFFECTUAL, desire for menstruation", "urination", "vomiting" and "blowing the nose". I gave the father Nux. v. 30 but it didn't work. The frightening suffering of the fever remained the same. The patient got discouraged and showed his inability to continue my treatment any more. He said, "sorry Sir, it is impossible for me to co-operate with you", and the same evening he decided to leave for his home town about 100 km. from Delhi. It was a very embarrassing situation for me . How to convince the patient to be co-operative. I thought of extending the courtesy of seeing him of at his home, as a pretext to accompany him . Since he was a friend I had no hesitation to impose myself upon him i.e. to accompany him to his place. Next morning it was the recess day of the fever. I took his symptoms and he said, "I have decided to take leave from my office and take rest for a few days and remain in bed because I am finding myself too weak and I will take allopathic treatment". Two symptoms came to my mind :-

1. BED, remain in desire to
2. DELUSIONS, poor he is

Pscrinum was common to both which was given to him in 200 potency, after much persuasion on the plea that let it be a last

chance for me to treat him. It did wonder, the next day the fever came but without much agony and surprisingly without affecting the appetite and bowels. These used to be disturbed very badly, under the impact of fever. The taste in the mouth etc. also remained quite normal. Gradually after another two milder attacks, the person was out of the grip of the fever. He started bringing to me other cases of his family and relatives who were also treated in the same manner, with results beyond expectations.

This led me to believe and conclude that as if a master key had fallen into my hands and since then I have felt no need to look back . An effort towards refinement of R.H. started and you have now the seventh series in your hands. It is still on its journey towards perfection which is an endless process. Similarly as in Classical Homoeoapthy things started from a crude idea and it journeyed to its refinement and as a result, we have six volumes of Organon of Medicine. Had Hahnemann remained alive it is possible he would have written many more volumes.

2. WHAT IS REVOLUTIONIZED HOMOEOPATHY?

(a) What is the change ?

Simply a change of emphasis a minor variation. Classical Homeopaths also agree that if we can have dependable mental symptoms we can ignore the physicals. **According to them the mental symptoms are not to be found in every patient. It is from here that R. H. differs with them in concept**. It observes that no individual at any given time, is without any mental state. If a person requires medicine , that is if he is sick , it is not necessary that he must be angry or weeping or anxious . He may be a normally behaving person covered by the rubrics like 'CHEERFULNESS', 'ECSTASY',

'EXHILARATION' etc. Here I will quote the case of a religious head settled in London where he runs a big Ashram. He was suffering from Allergic Asthma. My brother wrote to me that he is a devotee of the Ashram and wants his priest to be treated by me, because the priest finds a lot of difficulty in his meditation and in conducting Havana (a ritual in Hindu religion performed around the fire through offerings consisting of butter, oil, grains and perfumes, to the various Gods and Goddesses). I told my brother, "Let your *Swamiji* write to me a letter in his own hand in a simple way and, contact me on phone after a few days for a few minutes. *Swamiji* wrote his case history giving all symptoms of allergic asthma . He wrote , 'Although I am quite indifferent towards feelings of love or hate, because I have renounced everything in this world, still I feel a little uneasy when I find obstruction in the performance of my religious duties." On phone I asked him only one question "Do the obstructions cause any effect on your mental state and force you to abandon midway the functioning of your normal routine work, rituals, prayers etc." He said, "No I accept it as a reality, which perhaps I have to live with, and I don't' allow anything to overpower me in the performance of the religious rites. "On the following rubrics:-

1. RECOGNIZES, everything, but cannot move
2. INDIFFERENT, lies with eyes closed

Cocculus. Ind. 30, was prescribed in three small doses, to be taken after every 15 minutes

It is now about a decade that there is no further attack of Asthma. The priest was so grateful that he propagated his recovery amongst his followers spread all over the city of London. They put pressure on my brother to call me to U. K. What I want to emphasize through this example is that it is the present mental state, in whatever form and style it may

be, that is important and need be given attention to. I shall go into the details of the way I interpret rubric in the pages to follow.

(b) How to select a remedy ?

Since the mind is a vast field, for the purpose of selecting a remedy we must select from the present mental state, Persistent and Predominant symptoms, which I call signals.

(c) What is the meaning of p.p.p.?

What persists is that which is trying to settle permanently, what predominates is that which is the uppermost and all powerful covers the whole show. In other words it does not allow other symptoms to raise their heads. In the case of *Swamiji*, at times there may have been many thoughts in his mind about his sickness yet one final thought, of identifying and accepting the reality, was predominant. And let me tell you here that this phenomenon has a scientific background. It is the powerful that prevails. In the criteria of so - called infections, if a person is already suffering from a powerful infection no infection weaker than it, like seasonal fever etc. can have any affect on him. If he is suffering from a disease which is less powerful than the invading infection, the former will get subdued and the latter will predominate and will be required to be treated first. When the system is cleared of the powerful infection the lower will present itself and demand treatment.

(d) Case taking and implementing triple P (P. P. P.)

For selecting a remedy, treat a patient as a computer in human frame, that emits signals in the form of speech and actions, which when combined, form expressions. Convert these expressions into the language of rubrics as listed, in the repertory, in the Mind section. In other words it is decoding or deciphering the signals of mind in a "mechanical" way. It is as if the data has been pre-fed by whatever order or disorder that is going on in the body and the

computer is throwing this data on the surface. Why I call it mechanical is to guard you against becoming emotional at the time of case - taking. It may be that the patient is abusing or misbehaving with you in the worst manner. You have to remain detached. Your relation is exactly like that between a meter and a meter - reader. The job of the meter - reader is to concentrate, and try his best to read the meter accurately. As for example let us take the case of the father, of the boy earlier mentioned who refused to co-operate. Ordinarily you might have heard homoeopaths complaining about their patients "How can I help him if he does not co-operate ?" And here lies the fault with the homoeopath himself, because the act of non co-operation on the part of the patient is his present mental state which requires to be taken into account for prescribing. To be true to ones job.

(e) When not to prescribe

I am of the opinion that before the doctor examines a patient he should check whether he himself is fit to do the job well. As In judicial norms it is well known that a judge should sit for judgment only when he is in a normal mood, i. e. only when his presence of mind is intact. In the same way a doctor should be in a normal frame of mind when he prescribes medicine. We have many rubrics like, "GROPING, as if in the dark", "CAPRICIOUSNESS", "Confusion", "CALCULATING inability for" etc. If the physician is himself under the influence of any of these mind rubrics, he should not expect himself to be in a position to select the right remedy. The right course for him in such a situation will depend upon the type of patient in front of him. If you feel that the patient is co-operative, you can tell him the truth that your mind is not properly working at the moment, requesting him to come on the next day or at any other suitable time. Your image will go up in his eyes. He will feel reassured that he is in

proper hands. The second course is to send the patient back with placebo i.e. blank pills, with the instructions to report on the next day so that you have the time to study his case with a clear and stable mind. The third option is in the case of the patient, who is in a more serious condition. If the patient really cannot wait you can request him to consult someone else. These three norms will never let you down in your practice. So while you have to be mechanical in your approach you also have to use your intelligence to understand the symptoms of the patient accurately. To conclude, the main criteria is to arrive at the indicated remedy with the help of the tenets of present, predominating and persisting symptoms without any bias or prejudice; that is without considering its grade as given in the repertory; without keeping in mind whether the remedy is "short" or "deep acting" and without looking at it whether it covers any miasma.

(f) Requirement of successful prescribing

What is required for successful prescribing? Before answering this question let us recall, what is the job involved in it ? The job is to convert the expressions of the patient into the rubrics of the mind and this can be done only if we have proper knowledge of the rubrics. The question remains "How to know the rubrics?" **The first thing** that is needed is to know the exact dictionary meaning of each word of a rubric with its position in grammar- whether it is a noun , adjective, adverb etc. So as to grasp the precise sense of every word and the rubric as a whole. **The second thing** is to know every rubric and to keep it in your memory. **The third** and the most important thing is the expansion of its meaning by drawing broader interpretation and inferences needed to capture the very soul of the rubric[1]. Here the point to be kept in mind is that the conversion

[1] *Ref. ROH series I also*

of the **expression into rubrics** should not be mechanical but mathematical. In mathematics we have exact equations e.g . 1+9=10, 2+8 is also equal to ten. Likewise we can have various other equations of ten. Similarly we have rubrics like "Fear" "Anxiety" and "Anguish". We need to know precisely the difference between the very sense conveyed by them. Fear, is a sort of discomfort aroused by an impending pain, danger or evil, which is specific in nature. A person knows and can identify the object of his fear. He says that he fears a dog, or a lion, or a certain person or a specific thing. "Anxiety" is also a discomfort aroused by an impending pain, danger or evil. But it is not certain or specific as in the case of fear. Something is causing discomfort because the patient does not know what is in store for him . For example a patient says, "God knows when my disease will go. When will it leave me?" Another example - Whenever my husband goes out I remain uncomfortable till he comes back, as many types of forebodings come to my mind". And "anguish" is about a discomfort which one is experiencing at the present moment. For example a mother says, "Nothing pains me much in this world as the feeling that my son, the product of my own womb, has betrayed me".

(g) What is expected of a medicine

(a) What is the meaning of first and second action?

(b) How to verify that your selection of medicine is correct?

In my experience, if the selection of medicine is correct, it must react in two ways. They are the first and the second actions of the medicine. The "first action" means immediate or rather instant relief in the physical as well as mental agonies. The "second action" is the reversal of the original complaints. The relief under the "first action" may last for only a few seconds, minutes, hours or days and it is sometimes here that we are required to be

vigilant, because it is the "first action" that gives the indication that the remedy is right. And if this gets missed from our observation and when the patient comes to us , he happens to be under the influence of "second action", you will get mislead and change the medicine or raise its potency etc. and the case will take a wrong road from the very beginning.

The "Second action" is quite opposite to the first, because the ailments on which the medicine was prescribed, come back. Here you have to apply your mind whether the return of the complaints is due to the advance of the disease or the curative action of the medicine - as part of the total curative process. To verify this first of all you have to make sure as to what happened to the symptoms of mind on which the medicine was prescribed. For example, earlier to the commencement of the treatment your patient had in his psyche one of the rubrics IRRITABILITY, pain during. You have to investigate whether there is any change in his present state of mind. Usually the patient reports when he is under the second action and says there is no relief. Don't take him on his words. You have to remind him, "the last time when you came to me you were weeping and annoyed". Today you don't seem to be so. Likewise while on your previous visit you were not walking as easily as on your present.

This is how we have to educate ourselves as well as the patient about the progress of the case.

(h) The discipline followed by the second action

(i) ITS DURATION

The second action follows a fixed discipline.

It lasts over a fixed period of an odd number of days - like 1,3,5, and so on. The middle day is the peak day. It gradually starts, reaches the peak and thereafter declines. It is mostly on the day of the

peak that you will receive phone-calls or call-bells on your door from your patients. You simply have to ask the patient when the reversal of his complaints had started. Since, in most of the cases, the return of ailments lasts for five days, the patient replies "Sir , it is the third day today". You simply have to tell him to wait for a few hours and thereafter the pain will start declining. In most of the cases the patients co-operate and when the next morning they find the things happening the way they were told, their faith in you gets deeper. But in certain other cases the patient does not agree and insists that he should be given a medicine. Such a patient is to be tackled with placebo. In such cases what I generally do is that I keep ready certain packets of placebo with cross marks - i.e. of single (x), double(xx) and triple (xxx) etc. and give it to the patient, telling him - "to keep them in reserve, before taking any of them wait as long as you can. Take only if you feel you can bear the agony no more. Preferably it is better if you avoid taking the EXTRA DOSES because it may obstruct the process of your cure". This is just a scare to manage the patient psychologically.

(ii) DISCHARGES of the TOXIC MATTER

The other thing that is expected from the process of "second action" is the discharges that may take place from the five natural outlets - nose mouth Anus, urethra and skin. This means, if the deposits of the toxins are in the head, the nose is its natural outlet. If they are in the liver or in the respiratory system or stomach their exit is mouth; and if the toxins are in the intestines they have to discharge through anus and if they are in the urinary tract they find an outlet through penis and if under the skin they come up in the form of some sort of skin eruptions.

(iii) FUNCTIONING of the

At this point let me state that these

CURATIVE PROCESS

phases are the signals of the curative process. Each phase will be lesser in intensity, duration and frequency, than the previous one and they keep recurring till the body is finally cured. This process may last for some weeks, months or years. It is to be kept in mind that the "first action" is the permanent and the second is the temporary. The "first action" is the feeling of well-being, it is permanent, and the "second action", which is the feeling of return of agony is temporary. This is exactly opposite to the action of the medicine prescribed on the basis of tenets of Classical Homoeopathy. There the first action is aggravation i.e. painful, and is called "temporary" which is expected to be followed by relief, the "permanent action". *In R. H. it is relief first (hope), and then the aggravation. Since the intensity duration and frequency of the second and temporary action is on the decline, day by day the "first action" (relief) is gradually eliminating the "second" leading toward the ultimate goal of health / complete cure* [2]

(iv) SIGN of PERFECT HEALTH

As a rule in health these discharges should take place periodically or over a period of time with the same discipline (as stated above) i.e. in phases of odd No. of days without any physiological and anatomically alteration and with a general feeling of well being. In natural health the body is expected to keep itself in perfect order by following the rules as stated above.

(i) What does this change of norms brings to us ?

What catches one's eye (the attention) is the relationship between the PPP which

[2] *Ref. ROH series*

reflects the mental attitude of a person and the process of eliminations, which is purely a physical activity. What is this correspondence? First answer to a lay man will be that the self-healing process which somehow for some reasons gets deviated is put back on the rails with the help of Revolutionized prescription - as after this the body starts healing itself, there ends the job of the medicine. To put it in other words that after a few seconds or minutes of the administration of the medicine selected according to R. H. the distance between the ill - health and health comes to end because after that the job of the medicine ends and the mechanism of self - healing takes over. To a lay man, when he asks for the cause of his ailment, I simply reply that your self - healing process is derailed and I shall be putting it back on its track through the medicine and without further questioning about the cause of his suffering he gets satisfied.

The second and more appropriate answer will be that there is some physiology relationship between PPP and the eliminations. It is assumed that it is the cumulative action of a group of nerves belonging to central nervous system at a point of time which are linked with the eliminating process and that is why the automation comes into action.

Further one needs to understand the meaning of the general efficiency - being regained (after the 1st action) side by side with the elimination (i.e. after the 2nd action) - without the help of any sort of Vitamins. We infer that under the 1st action the body as a whole starts meetings it deficiencies with perfection from the normal daily intake as a result the eliminations also take place with utmost efficiency which seems to be the secret behind the restoration of the normalcy in the body. Hence a conclusion that there will be no disease if both the processes of assimilation and elimination, remain in perfect order.

By this finding we feel proud that we have placed Homoeopathy on the top of the so - called medical sciences. Because Homoeopathy is based on natural laws and others are on data.

(j) How to assess the overall progress

Here it is very important to note that while prescribing, our parameter is different. We simply read the dial (mental state) which indicates the medicine. but while assessing the progress of healing we have to consider the anatomy, physiology, pathology and the latest uppermost mental state. That is why sometimes diagnostic investigations, especially relating to the vital organs which we cannot see with our eyes e. g. diseases belonging to lungs, liver, kidneys, heart - etc., will require such data to properly assess the action of the medicine. Sometimes it has been seen that in spite of the best overall progress, the particular diseased organ shows no improvement. For example there was a case of twitching of eyelids. The lady regained overall efficiency, her sleep became normal, her appetite and routine eliminations became regular including eliminatory system but the problem for which she came remained the same for a long time. it means that the medicine was acting partially and not covering the whole.

(k) Wait and watch

How long should one wait and watch ; whether to change the medicine or the potency? Before answering this question I will say that you should ask yourself why you want to wait and why you don't want to wait. You must have proper reasons for that. What is to be taken into consideration is the totality, in the sense whether the man, in total, is coming out of the woods. Sometimes the medicine provides partial benefit but does not push the case forward and is given undue weight to wait more than is needed. You may have to change the medicine sometimes many times a day, till

the case stabilizes creating a condition for requiring no change for a long time.

(I) Need to Identify the drugs

There was a question : "If you say that practice according to R. H. is Present, Predominant and Persistent, symptoms (mental state) then why do you talk of drug pictures as advocated according to Classical Homoeopathy ?" The first answer to this is that R.H. is not simply to oppose any method but that it changes the emphasis where needed . We need to identify drugs as individuals, especially in those cases where P. P. P. has many drugs. For example, the rubric, "LIGHT, desire for" has many drugs and unless we know their distinguishing features it will be difficult to identify the real - indicated medicine. Obviously it makes the selection quick, easy and sure.

In actual practice we have three ways of selecting a *Revolutionized Homoeopathic* remedy.

Translating PPP expressions of patient into the rubrics of mind.

Comparative to other remedies being a sharer of a common meaning conveyed by the single rubric, as stated above.

As an individual independent of any connection with other drugs keeping in view his established and unchangeable disposition.

3. Why we press "Study Belladonna First and the other remedies later"?

Whoever comes to us for training we like to tell him to learn Belladonna first and all other drugs later. Why? Because it is my experience that Belladonna is found to be indicated in more than 40 % of cases all over the globe. For example on my first visit to London I had an opportunity to see 40 cases,

out of them 23 belonged to Belladonna. Likewise in the consulting room of one of the most eminent Homoeopaths in London, I examined 4 cases and out of these 3 belonged to Belladonna. secondly it is to demonstrate practically that while selecting a medicine if we shed prejudices against the medicines (a) whether a medicine belongs to any grade as enlisted in the repertory, (b) to any miasma or (c) whether it is a long or short acting we will have different and amazing results. I hope if we remove these labels from our medicines, our field of effectiveness will widen and the overall productivity increased. But since prejudices die with great effort I feel the need to repeat , with a louder voice again and again about my findings that a medicine like 'Bell' which in classical literature lies condemned as a remedy which lasts only for 24 hr. has been found indicated and curative in the majority of cases and thus nullifying the validity of the above bias. Its action lasts for more than a year and has been found effective even in Cases of Cancer and other such diseases which are indiscriminately looked at as having a miasmic background and requiring a first grade deep acting remedy.

It will be interesting for you to know that our experience with P. P. P. (which protagonates the principle of indicated medicine without prejudice), not only gives good results but also kills two birds with one stone i.e. acute as well as Chronic simultaneously without the need to administer any intercurrent or a separate medicine for the acute condition.

4. THE STUDY OF BELLADONNA-AS AN INDIVIDUAL

Its identity :-

Each one of us as individual invites some remarks pointing out those of ones actions which one does unknowingly - as a matter of routine being part of his habit which he loves but are not plausible to others. For example

there are rubrics COQUETTISH, too much and COQUETTISH, not enough. A woman accompanying two patients, who are her daughters comments, "the elder one is very modern, moves in high society and enjoys the company of opposite sex without feeling of any obligation for marriage or guilt or shame, but sometimes she crosses limits of decorum which is not good" COQUETTISH, too much.

And continues, "The younger one is just the opposite". That too is not good (COQUETTISH, not enough) as with the people it is treated as a disqualification. So in straight words the mother has conveyed about the general habits of her daughters as individuals. The real meaning of the term "Habit" will be explained at an appropriate place in the coming lines.

Belladonna also has a habit - that of "Hides, things" which is covered by the rubric HIDES, things being its mark of identification. To this mark of identification I give an operational name calling it King - pin symptom. This means that the whole picture of Belladonna revolves around this single rubric, which finds an outlet through speech and action called expression.

5. THIS STUDY OF BELLADONNA, IS DIFFERENT FROM IT'S EARLIER EXPOSITIONS IN ROH SERIES (V)

Here it will not be out of place to mention that we have already studied bell from limited angle (ROH series IA & V) . We will study it in this series in a broader sense looking at it through working of the higher level of consciousness (The innermost in man) which manifests itself through dispositions and tendencies having motives getting expressed through spontaneous flow of mind in the form of speech and action, what your patient says and what he does, while you are taking the case. What one needs to go into is to know the motives, the reasons behind these

tendencies. As in case of Belladonna the disposition is to hide things, we need to know why, how and to what extent he does that and how the medicine prescribed on the basis of it (innermost) plays all the **vital roles** of :

i). PREVENTION

Of EXTERNAL ENEMIES, (the disease)

By fortifying DEFENSES through the process of assimilation, being the first action of the medicine.

ii).MAINTENANCE

That is STABILIZATION of internal administration by repair and replacement of cells with utmost efficiency through excretion, being the second action of the medicine.

iii). GENERATION (GROWTH)

That is further development.

By regulating the two Major systems of ASSIMILATION & ELIMINATION to their optimum which follows fixed laws.*(Ref. ROH Series I)*

Its general expectancy - age wise should be:-

1. Infancy to adulthood *Higher and quick*
2. Adulthood to old age *Medium and slow*
3. Old age Minimum & slowest varying from individual to individual

The above rule may not be true in every case and should not be taken as a standard, the real standard is individualization.

6. Study of belladonna in two parts I & II

Part I : Theory

Part II : (INDEX) of the contents of the practical part of R.H.(Selection & Management) through case reports belonging to Belladonna.

Part I : Theory

Provides holistic view of Belladonna through repertory of about 75 Rubrics carefully selected (with their meanings fully explained and expanded) which support the main disposition (king-pin) of the drug.

Through the following format, which indicates how like a tree from a single seed (cell), the rubric a character grows and as the cells multiply to form different organs of the body, the rubrics are taking the shape of groups which convey a collective sense to contribute to build a character as a whole and not lopsided. It is to be understood that to identify a rubric as a king pin (central disturbance or core) is not be confused with, PPP as certain other writers seems to have done. A king pin symptom must have the support of all the other rubrics produced by the drug on provers as a proof of its being true core point. They should be playing the role of subordinate or supportive rubrics in one or the other form to high light the fact that they are only supporter and the one in focus is the real king pin the sign of identification of the drug around which its whole picture revolves.

We will see in the study of Belladonna that how the whole conduct of drug is built around one rubric i.e. HIDES, things.

Q) What bell does?

Ans.) Hides, things (Consciously or unconsciously as a matter of habit, tendency or disposition)

Q)Why it needs to Hide or What it Hide? What is the

Ans.) Because of the needs conveyed by this group of rubrics :

background?

1. QUIET, wants to be ,repose & tranquillity desires
2. REST, desire for
3. CARRIED, desires to be
4. POMPOUS , important
5. BENEVOLENCE
6. MAGNETIZED, desire to be fast, mesmerism amel.
7. LIGHT, desires for
8. DECENT, mannerful.*S
9. NON-VULGARITY *S
10. SELF-RESPECTING
11. SHYNESS / TIMIDITY bashful
12. FEAR, paralysis of
13. ATTENTION, desires *(s*)*

Q) How it Hides (the instrument of hiding it employs)

Ans.) By employing the sense conveyed by this group of rubrics :

1. UNCONSCIOUSNESS, interrupted by screaming
2. NOISE, inclined to make
3. FEIGNING, sick (Attention desire)
4. QUARRELSOME, anger without
5. LIGHT, desire for
6. CARRIED, desire to be fast
7. LAUGHING, speaking when
8. TIMIDITY, bashful

Q) How much it Hides (The force confining bell. to a limit)

Ans.) This group of rubrics checks and balances the conduct of Bell. :

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*S *Marked rubrics are added by Dr. Sehgal*

(Checks and Balances)

1. HIDES, things
2. NAKED, wants to be
3. SENSITIVE, light to
4. POMPOUS, important
5. LIGHT, desire for
6. DELUSIONS, demand, limited is, to a little attention *(s*)*
7. FEAR, dark of
8. RAGE, medicine from forcible administration of
9. MOOD, repulsive
10. DEFIANT
11. CALCULATING, inability to

Q) What is the General nature (habit) or the basic Nature of Belladonna

Ans.) He himself is not bothered about the treatment. This group of rubrics represent the basic nature of Bell. that to take treatment others have to persuade him. He himself is not worried about it.

1st stage

1. DELUSIONS, poor thinks he is (kent)
2. DELUSIONS, floating in air
3. DELUSIONS, wealth imagination of
4. FRIVOLOUS
5. UNRELIABLE, promises in his
6. LIGHT, desire for
7. DELUSIONS, sensations, misrepresents his
8. DELUSIONS, now well now sick *S
9. PLAY, passion for gambling
10. DELUSIONS, passion for gambling for money making

Q.) When he deviates from

Ans.) When something seems to be taking away his tranquillity. Following groups

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*S *Marked rubrics are added by Dr. Sehgal*

his general nature?

of the rubrics represent how gradually he passes on to the next stage of abnormality which is moving from milder to harder in stages.

1. DELUSIONS, floating in air

2nd stage

2. DELUSIONS, floating in air, bed, swimming in
3. DELUSIONS, flying sensation of

3rd Stage

1. DELUSIONS, business ordinary they are pursuing
2. DELUSIONS, engaged ordinary occupation in

4th Stage

1. DELUSIONS, possessed being
2. DELUSIONS, sick imagines himself (kent)

5th Stage

1. BOASTER
2. EXUBERANCE
3. DELUSIONS, surrounded by friends is
4. DELUSIONS, foolish

6th Stage

1. CREDULOUS
2. NAIVE
3. BENEVOLENCE

7th Stage

1. COMPANY, averse to friends of intimate
2. ANXIETY, Company in when
3. COQUETTISH, not enough
4. COQUETTISH, too much
5. PLEASURE, lascivious ideas only in
6. DECEITFUL

7. DECEITFUL, fraudulent
8. JEALOUSY, saying and making what he would not say and make

8th Stage

1. WEEPING, refused when anything
2. WEEPING, remonstrated, when
3. ANGUISH, weeping with

9th Stage

1. FRIGHTENED, easily
2. DELIRIUM, terror expressive of
3. DELIRIUM, fear of men, with
4. ESCAPE, attempts to
5. HIDE, desire to, fear on account of
6. SUICIDAL, pains from
7. FEAR, dark of

10th Stage

1. ANGER, mistake about his
2. ANGER, himself with

11th Stage

1. SITS, and breaks pins
2. BREAK things, desire to
3. DESTRUCTIVENESS

12th Stage

1. MANIA, spit and bite at those around him would
2. MANIA, scratching himself
3. RAGE, medicine from forcible administration of
4. NOISE inclined to make
5. RAGE, knows his relatives does not
6. REFUSES, treatment every
7. ADMONITION agg.

7. Part II : (Introduction of Belladonna in Two Parts)

Demonstrates the practical side of the concept of Revolutionized Homoeopathy with the help of Belladonna case reports with an equal stress on the management and follow up of the cases i.e. the demonstration of theory through practice. So it is towards R. H. via Belladonna.

Detailed study of different groups of rubrics formulating the personality of Belladonna in theory.

The 1st. question is what Belladonna does (as a matter of habit)?

The answer is it, 'Hides things'.

How shall we study the rubric HIDES things?

To start with we shall try to know precisely the dictionary meaning of the rubric, by splitting it into separate parts word by word. It has two words (**Hide** and **Things**) 'Hides, which means, prevents from being seen, or conceals from sight, or obstructs the view.[3]

In a more broader way we can say covers up or puts lid on. The other word is 'things' which means objects without life (ones material possessions) and also facts, deeds affairs, intentions etc. This word has another sense, also that he hides particular things and not everything and always but on isolated occasions when he finds essential. He does this with complete seriousness but in a joking mood or with hesitation and shyness.

(a) Reasons, what and why bell hides?

The answer to the question who needs to hide anything will be the one who has something to conceal in the form of some material possession or save situation in the

[3] *For details please Ref. to ROH series IV page no. 5*

interest of overall peace. Through the following group of rubrics, we will learn this in detail:-

1. QUIET, wants to be, repose and tranquillity desires
2. REST, desires for
3. CARRIED, desires to be
4. POMPOUS , important
5. BENEVOLENCE
6. MAGNETIZED, desire to be fast, mesmerism amel.
7. LIGHT, desires for
8. DECENT, mannerful *s
9. NON-VULGARITY *s
10. SELF-RESPECTING
11. SHYNESS/ TIMIDITY bashful
12. FEAR, paralysis of
13. ATTENTION, desires *s

As matter of priority his main concern is tranquillity. To support this conviction we have a rubric "QUIET, wants to be, repose and tranquillity desires". Let us study it in full details. To do that we have to split this rubric into words and know its meaning and the sense it conveys. The first word *'Quiet'* means (not in the literal sense where it means to be silent) assuming a state of stillness, or motionlessness or to stop things as they are and where they are (as is, where is) or to halt things, as we apply breaks on a vehicle to stop it. In more refined words we can call It suspension of all activity or the state of complete quietude.

*s *Marked rubrics are added by Dr. Sehgal* *

The next phrase is "wants to be". *'Wants'* means feeling of necessity something from within which is impelling him to think of making efforts to achieve it.

The next part of the rubric is "Repose and tranquillity desires". *'Repose'* means,to relax through any means i.e. by going to sleep or lying down by diverting one's attention towards something that is pleasant.

The word REPOSE gives rise to a question, "What is the need of sleep and this diversion towards what is pleasant"? The investigations reveal that the man loses something in the form of general efficiency or he is finding himself unable to continue with his present activity unless he cuts off and relaxes, or to put it more precisely he feels like a dynamo which has gone down in its effectiveness to such an extent that unless he gets recharged he will not be able to perform effectively, or efficiently any more. So it is to recoup what he has lost in terms of energy, to become fit to be effective again that he wants repose.

But how long will the repose lost, what is the ultimate goal? As long as the TRANQUILLITY is not achieved. *TRANQUILLITY* means that state of feeling of normality which can bear the burden of the condition of work, which he left, and has to rejoin ultimately.

The sense conveyed by the rubric as a whole is that, the main aim in the mind of the person is to achieve tranquillity which can lost as long as possible before it is re- discharged. To reach this goal he must suspend all his present activity and then through repose move towards tranquillity. But the goal of achieving tranquillity is two fold.

(1) Either to feel normal and be able to resume the usual routine job or *(2)* to preserve tranquillity, and the peace of mind that is already achieved and in hand. If everything is going on well he will like that, that condition is

maintained and that nothing influences it. So to achieve both the states he may need to hide.

In the case of *no. 1*, he will not directly say that he has lost efficiency and therefore wants rest.

HIDES things

He will say, "I am in a mood to be on holiday for sometime or have some business at home and will therefore absent himself from his job".

HIDES things

Why he is not coming out directly? It is to save the remarks against him that he is very delicate person or he is shirking from his duty.

HIDES things

In the case of *no. 2*, a simple example of a mother and her child will explain the action of hiding on the part of mother. Mothers are usually careful about the health of their children because if they fall sick, the tranquillity of the mother is disturbed. That is why she always keeps an eye on the child's activities.

Children, generally, are very fond of chocolates and mothers put restrictions on the quantity consumed by them. Each time a child demands more, one cannot go to the market. hence she obviously keeps a stock of chocolates. She tries to keep the stock at a place, beyond the reach of the child. If the child comes with the demand for more chocolates again and again, the mother feels that it is better to prevent him since he already had enough. She knows, if she gives a blunt 'no', the child will not agree. Obviously she keeps on shifting the place of the stock.

HIDES things

To deceive the child, she searches the old place which is in the knowledge of the child, wanting to show that the stock had exhausted. But the child is also clever and knows that the mother usually changes the place and this time he has already noticed her doing the same. He says, "mother let me see the other place". And the mother is caught. She has no other way except to give in and

cover herself with the following replies -

HIDES things

"Oh! Perhaps I forgot". "No mother I know you were doing it purposely". "But son I do this in your interest, your doctor has given instructions that eating chocolates will harm your teeth".

DECEITFUL
HIDES things

In this example the motive of the mother is not achieved but there was an effort to achieve it through hiding. In the first instance she employed deception as an instrument of hiding and in the later she took the cover of the physician to save her face It is in this way that we have to take into account both the values of a rubric i.e. face as well as intrinsic.

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The next supporting rubric is "REST, desires for"

REST, desires for

One should ask, what is rest? 'Rest' means a break in a journey or activity which is strenuous and exhausting. Here the person is finding it difficult to continue with his problems. He feels and sometimes demands and cries, "I do not mind the long treatment but I simply need some break in it, a little sigh of relief". For example your patient says, "I am always in pains and told that is aggravation" *(REST, desires for)*. I don't mind that

HIDES things

Laughingly, she adds to hide her anxiety what actually I want is a pause, a break, a sigh of relief at least once in a blue moon to feel free from all the troubles.

The other rubric in the group is "CARRIED, desires to be fast."

CARRIED. desires to be fast

What is, 'Carried'? It is a state of lifting from the present place to another place. Who wants to be transported? He who feels that he is not capable of carrying his own burden or weight. Why does he want to be transported? From where does he want to be carried? From his present situation, i. e. the present condition of ill health which is difficult for him to stay in. Where should he be carried? He doesn't want to know, because he want to achieve the state of forgetfulness. Let anyone carry him anywhere. A frustrated poet imagines that he is standing on the sea-shore and tells a boatsman, *"I want to be deceived and away from the reality, I want to be carried but I should not know that I'm being carried and to where. Take me where ever you like but without letting me even get an inkling that I am in the state of transportation. And I want to reach the state where I find myself forgetful of my entire past*". This he desires fast, what and without any delay This is how we have to be precise in knowing the meanings of the rubrics; we have to reach their soul, the innermost essence, the innermost man.

But how does 'hiding' can take place here?

HIDES things

Astonishingly the boats man asks him Sir, what is the cause of so much of your frustration. He replies oh! It is nothing, perhaps I have exaggerated my problem.

HIDES, things another example, a patient called me on telephone at late hours and I asked him "What was the need of calling at such an odd time"? At this remark his voice goes down and meekly he replies, *"Sir just I thought that let it be in your knowledge that my problem is acute* But I can't understand what is the hurry? With a faltering voice he replied, *"Yes Sir! There's no hurry, no hurry."* The tone and style conveyed that he was hiding something. And then I put a straight question, "Do you actually want attention that too

immediately. The reply again comes with a cover and in a meek voice he says,

HIDES things

"Sir, I think everybody wants to be attended at once and my need is limited. Just talking to you on telephone and getting a little of positive reply is enough for me". I think this would give you a clear picture of hiding. The confession is coming with a cover.

The next rubric is POMPOUS.

The main aim is:

POMPOUS or IMPORTANCE

This means, pretentious show of dignity Such a person wherever he goes, wants his presence felt. He will leave the place where he feels that there is no one to receive him the way he wants to. But with a question mark, What type of people?

To get to it he makes use of his following qualities:

BENEVOLENCE

Only those who can give importance. To create such a following he will try to be known as a very helpful and kind person giving charities donations and all such types of activities. This tendency is represented by the rubric BENEVOLENCE.

MAGNETIZED, desires to be fast, mesmerism amel

The other way is to be useful to others. These people sometimes go out of their way, to help others losing almost everything they possess, even their health just to remain in the center of activity to get accredited to be treated as a person without whom no function is complete. This statement is covered by the rubric Magnetized, desire to be, mesmerism amel.

HIDE things

So it is clear that for his real intention of gaining importance in society he makes use of these qualities.

To elaborate further the essence of these two rubrics, let it be clear that *Benevolence, means* "to be kind to others".

And magnetized, desires to be, mesmerism ameliorates. To split this rubric, a magnet is something that has the power of attraction. But the rubric is "MAGNETIZED, desires to be " , means, someone wants to

acquire the qualities of a magnet. That is of attracting others. The full rubric is "Magnetized, desire to be, mesmerism amel." *Mesmerism* is the art of charming others, (literal meaning is the act of inducing an extraordinary state of nervous system in which the operator is supposed to control the actions and thoughts of the subject). That is, the person wants to be magnetized (attractive) or assume such qualities so that he is able to attract (charm) others.

LIGHT, desire for

The real intention is to assume importance which gives delight.

For example a lady feels her body requires rest and feels that she cannot attend the party her friends had fixed for the day's evening.

LIGHT, desire for

But inspite of that she decides to take part by taking over the cooking of various dishes which only she knows how best to prepare, ultimately to listen everybody saying that it was possible only because of her which will be a great delight for her.

LIGHT, desire for

Likewise there are other needs and personal requirements in the form of the rubric Light, desire for. For different interpretations of this rubric please refer to ROH series V. Here as the situation differs the meaning of rubric shall also differ

LIGHT, desire for

Here the meaning of *'Light'* is not to allowing things to go deeper into the mind and that is why the desire is to keep away from things that burden the mind. He does not want to bother about his problems even if they are big. If someone reminds him of his problems he does not like it.

DECENT, mannerful

But he does not want to be rude also. So, when someone is anxious about his affairs, or when he comes to know that others are feeling inconvenience because of him he will change the stand and will simply pose as

if he has no problem. He will try to impress upon others that the problem is not as acute as is being made of (*Hides, things*). Because he tension on his own mind (*Light, desires for*). This is another reason for hiding. wants to avoid any

LIGHT, desire for

DECENT, mannerful

The next related rubric is "DECENT mannerful" which means that the person believes in decency and manners·

NON-VULGARITY

He believes that even when he jokes it should be decent and not cheap because he hates vulgarity and lowliness.

SELF-RESPECTING*s

Why does he observe decent manner? Because he himself doesn't want to be treated indecently. Let us recall that the original rubric is "hides things". We are discussing why and when Belladonna hides.He does not always hide (things). It is the situations and the personal needs (conveniences) of the Belladonna patient which make him hide things. Because there is a desire for light.

LIGHT desire for

TIMIDITY, bashful

Another reason for Belladonna to hides things is that his timidity (lack of courage) to face the situation which is bad in the sense that it is going to put him in a low position where he will have to lie low if something which he feels should not come to the knowledge of others gets exposed e.g. example certain ladies will like to talk about their pain in the abdomen and go on complaining they have pain in the abdomen, but until last they will not like to divulge the real cause of the pain which happens to be menstruation.

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*s *Marked rubrics are added by Dr. Sehgal*

FEAR, society of his position in*s

INDIGNATION*s

Likewise, a patient will not like to complain about his sufferings to others which in his mind is not very big. So that the people around, may not form a poor opinion about him, being a pretender.

FEAR, paralysis of

Paralysis means seizing of normal functioning of any system. Suppose if a child is very fond of playing or a person is in much need of money will hide his ailment his sickness from the concerned persons for fear of not being allowed to to continue his job. Therefore the person wants to be in normal working order at any cost.

ATTENTION, desires*s

Some patient even if they have recovered from their sickness will not like to admit that he has been cured. So that the attention which he is getting from the people around him should not cease to come

HIDES things

And that is why he will keep on hiding his real position of health as long as possible.

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*s *Marked rubrics are added by Dr. Sehgal*

(i) The Gestures employed by Belladonna to Hide Things are represented by the following rubrics

UNCONSCIOUSNESS, interrupted by screaming

&

NOISE, inclined to make

(The two rubrics when combined make a complete sense)

1. UNCONSCIOUSNESS, interrupted by screaming
2. NOISE, inclined to make
3. FEIGNING, sick (Attention desire)
4. QUARRELSOME, anger without
5. LIGHT, desire for
6. CARRIED, desire to be fast
7. LAUGHING, speaking when
8. TIMIDITY bashful

So far we have been discussing the reason for hiding. Now we will discuss how he hides or the instruments which he employs to do the same.

This rubric is the first instrument used to hide the real intention. Here it will be important to know the real & meaning of the rubric as a whole

'UNCONSCIOUSNESS' means - unawareness of the surroundings. 'Interrupted' means - broken in. 'By' means - caused. 'Screaming' means - a loud sound that is unpleasant to the ears. To infer further, 'interruption' also means not allowing to continue things smoothly. For example a state of total calmness is prevailing. It is broken by a sudden unpleasant sound. This breaks remains for a moment and disappears. The person, in general, remains unconscious about his problems regarding which he is required to be serious. And on certain rare occasions a reminder in one form or the other passes through his mind. "Oh! how serious is my disease and how badly I'm neglecting it!". Or it could also be that a particular business affair is very important

and a feeling comes: "I should pay attention to it but I am not doing so". It may also be about certain danger and this state can be described well by quoting the example of a pond full of water which is quite calm and clear on the surface but occasionally some bubbles arise from its bottom, coming to the surface and vanishing, thus indicating the underlying mud. The apparent meaning, of this rubric is that the man is lying in a state of unconsciousness and screams in between. But here we are talking as to how this rubric is employed as an instrument of hiding. Actually it is supported by another rubric "NOISE, inclined to make".

NOISE, inclined to make

In reality Belladonna needs screaming because it gives relief provided it is with a style which is peculiar to it. We can call it rhythmic. Screams than takes a pause and keep repeating this process. And that is why it seems that the ailments of Belladonna aggravate at intervals. During the aggravation he needs to make noise and loud sounds because they really provide relief. If you ask the patient, "Do you make noise?"

He will confess with a cover and will say "Yes" but not in straight words. When you ask "Does this give you any relief?" He will loudly affirm "Yes" . A retired British army officer was asked, "Do you make noise during pains." He laughed at the top of his voice and said,

LIGHT desire for

"Yes, my wife does not like to sleep in my room because she cannot sleep properly because of the nuisance which I create". Here he really seems to be delighted to find that you have really understood his problem. One side of the coin is the need to scream but there is another side which is represented by the rubric "Feigning, sick".

FEIGNING sick

'Feigning' means pretending, and *'sick'* means having ill health or feeling unfit. It is not always necessary that only a healthy person pretend. He may be sick and be found exaggerating his sickness. What is the need of exaggeration? I would rather like to replace this rubric by the rubric

ATTENTION, desires

"Attention, desires". The further question that arises is from whom is the attention, being desired? The answer would be, from one who is expected to give. For example a housewife is a Belladonna patient. The whole day she has been doing her usual chores in spite of her ill health. But in the evening when it is the time of arrival of her husband, she lies in bed and when he enters the door she remains quiet, expecting that he will ask about her well-being. Somehow it so happens that she does not attract his attention. The husband gets occupied in something else. Here something has gone against her wishes which she badly misses.

UNCONSCIOUSNESS, interrupted by screaming

NOISE, inclined to make

Now she will break her silence at intervals and initially may produce the sound at a low volume, but if the person is either absent minded or has not been attracted or moved by her low sounds, she then will be inclined to produce a louder sound which will amount to making noise. The person is compelled to pay attention to her and asks, "What is the matter, do you want any help from me?" She says, "Yes, a little bit, if you have time to press my head or legs" etc.

QUARRELSOME, anger without

There is another rubric "Quarrelsome, anger without". Perhaps you may not find any such word in the dictionary that shows that the word 'quarrelsome' has no association with anger or agitation. 'Quarrelsome' means - one who disagrees or argues. It is a note of dissent.

NOISE, inclined to make

Your patient comes and tells you in a colloquial language with a loud voice, "Sir, I have come to fight with you. You cure others,

but not me.

ATTENTION desire(Feigning Sick)

It means you are not paying proper attention to me.

LIGHT, desire for

Again a question , What is the need to quarrel? Perhaps because there is '*desire for light*'

CARRIED, desire to be fast

and *'carried, desires to be fast'* the rubrics which we have already discussed.

Hides things

These are being asked under the cover of quarrelsomeness.

LAUGHING, speaking when

An another instrument of hiding is the rubric "Laughing, speaking when". The literal meaning of Laughing is a "state of expressing emotions like mirth, pleasure, derision or nervousness, with an audible vocal expulsion of the air from the lungs which can range from a loud burst of sound, to chuckles. "To Speak" is to communicate orally and the word *'when'* means, at the time of . So the interpretation is , laughing at the time of communicating orally. Apparently what is expected of this rubric is that a person laughs spontaneously while communicating. Sometimes without being aware of it.

HIDES THINGS

For example a patient was asked why he was laughing, in reply he said, "No! I am not laughing. When did I laugh? It means either the person was concealing something or he was not aware of it. But in case of Belladonna it is a - typical LAUGH. He will speak only one word, stop and look at you while laughing, as expecting you to understand him with minimum of information without asking to divulge every thing by keeping nothing behind.

TIMIDITY bashful

(Dictionary meaning is having no courage to face exposure of facts relating to which one feels personal) **(bashful = shy)**

In an example

He looks at you to know whether you have understood his message and in response to your repeated questions he keeps the same behavior as if he is a hard nut to crack; as if he wants to say, "Why can't you understand me without compelling me to divulge everything ; why you want to strip open all my covers."(Clothes which is personal and private to me).

(ii) To what extent Belladonna hides? (Group of Rubrics to be studied under this head)

By nature Belladonna can't hide beyond a limit. We will study the group of rubrics which confine Belladonna to a limit. The first rubric is the main rubric itself-i.e. Hides things.

1. HIDES THINGS
2. NAKED, wants to be
3. SENSITIVE, light to
4. DELUSION, demand, limited is to a little of attention *(s*)*
5. POMPOUS, important
6. LIGHT, desire for
7. FEAR, dark of
8. RAGE, medicine from forcible administration of
9. MOOD, repulsive
10. DEFIANT
11. CALCULATING, inability to

HIDES things

This we have already discussed. The requirement of this rubric is that the extent of its hiding depends on the need of the situation, time and place.

NAKED, wants to be

The next rubric is: "Naked, wants to be". Naked means, without any covering i.e. wants to throw away the veil or wants to reveal the

information. WHY? Because there is a necessity. The necessity is that he wants to be cured. His physician needs the information to select his remedy, he has to tell and there is no alternative. How beautiful is this combination of two rubrics, "HIDES things" and "NAKED, wants to be". As if they are engaged in a game of see-saw or hide and seek. There is a strange pull between the both, which comes in alternation. As already said, see how the desired information is coming in checks because of this tendency. Here both the rubrics are trying to limit the field of each other. For example a patient of AIDS was asked how do you know that you are suffering from AIDS.? (Ans.) He replies he is HIV positive. (Q.-) Can you say, how it started and when suspected? (Ans.-) I had high fever with loose stool and general weakness the Dr. advised me to go in for the check up. (Q.-) Do you think you have done anything which caused the disease?

NAKED, wants to be

(Naked wants to be) "Well Sir, I just cannot hide, the fact from you as the person who recommended me to you has advised me that you will need to know my real history. So I have to confess that I was on an official tour to Bombay, with friends and ventured to visit to a brothel."

HIDES things

(trying to cover himself, by minimizing his fault) "But sir only once! Only once!

HIDES things

He stressed it was really my misfortune to have fallen prey to the allurement of sex, because of the company."

HIDES things

Q. Do you talk to people about your disease?

A. No, never, I simply try to avoid by telling that this is an ordinary fever and it will go by itself.

SENSITIVE light to[1*] DELUSIONS, demand, limited is, to a little of attention[*s]

Sensitive to light is the next rubric. Here on the one hand the person is sensitive to light, wants to be away from light and to be more precise wants to remain unnoticed for many reasons one of them is he does not want total involvement which is supposed to be burdensome and therefore sooner he will find that the things are becoming burdensome he will start withdrawing from the scene.

For Example:-

POMPOUS important

A patient (suffering from peptic ulcer) would not call on me without first intimating me on telephone inspite of the fact that he knows his date and time of coming to me, which is usually fixed on the previous visit, of every patient. For this he will use the services of someone else, like his personal secretary, wife son or daughter or anybody near to him. He will see that they will make sure, that he gets special attention, saying - he is reaching you exactly after so many minutes etc. and please see that he gets special attention. Supposed he reached you as scheduled and you forgot to say him hello, before his turn comes.

LIGHT, desires for {in the sense that he desires VIP treatment (pompous)}

He will not wait for a second even sooner he reaches, he will shout, Sir, I have reached and out of courtesy your reply is, Oh! John you have come, please be seated, I will see and request someone already in queue to accommodate you.

SENSITIVE, to light

His prompt reply will be - Sir, don't worry, don't take that much of trouble I can wait even if I am in a hurry.

You can come in and just sit near me.

DELUSIONS, demand, limited is, to a little

Enough, that is enough for me, that you have paid some attention, I am comfortable

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[1*] *Sensitive means badly effected or easily pained under the influence of something or unable to stand the effect of something.*

[*s] *Marked rubrics are added by Dr. Sehgal*

attention

here outside and at my place.

And on the other side desires light (LIGHT, desire for) means does not want to be ignored all together. See how these opposing desires are limiting the field of each other. Generally these people will be found fixing themselves in the middle. Neither can they tolerate the effect of full light (admiration) or notice which the front benches attract, nor can they think of sinking their identity in total.

FEAR , dark of
MOOD, repulsive
LIGHT, desire for

The next pair of rubrics is: "FEAR, dark of" and "MOOD, repulsive". *'Fear'* means a feeling of discomfort from the presence of something specific and dark means absence of knowledge. He wants to know where he stands, where he is. He does not bother much about anything. If he bothers about anything, it is only to remain informed so that he is able to adjust his own mind accordingly For example there are people who keep inquiring about his health and suggest remedial measures or admonition him for being careless about his health. This he can do, by starting treatment from somewhere, to satisfy his critics to keep off pressure on his mind.

Another example:- A person met with an accident had head injury and in consequence lost his eye sight.

FEAR, dark of
LIGHT desire for
ANGUISH weeping with

"Please tell me frankly, whether I can be cured,

He said and wept.

Q. If I say 'no' what will be your reaction, he was asked.

OBJECTIVE reasonable

A. Then I shall accept it as a reality and keep quiet.

Q. "Willingly.

A. 'No' he said how can I, when I am still very young and have ambitions.

RAGE, medicine, forcible administration of

The next rubric is "RAGE, medicine, forcible administration of". *'Rage'* =, extreme anger. *'Medicine'* = anything that has the power of healing - something that can benefit a person and free him from misery- a recipe for relief. This may be in the form of consolation or suggestion of some alternative treatment etc.

'*Administration*' = a show run under the command of some one else; *'Of'* = act of. *'Forcible*' is understood to be without one's consent, and '*from*' means 'out of'. So the rubric as a whole means that the person will not allow anyone else to speak in his matters unless it is acceptable by him and is not burdening his mind. In such a situation, he becomes repulsive and defiant.

MOOD, repulsive

The next rubric is "MOOD, repulsive. "

'*Mood*' = a temporary state of mind inclined to do something, it indicates the flow of mind, in a particular direction. *'Repulsive*' = to keep the things off by driving or pushing them back.

The question now is, What is that which is being pushed back? It is something that is trying to uproot or displace him from the present agreeable position. The person is in a state of attainment of permanent peace which he does not want to lose and something is trying to displace him. This supports the meaning of "forcible administration of medicine", which means he will not accept anything may it be for his benefit unwillingly.

DEFIANT

Similarly there is an another rubric: "DEFIANT". The meaning of *'defiant'* is to boldly resist or oppose an authority. An

authority is a source that issues commands and enforces obedience, in other words it is something that is trying to dominate and this is intolerable and thus arises an issue of revolt in self defense.

NAKED wants to be

Here the situation has taken a turn to compel him to forget decency and become more naked, reducing the limit of hiding. It is in this context a state of total nakedness (Rage) has taken over the state of his hiding.

CALCULATING, inability to

The next rubric is "CALCULATING, inability to". '*Calculating*' is assessing the extent of something. '*Inability*' is, lack of ability *or* to be unable to. This inability is limited to assessing things. Inability is a great disqualification. Perhaps most of us will like to hide it. When one finds oneself unable to explain what actually he is suffering from it is a very embarrassing situation for him. Obviously the signs of bashfulness are expected which he tries to manage by way of distracting the attention of the observer with the help of the following rubrics:

1. LAUGHING, speaking when.
2. CARRIED, desire to be fast.
3. LIGHT, desire for.
4. SENSITIVE to light.

We have already discussed the meanings and the interpretations of these rubrics.

He tries to hide as much as he can and to do that he ends every version with a sentence, "Probably it is so".

(d.) General Nature or character of Belladonna: (As a normal person)

What does general nature mean? We can call it habit (combination of various actions) of a person. What popularly is known as habit is in reality love for personal conveniences and preferences which keeps a person unaware of the fact that they are being taken as a

disqualification by others. This he will not change even if he has to break the social norms and is subjected to objection, because the person concerned do not find any wrong in What he does.

It is in this context that we have to study the general nature of Belladonna which has its background in the group of rubrics already studied under the heading "Why Belladonna needs to hide?"

I have tried to divide this part of Belladonna into twelve different stages. There can be many more, I call them different entry points to the belladonna-castle which is under siege and is sealed from within on all sides by the enemy which can be identified by the signs & signals indicating its weak points. **The First stage forms its basic nature** which is to be found in the cumulative sense of the following group of rubrics:-

1st Stage

1. DELUSIONS, poor, thinks he is
2. DELUSIONS, floating in air
3. DELUSIONS, wealth imagination of
4. FRIVOLOUS
5. UNRELIABLE, promises in his
6. LIGHT, desire for
7. DELUSIONS, sensations, misrepresents his
8. DELUSIONS, now well now sick
9. PLAY, passion for gambling
10. DELUSIONS, passion for gambling for money making

TO START WITH THE FIRST RUBRIC LET US KNOW WHAT ARE 'DELUSIONS'

In dictionary '*Delusion*' = a false impression, a false belief or a false opinion. In the repertory under the head 'Delusions' the following three

forms of mental states are enlisted i. e. Imaginations, Hallucinations, and Illusions. '*Imagination*' means, a thought process i.e. the product of the mind which has no relation with reality e.g. (DELUSIONS, poor, thinks he is it is his thinking - thinking is making it so)But the question that may be asked when a really sick person who has many ailments comes to us for his treatment "Will such a patient be covered by the rubric 'DELUSIONS' sick imagines himself'?" The answer is, to be sick is quite different from feeling or imagine that one is sick. There are two things - one, the person has no ailments but he feels or imagines that he is sick. The general remark that he invites is, his problems are imaginary and he needs to consult a psychiatrist.

FEIGNING, sick

QUIET, wants to be

REPOSE and tranquillity

desires

The second is that there is no doubt that he is really sick but unlike others he always asks for concessions. His argument usually is "You know I am sick, how can I do this or that?" And in this way finds pretexts to shirk from his duties etc.

The main purpose for my raising this point is that the delusions may be interpreted as false feelings in the perception of others but not for the one who is under their operation. From the delusions we learn that there are different formations of the nervous system that are controlling imaginations, hallucinations and illusions, independent of each other.

Coming to our real job of finding what is the real nature of Bell., the first rubric which draws attention is Delusions, poor thinks he is". '*Poor*' = short of something.

'Hallucinations' are false sensations or feelings, for example we have the "DELUSIONS, floating in air". The feeling of floating in the air is not coming from the faculty of mind which produces thoughts, it is just a sensation, a feeling that is conveyed by a set of nerves about the condition of the body as it involves a disturbance in the sensory nerves which are responsible for the healthy functioning of the three senses i. e. of smell, taste and touch.

Illusions (visions) involves, to senses i.e. of sight and hearing. It is in other words a disturbance a disorder in the visual and auditory nerves. For example :

1. DELUSIONS, figures, sees
2. DELUSIONS, phantoms, sees
3. DELUSIONS, insects, sees
4. DELUSIONS, hearing, illusion of
5. DELUSIONS, voices hears, calling his names

The other rubric is "Delusions wealth, imagination of"

This refers to Kent's repertory, (Barthel has removed the words 'thinks' and 'imaginations' from the two rubric). *'Wealth'* = short of nothing. The feeling is that he has the means to have anything he desires. But both are relevant terms, they have nothing to do with material gains. A beggar on the road may feel that he lacks nothing and an industrialist may feel that his neighbor has 20 industries while he is the owner of only 10. Likewise we can expand this feeling from matter of money to matters of health, one's position in society etc.

Belladonna has both the feelings side by side and both have a corresponding effect upon each other. Here we see a very strange contrast in which each of them is limiting the field of the other - the feeling of wealth is limiting the feeling of poverty and vice versa. As such they are operating simultaneously. for example, a person says he is not well. "What is the matter?" "I have a little headache". "Then why don't you take rest?" He laughs and replies, "Oh! For this little problem? I think one should not mind, or give any importance to such little things." What this person is conveying is that even though he has the feeling of poverty, yet this feeling does not affect in any manner his feeling of being wealthy. Let me remind you here that we are talking about the general nature of Belladonna.

POSSESSIVENESS [*s]

It will not be out of context if here I give reference to the feeling of possessiveness which means the person does not want to part with the feeling of wealth. It is in the general nature of Belladonna that in spite of heavy losses, he will never allow himself to feel that he is poor. Very near to this feeling is the feeling conveyed by the rubric "FRIVOLOUS". *'FRIVOLOUS'* = not serious but casual, in attitude. How serious may be that issue the person concerned will not allow his mind to be taxed.

UNRELIABLE, promises, in his

Another rubric is "Unreliable, promises, in his". *'Unreliable'* = cannot be trusted and *'Promises'* means, the words given. It means the person does not feel obliged to stick to his words. If at any time he feels it is not possible for him to keep his promise he will break it without feeling uncomfortable in any way.

LIGHT, desire for

"Light, desire for" means want to keep his mind free of any tension. As it is beyond his capacity to keep any burden on his mind even for a moment. This does not mean that he is an irresponsible person he is very much responsible. What he wants is to avoid worries. He would like to keep his promises but somehow, if he is not able to do the same, he does not like to entertain any of your claims for it saying he tried but could not do it (there is no remorse etc.).

DELUSIONS, sensations misrepresents his

"Delusions, sensations misrepresents his" is the next rubric.

'Sensation' = feelings, ability to feel physically.

'Misrepresent' = represent wrongly or inaccurately. Sometimes he feels, cold drinks will give him relief but actually when he takes cold drinks they give adverse affect. Sometimes he feels he requires warm clothing but after sometime he realizes that they are aggravating his pains. Sometimes he feels hot bath will help but he finds out in the end that he required cold bath

[*s] *Marked rubrics are added by Dr. Sehgal*

etc.

DELUSIONS, now well, now sick[*s]

The next rubric is "Delusions, now well, now sick"

This also conforms to the sense conveyed by the previous rubric. One moment he feels he is sick (*poor*) and the other moment he feels he is well (*wealthy*). For this reason when his physician inquires about his well - being he says "From a situation like this I am not able to conclude whether I am sick or not."

PLAY passion for gambling for money making

"Play, passion for gambling" and "Play, passion for gambling, for money making," are the next rubrics.

'Play' = any exercise or action undertaken by way of amusement or recreation. *'Amusement'* is that which occupies attention pleasantly, as a pass time. *'Passion'* = something which one cannot resist, or something without which one cannot live. In general terms we can call it the weakness of a person. *'Gambling'* = a venture in a game of chance for high stakes. *'Money making'* is for profit, to gain something. On the one hand one is busy to just pass time, he will not mind whether he gains or not on the other hand he says, "Since I have no other way out to overcome my miseries I am taking a chance in the fond hope that may be one day events take a favorable turn (gain) and I am out of the woods". So he tosses between the two thoughts. These two rubrics also support the earlier two i.e. "Sensation, misrepresents his" and "Delusions, now well now sick".

When he sometimes feels well than the operation of the latter rubric becomes prominent and when there's a feeling of sickness or he feel he is not sure about anything (well or sick when he says he can't say whether there is any relief or not) just is on experiments.

CALCULATING,

For example, there is a patient who on being

[*s] *Marked rubrics are added by Dr. Sehgal*

inability for

asked "How are you?" replies "It is very difficult for me to answer this question. "Why? "Because sometimes when I feel sick I console myself, let it be an experiment for the doctor

PLAY, passion for gambling, for money making

I will present myself as a guinea-pig. Since there exists no treatment in any other system as I have tried almost all the prominent allopaths and homoeopaths my end is definite. So let this be a case for experiment. If my Dr. succeeds, it will be a great discovery for mankind and for myself too. And why should a sincere doctor like you not get credit, and if I die, I will die with the consolation that at least I have been exerting my energies in the right direction, to get rid of my disease. On the other hand when I feel that I am better than before and that most of the agonizing symptoms have vanished a hope comes, may be one day I will get total emancipation.

Let me remind you again that we are talking about the general nature or habit which invites objections from others that the person involved, does not find anything wrong in doing, what he normally does, because he feels more comfortable and ease by adopting a particular style of life. So this first phase of the nature is his basic nature which is in-born. Sometimes we say that the man has changed; it is because the circumstances (which in my view should be called external injuries which leave their charges on the mind) effect a change in the basic nature of the person. In a prolonged sickness, although he tries to maintain his original nature yet he is not able to and then out of frustration, a change in his nature occurs. Internally he confesses that he did not like to change but circumstances forced him to change.

As the sickness prolongs he is transforming into a next stage which is taking him astray from his originality. This change is represented by the group of rubrics given below :-

2nd Stage

1. Delusions, floating in air

2. Delusions, floating in air, bed, swimming in

3. Delusions, flying sensation of

We already know the meaning of 'delusions'. Now what is floating? What floats?

Something which has no ground and no weight, no will, no wish and is being drifted aimlessly with the flow of the liquid or air; as if he has given himself in to the winds of time. The feeling is that the sensation of well - being is not real. This idea comes only when one feels that there is no improvement. And when the idea of improvement comes he feels assured that he is at least safe from drowning.

The second rubric "DELUSIONS, floating in air, bed swimming in" is in the form of hallucinations.

'Swimming' = pushing the water or the air back to obtain, in return, a push forward, so that one can reach one's destination. it is a sign of hope but to swim in bed means to please oneself with false hopes. This rubric also gives a double feeling as expressed above.

"DELUSIONS, flying sensation of" , *'flying'* = moving freely in the air; passing through the air; moving swiftly; hastily; etc. we can draw two different inferences from this also. One, that he is free from restrictions imposed by sickness etc. and can use his wings to touch the peak of the utmost height or to touch any height that gives feelings of pleasure. The second is that this feeling of pleasure is not permanent; it is short lived and hence not real. This second state denotes pessimism, which has grown over a period. Now he passes on to the third phase. Pessimism gets further accelerated.

3rd Stage contains the following rubrics:-

"DELUSIONS, business ordinary they are pursuing"

"DELUSIONS, engaged ordinary occupation in"

'Business' = any occupation undertaken for gain.

'Ordinary' = anything that is common and involves no specialty or skill to produce effective and very promising results.

'Pursuing' = following silently and without any resistance. For example a patient says that sometimes he feels that he should leave the homeopathic treatment and go in for some specialized treatment. "To me it gives the impression that to be treated simply on symptoms has no sound basis and should not be relied upon. "But when I look back at my progress and at other cases successfully treated by you, I feel I am wrong."

'Engaged' = keeping oneself reserved for only one thing and paying attention to nothing else.

'Occupation' also means, the act of holding a position to earn one's living.

'Ordinary' in the second rubric means, that the patient feels that otherwise he is fit to undertake extraordinary jobs commensurate with his qualifications but because of his present sickness he is not able to do it. When asked, "By the way what are you doing these days?" He answers, "Just helping my father as and when he requests, to justify my existence." "What is it that you are interested in?" "I have the capability to run a big export house. If I become fit even tomorrow, I can do a lot. So I'm waiting for that day and living between hope and no hope."

4th Stage

Now it reaches its 4th stage covered by the following two rubrics:

1. DELUSIONS, possessed being.

2. DELUSIONS, sick, imagines himself (Dr. Kent)

'Possessed' = something that exists as a property of someone else. It (the possessed) can be used in any manner desired by the owner. The one who is possessed cannot exercise his own wish or will. He has to act under the command of others. His right to assert himself has been curbed.

'Sick' in the second rubric means, unhealthy, inefficient, or unfit even to maintain himself. In business terms we talk about "sick industries". They are those which, instead of earnings profits run into losses. Either they have to be closed i.e. condemned to nothing or deserted forever if they cannot be cured. The decision in either of the cases is not in the hands of the sick industry or person. Others decide their fate.

Now it is to be seen how the basic nature discussed in the first part, is gradually undergoing a change with the passage of time as the disease prolongs. The patient, instead of remaining lighthearted and taking it in a casual manner, is becoming serious day by day and takes things deep into his heart. This does not mean that he does not want to remain light hearted, but the capacity the energy, the stamina to keep things off the mind, has reduced. He says "I try to repulse but the thoughts are so overpowering that they do not leave me even for a single second. I try to console myself many times, that this is perhaps a punishment of my past deeds; I have never done any wrong to anyone in this life."

Here an other rubric covering Belladonna can be mentioned:-

"SUPERSTITIOUS", let me remind you that through gestures and the style and tone of speech he is reflecting the overall influence of the "HIDE

THINGS" etc.

Likewise the 5th stage is covered by the following rubrics below:-

5th Stage

1. BOASTER
2. EXUBERANCE
3. DELUSIONS, surrounded by friends

What is boasting? It is to speak of oneself with excessive pride and vanity. One boasts when he starts thinking that the status and position which he has assumed, no one else has that. He thinks that he gets special treatment from everyone, which no one else can dream of. He feels he is treated with excessive love and regard, and thinks he is held in high esteem and that he holds a special position in the eyes of the people around him and in his office. *'Exuberance'* means, overflowing with joy, or in a state of extreme happiness and vigor. He laughs and talks as if he is the happiest person on this earth. There is nothing else except joy around him. Wherever he goes it is all a feeling of joy for him.

And now "DELUSIONS, surrounded by friends is".

'Surrounded' means, encircled. 'Friend' is a person from whom one expects anything, at anytime and specially in times of need. Because in the background their is no other relationship except the feeling of personal affection. So to him everyone in the street looks as if he belongs to him; whosoever comes in his contact, he is full of affection for him.

The disease has gone to the head, and the psychiatrist will give various names.

HIDES things

Actually through these rubrics the patient is indirectly conveying that he is not getting his dues that the people expected of behaving like friends

or no more doing so. Hiding is very much operating here. In the sense that even in this state of incoherence he is not coming out directly but with a cover (that he has been betrayed).

6th Stage

1. CREDULOUS
2. NAIVE
3. BENEVOLENCE

'Credulous' is one who is unsuspicious, unduly willing to believe or trust others without proper evidence.

'Naive' is natural simplicity of nature, having or showing lack of experience - worldly unwise (does not know the roundabout ways of the world).

'Benevolence' means, desire to do good to others,- kindheartedness - feels good by helping others.

The state of mind conveyed by this group of rubrics indicates further deterioration in it.

CREDULOUS

He is credulous in the sense that he can be deceived very easily even by a child. For example a child tells the patient of about 50yr. old, "Sir, somebody is calling you home." He will at once head towards his house, and will inquire from every member of his family "Who called me?" and if the reply is" 'none', he will not believe them and will quarrel with them until they find another excuse to divert his attention.

NAIVE

Naïve: Likewise, suppose he has purchased some bananas for himself, and if somebody says: "Sir, you used to eat high class bananas, these are not of the quality that would suit your position and status. These are meant for poor men like me. You are very kindhearted and I think you will not mind giving those to me". And hearing that he will hand over the banana's to that person without thinking about it for even a second.

In a similar manner, in a different situation if someone meets him on the way and says that he is hungry and has not eaten anything since

morning he will pass on the said bananas to him and on his way back he will tell everybody that he has done a good thing today.

POMPOUS

This part of his nature is reflecting itself in a more extrovert way because he wants popularity *(DESIRES, to be known as an important person)*. He will not part with anything unless there are spectators who acknowledge his good deed.

7th Stage

The 7th stage is covered by the following rubrics:-

1. COMPANY, aversion to friends, of intimate
2. ANXIETY, company in when
3. COQUETTISH, not enough
4. COQUETTISH, too much
5. PLEASURE, lascivious ideas only in
6. DECEITFUL.
7. DECEITFUL, fraudulent
8. JEALOUSY, saying making what he would not say and make

'Company' = to be with someone. *'Aversion'* = disliking; keeps away from.

'Intimate' = closely associated. *'Friends'* = a person from whom one cannot keep distance and the chances of being exposed are greater.

Anxiety, company in when. So long as he is in company he will remain worried and apprehensive whether he will be able to hide those of his feelings and deeds which he wants to conceal.

Next rubric is "Coquettish, not enough".

'Coquettish' = a male or female who mixes freely with the opposite sex without any feeling of guilt, shame, or serious intention of marriage etc.

'Enough', = as much as needed or sufficient for the purpose. *'Not'* means = opposite to what it should.

Likewise, "Coquettish, too much".

'Too much' = far above the level of adequacy the present need.

In this pair of rubrics, the first one conveys the desire to hide and the other one.

"Naked, wants to be".

Next rubric is "PLEASURE, lascivious ideas only in

'Pleasure' = to derive enjoyment

'Lascivious' = arousing sexual desire

'Ideas' in this case is a mental attitude developed after constantly pondering over something. Only means without allowing any other thought to occupy one's mind *'In'* = source.

The rubric as a whole means there is no other source of enjoyment except concentrating one's mind on the thoughts exciting sexual desire.

Another pair of rubrics is "DECEITFUL" & "DECEITFUL, fradulent.

'Deceitful' is one who misleads by false appearance or statements.

'Fraudulent' is one who uses breach of confidence to gain unfair advantage.

Next rubric is "JEALOUSY, saying and making what he would not say and make".

'Jealousy' has a double meaning neither can he tolerate the things that the others possess nor can he tolerate others having the same thing that he has JEALOUSY, saying and making what he would not say and make". 'Saying' is a spontaneous outlet to one's thoughts.

'Making' = manipulating things, matter or intentions in such a manner that otherwise he would like to.

The sense conveyed by the entire rubric is that under the influence of Jealousy he would utter words which in normal state of his mind he would

not.

This set of rubric conveys that although in general he is a light hearted person and does not worry about anything but specifically if he is inclined to seek joy it is nothing else than the thoughts exciting sexual desire and once the mind is set to fulfill it, it impels him to throw off the shackles of hiding, blinding his mind to see the reality and pressing him to leap upon the object (any attractive organ of the body of opposite sex) that will accord maximum enjoyment and pleasure. In a fit, he extends his hand towards the object perhaps in the hope of soft ground but after he realizes that he has thrown himself into a situation which can label him to be a man having bad intentions. He seems to be withdrawing and become serious and tries to use deceitful and fraudulent means to save himself from this situation. It is the same game that we have discussed earlier between the rubrics "Hides things" and "Naked, wants to be ". (This state comes, when either of the spouses behaves in a miserably irresponsible way). It is out of forced continence that this sort of insanity overpowers a person's mental state and sometimes it is seen on the streets, that he bites on the cheeks of a passerby with a deep passion and then suddenly realizes what he has done.

8th stage

The next stage (8) of mind is covered by the following rubrics:-

1. WEEPING, refused when anything.
2. WEEPING, remonstrated when.
3. ANGUISH, weeping with.

Weeping has been elaborated in great detail elsewhere in this literature. Here I will be brief. It means, feeling week in facing the situation and giving in with subdued resentment. *'Refused'* = rejection of one's request, *'when'* = at the time. *'Anything'* = nothing in particular.

'Remonstrated' is, one who gets disapproval of his arguments.

'Anguish' = feeling uneasy about something that is presently happening with him. The above three rubrics convey the person's deep sense of expectation from what he feels he deserves in return for his being good to every one, especially to those around him.

9th Stage

The next stage (9) is covered by the following rubrics:-

1. FRIGHTENED, easily
2. DELIRIUM, terror expressive of
3. DELIRIUM, fear, of men with
4. ESCAPE, attempts to.
5. HIDE, desire to, fear on account of
6 SUICIDAL, pains from
7 FEAR, dark of

FRIGHTENED easily

'Frightened' = affected by sudden and extreme fear. *'Easily'* = without much effect, showing no resistance, having no

capacity to resist. Thus the meaning of the first rubric is, affected by sudden and extreme fear and having no capacity to resist. It means that from the cause of fright he may not be that horrified as by the effect of it. The cause may be small but its impact is too great and shattering on the weak and soft mind. As we have already said, the person is credulous in life and this state is further intensified - by the next rubric

DELIRIUM, terror expressive

"Delirium, terror expressive of". *'Delirium'* is a state of mind which shows derailment, derangement, or being off the track. The person is in his senses but the tone and style of expressions is expressive of exaggerated stresses of his feelings which shows abnormality of the mind.

'Terror' is something that has the power to frighten the mind very badly. *'Expressive of'* means, that through gestures and speech the

internal feelings are coming to the surface and telling the tale of the mind inside. So after getting a slight jerk under the influence of fright, the patient in this rubric has gone into a state of delirium ; showing a great disturbance in its functioning.

DELIRIUM, fear of men, with

"DELIRIUM, fear of men, with" what is *fear,* here? It is a feeling of discomfort experienced at the thought of something harmful or dangerous.

'Of' is the source. In this case that source is 'men' and not women.

'Men' this word denotes strength, power. Anything which has the power to hit or damage. In other words, it is the fear of the stick, punishment, muscles.

So this rubric has qualified the situation of fear. And it is the source of the fear that is more important here. It may be the story of a man working in an office where his colleagues are corrupt but he doesn't share their views and keeps a constant fear on both the accounts. If he shares their activities then there is the ultimate fear of the Law and if he does not then the knaves may harm and therefore an inclination to escape.

ESCAPE, attempts to

HIDE, desire to fear on account of

The next rubrics are "ESCAPE, attempts to" and "HIDE, desire to fear, on account of"

Escape = save oneself from the danger one is facing.

Whom will you escape from who is in front of you

'Attempts to' = tries to.

HIDE, desire to fear, on account of

Not to be seen by others - to avoid the sight of others. Since the person finds that he is unable to face the **danger** he avoids to confront it or deal with it.

From whom will you hide who has not seen you

These two rubrics are denoting different situations. If the danger is before him there will be an effort to find out ways and means of avoiding it

without getting harmed. And if the danger is ahead and certain to come then there is an effort to hide oneself so that he remains away from the sight of the danger i.e. away from being detected.

SUICIDAL, pains from

Here the fear is at its peak. The pains are so severe that they have a frightening effect on his mind. Therefore the idea of the incurability of the disease enters the mind. Then he thinks in terms of preferring to end his life. But if he is told "this is an ordinary pain, then he says that he will be ready to bear it, provided the pain does not occur frequently. He can bear it if he is assured that it will go in a day or two.

FEAR, dark of

The actual extent of this fear is the ignorance about its real volume, capacity and strength. Here we can add another rubric: "LIGHT, desire for". His questions will be "Is my disease dangerous? Is it curable?" And terrified as he is, he will come to you again to get confirmation that there is nothing wrong with him and that he will be okay.

10th Stage

The 10th mental stage of Belladonna has two rubrics:-

1. "ANGER, mistakes, about his".
2. "ANGER, himself, with".

'Anger' = a strong emotion aroused by an injury with a desire for retaliation.

'Mistakes' = something done as a result of not understanding properly a particular situation. After having realized his mistake later on the person says,

ANGER mistakes, about him

"Sometimes an impulse come with the desire to beat (punish) myself, because it is always that I make such hue and cry that I disturb the peace of everyone around without verifying the facts and waiting till the real position is clear". And for this reason he remains unhappy with himself and if asked why he is in an off-mood, he replies

ANGER himself with

"I am not happy with myself," or he says "I am angry with myself for the reason why I expect

others to look after me and get disappointed after it is denied". This side of Belladonna indicates how simple minded and easily led a person he is.

11th Stage

The Stage number 11 has three rubrics:-

1. SITS, and breaks pins
2. BREAK things, desires to
3 DESTRUCTIVENESS.

SITS and break pins

'Sits' sitting is a position which falls between the positions of rest (free from any worry) and walking (being in motion). This rubric denotes a person's helplessness where he is compelled to do nothing. He is like a defeated soldier finding himself ineffective in the present struggle for existence. But there is a protest that is going on in his mind. This protest is finding an outlet by avenging itself on things which are inanimate, lifeless and cannot offer resistance.

'Breaks' = divides into pieces by applying force accompanied by the spirit to deface things.

'Pins' = things that bind other things together; which arrange union for the sake of promoting peace amongst even opposing forces. The other meaning is to plough* one's teeth on something hard and to grind it, because the person is finding no other way out to emit the venom from his mind. Here we can say that the person is refusing to be consoled and is trying to kill the one who is consoling him and says: "The wearer knows where the shoe pinches".

BREAK, things desire to

Next rubric is BREAK things, desire to". What does *'things'* mean here?

'Things[4] are the formations, the social order, particularly the one which is responsible for his present condition.

'Desire' is a wish that may not necessarily be fulfilled or carried out.

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[4] *THINGS: The meaning being the sense, the sense conveyed by it will change according to the situation. This will be the case with every terminology described in the system of Revolutionized Homoeopathy.*

'Break' here means, to destroy.

But the patient, the victim is thinking that he wishes to destroy all that is responsible for his miseries.

DESTRUCTIVENESS

Likewise we have the third rubric DESTRUCTIVENESS.

'Destructiveness' = having faith in the principle of damaging things and causing irreparable loss. When does one take to destruction? In this case it is more out of a state of frustration and utter desperation with oneself than with the circumstances. He realizes the futility of his being so simple-minded, for not having understood the ways of the world. He feels that the people of the world are right in their ways and "I should have dealt with them in the same manner". The real background (reasons for) of all this frustration in his mind is that instead of getting credit for his simple mindedness he has been subjected to exploitation, has been befooled.

12th STAGE

In the last, 12th Stage contains the following rubrics :

1. MANIA, spit and bite at those around him, would
2. MANIA scratching himself
3. RAGE, medicine from forcible administration of
4. NOISE, inclined to make
5. RAGE, knows his relative does not
6. REFUSES, treatment, every
7. ADMONITION, aggravates

MA NIA, spit and bite all those around him, would

'Mania' = excessive excitement, the actions are like those of an insane person. *'Spit'* = to eject Saliva from the mouth with a force. (It is to show disregard and reject the relationship forever.

REVERENCE, loss of

There is no regard left in the mind for those at whom he spits). *'Bite'* = to cut with **teeth or** sting like an insect. (In bites he pinches them with

sharp instruments like teeth or words. It is like slinging mud and showing disrespect and disregard to those from whom he expects something). *'Those around'* =people who are intimately connected with him.

MANIA scratching himself

In the next rubric *'scratching'* =rubbing something harshly over a surface. But the impact of agitation is more deeply affecting the person himself because the harsh words directed towards others are momentary and short-lived.

ANGER, himself with

But the feelings of hurt are so deep in one's own mind that they will last much longer, because the blame is directed more towards self than others.

RAGE medicine from forcible administration of

"RAGE, medicine from forcible administration of"

'Rage' we know is anger beyond limits.

'Medicine' is a substance used to remove disease or discomfort. It is something that soothes.

'Forcible administration' means without the willingness of the person if someone tries to manage him, he does not accept it, rather he retaliates in an unruly manner.

NOISE inclined to make

"NOISE, inclined to make"

'Noise' = a disagreeable loud sound which is unpleasant to other's ears. At this stage he is bent upon producing loud sounds as if the person is suffering from a great agony, but to the great disliking of others.

"RAGE, know his relatives, does not".

RAGE, know his relatives, does not

'Relatives' = persons related by blood. This means that in rage, the person refuses to recognize any sort of intimacy or connection and behaves like a stranger to every one without distinction.

REFUSED treatment every

Likewise the next rubric, "REFUSES treatment, every."

'Refuses' = declines to accept, or does not

accept. *'Treatment'* = is a systematic effort to cure illness. *'Every'* = any type of.

This patient now accepts no healing touch. It may be offered in any form, he declines it.

"ADMONITION, aggravates"

Any words said in the form of advice, produces a contrary effect or result. *'Admonition'* means that advising, cautioning or encouraging acts to the contrary.

This last shade of the Belladonna spectrum also reflects the basic approach of Belladonna to life. Apparently, as the rubrics indicate, he is very harsh but internally he is equally soft.

WEEPING, refused when, anything

His hate and love are **hardly skin deep yet** he is at times very serious when he is refused what he expects. What he cannot tolerate is refusal as it involves a lowering of his importance which is very precious to him. It is limited just to registering his name in the list of important persons.

In the end I will like to say that this should not be treated as the compete study of this drug. There may be many more shades yet to be discovered. Whatever I have stated is the outcome of my own experience and it is only after that I am passing on this knowledge about Belladonna to the profession. This is a usual practice with me.

Part II:-

Demonstrates the practical side of the concept of Revolutionized Homoeopathy with the help of Belladonna case reports with an equal stress on the management and follow up of the cases i.e. the demonstration of theory through practice. So it is towards R. H. via Belladonna.

Case # 1

A Case Report (Only Objective Symptoms)

(A case aged 58 yrs. of Cancer -Lungs with secondaries in Liver)

Lesson

-It presents the practical demonstration of the concept of Revolutionized Homoeopathy.

-This case proves that if we allow our mind to be influenced by the name of the diseases like TB, Cancer etc. you would not be able to select the really indicated medicine.

-No medicine is small even if it is Belladonna provided it cures the case.

A Casual case taking

In this case PPP (Present, Predominating and Persisting mental state) is "QUIET, wants to be, repose and tranquillity desire".

COMMENTS:-

If you have mastered the art, your casual case taking sometimes hits. More so through this case endeavor has been made to throw light on every aspect of the concept of Revolutionized Homoeopathy viz:-

Selection of medicine and management of a case in complete details.

What is the PPP?

What is the First Action?

What is the Second Action?

What is the Natural Healing?

What is the difference between role of traditional medicine and Revolutionized Homoeopathic medicine?

Test of a curative medicine, what is indicated medicine without bias

Why Bell. case has been preferred to explain the concept?

CASE REPORT

It was 13th of Jan 95 I received a phone call by a patient at my residence. The caller was an old patient now cured.

He said Sir, "I want to give you a trouble".

What is that?

Dear Sir, one of my near relatives is on death bed.

Cutting short I told him that this is my lunch time please call me when I will open my surgery.

Sir, it is urgent, I don't think he will survive till the opening of your clinic.

All right, but the difficulty with me is that at present I am having fever upto 103 degree. I don't think I shall be able to do anything in this condition. Moreover, it is since a year now that I have stopped accepting out - door appointments to reduce the load of work on me.

My dear Sir, he said, "We can do one thing, you remain at your place and I shall come to you along with the patient's son. I am confident of your ability. I have personally talked to and observed the patient. Since I am conversant with your method of case taking, I think I shall be able to answer your questions correctly. I am sorry for the inconvenience, he added further but it is worth taking, who knows just a single dose from your hands may give him life and fame to the potential of Homeopathy".

I said, I do agree with you but let me, tell you, why I feel reluctant to take up such cases. Because in general the proper co-operation needed to select the remedy does not come. It has obvious reasons. One is the positiveness of the near ones that the patient has no chances of recovery. 2nd is out of sympathy they feel better he dies instead of living a miserable life. In certain cases they feel spending any penny on him would be useless.

Comments:

Why I am telling you this, because these situations you may also have to face. You have to be very honest and open with your patient. Don't involve yourself in a false prestige. If you are open with your patient his confidence, in you, gets more firm If you feel you are not in a position to take up a case you should straight away refuse and apologize for your inability. After all you are also a human being at times you may not be in a position to perform as expected.

In most of the cases they are bothered about their own ease as their reserves seemed to be drying, not only in terms of money but also in mind and body. Thus their enthusiasm touches the lowest ebb. Life seems to be full of restrictions and at a standstill, they have to stop every other activity, for how long. The only thing they are interested in, is to silence the cries of the patient which disturb their sleep and peace of mind.

The person (the caller on phone) said, this is hundred percent true and added further in this case also, he had the difficulty of persuading the party and ultimately succeeded only on the plea that they were fighting a loosing battle and there was no harm in trying another source. The time was fixed, and they arrived as decided.

The son of the patient started relating the history.

He said, "It is almost a year now that the patient has been suffering from cough with pain in the chest without any relief. He was on allopathic medicine. After investigations in Nov. 94 it was found that he had cancer of the lungs and liver. Since liver was involved the idea of surgical treatment was set aside. Chemotherapy was suggested which was started immediately.

After taking the first course of chemotherapy the patient started feeling its very strong adverse effect on his mind on the very next day.

REST, desire for

(S = Son, F = Father)

For the 1st time in his life he expressed his desire to absent himself from his business for that day.

S. What is the matter? He was asked.

DELUSIONS, wealth of (Short of nothing)

F. Nothing. Just that I will take rest today.

DELUSIONS, poor he is (Short of something)

REST, desire for (A pause after work)

LIGHT, desire for (Lighter in body and mind, free from any pressure)

In the evening when we wanted to discuss with him something about our business.

QUIET, wants to be repose and tranquillity desires

F. He said no, we will do it tomorrow.

S. The next day also he said we will talk about it some other time and gradually day by day the stage came when he totally closed the door for anything to mention about the business.

UNCONSCIOUSNESS, interrupted by screaming

And in a few days time we found him occasionally taking to a different type - of mood of talking to himself,

FEAR, death of

DELUSIONS, die he was about to

"I can't be saved" and would cry out loudly in a state of fright. "I'll die soon, I'll die soon, I'll die soon".

STARTING, fright from

FRIGHTENED, easily, waking on

ANGUISH, weeping when

HIDE, things

FRIVOLOUS

And in the end would start weeping when asked what was he talking about, he would quickly wipe out his eyes and say nothing, nothing and try to normalize his mood, and laugh.

LIGHT, desires for

LAUGHING, speaking when

The other side-effect of the treatment was that he lost his appetite, an MD in medicine was consulted. He prescribed and changed many medicines which did not work. Obviously he was not accepting any food. When argued that in the opinion of doctor, he must try to eat something, even if he was not hungry.

MOOD, repulsive

ADMONITION, kindly agg.

(When his wisdom is being questioned)

He would get annoyed at this suggestion and would say, "Do you think I am a fool, I too know that the food is essential for existence but how to eat without any appetite.

RAGE, medicine from forcible administration of

You want to force things through my throat that I can't do". *Says with extreme anger.*

As this state was continuing the time for the next course of chemotherapy arrived

DELIRIUM, crying with

DESIRES sleep for tranquillity[*s]

The second course took away his sleep. He felt extremely tortured and desperate and started crying as a mad person.

"Bring, me sleep, Bring, me sleep".

He was prescribed Tranquilizers and pills for sleeping. Gradually raising the quantity of the drugs. But even the heaviest doses could not help.

DESIRES, sleep for tranquillity[*s]

CARRIED, desires to be fast

Instead the over drugging done under the condition of helplessness gave tragic side affect, it disturbed his motor system. His right arm and the leg started jerking very severely which added further to the worsening of the condition of his sleep so strong was the urge for sleep that when at times there came spells of feeling that perhaps he could sleep he would beg everyone to leave his room instantly

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[*s] *Marked rubrics are added by Dr. Sehgal*

and put off the lights.

CARRIED, desires to be fast
LIGHT, desires for
ATTENTION, wants[*s]
(FEIGNING, sick)

But the jerking would not allow the effort to succeed. Within moments after realizing the futility (uselessness) of his attempt he will like everyone to come back in his room with the same speed with which they were sent out. Then he would want each and every member of the family to be in attendance on him. Someone should press his head others his hands and arms and still others his legs and feet etc.

CARRIED, desires to be fast
DELUSIONS, sensations misrepresents his
SYMPATHY, compassion
DELUSIONS, great person, he is a
BENEVOLENCE

The other problem that developed was the prostration of his prostrate glands. He would get a strong desire for urination very frequently and would like to be helped to the toilet at once. Most of the time the urge for urine would turn out to be false and remorsefully would tell the nurse Oh! I have unnecessarily bothered you.

The other thing is that he lost his speech and hardly could muster a word out of his tongue. The patient was a well to do person and could afford to appoint all types of medical expertise to be available to him at short notice at his residence. He had also developed family relation with them who would oblige him with courtesy calls to console him.

LAUGHING, speaking when
QUARRELSOME, without anger
LIGHT, desires for
JESTING, ridiculous or foolish

When someone of them would come to him he would laugh and tell them in a quarreling way, without disturbing his own mind.

Oh. Dr.'s see the condition in which you have landed me. The family members would take these jests as insensible although they felt he was justified.

So this was the state when the experts attending on him were at their wits end and

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[*s] *Marked rubrics are added by Dr. Sehgal*

were compelled to conclude that no medicine on earth could help him to sleep and restore order to his motor system.

So it was at this critical state that homeopathy was being given a chance as a loss resort which for us, homeopaths should not be a matter of astonishment.

Homeopathic medicine was given on 13th Jan. 1995 and was instructed to report after 1 week.

As usually I do I told the patient's son if the selection of my medicine is correct, as a test it should immediately bring alleviation to the agonizing part of his disease and to start with it should meet the topmost need of the patient

P.P.P.

As for example your father is crying for sleep so it is the sleep first and foremost that should start getting restored and thereafter the speech, then the order in the motor system and the terror of death and gradually the appetite and general efficiency.

First action

I call this as the first action of the medicine. This may last for one hour, one day or one week or even more depending upon the reactivity of the individual's system.

Second action

Thereafter will begin the second action of the medicine which means the return of all the complaints with lesser intensity, duration and frequency. This will be an indication that this return of complaints will not be owing to the influence of the disease but to the action of the medicine which is trying to drain out the toxic matter [the real cause of the disease] deposited in the body through any or all of its natural outlets that is nose, mouth, urethra, anus and skin which would remain for odd number of days 1,3,5,7,9,11,13,15 etc.

Difference between PPP and King Pin

It is not necessary that the King Pin symptoms is also present, persistent and predominant.

In this case the PPP is:-Bring me sleep, Bring me sleep. Sleep is to be interpreted as repose which is required to achieve permanent peace i.e. tranquillity, for which the rubric will be "QUIET, wants to be repose and tranquillity desire".

INFERENCE

It proves it is the self-healing mechanism which comes to play its role and is controlled by the mind.

That is why we can call it Natural healing.

MANAGEMENT

Reported on the 3rd day

After an hour of taking the dose the patient went to sleep and continuously slept for two days. Occasionally accepting food not much in quantity but without getting annoyed. The frequency of jerking and the urge for urination also went down. Colleagues already treating the patient amazed they said, "it was unbelievable, it was wonderful".

The son of the patient rang my friend hesitantly, saying - We don't have the courage to ask the Dr., please get it confirmed from him, Has he given a heavy dose for sleeping? They were told, it was because of the system which was very badly starving for sleep - the starvation which was putting the survival into danger. It had to complete its requirement to be able to save itself. There was a blocked which had been cleared and the flow of the sleep was back.

On the third day his refusal to eat anything converted into demand for food. He asked to eat something. Previously he used to get angry just on the suggestion for eating. On the fourth day he went outside the room, on his own without any assistance to sit in the open and bask the sun.

On the fifth day the relapse of all the ailments which was expected to occur anytime and any day came - extreme insomnia,

accelerated jerking of limbs and restlessness with strong fear of death.

LIGHT, desire for

Since the family was not able to follow the new norms of the action of the medicine they requested me to pay a visit and explain why this relapse. I was taken to the patient's room. The first thing that the patient told me that I should express my opinion about the chances of his survival in his presence as he did not want to live in the dark. Ignoring the patient's request they were told that this is the 2nd action of the medicine, this return of ailments means some discharge is ahead. 'Yes' they said, "The patient was having a feeling of nausea and some disturbance in his abdomen.

"He may vomit and also pass stool". They were told and thereafter relief should ensue. It happened as expected. He vomited thrice and passed stool for six times followed by good recovery. He slept for longer period than the last time and had good appetite.

Thereafter followed the second phase of the eliminatory process with awful return of the symptoms after the next 4 days.

Again I was requested to visit them. The difficulty with certain people is that inspite of being educated repeatedly almost every time they visited me - about the working of the new method which restores proper efficiency in the two major systems i.e. assimilatory and eliminatory to bring back health which lasts over many phases, they remain blank and keep asking each time it happens. Perhaps for assurance.

NATURAL HEALING

To make things home I gave them a simile that the Natural Healing is like an army's advance. It is the principle with the army that after every advance, it takes a pause to consolidate its position (to have complete control over the area captured for making a firm ground for a further advance). During the period under first action i.e. calm by getting

sleep etc. the body has been fortifying its defenses. Now during the second action it has taken a leap forward to liberate itself from the enemy forces (toxic matter) a further step towards regaining total recovery. This attack is also a sign of something about to come out of the body which will be followed by further relief. It happened accordingly. I was informed that soon after I left their house the patient passed stools and became normal thereafter.

In total, the recovery was very good. Due to ailments he had abandoned the religious practice of meditation for the last six months which he resumed on the 10th day of taking the medicine. The extent of overall relief can be measured from this action of the patient.

Another wonder in the words of the family Drs. who were attending him daily and watching the progress was the improvement in the Hb (Hemoglobin) count. Before the start of the treatment i.e. on 13/01/95 it stood at 8.2 and it increased to 10.2 by 25/01/95 and WBC count reduced to 10680 from 14200.

In their opinion the malignancy from liver was clear because without that the increase in Hb. Count was impossible.

Unfortunately the patient died a natural death, after three days.

Let us analyze without any whim the action of (Chemotherapy) the allopathic drug and the Homeopathic purely on scientific ground to reach the truth about the real cure.

WHAT IS CHEMOTHERAPY?

It is the treatment, by chemical substances having a specific effect on the micro-organism. Causing disease without injuring the patient (Dorland's pocket medical dictionary 21st edition).

OR

It is the treatment of disease, by means of chemicals that have specific toxic effect upon the disease producing micro organism or

that relatively destroys neoplastic tissues.

But in this case the patient was badly injured.

ROLE OF CHEMOTHERAPY

To understand the things properly the meaning of chemotherapy has already been mentioned above. It promised to destroy the neoplastic tissues in return for self-rule. For its operation it took over the command of the body as a whole by asking the indigenous defense organism to surrender and vacate the barracks and tried to do things in its own way as is the rule with any foreign domination.

WHAT ROLE DID THE MEDICINE SELECTED ON NEW, REVOLUTIONIZED METHOD PLAYED?

It restored health by regulating the two major processes in the body that is of Assimilation and Eliminations, which means after taking the medicine the first action as stated above did the job of helping the body to meet its deficiencies through normal in take of food and drinks in the cycle of 24 hr. (assimilation). After the first action ended the second action of elimination resulted as a consequence of restoration of proper (nutrition). Because the inefficiency created by malnutrition of the body as a whole including the functionaries responsible to throw out the waste i.e. autonomic nervous system *(The portion of the nervous system concerned with regulation of activity of cardiac muscles, smooth muscles and glands.)* was now over and the self cleansing process functioned with optimum efficiency.

HYPOTHESIS - THE INFERENCE DRAWN

One feels convinced to draw the inference that instead of governing the system it assisted the body to heal itself (to regain natural healing) in the same manner as a faithful friend, servant or well-wisher helps without asking any reward and by ending its own existence.

CONCLUSIONS:-

(The test of curative medicine)

It is quiet clear from the above analysis that the medicine belonging to any system including Homoeopathic will act curatively only if it assists the 'Natural healing system' in the body to regain its independence. Others will be

acting just as palliatives and suppressive measures and do more harm than good.

REVOLUTIONIZED WAY OF PRESCRIBING :-

It is to be recalled that the R.H. prescribing is based on present, predominating and persistent mental states without going into the History of the case or looking through any miasma etc. or hunting for rare and peculiar symptoms. It is to elicit from the way your patient is expressing himself spontaneously in the form of speech and actions. This expression if converted into the rubrics of mind the remedy common to them is your remedy.

In this case Belladonna was found indicated which proved to be a true similimum. It was selected keeping in view the following expressions.

RUBRICS	***VERSIONS (Expressions)***
BEGGING, entreating	BEGGING for sleep
FEIGNING, sick	WANTED attention
QUIET wants to be desires repose and tranquillity for.	MAKES efforts for sleep to gain peace.
UNCONSCIOUSNESS, interrupted by screaming	OCCASIONAL fear of death overwhelms
LIGHT, desire for	Tells the Dr. "please talk, whatever you have to say in my presence"
FEAR, dark of	WANTS to know in clear words what is in store for him.
ANGUISH, weeping with	Feels discomfort at the thought of untimely death and weeps then lightens his mind by accepting it as HIS wish will try to overcome his weeping quickly lest others may note it'.
FRIVOLOUS	
HIDES, things	
LAUGHING speaking when	Ends it with laughing

BELLADONNA (The indicated medicine) helps even in terminal cases of cancer.

Let us ask ourselves a question. Would any one of us think of Belladonna in dreaded diseases like Cancer, TB etc.

Shall we not first of all screen our selection to find out to which miasma it belongs and thereafter try to hunt for rare and peculiar symptoms of a remedy in a person (as we mostly do) or of a person in a remedy. And still further getting down to grades and generalities mixing physicals etc. leaving it to the fortune of a person whether it hits luckily or not.

So, the argument in favour of the new methodology is where it saves time and affords certainty to selection of remedy, it upholds the principal of indicated remedy without bias.

Why a case of Bell. has been preferred to explain the new concept ?

Because my experience speaks that Belladonna

1. Gets indicated in more than 40% of cases all over the globe with curative effect.
2. Which is set aside as an acute remedy lasting its action for over 24 hr. infect acts for more than a year and cures so called chronic diseases also.

CONCLUSION:- Because of these traditional prejudices, there will be other remedies lying neglected, narrowing their field of application and effectiveness

Case # 2

Lession

This case present the general nature of Belladonna where the person himself is not bothered about his disease, others have to take initiative for his treatment.

In this case PPP (Present Predominating and Persisting mental state) is "FRIVOLOUS"

Miss A, 15yrs. Giddiness, blurring of vision, headache frequent fever running upto 101 F-103F complete loss of appetite with anemia.

DIAGNOSIS:-

Anemia.

CONVERSATION:

Her mother accompanies her, who starts speaking for her daughter, Sir, "She gets angry very easily."

Q. There should be some reason for that?

RAGE, medicine, from forcible administration of

LAUGHING, speaking when

A. The girl takes over "Sir, let me tell you she presses me to eat. How can I eat when I don't feel like eating", she laughed and said with brightness in her eyes and no burden on her mind.

LIGHT, desires for

"That is correct" I remarked. Interjecting a pleasant gesture into the conversation.

MOOD, repulsive

All of us laughed and the girl addressed gaily with winning looks towards her mother.

Q. Are you worried about all this?

FRIVOLOUS

A. She laughs, "my mother does on my behalf."

Q. What is your behavior during the fever?

QUIET, wants to be, repose and tranquillity desires

A. At that time I don't want any one to speak to me. I will simply like to lie down, put off the lights and take rest.

Q. Do you talk to anyone about your sickness?

HIDES, things

NAKED, wants to be

A. Yes, if necessary.

Q. Do you make noise during the acuteness of your sickness?

NOISE, desire to make

HIDES, things

A. I would like to do so, but because of my mother as she gets perturbed I have to be quiet.

RESULT:

On November 1st 1992 Belladonna 30, was prescribed. Improvement started as expected restoring general efficiency in the body day by day followed by nasal and anal discharges. The girl recovered within five months.

Reported on 7-11-92.

- Feeling better

- Appetite revived

- Had coryza for three days.

Placebo for two weeks.

Reported on 21-11-92

- Had two episodes of two loose stools for tree days in 1st week and the same in the 2nd week.

Placebo for two weeks.

Reported on 30-11-92

- Had fever for five days 1-12-92 to

5-12-92.

Placebo for two weeks.

Reported on 15-1-93.

Nothing to report improving over all put up weight with glow on the face.

Placebo for four weeks.

Reported on 16-2-93.

- Slight feverish feeling and general laziness with slight loss of appetite for one week.

Placebo for four weeks.

Reported on 14-3-93.

- Overall improvement.

Placebo for four weeks.

Reported on 13-4-93.

- Feel totally alright.

Advised to discontinue medicine.

No relapse thereafter.

Case # 3

Lesson

This is also a case presenting the General nature of Belladonna but slightly different - he is compelled to take the treatment because his disease creates difficulty for him while communicating with others which results misunderstanding.

In this case PPP (Present Predominating and Persisting mental state) is "FRIVOLOUS"

Mr. D. 35 years, final year student belonging to a reputed Homeopathic college in a European country who attended my seminar on 12th of September 1992 and was fascinated by the new idea and approached me for treatment. He was suffering from Tinnitus (Sensation of - high pitched noises in the ear and head).

Conversation with the patient:

Q. How much is the impact of the noises on your mind?

DELUSION, wealth of

A Laughingly he replied not very much.

Q. But why then you are interested in taking treatment?

LAUGHING, speaking when CALCULATING, inability for
DELUSIONS, sick being
DEFIANT
MOOD, repulsive

A Laughs and swings his head as if trying to find out the answer and speaks after sometime "It is really a handicap and I want to remove it".

Q. Are you very serious about it?

SERIOUS, earnest
LIGHT, desire for.

A. Of course! If it can be cured

Q. If I say it is not curable?

FRIVOLOUS?

A. Then I have to live with it.

Q. Will it bother you

DELUSIONS, sick being

A. Only that I am handicapped.

Q. Any other feeling connected with it?

HIDES, things

A. 'Nothing'. (But in his tone and style I found an element of hiding).

Q. I asked him in a straight way, are you in a habit of hiding things?

NAKED, wants to be

A. "Yes, many things, for example, I shall not talk to anyone about my sickness unless it is very necessary. I had to disclose it to my wife after a very long time as because of the disturbance in my mind I was not properly attentive towards her for which she used to get annoyed".

RESULTS:-

Belladonna 30^c was given on 14th of September 1992.

We met after two years in 1994. Reported that he was quiet well and never felt any problem thereafter.

He was not keeping any systematic record of discharges from nose and ear, which he said he had been having upto middle of year 1993 say upto June 1993 and thereafter had no complaint and was feeling fine since than.

Case # 4

Lesson

This case denotes that nobody would have thought and believed that Belladonna - in just one dose would clear the case of its dimension which involves many diseases.

In this case PPP (Present Predominating and Persisting mental state) is "NOISE inclined to make (to get attention of husband)

Mrs. X 48 nurse from west Indies settled in London.

PRESENT COMPLAINTS

Pain in multiple joints, chest extending to left arm and numbness of right hand. Also hypertension, sleeplessness and lassitude. Bleeding piles, Cervical spondylitis for last 8 years.

LAUGHING, speaking when

CARRIED, desires to be fast

DEL ., wealth of (when she is in the normal mood she gives the impression that she has no problem)

Gives a very pleasing look, smiling, laughing. Before waiting for me to question, she starts "I remain tired all the time".

LAUGHING speaking when

While you observe her talking you will feel that the laughing is coming down to smiling and suddenly ending in seriousness while delivering the words

UNCONSCIOUSNESS, interrupted by screaming

"I remain tired all the time" as if coming out of unawareness about self for a moment to return to the same state immediately thereafter. (just as a bus stops, drops a passenger and takes off gradually to attain swiftness in the end).

Q. Are you attending your job?

A. Yes.

Q. Any problem?

DELUSIONS, wealth of

A. No.

Q. Is it with the same efficiency?

DELUSIONS, poor she is

FRIVOLOUS

DELUSIONS., wealth of

REST, desire for

TRANQUILLITY sleep after[*S]

QUIET, wants to be, repose and tranquillity desires

HIDES, things and

NOISE inclined to make

QUIET, wants to be, repose and tranquillity desires

FEIGNING, sick

A. No, how is it possible and also I am in the middle of the age, with so many ailments.

Q. How much you feel you have gone down?

A. Not that bad, I am still doing well.

Q. Do you get good sleep?

A. No, I wish it.

Q. Do you get fresh after sleep?

A. Of course, when I really get it and in desperation sometimes I have to take a sleeping pill.

Q. When do you get pains?

A. Usually in the night and in the evening.

Q. Daily?

A. It is with me all the time but within limits but sometimes it becomes unbearable.

Q. Any periodicity?

A. No, it has no fixed time.

Q. What have you to do when it becomes intolerable?

A. Lying down.

Q. Do you make noise during the pain?

A. Laughs and says "ask my husband".

Q. Is it continuous?

A. It is at intervals.

Q. What is your general mood during the pain?

A. To remain quiet.

Q. Do you like to talk about your sickness to anyone?

A. Not always, and to none else than my

[*S] *Marked rubrics are added by Dr. Sehgal*

husband and that too only when he becomes careless about me.

Q. Are you too demanding on him?

LIGHT, desire for(Likes to keep her mind free of any stress.)

A. Laughingly, in a very light mood she says " No, no, no" not that way.

RESULTS:-

Belladonna 30 was given on 11th August, 1992. As they were told that this one dose may last for many months and that the medicine will give two types of actions **first** being restoration of the general efficiency and second being eliminations followed by aggravation in the present ailments which is some time very hard to believe. Her husband was also wanting to start the treatment but he said he will come next week without making known his real intention. They reported after a week, she was now sleeping well without the aid of sleeping pills. There was a marked improvement in all the complaints and as expected the patient was contented as she had the feeling that she was recovering. I stayed there upto 17th of Sept. and the couple was happy.

Next I had the chance to see her in Oct. 1994. She reported the whole of year 1993 - was full of first action and second action i.e. relief and returns of complaints with discharges from nose and bleeding from anus alternately the phases of 2nd action mostly lasting for five days, with every phase coming lesser in intensity, duration and frequency. The pains, numbness and general weakness were improved.remarkably. She said she had no complaints after Nov. 93. The couple was all praise for the system they said yours is really a wonderful way of healing.

Case # 5

Lesson

This case proves that the Belladonna covers almost 40% of the cases all over the globe irrespective of Nationality. In my opinion the case taking

should be in private and not in the presence of anybody else. Because patients especially women will not like to open before everybody. Someone from the audience in a seminar tried to correct me by saying, 'It is Europe here people are quite open, you will have no problem like that.' This case proves the opposite. It has been observed that irrespective of cultural, civilizational and educational difference the basic sensitivities as human beings remain the same e.g. there is rubric TIMIDITY, bashful. Here this is shyness in talking to other about something which one feels is personal and private to him - like about disorders relating to ones sexual organ.

In this case PPP (Present, Predominating and Persisting mental state) is "CALCULATING inability for"

A case of a girl belonging to Israel. She is in her early 20's comes to me with her family physician and tells that her mother has sent her to him (family physician).

Q. What for has your mother sent you to him?

SUPERSTITIOUS [5]

A. My mother says, I am a mental patient.

Q. Do you believe your mother?

SUPERSTITIOUS OBJECTIVE reasonable

A. I don't know (as if she doesn't know her mind) perhaps yes, if she says then it may be true.

Q. Do you believe you have any problem?

A. Yes, I do believe.

Q. What is your problem?

CALCULATING, inability for CARRIED, desire to be fast HIDES, desire to

A. She knocks on her head with the fore-finger of her right hand as if putting pressure on her head and after a pause says with a haste, as if quickly to wind up, "I don't know".

Q. How did your mother conclude that you are mentally sick?

QUIET, wants to be

A. Because I remain sad and quiet all

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[5] SUPERSTITIOUS: Because it is not necessary that the judgement of her mother must be correct.

OBJECTIVE reasonable

these days.

Q. What else do you do throughout the day?

FEAR , dark of

LIGHT, desire for

CALCULATING, inability for

QUIET, wants to be, repose and tranquillity desires

A. Just lying down and doing nothing, thinking, thinking, thinking, and ultimately when I get nowhere, I try to go to sleep.

Q. Do you get relief after sleep and feel fresh?

REPOSE and tranquillity amel.

A. Yes, of course it is so.

Q. What remains the subject of your thinking?

LAUGHING, speaking when HIDES, things

TIMIDITY, bashful.

A. She laughs as if shy of her condition of mind and of divulging the topic of her worry.

NAKED, wants to be

DELUSIONS, poor she is (feeling that she is at loss)

CARRIED, desires to be fast

After a pause, she starts with the same typical laugh with hesitation, shame and shyness says, " I have a boy friend, I get a feeling of burning in my vagina after I have met him (sexual intercourse), but this is not the real problem" hurriedly she adds and jumps over to what she has to tell next.

DELUSIONS, wealth of

"Actually that is not the problem". Again she takes a pause, and restarts, "He loves me a lot ". He is a very good boy, very honest and really loving but there is one bad thing.

FEAR, dark of
SENSITIVE, light to
FEAR, dark of
MOOD, repulsive
DEFIANT

He wants me to wear showy and shiny dresses tailored in a manner keeping one's body half-naked. This I don't like. It is an extreme for me.

I can adjust to some minor variations in my liking but can't give up all. This is putting me into a fix.

CALCULATING, inability for

I am not able to decide whether to discard the boy or my own liking.

Q. What is the difficulty?

FEAR, poverty of.

A. I become fearful when I think of leaving him

Q. Why do you fear that?

LIGHT, desire for
FEAR, poverty of
DELUSIONS , wealth of (possessive)
FEAR, poverty of

A. I am definite, that it will take away from me the pleasure which I derive from the association with him and if I decide to continue with him I shall be losing my freedom (of choice how to live and dress myself) for the whole of life.

CARRIED, desire to be fast
QUIET, wants to be, repose and tranquillity desires
ADMONITION, aggravates
QUIET, wants to be, repose and tranquillity desires

She continues, "And apart from this I am interested to make a final decision as early as possible because this is hampering my studies which will mean failure in the examination and ultimate financial loss to my parents which I myself don't like. More-over they may all be annoyed and rebuke me for my bad performance and all this cumulatively will be taking away my peace of mind."

Bell. 30 was prescribed.

Since immediately after consultation the patient had to leave for her Home Country, no further information is available. The point in publishing it is its typicality that lies and different Nationality.

Case # 6

Lesson

This is a typical case of "FEIGNING sick" where a patient annoys you to the extent that you have to keep him at a distance.

*In this case PPP (Present Predominating and Persisting mental state) is "EXAGGERATES[*s] his problems to draw maximum attention" or "FEIGNING sick excessively"[*s]*

Patient — Mr. Y, 52 yr.

Ailments — Copper colored scales with wet gluey matter, form and drop after scratching and in a chain go on recurring but was diagnosed as Psoriasis.

Suffering since 1994.

NAKED, desire to be
DESIRES, attention excessively[*s]

Enters my room, sits in front of me and without waiting for me to ask him anything he lifted the covering of his body laden with thick scaly matter and started scratching it. He sat so closed to me that I had to tell him to keep a little distance.

FEAR, dark of
LIGHT, desire for positively (searching for a ray of hope)

Sir, tell me frankly Is this curable?" And in a very curious manner he asked me, Sir If you don't mind may I ask have you cured any case like this before. I have come with a great hope. Somebody has told me that you can cure me.

His gestures were embarrassing as he was spreading the scratches of his skin around. I told him to keep his body covered and stop doing all that and assured him that I could judge even without seeing his skin, the volume of his suffering? He simply needed to answer to what he was asked.

UNCONSCIOUSNESS, interrupted by

But he kept on doing and said "Sorry, Sir I am sorry, but it itches like anything and I can't stop scratching it". *Perhaps forgetting about*

[*s] *Marked rubrics are added by Dr. Sehgal*

screaming[1]

the surrounding.

Q. Do you get relief by scratching?

QUIET, wants to be, repose and tranquillity desires LIGHT, desire for

A. Yes.

(wants to be relieved of the agony by scratching to get peace of mind and body)

Q. Where it ends?

A. Only after when it starts weeping.

Q. How do you feel thereafter?

ANGER, with himself UNRELIABLE, promises in his

A. Very bad. I get angry with myself and determine not to do it again but when it starts itching I can't hold myself.

Q. What else do you do to comfort yourself?

LIGHT, desire for

A. By applying coconut oil. That is only when I am at home.

Q. What is your job?

A. I am a travel agent.

Q. How do you manage it when you are at work?

QUIET wants to be, repose and tranquillity desires

A. I have to rush back home.

Q. Do the business people know about you?

HIDES, things

QUIET, wants to be repose and tranquillity desires

A. No, Sir. How can I do that. People will start hating me. No one will allow me to sit by his side. Thank God it is not on the face.

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[1] *It is a state of complete unawareness that he scratches and spread the skin dust around and realizes his mistake only on reminding.*

HIDES, things

Q. But you have it on your hands?

HIDES, things

A. Of course, but it is on a small portion and I am able to cover it. I had it on my face but somehow it is no more now after the Allopathic treatment.

Q. What do you do after coming back home?

QUIET want to be, repose and tranquillity desires

A. I change my dress scratch a lot and go to sleep thereafter

Q. How do you feel after sleeping?

QUIET, becoming and repose, amel. [*s]

A. Better.

Q. Since how long have you been suffering from it?

A. Since early 1994.

Q. What is the impact of sufferings on your mind?

ANGUISH, weeping with

HIDES, things [Because the facial expression shows that he is in discomfort which he doesn't want to show]

A. Nothing If I have to suffer, I have to suffer. But this time his eyes were wet.

Q. Do you weep also?

BOASTER

HIDE, things

A. That stage has not come , I am still strong.

Q. But your eyes are wet?

HIDES, things

ANGUISH, weeping with

A. "That is nothing Sir, that is nothing", wiping he said and laughed to cover his weakness.

Q. Well now you need to listen to me attentively. If my medicine is correct its test would be that it would give you relief in all

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[*s] *Marked rubrics are added by Dr. Sehgal*

respects in the first instance. Then thereafter the same complaints will come back anytime, but the intensity, duration and frequency will be lesser and within your endurance.

Q. *He asks with great concern* - "Will it come back on my face also?"

A. May or may not be.

DELUSIONS , poor he is
BUSINESS, talks of
FEAR, paralysis of

Q. Sir, it will be very difficult for me to pay attention to my business. The meager livelihood which I am earning will suffer because it will mar my movements I won't be able to move about openly in public.

DR.'S ADVISE :-

Dr. tries to prevail upon him and acquaint him with the right course.

"I do realize your difficulty. But how long will you be pleasing yourself with the falsehood because day by day the disease will be multiplying itself, unless it is fought on the right lines. So you have to prepare yourself, mentally for the right priorities."

LIGHT, desire for, positively *s
CARRIED, desires to be fast
YIELDING
SUPERSTITIOUS

A. Alright Sir. But can you give me guarantee that I shall definitely be cured. (Here the patient seems to be finding himself in no get away position and is trying to yield to a forced compromise).

Dr - It is only the God who can give guarantee. We are all human beings we can simply make efforts and I believe, HE rewards if the efforts are honest and sincere with devotion.

PRAYING
EXAGGERATES, his problem to draw maximum attention *s

A. Sir, for me you are the God I need your kindness.

I have full faith in you. I think I will be cured.

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*s *Marked rubrics are added by Dr. Sehgal*
*s *Marked rubrics are added by Dr. Sehgal*

Q. Why have you faith in me?

SUPERSTITIOUS

OBJECTIVE, reasonable

A. One is your fame and the other is your plain talk.

Bell. 30 was prescribed with Sac lac for 1 week.

Reported on 7th Feb. 1996.

BEGGING, entreating

He repeats the same exercise of baring his skin and starting scratching it dirtying the surroundings. Looks at my face exactly as a beggar as if asking for some special attention.

CALCULATING, inability for

"Sir, there is no relief might be there is something but

I can't say for certain".

Q. Do you feel yourself a little bit active than before? As I remember previously you were saying that you don't feel as efficient as one should feel at this age.

HIDES, things.

A. Yes, a little bit.

Q. What is it that he is hiding?

A. The real progress.

Q. Why?

A. Because the tendency is to draw my attention to what is left from what is achieved to guard against the possibility of my giving him lesser attention than before.

Dr-. But your voice is forceful this time. It is not depressed as it was on your previous visit?

HIDES, things to keep the high degree of attention in full swing [*s]

Pt. "Might be Sir, you are the better judge. But Sir, can you tell how long it will take to get rid of it"?

CARRIED, desires to be fast

Dr. That I can't say.

Pt. "Some rough idea".

AUTHOR'S REMARKS:-

I was a little careful to answer and satisfy the query of the person to tell him that it may take 3-5 years as the tendency was towards carried, desire to be fast, I told him it depends upon the individual's reaction to the medicine. It may take, 1 day, 1 week, 1 month, 1 year or even more.

LIGHT, desire for (positively) [*s]

With dim looks and diluted enthusiasm he asked,

"Shall I recover for certain?"

Dr. Of-course you have started recovering.

LIGHT, desire for, positively(s*)

Pt. "Thank you Sir, thank you Sir". His face brightened as he wanted to hear this.

Sac lac for 2 weeks.

Reports on 21st Feb. 1996.

Sir, it has spread to other parts of the body also. See my face and also my head it is very irritating and is beyond my tolerance.

Dr. I think I forgot to tell you that you have not to apply any type of soap, ointment etc. on it.

Pt. Sir, then how to clean it.

Dr. Wash it with hot water as hot as you can tolerate and then dry it with a clean towel.

[*s] *Marked rubrics are added by Dr. Sehgal*

[*s] *Marked rubrics are added by Dr. Sehgal*

Otherwise it will irritate your skin to the maximum and obstruct the healing.

Pt. But Sir, it is impossible to shave my beard.

Dr. You can stop shaving for sometime as long as the eruptions remain.

Pt. But Sir, it will look very odd. My hair are white and how shabby look the grown beard will give.

Dr. Oh! it is going to be a temporary phase don't worry.

MAGNETIZED, desire to be

MESMERISM amel.

[He wants to look young and charming]

Pt. "What about my head Sir, can I apply the dye"?

Dr. No, if it is full of eruptions you have to wait till it is cleared of the eruptions altogether.

PLAY, passion for gambling to making money (Compromising as desires light because somewhere he has a hint for recovery)

Pt. "Oh! Sir how bad it will look" in a semi-agreeable mood he said.

Sac lac for 2 weeks.

Reported on 6th March 96.

Laughs and says petting with both hands on both sides of his face pointing towards his well grown beard says, "Sir, see my condition. How long it is going to last. I have stopped going to my place of business and I am trying to manage things on Telephone."

UNCONSCIOUSNESS interrupted by screaming

Dr. So, you are happy. Sooner I said these, words he lifted his shirt baring his chest and back and started scratching his skin, once again unmindful of my reaction to it.

LIGHT, desire for positively, EXAGGERATES, his problem to draw maximum attention SERIOUS earnest

Pt. He is moving his hands and says, "See Sir see my condition" and become serious.

Q. But don't you find the change? he was asked.

A. It has swelled further and it is swelling like anything day by day.

Dr. He had to be educated about the course the disease takes after the Homoeopathic medicine starts acting. I told him betterment will start from above downward. 1st it will be head then face and downwards towards chest, abdomen, legs and ultimately toes.

Pt. Repeats "Sir, how long will it remain like this."

Dr. I think it should not take long as the things are proceeding in the right direction.

Then he started brushing his head with his hands. dropping a lot of white colored dust and says, Sir, see.

Dr. Oh! It is very good sign. Do you feel any change in totality of your health.

Pt. "No."

Dr. Previously, you used to scratch something which was in the shape of scales. Now it is in the shape of powder which you are dusting out of your head, beard and the other parts of the body. Where the skin is clearing there is no reappearance of the eruptions. Do you find certain spots of the skin totally cleared.

Pt. "Yes Sir that I do admit". *Still his face*

Marked rubrics are added by Dr. Sehgal

does not give much of cheerful appearance and says, "You know better Sir, it is for you to judge".

Dr. I admonished him.

"What type of a person you are? You are recovering and still you are not happy with your progress."

STARTING, startled fright, from and as from

He (patient) started as if frightened and said, "I do admit, Sir it is your kindness and added further. I forgot to tell you sir that all through the previous 2 weeks. I had loose motions. For about 5 days in the middle they were at the peak.

Dr. Very good. Did you get some relief thereafter?

Pt. "Yes Sir."

Dr. "All right you come after 4 weeks, "And he skipped out of my room mutely.

He is still under treatment. His head and face are almost clear except very negligible traces of the disease on chest ,abdomen, back and legs. Inspite of 95% recovery of skin Lessons without recurrence his way of reporting has not changed. This is typical of Belladonna that even after getting 95% of recovery patients in certain cases will keep on pretending to be very sick and will say "But Sir, such and such complaints are still there" - will never allow their facial to reflect their real extent of recovery. It is to be reminded that he is just on 1 dose of Bell. 30 without any repetition which is giving evidence against the

prejudice that it is only a acute remedy.

Case # 7

Lesson

It is for the reader to find out why this patient could not be cured by the any other method employed in Homoeopathy inspite of the fact that the patient is a staunch supporter of Homoeopathy.

In this case PPP (Present, Predominating and Persisting mental state) is "POMPOUS, important".

Mr. K. 60 years an Industrialist running many Homeopathic Dispensaries on Charitable basis. Fungal infection on thighs, Hypertension and angina on effort.

Conversation with the patient :-

MILDNESS

CARRIED, desire to be fast LIGHT, desire for

While entering my chamber gave very pleasing appearance with humility and started on his own without waiting for any incentive to talk to me, as if with a lot of hope from me.

POMPOUS, important

CARRIED, desires to be fast

Mentioning the name of one of the SSRH's old student, by whom he was refereed he said, "I am suffering from fungal infection and I am under allopathic treatment for the last two years and want your proper attention".

HIDES, things

RELIGIOUS affection

Hesitantly he says, "I have great faith in Homeopathy but because of no relief by Homeopathic medicine I had repeatedly to fall back on allopathy.

DELUSIONS, poor but wealthy [*s]

I am suffering from Hypertension for the last 10 years and angina on effort for the last 6 years but they are not bothering me too much. I am not worried about them. It is the skin allergy that bothers me much, which I am having since childhood.

Q. How it effects you?

DELUSIONS, sick being (become unfit)

A. It comes between me and my business very badly.

Q. Are you not attending to your business?

DELUSIONS, poor but wealthy [*s]

HIDES, desire to

HIDES, things

A. I do, I do, but not with full enthusiasm, because when the attack comes, it puts me into a very awkward position because when I am talking to the customer, I have to make a lot of effort to check myself from scratching, to conceal it from him (customer).

ANGUISH, weeping with

And apart from this it gives me a lot of agony and at this point tears came out from his eyes.

ESCAPE, attempts to

HIDES, things

Helping him to cover up his present mental state which I observed he was trying to manage. I said, "How do you take life in general?

DELUSIONS, wealth of

I am with no problem. I am getting all that I want.

POMPOUS, important

I command a lot of respect not only from my own children but also from those of my brothers'.

DELUSIONS, wealth of

Being the eldest in the family they all honor my decisions given in settlement of mutual disputes.

QUIET, want to be, repose and tranquillity

Temperamentally I love peace all around me and that is why I try to see that every strife

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[*] *Marked rubrics are added by Dr. Sehgal*

[*] *Marked rubrics are added by Dr. Sehgal*

desires

is settled amicably.

Q. What will you like to do during the attack?

REST, desires for

QUIET, want to be, repose and tranquillity desires

A. Rest in a quiet atmosphere.

CARRIED, desires to be fast LIGHT, desires for

His look gave me the impression that he was anxiously waiting for me to say something positively without delay.

LIGHT, desire for positively [*s]

FEAR, dark of

And without waiting for me he asked me passionately, "Shall I be cured."

Q. Do you mean quick relief?

HIDES things

A. A bit hesitant with shyness he admitted indirectly if it could be so.

Results:-

On March 1993 Belladonna 30 was given. Two weeks later he reported on telephone that he had gradually stopped allopathic medicine as advised. The ailments have aggravated for two days with some headache and disturbed sleep. "My allopathic consultants are not happy over the withdrawal of their medicine. In spite of that I have not yielded and wanted to be instructed further.

"Are you better in general efficiency"? He was asked.

"Definitely", he said. Was advised to continue with the medicine (placebo) which he was having with him

Next he reported on 19th of April BP persisted little on the higher side 140/80 to 165/92 but still better overall, advised to continue with the same medicine (placebo).

[*s] *Marked rubrics are added by Dr. Sehgal*

Next he reports on May 14th that for the last two weeks his B. P. has come down to be normal 135/85 - 140/90 without the aid of any allopathic medicine and have a feeling of betterment with the disappearance of the symptoms of angina but the skin problem increased. This in accordance with the Hering law of cure that the diseases disappears in the reverse order of their coming. He was educated in the beginning that in order of sequence his angina and Hypertension should disappear first and the skin ailment later. Advised to continue the medicine (placebo). Reported on June 14th with further progress on the similar lines and shown an inclination to buy the literature belonging to 'Rediscovery of Homeopathy' for those Homeopaths who have been treating him previously and, who were interested to know the method which teaches treatment with Homeopathic medicine without the aid of the medicine of any other system, especially of the vital organs.

He reported last on 26-11-94, telling that he was almost OK but LIGHT desire for permanently wanted medicine for another two months just to keep more fit.

Case # 8

Lesson

A patient is a patient. He is to be treated just as a common human being and not as a person holding a status in society. A Miraculous cure - A single dose cures within two-three weeks.

In this case PPP (Present Predominating and Persisting mental state) is "DELUSIONS, friends surrounded by" but in fact is overshadowed by 'HIDES things.'

Patient:- A high ranking Business executive, 50.

Ailments:- Insomnia, Anorexia, Masturbates many times - in a day. Refuses to take medicine. Well says he is and was diagnosed as Schizophrenia,

He is accompanied by his wife, 18years old son and 16 yr. old daughter.

Version :-

DELUSIONS, wealth imagination of "My boss is very good, my boss is very good, he is very happy with me". He often repeats this version.

DELUSIONS, friends surrounded by And continues- I have no enemies. Everybody is my friend.

Q. Why have you come to me?

EXUBERANCE

DELUSIONS, friends surrounded by EXUBERANCE A. It is pleasure to meet you, *laughs vigorously.* You are a friend. Like this with every word he speaks, he displays a sense of extreme happiness and vigor

Q. Since when he is suffering from this disease? I asked his son.

A. It is since one year.

Q. Is he going to office?

A. No.

Q. How he passes his day?

A. There are sudden changes in his behavior.

QUIET, wants *to be* Sometimes he will say, "Let nobody talk

repose and tranquillity desires

and make any noise, let me sleep", tries to lie down and after a few minutes becomes talkative with irrelevant speech. and if he is told please keep quiet then he will say -

TALK, indisposed to alternating with loquacity

SPEECH, delirious

MILDNESS

Alright, alright and will try to go out and catch hold of anyone who meets him on the road and start talking to him,

ESCAPE, attempts to be

DELUSIONS, friends surrounded by

reminding him that they are old friends, which is contrary to the fact.

QUARRELSOME

CREDULOUS

To divert his attention, when people tell him go home - your kids are calling you. He will believe them, come back and ask us - have you called me, and when we plead innocence - will start arguing with us.

He easily believes others and anybody can mislead him.

FRIVOLOUS

LIGHT, desire for

"He has always been accommodating", his wife tells about his past behavior.

LIGHT, desires for [1]

FRIVOLOUS

BENEVOLENCE

He takes things lightly. Never bothered about even very serious matters. Very kind and charitable to others.

Q. What in your opinion can be the cause of the derangement of his mind?

A. Actually he was due for promotion. He had very good personal rapport with his boss and had full faith in him for his support but was highly disappointed and shocked to find a junior superseding him. But he never likes to talk to anyone about it.

HIDES, things

PLEASURE, lascivious ideas, in

Apart from his main disease we are worried about his practice of masturbation even in the daytime and for many times in a day and when

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[1] *This shows a part of his general nature.*

QUIET, wants to be, repose and tranquillity desires[6]

he is caught red-handed he promises not to do it again but

UNRELIABLE, promises in his ATTENTION, desires

he fails to keep the promise. The other thing is he will always compel his son to sleep with him in his bed.

Q. Have you ever refused him sex? I asked his wife.

WEEPING, refused for anything

A. Hesitatingly she admitted that was true, because of-late he was too demanding to coup with.

Bell. 30 on 13th of April 1993.

Advised to withdraw all the allopathic medicines.

Reported on telephone on 15th of April 93.

He is sleeping and they were worried whether it was over dose of the medicine.

They were told there was nothing like that.

QUIET, wants to be, repose and tranquillity desires*(the symptoms)*

The system has been starving for sleep since a very long time, it is trying to meet its deficiency. This is natural sleep which will repair the damage caused to brain by long sleeplessness.

Reported on 20th of April 93.

REPOSE and tranquillity amel

Feeling much better and has joined his office.

Reported on 5th May 93, after two weeks.

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[6] *Nothing happens without a cause and our endeavor should be to go behind the things to trace the cause. Here it can safely be assumed that an action which is not dignified if someone is compel to, it means it gives him some sort of comfort and that is why it requires to be placed under the rubric QUITE, wants to be,repose and tranquility desires.*

TRAVEL, desire to
RELIGIOUS, affection

Is quiet normal and insisting for pilgrimage to *a Holy Place.*

I had never expected that there would be no relapse. I warned them, "You may be in trouble. If it happens when you are away from home."

RELIGIOUS, affection

They said, "It is a matter of 6-8 hours of Journey from Delhi and we will not extend our stay there. Let us not refuse him what he desires because he is otherwise also a religious person."

Thereafter they consulted me, he is to us totally cured. Does he require further medication.

I said "Wait till any relapse".

Till today there is no relapse.

They came to me as a lost hope having tried all other methods and the person was cured which was really miraculous to be in such a short time.

It should not be astonishing for Homoeopaths because in our practice it happens sometimes that the patients visits you only once and never returns thereafter which is discovered later on that the 1st dose of a single medicine did wonder and the patient revealed he was cured.

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*s Marked rubrics are added by Dr. M. L. Sehgal

Case # 9

Lesson

How to convince a patient who does not believe in your method and is not much conversant with homoeopathy, to discipline him to co-operate with you while managing his case.

In this case PPP (Present, Predominating and Persisting mental state) is "FEIGNING sick" or "DESIRES attention".

For case taking the principal is, listen to what he (patient) says and observe to what he does former means subjective and the later means objective symptoms.

Patient:- Mr. X. 43 yr. of age.

Ailments:- Had right upper jaw pain Neuralgia Trigeminal Right side, since many years. Remained continuously under specialized treatment of various systems but day by day the impact of the disease became overpowering.

FEIGNING SICK[7]

HIDES, things

He entered my clinic - sat down quietly and after a pause said, "Sir, the pain is so severe that it would be difficult for me to give you the history, so my mother is with me and she will do the job".

His mother told that it was since 1983 that even the highest dose of analgesic (pain - killer) was not working.

She said "Because of pain, the patient could not carry out properly his routine job of personal up keep. Like brushing, shaving, bathing chewing and eating. More so he could not even walk or talk as a result he had to cancel his appointments meant to promote his business. Naturally all this makes him sad."

Q. What do you mean by sadness?

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[7] Wanted attention from his mother- this is obvious as he could come alone without the company of anyone - later on his mother confirmed that when in pain he would want me to be by his side all the time.

ANGUISH, weeping with

DEATH, desires , anguish from

SUICIDAL pain during

LIGHT, desire for

A. "He weeps and says better it was that he died."

While his mother was explaining his case the patient sat with the gloomy expression but it brightened after he was assured that he will be totally cured, if he would co-operate

Q. What type of co-operation?

COMMENTS-

Why I said, if he will co-operate? Because he was more influenced by the dominant school and also had tried homoeopathy and would therefore be convinced only after getting a scientific answer.

A. He was told "You have to empty your mind and view things from a different angle. Mine is a new way of prescribing and managing a case which differs from the other schools including all existing methods employed in Homoeopathy. It is expected of a medicine to give two types of actions first relief in all existing ailments and second the return of complaints with eliminations of the toxic matter. Since prescribing is based on purely the present mental state of a patient. The progress is expected to start from mind. As in your case you develop suicidal tendency with weeping during the pain. Now after the medicine you should feel free from the depressing thoughts with a feeling of added efficiency and corresponding amelioration in physical complaints. But the second action will be painful. As there will be the return of the complaints. They might be severe yet some-where tolerable and without any sort of depressive effect on the mind. This second action will be an indication that the elimination from any of the five natural outlets of the body is ahead.

If this happens than only you should take that my prescription is correct.

I stressed this point again that this will be the real test of the correctness of my medicine, which will be an assurance for permanent cure.

MOOD, repulsive

He said I am really fascinated by the idea which in fact is convincing and encouraging for me to bear the pain without the aid of the allopathic medicine. His mother interjected,

CARRIED, desires to be fast

"But sir, he is very impatient during the pain and takes the medicine at once even at the slightest inkling of the pain."

PLAYFUL, passion for gambling, to making money

The patient, "No Sir, I promise to follow the instructions which I feel is worth doing."

NAKED, wants to be

Q. What else do you do to get relief from the pain? He was asked.

QUIET, wants to be, repose and tranquillity desires

A. I lie down quietly.

REST, desire for

Q. Do you find any relief thereafter?

REPOSE and tranquillity amel.[*s]

A. Yes.

The patient was given Belladonna 30.

Reported after 4 weeks of the medicine.

After taking the medicine the first day passed well. Second day onward the pain started increasing and on the 4th day it was on its peak. His wife range up, the patient is in turmoil, pains are unbearable, what to do?

Sac. lac advised.

Next day she informed the pains had come down and the patient was feeling comfortable. The noticeable thing she mentioned was the discharge of **excessive saliva** after the pain which was relieving. Thereafter the pain vanished for about three weeks and recurred in the forth week spreading over the whole of the right side of the face which alarmed the patient. He said

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[*s] *Marked rubrics are added by Dr. Sehgal*

the area of the pain has extended which is not a good sign according to Allopathy.

He was assured, he was recovering. The pain remained for a month with rising degree of intensity, duration and frequency but without any depressing thoughts.

The patient could put up with it without resorting to any type of pain killer it was occurring once or twice a month without any significant impact and the patient felt he did not require treatment any more.

The patient was so happy and grateful, that he volunteered to express his appreciation for the treatment in one of our seminar held in Delhi. In the words of the patient "My mental state is very sound now there is no depression. I remain cheerful, working almost for the whole day in my office without needing rest which previously I used to crave for all the time."

COMMENTS

How could I advise that the patient was improving?

Ans. Since the mind was up.

Case # 10

Lesson

A patient is a patient, one should be guided by his present mental state and not the status that he holds in the society. That is why it will be very necessary to advise the patient to present himself in his original form.

In this case PPP (Present, Predominating and Persisting mental state) is "CARRIED desires to be fast". It is to be noted that the first job of the medicine is to change the attitude of a person.

Patient:- Mr. X. 35 yr. of age.

Ailments:- Disease 'Psoriasis' since 1978.

Comments:-

(A patient is a patient, one should be guided by his present mental state and not the status that he holds in the society. That is why it will be very necessary to advise the patient to present himself in his original form.)

Learned about my method of treatment and requested through a colleague Homeopath to spare a little time to give him an appointment at my earliest. As I was over busy in giving a seminar to the Homeopaths of the area, no time could be spared and he was advised to contact me in Delhi. I took it - that the matter was settled for the moment but he surprised me, when during the live case demonstration, I received a chit (slip of a paper) that he wanted to talk to me about something in general for which he would need only one minute.

He was allowed, he came on the dias and was asked, what did he want to say?

In reply he extended his legs and said about this.

Q. About this, you were advised to contact me later on?

ANGUISH, weeping with?

A. I am in a great discomfort he said and wept. you

ANGUISH, weeping with

Q. What is making weep

A. It is the discomforting thought of the disease because being a member of the family of Drs. I know it is not curable and I have to suffer for the whole of my life.

Q. Are you doing your duty well?

DELUSIONS, sick being

A. Not at all.

Q. Then how do you manage your affairs?

A. It is through my subordinates.

Q. Does any body in your office know about your sickness?

HIDES, things

A. No.

Q. What do you do when you get attacks of disease on duty?

HIDES, things

A. I rush to my residence on some false pretext.

Q. What is your desire during the attack?

REST, desire for

A. To stop doing anything and take rest.

Q. Anything else?

ATTENTION, desire for

A. I want my wife to be with me.

Q. What do you expect from her?

A. Just sitting by my side and helping me to sleep.

***RESULT*:-**

Belladonna 30, was given and was advised to report after a month. He reported accordingly, saying no relief.

CALCULATING, inability for

Q. Was questioned "Do you remember you could not stop your tears before you had attempted to talk to me about your sickness"?

LIGHT desire for

A. He said yes and admitted that those, bouts of depression had disappeared.

DELUSION, poor he is

Since he had some knowledge of Homeopathy he was convinced that the healing starts from mind and in that way the medicine given to him was working. Still he pointed out that no doubt the mind is not depressed, but the itch is trouble some.

Sac lac for 1 month.

CALCULATING, inability for

Reported next on time and again he came with the same expression 'no relief' he

said his depression had returned.

Q. Will you explain your depression - in what way, form and time you get it?

A. He said a week back he got a telephonic message from the Managing Director of his company that he was not happy with him.

Q. What did you apprehend?

A. Nothing very specific but just as it was frightening.

Q. How long did it remain?

A. Just for a day or two and gradually it disappeared by itself.

Q. Had you had to make efforts to overcome it?

LIGHT desire for

A. Yes, I tried to escape by occupying myself in some sort of light entertainment.

Q. How would you end it?

MOOD repulsive

A. Just by saying to myself let me face it.

Q. Do you remember what did you say last time when we met.

HIDES things

A. With a smile he said, my memory is weak sir, he pretended.

CALCULATING, inability for

Let me remind you. Your main attention at that time was being drawn by your physical sickness (itching). Today you are talking of depression only.

BOASTER
FRIVOLOUS

He recalled and said, you are right. But about that I would like to say that I am not bothering much about my disease now.

Q. Do you think this is the result of your own effort or the action of the medicine?

LIGHT desire for

A. He laughed as if got the light and left happily asking when next to report but thereafter he did not report. Perhaps became frivolous and putting up with the disease or got. cured

The purpose is to give the reader a different shade when in agony a person may forget the surroundings and open even in public without considering his position in society.

Case # 11

Lesson

As such no case is acute if it passes on without medicine. Every acute state has a chronic base if it requires medicine. No intercurrent medicine is needed to control the so called acute state. The medicine covers both the states. In this case potency had to be changed after 5 months.

In this case PPP (Present Predominating and Persisting mental state) is "ATTENTION desires special".

Patient:- Mr. S. - 31, married.

Ailments:- Rashes in the skin all over the body, started on the tip of penis and spread to other parts, had - Herpes, Sinuses (from 1978-80), treated by allopathy.

Also has Coryza and Asthma.

At present Asthma is predominant.

Conversation with the patient:-

LAUGHING, speaking when
TIMIDITY, bashful
LIGHT, desires for positively[8]

Definitely he was laughing with a typical style mixed with timidity, bashfulness (shyness) while he stood by me in my clinic (surgery) waiting for my permission to take the seat in front of me.

POMPOUS, important

He started, "Sir, one of your senior students has recommended me to you.

ATTENTION, desires special[*s]

Even otherwise also I have a great faith in homeopathy. Although I have been treated by many homeopaths of repute in vain still I have not lost faith in homeopathy."

Oh! Welcome! Welcome! Sit down please, I told him.

ANGUISH, weeping with

Before he started talking about himself, his eyes became wet. "What to say?" He said, I am so perturbed when I think of no end to my

---

[8] *Feels lest he gets negative response - because in the mind is light desires positively*

[*s] *Marked rubrics are added by Dr. Sehgal*

disease. Thank God it is not on my face otherwise it would have been very difficult for me to interact with the people and to go out openly in public.

HIDES, things

Frankly speaking I have not allowed even my wife to know about it.

Q. Do you worry about it all the time?

A. Yes, of - late for the last few months since I have met with repeated disappointments and seeing no end to my disease.

Q. How do you manage yourself?

FEAR, dark of

LIGHT, desires for

DULLNESS, chill during

[When there is no hot news(good news)]

QUIET, wants to be, repose and tranquillity desires

A. When I am unable to find any solution, my mind becomes dull and loses capacity to comprehend and think anymore and I find my physical and intellectual faculties refusing to work anymore with a desire to stop all activities, and take complete rest to wake up to be able to think again.

Bell. 30^{c} on 9th of May 1991.

Reported on 14th of May 1991.

-Feeling better in all respects.

Next reported on 25th of May 1991.

-Overall improvement.

Next reported on 1st of June 1991.

-Nothing to report.

Next reported on 9th of June, then 16th of June, than 22nd of June, then on 3rd of July 1991.

-Complaint eruption on the penis persists.

On 11th of July 1991.

-Eruptions on the penis reduced

On 26th of July 1991.

-Nothing to report.
On 6th of August 1991.

-Cough with fever, pain in the throat. (eliminations)

On 12th of Sep. 1991.

-No complaints.

On 19th of Sep. 1991.

-Itching increased with swelling and discharge of white pus from the eruptions on penis.

On 26th of Sep. 1991.

Discharges increased.

On 3rd of Oct. 1991.

-Throat better,

-Appetite better,

-Disturbance in the stomach better,

-Pus discharge continued, with

-Swelling of the skin and dryness in the nose.

On 11th of Oct. 1991.

-Discharge continued.

On 24th of Oct. 1991.

Potency was raised to Bell. 200.

On 31st of Oct. 1991.

-No complaint.

On 6th of Nov. 1991.

-Loose stools (Three days)

-Cough with phlegm also thick discharge from nose.

On 11th of Nov. 1991.

-Nasal discharges better,

-Breathlessness for 3 days,

-Sticky sputum,

-Foaming in urination, noticed.

On 22nd of Nov. 1991.

-Cough and sputum intensity, duration reduced.

-Overall improvement.

On 28th of Nov. 1991.

-Much improvement.

On 2nd of Dec. 1991.

-Very happy with the progress.

On 6th of Dec. 1991.

-Sleeplessness,

-Nausea,

-Stiffness of joints after rest.

On 14th of Dec. 1991.

-No complaint.

On 21st of Dec. 1991.

-Feeling normal except skin, irritation,

-Morning sickness[9], after stool,

Technically this feeling should be in woman, but if a male patient uses this phrase for himself Homoeopathy has two rubrics for him Naïve and Imitation (He had heard or seen the same happening with some lady and has adopted this expression for himself)

-Desire for specialties in food,

-Doesn't like ordinary food,

-Unable to decide what to eat,

-Otherwise clarity of thoughts.

On 28th of Dec. 1991.

---

[9] *That is feeling of nausea of early pregnancy after stools but does not bother much about it.*

-Skin trouble, area reduced.

On 4th of Jan. 1992.

-Appetite better,

-Skin better.

On 14th of Jan. 1992.

-Stomach disturbance reappeared,

-Still liking for specific and special things to eat.

-Skin around hips quiet cleared,

-Penis also cleared.

On 23rd of Jan. 1992.

-Stools twice a day,

-Stomach upset,

-Appetite reduced.

On 4th of Feb. 1992.

-Sensitive to any type of odor for 3 days.

-Albumin in the urine.

On 12th of Feb. 1992.

-Pain in the arm-pits,

FEAR superstitious

-Fear of herpes which he had in the year 1989 and cured by allopathic treatment,

-Over anxiety about health.

On 18th of Feb. 1992.

-Nothing to report.

On 3rd of March 1992.

-Loose stools for two days with corresponding reduction in the area of itching.

-Pain in the left side of the throat.

REPORTED AFTER A GAP OF ONE AND A HALF-YEAR.

On 4th of Oct. 1993.

DESPAIR, itching of the skin from

-Hopeless from itching.

Not bothering much about breathlessness.

Psorinum 30^c.

Reported on 12th Oct. 1993.

- Feeling better.

Reported on 21st of Oct. 1993.

-Constipation for two days,

-Sneezing, running nose.

Cocc. 30^c

Reported on 28th of Oct. 1993.

-Breathlessness reduced,

-Loose stools for 3 days,

-Cough for one day.

Reported on 5th of Nov. 1993.

-Constantly coughing,

-Breathlessness improved.

Reported on 16th of Nov. 1993.

-Breathlessness,

UNCONSCIOUSNESS, interrupted by screaming

-Aggravated after attack feeling concerned about health for a few minutes.

On 23rd of Nov. 1993.

- Minor symptoms persisted.

DELUSIONS, poor

DELUSIONS, wealth (not bothering about them)

Bell. 30^c

Reported on 30th Dec. 1993

No complaint

Was advised to stop further medicine and report if any relapse - No relapse thereafter.

There was a little job for Psorinum after which finally the Bell. 30^c cleared the case. It

means the main medicine was Belladonna which in single dose of 200 ^{c} worked to leave the case nearly cured.

He didn't report thereafter. Because he came with a last hope in me. Assumed to be well.

Case # 12

Lesson

This is also Belladonna in a different shade confirming the concept of Revolutionized Homoeopathy - A single dose in 30^{c} potency clears the case. (13.11.1992 to 21.02.1994)

In this case PPP (Present Predominating and Persisting mental state) is "MOOD repulsive" and "DEFIANT" - in the sense that she is ready to recover the lost ground at every cost.

Mrs. N. Kaur. A case of Anxiety Neurosis accompanied by her husband, parents, in-laws and many relatives. This is perhaps traditional in India that the people around us take it as an obligatory duty to be present as a moral support with the man in trouble. But it is very embarrassing for a physician to attend the quarries of everyone which are mostly irrelevant and sheer nonsense. I requested all of them to stay out leaving the patient with me and I shall call later on if I require the assistance of anyone of them.

Conversation with the patient:-

Q. What is your problem?

A. I have no problem.

Taking her into confidence I told her I have sent everybody out so that you should be able to talk to me freely and let me understand your problem.

IRRITABILITY, consolation agg.

MOOD, repulsive

It is better, you ask them who brought me here she replied.

In a persuasive way I told her it will be better if you disclose your mind because unless I know the truth I wouldn't be able to help you.

She said, "They think I am mad".

In a light vein I said why at all they should think in this term.

DELIRIUM, hysterical almost

At this she became almost hysteric and fixing her eyes on me with terse looks she said,

"Anybody in my place will become abnormal whose life has been ruined."

DELUSIONS ruined she is[*s]

"You tell me, will you not."

DELUSIONS , poor she is QUARRELSOME

I have no alternative except to keep calm and give her a smiling face.

MILDNESS QUARRELSOME, without anger

Then she becomes milder and says, "What is it instead of replying my question you are laughing, laughing and laughing.

At this I called her husband in and asked him, "She says you think she is insane, what have you to say about it."

Concealing the fact he said, "Actually she has lost her sleep."

Q. Since when?

A. It is for the last 2-3 weeks. Sleeping pills and tranquilizers have no effect.

OBJECTIVE, reasonable QUARRELSOME, without anger

MOOD, repulsive

DEFIANT

Who will not loose his sleep like one in me who has lost everything and what will the medicine do? You tell me sir, but I am telling you I am not going to keep quiet, come what may.

Q. What is it she is referring to that she has lost everything? I asked her husband.

A. Hesitatingly he came out, "I have a sister-in-law my elder brother's wife who brought me up since I lost my parents in early childhood. She is like my mother and expects me to visit her daily."

MOOD, repulsive QUARRELSOME

She interrupts, "Forgetting me altogether I ask you why have you married me at all?

Q. "Where your sister-in-law lives?"

A. Just on the 1st floor of our house.

[*s] *Marked rubrics are added by Dr. Sehgal*

Q. How long do you stay with her?

MOOD, repulsive
QUARRELSOME

The whole night, she interrupts again in a Quarreling mood.

He says, "The reason is that she is alone in the house since my brother has expired. She doesn't feel like cooking unless there is someone else to share the meals with her. That is why she keeps the food ready and waits for me till I am back from my work."

Q. And thereafter?

A. "Then she will like to have some conversation about my business and the progress made in my various projects and frankly speaking while we are talking, sleep over grips me and at some occasions it is morning when I awake."

OBJECTIVE, reasonable
MOOD, repulsive
HIDES, things
QUARRELSOME

Do you feel I am a fool? His wife interrupts. Don't compel me to open my mouth. I know what transpires between both of you. I gave indication to her husband to keep calm and let her speak what she has in her mind because for me to select her remedy her version is important. I sent him out.

Q. When were you married?

A. We have two children, she said.

Q. But you lost your sleep since only three weeks back?

NAIVE
LIBERTINISM
DELUSIONS, poor she is
DELUSIONS, wealth of
OBJECTIVE, reasonable

A. "In the beginning I didn't realize all this and took everything lightly. Although I was doubtful of the intentions I took it in the poor light and disposed the little bit of illicitly as permissible. Another reason is that during my pregnancies I was mostly away with my parents and the extent of their relationship didn't come to my notice. It is since one year now that the reality became apparent to me.

WEEPING, refused when anything

RAGE, forcible administration of medicine, from

FRIGHTENED, waking on

I started feeling concerned and now in the end when all my appeals to my husband turned to be on the deaf-ears. I have lost all faith in him and scared of leaving him alone even for a day."

Q. What will you like me to do for you?

DELUSIONS, sick being to work

A. I am having headache and a sort of loss of strength

Q. What efforts do you make to manage yourself?

QUIET, wants to be, repose and tranquillity desires

INTOLERANT, noise of

A. I try to remain alone, calm and quiet and beat the children if they make noise, keep lying in my room. At this she wept.

Q. Why are you weeping?

ANGUISH, weeping with

A. Because of the discomfort, which I get when by recalling my act of beating my children who actually deserve to be loved.

13.11.92 - Bell. 30^{c} one dose.

-Slept well.

Reported on 21st Nov. 1992.

-Intensity, duration and the frequency of the mental symptoms is reduced.

Next to report after two weeks.

Reported on 11.12.92

-She had headache on 26.11 92.

-Poor feeling still there,

-Desire for tranquillity,

-Menses earlier,

-Urination foul (smell).

Reported on 26th of Dec.

-progress continued.

WEEPING, refused when anything

RAGE, forcible administration of medicine, from

FRIGHTENED, waking on

I started feeling concerned and now in the end when all my appeals to my husband turned to be on the deaf-ears. I have lost all faith in him and scared of leaving him alone even for a day."

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DELUSIONS, sick being to work

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Reported on 11.12.92

-She had headache on 26.11.92.

-Poor feeling still there,

-Desire for tranquillity,

-Menses earlier,

-Urination foul (smell).

Reported on 26th of Dec.

-progress continued.

Reported after two weeks on 18th Jan. 1993

-Had headache for 3 days,

-Squint in the eyes appeared,

-Menses earlier on 5th and 19th Jan. 93.

Reported on 6th Feb. 1993

- Overall pleasant except irritability after exertion.

Advised to report after one week as there were signs of new symptoms -

IRRITABILITY, exertion after

Reported on 17th Feb. 1993

-Running nose with sneezing for 3 days, 11-13th of Feb.

-Taste of tongue abnormal with tendency to hate and revenge.

Told to report after two weeks.

but reported on 16th March 1993.

-Menses normal.

-Taste of tongue normal,

FEAR deceived of being

-Still fear of being deceived with a tendency to hide.

To report on 5th April 1993.

-Headache for two days 23rd and 24th of March with constipation.

-Lips abnormally dark black for two weeks.

Reported on 26th April 1993.

-Headache and constipation removed,- Color of lips normal,

-Thighs heavy since one week.

To report after two weeks, 15th of May 1993.

-Slight headache in between,

-Thighs OK.

To report after two weeks.

Reported on 5th of June 1993.

-Menses 13 days in advance,

-Constipation appeared again,

-Swelling on the whole body,

-Color of lips improved.

Reported on 26th of June 1993.

-Nothing to report special.

26.06.93 for one week.

Reported on 13th of July.

Reported on 21st of August 1993.

-Menses again appeared in advance with excessive bleeding and general weakness, with fear of falling and drowsiness.

Reported on 18th of Sep, 1993.

-Menses normal,

-Bleeding of gums,

-Drowsy feeling no more,

-Fear of falling no more,

-She says she is well in general hopeful.

Reported on 8th of Nov. 1993.

-Well says she is,

-Have vertigo for three days,

-Menses normal,

-Overall better - with occasional bad feeling.

Reported on 6th of Dec. 1993.

-Disposition to rise late in the morning,

-Periods OK.

Reported on 25th of Dec. 1993.

-Nothing to report.

Reported on 24th of Jan. 1994.

-Says she is well,

-White discharge since 28th of Nov. 1993,

-Urine sticky with foul smell,

-Skin below the eyes - black.

Reported on 21st Feb. 1994.

Advised to discontinue the medicine and report only after having any complaint.

Since then there is no relapse.

Case # 13

Lesson

This case also shows the benefit of prescribing according to the tenets of Revolutionized Homoeopathy which is free from imaginary biases through the rubric "FEIGNING sick".

In this Case where king pin symptoms is "HIDES things" - there PPP (Present, Predominating and Persisting mental state) is also "HIDES things".

Patient — Mr. O. 55, Businessman, Mental depression.

Diagnosis:- — Cat scan suggestive of intra cerebral hemorrhage in right lentiform nucleus region, there is minor grade of Lesson causing mass effect.

Patient's ailments at present:- — Bed ridden. Entire left side is paralyzed, face arm, legs etc., voice is almost zero, diabetic sleepless, constipated, anorexia (loss of appetite), Arthritis.

Past History :- — Went into coma - hospitalized and recovered upto the present stage - declared no possibility of further recovery - failure in business is the possible cause, they say - shock syndrome.

Probabilities:- — They were told, the patient would recover but will have to pass through all the stages including coma etc. in the reverse order of their coming, and they agreed.

Conversation with the patient

While he was busy moving about on a wheel chair.

Q. How do you do?

DELUSION, wealth of

(The tone of the expression was as if through these words he

A. I have no problem, I have no problem and he tried to repeat these words at the top of his hoarsed voice which was hardly audible and continued - my children are very good.

was conveying a sense opposite to his words. Actually seemed unhappy with his children)	My daughter-in-laws are very good, he repeats these words many times and weeps.
(HIDES things)	Q. Why are you weeping?
ANGUISH, weeping with	
HIDES, things	A. I don't know, he says and becomes
{Hides when he says that he is short of nothing	silent. In the meanwhile his wife comes in and he starts speaking about her - she is very
(DELUSIONSwealth imagination of) which is not correct}	good lady, takes care of me well, she is a great asset of mine.
HIDES, things	His wife tells that he is making a false statement, actually his behavior, with me, is very hostile.
STARTING waking on	At this revelation he startles as if he was not expecting this exposure. He took time to come back to himself, and said,
HIDES, things HIDES things, mildness, by taking to[*s] OBJECTIVE/ FRIVOLOUS/ LIGHT, desires for	Addressing her with a cover in a very mild language -
	"Madam you know I am a sick person therefore you should not mind when at times I do not behave with you in a reasonable manner. You, perhaps will agree with me that I am not bad at heart".
	His wife shots back, "Leave it, leave it, don't try to be smart".
ESCAPE, attempts to[10] LIGHT, desires for	At this he laughs and keeps quiet.
WEEPING, with pain WEEPING, refused	His wife continues complaining, "He makes a lot of noise whenever in pain or his

[*s] *Marked rubrics are added by Dr. Sehgal*

[10] *ESCAPE, attempts to - by way of laughing and keeping silent, because the aim is to remain without stress*

when anything
NOISE, inclined to make
BEGGING, entreating
MILDNESS

demand is not met."

For example he is diabetic and he insists for ice cream. At first he will beg and pray in a very humble way promising that he will not ask for it again, the

UNRELIABLE promises in his
WEEPING, refused when anything
BREAK, things desire to
DESTRUCTIVENESS
MANIA, spits and bites at those around him

Promise which he never keeps and when he finds this trick not working he starts weeping and when ultimately he does not succeed, he will break things and will take to abusive language as if forgetting all norms.

Q. At present what treatment he is taking?

A. None at the present, because he refuses to take the allopathic medicine

Q. Why do you refuse to take the allopathic medicine?

A. I don't like it.

Q. You have to specify your statement whether it gives you some trouble or it is unpleasant while taking?

LIGHT, desire for
QUIET wants to be, repose and tranquillity desires
TRANQUILLITY, gets sleep after[*s]

A. Yes, it is not palatable.

But he is very particular about his sleep. He accepts only sleeping pills which he must have. And will like calm and quiet atmosphere while he is trying to sleep.

RESULTS:-

Belladonna 30, on March 10, 1993.

Reported on 17th of March:-

1. Slept well without the help of sleeping pills.
2. Appetite improved

[*s] *Marked rubrics are added by Dr. Sehgal*

3. Complaining about constipation

24th March, progress continues, speech better than before.

7th April, facial look better paralytic effect reduced from the left side of the face.

14th April weeping stopped and could raised the left arm.

20th April tried to take few steps on his own without support, left the use of wheel chair.

Two months after say on 20th June. His wife reported on telephone that the patient had to be admitted in hospital because he went into coma again the state prior to the attack of paralysis. His wife said he became quiet normal and could walk on his own was almost cured but now he is again in the same state.

Will your medicine work along with the allopathic medicine, because we don't want to stop that medicine?

She was conveyed that it was not possible.

Why?

According to the Herring's law of cure which has been verified by Revolutionized Homeopathy the diseases go in the reverse order of their coming. There was nothing to worry if the patient goes back to the original stage of coma which is apparently fatal and horrifying to the lay man.

But to a Homeopath it should be taken as a matter of process of cure which will remain for not more than few hours or at the most for 12.

In most of the cases the same medicine in the same potency is expected to deliver the goods. But in a certain exceptional cases sometimes the potency is to be raised if the symptoms so demand or it may be a case of

the next remedy.

Case # 14

Lesson

This case is an example of - How to take the mental state of an infant/child? The question which is generally asked by our students, followers and opponents.

In this case PPP (Present Predominating and Persisting mental state) is "UNCONSCIOUSNESS interrupted by screaming".

Patient:- Here since it is a case of a child the PPP is to be an objective symptom.

A child one and a half month old.

Disease:- V.S.D. syndrome, ventricle septal defect (hole in the heart) with recurring pneumonia and high fever.

The parents of the child over anxious and over-awed as they were about the survival of the child were hesitant to undertake my treatment when they were told the (return of the ailments and the day of peak in a phase when the stress of the disease is maximum ultimately they agreed when they were told that the chances of failure are remote say for about 5% and unless one takes risk one cannot achieve anything life.

Parents reporting about the child:-

DELUSION, now well, now sick*s

They said, "The attacks of the child are very unpredictable.

Seconds before we find her quiet well and just thereafter she is in a grip of high fever, difficult breathing and fast moving ribs".

Q. What is the expression of the child at

*s *Marked rubrics are added by Dr. Sehgal*

that time?

UNCONSCIOUSNESS interrupted by screaming,

PRECOCITY*s

ATTENTION, desire for LIGHT, desire for

A. Very cheerful, unmindful of the ailments with occasional out-cry like an adult as if in a great agony.

Q. What else do you find the child doing?

A. Tosses her head alternately towards her parents sitting on either side of her with fondly looks as if asking for their attention. Likes very much her head and legs pressed gently.

QUIET, wants to be repose and tranquillity desires

But ultimately when the fever rises, she will not like any noise, will like to close her eyes as if wanted to sleep.

Bell. 30 was prescribed on 16th of Sep., 1991. Since the parents were quiet nervous and not of a strong mind, I decided to call them frequently for reporting after every one or two days.

They reported on 18th of Sep., they said, she was better yesterday. There was no attack, everything was OK. But today again there is return of the ailments.

Placebo for one day.

19th was no better. Expecting that this phase of return of symptoms may last for 5 days, they were called on 23rd.

Reported on 23rd of Sep. 1991.

Progress seemed to be stagnating as inspite of a little overall improvement so far as appetite and general efficiency of the child were concerned and the child gave an active look. Potency was raised to 200.

Here one has to be careful when the usual limit of the phase of return of ailments

*s *Marked rubrics are added by Dr. Sehgal*

crosses 5 days. You have to keep a close watch and check out very frequently to be sure whether the medicine has started acting in the right direction specially in cases like this where lungs are involved and are under a great threat.

They were advised to report the next day.

Next day there was some progress. Advised to report on the next day on 25th of Sep. 1991.

There was some improvement. Again advised to report on the next day. (26th of Sep.)

The parents also wanted me to check her everyday, because they were finding themselves unable to assess the progress because usually being lay person they will give importance only to the part of ailment which is left and not to that, that is cured. Because the progress is to be assessed taking into account the totality in the form of intensity, duration and frequency of the return of symptoms. So after 26th I started calling them on alternate days instead of everyday.

Thereafter 30th Sept. after every 3rd day and after 7th of Oct. - after every week. The treatment continued up to 25th of April 1992 when they paid their last visit, seeking advice whether to continue the medicine or not. They were advised to report only when the disease recurs.

Regarding expulsions :-

As for expulsions - On the 28th of Sep., 1991 they noticed the child was loosing her hair - sign of baldness.

On 3rd of Oct., 1991 - loose motion after every feed remained for 3 days and automatically stopped.

Then on 6th of Dec., 1991 complained of coughing with the chest loaded with mucus which the child was not able to bring up which vanished after few days.

On 14th of Dec, 1991 they took the child to the hospital for echo test and found the hole was narrower than before.

On 23rd of Dec, 1991 discharge of mucus with every stool was noticed. Which was taken as a good sign of the disease moving from above downward. This remained up to 7th of Jan. 1992. Thereafter the discharge from nose started which remained uptill 9th of March, 1992 with general improvement and they came to say good -bye on 25th of April, 1992, as they found no need of further medicine.

Case # 15

Lesson

Inspite of the warning by Dr. Kent that - All medicines including Nosodes should be prescribed only when the symptoms agree it has been seen that most of our homoeopaths use Tuberculinum merely on the basis that their patient has in inheritance phathisis.

To quote Dr. Kent :-

I do not use Tuberculinum. merely because it is a nosode, or with the idea that generally prevails of using nosodes; that, a product of the disease for the disease, and the result of the disease. This I fear is too much the prevailing thought in using nosodes. In certain places it prevails and is taught that anything relating to syphilis must be treat with *Syphilinum;* that anything relating to gonorrhea must be treated with *Medorrhinum,* anything psoric must be treated with *Psorinum,* and anything that relates to tuberculosis must be treated with *Tuberculinum.* That will go out of use some day; it is mere Isopathy, and it is an unsound doctrine. It is not the better idea of Homoeopathy. It is not based upon sound principles. It belongs to a hysterical Homoeopathy that prevails in this century. Yet much good has come out of it.

It seems from looking over the record of many cures that this remedy has been given many times for just that state on a paucity of symptoms, and if the records can be believed it has many times balanced up to the constitution in that anemic state, where the *inheritance has been phthisis.*

It is not the best indication for Tuberc., but where the symptoms agree in addition to that inheritance, then you may have indications for the remedy.

All know that a marked feature emaciation is in persons who are going into phthisis. The emaciation often begins before there is any sign of phthisis, gradually losing flesh. A gradually growing weakness, a gradually increasing fatigue. This is a prominent place for Tuberc. if the symptoms agree. Always let that stand out boldly, **IF THE SYMPTOMS AGREE, AND WHEN THE SYMPTOMS AGREE**. Of course it will be said that Tuberc. has cured when there are few symptoms; this is granted, but should not be lauded as a clinical practice.

(Reff.: Lecture on Tuberc. page 949 , LECTURES ON HOMOEOPATHIC MATERIA MEDICA, by Dr. Kent.)

BARYTA CARB:-

The symptoms to prescribe on are such as represent the patient and not the glands not the enlarged tissues.

Knots of lymphatic glands down the neck under the ear. (bar-m., tub.) Sometimes sub-maxillary gland is affected being enlarged and indurate sometimes tonsils enlarge and indurate. These glands inflame and become sensitive and get little larger AFTER ANY EXPOSURE TO COLD and from sudden changes of weather.

In the words of Dr. Kent, "Two or three times I have absolutely failed to cure with the remedies selected to the best of my ability and they have gone to the surgeon and he has cut them of but I believe these tonsils ought to be cured."

One thing in Homoeopathy taught in Hahnemann's organan is that unless there are symptoms to indicate the remedy no great things should be expected from the administration of the remedy. Enlargement of Tonsils alone is not a symptom upon which a remedy can be selected. And it necessitates guessing a dozen times and perhaps not hitting at all."

(Reff.: Lecture on Baryta Carb, page no 184. LECTURES ON HOMOEOPATHIC MATERIA MEDICA, by Dr. Kent.)

Also another shade of PPP (Present Predominating and Persisting mental state) is "POMPOUS important"

PATIENT:-

Mrs. P. 82 years of age, wife of an old classical homoeopath of 90. Rh. arthritis for the last many years. Bed-ridden for the last 2 years. Cannot walk. For toilet etc. has to be helped, ease on commode near her bed. Till the time of case taking she was on allopathic drugs. The hononered collegue mentioned that she had the history of TB pleurisy, used nosodes including Tuberculinum. Her husband had attended one of my seminars. He was impressed and decided to refer her case to me. The lady lives in Delhi with her son and the man in a village, far away from Delhi.

He came to Delhi for one day and left for his village after handing over the case to me assuring his wife that he is convinced that she will be cured.

LIGHT, desire for

When I entered her room she welcomed me with folded hands, as a traditional Indian lady and

LIGHT, desire for

As she was lying on the bed, she tried to sit up to co-operate with me. What I saw, she was extending her hands towards her toes as if making efforts to undertake an exercise. Her husband addressed her ' buck up' 'buck up'.

ADMONITION agg.
MOOD repulsive
DEFIANT
IRRITABILITY
consolation agg.

She was annoyed and re-buffed " Yes I am leaving no efforts to raise myself up as much as I can and will not ask for any body's help and

NOISE, inclined to make

Suddenly she started addressing me "Dear sir I am not insane. She cried at the top of her voice and repeated many times". (At this I requested everybody else to leave the room,) and they went out.

Q. Who told you that you are insane? I asked her.

A. This I can't tell you, she said.

Q. Why? I asked.

HIDES, things
DELUSIONS, possessed being
DELUSIONS, possessed being

A. Since the disease has rendered me dependent on others I cannot open my mouth against them.

Q. But there is no one else now in the room and all that you will tell me will remain between you and me.

NAKED, wants to be

At this she started coming out, "All of them want to poison me".

Q. How do you know?

FEAR, poisoned of being

A. They mix up something in the water. (As the family had good cultural and civil background, I could not believe it).

Q. But how can you say that?

OBJECTIVE reasonable

A. It is the taste and the reaction, after I take the water supplied to me, it tastes bitter and creates restlessness.

Q. Do you experience it every time you take the water?

DEL ., wealth of [wealth = she is not at disadvantage not looser]

OBJECTIVE reasonable

SUPERSTITIOUS

A. No, it is only when I cry with pains. But Almighty is with me. I know nothing will happen to me because he comes to my aid, when I am in trouble. He has saved me in the past also from far bigger dangers than this.

BEGGING AND PRAYING

Some times I pray and beg for HIS help.

DELUSIONS, religious

CLAIRVOYANCE

He forbids me to do so and commands, you must bear it treating it as a consequence of your past deeds.

FRIVOLOUS

ANGER, mistakes over his

Here she laughs as if taking everything lightly and says I don't blame anyone except myself.

Q. Why?

A. I should have been careful while doing bad deeds.

Q. Do you think, you have done any?

OBJECTIVE reasonable

A. Otherwise why at all this, therefore one is compelled to conclude in this way.

ANGUISH, weeping followed by

She wept saying there is just one thing, which discomforts me. It is the idea about my son the person who is the product of my own womb, is also collaborating in the conspiracy to poison me.

DEL ., wealth of

After a pause she comes to herself and talks in a light mood as if a normal person, " My husband is a very nice person, I have full faith in him and that is why also in you".

LIGHT, desire for

I hope you will atleast help me to end my dependence on others. *(A physiotherapist had advised her to take exercises and try to help herself rise up)* through her angry remarks she is conveying that the general

impression in the house is that she pretends to be sick which is not true because she finds it impossible for her to act according to the instructions of the physiotherapist.

Q. How do you like this atmosphere?

QUIET, wants to be, repose and tranquility desires

A. I don't like it. I shall like to go back and join the people of the area from where I have retired as a nurse and serve them as before.

Q. Why?

A. Because that will give me peace of mind.

Q. Do you want to earn your own living?

DELUSIONS, wealth of

A. No, for that my pension is sufficient.

BENEVOLENCE

Actually serving people gives me satisfaction. I shall be doing free service.

HIDING

POMPOUS important

RESULT:-

Belladona 30^c was prescribed on 17th May 1993, mentally quiet, cheerful was able to get up and walk about in her room and was now able to look after herself for all the jobs for which she had to take the assistance of a paid nurse. Periodically expulsions took place and the agony was almost nil. The pains did return but with lesser intensity and duration. The message of the patient was that she is content with her progress and requires the repetition of the same medicine please don't change it. She says this medicine has suited her well. She was cured by the end of Aug. 1994.

Case # 16

Lesson

This case proves the power of Belladonna. A single dose lasting for three years.

This is the benefit of prescribing without any consideration of imaginary biases like - MIASMA, grades of medicine - whether they are deep of short-acting.

In this case PPP (Present, Predominating and persisting mental state) is - A sense of inadequacy to face the reality of life is capturing the mind of the patient and that is why wants support from the people around him.

Patient:-

Mr. R. 46, working as a treasurer in a Govt. University, was brought to me on 29th of Oct. 1993. He was under the treatment of allopaths for the last many months for Schizophrenia.

Past History:-

From the very beginning, he was very shy to mix-up with the people. Taking not much interest in studies. To overcome his shortcomings he never got any support from his parents. In addition to it he had stammering for which naturally he was laughed at. All this made him introvert. He would not like to move about in society and would not like to visit any relative, always like to remain at home. Somehow he acquired desired qualification to get the job which he was doing now, was married and had children.

WELL says he is, when very sick

On the day he was brought to me he was refusing to take any medicine. He said he was alright.

REPROACHES himself [*s]

He said, "I was suffering because of my own fault, I believe in honesty and uprightness while at work and don't believe in taking bribes in return for claims made on false grounds and because of this I am not liked by my colleagues.

ANGER, himself with
STRIKING himself on his head [*s]

Many times I get angry with myself and beat my head.

HIDES things[11]

Perhaps I am afraid of getting bad name.

FEIGNING sick
DESIRING attention[*s]
HIDES things

The same is my position in my family specially with my wife because she belongs to a rich family and does not pay proper attention to me."

REST desires
QUIET want to be, desires for repose but no tranquillity [*s]

I was told that he had stopped going to his job for the last six months. Being a member of a joint family he expected his younger brother to support him. In return he promises he will not demand much except two meals in a day. So far his two children were concerned they were his nephew and like his own *(brother's)* children and his wife being his sister in law was like a mother to him and thus the favour done will not be any obligation to him - he told his brother.

FEIGNING sick

His brother said, "He does all this drama only when I come home and in my absence he remains quiet normal and because of this my feeling is that I doubt that he has any mental problem, infact he shirks work and loves to remain idle."

Q. How is his sleep?

[*s] *Marked rubrics are added by Dr. Sehgal*

[*s] *Marked rubrics are added by Dr. Sehgal*

[11] *Because he is indirectly trying to cover his action.*

REST desire for QUIET wants to be, desires repose[5]

A. His brother replies, "Yes, that is very important he does not get sleep inspite of getting sleeping pills." Patient also said, "Yes sir, if you want to give me medicine, please give me one for sleep."

He was given bell. 30 one dose on 29-10-93 with placebo for one week.

Reported on 08.11.93

-There was some progress.

-Sleeping well *medicine was giving its first action.*

Placebo for two weeks.

Reported on 22.11.93

- He could overcome his shyness and the fear of people.

- He used to shiver when pressed by his people and sometimes physically assaulted to join his duty. This shivering was typical of his character. It was not out of fear but actually what he would do was, he would stretch his body and hands, fix his eyes on people to make a dreadful scene so that the people may get scared of him.

He was asked, "What is this that you do. Is it something automatic, on which you have no hold or because of some other cause?"

IMITATION, mimicry NAKED wants to be

He said, "I imitate a fellow patient who used to do exactly I do - to prevent people to tease him.

There was no repetition of this tendency also during the two weeks time.

Placebo for four weeks.

Reported on 20.12.93

-There was satisfactory progress.

Placebo for four weeks.

Reported on 17.01.94.

STUPEFACTION, rouses with difficulty

-The state of stupor and unconsciousness is predominating lies in deep sleep and rouses with difficulty.

DISTURBED, averse to being[*s]

WELL says he is, when very sick

OBJECTIVE reasonable

-Do not like to be disturbed, refusing to take medicine and says - he is well, it will be wastage of money. Says spending any more money will be useless.

Eliminations: Black colour stools for 3 days.

Placebo for two weeks.

His brother reported on telephone on 25.01.94.

MOOD repulsive/ DEFIANT NOISE inclined to make

NAKED wants to be[12]

DELUSIONS poor he is

DELUSIONS insane he has become[*s]

DELUSIONS ruined he is[*s]

-He is in an aggressive mood, trying to make a lot of noise and says, "Do not send me to work, I am fearful of work. I am a very poor person and I can not afford the doctors charges. The whole affair has maddened me I feel I have become insane and ruined."

BEGGING entreating

Further to continue he says, "Ask the doctor, let him, earn from someone else and be kind to me to write the prescription which can purchase from the market on cheaper rates."

Advised to continue with Placebo.

Reported on 01.02.94.

[*s] *Marked rubrics are added by Dr. Sehgal*

[12] *because he has revealed the truth.*

His versions were the same as reported on 25.91.94. His brother requested - it is not for the sake of saving money but for the sake of the patient's welfare, if you can be kind enough to exceed to his request for not charging any money.

HIDES things

I told him - the fact is otherwise he is hiding the real intention. Since he wants you to shoulder his responsibilities, he is showing that how much he is worried about the cost of his treatment and his general upkeep.

ANGUISH, weeping with
SUICIDAL pain with

In the end the patient said, "It is better to die instead of living like this" and wept as he heard our conversation.

Placebo for two weeks.

Reported on 15.02.94.

All the symptoms subsided and he joined his duty.

Placebo for two weeks.

Reported on 01.03.94.

-No problem, feeling alright.

Placebo for two weeks.

Reported on 16.03.94.

-Had fever for ten days with little inefficiency.

Placebo for two weeks.

Reported on 04.04.94.

Placebo for two weeks.

Reported on 21.04.94.

UNCONSCIOUSNESS, interrupted by screaming

-Remains absorbed in his thoughts with empty feeling in the head, occasionally for a minute.

Placebo for four weeks.

Reported on 24.05.94.

Placebo for four weeks.

Reported on 23.06.94.

Placebo for two weeks.

Reported on 11.07.94.

-Feeling of nausea

-Heaviness of abdomen

-Not sleeping well for the last two days.

-Appetite lost

FEAR robbers of

-Fear of loosing his job because he thinks someone would steal the money from the office safe, which is in his charge as a cashier.

Placebo for two weeks.

Reported on 25.07.94.

Placebo for two weeks.

Reported on 16.08.94.

Placebo for two weeks.

Reported on 29.09.94.

FEELING of well being*s

SUPERSTITIOUS

OBJECTIVE reasonable

HIDES things

He thinks he has no mental problem except some physical ailments like gases in abdomen. "Might be as I have taken some snacks and tea offered by my colleagues in the office."

UNRELIABLE, promises, in his

Although generally I am very careful about my health and do not allow myself to be lured by anything."

Placebo for four weeks.

Reported on 31.10.94.

ANGER himself with

CONTEMPTUOUS of self*s

-He was angry with himself.

-He condemned himself for not being worldly-wise. "People are enjoying they don't bother about moral values but I am the one who simply tortures himself and suffers a lot of hardship."

Placebo for two weeks.

Reported on 17.11.94.

Placebo for two weeks.

Reported on 17.12.94.

Placebo for two weeks.

Reported on 17.01.95.

ANGUISH, weeping with

SUICIDAL pain with

Again relapse of the same mental state, wants to die because he is insane. All this condition returns only when somebody points out his short -comings to him. But feeling better for the last 3 days.

Placebo for four weeks.

Reported on 04.03.95.

Placebo for four weeks.

Reported on 10.04.95.

LIGHT desire for -

There is a desire to live and says,

*s *Marked rubrics are added by Dr. Sehgal*

INTROSPECTION

"Sometimes I feel that why unnecessarily I do all this and create problems for myself and others. Now I shall be doing my duties exactly in the same manner as my brother is doing."

Placebo for four weeks.

Reported on 06.07.95.

They were told to stop the medicine, report only when they find any problem.

After about six months they Reported on 07.03.96, that he had the return of symptoms.

Placebo for one week.

Reported on 15.03.96.

Mental state normal.

-Had constipation for some days and loose stools.

No medicine.

Reported on 22.04.96.

-They reported some problem.

Placebo for one week.

Reported on 29.04.96.

Pretending to be sick.

Placebo for one week.

Reported on 06.05.96.

NAKED wants to be
FEAR arrested of being
MOOD repulsive
DEFIANT

-He said he could not see people laughing he is jealous of them.

-There was a fear of being arrested but says he doesn't mind and will join his duties.

Placebo for one week.

Reported on 17.05.96.

He said he is alright, he does not require

*s *Marked rubrics are added by Dr. Sehgal*

FRIVOLOUS

any medicine.

-Nostril discharges thick.

He was realizing his own mistake. He felt as if the bad blood was out and the abnormality was over, and was thankful that he was cured, but still he said give me some medicine for one week.

INTROSPECTION
DELUSIONS free he is of sickness*
LIGHT desire for

Placebo for one week

Reported on 25.05.96.

He said he was doing so so, not fully well. But was doing very well in the office.

Placebo for one week.

Reported on 10.06.96.

Placebo for one week.

Reported on 22.06.96.

Now he has started asserting himself the thing which he never did in the whole of life. He started disputing with his brother for his rights. The family never expected that this man can behave in this way who have all along been dependent on them.

Actually this was the sign of recovery and this state of mind should have been taken as expulsion through tongue something which he could not express through out his life. But the ignorant people around him took it as an offense. He was thrashed physically by his brother and father.

SUICIDAL pain with

Out of revenge he took out a dagger and tried to kill himself. The family was horrified.

RAGE, medicine from forcible administration of

They snatch the dagger from him and phoned me about his condition without revealing the truth that they were also at fault. I told them to wait for some days. But in a

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* *Marked rubrics are added by Dr. Sehgal*

few days time he was successful to find out the place where the dagger was hidden. Wielding the dagger he came out in the open and announced - "Come who will stop me I am going to kill myself." And struck his head thrice before he was over powered. After the first aid they rushed him to me, it was on 05.08.96.

Reported on 05.08.96.

It is almost after three years that bell. was repeated in the next higher potency that is 200. Assuming that the previous dose had finished its job and it was the turn of next potency to take over.

Patient took atleast 3-4 months to become normal. He was almost back to the square when I examined him on 05.08.96 with the return of severer mental state than ever he had before - he had lost his sleep, appetite and the mental equilibrium. It was the sleep first which was restored, by bell 200 and gradually other things over the period of 4 - 5 months and since then there has been no complaint till the date of writing this note that is 10.10.98 rather he has been sending thanks from time to time and message of his recovery and recommending me to other patients.

Case # 17

Lesson

As in this Case Belladonna makes over to aur. It is not always necessary that a single medicine cures the case.

Why colleagues treating the patient for a long period of 12 years, could not succeed?

In this case PPP (Present Predominating and Persisting mental state) are "LAUGHING/SMILING sardonic" and "Objective reasonable"

Patient : A woman 28, married,

COMPLAINTS:- Rheumatoid Arthritis with deformities in bones of toes, fingers, knees, and elbow joints. Pain in fingers and ankle joints is felt only after they swell.

SMILING, sardonic [13] She walks into my chamber, lame, with a smiling face but with a style as if having no faith in words of the persons in medical profession.

LAUGHING, speaking when

LAUGHING, sardonic

NAKED wants to (opposite to hiding and throwing away the sense of shyness etc.)

OBJECTIVE, reasonable

"Please take seat", I said while she sat laughingly she starts, "What I will like to ask is, is there any chance of my recovery."

I was taken aback.

"I know you will say yes, she continues I have changed many a Drs. each one had a stocked promise to make that is 'Yes'. The result is before you. The disease has been slowly and steadily progressing. It started 12

[13] *Sardonic means:- bitter-biting-scornful, contemptuous - having no respect for the person who she is affront with.*

years ago from toes ascending to ankles, knees, elbows and fingers. Now it is on its full swing. Treatment all along was from top Homoeopaths."

Q. What treatment are you taking these days?

A. "I have left every treatment for the last 2 years."

Q. Why?

DELUSIONS, wealth of
DELUSIONS, poor he is
FEAR, paralysis of

A. Because as such I have no problem except limping, which of course restricts my movement. She said and wept but did not allow her tears to come out.

Q. Do you weep?

A. Yes at times.

Q. Why and when?

ANGUISH, weeping with

"Occasionally when I feel severe mental and bodily discomfort."

HIDES things
ANGUISH, weeping with
FEAR, dark of
LIGHT, desires for (get rid of)
FEAR, paralysis of

Q. There may be certain thoughts which may pass your mind at that moment?

A. "Yes, the thought is whether I will get someone who will cure me. Or shall I get totally crippled, retarded."

Q. Are you hopeful?

MOOD, repulsive
FIGHT, wants to

A. "I do not want to lose hope. I want to fight."

Q. What are you doing these days to combat (your disease)?

DELUSIONS wealth of
FRIVOLOUS
DELUSIONS poor he is
LIGHT, desires for
FRIVOLOUS
MOOD, repulsive
QUIET, wants to be, repose and tranquillity

A. "I get pain in fingers only when they swell. To get some sort of relief I take pain killer." *(Means - the purpose is served, - the wagon keeps moving)*

desires
FEAR, paralysis of

Q. If somebody inquires from you how are you, how do you reply?

HIDES things
TIMIDITY, bashful
SHYNESS (avoiding observation)

A. "I do not like the people to know much about me so I tell them I am better then before and cut short."

Q. So you are not in favour of taking any systematic treatment?

LIGHT, desires for (ray of hopes)

A. "I am, but only when I shall be convinced that I shall be benefited."

She was told, I don't think that words may be very powerful and are going to convince you. The only thing is that you have to take the medicine and see the results. She seemed to be moved but not fully. Than I told her - my method is a little different. If my medicine is correct, its immediate effect will be to remove your agony. You will be relaxed in mind. There will be no more bouts of weeping. In addition you will have added efficiency. You will feel more active than before. It will be a feeling of overall relief. But there will be a 2nd action of the medicine. After sometimes of the 1st action there will be a return of your complaints which are normally expected to remain for five days. The complaints will start slowly will increase gradually reach the peak on the middle day (third) and will start declining thereafter ending on the fifth day or so. Please understand that this coming back of the ailments will mean something to get drained out of your body. Some toxic discharges from or any of the five natural outlets may take place. These will come in phases. Each phase will be coming with lesser intensity & duration and frequency with corresponding relief in all ailments heading ultimately towards cure.

OBJECTIVE, reasonable

After hearing all this the lady got some confidence in me and her face brightened

LIGHT, desires for

when I told her with confidence 'You will be cured'.

Bell. 30^{c} was prescribed on 26.11.93 to report after a week.

Reported on 03.12.93.

Feeling active than before with overall relief in pain.

Reported on 17.12.93

Sudden jerk in right ankle. (Felt this as a good sign) as previously there was no sensation which she felt is returning.

Reported on 14.01.94

Pain in ankle amel.

Reported on 28.01.94

Pain travelled to toe.

Reported on 15.04.94

EXCITEMENT, amel

She says, "In the beginning of treatment with every doctor I get relief.

AILMENTS from disappointment

The disappointment follows after the progress stops. The same seems to be the case here with you."

LAUGHING, speaking when

CONFIDENCE, other have none which makes her unhappy and thinks

AILMENTS from disappointment

She said laughingly focusing her eyes on me. As if looking for the approval of her thinking with tears in her eyes. This time she did not wipe up her eyes. She allowed the tears to roll down her cheeks.

The pain has extended to neck also.

SECRETIVE

"I never try to weep.

DELUSIONS, father the person before him is his[*s]

It is today in your presence alone perhaps I am looking at you as my father, a benefactor a sea full of hope with deep seated faith that

[*s] *Marked rubrics are added by Dr. Sehgal*

HOPEFUL

you will cure me."

Q. Why it is so (faith in me etc.)? She was asked.

EXCITEMENT, amel

A. "The rare details you ask with deep devotion and concern." Laughs and seems relieved.

Q. So you are hopeful?

EXCITEMENT, amel.
HOPEFUL

A. "With your kindness"- she said and laughed looking into my eyes (to collect confidence).

LAUGHING, speaking when

Waiting to see whether or not I approve her views.

Q. Do you like attention? Do you ever think that you don't get it?

CONFIDENCE, want of self

CONTENT

A. "I get it in abundance from everyone in my house especially from my husband. He is very caring."

CONSCIOUSNESS, trifles about

DELUSIONS, neglected duty he has

"I am really ashamed of myself that I am of no avail to him. I feel quietly that I am not able to reciprocate as a matter of corresponding duty towards him."

CONTEMPTUOUS, of self

REPROACHES herself

Sometimes I hate myself being a cause of much trouble to others. I feel I am a curse.

Aur. m. 30, one dose was given on 15.04.94.

Reported on 22.04.94

Good relief overall particularly in the latest (pain in the neck) ailment.

Reported on 14.09.94

During this period with the expected rise and fall of symptoms she reported on this date that:

1) She can walk faster than before.

2) Can sit on floor with ease which was impossible previously.

3) Can work easily with hand.

Progress continued.

Reported on 11.02.95

1) Previously elbow was dead (no sensation) even the pick of needle had no effect, now some crackling sounds can be heard; to me it is a good sign of improvement.

2) Can open hand freely. She was regular in taking medicine upto middle of April 95, thereafter she started slackening treatment.

On asking why she is not regular in taking the treatment? She said. "I am sorry since I live far away I don't bother my husband to take so much trouble for me and also since my ailment is almost OK."

The last that she reported was on 01.06.95, with very slight complaints and thereafter did not appear. It is hoped she is cured. She took medicine only for one week.

CASE # 18

A Grapevine Case

Lesson

This case is a practical demonstration of the principal of prescribing.

Mrs. N. School teacher, had fracture and dislocation of her Coccyx (Kok-six) tail bone.

Resultant ailments:-

Stiffness in left leg. It appears suddenly in paroxysms (Par-ok- sizm) with weakness, it becomes so stiff that she cannot move the leg. This stiffness is simultaneously felt in the mind also, as if all its working had stopped and memory for everything lost.

It assumes a state of confusion and not able to understand as to what is happening to her.

This state of affairs gave her the feeling- possibly this is going to make her unfit for her job, to face that situation she was on allopathic medicine felt better than before still was not hopeful of recovery.

26.08.1996

VERSION:-

Q. What is your problem?

A. "I am suffering from depression."

Q. What do you mean by depression?

A. "I had my Coccyx fractured - thereafter started paroxysms (Par-ok-sizm) of stiffness of the left leg with extreme weakness. They come suddenly at any time and any place. The extent is so high that it becomes impossible for me to move my leg. With this, I feel as if my brain stops working, losing memory for everything.

CONFUSION
calculating when

"Further it assumes a state of confusion and I am not able to understand as to what is

happening to me."

CONVALESCENCE (kon-vel-es),(konveles, sens)

"At present I am on allopathic medicine. I am better than before."

DESPAIR recovery of FEAR, failure business in

"But I am not free from the fear that the malady may fail me to continue in my job, because in allopathic, there is no permanent treatment."

psor. 30 was given for two weeks

Reported on 09.09.1996

Q. How are you now?

Comments :-

A. "SAME as before."

Many times this is a very misleading answer.

Q. How do you say that?

LAUGHING speaking when HOPEFUL

A. She laughed and said, "One thing I can say now I am hopeful that I shall be cured."

Q. Why it is so?

A. "That I can't say."

Q. Do you feel a little efficient than before?

A. "I think so."

Q. In what respect?

TRAVEL desire to EXCITEMENT, amel

ENNUI, entertainment amel

A. "Previously I liked to stay home. Now, I want to go out for an outing. Will like to go to good eating shops and five stars hotels etc. I feel bored very much in my home."

Q. As per your statement there is a lot of change, how then do you say, you are the same and there is no change?

CAPRICIOUSNESS

FEAR duty to neglect his

CONTEMPTUOUS of self

A. "Actually, I don't know what exactly is my problem.

This makes me sad as I am not able to do my duties towards my husband and children, on the contrary they have to look after me, I fear this may become a permanent

feature. This gives me a sense of self-contempt. I feel, I am useless."

EXCITEMENT amel.

HURRY desire to do many things at once

CONFIDENCE, want of self others have none in him which makes her unhappy

Then she laughs saying, there is an another exciting thing, many things seem to be exciting me which I want to do and learn without any loss of time, like -knitting embroidery etc. But at the same time I lose Confidence in myself when the people around me think that I wouldn't be able to do all that."

Aur 30^{c} was given for one week.

Reported on 16.09.1996.

Had loose motion for three days.

Overall improvement.

Placebo for one week.

Reported on 23.09.1996

Felt expulsion in the form of something like water seemed to be rising up in the throat

- Chest pain left side

- Feel secure in the Home

QUIET-wants to be repose and tranquillity desires

Now I feel, I should confine myself to home. Take rest to recoup permanently and then join teaching."

Q. Why?

LIGHT desire for

HIDES feigning[*s]

A. "One thing is that I feel I should be given a light job. Since apparently I look totally all right, obviously people around, should take that I am feigning and will question why I should be treated with a concession".

HIDES out of

Timidity bashful

SHYNESS

DELUSIONS poor he is

DELUSIONS wealth of

The other is that I don't want to invite bad impression that I am trying to making mountain of a mole. Internally also I feel that the problem is not -to extent that it requires to be given any importance."

Q. "Do you think you will lose your

[*s] *Marked rubrics are added by Dr. Sehgal*

position in society or that you will be losing your dignity?"

TIMIDITY bashful

LAUGHING to hide her shyness

A. "Not exactly so. It is like, how to be present amongst the people who know the truth about you. I can't be that bold." She said and laughed.

Bell. 30 ^{c} was given.

Reported on 26.09.1996.

Complaints aggravated more than before, was to be brought down to bell 6 ^{c}.

(Bell. 6^{c} was given.).

Reported on 30.09.1996.

DELUSION, thin being

TALKING c, agg.

IRRITABILITY exertion from

A. She said, "I am feeling too weak even to talk I get tired after a little work and thereafter get irritated if someone even tries to speak to me."

Q. What will you like to do at that time?

QUITE wants to be, repose and tranquillity desires

A. "Just lie-down and take rest."

Q. Since when it all started?

A. "It from 28th evening."

Q. When do you think the impact of complaints was worst?

A. "Yesterday."

Q. "How do you feel today?"

A. "Almost the same but was terrible yesterday.

DELUSION thin being

EMBARRASSMENT, ail after

I am afraid as I feel I have no energy. It is a bit better today but yesterday it was too embarrassing."

Sul. 30

Sul. 30 was given for four weeks

Reported on 04.12.1996.

"Thanks Dr. the previous complaints of weakness etc. are no more."

Now it is a different story.

Q. What is that?

DELUSION, machine working he is a

ENNUI, silent (slowly)

A. "I feel I have lost job satisfaction. Previously I was quiet happy with it now I feel its all mechanical. You work from morning till evening, eat something and sleep. All bloody rotten routine."

Q. Than how do you try to overcome it?

COMPANY, desire for friend, of a

A. "That actually is my problem. In fact, I think I need the company of an intimate person with whom I can feel free in all respects."

Q. Do you get it?

GROPING as if in the dark LIGHT desire for

A. "This is the problem for which for what I have come to you Dr. can you suggest how to make friends, because I don't know this art."

Plum. 30

Plum. 30^c was given.

Reported on 28.02.1997.

Her husband knocks at my door late night.

"Sir I would not have troubled you at this odd hour for which I am sorry, but there is an emergency. My wife is back to the square with her physical problemsand is feeling terribly depressed.

DISCONCERTED

CARRIED, desires to be fast

DELUSIONS fasting

CARRIED, desire to be fast

She feels, she is fed up with all that and wants to be remedied soon. I shall have to abide by Dr.'s instruction. I know he will say, wait this is aggravation, but I think I need medicine, immediately. It will be a forced denial of something which my body needs immediately, if I shall be asked to wait."

COMPANY averse to sits in her room and does nothing

She is sitting in her room, does not want the presence of anyone, and has no inclination to do anything.

CARRIED desires to be fast

DELUSION, fasting

But she is not happy with this condition, wants to be helped out of this condition as early as possible which has been forced on her against her wishes.

Brom. 30^c was given.

Brom. 30

Reported on 08.03.1997.

In a very soft voice and with a sweet smile at her face, she said, "Sir there is a lot of change in my attitude."

Q. Is it positive or negative?

A. "I will say it is positive."

Q. Let me know", I said.

A. "Previously I wanted to stay home, now I want to go out for excursion, meet people and enjoy their talk."

Q. You mean some entertainment?

FORGETFUL thinking of something agg. diversion amel.

A. "Yes, that is true, infact, I feel so bored indoors that I keep waiting for such occasions, but there is a problem for which I have come, that is of weak memory. I forget things very easily and can't recall, when actually I need them."

FEAR, say something wrong lest she should

"Another problem connected with it, is that - I am not bold enough while speaking to my in-laws I am rather scared of doing so".

While saying this she lowered her voice as if her in-laws were somewhere around.

"To them every word spoken by me is like a red rage to a bull. They say whatever I say, is wrong."

CLINGING, held being amel.

FEAR insanity, losing his reason of

"But since my husband supports me I don't bother much about them."

What actually, I fear is my incapacity to stand their unusual behavior, I think they are mad and hearing all that I may also lose reason and become mad."

Lil-tig. 30

Lil-Tig. 30^c was given.

Reported on 03.04.1997.

Reported heavy discharges from nose.

Placebo was given.

Reported on 28.04.1997.

- Mind is well balanced she says

Menses irregular - with white discharge

Placebo was given.

Reported on 25.05.1997.

-Menses scanty

Placebo was given.

Reported on 05.07.1997.

Since there were relapses with complaints like vertigo, blurring of vision etc. which she had never before.

Lil. Tig. 6^c was given.

Lit-tig. 6

And thereafter she remained well and sent thanks that she is cured.

REVOLUTIONIZED HOMOEOPATHY

(A food for thought)

(SIMPLIFIED)

In simple words each one of us is born with a particular state of mind. For example there are rubrics like:-

-COWARDICE, opinion to express his *(graph., ign., petr.)*

-GRIEF, silent *(many remedies)*

-GRIEF, undemonstrative *(cycla., ign.)*

-AILMENTS from, ambition deceived *(bell., merc., n.v., plat., verat.)*

-INTOLERANCE, hindrance of *(ferr.p.,)*

-ANGER interruption from *(androc., cench., cham., cocc., graph., hell., n.v.,)*

and scores of other sensitivities spread over numerous pages of our repertories. Those who get circumstances enough to keep their mind cool and unprovoked remain safe which is very rare. In almost 99.9% of cases they meet with adverse atmosphere and over the time develop diseases unforeseen and unexpected with modern dreaded nomenclatures.

The reason is that this type of mental stress creates inefficiency in the two major systems in the body i.e. of ASSIMILATION and ELIMINATION. Inefficiency in assimilation means inability of the system to extract from the normal diet a person takes daily as a matter of routine the desired elements needed to keep the body fit.

For the sake of argument we can say if in a family of 10 members having same quality of food only one person gets deficient in iron another in calcium and the third in some other thing etc. etc., it does not mean that they require these elements from outside in bulk doses but restoration of efficiency in Assimilatory system.

Naturally the overall mal-nutrition causes inefficiency in eliminatory process also resulting in accumulation of undischarge portion of matter which rottons and ultimately converts itself into a ready ground for various types of infections and live organism.

Revolutionized Homoeopathy stands to prove this hypothesis in practice, giving homoeopathy a scientific base which is growingly been accepted as a practical approach all over the globe which even skeptic can not deny.

PRINCIPALS OF PRESCRIBING

Prescribing in the period of Crisis - Terminal Stage

Crisis is the period when the degenerative forces are working at the highest velocity (speed) when three things are needed of a medicine.

1. Stabilization : First to check the advancement of the disease i.e. the degeneration.

2. Recovery : In the second will come the repair of the damage done to recover the loss.

3. Generation : The third is to restore the growth, the creation of new cells. In other words to switch on the Natural Process of Balance between the forces of degeneration and generation, which creates the third force which resists and keeps under control the forces of degeneration by bringing harmony between them. This third force may be called defense mechanism or the process of self healing.

1. How will this be possible?

A. Only when, the Self Healing mechanism is on rails.

2. How to identify that the Self Healing mechanism is on rails?

A. Only when the process of ASSIMILATION & ELIMINATION takes place with optimum efficiency.

3. Please elaborate.

A. Optimum efficiency means - When the body is supposed to meet its deficiencies from the normal diet, a person takes as a matter of routine - except in those cases where a person is under fed - and likewise when the body is healthy enough to eliminate the rejected part of the food so that nothing is left in the system during the course of catabolism and metabolism to contaminate and create the toxic matter which causes disease.

4. How to know the role of medicine to enrail the Self-Healing mechanism?

A. If the medicine is correct, it is required to give two types of Actions -

The First and foremost is - To provide relief in all the present physical and mental ailments - with added efficiency - If the person is bed ridden he feels like getting up on his own and move about - It is total improvement.

The Second Action of ELIMINATION of toxic matter from the body starts after the First Action ends. First Action may lost for a few seconds, minutes, hours, days and weeks - depending upon the Acuteness of the case - the extent of crisis and the danger to survival.

5. How to distinguish whether it is the medicine or the Self-Healing process which is running the show?

A. Since it is one dose of the medicine at a time which means repetition of the dose till the action starts it is the medicine which has put on rails the Self Healing process. There after your job will be to wait and watch to see where this Automatic action of Self Healing or in other words Natural Healing ends - When you will need to repeat or raise the potency or change the medicine.

It is always not necessary that a single dose and the same medicine will clear the case. You may have to change the medicine even after a few hours - Keeping in view the general condition of the patient - whether the advance of the disease - *The first goal of stabilization of the case is achieved.*

For Selection of medicine - In certain cases of periodical or sudden unpredicted attacks of diseases like epilepsy-fevers etc. the mental state relating to before, during and after the attack will be of importance.

Management:-

Potency - It has been observed that in pathologically advanced Cases 6^c and below are safe. By doing above one has to be very careful while choosing a potency. In many Cases it has been found that 30^c and above remove Present mental and physical ailments but in addition create new symptoms which the patient never had in his life. In such Cases you have come down to 6^c again.

Higher potencies will be needed in most of the cases of fresh external injuries, like fresh wounds, food poisoning, fevers - caused by coming into contact with poison plants etc. etc.

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Dr. Sehgal's

REDISCOVERY OF HOMOEOPATHY

By : Dr. M.L. Sehgal