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BJAIN

Utility of *Phatak repertory* in acute diseases

Dr.Ami Chandarana

Abstract: The term acute disease defines that it is rapidly progressive and always complete its course more or less quickly. For the treatment of acute disease recently altered symptoms whether they are mental, general and physical should be considered to furnish the totality. *Phatak repertory* is very concise and convenient clinical repertory to use as it is arranged alphabetically. The good part of *Phatak repertory* is it contains many clinical and pathological rubrics and all the medicines it contains were used by author himself. *Phatak repertory* is very useful in cases which are full of general symptoms or we can do generalization of available symptom and use it.

Objective: To study the utility of *Phatak repertory* in acute diseases. To manage the acute diseases with *Phatak repertory*. To study the *Phatak repertory* and prescribed on the base of individualization.

Results: Results were categorised into 3 category like significantly improved, improved and status quo. Out of 50, 80% significantly improved, 14% improved and 6% cases are status quo.

Conclusion: *Phatak repertory* is concise and alphabetically arranged handy clinical repertory. It is very feasible to use for the acute disease as it contains more clinical and pathological rubrics.

Keywords: *Phatak repertory*, acute diseases

Abbreviations: COVID-19 – coronavirus disease 2019, SARS-CoV-2 - severe acute respiratory syndrome coronavirus 2, WHO – World Health Organisation, e.g – example, IL – interleukin, interstitial lung disease (ILD)

Introduction

Disease is considered as the state of disharmonious functioning of vital force, which is manifested by loss of sense of well-being.¹ Dr Hahnemann defined acute disease as – “the disease to which man is liable are either rapid, morbid processes of the abnormally deranged vital force, which have a tendency to finish their course more or less quickly but always in moderate time.” Dr Hahnemann classify acute disease in – individual, sporadic and epidemic.²

During the treatment of acute disease main aim of the physician is to accelerate the natural defense mechanism. Physician has to prescribe only on the present acute totality.³

In acute disease it may be possible that remedy may change very soon, followed by either patient may cure and do not require any other medi-

cine or it will back to background chronic totality.³ The management of the remedy in regard to potency and dose is as important as the selection of remedy.⁴

Materia medica is the ever enlarging subject and it is not possible to memories all the available symptoms, so to solve this problem repertory was born. The repertory is an outcome of the logical human mind. Numerous repertories has come since Dr Hahnemann’s era till now, they are classify according to their philosophical background and use.⁵

Phatak repertory is concise, clinical and alphabetically arranged repertory which is published in 1963 by Dr S.R. PHATAK. It is based on the “*Repertory part of synoptic key to materia medica*” by C. M. Borer. It contains innumerable addition both in the rubrics and remedies, so that it is like enlarged and improvised version of the “synoptic key.” The addition made by Dr S. R. Phatak are

from the authenticity sources like Kent, BTPB, etc. and also from his case taking and clinical observations.⁶

Objective:

To study the utility of *Phatak repertory* in acute disease

To manage the acute disease with *Phatak repertory*

To study the *Phatak repertory*

Materials and Methodology:

The present study was conducted at Ahmedabad Homeopathic Medical College & Sainath Hospital, Bopal Ghuma Road, Ahmedabad.

Materials:

- Project site: Ahmedabad Homoeopathic Medical College & Sainath Hospital.
- Number of cases: 50

- Duration of year: 1 year

Methods:

A detailed case history was taken according to the model case record format with special emphasis to ascertain the following:

- **History of present complaints, past history, family history, personal history:** Present complaints with their duration and the associated was recorded very keenly because in acute recent alteration which is very useful for the prescription. Past history was recorded to know any chronic tendency. Maternal and paternal family history was taken to know the hereditary causes and mostly useful in cases of acute exacerbation. All the general symptoms of the patients were very keenly recorded because recently altered generals were very helpful for prescription.

Medical examination:

- **General and systemic examination:** positive findings

were noted.

- **Investigation:** all the required investigations were included and noted as per the case required.
- **Diagnosis:** from clinical examination and investigations.

Selection of Tools:

- **Homoeopathic Repertory:** A concise repertory of homoeopathic medicine by DR S.R.PHATAK⁷

Inclusion Criteria:

Acute cases were randomly selected irrespective of age, sex, socio-economic condition.

Exclusion Criteria:

- Acute cases advanced and irreversible pathological conditions.
- Cases with irregular follow up.
- Acute surgical emergency
- Medico legal cases
- Any acute disease condition which requires an emergency modern medicines.

STUDY DESIGN: Experimental

ADMINISTRATION OF MEDICINES:

Required potency, dose and repetition was selected according to homoeopathic principles. All the medicines was administered through oral route.

FOLLOW UP: As per the requirement and intensity of cases.

ANALYSIS AND RESULTS:

Criteria for result:

1. Significant improvement – Disappearance of all the sign and symptoms with no recurrence.
2. Improved: Decrease in intensity and / or frequency of presenting complaints with feeling of well-being.
3. Status quo – Neither increase nor decrease in the symptoms of the patient.

CONCLUSION:

It is based on outcome of result on the basis of material and method.

Results

Age incidences

Table 1: presenting age group and percentage of total no. of patients

Age	Number of patients	Percentage (%)
0-10	3	6%
10-20	15	30%
20-30	13	26%
30-40	5	10%
40-50	6	12%
50-60	8	16%
Total	50	100%

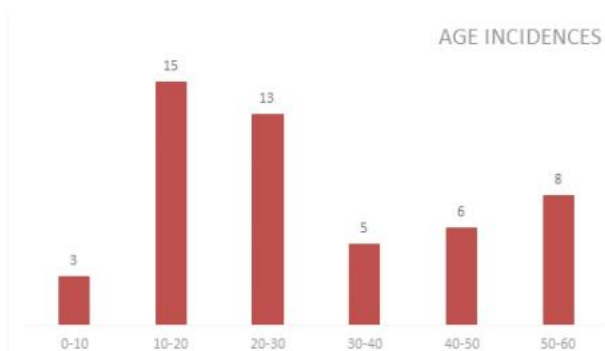


Figure 1: Bar graph presenting age demographic incidences

Gender incidences

Table 2: presenting gender distribution

Gender	Number of patients	Percentage (%)
Female	22	44%
Male	28	56%
Total	50	100%

Gender Distribution

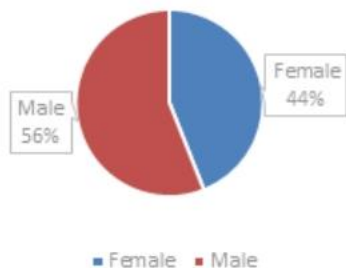


Figure 2: pie chart present comparison of gender distribution

Clinical conditions wise distribution

Table 3: presenting various acute clinical conditions in different no. of patients and percentage

Clinical Conditions	No of patients	Percentage (%)
Acute Bronchitis	5	10%
Acute Gastritis	3	6%
Acute Gastro enteritis	5	10%
Acute otitis media	5	10%

Acute tonsillitis	5	10%
Dengue	10	20%
Food poisoning	2	4%
Urinary tract infection	5	10%
viral fever	10	20%
Grand Total	50	100%

CLINICAL CONDITIONS

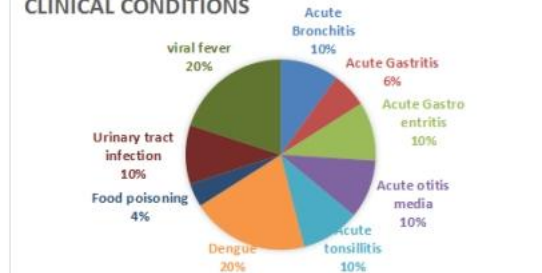


Figure 3: pie chart presenting various acute clinical conditions distribution

System wise distribution

Table 4: presenting system wise distribution in no. of patients and percentage

Different Systems	No. of Patients	Percentage (%)
Infectious Diseases	20	40%
Digestive System	10	20%
Auditory System	5	10%
Urinary System	5	10%
Respiratory System	10	20%
Total	50	100%

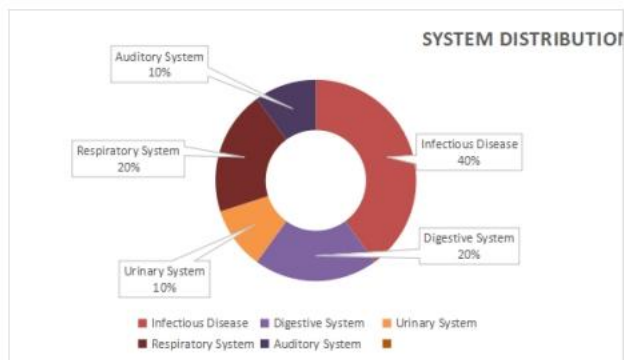


Figure 4: Doughnut pie chart present system wise distribution

Remedy distribution

Table 5: present various homoeopathic remedies used for the treatment of acute diseases with percentage

Medicine	No of case	%	Medicine	No of case	%
Eupatorium Perfoliatom	5	10%	Cantharis	3	6%
Arsenicum Album	5	10%	Phosphorus	2	4%
Mercurius Solubilis	1	2%	Gelsemium	5	10%
Belladonna	4	8%	Bryonia	2	4%
Lachesis	1	2%	Colocynthis	2	4%
opium	1	2%	Hepar sulphuris	1	2%
Nux Vomica	3	6%	Veretrum Album	1	2%
China Officinalis	3	6%	Aconite	1	2%
Antimonium Tartricum	2	4%	Mercurius Iodatus Flavum	1	2%
Pulsatilla	3	6%	Podophyllum	1	2%
Mercurius Iodatus Ruber	2	4%			
Apis Mellifica	1	2%	Total	50	100%

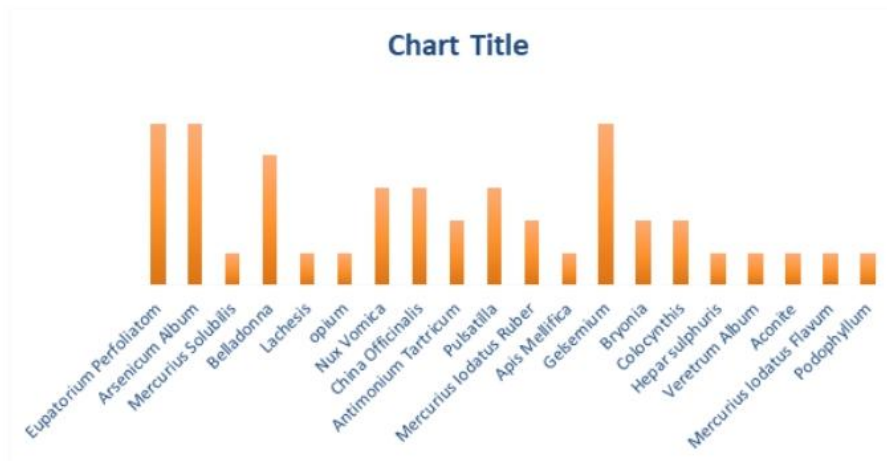


Figure 5: column chart present remedy distribution

Potency distribution

Table 6: present various potency used in the study for no. of patients with percentage

Potency	No. of Patients	Percentage (%)
30c	26	52%
200c	22	44%
1M	2	4%
Total	50	100%

POTENCY DISTRIBUTION

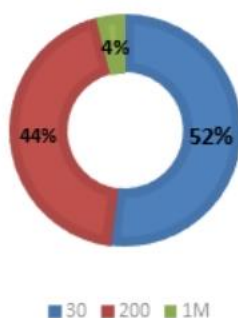


Figure 6: doughnut pie chart present potency used in the study

Remarks

Table 7: present treatment result of 50 patient

Remarks	Number of patients	Percentage (%)
Improved	7	14%
significantly Improved	40	80%
Status Quo	3	6%
Total	50	100%

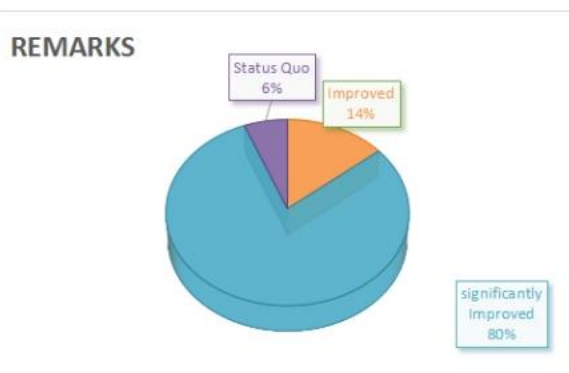


Figure 6: pie chart present improvement results

Discussion

The study was conducted at Ahmedabad homeopathic medical college and Sainath hospital, to prove the utility of *Phatak repertory* in acute disease. Total 50 acute cases were selected for the study. All 50 cases were analyzed with *Phatak repertory*. Selected acute cases were of different age groups, irrespective of both gender. Only those acute cases were included who don't required any emergency treatment. The cases were diagnosed on the clinical presentation as well as investigation as per the case demands.

The cases were repertories from the *Phatak repertory*. Assessment was done before treatment and after treatment. Follow up was taken as per the case required. The statistical analysis were calculated and interpreted. Cases were analysed on the bases of age distribution, gender distribution, clinical condition wise distribution, system wise distribution, various remedies distribution, potency distribution and remarks.

In this study of 50 patients were selected from all the age groups out of that highest incidence noted in age group 10-20 years which is 30% (15 patients), then in the age group of 20 – 30 years which is 26% (13 patients), after that in 50-60 years which is 16% (8 patients), then in the age group of 40-50 years which is 10% (6 patients), after that age group of 30-40 years which is 10% (5 patients), then in the age group of 0-10 years which is 6% (3 patients).

For this study, cases were selected from both genders out of that 56% (28 patients) males and 44% (22 patients) females.

This study contains various acute diseases out of that highest incidences is of viral fever as well as dengue which is 20% (10 patients), after that acute gastro

enteritis, urinary tract infection, acute tonsillitis and acute otitis media which is of 10% (5 patients), then acute gastritis occurs in 6% (3 patients) and lowest incidence is of food poisoning which is 4% (2 patients).

In this study, various acute diseases includes from various system of the body, the highest incidences is of infectious diseases which are 40% (20 patients), then from digestive system and respiratory system 20% (10 patients), after that from the urinary system and auditory system 10% (5 patients).

Remedies were prescribed on the basis of individuality after repertorisation from *Phatak repertory*. Numerous remedies were used to treat acute diseases out of that highest used remedies are *Eupatorium perfoliatum*, *Gelsemium sempervirens* and *Arsenicum album* in the 10 % (5 patients), after that *Belladonna* is used in 8% (4 patients) cases, then *Nux vomica*, *China officinalis*, *Pulsatilla nigircans* and *Cantharis vesicatoria* in 6% (3 patients), after that *Antimonium tartaricum*, *Mercurius iodatus ruber*, *Phosphorus*, *Bryonia alba* and *Colocynthis* used in 4% (2 patients), then *Mercurius Solubilis*, *Lachesis mutus*, *Opium*, *Apis mellifica*, *Hepar sulphuris*, *Veratrum album*, *Aconitum napellus*, *Mercurius iodatus flavum* used in 2% (1 patient).

In this study, many suitable different potencies were used as per the guidelines given in *Organon of medicine* out of that maximum used potency is 30c for the 52% (26 patients), then 200c potency used for 44% (22 patients), minimum used potency is 1M is for 4% (2 patients).

Conclusion

As we know that no repertory is perfect all the repertory has its own utility like that *Phatak repertory* contains more general symptoms, even we can't find particular symptom we can make it general. Here all the rubrics arranged alphabetically so sometimes it is difficult to find out mental symptoms. We can sometimes find difficulties when case is full of particulars.

At the end of the study significantly improved cases are 80% (40 patients), improved cases are 14% (7 patients) and status quo show in 6% (3 patients).

Thus, from the above observation, one can draw the conclusion that *Phatak repertory* is useful to solve the acute diseases. As it is alphabetically arranged so it is very feasible to use and convenient to carry at bed side. *Phatak repertory* cannot replace the exhaustive repertories as it contains very few sub-rubrics and very few medicines for the same. So in the cases which contain more general symptoms, *Phatak repertory* is very useful, or one can take particular symptom and make it general like, "pulsating pain in head" one can find

in *Phatak repertory* as pain: pulsating. With a very few sub-rubrics and medicines, one can opt very wonderful results. Another good part of *Phatak repertory* is that it contains only those medicines which were used by author himself.

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