Understanding the Illness

The information in a case

Many beginning homeopaths believe that all they need to do “to take a case” is to obtain the symptoms: symptoms, symptoms, and more symptoms.

This is not enough.

Symptoms are just one example of the kind of information you, as the case-taker, will work with in order to:

- Understand and manage the case
- Select a homeopathic remedy

The box below lists the kinds of information that should be obtained in a case. There are actual symptoms, and then there is information that further defines the symptoms, their qualities, or their mode of presentation. (Most cases also include a lot of extraneous information. Over several lessons, you will learn to separate the wheat from the chaff.) In this lesson, we will focus on illness-identifying symptoms (common symptoms) and touch on etiology, the pace and intensity of the illness, and prognostic information. We will cover chief complaint and characteristic symptoms (individualizing symptoms) in later lessons.

The types of information in a case

1. Illness identifying (common) symptoms
2. Chief complaint
3. Etiology (cause)
4. Pace and intensity of the illness
5. Characteristic (individualizing) symptoms
6. Prognostic information

(Curious for more? See box at end of this lesson.)

The very first thing you must do in managing a case is to decide whether you are going to help the person. Are you going to take this case, or refer it to another practitioner? Is homeopathic treatment appropriate for this problem? You cannot make these decisions unless you know what is wrong with the person, and how serious it is. You need to identify the illness.

Illness-identifying symptoms (Common symptoms)

Some people rely on their doctor to identify the illness, either by seeking professional medical diagnosis in person, or by discussing the symptoms over the phone. Others feel comfortable identifying ordinary acute illnesses themselves. They recognize this illness from previous experience because the symptoms are identical, or they have made a thorough study of the symptoms in their home healthcare guidebooks.

Illness-identifying symptoms are those symptoms that enable you (and/or your practitioner) to put a name on the acute illness. Illness-identifying symptoms are also called “common symptoms,” because they are the symptoms that are usual, typical, ordinary, and expected for a given illness.

Later in this study guide, we will look closely at the homeopathic principle that states that the most important symptoms for selecting the simillimum are those that are unusual in the disease. This begs the question: If you do not know the common symptoms of an illness, how will you know what is unusual?

For example:

1. When you see a person who has rather quickly developed a runny nose, coughing, sneezing, and a tired, run down feeling … you are probably seeing a constellation of some
of the common symptoms of a cold, and it is probably accurate to identify this acute illness as a cold.

2. When you see a nursing woman who has rather suddenly developed breast pain, with heat, redness, swelling, and tenderness of the breast ... you are probably seeing a constellation of some of the common symptoms of mastitis, and it is probably accurate to identify this acute illness as mastitis.

3. When you see a person who just developed an uncomfortable fullness a short while after eating, with abdominal distension and crampy sensations, flatulence and/or belching; and a change from their usual temperament, ... you are probably seeing a constellation of some of the common symptoms of gas or indigestion, and it is probably accurate to identify this acute illness as gas or indigestion.

There are many familiar acute problems. All kinds of injuries, infections, inflammations, and reactions are fairly easy to identify. However, there are many acute problems that only seem familiar, as the following stories demonstrate:

4. Your mother asks for a remedy for the painful swelling in her big toe. She admits that her toe has been a bit more sensitive recently, but she definitely remembers bumping it against a table leg this morning. For a few days, you give Arnica montana repeatedly without effect. A week later, a doctor diagnoses her condition as podagra (gouty arthritis of the big toe which is usually chronic). You mistook your mother’s symptoms for an acute illness, and caused her more than a week of pain and insomnia (the pain of gout is often worse at night). Your mother needs chronic treatment.

5. Your child complains of throat pain, hoarseness, and difficulty swallowing. You presume she has pharyngitis (sore throat), which she has had before, and which is, like most sore throats, a common acute viral or bacterial infection. However, there is an illness with very similar symptoms called acute epiglottitis, which is “a severe, rapidly progressive infection of the epiglottis and surrounding tissues that may be fatal because of sudden respiratory obstruction of the inflamed structures.” How can you be sure your child does not have that condition?

These are just two examples where there is both a real possibility of, and a distinct risk associated with, mis-identifying an illness. This is why you should develop a relationship with a medical professional who will work with you for information and diagnosis. This is a person you can talk to if the illness progresses in an unusual direction, someone to whom you can entrust the case whenever necessary.

Develop a relationship with a medical professional who will work with you as necessary.

Understanding the illness through other information

There is more to identifying the acute illness than just putting a name on the common symptoms. In fact, learning the etiology (cause) of the illness, the pace and intensity of the illness, and the prognosis (how the illness usually progresses; how the symptoms usually change; what the usual outcome is) are all part of identifying the illness, understanding it, and gauging its gravity. This information helps you decide if you should take the case, or take it to a professional.

For example, vomiting can be due to a wide range of problems—food poisoning, viral or bacterial infections, food allergy, drug reaction, nervousness, vertigo, head injury, or cancer, to cite a few examples. If you know that your son’s vomiting is due to car sickness, you know what to expect in the illness, and you know it is probably not serious (although continued vomiting can be dangerous in babies, the elderly, and people in poor health). If you know
that the swelling on your dog’s paw is from a bee sting, you will treat it differently than if you suspect a fracture or have no idea of the cause. Etiological information helps make the identification and treatment of the illness more assured.

The pace of an illness also helps identify it. Most illnesses that come on fairly rapidly—within a minute (such as an injury), or within a few hours or days (such as infections or inflammations)—are acute illnesses. You need to know an illness is acute before you even think of home treatment.

Illness intensity can signal a serious or less-serious illness, a familiar or unfamiliar illness, as well as an acute or chronic disease. Illness intensity warrants close examination, as these examples show:

Your daughter, who occasionally gets a mild headache, suddenly gets a fierce headache (similar to what happened when the flu swept her soccer team). The unusual intensity of this pain tells you it is not her typical headache—it is more likely the soccer team flu. You know the prognosis because you are familiar with the course of influenza in general, and you have talked to other parents to learn that this one lasts about three days, includes body aches, moodiness, and poor appetite, but nothing permanent or serious.

On the other hand, if your daughter gets a headache, but seems disoriented, uncoordinated, and her personality changes markedly, you know that these symptoms are quite intense, grave, and severe. They are not common to influenza and not like her typical headache. Is this an acute illness? Maybe … maybe not, but the symptoms clearly indicate that the illness is no mere flu, but rather something requiring immediate professional attention. What is the prognosis? Only a doctor can tell.

Do you remember the adage that homeopathy “treats the person, not the disease”? Does this mean that homeopaths disregard disease? “No,” says Stephen Messer, ND, DHANP. “Conventional doctors will often give an antibiotic whether the illness is diagnosed as pneumonia or bronchitis. They’ll give an anti-inflammatory or steroids whether the illness is diagnosed as osteoarthritis or systemic lupus erythematosus. At times, their prescription-to-illness match-up isn’t as refined as a homeopathic prescription. Homeopaths pay very close attention to all the symptoms a sick person has, because they are looking for both the common symptoms and the unusual symptoms. Because of this scrutiny, good homeopaths understand disease very well. Homeopathic remedies are selected very precisely based on the totality of symptoms, no matter what the disease is called.”

To treat or not to treat?

As we stated at the beginning of this lesson, the reason to understand the illness—to name it, and to understand its etiology, pace, intensity, and prognosis—is to make a fundamental decision: to treat or not to treat. Since people and illnesses vary, it is important to ask yourself the questions below each time you confront illness or injury in your family:

1. Can this illness be safely and effectively treated with homeopathic home care? Is this really an uncomplicated acute illness, or something more serious?
2. Even though the illness might respond to homeopathic care, do I have the skills to handle it, given my present level of experience with homeopathy?
3. If I try homeopathic home care, how much time should I allow before seeking professional help? Do I have a professional I can turn to?
4. Do I know enough about this illness? Do I know the usual symptoms and course of the illness? Do I know how long the symptoms are expected to last? Do I know enough about it to judge whether homeopathic treatment is having a positive effect?
Acuteness alone does not make an illness safe for you to treat.

Experienced homeopaths will refer a person with an acute illness to another practitioner if they are not comfortable with the case for any reason. You might feel comfortable treating your daughter's bronchitis or urinary tract infection, but not her post-partum pain. However, if you are not comfortable treating an illness for any reason, refer the sick person to a professional.

Homeopathy or healthy change?

A decision not to select a homeopathic remedy can also be made on a different basis: when there is no need to treat homeopathically. If your husband awakens at 3 a.m. for several mornings because of nagging thoughts about work, you may be tempted to give him Nux vomica for "insomnia from job stress." In truth, however, suggesting he chat with his boss about what is bothering him might be a better prescription.

If it seems that your son has diarrhea each time he eats ice cream, maybe you should not give him Dulcamara, which has "diarrhea worse from cold foods" as part of its symptom picture, or any of the other remedies correctly given to people who are aggravated by milk. It might be preferable to ask a professional to treat him constitutionally, in the hopes of eliminating this chronic symptom. In the meantime, perhaps he should simply avoid eating ice cream.

Sometimes the best remedy is change, not homeopathy or any other medicine. Homeopathy views symptoms as a person's immune system or vital force responding intelligently to a given stress. Do not give somebody a remedy just because you are determined to use homeopathy. Samuel Hahnemann, (the founder of homeopathy, 1755–1843) wrote, "The physician's highest calling, his only calling, is to make sick people healthy..." (Organon of Medicine, 6th ed., §1). If the way to make a sick person better is to take away his ice cream, or take him to a doctor, then take away his ice cream.

The information in a case: What makes it important

Sometimes, after taking a case, you will look at your notes and wonder, "How much of this is important? How much of this is extraneous information?" Take a look at the examples below. With practice, you'll be able to discern which information matters, and why.

1. It is important to the sick person. "My head is really bothering me." This is a symptom for which they want relief.

2. It is important to identifying the illness. "My baby has had diarrhea for two days, and now has a dry mouth, sunken eyes, limp skin, and is breathing rapidly." This information represents the common symptoms of severe dehydration, which requires immediate attention by a medical professional.

3. It is important to the prognosis, especially if it portends something serious. "All of a sudden I'm having headaches and disturbed vision." This information might indicate a tumor on the optic nerve, which can cause blindness or death.

4. It is important to finding the precise remedy. "I get a watery nasal discharge when I walk into a cold room." This information points clearly to the correct remedy.