A group analysis of the *Graminae* (grass) plant family of homeopathic remedies

By

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I Terence Wulfsohn, do hereby declare that this dissertation represents my own work in concept and execution.

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DEDICATION

This dissertation is dedicated to my family. My parents Lionel & Eithne Wulfsohn, have endured nearly 60- years of marriage to wait for me to finally do my dream work. Holding the Lionel Wulfsohn bursary for so many years has made this type of Interdisciplinary research possible. My wife, Tessa, who has unconditionally made the space, run the business, created the atmosphere and encouraged me to complete such a mammoth task in my middle age. My children Sahara and Erin have withstood years of relative deprivation while I studied. I will make it up to you. I love you all lots!
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ABSTRACT

Group analysis is an approach to classifying homeopathic remedies into family groups (Scholten 2004a: 164). It is an attempt to ease the uncertainty in prescribing from the thousands of known and unknown homeopathic remedies. Scholten argues that group analysis is an important stage in the 'maturing' of the science of homeopathy (Scholten 2004b: 160).

The materia medica of selected Graminae (grass) species remedies used in homeopathy were analysed in terms of common sensations, responses and reactions they evoke in proving experiments. The information was collected from various homeopathic sources viz. Radar 9 –Repertory program, Encyclopaedia Homeopathica and other selected materia medicae.

The primary sensation is a 'heaviness' or sensation of weight within which leads to 'a need to be supported'. There were also expressions of something alive/moving within as well formication and burning/burnt, and out of control/involuntary. Passive reactions included: numbness, paralysis, staggering. Active reactions are: Need for support, Itching, spasmodic movements, trembling. Compensation: Desire support, desire cooling, desire uncovering, Rubbing ameliorates, desire to be naked and Mind cheerful and foolish. It must be stressed that these sensations are to be considered as proposals until more case study material can be analysed.

Within the Graminae plant family the individual species were then differentiated in terms of Sankaran’s extended miasmatic classification. Bambusa was found to be in
the Cancer miasm; *Anantherum* in the Syphilis miasm; *Saccharum* in the Acute miasm; *Ustilago* in the Ringworm miasm; *Secale* in the Leprous miasm; and *Arundo* was possibly in the Malaria miasm. It was not possible to classify the rest of the remedies.

In terms of applying group analysis to a small plant family it was considered feasible provided there is at least one well proven remedy in the family with some in depth case study material.
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CHAPTER 1: INTRODUCTION

The need to classify the items or phenomena observed in nature is perhaps as old as science itself. The plant family Umbelliferae was recognized as such by the Greek scientist Theophrastus (about 372-287 BC) (Heywood 1978: 10). However homeopathy as a science has either resisted or shown little interest in classification of remedies until the last decade. In a way the classification and differentiation of homeopathic remedies known as group analysis, is a project that has become viable due to the development of technology. The advent of software based homeopathic encyclopaedia and repertories, coupled with effective intelligent search engines, has made possible the type of analysis where the collected observations of centuries of work, can now be analysed for commonalities.

So there are a few reasons why group analysis would not have been appropriate in the early days of homeopathy.

Firstly there was not the breadth and depth of remedy symptoms to ‘mine’ and secondly, as stated above, such an immense task is beyond the capacity of an unaided human mind- it requires the processing power of computers to sift through the vast amounts of detail. Thirdly, in the early stages of homeopathy there were comparatively few remedies so classification was not necessary. Fourthly, there was general antipathy to group analysis because it resembled a crude form of the ‘Doctrine of the Signatures’ that Hahnemann roundly
condemned (Hahnemann 1852: 673). Finally there needed to be the creativity, motivation and expertise to take on such a revolutionary project.

The motivation to undertake this project in turn has a number of components. One is the desire to create ‘order out of chaos’, it is probably a fundamental human characteristic to want to classify and order the vast panoply of nature. Secondly, there is dissatisfaction with the old methods of homeopathic analysis, and a desire to improve the quality of homeopathic prescribing in terms of reliability and accuracy.

There are many different approaches to group analysis but the writer’s focus is on the method that analyses the homeopathic remedies of a natural scientific grouping (in this case a plant family) and searches for commonalities within this group.

1.1 Aims of the group analysis research project

1. To apply and test the plant family group analysis paradigm to a new plant family.

2. To discover the common sensation or set of sensations peculiar to the Graminae family of remedies.

3. To elucidate the reactions to the sensation(s), in terms of active, passive and compensatory reactions.

4. To categorize the Graminae in terms of Sankaran’s miasmatic classification.
5. To test the scale at which unique features of a remedy group become apparent, in other words, can a set of common features be extracted from a relatively small (in homeopathic terms) plant family such as the Graminae.

6. To judge whether the Graminae are not much used in homeopathy because they do not have much homeopathic utility, or because of a basic lack of knowledge of their homeopathic properties.

1.2 Rationale for the group analysis of the Graminae plant family remedies

1. Group analysis improves our understanding and recognition of individual remedies within the group especially the smaller and less well proved remedies. The process of group analysis in the plant families has started with approximately 200 plants from 29 plant families categorized by Sankaran. This work has been done against a backdrop of about 3000 plant remedies used in homeopathy. Thus there is a need to reduce this backlog of knowledge. The general purpose of this dissertation is to investigate the application of group analysis to a relatively small (homeopathically) plant family. More specifically it is to provide insight into the Graminae plant family. In addition the choice of the appropriate scale of a unit of analysis will be tested, in this case how small a plant family can be chosen for group analysis.

2. A further rationale of the study is to test the reliability, validity and consistency of the plant family group analysis model developed by Sankaran (2002: 29).
CHAPTER 2: LITERATURE REVIEW

Group analysis has sparked major debates and furore in the homeopathic world (Saine 2001: 33; Moscowitz 2002: 32; Winston 2004: 36). Essentially it is about whether homeopathic case taking and analysis should be done by the traditional method i.e. eliciting and analysing key symptoms (cf. Kent’s repertorization), or whether case taking and analysis is directed to first finding the patients particular remedy group, then selecting the remedy from within that group.

In the writer’s view the Group Analysis approach to case taking, prescribing and the development of materia medica, is the first major paradigm shift since the inception of homeopathy. Once a new paradigm surfaces it creates debate between those in opposition, the adherents and others who not too sure about it (Kuhn 1962: 92-102).

2.1 Responses to the Group Analysis challenge

The first response is in direct opposition to the new set of ideas that is exemplified by Winston’s feature article in Homeopathy in Practice (Winston 2004: 35). This approach is essentially the ‘old school’ by which the writer means that the approach developed for homeopathic prescription by the old masters (Hahnemann, Kent, etc) is the best method to arrive at the simillimum. Symptoms are elicited through the interview and then graded and selected for repertorial analysis. The analysis offers a number of alternative remedies and the homeopath then needs to apply his judgement to select the simillimum.
The second area of debate is rooted in the overall precepts of the new paradigm (group analysis) but attempts to refine the methods and practices – this field of inquiry also tends to involve testing the limits and applicability of the new paradigm concepts (Wansbrough and Linnane 2003).

Finally there is what may be described as the ‘independent fence sitter’, a point of view that only uses elements of the new paradigm but sees serious flaws in its wholesale adoption – an example of such a pragmatist is Mangialavori (Koning and Santos 1996).

2.1.1 The remedy avalanche: early attempts to ease the problem of similimum selection

Even in the very beginning of homeopathy, once the number of proved remedies exceeded that is comfortably held in the memory, there arose the need and desire to classify and categorise the remedies. Hahnemann started the process grouping the 84 initial remedies he knew into miasms. It is interesting that this work was considered comparable with the early works on animal classification (Gaier 1991: 36). “The Doctrine of Signatures” (where there is morphological relationship between the drug substance and the disease or organ affinity in question) was another attempt to make sense of the large and growing materia medica. This method of remedy selection, primarily used in Anthroposophical medicine (Gaier 1991: 73), was condemned by Hahnemann, although it is still
used today, perhaps in a more circumspect and circumscribed manner (Vermeulen 2002: ix), (Koning and Santos 1996).

In the early decades of the 19th century the explosion of provings led to an unmanageable list of remedies. There was clearly a need to systematize the process of remedy selection. The longest serving and most useful method was the development of the repertory which is credited independently to von Boenninghausen and Jahr in 1833 (Gaier 1991: 236). Since then many different forms of repertories have been published, but the most widely used is Kent's repertory which is found in various hardcopy and computer software formats.

Ideas and schema of the relationships between remedies are also used to create a sense of pattern and purpose in prescribing. An example widely used in Classical homeopathy is P. Sankaran's "The relationship of Remedies" (Sankaran 1975: 1) which is further elaborated by R. Sankaran (Sankaran 1991: 341). The relationship of remedies is expanded into a 'situational materia medica' which explicates the complementary, acute, chronic and inimical remedies (Sankaran 1991: 343).

According to Winston (2004: 36), the group analysis approach is not new. For example, Farrington used kingdom analysis in 1880 and Leeser used periodic table information in 1935.
2.1.2 Modern approaches to group analysis

However we have had to wait to the 1990s to see the first concerted modern applications of group analysis (Scholten 1993: 23). The chief benefit of using group analysis is the reduction of uncertainty when prescribing from a vast number of possible homeopathic drugs. Group analysis is by nature a qualitative and hierarchical process. In order to arrive at the correct remedy it is crucial that each step of the analysis is correctly done (and corroborated). By way of analogy, getting the kingdom (mineral, plant, animal) analysis wrong is like firing a rifle a few degrees off a long range target – a few degrees does not sound like much – but by the time the bullet has travelled a few hundred metres it translates into a missing the target altogether. In fact the traditional repertory methods are preferable to poorly done group analysis. Repertorization of symptoms could indicate, for instance, Silicea as the remedy, whereas in fact the similimum is the silica rich plant Bamboo, at least the method has thrown the homeopath into the correct ballpark. Errors at the kingdom analysis could direct the prescriber to an animal remedy which has no relationship to Bamboo whatsoever.

The prime movers of group analysis of the modern era are Scholten and Sankaran. Scholten (1993: 23) defines group analysis as the process of looking at a group of remedies and extracting what is common from that group. In Homeopathy and Minerals (Scholten 1993: 39), Scholten creates groups of the some major elements used in homeopathy and their respective salts. For example, the Carbonicums, Muriaticums, up to the Fluoratums and Iodatums. Scholten (1996) takes the process of group analysis forward by using the natural
scientific model of the periodic table of elements as his starting point. Scholten proposed that each row/series corresponded to general theme, and that each column/group from left to right defined the degree of development of the particular theme of the series in question. This understanding made it possible to prescribe the intersecting remedy with a high degree of confidence provided the patient needed a remedy from the mineral kingdom.

Sankaran (1994: 101), started to address the problem of kingdom analysis in homeopathy where he writes about a 'natural classification of drugs' into mineral kingdom, plant kingdom, animal kingdom, nosodes, sarcodes, imponderabilia. At that time he concentrated on the attributes of the mineral kingdom, perhaps influenced by the work of Scholten and Sherr. In 'The Soul of the Remedies' he takes the 'natural classification of drugs' further by actually specifying the distinguishing features of plant, animal and mineral remedies (Sankaran 1997: 229). Sankaran's major breakthrough is published as an initial two volume set: An Insight into Plants (Sankaran 2002). Patients requiring a plant remedy (PRPR) are seen to have a problem with sensitivity (Sankaran 2002: 20) – as plants due to their sessile nature need to be sensitive and adaptive to changing environmental conditions. Sankaran posed the question to himself of whether there is a relationship between the botanical classified plant families and a particular form of expressed sensitivity in the homeopathic literature. In general he found this to be the case, although he found it necessary to group certain plant families that are less well represented in the homeopathic literature. Sankaran described this expression of sensitivity as the 'vital sensation'.
point he also proposes a hierarchical approach to case taking and analysis describes as 'levels'.

2.2 The concept of 'Vital Sensation' and levels in homeopathy

The concept originates from Sankaran’s work which can be seen as progression into the depth of homeopathy – which is the very title of the keynote address at the 2004 Bombay Seminar (Sankaran 2004b: 1). He identifies 6 levels of inquiry in homeopathic case taking.

1. Name – this is the diagnosis of the disease condition. What is wrong?
2. Fact – these are the actual symptoms the patient experiences. What is happening?
3. Emotion – this is a description of the patient’s emotional state. What does it feel like?
4. Delusion – this is analogue description of the patient’s experience. What do you feel like in these circumstances? A classic example for someone under rising internal pressure is to say: ‘Like a soda water bottle’
5. Sensation – this could be described as the sensation felt in the body when patient is been led into the depths of their self. It could be elicited by asking: “What sensation do you experience in that situation?” or “What is meant by that hand gesture?” The answer is likely to be non-human specific because it is related to the substance of the remedy in question. The kingdom is expressed in terms of: animal: victim-aggressor relationships; plant: sensitivity; mineral: issues of structure.
6. Energy – this level can only be observed. It is the movement (background pattern) and the colours, shapes and sounds that are observed or evoked by the interview experience.

Sankaran argues that the Sensation level is the most accurate in terms of kingdom analysis, family or group analysis, and source identification (Sankaran 2004b: 5). It generally takes quite a bit of focused enquiry to get to this level and by nature of its depth it reflects much more of the person’s nature than the preceding levels. Sensation level information integrates body and mind aspects therefore it is provides deeper and better information (more reliable – due to multiple sources of evidence) than either physical symptoms or mental/emotional symptoms described on their own.

In the repertory certain rubrics are prefaced as “Sensations; as if”, however in practice all rubrics describing a felt ‘sensation’ in the body e.g. weight, tight, loose, caught etc. need to be analysed in terms of been possible candidates for the central sensation of the particular group.

His next problem was to differentiate between remedies in a botanical family that essentially shared the same sensitivity. His solution was to draw on his extended miasm model (Sankaran 1997: 217). Sankaran thus classified members of a common botanical family into their respective miasmatic tendencies. Thus the remedy is chosen on the basis of the intersection point between patient’s primary sensitivity and the patient’s miasmatic classification. Sankaran (2002: 24), now
suggested that this method could increases the accuracy and reliability of prescriptions for plant kingdom remedies.

2.3 Sankaran's extended miasm model

Hahnemann proposed that underlying the symptoms of all diseases is an all pervasive miasm or tendency to react in identifiable set of ways (Hahnemann 1996: 190), which he characterizes as the Psora, Sycosis and Syphilis miasms. Over time additional miasms were added (tuberculosis and cancer) forming the five miasm model (De Schepper 2001: 355). Sankaran (1997: 217) extended the model by focussing much more deeply on the responses and reactions evoked by specific remedy groups. He now proposed a ten miasm model (see diagram below).
ACUTE MIAST
In sudden danger, instinctive drive to escape now!
E.g. Arnica

TYPHOID MIAST
Facing a dangerous situation, must make an intense effort to recover
E.g. Chamomilla

MALARIA MIAST
Stuck and intermittently attacked but due to my limitations I just have to bear it.
E.g. Cina

PSORA MIAST
Life is a struggle, but if I make an effort I can do it.
No example from the Compositae

RINGWORM MIAST
In a difficult situation beyond easy resolution therefore I alternate between trying and resignation
E.g. Taraxacum

SYCOSIS MIAST
There is a fixed weak spot within me, which I must cover up or hide.
E.g. Senecio

SYPHILIS MIAST
The task is hopeless so my only response is to 'do or die'.
E.g. Echinacea

TU BERCULAR MIAST
Time is short, too much to be done, my responses are totally hectic.
E.g. Abrotanum

CANCER MIAST
Everything is chaotic and out of control, I must respond perfectly and with massive effort in order to survive.
E.g. Bellis

LEPROSY MIAST
I am a disgusting outcaste, I should isolate myself
E.g. Lappa

Figure 1: A map of Sankaran's extended miasm model showing explanatory situations and responses. Remedy examples are drawn from the Compositae family. After (Sankaran 1997: 228) and (Sankaran 2003)
Whereas the three and five miasm models viewed miasms as discrete entities, Sankaran’s model shows relationship between the miasms as well as a continuum of responses from the instinctive reactions of the Acute miasm, to the hopeful struggle of Psora, to the resigned hopelessness and consequent destructiveness of Syphilis. Application and more detail of the extended miasm model is covered in the section on Miasmatic analysis in Chapter 4.

2.4 Group analysis in homeopathic software

The development in a group analysis approach to materia medica is mirrored in the Homeopathic software, e.g. MacRepertory, Hompath and even Radar offering the Family of Remedies (Taylor 2002). MacRepertory uses 1300 homoeopathic families comprised of “...miasms of Sankaran and Bjørndal, Vega’s Boxes, Mangialavori’s families, Morrison’s organic chemicals, Scholten’s minerals, König’s groups, taxonomy and others...” (Anonymous 2004).

2.5 Group analysis by the family of remedies: the work of Mangialavori

Countering the view of group analysis based on kingdoms and natural scientific classification systems such as the periodic table and the biological families is the view of Mangialavori (Koning and Santos 1996). Mangialavori contends the concept of a biological group sharing common homeopathic characteristics – for example, in the Solonaceae he sees similarity between Belladonna, Hyoscyamus, Stramonium and Mandragora but suggests that Dulcamara and Capsicum are quite different. Instead of a strict natural scientific classification he describes horizontal relationships between remedies e.g. elements on a series in the
periodic table and vertical relationships e.g. between the element Cuprum and plants that thrive in a high copper environment e.g. Chamomilla. When the horizontal-vertical concept is extended it tends to form circle or family of remedies e.g. Sepia –sea remedies– Nat. Mur., and so forth. Mangialavori and others have also successfully analysed groups that don't share a strict taxonomical relationship e.g. spiders and snakes.

2.6 Opposition to group analysis: the fundamentalist critique

In direct opposition to the use of group analysis as a method in homeopathy is the view of Winston (2004). He contends that kingdom and group analysis are “…simply mental constructs to help homeopaths understand what they are doing in their practices…” (Winston 2004: 36). Instead of starting with kingdom analysis he suggests homeopaths need only ask themselves: “…What are the characteristic signs and symptoms in this case of disease in front of me?” (Ibid). In other words, match the case symptoms with those in the materia medica. Winston describes group and kingdom analysis as the ‘edges’ of homeopathy and entreats new homeopaths to be fully grounded in the classical basics before venturing forth. It could be argued that Sankaran, at least in part, agrees with Winston's entreaty: Sankaran publicly stated that the Bombay School group analysis method does not replace proper study of the materia medica, repertory and organon (Sankaran 2004a).
2.7 Working within Sankaran's new model of group analysis

In contrast to the opposing critique of Winston, is work within the new paradigm which attempts to extend, find boundaries, refine and generally test the new body of knowledge. An example is the article on *Mimosa pudica* by Wanbrough and Linnane (2003). Although their results show some correspondence between *M. Pudica* and the *Leguminosae* family sensation of 'splitting apart', they suggest that the sub-family *Mimosoideae* may possess a different picture. Thus they question the utility of working with a tremendously large and diverse family such as the *Leguminosae*. They suggest looking at refinement of the 'sensation' by using 'sub-families'.

In conclusion this is also the thesis of the writer. At this stage, very much due to its novelty, the work on the group analysis of plant families is mostly of a very 'broad brush' nature - especially in the case of plant families that are poorly represented in the homeopathic literature. Thus there exists a need to fill in the gaps and tease out the differences where plant families are large and/or diverse in nature. Such an example is the *Graminae* - a vast botanical family that is the principle source of staple food to humans yet hardly known or used in homeopathy. A group analysis of the *Graminae* family is considered important because relatively few of its members have been proved. As far as can be ascertained the proven members are: *Triticum repens* (wheat), *Secale cereale* (rye), *Avena sativa* (oats) (Gaier 1991: 79), *Arundo mauritanica* (Italian grass), *Anantherum muricatum* (Vetiver) and *Bambusa arundinacea* (bamboo) (Vermeulen 2002: 205). Despite the lack of homeopathic knowledge of the grass
family, it is has a high degree of medical relevance in terms of the widespread allergic reactions that grasses evoke.

There have been some tentative suggestions made on what may be homeopathically common to the *Graminae* family (Koster 2003: 104). On the basis of a *Lolium* case Koster speculates that grasses could have 'a desire to serve' yet be kind of invisible, coupled with a sensitivity to others, that perhaps even borders on the supernatural (Koster 2003: 104). The 'desire to serve hypothesis' is generated via the tremendous usefulness of the *Graminae* to humanity (and ecology) yet their presence is kind of homely and non-descript. The 'supersensitive hypothesis' is due to the co-existence of fungus and grass plants (either overtly in the form of a sexual fruiting body or covertly in the form of asexual endophytes).

There is very little in the literature in terms of applying group analysis to small homeopathic families. The afore mentioned work by Wansbrough and Linnane (2003) is an exception, although their focus is on a single species within the sub-family as opposed to a group analysis of the subfamily.

2.8 Justification for using Sankaran’s model

Sankaran’s model is especially appealing to the writer because it is based on using pre-existing homeopathic information viz. the repertory and materia medicae. Due to the advent of database programs with powerful and intelligent search engines such as ReferenceWorks, and Encyclopaedia Homeopathica, it is
now possible to search through all the documented provings and clinical information to find the patterns and themes that characterize the group in question. Once the themes and patterns have been extracted from the homeopathic information sources we can then corroborate them with information from the natural sciences. For example, patients requiring a conifer remedy have the sensation of splitting. Natural science corroborates this information: the wood of conifers tends to splinter and split easily. Thus the model based in homeopathic knowledge and experience shows it links with the natural world: the ultimate source of all homeopathic substances.

2.9 Taxonomy of the *Graminae*

The more modern family name for the grass plants is the *Poaceae* however the homeopathic literature generally refers to the *Graminae* which is also still considered botanically as acceptable use. So in order to keep in closer sync with the homeopathic literature the writer will use the term *Graminae* when referring to the grass family throughout this dissertation.

To classify the *Graminae* within the group of living organism the following system is used (Keeton 1980: 956):

Kingdom: Plantae (plants)
Subkingdom: Trachedsionta (vascular plants)
Superdivision: Spermatophyta (seed plants)
Division: Magnoliophyta (flowering plants)
CHAPTER 3: RESEARCH METHOD

3.1 Definition of Graminae remedies

The first step was to properly define the Graminae/Poaceae group of plants in terms of current botanical taxonomical knowledge. This in order to check the selection of Graminae currently identified in the homeopathic literature and to understand the relationships between the Graminae and related botanical families e.g. the Juncaceae etc. The relationship of botanical families is important to understand possible ‘super family’ commonalities in sensation.

Next the Graminae remedies used in homeopathy were listed. The list was obtained from computer software: Hompath, Radar 9, Encyclopaedia Homeopathica and from print sources: Koster (2003) and Vermeulen (2002). 27 remedies from the Graminae family were found and are listed in Table 1 in the next chapter.

3.2 Sample selection

The overall Graminae list of 27 was then narrowed down to 7 remedies. The actual selection of remedies was done by first extracting rubrics of all the Graminae remedies in order to select remedies which are at least broadly covered in the various repertory chapters. Avena sativa - which has 66 rubrics in Radar 9 - was made the cut off point in considering which remedies to include in the extraction. Thus remedies that had less than 66 rubrics were excluded from the comparative extraction exercise.
3.3 Data processing

A computer repertory extraction was done with Radar Synthesis 9 to list all rubrics containing the selected remedies with the proviso to exclude rubrics containing more than 50 remedies. The rubrics were arranged in order from those containing the least remedies to the most remedies. This is to rank the significance of the rubrics.

3.4 Data analysis

3.4.1 Phase One – determination of the group 'vital sensation'

The selected rubrics were then scanned for commonalities in sensation. Sensation in this sense is defined as the reported "...consciousness of perceiving or seeming to perceive some state or condition of one's body or its parts or senses or of one's mind or its emotions..." (Allen 1990: 1102).

To test out the accuracy of the selected set of sensations the writer then searched the homeopathic literature (via Encyclopaedia Homeopathica) for examples of remedies which fit the proposed vital sensation of the *Graminae* family. This test was done by keyword searches of Archibel's Encyclopaedia Homeopathica restricting the set of remedies to the *Graminae* family.

Once a set of sensation commonalities was clear the writer looked at what reactions these sensations engender. In other words a person feeling a particular sensation or set of sensations might be inclined to act or respond in certain ways.
The actual reactions were chosen from descriptions of actions and desire to act or even avoid acting in the repertory, materia medica and provings. In general terms a reaction could passive, active to varying degrees, or compensatory. A key set of reactions was selected and then divided into active reactions, passive reactions or compensatory reactions.

3.4.2 Phase two – miasmatic classification of the group

Now the different remedies of the Graminae were scanned and classified in terms of their miasmatic tendencies. Sankaran’s extended miasm model was used to carry out this classification (Sankaran 2002: 53). Miasmatic keyword searches of the Graminae family were done in Encyclopaedia Homeopathica to give a indication of the possible miasm of each remedy. Once this was complete each Graminae remedy was assessed in terms of its coping style or essential attitude to stress in order to classify it miasmatically. The classification was also guided by clinical information, for example, if the remedy in question has been used to treat malaria, it would raise an index of suspicion that the remedy miasmatic classification is Malaria as well. However due to paucity of information it was not possible to miasmatically classify each and every Graminae remedy.
CHAPTER 4: RESULTS AND DISCUSSION

4.1 Graminae in Homeopathy

As stated earlier the grass family is a large family but very poorly represented homeopathically. For example it is botanically more than ten times larger than the Anacardiaciae yet that family has many more common and well understood remedies e.g. *Rhus toxicondendron*, *Anacardium*, *Comocladia* etc.

The writer has drawn upon three sources that have collated the Graminae species used in homeopathy. The data is tabulated below.

Table 1: Graminae remedies used in homeopathy

<table>
<thead>
<tr>
<th>SUBFAMILY</th>
<th>SPECIES</th>
<th>COMMON NAME</th>
<th>INFO SOURCE</th>
<th>HOMEOPATHIC SIGNIFICANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>Oryza sativa</em></td>
<td>Rice</td>
<td>(Koster 2003) (Vermeulen 2002)</td>
<td>No symptoms in Synthesis 9 or EH</td>
</tr>
<tr>
<td>SUBFAMILY</td>
<td>SPECIES</td>
<td>COMMON NAME</td>
<td>INFO SOURCE</td>
<td>HOMEOPATHIC SIGNIFICANCE</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----------------------------</td>
<td>----------------</td>
<td>------------------------------------</td>
<td>------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Chloridoideae</td>
<td>Cynodon dactylon</td>
<td>Bermuda grass</td>
<td>(Koster 2003) (Vermeulen 2002)</td>
<td>Small remedy with 43 symptoms in Synthesis 9</td>
</tr>
<tr>
<td></td>
<td>(Andropogon)</td>
<td></td>
<td>(Archibel 2004)</td>
<td></td>
</tr>
<tr>
<td>Paniceae</td>
<td>Panicum miliaceum</td>
<td>Plume millet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paniceae</td>
<td>Sorghum vulgare</td>
<td>Sorghum millet</td>
<td></td>
<td>No symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Setaria italic</td>
<td>Millet</td>
<td></td>
<td>Not in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Stigmata maydis</td>
<td>Cornsilk</td>
<td></td>
<td>19 Symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Stigmata maydis</td>
<td>Corn silk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paniceae</td>
<td>Cymbopogon citrates</td>
<td>Lemongrass</td>
<td>(Koster 2003) (Vermeulen 2002)</td>
<td>Only 2 symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Cymbopogon Martini</td>
<td>Lemongrass</td>
<td></td>
<td>No symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Cymbopogon nardus</td>
<td>Lemongrass</td>
<td></td>
<td>No symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Paniceae</td>
<td>Ustilago maydis</td>
<td>Corn smut</td>
<td></td>
<td>Large remedy-581 symptoms in Synthesis 9</td>
</tr>
<tr>
<td>Pooideae</td>
<td>Agrostis alba/Agrostis vulgare</td>
<td></td>
<td></td>
<td>1 symptom for Agrostis vulgare only</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SUBFAMILY</td>
<td>SPECIES</td>
<td>COMMON NAME</td>
<td>INFO SOURCE</td>
<td>HOMEOPATHIC SIGNIFICANCE</td>
</tr>
<tr>
<td>-----------</td>
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<td>----------------------</td>
<td>--------------------------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td></td>
<td>Avena sativa</td>
<td>Common oat</td>
<td>(Koster 2003) (Vermeulen 2002) (Archibel 2004)</td>
<td>66 symptoms but mainly used in tincture form</td>
</tr>
<tr>
<td></td>
<td>Bromus ramosus</td>
<td>Hairy brome/wild oat</td>
<td>(Koster 2003)</td>
<td>Not in Synthesis 9</td>
</tr>
<tr>
<td></td>
<td>Elymus repens</td>
<td>Dogsgrass</td>
<td>(Koster 2003)</td>
<td>Not in Synthesis 9</td>
</tr>
</tbody>
</table>

From the above table it can be seen that from the 27 grasses or grass based remedies only the following have significance in the homeopathic literature:
Anatherum muricatum, Arundo mauritanica, Avena sativa, Bambusa arundinacea, Lolium temulentem, Saccharum officinale, Secale cornutum and Ustilago maydis.

4.2 Extraction and analysis of common rubrics

At the time of extraction Ustilago maydis did not feature in writer’s knowledge as major remedy so it was not used in the comparative extraction. All rubrics were extracted where there were at least two of the above remedies represented, with the proviso that only rubrics with less than 50 remedies where considered. The list of 73 common rubrics is in Appendix 1. From this list the writer selected all the rubrics that convey sensation (see table 2 below). These 18 rubrics were then ranked from smallest (least amount of remedies) to largest in order to assess the relative significance of the rubric.

Table 2: Common sensation rubrics from selected Graminae homeopathic remedies ranked in order from smallest rubric (=+/– greater significance)

<table>
<thead>
<tr>
<th>Common sensation radar extraction 18-nov-04</th>
<th>anan</th>
<th>arund</th>
<th>aven</th>
<th>bamb</th>
<th>lol</th>
<th>sec</th>
<th>size</th>
<th>score</th>
</tr>
</thead>
<tbody>
<tr>
<td>rubrics &lt;50</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1931 BACK - FORMICATION - Cervical region</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>1286 ABDOMEN - PAIN - burning - Spleen</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>13</td>
<td>2</td>
</tr>
<tr>
<td>924 MOUTH - CRAWLING - Tongue</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>14</td>
<td>3</td>
</tr>
<tr>
<td>1936 BACK - FORMICATION - Spine</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>17</td>
<td>2</td>
</tr>
<tr>
<td>2303 EXTREMITIES - FORMICATION - Shoulder</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>17</td>
<td>2</td>
</tr>
<tr>
<td>679 EAR - PAIN - burning - Meatus</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>19</td>
<td>2</td>
</tr>
<tr>
<td>1073 THROAT - PAIN - burning - extending to</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>22</td>
<td>2</td>
</tr>
</tbody>
</table>
From the 18 rubrics thus selected the most common were **formication** and **burning** pain. Formication is defined as: *n.* 'a sensation of ants crawling over the skin' (Allen 1990: 463). The writer then used Roget's Thesaurus (Roget 1972: 380) to find synonyms for formication which is placed in the section -Sensation of touch. In this section there are the following words: 'itching etc. titillation, formication, aura and itch, tingle, creep, thrill, sting, prick, tickle'. Crawling and itching are represented in the common sensation rubrics e.g. MOUTH – CRAWLING – Tongue (Bamb. A (1) and Sec (2)) and MOUTH-ITCHING-Palate (Anan. (1) and Arund. (1)).
The other major common sensation is **burning** which is defined as: (adj.) ‘...ardent, intense...’ (Allen 1990: 150). Burning as an adjective in the Thesaurus has two main branches: passion and angry. The passion thread has the following synonyms: passion, excitement, blood boiling, flush, heat, fever, fire, flame.

Burning pain as a Thesaurus category was not used because it conveys symptom description vs. sensation description.

At this stage the writer searched the Encyclopaedia Homeopathica - limiting the search to the *Graminae* family - using the keywords formication, crawling, itching, creeping, tingling, prickling, stinging, and burning. In general the writer found fairly significant hits for the major *Graminae* remedies. The problems faced now were whether to how to distil the sensations from the irritant group e.g. formication, crawling, itching, stinging etc. There are too many separate sensations although they are related. There is also no single sensation that covers the whole *Graminae* family. A further problem was to link up the sensation the afore mentioned irritant group of sensations with the sensations of been burnt, burning, consumed by fire.

The writer then conducted searches using other common sensations such as: alive, numbness, and knotted. At least 5 remedies featured in the ‘alive’ category. Formication, crawling, stinging and itching could be understood as expressions of the sensation that something is alive inside me and that in this case it is irritating me. Burning could be linked to the alive sensation via its dictionary definition of ..ardent and intense... and the passion thread of its thesaurus category e.g. excitement, blood boiling, flush, heat etc. Burning and fire could be seen as an
extreme expression of the life force. On reading through the symptoms and case reports of the *Graminae* remedies one more aspect became apparent. That is the form or nature of many of the symptoms experienced, often of an involuntary, spasmodic and convulsive nature. Thinking about the irritant symptoms/sensations e.g. formication, stinging etc plus the burning sensations e.g. ‘…burning in all parts of the body as if sparks were falling on the patient’ - *Secale*, someone who is undergoing these symptoms the writer speculated could express a lack of control as a central sensation.

Therefore the writer searched on ‘control’ and found 8 *Graminae* remedies viz. Ust., Sec., Sacch., bamb-a., ergot., anan., arund., and cyn-d. Selected rubrics are:

[(Allen 1910) - *Ustilago maydis* - Mind] - Partial or complete loss of control over the function of vision and deglutition (Allen 1910); [(Dewey 1933) - Climacteric disorders - *Ustilago maydis*] Often rivals Lachesis in controlling the flooding during the climaxis. Vertigo is characteristic.

On an emotional level:

[(Dack 1991)- *Ustilago maydis*] I feel so intimidated by my husband. He has so much control, and I just sit there feeling mad and ready to burst. 

[(Schroyens 2001) - *Bambusa arundinacea* - Mind] MIND - DESPAIR - destiny; everything is controlled by (Schroyens 2001)

[(Schroyens 2001) - *Bambusa arundinacea* - Mind] MIND - FEAR - self-control, of losing (Schroyens 2001)
On a curative level:

[ (Chatterjee 1994) - *Ustilago maydis*] An excellent remedy for uterine haemorrhages, menstrual, post-partum or climacteric. It also controls bleeding between periods, more so, if it is accompanied by left inflammatory pain. Potency: 3x.

[ (Varma and Vaid 1995) - *Cynodon dactylon*] Belonging to the natural order of 'Graminae', it has been proved in India for its masterly control over haemorrhage; dysentery; dropsy; leucorrhoea.

Allied to 'out of control' is the concept of involuntary. Searching on involuntary produced the following results:

[ (Schroyens 2001) - *Secale cornutum* - Rectum] RECTUM - DIARRHEA - involuntary - urination; with simultaneous (Schroyens 2001)

[ (Schroyens 2001) - *Secale cornutum* - Bladder] BLADDER - URINATION - involuntary - stool – after (Schroyens 2001)

[ (Schroyens 2001) - *Secale cornutum* - Mind] MIND - GESTURES, makes - hands; involuntary motions of the (Schroyens 2001)

[(Allen 1879) - *Anantherum muricatum* - Face] - Spasmodic movements of the facial muscles, with involuntary grimaces, especially on the left side (Allen 1879).

[Allen 1879] - *Antherum muricatum* - Urinary organs] - Incontinence of urine, with involuntary urination when walking, and even at night in bed, during sleep, as if caused by paralysis of the neck of the bladder.


[(Julian Undated) - *Cynodon dactylon*] Involuntary urination while sneezing.

[(Julian Undated) - *Cynodon dactylon*] Involuntary passing of stools when urinating or when expelling wind. (Julian Undated)


[(Murphy 1993) - *Ustilago maydis* - Breasts] Breasts - BREAST-milk, general - involuntary flow

[(Schroyens 2001) - *Ustilago maydis* - Bladder] BLADDER - URINATION - involuntary (Schroyens 2001)

[(Schroyens 2001) - *Bambusa arundinacea* - Bladder] BLADDER - URINATION - involuntary - sneezing, when (Schroyens 2001)
I
[(Schroyens 2001) - *Bambusa arundinacea* - Eye] EYE - CLOSING the eyes – involuntary (Schroyens 2001)


[ (Schroyens 2001) - *Triticum repens* - Bladder] BLADDER - URINATION - involuntary – night (Schroyens 2001)

However alive and 'out of control'/involuntary still do not provide enough coverage on some of the small to medium sized *Graminae* remedies e.g. *Lolium*. Therefore the writer thought of qualifying and extending the internal 'alive' sensation and searched on 'move' with the idea of looking for things that people sense moving inside them. This way the writer came up with the following symptoms:

[(Allen 1879) - *Anantherum muricatum* - Head] - Sensation as if heavy objects and balls moved about in the head, especially at night and when he lies on the right side.

[(Allen 1879) - *Anantherum muricatum* - Throat] - Tickling sensation, as if some live thing were moving about in oesophagus, with fits of suffocating cough.

[(Allen 1879) - *Anantherum muricatum* - Stomach] - Sensation as of worm moving about in the oesophagus and stomach.

[ (Schroyens 2001) - *Bambusa arundinacea* - Abdomen] ABDOMEN - FULLNESS, sensation of - Umbilicus - moving around; as if a big bubble was (Schroyens 2001)
Another expression of dynamism or movement was quite strange:

[(Vermeulen 1998) - *Lolium temulentum*] "Sensation at every step that he is moving backward the same distance and is therefore making no progress."
[Mezger]

and:

[(Schroyens 2001) - *Bambusa arundinacea* - Vertigo] VERTIGO - MOTION - floor; as from motion of the - waves; floor is moving in (Schroyens 2001)

These two symptoms give the writer the idea of grass plants being blown back and forth by the wind.

To synthesize: the preliminary sensation in *Graminae* is that of something alive within that could be irritating or burning, that breaks one's self control and can result in uncontrollable/involuntary actions e.g.: spasmodic (hayfever), excessive (eg. Uterine bleeding, menorrhagia), convulsive, trembling, chorea, jacitation, shaking, twitching etc. OR a sense of movement within or movement outside (objective vertigo like symptoms).

4.3 Evidence of proposed sensation in case study material

In a case of *Lolium temulentum* (Koster 2003), he describes trembling and ‘...restless feeling in her feet...’ as the main complaint (Koster 2003: 101).
However the deeper levels of the cases portray the patient as suffering a conflict between the desire to lead a proper (if not a little mundane) lifestyle and her clairvoyant experiences. She does not know what to do with her clairvoyant ‘powers’ which are in conflict with her standard religious community so she represses the emotional debate which appears to lead to loss of control in other spheres of her life e.g. trembling and migraines (ibid.) Koster also suggests that the patient experiences the sensation of something foreign or different within cf. something alive or moving within sensation. In the Koster’s words: “People hang around her neck”, which he suggests is analogous to a ‘fungal parasite inhabiting the plant’ (Koster 2003: 104).


*Loss of control* is described as a major fear in a *Saccharum officinale* case of a 43 year woman (Smits 1995).

From the above we can see the limitation of the Irritation – involuntary – sense of internal dynamism hypothesis. It does appear enough in the case studies and across the spectrum of *Graminae* remedies. In particular the writer could not find enough reference in the *Bambusa* case studies. This was particularly worrying because of the in depth methodology of Schuster’s work (Schuster 1998).
Reviewing Schuster work again the writer was struck by the need to be 'supported'. He describes many patients who needed to support their heads during the interview. The writer thought of support as a sensation but decided that it is actually a response to some other pre-existing sensation. In reading through the Graminae the writer had noticed 'heavy' and 'heaviness' appearing in many remedies. At that stage writer placed it in the Passive reaction group of sensations. What would a person needing support feel physically? The writer then searched Encyclopaedia Homeopathica for: weight, heavy and heaviness and was surprised to see a wonderful coverage of the Graminae family viz. sec, anan, ust, arund, sacch, bamb-a, cyn-d, lol, aven., ergot., and tritic.

In particular the sensation of heaviness was often felt in the head – the image it brings to mind is that of grass plant with a heavy 'head' of seed struggling to remain upright in the face of rain, wind and trampling.

In general terms:

[(Allen 1879) - Secale cornutum - Generalities] - General heaviness,

[(Schroyens 2001) - Arundo mauritanica - Generals] GENERALS - HEAVINESS
– Internally (Schroyens 2001)

(Boericke 1927) - Saccharum officinale] Acts as a nutrient and tonic, in wasting disorders, anaemia, neurasthenia, etc., increasing weight and power.

[(Schroyens 2001) - Bambusa arundinacea - Generals] GENERALS - HEAVINESS – Internally (Schroyens 2001)
In mental terms:

[(Vithoulkas 1992) - *Arundo mauritanica*] It seems that patients who need *Arundo* have difficulty in utilising oxygen, and this fault of their organism is perceived by the patients who become very anxious that they will suffocate with any small provocation, such as mucus in the throat or a feeling of swelling there. They may even feel this anxiety, fearing suffocation, when someone comes too close to them, embraces them tightly, or if they have a close sexual contact. During fever they may easily fall into a cyanotic state, indicating again either a fault in the haemoglobin or in the oxygenisation of the blood. The mind becomes dull and heavy, and they do not want to talk, or to communicate. There is an absence of ideas, a dullness of mind and indifference to painful sensations. The patient exhibits stupid hilarity and laughs easily.

[(Banergee 1992) - *Avena sativa*] - Lightness, Neurasthenia, headache, irritation of the vertex, giddiness after intercourse, heaviness.

In dreams:

[(Schroyens 2001) - *Secale cornutum* - Dreams] DREAMS – HEAVY (Schroyens 2001)

Head:

[(Allen 1910) - *Secale cornutum* - Sensorium] - Vertigo: constantly increasing; with stupefaction and heaviness of head; reeling, inability to stand erect; peculiar
feeling of lightness of head, particularly in occiput; as from intoxication; unsteady
gait.

[(Schroyens 2001) - *Anantherum muricatum* - Head] HEAD - HEAVINESS - falls
- side; as if head would fall to ones (Schroyens 2001)

[(Hering 1879) - *Anantherum muricatum* - Sight and eyes] - Sensation of a great
weight on eyelids which keeps them closed.

[(Hering 1879) - *Anantherum muricatum* - Inner head] - As if heavy objects and
balls moved about in head; agg at night and lying on right side.

[(Allen 1879) - *Ustilago maydis* - General head] - Head feels heavy (fourth day),

[(Allen 1879) - *Ustilago maydis* - General head] - Dull, heavy, frontal headache,
while walking in the open air, relieved on staying in the warm room, not from
hunger (seventh day), [a12].

[(Murphy 1993) - *Ustilago maydis* - Head] Head - HEAVINESS, sensation,

[(Murphy 1993) - *Arundo mauritanica* - Eyes] Eyes - HEAVINESS, sensation -
heaviness, eyelids

_[Hom_links - *Bambusa arundinacea]* It does her good to lean against something
or to prop up her head, and she feels better when sitting and resting her chin on
her hands. The feeling of heaviness and enlargement makes the propping of the
head necessary. She says that her head feels as though it is the size of a
pumpkin.

[(Schroyens 2001) - *Bambusa arundinacea* - Eye] EYE - HEAVINESS - Lids

[(Schroyens 2001) - *Bambusa arundinacea* - Head] HEAD - HEAVINESS - lean
on something, desires to

[(Julian Undated) - *Cynodon dactylon*] Forehead hot and heavy.

[(Allen 1879) - *Lolium temulentum* - Head] - Heaviness of the head, [a14].
Sleep:

[(Vermeulen 2002) - *Secale cornutum*] G Sleep deep, **heavy**, and long.
[(Julian Undated) - *Cynodon dactylon*] Sleep **heavy**.
[(Allen 1879) - *Lolium temulentum* - Sleep] - Sleep unusually **heavy**, [a13].

Chest:

[(Vermeulen 2000) - *Secale cornutum* - Sputum] 5 Haemoptysis, usually of venous blood, & difficult respiration, **heaviness** of chest, anxious sighing respiration. 11 Expectoration of blood during violent efforts to breathe. Spitting of blood, with or without cough.
[(Hering 1879) - *Anantherum muricatum* - Inner chest and lungs] - **Heaviness** and stitches in various parts of chest.
[(Hale 1873) - *Anantherum muricatum* - Heart] Heat and sensation of **weight** in the heart, with mournfulness, anguish and fear of death.

Heaviness of stomach and abdomen was also picked up:

[(Allen 1910) - *Secale cornutum* - Sensations] - **Heaviness**: of head; in epigastrium.
[(Allen 1879) - *Secale cornutum* - Stomach] - Oppression and **heaviness** at the stomach(sixth day), [a155].
[ (Schroyens 2001) - *Secale cornutum* - Abdomen] ABDOMEN - **HEAVINESS** - Hypogastrium
[(Julian Undated) - *Cynodon dactylon*] Abdominal distension, hot stomach, **heavy**, with expulsion of burning, irritating gases.

[(Julian Undated) - *Ergotinum*] Complaints in the uterus and ovarian region, **heaviness** of the lower abdomen.

Pelvic areas:

[(Vermeulen 2000) - *Secale comutum* - Female] SE 2 Bearing-down sensation & coldness. 11 Of **weight** over pubis as if contents of abdomen would fall forward.

PA


[(Murphy 1993) - *Ustilago maydis* - Female] Female - BALL, ovaries, feels like a **heavy**, in right - ball, uterus, in, sensation of a

[(Murphy 1993) - *Saccharum officinale* - Rectum] Rectum - DRAGGING, sensation, heaviness, **weight**

[(Murphy 1995) - *Triticum repens*] "Frequently in dysuria from an inflamed state of the urethra, Tritic., ten drops in a little water, frequently repeated of prompt effect often giving complete relief in a few hours and if the ailment is primarily in the urethra the relief is an abiding cure, if from a tugging of the **heavy** womb, it is only relief."
In the back:

[(Schroyens 2001) - *Secale comutum* - Back] BACK - HEAVINESS, weight -

Sacral region (Schroyens 2001)

[(Vermeulen 1998) - *Ustilago maydis*] After the flow, there is backache of a heavy dragging character which agg. upon exertion; there is vertigo and constant misery under the left breast at the rib's margin. [Hurd, Pacific Coast Journal of Homoeopathy, July 1937]

[(Schroyens 2001) - *Bambusa arundinacea* - Back] BACK - HEAVINESS, weight

Cervical region

(Schroyens 2001) *Bambusa arundinacea* - Back] BACK - HEAVINESS, weight -

In the extremities:

[(Schroyens 2001) - *Secale comutum* - Extremities] EXTREMITIES -

**HEAVINESS**

[(Murphy 1993) - *Arundo mauritanica* - Arms] Arms - HEAVINESS, tired arms

[(Schroyens 2001) - *Bambusa arundinacea* - Extremities] EXTREMITIES -

**HEAVINESS** - Shoulder - coat is too heavy; as if

On the basis of this compelling evidence the writer would say that the sensation of heaviness is key to the Graminae family.
In similar vein someone who needs support could feel weak – have a sensation of weakness

[(Murphy 1993) - *Secale comutum* - Constitutions] Constitutions - WEAKLY, sickly, constitutions

[(Schroyens 2001) - *Secale comutum* - Generals] GENERALS – WEAKNESS (Schroyens 2001)


[(Murphy 1993) - *Ustilago maydis* - Generals] Generals - WEAKNESS, sensation of being,


Weak back:

[(Murphy 1993) - *Secale comutum* - Back] Back - WEAK, back - weak, lumbar

[(Schroyens 2001) - *Bambusa arundinacea* - Back] BACK – WEAKNESS (Schroyens 2001)

[(Schroyens 2001) - *Bambusa arundinacea* - Back] BACK - WEAKNESS - Lumbar region (Schroyens 2001)
Lumbar region - stooping, on (Schroyens 2001)

Pelvis:

[(Murphy 1993) - Anantherum muricatum - Bladder] Bladder - WEAK, bladder

[(Murphy 1993) - Secale cornutum - Bladder] Bladder - WEAK, bladder - sphincter

Extremities:

[ (Schroyens 2001) - Secale cornutum - Extremities] EXTREMITIES - WEAKNESS - Upper limbs (Schroyens 2001)

[ (Schroyens 2001) - Bambusa arundinacea - Extremities] EXTREMITIES – WEAKNESS (Schroyens 2001)

[ (Schroyens 2001) - Anantherum muricatum - Extremities] EXTREMITIES - WEAKNESS - Upper limbs – paralytic (Schroyens 2001)

[ (Schroyens 2001) - Arundo mauritanica - Extremities] EXTREMITIES - WEAKNESS - Upper limbs (Schroyens 2001)

[ (Schroyens 2001) - Arundo mauritanica - Extremities] EXTREMITIES - WEAKNESS – Thigh (Schroyens 2001)

Vision:

[ (Schroyens 2001) - Secale cornutum - Vision] VISION – WEAK (Schroyens 2001)
Although weakness is a common symptom of all disease it would interesting to note how much it comes up as a sensation or component of a sensation in the levels interview method of Sankaran (Sankaran 2002).

Returning to the 'desire for support' theme the writer looked up support in Roget's Thesaurus and was directed to 'aid' which is in turn counterpointed with 'hindrance'. A synonym of hindrance that is likely to be expressed at the Sensation level is 'constriction'. The point that the writer would like to make is that if someone desires support and is hindered in getting it, he may feel 'constricted'.

Constriction is found in virtually all the Graminae as a symptom/sensation.

[(Murphy 1993) - *Secale cornutum* - Generals] Generals - **CONSTRICTION**, sensation, external

[(Julian Undated) - *Ergotinum*] Nervous, paradoxical instability, anguish, with feeling of **constriction** in the throat and the epigastrium.

Especially in the abdomen:

[(Murphy 1993) - *Secale cornutum* - Abdomen] Abdomen - **CONSTRICTION**, of- **constriction**, hypochondria - bandage, as if
Chest:


[(Allen 1879) - *Anantherum muricatum* - Throat] - Debility and attacks of **constriction** of the throat, with danger of suffocation.

[(Allen 1910) - *Ustilago maydis* - Chest] - **Constriction** with pain.

Back:


[(Schroyens 2001) - *Bambusa arundinacea* - Back] BACK - **PAIN** - **constricting** - Dorsal region (Schroyens 2001)

Extremities:

[(Schroyens 2001) - *Secale cornutum* - Extremities] **EXTREMITIES** - **CONSTRICITION** - Upper arm (Schroyens 2001)

[(Schroyens 2001) - *Secale cornutum* - Extremities] **EXTREMITIES** - **CONSTRICITION** - Lower limbs (Schroyens 2001)

[(Schroyens 2001) - *Arundo mauritania* - Extremities] **EXTREMITIES** - **CONSTRICITION** (Schroyens 2001)
[(Vermeulen 1998) - *Lolium temulentum* - Extremities] Awkwardness of hands, drops things [1]. **Constriction** of legs as with a garter [1]. Trembling, cannot hold a glass of water [1/1]; cannot write [1/1].

Stomach:

[(Allen 1879) - *Anantherum muricatum* - Stomach] - Sensation of fulness and **constriction** on the stomach, with total want of appetite, bitter and salty taste.

[(Allen 1879) - *Saccharum officinale* - Stomach] - Painful **constriction** of the stomach,

Pelvis:

[(Allen 1879) - *Arundo mauritanica* - Generalities] - In women, painful **constriction** of the pubis and loins, which prevents walking.

[(Murphy 1993) - *Ustilago maydis* - Female] Female - **CONSTRUCTING**, pain, genitalia
Table 3: Proposed sensations and reactions of the *Graminae* family of homeopathic remedies

<table>
<thead>
<tr>
<th>SENSATION</th>
<th>PASSIVE REACTION</th>
<th>ACTIVE REACTION</th>
<th>COMPENSATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heaviness</td>
<td>Numbness</td>
<td>Need for support</td>
<td>Desire support</td>
</tr>
<tr>
<td>Weakness</td>
<td>Parasthesia</td>
<td>Itching</td>
<td>Desire cooling</td>
</tr>
<tr>
<td>Formication</td>
<td>Paralysis</td>
<td>Spasmodic movements</td>
<td>Desire uncovering</td>
</tr>
<tr>
<td>Constriction</td>
<td>Heaviness</td>
<td>Convulsion</td>
<td>Rubbing ameliorates</td>
</tr>
<tr>
<td>Crawling</td>
<td>Staggering</td>
<td>Jerking</td>
<td>Desire to be naked</td>
</tr>
<tr>
<td>Tickling</td>
<td></td>
<td>Sleeplessness</td>
<td>Mind cheerful, foolish</td>
</tr>
<tr>
<td>Tingling</td>
<td></td>
<td>Trembling</td>
<td></td>
</tr>
<tr>
<td>Pricking</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Itching</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alive/moving (something within me)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burning/burnt by fire/consumed by fire</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>'out of control'/involuntary</td>
<td></td>
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</tbody>
</table>

4.4 Suggested image of the sensations of the *Graminae* family

My structure (literal: skeletal and figurative: social) is weak/inadequate thus there is a feeling of **weakness** and **heaviness** (especially top heaviness – head) which needs to be **supported**. At the same time there is this something else inside me
that is not congruent, something at odds with me, that is expressed in perhaps
formicatory or burning pain sensations, which in turn could lead to 'out of
control/involuntary' actions.

4.5 Graminae expressions of need for support

Bambusa: many examples e.g. “This feeling of being overworked and tense,
often combined with the delusion of “not being able to cope” and the resulting
search for help and support is the central idea of Bamboo at the Mind level.”

[(Schuster 1997)- Bambusa arundinacea] She lies in bed all day long and cannot
take care of the household. Her husband had to stay home from work, then the
mother-in-law had to move in to support her (repeatedly props her head). 'I
cannot manage it, I cannot stay alone, I keep ringing up my twin sister to come.
I'm afraid to be solely responsible for the child. I imagined the relationship with a
child to be more close. I need someone to help me. I feel drawn to my old family, I
am homesick (weeps). The child is all I think about.'

Lolium:

Koster describes a patient who did well on Lolium as: “What she is really looking
for is confirmation she is on the right track, preferably in the form of consent, from
someone with authority and whom she can trust.” (Koster 2003: 102)
Saccharum:

The need for support is expressed in an acute fashion:

[ (Smits 1995) - Saccharum officinale] Case: Ralf, a 3 years old boy... Most striking was his insatiable desire for sweets and chocolate... After three days he woke up in the night, weeping sadly and wanted to sleep next to his mother and held tightly in her arms; every time she released him he woke up...

[ (Smits 1995) - Saccharum officinale] Example 1: Stephan is a three year old boy with chronic ear problems with diminished hearing... He has still (five months later) an abnormal need for sweets and cuddling, so I continue Sacch. off XMK once every two months...

[ (Smits 1995) - Saccharum officinale] In children we see the compensation in the great need for cuddling, the exaggerated sucking of fingers and the biting of nails (in adult life transformed in a uncontrollable need to smoke), putting everything in the mouth and touching everything. I often could verify the relation between the sucking of fingers and the inveterate habit of smoking, many patients admitting that they changed the first for the latter. I was amazed to find so many adults who were still sucking their fingers. Many people smoke to reduce or to control their weight.
Another mechanism frequently met is loquacity, most patients being not aware of their secret demand for attention.

Children still have a lot of possibilities for asking attention: doing pranks, asking again and again for something or doing things that are forbidden, asking constantly for attention when the parents talk to someone else, being jealous of their brother or sister. All means can be used by the child that needs attention: being restless, shouting, fighting, crying, having pain, being ill, etc.

In adults these mechanisms can persist or change to more adult-like forms such as the exaggerated need to possess objects or to have new things with an everlasting feeling of dissatisfaction. Also the incapacity to have a deep and lasting relationship, seeking always for a new love affair and never finding what he is really seeking. He is like a perforated bucket which you try to fill with all the water you have. There is a fundamental and profound frustration from early life that cannot be satisfied at the level of actual life. Only a deep transformation and cure can help such a person and homoeopathy can be a very effective tool for it.

Example 3: Karl is a nine year old boy and extremely restless; he is constantly asking for attention, talks continuously; he is jealous about his twin brother; he has fear of new situations, of unknown things; he is very attached to objects and as a little child he touched everything; fears to miss something; his mother had diabetes during the pregnancy; he is very obstinate.
An interesting example is the relationship between Sacch. patients and their mothers:

A 29 year old female with pre-menstrual syndrome describes many problems with her relationship with her mother. “In reality she tried all her life without success to get her mother’s love and attention.” (Smits 1995)

The mother’s role in the family can be considered that of the primary support person.

4.6 Miasmatic classification of the *Graminae* remedies

The *Graminae* remedies were then classified into miasmatic groups as outlined by Sankaran (2002: 53). The specific method used was a keyword search of the Encyclopaedia Homeopathica restricting the search to the *Graminae* family (Sankaran 2002: 60).
The following keywords were used for the respective miasms:

**Acute**

Acute, sudden, violent, panic, danger, reflex, escape, helpless, terror, insanity, fright, alarm, instinctive

**Typhoid**

crisis, intense, sinking, recover, typhoid, emergency, homesick, intense struggle, sub-acute, collapse, demanding, impatience, critical period

**Malaria**

stuck, persecution, unfortunate, colic, neuralgia, paroxysmal, contemptuous, disobedient, malaria, worms, migraine, periodicity, harassed, hindered, obstructed, torture, hampered

**Ring worm**

trying, giving up, irritation, try, ringworm, tinea, acne, discomfort, herpetic
Sycosis

fixed, guilt, hide, secretive, warts, tumours, gonorrhea, neurosis, avoidance, weakness, accepting, covered

Tubercular

hectic, intense, suffocation, trapped, closing, change, activity, freedom, defiant, tuberculosis, oppression

Cancer

control, perfection, fastidious, superhuman, cancer, expectation, capacity, chaos, order

Leprous

disgust, contempt, isolation, mutilation, hopeless, oppression, dirty, hunted, tears, bites, despair, outcast, sadism, repulsion

Syphilis

destruction, homicide, suicide, ulcers, total, impossible, despair, psychosis, devastation
The searches selected rubrics, case study material and clinical information with the relevant keywords and the ordered the relevant Graminae remedies in terms of the most amount of 'hits' to the least. However one cannot just take this quantitative ranking as the final word on miasmatic classification. For instance relatively larger remedies such as, Secale, are found to score highly on all the miasmatic groups. This is also due to the re-quotation of original sources by many subsequent authors leading to high repetition indices. The keyword searches are also useful in excluding remedies from a specific miasm – if the remedy did not come up at all in terms of the miasmatic keywords, we can assume that the remedy is either not of that miasm or that it is perhaps too small to be classified miasmatically at this stage of our homeopathic knowledge. The keyword searches thus provided a framework for the more detailed and insightful qualitative methods.

The following qualitative statements were used to guide the miasmatic classification:

Acute miasm:

"The feeling is of an acute threat and the reaction is strong and instinctive" (Sankaran 2002: 53).
Typhoid miasm:

"The feeling is that of a critical situation which, if properly handled for a critical period, will end in total recovery. The reaction is an intense struggle against it." (Sankaran 2002: 54).

Ringworm miasm:

"It is characterized by an alternation between periods of struggle with anxiety about success, and periods of despair and giving up" (Sankaran 2002: 54).

Malarial miasm:

"There is an acute feeling of threat that comes up intermittently, in phases, between which there is an underlying chronic, fixed feeling of being deficient. This miasm is characterised by sudden, acute manifestations that come up from time to time, followed by periods of quiescence." (Sankaran 2002: 54)

Sycosis:

"The feeling is that there is fixed, irremediable weakness within the self. The action is to attempt to cope with it and hide it from others; hence he covers it up egotism, compulsive acts, is very secretive, etc." (Sankaran 2002: 54)
Tubercular miasm:

"The feeling is of intense oppression and a desire for change. The reaction is intense, hectic activity in order to break free from this oppression." (Sankaran 2002: 55)

Cancer miasm:

"There is a feeling of weakness and incapacity within, and the need to perform exceedingly well and live up to very high expectations. The reaction is a superhuman effort, stretching himself beyond the limits of his capacity. It is continuous, prolonged struggle which seems to have no end. His survival depends on it, for failure would mean, death and destruction." (Sankaran 2002: 55)

Leprosy miasm:

"The feeling is of intense oppression, intense hopelessness, isolation and intense desire for change." (Sankaran 2002: 55)

Syphilitic miasm:

"The feeling is that he is faced with a situation beyond salvage, leading to complete hopelessness and despair. In a desperate effort, he tries to change the situation and the result is usually destruction." (Sankaran 2002: 55)
The miasmatic keyword search material and the above "miasmatic essence statements" were used to determine if a particular remedy expressed the "total miasmatic picture". Using these criteria the results are given below:

**Bambusa arundinacea**

*Bambusa* is classified into the cancer miasm.

Cancer in the family is described in a case study. There is also a fear of cancer:

[ (Schroyens 2001) - *Bambusa arundinacea* - Mind] MIND - FEAR - cancer; of

(Schroyens 2001)

[ (Schroyens 2001) - *Bambusa arundinacea* - Mind] MIND - FEAR - cancer; of - brain tumor (Schroyens 2001)

Control issue feature as follows:

[ (Schroyens 2001) - *Bambusa arundinacea* - Mind] MIND - FEAR - self-control, of losing. (Schroyens 2001)

And: [ (Schuster 1997) - *Bambusa arundinacea*] The pregnancy, which was not planned, the childbirth and the care for the baby created an additional burden. Standing up after sitting causes dizziness from hypotension. She would never drink so much alcohol that she would lose control.
everything is **controlled** by (Schroyens 2001)

There is a desire to behave in a *fastidious* way:

[ (Schroyens 2001) - *Bambusa arundinacea* - Mind] **MIND** - **FASTIDIOUS**

[ (Schroyens 2001) - *Bambusa arundinacea* - Mind] **MIND** - **FASTIDIOUS** - perfect way; wants to perform in a

The main expression of *Bambusa* could be: *If I pull out all the stops, I will get the support I need to survive!*

**Arundo mauritanica**

*Arundo* is small remedy with very little if any case studies available. There is no mention of any specific miasmatic diseases in terms of clinical information. The mention of periodicity is quite marked so it has attracted the writer's attention in terms of the malarial miasm.

[(Vithoulkas 1992) - *Arundo mauritanica*] *Arundo*'s symptoms have an annual periodicity; they start in a mild form and then proceed to become more and more severe, while at the same time there is a tendency for the inflammation of the upper respiratory tract to descend towards the bronchii. *Arundo* patients are somewhat hysterical about such conditions and they are afraid that, with the first symptoms of mucus accumulating in the bronchii, they will suffocate, that they
cannot take in sufficient air. It is not an actual dyspnea but rather a fear that they may not be able to breathe. During coughing they may get a feeling of obstruction in the larynx which makes them feel that they cannot expectorate, that they want to belch and cannot do so, and end up vomiting. It is more a hysterical type of reaction than real obstruction.

There is worm connection:


Paroxysmal fever is present:


There are neuralgic pains:

[(Boericke 1927) - *Arundo mauritanica* - Female] - Neuralgic pains from face to shoulders and pubis.
And some mention of obstruction:

[(Hering 1879) - *Arundo mauritanica* - Cough] - After coughing, larynx **obstructed**, prevents wind and sputa from coming up, causing afterwards vomiting of frothy, viscid matter.

However there are no clear mental or emotional symptoms that point to malaria miasm, in fact there is a negative symptom e.g. Mind ideas – a deficiency of. We expect planning and theorizing in the malarial miasm. Therefore the writer cannot actually claim that *Arundo* is of the malarial miasm. At this stage it is a possible suggestion perhaps also informed by the exclusion of the typhoid, sycotic, tubercular, and syphilis (see table 4).

**Anantherum muricatum**

Vithoulkas has pointed out the connections between this remedy and the syphilitic condition:

[(Vithoulkas 1992) - *Anantherum muricatum*] I am of the opinion that homosexuality and sexuality in general, when practiced with such self-destructive intensity as that described above, is the result of suppressed Syphilis.* The pathology of *Anantherum* reflects the effects of primary syphilis as well - chancre-like ulcers of the penis, sores and glandular swellings. Abcesses and Kaposi’s sarcomata are met with this remedy as well, and it is a remedy which should be
considered in AIDS patients when they exhibit behavior such as that described above.

In terms of the syphilis keyword analysis Anan. Featured prominently primarily on account of the extensive syphilitic ulceration:

[(Allen 1879) - Anantherum muricatum - Male] - An indurated ulcer, like a chancre, on the penis.

On the mental emotional level:

**[(Allen 1879) - Anantherum muricatum - Generalities] - Great bodily and mental debility, with melancholy, accompanied with Suicidal ideas, and copious sweat at the least movement.

And:

[(Vithoulkas 1992) - Anantherum muricatum] Anantherum is a remedy that stimulates the lower passions of man, most specifically the sexual passions, to such excess that an individual so affected may be driven mad by the sheer force of his desire. It creates an insatiable desire to satisfy the sexual urge, driving the person to repeated sexual contacts. If this urge cannot be satisfied, he is driven to masturbation. The desire is pathological, indicative of an organism completely out of check, impulsively driven to actions which could very well lead to its rapid self-destruction.
[(Vithoulkas 1992) - *Anantherum muricatum*] The intellect becomes dull and blunted, the memory weakened. Apathy, depression, and **Suicidal** ideation supervene, with a constant inclination to weep. And at this stage many phantasies, visions and hallucinations begin to occur.

On the basis of the above the writer would like to strongly suggest that Anan. is a remedy of the syphilis miasm, unfortunately the writer could not find any case study to confirm or deny the existence of a degree of desperation that one would expect to see in syphilitic remedies.

The main expression of Anan. could be: *Support is useless.*

**Saccharum officinale**

Sacch. has components of the typhoid miasm: e.g. [(Schroyens 2001) - *Saccharum officinale - Mind*] MIND - DELUSIONS - bed - **sinking** - bed is sinking

[(Schroyens 2001) - *Saccharum officinale - Mind*] MIND - **HOMESICKNESS**.

However it has more elements of the Acute miasm:
Much violence:

((Allen 1879) - Saccharum officinale - Mind) Violent temper; irritable temper; quarrelsomeness, [a1].

((Allen 1879) - Saccharum officinale - Eye) Violent ophthalmia, [a1].

((Allen 1879) - Saccharum officinale - Nausea and vomiting) Violent retching, [a1].

((Allen 1879) - Saccharum officinale - Generalities) Bad effects from violent anger, [a1].

((Allen 1879) - Saccharum officinale - Aggravation) (Violent anger), Bad effects.

([Clarke 1904] - Saccharum officinale - Mind) Violent temper; irritable; quarrelsome.

([Clarke 1904] - Saccharum officinale - Stomach) Violent retching.

Issues of panic and escape:

([Smits 1995] - Saccharum officinale) In January 1994 I saw a very pale eleven year old thin girl for sleeping problems. She wakes frequently from nightmares, dreaming that she is persecuted by people, computers, anything and she cannot escape. She wakes with icy cold face and sweat on her nose. She goes into her parents bed. She sleeps with a four foot high teddy-bear. She abhors light in her bedroom, because she is afraid of the shadows. She has curtains around her bed that have to be closed carefully so that no light can pass. She has a very strong need for cuddling. She is very sensitive to pain and faints from shocks. She
suffers a lot from anticipation, is easily panicked and is performing much less than she should.

There are sudden expressions of anger etc.:

[(Smits 1994)- Hay fever - *Saccharum officinale*] His behavior becomes difficult after he eats chocolate or sugar: very aggressive; **sudden** anger; malicious; tries to hurt his mother by breaking her favorite objects while looking at her with a malicious smile; very restless, wild, insolent, and foolish behavior.

[(Schroyens 2001) - *Saccharum officinale* - Generals] GENERALS - WEAKNESS – **sudden** (Schroyens 2001)

Sankaran puts the descriptive age situation of the Acute miasm as that of infancy and that of the Typhoid miasm as childhood (1-12 years old) (Sankaran 2002: 67). Interestingly there are 23 ‘children in’ of the 111 mind/dream rubrics extracted from Radar 9.

The majority of the Sacch. cases in Encyclopaedia Homeopathica are of children. Adults who did well on the remedy also showed child like sides, e.g. in the case of a 29 year old mother:

[(Smits 1995)- *Saccharum officinale*] A.: Oh yes, definitely I have more space for others. I always had a difficult contact with my daughter and now our relation is much easier. In the relation with my husband there is a complete change, because when I didn't feel well I wanted him to touch me like a child. Now I can
give my love to him, instead of only asking for it, as I did with my mother. I feel free now and every day I am still astonished about myself. I subscribed to a course for masonry to make alterations in our house, because my husband doesn't have time. I even didn't discuss this with him; I just did it, simply as if I was always used to.

Quite a few cases refer to the similarity between the Sacch. and the Acute miasm remedies Belladona and Stramonium:

\[\text{(Smits 1995)- Saccharum officinale}\] ... Often this is coupled with the fear of being abandoned (a strong feature in Saccharum). The child has a tremendous fear of being separated from the mother and is following her constantly, wanting to stay in physical contact with her by being carried, holding her hand or sitting on her lap. If he wakes up in the night, anxious, screaming for his parents, he often can be consoled only when he can lie in close physical contact with his mother, as several mothers told me 'as if he or she wants to creep into me' (DD Stram.). Of course this behaviour closely resembles Stramonium.

\[\text{(Smits 1995)- Saccharum officinale}\] Belladonna has in common with Sacch. off.: the congestion of the head and flushes, the restlessness, the aversion for warm food, vegetables and milk, the aggressiveness with striking and kicking; the waking from fright, the bed wetting, the maliciousness; the irritability on waking, the impulse to touch everything, the changeable mood and defiance. Overall the writer feels that placing Sacch. in the Acute miasm is reasonable choice that can be made with a fair degree of conviction.
The main expression of Saccharum could be: *I need support immediately!*

**Stigmata maydis**

This is not a remedy that the writer would usually even consider for miasmatic analysis on the basis of its paucity of symptoms, however the remedy came up in the miasmatic keyword analysis in two directions:

On the one hand:

- [(Boericke 1927) - *Stigmata maydis* - Urinary] - Renal lithiasis; nephritic colic; blood and red sand in urine.
- [(Boericke 1927) - *Stigmata maydis* - Urinary] - Shucks (as a decoction used for chronic malaria, teaspoonful doses freely. Dr. E. C. Lowe, England).
- [(Clarke 1904) - *Stigmata maydis*] - Malaria, chronic (Sh.).
- [(Clarke 1904) - *Stigmata maydis*] - Renal colic (St.).
- [(Clarke 1904) - *Stigmata maydis*] - "Shuck tea" is a popular remedy for chronic malaria.
- [(Clarke 1904) - *Stigmata maydis*] - Renal colic, Oc. c.
- [(Clarke 1904) - *Stigmata maydis*] - Malaria, Malar.
But on the other hand:

[ (Blackwood 1906) - Stigmata maydis] - It is useful in chronic vesical catarrh, when the urine contains an excess of mucus and is ammoniacal, also in chronic gonorrhoea, when the prostatic gland is involved and urination is painful.


[(Boericke 1927) - Stigmata maydis - Urinary] - Gonorrhoea.

[(Clarke 1904) - Stigmata maydis] - Gonorrhoea, chronic (St.).

[(Clarke 1904) - Stigmata maydis] - (6) Chronic gonorrhoea, prostate involved, painful urination.

There is no further information in terms of generalities or mental/emotional symptoms to further differentiate the remedy. Vermeulen (Vermeulen 2000: 1474) states: “Has marked urinary symptoms...”, so perhaps it is more of a Sycotic miasm remedy. At this point it is an academic exercise of little importance due to our extremely limited knowledge of this remedy, so the writer thinks it is not important to classify Stigmata.

**Ustilago maydis**

*Ustilago*. has been the most difficult remedy to classify miasmatically. Aspects of the malarial, ringworm, sycotic, tubercular and cancer miasm were highlighted by the miasmatic keyword search.

The writer's main suspect is the ringworm miasm for the following reasons:
It is primary choice according to the miasmatic keyword search – 20 out of 29 pages of information. As stated earlier one cannot take the quantitative aspect of the keyword search as gospel, however it is significant when a 'small' remedy is so prominent.

It is the only Graminae remedy with a mention of Tinea: [(Murphy 1993) - Ustilago maydis - Diseases] Diseases - TINEA, general - tinea, capitis, favosa.

Still on the physical lesion level there is ringworm:

[(Burt 1883) - Ustilago maydis - Skin] - On face and neck, it came in patches like ringworm (herpes circinatus), but not vesicular.

There is plenty of irritation and irritability at all levels:

[(Schroyens 2001) - Ustilago maydis - Female genitalia/sex] FEMALE GENITALIA/SEX - IRRITATION – Ovaries (Schroyens 2001)

[(Schroyens 2001) - Ustilago maydis - Throat] THROAT – IRRITATION (Schroyens 2001)

[(Murphy 1993) - Ustilago maydis - Mind] Mind - IRRITABILITY, general - emission, after
More importantly case study information reveals the 'essence' of the miasm:

[Dack 1991] - *Ustilago maydis*] But I would like to try to get pregnant. He (gynecologist) says that it's not very likely.

[Dack 1991] - *Ustilago maydis*] Sometimes the stress is too much. I just want to blow up - fear and anxiety (2). He has taken the keys to my car and has threatened to take the credit cards. I try not to react, but I feel so helpless and small. I feel terrified of him (2). I feel like a child, like he has all the control.

[Dack 1991] - *Ustilago maydis*] I don't know why I want to get pregnant. I think maybe I am trying somehow to connect us again.

Interestingly *Ustilago* is a fungal infection of the maize seed and ringworm is a fungal infection as well.
There are no other mentions of ‘trying’ amongst the other grass remedies, so on balance the writer would say that *Ustilago* is best described as a Ringworm miasm remedy.

The main expression of *Ustilago* could be: *Trying to get support*

*Secale cornutum*

Due to the prior work on this remedy classified as a ‘keynote or signature’ Leprosy miasm remedy by Sankaran (Sankaran 1997: 225; Sankaran 2002: 55) it has been difficult to classify under any other miasmatic category.

There is oppression, dirtiness, biting, loathing, despair and disgust:

[(Allen 1910) - *Secale cornutum* - Characteristics] - The small one would dry up leaving no cicatrix, but the large ones would fill slowly with a bright yellow pus-like material, or at times a bloody, watery serum, remaining open for days, having extremely painful edges and base, and discharging towards its close a thick, dirty, offensive serum.

[(Allen 1910) - *Secale cornutum* - Characteristics] - Upon entering a rye mill, had a sensation of constriction in the throat, great difficulty in breathing; difficult inspiration; expiration accompanied by soreness all over the chest; oppression of the chest; soreness of the chest; intercostal pains; pricking of the tongue.

[(Allen 1910) - *Secale cornutum* - Mind] - Mania: with inclination to bite; with inclination to drown.
(Allen 1879)- *Secale cornutum* - Mind] - Loathing of life; **despair** (tenth day), [(Allen 1910) - *Secale cornutum* - Appetite, thirst, desires, aversions] - **Disgust** for food, especially for meat and fatty things.

And if that is not enough there is contempt as well:

[(Allen 1910) - *Secale cornutum* - Mind] - Paralytic mental diseases; treats his relations **contemptuously** and sarcastically; wandering talk and hallucinations; apathy and complete disappearance of the senses.

According to Sankaran the contempt expressed towards his relations is a reaction to his delusion that he is considered contemptible by his relations (Sankaran 2000: 458).

In the writer's view there is much argument for a different classification other than the Leprosy miasm for Sec.

The main expression of *Secale* could be: **I am not worthy of support**

**Other Graminae remedies**

*Cynodon dactylon*: The writer cannot make any positive suggestion for this small remedy. It did feature in the miasmatic keyword analysis but is generally excluded from the acute, malaria, and syphilis miasm (see table 4).
*Lolium temulentum* is a small remedy that has been covered in contemporary literature (Koster 2003), but the writer was unable to classify it miasmatically.

*Triticum* is an even smaller remedy but could possibly have a sycotic nature on the basis of the following evidence:

[(Murphy 1993) - *Triticum repens* - Male] Male - **GONORRHEA**, infection,

[(Murphy 1995) - *Triticum repens*] Tritic. is an excellent remedy in excessive irritability of the bladder, dysuria, cystitis, **gonorrhea**. Chronic bladder irritability. Strangury, pyelitis, enlarged prostate. Incontinence, constant desire. Frequent, difficult and painful urination. (Pop.) Catarrhal and purulent discharges. (Pareira.) Urine is filled with gravel and sediment which causes irritation of the mucous surfaces. Always blowing nose.

[(Petersen 1905) - *Triticum repens*] Use: A mild, nonirritating diuretic. Allays urinary irritation, increases renal secretion. We think of it in prostatitis, pyelitis, purulent or catarrhal cystitis, irritable conditions of the bladder, **gonorrhoea** and in fevers where a mild diuretic is desirable to increase secretion of urine. Give in form of an infusion or the tincture, 5 to 60 drops in 1/2 to a tumbler of water 3 to 4 times a day, as the case may demand.

[(Schroyens 2001) - *Triticum repens* - Urethra] **URETHRA** - **DISCHARGE** – **gonorrhoeal**

*Avena sativa* although widely used – primarily or perhaps almost exclusively, as a herbal tonic, does not reveal any clear miasmatic tendency.
Table 4: Suggested miasmatic classification of selected *Graminae* remedies used in homeopathy (+ = positive association & - = negative association)
CHAPTER 5: CONTEXTUAL ANALYSIS OF THE GRAMINAE REMEDIES

5.1 Graminae and the Fungal connection

It appears that nearly all Graminae have some form of fungal relationship either in a more symbiotic way via root mycorrhiza or via asexually reproducing endophytes, or in a parasitic way via sexually reproductive fungi.

Fungal endophytes live in a symbiotic relationship (most of the time) with many Graminae species. The fungus confers greater drought resistance, resistance to pest attack, overgrazing (causing staggering and collapse in grazing animals). Overall endophyte infected grass are expected to be more competitive especially under stressful conditions (Anonymous 1999). In return the grass plant provides carbon based sustenance for the endophyte. The endophyte survives and spreads by inhabiting the intercellular spaces of the host plant and invading the seed as it forms. When this endophyte infested seed germinates the endophyte spread and existence is guaranteed. This is the asexual mode of reproduction. However under certain environmental conditions the fungus creates a fruiting body on the outside of the seed which actually destroys the seed preventing the grass plant from reproducing (Pennisi 2003: 774). Examples of this parasitic infestation in the homeopathic world are Secale, Ustilago and Lolium.

At one level it begs the question whether remedies like Secale, Lolium and Ustilago should be considered as fungal remedies or should they be considered as Graminae remedies. Encyclopaedia Homeopathica (EH) puts them in the
Graminae group. In fact EH suggests *Secale* and *Bambusa* as the two archetypal remedies of the *Graminae* family. However it also regards *Secale* as a fungal remedy and more especially an archetypal fungal remedy!

Given the amount of Grass-fungi remedies the writer would have expected more fungal sensations to have come up in the common extractions, if indeed *Secale*, *Ustilago* and *Lolium* are to be considered as primarily fungi. Sankaran (2003: 6) lists the sensations of fungi as: burrowing, invading, digging, excoriating, eroding, danger, strength, super human control. In the writer's view *Secale*, *Ustilago* and *Lolium* should be primarily considered as *Graminae* with a fungal influence.

Delirium and staggering could be seen as fungal influences 'caused' by fungal alkaloids such as lysergic acid amide.

The sensation of 'something alive/moving within me' and the various formications and burning pains could also reflect the substantial fact of the fungal endophyte co-existing within the grass plant.

On more speculative/imaginative level there is a connection between life, fungus and the grass plants. In bread making it is the addition of the fungal yeast which gives 'life' to the rather stolid and heavy wheat dough. And we say that: "Bread is the Staff of Life".
5.2 Minerals in Graminae

*Bambusa* (and perhaps the other reed grasses) is very high in silica (Schuster 1998: 11). Viewing a comparative extraction of *Bambusa* and *Silicea terra* – Radar 9 gave 674 rubrics in common which is significant considering 1233 rubrics for *Bambusa* alone. Perhaps many *Bambusa* patients are mistaken as those requiring *Silicea*. Using a group analytic techniques such the ‘levels’ method described by Sankaran (2004b) can help differentiate between the different kingdoms and sub-groups.

I am not sure what the comparative mineral makeup is for the other *Graminae* remedies and it is beyond the scope of this project to do such a study.

5.3 Clinical aspects to the Graminae remedies

The following clinical conditions were noted:

1) Allergic rhinitis
2) Male Sexual system – especially for the consequences of excessive sex.
3) Urinary system
4) Female sexual system – especially hemorrhagic conditions

We need to ask whether these focal areas are especially prominent in the *Graminae* remedies or whether they reflect the general lack of proving seen in the grass family. In the writer's view is that there is something specific about the
Graminae remedies and the above mentioned conditions, however it is probably not crucial at this stage of the group analysis project to answer these questions.

5.4 Graminae, vigour and usage

Koster (2003: 104) notices that his *Lolium* patient wants to be of use to others and sees herself as less importance. He suggests that this could be a common theme in the Graminae remedies. Searching on keywords of usage, useful, service, servile etc. did not yield significant results. Before rejecting his hypothesis outright we need to consider that this could be because of the dearth of in depth Graminae cases.

From a Grassland Ecology perspective there are compelling reasons to investigate the 'desire to give service/use' theme further. Virtually all grass plants require regular defoliation whether in the form of fire, grazing or mowing in order to survive. In experimental studies natural grasslands were protected from all forms of defoliation over a period of years. In time it was noticed that the grass plants lost their vigour, became moribund and died out to be replaced by shrubs and trees (Tainton 1981: 266). On the other hand excessive 'use' in the form of grazing, mowing and fire will also wear done the natural vigour of grasses leading to their replacement by initially more hardy grass plants and later on by resistant forbs (non-grass herbs) and shrubs. So grass plants require a modicum of usage/defoliation if they are to survive.
Mention must also be made of effect of burning on grassland ecology. Many natural grasslands require burning in order to maintain their species composition and vigour, Tainton describes the high rainfall, high altitude grasslands of KwaZulu Natal as being 'Fire Climax Grasslands' (Tainton 1981: 366). The co-evolution of grass plants and fire (initiated by nature- lightning strikes and prehistoric man) is interesting because we notice burning pain featuring strongly amongst the Graminae remedies.
CHAPTER 6: CONCLUSION

6.1 Information limits on plant family group analysis

It is clear that the Graminae are a small family in terms of homeopathic rubrics. In the past the response has been to create supergroups e.g. the Liliiflorae as per Sankaran (Sankaran 2002: 364) which is composed of 10 related plant families. For research purposes the writer did not go that route and attempted to analyse the Graminae group alone. The writer could have created a super group of the Subclass Commelinoids, this would have added 7 botanical families but only marginally increased the total number of Encyclopaedia Homeopathica listed remedies from 17 to 27. Furthermore none of the 10 extra remedies are homeopathically significant.

Strong sensations emerged from the original extractions e.g. the irritant and burning sensations and by a degree of lateral extrapolations the probable central sensation of the family –heaviness- has been proposed. However the main problem is the lack of cured case studies to test out the proposed sensation.

Even when there are many cured cases studies there is generally a lack of depth in the reporting of the case study. By this the writer means the patients own words are not available or the salient parts that demonstrate the ‘sensation’ are not reported on. To advance the cause of refining and testing the proposed sensation for the Graminae and other plant families, we need to develop a
network of information sharing that provides as much verbatim and depth reporting as possible.

Most small remedies are unlikely to have adequate mental and emotional symptoms to determine a central theme/essence as done by Sankaran (1997: intro) and Vithoulkas (1988: i). The Graminae remedies generally exhibit this limitation except for Bambusa (well proven) and to some extent Anantherum. The solution is to rely much more heavily on physical generalities in these circumstances.

The miasmatic classification of the remedies was a more clear cut project except obviously for the very small remedies.

Overall plant families smaller than the Graminae are perhaps too small for group analysis unless there are sufficient in-depth cured case studies to corroborate the findings.

An important question when dealing with a large plant family that is not much known in homeopathy is: To what extent are the members of the family not used as remedies because they have no inherent utility or because is because their properties are not known. The extensive picture produced by the proving of Bambusa (Schuster 1998) leads me to consider the latter proposition. However the nature of the Graminae family is that of similarity –difficult to identify and classify on external features- and perhaps it is the selection of iconic species such as Bamboo that lead to a well developed and unique remedy picture. The
writer therefore suggests that selection of other Graminae candidates for proving should be on the basis of their iconic status.

Reading the proving and subsequent analysis of Bambusa was crucial to determining the probable sensation of the Graminae family viz. heaviness leading to a need for support. Thus the writers suggests that in order to conduct a useful group analysis of a small family it is important to check if at least one remedy from the group has been well proven with enough of the patient's verbatim dialogue to at least offers clues of the sensation level expressions.

6.2 Evaluation of group analysis method of homeopathic case taking

As cautioned in the literature review group analysis that is incorrectly done could deliver highly unreliable and misleading results.

To overcome these problems we can look at what social science suggests. Yin (1994: 90) in his excellent book on 'Case Study Research' says we need to use multiple sources of evidence and that these sources need to be 'triangulated' to create as small as possible 'triangle of uncertainty'. In practice this means to corroborate the 'vital sensation' from generals, dreams, hobbies, main complaint etc.

He also requires that we maintain the integrity of case study database. In the case of homeopathy it means we should keep an unedited and complete transcript of the case without any comments for further evaluation. A videotape of
the case would be even better because it supplies non-verbal information related to the 'Sensation' and 'Energy' levels.

6.3 Suggestions for further research

The work on group analysis of the plant families needs to go on. There is a tremendous backlog. Before undertaking research on plant family the writer would suggest making sure that there is at least one remedy within the group that is well proven, and well documented in terms of case studies. What is most useful is the transcripts of the patient's actual words. Obviously families with a degree of homeopathic significance need to be selected. Perhaps super grouping of small families would also make sense. For example, there is no way that the small extra 10 remedies of the Commelinoids (the sub class of which the Graminae are a part of) should be analysed alone. It would make sense in this case to test if the extrapolation of the Graminae family sensations apply to the other Commelinoids.

Corroboration of the proposed sensation of the Graminae family would require analysis of more cured case depth studies. It is beyond the scope of this project to launch an intensive world-wide search for such information. However it may make a good study to actively survey homeopaths to collate unpublished Graminae cases.

More high quality provings would also help refine the proposed Graminae sensations. A suggestion is Triticum (wheat) so universally used yet also a considerable source of allergies and food intolerances.
In terms of the extensive fungal involvement of the *Graminae* it could be interesting to differentiate between the overt fungal remedies e.g. *Secale*, *Ustilago* and *Lolium* and between the other grass based remedies e.g. *Bambusa*, *Anantherum* and *Arundo*.

6.4 Last word

The outcome of the research demonstrates the applicability of Sankaran’s method of group analysis to unexplored plant families, even a small family like the *Graminae*. As a research method it is fairly demanding and time consuming, a fair amount of lateral investigation is necessary, and it is difficult to predict when and exactly how adequate results will be obtained. However, the writer wishes to report that he enjoyed the process – perhaps it could be described as something akin to code breaking *ala* ‘The da Vinci Code’.
APPENDICES

Appendix 1: Common rubrics from selected Graminae remedies

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<th>Common radar extraction 18-nov-04</th>
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