A Homoeopathic Drug Proving of Chamaeleo dilepis dilepis, analysing symptomatology in relation to the Doctrine of Signatures

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Mini-dissertation submitted in partial compliance with the requirements for the Master's Degree in Technology: Homoeopathy in the Department of Homoeopathy at the Durban University of Technology.

I hereby declare that this mini-dissertation represents my own work both in concept and execution.

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Liesl Pistorius

Mini-dissertation
To Dave
for making it all possible
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ABSTRACT

This study was conducted by administering *Chamaeleo dilepis dilepis* 30CH to healthy individuals with the aim of eliciting and documenting the resulting mental, emotional and physical symptomology. *Chamaeleo dilepis dilepis* was chosen as a substance based on it being indigenous to South Africa and as no other members of the Chamaeleonidae species have been proven.

To prepare the remedy, the tail-tip of *Chamaeleo dilepis dilepis* was triturated with Saccharum laetis up to the 3CH potency. Liquid potencies were then manufactured from *Chamaeleo dilepis dilepis* 3CH to a potency level of 30CH. Saccharum laetis granules were impregnated with *Chamaeleo dilepis dilepis* 30CH by triple impregnation. The placebo powders were made by triturating Saccharum laetis up to the 3CH potency, without addition of the tail-tip and then liquid potencies were manufactured from Saccharum laetis 3CH to a potency level of 30CH. To prepare powders for dispensing, 10 granules of verum or placebo respectively were added to powdered envelopes, containing unmedicated lactose powder.

The research was conducted as a randomised, double blind, placebo-controlled trial. Provers were unaware of the substance and potency being proven and neither the provers nor the researchers had any knowledge of who received verum or placebo. The prover population consisted of 15 provers, an experimental group of 12 provers and a control group of 3 provers. Provers recorded their state prior to administration of the proving substance and therefore served as their own control. Verum and placebo were dispensed in the form of a set of six powders and were taken sublingually three times per day or until the onset of symptoms. All symptoms were recorded by the provers in a journal and were closely monitored by the researchers for the duration of the proving. At the end of the proving period, journals were collected and all recorded data was collated and edited for addition to the Repertory and Materia Medica. The data did not require statistical analysis.
A concurrent study was conducted by Moore (2006) using the exact same methodology as used in this study, bringing the total prover population to 30 provers, 24 on verum and 6 on placebo. Symptoms from both studies were collated and edited as a unit. The information was then analysed differently by the two researchers to complete two separate research projects. Moore (2006) used the data derived from the proving to draw a comparison to remedies yielding the highest numerical value and total number of rubrics on repertorisation of the proving symptoms.

It was hypothesised that the proving of Chamaeleo dilepis dilepis 30CH would produce symptoms in healthy individuals partaking in the study. The results of the research confirmed this hypothesis, as a wide variety of symptoms covering 34 sections of the materia medica were obtained.

The results showed preponderance for mental symptoms, especially depression, negativity, irritability, feeling disconnected, antisocial and despondent. There was also a general increase in sensitivity to external impressions, as well as excitement, calmness and sensations of lightness and floating. Movement alterations were noted, with unsteady, jerky gait. This links to another prominent area of affinity – the extremities, where numerous nerve related symptoms were produced, with tingling, numbness, coldness, heaviness, pain and stiffness, also of the back and neck. Headaches were also common in provers, as well as tired, red, burning eyes and vertigo. Sleep disturbances were very common throughout the proving, with difficult falling asleep, frequent waking and restless tossing and turning. Difficult respiration,
It was further hypothesised that the symptoms produced would show a correlation to the substance chameleon in relation to the doctrine of signatures. The cold-bloodedness, antisocial and aggressive behavioural patterns showed a clear correspondence, as well as the desire to hide, blend in and enter a state of suspended animation. The sleep patterns, nervous phenomena and gait disturbances also showed a strong correlation. Various other specific symptoms throughout the proving could be directly related to the chameleon, i.e. bulging eyelids and the feeling of a hollow tube inside.

*Chamaeleo dilepis dilepis* thus produced clearly observable signs and symptoms in healthy volunteers as was hypothesised. Furthermore the doctrine of signatures analysis assisted in illustrating underlying themes with the aim of assisting in the future understanding and application of the remedy in clinical practise.
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DEFINITION OF TERMS

PROVING

A translation of the German 'Prüfung', meaning to test or assay (Gaier, 1991:390). The systematic procedure of testing substances on healthy human beings in order to elucidate the symptoms reflecting the action of the substance (Vithoulkas 1980:96). The process of determining the medicinal or curative properties of a substance (Yasgur, 1997:201).

PROVERS

Subject of a proving or homoeopathic pathogenetic trial. A person who should be in good health, who records changes in his or her condition during and after administration of the substance to be tested (Swayne, 2000:173).

DOCTRINE OF SIGNATURES

A doctrine which attributes therapeutic properties to plants on the basis of some correspondence between their characteristics (e.g. form, colour) and the characteristics of the disease or the afflicted organ (Swayne, 2000:192). First proposed in the middle ages, stating that external characteristics of a substance serve to indicate possible therapeutic effects (Yasgur, 1997:70). Paracelsus refers to the idea that plants with shapes resembling human organs or structures should be regarded as healing agents for those body parts (Pujol, 1990:24).

PLACEBO

An inactive agent used for comparison with the substance or method to be tested in a controlled trial, and indistinguishable from it (Swayne, 2000:162). For the purpose of this study, placebo took the form of lactose pillules impregnated with Saccharum Lactis 30CH by
method of triple impregnation, according to Method 10 of the German Homoeopathic Pharmacopoeia (GHP).

PHARMACOPOEIA

A standard book containing a list of drugs and medicines with information about the sources, habits, descriptions, collections and identification of the drugs. It also provides directions for their preparation, combining, compounding and standardization (Hopkins, 2000).

POTENCY

The stage of altered remedial activity to which a drug has been taken by means of a measured process of deconcentration, with succussion, or by trituratio, of the medicinal substance, which is thus brought to a state of diminutive or infinitesimal subdivision (Gaier, 1991:432).

POTENTISATION

A multi-step process developed by Dr. Samuel Hahnemann by which the medicinal power (potency) of a homoeopathic remedy is released or increased, involving serial dilution with succussion or using trituratio or fluxion (Swayne, 2000:168).

SUCCUSSION (DYNAMISATION)

Vigorous shaking, with impact or "elastic collision", carried out at each stage of dilution in the preparation of a homoeopathic potency (Swayne, 2000:201).
THIRTIETH CENTESIMAL POTENCY (30CH)

The thirtieth step of serial deconcentration on a 1 in 100 scale, with succussion at each step, having an effective deconcentration of $1 \times 10^{-60}$ (Kerschbaumer, 2004).

LAW OF SIMILARS

The fundamental principle of homoeopathy, which states that substances may be used to treat disorders whose manifestations are similar to those that the same substance will induce in a healthy subject. The law of similars is also expressed as “Similia Similibus Curentur” (let like be cured by like) (Swayne 2000:193).

MATERIA MEDICA


MIASM

The term comes from the Greek, meaning ‘pollution’ or ‘taint.’ An unknown cause of disease that pollutes the whole system so as to produce a permanent disease state (De Schepper, 2001:355).
CHAPTER ONE

1.1 INTRODUCTION

Provings form a fundamental part of the philosophy and practice of homoeopathy and form the foundation on which homoeopathic prescribing rests (Louw 2002:10). Homoeopathic prescription is based on the ‘Law of Similars’ and states that all natural substances from the three kingdoms (mineral, vegetable and animal) as well as various other sources i.e. diseased or healthy tissues, imponderables etc. are potential sources of healing. To be available for use in homoeopathy, each of these substances should be tested for the symptoms it produces in healthy individuals, in a process called a proving (Hubbard 2004:53).

According to Cook (1989:93), extension of the homoeopathic Materia Medica by proving new drugs is one of the three main areas around which homoeopathic research is centred. The other two are proof of the efficacy of homoeopathic remedies and how homoeopathy works. Vithoulkas (1986:143) states that provings are the best way to accurately predict the effects of substances as homoeopathic remedies and are vital to the expansion of the therapeutic knowledge of homoeopathic remedies. Whilst Sherr (1994:7) states that provings are the pillars upon which homoeopathic practice stands. According to Wright (1999:1) provings are the only way of identifying new homoeopathic remedies which may be added to the Materia Medica and, as such, provings will always take up a major part of the homoeopathic research effort.

As homoeopathy continues to advance, it is necessary to perform provings on new remedies so that the therapeutic armamentarium can be further expanded (Vithoulkas 1980:143). In a case where the simillimum has not yet been proven, we will be forced to prescribe less accurately, as Hahnemann states in aphorism 162: “Because there are still only a moderate number of medicines which are exactly known as to their true, pure action it sometimes
happens that only a portion of the symptoms of the disease to be cured are met within the set of symptoms of the still best fitting medicine. Consequently, this imperfect medicinal disease potence must be employed for lack of a more perfect one” (Hahnemann 1996:173).

When a new remedy is proven well, it will cure cases that until then could only have been partially covered by existing homoeopathic remedies (Sherr 1994:8).

South Africa has a rich variety of indigenous fauna and flora, indicating a vast healing potential. According to Sherr (1994:49) a useful remedy should be a local one within close proximity of the patient, as nature will always provide an accessible cure. At the moment, South African homoeopaths still rely heavily on Europe and the United States as sources for crude drugs, as is evidenced by consulting any pharmaceutical company’s catalogue. It would be advantageous if, in future, South African homoeopaths could rely more on indigenous substances as sources of homoeopathic remedies (Wright 1999:3).

Sherr (1994:49) also states the importance of proving a major representative of every family in each kingdom, as this would elevate homoeopathy to a near perfect science. Based on the need for more substances to be proven and in particular indigenous ones, *Chamaeleo dilepis dilepis*, being an indigenous substance shows great potential as a homoeopathic remedy. No other members from the Chamaeleonidae species have been proven and this will serve to fill a gap in the Materia Medica.

Due to *Chamaeleo dilepis dilepis* displaying many characteristic features peculiar only to this animal, it seems relevant to include an analysis of its possible correlation to the doctrine of signatures. The doctrine of signatures allows doctors to predict possible symptoms by studying the characteristics of substances. This is practised worldwide. An example of this may be seen amongst African healers, basing their prescriptions on the likeness between substance and man (Louw 2002:3). According to Goel (2002:465) the
Doctrine of Signatures is inferring the nature of actions of a substance from its physical appearance and properties, that is, from its colour and form.

The purpose of this research is therefore primarily to conduct a homoeopathic proving with *Chamaeleo dilepis dilepis* in the 30th centesimal potency, in order to elucidate the totality of symptoms produced by the drug, so it may be prescribed in homoeopathic practise according to the Law of Similars. The potency was selected according to the Hahnemannian method as stipulated in aphorism 128 of *The Organon of Medicine*, 6th edition. Secondarily the results of the research will include an analysis of its possible correlation to the doctrine of signatures.

1.2 THE HYPOTHESES

1. The first hypothesis was that *Chamaeleo dilepis dilepis_30CH* would produce clearly observable signs and symptoms in healthy provers.

2. The second hypothesis was that the proving of *Chamaeleo dilepis dilepis_30CH* would produce symptoms that would correlate to the doctrine of signatures of the animal.

1.3 THE DELIMITATIONS

The study did not:

- seek to explain the mechanism of action of the homoeopathic preparation in the production of symptoms in healthy individuals.

- determine the effects of potencies or deconcentrations of the substance other than the thirtieth centesimal potency.
1.4 THE ASSUMPTIONS

- the provers would take the remedy in the dosage, frequency and manner required.

- the provers would conscientiously and closely observe themselves for the effects of the remedy.

- the provers would conscientiously, accurately and honestly record all symptoms observed.

- the provers would not deviate from their normal lifestyle or dietary habits in a significant manner immediately prior to or for the duration of the proving.
CHAPTER TWO

REVIEW OF THE RELATED LITERATURE

2.1 INTRODUCTION

Provings form a fundamental part of the philosophy and practise of homoeopathy and form the foundation on which homoeopathic prescribing rests (Louw, 2002:10).

The principle of 'similitude', *Similia Similibus Curentur*, is seen as the first law of homoeopathy. Even though the concept of similitude can be traced back to Hippocrates, Walach (1994: 129) states that homoeopathy is unique in its practical approach to similitude, namely the proving of the substance in a healthy individual.

Every homoeopathic prescription must be based on a comparison between the total symptom picture of the patient and the symptoms the remedy being prescribed produced in healthy people during the proving. Provings are the principle source material for the homoeopathic materia medica, followed by toxicological reports and clinical observations (Dantas, 1996:230).

Walach (1994:130) mentions in his article that there is surprisingly little scientific work done on homoeopathic drug provings and that there is no standard for provings even within the homoeopathic community. He further suggests proving new medicines and to repeat bad and unreliable provings to make the Materia Medica more certain.

"It is only by proving a considerable number of simple medicines on healthy individuals, and carefully and faithfully recording all the disease elements and symptoms that each medicine (as an artificial disease potence) is capable of engendering, that we can have a true materia medica" (Hahnemann, 1996:161).
2.2 HISTORICAL PERSPECTIVES

Provings have been practised for centuries and date back as far as 129AD, with Galen being one of the first people to test medicinal substances on healthy people. Paracelsus also performed provings as far back as 1493AD (Walach, 1994:129).

In the footnote to aphorism 108, Hahnemann (Hahnemann, 1996:145) hails Albreght von Heller as the forefather of the homoeopathic proving. Von Heller stated in the preface of his pharmacopoeia that a remedy must first be tested on a healthy body and attention should be paid to the effects that ensue (Hahnemann, 1996:145). Anton Storck, head of a Viennese hospital, who experimented with medicines on himself, is another known to have done provings prior to Hahnemann (Walach, 1994:129).

Samuel Hahnemann (1755-1843) however was unique in his systematic approach of how he operationalised the law of similars, by proving many curative substances in healthy volunteers and diligently noting all symptoms down, to later be used in clinical prescribing according to the principle of similitude (Walach, 1994:129).

Hahnemann’s first homoeopathic proving was conducted by administering a crude dose of *Cinchona officinalis* (Peruvian bark) to himself, after translating Cullen’s “A Treatise on Materia Medica”, where it postulated that *Cinchona officinalis* was able to cure malaria because of it’s bitter taste. Hahnemann found this hypothesis illogical and improbable and after testing the substance on himself, found that he developed a disease state similar to malaria. Apart from it being the first homoeopathic proving, the discovery led to the first law of homoeopathy: The Law of Similars or Like Cures Like (De Schepper, 2001:xv).

This led him to further experimentation on himself and others and over a period of fifty years conducted further provings on himself and 64 volunteers,
investigating the effect of 101 remedies (Louw, 2002:23). Most of the remedies that were proven by Dr. Samuel Hahnemann have become indispensable and are widely used in homoeopathic practise (Taylor, 2004:6).

Contemporary provings based on Hahnemann's original design are continuing daily. David Riley and Jeremy Sherr follow the Hahnemannian method most consistently in terms of application as well as intent (Kreisberg, 2000:61). According to Sherr (1994:9) the answer is not in the selection of the substance, but in the quality of the proving.

2.3 PROVING METHODOLOGIES

Wieland (1997:229) stated that although Hahnemann's provings yielded reliable symptoms, his methodology would not be considered reliable by today's standards of clinical trials. Wieland (1997:229) also points out that we are required by law to adhere to GCP (Good Clinical Practise) guidelines for clinical trials. This immediately raises the question whether a homoeopathic proving can be seen as a clinical trial, although different in purpose. A clinical trial measures the efficacy of a drug in a specific disease, compared to placebo. A homoeopathic proving differs from this, in that its purpose is to obtain symptoms produced by the remedy. Its efficacy is tested by administering it to healthy volunteers based on the 'Law of Similars' (Wieland 1997:230). Many still uphold that Hahnemann's proving methodology is still the most reliable (De Schepper, 2001; Kreisberg, 2000; Sherr, 1994). The International Council for Classical Homoeopathy (ICCH) has stated that the standard and approach of provings still vary quite significantly (ICCH, 1999:33).

The double-blind, randomised, controlled trial (RCT) have since the 1960's been generally acknowledged by homoeopaths and biomedical physicians as the 'gold standard' for establishing the efficacy of a clinical intervention (Kaptchuk, 1996:237).
The first component of the RCT model relates to the use of placebo as a control measure and this has become one of the biggest questions relating to the proving process, whether it is necessary to use placebo or not. Some provings are conducted using placebo and others without. Provings have been done without placebo for over a hundred years and according to Sherr (1994:57) have stood the test of time and proved clinically efficient in thousands of cases. Instead of placebo being the controlling factor, the control was considered to be the experience of the provers as well as the proving director. Furthermore symptoms obtained were verified through clinical practice (Walach, 1994:130). According to Kaptchuk (1996:238) placebo in a homoeopathic proving is not used for statistical purposes to determine validity. It is given to a smaller percentage of the proving group and the main purpose is to decrease expectation and promote improved quality of judgement and sharpness of discrimination. The symptoms produced by the provers on placebo are discarded. All provings, also termed 'homoeopathic pathogenetic trials' by Dantas (1996:232) should use a diluted and succussed placebo control to determine the specificity of the verum compared to the placebo (Dantas, 1996:232).

The optimum number of provers and the percentage of placebo to be used has been a topic of much debate. Hahnemann used 64 provers, none of whom received placebo. Sherr (1994:45, 57) claims that his experience has shown 15-20 provers to produce a full remedy picture and uses between 10-20% placebo. Vithoulkas (1980:151) proposes that approximately 25% of provers should be taking placebo. Vithoulkas (1980:148) states that to conduct a proving in totality it would require 50-100 people and take about two and a half years. This may provide a thorough proving, but will not be practical.

Randomisation is another component relating to the RCT model and according to Dantas (1996:235) random assignment of placebo and verum should be used to eliminate the influence of the researcher on data collection. Vithoulkas (1980:151) emphasises the randomisation technique, further stating the importance of verum and placebo being packaged identically.
The last component of the RCT model is the double blind or masking technique and is used to prevent an unconscious or deliberate imbalance in attention given to certain subjects or the interpretation of subjective changes (Dantas, 1996:235). According to Vithoulkas (1980:151) this is achieved by ensuring that the codes identifying verum from placebo are kept secret from both the researchers and the provers. Walach (1994:130) further suggests that in his experience the crossover design remains the method of choice. This is very much dependant on control of the carry-over effect, either by a washout period or a pre-study investigation (Walach 1994:130).

Wieland (1997:230) states that a homoeopathic proving is a qualitative study, as it is concerned with obtaining symptoms of quality, instead of simply obtaining a greater number of symptoms. Each symptom must be clarified completely in all aspects for it to be of real value. We must meet today's standard of scientific investigation, without forgetting the true goal of a homoeopathic drug proving, which is to find truly curative medicines (Wieland, 1997:231). Luc de Schepper (2001:32-38) also wrote on some important aspects related to provings, like prover selection, potency and duration of the proving. He emphasises the importance of conducting good thorough provings.

Countless homoeopathic physicians have adhered to Hahnemann's methodologies in the aim of producing reliable provings with clear, untainted symptom pictures. The "Recommended guidelines for good provings" developed by the ICCH is a list of guidelines that they recommend for all modern provings and Jeremy Sherr adheres closely to the principles set out by the ICCH (ICCH, 1999). The proving methodology for this proving was adapted from the proving methodology of Jeremy Sherr (Sherr, 1994:41-89) which in turn is based on Samuel Hahnemann's methodology as outlined in the "Organon of Medicine" in aphorisms 105-145 (Hahnemann, 1996:144-163).
2.4 MODERN DEVELOPMENTS

George Vithoulkas published *The Science of Homeopathy* in 1980, in which he devoted a whole chapter to the proving process. He states that: "As homoeopathy continues to advance, it is necessary to perform provings on new remedies so that the therapeutic armamentarium can be further expanded. For this purpose, it is necessary to have clearly defined standards for the actual methods of performing an accurate and thorough proving.” (Vithoulkas, 1980:143).

Jeremy Sherr published *The Dynamics and Methodologies of Homoeopathic Provings* in 1994, after having completed the provings of Adamas (Diamond), Androctonus amarexii hebraues (Fat-tailed scorpion), Chocolate, Germanium and Hydrogen. This book provides a basic practical framework for conducting comprehensive modern provings. In this book he also printed a list of over 180 provings that had been conducted in the fifteen years prior to publication. Apart from his own provings it includes a list of provings conducted by David Riley, Tinus Smits, Jürgen Becker and Rajan Sankaran (Sherr, 1994:99-117). Sherr has also compiled an online catalogue listing over 1000 new provings. Anyone that has conducted a proving is invited to publish their proving on his website and so it is made available to homoeopaths world-wide (Sherr, 2006).

Many other authors have written journal articles based on provings and Wieland (1997) discussed the need for good homoeopathic provings and Walach (1997) moved towards quantitative analysis of proving symptoms. Peter Fraser has also conducted a number of provings i.e. the AIDS nosode, Positronium and Falco peregrinus disciplinatus (Peregrine Falcon) (Fraser, 2006). Lou Klein (2006) from the Luminos School of Homoeopathy has also produced many good provings over the past few years, i.e. *Musca domestica* (Common house fly) and *Vanilla planifalia* (Vanilla) (Klein, 2006).

Jürgen Becker has been conducting many seminar provings that are used mainly with the aim of enhancing the learning experience of a remedy by discovering the main themes and discussing it as a group (Sherr, 1994:16).
Craig Wright, while studying homoeopathy at Durban University of Technology proved *Bitis arietans arietans* (Puffadder) in 1999 (Wright:1999) and with this proving he has paved the way for many future provings (Louw, 2002:10). Other examples of provings conducted at Durban University of Technology include *Sutherlandia frutescens* (Cancer bush) (Louw, 2002), *Harpagophytum procumbens* (Devil’s claw) (Kerschbaumer, 2004) and *Naja Mossambica* (Mozambican spitting cobra) (Taylor, 2004), all of which were based on the proving methodology of Sherr (1994).

2.5 **CHAMAELEO DILEPIS DILEPIS**

2.5.1 Classification

Family: CHAMELEONIDAE  
Subfamily: CHAMELEONINAE  
Genus: Chamaeleo  
Name: *Chamaeleo dilepis dilepis*  
Common name: Flap-necked chameleon

2.5.2 Description

*Chamaeleo dilepis dilepis* grows on average up to 250mm overall length, with a maximum of 375mm (Wager, 1983:29). Female Flap-necked chameleons are usually green with a white lateral stripe. The males are smaller than the females and lighter in colour, but both sexes can change colour (Patterson, 1987:47). The interstitial skin of the male throat pouch is orange, pink or red (Branch 1988:186). Chameleons have minute saw-like teeth along the edges of powerful jaws (Wager, 1983:7). The head is the shape of a helmet, with two occipital flaps that fold over the neck, hence the common name. Between these flaps a seam of small raised scales extend along the centre of the back and another runs the length of the belly. Under the chin, chameleons have more lumpy or knobbly skin. The front feet have two digits on the outside and three on the inside and the back feet are the opposite, having three digits on
the outside and two on the inside (Patterson, 1987:47). Males can be recognised also by two spurs (projections) on each hind foot, projecting backwards (Wager, 1983:8). The trunk is flattened from side to side to help them absorb radiation during the early and late parts of the day and to prevent it during the hottest times. It also enhances their camouflage (Mattison, 1989:139).

PHOTOGRAPH 1 – Right lateral view of chameleon

2.5.3 Habitat

*Chamaeleo dilepis dilepis* is the most ubiquitous species of chameleon to be found throughout Southern Africa. The natural habitat of *Chamaeleo dilepis dilepis* is savannah woodland, entering coastal forests in Zululand (Branch 1988:186). Occurs generally through Zimbabwe, Transvaal, Botswana, Namibia, Northern Freeestate and Natal (Wager 1983:29).
2.5.4 Arboreal existence

According to Mattison (1989:141) the chameleon is a lizard adapted for an arboreal existence. It has grasping feet with two toes on one side and three opposite so it can walk along a twig with great ease. It also has a prehensile tail that is used as a fifth leg or it can be wrapped around a twig for extra support. The flattened trunk is ergonomically suited to climbing along thin branches (Mattison, 1989:140).

2.5.5 Movement

Chameleons make slow forward and backward swaying motions of the body while walking. A forefoot on one side and hind foot on the other side moves slowly forward, while the opposing legs hold on tight to a twig, before following in the same swaying motion. The movements are measured and uncertain and may appear jerky. They can move with great speed through the vegetation and run very fast when on the ground. The trunk is flattened from side to side, assisting them in balance, when climbing along thin branches (Mattison, 1989:140).
2.5.6 Mating and Reproduction

Chameleons are oviparous (Wager, 1983:8). In the spring the male turns pearl-white and the female permits approach and according to Wager (1983) the female exudes an attractive odour and is often covered by tiny yellow spots. Mating takes approximately 20 minutes to 1 hour and may happen 2-3 times a day with the same or different males. Egg development takes 3-4 months. The female becomes bloated with 25-50 eggs on average and during this time she is dull coloured and very aggressive (Branch 1988:186). The female chameleon digs an egg burrow 15-20cm deep and deposits the eggs inside, before closing the nest. This may take two days and leaves the female exhausted and vulnerable. Eggs take between 6-14 months to hatch, depending on the temperature (Patterson, 1987:48). According to Wager (1983) eggs take on average 10 to 11 months to hatch. The mother chameleon shows no maternal care after eggs have hatched (Wager, 1983:29).

2.5.7 Behaviour

All chameleons are extremely non-social and although appear to live in discreet colonies space themselves out by displays of aggression to other individuals. Due to their aggressiveness, the Greeks called them 'dwarf lions' – chamai leons' (Wager, 1983:7). When threatened the Flap-necked chameleon inflates its body, distends its throat, turns a blotchy black colour, raises its occipital flaps and opens its mouth wide to expose the red orange lining. It will snap its jaws and bite readily (Branch 1988:186). Chameleons will hiss and suddenly lunge forward, taking their attacker by surprise, which will give them the opportunity to escape (Wager, 1983:8). Chameleons hibernate or go into a state of suspended animation during cold weather and become more active when it warms up (Wager, 1983:18).
2.5.8 Diet

Chameleons are voracious feeders, taking in large numbers of insects (Patterson, 1987:48). The diet consists mainly of grasshoppers, beetles and caterpillars (Branch, 1988:186). Chameleons need a balanced diet consisting of a variety of insects. Chameleons in captivity soon loose their appetite and will die of starvation if not provided with the correct diet. Chameleons need to drink water often, as it was noted in chameleons in captivity that frequently went down to the water bowl to drink. Predators are mainly snakes, but also include birds and monkeys (Branch, 1988:186).

2.5.9 Eyes

The most characteristic features of chameleons are the tiny eyes at the end of bulging, conical turrets that can swivel around so that each eye can look up, down, forwards or backwards independently (Wager 1983:7). Mattison states that chameleons have large eyes that are mostly covered in skin, leaving tiny apertures for viewing and due to the swivel action can look in two directions at once (Mattison, 1989:140).

2.5.10 Colour changes

Chameleons have the ability to change colour from light green to dark, blotchy green or with patches of brown, yellow, blue or gold (Wager 1983:7). According to Mattison (1989:141) it is their most famous and yet least understood quality. Their colour changes are associated with light intensity, sexual and territorial display, emotion and temperature more than with camouflage. Changes in colour and marking patterns are brought about by altering the distribution of pigment granules in the chromatophores (specialised colour cells) in the skin. It takes several minutes to achieve as it is controlled by the release of hormones into the bloodstream (Mattison, 1989:141). According to Wager (1983:18) it does assist with camouflage as it becomes blotched relating to the shape of the leaves around it and will further gently sway backwards and forwards imitating a leaf moving in the wind.
When a leaf rests against a chameleons' body for a few minutes and is then removed, it will reveal its shape by a lighter colour, or when an insect rests on a chameleons back and flies off, its outline may be left where it was sitting (Wager 1983:18).

2.5.11 Tongue

The chameleon is renowned for having a tongue which can shoot out for a distance greater than their body length, to grab an insect and bring it back to its mouth (Wager, 1983:7). In the mouth there is a thin bone about 15mm long. The hollow tongue (10mm) is attached to this bone like a long hollow tube (80mm) that is concertinaed over the bone. The bone is fastened at its base to a wishbone so the whole apparatus can be jerked forwards and backwards. On the end of the tongue there is a suction cap, consisting of a large, round, wet area of pliable soft tissue. It is not sticky, but wraps around its prey making an airtight connection. Chameleons are extremely accurate with their tongues and hardly ever miss their prey (Wager, 1983:19-23).

DIAGRAM 1 – Tongue Mechanism
2.5.12 Skin shedding

The skin is shed periodically, often up to every six weeks. The old skin loosens on the new, is white, splits and comes of in chunks from every part of the body. The chameleon may rub against branches to scratch the skin off (Wager, 1983:15).

2.5.13 Tail

The chameleon has a prehensile tail and is coiled like a clock spring when not in use. It is used as a fifth appendage for tree climbing (Mattison, 1989:140).

2.5.14 Lungs

The lungs branch throughout the body, making it able to inflate like a balloon. This occurs when attacked and when falling to the ground it gives it the means to bounce back or when fallen into water it can float (Wager, 1983:19).

2.6 THE DOCTRINE OF SIGNATURES

The doctrine of signatures is a very old notion that the Swiss physician Paracelsus von Hohenheim (1493-1541) mentioned in his writings. He stated: "God would not place a disease upon the Earth without providing a cure for it, and a clue to the cure's identity. He places a signature upon it, by making remedies resemble the organs or maladies they can cure" (Yasgur, 1997:71).

Precursors of the doctrine of signatures are also found in the writings of Galen (131-200), but it was popularized in the early 1600s by the writings of Jakob Böhme (1575-1624), a master shoemaker in the small town of Görlitz, Germany. He authored the book "Signatura Rerum; The Signature of all Things". The book was based on a spiritual philosophy, but was soon adopted for medical application (Louw, 2002:12).
The doctrine of signatures may help to reveal the intrinsic nature of a substance, which would facilitate in the accurate prescribing of the remedy and it may also highlight themes in the remedy and explain certain symptoms (Taylor, 2004:23). Douglas M. Gibson pointed out when he published his "Studies of 100 Homoeopathic Remedies", in 47 instalments in the British Homoeopathic Journal (between 1963 and 1977) that these parallels and correspondences between the world of nature and symbolism are sufficiently numerous and striking to deserve mention, as well as being an aid to the understanding and memorising of the materia medica picture of each remedy (Gaier, 1991:37).

According to Goel (2002:465) the doctrine of signature is inferring the nature of actions of a substance from its physical appearance and properties, that is, from its colour and form. Kayne (1997:24) furthermore states that in applying the doctrine of signatures, the medicinal use of a substance was based on its physical form or colour, thus red coral was used for haemorrhages and walnuts for brain diseases.

There are many examples on the application of the doctrine of signatures to plants and fungi, i.e. the testicle-shaped Orchis root to restore manly vigour; the *Phallus impudicus* (Common stinkhorn) to strengthen weak erections; the yellow turmeric powder to treat jaundice; *Hypericum perforatum* (St. John’s wort), whose yellow flowers on being crushed, yielding a red juice to be useful in haemorrhages and wounds (Goel, 2002:465).

Despite the lack of scientific logic in this thinking, it often proves accurate, i.e. Dr. Hanschka hypothesized about the actions of bamboo, then experimented and found it had qualities effective against degenerative processes in the spine, cartilage and connective tissue. *Bambusa arundinacea* (Spiny bamboo) is now used in cases of arthrosis, painful joints, cartilage fragility and to strengthen the skin, hair and arterial walls (Yasgur, 1997:70).

An example of the doctrine of signatures related to an animal is seen in the proving of *Hirudo medicinalis* (Medicinal leech). A fascinating correlation was
found based on the therapeutic signature. A common feature of the leech is to suck blood from mammals and haemorrhaging was a prominent feature in the provers. Another very important group of symptoms that was observed were spots and ulcers on the face, nose and mouth, related to the parts where the leech attaches itself (Raeside, 1972:204).

2.7 SUMMARY

Even though there are many different opinions about provings and many different proposed methodologies, there remains a tendency towards the continual necessity for more provings.

According to Sherr (1997:12): "No proving can be, or ever will be, 100% complete or error free. The search for scientific perfection by overzealous clinical rigor will only serve to suffocate a proving. On the other hand laxity and compromise will lead to inaccuracy and mediocrity. I believe there is a dynamic harmony which can support science and embrace art."
CHAPTER THREE

PROVING METHODOLOGY

3.1 THE EXPERIMENTAL DESIGN

The homoeopathic proving of *Chamaeleo dilepis dilepis* 30CH took the form of a double blind placebo controlled trial on 15 volunteers who met the inclusion criteria (Appendix B). A parallel proving of the same substance, following the same methodology was conducted on a further 15 volunteers at the same time by Debora Moore (Moore, 2006).

Volunteers included homoeopathic students from The Durban University of Technology, as well as volunteers from the general public living in Durban and surrounding areas. Possible candidates were approached individually and invited to take part in the proving. Posters advertising the proving were also placed on the Departmental notice board and in the homoeopathy classrooms. On agreeing to do the proving, provers had to sign an informed consent form before commencement of the proving. A pre-proving consultation was held with each individual prover to further assess their suitability to partake in the proving and to act as a control for the researcher during the proving process.

Double-blinding was implemented as a control measure. Provers were divided into an experimental and a control group. The experimental group comprised 80% of the prover population (12 provers), while the control group comprised 20% of the prover population (3 provers). Provers were assigned prover codes used for the duration of the proving. The verum and placebo were indiscernible from each other and neither the provers nor the supervisors knew who received placebo and who received verum. The provers were further unaware of the substance and potency being proven. Assignment of placebo and verum were done in a randomised fashion by the research supervisor.
Verum and placebo were dispensed in the form of a set of six powders that were taken sublingually three times per day or until onset of symptoms. Data recording took the form of a journal where in provers recorded all their symptoms on a daily bases. Provers recorded daily findings for a week prior to the onset of the proving so as to provide a baseline to be used as a comparison and control for the prover while recording symptoms related to the proving. During the proving all symptoms experienced were recorded until no further symptoms were noted by the provers and confirmed by the researcher. Data was then extracted from the journals, collated and written in Materia Medica and Repertory format. A post-proving group meeting was held to bring the proving to a conclusion before un-blinding of the substance.

The methodology used in the research was adapted from Jeremy Sherr's methodology of proving as set out in: *The Dynamics and Methodology of Homoeopathic Provings* (Sherr, 1994).

### 3.2 OUTLINE OF THE EXPERIMENTAL METHOD

- Provers were recruited from homoeopathic students at The Durban University of Technology as well as from the general public by personal invitation and by posters placed on notice boards and in classrooms (Appendix A).
- Potential provers were given a proving information sheet to read before committing to the proving and given an opportunity to ask any questions they may have.
- A pre-proving interview was scheduled with each potential prover, during which provers were checked against the inclusion and exclusion criteria (Appendix B) and a case history was taken and a physical examination performed (Appendix C).
- Provers then signed the informed consent form (Appendix D) and were allocated a prover code to ensure confidentiality, given a journal (A5 notebook), two pens, an Instruction to Provers sheet (Appendix E), the
researchers contact details and medication in the form of six powders, either verum or placebo and a date on which to start the proving.

- The proving was conducted in a staggered fashion, with small groups starting over a period of six weeks. It was done in this way as provers could only participate at certain times convenient to their other obligations and accommodation had to be made for this.

- A week of pre-proving journal taking preceded the commencement of the proving.

- Provers were given six powders (verum or placebo) and started taking the powders on the pre-arranged date. The provers took the powders three times a day, over two days, unless they experienced symptoms sooner, in which case they stopped taking the powders as soon as symptoms appeared. Symptoms were recorded as accurately as possible according to instructions given to provers in the Instruction to Provers sheet (Appendix E).

- The researcher kept daily telephonic contact with provers for the first week to establish when symptoms started and to clarify any symptoms experienced.

- After the first week of the proving, contact between the researcher and the prover was decreased to every second day for the second week, then every third day during the third week and eventually once in the fourth week. It was made clear to provers that they may contact the researcher at any time during the proving if the need arises.

- The proving was considered complete once all symptoms had disappeared and provers were notified to discontinue their journals by the researcher.

- Journals were collected and the proving was un-blinded so that the researchers could distinguish verum and placebo groups before the extraction process started. Symptoms were extracted and collated. Any unclear symptoms were clarified with the provers at this point in time to facilitate the extraction process and confirm the validity of a symptom (Sherr, 1994:66).
• A group meeting took place during which provers were given the opportunity to give their overall impression on the proving and to discuss the proving amongst the group, consolidating the fragmented provings into a unit. After the discussion the proving was unblinded.
• The proving was compiled into materia medica and repertory and published. No formal statistics were required in this study.

3.3 THE PROVING SUBSTANCE

3.3.1 The Potency

The potency of 30CH was selected according to the Hahnemannian method as stipulated in aphorism 128 of The Organon of Medicine, 6th edition (Hahnemann, 1996:154).

Sherr (1994:27) discovered that in his proving of Hydrogen that the thirtieth potency produced the most mental symptoms. Out of 305 mental symptoms in Hydrogen the following number of symptoms per potency level were produced: 6CH – 61 symptoms, 9CH – 17 symptoms, 12 CH – 27 symptoms, 15CH – 3 symptoms, 30CH – 140 symptoms and 200CH – 56 symptoms (Sherr, 1994:27).

3.3.2 Collection and Preparation

Dr. Angelo Lambiris, Herpetologist and Veterinary Surgeon, specialising in reptile surgery, based in Hillcrest, Durban assisted in obtaining the sample. A young female chameleon of the Chamaeleo dilepis dilepis species from a chameleon sanctuary in the Hillcrest area was transported to Dr. Lambiris surgery. The chameleon was kept in a glass enclosure with abundant foliage and branches and the procedure was done on the day of its arrival. Dr. Lambiris took the chameleon from its enclosure and with a very sharp, sterilised pair of surgical scissors, neatly snipped approximately 8-10mm from the tip of the chameleon’s tail. No further duress to the animal was noted.
PHOTOGRAPH 3 – Obtaining sample from the chameleon

The tail-tip of *Chamaeleo dilepis dilepis* was immediately triturated with Saccharum lactis in the ratio of 1:99 up to the 3CH potency, according to Method 6 of the German Homoeopathic Pharmacopoeia (GHP). Thereafter liquid potencies were manufactured from *Chamaeleo dilepis dilepis* 3CH up to a potency level of 30CH, according to Method 8a of the German Homoeopathic Pharmacopoeia (GHP). Saccharum lactis granules were impregnated with *Chamaeleo dilepis dilepis* 30CH by triple impregnation, according to Method 10 of the German Homoeopathic Pharmacopoeia (GHP). To prepare verum powders for dispensing, 10 granules impregnated with *Chamaeleo dilepis dilepis* 30CH were added to powdered envelopes, containing unmedicated Saccharum lactis.
PHOTOGRAPH 4 – Trituration of tail-tip with Saccharum lactis

To prepare placebo, Saccharum lactis was triturated up to the 3CH potency, according to Method 6 of the German Homoeopathic Pharmacopoeia (GHP). Liquid potencies were manufactured from Saccharum lactis 3CH up to a potency level of 30CH, according to Method 8a of the German Homoeopathic Pharmacopoeia (GHP). Saccharum lactis granules were impregnated with Saccharum lactis 30CH by method of triple impregnation, according to Method 10 of the German Homoeopathic Pharmacopoeia (GHP). To prepare placebo powders for dispensing, 10 granules impregnated with Saccharum lactis 30CH, were added to powdered envelopes, containing unmedicated Saccharum lactis. (British Homoeopathic Association:1993).

A third party, the laboratory technician at the Durban University of Technology was responsible for the dispensing of verum and placebo according to a randomisation list prepared by the proving supervisor. This was done to ensure double-blinding of the proving. Researchers were unaware of which provers received verum and which provers received placebo.
3.3.3 The Dosage and Posology

A total of six powders in the thirtieth potency were dispensed, to be dissolved sublingually, three times a day, over two consecutive days. No powders were taken after the onset of symptoms (Sherr, 1994:53).

Nothing was taken orally for half an hour before and half an hour after taking the powder, to prevent any interference with optimal absorption of the medication.

3.4 POPULATION CRITERIA

3.4.1 Prover population

According to Sherr (1994:45) 15-20 provers will produce a full remedy picture. The proving of *Chamaeleo dilepis dilepis* 30CH was performed with 15 provers, 12 provers in the experimental group who received verum comprising 80% of the prover population and 3 provers in the control group, who received placebo, comprising 20% of the prover population. A parallel proving of the exact same substance and methodology was conducted at the same time by my research partner, Debora Moore (Moore, 2006), amounting to a total prover population of 30 provers, 24 provers on verum and 6 provers on placebo.

3.4.2 Prover contribution

A well balanced proving should be conducted over a wide range of provers from different age, gender and ethnic groups. The contribution of provers in terms of gender, ethnicity and age has been graphically represented in Appendix H. The data only includes provers that received verum from both this proving, as well as the parallel proving conducted by Debora Moore (Moore, 2006). The gender contribution was 62.5% male to 37.5% female. The ethnic contribution was 12.5% Africans, 12.5% Asians and 75%
Caucasian. The age contribution was spread over the ages of 18 to 60, with the largest contribution being 45.8% from the ages 18-24.

3.4.3 Randomisation

The verum and placebo were indistinguishable to both the provers and the researchers. Randomisation was done by the supervisor, assigning verum and placebo to each prover by drawing their codes from a hat. The list was passed on to a third party who was responsible for dispensing the verum and placebo powders to the provers, ensuring the double-blinding of the proving.

3.4.4 Criteria for inclusion of a subject into the proving

- The provers had to be between the ages of 18 and 60 years.
- The provers had to be in a general state of good health.
- The provers had to be willing to follow the proper procedures for the duration of the proving.

(See Appendix B)

3.4.5 Criteria for exclusion of a subject from the proving

- Any medication; allopathic, homoeopathic or other that could influence the proving.
- If the individual was on the birth control pill or hormone replacement therapy in the last six months.
- Pregnancy or breastfeeding.
- Surgery in the last six weeks.
- The use of recreational drug such as marijuana, LSD, MDMA or others.
- Consumption of more that two measures of alcohol a day, more than ten cigarettes a day or more than three cups of coffee or tea a day.

(See Appendix B)
3.5 THE DURATION

A one-week observation period preceded the commencement of the proving. Provers then continued to record their symptoms over a period of four weeks or until no more symptoms were noted. This was followed by two weeks of post-proving observation. The duration of the proving itself was approximately twelve weeks.

3.6 MONITORING THE PROVING

The researcher kept daily telephonic contact with provers for the first week of the proving. In the second week contact was decreased to every second day, then every third day during the third week and eventually once in the fourth week.

3.7 ETHICAL CONSIDERATIONS

The methodology used in this research was approved by the Faculty of Health Sciences Ethics Committee of the Durban University of Technology to ensure the rights and welfare of the provers. Furthermore informed consent was obtained from each prover (Appendix C).

3.8 GROUP DISCUSSION

A group discussion was held during which provers were given the opportunity to give their overall impression on the proving and to discuss the proving amongst the group, consolidating the fragmented provings into a unit. Due to circumstances beyond our control, not all the provers were able to attend, but it was useful discussing the proving within the group. The group discussion also gave provers an opportunity to clarify symptoms and to discard any doubtful ones. During the group discussion many provers also noted that symptoms they were doubtful about as to its relevance became clear once bringing it all together as a proving group. After the discussion provers were
informed about the proving substance and were told who received verum and who received placebo. The provers were given an overview of the proving by the researcher as to complete their experience of the proving and were given a brief summary (see Appendix G).

3.9 DATA COLLECTION

Data collection was in the form of a journal. Each prover had to keep a daily record of all symptoms experienced for the duration of the proving.

3.9.1 Chronology

- Provers were responsible for indicating the time that each symptom appeared in relation to the start of the proving. This is important as at the end of the proving it is interesting to study the chronological development of the proving (Sherr 1994:73).
- The format used i.e. DD:HH:MM to organise symptoms chronologically, was provided by Sherr (1994:73-74).
  - DD = the number of days since the start of the proving
  - HH = the number of hours
  - MM = the number of minutes
- The first day was recorded as 00, the second day 01 etc. This was clearly marked on the top of each page as was clearly indicated to them in the Instructions to Provers sheet (Appendix E).
- After 24 hours the minutes were considered unimportant and could be represented by XX.
- After 2 days the hours were considered unimportant and could be represented by XX.
- If the time was insignificant or unclear it is indicated by XX:XX:XX.
- If a symptom seems to appear at a fixed time after each dose, it should be calculated from the time after the dose e.g. nausea 5 minutes after each dose, indicate all as 00:00:05 (Sherr, 1994:73).
3.9.2 Extraction and evaluation of symptoms

Symptoms were extracted from the provers' journals and written up into materia medica and repertory format. During the extraction process symptoms were evaluated in terms of relevance based on the pre-proving week journal and the case history.

3.9.3 Criteria for including a symptom as a proving symptom

Symptoms were scrutinised and then validated or rejected. The criteria for including symptoms as proving symptoms are as follows:

- New symptoms, unfamiliar to the prover
- Symptoms occurred with marked intensity or frequency
- Usual or current symptoms that were intensified to a marked degree
- Current symptoms that have been modified or altered (with a clear description of the current and modified components)
- Old symptoms that have not occurred for at least five years (time of last appearance noted)
- Present symptoms that have disappeared during the proving (recorded as a cured symptom)
- Modalities (something which makes a symptom better or worse)
- Concomitants (something occurring in conjunction with a symptom)
- Timing of the symptom (periodicity, specificity of timing)
- Localisation (sides, extension)
- Unique descriptions of a symptom (descriptive adjectives)
• A symptom occurred after taking the medication on at least two occasions during the proving.
• All symptoms occurring in more than one subject (Riley 1997:227).
• If the prover is under the general influence of the remedy then all new symptoms are considered proving symptoms.

3.9.4 Criteria for excluding a symptom as a proving symptom

- Symptoms were not included if it occurred in the prover’s recent history i.e. in one year or less.
- Symptoms that are usual or current for the prover were excluded.
- If there was any serious doubt as to the validity of the symptom it was excluded (Sherr 1994: 70).

3.10 Collating and Editing the Data

Proving symptoms were edited into a coherent proving format that is logical and non-repetitive. Symptoms extracted from provers journals were grouped according to the areas affected by the symptom i.e. Mind, Head, Generals etc. This enables the researchers to see repetition of symptoms in different provers and to facilitate grading. All symptoms were written in the first person, by retaining the simple language and the basic expressions of the prover. Contemporary terminology was excluded as it may not be understood in the future.

3.10.1 The Doctrine of Signatures

Once all proving symptoms had been extracted, the correlation of proving symptoms to the doctrine of signature of *Chamaeleo dilepis dilepis* were discussed, in the attempt of giving a broader understanding of the remedy as it relates to the substance. This may in future facilitate easier studying of the materia medica of the remedy *Chamaeleo dilepis dilepis* and assist in greater accuracy in prescribing it in clinical practise.
3.11 REPORTING THE DATA

All data that was collated and edited was written up in materia medica and repertory format, to make it easily understandable and usable in clinical practice.

3.11.1 The Repertory

All proving symptoms were converted into rubrics and sub rubrics that adhere to the format of the current standard repertory: Synthesis: Repertorium Homeopathicum Syntheticum (Schroyens, 2001).

Grading was done according to a combination of two methods. Firstly we looked at recommendations by Sherr (1994: 85), suggesting to use frequency as a standard, according to the percentage of provers. We combined this with the recommendation of Schroyens (2001) stating that grading is done according to number of provers:

<table>
<thead>
<tr>
<th>No. of provers</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2-4</td>
<td>2</td>
</tr>
<tr>
<td>5-9</td>
<td>3</td>
</tr>
</tbody>
</table>

We calculated average percentages as it relates to 24 provers on verum, based on the above numbers and came to the following conclusion:

- Below 20% = grade 1
- 20% - 40% = grade 2
- 40% - 75% = grade 3
- Above 75% = grade 4

Sherr (1994: 86) further suggests that a symptom can be graded higher if it is a rare and peculiar symptom and increased by one grade, if found to be peculiar to the substance proven.
### 3.11.2 The Materia Medica

The proving symptoms were written up into Materia Medica format under the chapters as used in the repertory Synthesis (Schroyens, 2001). The following headings were used for grouping of symptoms:

<table>
<thead>
<tr>
<th>Mind</th>
<th>Abdomen</th>
<th>Extremities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vertigo</td>
<td>Rectum</td>
<td>Sleep</td>
</tr>
<tr>
<td>Head</td>
<td>Stool</td>
<td>Dreams</td>
</tr>
<tr>
<td>Eye</td>
<td>Bladder</td>
<td>Chill</td>
</tr>
<tr>
<td>Vision</td>
<td>Kidneys</td>
<td>Fever</td>
</tr>
<tr>
<td>Ear</td>
<td>Urethra</td>
<td>Perspiration</td>
</tr>
<tr>
<td>Nose</td>
<td>Urine</td>
<td>Skin</td>
</tr>
<tr>
<td>Face</td>
<td>Female genitalia/sex</td>
<td>Generals</td>
</tr>
<tr>
<td>Mouth</td>
<td>Respiration</td>
<td></td>
</tr>
<tr>
<td>Teeth</td>
<td>Cough</td>
<td></td>
</tr>
<tr>
<td>Throat</td>
<td>Expectoration</td>
<td></td>
</tr>
<tr>
<td>External Throat</td>
<td>Chest</td>
<td></td>
</tr>
<tr>
<td>Stomach</td>
<td>Back</td>
<td></td>
</tr>
</tbody>
</table>
CHAPTER FOUR

THE MATERIA MEDICA AND REPERTORY OF CHAMAELEO DILEPIS DILEPIS

4.1 RELATED INFORMATION

All symptoms that were produced by the provers will be included in this chapter. Firstly symptoms will be listed in materia medica format and then converted to rubric form and organised into the order as they appear in the repertory.

4.1.1 Key

4.1.1.1 Materia Medica section

In the materia medica section symptoms are group according to the chapters of the materia medica. Symptoms are referenced in the following format as recommended by Sherr (Sherr, 1994:78):

Recorded Symptom
(Prover number and gender) (Day: Hours: Minutes)

The recorded symptom is followed by the prover number, gender and the time at which the symptom was experienced

The symbols < and > are used to represent the modalities worse for and better for respectively. Where provers used these symbols to record modalities, the symptoms were extracted exactly as recorded and will therefore appear in some symptoms in the materia medica section.
4.1.1.2 Repertory section

In the repertory section symptoms are recorded in rubric format and arranged according to the sections as found in Synthesis: Repertorium Homeopathicum Syntheticum, Edition 8.1 (Schroyens, 2001):

CHAPTER – RUBRIC – Subrubrics
(Grading) (Page number in the Synthesis repertory, Edition 8.1)

The rubric is followed by the grading number and then the page number where it is recorded in Edition 8.1 of Synthesis: Repertorium Homeopathicum Syntheticum (Schroyens, 2001).

Symptoms were typed in ALL CAPS (bold) if in the 4th degree, in bold if in the 3rd degree, in italics if in the 2nd degree and in plain type if in the 1st degree.

New rubrics were indicated by a capital N.

Time format used for recording symptoms in the Synthesis repertory is 0-24h (Schroyens, 2001:10) and rubrics in the repertory section of this chapter with time modalities, will be recorded using the same format.

4.1.2 Prover Lists

Table 1 is a list of provers on verum partaking in this proving and Table 2 is a list of provers from the parallel proving conducted concurrently by Moore (2006), as symptoms from both provings will be included in this chapter to give a complete symptom picture of the remedy. As a reference as to which symptoms came from which proving, please refer back to the tables on the following page and use the prover codes as an indication.
<table>
<thead>
<tr>
<th>Prover Code</th>
<th>Sex</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>F</td>
<td>35</td>
</tr>
<tr>
<td>02</td>
<td>F</td>
<td>28</td>
</tr>
<tr>
<td>03</td>
<td>M</td>
<td>26</td>
</tr>
<tr>
<td>04</td>
<td>F</td>
<td>56</td>
</tr>
<tr>
<td>06</td>
<td>F</td>
<td>23</td>
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<td>07</td>
<td>M</td>
<td>60</td>
</tr>
<tr>
<td>10</td>
<td>M</td>
<td>23</td>
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<tr>
<td>11</td>
<td>M</td>
<td>28</td>
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<tr>
<td>12</td>
<td>F</td>
<td>48</td>
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<td>13</td>
<td>M</td>
<td>21</td>
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<tr>
<td>14</td>
<td>M</td>
<td>21</td>
</tr>
<tr>
<td>15</td>
<td>M</td>
<td>23</td>
</tr>
</tbody>
</table>

**TABLE 1: List of provers on verum – proving by Liesl Pistorius**

<table>
<thead>
<tr>
<th>Prover Code</th>
<th>Sex</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>F</td>
<td>18</td>
</tr>
<tr>
<td>18</td>
<td>M</td>
<td>24</td>
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<td>20</td>
<td>M</td>
<td>24</td>
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<tr>
<td>21</td>
<td>M</td>
<td>27</td>
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<tr>
<td>22</td>
<td>F</td>
<td>19</td>
</tr>
<tr>
<td>23</td>
<td>M</td>
<td>58</td>
</tr>
<tr>
<td>24</td>
<td>M</td>
<td>20</td>
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<tr>
<td>25</td>
<td>M</td>
<td>22</td>
</tr>
<tr>
<td>26</td>
<td>M</td>
<td>44</td>
</tr>
<tr>
<td>28</td>
<td>F</td>
<td>46</td>
</tr>
<tr>
<td>29</td>
<td>F</td>
<td>36</td>
</tr>
<tr>
<td>30</td>
<td>M</td>
<td>27</td>
</tr>
</tbody>
</table>

**TABLE 2: List of provers on verum - parallel proving by Moore (2006)**
4.2.1 MIND

Disconnected, disorientated, spaced-out

Feeling spaced out and disconnected.
01F 00:00:01

Impressions are rushing in and retreating, feeling slightly disorientated.
01F 00:00:05

Listening to lecture as from afar.
01F 00:01:XX

Sensory impressions disconnected, I'm feeling disconnected. Taking a moment longer to process any sensory input.
01F 00:01:XX

Feels as if everything is moving past me very smoothly, like I am on another plane or dimension (but also semi-here).
01F 00:02:00

Feel like a slightly bemused observer of what's happening, able to see people's motivations and actions without the need to become emotionally involved.
01F 00:11:XX

Feeling spaced, disorientated in homoeopharm lecture. Difficult to focus – can't access meaning of what is being said. Can't integrate visual and auditory input – stare at lecturer and overheads and what is said just passes me by.
01F 02:22:15
I can look at other people’s problems and issues clearly, without feeling any need to get emotionally involved. Feel no personal guilt or even implication.

01F 03:06:XX

While writing – looking at the book without necessarily placing it in a normal spatial relationship e.g. below me on the table – it’s just in front of me.

01F 03:08:XX

Feel disjointed or disconnected from reality.

02F 02:05:XX

Thoughts of cars driving too fast and not obeying the road rules – going through stop streets and driving over lanes. Mayhem but organised – it all seems to be working, but I was a passenger or observer and was anxious for everyone although they seemed to be quite calm and unfazed about it.

02F 02:17:30

Friends immediately noticed I “looked different” – pale and spacey.

02F 04:XX:XX

Feeling very incompetent and scattered.

02F 21:XX:XX

I woke up disorientated, wasn’t sure where I was.

06F 01:XX:XX

Feel slightly disconnected – spaced out – as though body and mind do not work sharply together.

07M 00:04:10

Disequilibrium in head.

07M 00:04:XX
Feel lack of physical / mental coordination.
07M 02:XX:XX

Feel spaced out – somewhat disconnected.
07M 02:XX:XX

Slight excitement of seeing old faces. It was nice to see old faces. Some seem a little distant, though I have a slight concern that that initial click I had with everyone has somehow been lost.
14M 12:XX:XX

Felt a little funny in the head directly after taking sample.
18M 00:XX:XX

Feeling a bit spacey – relaxed.
26M 01:12:30

Feel slightly out of sync on waking, doesn’t feel like a Monday.
28F 03:XX:XX

Feel tired, disorientated – seem to be slurring my speech and can’t think straight.
28F 10:XX:XX

Feel light-headed and disorientated again.
28F 11:XX:XX

**Lack of focus and concentration**

Difficulty in concentration and focussing.
01F 04:XX:XX

Getting bored very quickly and switching off concentration.
02F 04:08:XX
MEMORANDUM

To: Jeanette Langner – Library Central Services – M.L. Sultan
From: Dr D. F. Naude
Date: 12 March 2007

RE: MASTER’S DEGREE IN TECHNOLOGY: HOMOEOPATHY
Copy of abstract
Mrs. L. Pistorius – Student No: 20203437

Herewith one bound copy and one ring bound copy of the dissertation from the above student, for library purposes.

Please acknowledge receipt

Thank you,

Dr D.F. Naude
Research Co-ordinator
DEPARTMENT OF HOMOEOPATHY
So difficult to stay focused.
02F 21:XX:XX

Feeling of procrastination midday. Unable to complete tasks, accompanied by mild irritation, > sleep.
03M 15:XX:XX

Laziness of mind and difficulty concentrating < food, > ice cold water.
03M 20:XX:XX

Finding it hard to think – just want to go to bed.
06F 05:XX:XX

Dullness in head.
07M 00:04:XX

Feel lack of focus.
07M 02:XX:XX

Woke up feeling unfocused on the left side of my head.
07M 04:XX:XX

Bit slow – not focused.
10M 05:XX:XX

Couldn't concentrate fully and was still feeling extremely cold.
16F 04:XX:XX

Could not pay attention in class.
16F 05:XX:XX

Very tired. Battled to concentrate on my studies today.
29F 07:13:00
Forgetfulness

Set my alarm, but forgot to turn it on.
02F 03:00:XX

Forgot about diagnostics today.
02F 05:XX:XX

Had a few dreams again last night, but can't remember them – try hard to remember, feel it's almost coming, then it disappears.
02F 13:XX:XX

In the car to varsity, realised I forgot to take my vitamins.
14M 11:XX:XX

Woke up and forgot to do my daily Bible reading on rushing off to church.
20M 06:01:00

Forgetfulness, more so in the morning after waking.
20M 12:XX:XX

Antisocial, withdrawn and distant

Really bad day with self-image – saw myself in a mirror and got a fright. So out of proportion - like a home-made house. Withdrew completely.
02F 04:XX:XX

Don't feel like talking much.
06F 01:XX:XX

I don't feel like talking much and is quite unresponsive and don't feel guilty about it, usually I try and make an effort. Today I don't really care.
06F 02:XX:XX
Don't feel like talking a lot.
11M 03:XX:XX

Don't have the urge to go out for beers with mates.
11M 04:XX:XX

I am feeling withdrawn from everyone else.
15M 00:00:XX

I don't feel like being around people.
15M 00:00:XX

I don't want to be alone, but I also don't want people talking to me.
15M 02:XX:XX

I couldn't be around people anymore, so I decided to lock myself in my room and get some sleep.
15M 07:XX:XX

Got (project) partner to help me looking for stuff, which is better than just me doing it. Want to work separately from him though.
18M 03:XX:XX

Feel very separate from other people.
18M 12:XX:XX

Feel the most separated from my sister ever. I almost don't even want to look at her. Very cold approach. Being very measured with S, maybe a little unemotional.
18M XX:XX:XX

Little awkward around my uncle and aunt. Difficult just to be and act naturally. Feeling very separated and in my head.
18M 25:XX:XX
Been feeling very inward and quite hard with everyone.
18M 02:XX:XX

Woke up feeling worried about me and S, feel a little distant.
18M 07:XX:XX

Find it hard to talk to the people here (work) about anything other than chemistry or soccer.
18M 10:XX:XX

Been feeling quite distant from her (girlfriend) and other people.
18M 11:XX:XX

Been feeling really low all day. Very distant from everyone. Upset with S but don't want to say so directly.
18M 11:XX:XX

Still feeling distant and low.
18M 12:XX:XX

Been feeling a little insecure, sometimes like I have great difficulty in talking to "normal" people.
18M XX:XX:XX

Notice that I have been quite withdrawn regarding things, I am either at someone's throat or keeping my head down, very little middle ground.
18M XX:XX:XX

Feel still a little distant.
18M 20:XX:XX

Again slightly distant from her (S) but feeling a little difficult with interacting with many people. Very much in my head.
18M 29:XX:XX
Emotionally cold and hard

Very cold approach. Being very measured with S, maybe a little unemotional. 18M XX:XX:XX

Little analytical with S (girlfriend), kind of hard on her. 18M 01:XX:XX

Been feeling very inward and quite hard with everyone. 18M 02:XX:XX

Feeling quite direct with people, and if honesty with room for human "spin" or interpretation is allowed, if people get upset so be it. 18M 06:XX:XX

Cold towards prac partner though. Don’t want to have much contact with him. 18M 14:XX:XX

Things with F are still very strained. We have not really been talking. Been kind of ignoring her, I would not like to back down, and be “nice” to her. Don’t think I have ever dealt with her like this. 18MXX:XX:XX

I seemed to be less emotional in the evening when taking the powders. 30M 00:XX:XX

Poor self-image

Really bad day with self-image – saw myself in a mirror and got a fright. So out of proportion - like a home-made house. Withdrew completely. 02F 04:XX:XX

Feel fat and disgusting. It repulses me. 02F 10:XX:XX
I don't like the person I am and not sure what to do about it.
02F 18:XX:XX

Feel very overweight.
10M 03:XX:XX

My body feels overweight and ugly.
10M 24:XX:XX

I'm still feeling a bit uncomfortable about varsity somehow, as if I'm worried that people don't like me there anymore.
14M 13:XX:XX

It is almost as if I feel dejected / defected.
14M 18:XX:XX

Been feeling a little insecure sometimes.
18M XX:XX:XX

Little awkward around my uncle and aunt. Difficult just to be and act naturally.
18M 25:XX:XX

Worked with one of the master's students. Little awkward around them.
18M 30:XX:XX

Sadness and crying

Great sadness as if a death of someone I knew, like alone, quiet grief.
01F 00:01:00

Weepy, crying.
01F 01:00:30
I'm not happy. Get quite tearful when given consolation or talking about it. Today has definitely been the worst day.
02F 12:XX:XX

Cried at the smallest things that shouldn't bother me. Once I started crying I couldn't stop. Eventually I felt better – came home and lay down.
06F 01:XX:XX

Watching a TV programme about orphaned baby animals. I felt very sad for them, almost as if I despaired for them.
14M 15:XX:XX

Watching a programme where a father is talking to his son in a hospital. It's very tender and it makes me feel very sad.
14M 20:XX:XX

Emotional, crying, worst day of my life.
28F 10:XX:XX

Emotionally I'm feeling very down. Feel like crying and just quitting this course.
29F 16:XX:XX

Dark depression and negativity

Emotionally feel like I'm in a black hole – not enthusiastic about much – very negative, destructive and full of self-hatred.
02F 14:XX:XX

I feel like I'm on a spiral and am gripped by fear and can't see the positive.
02F 14:XX:XX
Had one of the darkest days of my life. Not sure what’s going on, but despair set in.
02F 14:XX:XX

I’m in a really bad place emotionally. Could cry at any second, but almost beyond that – to a stage of nothing. Hate where I’m at. Hate what I’ve become. I want some fun, laughter and light heartedness. I want to feel like I belong, but that’s so far from now. I can’t see a light and am so miserable.
02F 14:XX:XX

I’m not in a good place emotionally – very “bland” and it’s rarely that I laugh.
01F 18:XX:XX

Very tired today and concerned about my emotional state – a whole lot of nothing. Like an empty vessel. There’s no more spark – it’s as though “the tribe has spoken” and my flame has been snuffed out. I need to change it and get back to what I was as I’m merely going through the motions now and not getting excited or passionate about anything.
02F 18:XX:XX

Emotional blankness persisting. Met up with friends and struggled to pretend that I am happy.
02F 19:XX:XX

Feel very negative. Not happy or excited about anything.
02F 19:XX:XX

Feel depressed – don’t feel like talking much.
06F 01:XX:XX

Feel depressed and exhausted, cried at the smallest things.
06F 01:XX:XX
Woke up slightly depressed and irritable.
06F 07:XX:XX

Feeling very negative – even depressed.
07M 00:XX:XX

Feeling very depressed for no apparent reason.
07M 08:XX:XX

Quite negative mood.
07M 10:XX:XX

This cold seems to gnaw at me, as if pushing me into a depression.
14M 02:04:XX

Feeling very depressed the whole day.
15M 03:XX:XX

Woke up very early and felt extremely miserable. Dragged myself around getting ready for tech.
16F 04:XX:XX

Felt depressed.
16F 05:XX:XX

Feeling kind of hopeless about things, kind of depressed, because I don’t feel there is any way to sort things out.
18M 11:XX:XX

Been feeling really low all day.
18M 11:XX:XX
Notice that I am less aggressive than last week, now more sad and melancholy.
18M 12:XX:XX

Still feeling distant and low.
18M 12:XX:XX

Feeling slightly hopeless about everything.
18M 12:XX:XX

During the day from lunch time onwards felt somewhat depressed and hopeless, a little irritable also.
20M 01:XX:XX

Low level depression back.
23M 04:XX:XX

Not feeling like my normal self... a little depressed like something is wrong and I don’t know what it is.
26M 07:XX:XX

Feeling depressed – Effect of work pressures and everything going wrong.
26M 08:XX:XX

Feel depressed, quiet.
28F 06:XX:XX

Tired this evening, still feel slightly down and quiet.
28F 07:XX:XX

Emotional, crying, worst day of my life.
28F 10:XX:XX
Despondent and demotivated

Did not feel inspired or motivated to do exercise. Feel despondent.
02F 01:23:XX

Tired and demotivated, so got into bed early and read my book.
02F 05:XX:XX

Felt tired and demotivated so watched TV for an hour – what a waste of time!
02F 06:XX:XX

Feel very demotivated and negative.
02F 19:XX:XX

No motivation to do anything, especially exercise.
10M 03:XX:XX

Don’t want to do anything.
28F 10:XX:XX

Exhaustion

Feeling of extreme tiredness throughout the mind.
03M 00:01:XX

Feeling of mental exhaustion (between 4pm and 8pm).
03M 03:XX:XX

Tiredness of body and mind.
03M 10:XX:XX

Overtiredness of mind and body > sleep.
03M 16:XX:XX
Tiredness of mind.
03M 19:XX:XX

Tiredness of mind and body > lying down.
03M 25:XX:XX

Mental lethargy.
03M 28:XX:XX

Tiredness of body and mind > rest, <exertion.
03M 29:XX:XX

The thought of eating and food exhausts me.
06F 02:XX:XX

Anxiety

Anxiety on waking > sunlight.
03M 08:XX:XX

Anxiety on waking > sunlight with excessive yawning.
03M 12:XX:XX

Anxiety of mind > warm food.
03M 24:XX:XX

Feeling of intense anxiety in morning as if something is about to happen.
03M 26:XX:XX

Feeling of slight anxiety accompanied by agitation, > warm soup.
03M 29:XX:XX

Mild anxiety accompanied with tiredness of mind.
03M 30:XX:XX
I’m starting to feel a bit nervous.
06F 01:XX:XX

Feeling anxious as if something is about to happen.
11M 08:XX:XX

Slightly jittery – nervous bodily feeling.
07M 02:XX:XX

Feeling anxious.
11M 00:00:XX

Little desperate this afternoon, kind of clutchy… Uptight and anxious.
18M 26:XX:XX

By midday, back to feeling of anxiety and stress.
23M 02:XX:XX

**Mood changes**

Mood swings deluxe today. Not happy at all.
02F 17:XX:XX

Feeling a bit moody.
11M 12:XX:XX

Mood very sensitive – little things affect me.
28F 08:XX:XX

Been a bit of a rollercoaster ride the past little while, bit of emotional ups and downs.
18M 13:XX:XX
I am either at someone’s throat or keeping my head down, very little middle ground.

IBM XX:XX:XX

Irritability and snapping

Got home and was very irritable!

02F 02:11:XX

No food was kept for me and it made me feel very irritated.

02F 06:XX:XX

Tired and irritated.

02F 10:XX:XX

Irritable and frustrated.

02F 10:XX:XX

I tend to snap easily and get irritated quickly.

02F 18:XX:XX

Feeling of hyperirritability, made worse by any noise.

03M 00:XX:XX

Irritability brought on by noise (between 3pm and 5pm).

03M 01:06:XX

Extreme irritability on waking.

03M 02:XX:XX

Irritability with excessive sensitivity to noise.

03M 05:XX:XX
Moderate irritation.
03M 12:XX:XX

Feeling a bit irritable.
06F 00:XX:XX

I'm quite irritable and also quite confrontational. I have to be careful. I have to control my irritability.
06F 03:XX:XX

Woke up feeling irritable.
06F 08:XX:XX

Mellow but irritable.
11M 04:XX:XX

Day feels long – still irritable and tired.
11M 05:XX:XX

I am feeling very irritable and snap at everyone around.
15M 02:XX:XX

I'm getting irritated by little things and I'm snapping at everyone around me.
15M 07:XX:XX

Felt a little irritated but did not "display" visible symptoms and just kept quiet.
18M 07:XX:XX

Tired and very cross.
18M 12:XX:XX

During the day from lunch time onwards felt somewhat depressed and hopeless, a little irritable also.
20M 01:XX:XX
Felt fairly irritable this evening.
28F 01:14:30

Feel quite irritable this afternoon.
28F 06:XX:XX

**Violent, expressive anger**

Been thinking about last night, I was so angry and jealous of my sister. I was so cross I couldn't talk to her.
02F 03:05:10

Angry, violent feelings.
02F 10:XX:XX

Getting very angry with other staff members lately – need anger management.
10M 15:XX:XX

I was thinking of someone who angered me greatly and thinking of venting my rage. It made me a little warmer.
14M 02:11:XX

Been quite short with my project partner, got cross and needed to leave.
18M 03:XX:XX

Been feeling violently angry with people recently. Partner really upsets me.
18M 03:XX:XX

Felt very cross with S (because she always takes her frustrations out on me).
18M 04:XX:XX

Had a small fight with S, and I got pretty angry. Seem to be getting very expressively cross in the last while.
18M 05:XX:XX
Very large fight with my sister F. Said a lot of very hectic things to her. Notice that we keep on fighting a number of times after taking substance (testing). Was very direct with my feelings.

18M 06:XX:XX

 Been very patient with people today, even though I wanted to throw punches.
18M 09:XX:XX

Feel a little less explosive than I did earlier in the week, maybe slightly more in control.
18M 10:XX:XX

Had a very big fight with my sister.
18M 15:XX:XX

I am either at someone’s throat or keeping my head down, very little middle ground.
18M XX:XX:XX

He has had a short fuse lately, ‘loses it’ much more easily (observation made by his business partner).
23M XX:XX:XX

Almost told my boss to ‘go and jump’. Just felt like resigning.
28F XX:XX:XX

**Heightened sensitivity**

All external sensations increased, feeling slightly overwhelmed.
01F 00:00:01

Impressions are rushing in and out, feeling disorientated.
01F 00:00:05
Sensory impressions come and go, rushing in and retreating.
01F 04:XX:XX

Sounds are overwhelming.
01F 00:00:01

Sounds are intensified.
01F 00:00:XX

All sounds seem extra loud.
01F 00:08:00

Sounds seem very loud again.
01F 00:23:45

Extreme hypersensitivity to noise.
03M 02:07:XX

Hypersensitivity to noise accompanied by slight irritability.
03M 06:XX:XX

Hyperirritability of senses to loud noises > being alone.
03M 09:XX:XX

Hypersensitivity to loud noise accompanied by irritation of mind.
03M 18:XX:XX

Hypersensitivity of mind before sleep, especially to any noise.
03M 24:XX:XX

Excitement

Over-excitability on waking accompanied by hurried speech.
03M 23:XX:XX
Quite excited and very energetic in the morning.
10M 06:XX:XX

Could not fall off to sleep. Felt excited in normal routine. Too enlivened to sleep.
16F 00:XX:XX

Still very excited and full of life. Felt lighter.
16F 01:XX:XX

**Lightness and floating**

Feel like I’m going to faint – light-headed.
01F 00:01:00

When driving feels like I’m in a spacecraft (like a Luke Skywalker flying craft) and it slips through the space debris untouched. It feels like I’m floating in space and the ground below, cars around and air above are opening up in front of the car, slipping by and closing behind, allowing me to pass through.
01F 01:01:XX

Feel light headed.
02F 02:06:20

Floating sensation and feeling of light headedness.
03M 00:12:30

Feeling of light headedness accompanied by thirst for cold water.
03M 00:12:30

Feeling of light headedness accompanied by mental and physical exhaustion.
03M 03:XX:XX
I seem to be falling into space.
03M 12:XX:XX

Feelings of lethargy and light headedness.
03M 12:XX:XX

Head feeling a bit light.
11M 00:XX:XX

Slightly light-headed at noon.
11M 02:XX:XX

I seem to be falling into space.
11M 12:XX:XX

Felt slightly light-headed.
18M 00:XX:XX

Again felt slightly light-headed but also very enthusiastic about varsity project.
18M 00:XX:XX

Optimistic, positive and happy

Feel quite optimistic today.
01F 03:06:XX

Feel a bit overly optimistic, maybe “voortvarend” (foolhardy), like nothing gets in my way.
01F 03:08:XX

Feeling of openness and contentment of mind.
03M 17:XX:XX
Teased my mum about losing her temper, where I’m usually too nervous to do that.
04F 01:XX:XX

Feeling good and positive.
04F 04:XX:XX

Woke up around 2am – could not fall asleep for about 1½ hours. Felt very positive – no negativity – great insights. Unusual for this time of the night.
07M 03:XX:XX

Feeling happy, relaxed, chilled.
12F 04:XX:XX

Although this condition makes me miserable, I can only try to have a positive outlook on it to help the emotional/mental well-being.
14M 02:14:XX

I’m in a comfortable state of mind.
14M 04:05:XX

Feeling happy.
15M 06:XX:XX

Again felt slightly light-headed but also very enthusiastic about varsity project.
18M 00:XX:XX

For most of the day I have felt filled with joy and peace. Eager to study. Feeling quite sociable and friendly. Feeling secure in myself.
20M 02:XX:XX

Feel brighter in myself – not as moody or sad.
28F 12:XX:XX
Feeling brighter emotionally. More energised.
28F 13:XX:XX

Calm and relaxed

Very relaxed during the day.
10M 07:XX:XX

Felt mellow all day – calm sensation.
11M 02:XX:XX

Feeling lackadaisical.
11M 03:XX:XX

Felt a bit lazy throughout the day.
11M 07:XX:XX

I’m feeling relaxed.
12F 02:07:XX

My husband and I discussed the proving and he said I appear to be more chilled; relaxed.
12F 03:XX:XX

Feeling happy, relaxed, chilled.
12F 04:XX:XX

I’m sitting talking to a girl and I am surprised at how calm I am as I talk to her.
14M 18:XX:XX

Feel quite relaxed and much happier than last night.
18M 05:XX:XX
It would seem that a calmness has developed that I haven't felt for +- 2 years. Quite a pleasant feeling!

23M 00:00:00

Second dose taken. Calmness continues.
23M 00:04:30

A quiet evening and still not feeling the continuous pressures so dominant over the past 18 months.
23M 00:12:00

Calm feeling is back after half an hour.
23M 01:00:00

Feeling calmer than usual, not as stressed.
24M XX:XX:XX

Feeling a bit spacey – relaxed.
26M 01:12:30

**Movement alterations**

Walking with funny small steps, like I'm autistic or something.
01F 00:02:XX

Leaning against walls when standing.
01F 00:02:XX

Still walking funny, falling forwards with small paces. Not well co-ordinated.
01F 00:04:15

Trip a lot, my left foot especially seems to stick to the ground ever so often.
01F 00:04:15
Feel bodily jittery and slightly lame.
07M 00:00:30

Slightly jittery – nervous bodily feeling.
07M 02:XX:XX

Feel a little jittery – bodily.
07M 07:XX:XX

**Balance**

Unstable on my feet. Keep overbalancing.
02F 02:05:XX

Balance slightly unstable.
07M 00:00:40

Slight spell of about 15 seconds of balance disorientation.
07M 04:XX:XX

**Paralysis**

Had a frightening experience. Was semi-conscious – felt like I was dreaming. There seemed to be someone in my room, but couldn't see distinct features of the person. They touched my leg to see if I was awake and I was paralyzed and could only move my eyes.
06F 01:XX:XX

Dreamt I was lying on the couch (my favourite place) and I was paralysed. Couldn't even open my eyes – tried to call my daughter and she didn't respond. Couldn't sit up or move off the couch, so managed to fall on to the floor. Couldn't cry out to my daughter, who I thought was in the lounge. Suddenly I got all my senses back and she was not in the lounge anyway.
04F 00:XX:XX
Unconsciousness

(Prover 02F has epilepsy as a chronic condition, but the following symptoms were recorded, as her petit mal attacks increased in frequency on these particular days during the proving)

Been zoning out quite often today – a few little petit mals where I suddenly realise I haven’t said anything for a while and am not sure what I was saying previously.
02F 13:XX:XX

Had a few petit mals today and couldn’t remember what I’d been saying previously. It’s because I’ve been so tired and so down from all the emotional stuff I’ve been feeling. My sister said my eyes rolled back in, so mum put me to bed.
02F 15:XX:XX

Had about 10 fits today. Really not a good day. Very aware of it, so would rather not talk so nobody else notices it, but my eyes roll back, even with my petit mals, so they do notice it if they’re watching. It bugs me as I forget where I was in the conversation and so then either repeat myself or just end a conversation mid-sentence. I can feel my brains taking longer to kick in as well. It’s like trying to get a rusty windmill going again – it needs a hell of a lot of momentum to start it off. I loose my vision briefly too – just a void, but my memory lapses bother me.
02F 16:XX:XX

I lay down on the couch, but it felt like I blanked out, because usually it takes a while for me to drift off to sleep and this time I didn’t remember falling asleep and I woke up disorientated, wasn’t sure where I was.
06F 01:XX:XX
I'm starting to feel a bit nervous. I'm worried that I'm going to blank out or collapse.
06F 02:XX:XX

Heaviness

Feeling heavy, aching and frustrated.
02F 10:XX:XX

Feeling heavy.
06F 00:XX:XX

Feel extremely heavy and exhausted.
06F 01:XX:XX

Deceit vs. honesty

I dreamt my husband and I went for a walk with a friend of mine, up on a hill. In full view they were kissing, so her husband and I kissed as well.
01F 05:XX:XX

I dreamt we were writing a diagnostics multiple choice test and we had access to a printed model answer sheet, which we openly used.
01F 05:XX:XX

Cheated last night in a competition, felt bad all day and apologised to all concerned. I can't believe I was so dishonest. Feel very guilty.
02F 02:11:XX

Been feeling strongly that proper direct communication between people, with truthful content should occur and any small lie is not acceptable.
18M 06:XX:XX
Feeling quite direct with people, and if honesty with room for human "spin" or interpretation is allowed, if people get upset so be it.
18M 06:XX:XX

Very large fight with my sister F. Said a lot of very hectic things to her, very direct with my feelings.
18M 06:XX:XX

Been thinking lots about what's "fair" and "right". There maybe is none.
18M 15:XX:XX

**Envy and competitiveness**

Jealous of sister as she had all day to work and hardly did anything and has exams all next week and will do so well. I'm sick of putting in the work and not having the results match my effort.
02F 02:11:30

Been thinking about last night, I was so angry and jealous of my sister, purely because she gets such good results and does not put much effort in.
02F 03:05:10

Felt slightly light-headed and a little bit too competitive with respect to my partner in the project (at work).
18M 00:XX:XX

Things with F are still very strained. We have not really been talking. Been kind of ignoring her, I would not like to back down, and be "nice" to her. Don't think I have ever dealt with her like this.
18M XX:XX:XX
Indecision

My boss phoned me and I took forever to make a decision, which is unusual, especially as it was so straight-forward.
02F 06:XX:XX

Control and restriction

Feeling really imprisoned by expectations placed on me. Just want to be independent. Sick of having to answer to others and do what they want and not what I want. They stifle spontaneity, which I crave.
02F 17:XX:XX

I'm feeling scattered and really resent being forced to do anything. Feel restricted, bored, controlled. Very frustrated.
02F 18:XX:XX

I have to be careful. I have to control my irritability.
06F 03:XX:XX

Felt a little irritated but did not "display" visible symptoms and just kept quiet.
18M 07:XX:XX

...but I just quietly explained and let the volcano erupt. Different from earlier in the week when I got cross back.
18M 09:XX:XX

Feel a little less explosive than I did earlier in the week, maybe slightly more in control.
18M 10:XX:XX

Upset with S but don't want to say so directly.
18M 11:XX:XX
4.2.2 VERTIGO

Feeling dizzy.
01F 00:00:01

Feel like I’m going to faint – light-headed.
01F 00:01:00

Feel like I’m going to faint.
01F 02:06:20

Two moments of vertigo while eating – just lost my sense of direction momentarily.
01F 03:08:XX

Feel light headed.
02F 02:06:20

Feeling of light headedness accompanied by thirst for cold water.
03M 00:12:30

Feeling of light headedness accompanied by mental and physical exhaustion.
03M 03:XX:XX

Feeling of light-headedness > open air.
03M 06:XX:XX

Feelings of lethargy and light headedness.
03M 12:XX:XX

Mild vertigo on rising > cold water.
03M 16:XX:XX
Slight vertigo on standing up fast, < standing up.
03M 23:XX:XX

Moderate vertigo on waking > washing face.
03M 30:XX:XX

Looked at the burglar guards and it looked as if they were moving. I couldn’t look for too long, thought I’d be dizzy all day – but was fine.
04F 02:XX:XX

Dizziness in head.
07M 00:00:30

Slight dizziness.
07M 00:04:10

Woke up feeling a little dizzy, with a slight spell of about 15 seconds of balance disorientation.
07M 04:XX:XX

Feel a little dizzy in the head.
07:XX:XX

Head feeling a bit light.
11M 00:XX:XX

Slightly light-headed at noon.
11M 02:XX:XX

Dizzy spells during exercise.
11M 05:XX:XX

Feeling a bit dizzy.
13M 00:00:XX
Felt dazed and dizzy.
16F 04:XX:XX

Felt extremely dizzy and sleepy.
16F 05:XX:XX

Felt slightly light-headed.
18M 00:XX:XX

Again felt slightly light-headed.
18M 00:XX:XX

Feeling much better, still light-headed when I stand up.
25M 00:01:13

Feel very tired in early afternoon, light-headed.
28F 08:XX:XX

Headache started again around mid-morning – feel light-headed and disorientated again.
28F 11:XX:XX

I’m dizzy from fatigue.
29F 12:XX:XX

4.2.3 HEAD

Pain

Slight headache.
10M 00:00:XX
Slight headache again.
10M 01:XX:XX

Headache now-and-again.
10M 18:XX:XX

Slight headache in the afternoon.
10M 22:XX:XX

My head is aching > hot shower.
02F 08:XX:XX

Slight pain in left ear / head area in morning.
07M 03:XX:XX

Pressure in whole head – slight headache.
07M 07:XX:XX

Feel a bit of a headache coming on.
14M 05:XX:XX

Felt an uncomfortable feeling in my head, like a headache as I bent down.
14M 07:XX:XX

I have a little bit of a headache coming on – it is probably because I didn’t sleep it off when I was tired.
14M 12:XX:XX

I am starting to have a headache on the side as if someone just keeps knocking my head with a hammer or something.
15M 01:00:25

The headaches are milder than before – they only last for three minutes.
15M 02:XX:XX
My 2'o clock headache didn't come today (curative).
16F 00:XX:XX

Woke up early but had a terrible headache.
16F 02:XX:XX

Head was throbbing especially occipital and temporal ends.
16F 04:XX:XX

My head was really paining.
16F 04:XX:XX

Headache in forehead and temples better for pressure at 19:00. Dull pain.
20 M 09:XX:XX

Had a headache at about 4:00 p.m. then went away at about 6:00.
25M 05:05:00

Slight headache but the type that will be gone soon.
25M 09:XX:XX

Headache, nose blocked, very tired.
26M 10:14:10

Headache.
26M16:XX:XX

Headache, sore throat.
26M 17:XX:XX

Headache, blocked nose.
26M 18:XX:XX
Headache, body fine.
26M 20:XX:XX

Neck very stiff and have a headache.
28F 06:XX:XX

Headache worse, feel tired, disorientated – seem to be slurring my speech and can’t think straight.
28F 10:XX:XX

Headache started again around mid-morning – feel light-headed and disorientated again.
28F 11:XX:XX

Slight headache and chest pains.
28F 11:XX:XX

Headache comes and goes but not as bad as before.
28F 12:XX:XX

Have a huge headache.
29F 03:06:00

Woke up with headache.
29F 03:10:00

Slight headache.
30M 00:01:30

Headache more prominent.
30M 00:02:00

Lingering headache.
30M 00:03:13
Headache persistent.
30M 00:04:00

**Right-sided**

Slight pain in right temple, short-lived.
01F 00:00:01

Headache right forehead and temple extending to right side of nose in the middle (from top to bottom) with nausea > eating, with slight post nasal blockage > walking in open air.
01F 06:XX:XX

Whopping headache, predominantly right-sided now with numbness on the right side of the tongue.
02F 04:08:30

There is an intense stabbing pain on my right occipito-temporal area.
02F 12:XX:XX

Mild headache at top right of head – a dull ache > forgetting about it.
12F 29:XX:XX

Again a dull head ache at top right of head.
12F 30:XX:XX

**Temporal**

Slight pain in right temple, short-lived.
01F 00:00:01

Slight headache, more left fronto-temporal.
01F 00:01:00
Fronto-temporal headache – stitching bilateral pain all over.  
01F 04:00:30

Headache moved to left around eye and forehead, also temples – dull, heavy, tired feeling.  
01F 04:03:XX

Headache right forehead and temple extending to right side of nose in the middle (from top to bottom) with nausea > eating, with slight post nasal blockage > walking in open air.  
01F 06:XX:XX

Dull pressure headache in temporal region – as if in a vice > pressure.  
(Lasted for 2 days).  
02F 03:10:30

There is an intense stabbing pain on my right occipito-temporal area.  
02F 12:XX:XX

Sharp headache from temple to temple > pressure.  
02F 17:XX:XX

Woke up with a slight temporal headache.  
06F 01:XX:XX

Head was throbbing especially occipital and temporal ends.  
16F 04:XX:XX

Jaw and temples pain – all through to back – occiput.  
Headache is a bit better for warmth, now extending to temples and jaws.  
16F 05:XX:XX

Headache in forehead and temples better for pressure at 19:00. Dull pain.  
20 M 09:XX:XX
Woke up with a really terrible headache on both sides of the head.
25M 07:XX:XX

Headache that runs from the left back of head to the front side.
26M 20:XX:XX

Frontal

Slight headache, more left fronto-temporal.
01F 00:01:00

Fronto-temporal headache – stitching bilateral pain all over.
01F 04:00:30

Headache moved to left around eye and forehead, also temples – dull, heavy, tired feeling.
01F 04:03:XX

Headache right forehead and temple extending to right side of nose in the middle (from top to bottom) with nausea > eating, with slight post nasal blockage > walking in open air.
01F 06:XX:XX

07M 08:XX:XX

Dull ache at front of head / top > drinking water.
12F 06:XX:XX

Around eyes

Headache moved to left around eye and forehead, also temples – dull, heavy, tired feeling.
01F 04:03:XX
Headache stayed the whole day and through the night. Left-sided, into eyeball and nose on the side in the middle.
01F 04:05:XX

Headache seems to be focussing in the right eyeball.
02F 04:07:XX

Headache behind my eyes < bending forward with a full sensation and slight thumping.
02F 07:XX:XX

Photophobia with headache in the back of my eyes as if a needle has pierced them.
02F 09:XX:XX

Slight headache at night, behind left eye.
11M 01:XX:XX

Slight headache behind my eyes – at the front of my head towards the top.
12F 01:06:XX
Dull ache behind the eyes > drinking water.
12F 06:XX:XX

I have a major headache – it seems to emanate from behind my eyes. It is the most intense it has been.
14M 03:10:XX

Felt a headache on the left side of my head – it made my left eye burn. The headache lasted for about 3 minutes. My eye kept burning for about 30 minutes.
15M 04:12:XX
I have a major headache on the left side of my head – causing my left eye to twitch uncontrollably.
15M 07:XX:XX

Headache which had sits behind the eyes and responds to sharp eye/head movement or shaking of the head.
24M 01:XX:XX

Headache has intensified.
24M 01:XX:XX

Headache above left eye. Feeling uncomfortable.
26M 08:13:17

Small headache above right eye – didn’t last long.
28F 03:XX:XX

**Occipital**

Sharp shooting pain up right occipital region, behind ear.
02F 09:XX:XX

There is an intense stabbing pain on my right occipito-temporal area.
02F 12:XX:XX

Tension headache extending from occiput down to the neck.
03M 02:XX:XX

Mild headache in occipital region > heat of sun.
03M 05:XX:XX

Occipital headache > cold ice application, < coffee.
03M 07:XX:XX
Tension headache in occipital region. Starting from occiput to back of neck, < cold water, > rest.
03M 11:XX:XX

Moderate tension headache throughout the day extending from occiput to back > rest and lying on left side.
03M 21:XX:XX

Slight tension headache in occipital region > warm food.
03M 25:XX:XX

Have a slight headache at the back of my head and on the sides – a sharp compressing pain.
06F 00:00:XX

Head was throbbing especially occipital and temporal ends.
16F 04:XX:XX

Jaw and temples pain – all through to back – occiput.
16F 05:XX:XX

A headache that lasted for less than 5 minutes, at the region of C1 (vertebra) and base of the skull. Sharp pain that I experienced when I was moving my head.
21M 02:XX:XX

From about 06:00 – 07:00 am I experienced headaches from the occipital region towards the forehead. Cutting type of a headache.
21M 07:XX:XX

Headache that runs from the left back of head to the front side.
26M 20:XX:XX
Neck stiff and slight headache – back lower head.
28F 02:09:00

**Band-like, vice-like pain**

Dull pressure headache in temporal region – as if in a vice > pressure.
(Lasted for 2 days).
02F 03:10:30

Headache on and off – like a band around the head.
28F 04:XX:XX

Have had a headache off and on today – like a tight band around my head.
28F 07:XX:XX

Feel like I have a clamp around my head.
28F 10:XX:XX

Headache feels like an iron vice around my head, squeezing it.
28F XX:XX:XX

**Aching pain**

My head is aching > hot shower.
02F 08:XX:XX

Dull ache behind the eyes > drinking water.
12F 06:XX:XX

**Cutting pain**

Cutting type of a headache.
21M 07:XX:XX
Dull pain

Headache moved to left around eye and forehead, also temples – dull.
01F 04:03:XX

Dull pressure headache in temporal region – as if in a vice > pressure.
(Lasted for 2 days).
02F 03:10:30

Dull ache at front of head / top > drinking water.
12F 06:XX:XX

Mild headache at top right of head – a dull ache > forgetting about it.
12F 29:XX:XX

Again a dull head ache at top right of head.
12F 30:XX:XX

Pressing pain

Dull pressure headache in temporal region – as if in a vice > pressure.
(Lasted for 2 days).
02F 03:10:30

Pressure in whole head – slight headache.
07M 07:XX:XX

Sharp pain

Sharp shooting pain up right occipital region, behind ear.
02F 09:XX:XX

Sharp headache from temple to temple > pressure.
02F 17:XX:XX
Sharp pain that I experienced when I was moving my head.
21M 02:XX:XX

**Shooting pain**

Sharp shooting pain up right occipital region, behind ear.
02F 09:XX:XX

**Stabbing pain**

There is an intense stabbing pain on my right occipito-temporal area.
02F 12:XX:XX

**Stitching pain**

Fronto-temporal headache – stitching bilateral pain all over.
01F 04:00:30

**Throbbing, pulsating pain**

Headache behind my eyes < bending forward with a full sensation and slight thumping.
02F 07:XX:XX

Head was throbbing especially occipital and temporal ends.
16F 04:XX:XX

My head is starting to pound as if I'm suffering from a hangover.
15M 07:XX:XX

**Sensations**

Pins and needles sensation in my left temporal region.
02F 00:05:55
Numb sensation at top, back of my head in a circular region.
02F 03:02:40

Felt a little funny in the head directly after taking sample.
18M 00:XX:XX

**Pulsating and quivering**

Feel pulsations in my head.
02F 02:05:XX

I’ve been lying down for a while, but I can’t sleep – at one stage my head seemed to quiver or shake, but internally, around the eyes.
14M 02:05:XX

**Dull**

Dullness and disequilibrium in head.
07M 00:04:XX

Woke up feeling a little unfocused on the left side of my head.
07M 04:XX:XX

My head feels dull from the effects of the headache.
14M 03:14:XX

**Fuzzy**

There seems to be a fuzziness to my head.
14M 01:XX:XX

My head still feels fuzzy.
14M 02:XX:XX
I feel fuzzy and hot in my head, especially my ears and eyes.
14M 14:XX:XX

Block

My head feels like a block.
14M 02:04:XX

My head feels like a block. I feel like I will get a headache.
14M 02:07:XX

Blockiness of the head, not fuzziness, but blockiness of the head feels to me like headache would come.
14M 02:02:XX

The blockiness in my head will make it hard for me to fall asleep.
14M 02:14:XX

Heavy and full

Head feels full and heavy.
02F 04:10:40

Head fullness still there, like an overfilled water bomb, about to explode, < motion.
02F 04:12:XX

My head feels full.
02F 07:XX:XX
My head feels congested as if my brain is swollen > resting my head on something.
06F 05:XX:XX

My head is heavy.
14M 07:XX:XX

**Light**

Feel light headed.
02F 02:06:20

Feeling of light headedness accompanied by thirst for cold water.
03M 00:12:30

Feeling of light headedness accompanied by mental and physical exhaustion.
03M 03:XX:XX

Feeling of light-headedness > open air.
03M 06:XX:XX

Head feeling a bit light.
11M 00:XX:XX

Slightly light-headed at noon.
11M 02:XX:XX

**Ameliorations**

**Heat or warmth**

My head is aching > hot shower.
02F 08:XX:XX
Mild headache in occipital region > heat of sun.  
03M 05:XX:XX

Slight tension headache in occipital region > warm food.  
03M 25:XX:XX

Had my head covered all the time as that made my headache less.  
16F 05:XX:XX

Headache is a bit better for warmth, now extending to temples and jaws.  
16F 05:XX:XX

Pressure

Dull pressure headache in temporal region – as if in a vice > pressure (lasted for 2 days).  
02F 03:10:30

Sharp headache from temple to temple > pressure.  
02F 17:XX:XX

My head feels congested as if my brain is swollen > resting my head on something.  
06F 05:XX:XX

Headache in forehead and temples better for pressure.  
20M 09:XX:XX

Open air

Headache right forehead and temple > walking in open air.  
01F 06:XX:XX
Feeling of light-headedness > open air.
03M 06:XX:XX

Rest

Tension headache in occipital region. Starting from occiput to back of neck > rest.
03M 11:XX:XX

Moderate tension headache throughout the day extending from occiput to back > rest and lying on left side.
03M 21:XX:XX

My head feels congested as if my brain is swollen > resting my head on something.
06F 05:XX:XX

Drinking water

Dull ache behind the eyes > drinking water.
12F 06:XX:XX

Aggravations

Stooping

Headache behind my eyes < bending forward with a full sensation and slight thumping.
02F 07:XX:XX

Felt an uncomfortable feeling in my head, like a headache as I bent down.
14M 07:XX:XX
Motion

Head fullness still there, like an overfilled water bomb, about to explode, < motion.
02F 04:12:XX

Sharp pain that I experienced when I was moving my head.
21M 02:XX:XX

Being tired

I have a little bit of a headache coming on – it is probably because I didn’t sleep it off when I was tired.
14M 12:XX:XX

Coffee

Occipital headache < coffee.
03M 07:XX:XX

4.2.4 EYE

Tiredness

Tired eyes.
01F 00:01:00

Eyes tired.
01F 04:XX:XX

Eyes so tired I can hardly keep them open.
02F 02:06:20
Eyes are as if tired and lazy > dark room.
03M 13:XX:XX

Eyes extremely tired on waking as if not slept.
03M 16:XX:XX

Feeling tiredness behind my eyes.
12F 07:XX:XX

Tiredness behind my eyes.
12F 24:XX:XX

My eyes are tired.
14M 02:07:XX

Woke up in the middle of the night and my eyes felt a little tired.
14M 03:XX:XX

I'm feeling a certain tiredness in my eyes.
14M 11:XX:XX

...eyes are a little tired.
18M 09:XX:XX

Pain

Eyes red and sore on waking.
03M 10:XX:XX

As I woke up this morning I had a stitching pain in my right eye.
06F 01:XX:XX

Slight sore eyes with burning.
10M 04:XX:XX
Sore, red eyes now-and-again.
10M 18:XX:XX

I have noticed my eyes have been quite sore with a burning feeling.
10M 25:XX:XX

Sore eyes make me feel like I'm getting a cold.
10M 28:XX:XX

My eyes sting a little.
14M 02:04:XX

I have a slight discomfort around my left eye.
14M 02:06:XX

My eyes sting a bit.
14M 02:10:XX

Eyes a bit sore – very dry.
26M 11:XX:XX

Burning

My eyes are burning.
02F 07:XX:XX

Slight sore eyes with burning.
10M 04:XX:XX

Very red and burning eyes.
10M 05:XX:XX
I have noticed my eyes have been quite sore with a burning feeling.
10M 25:XX:XX

Eyes a bit burning.
10M 09:XX:XX

Eyes slightly burning.
10M 13:XX:XX

I have noticed my eyes have been quite sore with a burning feeling.
10M 25:XX:XX

Felt a headache on the left side of my head – it made my left eye burn. The headache lasted for about 3 minutes. My eye kept burning for about 30 minutes.
15M 04:12:XX

Started feeling tired – eyes burning – want to sleep.
29F 00:02:25

**Redness**

Inner lower lid of eye red – the part or rim visible on the outside.
01F 00:23:XX

Dilated veins in conjunctiva in lower third of eyes on both sides.
01F 00:23:XX

Dilated veins in conjunctiva at 12, 2 4 8 and 10 o’clock in both eyes.
01F 02:00:XX

Watery red eyes.
03M 11:XX:XX

Dry red eyes on waking, > fresh air.
03M 31:XX:XX
Very red eyes.
10M 05:XX:XX

Watering

Margins of eye red and eyes watering.
01F 00:02:00

Watery red eyes.
03M 11:XX:XX

Eyes watery and sensitive to light.
03M 13:XX:XX

Watering of eyes on waking > open space.
03M 17:XX:XX

Excessive watering of eyes > fresh cold air.
03M 31:XX:XX

Eyes watering a bit – salty.
11M 03:XX:XX

Eyes watering a bit.
11M 05:XX:XX

My eyes are weepy.
14M 01:XX:XX

My eyes are still weeping.
14M 02:01:XX

Eyes weepy.
14M 02:14:XX
Dryness

Eyes feel dried up.
03M 10:XX:XX

Eyes a bit sore – very dry.
26M 11:XX:XX

Sensations and appearance

I feel fuzzy and hot in my eyes.
14M 14:XX:XX

Eyes look glazed.
01F 00:02:00

Eyes glassy again.
01F 02:00:XX

My eyes rolled back in (over 4 days, accompanying petit mals).
02F 15:XX:XX

Left eye puffy.
28F 03:XX:XX

Observation by lecturer: His eyes were staring, he would just look at one thing and stare fixedly.
21M XX:XX:XX

Pupils

Pupils dilated.
01F 00:02:00
My left pupil dilated and the right constricted.
02F 04:XX:XX

Twitching

I've been lying down for a while, but I can't sleep – at one stage my head seemed to quiver or shake, but internally, around the eyes.
14M 02:05:XX

I have a major headache on the left side of my head – causing my left eye to twitch uncontrollably.
15M 07:XX:XX

Eyelids

Eyelids heavy.
02F 03:03:XX

Extreme tiredness on waking accompanied by heaviness of eyelids.
03M 02:XX:XX

Eyelids feel like they've been filled with water and just want to bulge. So uncomfortable – full and hazy vision.
02F 11:XX:XX

4.2.5 VISION

Eyelids feel like they've been filled with water and just want to bulge. So uncomfortable – full and hazy vision.
02F 11:XX:XX

Have problem with eyes, finding it difficult to focus up close, at normal reading distance. Very odd.
26M 19:XX:XX
Eye focus at reading distance getting better.
26M 26:XX:XX

4.2.6 EAR

Pain

Mild fullness and pain on right Eustachian tube area.
02F 01:06:15

Sharp shooting pain up right occipital region, behind ear.
02F 09:XX:XX

Slight pain in left ear / head area in morning.
07M 03:XX:XX

Sensations

Fluttering in left ear, as if pulsations at a very rapid rate. As if vessel literally pulsating, so it blocks the sound to everything except the pulsations.
02F 02:09:30

Can feel my pulse inside my ear – just inside the Eustachian tube on the right. Just a little flutter – a strange sensation.
02F 06:XX:XX

Ringing and buzzing sensation in ears.
03M 05:XX:XX

Ringing like sensation in ears accompanied by tingling of fingers of right hand.
03M 09:XX:XX
Slight buzzing sensation in left ear.
03M 19:XX:XX

Ears are cold.
14M 02:10:XX

### 4.2.7 NOSE

#### Runny nose

Starting to sneeze and nose dribbling clear fluid. Not quite running.
02F 10:XX:XX

Nose stopped running while sleeping.
02F 11:XX:XX

Left nostril streaming – clear, bland.
02F 11:XX:XX

Nose alternates which nostril is congested, which one runs.
02F 11:XX:XX

My nose stopped running when lying down, again!
02F 12:XX:XX

Sneezing accompanied by watery red eyes and thin watery clear mucous from the nose.
03M 11:XX:XX

Moderate attack of rhinitis on waking.
03M 17:XX:XX
Runny nose during night – thin watery mucous discharge < cold drinks, > bathing.
03M 20:XX:XX

Mild to moderate coryza on waking < open air, > warm drinks.
03M 21:XX:XX

Sudden acute attack of hayfever accompanied by excessive secretion of thin mucous from nose, > fresh air.
03M 29:XX:XX

Runny nose – think it’s a cold.
10M 00:00:XX

Runny nose.
10M 01:XX:XX

A serious runny nose and sinus problems. Blowing my nose all the time.
10M 02:XX:XX

Serious runny nose - blowing my nose all the time.
10M 02:XX:XX

Runny nose with very congested sinuses.
10M 03:XX:XX

Woke up in the night – my nose was blocked and running respectively.
14M 01:XX:XX

I have been sneezing and sniffing a bit this morning.
14M 00:01:XX
Some mucous in my one nostril was very fluid, but my nose on a whole is blocked.
14M 02:01:XX

I am still sniffing.
14M 02:07:XX

Still sniffing.
14M 02:14:XX

Still sniffing a bit.
14M 06:XX:XX

Runny nose.
22F 00:00:15

Nose was a bit runny.
25M 02:XX:XX

Nose is a bit runny and my lips feel dry.
25M 03:03:43

Discharge

Nasal discharge like egg white.
01F 07:XX:XX

Blew my nose and saw grey flecks.
02F 01:00:XX

Nasal discharge clear.
02F 11:XX:XX
Left nostril streaming – clear, bland.
02F 11:XX:XX

Thin watery clear mucous from the nose.
03M 11:XX:XX

Runny nose during night – thin watery mucous discharge < cold drinks, > bathing.
03M 20:XX:XX

Sudden acute attack of hayfever accompanied by excessive secretion of thin mucous from nose, > fresh air.
03M 29:XX:XX

Scanty, watery discharge.
16F 05:XX:XX

**Congestion**

Woke with slight post-nasal drip and nose blockage.
01F 05:XX:XX

Nose alternates which nostril is congested, which one runs.
02F 11:XX:XX

Slight congestion of nose with thick mucous on waking.
03M 01:00:XX

Finding it difficult to breath through my nose at night.
06F 07:XX:XX

Runny nose with very congested sinuses.
10M 03:XX:XX
Seriously congested sinuses.
10M 27:XX:XX

Noticed throughout the day that my nose has been blocked as if a cold is coming on.
14M 01:XX:XX

Woke up in the night – my nose was blocked and running respectively.
14M 01:XX:XX

Some mucous in my one nostril was very fluid, but my nose on a whole is blocked.
14M 02:01:XX

Still blocked nose.
14M 02:02:XX

The nose feels so hard on inside – the mucous in my nostrils, although not voluminous. It blocks my nasal canals, whilst it is quite watery.
14M 02:04:XX

I sound a bit nasal.
14M 04:05:XX

Headache, nose blocked, very tired.
26M 10:14:10

Headache, blocked nose.
26M 18:XX:XX

Headache, blocked nose.
26M 19:XX:XX
Woke up with stuffy nose and puffy face.
28F 03:XX:XX

Pain and sensations

My nose feels rough and burny on the inside. The smell of mucous is strong in my nostrils.
14M 02:05:XX

Burning sensation in nose, sides of the nose above the alae nasi – < going outside.
16F 05:XX:XX

My nasal passages, though rough and sore are drier now.
14M 02:06:XX

My nose irritates me, because it’s so dry on the inside. It is as if with all the sniffing there is friction going on in there.
14M 02:10:XX

My nose is breathing easier, although still sore from yesterday.
14M 03:00:XX

Aversion to odours.
03M 29:XX:XX

4.2.8 FACE

Pain

Pain on the left side of the face. The pain woke me up at 03:00. The pain extends from the lower part near the neck and up to the temple.
21M 05:XX:XX
Developed slight pain, right side of face.
28F 11:XX:XX

**Jaws (pain)**

Jaw and temples pain – all through to back – occiput.
16F 05:XX:XX

Started to feel pain in my lower jaw at the site of the wisdom tooth or where the wisdom tooth is supposed to grow. Left side of the face was becoming numb.
21M 04:XX:XX

Jaw feels stiff and sore.
30M 00:02:48

**Sensations**

**Tingling, burning**

Tingling in maxillary bones.
01F 00:00:XX

Burning, tingling all over my face, <sweat.
02F 00:04:30

Intense burning, only in my face – lasts 5 minutes, with no sweating.
01F 02:11:XX

Face still burning.
02F 07:XX:XX

Face hot to touch.
02F 07:XX:XX
When hot all I want is to be cooled – fanning or cold water – but only on my face.

**Fixed**

Tired, fixed feeling in facial muscles, like you’ve put a mask on and it’s dried off.

**Numbness**

Left side of the face was becoming numb.

**Puffy**

Feel really heavy, bloated and puffy, especially my face (face puffy, but body heavy.

**Glands**

Submandibular glands swollen.

Glands swollen below chin.
Submandibular gland swollen, more so on right.
20M 00:11:20

**Sinuses**

Irritating sinusitis of maxillary sinuses on waking as if being sandpapered > rest.
03M 20:XX:XX

07M 08:XX:XX

**Eruptions**

Finding some pimples on face, chin and cheek.
12F 05:XX:XX

Getting pimples on my forehead.
12F 11:XX:XX

**4.2.9 MOUTH**

**Dryness**

Dry sensation of the tongue.
02F 00:05:55

Mouth is very dry.
02F 01:08:00

Lips dry.
02F 07:XX:XX
Lips very dry from mouth breathing.
02F 11:XX:XX

Lips very dry.
02F 12:XX:XX

Dry mouth with excessive thirst for ice water.
03M 07:XX:XX

My mouth is like cardboard right now.
15M 07:XX:XX

Nose is a bit runny and my lips feel dry.
25M 03:03:43

**Salivation**

Been drooling a fair amount while sleeping lately.
02F 04:23:XX

Strong craving for sweets accompanied by moderate salivation.
03M 11:XX:XX

Excessive salivation in mouth, < strong smelling foods.
03M 20:XX:XX

Increased salivation < salty food, > cold water.
03M 31:XX:XX

Quite a bit of salivation as soon as remedy taken.
20M 00:00:00
Taste

Offensive taste in my mouth, despite brushing teeth lots.
02F 10:XX:XX

Got a funny taste in my mouth – milky / phlegmy taste.
10M 00:00:XX

These things (powders) taste very metallic.
24M 01:XX:XX

Took the powder, tasted nice at first but after-taste is awful.
25M 00:00:00

Sensations

The inside of my mouth feels very smooth.
01F 00:02:XX

Slightly sore soft palate.
07M 04:XX:XX

Tongue

Fullness and pain from side of my tongue down to my neck.
02F 01:06:15

Pain at the root of the tongue.
21M 04:XX:XX

Bowel motion, then my tongue went numbish.
02F 00:05:30
Tongue feels slightly numb on the right back portion, on the side.
02F 01:06:XX

Tip of tongue went numb after a small bite.
02F 03:04:30

Tongue tip numb after eating.
02F 04:13:30

Numb right side posterior of my tongue.
02F 05:XX:XX

Dry sensation of the tongue.
02F 00:05:55

My tongue feels a little rough, as if I ate something too hot. I felt this throughout the day and it hasn't changed for better or for worse.
14M 05:XX:XX

Speech

Slurring my speech.
28F 10:XX:XX

Gums

Severe pain on the left lower site of the wisdom tooth. Inflamed when I woke up. Sharp, throbbing pain.
21M 04:XX:XX
4.2.10 TEETH

Pain

Cold water made my lower right incisor sore.
02F 00:08:XX

Teeth very sensitive to cold water as if they were to crack.
03M 26:XX:XX

My toothache I had prior to the proving is really starting to act up < cold.
13M 00:XX:XX

The toothache is getting worse.
13M 01:XX:XX

Started to feel pain in my lower jaw at the site of the wisdom tooth. Sharp, aching pain that is slowly progressing. Worse when opening the mouth or chewing food. Become better after long talking. Feel worse when drinking water. Felt as if I want to continuously touch it with my finger.
21M 04:XX:XX

Severe pain on the left lower site of the wisdom tooth. Inflamed when I woke up. Sharp, throbbing pain, worse when sleeping on the opposite side better when lying on the pain site. Could not put 2 fingers in my mouth (couldn't open mouth wide enough). Painful swallowing saliva, chewing, talking.
21M 04:XX:XX

The pain in the site of wisdom tooth was only coming up if I opened my mouth, chewing, beginning to speak. It was feeling much better after drinking any hot liquid, but not that any cold liquid made it worse.
21M 06:XX:XX
Woke up at about 02:00 am with pain in the mouth. Still the aching pain at the site of the wisdom tooth.
21M 07:XX:XX

Developed mild toothache for about half an hour.
28F 05:XX:XX

Developed slight toothache or sinus pain.
28F 11:XX:XX

Not sure if it's toothache or sinusitis – tooth slightly sensitive but not really painful.
28F 12:XX:XX

4.2.11 THROAT

Scratchy

Feel as though I’m getting a cold now with a scratchy throat.
02F 07:XX:XX

My throat is still scratchy.
02F 07:XX:XX

Dry throat as if scratchy < yogurt, > water.
03M 13:XX:XX

Dry scratchy throat with craving for cold water.
03M 28:XX:XX

Scratchy throat.
10M 02:XX:XX
Throat seems scratchy – glands a little swollen.
28F 06:XX:XX

**Dryness**

Excessive thirst for cold water due to extremely dry throat.
03M 06:XX:XX

Dry throat with excessive thirst for ice water.
03M 07:XX:XX

Dry throat as if scratchy < yogurt, > water.
03M 13:XX:XX

Dry throat on waking with craving for savoury things.
03M 19:XX:XX

Dry scratchy throat with craving for cold water.
03M 28:XX:XX

Woke up – dry throat, with thirst for small sip of water.
20M 01:XX:XX

Woke up with dry throat, with sensation of lump in anterior throat.
20M 04:00:00

Woke up +- 08:00 thirsty, dry throat. For a small amount of water.
20M 05:01:00

Throat getting more gritty.
26M 16:XX:XX
Pain

My throat feels like razor blades each time I swallow saliva.
02F 09:XX:XX

My throat is sore on waking.
06F 07:XX:XX

Slightly sore throat.
07M 04:XX:XX

Noticing a sore throat.
12F 12:02:XX

Throat still sore.
12F 12:08:XX

Sore throat after dinner 21:00 better for drinking cold juice.
20M 08:XX:XX

Sore throat anterior aspect, better swallowing thick liquids, desire fresh fruit / juice.
20M 14:XX:XX

Sore throat.
26M 15:XX:XX

Sore throat. Feeling very under the weather.
26M 16:XX:XX

Headache, sore throat.
26M 17:XX:XX
Throat feels a little sore.

- 28F 05:XX:XX

Throat still feels sore though glands are down.
28F 07:XX:XX

**Inflammation**

Anterior fauces red and inflamed.
16F 05:XX:XX

Swollen left tonsil.
21M 07:XX:XX

**Phlegm**

Constant desire to clear my throat.
02F 09:XX:XX

I have slight discomfort from phlegm layering the back of my throat.
14M 02:00:XX

My throat feels dry and I can feel bits of phlegm at the back of it.
14M 03:00:XX

Mucus not as much that night (curative).
16F 00:XX:XX

Coughing up white mucus, feel it in the back of my throat and then it just goes down again.
16F 05:XX:XX

Phlegmy throat.
22F 00:00:15
Itching

Had an itchy feeling at the back of my throat.
16F 04:XX:XX

Itchy throat.
30M 00:01:30

Tingling

Tingling feeling in throat, as if something is stuck there, right down the throat, the whole throat. Sensation of nothingness in throat, just tingling feeling, worse coughing.
16F 05:XX:XX

Lump

Sensation of a lump in anterior throat.
20M 00:01:21

Woke up with dry throat, with sensation of lump in anterior throat.
20M 04:00:00

Sensation as lump in anterior throat.
20M 05:10:30

Sensation of throat larger than normal.
20M 02:01:50

Hollow tube, nothing, empty

Sensation of nothingness in throat.
16F 05:XX:XX
Throat — feeling of tube, as if.
20M 00:01:21

Feeling as if throat hollowed. Cool anteriorly.
20M 00:12:00

4.2.12 EXTERNAL THROAT

Swollen glands

Cervical glands swollen, especially tender on the left.
02F 11:XX:XX

Tonsillar node enlarged and tender.
16F 05:XX:XX

Throat seems scratchy — glands a little swollen.
28F 06:XX:XX

Throat still feels sore though glands are down.
28F 07:XX:XX

4.2.13 STOMACH

Appetite

Decreased

I have no appetite but made myself eat.
02F 07:XX:XX

Aversion to food on waking.
03M 24:XX:XX
I don't have a very good appetite today, don't feel like eating. The thought of eating and food exhausts me.
06F 01:XX:XX

I haven't eaten anything.
15M 07:XX:XX

I am finally managing to put something in my mouth to eat.
15M 08:XX:XX

Skipped breakfast.
16F 01:XX:XX

Change in appetite, eating less. Don't want to look at rich food, feeling nauseous.
16F 02:XX:XX

Could hardly eat.
16F 04:XX:XX

Couldn't eat at all.
16F 05:XX:XX

Hardly ate.
16F 05:XX:XX

Headache with sharp pain, continuous, causing decrease in appetite.
Decreased appetite, don't want to eat at all.
16F 05:XX:XX

Appetite during the day gone again!
23M 02:XX:XX
Have no appetite to eat during the day.
23M 04:XX:XX

Very tired – no appetite.
26M 07:00:00

Increased

So hungry, eating seems to make me more hungry.
02F 02:07:45

Sensation of being hungry, but worse, > eating then < shortly afterwards.
02F 04:10:XX

Increased appetite during supper.
03M 17:XX:XX

Extreme ravenous hunger on waking.
03M 22:XX:XX

Strong appetite in evening with extreme hunger.
03M 23:XX:XX

Quite hungry – did not eat well all day – mainly junk food.
10M 00:XX:XX

Quite hungry.
10M 02:XX:XX

Feeling hungry.
10M 11:XX:XX

Feeling quite hungry.
10M 14:XX:XX
Feeling hungry.
13M 01:XX:XX

Change in appetite – eating more than usual.
16F 00:XX:XX

Ate unusually more today.
16F 03:XX:XX

Very hungry this morning.
26M 01:12:00

Very hungry – appetite good.
26M 03:03:30

Hungry – 2 rolls with honey!!
28F 02:07:00

Feel almost like pre-menstrual hungry!!!
28F 03:XX:XX

**Thirst**

Extreme thirst for water throughout the day.
03M 00:XX:XX

Thirst for cold water.
03M 00:XX:XX

Moderate thirst for cold drinks on waking.
03M 04:XX:XX
Thirst for cold water throughout the day.
03M 01:XX:XX

Excessive thirst for ice water.
03M 07:XX:XX

Extreme thirst during night < cold sweet drinks > water.
03M 07:XX:XX

Extreme thirst during night > ice cold water.
03M 12:XX:XX

Excessive thirst for ice cold water.
03M 27:XX:XX

Excessive thirst for cold drinks on waking.
03M 29:XX:XX

Seemed to be thirsty – just had tea, but still thirsty.
04F 00:XX:XX

Feeling thirsty. Had lots of liquids.
11M 03:XX:XX

Thirsty – drinking water.
12F 06:XX:XX

I'm dehydrating more than usual. I've drank 4litres of water in half the day.
15M 02:XX:XX

I'm constantly drinking water.
15M 07:XX:XX
... and each time I woke up, I was terribly thirsty.
29F 00:22:30

**Thirstless**

Decreased thirst, haven’t drunk any water today.
16F 05:XX:XX

Not been thirsty have had to make myself drink I want to drink thick liquids like a smoothy not thin and watery.
20M 05:01:00

**Nausea**

Craving for savoury food accompanied by slight nausea.
03M 05:XX:XX

Aversion to salty food with slight nausea > rest.
03M 18:XX:XX

Aversion to tobacco smoke almost causing feeling of nausea.
03M 22:XX:XX

Slight nausea after eating > cold water.
03M 25:XX:XX

Feeling nauseous.
12F 17:XX:XX

Had a sip of my beer and felt like throwing up.
15M 00:XX:XX
I tried eating, but I couldn't. The food smelt funny. It was tasteless. I ended up throwing up.
15M 07:XX:XX

After that settled down about 10 minutes later started feeling very nauseous.
16F 00:00:05

Nauseous feeling that afternoon.
16F 00:XX:XX

Don't want to look at rich food, feeling nauseous.
16F 02:XX:XX

Felt nauseous.
22F 00:00:15

Nauseous feeling continued.
22F 00:XX:XX

Only symptom of nausea remained.
22F 01:XX:XX

Slight nausea after taking 3\textsuperscript{rd} powder. Ate after half and hour and it was fine again.
24M 00:XX:XX

Nausea is back.
24 M 02:XX:XX

\textbf{Gaseous (eructations)}

After 5 min (after taking 1\textsuperscript{st} dose) started burping a lot! A lot of gas. After that settled down about 10 minutes later started feeling very nauseous.
16F 00:00:05
Took the second powder around 4. The same symptoms appeared again very gaseous feeling.
16F 00:XX:XX

Gassy feeling. Burping a lot.
22F 00:00:15

**Sensations**

Stomach as if butterflies in it > coffee, <rest.
03M 14:XX:XX

Sensation of emptiness of stomach at suppertime.
03M 24:XX:XX

Tummy felt somewhat warm.
11M 00:XX:XX

Slight heartburn.
11M 05:XX:XX

**Epigastrium**

Gnawing epigastric pain.
02F 04:10:XX

Epigastric pain, worse for deep inspiration and spreading to liver region.
02F 05:02:XX

Pulsating epigastric searing pain, as if hot rod piercing the stomach.
02F 09:XX:XX
4.2.14 ABDOMEN

Bloating

I’m feeling bloated and flatulent.
02F 05:XX:XX

Sensation of over-fullness and bloating of stomach.
03M 02:XX:XX

Feeling of bloatedness in stomach as if too full < water and cold drinks.
03M 07:XX:XX

Groaning of stomach as if bubbles inside with feeling of bloatedness.
03M 11:XX:XX

Feeling bloated.
26M 01:00:30

Tummy feels bloated.
26M 06:13:30

Feeling bloated, a bit flat.
26M 06:13:50

Pain

My abdomen is really tender slightly inferior and to the right of my umbilicus.
02F 12:XX:XX

There is a pain like a hot rod stuck under my ribs into my liver which causes me to double up.
02F 12:XX:XX
Abdomen still sore like yesterday.
02F 13:XX:XX

Slight pain in abdominal region < rubbing, > lying down.
03M 23:XX:XX

Slight cramps.
10M 03:XX:XX

Dull pain in the whole abdomen, in the background, > after eating.
Constant gnawing pain that is in the background.
21M 00:XX:XX

Pain in the whole abdomen after taking the remedy. Dull gnawing pain in the background. Constant gnawing sensation for about 5 minutes – 10 minutes. Started after eating.
21M 01:XX:XX

Abdominal pain soon after taking remedy. Gnawing, dull pain in the whole abdomen. Was little better after I had breakfast 30 minutes after, but continued thereafter.
21M 02:XX:XX

Dull gnawing kind of pain in the abdomen. It becomes a little better after eating but also it continues. Defecation doesn’t make it better.
21M 03:XX:XX

Dull pain in abdomen started at about 09h00 am. It continued till late, 23h00 but was not worse. Nothing made it better or worse.
21M 04:XX:XX

Got a sharp stitch on right side +- 1min.
26M 01:00:30
Cramps in stomach.
28F 07:XX:XX

Discomfort

Uncomfortable in the abdomen area.
26M 07:01:00

Tummy area still uncomfortable.
26M 08:23:00

Had colon discomfort today.
29F 15:XX:XX

My colon has been a bit blocked and uncomfortable this afternoon.
29F 29:XX:XX

Sensations

Normal bowel movement but with gurgling in abdomen afterwards.
02F 09:XX:XX

Eruptions

The rash is still itchy and is now on some other parts of my body, like my stomach and my lower back.
15M 03:03:XX

4.2.15 RECTUM

Noticed a tendency to constipation since starting the proving, but still have the urge to go in the morning.
01F 03:21XX
Bowel motion, then my tongue went numbish.
02F 00:05:30

Bowel movement with intense cramping afterwards, forcing me to bend double.
02F 04:01:XX

Increased bowel movements today.
02F 04:XX:XX

Two loose bowel movements this morning.
02F 10:XX:XX

Three bowel movements today.
02F 18:XX:XX

My bowel movements feel more regular than usual.
06F 01:XX:XX

4.2.16 STOOL

Stool much less in volume.
01F 03:21:30

Dark bowel movement.
02F 08:XX:XX

Had such a loose stool that wouldn't flush.
02F 20:XX:XX

Loose fatty stool again with lots of wind – flatus no odour, but the stool was very offensive and only flushed after 4 attempts.
02F 21:XX:XX
Stool very loose – yellow clay colour.
28F 07:XX:XX

Stool slightly loose and clay coloured.
28F 08:XX:XX

4.2.17 BLADDER

Have drunk 2.5 litres waters, but haven’t needed to go to the loo. Have only been twice today which is very unusual for me.
02F 01:11:XX

Increased urination, but have not drunk much.
02F 07:XX:XX

Urinated four times during the night.
02F 07:XX:XX

Increased urination today (far more than what I drank).
02F 08:XX:XX

Excessive urination in afternoon as if drunken too much water.
03M 15:XX:XX

Excessive urination in morning.
03M 23:XX:XX

4.2.18 KIDNEYS

There is intense shooting, aching pains in my left kidney region.
02F 12:XX:XX
4.2.19 URETHRA

Urine yellow to orange with slight burning of urethra.
03M 26:XX:XX

4.2.20 URINE

Urine yellow to orange with slight burning of urethra.
03M 26:XX:XX

4.2.21 FEMALE GENITALIA / SEX

Excruciating pain in my right ovary.
02F 02:11:30

4.2.22 RESPIRATION

Need to take slow deliberate breaths.
01F 02:22:XX

Breathless from going up 1 flight of stairs, also from opening garage door.
01F 03:21:45

Breathing in through my mouth was like the air had to go over a grate, not smooth at all. It was easy enough to get it in, but almost rattled at the back of my throat.
02F 01:00:XX

Same weird breathing when inhaling as if the air had to go over a grate and rattles at the back of my throat.
02F 03:00:XX

Some funny grating breathing.
02F 04:XX:XX
Breathing difficult and laboured.
02F 05:XX:XX

Laboured breathing, it feels as if I need more air, but < deep inspiration.
02F 06:XX:XX

My breathing has not been smooth.
14M 02:XX:XX

While I was sleeping I experienced a weird pain in my chest area – more towards the right hand side of my chest. It was sharp jabs that lasted for about 3 minutes or so. It was like someone had been throwing needles onto my chest, but from the inside. My breathing turned very heavy for the duration of this sensation.
15M 01:XX:XX

4.2.23 COUGH

Started getting this terrible phlegmy cough.
16F 04:XX:XX

Cough in throat, once start can’t stop. Coughing up white mucus, feel it in the back of my throat and then it just goes down again. Cough throughout the day. Cough feels like a wet throat. Everything just feels heavy, want to cough but don’t have the energy to cough
Pain in chest on coughing, is a sore pain.
16F 05:XX:XX

Have a little cough, but nothing serious.
18M 02:XX:XX

Dry cough started at about 20:00 hrs and continued through the night.
23M 05:XX:XX
Cough stopped at about 03:00 hrs.
23M 06:XX:XX

Cough started after dark again and continued all night.
23M 06:XX:XX

Cough back again! +- 20:00 hrs.
23M 07:XX:XX

Cough stopped at 03:30 hrs.
23M 08:XX:XX

**4.2.24 EXPECTORATION**

Coughing up white mucus, feel it in the back of my throat and then it just goes down again.
16F 05:XX:XX

**4.2.25 CHEST**

**Pain**

Pain in lower part of sternum, central – aching (like you get when you’ve cried a lot).
01F 00:01:00

Lateral chest pain, on right.
02F 00:05:45

Lateral chest pain moved to subcostal region.
02F 00:05:55
Crushing pain on right sternal angle, mid-clavicular line with numbness and tingling down right arm.
02F 06:XX:XX

Pain in my chest – right sternal angle (right side of sternum). Only lasted a few seconds, but so painful it made me catch my breath.
02F 17:XX:XX

While I was sleeping I experienced a weird pain in my chest area – more towards the right hand side of my chest. It was sharp jabs that lasted for about 3 minutes or so. It was like someone had been throwing needles onto my chest, but from the inside. My breathing turned very heavy for the duration of this sensation.
15M 01:XX:XX

Pain in chest on coughing, is a sore pain.
16F 05:XX:XX

Extremely sharp pain developed in left armpit, between the tendons. OW! Movement is hard breathing hurts.
24M 03:XX:XX

Pain (armpit) left with sleep.
24M 04:XX:XX

Having slight chest pains (right side, pectoral).
28F 09:XX:XX

Still having slight chest pains.
28F 10:XX:XX

Slight headache and chest pains.
28F 11:XX:XX
Slight chest pains.
28F 12:XX:XX

Sensations

Hollow tube

Sensation of hollow tube inside, down from thoracic outlet, centrally.
01F 00:02:10

Hollow feeling inside – midchest to abdomen.
01F 01:01:XX

Cold

Cold feeling in chest like alcohol evaporating, spreading to beneath the ribs.
01F 00:02:XX

Oppression

Oppressed feeling in central chest, like there is no room.
01F 02:22:XX

Central heaviness or oppression in sternal region.
02F 02:06:20

My chest feels compressed just over my sternum.
02F 07:XX:XX
Heart

Palpitations

Aware of heart beating in chest, pulse accelerated while standing.
01F 00:03:XX

Palpitations on the left with slight breathlessness >sitting forward.
02F 00:03:45

Palpitations as if blood is thick and sluggish.
02F 00:05:XX

Am aware of my heart beating, near sternal angle and going up to thyroid gland area on the left.
02F 02:05:00

Can feel my apex beat very obviously.
02F 04:13:XX

Can feel my heart beating hard, my whole chest seems to pulsate with it. < lying on the left side. Blood feels hot.
02F 08:XX:XX

Palpitations infrequently, especially after climbing stairs.
02F 11:XX:XX

Heart palpitations came back from 8-10 pm.
02F 19:XX:XX

Palpitations throughout the day, intermittently – no pattern.
02F 20:XX:XX
Irregular rhythm

Sensation heart is out of rhythm.
02F 02:06:XX

Heart taking strain and beating out of rhythm often.
02F 10:XX:XX

Fullness

Sensation of fullness in my heart region, making breathing difficult, < trying to take deep breath.
02F 02:11:XX

Heart sensations back.
02F 03:08:XX

Thick blood

Palpitations as if blood is thick and sluggish.
02F 00:05:XX

Blood feels like its getting stuck in my aorta so it builds up, then suddenly forces through – very uncomfortable.
02F 02:XX:XX

Sensation of thick blood in aorta, causing a feeling of not enough breath in me.
02F 03:02:50

Beating of my heart as if my blood is mashed potato, therefore difficult to force through.
02F 04:13:30
Aware of heart beating in chest, pulse accelerated while standing.
01F 00:03:XX

Heart still doing its thing. Pulse 88 (normally in 50’s).
02F 03:03:00

Pulse 142, with severe pain in my heart – stabbing and radiating down my right arm with numbness and prickling.
02F 05:02:XX

Pulse 60. With laboured breathing, it feels as if I need more air, but < deep inspiration.
02F 06:XX:XX

Pain

While I was driving I had an intense, severe, lancinating pain in my heart and my arm went numb. I slowed down as it was difficult to hold my steering wheel, but it went quite quickly.
02F 05:XX:XX

Pulse 142, with severe pain in my heart – stabbing and radiating down my right arm with numbness and prickling.
02F 05:02:XX

Lymph nodes

My left axillary nodes are up and very tender.
02F 12:XX:XX
Perspiration

Mild to moderate perspiration of thorax during sleep.
03M 21:XX:XX

Sweat during sleep. Wet chest area.
07M 08:XX:XX

4.2.26 BACK

Pain

Left back pain – deep, pulsating and aching, < motion.
02F 02:07:45

My back, knees, head, wrists, ankles are all aching > hot shower.
02F 08:XX:XX

Really sore back as if it’s been bent the wrong way and too far!
02F 11:XX:XX

Back painful in strips going along C3 dermatome – mainly left, sometimes right.
02F 11:XX:XX

I have pains shooting from my left hip up towards my lower thoracic vertebrae.
02F 12:XX:XX

Back pain < bending head forward – sore right down to my knees!
02F 16:XX:XX

Back sore now again that I’m back in bed – pulling, stiff, and tense.
02F 17:XX:XX
Back sore during spinning < leaning forward, > sitting erect.
02F 21:XX:XX

Back aching in afternoon, > sitting and sipping on cold drink.
03M 17:XX:XX

Back is sore.
18M 02:XX:XX

Back and neck are sore.
18 M 05:XX:XX

Back is still a little sore and stiff.
18M 06:XX:XX

Back is still sore.
18M 07:XX:XX

Lots of knots in my back!!
28F 03:XX:XX

**Neck (cervical region)**

My neck and lower back are aching and stiff.
02F 09:XX:XX

Slight neck pain.
10M 12:XX:XX

Back and neck are sore.
18 M 05:XX:XX
Have a terrible pain in my neck if I move my head in either direction. Very painful. Happened very suddenly.
25M 09:11:43

Neck seems a bit better. Can turn it but still a little sore.
25M 09:04:03

Shoulders (dorsal region)

Pain in left trapezius muscle at back and left cervical region at about C5 on the side, in the groove between the two muscles. It is a sharp pain that comes and goes.
01F 01:07:XX

Shoulders painful, neck stiff.
28F 11:XX:XX

Shoulders painful, neck stiff.
28F 11:XX:XX

Shoulders sore and lower back became painful later in day.
28F 12:XX:XX

Lower back (lumbar region)

Lower back pain > physical motion.
02F 00:08:XX

Drawing pain in lower back (like PMS).
02F 02:17:30

My neck and lower back are aching and stiff.
02F 09:XX:XX
Lower back pain – dull, aching > lying on abdomen with left leg bent.
02F 10:XX:XX

Lower mid back feels broken again. So difficult to get comfortable lying down.
02F 12:XX:XX

Shoulders sore and lower back became painful later in day.
28F 12:XX:XX

Still having lower back pain. Pain works out back, over kidneys and just above bum.
28F 13:XX:XX

Sore muscles and lower back.
30M 00:02:00

Coccyx

Coccyx area hurt while running.
02F 20:XX:XX

Stiffness

My whole back is really stiff though – so sore if I bend my neck forward – can feel it pulling all the way down to my coccyx.
02F 15:XX:XX

Back stiff – feels tight.
02F 17:XX:XX

Stiffness of back as if muscles strained > cold application.
03M 24:XX:XX
Stiffness of back < movement, > rest.
03M 30:XX:XX

Neck (cervical region)

My neck and lower back are aching and stiff.
02F 09:XX:XX

Neck stiffness on waking.
03M 04:XX:XX

Mild stiffness in neck > cold application.
03M 09:XX:XX

Stiffness of neck in morning > cold application.
03M 27:XX:XX

Stiffness of neck muscles on waking.
03M 31:XX:XX

Muscular tension in upper back, across shoulders and neck.
28F 01:14:30

Neck still stiff.
28F 02:XX:XX

Neck stiff and slight headache – back lower head.
28F 02:09:00

Lots of knots in my back!! Neck stiff.
28F 03:XX:XX

Neck very stiff.
28F 04:XX:XX
Neck stiff.
28F 05:XX:XX

Neck very stiff and have a headache.
28F 06:XX:XX

Neck stiff.
28F 07:XX:XX

Neck still stiff.
28F 08:XX:XX

Still have a tense neck.
28F 09:XX:XX

Shoulders painful, neck stiff.
28F 11:XX:XX

Stiff neck underneath skull.
30M 00:02:00

Still feeling the stiff neck under the back of my skull.
30M 03:XX:XX

Shoulders (dorsal region)

Stiffness in muscles medial to left scapula.
01F 01:07:XX

Shoulders a bit stiff.
26M 25:XX:XX
Muscular tension in upper back, across shoulders and neck.
28F 01:14:30

Lower back (lumbar region)

My neck and lower back are aching and stiff.
02F 09:XX:XX

Sensations

Pins and needles sensation from base of spine, radiating up and out.
02F 05:XX:XX

My back is stinging.
02F 12:XX:XX

Eruptions

I've noticed a couple of pimples on the back of my neck – more to the right hand side. They are very itchy.
15M 02:11:XX

The rash at the back of my neck is getting worse – it is now constantly itching towards a burning effect.
15M 03:XX:XX

The rash is still itchy and is now on some other parts of my body, like my stomach and my lower back.
15M 03:03:XX

Perspiration

Feel feverish with sweating on my spine.
02F 04:XX:XX
4.2.27 EXTREMITIES

Cold

Feet and hands cold.
01F 00:01:XX

Coldness in hands and feet, feel like the coldness you experience when alcohol evaporates from your skin.
01F 00:02:XX

My feet and hands are cold.
14M 02:02:XX

Hands and feet are cold.
14M 02:10:XX

Coldness spreading up legs and in fingers as well. Coldness predominantly on right side.
02F 00:06:XX

Cold feet.
01F 00:01:00

Feet are like ice blocks.
01F 01:00:30

Toes are freezing cold, like a slush puppy.
02F 00:06:20

Hands cold.
02F 07:XX:XX
Hands icy.
02F 07:XX:XX

Cold perspiration all over my arms.
02F 04:XX:XX

Cold tingling pain in left arm > holding on to arm, > rubbing.
01F 00:01:XX

**Sensations**

*Tingling, prickling, pulsating*

Tingling, numbness, weakness in left shoulder and arm (C4, C5, C6 distribution).
01F 00:01:XX

Pounding sensation going down right arm, with tingling in baby and ring fingers.
02F 03:03:XX

Crushing pain on right sternal angle, mid-clavicular line with numbness and tingling down right arm.
02F 06:XX:XX

Fingers tingling.
02F 00:05:55

After taking first dose my fingers felt tingly and the joints in my fingers felt a bit stiff.
06F 00:00:XX

Ringing like sensation in ears accompanied by tingling of fingers of right hand.
03M 09:XX:XX
Pulsating in fingertips.
02F 02:05:XX

My shins are prickling.
02F 00:08:XX

Mild tingly sensation of toes, almost pins and needle like.
03M 01:08:XX

Mild tingling sensation of toes as if pins and needles.
03M 03:03:XX

Weakness

Tingling, numbness, weakness in left shoulder and arm (C4, C5, C6 distribution).
01F 00:01:XX

Left arm weaker than right.
01F 01:01:XX

Weakness and heaviness in left hand (ulnar distribution).
01F 00:01:XX

Legs weak on walking.
01F 00:02:00

Legs feel as if they will just give way due to weakness when walking.
01F 00:04:XX

Legs still very weak, shaky.
01F 00:08:XX
Legs still feeling weak.
01:06:XX

Legs still weak at least when I woke up.
01F 00:23:XX

Heaviness and tiredness

Heaviness of extremities.
03M 01:02:XX

Slight heaviness of extremities accompanied by stiffness in legs > exertion, < rest.
03M 31:XX:XX

Tiredness of extremities.
03M 06:XX:XX

Heaviness of legs > rest.
03M 08:XX:XX

Mild tiredness of legs.
03M 28:XX:XX

Weakness and heaviness in left hand (ulnar distribution).
01F 00:01:XX

Legs very tired – feet feel like they are broken.
26M 24:XX:XX

Numbness

Feeling of relaxation of extremities.
03M 17:XX:XX
Slight numbness of extremities, as if tired.
03M 22:XX:XX

Tingling, numbness, weakness in left shoulder and arm (C4, C5, C6
distribution).
01F 00:01:XX

Lame feeling in left arm > holding it to body with the other arm.
01F 02:22:XX

Crushing pain on right sternal angle, mid-clavicular line with numbness and
tingling down right arm.
02F 06:XX:XX

Fingers feel weird and numbish.
02F 00:06:XX

I have a numb sensation down my left leg, especially in my thigh and pains
shooting from my left hip up towards my lower thoracic vertebrae.
02F 12:XX:XX

My left thigh is still numb.
02F 12:XX:XX

My left thigh is still numb.
02F 13:XX:XX

Thigh numb.
02F 13:XX:XX

My thighs are both so numb – they’re sore – a deep aching > rubbing.
02F 15:XX:XX
Toes went numb on right foot, just my lateral three.
02F 03:00:XX

Jittery, jelly, shaky

Legs still feel jittery, in lower part of quadriceps, above knee.
01F 00:04:15

Legs still very weak, shakily.
01F 00:08:XX

Legs still shaky.
01F 00:11:XX

Legs like jelly.
01F 00:23:XX

Legs like jelly again.
01F 02:00:XX

Legs like jelly still.
01F 02:03:30

Legs absolutely like jelly, just want to give way. No strength in them.
01F 02:06:20

Stiffness

Slight stiffness of extremities > stretching.
03M 11:XX:XX

Moderate stiffness of muscles > stretching.
03M 13:XX:XX
Extremities stiff throughout midmorning and midday, > stretching and lying down.
03M 19:XX:XX

Mild stiffness of left calf muscle.
03M 25:XX:XX

Stiffness of extremities on waking > stretching.
03M 29:XX:XX

Left knee a bit stiff.
26M 24:XX:XX

Pain

Joints

Aching, shooting pain in joints.
02F 07:XX:XX

Joints are sore – like I imagine gout would be – feels full and obstructed.
02F 11:XX:XX

Cold tingling pain in left arm > holding on to arm, > rubbing.
01F 00:01:XX

Numb and tingling pain in left arm, in shoulder, biceps and pronator > holding arm across body, > rubbing and massaging.
01F 02:00:XX

Pain down right arm to ring and baby finger with tingling.
02F 00:05:45
Legs are so sore — don’t know what to do with them — pain is extending in to my calves (lateral aspects). > hot water bath. I then felt like Deep Heat had been rubbed all over, so my legs were icy, but burning.

02F 15:XX:XX

My legs hurt and are worse lying down.

02F 15:XX:XX

Excruciating pain in right knee with every motion, like my nerves had been severed. Only lasted a short while, then similar pain in my right ovary and finally on the sole of my right foot.

02F 02:11:30

My bones are sore, especially my knees and ankles.

02F 07:XX:XX

My knees and ankles are aching > hot shower.

02F 08:XX:XX

Periodical cramping in right calf muscle < cold application, > rubbing.

03M 18:XX:XX

Ankle sore after running – felt weak and strained.

02F 20:XX:XX

Feet sore on plantar surface as if standing too long > sitting, massage.

03M 16:XX:XX

Sore muscles and lower back.

30M 00:02:00
Joints were noticeably stiff and sore.
30M 00:06:13

Pain in my right knee in the core. Started making walking difficult.
24M 08:XX:XX

Knee pain.
24M 10:XX:XX

Knee acting up.
24M 13:XX:XX

Left calf muscle very achy and cramping (till 12:00).
26M 04:01:30

**Movement**

Walking with funny small steps, like I'm autistic or something.
01F 00:02:XX

Trip a lot – my left foot seems to stick to the ground every so often.
01F 00:04:XX

Unstable on my feet, keep overbalancing.
02F 02:05:XX

**Itching and chafing**

Constant itchy feeling of anterior part of arms > washing.
03M 12:XX:XX

Skin slightly itchy on extremities > scratching.
03M 28:XX:XX
Feeling uncomfortable, as if my legs were almost chafing.  
14M 15:XX:XX

**Eruptions**

Two skin lesions – left arm and peri-axillar. Red, about 5mm with small pustules and vesicles – very itchy.  
01F 02:11:XX

I noticed that the large skin tag on my inner leg was really bulbous or swollen, as if there was a big build-up of blood.  
14M 14:XX:XX

The rash has gone down to my left leg, but is still itchy.  
15M 05:XX:XX

**4.2.28 SLEEP**

**Difficulty falling asleep**

Difficult sleeping.  
03M 27:XX:XX

Difficult falling asleep.  
07M 00:XX:XX

Could not fall asleep – lay awake for about 1 ½ hours.  
07M 10:XX:XX

Woke up in the middle of the night. Took a while to fall asleep.  
14M 01:XX:XX

I’ve been lying down for a while, but I can’t sleep.  
14M 02:05:XX
I am still unable to fall asleep – I'm feeling restless again. Only fell asleep at 04:30am.
15M 06:XX:XX

I decided to lock myself in my room and get some sleep. Of course that didn't happen. I just kept tossing and turning on my bed.
15M 07:XX:XX

Could not fall off to sleep. Felt excited in normal routine. Too enlivened to sleep. Only fell off to sleep the next morning.
16F 00:XX:XX

Difficulty falling asleep. Thoughts rushing in mind unable to stop thinking over work done in day.
20M 06:XX:XX

Woke up during the night, tired but unable to sleep.
20M 07:XX:XX

Could not get to sleep last night. When I did I woke up all the time. Woke up very early too.
25M 09:XX:XX

Went to bed at 9:30 pm last night, because I was really tired. Woke-up at 3 am this morning, thinking it was time to get up. Tried to go back to sleep, but no luck.
29F 01:21:15

Woke up at 3am this morning. Couldn’t sleep.
29F 02:22:00
Disturbed, bad sleep

Disturbed sleep.
02F 01:17:XX

Slept really badly and had nightmares.
02F 06:XX:XX

Slept really badly – lots of tossing and turning.
02F 10:XX:XX

Can’t take it anymore – had such a shocking night, so eventually got up at 4am.
02F 15:XX:XX

Didn’t sleep well last night.
06F 01:XX:XX

I didn’t sleep too well.
06F 05:XX:XX

Slept really badly, kept waking up.
12F 17:XX:XX

Slept very badly, well maybe just woke up a lot. Quite uncomfortable in bed.
18M 01:XX:XX

Didn’t sleep well.
20M 08:XX:XX

Finding sleep much deeper. Not fighting the world during sleep. Waking up more refreshed (curative).
23M 01:11:30
Broken sleep but feeling OK.
23M 11:XX:XX

Did not sleep well.
26M 07:00:00

Did not sleep well. Feeling very tired.
26M 10:00:00

Did not sleep well, did not want to get up.
26M 17:XX:XX

Slept very broken.
26M 19:XX:XX

Slept well although very restless.
26M 21:XX:XX

I slept very badly. My sleep seemed very "shallow".
29F 23:XX:XX

Restless, tossing and turning

Restless sleep – lots of tossing and turning.
02F 10:XX:XX

Another restless night.
02F 11:XX:XX

Woke up after a disturbed night again – so much tossing and turning.
02F 12:XX:XX

Another bad night – woke up at 2am, then tossed and turned from then.
02F 16:XX:XX
Restless sleep with intense thirst for water.
03M 01:XX:XX

Restless sleep with tossing and turning and craving for water.
03M 02:XX:XX

Restless sleep > lying on back.
03M 04:XX:XX

Restless sleep > lying on left side. Restlessness < 11pm – 1am.
03M 06:XX:XX

Restless sleep > lying on left side.
03M 07:XX:XX

Sleep restless with intervals of awakening at night.
03M 13:XX:XX

Restless sleep > lying on back.
03M 17:XX:XX

Restless sleep, awaken 1am.
03M 26:XX:XX

I decided to lock myself in my room and get some sleep. Of course that didn’t happen. I just kept tossing and turning on my bed.
15M 07:XX:XX

**Waking frequently**

Slept reasonably well, only woke a few times.
02F 17:XX:XX
Woke up twice in the night for no apparent reason.
12F 01:XX:XX

Woke up twice during the night.
12F 02:XX:XX

Woke up during the night – twice.
12F 03:XX:XX

Slept really badly, kept waking up.
12F 17:XX:XX

Woke up during the night.
14M 00:XX:XX

Woke up in the middle of the night. Took a while to fall asleep.
14M 01:XX:XX

Woke up in the middle of the night to go to the bathroom and my eyes felt a little tired.
14M 03:XX:XX

Woke up in the middle of the night for the bathroom.
14M 04:XX:XX

Slept very badly, well maybe just woke up a lot. Quite uncomfortable in bed.
18M 01:XX:XX

Maybe slept for six hours but woke up quite a bit.
18M 03:XX:XX

Could not get to sleep last night. When I did I woke up all the time. Woke up very early too.
25M 09:XX:XX
Woke up a lot last night which is not normal.
25M 14:XX:XX

Woke up a lot again last night.
25M 15:XX:XX

**Waking times**

1am

Woke up at 1am and have been feeling 'vrot' since then.
02F 08:XX:XX

Restless sleep, awaken 1am.
03M 26:XX:XX

Woke up at am feeling restless. I tried every trick in the book to fall back to sleep, but I only managed to fall asleep again at 03:30am.
15M 04:XX:XX

Just woke up at 1am and can't sleep anymore.
15M 05:XX:XX

2am

Lay awake from 2-3am.
01F 03:21:30

Another bad night – woke up at 2am, then tossed and turned from then. Went and tried other beds at home, hoping I would find a better one, but nothing worked.
02F 16:XX:XX
Awaken 2am for ice water.
03M 21:XX:XX

Awaken from sleep at 2am as if from noise.
03M 28:XX:XX

Difficulty sleeping, waking at 2am – 4am, > lying on back.
03M 30:XX:XX

Woke up around 2am – could not fall asleep for about 1 ½ hours.
07M 03:XX:XX

3am

Slept badly last night, woke at 3am and that was it for me – simply awake, not stressed about test today.
01F 09:XX:XX

Woke up at 3am, couldn’t go back to sleep.
04F 02:XX:XX

Again woke at 3am, too scared to go back to sleep, in case I overslept.
04F 03:XX:XX

Woke at 3am and couldn’t get back to sleep.
12F 10:XX:XX

Woke at 3am.
12F 12:XX:XX

Woke up at 3am for no apparent reason.
12F 23:XX:XX
Pain that is dull on the left side of the face. The pain woke me up at 03:00. Normally I wake up at 08:00.
21M 05:XX:XX

Went to bed at 9:30 pm last night, because I was really tired. Woke-up at 3 am this morning, thinking it was time to get up. Tried to go back to sleep, but no luck.
29F 01:21:15

Woke up at 3am this morning. Couldn’t sleep.
29F 02:22:00

4am

Woke up at 4am last night, lay awake until after 6am, and slept again until 8am.
01F 01:22:XX

Woke up at 4am for no apparent reason.
12F 00:XX:XX

Woke up at 4am.
12F 09:XX:XX

5am

Woke at 5am feeling fine.
01F 02:19:XX

Woke up at 1am again and then at 5am.
02F 09:XX:XX
Woke up at 5am and felt refreshed from sleep as apposed to waking up tired.
14M 07:XX:XX

Early waking

Woke up early, which is very unusual considering what time I slept.
16F 01:XX:XX

Woke up at 6:30 even though I was still tired.
29F 07:00:15

Falling asleep early

Fell asleep immediately – deep sleep.
16F 01:XX:XX

Fell asleep almost immediately after the movie had ended.
16F 03:XX:XX

Went to bed at 9:30 pm last night, because I was really tired.
29F 01:21:15

Falling asleep late

Went to bed a lot later than usual.
14M 01:XX:XX

Sensations on waking

Refreshed

Woke at 5am feeling fine.
01F 02:19:XX
Early waking in the morning with a feeling of full alertness.
03M 15:XX:XX

Woke up at 5am and felt refreshed from sleep as apposed to waking up tired.
14M 07:XX:XX

Woke up quite refreshed, despite going to sleep only after 12 o' clock.
14M 11:XX:XX

Unrefreshed

Extreme tiredness on waking.
03M 09:XX:XX

Woke up not feeling totally refreshed, although I slept through.
12F 06:XX:XX

Slept the whole day yesterday, just want to close my eyes and sleep. I wake up feeling the same, but I just want to sleep more.
16F 05:XX:XX

Could not wake up very easily.
18M 04:XX:XX

Woke up at 6:30 even though I was still tired.
29F 07:00:15

Anxiety

Anxiety on waking > sunlight with excessive yawning.
03M 12:XX:XX
Disorientated

Usually it takes a while for me to drift off to sleep and this time I didn't remember falling asleep and I woke up disorientated, wasn't sure where I was.
06F 01:XX:XX

Yawning

Excessive yawning until 10am.
03M 03:XX:XX

Excessive yawning on waking.
03M 13:XX:XX

4.2.29 DREAMS

Diseases, sick people

Three of our school kids were admitted to hospital, the conditions were appalling. The one girl was made to sleep on a "mattress" that was 3cm thick, on the floor and it was about 60cm by 1m. The child was grade 10 and too big for something that small. It made me really sad that I couldn't do anything to help.
02F 01:XX:XX

Dreamt about my gran – we went to a wonderful restaurant, but she ate two mouthfuls and spent the rest of the time in the bathroom with gastro and LOUD eructations. So loud it disturbed our conversations. I was so embarrassed, so woke myself up.
02F 04:XX:XX
Started dreaming about Dunn's disease – it was an assignment we were given in Diagnostics to research.

02F 06:XX:XX

Had nightmares about living in a third world place and there were so many sick people – really sick and there was nothing I could do to help them! I kept waking myself up to try and get rid of the dream, but it kept coming back so eventually I just got out of bed.

02F 07:XX:XX

A customer came into the health shop yesterday and wanted something for his sick maid. He suspects HIV and was talking about how inhumane it is and how difficult it is when someone close to you is affected...so sad to see a big strong man so vulnerable. The pics we've seen in Diagnostics of cutaneous HIV lesions were also all over my dream.

02F 07:XX:XX

Dreamt that our head kitchen lady decided to work as a cleaner as our cleaner is sick and so the chef decided that it is more important that the house is clean.

02F 03:XX:XX

Dreamt I had a necrotising ulcer on my lip which just wouldn't heal.

02F 09:XX:XX

Dreamt doctors diagnosed me with restless leg syndrome.

02F 15:XX:XX

Paralysed

Dreamt I was lying on the couch (my favourite place) and I was paralysed. Couldn't even open my eyes – tried to call my daughter and she didn't respond. Couldn't sit up or move off the couch, so managed to fall on to the
floor. Couldn’t cry out to my daughter, who I thought was in the lounge. Suddenly I got all my senses back and she was not in the lounge anyway.

04F 00:XX:XX

Had a frightening experience. Was semi-conscious – felt like I was dreaming. There seemed to be someone in my room, but couldn’t see distinct features of the person. They touched my leg to see if I was awake and I was paralyzed and could only move my eyes.

06F 01:XX:XX

**Children and feeling helpless**

Three of our school kids were admitted to hospital, the conditions were appalling. The one girl was made to sleep on a “mattress” that was 3cm thick, on the floor and it was about 60cm by 1m. The child was grade 10 and too big for something that small. It made me really sad that I couldn’t do anything to help.

02F 01:XX:XX

Dreamt of a fire drill at school. It was disastrous. No staff to help, kids loud and uncooperative.

02F 11:XX:XX

Driving around in a bus in Australia with no water and no loo, but we dropped kids off at the ends of some roads, out of cell phone range, so they could wait for their parents. Luckily it is safe in Australia.

02F 11:XX:XX

A baby died from dehydration, and each time I woke up, I was terribly thirsty.

29F 00:22:30
Had so many horrible dreams last night. Dreamt that a rocket landed and exploded on a school. I ran to help them, and most of the injured children were very young. Some were dying. I remember being in tears about it.
29F 22:XX:XX

**Family**

I dreamt of my mum and I was very proud of her.
02F 01:XX:XX

Dreamt about my gran – we went to a wonderful restaurant, but she ate two mouthfuls and spent the rest of the time in the bathroom with gastro and LOUD eructations. So loud it disturbed our conversations. I was so embarrassed, so woke myself up.
02F 04:XX:XX

Dreamt my sister was little again – about 4 years old and she said she was in love with mum.
02F 15:XX:XX

I slept fine, except for dreaming a lot again. Can't remember details from the dreams though. I do remember old friends and my parents being in the dream.
29F 25:XX:XX

**People from the past**

Someone phoned and asked for my ex-bosses in Switzerland.
02F 15:XX:XX

Dreamt I went to work for my old boss in Switzerland and there were all sorts of people living there as well and I didn't understand how they all fitted in. So confusing!
02F 20:XX:XX
I had one of those dreams again where the background keeps changing. I was driving a blue Golf Velocity. My ex-girlfriend was crossing the street – she was wearing a green silk wrap skirt and two layered boob tops. I just knocked her down. When I get out, she stands up and cleans herself up. All of a sudden all her friends are there and they shout and scream at me. Without saying a word I get back into the car and drive off. The next thing she’s sitting on the passenger seat talking to me as if nothing happened.

15M 04:XX:XX

Had dreams about my sister’s old boyfriend.

18M 03:XX:XX

I slept fine, except for dreaming a lot again. Can’t remember details from the dreams though. I do remember old friends and my parents being in the dream.

29F 25:XX:XX

**Strangers**

Dreamt I went to work for my old boss in Switzerland and there were all sorts of people living there as well and I didn’t understand how they all fitted in. So confusing!

02F 20:XX:XX

I was lost again, walking around PMB trying to find places. We were at some holiday home and then at one stage I was on the loo and everybody started walking through the bathroom. I was flabbergasted, then just tried to blend in when I realised I couldn’t get them all out. Fortunately I was wearing a long skirt so I could blend in.

02F 01:XX:XX
This was a longer dream, but all I can remember that I was on the loo and some guy came in to throw his loo paper into my loo. He saw me, but just threw it, hoping for it to find its way into the bowl. So disgusting.

02F 04:XX:XX

I am having weird dreams. I'm with people I have never met and the background keeps changing to different places.

15M 00:XX:XX

**Travelling and exploring new places**

More travelling and exploring a new, foreign country. We then had to move to the next place and so had to pack again and do all our washing. I found someone's burger in amongst my clothes – it was in a Tupperware dish. I started my menses, but didn't have any tampons, so asked the others if I could use some until I managed to buy more. One girl said I could, but made such a fuss about not having many left and then continued packing and didn't give any to me. I waited and still nothing, so I went back to get my wallet and saw her tampons on the top of her bag and helped myself to one. She walked in just afterwards and I felt so guilty, because I felt like I had stolen something.

02F 04:XX:XX

Driving around in a bus in Australia with no water and no loo, but we dropped kids off at the ends of some roads, out of cell phone range, so they could wait for their parents. Luckily it is safe in Australia.

02F 11:XX:XX

I am having weird dreams. I'm with people I have never met and the background keeps changing to different places.

15M 00:XX:XX

Cleaning out our old home and discovered another whole building we hadn't come across before.

02F 11:XX:XX
Changing backgrounds and blending in

I was lost again, walking around PMB trying to find places. We were at some holiday home and then at one stage I was on the loo and everybody started walking through the bathroom. I was flabbergasted, then just tried to blend in when I realised I couldn’t get them all out. Fortunately I was wearing a long skirt so I could blend in.

02F 01:XX:XX

I am having weird dreams. I’m with people I have never met and the background keeps changing to different places.

15M 00:XX:XX

I had one of those dreams again where the background keeps changing. I was driving a blue Golf Velocity. My ex-girlfriend was crossing the street – she was wearing a green silk wrap skirt and two layered boob tops. I just knocked her down. When I get out, she stands up and cleans herself up. All of a sudden all her friends are there and they shout and scream at me. Without saying a word I get back into the car and drive off. The next thing she’s sitting on the passenger seat talking to me as if nothing happened.

15M 04:XX:XX

I had the same dream as last night.

15M 05:XX:XX

Colours

Green, blue, purple, pink

I had one of those dreams again where the background keeps changing. I was driving a blue Golf Velocity. My ex-girlfriend was crossing the street – she was wearing a green silk wrap skirt and two layered boob tops. I just knocked her down. When I get out, she stands up and cleans herself up. All of a sudden all her friends are there and they shout and scream at me. Without
saying a word I get back into the car and drive off. The next thing she’s sitting on the passenger seat talking to me as if nothing happened.

15M 04:XX:XX

I had a dream about tennis, but can’t remember much except that it was on a clay court and we were watching a big match – not Wimbledon as there was no purple / green and it was clay.

02F 05:XX:XX

Dreamt a friend of my granddad’s got married in a bright green suit with a pink shirt – he looked like a watermelon!

02F 15:XX:XX

**Cheating**

My husband and I went for a walk with a friend of mine, up on a hill. In full view they were kissing, so her husband and I kissed as well.

01F 05:XX:XX

We were writing a diagnostics multiple choice test and we had access to a printed model answer sheet, which we openly used.

01F 05:XX:XX

More travelling and exploring a new, foreign country. We then had to move to the next place and so had to pack again and do all our washing. I found someone’s burger in amongst my clothes – it was in a Tupperware dish. I started my menses, but didn’t have any tampons, so asked the others if I could use some until I managed to buy more. One girl said I could, but made such a fuss about not having many left and then continued packing and didn’t give any to me. I waited and still nothing, so I went back to get my wallet and saw her tampons on the top of her bag and helped myself to one. She walked in just afterwards and I felt so guilty, because I felt like I had stolen something.

02F 04:XX:XX
Toilets, disgust and embarrassment

I was lost again, walking around PMB trying to find places. We were at some holiday home and then at one stage I was on the loo and everybody started walking through the bathroom. I was flabbergasted, then just tried to blend in when I realised I couldn’t get them all out. Fortunately I was wearing a long skirt so I could blend in.

02F 01:XX:XX

This was a longer dream, but all I can remember that I was on the loo and some guy came in to throw his loo paper into my loo. He saw me, but just threw it, hoping for it to find it’s way into the bowl. So disgusting.

02F 04:XX:XX

Dreamt about my gran – we went to a wonderful restaurant, but she ate two mouthfuls and spent the rest of the time in the bathroom with gastro and LOUD eructations. So loud it disturbed our conversations. I was so embarrassed, so woke myself up.

02F 04:XX:XX

Water

Something to do with swimming in our old pool. Someone had pushed a friends little son in and he was crying as it was so cold. We decided to find out exactly how cold it was and went swimming as well.

02F 04:XX:XX

Dreamt about sunny day at the ocean.

03M 00:XX:XX

Dreams of lakes and the ocean and fish.

03M 03:XX:XX
Dreams of rivers and rainstorms.
03M 07:XX:XX

Dreams of ocean and seaside.
03M 08:XX:XX

Dreams of rain in the evening.
03M 09:XX:XX

Dreams of water sports and ocean.
03M 14:XX:XX

Dreams of rivers.
03M 27:XX:XX

Dreams of water.
03M 28:XX:XX

Oh, dreamt of a sinking ship.
02F 14:XX:XX

Sports

I had a dream about tennis, but can't remember much except that it was on a clay court and we were watching a big match – not Wimbledon as there was no purple / green and it was clay.
02F 05:XX:XX

Dreams of water sports and ocean.
03M 14:XX:XX
Dreamt we played hockey against a foreign team and the referee was shocking. We thrashed them but our form wasn’t good at all – we were the better team by far, but we fell apart as far as teamwork and structure went.
02F 09:XX:XX

Dreams of skydiving.
03M 19:XX:XX

Dreams of overexertion of body. Excessive exercise.
03M 23:XX:XX

Car damage

Dreamt my car was broken into and badly damaged.
02F 09:XX:XX

Daily life, ordinary experiences

2 very vivid dreams – not unpleasant but very realistic – involved people I know in ordinary experiences.
28F 06:XX:XX

Had a lot of dreams last night. Dreamt about my studies, body parts (Anatomy and Physiology).
29F 00:22:30

Slept well, although I dreamt a lot about Anatomy, of course.
29F 12:XX:XX

Had a restless night. Dreamt a lot about studies.
29F 14:XX:XX

I also dreamt about my studies and going to class with all my mates from tech.
29F 22:XX:XX
I dreamt all night about Anatomy and Topography, doing tests on them at moment.
29F 23:XX:XX

Still dreaming a lot though. Can’t remember the details, but I can sort of remember that it entailed my studies. Kind of underlying theme the whole time.
29F 26:XX:XX

Started dreaming about Dunn’s disease – it was an assignment we were given in Diagnostics to research.
02F 06:XX:XX

Adventurous dreams

Adventurous dreams (of adventures).
20M 01:XX:XX

Bad, disturbing dreams

Slept really badly and had nightmares.
02F 06:XX:XX

Woke up after disturbing dream.
07M 08:XX:XX

Had a bad dream.
12F 17:XX:XX

Had a bad, disturbing dream.
12F 25:XX:XX
Bad dream.
12F 26:XX:XX

Bad dream.
12F 29:XX:XX

Dreams – nightmare – fearful. Unable to remember dreams.
20M 07:XX:XX

Had so many horrible dreams last night.
29F 22:XX:XX

Vivid dreams

Remember having very vivid dreams, which are close to situations happening in "real" life.
18M 03:XX:XX

Very vivid dreams. Difficult to determine reality from dream sequences.
18M 04:XX:XX

2 very vivid dreams – not unpleasant but very realistic – involved people I know in ordinary experiences.
28F 06:XX:XX

Many dreams

Slept well – lots of dreams.
26M 01:12:00

Slept OK. Lots of dreams – overactive mind!!
26M 09:23:30
Had a lot of dreams last night. Dreamt about my studies, body parts (Anatomy and Physiology). A baby died from dehydration, and each time I woke up, I was terribly thirsty.

29F 00:22:30

Slept well, although I dreamt a lot about Anatomy, of course.

29F 12:XX:XX

Had a restless night. Dreamt a lot about studies.

29F 14:XX:XX

Had so many horrible dreams last night.

29F 22:XX:XX

I slept much better last night, compared to the night before. I still dreamt a lot though. Can’t remember much about my dreams, but I do remember dreaming a lot.

29F 24:XX:XX

I slept fine, except for dreaming a lot again.

29F 25:XX:XX

Still dreaming a lot though.

29F 26:XX:XX

Forgetting dreams

Can’t remember dreams.

04F 04:XX:XX

Can’t remember dreams.

06F 05:XX:XX
Had a few dreams again last night, but can't remember them – try hard to remember, feel it's almost coming, then it disappears.

02F 13:XX:XX

Dreamt, but can’t remember.

02F 14:XX:XX

Had a few dreams, but I cannot remember them very well.

29F 01:21:15

I slept much better last night, compared to the night before. I still dreamt a lot though. Can’t remember much about my dreams, but I do remember dreaming a lot.

29F 24:XX:XX

4.2.30 CHILL

Sweating and cold at the same time.

02F 00:07:30

My temperature keeps spiking, so sweat literally drips off me, then within seconds I have a fleece on and am icy cold.

02F 12:XX:XX

4.2.31 FEVER

Feel feverish with sweating on my spine and cold perspiration all over my arms.

02F 04:XX:XX

Not sure if I’m hot or cold – too hot for a jersey and too cold without. Sweating, but hairs on my arms stand up if I push my sleeves up – too cold.

02F 05:06:XX
Sweating and cold at the same time, mainly sweating on the left.
02F 07:XX:XX

Feel really feverish with my skin hypersensitive to movement or a breeze.
02F 07:XX:XX

Fever up and down.
02F 10:XX:XX

Fever went high again at night – woke up sweating.
02F 11:XX:XX

Temperature hasn’t stabilised from freezing to really hot and sweating.
02F 11:XX:XX

My temperature keeps spiking, so sweat literally drips off me, then within seconds I have a fleece on and am icy cold.
02F 12:XX:XX

My fevers are fluctuating still. When hot all I want is to be cooled – fanning or cold water – but only on my face.
02F 13:XX:XX

Had a fever.
16F 04:XX:XX

**Internal heat, externally cold**

Woke up at 1 am boiling inside, but my skin was cold.
02F 07:XX:XX

Hot flushes, fever but still feel chilled. Face feels hot, but feel cold to touch, feel hot inside.
02F 09:XX:XX
Feel hot inside and cold outside, better for wrapping warmly. Feel hot inside all the time, but cold and shivery at the same time.
16F 05:XX:XX

4.2.32 PERSPIRATION

Sweating mainly on the left.
02F 07:XX:XX

I am sweating like mad, only axillary sweat. I have to keep my arms close, but that just makes me hotter.
02F 08:XX:XX

Had breakfast and sweated so much. It as running down my face, arms, back, everywhere.
02F 10:XX:XX

Fever went high again at night – woke up sweating.
02F 11:XX:XX

Temperature hasn’t stabilised from freezing to really hot and sweating.
02F 11:XX:XX

My temperature keeps spiking, so sweat literally drips off me, then within seconds I have a fleece on and am icy cold.
02F 12:XX:XX

Mild to moderate perspiration of thorax during sleep.
03M 21:XX:XX

Sweat during sleep. Wet chest area.
07M 08:XX:XX
Body feels clammy (perspiration).
26M 20:XX:XX

4.2.33 SKIN

Eruptions and itching

Two skin lesions – left arm and peri-axillar. Red, about 5mm with small pustules and vesicles – very itchy.
01F 02:11:XX

Lesion on arm started to itch a lot for about ½ hour.
01F 03:06:XX

I have a big red patch on my left, lateral part of my scapula that’s itching, burning and slightly raised.
02F 07:XX:XX

Red patch on left scapula VERY itchy and stinging.
02F 09:XX:XX

Pustules obvious on rash on scapula.
02F 11:XX:XX

Skin starting to itch a bit, especially over skin lesion.
02F 13:XX:XX

I’ve noticed a couple of pimples on the back of my neck – more to the right hand side. They are very itchy.
15M 02:11:XX

The rash at the back of my neck is getting worse – it is now constantly itching towards a burning effect.
15M 03:XX:XX
The rash is still itchy and is now on some other parts of my body, like my stomach and my lower back.
15M 03:03:XX

The rash has gone down to my left leg, but is still itchy.
15M 05:XX:XX

Skin slightly itchy on extremities > scratching.
03M 28:XX:XX

Skin is occasionally very itchy in places. More so than normal and I never noticed this before.
24M 04:XX:XX

Eczema has all but disappeared.
24M 04:XX:XX

**Boil**

Found a boil on left, between anus and vagina – no head on boil.
28F 03:12:30

Am aware of boil but it’s not too sore.
28F 04:XX:XX

**Growths**

I noticed that the large skin tag on my inner leg was really bulbous or swollen, as if there was a big build-up of blood.
14M 14:XX:XX

My skin tag is still dark red.
14M 15:XX:XX
My skin tag is not as swollen, but is still dark red.
14M 15:XX:XX

I see the swelling of the skin tag has gone down. It is also a lighter shade of pink.
14M 16:XX:XX

Sensitive

Skin sensitive to touch, breeze etc.
02F 07:05:40

Hot but my skin is too sensitive, so don't want to take my jersey off.
02F 07:XX:XX

Feel really feverish with my skin hypersensitive to movement or a breeze.
02F 07:XX:XX

Skin still cold and hypersensitive.
02F 08:XX:XX

Skin sensitive.
02F 10:XX:XX

My skin is so supersensitive – like millions of needles waiting to pierce and hurts if there's any motion or a breeze.
02F 11:XX:XX

Skin still so supersensitive > firm pressure.
02F 11:XX:XX
My skin is the most sensitive – like a bed of knives – not just nails or needles anymore.

02F 12:XX:XX

**Cold**

Woke up at 1 am boiling inside, but my skin was cold.

02F 07:XX:XX

Skin still cold and hypersensitive.

02F 08:XX:XX

Very cold, sitting in the sun to get warm.

01F 01:00:30

**Dryness**

Skin VERY dry, especially on ulnar palmar surface.

02F 22:XX:XX

My skin has been feeling very dry.

10M 27:XX:XX

**4.2.34 GENERALS**

**Cold**

Feeling cold.

01F 00:01:00

Aching from the cold.

01F 00:01:XX
Very cold, sitting in the sun to get warm.
01F 01:00:30

Coldness predominantly on right side.
02F 00:06:20

Went to bed and was freezing.
02F 07:XX:XX

This cold seems to gnaw at me, as if pushing me into a depression.
14M 02:04:XX

I'm a bit chilly – I cover myself with a blanket, while my father doesn't have to.
14M 04:XX:XX

Was feeling extremely cold and lethargic.
16F 03:XX:XX

Couldn't concentrate fully and was still feeling extremely cold.
16F 04:XX:XX

Still felt very cold and slept with 4 blankets.
16F 04:XX:XX

Generally feel better when I'm outside than when I'm inside, but must wrap up warm.
16F 05:XX:XX

At about 18:00 – 18:30 my body felt cold and it was more in the bones. It felt like I am having chills. It was after 1 hour after I was in the computer lab where the temperature was 21°C, which would not affect me normally.
21M 05:XX:XX
Nose is a bit runny and my lips feel dry. Probably because of the weather. It’s very cold today.
25M 03:03:43

Early bath at 5pm – feel a little better but feel cold.
28F 02:09:00

Slept OK but felt the cold.
28F 03:XX:XX

Came home and slept – very cold – had a hot bath.
28F 10:XX:XX

**Tired**

Absolutely tired.
01F 02:06:20

Just want to lie down and rest and close my eyes (recorded on 2 days).
01F 00:03:03

Am feeling very tired (recorded on 2 days).
02F 06:XX:XX

I’m tired and just want to rest (recorded on 4 days).
02F 01:00:30

I’ve slept so much and I’m still exhausted.
02F 12:XX:XX

Wake up tired.
02F 14:XX:XX
Feeling of extreme tiredness throughout the body (recorded on 5 days).
03M 00:01:XX

Tiredness of body and mind (recorded on 4 days).
03M 10:XX:XX

Extreme tiredness on waking (recorded on 3 days).
03M 09:XX:XX

Extreme tiredness on waking accompanied by heaviness of eyelids.
03M 02:XX:XX

Excessive fatigue, lethargy and tiredness (recorded on 5 days).
03M 04:XX:XX

Really tired – had a quick nap for 10 minutes and felt fine.
04F 01:XX:XX

Feeling heavy and tired (recorded on 2 days).
06F 00:XX:XX

This morning I felt tired and it was difficult to get out of bed.
06F 02:XX:XX

Tried to blow up a balloon and I felt like fainting, had no energy and it was too much effort.
06F 02:XX:XX

Feeling very weak and tired (recorded on 3 days).
10M 03:XX:XX

Feeling tired. (recorded on 2 days).
11M 05:XX:XX
Feeling tired (recorded on 14 days).
12F 00:06:XX

Feeling tired.
13M 01:XX:XX

I'm feeling tired (recorded on 10 days).
14M 00:08:XX

Had a big meal from KFC and I think I've been made tired from it.
14M 07:XX:XX

Food tires me.
14M 11:XX:XX

Feeling a little tired, though I try to get over it. I don't want it to get me down. The tiredness is bugging me after all this time.
14M 12:XX:XX

Feeling very drained, sleepy and depressed.
15M 03:XX:XX

Lost all the energy I had earlier.
15M 06:XX:XX

Feeling very tired.
15M 07:XX:XX

Feeling even more tired than before and I really need to sleep – I catch myself dozing off to sleep.
15M 07:XX:XX

Started feeling very tired.
16F 02:XX:XX
Wasn't feeling as energetic as the previous day. Felt groggy and tired.
16F 02:XX:XX

Was feeling extremely cold and lethargic.
16F 03:XX:XX

Felt extremely weak.
16F 04:XX:XX

Felt dazed, dizzy and sleepy. Couldn't stay awake at all (recorded on 2 days).
16F 04:XX:XX

Sleepy all the time. Slept the whole day yesterday, just want to close my eyes and sleep. I wake up feeling the same, but I just want to sleep more. I don’t feel like talking now, don’t want to move, feel heavy. Everything just feels heavy, want to cough but don’t have the energy to cough.
16F 05:XX:XX

Woke up very tired. Very tired all morning.
20M 07:XX:XX

Lethargic.
22F 00:00:15

Back to feeling tired early in the afternoon.
23M 02:XX:XX

Tired and looking forward to sleep.
23M 07:XX:XX

Went to be very early last night but woke up feeling very tired this morning (recorded on 2 days).
25M 03:XX:XX
 Feeling a bit flat (recorded on 4 days).
26M 06:13:30

 Feeling very tired (recorded on 7 days).
26M 10:00:00

 Feel very tired and lethargic (recorded on 5 days).
28F 02:XX:XX

 Feel very tired in early afternoon, light-headed.
28F 08:XX:XX

 Started feeling tired – eyes burning – want to sleep.
29F 00:02:25

 Feeling very tired (recorded on 24 days).
29F 00:04:30

 I’m dizzy from fatigue
29F 12:XX:XX

 Tired and achy.
30M 00:03:13

 Pretty tired and buggered.
30M 00:09:30

 Increased energy

 I feel like I have more energy in the evening.
06F 01:XX:XX

 Feel enervated.
07M 07:XX:XX
Very energetic in the morning.  
10M 06:XX:XX

Very energetic.  
10M 08:XX:XX

Lots of energy.  
10M 10:XX:XX

A bit energetic.  
11M 22:XX:XX

Have energy, although I’m feeling relaxed.  
12F 02:07:XX

I noticed I had a subtle energy increase today. I didn’t fall asleep and was able to gain composure.  
14M 00:07:XX

Feeling alright – in fact I have a bit of energy.  
14M 06:XX:XX

Still feeling awake and usually I am tired at this time.  
14M 06:XX:XX

Feeling energetic.  
15M 06:XX:XX

A lot of energy, again very unusual for the morning.  
16F 01:XX:XX

Woke up tired as usual, which didn’t seem to happen with the powders.  
23M 03:XX:XX
Feel fairly energised and well rested.
28F 01:XX:XX

Heavy

Feel really heavy, bloated and puffy.
02F 03:XX:XX

Feel heavy and weak.
02F 00:03:XX

Feeling heavy and tired.
06F 00:XX:XX

I don’t feel like talking now, don’t want to move, feel heavy. Everything just feels heavy, want to cough but don’t have the energy to cough.
16F 05:XX:XX

Numbness

Feeling of gentle numbness throughout the body.
03M 00:01:XX

Feel bodily jittery and slightly lame.
07M 00:00:30

Body ache and stiffness

Woke up at 1 am and have been feeling ‘vrot’ since then. My back, knees, head, wrists, ankles are all aching > hot shower.
02F 08:XX:XX

My body really hurts.
02F 15:XX:XX
My stomach didn’t pain as it usually does when I have my period. Everything else was paining too much for me to notice!

16F 04:XX:XX

Tired and achy.
30M 00:03:13

Body a bit stiff.
26M 17:XX:XX

Feeling stiff.
30M 00:02:00

Joints were noticeably stiff and sore.
30M 00:06:13

Flu-like symptoms

Feel as though I’m getting a cold.
02F 06:XX:XX

Feel as though I’m getting a cold now with a headache behind my eyes < bending forward with a full sensation and slight thumping. My bones are sore too especially my knees and ankles as well as my spine. My throat is scratchy and my chest feels compressed just over my sternum.
02F 07:XX:XX

I think I’m getting a cold.
10M 02:XX:XX

Felt very sick – think I got a cold.
10M 03:XX:XX
I feel as if a cold is coming on.
14M 01:XX:XX

Still feeling uncomfortable. Like light flu symptoms.
26M 10:06:00

Feel flu coming.
26M 14:XX:XX

Not feeling well, very fluey.
26M 14:XX:XX

Feel terrible as if flu is starting.
26M 15:XX:XX

Not feeling well.
26M 15:XX:XX

Sore throat. Feeling very under the weather.
26M 16:XX:XX

Feeling not very well. Flu-like.
26M 18:XX:XX

**Food and drinks**

**Sweet**

Breakfast couldn’t get sweet enough, put nearly a tablespoon of sugar in my porridge.
02F 07:XX:XX

Strong craving for sweets accompanied by moderate salivation.
03M 11:XX:XX
Excessive craving for sweets on waking.
03M 22:XX:XX

Strong craving for liquorice sweets.
03M 25:XX:XX

Strong craving for sweet foods in the morning.
03M 26:XX:XX

Aversion to sweets.
03M 27:XX:XX

Craving sweets.
06F 05:XX:XX

Craving sweets.
12F 03:XX:XX

**Chocolates**

I felt like mint chocolate, so stopped for a Peppermint Crisp on the way home – must be months or years since I last did that.
02F 00:12:XX

Strong craving for chocolate, with excessive salivation.
03M 20:XX:XX

Craved chocolate coated raisins.
12F 10:XX:XX

Aversion to chocolates.
03M 07:XX:XX
**Salty**

Excessive craving for savoury things on waking, with dry throat.
03M 19:XX:XX

Strong craving for salty food.
03M 27:XX:XX

Aversion to salty food with slight nausea > rest.
03M 18:XX:XX

**Sour**

Craving for sour foods – sauerkraut and yoghurts.
03M 02:07:XX

Craving for sour sweets.
03M 07:XX:XX

Craving for sour food.
03M 15:XX:XX

Craving for sour food.
03M 30:XX:XX

**Fatty**

Craving for fatty foods.
03M 15:XX:XX

Strong craving for fatty foods e.g. pork at suppertime.
03M 19:XX:XX
Strong craving for fatty foods at suppertime.
03M 22:XX:XX

Craving for fatty foods i.e. pork.
03M 23:XX:XX

Moderate craving for fatty food.
03M 31:XX:XX

Also craving cheese and butter.
06F 02:XX:XX

Craving for fatty foods – boerewors roll.
20M 06:XX:XX

Rich

Craving for cheese sauce.
03M 17:XX:XX

Excessive craving for cream on waking.
03M 22:XX:XX

Also craving cheese and butter.
06F 02:XX:XX

Only felt like eating take-aways and rich foods.
16F 00:XX:XX

Again only wanted to eat out, craving pizza.
16F 01:XX:XX
Have a craving for carbs – made macaroni cheese for lunch.  
28F 02:XX:XX

Change in appetite, eating less.  
Don’t want to look at rich food, feeling nauseous. 
16F 02:XX:XX

Cheese

Craving for cheese sauce.  
03M 17:XX:XX

Also craving cheese and butter.  
06F 02:XX:XX

Have a craving for carbs – made macaroni cheese for lunch.  
28F 02:XX:XX

Milk aversion

I’ve had a strong craving for black rooibos tea and usually I take my rooibos with milk.  
15M 03:XX:XX

The thing I noticed was that I could drink milk, I think after the proving.  
Normally I hate milk but I was able to taste it and felt nothing in terms of nausea and vomiting. I think this was big for me (curative).  
21M 09:XX:XX

Fruit juice

Feel like fruit juice.  
02F 07:XX:XX
Strong craving for citrus drinks.
03M 12:XX:XX

Moderate thirst for citrus fruit juice.
03M 17:XX:XX

Sore throat anterior aspect, better swallowing thick liquids, desire fresh fruit / juice.
20M 14:XX:XX

Ice cream

Excessive craving for ice-cream on waking.
03M 03:XX:XX

Craving for ice-cream midday.
03M 13:XX:XX

Desire for ice-cream on waking.
03M 15:XX:XX

Awaken during night craving for ice-cream.
03M 18:XX:XX

I want to drink thick liquids like a smoothy not thin and watery.
20M 05:01:00

Hot drinks

Desire hot drinks.
02F 09:XX:XX

Drinking hot things.
02F 12:XX:XX
Water

Craving for water during the night.
03M 02:XX:XX

Excessive craving for cold water on waking.
03M 28:XX:XX

I'm constantly drinking water.
15M 07:XX:XX

Eggs

Craving for eggs on waking.
03M 18:XX:XX

Aversion to eggs.
03M 15:XX:XX

Aversion to eggs.
03M 30:XX:XX

Vegetables

Aversion to vegetables in the evening.
03M 15:XX:XX

Aversion to vegetables.
03M 31:XX:XX

Aversion to vegetables.
03M 24:XX:XX
Coffee

Strong aversion to coffee on waking.  
03M 25:XX:XX

Peanuts

Craving for peanuts.  
03M 16:XX:XX

Bland

I am only craving bland tasteless food like bread, which is unusual for me.  
06F 02:XX:XX

Have a craving for carbs – made macaroni cheese for lunch.  
28F 02:XX:XX

Beer

Had a sip of my beer and felt like throwing up.  
15M 00:XX:XX

Went out with friends and could only drink one beer – normally I drink about 5-8 beers when I go out. This time my beer just tasted dry.  
15M 08:XX:XX

Food aversion

Aversion to food on waking.  
03M 24:XX:XX

The thought of eating and food exhausts me.  
06F 02:XX:XX
Had a big meal from KFC and I think I've been made tired from it.
14M 07:XX:XX

Food tires me.
14M 11:XX:XX

I tried eating, but I couldn't. The food smelt funny. It was tasteless.
15M 07:XX:XX

**Tobacco**

Aversion to tobacco smoke almost causing feeling of nausea.
03M 22:XX:XX

Aversion to tobacco smoke.
03M 31:XX:XX

**Hot**

Body hot.
02F 10:XX:XX

I took a blanket off my bed, because I thought maybe I was too hot, but it made no difference.
02F 12:XX:XX

Feeling a bit hot and stuffy as if the windows were all closed.
14M 14:XX:XX
Modalities

Warmth ameliorates

Generally feel better when I’m outside than when I’m inside, but must wrap up warm.
16F 05:XX:XX

Sunlight

Very cold, sitting in the sun to get warm.
16F 05:XX:XX

Mild headache in occipital region > heat of sun.
03M 05:XX:XX

Anxiety on waking > sunlight.
03M 08:XX:XX

Hot bath or shower

My knees and ankles are aching > hot shower.
02F 08:XX:XX

My head is aching > hot shower.
02F 08:XX:XX

Runny nose during night – thin watery mucous discharge > warm bathing
03M 20:XX:XX

Feeling better after a hot shower.
14M 02:02:XX
Warm food or drinks

Drinking hot things.
02F 12:XX:XX

Mild to moderate coryza on waking > warm drinks.
03M 21:XX:XX

Slight tension headache in occipital region > warm food.
03M 25:XX:XX

Anxiety of mind > warm food.
03M 24:XX:XX

Pressure ameliorates

Skin still so supersensitive > firm pressure.
02F 11:XX:XX

Sharp headache from temple to temple > pressure.
02F 17:XX:XX

My head feels congested as if my brain is swollen > resting my head on something.
06F 05:XX:XX

Rubbing ameliorates

Cold tingling pain in left arm > holding on to arm, > rubbing.
01F 00:01:XX

My thighs are both so numb – they’re sore – a deep aching > rubbing.
02F 15:XX:XX
Periodical cramping in right calf muscle < cold application, > rubbing.
03M 18:XX:XX

Rest ameliorates

Irritating sinusitis of maxillary sinuses on waking as if being sandpapered >
rest.
03M 20:XX:XX

Moderate tension headache throughout the day extending from occiput to
back > rest
03M 21:XX:XX

Tiredness of mind and body > lying down.
03M 25:XX:XX

Fresh air ameliorates

Slight post nasal blockage > walking in open air.
01F 06:XX:XX

Sudden acute attack of hayfever accompanied by excessive secretion of thin
mucous from nose, > fresh air.
03M 29:XX:XX

Dry red eyes on waking, > fresh air.
03M 31:XX:XX

Watering of eyes on waking > open space.
03M 17:XX:XX

Feeling of light-headedness > open air.
03M 06:XX:XX
Water ameliorates

Mild vertigo on rising > cold water.
03M 16:XX:XX

Slight nausea after eating > cold water.
03M 25:XX:XX

Increased salivation > cold water.
03M 31:XX:XX

Dull ache at front of head / top > drinking water.
12F 06:XX:XX

Dull ache behind the eyes > drinking water.
12F 06:XX:XX

Cold aggravates

My toothache I had prior to the proving is really starting to act up < cold.
13M 00:XX:XX

Periodical cramping in right calf muscle < cold application.
03M 18:XX:XX

Motion aggravates

Left back pain – deep, pulsating and aching, < motion.
02F 02:07:45

Head fullness still there, like an overfilled water bomb, about to explode, < motion.
02F 04:12:XX
Stooping aggravates

Feel as though I’m getting a cold now with a headache behind my eyes < bending forward.
02F 07:XX:XX

Back pain < bending head forward – sore right down to my knees!
02F 16:XX:XX

Pulse

Pulse 72 (normally in 50’s).
02F 02:05:00

Pulse 88.
02F 00:03:XX

Pulse 128.
02F 04:XX:XX

Pulse 142 with pain in heart.
02F 05:XX:XX

Pulse 60, with crushing pain on right sternal angle.
02F 06:XX:XX

Blood

Palpitations as if blood is thick and sluggish.
02F 00:05:XX
Blood feels like it’s getting stuck in my aorta so it builds up, then suddenly forces through – very uncomfortable.

02F 02:XX:XX

Sensation of thick blood in aorta, causing a feeling of not enough breath in me.

02F 03:02:50

Beating of my heart as if my blood is mashed potato, therefore difficult to force through.

02F 04:13:30

Blood feels hot.

02F 08:XX:XX

**Petit mals**

(Prover 02F has epilepsy as a chronic condition, but the following symptoms were recorded, as her petit mal attacks increased in frequency on these particular days during the proving)

Been zoning out quite often today – a few little petit mals where I suddenly realise I haven’t said anything for a while and am not sure what I was saying previously.

02F 13:XX:XX

Had a few petit mals today and couldn’t remember what I’d been saying previously. It’s because I’ve been so tired and so down from all the emotional stuff I’ve been feeling. My sister said my eyes rolled back in, so mum put me to bed. I was too scared to sleep, because that’s when I have my big one’s – after a few small ones.

02F 15:XX:XX

Had about 10 fits today. Really not a good day. Very aware of it, so would rather not talk so nobody else notices it, but my eyes roll back, even with my
petit mals, so they do notice it if they're watching. It bugs me as I forget where I was in the conversation and so then either repeat myself or just end a conversation mid-sentence. I can feel my brains taking longer to kick in as well. It’s like trying to get a rusty windmill going again – it needs a hell of a lot of momentum to start it off. I loose my vision briefly too – just a void, but my memory lapses bother me.

02F 16:XX:XX

4.3 RUBRICS

Rubrics of Characteristic Symptoms

4.3.1 MIND

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MIND – WEEPING – consolation – agg

MIND – WEEPING – trifles, at

MIND – WRETCHED

MIND – LIGHT – desire for- sunlight; to be in

4.3.2 VERTIGO

VERTIGO – AIR, in open – amel

VERTIGO – EATING – while

VERTIGO – EXERCISING – on

VERTIGO – MENTAL exertion

VERTIGO – MORNING – rising, on

VERTIGO – MORNING – waking, on

VERTIGO – NOON

VERTIGO – RISING – on

VERTIGO – VERTIGO

VERTIGO – SLEEPINESS, with

4.3.3 HEAD

HEAD – BLOCK; sensation of

HEAD – FULLNESS – burst, as if would

HEAD – FULLNESS

HEAD – HEAVINESS

HEAD – LIGHTNESS; sensation of

HEAD – NUMBNESS – occiput

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### 4.3.4 Eye

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<tr>
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<td>EAR – NOISES – buzzing</td>
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<td>EAR – NOISES – fluttering sounds</td>
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<td>EAR – PAIN – extending to – Eustachian tube</td>
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<td>NOSE – CORYZA – discharge, without – night – fluent during the day</td>
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<td>NOSE – DISCHARGE – bland</td>
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<td>NOSE – DISCHARGE – clear</td>
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<td>NOSE – DISCHARGE – watery</td>
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<td>NOSE – DRYNESS – inside</td>
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<td>NOSE – HARDNESS</td>
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<td>TEETH – PAIN – aching</td>
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<td>TEETH – PAIN – cold – anything</td>
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<tr>
<td>TEETH – PAIN – drinks – cold – agg</td>
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<tr>
<td>TEETH – PAIN – drinks – warm – amel</td>
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<td>TEETH – PAIN – Incisors – lower</td>
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<td>TEETH – PAIN – masticating, from</td>
<td>1 686</td>
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<tr>
<td>TEETH – PAIN – motion – amel</td>
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<tr>
<td>TEETH – PAIN – opening mouth; from</td>
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<tr>
<td>TEETH – PAIN – pulsating</td>
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<td>TEETH – PAIN – swallowing agg</td>
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<td>TEETH – PAIN – talking, from</td>
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<tr>
<td>TEETH – PAIN – touch – amel</td>
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<td>TEETH – PAIN – wisdom teeth</td>
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<td><strong>TEETH – PAIN</strong></td>
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<td>TEETH – SENSITIVE – cold water; to</td>
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### 4.3.11 THROAT

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<td>THROAT – COLDNESS – sensation of</td>
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<tr>
<td>THROAT – DRYNESS – thirst – with – water; for / cold</td>
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<td>1 702</td>
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<td>THROAT – ENLARGEMENT – sensation of</td>
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<td>THROAT – HAWK; disposition to</td>
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<td><strong>THROAT – HOLLOW TUBE – sensation of</strong></td>
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<td>THROAT – INFLAMMATION – fauces</td>
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<td>THROAT – LUMP; sensation of a</td>
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<td>THROAT – MUCUS – sticky</td>
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<td>THROAT – MUCUS – white</td>
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<td>THROAT – MUCUS</td>
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<td>THROAT – PAIN – cutting – swallowing, on</td>
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<td>STOMACH – APPETITE – increased – evening</td>
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<td>STOMACH – APPETITE – increased</td>
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<tr>
<td>STOMACH – APPETITE – ravenous – eating – after eating; soon</td>
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<td>STOMACH – APPETITE – ravenous – evening</td>
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<td>STOMACH – APPETITE – wanting – food – sight of, at</td>
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<td>STOMACH - HEARTBURN</td>
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<td>STOMACH - HEAT, flushes of</td>
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<td>STOMACH - NAUSEA - beer - after</td>
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<td>STOMACH - NAUSEA - eating - after: amel</td>
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<td>STOMACH - NAUSEA - eating - after</td>
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<td>STOMACH - NAUSEA - food - smell of</td>
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<td>STOMACH - NAUSEA - tobacco - odour of</td>
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<td>STOMACH - THIRST - extreme</td>
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<td>STOMACH - THIRST - morning, waking, on</td>
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<td>STOMACH - THIRST - night</td>
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<td>STOMACH - THIRST - water; drinking - cold</td>
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<td>STOMACH - THIRST - water; drinking</td>
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<td>ABDOMEN - BUTTERFLIES; sensation of</td>
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<td>ABDOMEN - DISTENSION - flatus, passing: with</td>
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<td>ABDOMEN - ERUPTIONS - itching</td>
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<td>ABDOMEN - FULLNESS - sensation, of</td>
<td>1 824</td>
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<td>ABDOMEN - GURGLING - stool, after</td>
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<tr>
<td>ABDOMEN - PAIN - colon</td>
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<tr>
<td>ABDOMEN - PAIN - cramping, griping</td>
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<tr>
<td>ABDOMEN - PAIN - eating - amel</td>
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<tr>
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<td>ABDOMEN - PAIN - umbilicus - region of</td>
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### 4.3.19 URETHRA

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### 4.3.20 URINE

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### 4.3.21 FEMALE GENITALIA / SEX

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### 4.3.23 COUGH

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<td>COUGH – PAINFUL</td>
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COUGH – EVENING – sunset to sunrise

### 4.3.24 EXPECTORATION

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### 4.3.25 CHEST

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<td>HEART; complaints of the – accompanied by – upper limbs – left – numbness</td>
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GENERALS – FOOD & DRINKS – pizza – desire 1 1795
GENERALS – FOOD & DRINKS – rich food – aversion 1 1796
GENERALS – FOOD & DRINKS – rich food – desire 1 1796
GENERALS – FOOD & DRINKS – salt – aversion 1 1796
GENERALS – FOOD & DRINKS – salt – desire 1 1796
GENERALS – FOOD & DRINKS – sausages – desire 1 1797
GENERALS – FOOD & DRINKS – sour foods, acids – desire 1 1797
GENERALS – FOOD & DRINKS – sweets – desire 1 1799
GENERALS – FOOD & DRINKS – vegetables – aversion 1 1800
GENERALS – FOOD & DRINKS – warm – drinks – desire 1 1800
GENERALS – HEAT – flushes of 1 1804
GENERALS – HEAT – lack of vital heat 3 1806
GENERALS – HEAT – sensation of 1 1806
GENERALS – HEAT – sensation of – blood vessels; in 1 1807
GENERALS – HEAVINESS 1 1807
GENERALS – INFLUENZA – sensation as if 2 1813
GENERALS – LASSITUDE 2 1817
GENERALS – NUMBNESS – externally – whole body 1 1831
GENERALS – PAIN – aching 1 1836
GENERALS – PAIN – joints of 1 1836
GENERALS – PULSE – frequent 1 1857
GENERALS – SENSITIVENESS – externally 2 1867
GENERALS – SLUGGISHNESS of the body 1 1873
GENERALS – STIFFNESS 1 1874
GENERALS – SUN – exposure to the sun – amel 2 1877
GENERALS – TOBACCO – aversion to – smell of tobacco; 1 1883 sensitive to
GENERALS – TOUCH – agg 1 1883
GENERALS – WARM – amel 2 1893
GENERALS – WEAKNESS 1 1895
GENERALS – WEARINESS 4 1905
GENERALS – WEARINESS – afternoon (early) 1 1906
GENERALS – WEARINESS – morning – waking, on 3 1906

4.4  LIST OF NEW RUBRICS

MIND – DELUSIONS – separated – others from 2
MIND – DISCONNECTED 2
MIND – FOCUS, inability to 2
MIND – NEGATIVITY 1
HEAD – BLOCK; sensation of 1
HEAD – PAIN – accompanied by – tongue – numbness of 1
EYE – TIRED SENSATION – eyes, behind 2
MOUTH – PAIN – tongue – extending to – neck 1
THROAT – HOLLOW TUBE – sensation of 2
RESPIRATION – RATTLING – inspiration, during 1
COUGH – EVENING – 20h – 3h 1
CHEST – HEART; complaints of the – accompanied by – upper limbs –right – numbness 1
CHEST – HOLLOW TUBE – sensation of 2

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CHEST – PAIN – sides – right – extending to – subcostal region 1
CHEST – PALPITATION of heart – apex beat, at 1
EXTREMITIES – AWKWARDNESS – stumbling when walking – foot sticks to the ground; as if 2
EXTREMITIES – WALKING – small steps, with 2
DREAMS – BLENDING – surroundings, into 1
DREAMS – PARALYSED, being 2
PERSPIRATION – COPIOUS 1
SKIN – SENSITIVENESS – air, draft of 1
GENERALs – BLOOD – thick, sensation as if 1

4.5 ABBREVIATION OF THE REMEDY

The proposed abbreviation for Chamaeleo dilepis dilepis is Chamael-d. In choosing this abbreviation, we have adhered to recommendations made by Schroyens (2001:39), as these recommendations serve to rule out any ambiguities in the system. Kent, Barthel an Klunker have done some work on abbreviations, but some ambiguities have still remained. Proposed rules for remedy abbreviations have been set out in ‘Blueprint for a New Repertory’ at the back of Synthesis, Repertorium Homeopathicum Syntheticum Schroyens (2001:39-41).

The Latin or scientific name is used for abbreviations and the root always corresponds to one substance only. Cham belongs to chamomilla (chamaecyparis lawsonia) and chamae belongs to chamomilla romana (chamaedrys). We therefore chose the root chamael, as it is unique to chamaeleon. We further included the extension “-d” to specify the specific sub-specie dilepis dilepis, in the advent that another sub-specie of chamaeleon is proven in the future. The root chamael can then be shared with other sub-species, to simplify and prevent further ambiguities.
CHAPTER FIVE

THE DISCUSSION OF THE PROVING OF CHAMAEO DILEPIS DILEPIS

5.1 INTRODUCTION

This chapter will serve as a general discussion and overview of the proving as a whole. Prominent themes will be considered, as well as specific physical symptoms that came through in the proving. Sherr (1994:32) states the importance of viewing the entire proving group as if one person. The aim of this chapter is to unite fragmented parts of the proving into a whole, to give a clearer understanding of the remedy in its totality. Symptoms will also be discussed in relation to the doctrine of signatures. A short consideration will be given to clinical indications and remedy differentials.

It was hypothesised that the proving of Chamaeleo dilepis dilepis 30CH would produce symptoms in healthy individuals partaking in the study. It was further hypothesised that the symptoms produced would show a correlation to the substance chameleon as it relates to the doctrine of signatures. The data obtained provided no contradictory evidence and it is therefore concluded that this hypothesis is valid.

The data collected from the proving provided symptoms that formed a total of 730 rubrics. Of this total, 708 rubrics were existing rubrics and 22 were new rubrics. The rubrics are distributed throughout 34 sections of the repertory. The most symptoms were found in the mind section - 86 rubrics. Secondly there were 82 rubrics in the extremities section, 60 in the general section and 60 in the head section. The distribution of symptoms across all the sections will be illustrated in Graph 1 (Appendix I).
5.2 THE SYMPTOMS

5.2.1 MIND

Prominent mental themes emerged from the proving, as well as a strong polarity between symptoms. The mind symptoms have been grouped into different themes. The discussion will start with the two main opposing themes or polarities of the proving. Throughout the proving there seemed to be a play between dark and light. These will be the keywords used to discuss the polarity.

Dark

“Emotionally I feel like I’m in a black hole. I had one of the darkest days of my life. I hate what I’ve become. I can’t see a light and am so miserable. I feel like I’m on a spiral and am gripped by fear and can’t see the positive” (02F 14:XX:XX). “There’s no more spark – it’s as though “the tribe has spoken” and my flame has been snuffed out” (02F 18:XX:XX). “Feel depressed – don’t feel like talking much” (06F 01:XX:XX). “Feeling very depressed for no apparent reason” (07M 08:XX:XX). “This cold seems to gnaw at me, as if pushing me into a depression” (14M 02:04:XX). “Feeling very depressed the whole day” (15M 03:XX:XX).

This gives a good overview of the main feeling of dark depression and negativity that ran through the proving. These are the main themes as noted on the darker side of the mind and emotions and will be highlighted further on in the discussion:

- Extreme depression
- Sadness and weeping
- Negativity
- Antisocial behaviour and withdrawal
- Disconnection and disorientation
- Despondency and demotivation
- Poor self-image
Violent anger
Irritability
Anxiety
Cheating
Exhaustion
Heaviness
Coldness

**Light**

“Floating sensation and feeling of light headedness (03M 00:12:30). I seem to be falling into space” (11M 12:XX:XX). “Feeling of openness and contentment of mind” (03M 17:XX:XX). “I can look at other people’s problems and issues clearly, without feeling any need to get emotionally involved. Feel no personal guilt or even implication” (01F 03:06:XX). “Felt very positive – no negativity – great insights” (07M 03:XX:XX). “Quite excited and very energetic in the morning” (10M 06:XX:XX). “Feeling happy, relaxed, and chilled” (12F 04:XX:XX). These extractions represent the opposite pole and the following themes were most prominent:

Lightness
Calmness
Relaxation
Optimism
Positivity
Happiness
Excitement
Increased energy
Activity of the mind
Heightened sensitivity
Paralysis

Paralysis is a very important theme in this remedy, although very subtly represented throughout the symptoms it was confirmed by two peculiar experiences that two provers had during the proving - "I had a frightening experience. Was semi-conscious – felt like I was dreaming and I was paralysed and could only move my eyes" (06F 01:XX:XX). "Dreamt I was lying on the couch and I was paralysed" (04F 00:XX:XX). These two experiences are very peculiar to this remedy and encompass the essential delusion of this remedy as will be discussed further under 5.3. There was paralysis on a physical, emotional and mental level. Related to physical paralysis there was feelings of lameness (07M 00:00:30), weakness, lethargy and exhaustion.

Movement alterations

The proving clearly brought about an alteration in normal movements, with strange gait, balance problems and even paralysis. "I'm walking with funny small steps, like I'm autistic or something" (01F 00:02:XX). "Still walking funny, falling forwards with small paces. Not well co-ordinated. I trip a lot, my left foot especially seems to stick to the ground ever so often" (01F 00:04:15). "Feel a little jittery – bodily" (07M 07:XX:XX).

In terms of balance disorientation, there was "feeling unstable on my feet - overbalancing" (02F 02:05:XX). "Leaning against walls when standing" (01F 00:02:XX). "Balance slightly unstable" (07M 00:00:40). "Slight spell of about 15 seconds of balance disorientation" (07M 04:XX:XX).

Disconnection, disorientation and feeling spaced-out

There were many symptoms produced related to "feeling spaced out and disconnected" (01F 00:00:01), "feeling like I am on another plane or dimension" (01F 00:02:00). "Feeling disjointed or disconnected from reality" (02F 02:05:XX). "Feeling slightly disconnected – spaced out – as though body and mind do not work sharply together" (07M 00:04:10).
“Sensory impressions disconnected, I’m feeling disconnected. Taking a moment longer to process any sensory input” (01F 00:01:XX). “I woke up disorientated, wasn’t sure where I was” (06F 01:XX:XX).

Lack of focus and concentration

This is a further elaboration on the disconnection, spaced-out theme. There seemed to have been a difficulty in integrating sensory and visual input, as well as “difficulty in concentrating and focussing” (01F 04:XX:XX). “So difficult to stay focused” (02F 21:XX:XX), “getting bored very quickly and switching off concentration” (02F 04:08:XX). “Unable to complete tasks” (03M 15:XX:XX). “Finding it hard to think” (06F 05:XX:XX). “Dullness in head” (07M 00:04:XX) and “feeling a bit slow – not focused” (10M 05:XX:XX). “Could not pay attention in class” (06F 05:XX:XX).

Forgetfulness

Due to this lack of focus and concentration, a mild degree of forgetfulness was noted i.e. “set my alarm, but forgot to turn it on” (02F 03:00:XX). “Forgot about diagnostics today” (02F 05:XX:XX) and “in the car to varsity, I realised I forgot to take my vitamins” (14M 11:XX:XX). “Forgetfulness, more so in the morning after waking” (20M 12:XX:XX).

Antisocial and withdrawn

Provers spoke of “wanting to withdraw” (02F 04:XX:XX) and “not wanting to talk to others” (06F 01:XX:XX) and “being unresponsive” (06F 02:XX:XX). There was a feeling of “being withdrawn from everyone else” (15M 00:00:XX). “I don’t have the urge to go out for beers with mates” (11M 04:XX:XX). “I couldn’t be around people anymore, so I decided to lock myself in my room and get some sleep” (15M 07:XX:XX). The words feeling separate and distant were also used i.e. “feel very separate from other people” (18M 12:XX:XX). “Feel very separated and in my head” (18M 25:XX:XX). “Very distant from everyone” (18M 11:XX:XX). “Still feel a little distant” (18M 20:XX:XX).
Emotionally cold and hard

A feeling of emotional coldness and even hardness came through in the proving, related to this sensation of being distant and wanting to withdraw from others. "Very cold approach. Being very measured, maybe a little unemotional" (18M XX:XX:XX). "Been feeling very inward and quite hard with everyone" (18M 02:XX:XX). "Cold towards prac partner" (18M 14:XX:XX). "I seemed to be less emotional" (30M 00:XX:XX).

Poor self-image

Linked to this withdrawal and also to the depression a lot of feelings related to poor self-image were noted – "saw myself in a mirror and got a fright. So out of proportion - like a home-made house" (02F 04:XX:XX). "Feel fat and disgusting. It repulses me" (02F 10:XX:XX). "My body feels overweight and ugly" (10M 24:XX:XX). "I don't like the person I am and not sure what to do about it" (02F 18:XX:XX). "I'm still feeling a bit uncomfortable, as if I'm worried that people don't like me anymore" (14M 13:XX:XX). "Been feeling a little insecure sometimes" (18M XX:XX:XX).

Sadness and crying

"I'm not happy. Get quite tearful when given consolation or talking about it" (02F 12:XX:XX). "Feeling weepy and crying" (01F 01:00:30). "Cried at the smallest things that shouldn't bother me. Once I started crying I couldn't stop" (06F 01:XX:XX). "Watching a programme - it's very tender and it makes me feel very sad" (14M 20:XX:XX). "Emotional, crying, worst day of my life" (28F 10:XX:XX). "Emotionally I'm feeling very down. Feel like crying" (29F 16:XX:XX).
Dark depression and negativity

As mentioned before there were many symptoms related to this, where provers used descriptions like “emotionally feel like I’m in a black hole, I feel like I’m on a spiral and am gripped by fear and can’t see the positive, had one of the darkest days of my life. Not sure what’s going on, but despair set in. I can’t see a light and am so miserable” (02F 14:XX:XX). “I’m not in a good place emotionally – very “bland” and it’s rarely that I laugh” (01F 18:XX:XX). “There’s no more spark – it’s as though “the tribe has spoken” and my flame has been snuffed out” (02F 18:XX:XX). “Feel depressed and exhausted, cried at the smallest things” (06F 01:XX:XX). “Feeling very negative – even depressed” (07M 00:XX:XX).

“I’m in quite a negative mood” (07M 10:XX:XX). “This cold seems to gnaw at me, as if pushing me into a depression” (14M 02:04:XX). “Feeling very depressed the whole day” (15M 03:XX:XX). “Woke up very early and felt extremely miserable, depressed” (16F 04:XX:XX). “Feeling slightly hopeless about everything” (18M 12:XX:XX). “Felt somewhat depressed and hopeless” (20M 01:XX:XX). “Depressed like something is wrong and I don’t know what it is” (26M 07:XX:XX). “Feel depressed, quiet” (28F 06:XX:XX). This theme of depression, hopelessness and despair came through in a majority of provers and seem to be an important consideration in the remedy state as a whole.

Despondent and demotivated

With all the depression, sadness, poor self-image and exhaustion it is easy to understand the feeling related to despondency and demotivation. “Did not feel inspired or motivated to do exercise and feel despondent” (02F 01:23:XX). “Feel very demotivated and negative” (02F 19:XX:XX). “No motivation to do anything, especially exercise” (10M 03:XX:XX). “Don’t want to do anything” (28F 10:XX:XX).
Exhaustion

There was exhaustion on both a mental and a physical level. Exhaustion on a physical level, will be discussed under generals, but here it is worthwhile mentioning feelings of mental exhaustion (03M 03:XX:XX). "Feeling of extreme tiredness throughout the mind" (03M 00:01:XX) and "mental lethargy" (03M 28:XX:XX).

Anxiety

Many feelings of anxiety were noted, like "anxiety on waking > sunlight" (03M 08:XX:XX). "I'm starting to feel a bit nervous" (06F 01:XX:XX), "slightly jittery - nervous bodily feeling" (07M 02:XX:XX). There was also anxiety related to a feeling as if something is about to happen i.e. "a feeling of intense anxiety in the morning as if something is about to happen" (03M 26:XX:XX). "Feeling anxious as if something is about to happen" (11M 08:XX:XX). "Uptight and anxious" (18M 26:XX:XX). "By midday, back to feelings of anxiety" (23M 02:XX:XX).

Irritability and snapping

Irritability came across as being the most common emotional response throughout the proving, as well as being short-fused and snapping at others as seen in the following symptoms: "Moderate irritation" (03M 12:XX:XX), "feeling a bit irritable" (06F 00:XX:XX), "the day feels long - still irritable and tired" (11M 05:XX:XX). "Extreme irritability on waking" (03M 02:XX:XX). "I'm quite irritable and also quite confrontational. I have to be careful. I have to control my irritability" (06F 03:XX:XX). "I tend to snap easily and get irritated quickly" (02F 18:XX:XX). "I'm getting irritated by little things and I'm snapping at everyone around me" (15M 07:XX:XX). "Feel quite irritable this afternoon" (28F 06:XX:XX).
Violent, expressive anger

Angry, violent feelings (02F 10:XX:XX) were also noted in the proving. "Getting very angry with other staff members lately – need anger management" (10M 15:XX:XX). "I was thinking of someone who angered me greatly and thinking of venting my rage. It made me a little warmer" (14M 02:11:XX). "Been feeling violently angry with people recently" (18M 03:XX:XX). "Seem to be getting very expressively cross in the last while" (18M 05:XX:XX). "Have had a short fuse lately, 'losing it' much more easily" (23M XX:XX:XX). "Almost told my boss to 'go and jump'. Just felt like resigning" (28F XX:XX:XX).

Heightened sensitivity

A general increase in mental and emotional sensitivity was seen throughout, with a specific sensitivity to sound and noise. "All external sensations increased, feeling slightly overwhelmed" (01F 00:00:01). "Impressions are rushing in and out, feeling disorientated" (01F 00:00:05). "Extreme hypersensitivity to noise" (03M 02:07:XX). "Sounds are overwhelming" (01F 00:00:01), "sounds are intensified" (01F 00:00:XX). "Hypersensitivity of mind before sleep, especially to any noise" (03M 24:XX:XX). "Sounds seem very loud again" (01F 00:23:45).

Excitement

"Over-excitability on waking accompanied by hurried speech" (03M 23:XX:XX). "Quite excited and very energetic in the morning" (10M 06:XX:XX). "Still very excited and full of life" (16F 01:XX:XX).

Lightness and floating

There was a feeling of lightness and of floating that seems to go hand in hand with the feeling of disconnection and distance. Provers spoke of "feeling like
I'm floating in space" (01F 01:01:XX). "A floating sensation and feeling of light headedness" (03M 00:12:30). "I seem to be falling into space" (11M 12:XX:XX). With this there were a lot of symptoms of light-headedness that will be further discussed under the heading of vertigo.

**Optimistic, positive and happy**

This was the lighter side of the proving, the happier polarity, where provers said "I feel quite optimistic today" (01F 03:06:XX), "a bit overly optimistic, maybe foolhardy, like nothing gets in my way" (01F 03:08:XX). "Feeling of openness and contentment of mind" (03M 17:XX:XX). "Feeling good and positive" (04F 04:XX:XX). "I'm in a comfortable state of mind" (14M 04:05:XX). "Feeling happy" (15M 06:XX:XX). "Enthusiastic about varsity project" (18M 00:XX:XX). "For most of the day I have felt filled with joy and peace. Feeling quite sociable and friendly. Feeling secure in myself" (20M 02:XX:XX). "Feel brighter in myself – not as moody or sad" (28F 12:XX:XX).

**Calm and relaxed**

There was also a feeling of calmness and relaxation, i.e. "very relaxed during the day" (10M 07:XX:XX). "Felt mellow all day – calm sensation" (11M 02:XX:XX). "Feeling lackadaisical" (11M 03:XX:XX). "My husband and I discussed the proving and he said I appear to be more chilled; relaxed" (12F 03:XX:XX). "I'm sitting talking to a girl and I am surprised at how calm I am as I talk to her" (14M 18:XX:XX). "It would seem that a calmness has developed that I haven't felt for +- 2 years. Quite a pleasant feeling!" (23M 00:00:00). "Feeling calmer than usual, not as stressed" (24M XX:XX:XX). "Feeling a bit spacey – relaxed" (26M 01:12:30).

**Cheating vs. honesty**

There were some symptoms and dreams related to cheating as well. "Cheated last night in a competition, felt bad all day and apologised to all concerned" (02F 02:11:XX). "I dreamt my husband and I went for a walk with
a friend of mine, up on a hill. In full view they were kissing, so her husband and I kissed as well" and "we were writing a diagnostics multiple choice test and we had access to a printed model answer sheet, which we openly used" (01F 05:XX:XX). On the other hand there is a need to be honest and direct; "been feeling strongly that proper direct communication between people, with truthful content should occur and any small lie is not acceptable" (18M 06:XX:XX). "Been thinking lots about what's fair and right" (18M 15:XX:XX).

**Envy and competitiveness**

These are characteristics common to the animal kingdom and would therefore be expected to surface in the proving of chameleon as well. "Jealous of sister as she had all day to work and hardly did anything and has exams all next week and will do so well" (02F 02:11:30). "I was so angry and jealous of my sister, purely because she gets such good results and does not put much effort in" (02F 03:05:10). "Felt a little bit too competitive with respect to my partner in the project" (18M 00:XX:XX). "Things with F are still very strained. We have not really been talking. Been ignoring F, I would not like to back down, and be "nice" to her" (18M XX:XX:XX).

**Indecision**

"My boss phoned me and I took forever to make a decision, which is unusual, especially as it was so straight-forward" (02F 06:XX:XX).

**Control and restriction**

There were two polarities here as well, the one being not wanting to be controlled by others – "feeling really imprisoned by expectations placed on me. Just want to be independent. Sick of having to answer to others and do what they want and not what I want" (02F 17:XX:XX). "Resent being forced to do anything. Feel restricted and controlled" (02F 18:XX:XX). On the other side there's the need to control one's own free expression – "I have to control my irritability" (06F 03:XX:XX). "Felt a little irritated but did not "display" visible
symptoms and just kept quiet" (18M 07:XX:XX). “Upset with S but don’t want to say so directly” (18M 11:XX:XX).

Heaviness

“Feeling heavy, aching and frustrated" (02F 10:XX:XX).” Feel extremely heavy and exhausted” (06F 01:XX:XX). Heaviness seemed to run through the proving on a physical as well as mental level. It will also be discussed under generals.

Unconsciousness

There were descriptions of feeling like “I blanked out” (06F 01:XX:XX) and “starting to feel a bit nervous. I’m worried that I’m going to blank out or collapse” (06F 02:XX:XX). In one prover with a tendency to experience petit mals, this seemed to have been accentuated from day 13 to day 16. “Been zoning out quite often today – a few little petit mals where I suddenly realise I haven’t said anything for a while and am not sure what I was saying previously” (02F 13:XX:XX). “Had a few petit mals today and couldn’t remember what I’d been saying previously. It’s because I’ve been so tired and so down from all the emotional stuff I’ve been feeling. My sister said my eyes rolled back in” (02F 15:XX:XX). “Had about 10 fits today. I lose my vision briefly too – just a void, but my memory lapses bother me” (02F 16:XX:XX).

Mood changes

Provers noted ups and downs in their moods as well - “mood swings deluxe today” (02F 17:XX:XX). “Feeling a bit moody” (11M 12:XX:XX). “Mood very sensitive – little things affect me” (28F 08:XX:XX).” Been a bit of a rollercoaster ride the past little while, bit of emotional ups and downs” (18M 13:XX:XX). “I am either at someone’s throat or keeping my head down, very little middle ground” (18M XX:XX:XX).
5.2.2 VERTIGO

Vertigo was experienced and described as feeling dizzy (01F 00:00:01) (04F 02:XX:XX) (07M 00:00:30) (11M 05:XX:XX) (16F 05:XX:XX) (29F 12:XX:XX). “Feel like I’m going to faint – light-headed” (01F 00:01:00). Many provers described it as being light-headed (02F 02:06:20) (03M 06:XX:XX) (11M 00:XX:XX) (25M 00:01:13) (28F 08:XX:XX).

5.2.3 HEAD

The majority of provers experienced a headache at some point during the proving. In terms of location of the pain it seemed to be more one-sided (15M 01:00:25) and in particular the right side more predominantly (01F 06:XX:XX) (02F 04:08:30) (12F 29:XX:XX) (12F 30:XX:XX). The three main areas of involvement were the forehead, temples, occiput and around the eyes.

Temporal headaches involved both temples (01F 04:00:30) (02F 03:10:30) (06F 01:XX:XX) (16F 04:XX:XX) (20 M 09:XX:XX), the fronto-temporal region (01F 00:01:00) (20 M 09:XX:XX), the right temple only (01F 06:XX:XX) (02F 12:XX:XX) and the left temple only (01F 00:01:00).

Frontal headaches were noted (01F 04:03:XX) (07M 08:XX:XX) (12F 06:XX:XX). Fronto-temporal headache on both sides (01F 04:00:30), mainly on the left (01F 00:01:00) and mainly on the right (01F 06:XX:XX).

Many headaches were centred around the eyes (01F 04:03:XX) (26M 08:13:17) (28F 03:XX:XX), although most were described as being behind both eyes (02F 07:XX:XX) (11M 01:XX:XX) (12F 01:06:XX) (14M 03:10:XX) (24M 01:XX:XX). Mention was also made of pain moving into the eyeball on the right (02F 04:07:XX) and on the left (01F 04:05:XX). Two concomitant sensations related to the eyes were noted. “Headache causing the left eye to twitch uncontrollably” (15M 07:XX:XX) and “headache causing the left eye to burn” (15M 04:12:XX).
Provers experienced occipital headaches (02F 09:XX:XX) (03M 05:XX:XX) (06F 00:00:XX) (16F 04:XX:XX) (21M 07:XX:XX) (26M 20:XX:XX) (28F 02:09:00), on the right (02F 12:XX:XX), radiating to the neck (03M 02:XX:XX), radiating to the back (03M 21:XX:XX) and radiating to the front of the head (21M 07:XX:XX) (26M 20:XX:XX). It was also described as occipito-temporal (02F 12:XX:XX) (06F 00:00:XX) (16F 04:XX:XX).

The pain was described as aching (02F 08:XX:XX) (12F 06:XX:XX), cutting (21M 07:XX:XX), dull (01F 04:03:XX) (02F 03:10:30) (12F 29:XX:XX) (20 M 09:XX:XX), pressing (02F 03:10:30) (06F 00:00:XX) (07M 07:XX:XX), sharp (02F 17:XX:XX) (06F 00:00:XX) (21M 02:XX:XX), shooting (02F 09:XX:XX), stabbing (02F 12:XX:XX), stitching (01F 04:00:30) and throbbing (16F 04:XX:XX). Provers also described their headaches as "being band-like or vice-like - as if in a vice" (02F 03:10:30)," headache feels like an iron vice around my head, squeezing it" (28F XX:XX:XX), "like a band around the head" (28F 04:XX:XX), "feel like I have a clamp around my head" (28F 10:XX:XX).

The headaches were ameliorated by eating (01F 06:XX:XX), warm food (03M 25:XX:XX), heat of sun (03M 05:XX:XX), warmth (16F 05:XX:XX), hot shower (02F 08:XX:XX), covering the head (21M 02:XX:XX), open air (01F 06:XX:XX) (03M 06:XX:XX), drinking water (12F 06:XX:XX), pressure (02F 03:10:30) (02F 17:XX:XX) (20M 09:XX:XX), rest (03M 11:XX:XX) (03M 21:XX:XX), resting the head on something (06F 05:XX:XX), lying on left side (03M 21:XX:XX). The most striking ameliorations seem to be any form of heat or warmth, rest, pressure and open air. Pain worse for bending forward (02F 07:XX:XX) (14M 07:XX:XX), being tired (14M 12:XX:XX), coffee (03M 07:XX:XX) and motion (02F 04:12:XX) (21M 02:XX:XX).

Further sensations experienced in the head were pins and needles (02F 00:05:55), a numb sensation (02F 03:02:40) and "feeling a little funny in the head" (18M 00:XX:XX). Provers also described pulsating sensations in the head (02F 02:05:XX) and an internal quivering (14M 02:05:XX). There were dullness in the head (07M 00:04:XX) (14M 03:14:XX), a fuzziness in the head (14M 01:XX:XX) and the head feeling like a block (14M 02:04:XX). On the one
hand the head was described as "being full and heavy" (02F 04:10:40) (06F 05:XX:XX) (14M 07:XX:XX), and on the other hand there were a lot of feelings of lightness in the head (02F 02:06:20) (03M 00:12:30) (11M 00:XX:XX).

5.2.4 EYE

There was a lot of tiredness of the eyes (01F 00:01:00) (02F 02:06:20) (03M 13:XX:XX) (12F 07:XX:XX) (14M 02:07:XX) (18M 09:XX:XX). Provers experienced eye pain described as sore eyes (03M 10:XX:XX) (10M 04:XX:XX) (26M 11:XX:XX), stitching pain in my right eye (06F 01:XX:XX), eyes stinging a bit (14M 02:04:XX) and discomfort around the eyes (14M 02:06:XX).

Many of the eye symptoms were described as burning (02F 07:XX:XX) (10M 04:XX:XX) (15M 04:12:XX) (29F 00:02:25), with redness (01F 00:23:XX) (03M 11:XX:XX) (10M 05:XX:XX) and watering (01F 00:02:00) (03M 17:XX:XX) (11M 05:XX:XX) (14M 01:XX:XX). Eyes were also described as feeling dry (03M 10:XX:XX) (26M 11:XX:XX).

Eyes appeared glazed and glassy (01F 00:02:00), puffy (28F 03:XX:XX) and staring fixedly (21M XX:XX:XX). Eyes rolled back during petit mals (2F 15:XX:XX). Pupils dilated (01F 00:02:00) and the left pupil dilated and the right constricted (02F 04:XX:XX). Two of the provers experienced twitching and quivering around the eyes (14M 02:05:XX) and in the left eye (15M 07:XX:XX).

The eyelids felt heavy (02F 03:03:XX) (03M 02:XX:XX) and there was a description of the eyelids bulging as if filled with water (02F 11:XX:XX).

5.2.5 VISION

"Difficulty in focussing" (26M 19:XX:XX) and "full and hazy vision" (02F 11:XX:X).
5.2.6 EAR

"Pain in the right Eustachian tube area" (02F 01:06:15), "sharp pain behind the ear" (02F 09:XX:XX) and "slight pain in the left ear" (07M 03:XX:XX). Sensations in the ear were described as "fluttering or pulsating" (02F 02:09:30) as well as "buzzing and ringing in the ears" (03M 05:XX:XX). "Ears felt cold" (14M 02:10:XX).

5.2.7 NOSE

Provers recorded having a runny nose (02F 10:XX:XX) (03M 20:XX:XX) (10M 02:XX:XX) (14M 02:07:XX) (22F 00:00:15) (25M 02:XX:XX), mostly describing the discharge as egg white (01F 07:XX:XX), clear, bland and watery (02F 11:XX:XX) (03M 11:XX:XX) (16F 05:XX:XX). There was also congestion of the nose (01F 05:XX:XX) (02F 11:XX:XX) (03M 01:00:XX) (06F 07:XX:XX) (10M 27:XX:XX) (14M 01:XX:XX) (26M 18:XX:XX) (28F 03:XX:XX). There also seemed to be a clear alternation between a blocked and runny nose (02F 11:XX:XX) (10M 03:XX:XX) (14M 01:XX:X).

The nose felt rough and burny on the inside (14M 02:05:XX) (16F 05:XX:XX). There was also dryness of the nose inside (14M 02:10:XX) and an aversion to odours, especially of tobacco smoke (03M 29:XX:XX).

5.2.8 FACE

Pain on the left side of the face (21M 05:XX:XX) and on the right side of the face (28F 11:XX:XX), as well as pain in the jaw (16F 05:XX:XX) (21M 04:XX:XX) (30M 00:02:48).

Sensations felt in the face included tingling in the maxillary bones (01F 00:00:XX), tingling all over the face (02F 00:04:30), burning (01F 02:11:XX) (02F 07:XX:XX), a tired, fixed feeling in the facial muscles (01F 04:00:XX) and
numbness on the left side of the face (21M 04:XX:XX). The face also appeared and felt puffy (02F 03:XX:XX) (28F 03:XX:XX).

Swelling of the submandibular glands (01F 00:03:00) (07M 00:00:30) (20M 00:11:20). Pain and discomfort in the maxillary sinuses (03M 20:XX:XX) (07M 08:XX:XX).

Pimples noted on the face, chin and cheeks (12F 05:XX:XX).

5.2.9 MOUTH

There were many provers that experienced dryness of the mouth (02F 01:08:00) (03M 07:XX:XX) (15M 07:XX:XX), dryness of the lips (02F 07:XX:XX) (25M 03:03:43) and a dry sensation of the tongue (02F 00:05:55). On the opposite end of the scale there was increased salivation (02F 04:23:XX) (03M 20:XX:XX) (20M 00:00:00). An offensive taste in the mouth (02F 10:XX:XX) (25M 00:00:00), also described as milky or phlegmy (10M 00:00:XX) and metallic (24M 01:XX:XX).

Smooth sensation in the inside of the mouth (01F 00:02:XX). There were many symptoms related to the tongue in particular. Pain on the side of the tongue (02F 01:06:15) and at the root of the tongue (21M 04:XX:XX). Numbness of the whole tongue (02F 00:05:30), on the right side of the tongue (02F 01:06:XX) and of the tip of the tongue (02F 03:04:30). The tongue also felt rough (14M 05:XX:XX). Speech seemed slurred (28F 10:XX:XX). Inflammation of the gums (21M 04:XX:XX).

5.2.10 TEETH

Pain in the teeth (02F 00:08:XX) (13M 01:XX:XX) (21M 04:XX:XX) (28F 05:XX:XX), worse for opening the mouth or chewing (21M 06:XX:XX), worse or drinking cold water (02F 00:08:XX) (13M 00:XX:XX) (21M 04:XX:XX), better for pressure (21M 04:XX:XX) and for hot drinks (21M 04:XX:XX). There
was also sensitivity of the teeth (28F 12:XX:XX) and especially to cold (03M 26:XX:XX) (13M 00:XX:XX).

5.2.11 THROAT

The throat was described as feeling scratchy (02F 07:XX:XX) (03M 28:XX:XX) (10M 02:XX:XX) (28F 06:XX:XX) and feeling dry (03M 06:XX:XX) (20M 01:XX:XX) (26M 16:XX:XX). Many provers had a sore throat (02F 09:XX:XX) (06F 07:XX:XX) (07M 04:XX:XX) (12F 12:02:XX) (20M 08:XX:XX) (26M 15:XX:XX) (28F 05:XX:XX), worse for empty swallowing (02F 07:XX:XX) and better for cold drinks (20M 08:XX:XX). The anterior fauces were red and inflamed (16F 05:XX:XX), with a swollen left tonsil (21M 07:XX:XX).

There was phlegm at the back of the throat (14M 02:00:XX) (16F 05:XX:XX) (22F 00:00:15), with a constant desire to clear the throat (02F 09:XX:XX). The throat felt itchy (16F 04:XX:XX) (30M 00:01:30) and tingling (16F 05:XX:XX). There was also the sensation of a lump in the throat (20M 00:01:21) and the throat feeling larger than normal (20M 02:01:50). A peculiar symptom experienced was the feeling of a hollow tube in the throat (20M 00:01:21) and a sensation of nothingness (16F 05:XX:XX).

5.2.12 EXTERNAL THROAT

Swelling and tenderness of the cervical glands (02F 11:XX:XX) (28F 06:XX:XX) and a tonsillar lymph node (16F 05:XX:XX).

5.2.13 STOMACH

At certain stages of the proving, provers recorded a decrease in appetite (02F 07:XX:XX) (03M 24:XX:XX) (15M 07:XX:XX) (16F 02:XX:XX) (23M 04:XX:XX) (26M 07:00:00) and during other times an increase in appetite (02F 02:07:45) (03M 17:XX:XX) (10M 11:XX:XX) (16F 00:XX:XX). "Very hungry this morning"
(26M 01:12:00) (28F 02:07:00), even at times describing it as ravenous hunger (03M 22:XX:XX), not relieved by eating (02F 02:07:45) or only giving a short relief (02F 04:10:XX).

Increased thirst mostly for cold water (03M 00:XX:XX) (04F 00:XX:XX) (11M 03:XX:XX) (12F 06:XX:XX) (15M 02:XX:XX) (29F 00:22:30), with drinking large amounts (03M 01:XX:XX) (11M 03:XX:XX) (15M 02:XX:XX). Some provers also noted a decrease in thirst (16F 05:XX:XX) (20M 05:01:00).

There was gnawing, pulsating epigastric pain (02F 04:10:XX). Nausea was experienced (03M 05:XX:XX) (12F 17:XX:XX) (15M 07:XX:XX) (16F 00:00:05) (22F 00:00:15) (24M 00:XX:XX), with an amelioration from rest and cold water (03M 18:XX:XX). It was brought on by the odour of tobacco smoke (03M 22:XX:XX) the smell of food (15M 07:XX:XX) and the sight of rich food (16F 02:XX:XX). Another symptom that came up was a gaseous feeling and eructations (16F 00:00:05) (22F 00:00:15).

Sensations related to the stomach, were the feeling of butterflies in the stomach (03M 14:XX:XX), an empty feeling (03M 24:XX:XX), a warm feeling (11M 00:XX:XX) and slight heartburn (11M 05:XX:XX).

5.2.14 ABDOMEN

Many provers recorded a feeling of over-fullness and bloatedness (03M 07:XX:XX) (26M 06:13:30), accompanied by flatulence (02F 05:XX:XX). Abdominal pain was quite common (02F 12:XX:XX) (03M 23:XX:XX) (21M 00:XX:XX) (26M 01:00:30), with cramping (10M 03:XX:XX) (28F 07:XX:XX), better for eating (21M 02:XX:XX) and better when lying down (03M 23:XX:XX). There was also a feeling of discomfort (26M 08:23:00), especially in the colon (29F 15:XX:XX). Gurgling in the abdomen after stool (02F 09:XX:XX).
5.2.15 RECTUM

A tendency to constipation was noted (01F 03:21XX), as well as increased bowel movements (02F 04:XX:XX) (06F 01:XX:XX). There was the peculiar sensation of the tongue feeling numb after stool, as well as cramping after stool (02F 04:01:XX).

5.2.16 STOOL

Changes in stool where recorded as decrease in volume (01F 03:21:30), dark (02F 08:XX:XX), clay-coloured (28F 07:XX:XX) and very loose stool that was difficult to flush (02F 20:XX:XX) (28F 07:XX:XX).

5.2.17 BLADDER

Decreased urination was noted (02F 01:11:XX), but mostly an increase in urination (02F 08:XX:XX) (03M 15:XX:XX).

5.2.18 KIDNEYS

"An intense shooting, aching pain in my left kidney region" (02F 12:XX:XX).

5.2.19 URETHRA

"Slight burning of urethra" (03M 26:XX:XX).

5.2.20 URINE

"Urine yellow to orange" (03M 26:XX:XX).

5.2.21 FEMALE GENITALIA / SEX

"Excruciating pain in my right ovary" (02F 02:11:30).
5.2.22 RESPIRATION

Sensations of breathlessness, with the need to take slow deliberate breaths (01F 02:22:XX), as well as difficult, laboured breathing (02F 05:XX:XX) (15M 01:XX:XX). Breathing was described as not being smooth (14M 02:XX:XX) and “as if air was going over a grate and rattling at the back of the throat” (02F 03:00:XX).

5.2.23 COUGH

Provers recorded coughing (18M 02:XX:XX), a phlegmy cough (16F 05:XX:XX) and a dry cough only at night (23M 05:XX:XX).

5.2.24 EXPECTORATION

“Coughing up white mucus” (16F 05:XX:XX).

5.2.25 CHEST

Many provers experienced pain in the chest (01F 00:01:00) (02F 00:05:55) (16F 05:XX:XX) (28F 09:XX:XX), “as if needles being thrown onto the chest from the inside” (15M 01:XX:XX), causing difficulty breathing (02F 17:XX:XX) (24M 03:XX:XX), as well as pain in the left axilla (24M 04:XX:XX).

There was the sensation of a hollow tube running centrally through the chest (01F 00:02:10), of coldness in the chest (01F 00:02:10) and of oppression (01F 02:22:XX) (02F 02:06:20).

Palpitations were noted (01F 00:03:XX) (02F 00:03:45), with the sensation of the blood being thick, even described as “mashed potato” (02F 04:13:30). This caused laboured breathing and an uncomfortable sensation in the aorta. Irregular heart rhythm, with increase in heart rate (02F 05:02:X). Intense lancinating pains in the heart (02F 05:XX:XX), as well as the sensation of the blood being hot.
Axillary lymph nodes were tender and enlarged (02F 12:XX:XX) and perspiration of the chest area at night were noted (07M 08:XX:XX).

5.2.26 BACK

Provers experienced back pain (02F 02:07:45) (03M 17:XX:XX) (18M 02:XX:X) (28F 03:XX:XX), specifically in three major areas – the cervical region (10M 12:XX:XX) (25M 09:11:43), the dorsal region (shoulders) (01F 01:07:XX) and the lower back (30M 00:02:00). Pain in the coccyx was also noted (02F 20:XX:XX).

Stiffness was another common symptom experienced (02F 15:XX:XX) (03M 24:XX:XX), once again in the three main areas – cervical (28F 04:XX:XX) (30M 00:02:00), dorsal (01F 01:07:XX) (26M 25:XX:XX) and lumbar (02F 09:XX:XX).

The sensation of pins and needles, as well as a stinging sensation was noted in the back (02F 05:XX:XX). Perspiration along the spine (02F 04:XX:XX) and itching, burning pimples starting on the neck and moving down to the lower back (15M 03:XX:XX).

5.2.27 EXTREMITIES

Many provers spoke of having cold hands and feet (01F 00:01:XX) (14M 02:02:XX), describing it as icy and freezing (02F 00:06:20), with cold perspiration on the arms (02F 04:XX:XX) and cold tingling pains (01F 00:01:XX).

Various sensations were experienced in the extremities, namely tingling (01F 00:01:XX) (06F 00:00:XX) (03M 09:XX:XX), prickling and pulsating (02F 02:05:XX). There was a lot of weakness (01F 00:02:00), heaviness (03M 01:02:XX) (01F 00:01:XX) and tiredness (03M 06:XX:XX) (26M 24:XX:XX), as
well as numbness (03M 22:XX:XX) (02F 15:XX:XX). The lower limbs were described as feeling shaky, jittery and like jelly (01F 02:03:30).

Stiffness of the extremities in general (03M 11:XX:XX) and specifically the left knee (26M 24:XX:XX). Pain in the joints (02F 07:XX:XX), pains in the arms (01F 02:00:XX) (02F 00:05:45) and in the legs and knees (02F 15:XX:XX) (24M 10:XX:XX), with cramping in the right calf muscle (03M 18:XX:XX) and the left calf muscle (26M 04:01:30). Feet were also sore (03M 16:XX:XX).

There were some peculiar movement alterations, i.e. “walking with funny small steps, tripping a lot, as if my one foot sticks to the ground ever so often” (01F 00:04:XX), as well as “being unstable on my feet” and the need to overbalance (02F 02:05:XX).

Provers experienced itching of the extremities, better for washing and scratching (03M 28:XX:XX) and an uncomfortable chafing sensation (4M 15:XX:XX).

An eruption on the left arm and around the axilla, consisting of vesicles and pustules that were very itchy (01F 02:11:XX). Itchy pimples that spread from the neck to the left leg (15M 05:XX:XX) and a bulbous skin tag on the inner leg, as if filled with blood (14M 14:XX:XX).

5.2.28 SLEEP

Some also noted falling asleep early at night (16F 01:XX:XX) (29F 01:21:15) and also going to bed a lot later than usual (14M 01:XX:XX).

Various sensations were noted on waking. Woke up early feeling fine (01F 02:19:XX), fully alert on waking (03M 15:XX:XX) and waking refreshed despite going to bed late (14M 11:XX:XX). On the opposite side of the scale provers spoke of extreme tiredness on waking (03M 09:XX:XX) (16F 05:XX:XX) (29F 07:00:15) and feeling unrefreshed (12F 06:XX:XX). Anxiety on waking (03M 12:XX:XX), as well as disorientation (06F 01:XX:XX). Excessive yawning on waking (03M 03:XX:XX).

5.2.29 DREAMS

Many dreams were centred around disease (02F 06:XX:XX), especially involving children (02F 01:XX:XX) (29F 00:22:30). Also dreams of children being in danger (29F 22:XX:XX), with associated feelings of helplessness (02F 01:XX:XX). Dreams of being paralysed, not able to call out for assistance (04F 00:XX:XX) (06F 01:XX:XX).


There were dreams centred around travelling and exploring foreign places (02F 04:XX:XX), with the background constantly changing to different places (15M 00:XX:XX) and dreams of blending into the surroundings (02F 01:XX:XX).

The colour green came out in dreams i.e. she wore a green silk wrap skirt (15M 04:XX:XX) and he got married in a bright green suite with a pink shirt (02F 15:XX:XX).
Dreams referred to stealing and cheating (01F 05:XX:XX) (02F 04:XX:XX) and embarrassment (02F 01:XX:XX).

Dreams of water in various forms (03M 07:XX:XX), a sinking ship (02F 14:XX:XX) and different sports (02F 09:XX:XX) (03M 23:XX:XX). Adventurous dreams (20M 01:XX:XX).

Dreams referred to stealing and cheating (01F 05:XX:XX) (02F 04:XX:XX) and embarrassment (02F 01:XX:XX).


5.2.30 CHILL

"Sweating and cold at the same time, with a spiking temperature alternating between hot and cold" (02F 00:07:30).

5.2.31 FEVER

Fever (16F 04:XX:XX) fluctuating between hot and cold, with lots of perspiration, even during the chill stage (02F 04:XX:XX). There was a sensation of internal heat and external chilliness (02F 07:XX:XX) (16F 05:XX:XX).

5.2.32 PERSPIRATION

Increased perspiration (02F 10:XX:XX) (26M 20:XX:XX) of chest during sleep (03M 21:XX:XX) (07M 08:XX:XX), axillary and left-sided (02F 08:XX:XX).

5.2.33 SKIN

Itching eruptions (02F 09:XX:XX) (03M 28:XX:XX) (15M 03:03:XX) (24M 04:XX:XX), pustules (02F 11:XX:XX), vesicles (01F 03:06:XX) and pimples
(15M 02:11:XX), with burning (02F 07:XX:XX) (15M 03:XX:XX). I had a curative effect on eczema (24M 04:XX:XX). "Found a boil on left, between anus and vagina, painless with no head" (28F 03:12:30). "A large bulbous skin tag, as if filled with blood" (14M 14:XX:XX).

Skin extremely sensitive, especially to touch, movement or a breeze(02F 10:XX:XX), "as if pierced by a million needles or a bed of knives" (02F 11:XX:XX) and a sensation of the skin being cold (02F 08:XX:XX) and dryness (10M 27:XX:XX).

5.2.34 GENERALS

Provers felt very cold throughout the proving (01F 00:01:00) (02F 07:XX:XX) (14M 02:04:XX) (28F 02:09:00), describing it extreme cold and freezing (16F 04:XX:XX) (02F 07:XX:XX), "the cold seems to gnaw at me, as if pushing me into a depression" (14M 02:04:XX), better for wrapping up warm and hot showers. Also feeling hot during fever (02F 10:XX:XX) and stuffy (14M 14:XX:XX).

A major theme in the proving was tiredness, lethargy and fatigue experienced by 83% of the provers in various intensities throughout. Some recorded an increase of energy on some days (06F 01:XX:XX) (10M 10:XX:XX) (15M 06:XX:XX) (28F 01:XX:XX).

Sensations of heaviness (02F 00:03:XX) (16F 05:XX:XX), numbness (16F 05:XX:XX) (07M 00:00:30), body aches and stiffness (02F 15:XX:XX) (30M 00:03:13) (26M 17:XX:XX) (30M 00:06:13). Many provers describe the feeling of being on the brink of getting a cold or flu (02F 06:XX:XX) (10M 02:XX:XX) (14M 01:XX:XX) (26M 14:XX:XX).

There were various food cravings, like a craving for sweets, chocolates and ice cream (02F 07:XX:XX) (03M 22:XX:XX) (06F 05:XX:XX) (12F 03:XX:XX), salty (03M 19:XX:XX) and sour food (03M 15:XX:XX). There seemed to be a craving for fatty and rich foods (03M 15:XX:XX) (06F 02:XX:XX) (16F
and bland food (03M 16:XX:XX). There was also an aversion to chocolate, salty food, rich food and a marked aversion to milk (15M 03:XX:XX) (21M 09:XX:XX) and vegetables (03M 31:XX:XX). Provers also noted an aversion to food in general (03M 24:XX:XX) (15M 07:XX:XX) and stated that food exhausts them (06F 02:XX:XX) (14M 11:XX:XX). Drink cravings were mostly for cold water (03M 02:XX:XX) (15M 07:XX:XX), hot drinks (02F 09:XX:XX) and fruit juice (02F 07:XX:XX) (03M 12:XX:XX) (20M 14:XX:XX) and there was an aversion to coffee (03M 25:XX:XX) and beer (15M 00:XX:XX). An aversion to tobacco smoke was noted, with a general sensitivity to odours (03M 22:XX:XX).

In terms of general modalities throughout the proving, there was a marked amelioration from warmth (16F 05:XX:XX), particularly from sunlight (16F 05:XX:XX) (03M 08:XX:XX), hot showers or bathing (02F 08:XX:XX) (03M 20:XX:XX) (14M 02:02:XX), warm food and drinks (02F 12:XX:XX) (03M 25:XX:XX). Pressure brought amelioration (02F 11:XX:XX) (06F 05:XX:XX), as well as rubbing (01F 00:01:XX) (02F 15:XX:XX), rest (03M 20:XX:XX), fresh air (01F 06:XX:XX) (03M 31:XX:XX) and water (03M 16:XX:XX) (12F 06:XX:XX). There was a general aggravation from cold (13M 00:XX:XX) (03M 18:XX:XX), motion (02F 02:07:45) and stooping (02F 16:XX:XX).

An acceleration in heart rate was noticed (02F 05:XX:XX), with the sensation of the blood being thick (02F 04:13:30), as well as feeling hot (02F 08:XX:XX). Petit mals (a normal symptom for the prover) were more frequent during four days of the proving (02F 16:XX:XX).

5.3 THE ESSENCE OF CHAMAELEO DILEPIS DILEPIS

A wealth of symptoms was obtained during the proving and various themes emerged from these. In order to distinguish Chamaeleo dilepis dilepis from other remedies and to facilitate the understanding and studying of the remedy, it is useful to find the essence of the remedy. Various well known homoeopaths have expanded on this idea and use it as a tool in clinical
prescribing, to assist in finding the simillimum. Hahnemann (1996:197) in aphorism 211 of The Organon of Medicine states:

"This holds good to such an extent that the state of the disposition of the patient chiefly determines the selection of the homoeopathic remedy, as being a decidedly characteristic symptom which can least of all remain concealed from the accurate observing physician."

He speaks of "the state" of the patient, not merely a collection of symptoms. Sankaran (1991:65-66) further states that during a proving a remedy produces a state of being, at the level of the mind and at the level of generalities first. Then depending on individual susceptibility, will produce symptoms in various organs. There can be no affection of the parts without the affection of the whole. He refers to it as the central disturbance. The mental state, general symptoms and local peculiarities are indicative of the nature of the central disturbance.

Based on this all the major themes were reviewed with the aim of finding the essential state of the remedy. Two very peculiar symptoms emerged during the proving, from two different provers, that captures the essence of the remedy:

Had a frightening experience. Was semi-conscious – felt like I was dreaming. There seemed to be someone in my room, but couldn’t see distinct features of the person. They touched my leg to see if I was awake and I was paralyzed and could only move my eyes.

06F 01:XX:XX

Dreamt I was lying on the couch (my favourite place) and I was paralysed. Couldn’t even open my eyes – tried to call my daughter and she didn’t respond. Couldn’t sit up or move off the couch, so managed to fall on to the floor. Couldn’t cry out to my daughter, who I thought was in the lounge. Suddenly I got all my senses back and she was not in the lounge anyway.

04F 00:XX:XX
The theme of paralysis runs throughout all levels, represented by most of the symptoms. It is clear from the physical symptoms that *Chamaeleo dilepis* dilepis has an affinity to the nervous system. There were periods of excitement, heightened sensitivity and increased energy that relates to over-activity of the nervous system and mind. Gait and postures adapted pointed to disturbances in motor neurons. Pains and sensations were described as tingling and prickling. The end point of this over-excitable nervous system is paralysis. In general there was twitching and trembling, feelings of being heavy, numb, weak and tired. Total exhaustion and physical lethargy. Delusions or dreams of being paralysed. The paralysis extends into the mental sphere as well. The depression reached a level of despair and hopelessness, symbolising paralysis at an emotional level. Provers didn't feel like talking, didn't feel like doing anything, and felt demotivated and despondent. In relations to others they were withdrawn, emotionally cold and unfeeling. Mental exhaustion was experienced with feelings of heaviness and weakness. "There's no more spark – it's as though "the tribe has spoken" and my flame has been snuffed out" (02F 18:XX:XX).

5.4 DISCUSSION IN RELATION TO THE DOCTRINE OF SIGNATURES

Sherr (1994:11) stated: "In a proving one becomes the remedy."

During a proving the essence of the proving remedy is transferred to the provers and they produce symptoms based on the substance used to produce the remedy. During the preparation and potentisation of the remedy, the characteristics of the substance become captured in the remedy and this is then transferred to the provers.

Sankaran (1991:21) talks of adopting a posture based on the central disturbance and in disease this posture may be retained for many years. In the case of a proving the disturbance is the artificial disease imposed upon the being and their adopted posture to it will produce the symptoms of the proving. It however only lasts for a short time as the medicinal substance works itself out of the system. It is therefore useful to understand the nature of
the chameleon and how it becomes manifest in the provers. This is the doctrine of signatures – to understand the remedy through understanding the substance. It is a very useful tool in the study of materia medica (Sherr 1994:11).

The chameleon in its nature is a totally **anti-social** creature that appears to live in discrete colonies, but space themselves out by displays of aggression (Mattison, 1989:141). "I don't want to be alone, but I also don't want people talking to me" (15M 02:XX:XX). There may be other chameleons in their surrounding area, but do not like interacting with them. Provers felt **disconnected** from others. Provers spoke about withdrawing into themselves and not wanting to be around people, to go out with friends or to talk to them and felt separated and distant.

The chameleon has adapted in various ways to be able to maintain its solidarity. One way is to change their colour and blend into their surroundings (Mattison, 1989:141). A prover had the following dream: "I was on the loo and everybody started walking through the bathroom. I was flabbergasted, then just tried to **blend in** when I realised I couldn’t get them all out. Fortunately I was wearing a long skirt so I could blend in" (02F 01:XX:XX). A chameleon will also flee if in imminent danger and try to hide which is another method of withdrawal (Wager, 1983:8). "I couldn’t be around people anymore, so I decided to lock myself in my room" (15M 07:XX:XX).

Another way is by becoming very **aggressive** (Wager, 1983:7). This was clearly seen during the proving. Provers felt cold and emotionally hard, experienced angry violent feelings and were exceptionally irritable. "I am either at someone’s throat or keeping my head down, very little middle ground" (18M XX:XX:XX). This is quite specific to the nature of the chameleon, they either hide, trying to not be seen or they lash out aggressively at others. Another example of the aggressive behaviour of the chameleon was captured by another prover – "I'm getting **irritated** by little things and I'm snapping at everyone around me" (15M 07:XX:XX). One of the
It is often said that the chameleon is a very peculiar extraordinary creature (Wager 1983:7). Chameleons have a peculiar eye structure and tongue mechanism not seen in other lizards (Mattison 1989:141). Being so different to everyone else may give rise to the feelings of insecurity and poor self-image that arose in the provers, as this would be the human response to being seen as odd or different. "Really bad day with self-image – saw myself in a mirror and got a fright. So out of proportion - like a home-made house. Withdrew completely" (02F 04:XX:XX). "Been feeling a little insecure, sometimes like I have great difficulty in talking to "normal" people" (18M XX:XX:XX). They even felt disliked because of this – "I'm still feeling a bit uncomfortable about varsity

Chameleons also enter into a state of suspended animation as to not be seen by perceived enemies (Wager, 1983:18). Two experiences by two different provers were described that are very peculiar to this remedy. "I had a frightening experience. Was semi-conscious – felt like I was dreaming. There seemed to be someone in my room, but couldn't see distinct features of the person. They touched my leg to see if I was awake and I was paralysed and could only move my eyes" (06F 01:XX:XX). The other prover noted the following – "I was lying on the couch and I was paralysed. Couldn't even open my eyes. I tried to call my daughter and she didn't respond. Couldn't sit up or move off the couch, so managed to fall on to the floor. Couldn't cry out to my daughter, who I thought was in the lounge. Suddenly I got all my senses back and she was not in the lounge anyway" (04F 00:XX:XX). As already discussed, paralysis is a major theme in this remedy and it is now clear how it also relates to behavioural patterns in the chameleon. A prover prone to experiencing petit mals had a few days of increase in the number of petit mals, brought out by the proving. "Had about 10 fits today - very aware of it, so would rather not talk so nobody else notices it, but my eyes roll back, so they do notice it if they're watching" (02F 16:XX:XX). Here it is once again linked to the chameleon and more specifically the similarity seen in the chameleon's ability to roll their eyes back, as well as not wanting to be seen.
somehow, as if I’m worried that people don’t like me there anymore” (14M 13:XX:XX). There were also mention of feeling overweight (10M 03:XX:XX) that was very interesting as it corresponds to another behavioural pattern of the chameleon, another one of its defence mechanisms. Chameleons have lungs that branch throughout their bodies and when threatened will inflate its body like a balloon sufficient to make them able to float to the ground and bounce unharmed when falling out of a tree and if falling into water they are able to float or swim to land (Wager, 1983:19). This can also relate to the fact that many provers experienced bloatedness, especially of the abdomen, with increased flatus and eructations. It can also relate to the many symptoms of floating and light-headedness that provers experienced. “A floating sensation and feeling of light headedness” (03M 00:12:30). There were also many dreams about water and swimming, possible related to the chameleons ability to swim and float on water (Wager, 1983:19).

The feelings of separation, withdrawal, anger, poor self-image and anti-social behaviour may be the reason provers entered into a state of depression. Provers went into a very negative state of mind. “Emotionally feel like I’m in a black hole – not enthusiastic about much – very negative, destructive and full of self-hatred. I feel like I’m on a spiral and am gripped by fear” (02F 14:XX:XX). Here the prover uses the word spiral which is also significant in that physically we see spirals in the chameleon – in the tail and in the conical turrets that make up the eye lids. Emotionally the depression reached a state of despair, leading to despondency, demotivation and exhaustion, again related to a state of paralysis – the way the chameleon will deal with a situation of threat or uncertainty, when aggression is not the best strategy to adopt.

Throughout all the emotional symptoms of depression, sadness and anger, there is always a sense of withdrawal and lack of feeling. This can be related to the chameleon in two ways. Firstly they are cold-blooded animals and it was even described as “having a very cold approach, maybe a little unemotional” (18M XX:XX:XX). Emotionally the coldness was evident. “This cold seems to gnaw at me, as if pushing me into a depression” (14M
Another way in which the lack of feeling can be related to the chameleon is seen in the fact that the mother shows no maternal care for her young once hatched from the eggs (Wager, 1983:29). This may have been a reason for provers dreaming about children being in danger and a feeling of helplessness towards them. “A baby died from dehydration, and each time I woke up, I was terribly thirsty” (29F 00:22:30) and “driving around in a bus in Australia with no water and no 100, but we dropped kids off at the ends of some roads, out of cell phone range, so they could wait for their parents” (02F 11:XX:XX).

Some provers experienced anxiety – feeling of intense anxiety in morning as if something is about to happen (03M 26:XX:XX). This can be related to the methodology used in obtaining the sample as the chameleon was brought from the sanctuary where she lives in the morning, awaiting the procedure and the disruption may have created a sense of nervous foreboding.

Chameleons are very sensitive creatures, as they are extremely vulnerable and are preyed upon by mainly snakes, as well as birds and monkeys. One of the biggest threats to them is veld fires (Wager 1983:25). Chameleons are therefore very alert and nervous in their natures and can move with great speed through the vegetation and run very fast when on the ground (Mattison, 1989:140). Their vulnerability may explain the provers' oversensitivity to external impressions in general and especially to noise. When a leaf rests against a chameleons body for a few minutes and is then removed, it will
reveal its shape by a lighter colour, or when an insect rests on a chameleons back and flies off, its outline may be left where it was sitting. This may indicate why provers were so vulnerable to outside influences and were not able to control it.

Another very peculiar characteristic of the chameleon is the way they move. Chameleons make slow forward and backward swaying motions of the body while walking. A forefoot on one side and hind foot on the other side moves slowly forward, while the opposing legs hold on tight to a twig, before following in the same swaying motion. "Trip a lot, my left foot especially seems to stick to the ground ever so often" (01F 00:04:15) was the way one prover described it, relating to the two legs holding on at the back – as if sticking to the ground. The movements are measured and uncertain and may appear jerky. "Walking with funny small steps, like I’m autistic or something" (01F 00:02:XX). There were also reports of trembling and jittery movements. The trunk is flattened from side to side, assisting them in balance, when climbing along thin branches. Provers experienced balance disorientation, needing to lean against walls for support. "Unstable on my feet, so I keep overbalancing" (02F 02:05:XX). There were also sensations of heaviness, which is understandable as the chameleon carries quite a large head and body on thin legs. "Feel extremely heavy and exhausted" (06F 01:XX:XX).

During mating season the female chameleon attracts a few males and a battle may ensue between males. Mating then takes place about 2-3 times a day and may be with different males. This may be related to the following dream – "I dreamt my husband and I went for a walk with a friend of mine, up on a hill. In full view they were kissing, so her husband and I kissed as well" (01F 05:XX:XX).

General mental characteristics of animals came through in the proving, like envy, jealousy, aggression and competitiveness. There was also a conflict between honesty and deceit. Deceit is characteristic of the snake remedies and being a reptile as well, may explain its occurrence in this proving.
The head was a large area of affinity in this remedy. A lot of provers experienced headaches. The head on the chameleon is quite prominent, with large occipital flaps that fold over the neck. These flaps extend from behind the eyes, the area of the temples to the back of the head. These were the areas of the head mostly affected by headaches – temples, behind the eyes and the occipital region especially. A very prominent area was behind and around the eyes. This is clearly a strong feature in the chameleon and a focus for many symptoms in the proving. “I have a major headache on the left side of my head – causing my left eye to twitch uncontrollably” (15M 07:XX:XX). This can be linked to the nervous phenomena that run throughout the chameleon and the proving. Another example was – “I’ve been lying down for a while, but I can’t sleep – at one stage my head seemed to quiver or shake, but internally, around the eyes” (14M 02:05:XX). Again headaches were better for heat, that link to the general modalities and how it relates to the cold-blooded chameleon as already discussed.

The pain also extended down into the neck (03M 02:XX:XX) also related to the region of the occipital flaps and related specifically to this were many symptoms of neck pain and stiffness. Pain in the trapezius muscle was also described and the anatomical location of the trapezius muscle corresponds to the location of the occipital flaps as well. There was pain and stiffness all along the back, right down to the coccyx. The chameleon has a ridge of scales that run all the way down the spine and the back is always arched and not very flexible. This can be related to the spine directly and can also explain the general stiffness and pain along the back. A mention was made of the coccyx being sore, which can possibly be linked to the manner in which we obtained our sample – by snipping a piece off the tail.

The eye is a very peculiar feature in the chameleon. The chameleon has large eyes that are mostly covered in skin that look like bulging, conical turrets, leaving tiny apertures for viewing that can swivel around so that each eye can look up, down, forwards or backwards independently and in two directions at once (Wager 1983:7). Being able to swivel the eyes around and having it be one of the most active and alert parts of the body, may explain the many
symptoms of tired eyes experienced by provers. "Eyes so **tired** I can hardly keep them open" (02F 02:06:20). With this tiredness were many symptoms of redness, burning, watering and dryness. This may be related to the patent aperture as seen in the chameleon, without the blinking response to keep eyes moist and lubricated.

Another interesting symptom that emerged in the eyes was that one pupil dilated and one constricted. This relates to the fact that a chameleon can focus its eyes on two different places at the same time and how accommodation of the pupil will be affected by this. Another prover was observed staring fixedly at one specific point. There were feelings of puffiness around the eyes that are explained by the huge bulging eyes of the chameleon and one prover described it specifically like this – “eyelids feel like they’ve been filled with water and just want to bulge. So uncomfortable – full and hazy vision” (02F 11:XX:XX).

In the **face** there were many sensations related to the nervous system as has already been related to the chameleon in general. Sensations of tingling, burning and numbness. “Tired, fixed feeling in facial muscles, like you’ve put a mask on and it’s dried off” (01F 04:00:XX). This corresponds to the thick skin of the chameleon (Patterson, 1987:47).

The inside of the **mouth** was described as “feeling very smooth” (01F 00:02:XX) and this is due to the large, pliable soft tongue. A fullness in the mouth was also described. There was dryness of the mouth and lips that can also be related to the chameleon in that chameleons need to drink a lot of water. A chameleon kept in captivity was noted going to the water bowl to drink very often. Thirst for cold water also came through strongly during the proving and many symptoms were ameliorated by drinking water. Increased salivation was also noted, possibly due to the wetness of the tongue that allows the tongue to make an airtight connection with the prey it is catching. The chameleon has a peculiar **tongue** mechanism as discussed in chapter 2. It is a long **hollow tube** that is attached to a thin bone in the throat and is concertinaed over the bone (Wager, 1983:19). This may have explained one prover saying his tongue felt rough, as perhaps it would if it was concertinaed.
over something. The hollowness of the tongue came through in two provers. One was in the throat - the "feeling as if a tube in the throat and that it is hollowed" (20M 00:01:21) was described. The 'sensation of a lump in the throat and a sensation of the throat being larger than normal" (20M 02:01:50) was also noted. The throat of the chameleon is also quite prominent in that it is very large and contains the thin bones that operate the tongue mechanism. In general the provers reported many symptoms of scratchiness, grittiness and itching in the throat. The same sensation was noted in the chest - "sensation of hollow tube inside, down from thoracic outlet, centrally" (01F 00:02:10).

Chameleons have minute saw-like teeth along edges of powerful jaws. Jaw pain came through in the proving as well as severe toothache, with a sensitivity to the cold. The teeth are highly innervated and very sensitive and may have been an area of affinity, linking to the affinity to the nerves in general and the cold sensitivity runs throughout the proving as has been discussed.

There was both an increase and decrease in appetite. This is seen in the chameleon, in that chameleons are voracious feeders, but it is very dependant on the availability of the correct natural foods. If they do not have access to this, as seen in captivity, they will not eat and possibly starve to death. Provers noted extreme hunger, but at the same time some were very easily nauseated by food and many provers were averse to food in general.

A lot of breathlessness was noted, but with a specific and peculiar type of breathing that was described as 'grating'. Breathing in through my mouth was like the air had to go over a grate, not smooth at all. It was easy enough to get it in, but almost rattled at the back of my throat (02F 01:00:XX) and also just described as my breathing has not been smooth (14M 02:XX:XX). A similar feature with respect to the breathing is also reported as relating to Heloderma suspectum (Gila monster), where the breathing was described as being hard as if the breath was drawn through iron pipes, which is similar to a grate (Vermeulen, 1996:439). Also seen in other reptilian remedies is the sensation
of fullness in the chest, specifically of the **heart** region, with slow, laboured thumping of the heart (Boericke 2002:323). Related to this there were "sensations of the blood being too thick and being forced through the heart and aorta, as if mashed potato" (02F 04:13:30). Also an awareness of the heart beating in the chest. Most of the respiratory and chest symptoms seem to be reptilian features in general.

The **extremities** in general were a huge focal point in the remedy and many of the symptoms have already been related to the chameleon in general, like the extreme coldness. This was prominent in the chameleon and according to Vermeulen (1996:439) is another reptilian characteristic, where the coldness can be described as 'arctic'. Many nervous system related symptoms came up in the extremities - tingling, prickling, pulsating, numbness – as has been discussed, as well as the changes it gait and jittery movements so peculiar to the chameleon. There was a lot on numbness specifically, which can be linked to the paralysis or state of suspension seen in the chameleon. Legs were shaky and like jelly and there was a lot of extreme weakness. It can all be linked to the chameleons' tiny legs carrying around quite a large body, as well as to its peculiar movements.

Difficulties related to **sleeping** patterns were experienced by every prover to varying degrees. This is very common to the reptiles in general and in this case presumably related to the increased nervous excitability of the chameleon. Provers experienced difficulty falling asleep, restless tossing and turning, with frequent waking. Snakes prey on chameleons at night and they are therefore vulnerable. It may have been the cause of the restless, broken sleep seen in the provers.

Provers recorded various **dreams** that can be related to chameleon and a few have already been mentioned. There were many dreams of disease during this proving and this was also experienced during the proving of *Heloderma suspectum* (Gila monster).
Provers spoke of changing backgrounds in their dreams (15M 04:XX:XX) and blending in as has already been mentioned. Another very peculiar dream was recorded – "dreamt a friend of my granddad's got married in a bright green suit with a pink shirt – he looked like a watermelon" (02F 15:XX:XX), or perhaps a chameleon, as chameleons are green and their throat pouches vary from red and pink to orange. It is a strong dream image that describes the colouration of the chameleon.

**Fevers** were fluctuating between heat and cold and this can be due to the cold-bloodedness of the chameleon. Chameleons cannot regulate temperature internally, but depend rather on the flattened shape of the body to assist them, by either absorbing heat from the sun or turning in such a manner as to avoid it during the hottest parts of the day (Mattison, 1989:139). Therefore provers may have experienced difficulties in regulating their own body temperature.

Provers had some skin eruptions – mostly pimples, vesicles and pustules. The chameleon has a very rough and bumpy skin and this may be the link to the eruptions provers had. The chameleon sheds its skin periodically and may rub against branches to scratch the skin off (Wager, 1983:15). The provers experienced very itchy eruptions with the inclination to scratch. One prover also had a skin tag that aggravated during the proving, which can be related to a roughened area of skin or scale on the chameleon. The skin was very sensitive in general as it is highly innervated by sensory nerves, linking it to the general affinity to the nervous system experienced during the proving. Provers also reported dry skin and this may be related to the dry, scaly skin of the chameleon.

In **general** there was tiredness, heaviness, numbness as have already been discussed under the paralytic tendency that emerged in the remedy. There was coldness throughout that has been elaborated on, with general ameliorations from warmth, rest, fresh, open air and drinking water. All these are specific to the chameleons' habits as well as the general aggravation from cold and motion.
Chamaeleo dilepis dilepis as a remedy produced a vast amount of symptoms that could be related to the characteristics of the chameleon. This analysis was done with the aim of assisting future homoeopaths in the understanding of the remedy and to facilitate studying of the materia medica of Chamaeleo dilepis dilepis.

5.5 REMEDY DIFFERENTIALS

The following remedies were found to be complementary to Chamaeleo dilepis dilepis, according to research done by Moore (2006):

- Heloderma suspectum (Gila Monster)
- Lachesis muta muta (Bushmaster Snake)
- Conium maculate (Poison Hemlock)
- Phosphorus (The element)
- Agaricus muscarius (Fly Agaric)
- Hydrogen (The element)

5.6 MIASMATIC INDICATION

The syphilitic miasm seems to be the most prominent miasm (see definition of terms). Considering the symptoms of tertiary neurosyphilis, there is a definite correspondence with the proving symptoms of Chamaeleo dilepis dilepis. The following symptoms correspond:

- Headache
- Dizziness
- Poor concentration
- Irritability
- Depression
- Fatigue
- Insomnia
- Neck stiffness
- Blurred vision
- Pupillary abnormalities
- Weakness
- Tremors
- Unsteady gait
- Paraplegia

*Chamaeleo dilepis dilepis* further shares some of the same organ affinities as the syphilitic miasm – brain, nervous system, eyes, heart. There was an end-stage sense of hopelessness in the provers as seen in the mental, emotional realm. Provers entered a very dark, negative state of depression, with hopelessness, despair and violent anger. These mental symptoms also correspond with the syphilitic miasm.

### 5.7 Clinical Indications

The various symptoms that came up in the proving indicates a variety of conditions that could possibly be treated by the application of *Chamaeleo dilepis dilepis*. This will however only be verified through clinical application. I am providing a list of conditions that correspond in symptomatology to the proving and can therefore be treated through the application of the principle of similitude.

Specific disorders that may be indicated:

- Depression
- Bipolar disorder
- Insomnia
- Paralysis
- Facial neuralgia
- Bell’s Palsy
- Peripheral neuralgia
- Fatigue (chronic fatigue syndrome)
- Parkinson’s disease
- Multiple sclerosis
- Cataplexia
- Guillain-Barre syndrome (early stage)
- Syphilis (predominantly the 3rd stage of the disease)

General conditions that are indicated:

- Vertigo
- Tension headaches
- Conjunctivitis
- Tinnitus
- Coryza
- Sinusitis
- Toothache
- Pharyngitis
- Influenza
- Nausea
- Abdominal bloating
- Dyspnoea
- Coughing
- Chest pain
- Palpitations
- Back pain and stiffness
- Neck pain and stiffness
CHAPTER SIX

RECOMMENDATIONS AND CONCLUSIONS

6.1 RECOMMENDATIONS

6.1.1 Prover group

The quality of the proving is dependant predominantly on the provers. During this research homoeopathic students were used as provers, as well as members from the general public.

It was noted that homoeopathic students produced a far broader range of symptoms and were more inclined to describe symptoms in greater detail. A wealth of information was gained from these provers, due to their general awareness of their bodies and state of mind, as their understanding of homoeopathy further assisted them in observing and recording in detail even the most subtle of symptoms.

Most provers from the general public on the other hand, seemed totally unaware of their general state of being and their symptoms proved to be incomplete and vague. A thorough explanation was given on how to record symptoms and an instruction sheet was given, but provers from the general public did not adhere to these basic principles of symptom recording and were in general unaware of the more subtle symptoms produced by the proving. Some of the provers from the general public produced some very important confirmatory symptoms though and these were used to lend weighting to the symptoms produced by the homoeopathic students.

Another important aspect crucial to the success of the proving is the provers’ sensitivity. The bulk of symptoms came from only a few very sensitive provers.
It is impossible to assess prior to the proving who would have a general sensitivity to the specific proving substance, but it would be advisable to assess their general level of sensitivity, during the pre-proving case taking.

The researcher would suggest that added care be taken in future provings as regard to prover selection and the bulk of provers should be volunteers with a vested interest in homoeopathy. It is not suggested that the general public should be totally excluded as volunteers, but will advise thorough pre-proving orientation and giving many examples on how to record and observe symptoms, extracted from successful provings.

A further suggestion would be to use willing provers that have been known to produce full symptom pictures, during previous provings. It might be valuable to create an internal database at the homoeopathy department of Durban University if Technology, containing names and contact details of volunteers that produced thorough provings, so that these potential provers can be approached for future provings. Their names can only be added if they have given their full consent.

6.1.2 Contribution in terms of age, gender and ethnicity

The age, gender and ethnic contribution of provers also play a vital role in obtaining a well-rounded and balanced proving. In terms of age groups, subtle differences in symptoms produced may be contributed to the provers being in different stages of the life cycle and the effect it has on the area or level of sensitivity of the individual provers. These subtle differences were also noted over the different ethnic groups, due to the variation in their lifestyles, diets and personal habits, although only a small contribution of provers were African and Asian. Furthermore the physiological and emotion differences between gender groups should also be considered as it affects the symptoms produced. Due to the above mentioned factors, the researcher suggests using an even contribution from the various groups, ensuring a well-balanced proving.
6.1.3 Timeframe of the proving

It was proposed prior to the proving that the proving commences in a staggered fashion, with 3 provers starting each day over 5 days. During the research it was discovered that it is impossible to adhere to such a strict time frame, as it is very dependant on provers’ availability. Provers could only attend pre-proving consultations at their own convenience and for various reasons only commence the proving on days that would fit in to their schedules. These times were different for all the provers and therefore the staggering had to be adjusted to the availability of provers. It can be suggested to establish a more general time frame in which the provers should commence with the proving, so as to keep it all within a reasonable time period for a sense of unity to be maintained in the proving and then slotting provers in as their time and schedules allow it.

6.1.4 Indigenous substances

Chamaeleo dilepis dilepis shows great potential as a homoeopathic remedy as it is an indigenous substance and no other members from the Chamaeleonidae species have been proven to date and will serve to expand the Materia Medica. According to Sherr (1994:49) a useful remedy should be a local one, as nature will always provide an accessible cure. Sutherlandia frutescens (Cancer bush) is a recent proving of an indigenous substance and has proven a valuable medicinal substance as was expanded upon in the research done by Louw (2002). South Africa has a rich variety of indigenous fauna and flora, indicating a vast healing potential and I would like to recommend future provings to be done of local substances.

6.1.5 Publication

A variety of symptoms were produced during the proving and now awaits clinical confirmation. It is crucial to the future application of a new remedy in clinical practise that all practising homoeopaths are made aware of the proving results. I therefore would like to recommend publishing new provings
on the internet i.e. Sherr (2006) invites anyone that has conducted a proving to add it to an online catalogue as a means of creating awareness of the remedy.

6.2 CONCLUSION

The hypothesis that the proving of Chamaeleo dilepis dilepis 30CH would produce symptoms in healthy individuals partaking in the study was confirmed, as a wide variety of symptoms covering 34 sections of the materia medica were obtained.

The remedy produced a large number of mental symptoms and may prove useful in the treatment of depression, irritability with anger, antisocial behaviour, feelings of disconnection and anxiety. Headaches were also common in provers and more specifically tension headaches. The eyes were also affected and this may suggest the application of this remedy in conjunctivitis and other allergic eye symptoms. Sleep disturbances were very common throughout the proving, with difficult falling asleep, frequent waking and restless tossing and turning and this may still prove to be a very important remedy in the treatment of insomnia. Difficult respiration with grating breathing, palpitations, abdominal bloating, coryza, influenza and toothache also came through in the proving. Back pain and stiffness was very prominent in the regions of the neck, shoulders and lower back. The treatment of exhaustion, heaviness and weariness seems to be one of the most important areas of application. In general there was an obvious preponderance for the nervous system with tingling, numbness, paralysis, motor control disturbances, weakness and pain. In general there was an extreme cold sensitivity with amelioration of most symptoms by warmth.

The hypothesis that the symptoms produced would show a correlation to the doctrine of signatures as related to the chameleon was also confirmed. The behavioural patterns of the chameleon corresponded very closely to the state produced by the provers, as well as clear similarities in sleep patterns, nervous phenomena, cold-bloodedness and gait disturbances. Various other
peculiar symptoms could be directly related to the chameleon, i.e. bulging eyelids and the sensation of a hollow tube inside the throat and chest.

The main area of affinity for this remedy is the nervous system and it would be interesting to determine its efficacy in the treatment of various degenerative nervous system conditions and over-excitability of the nervous system leading to insomnia. It may also have a direct action on the brain in terms of mood disturbances, anti-social behaviour and depression, as well as on the cerebellum in terms of gait disturbances and poor motor control. This can only be done through clinical application and careful prescription based on the principle of similitude.
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- Have you had surgery in the last six weeks? YES / NO
- Do you use recreational drugs such as cannabis, LSD or MDMA? YES / NO
- Do you consume more than  
  - two measures of alcohol per day YES / NO
    \(1 \text{ measure} = 1 \text{ tot, 1 beer, } \frac{1}{2} \text{ glass of wine}\)  
  - ten cigarettes per day YES / NO  
  - three cups of coffee or tea per day YES / NO
- Do you consider yourself to be in a general state of good health? YES / NO
- Are you willing to follow the proper procedures for the duration of the proving? YES / NO

Case History Sheet


Prover number:

Name:  
Sex:  
Dated of birth:  
Age:  
Marital status:  
Children:  
Occupation:  

Past medical history:
Please list all previous health problems and their approximate dates:

Do you have a history of any of the following?

<table>
<thead>
<tr>
<th>Cancer</th>
<th>Asthma</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV</td>
<td>Pneumonia / Chronic bronchitis</td>
</tr>
<tr>
<td>Parasitic infections</td>
<td>Tuberculosis</td>
</tr>
<tr>
<td>Glandular fever</td>
<td>Tendency to suppuration / boils</td>
</tr>
<tr>
<td>Bleeding disorders</td>
<td>Haemorrhoids</td>
</tr>
<tr>
<td>Eczema or skin conditions</td>
<td>Cardiovascular disease</td>
</tr>
<tr>
<td>Arthritic / Rheumatic conditions</td>
<td>Warts</td>
</tr>
</tbody>
</table>
**Surgical history:**
Please list any past surgical procedures you have undergone, and the approximate dates. (Including the removal of tonsils, warts, moles, appendix)

**Allergies:**

**Vaccinations (including any reaction to them):**

**Medication (including supplements):**

**Estimation of daily consumption of:**
Alcohol:
Cigarettes:

**Family history:**
Is there a history of any of the following within your family?

<table>
<thead>
<tr>
<th>Cardiovascular disease</th>
<th>Cerebrovascular disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes mellitus</td>
<td>Tuberculosis</td>
</tr>
<tr>
<td>Mental disease</td>
<td>Cancer</td>
</tr>
<tr>
<td>Epilepsy</td>
<td>Bleeding disorders</td>
</tr>
<tr>
<td>Arthritic / Rheumatic conditions</td>
<td></td>
</tr>
</tbody>
</table>
Please list any other medical conditions within your family:

**General Health:**

**Energy:**
Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

**Stress:**
Describe your stress levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

**Sleep:**
- Quantity
- Quality
- Position

**Dreams:**
Include any recurrent dreams and themes; and any significance related to life situations at the time of the dream.
Time modalities:

Weather modalities:

Temperature modalities:

Perspiration:
- Distribution
  - Odour
  - Colour

Appetite:
- Hunger
- Cravings
- Aversions
- Aggravations

Thirst:
- What do you normally drink
  - Quantity
  - How do you drink (small / large sips...)

Travel:
Specific Body Systems:
Symptoms from each system will be concentrated on more than pathologies – these headings are just guidelines for the researchers.

Head:
- Scalp, hair
  - Headache
    - Trauma, whiplash
  - Concomitants
  - Modalities

Neurological:
- Seizures
  - Weakness / palsy
  - Sensations
  - Concomitants
  - Modalities

Eyes:
- Pain
  - Inflammation
  - Discolouration
  - Vision
  - Concomitants
  - Modalities
Ears:
- Otitis
- Balance / vertigo
- Tinnitus
- Hearing
- Concomitants
- Modalities

Nose:
- Allergic rhinitis
- Coryza
- Sneezing
- Sinusitis
- Post-nasal drip
- Concomitants
- Modalities

Throat:
- Sore throats
- Hoarseness
- Tonsils – IN or OUT
- Concomitants
- Modalities

Pulmonary:
- Chest
- Cough
- Sputum
- Asthma
  - SOB
- Bronchitis
- Pneumonia

- Concomitants
- Modalities

**CVS:**
- Hyper / Hypotension
- Pain / discomfort (chest)
- Palpitations
- Syncope
- Oedema
- Phlebitis, varices, telangiectasias, anaemia, easy bruising...

- Concomitants
- Modalities

**GIT and Abdomen:**
- Nausea / vomiting
- Indigestion / heartburn
- Hernia
- Ulcers
- Abdominal pain
- Bloating
- Bowel movements
- Constipation
- Flatulence
- Any organs particularly affected (Liver, pancreas, gall bladder...)

- Haemorrhoids
- Any GI surgery

- Concomitants
- Modalities

**Urinary system:**
- Urine output per day (quantity, colour, odour...)

- Fluid intake (what, how much, hot / cold...)

- Infections
- Nocturia
- Haematuria
- Past stones

- Concomitants
- Modalities

**Male system:**
- Libido

- Pain
- Impotence
- Emissions
- Prostate
• Swellings
• Lesions
• STD's

• Concomitants
• Modalities

Female system:
• Contraception For how long
  Past history of

• Libido
• Coital pain
• Pain (other)
• Bloating
• Cysts
• PMS
• Menstrual cycle
  - Interval
  - No. of days
  - Amt. of flow
  - Colour of blood
  - Clots
  - Pain
  - Menarche
• Menopause
• Discharge
- Breast pain
- Check ups
- PAP smear
- Last gynae appointment
- Pregnancy
- Labour
- Infections
- STD's

- Concomitants
- Modalities

**Skin:**
- General appearance
- Eruptions
- Dryness
- Turgor
- Nails

- Concomitants
- Modalities

**Musculoskeletal:**
- Muscle pain / stiffness

- Joints
  - Pain
  - Stiffness
- Inflammation

  - Concomitants
  - Modalities

**Mental:**
Please describe your mental and emotional state as it is at this present time

**Physical Examination:**

**Vital signs:**
- Pulse
- Temperature
- Blood pressure
- Height
• Weight (any recent change...)

**JACCOLDD:**
- Jaundice
- Anaemia
  - Capillary refill
- Cyanosis
- Clubbing
- Oedema
- Lymphadenopathy
- Dehydration
- Dyspnoea

**Cursory examination:**
Brief head to toe examination of all systems
- Skin
- Head and neck
- Respiratory
- CVS
- Abdomen
- Extremities
  - Reflexes
  - Range of motion
  - Muscle tone
Appendix D

Informed Consent Form
(To be completed in duplicate by the prover)

Title of the Research Project
A Homoeopathic Drug Proving

Name of Supervisor
Dr. C. R. Hopkins

Name of Research Students
Liesl Pistorius, Debora Moore

Please Circle the Appropriate Answer:

1. Have you read the research information sheet?
   YES / NO
2. Have you had the opportunity to ask questions regarding this proving?
   YES / NO
3. Have you received satisfactory answers to your questions?
   YES / NO
4. Have you had an opportunity to discuss this proving?
   YES / NO
5. Who have you spoken to? ______________________________________
6. Have you received enough information about this proving?
   YES / NO
7. Do you understand the implications of your involvement in this proving?
   YES / NO
8. Do you understand that you are free to withdraw from this proving:
   a. At any time
   b. Without having to give a reason for withdrawing
   c. Without affecting your future health care?
      YES / NO
9. Do you agree to voluntarily take part in this proving?
   YES / NO

If you have answered NO to any of the above, please obtain the information before signing.

I __________________________ hereby give consent for the proposed procedures to be performed on me as part of the mentioned research project.
Instructions to Provers

Dear Prover,

Welcome to an exciting experience. We would like to thank you very much for taking part in this proving. Please follow the following instructions carefully.

**Before the Proving**
Make sure you have:

1. Completed and signed the informed consent form
2. Attended the pre-proving meeting
3. Had a case history taken and a physical exam done
4. Been allocated a prover code
5. Been given a journal
6. Been given a set of six powders
7. Read and understood these instructions

Your proving supervisor will inform you of the date to start the one week pre-proving observation period and again on which day to start taking the remedy. Please give a convenient daily contact time when the supervisor can contact you.

Should there be any further queries or uncertainties, please do not hesitate to contact your proving supervisor at any time.

**Beginning the Proving**
Record your symptoms daily in the journal for one week prior to taking the remedy. This will help you get into the habit of observing and recording your symptoms on a daily basis and it will also bring you into contact with your normal state. This is very important as it forms the baseline of the proving.
**Taking the Remedy**

Begin taking the remedy on the day you and your supervisor have agreed upon. It is very important to record the time that you take each dose. Time keeping is an important element of the proving.

The remedy should be dissolved under the tongue on an empty stomach and with a clean mouth. Neither food nor drink should be taken for half an hour before and after taking the remedy. The remedy should not be taken for more than 3 doses a day for two days (six tablets maximum).

In the event that you experience symptoms or those around you observe any proving symptoms do **not take any further doses of the remedy**.

By proving symptoms we mean:

1. any new symptoms, i.e. ones that you have never experienced before
2. any change or intensification of any existing symptom
3. any strong return of an old symptom, i.e. a symptom that you have not experienced for more than one year

If in doubt please don’t hesitate to contact your supervisor. Be on the safe side and do not take any further doses. Our experience has shown again and again that the proving symptoms usually begin very subtly, often before the prover recognises that the remedy has begun to act.

**Lifestyle during the Proving**

A successful proving depends on your recognising and respecting the need for moderation in the following areas: work, alcohol, smoking, tea, coffee, exercise and diet. Try to remain within your usual framework and maintain your usual habits.

Avoid all antidoting factors such as camphor menthol and mints. If you normally use these substances, please stop taking those two weeks before, and for the duration of, the proving.

Protect the tablets you are proving as you would any other potentised remedy by storing it in a cool, dark place, away from any strong smelling substances and electronic equipment i.e. cell phones.

Avoid taking medication of any sort, especially antibiotics, vitamin or mineral supplements, herbal or homoeopathic remedies.
In the event of a medical or dental emergency of course common sense should prevail. Contact your doctor, dentist or local hospital as necessary. Please contact your supervisor or proving coordinator as soon as possible.

Confidentiality
It is important for the quality and credibility of the proving that you discuss your symptoms only with your supervisor. Keep your symptoms to yourself and do not discuss them with fellow provers or anyone that may have contact with fellow provers.
Your privacy is something that we will protect. Your identity will be known only by your supervisor and on completion of the proving all identifiable information will be removed and destroyed.

Contact with your Supervisor
Your proving supervisor will contact you to start the pre-proving observation period and then on a daily basis once you start taking the remedy, until you and your supervisor agree that it is not necessary to maintain such close contact. This will then decrease to 2 or 3 times a week, and then once a week. This is to monitor your progress, make sure that you aren’t experiencing any difficulties and to ensure that you are recording the best quality symptoms. If you have any doubt or questions at any point during the proving, contact your supervisor immediately.

Recording of Symptoms
When you commence the proving, note down carefully any symptoms that arise, whether they are old or new, and the time of day or night at which they occurred. This should be done as vigilantly and frequently as possible so that the details will be fresh in your memory. Make a note even if nothing happens.

Please start each day on a new page with the date noted at the top of each page. Also note which day of the proving it is. The day that you took the first dose is day zero.
Write neatly on alternate lines, in order to facilitate the extraction process which is the next stage of the proving.
Please keep this information sheet and your journal with you at all times to ensure you record symptoms as soon as they occur. Please be as precise as possible. Note in an accurate, detailed, but brief manner, your symptoms in your own language.

Information about location, sensation, modality, time and intensity is particularly important:

**Location**
Try to be accurate in your anatomical descriptions. Simple clear diagrams may help here. Be attentive to which side of the body is affected.

**Sensation**
Describe the type of sensation as thoroughly as possible i.e. burning, dull, shooting, stitching, throbbing etc.

**Modality**
> (better) or < (worse) from weather, food, smells, dark, lying, standing, light, people, etc. Try different things out to see if they affect the symptom and record any changes.

**Time**
Note the time of onset of the symptoms, and when they cease or are altered. Is it generally > or < at a particular time of day, and is this unusual for you?

**Intensity**
Briefly describe the sensation and effect of the symptom on you.

**Aetiology**
Did anything seem to set off or cause the symptom and does this occur frequently?

**Concomitants**
Do any symptoms occur simultaneously or do some symptoms appear to alternate with each other?
Remember **CLAMITS**
C - Concomitants
L - Location
A - Aetiology
M - Modality
I - Intensity
T - Time
S - Sensation

On a daily basis you should run through the following check list to ensure that you have observed and recorded all your symptoms:

<table>
<thead>
<tr>
<th>Mind</th>
<th>Stomach</th>
<th>Cough</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vertigo</td>
<td>Abdomen</td>
<td>Expectoration</td>
</tr>
<tr>
<td>Head</td>
<td>Rectum</td>
<td>Chest</td>
</tr>
<tr>
<td>Eye</td>
<td>Stool</td>
<td>Back</td>
</tr>
<tr>
<td>Vision</td>
<td>Bladder</td>
<td>Extremities</td>
</tr>
<tr>
<td>Ear</td>
<td>Kidneys</td>
<td>Sleep</td>
</tr>
<tr>
<td>Hearing</td>
<td>Prostate</td>
<td>Dreams</td>
</tr>
<tr>
<td>Nose</td>
<td>Urethra</td>
<td>Chill</td>
</tr>
<tr>
<td>Face</td>
<td>Urine</td>
<td>Fever</td>
</tr>
<tr>
<td>Mouth</td>
<td>Male genitalia/sx</td>
<td>Perspiration</td>
</tr>
<tr>
<td>Teeth</td>
<td>Female genitalia/sx</td>
<td>Skin</td>
</tr>
<tr>
<td>Throat</td>
<td>Larynx</td>
<td>Generals</td>
</tr>
<tr>
<td>External Throat</td>
<td>Respiration</td>
<td></td>
</tr>
</tbody>
</table>

As far as possible try to classify each of your symptoms by making a notation according to the following key in brackets next to each entry:

**(RS)** - Recent symptom i.e. a symptom that you are suffering from now, or have been suffering from in the last year.

**(NS)** - New symptom.

**(OS)** - Old symptom. State when the symptom occurred previously.

**(AS)** - Alteration in a present or old symptom. (E.g. used to be left side, now on the right side)

**(US)** - An unusual symptom for you.
Please remember to use red ink for these notations and classify your symptoms accurately. If you have doubts, discuss them with your supervisor.

Please give full descriptions of dreams, and in particular note the general feeling or impression the dream left you with.

Mental and emotional symptoms are important, and sometimes difficult to describe - please take special care in noting these.

Reports from friends and relatives can be very enlightening. Please include these if possible.

At the end of the proving please make a general summary of the proving. Note how the proving affected you in general. How has this experience affected your health? Would you do another proving?

Please remember that detailed observation and concise, legible recording is crucial to the proving.

"The best opportunity for exercising our sense of observation and to perfect it is by proving medicines ourselves." - Hahnemann

"The person who is proving the medicine must be pre-eminently trustworthy and conscientious... and able to express and describe his sensations in accurate terms." Organon § 126

Thank you for participating in this proving. I am sure you will find that there is no better way of learning and advancing homoeopathy.

Extracted and freely adapted from Jeremy Sherr – The Dynamics and Methodology of Provings.
Appendix F

Proving Information Sheet

What is a proving?
A homoeopathic drug proving is a study in which people who are in a relatively good state of health, take a homoeopathically prepared substance in order to observe and record any symptoms that are elicited. These symptoms are then said to form the drug picture for that substance and can be used as a basis for prescription, according to the Law of Similars, when a patient displays a similar symptom picture.

Why participate in a proving?
Provings are vitally important to homoeopathy as they represent the only truly accurate manner in which to ascertain the action of homoeopathic drugs. Hahnemann suggests in the Organon that all homoeopaths should take part in provings because they allow one to gain a practical and experiential understanding of homoeopathic medicines. He also feels that the process of having to accurately record all symptoms that are experienced in the proving can only serve to increase the physician's powers of observation – what he considered to be the physician's greatest and most important tool.

Are there any health risks in participating in a proving?
Homoeopathic drug provings are safe and pose no threat to one's health as the substance used in the proving is given in a diluted and potentised homoeopathic form.

Provings have been conducted for as long as homoeopathy has existed (1800's) and it is seen in all provings that symptoms that are experienced during the proving are generally mild and exist only temporarily.

There is, in addition to this, the fact that all provers are continuously monitored by the researchers throughout the proving process. If at any point a prover
experiences symptoms that are causing discomfort these will immediately be treated homoeopathically, free of charge, under the supervision of the Research Supervisor.

What is expected of provers?

There are certain criteria that need to be met in order to enable you to participate in this proving:

- Must be between the ages of 18 and 60
- Must be willing and able to comply with the daily keeping of a journal in which symptoms are recorded
- Must be in a relatively good state of health
- Must be in what is considered, for yourself, to be a general state of good health
- Must be willing to follow the proper procedures for the duration of the proving
- Must be able to maintain your normal lifestyle and usual daily routine as closely as possible and have no major lifestyle changes (e.g. moving house, marriage or divorce) planned during the proving period. Any lifestyle changes should take place at least three weeks before commencing with the proving
- Must have a knowledge of homoeopathy and / or an understanding of homoeopathic provings
- Must not be on or in need of any medication: chemical, homoeopathic or other
- Must not have been on the birth control pill or hormone replacement therapy in the previous six months
- Must not be pregnant or nursing
- Must not have had surgery in the previous six weeks
- Must not have any surgical or medical procedures planned for the duration of the proving period
- Must not use recreational drugs such as cannabis, LSD or MDMA
- Any consumption of stimulants (alcohol, coffee, tea, cigarettes) must be in moderation
A total of 30 volunteers, who will be the provers, will be randomly assigned to two groups. One group (80% of the total) will be given the proving substance and the other group (20% of the total) will receive placebo. This will be done in such a manner that neither the provers nor the researches will know who is in which group; and none of the provers will know what the proving substance is.

Provers will first need to record their 'normal' symptoms for one week to establish a baseline of health. You will then be required to take the given substance (or placebo) three times a day for a total of two days. During this time you may experience symptoms which you will be required to record in your proving journal. During the entire proving time the researchers will be in close contact with you to monitor your symptoms. This will be done under the supervision of the Research Supervisor.

If you choose to take part in the proving you will be provided with a detailed list of instructions as to exactly what the proving entails. Here follows the basic sequence of events:

1. Please contact the clinic on 204-2041 to schedule an appointment with your supervisor, which will entail a basic health check-up. It will take about 40 mins. Please bring Inclusion Criteria and Informed Consent forms along.

2. At the consultation you will be given your prover code, journal, medication and a starting date will be agreed on for the start of the one week pre-proving journal and a week later to start taking the remedy.

3. Once all provers have completed the proving there will be a group meeting between provers and researchers to compare individual experiences and unblind the substance that was being tested.

If at any point you decide to withdraw from the proving you are perfectly entitled to do so without having to give any explanation. You may be asked to
withdraw from the proving if there is any conflict with the criteria listed above, as these are the criteria that have been set to define the study.

Please be aware that confidentiality will be maintained throughout the proving. On completion of the proving any identifiable data will be removed and destroyed. Proving symptoms that are recorded will only be published using the prover code.

**Contact details:**
If you have any questions, require information or would like to participate in the proving please contact one of the following people:

Researchers:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liesl Pistorius</td>
<td>(031) 462 9993</td>
<td><a href="mailto:potentlie@yahoo.co.uk">potentlie@yahoo.co.uk</a></td>
</tr>
<tr>
<td></td>
<td>083 7927828</td>
<td></td>
</tr>
<tr>
<td>Debora Moore</td>
<td>(031) 777 1666</td>
<td></td>
</tr>
<tr>
<td></td>
<td>083 659 5670</td>
<td></td>
</tr>
</tbody>
</table>

If you have any questions at all please do not hesitate to contact us.

Thank you for your time,

Debora Moore and Liesl Pistorius

*Aude sapere*

DARE TO KNOW

-Hahnemann-
Appendix G

... i got a ‘tip off’...
... you know something about Chamaeleo dilepis dilepis...

Dear provers,

Thank you all for making this proving possible. You have all contributed in a wonderful way to the birth of a new remedy and the healing of many future patients. Only time and clinical confirmation will reveal the true benefits of Chameleo as a remedy, but from what we have discovered in this proving, we have no doubt that it will become a remedy of great value.

We would like to give you an overview of striking themes and symptoms that emerged from the proving, to make your experience of the remedy more complete and to make the future homoeopaths amongst you aware of its possible application.

There were very strong mental themes confirmed by a majority of the provers and the strongest of these were the feeling of disconnection, being distant from others, withdrawing from others, becoming antisocial and not wanting to talk to others – this is true to the nature of the chameleon...they don’t really “belong”, are very unique in appearance and have often been quoted “as having been made up of spare parts”. With this came a feeling of poor self-image, feeling fat or ugly and thinking that people don’t like me any more. There was a lot of depression, hopelessness, demotivation and negativity – it was described as “a dark despair” and “spiralling into a black hole”. The reaction to people, apart from the withdrawal, was immense irritability – snapping at everyone about the smallest trifles, expressive anger and confrontation. Much like the way chameleons blow up and turn dark and blotchy and snap their jaws when threatened.

There were also many ups and downs experienced by provers and on the other side we saw a feeling of spaceyness, light headedness, clarity of thought, excitement, calmness and peace. It can be seen as a play between dark and light and again the chameleon changes from dark to light based on emotions (hormonally controlled) and day and night. This is the major aggravation time of the remedy; on waking. Almost throughout we found symptoms to be produced most on waking, at the point of change over from night into day. As you all very well know – there were major sleep disturbances – when it’s dark and the subconscious is vulnerable. Nights were filled with restless tossing and turning. I’m sure all future insomniacs will salute you!

On a more physical level we could see the movements of the chameleon emerging as a theme – disorientation, lack of balance, clumsiness, taking small steps, jittery body movements, trembling, mini-spasms as well as lameness and feeling paralysed. The eyes were described as rolling around in the head. Based on this it seems to be a predominantly neurological remedy, as well as on the fact that all pains were described as stinging, sharp and shooting, typical to nerve-related pains and sensations were described as pins-and-needles, tingling and numbness in the extremities as well as lameness and heaviness. These symptoms alone could indicate a variety of neurological conditions.

Coldness was another huge theme running throughout – most provers felt chilly especially their hands and feet – it was described as icy, freezing, like slush puppy, as if alcohol evaporating from the skin, gnawing cold and most symptoms were relieved by sunshine and hot baths and aggravated by cold or wind - another polarity and can be directly related to the cold-blooded chameleon.

There is so much more to say, but for now I will just mention a few more particular symptoms that were prevalent throughout: Extreme tiredness, fatigue, lethargy and weakness. Lower back pain and stiffness as well as neck pain and stiffness.

Headaches mostly occipital (back of head), behind the eyes and temporal – described as heavy, full, fuzzy, blocked and throbbing.

Dizziness and vertigo with loss of balance.

A lot of eye symptoms – redness, watering, tiredness, burning, twitching, photophobia, hazy vision, heavy bulging eyelids...mmmmm?

Many provers experienced toothache that caused a lot of agony, described as aching, throbbing pains, a lot worse for cold.

Two thirds of provers made the same flu during the proving – with scratchy throat, congested nose and sinuses, alternating with runny nose and headache as described above with spiking chills and fevers.

Abdominal pain and bloating.

Increased thirst for water throughout.

Unfortunately that’s all there is space for now – but it has been a most uplifting experience and the full proving will be available to all, on publishing in 2007. We hope you found it interesting and lastly – we thank our dear little chameleon for donating a tail tip. We would also just like to assure you that she was not harmed, hurt or traumatised during the process – it’s a fast painless procedure to snip the tip off the tail and will provide homoeopaths with Chamaeleo dilepis dilepis for many years to come. We thank you!

Liesl & Debora

Homoeopathic proving of Chamaeleo dilepis dilepis
by Liesl Pistorius & Debora Moore
Appendix H

Gender contribution of provers

Ethnic contribution of provers

Age contribution of provers

314
Appendix I

Generals
Skin
Perspiration
Fever
Chill
Dreams
Sleep
Extremities
Back
Chest
Expectoration
Cough
Respiration
Female
Urine
Urethra
Kidneys
Bladder
Stool
Rectum
Abdomen
Stomach
Ext. throat
Throat
Teeth
Mouth
Face
Nose
Ear
Eye
Head
Vertigo
Mind

Quantitative distribution of repertory symptoms

Number of rubrics

Materia medica section

315