DIFFERENT METHODS IN TAKING THE CASE. FOUR CLINICAL CASES.

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ABSTRACT

In this article the author points out the need of being flexible while dealing with each single clinical case, basing upon the patient's features and on the grounds of the information that we are able to get during the consultation.

KEY WORDS

Repertory - Families of remedies - Periodic table

INTRODUCTION

I began studying Homeopathy about 20 years ago and I have always followed Hahnemann's and Kent's teachings. I have been lucky, because I have had the possibility to listen to the lessons and the accounts of almost all living masters who are using homeopathy in the most traditional way. Through their teachings, I realized that some of them used to give more importance to the gathering of the symptoms and to repertorization, others to the superimposition of the patient's picture according to a well known scheme of the materia medica; while others still used to point out the miasmatic aspects. Them all used to refer to the pathogenesis and to the informations taken from the works of their famous predecessors. After the period of tutoring, each homeopath broadens his own knowledge basing upon his own experience; he therefore adds informations to the remedy with which he succeeds in curing a patient, supposing that the cure will be deep and that the use of that determined remedy by the patient always results successfull over the years. All this outlines a closed circle, within which a certain number of remedis are known, and these remedies are prescribed and therefore only to those remedies information is added. Moreover, in most of the cases, separate information is added, that will not become integrated with the totality of the remedy.

I myself, 12 years ago, have been able to obtain a lot of useful information while translating William Boericke's materia medica, but, in the course of time, I realized that some cases turned out to be absolutely unsolvable. Later on, I started reading the new provings, particularly those made by Jeremy Sherr.

During that time I was always using the repertorization in a very rigorous way. I had a patient who used to suffer from panic attacks and through the repertorization I found a remedy unknown to me: Scorpio. I had only information coming from Allen materia medica and from the symptoms in the repertory, but these were only mental and general symptoms. Then I remembered that few weeks before I had bought "Dynamic provings" by Jeremy Sherr, which contained the proving of the scorpio Androctonus amoreuxii hebraeus. I looked in the book while the lady kept on speaking and I had a sensation as if she was reading the text, because her

symptoms were very much alike the symptoms described in the proving. In those years many homeopaths, not only in Italy, stated that there were enough remedies to cure our patients and that there was no need to find new provings. It was then when I started to doubt about the completeness of the material at disposal and I opened my mind to the so-called new homeopathic frontiers, and so I began to read authors that were considered heretics, like Rajan Sankaran and Jan Scholten. At the beginning I did my best trying not to close those books, because they seemed to me very far from all that I had been studying up to that moment. In the past other authors had made different kind of evaluations, among these were Hering and Kent, the latter was very much criticized in his time for using remedies like Alumina silicata. In 1932 Otto Leeser, homeopath from Stuttgart, wrote a beautiful book ("Textbook of homeopathic materia medica"), in which the remedies dealt with were all divided according to the periodic table of the elements. From this point of view, also Clarke made some very interesting remarks, for example, he wrote that Ferrum sulphuricum has the leading features of the other Ferrum, but many of the features of Sulphur appear, especially in its modalities. In the meanwhile, as I was writing before, I had started to read the provings by Jeremy Sherr and I was having some encouraging results by prescribing some "new" remedies like Hydrogenium, Androctonus, Haliaeetus leucocephalus and Neon. I was then finally convinced of the fact that homeopathy could not be confined to the work of Hahnemann, Hering, Boericke and Kent, but the road was long before I could swallow the new ideas of these new homeopaths with a lively imagination! I imposed upon myself the task to try to understand something more and to try to consider the possibility to prescribe some of the unexperimented remedies, at least in those cases for which I couldn't get results with the "common" remedies.

CASE 1-TRADITIONAL METHOD

This patient was born in 1962, she is married, has no children, housewife.

When she came for the first consultation (December 2001), she complained of various physical and psychological disturbances.

On the mental level, the patient told me that she started suffering from very severe anxiety attacks two years before. "Everything started on a night, when I was at a restaurant and I lost consciousness, losing urine." This was soon looked into by her family doctor and by a neurologist, but no organic pathologies came out. Since then she had frequent anxiety crises; these used to come out while she was at the supermarket.

Before I saw her, on the same day, I had seen her husband. He was suffering from the same disturb and so I tried to imagine how difficult it can be to go shopping for this couple (at that time online shopping was not such a widespread habit like today, which I believe could have been a good alternative to the homeopathic remedy!).

I asked her something more about this faintness, but she did not tell me anything interesting, except that fainting-fits have already quite frequently occurred in the past, but never contemporary with involuntary urination; what caused frequent faints was the sight of blood (Generals - Faintness - blood, at sight of / Mind - Unconsciousness - blood, sight of / Mind - Blood; cannot look at). At the same time as she has anxiety attack, her left hand becomes colder and she starts to have tachycardia (Chest - Palpitation of heart - anxiety - with), while after the attack she has flatulence. Once happened to her that she could not swallow anymore (Throat - Swallowing - impossible).

Physically, the menses were a problem, in fact she had many disturbs that could occur before, during or after the menstruation. She suffered from headache after menses (Head - Pain - menses - after - agg.) and she had been suffering quite frequently while taking contraceptive pill (Head -

Pain - menses - suppressed menses; from). Physically, she suffered from constipation before and during menses (Rectum - Constipation - menses - before - agg.; Rectum - Constipation - menses - during - agg.). Often, not during menses, constipation and diarrhea alternated (Rectum - Diarrhea - alternating with - constipation) and she could not have flatulence (Abdomen - Flatulence - obstructed).

Menses were scanty, these lasted only 2 days and she suffered from uterine disturbs before the beginning of the menstrual period (Female Genitalia/Sex - Menses - painful - flow - smaller the flow, the greater the pain; the / Abdomen - Pain - menses - during - increases amel; when flow). Before menses sweating increases (Perspiration - Menses - before - agg.) and she regularly suffered from aphthae; moreover, always during this period of time, she felt her legs particularly warm (Generals - Heat - sensation of - menses - before - agg.).

Mentally, she said that she cries before menses (Mind - weeping - menses - before), she said she is peevish (Mind - menses - before), she desires sweets (Generals - Food and Drinks - sweets - desire - menses; before) and she said she feels strong, so that this period is perfect for doing many things, among these doing house cleaning (Mind - Industrious - menses - before). During her life she has had once a convulsive episode, also this has been looked into without particular pathologic confirmation, just before menses (Generals - Convulsions - menses - before - agg.). This last symptom is not a proof for sure, since it occured only once; therefore it is not possible to be sure of the relationship between convulsion and menstrual period, but it is peculiar that also this disturb can be related with menses.

Further information have to do with her intolerance of injustice (Mind - Injustice, cannot support) and with a strong desire for cheese (Generals - Food and Drinks - cheese - desire).

ANALYSIS

The symptoms can also be divided into different ways for the repertorization; in this case we see at first the symptoms related to the menstrual period:

- 1. MIND INDUSTRIOUS menses before
- 2. MIND IRRITABILITY menses before
- 3. MIND WEEPING menses before
- 4. HEAD PAIN menses after agg.
- 5. HEAD PAIN menses suppressed menses; from
- 6. ABDOMEN PAIN menses during increases amel.; when flow
- 7. RECTUM CONSTIPATION menses before agg.
- 8. RECTUM CONSTIPATION menses during agg.
- 9. EXTREMITIES COLDNESS Hands one hand etc...
- 10. PERSPIRATION MENSES before agg.
- 11. GENERALS CONVULSIONS menses before agg.
- 12. GENERALS FOOD and DRINKS sweets desire menses; before
- 13. GENERALS HEAT sensation of menses before agg.

TABLE 1 - Symptoms related to the menstruation

All other symptoms can be considered below:

- 1. MIND BLOOD; cannot look at etc...
- 2. MIND INJUSTICE, cannot support
- 3. THROAT SWALLOWING impossible
- 4. ABDOMEN FLATULENCE obstructed
- 5. RECTUM DIARRHEA alternating with constipation
- 6. CHEST PALPITATION of heart anxiety with
- 7. GENERALS FOOD and DRINKS cheese desire

TABLE 2 - Other symptoms not related to the menstruation

As you can see in the tables regarding the repertorization, this correlation of symptoms with the menses lead me to think a lot of Moschus, which covers 8 symptoms out of the 20 chosen and in the total repertorization it appears at position 17. Moschus has 24 symptoms of worsening in the repertory before the menstrual period, 51 during and 1 after (the headache which the patient suffers from). It is an hysterical remedy, that goes together with the frequent faints, which this woman has been suffering from, and it is the only remedy in the rubric: "Throat - Choking nervous", that can substitute the rubric chosen before: "Throat - Swallowing - impossible". I believe that in order to prescribe the little remedies, not very well-known, it is necessary to know very well the big remedies, in order to exclude in that patient one of these. In fact this patient was not convincing to me, neither like Sepia, Sulphur, Pulsatilla, Lachesis nor like any other great remedy that may cover more symptoms. Moreover, Allen writes with regard to Moschus: "Valuable for hysterical complaints, with palpitation, suffocative spasms in the chest, constriction of the throat, restlessness, great anxiety, particularly with belching and flatulent symptoms. That is: great value for hysterical disturbances, with palpitations, suffocative spasms in the chest, constriction of the throat, restlessness, great anxiety, particularly with belching and flatulent symptoms."

Therefore I decide to prescribe Moschus MK 3 drops 3 times a day for 3 days.

FOLLOW UP

I saw the patient after 40 days and she told me that straight after the assumption of the remedy she had an aphtha for 20 days, but on the day before the consultation the menses had begun and the aphthas did not return. All premenstrual symptoms had not been that bad and anxiety was 50% better. I continued with Moschus XMK, repeating the remedy more times and 7 months after the first consultation she told me: "Before the menstrual period I am no more so restless and hyperactive, I no more cry, I am less peevish, neither warm nor sweating in the legs appeared again, I no more eat sweets before menses and also the headache is better. Anxiety is now infrequent and I can say it is 90% better, I no more had a cold hand, palpitations are very rare and also my bowels are much better.

CONCLUSIONS

This patient never needed to assume any other remedy but Moschus, also in the acute state, up till now, she assumes the remedy rarely, since she had almost a total improvement of the symptomatology. She can go shopping to the supermarket with her husband. The only

precaution they take, even if they never needed, is to keep at hand a dropping bottle of Moschus for her and a dropping bottle of Argentum nitricum for him. I am expecting to receive at least a shopping bag as a reward.

CASE 2 - TRADITIONAL METHOD

This patien was born in 1966, she is married and has a child, she is a clerk.

The first consultation took place on May 2001. The diagnosis was ulcerative colitis and she was taking mesalazine 400 mg. (4 pills a day). The diagnosis dates back to 1994, after a symptomatology consisting of shooting pains in abdomen and heavy diarrhea. The pains were accompanied by strong chills (Abdomen - Complaints of abdomen - accomapied by - chillness / Abdomen - Pain - chill - during / Chill - Pain - with) and she had to bend forward to have some relief (Abdomen - Pain - bending forward - amel. / Abdomen - Pain - bending double - amel). Moreover, the pains were better after stool (Abdomen - Pain - stool - after - amel.) and after she had to pass flatus (Abdomen - Pain - flatus; passing - amel.). Her bowels usually could not stand beans (Generals - Food and drinks - peas - agg.) and shellfish (Generals - Food and Drinks shelfish - agg.). She also suffered from gastric disorders, with pains having the same kind of amelioration as in the abdomen, these ameliorate while bending forward (Stomach - Pain bending double - amel. / Stomach - Pain - bending - forward - amel.). In 1993 she had a considerable ponderal decay, at the same time as she separated from her husband. When she came to the consultation she seemed serene, she married again and she had a 3 year old child. Few months before the consultation, she had decided to give up the therapy, because she had been feeling better with the mesalazine, but after few weeks, abdominal fits and diarrhea had come out again, so she was obliged to intake it again. At the age of 22 diagnosis of sclerosing cholangitis (Abdomen - Inflammation - Gallbladder). Before pregnancy she had been suffering from dysmenorrhea, that always came together with vomiting (Stomach - Vomiting - pain;

From the point of view of her disposition, we can say that she is the kind of person that can become easily irritated (Mind - Anger - easily).

ANALYSIS

The repertorization has been done with the following rubrics:

- 1. ABDOMEN COMPLAINTS of abdomen accompanied by chilliness
- 2. ABDOMEN PAIN chill during
- 3. CHILL PAIN with
- 4. ABDOMEN PAIN bending forward amel.
- 5. ABDOMEN PAIN bending double amel.
- 6. ABDOMEN PAIN stool after amel.
- 7. ABDOMEN PAIN flatus; passing amel.
- 8. GENERALS FOOD and DRINKS peas agg.
- 9. GENERALS FOOD and DRINKS shellfish agg.
- 10. STOMACH PAIN bending double amel.
- 11. STOMACH PAIN bending forward amel.
- 12. ABDOMEN INFLAMMATION Gallbladder
- 13. STOMACH VOMITING pain; from

14. MIND - ANGER - easily

Table 3 - Repertorization

Prescription: COLOCYNTHIS MK 3 drops once a day.

FOLLOW UP

<u>Two months later</u> - The first change that she reported to me, during the first follow up, was that she felt stronger, less weary. She felt so good that she decided to selfreduce mesalazine, initially taking 3 pills a day, after 3 weeks of homeopathic therapy, and then she took away another pill (at this moment she was taking 2 pills. I asked her to continue to take the remedy daily and, if she felt better, to reduce mesalazine to 1 pill a day, the following month.

<u>Forty days later</u> - I heard from her in the middle of september; she had begun to take only 1 pill 20 days before, and almost every day she had slight abdominal pains; she felt well on the whole. I prescribed Colocynthis MK3 drops, 3 times a day.

Thirty days later - She came back for a consultation, she felt better. She told me: "On the whole I feel much better, 70% better, I feel stronger, I feel calmer, my mood is good." I prescribed Colocynthis XMK 3 drops, 2 times a day, and I asked her to give up with mesalazine. Few days after she had given up with the medicine she phoned me and she told me: "I have pain in the throat, fever and chills; the same had happened to me when I started the homeopathic therapy, but it had soon gone and I didn't tell you anything about it. Now I feel burning in the throat, as if it is raw." (Throat - Pain - burning / Throat - Pain - raw; as if). In both rubrics Colocynthis appears; it was initially prescribed 3 drops each 20 minutes, later it was interrupted at intervals while the symptomatology improved.

Since then this patient has been taking different dilutions of the remedy, always with good results and up till now she has no more had symptoms of ulcerative colitis. Since October 2001 she has no more taken a pill of mesalazine.

CASE 3 - SANKARAN'S METHOD

This patient was born in 1955.

He came to the first consultation on January 2005, after having appreciated for many years the action of some constitutional remedies in his family. He told me that during his adolescence he frequently suffered from tonsillitis, that have been substituted by episodes of right side forehead sinusitis, during most recent years, 2 - 3 times a year. These episodes started with a common cold and always turned into sinusitis, therefore he had to take antibiotic therapy more times. The pain is particularly severe and it is described as pressing, from inward to outward (Head - Pain - Forehead - pressing pain - outward - 110 remedies). He also said: "I would like to make a hole in my forehead to let come out what is inside." I looked for other physical symptoms, but the patient feelt good on the whole and also in the anamnesis nothing interesting came out.

So I passed on to the psychological evaluation. He said of himself that he has a conciliatory nature and that he is a tolerant man, but, he said: "When I cross the threshold, I give vent to my anger shouting."

He spoke a lot about his role as a father, and he said: "I suffer when I have to reproach my children, and when I have to let my authority be respected. This also happens at work, I do my best to try to impose my authority and it's hard for me to do it. To see the bounds between authority and oppression is difficult to me; I am always afraid that I could hurt someone." So I asked him to tell me about his relationships with the other people and he said: "Sometimes I have the impression that I am not part of this society, I don't like it, I feel isolated." I could hardly understand, or better, I did not know how to turn his statements into repertorial terms, so I asked him if he had any recurring dreams and he reported of dreams he had in the past, when he used to dream about someone who was trying to kill him in different ways and situations, in most of cases trying to shoot at him. I looked for other information, but I could not get anymore, neither desires for foods, nor other remarkable symptoms. I realized that, through a traditional analysis, I could not get anywhere, therefore I tried to analyse the case in a different way and I start thinking of Rajan Sankaran's method. If I consider what he told me about the boundary between authority and oppression, about the fear of hurting other people's feelings and about the dream of being killed, I can gather them all into one theme: trauma / injury. The theme of the injury is characteristic of the family of the Compositae. In the rubric "Generals - Injuries" in fact, 8 remedies belonging to this family appear (Absinthium, Arnica, Bellis perennis, Calendula, Chamomilla, Echinacea, Erigeron and Millefolium), but also Artemisia vulgaris, Cina, Cineraria maritima, Eupatorium perfoliatum, Grindelia and Xanthium spinosum, are in rubrics which are related to injuries. While if I consider his feeling of not belonging to the world, I can group it, according to Sankaran's theories, in the leprous miasm. At this point it's easy, I can see which remedy, in the Compositae, Sankaran considers for the leprous miasma; so I looked in the table and I found out that 3 remedies are shown: Inula helenium, Lactuca virosa and Lappa arctium. I looked again in the repertorial symptoms and I

found out Lactuca virosa in the rubrics: "Head - Pain - Forehead - pressing pain - outward", and "Dreams - Shot; being - wounded by a shot; being".

With reference to this remedy, Sankaran wrote: "Isolated, scorned and disgusted by injury and hurt / Isolated, scorned and disgusted by injury and hurt."

I decided to prescribe Lactuca virosa MK.

Later on, I have seen the patient quite regularly, he has no more had episodes of sinusitis and mentally he can manage the relationships with children and employees with more serenity.

CASE 4 – ANIONS, CATIONS AND THE PERIODIC TABLE

This patient was born in 1945, she's widow, has no children, housewife.

She came to the first consultation on November 2006 complaining of a copious and visible hair-falling (Head - Hair - falling), ingravescent during the last 3 years.

She had always been suffering from headache, but since she was in menopause (52 years) this discomfort had started to appear more frequently and it was more upsetting (Head - Pain menopause: during).

She said: "It's as if I have a weight, something that is compressing over my eyes (Head -Pain - Forehead - Eyes - Above - pressing pain). This is more frequent during winter, while it gets better during summer (Head - Pain - winter headaches / Generals - Seasons - summer amel.). When I feel it, I have to stay in bed, in the darkness (Head - Pain - lying - dark room; in a - amel.). It continues for five or six days (Head - Pain - constant, continued). The time distance between two headaches is rarely more than ten days. When I start feeling headache, it's better for me not to eat at lunch and at dinner time, because in these cases it worsens. Frequently there's a combination with stomach and digestion" (Head - Pain - gastric).

She was suffering from heartburn and abdominal bloating; she had gastroscopy that was showing gastritis with HP+, for which she started a therapy based upon antibiotic and omeprazole. After a few days she gave up taking the antibiotic, because she believed that headaches were worsening and she continued taking only omeprazole. For the headache she was taking rizatriptan or indomethacin.

She reported me also about an osteoporosis found in computerized bone mineralometry. She also suffered from heat flushes since menopause took place (Generals - Heat - flushes of - menopause; during). In previous years she took a hormonal therapy, that she later suspended because of metrorrhagia. She was suffering from pyorrhea, that came out when she was 48; since then she has been fourteen dental implantations!

She suffers from cold and likes the sun very much.

Then she told me that she decided to go to live in the country about one year ago, because she believed that her headache had something to do with living in Milan, so she sold her house and bought a new one in the country. Then she realized that her headache was even worse and she resolved to sell her house in the country and to buy a new one in Milan.

Everything a patient tells us can be explained into different ways, sometimes the risk is to make mistakes that could lead to endanger the whole analysis, but in my opinion this could be interpreted as "acting with resolution", and I consider it an indication for the mineral world. Her appearance, the story of the osteoporosis and mainly the dental disturb, lead me to a carbonic remedy (in the rubric "Teeth - Looseness of", there are 107 remedies and 10 out of these are carbonic remedies; I am not very interested in looking at which are the remedies, to me this is an indication for all carbonic remedies, also those that are not present).

And so I decided that I had to prescribe a carbonic remedy with headache disturances at menopause. I looked in the rubric: Carbo Vegetabilis o Strontium carbonicum? The patient reported that she suffers from cold and that she likes the sun very much, so I asked her how long she can remain in the sun and she answered that she can also get burned in the sun. Well, Strontium carbonicum is also in the rubrics: "Head - Hair - falling", "Generals - Seasons - summer - amel." and "Generals - Heat - flushes of - menopause; during". I know about the headache of Strontium carbonicum, it begins gradually and disappears gradually (Head - Pain increasing - gradually - decreasing - gradually), she comfirmed also this. I prescribed Strontium carbonicum MK 5 drops, once a day.

FOLLOW UP

After 3 weeks not very much changed, only stomach and bowels were a little better. I prescribed Strontium carbonicum XMK, 5 drops once a day. I saw her again in January, after about 40 days of XMK potency, and she told me: "Few days after taking this dilution hair falling stopped; heat flushes were better, they have no more appeared every day." At the end of January she made a gastroscopy again, that confirmed the disappearance of the Helicobacter pylori and the disappearance of the gastritis. I asked her to suspend taking the omeoprazole, which, as far as I know, has never let any Helicobacter go, except when combined with the antibiotic therapy (and there would be a lot to say about this...). Her headaches were not so frequent and less severe.

The ameliorations of this patient in every aspect seem meaningful. The analysis of the case, taking into account the kingdoms and the radicals, has lead to choose with no difficulty a remedy that, in other cases, would have been mixed up in the mass of remedies that could be examined for this case.

CONCLUSIONS

The aim of this article is to show that it is possile to come to the patient's individual prescription of the remedy, proceeding along different paths, following the patient's features and through the information that we get to receive during the consultation. I did not believe before and I still do not believe today that these new homeopathic trends could take the place of the traditional method, but I believe that these have added very useful information to allow us to prescribe remedies, that we would have never prescribed. Since I have started to use these new methods, I have had the possibility to prescribe with great satisfaction some remedies like Ferrum silicicum, Manganum muriaticum, Natrum fluoratum, Natrum nitricum, Falcon peregrinus, Lac leoninum and many others, and I am now sure that it is better to prescribe basing upon a virtual materia medica, instead of prescribing wrong remedies!

But it is necessary to say that this reasoning could become very risky, especially if it is followed by homeopaths at the beginning of their profession.

In order to be able to prescribe a remedy like Baryta phosphorica, it is necessary to know well Baryta carbonica and Phosphorus, in order to exclude the prescription of the two compounds and so be sure to make a differential diagnosis among the remedies that can have the basic features of Baryta phosphorica; it is therefore right and proper to look at first into the remedies that contain lack of self-confidence and that are principally childish, and secondly look into those remedies with hemorragic diathesis and particularly compassionate soul, which are, like a Baryta phosphorica-patient of mine says, "blotting-paper of other people's sufferings".

It is important that the homeopaths who are eager to study the provings agree on the need of experimenting substances that are in close relation with our physiology, the basic elements existing in nature.

While we are evaluating the periodic table, we can clearly see the connection between remedies in the same series. It is interesting the correlation between close remedies like Platina, Aurum, Mercurius and Thallium in the miasmatic aspect as well as in the aspect of physical and mental symptomatology, of the so-called "golden series", or to bind remedies that tend to cling firmly to their mother's hand (Antimonium tartaricum, Arsenicum, Bismuthum and Phosphorus) and find out that them all are in stage 15 of the periodic table of the elements.

In my opinion, it is necessary to be moderate and not to think that there is only one way of coming closer to homeopathy. My question is: "Why do we give credit to some remedies whose information come from experimentations made on two or three patients, moreover we do not even know if these experimentation are reliable? Instead, why don't we try to think of the idea of a virtual remedy? It could be enough to think of new ways only in those cases, where we can't find a solution. I am working in this way; I think of which method to use in each first visit, basing on what comes out during the consultation, always beginning with the traditional repertorization and changing in those cases where I can't get satisfactory ideas or, supposing, in case some information open new paths.

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