A HOMOEOPATHIC DRUG PROVING OF ANTHROPOIDES PARADISEUS 30CH WITH SUBSEQUENT COMPARISON TO THE ETHOLOGY OF THE SUBSTANCE.

BY

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DECLARATION

This is to certify that the work is entirely my own and not of any other person, unless explicitly acknowledged (including citation of published and unpublished sources). The work has not previously been submitted in any form to the Durban University of Technology or to any other institution for assessment or for any other purpose.

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DEDICATION

To my parents, for their investment in my education and all the support along the way.
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ABSTRACT

Introduction

The purpose of this study was to conduct a homoeopathic drug proving of *Anthropoides paradiseus* 30CH and to subsequently compare the symptoms derived during the proving to the ethology of the animal from which the proving substance was derived.

Methodology

The homoeopathic proving of *Anthropoides paradiseus* 30CH was conducted as a randomised double-blinded placebo-controlled trial at the Durban University of Technology on thirty participants. Twenty percent of the participants received a placebo while the remaining eighty percent received the active substance of *Anthropoides paradiseus* 30CH which was manufactured according to methods 6, 8a and 10 of the *German Homoeopathic Pharmacopoeia*.

After recruitment, a two-phase consent and a comprehensive initial consultation, participants who met the inclusion criteria were accepted into this study. Powders were ingested over a two-day period and thereafter the provers were monitored for a further five weeks. During the proving period, participants subjectively recorded their experiences in a journal and were monitored by the researcher.

Following the proving period, journals were collected, and the data analysis took place. The symptoms of the verum group were converted to standard repertory and materia medica formats. The symptoms were then compared to the ethology of the animal from which the substance was derived so that similarities between the behaviour of the animal and the expressed symptom picture of the provers could be assessed.
Results

The proving of *Anthropoides paradiseus* 30CH produced symptoms in keeping with five hundred and seventy-four existing rubrics, and fifty-five new rubrics were created. The majority of rubrics were represented in the MIND, NOSE, STOMACH and DREAMS sections of the repertory.

The general themes of dryness, thirst, increased or decreased energy, large appetite and laterality were seen. The common sensations were itching and heaviness. The mental themes which were clearly evident were: focus, lack of concentration, isolation, sociability, music, dance, exercise, anxiety, calmness and spirituality. Correlations between the behavioural, anatomical and physiological features of *Anthropoides paradiseus* and the symptom picture produced by provers during the proving period was clearly evident.

Conclusion

Clearly observable symptoms were produced in healthy individuals following the administration of *Anthropoides paradiseus* 30CH. A clear correlation existed between the symptomatology produced during this proving and the ethology of *Anthropoides paradiseus*. 
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DEFINITION OF TERMS

**Anthropomorphise**
Attribution of human characteristics or behaviour to a god, animal or object (Kavanagh 2005: 45).

**Bipedal**
An animal which walks on two feet (Kavanagh 2005: 111).

**Bisque**
A rich soup made from lobster or other shellfish (Kavanagh 2005: 112).

**Centesimal potency (CH)**
A potency scale which utilises the Hahnemannian potency method in which the dilution ratio is in the proportion of 1:99. The Hahnemannian potency method involves the process of serial dilution, in which one part taken from the previous potency is added to 99 parts of the diluent (in new glassware at each stage), and subsequent succussion after each dilution. The number of serial dilutions performed in this manner defines the potency (Swayne 2000: 36).

**Ciliary body**
The part of the eye that connects the iris to the choroid (Kavanagh 2005: 208).

**Endotherm**
An animal that is dependent on the internal generation of heat (Derivitives: endothermy) (Kavanagh 2005: 382).

**Ethology**
The science of animal behaviour (Kavanagh 2005: 396).

**Inert**
Chemically inactive (Kavanagh 2005: 589).
Homologous
Of similar biological position, structure, and evolutionary origin (Kavanagh 2005: 554).

Law of Similars
The fundamental principle of homoeopathy which states that any substance which can produce a certain set of disease symptoms also has the potential to cure those same symptoms in a diseased individual (Vithoulkas 1980: 92). Expressed as “similia similibus curentur” (Swayne 2000: 193).

Materia medica
In homoeopathy, the description of the nature and therapeutic repertoire of homoeopathic medicines; of the pathology, the symptoms and signs and their modifying factors (modalities), and the general characteristics of the patient associated with them (Swayne 2000: 132-133).

Placebo
A substance with no active biological properties which is used for comparison with the substance or method to be tested in a controlled trial, and is indistinguishable from it (Swayne 2000: 162).

Plumage
A bird's feathers collectively (Kavanagh 2005: 898).

Plume
A long, soft feather or arrangement of feathers used by a bird for display (Kavanagh 2005: 899).

Potency
The medicinal power of a homoeopathic medicine which is released or developed by dynamization or potentization. It is the measure of the power of the medicine based on the degree to which it has been potentised, and is expressed in terms of the degree of dilution (Swayne 2000: 165-166).
Preen
Tidy and clean feathers with its beak (Kavanagh 2005: 920).

Prover
The volunteer in a proving who is in good health, and who records changes in his or her condition during and after administration of the substance that is being tested (Swayne 2000: 173-174).

Proving
The process of determining the medicinal properties of a substance by administration of that substance to healthy volunteers in order to elicit effects from which the therapeutic potential, or materia medica, of the substance may be derived (Swayne 2000: 174).

Quadrupeds
An animal which has four feet, especially an ungulate mammal (Kavanagh 2005: 954).

Remedy
The term colloquially used amongst homoeopaths for the homoeopathic medicine. It implies both the more comprehensive remedial action which the prescription is expected to achieve and the more purposive relationship to what is to be remedied in the patient than the more general term “medicine” (Swayne 2000: 182-183).

Repertory
A systemic cross reference of symptoms and disorders to the homoeopathic medicines in the materia medica in order to identify the best suited remedy during a process known as repertorisation (Swayne 2000: 183).

Tetrapod
An object or structure with four feet, legs, or supports (Kavanagh 2005: 1213).
Verum
In the context of a homoeopathic proving it refers specifically to the medically active substance administered to provers as opposed to the medically inert placebo (Moore 2007).
CHAPTER ONE: INTRODUCTION

1. OVERVIEW

1.1 Introduction

In 1796 Dr Samuel Hahnemann (1755-1843) formulated the concept of homoeopathy, which is primarily based on the theory that “like cures like”, a principle known in Latin as “simililia similibus cururentur” (Kamat 2006). Practically applied, the same infinitesimal dose of a substance that causes a particular set of symptoms when administered to a healthy individual is capable of curing that same symptom picture displayed in a sick individual (Smal 2004:1). Homoeopathic provings are one of the integral components of homoeopathy (Riley 1996). Vithoulkas (1980:144) describes the process of a proving as a process in which the totality of morbid symptoms produced by a substance in healthy individuals will reflect the curative indications upon which it is to be prescribed in a sick individual. In aphorism 108 of the 6th edition of Hahnemann’s Organon of the Medical Art, he states that it is impossible to ascertain the curative effects of a substance without observing and recording the signs and symptoms produced by that substance in healthy individuals (O’Reilly 1996). Sherr (1994:7) states that a proving is the only way of accurately predicting the effect of a substance as a homoeopathic remedy.

The homoeopathic armamentarium can be expanded upon by conducting provings, which in turn will allow for greater individualization and accuracy when treating patients, and thus help to advance homoeopathy (Vithoulkas 1980:143). Without provings, less well indicated remedies are relied on by practitioners. These remedies may produce a temporary relief, but not bring about a permanent cure (O’Rielly 1996). In many cases, the doctrine of signatures, toxicological studies and non-scientific ideas are relied on when making a prescription. However, these approximations cannot accurately determine the precise symptomatology determined by a thorough proving (Sherr 2003:7).

The concept of proving indigenous substances was proposed by Wright (1999), who stated that this practice contributes to the formation of a South African
materia medica which has the potential to be used in the treatment of ailments experienced by the South African population. Ross (2011) expanded on the importance of “focussed exploration of the therapeutic potential” of indigenous substances through homoeopathic provings. *Anthropoides paradiseus*, commonly known as the Blue crane, is a bird indigenous to Southern Africa (Johnsgard 1983). It has been recommended that *Anthropoides paradiseus* may be useful in the practice of homoeopathy in South Africa. *Anthropoides paradiseus* holds a special place in South Africa, being the country’s national bird. It is believed by some that one’s immediate environment should be assessed for answers to local disease (Sherr 1994:49).

It is necessary to prove and expand the avian group of remedies as only forty-eight provings have previously been conducted on birds, out of approximately one hundred and sixty available avian remedies (Wichmann 2011). Few South African birds have been proved making this group an essential group to expand. One example of such a bird is the *Acridotheres tristis* which was proved by Hoosen (2010).

1.2 Aim and objectives of the study

The aim of this study was to investigate the proving symptomatology of *Anthropoides paradiseus* 30CH and to perform a subsequent comparison of the symptoms with the ethology of *Anthropoides paradiseus*.

The primary objective of this study was to determine the symptoms arising from the administration of *Anthropoides paradiseus* to healthy individuals. The secondary objective was to compare the proving symptomatology of *Anthropoides paradiseus* with the ethology of *Anthropoides paradiseus*.

1.3 The Hypotheses

It was hypothesized that the 30CH potency of *Anthropoides paradiseus* would produce clearly observable proving symptoms in healthy provers.
It was further hypothesized that a comparison of those proving symptoms to the ethology of *Anthropoides paradiseus* would expand and offer a clear understanding of the therapeutic field of the substance.

1.4 The Delimitations

This study did not:

- attempt to explain the mechanism of action of the homoeopathic preparation in the production of symptoms in healthy individuals
- determine the effects of different potencies of the proving substance other than the thirtieth centesimal (30CH) potency
- seek to prove the effects of the placebo.

1.5 The Assumptions

- The preparation of *Anthropoides paradiseus* 30CH was prepared using the correct method depicted in the *German Homoeopathic Pharmacopoeia* (Benyunes 2005).
- The provers complied with the proving methodology as outlined in Appendix A: Instructions to Provers.
- The provers did not alter their lifestyles and dietary habits in a significant manner immediately prior to or during the proving.
- The remedy was taken by the provers in the dosage, frequency and manner instructed by the researcher.
- The provers practiced honest, accurate and conscientious self-observation and symptom recording.
CHAPTER TWO: REVIEW OF RELATED LITERATURE

2.1 Provings

2.1.1 Introduction

Samual Hahnemann explained in aphorisms 21 and 109 in his 6th edition of the Organon of the Medical Art that the therapeutic properties of a substance can only be determined by means of provings (O'Reilly 1996). According to the Law of Similars, Hahnemann states that any substance that is capable of inducing pathological symptoms in healthy human beings is also capable of curing those same symptoms when administered in a homoeopathic potentised form (O'Reilly 1996: 161-162). A proving is a systematic procedure of testing substances on healthy individuals to induce symptoms which are indicative of the therapeutic action of the substance (Vithoulkas 1980: 96). According to Sherr (2003), the only method of determining the effect of a homoeopathic substance is by conducting a thorough proving.

Homoeopathic prescriptions are based on the similarity between the totality of symptoms of the patient and the symptoms the homoeopathic drug proving produced in healthy subjects (Dantas 1996: 230). Any symptoms experienced by the provers which are out of the ordinary are attributed to the action of the proving remedy (O'Reily 1996: 158).

Vithoulkas (1980: 144) defines the purpose of a proving as:

“…to record the totality of morbid symptoms produced by that substance on healthy individuals; and that totality will then be the curative indications upon which is to be prescribed the curative remedy in the sick individual.”

Jansen and Ross (2014: 9) state that the most common reason for conducting a proving is to extend the materia medica. Provings are also performed to evaluate the effectiveness of a potentised substance by investigating the mechanism of action or other parameters related to the action of a homoeopathic potency on the organism (Jansen and Ross 2014: 9).
2.1.2 Methodology

Contemporary provings are based on the methodology devised by Hahnemann whilst incorporating appropriate scientific methods to satisfy modern requirements (O’Riley 1996: 4). Hahnemann’s guidelines on proving methodology were described in aphorisms 105 to 114 in the *Organon of the Medical Art* 6th edition. (De Schepper 2001: 32). Modern adaptations which have been added to Hahnemann’s original guidelines are blinding, randomisation, cross-over experimental designs and placebo controls (Wieland 1997: 229). Hahnemann’s provings yielded viable symptoms, however his methodology would not be considered reliable by today’s standards of clinical trials (Wieland 1997: 229). Jansen and Ross (2014: 6) produced Homoeopathic Proving Guidelines by amalgamating the Liga Medicorum Homeopathica Internationalis (LMHI) and the European Committee for Homeopathy (ECH) guidelines with the objective of conducting scientifically accountable provings that are in full agreement with homeopathic theory.

Prover population

There have been many differing opinions on what the optimal number of participants in a homoeopathic proving should be. Jansen and Ross (2014: 13) state that the expertise of the principal investigator, supervisors and volunteers will affect the optimal number of provers in some circumstances.

Jansen and Ross (2014: 13) recommend that a minimum of ten verum provers but no more than twenty verum provers seeing as a number greater than 20 would reflect a negative burden to benefit ratio. Between ten and twenty provers are recommended by The International Council of Classical Homoeopathy as the optimum size for a proving (ICCH 1999: 34). Sherr states that fifteen to twenty provers is an ideal number for a thorough proving (Sherr 1994: 45).

De Schepper (2001: 34) recommends that a proving has at least fifty people. Vithoulkas (1980: 152) is in favour of fifty to one hundred provers in a proving to obtain a complete symptom picture. Belon (1995: 216) recommends a minimum of several hundred provers per proving group. Sherr (1994: 45) states that a
prover population which is too large can become cumbersome. Sherr also states (1994: 45) that provings which are too small can become unreliable. Some argue that a proving employing fewer than ten verum provers may still contribute significantly to clinical practice (Jansen and Ross 2014: 13).

**Placebo**

Jansen and Ross (2014: 11) recommend the inclusion of a placebo control group in which blank or lookalike doses are employed. The issue of the size and necessity of a placebo control group during a homoeopathic drug proving is one that doesn’t draw unanimity amongst homoeopaths; there are arguments both for and against the inclusion of a placebo group (Laidlaw 2016). Table 2.1 below summarises the recommended placebo group sizes.

<table>
<thead>
<tr>
<th>Author</th>
<th>Placebo Group Size</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vithoulkas, G</td>
<td>25%</td>
<td>1980</td>
</tr>
<tr>
<td>Sherr, J</td>
<td>10-20%</td>
<td>1994</td>
</tr>
<tr>
<td>International Council for Classical Homoeopathy (ICCH)</td>
<td>10-30%</td>
<td>1999</td>
</tr>
<tr>
<td>Homoeopathic Pharmacopoeia Convention (HPCUS)</td>
<td>Minimum of 20%</td>
<td>2013</td>
</tr>
<tr>
<td>Jansen and Ross</td>
<td>10%</td>
<td>2014</td>
</tr>
</tbody>
</table>

Sherr (1994: 57) states that the introduction of a placebo control group increases provers’ accuracy and attention in recording their symptoms. The authenticity of proving symptoms is increased when compared with symptoms arising from the placebo group (ICCH 1999: 34). Raeside argues against implementing a placebo control group deeming it unnecessary and a waste of good provers (Sherr 1994: 57).

**Blinding**

Blinding is not disclosing whether the participants will be receiving verum or placebo, and helps to eliminate bias and improves the accuracy of results. This allows the researcher to give equal attention to all symptoms and provers (Sherr 1994: 36). The principal investigator, all supervisors and all volunteers are
required to be blind to the assignment of blanks (placebo powders with no active substance) (Jansen and Ross 2014: 11).

The blinding of this study took place on two levels. Participants and supervisors were blind to who was receiving the verum or the placebo powders and the participants were blind to the identity of the proving substance. Not revealing the name of the active proving substance is recommended at least until the analysis of the symptoms have been finalised or the last exit interview has been completed (Jansen and Ross 2014: 12).

**Potency selection**

For safety purposes, potencies at the C12 or equivalent dilution (example D24 or LM4), or higher should be used (Jansen and Ross 2014: 10). At the 30CH potency, the symptoms created are transient (Vithoulkas 2002: 128).

Potencies between C12 and C30 (or the equivalent dilutions) are recommended (Jansen and Ross 2014: 10). In aphorism 128 of the 6th edition of the *Organon of the Medical Art*, Hahnemann establishes that the 30th potency should be used for provings. This potency is said to yield the most intense symptoms on all levels within the prover (O’Reilly 1996: 154). At the 30CH level of potency, the symptoms produced in the provers are not induced by the raw material of the proving substance, but rather by the therapeutic power within the potentised remedy (Vithoulkas 2002: 128).

**Dosage and posology**

Oral doses are recommended by Jansen and Ross (2014: 10). Sherr (1994) suggests that one powder to be dissolved sublingually three times a day over two consecutive days or until symptoms arise, however, the remedy may not be taken for longer than two consecutive days. There should be no further dosing if or when proving symptoms appear. It is further recommended that dosing should not be repeated when symptoms have disappeared (Jansen and Ross 2014: 10).
2.1.3 Other proving methodologies

**C4 trituration**

A C4 trituration proving is a proving methodology in which a group of provers participates in a hand trituration of a substance which the identity has been kept secret (Hogeland and Schriebman 2008). Whilst triturating through the C1, C2, C3 and C4 levels, the prover experiences physical, mental and emotional symptoms as well as images and ideas of the proving substance (Botha 2010). C4 triturated remedies affect different planes at each level of trituration. The C1 affects the physical level, C2 elicits emotional characteristics, C3 elicits mental aspects and C4 exposes the spiritual aspects (Botha and Somaru 2010: 113).

**Dream provings**

Sankaran (1998: 146) states that most of our emotions are unadulterated in dreams while our conscious waking state tends to disguise our true emotions. Thus, dreams are reflections of the sincere emotions we experience about various aspects of our lives. Sherr (2003: 16-17) suggests that dream provings are only “partial provings” which are beneficial in that they provide insight on the inner essence of the remedy.

During a dream proving, the prover is exposed to the remedy via oral consumption, olfaction, holding the remedy in the hands for a period of time, sleeping on it, touching another prover who has consumed the remedy or by being in the same room as other provers (Dam 1998). Mental, emotional and physical symptomatology is then extracted.

**Seminar provings**

A seminar proving is a proving which requires the administration of a proving substance to a group of provers a few days prior to, or during attendance at a seminar (Hansjee 2010). The resulting symptomatology, with particular focus on the mental, emotional and dream levels of the remedy, are then discussed at the seminar (Herscu 2002).
Sankaran (1998) believes that the effect of the proving substance multiplies when administered to a group of provers; a phenomenon he terms “group consciousness”. He also believes that the concluding discussion provides important information which may have been discarded as unrelated symptoms otherwise. This methodology, however, seems to lack the solidarity of the Hahnemannian proving protocols (Sankaran 1998).

2.1.4 Provings at the Durban University of Technology

The homoeopathic community in South Africa have begun to explore the therapeutic potential of both indigenous plant and animal substances through formal homoeopathic provings (Ross 2009: 57). The Durban University of Technology (DUT) has produced twenty-seven homoeopathic drug provings from 1999 to 2017. Of these, twenty-one have been of substances indigenous to Southern Africa.

Indigenous substances proved at DUT have been from three remedy kingdoms being plants, imponderables and animals. Nine of these remedies were plants, one was an imponderable remedy and the remaining twelve were from the animal kingdom. Somaru (2008) proved the imponderable remedy Pink Light. In the animal kingdom, the reptilian remedies have been studied extensively with six snake remedies and one chameleon remedy being proved. In 2010, Hoosen conducted the first proving at DUT in the avian family, by proving *Acridotheres tristis* or the Indian myna. That same year, Botha conducted a proving of the King Protea, *Protea cynaroides*, the national flower of South Africa (Botha 2010).

2.1.4.1 Methodology of Provings at DUT

The methodology implemented in the provings at conducted at DUT has remained consistent in some regards while differing in others over the years. Ethical management of provers, remedy preparation, security of the blinding process, accountability and presentation of proving data was consistent amongst all the provings conducted at DUT, while the number of provers, size of the placebo group and number of researchers supervising the proving did differ (Ross 2009: 58).
A C4 trituration proving of *Borax* was conducted by Goote (2011) while *Protea cynaroides* employed C4 trituration and dream proving methodology as well as standard Hahnemannian proving methodology (Botha 2010). Pillay (2003 cited in Ross 2009) proved *Bitis arietans arietans* with dream proving method. All other provings at DUT have made use of traditional Hahnemannian proving practices.

**Prover population**

Pillay (2017: 28) evaluated the sample size of provings at DUT. A sample size of thirty provers is preferred at DUT with sixty-three percent of provings having a prover population size of thirty individuals. Fifteen percent of provings have a sample size of twenty participants. Two provings (Olivier 2007; Naidoo 2010) consisted of thirty-two provers. The remaining provings consisted of fifteen (Moore 2007), twenty-four (Kell 2004), twenty-six (Speckmeier 2008) and twenty-eight provers (Brijnath 2013).

**Placebo**

All provings conducted at DUT included a placebo control group. The size of this group varied. In accordance with the ICCH guidelines (1999), the vast majority (seventy-four percent) of provings conducted at DUT have a placebo group between ten to thirty percent of the prover population. A placebo group size of twenty percent is the preferred proving structure at DUT with eleven of the twenty-seven studies having a placebo group this size. The second most preferred study structure was a fifty percent placebo group seen in six of the twenty-seven proving studies at DUT.

**Blinding**

The preferred method is double-blind placebo-controlled studies, however out of the twenty-seven provings conducted at DUT, two used triple blinding (Naidoo 2011; Olivier 2007).
Potency selection

The potency selection of provings at DUT have been consistent at the 30CH potency. All provings conducted at DUT have used the 30th centesimal potency except for the proving of *Sceletium tortuosum* (Dos Ramos 1999 cited in Pillay 2011) which made use of a 6CH potency.

Dosage and posology

Sublingual administration of the impregnated substance is used in all provings at DUT. Fifty six percent of provings had a maximum of six doses while thirty percent of provings had a maximum of nine doses. Three provings, conducted from 1999 to 2002 used a maximum of twenty-one doses. A maximum of fifteen doses was used by Thomson (2004) in his proving of *Bitis gabonica gabonica*.

Ross (2009), in his review of the evolution of methodology employed in provings of substances indigenous to Africa, concluded:

“Although the predominant thrust of homoeopathic provings conducted at DUT has shown a notable consistency, there are a number of changes which have been effected over the decade of review. There has been notable experimentation with the number of provers, the percentage allocated to placebo groups, the number of researchers supervising provings, and a trend towards including pre- and post-proving workshops. There has also been some evolution over the same period in the University’s understanding, support and ethical approval of provings as post-graduate research.”

2.2 Substance

2.2.1 Classification

Kingdom: Animalia
Phylum: Chordata
Class: Aves
Order: Gruiformes
Family: Gruidae
2.2.2 Description

Gruidae, also known as the Crane family, are large birds of terrestrial habits (McLachlan and Liverside 1971: 142). They are an ancient family of birds which have existed for at least forty million years (Archibald and Lewis 1996: 1). Cranes, which exist in a variety of sizes and colours ranging from white, grey and black to blue and brown, are long-legged birds with straight bills, long necks and an elevated hind toe (Harrison 1976: 232) (see figure 2.2).

The Blue crane is South Africa's national bird (Tarboton 1994: 194), and is fully protected (Johnsgard 1983: 93). Listed as globally vulnerable, Blue cranes have experienced a significant and rapid decline in recent decades. This is primarily due to habitat loss (Shaw et al. 2010: 590).

Its plumage is pale grey, lightest on its head and darkest on its distinguishable long tertial plumes which almost trail on the ground. They are 105 to 120cm in length (Ginn and McIleron, 1994) with a wing span of up to 200cm. Both sexes are alike but females are slightly smaller. They have dark brown irises, a pinkish bill and black legs. As illustrated in figure 2.1 (Johnsgard, 1983), the Blue crane is identified by its swollen head and long trailing secondary feathers (McLachlan...
and Liverside 1971: 146). Chicks are covered in greyish down, palest on their bellies with a ginger crown and forehead. Juvenile Blue cranes lack tertial plumes but otherwise resemble adults (Ginn and McIlieron 1994).

Figure 2.2: Six species in the Gruiforme (crane) family showing variation in plumage and height. (1) Whooping crane *Grus americana*, (2) Manchurian crane *G. japonensis*, (3) Siberian white crane *G. leucogeranus*, (4) Crowned crane *Balearica pavonina*, (5) Blue crane *Anthropoides paradisea* and (6) Demoiselle crane *Anthropoides virgo* (Harrison 1976: 233).

They are known to be noisy birds, especially in flocks (Ginn and McIlieron 1994: 194). Their very distinctive, loud, guttural, rattling, croak-like “krraaaarrrk” sound is repeated multiple times (McLachlan and Liverside 1971: 146).

2.2.3 Distribution and Habitats

Blue cranes have the most restricted range of all cranes (Shaw et al. 2010: 590), and are endemic to southern Africa, with an isolated population in Ethosha
(Brown et al. 2004), see figure 2.3. They are found mostly in the open, grassy habitats of South Africa, often, but not exclusively, nesting near water. They are found in Highveld grasslands, the Karoo and semi-desert habitats (Tarboton 1994: 194).

During winter months they are generally found at lower altitudes but prefer to breed at elevations of 1300 to 1800m in summer. They are found in areas with relatively few large mammals and favour areas with little disturbance from human activity (Johnsgard 1983: 89) although have been known to be pests in the spring time while foraging on sprouting crops on farm lands (Tarboton 1994: 194).

2.2.4 Foods and Foraging Behaviour

During daylight hours of the nonbreeding season, cranes spend the vast majority of their time in habitats where foraging occurs (Johnsgard 1983: 21). Blue cranes
are omnivores, eating small reptiles, grain, fish, locusts and, in captivity, almost anything (McLachlan and Liverside 1971: 146). While feeding, they may walk as far as a kilometre and rarely fly. They feed primarily on the surface of the ground and from low-growing vegetation (Johnsgard 1983: 89). They often forage on farms and feed on spilled grain. This food source may aid them through the lean winter months (Tarboton 1994: 194), but makes them an agricultural pest at times (Ginn and McIl1eron 1994: 194).

Fed by the female, the newly hatched chicks eat pieces of grasshoppers, earthworms, snails and ladybugs as well as ant eggs. When they are ten days old they begin to consume frogs, toads, small lizards and small snakes (Johnsgard 1983: 89).

**2.2.5 Adaptive Avian Features**

Adaptation for flight has imposed a certain uniformity in basic structure and physiology of all birds (Villee et al. 1984: 700). Most of the features of anatomy of birds can be directly or indirectly related to endothermy in flight as birds are adapted structurally and functionally to provide a high energy output in a body of low weight (Villee et al. 1984: 701). In order to fly, a large amount of energy is required. To conserve this energy sufficiently, it is necessary for birds to keep their weight low and this in turn requires less weight bearing stores of energy. Birds therefore require a sufficiently fast metabolism to power flight (Fraser 2009: 6).

Cranes differ physiologically from other avian species by displaying an incomplete annual moult, low reproductive rate and delayed sexual maturity. They appear to be especially susceptible to stress from physical and behavioural disturbance, unfamiliar territories and disease (Gee and Russman 1996). Birds respond to stress by releasing corticosterone, a hormone produced by the adrenal glands which triggers the release of glucose and fat into the bloodstream. This adaptive response provides the bird with a surge of energy to decrease the impact of a stressful event. If stress is persistent, however, this response becomes pathological, resulting in loss of body weight, a loss of interest in
reproduction, down-regulation of the immune system and an overall decline in the health of the bird (Birkhead 2012: 187).

a) Flight

All cranes take flight after a running start followed by springing into the air. Their wings are moved in a distinctive manner with a rapid upstroke and a slower downstroke, which is more noticeable in frightened birds than in normal flight. Powered (flapping) flight is the major method of migratory flight in cranes, while soaring in thermals is used as a supplementary energy source (Johnsgard, 1983: 19). A summary of the types of flight is seen in table 2.2. Blue cranes frequently soar in pairs to a great height while uttering loud cries (McLachlan and Liverside 1971: 146).

Table 2.2: Types of flight

<table>
<thead>
<tr>
<th>Gliding</th>
<th>The wings provide lift and forward motion comes from falling through the air. Simplest form of flight. Altitude is lost in a glide, but it can be maintained or increased if a bird also soars (Villee et al. 1984: 701).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soaring</td>
<td>Starting at a high elevation, birds glide rapidly downwards and rise upward with the upsurges of air currents (Villee et al. 1984: 701).</td>
</tr>
<tr>
<td>Flapping flight</td>
<td>The wings are extended and move downwards and forwards during the downstroke, while inclined from the horizontal plane to give the lift and forward motion while reducing drag. The wing is then flexed, moving upwards and backwards on the upstroke; this is merely a recovery stroke (Villee et al. 1984: 701).</td>
</tr>
</tbody>
</table>

b) Thermoregulation

The maintenance of a relatively constant body temperature requires the specialized, coordinated development of many related systems and functions which include thermal insulation, body weight, surface area-to-volume ratio, evaporative water loss, food consumption, behaviour, basal metabolism,
shivering and non-shivering thermogenesis, and thyroid hormone metabolism (Ringer 1986: 71). Interactions of these mechanisms enable birds to maintain a relatively high body temperature at approximately 40 to 43°C (Villee et al. 1984: 703). This high temperature is as a result of their fast metabolism required to maintain a high energy output, enabling them to process energy quickly and efficiently (Fraser 2009: 13). Birds display a diurnal variation in body temperature, with their lowest body temperatures reached at night and their highest during the day (Ringer 1986: 71).

On part of the legs and feet of birds as well as covering their beaks, a modified form of the scales of reptiles have been retained. The rest of their body’s scales have been transformed to feathers which are an essential component of the thermoregulatory apparatus in birds (Villee et al. 1984: 701). The feathers maintain homeostasis between heat production by metabolic processes and heat loss (Villee et al. 1984: 701-702). Feathers overlap and entrap air between them, reducing loss of body heat (Villee et al. 1984: 702). Water is prevented from penetrating feathers by an oily secretion produced by the uropygial gland located near the base of the tail. When a bird preens, it spreads this oily secretion over the feathers (Villee et al. 1984: 702).

Sensory receptors in the skin are sensitive to changes in skin temperature and send these messages to the central nervous system where nerve centres in the anterior hypothalamus control heat loss by regulating panting and vasodilation (Ringer 1986: 71). To keep warm when temperatures fall, the bird fluffs out its feathers, increasing the thickness of their insulating layer (Villee et al. 1984: 702). Fluffing of the feathers together with raising of the wings indicates an excessively hot environment with the potential to cause dehydration (Ringer 1986: 71). In very low temperatures the bird must produce more body heat by raising its metabolic levels (Villee et al. 1984: 702-703). Heat production is also increased by contractile activity of skeletal muscle without voluntary movement and external work, resulting in shivering (Ringer 1986: 72). When birds need to lose body heat, the feathers are held closer to the body, more blood is directed through the skin (especially the areas not covered by feathers, such as the legs), and the bird begins to pant.
Although cranes have long exposed legs, they can withstand cold extremes by using counter current circulation (see i) circulation. This allows the conservation of body heat and prevention of hyperthermia (Gee and Russman 1996: 123).

c) Feathers

Feathers, more than any other single feature, characterise birds. The proving substance was prepared using the feather of Anthropoides paradiseus.

Feathers are dead epidermal outgrowths with an accumulation of keratin. Pigments which are deposited in these cells during the development of the feather, together with a surface feature which reflects certain light rays, are responsible for the dazzling colours of birds (Villee et al. 1984: 703). There are five types of feathers. Contour feathers, illustrated in figure 2.4 (Villee et al. 1984: 705), cover the body and provide the flying surface. They consist of a central shaft, with a base known as the calamus. The calamus is embedded in a follicle in the skin. The distal part of the shaft is known as the rachis. The rachis bears a vane composed of numerous side branches known as the barbs. These barbs each bear minute hooked branches along their sides known as barbules. Barbules of adjacent barbs interlock and hold barbs together. At the distal end of the calamus, a small afterfeather arises, providing extra insulation (Villee et al. 1984: 703). Flight feathers are contour feathers which are located on the posterior border of the arm, hand and tail forming the flying surfaces (Villee et al. 1984: 703-704). Filoplumes are slender, hair-like rachi which bear a few barbs at their tips. Due to the nerve endings which richly supply their follicles, it is suggested that they may serve as sense organs the aid in the control of movement of other
feathers (Villee et al. 1984: 704). Bristles are stiff, vaneless feathers. They are often found around the eyes and nose where they help keep out dirt (Villee et al. 1984: 704). Down feathers have a reduced shaft and long fluffy barbs arising from the distal end of the calamus. Covering young birds and found under contour feathers in adults of certain species, down serves as insulation (Villee et al. 1984: 704).

Once a year, usually after the breeding season, most birds moult. During this process, feathers are lost and replaced in a characteristic pattern for each species. Moult is a gradual process and generally does not affect the movement of the bird (Villee et al. 1984: 704), although during this period, several crane species, including the Blue crane, are unable to fly (Johnsgard 1983: 23). Cranes moult their feathers periodically in a predictable and regular manner. In adult cranes, this occurs in late summer and autumn. They spend the majority of their time preening and rearranging their feathers. They also become highly elusive throughout this flightless period (Johnsgard 1983: 23).

d) Skeleton

The skeleton of a bird is uniquely adapted for flight. It consists of thin and hollow bones (Villee et al. 1984: 704). Their skeletons weigh less in relation to their body weight than the skeletons of mammals. The majority of the bone substance is located at the periphery, giving structural support. Further strength is given to bird bones by their internal structure consisting of struts which are arranged in a similar way to the inside of the wing of an airplane (Villee et al. 1984: 705).

The skull consists of various prominent features such as the large size of the cranial region, the large orbits and a toothless beak. They have long necks with cervical vertebrae articulated in such a way that the head and neck have great mobility. The mobility of the head is essential for feeding, preening, nest building and defence. The truncal vertebrae are shortened and firmly united to form a strong fulcrum for the wings and a sturdy point of attachment for the sturdy pelvic girdle and legs (Villee et al. 1984: 705). The cervical vertebrae of birds are more
numerous and variable in number than that of any other group of vertebrates (Shore et al. 2004: 27).

Joints between the dorsal and ventral portions of the ribs allow for flexibility in respiratory movements. The sternum is greatly expanded and contains a large midventral keel which increases the area available for the attachment of flight muscles (Villee et al. 1984: 706).

The humerus, radius and ulna can be recognized as the bones of the wings and are homologous to those of the pectoral appendage of other tetrapods. The bones in the hand, however, have been modified. The fingers are homologous to the first three of reptiles. Three short digits arise from a fused carpometacarpus (Villee et al. 1984: 706).

The legs of birds resemble the hind legs of bipedal dinosaurs. The femur joins distally with the fibula and a large tibiotarsus. The tibiotarsus is a fusion of the tibia with certain tarsals. A tarsometatarsus is formed by the fusion of the remaining tarsals and the extended metatarsals. The efficacy of the leg in running and jumping is increased by this elongation of the metatarsals and the various fusions in the lower limb allow for absorption of shock and reduction in the chance of injury during landing. Birds have no fifth toe and the forth toe is lost in some species (Villee et al. 1984: 706).

Their centre of gravity is shifted towards their hind legs due to their shortened trunk and posterior displacement of viscera (Villee et al. 1984: 706).

The feet of birds are specially adapted to their modes of life. In ground dwelling species the feet and toes are particularly robust. Birds which routinely cling onto trees have evolved sharp claws and a forth toe which is tuned backward with the first. Primarily swimming birds have web stretching between some of their toes. Marsh dwelling birds tend to have exceedingly long toes and claws. Some birds, which spend the vast majority of their time in flight have very small feet which are barely strong enough to perch on a branch (Villee et al. 1984: 706). Perching birds have adapted tendons of the foot which are arranged such that the weight
of their body automatically causes the toes to flex and grasp the perch when the bird lands upon a branch (Villee et al. 1984: 706-707).

Johnsgard (1983: 93) describes the skeletons of *Anthropoides paradiseaus* and *Anthropoides virgo* as more often than not similar to that of *Grus* (see figure 2.5).

![Figure 2.5: Skeleton of a Grus crane (Johnsgard 1983).](image)

e) Muscles

The strong and complex movements of the wings involve numerous modifications of the muscular system. The flight muscles include the pectoralis, which is responsible for the powerful downstroke of the wings, and the supracoracoideus,
which is a ventral muscle with a distal attachment, is responsible for the upstroke. These two muscles are exceptionally large and in powerful flyers can together make up as much as thirty-five percent of the body weight. Muscles within the wing are responsible for folding, unfolding, and regulation of angles during flight and attach to the follicles of the larger flight feathers to control their positions. Other muscles also perform the latter function in the tail (Villee et al. 1984: 707).

f) Special Senses and Nervous System

On the sensory system of birds, Birkhead (2012: 206) states:

"Using our own sensory system provides our only starting point for understanding how birds experience the world, and as long as we recognise that they have senses that we do not possess, and as long as we don’t automatically assume that even the senses they share with us are identical, then we can begin to gain some understanding of their world."

Brain

Birds have large brains with a particularly well-developed cerebrum, optic lobe (the primary visual association area), and cerebellum. The cerebral cortex is thin, and its removal has little effect on behaviour. The large cerebrum is due to the enlargement of a deeply situated mass of grey matter known as the corpus striatum. The removal of this part has significant effects on eating, locomotion, vocalization and reproductive behaviour. The large cerebellum regulates the intricate coordination of motor activities required by birds (Villee et al. 1984: 708).

Parts of the brain also vary in size throughout the year, due to hormonal changes. The onset of song in males is also caused by this hormonal change (Birkhead 2012: 47). The areas of the brain responsible for the acquisition and delivery of song in male birds shrink at the end of the breeding season and grow again the following spring. Shutting down these parts of the brain is useful for energy conservation (Birkhead 2012: 48).
The avian brain is relatively smaller than that of mammals. They cannot afford to have a large brain which would affect their centre of gravity, increase their weight and require a large amount of energy to function (Fraser 2009: 7). Fraser (2009: 7) states that birds therefore rely on instinctive behaviour rather than complex problem-solving abilities, and save the power of thought for times where it can be most effective.

Brain lateralization (the different hemispheres of the brain processing different types of information) has been studied in birds in recent times. It is now recognized that sidedness of brain function enhances the processing of information, allowing individuals to use multiple sources of information simultaneously. Sidedness can be apparent in terms of the individual as well as in terms of the entire species. In the individual it presents as preferred use of hand or foot. In terms of species for example, certain species prefer a certain eye over the other when scanning for predators. The more biased the sidedness is, in the individual and species, the more capable those individuals are at particular tasks (Birkhead 2012: 27-29). It is hypothesized by Birkhead (2012) that differences in the environments in which birds are raised can explain individual differences in behaviour and personality in birds.

Like humans, birds have an emotional life (Birkhead 2012). We, as humans, share some ancestry and many sensory modalities with birds, therefore it is possible that we share a common emotionality. Charles Darwin considered vocalisations of birds as an expression of their emotions: harsh vocalisations when aggressive, soft when directed to a partner, or plaintive when grabbed by a predator (Birkhead 2012: 182).

It was suggested by researchers in 2002 that birds do experience the sensation of fear due to an increase in the stress hormone corticosterone at the sight of a predator. The increase of corticosterone is rapid while the decrease is gradual. Other physiological signs of fright in a bird are an increase in heart rate and breathing. In the wild, the effects of fear are much smaller and animals recover more rapidly than animals in captivity (Birkhead 182: 191-192).
In *The Question of Animal Awareness*, Griffin (1976 cited in Birkead 2012) was the first to explore animal consciousness, in an attempt to understand the "mind" behind the behaviour. It is difficult to define the concepts of feelings, emotions, awareness, sentience and consciousness, even in humans. Some researchers are conservative when it comes to animal emotion arguing that only humans experience consciousness, therefore only humans experience emotion (Birkhead 2012: 186). Birkhead (2012: 186) argues that because human consciousness integrates the different senses, the definite integration of the senses in birds brings about feelings (of some sort), but he also states that whether they create consciousness as we understand it remains unknown.

**Olfaction**

Inside the upper beak of most birds lies three chambers. The first two of these chambers warm and humidify inhaled air, some of which passes via the mouth into the lungs. The conchae, which are comprised of scroll-like rolls of cartilage or bone, are located in the third chamber. There is a direct relationship between the amount of turns of the scroll, i.e. the complexity of the conchae, and the number of scent-detecting cells. On the surface of the conchae lie these sense-detecting, tiny cells which relay information to the brain as inhaled air passes over them. Olfactory bulbs of the brain lie close to the base of the beak and are responsible for interpreting odour (Birkhead 2012: 138).

The olfactory organ and corresponding parts of the brain are reduced in most birds as in many other animals which spend much of their lives off the ground (Villee *et al.* 1984: 708). Olfaction is of primary importance in tube-nosed marine birds. Most water birds, marsh dwellers and echo-locating species have a useful olfactory sense. Other species may have a relatively unimportant olfactory sense (Birkhead 2012: 140). It was suggested by Healy and Guilford that an increased olfactory ability develops to compensate for reduced visual efficiency (Birkhead 2012: 144).
**Vision**

The eyes of birds are relatively large. Birds that become active soon after sunrise have larger eyes than those who that become active long after sunrise (Birkhead 2012: 11). When discussing the senses of birds Comte de Buffon (1790 cited in Birkhead 2012) said:

“We find that the sight to be more extended, more acute, more accurate and more distinct in the birds in general, than in quadrupeds.”

Birds possess a visual acuity which is far greater than that of human beings due to their rods and cones of the eye being packed more closely in the retina. They also possess the ability for rapid accommodation due to their need to adapt quickly from distant to near vision to avoid collision in flight whilst swooping to the ground from a considerable height (Villee et al. 1984: 708). Excellent vision is required for capturing fast-moving or camouflaged prey (Birkhead 2012: 10). Focussing on a nearby object is achieved by contraction of the ciliary body which then squeezes the periphery of the lens causing an increase in its thickness, as opposed to the passive allowance of the bulging of the lens as seen in mammals (Villee et al. 1984: 708). Compared to humans, which have three types of photoreceptors (cones) in their eyes which sense the colours red, blue and green, birds have four types of cones. The fourth type sense ultraviolet light which enables them to perceive a greater spectrum of colours (Birkhead 2012: 24).

**Hearing**

Alfred Newton (1896 cited in Birkhead 2012) stated:

“It cannot be doubted that the faculty of hearing is highly developed in birds, not only the mere perception of sound, but also the power of distinguishing or understanding pitch, notes and melodies, or music.”

The sense of hearing is highly developed. They are able to detect as wide a range of frequencies as humans and they possess a greater ability to detect rapid changes in frequencies than humans (Villee et al. 1984: 708). In addition, birds possess an auditory reflex which reduces the sound of their own voice. By opening their mouth wide to call, their ability to hear is reduced, caused by a change in tension on the eardrums (Birkhead 2012: 38). Birkhead (2012: 62)
likens avian hearing ability to the auditory equivalent of hearing in slow motion, allowing birds to hear minute details which are inaudible to us humans.

There are four anatomical differences between the hearing apparatus of birds and mammals. Birds have an absence of an external ear, or ‘pinna’. Their ears are covered with feathers known as ear coverts, differing from adjacent feathers by their shiny appearance. This allows smooth flow of air over the ears while in flight, filtering out the sound of wind passing over the ears, enabling better hearing (Birkhead 2012: 42). Secondly, birds have a single bone in the middle ear as opposed to the three tiny bones in mammals (Birkhead 2012: 44). In the inner ear, a bird’s cochlea is straight or slightly curved, as opposed to the spiral structure in mammals. Within the cochlea lies a “basilar” membrane which consists of many, tiny, vibration-sensitive hair cells. Sounds of different frequencies stimulate different regions of these hair cells. It is this substantial length of the basilar membrane (rather than the coiling of the cochlea, seen in mammals) which accounts for a bird’s sensitivity to sound (Birkhead 2012: 44). A bird’s size is also correlated to their sensitivity to sound. Larger birds are more sensitive to low-frequency sounds and smaller birds are particularly sensitive to high-frequency sounds (Birkhead 2012: 45). The fourth difference between human and bird ears is that the hair cells within the cochlea are replaced regularly (Birkhead 2012: 46).

The hearing ability of birds fluctuates throughout the year. It has been shown that the ability to detect sound (sensitivity) as well as the ability to interpret sound (processing) changes seasonally. Triggered by changes in day length, and subsequent hormonal changes, birds in temperate climates undergo significant seasonal changes in their internal organs (Birkhead 2012: 47-48).

**Taste**

Birds have an acute sense of taste which allows them to avoid harmful foods, with sensory receptors inside their mouth distinguishing between sweet, salt, sour and bitter tastes (Shore et al. 2004: 28). They release distasteful and warning coloured insects immediately after taking them in their beaks. There is clear
evidence that birds associate the appearance of their prey with its palatability (Birkhead 2012: 113). Birds seem to be indifferent to capsaicin and have been seen to eat peppers with no signs of discomfort (Birkhead 2012: 119). Anatomically, taste buds are located at the base of the tongue in the palate towards the back of the throat in most species. Taste buds are also found near the opening of the salivary glands (Birkhead 2012: 118).

**Touch**

In *The sense organs of birds*, Jerry Pumphrey wrote:

“In birds... the horney beak appears unlikely to be a suitable vehicle for a refined sense of touch... the presence of end-organs... suggest that it is in fact the part of birds which is tactually the most sensitive.” (1948 cited in Birkhead 2012).

Different parts of the beak and tongue of birds have tiny pits which contain numerous touch receptors. These touch receptors allow for fine-tuned allopreening. A correlation between increased allopreening and greater amounts of stress hormone, corticosterone, has been shown in ravens. However, more studies are required on this topic for us to be confident that this is a general phenomenon in birds (Birkhead 2012: 83).

Filoplumes are highly sensitive and contain touch sensors. When moved, a nerve impulse is triggered which alerts the bird to readjust its plumage (Birkhead 2012: 85). Like mammals, the skin of birds is sensitive to both temperature and touch. During egg incubation and chick brooding, their sensitivity ensures that eggs and chicks are suitably warmed as well as assuring that eggs and chicks are not stepped on or crushed. Birds regulate the temperature of their eggs by increasing or decreasing the amount of blood flow to the brood patch which is an area of skin where feathers are lost to facilitate incubation. Contact between the brood patch and eggs triggers the release of prolactin from the avian pituitary gland which causes the bird to continue incubating (Birkhead 2012: 92-94).
Magnetic Sense

It was observed by casual observers of caged songbirds in the 1700s that the birds hopped agitatedly each autumn and spring when they would normally be migrating, a so-called “migratory restlessness”. The measure of the direction and intensity of their hopping proved that they indeed are genetically programmed to fly in a particular direction for a certain number of days (Birkhead 2012: 172-173).

Birds possess a magnetic sense that allows them to read compass directions from the earth’s magnetic field. They do not possess a single or specific organ which detects the earth’s magnetic field, rather, magnetic sensations pass through body tissues via chemical reactions inside cells throughout the body (Birkhead 2012: 175-176).

According to Birkhead (2012: 176), there are three main theories which explain how animals detect magnetic fields:

1. “Electromagnetic induction” possibly occurs in fish but birds seem to lack the highly sensitive receptors needed for this mechanism.
2. Microscopic crystals of magnetite, a form of iron oxide, have been detected in nerve endings of the nasal cavity of the upper beak and around the eye of birds. It was observed in the 1970s that in bacteria, magnetite is responsible for bacteria aligning themselves with a magnetic field.
3. Magnetic sense might be mediated through a chemical reaction.

Avian magnetic sense applies and integrates the second and third theory. The chemical mechanism based in the eye provides the “compass” while the “map” is provided by magnetic receptors in the beak. In essence, the “compass” detects the direction of the magnetic field while the “map” detects the strength of this field. This sense allows birds to migrate over vast distances and find their way home (Birkhead 2012: 178).

Magnetic sense, or sensing the earth’s magnetic field, is linked to a bird’s right eye due to the high lateralization of their brains. The left brain, which is better at processing information relating to homing and navigation, receives information
from the right eye. It is not incoming light which triggers this sense but rather a clear image perceived by the right eye (Birkhead 2012: 177).

g) Digestive System

The digestive system is compact and highly efficient (Villee et al. 1984: 708). It may take minutes or hours for food to pass through the system. This variation is a result of adaptation to varied nutritional regimens by different species (Ringer 1886: 69). According to Ville et al. (1984) the increased activity and high metabolic rate of birds depends on the intake and processing of an adequate food supply. Relative to humans, birds consume enormous quantities of food (Shore et al. 2004: 21). It was demonstrated in some birds that oestrogen stimulates appetite, hence the increase in food consumption at onset of reproduction. This increase continues until the cessation of the reproductive period (Ringer 1986: 69). An increase in water consumption is also seen in female birds prior to the onset of egg laying. During this period, they normally produce excreta with a higher water content (Ringer 1986: 75).

Birds eat a variety of insects and other animals as well as plant foods such as fruits and seeds (Villee et al. 1984: 708-709). Low caloric foods such as leaves and grass are not eaten (Villee et al. 1984: 709). Foods with high protein content require additional water consumption for the excretion of extra uric acid. This results in very moist droppings whereas the consumption of grains low in protein results in dry droppings (Ringer 1986: 69). Most birds, including cranes, can tolerate toxic foods better than mammals due to the toxic products being removed from the liver and kidneys prior to reaching general circulation. This allows some toxic foods to provide birds with good nutrition (Gee and Russman 1996: 123).

A bird’s beak is hard and most often sharply pointed (Birkhead 2012: 114). Birds have bills which are modified to the nature of the food that they consume. For example: Short, heavy bills are ideal for picking up and breaking open seeds, hooked beaks are well suited for tearing apart small animals, long sharp bills are used by some birds to spear fish and frogs and other nectar eating birds have
beaks correlated to the structure of the flowers which they feed off (Villee et al. 1984: 709).

Cranes are omnivorous. They probe the subsurface of the ground with their bills, taking foods from the soil or vegetation. After being fed by their parents and gaining independence, for the first ten months of development, young cranes are extremely inquisitive, exploring and discovering food items in the wild (Archibald and Lewis 1996: 3). Cranes display seasonal cycles in appetite, evidenced by an increase of food consumption in autumn (Swengal et al. 1996: 111).

On the inside of the mouth, the tongue is hard and arrow-like in most species (Birkhead 2012: 114). Birds have no teeth therefore food taken into the mouth is mixed with a lubricating saliva and travels through the pharynx and down the oesophagus. In grain-eating species, the lower end of the oesophagus forms a structure called a crop. Seeds are temporarily stored in this crop where they are softened with water (Villee et al. 1984: 709). Water consumption is dependent upon water balance in which input must equal output (Ringer 1986: 69).

The first part of the stomach is known as the proventriculus and is where the food is mixed with peptic enzymes. The food then passes into the gizzard. The gizzard is the highly specialized posterior part of the stomach with thick muscular walls and adapted glands which secrete a horny lining. In the gizzard, small stones which have been ingested aid in grinding the food to a pulp and mixing it with the gastric juices. The intestinal area is rather short and much like humans, is lined with villi to increase the surface area for absorption (Villee et al. 1984: 709).

**h) Respiratory System**

Birds have relatively small, compact lungs which are connected to an arrangement of air sacs extending into many parts of the body. The sacs are functionally grouped into two sets; the anterior and posterior sets. Two cycles of inspiration and expiration are required for a unit of air to pass through the respiratory system (Villee et al. 1984: 709). See table 2.3 below.
Table 2.3: Respiration required to move a single unit of air through the avian system.

<p>| | |</p>
<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>First inspiration</td>
<td>Sternum is lowered and the lungs and air sacs expand. Air is drawn directly through the main bronchus to the posterior sacs. The posterior sacs receive oxygen-rich air (Villee et al. 1984: 709).</td>
</tr>
<tr>
<td>First expiration</td>
<td>The sternum is raised and posterior sacs contract causing air to flow into the parabronchi and air capillaries (Villee et al. 1984: 709).</td>
</tr>
<tr>
<td>Second inspiration</td>
<td>Air in the parabronchi is discharged into the anterior sacs. The anterior sacs receive oxygen-depleted air (Villee et al. 1984: 709).</td>
</tr>
<tr>
<td>Second expiration</td>
<td>Anterior sacs contract and air is expelled to the outside (Villee et al. 1984: 709).</td>
</tr>
</tbody>
</table>

Although a bird’s lungs are smaller, they can have a lower ventilation rate than mammals. This is due to the parabronchial air having a higher oxygen content than that in the alveoli of a mammalian lung. The tidal volume of air through the whole respiratory system is also greater relative to body size than that of a mammal (Villee et al. 1984: 709-710). Exchange surface per unit volume of the avian lung is at least ten times that of the human lung (Ringer 1986: 72). This allows for adequate oxygenation of tissues when birds are flying at a high altitude with lower oxygen pressure and density (Villee et al. 1984: 710). Their high metabolism also requires large amounts of oxygen, requiring them to have a well-developed respiratory system (Fraser 2009: 13).

Because the air sacs extend through many parts of the body, including bones, they aid in lightening the bird (Villee et al. 1984: 709-711). The large surface area, from which water is able to evaporate, also has a thermoregulatory purpose, helping to cool the body (Villee et al. 1984: 711).

Air passages also provide a mechanism for the production of sound. The posterior end of the trachea is comprised of a structure called the syrinx (or voice box). The muscles associated with the syrinx vary the pitch of notes set by the
vibration of membranes (Villee et al. 1984: 711). Cranes, like swans, possess a unique anatomical tracheal feature. The trachea is coiled and posteriorly embedded in the sternum. Some authors believe this feature is for sound amplification, others believe it decreases skeletal mass and others believe it is a useful thermoregulatory feature (Gee and Russman 1996: 123).

i) Blood and Circulation

The circulatory system is extremely active and efficient (Villee et al. 1984: 711). The heart of avian species is relatively large, being one point four to two times larger than mammals as a percentage of body weight (Ringer 1986: 68). It is divided into left and right sides and venous and arterial blood never mix (Villee et al. 1984: 711). Age, season and excitement have a major impact on heart rate (Riger 1986: 68), but generally birds have a very rapid heart rate (Villee et al. 1984: 711). Due to the ability to mobilize fluid from tissues to replenish blood lost at a far greater rate than mammals, Ringer (1986) concludes that avian species have a greater capacity to withstand haemorrhage without death than mammals.

The blood volume of birds makes up six point five to ten percent of their body weight. There is an inverse relationship between blood volume and fats; older birds have more fat and lower blood volumes. The lifespan of avian blood cells is twenty-eight to forty-five days which is shorter than mammals. This is due to the greater metabolic rate and higher body temperature of birds (Ringer 1986: 67).

Some differences in blood constituents between mammals and birds are seen in the glucose, plasma protein and blood platelet levels. Blood glucose levels are about twice those of mammalian blood. The albumin to globulin ratio in birds is generally less than 1:0 and the primary function of this protein is unknown. Avian blood lacks blood platelets therefore clean cuts bleed more profusely than mammalian blood (Ringer 1986: 67-68).

Birds are prone to develop atherosclerosis. Males are subject to greater incidence than females in the abdominal aorta whilst females are more prone to demonstrate the medial form (Ringer 1986: 68). The blood vessels supplying the
flight muscles are very large. Arteries carrying blood down the legs break up into a network of smaller vessels which are intertwined with veins coming from the feet. This relationship acts as a counter-current heat exchanger, conserving body heat by transferring heat from the arterial blood to the cooler venous blood. There is no effort made by the circulatory system of birds to keep their feet warm and therefore may have feet much colder than their bodies during low environmental temperatures (Villee et al. 1984: 711). When flying in low temperatures, cranes are known to tuck one or more legs forward in the flank feathers (Johnsgard 1983: 11).

j) Excretory System

Birds have no urinary bladder and instead nitrogenous wastes are removed from the blood by a pair of methanephric kidneys that are drained by the ureter into the cloaca. They have a much higher number of kidney tubules than mammals due to their high metabolic rate. Body water is conserved by tubular reabsorption and elimination of nitrogenous waste in the form of uric acid. Excretion of additional water and uric acid in the form of a white, crystalline material occurs mixed with the faeces. Electrolytes are generally conserved, and any excess is eliminated by the kidneys (Villee et al. 1984: 711). Bird kidneys are less effective in the excretion of electrolytes than mammalian kidneys (Ringer 1986: 74).

k) Reproduction

Birds have a reproductive system which is very similar to that of reptiles. In males, sperm is produced in the testes and discharged through an epididymis and vas deferens to the cloaca. In most species, sperm is transferred to the female via a brief cloacal apposition and very few have an additional copulatory organ. In females, the ovary is very small but enlarges during the reproductive season as eggs accumulate yolk. Ovulated eggs then enter the oviduct. Fertilization of eggs occurs in the upper part of this duct where they are covered with secretions of albumin, a shell membrane and a shell as they continue down the duct (Villee et al. 1984: 711). The sex of the embryo that will result if fertilized is determined prior to ovulation because female birds are heterozygous while male birds are homozygous (Ringer 1986: 79). Females do not have a right ovary and oviduct.
Ville et al. (1984) suspects this is possibly an adaptation for weight reduction purposes, however if there is damage to the left ovary then the right may grow (Fraser 2009: 15). Female birds are able to lay large, fragile eggs due to the absence of a pelvic symphysis (Villee et al. 1984: 711).

Much activity in birds is focussed on reproduction and the rearing of young (Villee et al. 1984: 711). In many ways, birds become highly sexed during the mating and breeding seasons but then become asexual during the rest of the year (Fraser 2009: 15). Males of most species establish a territory prior to the breeding season. This territory will be used for mating and nesting and the male will aggressively defend this area against the intrusions of males from their species. This behaviour spaces the birds and prevents overcrowding (Villee et al. 1984: 711).

Pair-forming behaviour (courtship) in Blue cranes occurs in early October (Johnsgard 1983: 91) once females take up residence in this territory. Courtship in birds may involve very elaborate displays (Villee et al. 1984: 711). The most outstanding feature of Blue crane courtship is the “dance” which takes place for one to four hours at a time. The birds begin by running in circles for approximately five minutes at a time, as if the male is chasing the female. After each run, the two birds suddenly stop and call in unison (Johnsgard 1983: 91). The so-called “unison call” is a duet which lasts three to five seconds and accompanied by a head down-forward-up display and a raising of the wing plumes by the male (Tarboton 1994: 194). During this call, the male emits a series of low calls and the female accompanies him with two or three high pitched calls for each low call of the male (Archibald and Lewis 1996: 21). They then pick up and throw pieces of grass, branches and dried pieces of donkey-dung into the air, followed by them both leaping high into the air. They then run in circles again, pick up and toss debris and kick it as it falls, then continue to run again in small circles. After stopping near one another they resume calling. They end their “dance” by tossing up bunches of grass while facing one another, followed by another unison call. They repeat this dancing behaviour many times over a two-week period. Each phase is always ended with calling (Johnsgard 1983: 91). The purpose of courtship is:
• to establish that the birds are of the same species,
• to establish a strong pair bond, and
• to prepare both partners physiologically and psychologically (Villee et al. 1984: 711).

Pairs then break away from the flocks and take up occupation of breeding sites. In a suitable habitat, pairs may be spaced one to two kilometres apart. The “unison call” is made by these pairs especially at dawn and dusk (Tarboton 1994: 194).

Copulation occurs as the male crane flaps his wings once or twice then leaps onto the back of the female. He hooks his toes over her forewings and rests his tarsi over her rump while the female is bent forward into a nearly horizontal position, with her head slightly raised. They remain in this position for up to five seconds while the male flaps his wings to maintain balance (Johnsgard 1983: 19). A successful copulation is followed by a post-copulatory display where the birds stand side by side, with their necks stretched vertically upward, followed by a “charge” display (see 2.2.6). They then stand with their beaks horizontal and perform a “ruffle-threat” (see 2.2.6), with foraging, preening or dancing commencing later (Johnsgard 1983: 19).

Males begin searching for a nesting site approximately one week prior to egg laying. The male approaches the female with possible nesting site options by dropping objects near her feet with a low “kworr” sounding call. At this stage the female appears uninterested and wanders off as the male repeats this several times. The male follows her and approaches the female in the same manner at another location until the female responds and accepts the site by inspecting, lifting up and putting down the objects that the male had gathered and uttering a similar but higher pitched call than that of the male. The female then begins cleaning the site while both birds call from the site. Further copulatory behaviour may take place at the nesting site (Johnsgard 1983: 91).

The Blue crane typically nests on a slightly elevated, bare spot on the ground, seen in four habitat types:
• short grass and sedge grown marshes extending through narrow valleys, surrounded by grassy slopes,
• grassy pastured fields,
• marshy borders associated with dammed areas, and
• short-grass foothills (Johnsgard 1983: 92).

In avian species, bird pairs may build nests which may range from a simple depression on the ground to elaborate designs, such as those of the African weaver bird (Villee et al. 1984: 712). The nests of Anthrpooides paradiseus may range from having no material at all, scattered or a small pile of debris or grassy materials, to elaborate nests of pebbles placed side by side surrounded by short, green grass. These birds are observed returning to the same nest sites from year to year (Johnsgard 1983: 92).

The Blue crane female then lays the eggs at intervals of one to three days (Ginn and McIlreron 1994). This is done during November through to February (McLachlan and Liverside 1971: 146). They normally lay two eggs, (sometimes one, rarely three (Ginn and McIlleraron 1994)), and often hatch and rear both successfully (Tarboton 1994: 194). The eggs are pale brown, blotched with darker brown and grey and are about 94 x 66mm in size. Both sexes incubate the eggs, in the process known as brooding, however the female takes a larger share of the incubating duties (Ginn and McIlleraron 1994) while the male brings her food (Villee et al. 1984: 712). Incubation is performed with the bird sitting with its head erect, periodically standing up, gazing downwards at the eggs and occasionally shifting the position of the eggs with the tip of its bill (Johnsgard 1983: 22). The incubation period is thirty to thirty-three days (Ginn and McIlleraron 1994). “Brood patches” may form on the underside of the birds as they lose the feathers from their abdomens. Increased blood supply to these brood patches facilitates the transfer of heat to the eggs (Birkhead 2012: 92).

The chick, inside the egg, develops strong dorsal neck muscles and an “egg tooth”. This egg tooth is a thickening on the end of its bill which is used to break free of the shell during hatching (Villee et al. 1984: 712). Hatching of the eggs of the Blue crane has been observed to be synchronous with as little as three hours
lapsing between hatching. The chicks can be heard within the eggs approximately twenty-four hours before hatching (Johnsgard 1983: 92).

Although it is normal for mature cranes to reproduce annually, stress may cause an apparent reduction in reproduction for one or more years (Gee and Russman 1996: 123). Disease, extreme weather, moves to new pens, intraspecific conflict and human impact can interfere with the onset and maintenance of reproduction (Gee and Russman 1996: 132). Cranes generally mate for life but are seen to replace mates that die. Mate swapping has also been reported (Gee and Russman 1996: 123).

I) Post breeding biology

Table 2.4: Post-hatching development of *Anthropoides paradiseus*.

| First day          | • Chicks in or immediately around nest.  
                      | • Male attacks any intruder.  
                      | • Chicks rest in the shade of their parents when the day is hot, flattening their necks to the ground, giving them a dead appearance.  
                      | • No feeding of the young (Johnsguard 1983: 92).  
                      |
| Second day         | • Chicks begin walking around with their parents.  
                      | • Female displays aggressive defensive behaviours such as the male.  
                      | • Eggshells among the first foods offered.  
                      | • Bits of food given by female to her young, touching their beaks with a soft “urrrrr” sound until the chick accepts it.  
                      | • Male doesn’t feed the young.  
                      | • Chicks fed nearly every five minutes (Johnsguard 1983: 92).  
                      |
| Third day          | • Chicks take food more readily (Johnsguard 1983: 92).  
                      |
| Tenth day          | • Female begins pointing out food on the ground and lets the chick pick it up (Johnsguard 1983: 92).  
                      |
| Fifteenth day | • The young can pick up food without assistance of the female (Johnsguard 1983: 92). |
| Twelve weeks | • Flight (Tarboton 1994: 194). |
| Eighteen months | • Adult-like social behaviour including threat displays, guard and unison calls and dancing (see 2.2.6).  
• Pairing can now occur (Archibald and Lewis 1996: 24) |

Eggs hatch from December to March followed by development of the chick (see table 2.4). The male parent crane typically leads the young followed by the female (Johnsgard 1983: 22). When the cranes encounter enemies, the adults may approach the intruder while uttering and “alarm” call until it retreats. This is known as a “mobbed” manoeuvre. Diversionary displays may occur when threats approach the nest. This involves the parents moving away from the nest, with or without wing-spread, and assuming an aggressive posture (Johnsgard 1983: 23). When the pair only has one chick, when threatened, the chick may be covered by the parent which stands and spreads its wings over it (Johnsgard 1983: 22).

The young Blue crane chicks are observed to be good swimmers, crossing areas of water as long as ten meters (Johnsguard 1983: 92). The chicks’ initial growth occurs mostly in their legs and thighs. This gives them an awkward appearance when small but also makes them very fast: a six-week-old bird being able to outrun a man (Tarboton 1994: 194). Sibling rivalry is important in determining the survival of crane chicks. One chick usually becomes dominant over its sibling, receiving most of the food from its parents. Hunger causes fighting between chicks. The subordinate chick usually dies in times of food scarcity (Archibald and Lewis 1996: 23). In the wild, the young Blue crane flies for the first time when about twelve weeks old. This is followed by the end of the breeding cycle after which flock life begins again (Tarboton 1994: 194).

2.2.6 Behaviour

In the 1930s, the study of animal behaviour began to take off. North American researchers adopted rigid psychological approach to behavioural research. They
focussed mainly on captive animals and trained them to seek reward and avoid punishment. These researchers were known as behaviourists and to them, animals were no more than robots. They relied on the rationale that animals respond to pain and appreciate rewards. This approach revealed a lot about the cognitive ability of animals but was seen as artificial (Birkhead 2012: 184).

European researchers used a more naturalistic approach. They studied animals in their natural environment, pioneering the discipline of “ethology”. They were initially concerned with which triggers stimulated a behavioural response. They then studied communication between animals. The trap that researchers of animal behaviour ran into was that it was too easy to anthropomorphise. In the 1980s, researchers were advised to “study the behaviour rather than attempting to get an underlying emotion” (Birkhead 2012: 185).

The natural features and characteristics of birds are expressed in the symptom picture of patients requiring homoeopathic remedies from the avian family (Fraser 2009: 17). According to Naude (2011: 128), the ethology and doctrine of signatures analysis of the African elephant corresponded with the symptoms elicited in the provings of both *Loxodonta africana* and *Lac loxodonta africana*. Birds’ lives are very similar to humans in that they are predominantly visual, largely monogamous and highly social (Birkhead 2012: 186).

Much of bird behaviour is learned and perfected during their life, however, a number of their behaviour patterns are innate (Harrison 1976: 29). Young birds learn to cope with their environment by watching others and mimicking them, and in this way they learn what is a threat and what poses no danger. Thus, parental guidance is crucial. Birds also learn by trial and error, examining objects carefully to see if they yield food. New habits are spread through the population in this way, as other birds copy and learn about new food sources (Harrison 1976: 30).

Most birds are gregarious for at least some part of their life cycle (Fraser 2009: 9). Blue crane behaviour varies seasonally. They are sociable birds, except when breeding (Ginn and McIlneron 1994: 194). In winter they are sociable and nomadic, whereas in summer they are sedentary and dispersed as breeding pairs (Tarboton 1994: 194).
Cranes become more gregarious during the non-breeding period and move to areas with an abundance of food (Archibald and Lewis 1996: 22). At the end of summer, the Blue crane pairs and their young form groups which merge to form flocks, see figure 2.6. The flocks then move away from breeding sites. These winter flocks often number at least fifty birds and occasionally reach more than 300 (Tarboton 1994: 194), often mixing with crowned cranes (Ginn and McIlleron 1994: 194). The birds feed together (Tarboton 1994: 194) among herds of springbok with whom they form an integrated relationship where the cranes often warn the springbok of possible danger (Johnsgard 1983: 90).

They roost communally, often gathering to stand overnight in shallow water (Ginn and McIlleron 1994: 194) in the company of crowned cranes, flamingos and storks (Johnsgard 1983: 90). They have two roosting areas; a primary and a secondary roost. The primary roost is used at night while the secondary is used just after day break and before sunset for preening, resting, dancing and some foraging (Johnsgard 1983: 21). When roosting at night, they typically stand approximately 1.2 meters apart, in water that is only deep enough to cover their toes (Johnsgard 1983: 19). The amount of light determines the times at which cranes move in and out of their primary roosts. Cloud cover, fog, rain and winds affect their schedules. Twenty percent of cranes leave their roost by sunrise with the remainder leaving within one hundred minutes after sunrise. Eighty percent of cranes arrive back at the roost during the hour of sunset with the remainder arriving forty minutes after sunset (Johnsgard 1983: 21).

Although sociable in winter, mature Blue cranes remain permanently paired as most individuals typically stand or walking in pairs (Tarboton 1994: 194).
At the end of winter, interactions in the flocks increase; there is more calling, dancing and jostling as pairs and potential pairs engage in courtship dancing in which they bow to each other, leap into the air, take short runs and toss up bits of grass and earth (see 2.2.5.k) (Tarboton 1994: 194). Birds are generally elegant creatures but are seen to be awkward and clumsy when they are out of their natural environment (Fraser 2009: 16).

During all times of the year, the Blue cranes' behaviour, like that of all cranes, can be divided into two categories. Individualistic, or “egocentric”, behaviours are those self-directed activities, either necessary for maintaining life and health or “comfort” activities performed during leisure time. These fundamental activities include breathing, eating, drinking, defecating and sleeping or resting. Preening, shaking, stretching and oiling fall into the individualistic activities, though not necessary for life, maintain comfort for the bird (Johnsgard 1983: 11).

The other category of behaviour of cranes is the social behaviour (Johnsgard 1983: 11). Birds display several behaviours associated with social relationships.
These include greeting ceremonies, certain vocal displays and allopreening (Birkhead 2012: 199). In cranes, social behaviours occur in the presence of a second individual, where a social signal such as aggression, appeasement, sexual attraction, and solicitation of food are conveyed from one individual to another. Other activities, such as foraging and seeking shelter may initially be individualistic but result in an aggregation of cranes leading to actual social interactions (Johnsgard 1983: 11).

2.2.6.1 Egocentric Behaviour Patterns

Adult cranes frequently rest on a single leg, with one leg locked in a vertical position and the other hidden in the flank and belly feathers. In this position the head and neck are either held fairly erect, are nearly resting near the breast or may be drawn to the side and rear with the bill tucked into the scapular feathers (Johnsgard 1983: 11). Rarely, cranes sleep in a sitting position, similar to that of incubating adults, with their legs folded underneath while their abdomen rests on the surface. Younger cranes more frequently rest in a posture known as a “hock posture.” In this position the “heel” or tarsal joint bears the weight of the bird, as the body is raised approximately thirty degrees above the horizontal, and the toes are slightly flexed so that their tips touch the ground (Johnsgard 1983: 11).

Walking and running are executed with a human-like movement. When running fast, cranes are seen to have a bouncing gait and occasionally flapping their wings for additional speed and balance. In flight, their legs are held back, in-line with their body. In cold weather, one or more legs may be seen tucked forward in the flank feathers while flying (Johnsgard 1983: 11).

Preening occurs in cranes, especially during moulting periods, beginning shortly after hatching and continuing throughout their lives. It is a time-consuming activity seen in cranes preening a single area for approximately twenty seconds before moving to the next area. The feather is nibbled at the base followed by being gently drawn through the beak (Johnsgard 1983: 11). “Back-slicking” is a movement derived from preening activity. In this movement, the head and bill are
directed towards the uropygial gland at the base of the tail, obtaining oil, then vigorously rubbed over the surface of the body (Johnsgard 1983: 12).

Cranes bath in water by crouching and flapping their wings. They often perform a bobbing movement of the body while doing so, spreading water up and over the breast and back area. They bath for several minutes followed by prolonged preening (Johnsgard 1983: 11-12).

Drinking is achieved by dipping the bill in water and rapidly raising it upward and forward. This requires roughly five seconds and may be repeated up to seven successive times. Ingestion of solid food is performed by pecking at or digging in the ground with the beak (Johnsgard 1983: 12).

Cranes stretch in three major forms, seen as:

- A single wing and corresponding leg stretched out simultaneously,
- Both wings stretched out simultaneously as the back is held horizontally and the neck is extended and held almost vertical, or
- Both wings stretched out simultaneously as the neck is extended and held horizontally forward. This is known as “bow stretching.” The wings are extended for several seconds followed by the head raising and wings folding. Defecation often occurs at this time.

A yawn like “jaw stretching” occurs during periods of relative inactivity (Johnsgard 1983: 12).

Other egocentric behaviours seen in cranes include fluffing of the plumage, scratching of the head region with the middle toe, wing flapping, and rapidly ruffling the body feathers accompanied by vigorous shaking of the body followed by gradually lowering the body feathers (Johnsgard 1983: 12).

2.2.6.2 Social Behaviour Patterns

Social displays by Blue cranes include calling, rigid threat posturing, rigid strutting, ritualized preening, stamping, feather ruffling, flapping, tail fluttering, growling hissing and crouching. Displays appear to be genetically determined as
blind cranes are seen to perform such displays. In captivity, it has been observed that cranes reared by humans prefer to associate with people rather than with other cranes (Archibald and Lewis 1996: 22). The Blue crane may be dangerous to children due to their tendency to peck at the ankles and eyes. (McLachlan and Liverside 1971: 146).

There are many postures and movements which convey aggression in a crane. These manoeuvres are used to threaten potential attackers, and “announce” their internal state. This may reduce the intensity of hostile encounters or aid in avoiding the encounter altogether (Johnsgard 1983: 12). Crown-expansion, bare skin expansion or elevation of the head plumage in cranes with completely feathered heads, such as the Blue crane, displays low intensity aggression when seen alone. This increase in the apparent size of their heads usually occurs with other aggressive displays (Swengel et al. 1996: 106).

In young cranes, or adult cranes defending the nest, the wings are spread horizontally outward and droop at the wrist which causes the primaries to virtually touch the ground. In this posture the crane stands or walks while facing the threat (Johnsgard 1983: 12-14).

The “crouch” or “squat-threat” is a posture where the bird initially stands with its beak pointing downward and its neck retracted, followed by the bird gradually lowering itself into a sitting position with the beak held firmly downward. The wings remain loosely folded or slightly spread. After remaining motionless for several seconds, the crane either stands up again (Johnsgard 1983: 14) and performs a “ritualized preen”, or rushes towards the intruder while flapping its wings. The rush is terminated with either a “stomp” or “ruffle bow” or by attacking the threat (Swengel et al. 1996: 108). Swengel et al. (1996) believes this to be the most aggressive display.

The “raised-tertial” posture is another major threat display. During this display, the bill is horizontal, lowered, or pointing directly downward with its head lowered in extreme conditions. The crane raises its tertial feathers to form a vertical fanlike shape (Johnsgard 1983: 14). This display is commonly followed by more intense
threat signals such as a “parade walk” which involves the crane moving swiftly toward the threatened object or in a circular movement around it. The “ruffle-preen” (or “ruffle-shake”) display is frequently performed during such walking threats. This display begins with the crane generally erecting the feathers of the neck, wings, back and other surfaces. The wings are positioned slightly open and lowered and they are flapped alternately giving the impression that the crane is shaking or “ruffling” rapidly from one side to the other. During this time, the bill is pointed downward and back toward the abdomen followed by a “ritualized preening” movement over the feathers of the legs or flanks (Johnsgard 1983: 14). Some cranes stamp their feet during the ritualized preen; a movement known as the “stomp” (Swengel et al. 1996: 107). A low growl-like sound is often uttered. A less elaborate “ruffle” display may be seen in which the bill is slightly lowered and the preening component may be replaced with a ritualized foraging movement. After ruffling, the bird returns to a resting position (Johnsgard 1983: 14).

The Blue crane’s principal aggressive display is the “ruffle-bow” in which the crane initially elevates its feathers slowly, then ruffles its plumage until the whole body is rapidly shaking (Swengel et al. 1996: 107).

The “charge” often occurs after a crane lands near a flock of cranes, while chasing another crane or after copulation. In this posture, the neck and head are pointed directly downward with the feathers at the base of the neck and back steeply raised. The crane may then run, walk, or stand still in this position. The “charge” may be accompanied by jabbing at the ground or at vegetation (Johnsgard 1983: 14). When taking off or attacking an enemy, the crane swiftly runs forward whilst flapping its wings. It then jumps into the air, thrusting its legs forward and kicks at its opponent. If this attack is between two cranes, they both jump and kick in this manner until one finally retreats (Johnsgard 1983: 12). A “bill-stab” may be performed by spearing the opponent with the bill during attack. A “jump rake” occurs when the crane leaps into the air and slashes the intruder with their inner toe nails. Thrashing with the wings, known as a “wing-thrash”, may also occur (Swengel et al. 1996: 108).
Cranes convey appeasement in a horizontal posture with the neck retracted, the wings loosely folded and the bill roughly horizontal. Its body feathers are slightly fluffed while it walks in a "loose-jointed" manner, rather than the stiff "parade march" (Johnsgard 1983: 14).

Dancing is generally believed to be associated with courtship, but has been seen to be much more complex. Cranes less than two days old have been observed displaying dancing behaviours. In young birds, dancing is a part of normal motor development. It also serves to thwart aggression and facilitate pair formation while synchronizing pair members sexually prior to nesting. Older birds dance less than younger birds. Flightless chicks dance by alternately flapping their wings, jumping or bouncing, and with running movements. "Bowing" and "stick-tossing" are included as the bird grows older (Johnsgard 1983: 14). Courtship dancing, copulatory and post-copulatory displays are also seen in cranes (see 2.2.5.k) (Johnsgard 1983: 19).

Unlike other classes of animals, birds are creatures of the air. The air carries the sound of music and voice, therefore communication and song are of vital importance to birds (Fraser 2009: 11). Cranes have a wide variety of vocal displays. Vocalizations may indicate aggression and fear, help drive away intruders, or maintain pair bonds (Swengel et al. 1996: 108). Blue cranes have low, broken calls in comparison to the shrill-like calls of most other species (Archibald and Lewis 1996: 21). The types of calls include:

- Low, purr-like contact calls (Archibald and Lewis 1996: 21) which communicate a bird’s disposition to fly in order to synchronize long distance movements of the pair (Swengel et al. 1996: 111);
- slightly louder pre-flight calls (Archibald and Lewis 1996: 21);
- purr-like or shrill pre-copulatory calls (Archibald and Lewis 1996: 21);
- groan-like or scream-like distress calls (Archibald and Lewis 1996: 21);
- scream-like plaintive location calls (Archibald and Lewis 1996: 21);
- abrupt alarm calls (Archibald and Lewis 1996: 21), which are normally given in response to a distant disturbance (Swengel et al. 1996: 112);
- loud flight calls (Archibald and Lewis 1996: 21);
• loud guard calls (Archibald and Lewis 1996: 21) which help to defend the territory (Swengel et al. 1996: 108), and
• complex unison calls in duets (see 2.2.5.k) (Archibald and Lewis 1996: 21), also performed after repelling intruders (Swengel et al. 1996: 108)

Submissive displays and fleeing behaviour indicate that the crane is stressed by their environment. A “cowering” posture is seen when a crane retracts its neck and assumes a hunched posture while fluffing its head and neck feathers. Subordinate cranes may spread their wings slightly and lower their heads, or turn their backs entirely in this position. A purring call is given. This behaviour is frequently seen in chicks. Adult cranes, of both sexes, adopt this chick-like behaviour in an attempt to calm a dominant crane or person (Swengel et al. 1996: 109).

Cranes behave more normally when people are not in view as some cranes are disturbed by observers (Swengel et al. 1996: 105). In captivity, aggressive displays such as posturing, ruffle displays and ritualized preening are seen when threats are nearby and are used to intimidate or repel intruders (Swengel et al. 1996: 106-107). If a dominant crane or person approaches, captive cranes may run away and push at fences. Other disturbance-related activities include nervously pacing the fence, raking its feet along the fence as if to climb and dragging its neck and bill along the fence. These stress-related behaviours can cause physical damage such as abraded wrists and broken bills (Swengel et al. 1996: 109). Frequent non-stressful encounters with humans help to calm them down (Swengel et al. 1996: 110).

It has been observed in captivity that when disturbance is minimized, crane pairs are healthier and breed better. Stress can be reduced by taming cranes in a process involving conditioning birds to human activity through providing treats, avoiding direct eye contact and announcing ones’ approach by calling from a far when approaching. Cranes are less stressed when their pens have visual barriers which separate them from neighbouring cranes, routine tasks are done on a regular schedule with the same people performing these tasks, and if the
breeding area is sheltered from loud vehicles and activities during and three months prior to breeding season (Swengel et al. 1996: 115).
CHAPTER THREE: MATERIALS AND METHODS

3.1 The experimental design

The homoeopathic drug proving of *Anthropoides paradiseus* 30CH was conducted as a randomized, double-blind, placebo-controlled trial, at the Homoeopathic Day Clinic, at the Durban University of Technology (DUT).

The experimental group sample size was comprised of thirty participants who were shared equally amongst two researchers. A ratio of 24:6 was used between verum and placebo groups. The double-blind conditions of the study, and identical verum and placebo powders, allowed for the powders to be allocated in a randomized manner in which neither the researchers nor provers were aware of whether the provers were allocated to verum or placebo groups.

All provers were allocated a distinctive prover code which corresponded to a randomization code. Each prover was given six powders which were dispensed by the technician at the Homoeopathic Day Clinic. The powders were ingested over a two-day period; one powder three times a day, or until symptoms arose. The provers were given a journal in which they noted the symptoms they experienced during the research period.

Following the proving period, the journals were collected. The subjective material was then converted into materia medica and repertory format. The qualitative and quantitative analyses of these symptoms allowed for a symptom picture to be established which was then analyzed and compared to the ethology of the substance.

3.2 Outline of the experimental method

The experimental method that was used in this study was taken from *Dynamics and Methodology of Homoeopathic Provings* (Sherr 1994) and was in accordance with the International LMHI-ECH and DUT proving guidelines (Jansen and Ross 2014).
• The proving substance was prepared using the feather of *Anthropoides paradiseus* by the researchers according to Method 6, Method 8a and Method 10 as specified in the *German Homoeopathic Pharmacopoeia* (Benyunes 2005).

• The researchers recruited potential subjects with the aid of posters (Appendix B) displayed at sites on the DUT campus, and by word of mouth. These subjects consisted of homoeopathic students, homoeopathic practitioners and members of the public.

• The prospective subjects were individually interviewed and given a preliminary letter of information which included signing an informed consent form (Appendix C) before answering a questionnaire (Appendix D) which assessed their suitability for inclusion in this study.

• If the inclusion criteria were met, the participants were given another letter of information and taken through the instructions to provers sheet, signed an informed consent form (Appendix A) and a detailed case history (Appendix E) was taken by the researcher. A full physical examination took place.

• Each prover was then provided with:
  - a personal prover code
  - a blank lined A5 book (the journal) in which symptoms were recorded
  - the powders
  - a starting date
  - relevant contact details

• One week prior to ingesting the proving substance, each prover recorded their “normal” functioning symptoms in the journals. These functioned as a control which their proving symptoms were analysed against.

• The provers then proceeded to take the remedy three times a day over a two day period. If a symptom developed, the prover contacted the researcher and did not take any further remedies.

• The researcher contacted each prover daily during the first week of the proving and discussed their symptoms. Thereafter each prover was
contacted every second day in the second week, every third day in the third week and once during the fourth week.

- During the four weeks of the proving, each prover recorded their symptoms daily or until no further proving symptoms occurred.
- A further one week observation period then took place, during which each prover reflected on the process and noted any further symptoms.
- At the end of the six week proving period a follow up consultation and examination was scheduled. This served to note any physical and mental changes, collect prover journals, as well as discuss and clarify each participant’s proving experience.
- Extraction of the symptoms of completed prover journals began while the remaining participants completed their proving process. The extraction process involved distinguishing true proving symptoms from the other information.
- The proving was then un-blinded to the researchers which allowed the verum and placebo groups to be separated.
- Completion of the extraction of symptoms, collation and editing of the data collected from the journals was carried out by the researchers manually, i.e. no computer software was used.
- The data was then presented in materia medica and repertory formats.

3.3 The proving substance

3.3.1 Potency

The homoeopathic drug proving of *Anthropoides paradiseus* was conducted using the 30th Hahnemannian potency (30CH).

3.3.2 Collection, preparation and dispensing of the proving substance

The proving substance, a contour feather of *Anthropoides paradiseus*, was acquired from the Blue crane enclosure at the Umgeni River Bird Park by the park staff, on 22 June 2015. The feather was found on the floor of the enclosure, housing a sexually mature breeding pair, of juvenile age. It was therefore unknown whether the feather was that of the female or male bird.
The researchers prepared the proving remedy from the feather obtained, the day following its procurement. They finely chopped the feather and accurately massed the powdered feather in order to triturate it with inert lactose powder at a ratio of 1:99 according to method 6 (Triturations by hand) of the *German Homoeopathic Pharmacopoeia* (GHP) (Benyunes 2005). This method was employed to raise the remedy by three potency levels and resulted in a 3CH triturate. The 3CH triturate was then converted to 30CH liquid potency by serial dilution as per method 8a (liquid preparations) of the GHP (Benyunes 2005). Method 10 (impregnation with granules) of the GHP (Benyunes 2005) was then used to impregnate inert lactose monohydrate granules (Batch number: SAAR3862000EM, expiry date: 31-03-2016) with this 30CH liquid potency.

The powders of the verum and placebo group were prepared. For the verum group, ten of the *Anthropoides paradiseus* 30CH impregnated granules were added to pure lactose powders. For the placebo group, granules were impregnated with seventy-three percent alcohol followed by ten of these granules added to pure lactose powders. The resultant powders from both groups appeared identical.

The powders were dispensed to each prover by the Homoeopathic Day Clinic technician (Dr Shraddha Brijnath) according to the randomization sheet prepared by an independent third party (Dr Ingrid Couchman, MTech:Hom).

### 3.3.3 Dosage and posology

The provers received a total of six powders containing either the verum or placebo. According to the LHMI-ECH proving guidelines each prover was instructed to take one powder sublingually three times per day for two days, and not to take any further doses once symptoms arose (Jansen and Ross 2014). Each dose was taken on an empty stomach with a suggested thirty-minute waiting period during which no food could be consumed both before and after each dose.
3.4 The prover population

3.4.1 Sample size and demographics

The proving of *Anthropoides paradiseus* 30CH was conducted on thirty healthy individuals. Of the thirty participants, 80 percent (twenty-four provers allocated randomly as discussed in 3.4.2) received the proving substance, and the remaining six (twenty percent provers allocated randomly as discussed in 3.4.2) received a placebo. The majority of provers (sixty percent) consisted of members of the general public with no homoeopathic knowledge while the remainder (forty percent) were homoeopathic students and practitioners. The male to female ratio (figure 4.2) was 13:17 with an age range of nineteen years to fifty years (figure 4.1).

3.4.2 Randomization

Due to the double-blinded nature of the study, an independent third party (Dr Ingrid Couchman, MTech:Hom) carried out the randomization process. This was performed electronically in table format, and assigned prover codes to either verum or placebo groups. Neither the provers, the researchers nor the research supervisor (Dr Madhu Maharaj, MTech:Hom) were aware of the groups to which the provers belonged.

3.4.3 Inclusion and exclusion criteria

**Inclusion criteria**

The following requirements were met by each prover:

- Between the ages of eighteen and seventy-five (Jansen and Ross 2014: 13);
- In what is considered to be a good state of health (Sherr 1994: 44);
- Not on any medication, chemical, homoeopathic or other (Sherr 1994: 44);
- Not on the oral contraceptive pill or hormone replacement therapy for six months prior to the proving;
- Literate in English;
- Not had surgery for at least six weeks prior to the proving;
• Not pregnant or nursing (Sherr 1994:30; Wieland 1997: 233) or intending to be for the duration of the proving;
• Not a user of recreational drugs such as cannabis, LSD or MDMA (Sherr 1994; Wright 1999) for at least six months prior to the proving;
• Not a consumer of more than two measures of alcohol per day, ten cigarettes per day or three cups of coffee or tea a day;
• Will be able to maintain his/her normal lifestyle and usual daily activities as closely as possible for the duration of the proving;
• Willing to follow the proper procedures for the duration of the proving (Wright 1999).

Exclusion criteria

These criteria ensured the exclusion of individuals who are unhealthy and/or may contribute perplexing factors which may alter the efficacy of the proving (Jansen and Ross 2014: 12). A person was unable participate in this study if they:

• Were younger than eighteen years old or older than seventy-five years old;
• Were on chronic allopathic, homoeopathic, or herbal medication;
• Were on, or had been on, the oral contraceptive pill or hormone replacement therapy in the last six months;
• Were pregnant;
• Had had surgery in the last six weeks;
• Used recreational drugs such as cannabis, LSD, or ecstasy (MDMA);
• Consumed more than two measures of alcohol a day;
• Smoked more than ten cigarettes a day;
• Consumed more than three cups of coffee or tea a day;
• Were in a poor state of health;
• Anticipated a change in lifestyle habits during the proving (Jansen and Ross 2014: 13);
• Were not willing to follow the proper procedure for the duration of the proving.
3.4.4 Lifestyle during the proving

Provers were advised to maintain their lifestyles and habits during the proving (Sherr 1994: 92). An outline of specific precautions to follow were explained in the Instructions to Provers sheet (Appendix A). Moderation in work, alcohol, exercise and diet was to be maintained. It was necessary for provers to avoid all anti-doting factors such as coffee, camphor and mints during the proving, and for a two week period beforehand. Provers were instructed to protect the powders as they would any other potentized remedy by storing them in a cool, dark place away from strong smelling substances, chemicals, electric equipment and cell phones. Provers were required to avoid taking medication of any sort, including antibiotics, steroid or cortisone preparations, vitamins, mineral supplements, and herbal or homoeopathic remedies. In the event of a medical or dental emergency, provers were instructed to contact their doctor, dentist, or local hospital as necessary. Contact with the supervisor was instructed to be made as soon as possible thereafter (Sherr 1994: 92).

3.4.5 Monitoring of the provers

Telephonic contact was maintained by the researcher with the provers for the duration of the proving period. Initially the researcher contacted the provers every day during the first week followed by a gradual decline of every second day in the second week, every third day in the third week and once during the fourth week.

Contact between the researcher and prover served to monitor the nature of the action of the remedy on the prover. This contact assessed when the remedy began to act on the prover, the quality of the symptom recording by the prover as well as the severity of the experience, thus ensuring safety of the provers at all times.

3.4.6 Ethical considerations

The proving methodology of this study was approved by the Institutional Research and Ethics Committee of the Durban University of Technology, prior to the commencement of the research.
To ensure safety and protection of the rights of the research participants:

- A two-stage informed consent process (Appendix A and C) took place. The first stage involved consenting to the voluntary evaluation of the participants for inclusion purposes, and the second stage involved consenting to participation in the proving process itself.
- Confidentiality was maintained throughout by the use of prover codes for identification.
- No remuneration was offered, nor coercion used to recruit participants.
- Provers were made aware of their ability to withdraw from the study at any point.
- The likelihood of adverse effects was minimal due to the proving substance only being able to produce transient effects (Sherr 2003: 62).
- All information was carefully explained and given to the provers in the Instructions to Provers sheet (Appendix A), along with the contact details of the researchers if any uncertainty or questions arose.
- Provers were made aware that an antidote could be given in the case of any distress or persistence of symptoms. The antidoting protocol was that of similar provings at the Department of Homoeopathy at the Durban University of Technology and was performed by the supervisor in charge.

3.5 Data collection

3.5.1 Pre-proving data collection

An initial consultation took place between the researcher and each participant. After eligibility for participation was established and the two-stage consent process completed, each participant underwent a detailed case history. This case history was used to determine each individual’s “normal” functioning as well as any past medical and family history. A general examination took place where the researcher measured the vital signs and performed a cursory overview of the participant. A system specific examination was performed if necessary. The case history and physical examination served to evaluate each participant’s “baseline” as a control to be compared to at a later stage of the research discussed in section 3.5.3 (extraction, evaluation and collation of symptoms).
Following the initial consultation, each prover recorded their daily functioning in their journal for one week. This was used in conjunction with the data collected in the initial consultation as a control discussed in section 3.5.3. (extraction, evaluation and collation of symptoms).

### 3.5.2 Journaling by the provers

#### Duration

The journaling process totalled six weeks for each prover. An initial baseline week was used to note the provers “normal” daily functioning. Thereafter, the first dose was taken and the prover recorded their experience daily for four weeks. A one-week observation period followed, which allowed provers to reflect on their experience and note any final symptoms.

#### Chronology

Provers were instructed to begin each day on a new page, with the date clearly marked at the top of the page. It was necessary for provers to record the time at which each symptom occurred. This chronological recording aided with determining the time lapsed from the administration of the first dose to the occurrence of symptoms (Sherr 1994: 73).

#### Symptom detail

It was required that the provers note as much detail as possible about each appearing symptom. For each symptom, the concomitants, location, aetiologies, modalities, sensation, intensity, time and duration were noted as far as possible (Sherr 1994: 60).

### 3.5.3 Extraction, evaluation and collation of symptoms

Symptoms were extracted from each prover’s journal. The researchers converted the chronological recording of symptoms into the format of DD:HH:MM such that 09:12:06 corresponded to six minutes past twelve pm on the ninth day of the proving. The validity of each symptom was established by comparing the proving symptoms to those noted in the pre-proving consultation and baseline recording.
week, and any symptoms occurring on the proving that were part of this baseline control were removed. Data from the conversations that took place during the monitoring of the provers was also taken into account. Symptoms were then evaluated according to the criteria for inclusion and exclusion of symptoms.

Inclusion criteria:

- A new symptom that was unfamiliar to the prover (ICCH 1999: 36).
- Usual or current symptoms that were intensified to a marked degree (ICCH 1999: 36).
- Current symptoms that had been modified or altered, with a clear description of current and modified components (ICCH 1999: 36).
- Old symptoms that had not occurred for at least one year (ICCH 1999: 36).
- Present symptoms that had disappeared during the proving indicating a curative action of the remedy (ICCH 1999: 36).
- A symptom that occurred after taking the medication on at least two occasions during the homoeopathic drug proving.
- A symptom experienced when the proving started and which disappeared or is significantly ameliorated after the administration of the proving medication. Such symptoms were classified as a “cured symptoms” (Riley 1997: 227).
- All symptoms occurring in more than one subject (Riley 1997: 227).
- If the prover was under the general influence of the remedy then all the new symptoms were evaluated as proving symptoms (Sherr 2003: 76).

Exclusion criteria:

- Symptoms were not included if they had occurred in recent history i.e. In one year or less of the proving (Sherr 2003: 76).
- Symptoms that are usual or current for the prover were excluded (Sherr 2003: 76).
- When there was any serious doubt as to the validity of the symptom, it was excluded.
All information that was collected was then collated. Collating is the process of combining all the information obtained from each prover and putting it together “as if one person” (Sherr 2003: 76). All symptoms were noted verbatim from each of the provers’ reports and unnecessary detail was removed. These symptoms were assembled separately under headings related to areas of the body such as head, extremities and generals for example (Sherr 1994:77). These symptoms were collated and converted to two standard homoeopathic forms: materia medica and repertory format (Sherr 1994: 67).

3.6 Reporting the data

The final collated and edited data was recorded in standard homoeopathic format so as to be included in the materia medica and repertory of *Anthropoides paradiseus*.

3.6.1 The Repertory

Each proving symptom was then translated to repertory format. Symptoms reported by provers were converted to corresponding rubrics in *The Essential Synthesis* (Schroyens 2012). All newly created rubrics, were marked with an asterisk (*).

3.6.2 Materia medica

The proving symptoms of *Anthropoides paradiseus* were presented in standard materia medica format under the following headings:

- Mind
- Vertigo
- Head
- Eye
- Ear
- Nose
- Face

- Abdomen
- Rectum
- Stool
- Bladder
- Urine
- Male
- Female

- Chest
- Back
- Extremities
- Sleep
- Dreams
- Chill
- Fever
Mouth Larynx and Trachea Perspiration
Teeth Respiration Skin
Throat Cough Generals
Stomach Expectoration

(Adapted from sections of The Essential Synthesis (Schroyens 2012))

3.7 Comparison with the ethology

The symptoms which arose during the homoeopathic drug proving of Anthropoides paradiseus 30CH were compared to the ethology of the bird. It was hypothesized that symptoms which related and resembled the ethology of Anthropoides paradiseus would offer further understanding of the symptom picture brought about during the proving. An extensive literature review was completed and subsequently compared to the proving symptoms.

Researchers are beginning to recognize that in order to understand the behaviour of birds it is essential to understand their environments and perception (Birkhead 2012). Therefore, the symptoms arising during the proving of Anthropoides paradiseus 30CH were compared to Anthropoides paradiseus under the headings listed in table 3.1 below.

<table>
<thead>
<tr>
<th>BEHAVIOUR</th>
<th>Isolated vs sociable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Running</td>
<td></td>
</tr>
<tr>
<td>Purring</td>
<td></td>
</tr>
<tr>
<td>Intuition and instincts</td>
<td></td>
</tr>
<tr>
<td>Decorating space</td>
<td></td>
</tr>
<tr>
<td>Wilds</td>
<td></td>
</tr>
<tr>
<td>Swimming</td>
<td></td>
</tr>
<tr>
<td>Covering head during sleep</td>
<td></td>
</tr>
<tr>
<td>Seasonal libido</td>
<td>Heightened and disorientated senses</td>
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<tr>
<td>-------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Dancing</td>
<td>Consuming large quantities of food</td>
</tr>
<tr>
<td>Singing</td>
<td>Choice of food</td>
</tr>
<tr>
<td>Expression of self</td>
<td>Diarrhoea after protein</td>
</tr>
<tr>
<td>Cleaning</td>
<td>High blood glucose</td>
</tr>
<tr>
<td>Navigation</td>
<td>Reproductive derangement</td>
</tr>
<tr>
<td>Stress</td>
<td>Heavy eyes</td>
</tr>
<tr>
<td>Seeking protection</td>
<td>Abdominal cramping</td>
</tr>
<tr>
<td>Shaking</td>
<td>Heavy heart</td>
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<tr>
<td></td>
<td>Coronary heart disease</td>
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<tr>
<td></td>
<td>Attraction to colours</td>
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<td></td>
<td>Seasonal appetite fluctuations</td>
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<td></td>
<td>Efficient digestion</td>
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<tr>
<td></td>
<td>High metabolism</td>
</tr>
<tr>
<td></td>
<td>Fullness in head</td>
</tr>
<tr>
<td></td>
<td>Sternal swelling</td>
</tr>
<tr>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
<td></td>
</tr>
<tr>
<td>Extension of stomach</td>
<td></td>
</tr>
<tr>
<td>Breathing difficulties</td>
<td></td>
</tr>
<tr>
<td>Heart beat</td>
<td></td>
</tr>
<tr>
<td>Laterality</td>
<td></td>
</tr>
</tbody>
</table>
CHAPTER 4: THE RESULTS

4.1 Introduction
The symptoms extracted from the homeopathic drug proving of *Anthropoides paradiseus* are presented in this chapter. First in materia medica format and subsequently into repertory rubric format. The symptoms are only those from the participants in the verum group. The symptoms and rubrics are categorized according to the style employed by the *Essential Synthesis Repertorium* repertory (Schroyens 2012).

4.2 The Prover Sample Composition
The symptomotology extracted from the proving of *Anthropoides paradiseus* 30CH was derived from the twenty-four provers who received verum powders. The prover sample consisted of both males (ten) and females (fourteen) with an age range of eighteen to fifty (see table 4.1 below). There was reasonable ethnic diversity, as can be seen in the table below, with fourteen Caucasian, eight African and two Indian participants. The majority of the verum group were non-homeopathic students. Only eight of the twenty-four verum provers were homeopathic students.

Table 4.1: Demography of the verum group

<table>
<thead>
<tr>
<th>Prover Code</th>
<th>Age</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Homeopathic student (HS)/Non-homeopathic Student (NHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>23</td>
<td>Male</td>
<td>Caucasian</td>
<td>NHS</td>
</tr>
<tr>
<td>2</td>
<td>24</td>
<td>Male</td>
<td>Caucasian</td>
<td>NHS</td>
</tr>
<tr>
<td>3a</td>
<td>33</td>
<td>Female</td>
<td>Caucasian</td>
<td>NHS</td>
</tr>
<tr>
<td>5a</td>
<td>27</td>
<td>Male</td>
<td>African</td>
<td>NHS</td>
</tr>
<tr>
<td>6</td>
<td>22</td>
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<td>Caucasian</td>
<td>NHS</td>
</tr>
<tr>
<td>8</td>
<td>50</td>
<td>Female</td>
<td>Caucasian</td>
<td>HS</td>
</tr>
<tr>
<td>9a</td>
<td>22</td>
<td>Male</td>
<td>Indian</td>
<td>HS</td>
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</table>

*HS – Homeopathic student

*NHS – Non-homeopathic student

**Figure 4.1:** Age distribution of verum provers (n=24)
The proving of *Anthropides paradiseus* 30CH took place throughout all four seasons (see table 4.3 below). These seasons were used to compare symptoms with seasonal behaviours of the *Anthropoides paradiseus* (see 5.4).

### Table 4.3: Season during which the proving took place

<table>
<thead>
<tr>
<th>Prover Code</th>
<th>Season</th>
<th>Prover Code</th>
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<tbody>
<tr>
<td>1M</td>
<td>Spring</td>
<td>16M</td>
<td>Spring</td>
</tr>
<tr>
<td>2M</td>
<td>Spring</td>
<td>17M</td>
<td>Spring</td>
</tr>
<tr>
<td>3aF</td>
<td>Late Autumn, Winter</td>
<td>18F</td>
<td>Spring</td>
</tr>
<tr>
<td>5aM</td>
<td>Winter</td>
<td>20F</td>
<td>Spring</td>
</tr>
<tr>
<td>6M</td>
<td>Spring</td>
<td>21F</td>
<td>Winter</td>
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<tr>
<td>8F</td>
<td>Autumn</td>
<td>22F</td>
<td>Winter</td>
</tr>
<tr>
<td>9aM</td>
<td>Winter</td>
<td>24F</td>
<td>Winter</td>
</tr>
<tr>
<td>10F</td>
<td>Spring</td>
<td>25F</td>
<td>Winter</td>
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<tr>
<td>12F</td>
<td>Late Summer, Autumn</td>
<td>27F</td>
<td>Late Winter, Spring</td>
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<td>Autumn</td>
<td>28M</td>
<td>Late Summer, Autumn</td>
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<td>Autumn</td>
<td>29M</td>
<td>Late Summer, Autumn</td>
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<tr>
<td>15F</td>
<td>Autumn</td>
<td>30F</td>
<td>Late Summer, Autumn</td>
</tr>
</tbody>
</table>
4.3 The materia medica of *Anthropoides paradiseus* 30CH

Each symptom extracted from the prover journals was listed under traditional materia medica sections on a new line with the prover key present on the following line. The prover key was adapted from the design suggested by Sherr (2003: 79): Prover code and gender: days: hours: minutes (e.g. 01F: 05:14:30). Where the time of onset of a symptom was not given or wasn’t clear, the hours and minutes section of the time was recorded as “XX”. Symptoms reflected upon and confirmed during the follow up consultation were recoded as follows: Prover code: gender: FUR (e.g. 01:F: FUR).

4.3.1: Mind

Calm

I feel much calm, feel much in control of things. I seldom take our class group WhatsApp chat, but today, few minutes back, while the lecture is on, I was giving instructions, and informing absent classmates of what the lecturer has taught in class.

14M: 00:10:53

I have a test tomorrow. Instead of feeling tense and anxious as I am far from finished the scope, I’m much calm, a bit lazy to push to study for more hours. Instead I am about to get into bed.

14M: 00:23:00

Work started I felt calm which is not normal.

01M: 01:09:00

I’m trying to catch up for my test of this afternoon. I’m less stressed, more stress free, though I still have more remedies and conditions to study.

14M: 01:09:00

Feel even and calm in temperament even though I haven’t meditated today.

12F: 01:16:10
Day went well and I'm feeling calm and enjoyed it despite the pressure.
08F: 03:XX:XX

I played the song again. As if I'm watching the moon rise up from the east late at night. A calm feeling. Quiet clear sky night.
14M: 03:23:41

On a mission to do some errands. Offered to take a gogo/fellow board member shopping after she signed some papers. Usually she makes me very irritable but today I am feeling like I can cope, having much more patience with her than normal. For some reason some of my mother installed buttons get pushed with T but unusually calm today.
08F: 13:XX:XX

I was calm and even most the day. My morning meditation grounded me. It really does help with maintaining focus.
12F: 14:XX:XX

Mosaiced and spent wonderful afternoon with Tessa, spread some of my mosaic wings and also shared a lot with her about where I'm at Law and otherwise at the moment. Mosaicking is really calming and soothing, hours flew by.
12F: 16:XX:XX

Calm and pensive. I'm getting excited for afrikaburn. I'm thinking about travel goals - Mozambique is really on my mind. Remembered Malawi as well and friend reminded me of Japan.
12F: 26:XX:XX

Anxiety
I felt slightly down, restless and stressed as a result of some experiences at a conference I attended today. Then I went to a new dance class and was emotionally hi-jacked by a woman who I reckon suffers from deep mental
problems. Total energy vampire. Drove home feeling heavy and anxious. Husband sat with me in bed and said prayers so I could feel better.
3aF: 00:XX:XX

Feeling stress and anxious about research even though everything is sorted.
25F: 01:XX:XX

Felt so anxious just before taking my afternoon nap, I could even feel my heart beat.
10F: 04:XX:XX

I couldn't get out of bed for yoga as I was feeling anxious about a bike light component I lost the night before at the beach. I wanted to go look for it, but knew I couldn't go to yoga and the beach and get to a meeting on time at 10. So I just stayed in bed stressing, and the staying in bed itself stresses me too! Eventually I drove to the beach and didn't find it.
3aF: 12:XX:XX

Woke up nervous this morning, which subsided a little later this morning
24F: 12:XX:XX

**Focus and lack thereof**

Took remedy suddenly felt more alive and alert. Mental concentration improved.
05aM: 00:XX:XX

Took again and continued improvement in alertness.
05aM: 00:XX:XX

Mental alertness and concentration continues to improve.
05aM: 01:XX:XX

Today was a fairly productive, focused day. I managed to complete a task I've been delaying for a while. 2 in fact.
12F: 03:XX:XX

Was pretty focused this afternoon, made progress with my to do's but quite a few I didn’t get to either. Had to be stern with a couple of peeps but finding I'm better at expressing instead of holding back.

12F: 04:23:17

Had a bit of concentration problems while studying.

10F: 07:XX:XX

Struggling very hard to get into work and focus.

08F: 10:10:20

Should be prepping for tomorrow but can't focus.

08F: 14:21:00

Focus improving but tiredness increasing.

08F: 15:XX:XX

Brain zoned out - can't think straight anymore.

08F: 17:16:00

Just a feeling of more alertness.

14M: 18:10:00

Energy and focus was good throughout the day.

12F: 19:XX:XX

Supposed to work to catch up for coming week - can't focus.

08F: 22:09:00

Very drowsy, managed to focus and do some things.

08F: 23:05:00
Still feeling tired, can't concentrate to think on content at work.
08F: 23:19:00

Struggling to focus, mind is all over.
08F: 26:XX:XX

**Music and Movement (Dance/Exercise)**

I'm studying while playing music on my laptop. This song I'm playing just gave me goose bumps, it took me miles away in a few seconds, to a calm place where it is so peaceful. A feeling I had never felt for years. Possibly I last had that in my teens. (Whitney Houston ft. Akon - like I never left), especially the part where Akon sang.
14M: 03:23:30

I played the song again. As if I'm watching the moon rise up from the east late at night. A calm feeling. Quiet clear sky night.
14M: 03:23:41

I am going to get a proper workout at dance class later tonight - super excited!
12F: 04:XX:XX

Played music on headphones just before boarding, really felt like dancing - very emotional.
08F: 11:23:00

Spent happy evening listening to music and chilling but late night dipped into relationship review. Feelings of sadness and anger - feel like crying but tears not coming out.
08F: 13:19:30

Generally my mood was still low and we received some bad news. Went to yoga later to shake off the demons.
03aF: 14:XX:XX
I felt like I can take a long run. I am more energetic with sharp appetite.
14M: 17:XX:XX

Had a fab dance class post yoga. Really love it and proud of myself for sticking to it. Always so clear when my mind wanders I lose the step. Such an exercise in on-going focused engagement.
12F: 19:XX:XX

I spent most of my night listening to gospel music, reading my bible and praying. Their deaths really pain me, especially when I think about them.
10F: 24:XX:XX

I exercised, managed to do my chores and have a sudden desire to read more, just read more books that are inspirational and try to change myself, to make myself a better person.
10F: 25:XX:XX

Found some nice old music CD’s and enjoying listening and jiving around the house.
08F: 27:16:00

Desired exercise/jogging.
14M: FUR

Desired being active (exercise).
15F: FUR

**Disconnection/Disorientation**

Think the day may have been too busy to connect with body.
08F: 04:XX:XX

Overslept this morning. Was disorientated for the day.
22F: 05:XX:XX
I didn’t sleep well I must of woken up four or five times. One time I remember asking myself where am I.
01M: 06:XX:XX

Too stressed. No time to pay attention to my problems.
22F: 09:XX:XX

I have been putting off my entries till last possible minute. Today [saturday] felt like a Sunday.
12F: 10:XX:XX

Realized that I’ve been rather disorientated the past few mornings when waking up. i.e. Don’t know what day it is and don’t know why I’m waking up.
30F 13:XX:XX

Struggling to remember names and get concepts out.
08F: 17:XX:XX

Realized not only did I forget to eat but also drink.
08F: 21:22:00

**Weeping**

Had 15min of feeling weepy during the first session on the new Canon cameras on the market. Not sure why? The particular video showing was on a small camera that enables street photography and sharing - so perhaps a bit of a feeling of lament at the carefree me I used to be that I did that sort of thing, plus my camera is broken. But the tears welled up all of a sudden and I wasn't thinking about loss at that moment.
08F: 05:XX:XX
I woke up feeling afraid and shaken and sick, sad. I spent some hours thinking what it meant as I started crying uncontrollably perhaps it means that I need to forget about my haunting past “kill the boy within”.

01M: 06:XX:XX

Read a poem from a friend on fb who has passed away. Has made me teary-just feeling sad today. Struggling very hard to get into work and focus.

08F: 10:10:20

Late afternoon I started crying lightly for no reason when I saw photos of my horse back home. Then felt it again early at night.

30F: 06:XX:XX

Very emotional. Cried myself to sleep. Homesick and lonely.

22F: 11:XX:XX

Physically feeling fine, emotionally a wreck and teary.

08F: 14:XX:XX

Random bouts of emotion, got choked up seeing a reach for a dream add at wimpy.

08F: 17:13:00

I had a complete breakdown today, concerning my friend, because two of my friends passed away and I couldn’t attend the funeral of my other friend.

10F: 24:XX:XX

Can’t control weeping for silly things and serious things at the moment. Watched beauty and the beast, really enjoyed it - but triggered floods of tears.

08F: 28:XX:XX
**Productivity**

Today was a fairly productive, focused day. I managed to complete a task I've been delaying for a while. 2 in fact.

12F: 03:XX:XX

How was day? Pretty productive.
12F: 26:XX:XX

**Empathy**

I felt slightly down, restless and stressed as a result of some experiences at a conference I attended today. Then I went to a new dance class and was emotionally hi-jacked by a woman who I reckon suffers from deep mental problems. Total energy vampire. Drove home feeling heavy and anxious. Husband sat with me in bed and said prayers so I could feel better.

3aF: 00:XX:XX

**Sociable**

I think it does make a big difference having someone else around. Even though he was doing his own thing watching a movie, felt less lonely I guess.

12F: 01:XX:XX

Felt happy on way to work, greet everyone as I pass.
08F: 03:XX:XX

Greeted many people on way to work and lots of enthusiastic smiles back - general happy mood.
08F: 05:XX:XX

**Aversion to company/consolation**

Felt very emotional, didn't want to be around too many people.
18F: 06:XX:XX
Felt very drained and emotional. Did not want to interact with anyone.  
18F: 17:XX:XX

Irritability, desire to be alone, don’t want to be around people. When people are talking to me it feels as if they annoy me.  
25F: 21:XX:XX

I’m not feeling that sad anymore, I actually just don’t want to talk about it.  
10F: 27:XX:XX

**Reading**

I spent most of my night listening to gospel music, reading my bible and praying. Their deaths really pain me, especially when I think about them.  
10F: 24:XX:XX

I exercised, managed to do my chores and have a sudden desire to read more, just read more books that are inspirational and try to change myself, to make myself a better person.  
10F: 25:XX:XX

Today I feel really encouraged by my mum to just start reading the bible more and praying. I’m motivated to start reading until I have a mind-set shift.  
10F: 35:XX:XX

**Senses heightened**

There is the sound of engine revving and revving, driving me a bit nuts, wish I knew what it was.  
12F: 06:XX:XX

**Spirituality**

Drove home feeling heavy and anxious. Husband sat with me in bed and said prayers so I could feel better.  
03aF: 00:XX:XX
Was up at a reasonable time, praying, introspecting etc. By 10.30 I was exhausted (probably still recovering from the weekend). A voice inside told me “if you tired: sleep, if you hungry: eat, if you sad: cry.” So I slept for 2.5 hours.

03aF: 06:XX:XX

I also got back into a head space where I endeavour to prioritize prayer, readings and meditation. I didn’t let watching more TV episodes overcome me. I consciously chose to pull myself up and cultivate good thoughts and actions that will allow me to generate a good mental disposition.

13F: 18:XX:XX

I spent most of my night listening to gospel music, reading my bible and praying. Their deaths really pain me, especially when I think about them.

10F: 24:XX:XX

Today I feel really encouraged by my mum to just start reading the bible more and praying. I’m motivated to start reading until I have a mind-set shift.

10F: 35:XX:XX

Desires going to church, praying and reading the Bible more. Feeling more connected.

15F: FUR

Laziness

I have a test tomorrow. instead of feeling tense and anxious as I'm far from finished the scope, I'm much calm, a bit lazy to push to study for more hours. instead I'm about to get into bed.

14M: 00:23:00

Sadness

I felt slightly down, restless and stressed as a result of some experiences at a conference I attended today. Then I went to a new dance class and was
emotionally hi-jacked by a woman who I reckon suffers from deep mental problems. Total energy vampire. Drove home feeling heavy and anxious. Husband sat with me in bed and said prayers so I could feel better.
3aF: 00:XX:XX

Spent happy evening listening to music and chilling but late night dipped into relationship review. Feelings of sadness and anger - feel like crying but tears not coming out.
08F: 13:19:30

Realised that I am definitely having a bit of a mid-winter slump as I was dozing until 9:45am. I vowed to stop doing that from today onwards. Generally my mood was still low and we received some bad news. Went to yoga later to shake off the demons.
3aF: 14:XX:XX

Have still been feeling down - all day sort of somber mood. Been nice to get into the garden although got a bit snippy with the cutters thinking angry thoughts.
08F: 14:XX:XX

I’m actually feeling really depressed because of the death of my two close friends. I’m not in the mood to talk to people, especially because I’m feeling short-tempered.
10F: 26:XX:XX

I was really moody today, which is not something that generally happens. I said some painful things to people I value and I think it hurt there feels, I apologized but I don’t think I’m forgiven. I’m feeling really sad about that.
10F: 32:XX:XX

**Coping**

Have been feeling happier today - less weighed down by life and more able to cope.
Feeling positive and optimistic.

On a mission to do some errands. Offered to take a gogo/fellow board member shopping after she signed some papers. Usually she makes me very irritable but today I am feeling like I can cope, having much more patience with her than normal (for some reason some of my mother installed buttons get pushed with T but unusually calm today.

I'm finding myself less ruffled by annoying inconveniences.

Enjoyed teaching mom and sister. Proud of how I handled class. I honoured what I know: when uninspired, just gotta prep more, give myself time. I'm not a spur of the moment type. I care a lot about what sister thinks, respect her as a teacher so was happy that I was able to teach a well centred class. Usually I check out cause I'm nervous but generally finding that my inner will is stronger. I'm over self-sabotage and then triangulating. That cycle feels stale now.

She is going away today for the next 2 weeks. First time I'll be riding solo on the toolbox and heart leads the way. I'm up for it and I know she'll be a phone call away. I feel prepared for this moment.

I really am finding that most things I dread turn out not to be so bad.

Feel like I'm finding my groove.
I'm learning to work better with my energies. Some days when I'm feeling restless and non-desky it's ok to do things like certifying IDs at post office.

**Resolution**

Overall emotional state pretty good. These days I'm grateful for the life I've built. I'm also feeling more resolved/at peace about incorporating the aspects I want more of. And realizing I don't have to dig (enjoy) what is to motivate myself to reach for more. Got my morning meditation in, was quite distracted though.

**Enjoyed teaching mom and sister. Proud of how I handled class. I honored what I know: when uninspired, just gotta prep more, give myself time. I'm not a spur of the moment type. I care a lot about what sister thinks, respect her as a teacher so was happy that I was able to teach a well centered class. Usually I check out cause I'm nervous but generally finding that my inner will is stronger. I'm over self-sabotage and then triangulating. That cycle feels stale now.**

**Generally feeling like I'm stepping more decisively into my power. The powerless feeling is old now.**

I feel today I had a psychological breakthrough and deeper understanding gained around interpersonal conflict. Am thus relieved that things are moving in a forward direction... Stagnation was a source of tension within me.

**Let go of old bitterness. Closed those doors.**
Introspection

I was restless and due to Skype my parents. Said some pretty provocative stuff that precipitated a very hectic and emotional conversation. Had to take the rest of the day off and spent it lying on the couch. Was a complete mess. The late night really turned me upside down and this incident was a lot for me to take in. Was introspecting for a few days after today.

03aF: 05:XX:XX

Was up at a reasonable time, praying, introspecting etc. By 10.30 I was exhausted (probably still recovering from the weekend). A voice inside told me "if you tired: sleep, if you hungry: eat, if you sad: cry." So I slept for 2.5 hours.

3aF: 06:XX:XX

Doing lots of introspection - I think I've been making time for it and slowed down and used the breathing exercises I've been prescribed. Been thinking about my parents and their attitude and trying to figure out my own behavior and its origins and what is just in my head and what is real. About inter-generational trauma, the clash of culture between my parents and me - they come from very 'closed off' cultures. My openness is what shocked them, our differences, In terms of emotional candidness.

3aF: 07:XX:XX

Mood improved a little though still feeling introspective.

08F: 10:19:00

Attended a retreat. Learnt lots of super things about herbs, Jung and non-duality. So much about what was spoken about in meditation resonated with stuff I been thinking about. Particularly owning all parts of one self.

12F: 19:XX:XX

Goal setting

Today I woke up with an action plan of the day, which is something I don’t usually do because it's holidays.
I exercised, managed to do my chores and have a sudden desire to read more, just read more books that are inspirational and try to change myself, to make myself a better person.

I have also written a lot more short-term goals, which is something I do, but don’t put pressure on myself but now I feel the urge to work harder and be a better person.

I’m thinking about travel goals - Mozambique is really on my mind. Remembered Malawi as well and friend reminded me of Japan.

Thinking of doing a course. I do feel like I want some structured learning, maybe a legal course? Gonna apply my mind to it.

Today I feel really encouraged by my mum to just start reading the bible more and praying. I’m motivated to start reading until I have a mind-set shift.

Focused on studies. Wanting to pass and do well.

Irritability

Am feeling annoyed at people around posts on Facebook:
- one friend who reports things without thinking, sort of social media and computer naïve which strangely is annoying me.
- my boyfriend who feels the need to recreate posts as his own instead of sharing them from the place they came from (he’s using it to create interest so
people look at his posts, instead of creating more attention for organization doing the work).
08F: 02:XX:XX

Spent happy evening listening to music and chilling but late night dipped into relationship review. Feelings of sadness and anger - feel like crying but tears not coming out.
08F: 13:19:30

Have still been feeling down - all day sort of sombre mood. Been nice to get into the garden although got a bit snippy with the cutters thinking angry thoughts.
08F: 14:XX:XX

Irritability, desire to be alone, don’t want to be around people. When people are talking to me it feels as if they annoy me.
25F: 21:XX:XX

I’m actually feeling really depressed because of the death of my two close friends. I’m not in the mood to talk to people, especially because I’m feeling short-tempered.
10F: 26:XX:XX

Started cleaning up the weed bush I harvested for my boyfriend. I think I inhaled much pollen, my fingers are blackish with resin. It’s made me horny but put me in a bad mood - feeling pissed with the boyfriend who ignored my messages until I said I’m cleaning the weed.
08F: 27:20:30

**Social Media**

Am feeling annoyed at people around posts on Facebook:
- one friend who reports things without thinking, sort of social media and computer naïve which strangely is annoying me.
- my boyfriend who feels the need to recreate posts as his own instead of
sharing them from the place they came from (he’s using it to create interest so people look at his posts, instead of creating more attention for organization doing the work).

08F: 02:XX:XX

I was restless and due to Skype my parents. Said some pretty provocative stuff that precipitated a very hectic and emotional conversation. Had to take the rest of the day off and spent it lying on the couch. Was a complete mess. The late night really turned me upside down and this incident was a lot for me to take in. Was introspecting for a few days after today.

3aF: 05:XX:XX

I feel much calm, feel much in control of things. I seldom take our class group WhatsApp chat, but today, few minutes back, while the lecture is on, I was giving instructions, and informing absent classmates of what the lecturer has taught in class.

14M: 00:10:53

Feeling normal just completely stopped spending time on social media. It doesn’t interest me anymore.

10F: 22:XX:XX

**Travel**

I’m getting excited for afrikaburn. I’m thinking about travel goals - Mozambique is really on my mind. Remembered Malawi as well and friend reminded me of Japan.

12F: 26:XX:XX

**Artistic**

I also want to begin livening up my space. Love art and pics, want to start developing and turn walls into gallery.

12F: 04:XX:XX
Realised that the last few weeks I've been looking at and attracted to colours I don't normally go for - usually like black, silver, and very bright colours on the blue spectrum - crimson, cerise, blue green. In the bead shop today and looking at clothes yesterday I was attracted to browns, gold, orangey, dull pink colours.
08F: 14:XX:XX

Mosaiced and spent wonderful afternoon with Tessa, spread some of my mosaic wings and also shared a lot with her about where I'm at Law and otherwise at the moment. Mosaicking is really calming and soothing, hours flew by.
12F: 16:XX:XX

**Career**

Proud of myself for having reentry back into law conversation with aunt. Gave me some sort of a road map to consider. So good to just get things out my head, they torment me there ;)
12F: 15:XX:XX

Made myself clear up my room while listening to a paradigm shifting podcast. Wow. I hears about collaborative law. It resonated deeply with me. My road map for reentry definitely taking shape.
12F: 17:XX:XX

Thinking of doing a course. I do feel like I want some structured learning, maybe a legal course? Gonna apply my mind to it.
12F: 27:08:30

Uncertainty of career.
02M: FUR
Longing for the past/homesickness

Had 15min of feeling weepy during the first session on the new Canon cameras on the market. Not sure why? The particular video showing was on a small camera that enables street photography and sharing - so perhaps a bit of a feeling of lament at the carefree me I used to be that I did that sort of thing, plus my camera is broken. But the tears welled up all of a sudden and I wasn't thinking about loss at that moment.

08F: 05:XX:XX

Late afternoon I started crying lightly for no reason when I saw photos of my horse back home. Then felt it again early at night. [Horse was sold: FUR]

30F: 06:XX:XX

Very emotional. Cried myself to sleep. Homesick and lonely.

22F: 11:XX:XX

Intuition

My day did not go as expected. I only got home about an hour ago after leaving to go teach. Events led me home and then to hospital to admit makhulu. I felt like I was flowing with the water. Once I let go of my ideas of how day was supposed to have gone was still able to get some of my work done.

12F: 05:XX:XX

Was up at a reasonable time, praying, introspecting etc. By 10.30 I was exhausted (probably still recovering from the weekend). A voice inside told me "if you tired: sleep, if you hungry: eat, if you sad: cry." So I slept for 2.5 hours.

03aF: 06:XX:XX

Observing others

Doing lots of introspection - I think I've been making time for it and slowed down and used the breathing exercises I've been prescribed. Been thinking about my parents and their attitude and trying to figure out my own behavior and its origins and what is just in my head and what is real. About inter-generative trauma, the
clash of culture between my parents and me - they come from very 'closed off' cultures. My openness is what shocked them, our differences, In terms of emotional candidness.

Went to dinner at R's house. The food was delicious and happy to see P there as well but damn R can talk your ear off. I used to find her patent awkwardness and over sharing endearing but now I just see a bundle of issues that aren't being controlled? and are being blurred out on us poor unsuspecting company :) I think I really wanted a friend in the neighbourhood but I just can't. I can also feel she really wants friendship/approval, yeah definitely approval. She has said she has people pleasing tendencies. I also feel like she is a people collector. Knows loads of people but I wonder about how genuine the connections are.

Cleaning

Made myself clear up my room while listening to a paradigm shifting podcast. Wow. I hears about collaborative law. It resonated deeply with me. My road map for reentry definitely taking shape.

Had intended to do written work today but feeling for spring cleaning still strong ended up unpacking kitchen cupboards and kitchen shelves and cleaning.

Was seriously obsessive about cleaning today.

Still haven't done any work prep - it's like I can't stop cleaning even though my fingers hurt.
Started cleaning up the weed bush I harvested for my boyfriend. I think I inhaled much pollen, my fingers are blackish with resin. It's made me horny but put me in a bad mood - feeling pissed with the boyfriend who ignored my messages until I said I'm cleaning the weed.

08F: 27:20:30

**Miscellaneous mind symptoms**

Had to be stern with a couple of peeps but finding I'm better at expressing instead of holding back.

12F: 04:23:17

Had a big brunch. Then at 4pm I cycled at the beach for about 18km. I was feeling like being outdoors as we had been at home all day.

3aF: 11:XX:XX

Mind in overdrive, feels like a sugar rush. Mind is tired.

01M: 15:XX:XX

I realized I have a really organized brain and I pay close attention to detail.

10F: 15:XX:XX

I'm even scared to go to sleep because I feel my subconscious is still thinking about her.

10F: 23:XX:XX

Spending more time thinking about them than I usually do, but don't think it's a good thing to be in your head all the time.

10F: 24:XX:XX

Today we went swimming. I decided to be brave. I'm not the best of swimmers but I managed to go to the deep end. I definitely conquered my fears today.

10F: 30:XX:XX
4.3.2 Vertigo
Feeling headachey, sharp pain behind eyes and slight dizzy feeling when I turn my head fast.
08F: 00:23:15

Feel a bit dizzy when I get up.
10F: 04:22:00

Stayed out late but felt fine. Before that I felt a bit foggy, came home after 4pm with a headache, even feet a bit nauseous and dizzy.
03AF: 04:XX:XX

4.3.3 Head
Fullness
My head feels full.
22F 03:XX:XX

Headache has become worse through evening - can't pinpoint where it is sore - my whole head just feels like somebody crammed something extra in and it's too tight.
08F: 18:XX:XX

Itching
Random itchy skin - arms on crook and outside, back, eyebrows, scalp, outer and inner thighs but no sign of rash or discolouration.
08F: 02:XX:XX

Head started to itch around 9pm
24F: 04:XX:XX

Itchy skin on arm and scalp
24F: 11:XX:XX
Heaviness
Mild headache of entire head – feels heavy. Want to sleep. Slight cough and wheeze. Headache is throbbing.
09AM: 05:XX:XX, 06:XX:XX

Mild headache of entire head – feels heavy. Cough and slight wheeze. Headache is throbbing.
09AM: 07:XX:XX, 08:XX:XX

Mild headache of left side of head – feels heavy. Headache is throbbing.

Pain
Headache appeared to get worse within 30min of taking the remedy. Not sure if this is due to taking the remedy or that the headache was getting progressively worse since I woke up.
02M: 00:09:36

By 12h00 my headache was nearly gone. Slight pain if I shake my head.
02M: 00:12:00

No constant pain from headache but I can feel it is still there. If I bend over, arch my head or move suddenly, my head almost pulses.
02M: 00:19:00

Feeling headachey, sharp pain behind eyes and slight dizzy feeling when I turn my head fast.
08F: 00:23:15

Dull headache, worse on the forehead, light exposure and better for sleeping.
25F: 01:XX:XX

Woke up with the same sensation in my head. No constant pain but almost pulses of waves of slight pain if I arch my head or move suddenly.

02M: 01:07:00

Woke up with a light headache. Dull pain. Got worse throughout the day, became unbearable at around 7pm.

24F: 01:XX:XX

Headache. It was like a migraine and did not want to subside throughout the day. Was just an uncomfortable headache.

16M: 01:XX:XX

Slight headache in the afternoon. Dull pain over my forehead

24F: 04:XX:XX

Stayed out late but felt fine. Before that I felt a bit foggy, came home after 4pm with a headache, even feet a bit nauseous and dizzy.

3aF: 04:XX:XX

Have a headache behind the eyes.

17M: 04:XX:XX

Slight headache, same spot and dull.

24F: 05:XX:XX

Headache late in the afternoon. Was working on my laptop.

16M: 06:XX:XX

I have this headache [with] tense shoulders.

01M: 07:09:00

Dull headache throughout the day
24F: 11:XX:XX

Mild headache behind my eyes

16M: 13:XX:XX

Feels as if whole body is sore, worse in the head.

01M: 15:XX:XX

Headache coming and going. Occiput feels uncomfortable worse for movement of head.

01M: 15:10:00

I drank water but not enough in the sweltering heat so have a massive dehydration headache. Drinking lots of water now and some ginger beer.

08F: 18:17:00

I am slightly headachey this evening probably because of delaying rehydration for so many hours and spending time in a hot car. I've decided to have an early night.

13F: 19:XX:XX

Had a headache around lunch, which was right behind my eyes.

18F: 22:XX:XX

Feeling thirsty and headachey.

08F: 22:08:00

**Temples**

Had a headache that started at my temples and moved to the front of my head.

18F: 17:XX:XX

Had a headache that started at my temples and moved to the top and front of my head.
18F: 18:XX:XX

Left

Headache also have neck pain. On the left half on my head, started behind my eyes then moved everywhere. Could be from lack of sleep or stress. Feels like sharp spikes in my head.

22F: 06:XX:XX

Mild headache of left side of head – feels heavy. Headache is throbbing.


Right

Slight headache on the right side, behind eye. No pain just discomfort. Got worse when I was very hot. Started after I was busy talking on the phone.

16M: 04:XX:XX

Had a throbbing pain on the right side of my head. As well as a headache at the back of my head.

18F: 10:XX:XX

Occipital

Have a headache, at the back of my head. Feel a bit dizzy when I get up.

10F: 04:22:00

Had headache at the back of my head (11:00am). Drank lot of water to get rid of it.

18F: 09:XX:XX

Had a throbbing pain on the right side of my head. As well as a headache at the back of my head.
18F: 10:XX:XX

**Throbbing**

Had a throbbing headache in the morning.

18F: 02:XX:XX

Headache light, throbbing. > at 8am < 8pm again

24F: 02:XX:XX

Throbbing headache at my temples which moved to the front of my head.

18F: 04:XX:XX

Throbbing headache appeared at my temples and moved to the front of my head. Caused a bit of strain on my eyes.

18F: 07:XX:XX

Had a throbbing pain on the right side of my head. As well as a headache at the back of my head.

18F: 10:XX:XX

**Sharp**

Someone put the aircon on which was blowing on me. I felt very cold and it gave me headache on sides of head above ears and across top - sharp pain. Felt fine back in warm.

08F: 02:12:00

**4.3.4: Eye**

**Itching**

15min after taking powder in car had very itchy eyes. Lasted approximately 10min. Stopped in the fresh her air at beachfront.

08F: 00:11:30
Eyes itching again. Feeling very itchy. Especially along lower lid.
08F: 00:18:45

Thirsty feeling (drinking lots of water) and dry itching eyes continued through evening.
08F: 01:15:32

Eyes feeling itchy, especially right.
08F: 11:06:30

**Enlarged sensation**

Eyes feeling like they are too big for sockets but no itching.
08F: 00:21:00

**Dryness**

Eyes not as itchy but feeling very dry, as if I've been out in a hot wind.
08F: 00:19:00

Eyes were dry in the afternoon and was a bit sore at night. Very sensitive to the air-conditioning of my car.
16M: 07:XX:XX

**Pain**

Pain behind my right eye - feels like on the eyeball (not sure how to describe it - it's not dull or sharp).
08F: 08:15:15

Left side of face begins to pain. Left eye, left cheek and left molars.
Heaviness
Eyes are feeling very heavy today.
06M: 10:XX:XX

Eyes a bit heavy.
02M: 26:19:41

Sensation of foreign object
Only thing bugging me today was that it felt like/still feels like I have something in my left eye. Hope it's better tomorrow cause I'm gonna be wearing contacts.
12F: 08:XX:XX

Swelling
Woke up at 6H45…Right eyelid below eyebrow is puffy and hanging down over my lower lid.
08F: 17:06:45

4.3.5 Ear
Pain
Tingling pain on my right tonsil. The pain radiates to the middle ear and the right side of my jaw. It is tingling and feels better when I chew or grind my teeth. Not uncomfortable pain. It suddenly started in the afternoon and lasted throughout the night.
20F: 04:XX:XX
Right ear is a little painful, feels like I’m going to get an ear infection.  
10F: 06:XX:XX

Glands in armpits and under ears still swollen - right underarm worse, left under ear worse - sore if pressed.  
08F: 11:XX:XX

Left ear sore. There is an irritating scab inside.  
01M: 15:XX:XX

Left ear was blocked in the morning; it also had a stinging pain.  
18F 16:XX:XX

**Obstruction**

Slightly runny sinus since woke up and ears feeling blocked.  
08F: 10:09:00

Left ear was blocked in the morning; it also had a stinging pain.  
18F: 16:XX:XX

**4.3.6 Nose**

**Post nasal drip**

I noticed some post nasal drip that I was unable to blow out.  
06M: 00:11:00

Very bad post nasal drip at first on going to bed - made me cough a bit.  
08F: 00:XX:XX

Post nasal drip began around 8am, about 1 hour after taking my first dosage today. The post nasal felt the same as yesterdays where I was unable to blow it out.  
06M: 01:08:00
Nose was blocked throughout the afternoon. Opened up at about 16:00, after my exam. I still have a post nasal drip.

16M: 03:XX:XX

Post nasal drip is present.

16M: 04:XX:XX

Have a post nasal drip, but throat feels very dry.

17M: 06:XX:XX

Nose semi-blocked during the evening. Also have a post nasal drip.

16M: 07:XX:XX

My throat is very sore. Feels like I have a post nasal drip. Very dry throat.

17M: 11:XX:XX

Sneezing occasionally. Blood present when blowing out nose with green mucous – only on left side. Lots of nasal congestion with post nasal drip.


Sneezing occasionally. Mucous less green, now greenish/yellow. Traces of blood still present. Mucous staining in green. Lots of nasal congestion with post nasal drip.


Foul odour/taste

Smell and taste of mucous extremely bad. Like rotten egg or putrid flesh.

Obstruction

Blocked nose, left sided. Mucous white, like egg white.
09AM: 00:XX:XX, 01:XX:XX, 02:XX:XX, 03:XX:XX, 04:XX:XX, 05:XX:XX

Sinuses were stuffy and it felt like as if my nose was going to get blocked.
16M: 01:XX:XX

Blocked nose, itchy, ticklish and runny. In my left nasal passage. Nothing makes it better, but is worse for dust and smoking. Also have some sneezing. Started as I woke up.
22F: 02:XX:XX

Slightly blocked nose when I woke up, but cleared up quickly.
30F: 02:XX:XX

Nose was blocked throughout the afternoon. Opened up at about 16:00, after my exam. I still have a post nasal drip.
16M: 03:XX:XX

Nose blocked when I woke up, cleared later in the day.
30F: 03:XX:XX

Blocked nose, blocked sinuses.
16M: 05:XX:XX, 08:XX:XX

Woke up with a blocked nose and a wet cough.
18F: 05:XX:XX

Nose blocked again. Not as blocked as the previous days, but still not completely clear.
30F: 05:XX:XX

Blocked nose, left sided. Mucous white.
09AM: 06:XX:XX

Just had a sore throat, blocked nose and serious headache.
10F: 06:XX:XX

My sinuses have been blocked all day. Nothing came out.
17M: 06:XX:XX

Nose semi-blocked during the evening. Also have a post nasal drip.
16M: 07:XX:XX

 Blocked nose, left sided.
09AM: 08:XX:XX

Sneezing occasionally. Blood present when blowing out nose with green mucous – only on left side. Lots of nasal congestion with post nasal drip.

 Stuffy nose.
24F: 09:XX:XX, 10:XX:XX

Blocked nose, nothing wants to come out.
17M: 11:XX:XX

Sneezing occasionally. Mucous less green, now greenish/yellow. Traces of blood still present. Mucous staining in green. Lots of nasal congestion with post nasal drip.

**Rhinitis**

Woke up with hayfever.
22F: 03:XX:XX

Really bad sinus since I woke up. It woke me up. [Hayfever: FUR]
22F: 08:XX:XX

**Dryness**

Sinuses were clear but my nasal passages felt dry as if exposed to cold air. Was out of the office for most of the day so I was not in the A/C.

02M: 17:13:50

Sinuses still clear. Got a bit of a nose bleed. Nasal passages still dry. I suspect the bleed is from constant exposure to cold air whilst my sinuses are blocked.

02M: 17:19:00

Nostril mucosa dryness. Dry, crusted cattarrh on the mucosa, it feels as if a dried gel has been applied in the Nostrils walls. It is as if much wind has blown into my Nostrils. This is so, every morning since yesterday. Crusts are sticky, non offensive with no blood. There is much relief after cleaning Nostrils and removing all the crusted cattarrh.

14M: 24:09:00

Crusted Nostrils every morning. Today dryness of the mucous membrane in the Nostrils started this evening.

14M: 27:XX:XX

Dryness of the Nostrils mucosa felt every morning.

14M: 28:XX:XX

**Coryza**

Frequent coughing, slight wheeze and runny nose. Mucous from nose is yellow.

09AM: 07:XX:XX

Running nose and extremely dry throat.
Still have a running nose.

Sneezing occasionally. Blood present when blowing out nose with green mucous – only on left side. Lots of nasal congestion with post nasal drip.

Slightly runny sinus since woke up and ears feeling blocked.

Still have a little bit of a running nose.

Discharge

Frequent coughing, slight wheeze and runny nose. Mucous from nose is yellow.

Sneezing occasionally. Blood present when blowing out nose with green mucous – only on left side. Lots of nasal congestion with post nasal drip.

Dark blood present in morning upon blowing out nose.
Light blood tinged green mucous during the day.

Bad sinus, light yellow/white colour mucous. Better outside. Had a sneeze attack.
22F: 12:XX:XX

Throat pain has subsided. Nostril stuffy with hard, slightly dried mucus on the back of the Nostril.
14M: 13:XX:XX

I woke up with dryness of the nasal mucosa. There are much crusts in the nostrils, dry, cream white to yellowish and painful. There is much relief when my nostrils are clean, with no dry crusted cattarrh.
14M: 23:10:00

Nostril mucosa dryness. Dry, crusted cattarrh on the mucosa, it feels as if a dried gel has been applied in the Nostrils walls. It is as if much wind has blown into my Nostrils. This is so, every morning since yesterday. Crusts are sticky, non offensive with no blood. There is much relief after cleaning Nostrils and removing all the crusted cattarrh.
14M: 24:09:00

Crusted Nostrils in the morning. There is no fan nor anything blowing wind/air into my room. No headache, nor sneezing.
14M: 25:13:00

Sneezing occasionally. Mucous less green, now greenish/yellow. Traces of blood still present. Mucous staining in green. Lots of nasal congestion with post nasal drip.

Smell and taste of mucous extremely bad. Like rotten egg or putrid flesh.
Heightened Sense of smell

I have been smelling a strange sweet perfumey smell in the evenings since Thursday night - thought it was a plant flowering for the first time but strange smell.

08F: 09:XX:XX

I am feeling very stressed by perfumes this morning. The airport shuttle car had a hanging perfume and one that squirted perfume into the car.

08F: 11:07:30

The hotel where the meeting is being held has super strong sickly perfume in the loos and some sort of fragrance in the air in the meeting room.

08F: 11:XX:XX

Stayed awake by changing activities, observing sweet smell of fruit also cleaning chem from outside.

08F: 16:16:00

Modalities

>Outside

Bad sinus, light yellow/ white colour mucous. Better outside. Had a sneeze attack.

22F: 12:XX:XX

I also realized that when I'm not inside the house my flu is better and I feel less sick.

10F: 13:XX:XX
4.3.7 Face

**Dryness of lips**

I noticed that my lips were peeling for some reason.

01M: 02:10:39

Lips are feeling papery and peeling.

08F: 22:08:00

Lips papery and cracked.

08F: 23:11:45

Still feel dehydrated, lips even more papery, no sore throat this morning.

08F: 24:XX:XX

Lips very dry and papery, peeling feeling.

08F: 25:06:00

**Pain**

Tingling pain on my right tonsil. The pain radiates to the middle ear and the right side of my jaw. It is tingling and feels better when I chew or grind my teeth. Not uncomfortable pain. It suddenly started in the afternoon and lasted throughout the night.

20F: 04:XX:XX

Left side of face painful. Left eye, left cheek, and left molars.


**Itching**

I think my face was itchy during meditation cause I had a bit of heat rash.
12F: 06:XX:XX

**4.3.8 Mouth**

I could still feel the slimey in my mouth.

27F: 09:XX:XX

**Swelling**

Tongue feels like it is swelling, especially left back in my mouth - making it difficult to talk in the meeting.

08F: 01:09:45

**Tongue Pain**

Left back of tongue still feeling tender.

08F: 02:06:45

Woke up with the tip of my tongue painful. It's been painful all day and it's definitely not caused by drinking something hot or kissing anyone. Everything makes it worse. Worse for drinking. Stinging and irritating.

10F: 08:XX:XX

Woke up with a painful tongue. It's a painful white pimple on the tip of my tongue…The pimple was painful all day, slept early due to the pain.

10F: 09:XX:XX

**Tongue discoloration**

Noticed white fur on tongue while brushing teeth.

08F: 03:22:40

Glands less swollen but throat sore this morning and tongue white.

08F: 12:10:30
Oral thrush. Tongue whitish. Feels covered as if not his tongue. As if something covered the tip.

14M: FUR

**Dryness**

Mouth feels very dry.

16M: 05:XX:XX

Dry mouth.

01M: 15:XX:XX

**Offensive smell and taste**

My breath is offensive, I had brushed my teeth this evening, but the breath is still offensive.

14M: 07:14:00

Smell and taste of mucous extremely bad. Like rotten egg or putrid flesh.


**Disorientated sense of taste**

Something is odd with my taste buds today - the coffee is tasting sweet although normal coffee and normal milk and no sugar- very weird!!??

08F: 10:09:30

Brushed teeth with toothpaste - the mint flavour tastes too strong today.

08F: 10:XX:XX

I had some horrible chicken wings at spur before movie. The BBQ sauce was so bitter. After delicious healthy lunch of Vietnamese spring roll I just craved junk food in the afternoon.

12F: 16:XX:XX
4.3.9 Teeth

Pain

Left side of face painful. Left eye, left cheek and left molars.


4.3.10 Throat

Dryness

Throat was very dry.

16M: 01:XX:XX

My throat feels dry.

16M: 02:XX:XX

I had weird hiccups at 14h15 in homeopharm class. My throat down to the oesophagus felt dry. It took about 10min to subside.

14M: 04:14:15

Have a post nasal drip, but throat feels very dry.

17M: 06:XX:XX

Running nose and extremely dry throat.

10F: 05:XX:XX

My throat is very sore. Feels like I have a post nasal drip. Very dry throat.

17M: 11:XX:XX

Feeling very thirsty, throat feels dry and scratchy.

08F: 16:10:00
Itchy

Throat pain began shortly after 11:30am. My throat felt itchy and was soothed eating something coarse like toast.
06M: 01:11:30

Itchy throat.
09AM: 04:XX:XX

I have this flu-like feeling. My throat and pharynx (back of mouth) feels itchy, burning, and feels as if another layer has been placed around the pharynx. The voice has changed, slight coughs.
14M: 07:14:00

Feeling very thirsty, throat feels dry and scratchy.
08F: 16:10:00

Pain

I noticed my throat was starting to hurt with an itchy type sensation.
06M: 00:12:00

Had a sore throat.
17M: 01:XX:XX

Throat is a bit sore. Has a burning sensation.
16M: 03:XX:XX

I have a sore throat, flu is about to start.
10F: 04:XX:XX

I woke up and went to wash my face. As I stood there by the shower, I had this slight pain on the right throat. The throat felt enlarged. The pain though not intense, it is sharp, as if a tiny pin might come out the tip of the tonsil. The pain is
so faint that it does not interfere with swallowing, movement of the head nor sticking out of the tongue.
14M: 06:06:33

Throat is sore. Malaise gets worse. Post nasal drip.
09AM: 06:XX:XX

Just had a sore throat, blocked nose and serious headache.
10F: 06:XX:XX

Sore throat is severe. Post nasal drip.
09AM: 07:XX:XX, 08:XX:XX

My throat is very sore. Feels like I have a post nasal drip. Very dry throat.
17M: 11:XX:XX

Slight sore throat.
08F: 11:XX:XX

Glands less swollen but throat sore this morning and tongue white. Feeling much better after fresh air but exhausted, throat ok now back to bed.
08F: 12:XX:XX

Throat sore again - seems to be a morning thing (gone by 12h00).
08F: 13:10:00

Developed a slight sore throat sometime in the late morning - has been getting worse through the day. The tartness of the salad dressing was sting and soothing.
08F: 17:XX:XX

Sore throat for first hour after waking.
08F: 20:07:30
Sore throat until eating.
08F: 21:08:00

Sore throat - lasted about an hour.
08F: 22:08:00

Dull or faint pain felt in the throat as I swallow.
14M: 28:XX:XX

-Tonsils

Tingling pain on my right tonsil. The pain radiates to the middle ear and the right side of my jaw. It is tingling and feels better when I chew or grind my teeth. Not uncomfortable pain. It suddenly started in the afternoon and lasted throughout the night.
20F: 04:XX:XX

I had a flu-like symptom in the morning while at campus. My left tonsil was sore, the soreness was dull, not interfering with my normal daily activities, I could swallow without exacerbating and illciting much throat pain. The back of the tonsils was a thick snot, so hard, difficult to hawk it out.
14M: 12:XX:XX

Sore throat on waking for +2 hours, right tonsil slightly swollen.
08F: 23:05:00

Enlarged

The throat felt enlarged.
14M: 06:06:33
4.3.11 Stomach

Increased appetite

My appetite has increased a lot. It feels as if my stomach is so empty and the hunger is so excoriating as if being rubbed by a steel wool.
14M: 01:23:00

After having lunch, I got very hungry.
16M: 01:XX:XX

Increase in appetite. Eating many things at once.
25F: 01:XX:XX

Excoriating hunger. Rice and bread do not full up my stomach in such a way that I would feel full. The fullness is temporary as I must have to take a slice.
14M: 02:20:00

I woke up ravenous.
12F: 02:XX:XX

My appetite was great.
27F: 02:XX:XX

Increased appetite.

Hunger!!! It felt as if I last ate in the afternoon. This hunger is sharp that I have to take something. The hunger and sharpness is felt as if it is from the heart. In my stomach there is no excoriation but hunger.
14M: 03:23:52

My friends left I felt really hungry so I over ate and got cramps.
01M: 04:17:11
Very hungry.
22F: 06:XX:XX

I woke up feeling hungry, my stomach is so empty and feels as if it has been enlarged/extended to have a deep pit bottom. I ate 3 times last evening before I sleep. I woke up and prepared something to eat, before I could even brush my teeth "lol".
14M: 09:XX:XX

Sometimes feel like eating unnecessarily.
01M: 15:XX:XX

I have an increased appetite, as now I'm preparing two slice of bread for a quick bite.
14M: 15:XX:XX

I am more energetic with sharp appetite.
14M: 17:XX:XX

Appetite higher than usual throughout the day. My thirst was very high, especially in the afternoon.
30F: 18:XX:XX

Very hungry today, craving big and rich meal.
08F: 22:12:00

Still feeling hungry today. Can't get enough water.
08F: 23:XX:XX

Increase appetite
24F: 23:XX:XX

Still feel dehydrated, lips even more papery, no sore throat this morning. Very hungry despite big lunch.
08F: 24:XX:XX

Increase hunger, increase thirst, increase urination, fatigue.

Increased appetite. Ate a lot.
15F: FUR

-On waking
I woke up ravenous.
12F: 02:XX:XX

I woke up feeling hungry, my stomach is so empty and feels as if it has been enlarged/extended to have a deep pit bottom. I ate 3 times last evening before I sleep. I woke up and prepared something to eat, before I could even brush my teeth "lol".
14M: 09:XX:XX

Diminished appetite
Didn't have an appetite. Only had one meal today.
20F: 01:XX:XX

I hardly ate today- fruit, tea and water, felt good to keep it light. Had a few snacks in between then made a yummy salad for dinner.
12F: 03:XX:XX

Appetite lower than usual.
30F: 05:XX:XX

Appetite was normal then decreased in the afternoon.
30F: 06:XX:XX

Appetite lower than usual.
30F: 08:XX:XX

Not much appetite tonight.

08F: 09:XX:XX

Appetite is low. Only feel like eating comfort food but also feel like I've had too much starch - need protein.

3AF: 20:XX:XX, 21:XX:XX

**Appetite fluctuations**

Appetite up and down throughout the day. Intense cravings at night for sweet stuff.

30F: 09:XX:XX

My appetite was up and down throughout the day.

30F: 10:XX:XX

**Thirst**

As soon as I took it I felt thirsty and uncomfortable on my tummy.

01M: 00:08:37

Also feeling thirsty although have been making extra effort to drink water today.

08F: 00:19:30

Increased thirst. Drank lots of fluids.

27F: 00:XX:XX

Thirsty feeling (drinking lots of water) and dry itching eyes continued through evening.

08F: 01:15:33

Very thirsty at night.

16M: 01:XX:XX
Thirsty throughout the whole night.
16M: 02:XX:XX

Drank a lot of water, was still thirsty.
27F: 04:XX:XX

Very thirsty during late afternoon and most of the night.
16M: 05:XX:XX

Downed a bottle of coconut water to hydrate. Lots of water at home and tea.
08F: 06:XX:XX

Have been feeling thirsty today - been drinking water since morning, trying also to be more conscious of dehydration.
08F: 09:XX:XX

Still feeling thirsty.
08F: 10:XX:XX

Thirsty this evening have drunk several glasses of water.
08F: 15:20:00

Always thirsty.
01M: 15:XX:XX

Throughout the night I woke up several times to drink water.
24F: 15:XX:XX

Feeling very thirsty, throat feels dry and scratchy.
08F: 16:10:00

I am constantly thirsty, it doesn't matter how much water I drink
24F: 16:XX:XX
Also extremely hot, very thirsty.  
08F: 17:XX:XX

Feeling thirsty and headache.  
08F: 22:08:00

My thirst was very high, especially in the afternoon.  
30F: 18:XX:XX

Have been thirsty all day even though I'm drinking water.  
08F: 22:16:30

Can't get enough water.  
08F: 23:XX:XX

Very thirsty - drinking lots of sparkling water.  
08F: 24:21:00

I was extremely thirsty today. I upped my water intake.  
24F: 24:XX:XX

Very thirsty from lunch but didn't have water on drive. Feeling thirsty after drive, lots of tea and water.  
08F: 26:XX:XX

Increase hunger, increase thirst, increase urination, fatigue.  

More thirsty.  
02M: FUR

Increased water intake.  
15F: FUR
**Nausea**

I feel nauseous after taking the remedy. There is rumbling noise in my stomach, much gas, and better for belching.

14M: 00:09:45

I took my second remedy. I feel a bit nauseous. I felt also a bit bloated (gas in my stomach) I benched to have a relief.

14M: 00:18:00


14M: 00:23:00

My fourth remedy. Nausea only this time.

14M: 01:09:00

I took the fifth remedy. I’m nauseous and flatulent. I had a few eructations (belching), that gives me a relief.

14M: 01:14:00

I began to feel those cramps again and a bit nauseous and hot. I felt better after having something sugary to drink.

01M: 01:15:00

Feeling nauseous.

22F: 02:19:30

Felt nauseous this morning. Went away after a half hour.

22F: 03:XX:XX

I woke up feeling a little sick. Nauseous.

01M: 04:07:55
Stayed out late but felt fine. Before that I felt a bit foggy, came home after 4pm with a headache, even feet a bit nauseous and dizzy.
03AF: 04:XX:XX

My stomach had a weird feeling, felt like vomiting for most of the morning.
10F: 05:XX:XX

Bloated since this morning. Nausea worse for drinking, worse for water, worse for eating with cold feeling and shakiness.
01M: 15:XX:XX

Scared to eat because of nausea, feel full.
01M: 15:XX:XX

- Eructations

I feel nauseous after taking the remedy. There is rumbling noise in my stomach, much gas, and better for belching.
14M: 00:09:45

I took my second remedy. I feel a bit nauseous. I felt also a bit bloated (gas in my stomach) I benched to have a relief.
14M: 00:18:00

I took the fifth remedy. I'm nauseous and flatulent. I had a few eructations (belching), that gives me a relief.
14M: 01:14:00

Hiccoughs

I had weird hiccups at 14h15 in homeopharm class. My throat down to the oesophagus felt dry. it took about 10min to subside.
14M: 04:14:15
I have a second episode of hiccups. I drank cold, refrigerated water, that has triggered it. I had to warm up water and drink it to stop the attacks. Hiccups better for warm drinks (water). Worse for cold (water) drinks.

14M: 04:18:30

**Eructation**

Nothing unusual to note except I had two goji berry flavoured chewy supplements and they didn't digest nicely, I kept on tasting it when burping. Not gonna eat that again.

3AF: 13:XX:XX

**Fullness**

Scared to eat because of nausea, feel full.

01M: 15:XX:XX

**Eating**

Gulped down veg lasagne so fast that I got a stitch.

08F: 28:18:30

My friends left I felt really hungry so I over ate and got cramps.

01M: 04:17:11

**4.3.12 Abdomen**

**Rumbling, gas and bloating**

I feel nauseous after taking the remedy. There is rumbling noise in my stomach, much gas, better for belching.

14M: 00:09:45

I took my second remedy. I feel a bit nauseous. I felt also a bit bloated (gas in my stomach) I benched to have a relief.

14M: 00:18:00
14M: 00:23:00

I took the fifth remedy. I'm nauseous and flatulent. I had a few eructations (belching), that gives me a relief.
14M: 01:14:00

Feeling a bit bloated.
05AM: 06:XX:XX

Feeling a bit gassy, wonder if it's the lentils from earlier.
12F: 09:XX:XX

First few hours of the night the feeling of gassiness continued. My stomach just felt unsettled as if it was going to run at some stage. I slept on it for a while as that seemed comfortable and then eventually passed out.
12F: 10: XX:XX

Bloated since this morning.
01M: 15:XX:XX

Been having bad gas (unuasual)
3AF: 21: XX:XX

**Sharp, stitching pain**

I felt those sharp pains on my stomach in the same area.
01M: 02:16:00

Gulped down veg lasagne so fast that I got a stitch.
08F: 28:18:30

While speaking to R I started to get those sharp pains on my stomach.
01M: 05:11:00
Cramps and spasms

While walking back to car after shopping I got two separate spasms in my intestine area of my stomach which made me stand still for a moment as it was uncomfortable.
01M: 00:11:00

Bowel disturbances noted. Increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 00:XX:XX

I took my “remedy” I immediately got stomach cramps.
01M: 01:07:00

I began to feel those cramps again and a bit nauseous and hot.
01M: 01:15:00

Bowel symptoms worse. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 01:XX:XX

Still feeling strange upsets and increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 02:XX:XX

Only think dampening my moment was the stomach cramps/knotting that took over when I am started with the bisque. I've felt that kind of stomach pain before, a couple of weeks back when I thought I was gluten intolerant. Anyway, it lasted the rest of the afternoon and until about 10pm last night. I felt like doubling over at some stage but also just kept eating and carrying on with day as normal. My stomach, top towards its side felt knotted. It wasn't like a cramp where it's release and hold, constant grip. Almost like a massive stitch. It started just after we had out first starter - sourdough bread and butter and lasted up until 10pm. From about 1.30pm. It felt severe at about 5/6pm. Began quietening down at about
9pm. Didn't shift position throughout and I didn't figure out what to do to make it feel better. Felt like something I just had to ride out. I remember I felt that same pain about a month and half back and thought I was gluten intolerant. Wondered that today cause I'd just eaten bread when it got sore - however, I had bread Monday for breakfast. The week before that I ate a bunny chow and nothing happened.
12F: 02:XX:XX

My friends left I felt really hungry so I over ate and got cramps.
01M: 04:17:11

Had stomach cramps most of the day. Using hot water bottle.
10F: 05:XX:XX

**Sensation as if imminent diarrhoea**

I had experienced odd abdominal pains as if I will have imminent diarrhoea. The pain was intense such that I had to stand up from sitting position. It felt much better when I had to bend slightly forward or put arms on the stomach. There was no noise or flatulence. It felt as if the pain is burning. It lasted for a few minutes then disappeared.
14M: 06:16:50

First few hours of the night the feeling of gassiness continued. My stomach just felt unsettled as if it was going to run at some stage. I slept on it for a while as that seemed comfortable and then eventually passed out. Seemed comfortable and then eventually passed out
12F: 10:XX:XX

**Pains < eating**

Gulped down veg lasagne so fast that I got a stitch.
08F: 28:18:30
Bowel disturbances noted. Increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 00:XX:XX

Still feeling strange upsets and increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 02:XX:XX

Only think dampening my moment was the stomach cramps/knotting that took over when I am started with the bisque. I've felt that kind of stomach pain before, a couple of weeks back when I thought I was gluten intolerant. Anyway, it lasted the rest of the afternoon and until about 10pm last night. I felt like doubling over at some stage but also just kept eating and carrying on with day as normal. My stomach, top towards its side felt knotted. It wasn't like a cramp where it's release and hold, constant grip. Almost like a massive stitch. It started just after we had out first starter - sourdough bread and butter and lasted up until 10pm. From about 1.30pm. It felt severe at about 5/6pm. Began quietening down at about 9pm. Didn't shift position throughout and I didn't figure out what to do to make it feel better. Felt like something I just had to ride out. I remember I felt that same lain about a month and half back and thought I was gluten intolerant. Wondered that today cause I'd just eaten bread when it got sore - however, I had bread Monday for breakfast. The week before that I ate a bunny chow and nothing happened.
12F: 02:XX:XX

My friends left I felt really hungry so I over ate and got cramps.
01M: 04:17:11

4.3.13 Rectum

Diarrhoea

Bowel disturbances noted. Increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 00:XX:XX
Bowel symptoms worse. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 01:XX:XX

Still feeling strange upsets and increased bowel habits. (Rectum: diarrhoea < eating; Abdomen: Cramping; confirmed in follow up appointment).
05AM: 02:XX:XX

My bowel movement in the am was really dark and diarrhoea - like I guess that's what happens when I skipped a day and eat gross spur with purplish bones.
12F: 17:XX:XX

Slightly upset tummy (soft stools). Ate very late at night due to something coming up. Did not sleep well due to this and the quantity of food was large.
3aF: 18:XX:XX

Slight upset tummy continued.
3aF: 19:XX:XX, 20:XX:XX

**Constipation**
Slight constipation.
28M: 11:XX:XX

**Pain**
Rectum sore still (during stool) - prickly feeling like piles but no bleeding.
08F: 03:XX:XX

Bum still prickly and sore.
08F: 04:06:00

**Bleeding**
Tummy worked, bum bleeding.
08F: 13:19:30
4.3.14 Stool

**Loose**

Loose stool in the morning after breakfast.
16M: 03:XX:XX

Very active during the morning. Went to the bathroom multiple times. Loose stool
16M: 05:XX:XX

Slightly upset tummy (soft stools).

**Difficult**

Slight constipation.
28M: 11:XX:XX

Bowel habits very irregular and slightly difficult to pass.
30F: 04:XX:XX

**Regular**

Bowel habits have changed from a regular 3 to 4 day intervals to a daily visit to the loo. It may extend by only a day interval. Normal stools, no constipation nor diarrhoea.
14M: 16:XX:XX

Bowel habit is daily.

Daily bowel emptying habits.
14M: 26:18:00, 27:XX:XX
Dark

My bowel movement in the am was really dark and diarrhoea - like I guess that's what happens when I skipped a day and eat gross spur with purplish bones.

12F: 17:XX:XX

Large

Woke up and had quite a big dump in the morning. Wonder what got me going?

12F: 10:XX:XX

4.3.15 Urine

Frequent

Urinated a lot. At one stage I was urinating every 10 minutes.

16M: 07:XX:XX

Quite frequent and the urine wasn't very concentrated.

21F: 02:XX:XX

Increase hunger, increase thirst, increase urination, fatigue.


Odor

First pee smelled very strong.

08F: 22:08:00

Concentration

Water intake steady although I noticed my wee was super concentrated over the last 2 days so perhaps I should drink more.

12F: 14:XX:XX

My urination is dark, probably due to all the drinks we having during the holiday.

10F: 22:XX:XX
4.3.16 Bladder

Pain
Throbbing pain in my lower abdomen, feels as if it is my bladder. Only started in the evening when my bladder was full and did not disappear even after emptying my bladder.
21F 03:XX:XX

4.3.17 Male

Libido
High libido probably due to recent sexual activity.
09AM: 20:XX:XX

High libido.
09AM: 21:XX:XX

Increase in libido
01M: FUR

Increase in libido
14M: FUR

4.3.18 Female

Discharge
Have had increase in stringy, clear vaginally mucous in mornings since Monday - would normally indicate ovulation but in my case maybe period on way soon? Boobs feeling full and heavy.
08F: 10:09:30

Pain
Outer labia on inside feeling burny like thrush is starting.
08F: 07:XX:XX
Menses

Menstrual cycle late. Having really bad cramps.
22F: 05:XX:XX

Went to my period and this time around didn't develop a pimple because every time when I go to my periods a day before I develop a pimple. First day of my period it's not heavy flow as usual but will see how it goes tomorrow. For now I am in a good mood usually I will not want to be with people when I am on my period.
15F: 02:16:00

Period still late.
22F: 07:XX:XX

Still no period. Bad cramps, whole lower abdominal area.
22F: 08:XX:XX

Period started. Still feeling very weak.
22F: 09:XX:XX

Crampy pain felt in the lower abdominal area this morning. Worse for slight movement, better for walking, pressure and no movement. Needed to do something to ignore the pain. Sensation of heat all over the body without perspiration. Menses was a light flow. Clots was the size of a R1.00 coin. It only came at the end of urination.
25F: 09:XX:XX

Today I'm feeling a bit sick, I mostly have pain in my stomach, I think it's period pains. They more painful than normal, therefore I slept to try feel better.
10F: 16:XX:XX
Today is the first day of my periods. My periods are as scheduled, but they are more painful than normal. My blood is darker than normal and the blood looks clotted. I’m feeling extremely sick.

10F: 17:XX:XX

I’m still on my periods. The blood flow is a lot. Compared to how I usually remember it.

10F: 18:XX:XX

Today is the fourth day of my periods and I noticed blood coming out in chunks, which is something I don’t usually experience that.

10F: 20:XX:XX

My periods usually end after 5 days but today is the 6th and I noticed blood.

10F: 22:XX:XX

**Libido**

Small inkling of improved libido but alas alone.

08F: 07:22:30

Started cleaning up the weed bush I harvested for my boyfriend. I think I inhaled much pollen, my fingers are blackish with resin. It's made me horny but put me in a bad mood - feeling pissed with the boyfriend who ignored my messages until I said I’m cleaning the weed.

08F: 27:20:30

**4.3.19 Larynx and Trachea**

I have this flu - like feeling. My throat and pharynx (back of mouth) feels itchy, burning, and feels as if another layer has been placed around the pharynx. The voice has changed, slight coughs.

14M: 07:14:00
4.3.20 Respiratory

**Difficult**

Battling to breath. Feels like someone is standing on my chest.
17M: 11:XX:XX

Struggled to breath while I went for a jog and needed to cough when I never usual do.
30F: 13:XX:XX

Battling to breath. Feels like I can’t inhale enough air.
17M: 14:XX:XX

Room felt unbearably stuffy though but no one seemed keen to open windows.
08F: 25:XX:XX

4.3.21 Cough

Very bad post nasal drip at first on going to bed - made me cough a bit.
08F: 00:XX:XX

I have this flu - like feeling. My throat and pharynx (back of mouth) feels itchy, burning, and feels as if another layer has been placed around the pharynx. The voice has changed, slight coughs.
14M: 07:14:00

Cough worse after run but went away.
28M: 03:XX:XX

**On waking**

Woke up with a cough.
28M: 02:XX:XX
Woke up this morning with a constant cough I can't get rid of. It feels like a constant tickle/scratching sensation that is relieved by coughing. This cough persisted through the whole day and had me coughing every few minutes.

06M: 14:XX:XX

Cough was there when I woke up, it was the same sensation as yesterday. I still didn't take anything for it. By around mid day I noticed it had decreased to where I was barely coughing. The itching sensation wasn't as constant.

06M: 15:XX:XX

Woke up with a bad cough in the morning.

18F: 06:XX:XX

**Wheezeing**

Had a small cough late morning which got worse throughout the day. Ended up turning into a wheezing cough. Cough disappeared at night.

18F 01:XX:XX

Slight cough and wheeze. Headache is throbbing.

09AM: 05:XX:XX

Cough worse and slight wheeze. Headache is throbbing.

09AM: 06:XX:XX, 08:XX:XX

Frequent coughing, slight wheeze and runny nose.

09AM: 07:XX:XX

Cough and wheeze.

09AM: 09:XX:XX, 10:XX:XX, 11:XX:XX,

**4.3.22 Expectoration**

**Sweet**

My saliva tasted sweet and more slimy.
27F: 08:XX:XX

**Discharge**

Sputum yellow. Heavy chest.

09AM: 07: XX:XX

**Difficulty**

The back of the tonsils was a thick snot, so hard, difficult to hawk it out.

14M: 12:XX:XX

**4.3.23. Chest**

**Pain**

I now have a sharp, piercing pain on the lower right of the chest. The pain is worse for lying down, better for sitting erect up. This pain radiates to the tip of right shoulder and mildly on the right side of my neck. The upper right limb (arm) is not that affected as I can write easily. This pain comes and goes intermittently. When it starts it feels as if the intensity is that if a volume of a radio being turned up.

14M: 02:08:23

Pain now shifted to the center of the chest, as I'm now writing it abruptly stopped.

14M: 02:18:34

Pain under sternum, feels like indigestion like pain, this area has swelled up, can feel clear lump in long shape. Drank water and feeling a bit better.
**Palpitations**
Late night heart palpitations
24F: 02:XX:XX

Early hour heart palpitations
24F: 03:XX:XX

Felt so anxious just before taking my afternoon nap, I could even feel my heart beat.
10F: 04:XX:XX

**Heaviness**
Had a heavy heart, my heart felt extremely tired.
10F: 05:XX:XX

Extreme fatigue and malaise. High fever. Sputum yellow. Heavy chest. Mucous from nose is yellow. Sore throat is severe.
09AM: 07:XX:XX

Boobs feeling full and heavy.
08F: 10:09:30

**Eruption**
Noticed a few pimples on my chest.
08F: 06:XX:XX

Pimples on shoulders and chest. Bleeding on waking [Scratches in sleep: FUR].
01M: 15:XX:XX
Breasts

Boobs feeling full and heavy.
08F: 10:09:30

Breasts very sore - not pms, some other monthly cycle symptoms.
3AF: 20:XX:XX, 21:XX:XX

4.3.24 Back

Pain

Bad tension in my shoulders and neck
22F: 08:XX:XX

Pain in right, side lower back, went away after a while.
30F: 02:XX:XX

A dull pain on my spinal column on the lower thoracic and upper lumbar region. It feels as if I had carried a heavy thing on my shoulders. I have not lifted weights since last week Wednesday. This dull pain is worse walking, better if I lie on supine position.
14M: 03:16:00

Eruption

Pimples on shoulders and chest. Bleeding on waking [Scratches in sleep: FUR].
01M: 15:XX:XX

I have a bump on my neck on the right side that I noticed yesterday - not sure if it’s a pimple or a bite, very itchy.
08F: 26:16:00
4.3.25 Extremities

Upper Limbs

-Tingling

Slight pins and needles in my hands for a short while then went away after my 3\textsuperscript{rd} dose.
30F: 01:XX:XX

The palm and fingers of my left hand feel like I've picked up a prickly pear - pricking from tiny spines. Pricking feeling spreading to top of fingers on left hand and inside of right arm.
08F: 01:12:26

Still having prickly feelings in left hand although not as sharp. Fingertips on right hand now incredibly itch but it feels like an itch inside the fingers - not on surface. Rubbing fingers hard helps.
08F: 01:14:00

Randomly in afternoon and a bit in evening getting a wave of prickliness over skin - not as pokey as the feeling the other day, more dull than prickly pears. Almost tiny shocks like an arm of fast moving caterpillars in hatched area.
08F: 02:XX:XX

Extreme itches all over, prickles round elbow on left arm - had to check no gogga up my sleeve.
08F: 02:22:30

Getting prickly feeling again on arms and hands and top of fingers. Slight numbness in fingers.
08F: 03:22:00

Had brief episode of prickly hands and arms + 18h00.
08F: 04:18:00

Sitting in hot car with closed windows at car wash. As I sweat am feeling prickly on lower arms inner area starting to get a fuzzy, dull headache - think I haven't had enough water cause I forgot to take with me, it's hot and I'm thirsty now.
08F: 06:16:00

Prickly feeling on fingers and arms (inside and outside again) for about 10min. Have few small red spots on inside of right arm and arm pits feeling itchy.
08F: 07:22:00

Sitting on floor I got tingling in hand extremities, worse on right hand fingers.
08F: 10:17:45

Fingers on right hand losing feeling, tingly.
08F: 14:22:28

Prickly feeling again on top of lower arms and hands - comes in waves of pickles. Dog gave me a fright and the prickly tingly became worse. Feeling easing off 22h30.
08F: 15:XX:XX
Fingers blue by the end - bad pins and needles in right hand.
08F: 28:XX:XX

-Itching
Still having prickly feelings in left hand although not as sharp. Fingertips on right hand now incredibly itch but it feels like an itch inside the fingers - not on surface. Rubbing fingers hard helps.
08F: 01:14:00

Itching on left hand and right arm
24F: 02:XX:XX

Arm started itching at around 11am for no reason
24F: 03:XX:XX

Itchy skin on arm and scalp
24F: 11:XX:XX

Itchy arms again especially right arm.
08F: 10:12:30

Extreme itches all over, prickles round elbow on left arm - had to check no gogga up my sleeve.
08F: 02:22:30

Prickly feeling on fingers and arms (inside and outside again) for about 10min. Have few small red spots on inside of right arm and arm pits feeling itchy.
08F: 07:22:00

-Eruption
Prickly feeling on fingers and arms (inside and outside again) for about 10min. Have few small red spots on inside of right arm and arm pits feeling itchy.
08F: 07:22:00
-Tension
I have this headache [with] tense shoulders.
01M: 07:09:00

Bad tension in my shoulders and neck
22F: 08:XX:XX

Lower Limbs

-Eruption
I had an eruption of papules that looked like a mosquito bite. On the ankle (legs) and flexors surface. I am not sure of what seem to be the cause. Better for scratching it will give a relieve as they were itchy. Worse for not scratching.
15F: 00:XX:XX, 02:07:30

-Pain
Varicose veins on left leg medial to popliteal fossa painful, stitching pain. Worse on movement.
09AM: 01:XX:XX, 02:XX:XX, 03:XX:XX, 04:XX:XX, 05:XX:XX, 06:XX:XX, 07:XX:XX, 08:XX:XX

Growing pain down my whole left leg in the afternoon, eventually went away.
30F 04:XX:XX

Weird cramp that starts with pinching in sciatic nerve and then goes down back of thigh into back of knee - feels like tingly, pins and needles and pinching and numb altogether. Very bad on right side and had to stand up to move the leg and try ease out the pain.
08F: 10:17:45

When I walked to open window, I felt my right heel occasionally over the last week or so it feels bruised. It never comes up when I’m practicing or doing any other physical activity, just randomly when walking around the house.
Got that bruised feeling in my right heel. I feel it randomly when I'm barefoot and usually at home.

Very sharp pains on this spot, can jump up and down when touched.

-Numbness

Sitting at desk - getting numbness and tingling in feet.

4.3.26 Sleep

Slept in the afternoon for 2 hours. Had weird dreams about trying to cover my head and my friends head to heal them from the flu, and I was physically covering my head.

Slightly upset tummy (soft stools). Ate very late at night due to something coming up. Did not sleep well due to this and the quantity of food was large.

Improvement on day 0 – 2.
**Restful**

Slept in the afternoon for longer than normal (7 hours)... probably because of the flu.
10F: 06:XX:XX

Sleep was pretty restful, only woken up by rainy storm.
12F: 07:XX:XX

Have been sleeping for longer than normal in the afternoon, but then again I work for most of the night.
10F: 08:XX:XX

I slept well, about midnight and was up by 6.30.
12F: 15: XX:XX

**Restless**

Sleep was very restless.
22F: 01:XX:XX

I woke up a few times during the night to wee and was sweating at some points - what a warm night. I do feel well rested though.
12F: 03:XX:XX

I didn’t sleep well I must of woken up four or five times. One time I remember asking myself where am I.
01M: 06:XX:XX

**Inconsistent**

Deep sleep in the beginning then struggled to sleep in the early morning around 4am
30F: 14:XX:XX

Struggled to fall asleep, then went into a deep sleep.
4.3.27 Dreams

Escaping harm

Had "overlapping" dreams. The first, I was called onto a platform by a well dressed gentleman who appeared to be a wealthy businessman. He seemed charming at first. The platform then began to rise into the air. Attached to the platform was a massive sign in lights. I could not read what it said as it was back to front. The gentleman was speaking into a microphone which I thought was odd as there was no audience. His tone began to change and I immediately felt uneasy. I noticed a large red arcade-machine-style button next to a "gangplank" and immediately assumed I was going to be thrown off this platform. The gentleman then began speaking about a vendetta against my father and how he was going to exact his revenge on me. I ziplined off the platform into the "wilds" below. The "man" sent military helicopters after me as well as search dogs. It then appeared that few moths had passed by in this dream where I was now living as an Australian sheep farmer with a local tribe for protection against this "man". A band of his thugs came investigating but we managed to convince them that I was not the person they were looking for. A woman, whom I assumed was my partner, approached me as said it was not safe that we stay here and that she wanted to visit a monastery in the mountains to learn how to become a nurse. We hiked deep into the mountains and found the monastery. It was filled with women who were more concerned with beauty and spa treatments as opposed to nursing. There was a larger woman who I assumed was the leader. She mentioned that some of the "nurses" had to head down the hill to attend to the "wounded". My "partner" was taken to her dorm. She was bunking with 2 members of Destiny's Child. I felt a bit uneasy of this place so I began to explore. I walked through a door which opened out into a sort of multi-plex mall or entertainment area. It was very open joining with the "desert" or wild surrounding. Suddenly, I was before an "orc-like" creature with my partner. He advised us that he was going to sacrifice us in the name of his God (I recall the name being in a foreign language). I then escaped and ran through the desert and mall. Amongst the mall, whilst fleeing, I was joined by my brother, sister-in-law, or brother and
his wife. We suddenly came upon a "theme-park", or at least an aquatic animal attraction. To get to the stands we had to walk through a parking lot with a lot of construction and scaffolding. There were then two sets of concrete stands on either side of us. They were obviously built into the sea bed as we were now walking on a metal grate platform, with the ocean clearly visible below. My brother then saw my uncle in the stands and began to converse with him. I got agitated with him as our uncle was estranged. My father then appeared and then suddenly left. I began to feel uneasy as there was no mention of the "man" from earlier, and I could sense tension in the air. The platform we were walking on opened out into the sea. Everyone in the stands could clearly see us, and the full horizon. My family members began to descend stairs which disappeared under the platform. I refused to go. I got very anxious that the audience in the stands was the audience the "man" was talking to at the beginning of the dream. The dream then ended and I woke up.

Had a dream I was being chased down the highway unsure as to what was chasing me but I felt stressed when I woke.

I dreamt of this girl coming onto me in my old house. I then remember figuring out that this woman had intentions to kill me. She then changed into a little boy which was me I must have been 10. But this 10-year-old had strength as I got tired of running but found myself getting nowhere with my physical strength against this entity. I ran up the road I remember feeling scared and sad as it started to rain. I saw people I thought I knew but they wouldn’t help me. I remember an intersection and down/up every road came one of those entities with a dead look on their face. I remember getting angry fearless and telling myself “all or nothing.” I woke up feeling afraid and shaken and sick, sad. I spent some hours thinking what it meant as I started crying uncontrollably maybe it means that I need to forget about my haunting past “kill the boy within”.

142
I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

15F: 13:XX:XX

**Distorted**

Attached to the platform was a massive sign in lights. I could not read what it said as it was back to front.

02M: 01:XX:XX

I can't remember the details but the main sentiment is that someone (maybe my younger sister cause I remember her in part of putting on a Nina Simone show (although Nina was white?))

12F: 04:XX:XX

Distorted dream.

30F: 07:XX:XX

Dreamed I was having sex with boyfriend - don't remember details but I felt quite disembodied - as if I was observing rather than feeling.

08F: 20:XX:XX

Dreamt of cuddling a small puppy - except that it lay in my lap purring.

08F: 25:XX:XX
**Unremembered/unremembered parts**

I can't remember what I dreamt.  
12F: 02:XX:XX

Dreamt lots but can only remember one part - being shocked that someone I knew arrived at a meeting wearing beige leggings and a camel toe panty!  
08F: 02:XX:XX

I had a vivid ongoing dream last night. I wish I could remember it. I think it had something to do with a line in my hair and my hair growing a certain way depending on where I put the line.  
12F: 03:XX:XX

Many dreams but struggling to surface them despite having book next to me.  
08F: 06:XX:XX

I know I was dreaming but still can't recall.  
12F: 06:XX:XX

Was having hectic dreams but couldn't surface on what even on waking - feeling of dreams was struggling to do things, challenge.  
08F: 10:XX:XX

Had a weird dream that I can't seem to remember  
24F: 10:XX:XX

Stressful feeling dreams, but don't remember.  
10F: 11:XX:XX

Another night of intense dreaming but can't remember about what.  
12F: 14:XX:XX

Don't remember any dreams.
Can't remember any dreams lately.

First half of last night felt like I was involved in a dream I can't recall.

Worth a mention that I have been unable to remember my dreams for about 1 week. I usually remember at least 1 dream a night. Not that I have not been dreaming, but I remember them in piecemeal.

Dreams are busy but still struggling to recall.

Dreams happening but struggling to recall.

Can't remember dreams - but feeling is edgy, must be one of those roaming around dreams that leaves me exhausted.

Unsuccessful efforts

Had my recurring dream, this time I was looking for the classroom I was meant to be teaching at and couldn't find it. This is the first time the dream has branched off from a 'transport' theme where I am going somewhere not in a physical building, i.e. outside, on the road. My parents were there and I was shouting "I'm the only intelligent person here" and they were laughing at me for saying this.

I had the recurring dream - this time I missed an off ramp. (That did happen yesterday so might have something to do with it).
My recurring dream is taking new directions but all based on the same theme of not being able to complete a task. This morning I was probably wearing too many layers in bed and before I woke up I dreamt that I was removing my sweater or top and no matter how many I removed there was another Underneath. Quite frustrating!

Was having hectic dreams but couldn't surface on what even on waking - feeling of dreams was struggling to do things, challenge.

I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

Had tiring dreams but can't remember details. Again feeling of challenges, struggling to accomplish what I had to do - something to do with a conference.

Anxious

Had "overlapping" dreams. The first, I was called onto a platform by a well dressed gentleman who appeared to be a wealthy businessman. He seemed charming at first. The platform then began to rise into the air. Attached to the
platform was a massive sign in lights. I could not read what it said as it was back to front. The gentleman was speaking into a microphone which I thought was odd as there was no audience. His tone began to change and I immediately felt uneasy. I noticed a large red arcade-machine-style button next to a "gangplank" and immediately assumed I was going to be thrown off this platform. The gentleman then began speaking about a vendetta against my father and how he was going to exact his revenge on me. I ziplined off the platform into the "wilds" below. The "man" sent military helicopters after me as well as search dogs. It then appeared that few moths had passed by in this dream where I was now living as an Australian sheep farmer with a local tribe for protection against this "man". A band of his thugs came investigating but we managed to convince them that I was not the person they were looking for. A woman, whom I assumed was my partner, approached me as said it was not safe that we stay here and that she wanted to visit a monastery in the mountains to learn how to become a nurse. We hiked deep into the mountains and found the monastery. It was filled with women who were more concerned with beauty and spa treatments as opposed to nursing. There was a larger woman who I assumed was the leader. She mentioned that some of the "nurses" had to head down the hill to attend to the "wounded". My "partner" was taken to her dorm. She was bunking with 2 members of Destiny's Child. I felt a bit uneasy of this place so I began to explore. I walked through a door which opened out into a sort of multi-plex mall or entertainment area. It was very open joining with the "desert" or wild surrounding. Suddenly, I was before an "orc-like" creature with my partner. He advised us that he was going to sacrifice us in the name of his God (I recall the name being in a foreign language). I then escaped and ran through the desert and mall. Amongst the mall, whilst fleeing, I was joined by my brother, sister-in-law, or brother and his wife. We suddenly came upon a "theme-park", or at least an aquatic animal attraction. To get to the stands we had to walk through a parking lot with a lot of construction and scaffolding. There were then two sets of concrete stands on either side of us. They were obviously built into the sea bed as we were now walking on a metal grate platform, with the ocean clearly visible below. My brother then saw my uncle in the stands and began to converse with him. I got agitated with him as our uncle was estranged. My father then appeared and then suddenly left. I began to feel uneasy as there was no mention of the "man" from earlier,
and I could sense tension in the air. The platform we were walking on opened out into the sea. Everyone in the stands could clearly see us, and the full horizon. My family members began to descend stairs which disappeared under the platform. I refused to go. I got very anxious that the audience in the stands was the audience the "man" was talking to at the beginning of the dream. The dream then ended and I woke up.

02M: 01:XX:XX

Had a dream I was being chased down the highway unsure as to what was chasing me but I felt stressed when I woke.

06M: 02:XX:XX

I dreamt of this girl coming onto me in my old house. I then remember figuring out that this woman had intentions to kill me. She then changed into a little boy which was me I must have been 10. But this 10-year-old had strength as I got tired of running but found myself getting nowhere with my physical strength against this entity. I ran up the road I remember feeling scared and sad as it started to rain. I saw people I thought I knew but they wouldn't help me. I remember an intersection and down/up every road came one of those entities with a dead look on their face. I remember getting angry fearless and telling myself “all or nothing.” I woke up feeling afraid and shaken and sick, sad. I spent some hours thinking what it meant as I started crying uncontrollably maybe it means that I need to forget about my haunting past “kill the boy within”.

01M: 06:XX:XX

Stressful feeling dreams, but don't remember.

10F: 11:XX:XX

Can't remember dreams - but feeling is edgy, must be one of those roaming around dreams that leaves me exhausted.

08F: 28:XX:XX
Searching

Had my recurring dream, this time I was looking for the classroom I was meant to be teaching at and couldn't find it. This is the first time the dream has branched off from a 'transport' theme where I am going somewhere not in a physical building, i.e. outside, on the road. My parents were there and I was shouting "I'm the only intelligent person here" and they were laughing at me for saying this.

I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

I dreamt of seed and I driving around and around the same block in a neighbourhood (in Australia? I think) trying to find someone/something so we can shoot for mushroom hour. Think it's related to the video he is currently editing for them and my recurring thoughts about his as a potential partner.

Had dreams - remember snippets… Was walking around looking for someone - think it was my boyfriend. On 2 occasions I ended up falling into a very dirty brown slimy lake and had to swim to get out. Then I ended up in a building that seemed like prefab classrooms, suddenly I was sitting in a bus but the seats were more like school desks and benches. I was in the bus with men and the person next to me has his hand under the desk and up under my skirt and was fingering me. Everyone was dressed in army overalls. A man with thick brown hair and
bushy moustache and eyebrows noticed what we were doing and raised an eyebrow.

08F: 26:XX:XX

**Travel**

Had been dreaming about travelling somewhere with boyfriend and others. We were trying to cross Joburg but the route looked like kloof - he said doesn't Swaziland look beautiful from here pointing to the top of the cliffs but I was thinking that can't be Swaziland then we had to go on foot on a road through a plantation area - there were dodgy looking men hanging out on the side of the road and I put my laptop bag on back thinking well here goes, hope I don't lose this today.

08F: 01:XX:XX

I had the recurring dream - this time I missed an off ramp. (That did happen yesterday so might have something to do with it).

03AF: 09:XX:XX

I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence Winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

15F: 13:XX:XX

I dreamt of seed and I driving around and around the same block in a neighbourhood (in Australia? I think) trying to find someone/something so we can
shoot for mushroom hour. Think it's related to the video he is currently editing for them and my recurring thoughts about his as a potential partner.

12F: 17:08:55

We were going to some sort of nature spot (might be kranzkloof). I was in the back seat with “M” and “A” was driving my car. We were driving on some really steep gravel roads. At some point I thought we were going to fall off the road, it was that steep. “A” was in good control though. I closed my eyes. Of course hardcore “M” kept hers open firmly fixed on the road ahead and talked through the navigation with “A”, eventually informing me when we had arrived safely. Part 2 relates to - ag, I remember humour. I remember it was really funny. People wanted something I think I had and it was about what they were willing to do to get it. I was so amused. Wish I remembered more...

12F: 28:XX:XX

Singing/dancing

Had been dreaming singing a Joan armatrading song - was still in my head "why do you come here when you know I have troubles enough"

08F: 08:01:00

My dreams are weird, especially because I generally don’t dream. Had a dream of girls twerking. Very odd.

10F: 08:XX:XX

Next part of dream I was doing ballroom dancing that was also connected to the challenge. At some time the music changed to salsa which was better and less awkward than the pure ballroom.

08F: 13:01:20

At some point I woke up to pee I had an Ali farke tour song playing in my mind. Not sure what I was dreaming.

08F: 15:XX:XX
Mountains

He said doesn't Swaziland look beautiful from here pointing to the top of the cliffs.
08F: 01:XX:XX

A woman, whom I assumed was my partner, approached me as said it was not safe that we stay here and that she wanted to visit a monastery in the mountains to learn how to become a nurse. We hiked deep into the mountains and found the monastery.
02M: 01:XX:XX

Dreamt about a house I've sort of dreamt about before - it's a semi underground house I'm renting, it's super big but there are parts I don't go into because they are dark. The lounge is against the mountain.
08F: 17:XX:XX

Wilderness

Had "overlapping" dreams. The first, I was called onto a platform by a well dressed gentleman who appeared to be a wealthy businessman. He seemed charming at first. The platform then began to rise into the air. Attached to the platform was a massive sign in lights. I could not read what it said as it was back to front. The gentleman was speaking into a microphone which I thought was odd as there was no audience. His tone began to change and I immediately felt uneasy. I noticed a large red arcade-machine-style button next to a "gangplank" and immediately assumed I was going to be thrown off this platform. The gentleman then began speaking about a vendetta against my father and how he was going to exact his revenge on me. I ziplined off the platform into the "wilds" below. The "man" sent military helicopters after me as well as search dogs. It then appeared that few moths had passed by in this dream where I was now living as an Australian sheep farmer with a local tribe for protection against this "man". A band of his thugs came investigating but we managed to convince them that I was not the person they were looking for. A woman, whom I assumed was my partner, approached me as said it was not safe that we stay here and that she
wanted to visit a monastery in the mountains to learn how to become a nurse. We hiked deep into the mountains and found the monastery. It was filled with women who were more concerned with beauty and spa treatments as opposed to nursing. There was a larger woman who I assumed was the leader. She mentioned that some of the "nurses" had to head down the hill to attend to the "wounded". My "partner" was taken to her dorm. She was bunking with 2 members of Destiny's Child. I felt a bit uneasy of this place so I began to explore. I walked through a door which opened out into a sort of multi-plex mall or entertainment area. It was very open joining with the "desert" or wild surrounding. Suddenly, I was before an "orc-like" creature with my partner. He advised us that he was going to sacrifice us in the name of his God (I recall the name being in a foreign language). I then escaped and ran through the desert and mall. Amongst the mall, whilst fleeing, I was joined by my brother, sister-in-law, or brother and his wife. We suddenly came upon a "theme-park", or at least an aquatic animal attraction. To get to the stands we had to walk through a parking lot with a lot of construction and scaffolding. There were then two sets of concrete stands on either side of us. They were obviously built into the sea bed as we were now walking on a metal grate platform, with the ocean clearly visible below. My brother then saw my uncle in the stands and began to converse with him. I got agitated with him as our uncle was estranged. My father then appeared and then suddenly left. I began to feel uneasy as there was no mention of the "man" from earlier, and I could sense tension in the air. The platform we were walking on opened out into the sea. Everyone in the stands could clearly see us, and the full horizon. My family members began to descend stairs which disappeared under the platform. I refused to go. I got very anxious that the audience in the stands was the audience the "man" was talking to at the beginning of the dream. The dream then ended and I woke up.

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hardcore “M” kept hers open firmly fixed on the road ahead and talked through the navigation with “A”, eventually informing me when we had arrived safely.

12F: 28:XX:XX

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08F: 01:XX:XX

**Sensing tension**

I began to feel uneasy as there was no mention of the "man" from earlier, and I could sense tension in the air. The platform we were walking on opened out into the sea. Everyone in the stands could clearly see us, and the full horizon. My family members began to descend stairs which disappeared under the platform. I refused to go. I got very anxious that the audience in the stands was the audience the "man" was talking to at the beginning of the dream. The dream then ended and I woke up.

02M: 01:XX:XX

There were dodgy looking men hanging out on the side of the road and I put my laptop bag on back thinking well here goes, hope I don't lose this today.

08F: 01:XX:XX

**Robbers/robbed**

Had been dreaming about travelling somewhere with boyfriend and others. We were trying to cross Joburg but the route looked like kloof - he said doesn't Swaziland look beautiful from here pointing to the top of the cliffs but I was thinking that can't be Swaziland then we had to go on foot on a road through a plantation area - there were dodgy looking men hanging out on the side of the
road and I put my laptop bag on back thinking well here goes, hope I don't lose this today.

08F: 01:XX:XX

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15F: 13:XX:XX

Betrayed

I had a dream of my boyfriend betraying me, in my dream he was afraid to introduce me to his friend, ashamed to be with me in public.

15F: 01:XX:XX

Was offering an opportunity and making it seem like a joint venture when in actual fact they were shirking their responsibility and making us do all the work. So instead of a genuine opportunity I was left with the feeling that I was just being given a shit load of work without acknowledgement of that.

12F: 04:XX:XX

Felt ripped off after paying R500 for part of exercise program that never materialized. I was pretty indignant although I any recall doing anything about it.

12F: 26:06:45
Organizing event/work/project

Sharing opportunity, dividing responsibility - you get this and you get this. Nina simone show: sister asking if we interested. My dreams felt so involved. I felt deep in them but even with my notes, not sure I remember them clearly. Let me try. I can't remember the details but the main sentiment is that someone (maybe my younger sister cause I remember her in part of putting on a Nina Simone show (although Nina was white?)) Was offering an opportunity and making it seem like a joint venture when in actual fact they were shirking their responsibility and making us do all the work. So instead of a genuine opportunity I was left with the feeling that I was just being given a shit load of work without acknowledgement of that. Then there was a third phase of dreaming where I was having an intense engaging conversation with a man from another African country. It was so intriguing - bit alarm interrupted it. This active dream life is new to me and kinda exciting. I'm sure things will get clearer with time.

12F: 04:XX:XX

Dream about job descriptions, developing and approving these - not sure who with.

08F: 08:XX:XX

Dreamt strange dream about having to move from on work station to the next in a house (like an obstacle course) - but the one was very difficult because there was a low long fanlight shaped window I had to crawl through. This moving related to some kind of competition or challenge that we had to do (I think Q was also there) was expected to get it right. Next part of dream I was doing ballroom dancing that was also connected to the challenge. At some time, the music changed to salsa which was better and less awkward than the pure ballroom.

08F: 13:01:20

It concerned figure (my sister) and us working together on a project. It was super important that we are paired otherwise it felt like it just wouldn't work. Details fuzzy but once again it seemed like something that concerned me the whole night.

12F: 13:XX:XX
Approach/method involving more people, collaborative changing the way things have been done, involves trials. Revolutionary. Doubters at first but efficiency becomes clear. Sitting in circles.
12F: 22:XX:XX

Dreamt something about saving a dog down a hole then the dream morphed into a new job, where I would be working in a cubicle but I needed to move to another cubicle and then I realized the new job was inside a Telkom customer service centre (my WiFi is down and I reported it last night so maybe how telkom got into dreams).
08F: 22:XX:XX

I had a dream the previous night, which is something I don’t usually have. I dreamt I had to come up with an idea for an event and I was sitting with celebrities. (I felt pressure to come up with an idea and felt put down by them: FUR)
10F: 31:XX:XX

Seeking protection
I ziplined off the platform into the "wilds" below. The "man" sent military helicopters after me as well as search dogs. It then appeared that few moths had passed by in this dream where I was now living as an Australian sheep farmer with a local tribe for protection against this "man".
02M: 01:XX:XX

I ran up the road I remember feeling scared and sad as it started to rain. I saw people I thought I knew but they wouldn’t help me.
01M: 06:XX:XX

I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were
holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

Famous people

My "partner" was taken to her dorm. She was bunking with 2 members of Destiny's Child.

My dreams felt so involved. I felt deep in them but even with my notes, not sure I remember them clearly. Let me try. I can't remember the details but the main sentiment is that someone (maybe my younger sister cause I remember her in part of putting on a Nina Simone show (although Nina was white?))

I had a dream the previous night, which is something I don’t usually have. I dreamt I had to come up with an idea for an event and I was sitting with celebrities. (I felt pressure to come up with an idea and felt put down by them: FUR)

Estranged family

My brother then saw my uncle in the stands and began to converse with him. I got agitated with him as our uncle was estranged.

I also dreamt about my estranged sister and I going halvies on a computer. It worked like a really old computer but we had room figure out the transaction to get it etc. Maybe I miss her other just anxious about her cooperation so I can finalize paperwork to get her out of company.
Concerned with appearance

We hiked deep into the mountains and found the monastery. It was filled with women who were more concerned with beauty and spa treatments as opposed to nursing.
02M: 01:XX:XX

Dreamt lots but can only remember one part - being shocked that someone I knew arrived at a meeting wearing beige leggings and a camel toe panty!
08F: 02:XX:XX

I had a vivid ongoing dream last night. I wish I could remember it. I think it had something to do with a line in my hair and my hair growing a certain way depending on where I put the line.
12F: 03:XX:XX

Animals

I ziplined off the platform into the "wilds" below. The "man" sent military helicopters after me as well as search dogs. It then appeared that few moths had passed by in this dream where I was now living as an Australian sheep farmer with a local tribe for protection against this "man".
02M: 01:XX:XX

Another dream involves riding a horse.
08F: 07:XX:XX

Dreamt something about saving a dog down a hole then the dream morphed into a new job, where I would be working in a cubicle but I needed to move to another cubicle and then I realised the new job was inside a Telkom customer service centre (my WiFi is down and I reported it last night so maybe how telkom got into dreams).
08F: 22:XX:XX

Dreamt of cuddling a small puppy - except that it lay in my lap purring.
Dreams about the dog - can’t remember details.

Danger
The gentleman was speaking into a microphone which I thought was odd as there was no audience. His tone began to change and I immediately felt uneasy. I noticed a large red arcade-machine-style button next to a "gangplank" and immediately assumed I was going to be thrown off this platform. The gentleman then began speaking about a vendetta against my father and how he was going to exact his revenge on me. I ziplined off the platform into the "wilds" below.

I had a weird dream, in my dream I was here at Durban. Somehow I got lost on my way to residence winterton I found myself in a weird place that I never seen and it was getting late I met my friend and she tried to help me to find my way back she failed because other boys wanted to take her phone so she managed to run and escape and left me with those boys I fought with them they were holding big knifes and they said they want to cut me into 2 pieces. I tried running away met a guy who was driving a car. I asked for help, he said he's not going to be able to get back now even if you want because it's late no taxis are available suddenly the guys who were chasing me got me and I was still running without any help til I woke up in the morning. It was so sad.

We were going to some sort of nature spot (might be kranzkloof). I was in the back seat with “M” and “A” was driving my car. We were driving on some really steep gravel roads. At some point I thought we were going to fall off the road, it was that steep. “A” was in good control though. I closed my eyes. Of course hardcore “M” kept hers open firmly fixed on the road ahead and talked through the navigation with “A”, eventually informing me when we had arrived safely.
Directions/navigation
I remember an intersection and down/up every road came one of those entities with a dead look on their face.
01M: 06:XX:XX

My recurring dream is taking new directions but all based on the same theme of not being able to complete a task.
3AF: 10:XX:XX

We were going to some sort of nature spot (might be kranzkloof). I was in the back seat with “M” and “A” was driving my car. We were driving on some really steep gravel roads. At some point I thought we were going to fall off the road, it was that steep. “A” was in good control though. I closed my eyes. Of course hardcore “M” kept hers open firmly fixed on the road ahead and talked through the navigation with “A”, eventually informing me when we had arrived safely.
12F: 28:XX:XX

Amorous
Dreamed I was having sex with boyfriend - don't remember details but I felt quite disembodied - as if I was observing rather than feeling.
08F: 20:XX:XX

Then I ended up in a building that seemed like prefab classrooms, suddenly I was sitting in a bus but the seats were more like school desks and benches. I was in the bus with men and the person next to me has his hand under the desk and up under my skirt and was fingering me. Everyone was dressed in army overalls. A man with thick brown hair and bushy moustache and eyebrows noticed what we were doing and raised an eyebrow.
08F: 26:XX:XX
Teamwork

It concerned figure (my sister) and us working together on a project. It was super important that we are paired otherwise it felt like it just wouldn't work. Details fuzzy but once again it seemed like something that concerned me the whole night.
12F: 13:XX:XX

I dreamt of seed and I driving around and around the same block in a neighbourhood (in Australia? I think) trying to find someone/something so we can shoot for mushroom hour. Think it's related to the video he is currently editing for them and my recurring thoughts about his as a potential partner.
12F: 17:08:55

Approach/method involving more people, collaborative changing the way things have been done, involves trials. Revolutionary. Doubters at first but efficiency becomes clear. Sitting in circles.
12F: 22:XX:XX

We were going to some sort of nature spot (might be kranzkloof). I was in the back seat with "M" and "A" was driving my car. We were driving on some really steep gravel roads. At some point I thought we were going to fall off the road, it was that steep. "A" was in good control though. I closed my eyes. Of course hardcore "M" kept hers open firmly fixed on the road ahead and talked through the navigation with "A", eventually informing me when we had arrived safely.
12F: 28:XX:XX

Challenge

Was having hectic dreams but couldn't surface on what even on waking - feeling of dreams was struggling to do things, challenge.
08F: 10:XX:XX

Dreamt strange dream about having to move from on work station to the next in a house (like an obstacle course) - but the one was very difficult because there was a low long fanlight shaped window I had to crawl through. This moving
related to some kind of competition or challenge that we had to do (I think Q was also there) was expected to get it right. Next part of dream I was doing ballroom dancing that was also connected to the challenge. At some time the music changed to salsa which was better and less awkward than the pure ballroom.

08F: 13:01:20

Had tiring dreams but can’t remember details. Again feeling of challenges, struggling to accomplish what I had to do - something to do with a conference.

08F: 14:XX:XX

Revenge

The gentleman then began speaking about a vendetta against my father and how he was going to exact his revenge on me. I ziplined off the platform into the "wilds" below.

02M: 01:XX:XX

Sacrifice

Suddenly, I was before an "orc-like" creature with my partner. He advised us that he was going to sacrifice us in the name of his God (I recall the name being in a foreign language). I then escaped and ran through the desert and mall.

02M: 01:XX:XX

Agitated

My brother then saw my uncle in the stands and began to converse with him. I got agitated with him as our uncle was estranged. My father then appeared and then suddenly left.

02M: 01:XX:XX

Own importance

My parents were there and I was shouting "I'm the only intelligent person here" and they were laughing at me for saying this.

3AF: 01:XX:XX
Dream snippet: hordes of people wanting a remedy/product we had.
12F: 24:XX:XX

Healing others
Slept in the afternoon for 2 hours. Had weird dreams about trying to cover my head and my friends head to heal them from the flu, and I was physically covering my head.
10F: 05:XX:XX

Gardening
Before waking was dreaming about making a garden and looking for compost but could only get fertilizer. Was arguing about something/way to do something with boyfriend. I was living somewhere different to reality where I also used the property next door - this was a huge house and garden. I went there and saw various things fruiting well including a huge pumpkin. I couldn't find my pots and compost I'd left there. Someone I didn't know came out aggressively - turned out to be the neighbors mother who was taking care of the house because neighbor had gone overseas. I woke up not knowing what was to come from all my hard work.
08F: 09:07:00

Quarrels
Before waking was dreaming about making a garden and looking for compost but could only get fertilizer. Was arguing about something/way to do something with boyfriend. I was living somewhere different to reality where I also used the property next door - this was a huge house and garden. I went there and saw various things fruiting well including a huge pumpkin. I couldn't find my pots and compost I'd left there. Someone I didn't know came out aggressively - turned out to be the neighbors mother who was taking care of the house because neighbor had gone overseas. I woke up not knowing what was to come from all my hard work.
08F: 09:07:00
Real feeling
I thought I had to fetch someone/give them a lift (can't believe I don't remember the details or that it isn't real) and I couldn't fully relax cause I didn't want to forget/be late. It's even what got me up. Maybe it's a symbol of my yoga class. I do need to get moving for that.
12F: 12:XX:XX

Judged
Dreamt about a house I've sort of dreamt about before - it's a semi underground house I'm renting, it's super big but there are parts I don't go into because they are dark. The lounge is against the mountain. Q has invited guests to come stay - friends of his and I'm feeling very awkward and uncomfortable because they are judgmental people. I'm considering if I could get them to rent the part of the house I don't use so we are in separate spaces. dreams of houses with many rooms normal, bf dreams unusual
08F: 17:XX:XX

Dead friends
I had an afternoon nap and I kept dreaming of my friend who recently passed and other friends.
10F: 23:XX:XX

Muddy water
Had dreams - remember snippets… Was walking around looking for someone - think it was my boyfriend. On 2 occasions I ended up falling into a very dirty brown slimy lake and had to swim to get out.
08F: 26:XX:XX

4.3.28 Chill
Woke up like this: pale, nauseous, no energy, shaking, cold/ hot (4 blamkets to keep me warm). Sneeze attack.
22F: 11:XX:XX
Weakness. Cold and Shaky.
01M: 15:XX:XX

**4.3.29 Fever**

High fever.
09AM: 07:XX:XX

**4.3.30 Perspiration**

I woke up a few times during the night to wee and was sweating at some points - what a warm night. I do feel well rested though.
12F: 03:XX:XX

Had an interesting intense sexual convo I began hot sweats on and off.
01M: 05:19:00

In the afternoon, was feeling hot, sweaty and had no energy.
10F: 06:XX:XX

**4.3.31 Skin**

**Itching without eruption**

Fingertips on right hand now incredibly itch but it feels like an itch inside the fingers - not on surface. Rubbing fingers hard helps.
08F: 01:14:00

Extreme itches all over, prickles round elbow on left arm - had to check no gogga up my sleeve.
08F: 02:22:30

Itching on left hand and right arm
24F: 02:XX:XX
Random itchy skin - arms on crook and outside, back, eyebrows, scalp, outer and inner thighs but no sign of rash or discolouration.
08F: 02:XX:XX

Arm started itching at around 11am for no reason.
24F: 03:XX:XX

Head started to itch around 9pm.
24F: 04:XX:XX

Itchy arms again especially right arm.
08F: 10:12:30

Itchy skin on arm and scalp.
24F: 11:XX:XX

Skin has been feeling dry and itchy today especially legs, colder windy weather.
08F: 23:XX:XX

**Eruption**

I had an eruption of papules that looked like a mosquito bite. On the ankle (legs) and flexors surface. I am not sure of what seem to be the cause. Better for scratching it will give a relieve as they were itchy. Worse for not scratching. [4 or 5 bumps: FUR]
15F: 00:XX:XX, 02:07:30

Noticed a few pimples on my chest.
08F: 06:XX:XX

Prickly feeling on fingers and arms (inside and outside again) for about 10min. Have few small red spots on inside of right arm and arm pits feeling itchy.
08F: 07:22:00
Pimples on shoulders and chest. Bleeding on waking [Scratches in sleep: FUR].  
01M: 15:XX:XX

I have a bump on my neck on the right side that I noticed yesterday - not sure if it's a pimple or a bite, very itchy.  
08F: 26:16:00

**Dryness**

Skin has been feeling dry and itchy today especially legs, colder windy weather.  
08F: 23:XX:XX

**Heat**

Hot to touch with sensation of skin burning.  
01M: 15:XX:XX

**4.3.32 Generals**

**Energy Increase**

More energy than normal.  
29M: 00:XX:XX

Energy picking up again (coffee at 4pm but didn't taste nice).  
08F: 01:16:30

Had a fairly energetic day - didn't feel as tired as normal.  
08F: 02:XX:XX

Woke up with good energy.  
15F: 02:XX:XX

My day was productive. No lack of energy.  
01M: 03:23:00
Increased energy.
29M: 07:XX:XX, 08:XX:XX

Had a lot of energy today.
27F: 08:XX:XX

More energetic.
28M: 08:XX:XX

Felt like I had a lot of energy today.
29M: 15:XX:XX

I felt like I can take a long run. I am more energetic with sharp appetite.
14M: 17:XX:XX

Entirely stressful and exhausting day, but I'm feeling quite hyper from the intense concentration.
08F: 18:19:00

Energy and focus was good throughout the day.
12F: 19:XX:XX

Very busy workshop day. I was fairly awake considering the lack of sleep.
08F: 25:XX:XX

Weakness
Very tired. Fall asleep during the day for few minutes.
09AM: 04:XX:XX

I’m totally pooped. Dance class kicked my ass. Enjoyed class I taught this evening. Afterwards felt energized and strong during dance class. Always surprised how much concentration and mindfulness required to remember the steps.
Malaise… want to sleep.

09AM: 05:XX:XX, 06:XX:XX, 08:XX:XX, 19XX:XX, 21:XX:XX

Woke up feeling as sick as a dog, because of the flu. Had no energy… Definitely one of the worst flu's ever.

10F: 05:XX:XX

Felt quite exhausted. Spent most of the day in the sun. Quite certain exhaustion is from prolonged sun exposure. Going to have a nap.

02M: 06:15:30

Woke up from my nap, feeling a bit more rested but still quite exhausted. Body felt tired but did not feel the need to sleep.

02M: 06:17:43

In the afternoon, was feeling hot, sweaty and had no energy.

10F: 06:XX:XX

Decreased energy.

28M: 06:XX:XX

Extreme fatigue and malaise. High fever. Sputum yellow. Heavy chest. Mucous from nose is yellow. Sore throat is severe.

09AM: 07:XX:XX,

Feeling weak.

22F 09:XX:XX

Malaise.

Felt pretty sapped rest of the day. Only time today I didn't feel sapped is when I was cooking. Really didn't feel like it but got into it once I was in the zone. I want to get to a point where cooking is effortless.

12F: 10:XX:XX

Don't have much energy, probably due to the flu. So I'm not doing much activity throughout the day. I'm just enjoying TV.

10F: 11:XX:XX

I still have flu, and I'm feeling really tired. I just have a running nose.

10F: 12:XX:XX

Focus improving but tiredness increasing.

08F: 15:13:30

Weakness. Cold and Shaky.

01M: 15:XX:XX

Not eating didn't help tiredness/naarness.

3AF: 21:XX:XX

Still feeling tired, can't concentrate to think on content at work.

08F: 23:19:00

Increase hunger, increase thirst, increase urination, fatigue.


**Food and Drinks**

**Desire**

I just craved junk food in the afternoon. I originally wanted fish and chips but did spur cause S wanted to have a drink.

12F: 16:XX:XX
Appetite is low. Only feel like eating comfort food but also feel like I’ve had too much starch - need protein (I have had this Naar feeling sometimes before - not often).
3AF: 20:XX:XX

-Alcohol
Had amarula at bar with colleagues unusually feeling like alcohol.
08F: 25:19:30

-Bread
Hunger!!! It felt as if I last ate I'm the afternoon. This hunger is sharp that I have to take something. The hunger and sharpness is much felt as if it is from the heart. In my stomach there is no excoriation but hunger. I crave something like a bit dried bread, more like an opened/ out of plastic slice, brown bread slice (not my favorite things).
14M: 03:23:52

I woke up with just this craving for starchy things like bread or rice.
14M: 19:XX:XX

-Carbonated drinks
I began to feel those cramps again and a bit nauseous and hot. I felt better after having something sugary to drink.
01M: 01:15:00

Craving fizzy drinks. No specific flavor.
27F: 01:XX:XX

Been craving ginger beer, bought 2 this week! Sweet, cool, fizzy, ginger.
08F: 16:07:30

Very thirsty - drinking lots of sparkling water.
08F: 24:21:00
There was some leftover coke in the fridge (part of unhealthy wave) and pack of cigarettes on the table. So I randomly had a coke and a smoke. It was a weird impulse. Maybe I miss the smoking action.

12F: 27:XX:XX

-Coffee with Cigarettes

Craving for coffee.
09AM: 00:XX:XX, 01:XX:XX,

Having more coffee and smoking more cigarettes.

Having more coffee and smoking less.

-Eggs

Craving fried eggs with runny yoke.
09AM: 16:XX:XX,

-Rich food

Very hungry today, craving big and rich meal.
08F: 22:12:00

-Meat

Appetite is low. Only feel like eating comfort food but also feel like I've had too much starch - need protein (I have had this Naar feeling sometimes before - not often).
I woke up craving for a chilly checked meal that has soup "lol". Now I'm planning to go prepare it. And I have to eat meat alone.

I crave salty meat which is spiced. I had to wake up and cook beef stew, to eat it alone with no starch.

Aversions

Appetite is low. Only feel like eating comfort food but also feel like I've had too much starch - need protein (I have had this Naar feeling sometimes before - not often).

I do not feel like eating (whole rolled) oats anymore! Miss my green smoothies! I am buying kale when I get back to Durban.

Ameliorations

I began to feel those cramps again and a bit nauseous and hot. I felt better after having something sugary to drink.

Temperature

-Hot

Am feeling the heat today. Feeling very hot post supper.

In the afternoon, was feeling hot, sweaty and had no energy.
Feeling incredibly hot - fan isn't helping much, though usually it makes me too cool and I turn it down to slow.
08F: 07:22:00

I kept getting hot flashes, which I could feel up to my feet. They ended around 16h08.
01M: 09:14:00

Heat coming and going, worse in the mornings. Hot to touch.
01M: 15:XX:XX

Also extremely hot, very thirsty.
08F: 17:XX:XX

-Cold

Very drowsy, managed to focus and do some things. Feeling cold.
08F: 23:XX:XX

I found the aircon in the movie extremely cold but friend found it fine.
08F: 28:XX:XX

-Pain

I was on my bed when I got an intense body shock I felt fine afterward and went to bed.
01M: 05:22:05

My body is feeling so achey as if I've done heavy physical exercise but haven't - aching from my feet up.
08F: 14:XX:XX

Feels as if whole body is sore, worse in the head.
01M: 15:XX:XX
Time

At 5pm the symptoms ceased and didn’t return that day.
06M: 00:17:00

At around 5pm at work I noticed both symptoms had disappeared.
06M: 01:17:00

I kept getting hot flashes, which I could feel up to my feet. They ended around 16h08.
01M: 09:14:00

Weather

Very muggy day although overcast - want less clothing and no shoes.
08F: 10:XX:XX

4.4 Repertory

4.4.1 Key

All the rubrics from the *Anthropoides paradiseus* proving are presented as follows:

**CHAPTER – RUBRIC – subrubric – frequency – page number**
The rubrics were derived from the *Essential Synthesis* by Schroyens (2012).

4.4.2 RUBRICS

4.4.2.1 Mind

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### PAIN

- **Tongue**
  - left side: 08, 10, 10, 634
  - morning: 10, 635
  - Tip: stitching pain: 10, 637

- **Anterior part**: 08, 636

### TASTE

- altered
  - eating, after agg: 08, 648
  - of eaten: 08, 651
  - strong; too: 08, 655
  - slimy: 27, 27, 654
  - sweetish: 08, 27, 655

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- **afternoon**: 16
- **evening**: 08
- **night**: 16, 16, 16
- **night – waking; on**: 24
- **headache – during**: 08
- **heat – during**: 08
- **large quantities; for**: 08, 08, 08

### UNEASINESS

- **01**: 790

### 3.4.3.12 Abdomen

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PRICKLING – stool – during agg 08 932

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<td>ERUPTIONS - pustules</td>
<td>01, 08</td>
<td>1765</td>
</tr>
<tr>
<td>HEAT – sensation, of</td>
<td>01</td>
<td>1775</td>
</tr>
<tr>
<td>ITCHING</td>
<td>08, 08, 24, 24</td>
<td>1777</td>
</tr>
<tr>
<td>ITCHING – dryness, from</td>
<td>08</td>
<td>1778</td>
</tr>
<tr>
<td>ITCHING – eruptions - without</td>
<td>08, 24, 24, 24</td>
<td>1778</td>
</tr>
<tr>
<td>PALE – discoloration; pale</td>
<td></td>
<td>1751</td>
</tr>
</tbody>
</table>
### Generals

<table>
<thead>
<tr>
<th>Rubric</th>
<th>Frequency</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>COLD – air – agg</td>
<td>08, 09</td>
<td>1812</td>
</tr>
<tr>
<td>ENERGY – excess of energy</td>
<td>01, 04, 04, 04, 08, 12, 14, 15, 27, 29</td>
<td>1838</td>
</tr>
<tr>
<td>FOOD AND DRINKS – alcoholic drinks – desire</td>
<td>08, 12</td>
<td>1846</td>
</tr>
<tr>
<td>FOOD AND DRINKS – bread – desire</td>
<td>14, 14</td>
<td>1847</td>
</tr>
<tr>
<td>FOOD AND DRINKS – carbonated drinks – desire</td>
<td>01, 08, 08, 12, 27</td>
<td>1848</td>
</tr>
<tr>
<td>FOOD AND DRINKS – Coffee – desire</td>
<td>9a, 9a, 9a, 9a, 9a, 9a, 9a, 9a, 9a, 9a</td>
<td>1849</td>
</tr>
<tr>
<td>FOOD AND DRINKS – rich food – desire</td>
<td>08, 12</td>
<td>1858</td>
</tr>
<tr>
<td>FOOD AND DRINKS – light food - desire</td>
<td>3a, 12</td>
<td>1854</td>
</tr>
<tr>
<td>FOOD AND DRINKS – meat - desire</td>
<td>3a, 14, 14</td>
<td>1855</td>
</tr>
<tr>
<td>FOOD AND DRINKS – soda water – desire</td>
<td>08</td>
<td>1859</td>
</tr>
<tr>
<td>FOOD AND DRINKS – sweets – desire</td>
<td>08</td>
<td>1860</td>
</tr>
<tr>
<td>HEAT – flushes of - daytime</td>
<td>01, 08</td>
<td>1865</td>
</tr>
<tr>
<td>HEATED, BECOMING</td>
<td>08, 08, 10</td>
<td>1868</td>
</tr>
<tr>
<td>PAIN – aching</td>
<td>08</td>
<td>1897</td>
</tr>
</tbody>
</table>
SHOCK – electric-like – evening - bed agg; in 01, 1937
SMOKING – desire for 9a, 9a, 9a, * 12

SWELLING – Glands; of – painful 08 1947
WEAKNESS 01, 02, 02, 3a, 3a, 08, 1963

4.5 Ethological Comparison

The symptoms which arose during the homeopathic drug proving of *Anthropoides paradiseus* 30CH were compared to the ethology of the substance. A summary of this comparison is given in table 4.3 below and discussed in 5.4.2 to 5.4.38.

Table 4.3: Prover symptoms compared to the ethology of the substance.

| Symptom                | Prover                        | *Anthropoides paradiseus*
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Behaviour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Isolated in Spring</td>
<td>18F [06:XX:XX] [17:XX:XX]; 10F [27:XX:XX]</td>
<td>• Dispersed as breeding pairs in warmer months. • Distributed away from human activity.</td>
</tr>
<tr>
<td>Topic</td>
<td>Time and Date</td>
<td>Description</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>---------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Sociable in Autumn</td>
<td>08F [03:XX:XX]</td>
<td>Flee when stressed.</td>
</tr>
<tr>
<td></td>
<td>[05:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>12F [01:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Flocking after summer.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Noisy birds in flocks.</td>
</tr>
<tr>
<td>Dreams of collaboration</td>
<td>12F [13:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[17:08:55] [22:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[28:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Dancing</td>
<td>08F [27:16:XX];</td>
<td>Young dance as part of motor development.</td>
</tr>
<tr>
<td></td>
<td>12F [19:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Desires dancing</td>
<td>08F [11:23:00];</td>
<td>Dancing thwarts aggression.</td>
</tr>
<tr>
<td></td>
<td>12F [04:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Dreams of dancing</td>
<td>08F [13:01:20];</td>
<td>Primary aspect of courtship is the “dance”.</td>
</tr>
<tr>
<td></td>
<td>10F [08:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Desire to run</td>
<td>14M [17:XX:XX] [FUR];</td>
<td>Courtship involves running in circles.</td>
</tr>
<tr>
<td></td>
<td>15F [FUR]</td>
<td></td>
</tr>
<tr>
<td>Dreams of singing, waking with song on mind</td>
<td>08F [08:01:00]</td>
<td>Vocal displays.</td>
</tr>
<tr>
<td></td>
<td>[15:XX:XX]</td>
<td>Call at dawn and dusk.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Song important.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Communication important.</td>
</tr>
<tr>
<td>Instincts and intuition</td>
<td>03aF [06:XX:XX];</td>
<td>Rely on instinctive behaviour.</td>
</tr>
<tr>
<td></td>
<td>12F [05:XX:XX]</td>
<td></td>
</tr>
<tr>
<td><strong>Cleaning</strong></td>
<td>08F [21:15:00] [21:21:00] [22:16:30]; 12F [17:XX:XX]</td>
<td>• Female cleans the nest site.</td>
</tr>
<tr>
<td><strong>Desire to decorate</strong></td>
<td>12F [16:XX:XX]</td>
<td>• May build elaborate nests decorated with pebbles.</td>
</tr>
</tbody>
</table>
• Navigate using a magnetic sense. |
| **Dreams of wild landscapes** | 02M [01:XX:XX]; 08F [01:XX:XX] [26:XX:XX]; 12F [28:XX:XX] | • Found in Highveld grasslands, the Karoo and semi-desert habitats.  
• Often nest near water. |
<p>| <strong>Swimming without fear</strong> | 10F [30:XX:XX] | • Young are known to be good swimmers. |
| <strong>Stress and anxiety</strong> | 03aF [00:XX:XX] [12:XX:XX]; 24F [12:XX:XX]; 25F [01:XX:XX]; 10F [04:XX:XX] | • Susceptible to stress from physical and behavioural disturbance, unfamiliar territories and disease. |
| <strong>Dreams of seeking protection</strong> | 01M [06:XX:XX]; 02M [01:XX:XX]; 15F [13:XX:XX] | • Young cranes seek protection from their parents when threats are near. |
| <strong>Sleeping covering head</strong> | 10F [05:XX:XX] | • May sleep with head drawn to the rear, with bill tucked into scapular feathers. |</p>
<table>
<thead>
<tr>
<th>Spring libido</th>
<th>01M [FUR]</th>
<th>• Highly sexed during mating and breeding seasons.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>• Aggressive displays involving shaking.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Shivering thermogenesis.</td>
</tr>
</tbody>
</table>

### Anatomical and Physiological Adaptations

|                              |                                    | • Beneficial olfactory system.                           |
|                              |                                    | • Acute sense of smell.                                  |
|                              |                                    | • Highly developed hearing.                              |
|                              |                                    | • Sensitive to low frequencies.                          |
|                              |                                    | • Stressed by loud vehicles.                             |

<p>| Attraction to colours        | 08F [14:XX:XX]                   | • Able to perceive a greater spectrum of colours.        |
|                            |                                 | • Pale bluish grey plumage.                              |
|                            |                                 | • Dark brown irises, pinkish bill, black legs.           |
|                            |                                 | • Chicks have greyish down with a ginger crown.           |</p>
<table>
<thead>
<tr>
<th>Large quantities of food</th>
<th>01M [04:17:11] [15:XX:XX]; 08F [22:12:00]; 14M [02:20:00] [03:23:52] [09:XX:XX] [15:XX:XX]; 15F [FUR]; 25F [01:XX:XX]</th>
<th>• Consumes large quantities of food.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appetite increase in Autumn</td>
<td>08F [22:12:00] [23:XX:XX]; 12F [02:XX:XX]; 14M [01:23:00] [02:20:00] [03:23:52] [09:XX:XX] [15:XX:XX] [17:XX:XX]; 15F [FUR]; 29M [02:XX:XX] [03:XX:XX] [04:XX:XX] [05:XX:XX] [12:XX:XX] [16:XX:XX]</td>
<td>• Seasonal cycles in appetite. Increase in food consumption in Autumn, decrease in Spring.</td>
</tr>
<tr>
<td>Appetite decrease in Spring</td>
<td>20F [01:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Desires protein</td>
<td>03aF [20:XX:XX]</td>
<td>• High caloric foods consumed.</td>
</tr>
<tr>
<td>Desires rice</td>
<td>14M [19:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Desires comfort food</td>
<td>03aF [20:XX:XX]</td>
<td></td>
</tr>
<tr>
<td><strong>Desires rich meal</strong></td>
<td>08 [22:12:00]</td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Desires meat</strong></td>
<td>14M [21:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[24:XX:XX]</td>
<td></td>
</tr>
<tr>
<td><strong>Regular bowel</strong></td>
<td>14M [16:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>movements</td>
<td>[20:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[21:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[22:XX:XX]</td>
<td>• Highly efficient digestive system.</td>
</tr>
<tr>
<td><strong>Diarrhoea after</strong></td>
<td>12F [17:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>eating chicken</td>
<td></td>
<td>• Most droppings result from foods eaten with high protein content.</td>
</tr>
<tr>
<td><strong>Energy increase</strong></td>
<td>01M [03:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>08F [01:16:30]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[02:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[25:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>12F [19:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>14M [17:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>15F [02:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>27F [08:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>28M [08:XX:XX];</td>
<td></td>
</tr>
<tr>
<td></td>
<td>29M [00:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[07:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[08:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[15:XX:XX]</td>
<td>• A high metabolism is required for the large energy output in a body of low weight. In order for this, a basal temperature of approximately 40 to 43°C is maintained.</td>
</tr>
<tr>
<td><strong>Regular stools</strong></td>
<td>14M [16:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[20:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[21:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[22:XX:XX]</td>
<td></td>
</tr>
<tr>
<td><strong>Diarrhoea</strong></td>
<td>03aF [18:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[19:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[20:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>05aM [00:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[01:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[02:XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>12F [17:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Symptom</td>
<td>Time</td>
<td></td>
</tr>
<tr>
<td>-------------------------</td>
<td>--------------</td>
<td></td>
</tr>
<tr>
<td>Hunger and appetite increase</td>
<td>01M [06:XX:XX] [15:XX:XX]; 08F [23:XX:XX] [24XX:XX]; 09aM [26:XX:XX]; [27:XX:XX] [28:XX:XX] [29:XX:XX]; 12F [02:XX:XX]; 14M [01:23:00] [02:20:20] [03:23:52] [09:XX:XX] [15:XX:XX] [17:XX:XX]; 15F [FUR]; 16M [01:XX:XX]; 22F [06:XX:XX]; 24F [23:XX:XX]; 25F [01:XX:XX]; 27F [02:XX:XX]; 29M [02:XX:XX] [03:XX:XX] [04:XX:XX] [05:XX:XX] [12:XX:XX] [16:XX:XX]; 30F [18:XX:XX];</td>
<td></td>
</tr>
<tr>
<td>Perspiring</td>
<td>01M [05:19:00]; 10F [06:XX:XX]; 12F [03:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Feeling hot</td>
<td>09aM [07:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Fever</td>
<td>01M [09:14:00] [15:XX:XX]; 08F [06:XX:XX] [07:22:00] [17:XX:XX];</td>
<td></td>
</tr>
<tr>
<td>Time</td>
<td>Symptom and Description</td>
<td></td>
</tr>
<tr>
<td>------</td>
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<td></td>
</tr>
<tr>
<td>10F [06:XX:XX]</td>
<td>Polyuria, polydipsia, polyphagia and fatigue</td>
<td></td>
</tr>
<tr>
<td>09aM [26:XX:XX] [27:XX:XX] [28:XX:XX] [29:XX:XX]</td>
<td>High levels of blood glucose.</td>
<td></td>
</tr>
<tr>
<td>22F [03:XX:XX]; 08F [18:XX:XX]</td>
<td>Fullness sensation in the head</td>
<td></td>
</tr>
<tr>
<td>22F [05:XX:XX] [07:XX:XX] [08:XX:XX]</td>
<td>Swollen head appearance.</td>
<td></td>
</tr>
<tr>
<td>22F [05:XX:XX] [07:XX:XX] [08:XX:XX]</td>
<td>Large cerebrum.</td>
<td></td>
</tr>
<tr>
<td>22F [05:XX:XX] [07:XX:XX] [08:XX:XX]</td>
<td>Stress can interfere with the onset and maintenance of reproduction.</td>
<td></td>
</tr>
<tr>
<td>08F [11:14:45]</td>
<td>Sternal swelling</td>
<td></td>
</tr>
<tr>
<td>14M [09:XX:XX]</td>
<td>Extension of stomach</td>
<td></td>
</tr>
<tr>
<td>14M [09:XX:XX]</td>
<td>Extension of stomach known as the crop.</td>
<td></td>
</tr>
<tr>
<td>01M [01:15:00] [01:07:00] [01:15:00] [04:17:11]; 05aM [00:XX:XX] [01:XX:XX] [02:XX:XX]; 10F [05:XX:XX]; 12 [02:XX:XX]</td>
<td>Abdominal cramps</td>
<td></td>
</tr>
<tr>
<td>01M [01:15:00] [01:07:00] [01:15:00] [04:17:11]; 05aM [00:XX:XX] [01:XX:XX] [02:XX:XX]; 10F [05:XX:XX]; 12 [02:XX:XX]</td>
<td>Stones grinded in the gizzard.</td>
<td></td>
</tr>
<tr>
<td>08F [25:XX:XX]; 17M [11:XX:XX] [14:XX:XX];</td>
<td>Battling to breathe</td>
<td></td>
</tr>
<tr>
<td>08F [25:XX:XX]; 17M [11:XX:XX] [14:XX:XX];</td>
<td>Small compact respiratory system</td>
<td></td>
</tr>
<tr>
<td>Condition</td>
<td>Date/Time</td>
<td>Description</td>
</tr>
<tr>
<td>-------------------------</td>
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<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Requires two cycles of</td>
<td>30F [13:XX:XX]</td>
<td>Requires two cycles of respiration to pass air</td>
</tr>
<tr>
<td>respiration to pass air</td>
<td></td>
<td>through.</td>
</tr>
<tr>
<td>Heavy heart</td>
<td>09aM [07:XX:XX];</td>
<td>Large heart</td>
</tr>
<tr>
<td></td>
<td>10F [05:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Palpitations</td>
<td>24F [02:XX:XX]</td>
<td>General rapid heart rate.</td>
</tr>
<tr>
<td></td>
<td>[03:XX:XX];</td>
<td>Increased heart rate with fear.</td>
</tr>
<tr>
<td></td>
<td>10F [04:XX:XX]</td>
<td></td>
</tr>
<tr>
<td>Angina</td>
<td>14M [02:08:23]</td>
<td>Prone to atherosclerosis.</td>
</tr>
<tr>
<td></td>
<td>[02:18:34]</td>
<td></td>
</tr>
<tr>
<td>Left sided</td>
<td>01M [15:XX:XX];</td>
<td>High brain lateralization.</td>
</tr>
<tr>
<td></td>
<td>[01:09:45] [01:12:26]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[01:14:00] [02:22:30]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[02:06:45];</td>
<td>Sidedness of the species.</td>
</tr>
<tr>
<td></td>
<td>09aM [00: XX:XX]</td>
<td></td>
</tr>
<tr>
<td></td>
<td>[01: XX:XX] [02: XX:XX]</td>
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<td>[03: XX:XX] [04: XX:XX]</td>
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<td>[05: XX:XX] [06: XX:XX]</td>
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<td>[07: XX:XX] [08: XX:XX]</td>
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<td></td>
<td>[09: XX:XX] [10: XX:XX]</td>
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<td></td>
<td>[11: XX:XX] [12: XX:XX]</td>
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<td>[13: XX:XX] [14: XX:XX]</td>
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<td>[15: XX:XX] [16: XX:XX]</td>
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<td>[17: XX:XX] [18: XX:XX]</td>
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<td>[19: XX:XX] [20: XX:XX]</td>
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<td>[21: XX:XX] [22: XX:XX]</td>
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<td></td>
<td>[23: XX:XX] [24: XX:XX]</td>
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<td></td>
<td>[25: XX:XX] [26: XX:XX]</td>
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<td></td>
<td>[27: XX:XX] [28: XX:XX]</td>
<td></td>
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<tr>
<td></td>
<td>[29: XX:XX];</td>
<td></td>
</tr>
<tr>
<td>Right sided symptoms</td>
<td>08F [01:12:26] [01:14:00] [07:22:00] [08:15:15] [10:12:30] [10:17:45] [11:06:30] [14:22:28] [17:06:45] [23:05:00] [26:16:00] [28:XX:XX]; 10F [06:XX:XX]; 12F [12: XX:XX] [14: XX:XX] [23: XX:XX]; 14M [02:08:23] [06:06:33]; 16M [04:XX:XX]; 18F [10:XX:XX]; 20F [04:XX:XX]; 24F [02:XX:XX]; 30F [02:XX:XX].</td>
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CHAPTER FIVE: DISCUSSION OF THE RESULTS

5.1 Introduction

This chapter is comprised of a discussion of the symptoms and an overview of the themes arising from the homoeopathic drug proving of *Anthropoides paradiseus* 30CH. The themes and symptoms that were experienced during this proving were considered to be characteristics of the remedy. The representative, characteristic symptoms of the remedy were used as a basis for the comparison to the ethology of the substance.

It was hypothesized that the 30CH potency of *Anthropoides paradiseus* would produce clearly observable proving symptoms in healthy provers. The data obtained from the homoeopathic proving serves as evidence to support the hypothesis, and it was therefore concluded that the hypothesis is valid. It was further hypothesized that a comparison of those proving symptoms to the ethology of *Anthropoides paradiseus* would expand and offer a clearer understanding of the therapeutic field of the substance. The discussion in 5.4 validates this hypothesis.

A total of five hundred and seventy-four rubrics were formed from the collected data (see table 5.1). Thereafter, the rubrics were divided into their respective sections in the homoeopathic materia medica. Table 5.1 illustrates the number of rubrics in each section.

<table>
<thead>
<tr>
<th>SECTION</th>
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<td>Abdomen</td>
</tr>
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<td>Rectum</td>
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Table 5.1: Number of Rubrics
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<td>Fever</td>
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<td>Cough</td>
<td>10</td>
<td>Generals</td>
<td>18</td>
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<td>Stomach</td>
<td>45</td>
<td>Expectoration</td>
<td>4</td>
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</tr>
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</table>

| TOTAL | 574 |

### 5.2 Abbreviation of the remedy

The remedy of *Anthropoides paradiseus* will be abbreviated to *Anthro-p*.

This system of abbreviation uses the Latin or scientific name of the substance which then corresponds to the root and extension of the remedy abbreviation. The root “*anthro*” was chosen by the researcher. Added to the root is the extension “-p” to indicate the specific species.

### 5.3 The Symptoms

Sherr (1994: 32) states the importance of the entire proving being observed as if it were occurring in a single individual. This serves to view the symptoms arising in this proving as a whole, and provides a better understanding of the remedy. This discussion attempts to amalgamate the proving symptoms from all provers as though it was experienced by one individual.

#### 5.3.1 Mind

**Calmness and Anxiety**

A feeling of calmness was experienced by Provers 01M, 08F, 12F and 14M. Provers 01M, 08F and 14M experienced a sense of calm with regards to their work and studies. Despite the pressure to study for a test from which he had procrastinated, Prover 14M felt calm and stress free. Prover 08F felt the same
feeling of calmness despite the pressure of her work day, and on another occasion felt unusually calm and able to cope in a usually irritating environment.

Prover 14M experienced calmness with a sense of being in control of his environment. He also experienced a great sense of calm when listening to a song (Whitney Houston ft. Akon - like I never left); a feeling he hadn’t felt for years. The song took him to a peaceful place, reminding him of a moonrise in a clear night sky.

Prover 12F felt calm during her day after morning meditation but also experienced calmness with an even temperament despite not partaking in her usual calming practice of meditation. The feeling of calmness was also brought about by being artistic.

Anxiety was experienced by Provers 3aF, 10F, 24F and 25F. 3aF seemed to absorb the emotions of another woman who drained her energy and left her feeling heavy and anxious. She also experienced a debilitating anxiety from her thoughts around losing a small item and having to find it which caused her to remain in bed, stressing further. Prover 10F experienced anxiety with heart palpitations before taking a nap in the afternoon while Prover 24F woke up anxious in the morning. An unreasonable anxiety was felt by Prover 25F regarding work which she knew she had no reason to stress over.

Anxiety was marked in the dreams of provers, namely Provers 01M, 02M, 06M, 08F and 10F (see 5.3.27.). In Provers 01M, 02M and 06M this was in response to being pursued. Provers 08F and 10F could not remember the dream but felt they were stressful.

**Concentration and Inattention**

*Anthropoides paradiseus* 30CH improved the alertness and concentration in Provers 05aM, 12F, 14M and reduced it in Provers 08F and 10F. Prover 05aM “suddenly felt more alive and alert”. Prover 12F experienced an increase in her productivity and energy with her improved focus.
Prover 10F struggled to focus while studying and Prover 08F experienced a lack of focus and zoning out while working, especially whilst tired. On one occasion, however, Prover 08F experienced her focus improving while her tiredness was increasing.

**Music and Movement**

Being affected by music and the desire to exercise and dance was marked in this proving.

Prover 14M was moved one night upon hearing the song “Like I never left - Whitney Houston featuring Akon” which is about reconciling lovers. The song gave him goose bumps and took him “to a calm place where it is so peaceful”; a feeling he hadn’t experienced since a teenager. Upon playing the song for the second time he described it as follows: “I'm watching the moon rise up from the east late at night. A calm feeling. Quiet clear sky night.”

Prover 08F became very emotional while listening to music which made her want to dance. She also enjoyed listening to music more than usual during this proving, and danced around her house. Prover 08F also had a dream about ballroom and salsa dancing (see 5.3.27) and woke up on two occasions with songs on her mind. During the proving, Prover 12F began regularly attending a dance class which she attended scarcely prior to and after the proving. She was very excited to attend and enjoyed this class on multiple occasions. Prover 08F also had a dream of dancing.

Gospel music was listened to a lot by Prover 10F. This was accompanied by prayer and Bible reading. She also desired exercise with a desire to “make myself a better person.” Provers 14M and 15F also desired exercise during the proving. Prover 03aF used yoga to “shake off the demons.”
Disconnection and Disorientation

The theme of disconnection from the body and disorientation of the mind and senses was seen throughout this proving.

Prover 08F described not connecting with her body as well as forgetting her basic needs of eating and drinking. Prover 22F disconnected from her “problems” due to being “too stressed”.

Prover 01M felt disorientated with regards to his place upon waking in the middle of the night. For a few days, when waking in the morning, Prover 30F felt disorientated, and stated, “don’t know what day it is and don’t know why I’m waking up”. Prover 22F felt disorientated throughout the day after oversleeping. Prover 12F felt disorientated as to what day it was. Prover 08F also had troubles remembering names and conveying concepts. While introspecting, Prover 03aF was trying to figure out “what is just in my head and what is real”.

A disorientation of the senses was also marked. Prover 08F described her taste of certain substances to be different to what it should be, specifically coffee being sweeter and toothpaste tasting too strong. She also had a heightened sense of smell on multiple occasions, and smelled odours out of nowhere and also became ill and stressed from strong perfumes. Prover 12F had a heightened sense of hearing which angered her.

Dreams were also described as distorted by Provers 02M, 08F, 12F, 30F (see 5.3.27). 02M saw a disorientated sign which appeared back to front. Prover 08F described the feeling of being disconnected from her body or disembodied particularly whilst having intercourse with her boyfriend in a dream. She also dreamt of a dog purring as a cat would. Prover 12F dreamt of an African American celebrity being Caucasian.

Weeping and Sadness

Provers had moments of crying for various reasons during the proving.
Prover 08F felt suddenly weepy on many occasions. She felt weepy and lamented over “the carefree me I used to be”. She also became teary from reading a poem from a friend who passed away. Although she was physically fine, she also described herself as “emotionally a wreck and teary.” Upon seeing a Reach for a Dream advertisement, she also became weepy. She described her emotion as, “can't control weeping for silly things and serious things at the moment.”

Prover 30F cried upon seeing pictures of her horse which she is not near. Prover 22F was homesick and lonely, and due to this she cried herself to sleep.

Prover 10F broke down with emotion due to the grief of losing friends. Prover 01M cried uncontrollably after thinking about a poignant dream that he had had stating, “Maybe it means that I need to forget about my haunting past ‘kill the boy within’.”

Sadness was also experienced by Provers 03aF, 08F and 10F. The sadness felt by Prover 03aF was accompanied by anxiety and was due to empathically feeling another person’s problems. She also felt like she was having what she described as a “mid-winter slump”, which was accompanied by a low mood and staying in bed until late for a few mornings. Prover 08F experienced anger with her sadness. Her sadness was due to thoughts regarding her relationship and on one occasion she felt “like crying but tears not coming out.” Prover 10F also became angry with her sadness, she became sad and short-tempered in response to the grief of her lost friends and on another occasion said hurtful things while sad.

**Productivity**

Provers 10F and 12F experienced an increase in their productivity. Prover 12F managed to accomplish tasks which had been delayed. The productivity reported by prover 10F was more inwardly directed. She had the desire to work hard to become a better person. She began reading the Bible, praying and exercising in order to achieve this goal.
Empathy
Prover 03aF described a sense of emotional absorption from another person, saying she was “emotionally hi-jacked” and was left feeling down, restless, stressed, heavy and anxious.

Heaviness
Emotional heaviness was described by prover 03aF. Heaviness was also described as a sensation in the head (see 5.3.3), the eyes (see 5.3.4), the breasts (see 5.3.18) and the chest (see 5.3.23).

Gregarious and Isolated
An increase in sociability was seen by Provers 08F and 12F. Prover 08F enjoyed greeting people on her way to work while Prover 12F just enjoyed “having someone else around.”

On the contrary, provers 10F, 18F and 25F isolated themselves. Provers 18F and 25F were averse to company and interaction, and Prover 10F was averse to talking about an issue.

Reading
Prover 10F had a marked desire to read more. This was due to a need for self-improvement and a change in mindset. She began reading the Bible more and more books that were inspirational.

Spirituality
A desire to become more involved in spiritual practices was seen in this proving. This was seen in Provers 10F, 13F and 15F. Prover 03aF felt better for prayer and spent a considerable time praying and introspecting. Prover 15F reported feeling more connected.
Laziness
Prover 14M reported feeling too lazy to study for a test. This was accompanied by a feeling of calmness.

Coping
A sense of being able to cope with life’s stressors was seen in Provers 08F and 12F. Prover 08F felt positive and optimistic, also stating that she felt “less weighed down by life and more able to cope.” She also felt able to cope with a normally irritating situation. Prover 12F described herself as “finding her groove” and being “less ruffled by annoying inconveniences.” She coped by working better with her “energies” and became confident in herself and her abilities also stating that her inner will was stronger.

Resolution
Provers 12F, 13F and 14M all experienced a feeling of resolution of personal issues. Provers 12F and 14M felt at peace, 12F with herself and her life, and 14M with a situation which he “let go of old bitterness” and “closed those doors.” Prover 12F felt confident in herself and said that her inner will is now stronger. Prover 13F had a “psychological breakthrough” and felt relief that she is now “moving in a forward direction.”

Introspection
Much introspection was done by Provers 03aF, 08F and 10F. Following an incident in which she experienced a “clash of culture” and generational differences in terms of emotional candidness, Prover 03aF “was a complete mess” and spent a few days introspecting. Her introspection was accompanied by prayer. Prover 12F introspected on “owning all parts of oneself” after having been on a retreat.

Goal Setting
Provers thought about and set goals in various aspects of their lives. Prover 10F had “an action plan of the day” as well as set short-term goals with the urge to
work harder and be a better person. Prover 12F contemplated her career goals throughout the proving process and thought about doing a legal course. She also thought about her travel goals. Prover 15F became focussed on her studies and was driven to pass and do well academically.

**Irritability**

Provers 08F, 10F, 12F and 25F experienced irritability for various reasons. There was a lot of irritability in Prover 08F regarding her relationship and boyfriend. A relationship review left her sad and angry but unable to cry. She also experienced annoyance which caused her to get “a bit snippy with the cutters thinking angry thoughts” in the garden. Feelings of being ignored also caused anger in Prover 08F. She also felt annoyed at peoples’ naivety as well as people stealing attention away from worthy causes.

When irritable, Provers 10F and 25F felt the desire to not talk to people and be alone, respectively. Prover 10F felt depressed with a short-temper in response to the death of two of her friends. Prover 25F felt annoyed when people were talking to her.

The irritability reported by Prover 12F was in response to a car revving its engine outside.

**Social Media**

Various social media platforms were mentioned during this proving. Prover 03aF “said some pretty provocative stuff” while Skyping her parents which led to her being very emotional and introspecting for a few days. Prover 08F expressed her annoyance after reading posts on Facebook. Prover 10F lost all interest in social media and stopped using it completely. Prover 14M actively took charge on his class’s Whatsapp group, giving instructions and informing his classmates of the details of their lecture.
Travel

Prover 12F had thoughts about her travel goals, with Mozambique, Malawi and Japan on her mind. Travel was also seen in the dreams of Provers 03aF, 08F, 12F and 15F (see 5.3.27). Prover 08F dreamt of traveling to Swaziland and Prover 12F to Australia. Prover 03aF dreamt about travelling in a car and missing her offramp. Prover 15F dreamt about getting lost whilst travelling to her home in Winterton. Prover 12F also dreamt about travelling to a “nature spot” but the roads were dangerous.

Artistic

Prover 12F had the desire to decorate her space during the proving. She also spent some time mosaicking which she found calming. Prover 08F felt a marked attraction to various colours which she doesn’t normally desire.

Career

Throughout the duration of the proving, Prover 12F contemplated re-entering the field of law. She had various conversations with friends and family regarding this possibility and thought of partaking in a legal course. Prover 02M mentioned an uncertainty over his career.

The theme of jobs and working came up multiple times during the dreams of various provers (see 5.3.27). Prover 12F had multiple dreams regarding working on certain projects and coming up with new ideas for work. Prover 10F also dreamt about having to come up with an idea for an event. Prover 08F dreamt about developing and approving job descriptions, as well as having to move work stations as part of an obstacle course and moving into a new job.

Homesickness and Longing for the Past

Homesickness was seen in Provers 22F and 30F. Their homesickness was accompanied by crying. Prover 08F expressed lament and longed for the carefree person that she used to be. The song that affected Prover 14M (Whitney Houston
ft. Akon - like I never left) was centred around reconciling a love that was lost and longing for a relationship that once was.

**Intuition**

Following a tragic incident involving a family member, Prover 12F stated, “I felt like I was flowing with the water.” She intuitively dealt with the incident which involved admitting a family member to hospital and was able to accomplish daily tasks. Prover 03aF also had an intuitive moment when an inner voice said to her, "if you tired: sleep, if you hungry: eat, if you sad: cry."

**Seeing the Bigger Picture**

Provers observed the people in their lives and were able to perceive the bigger picture concerning what these people were truly like. Prover 03aF spent many days contemplating the generational and cultural differences between her and her parents. Prover 12F became more aware of her friend stating, “I used to find her patent awkwardness and over sharing endearing but now I just see a bundle of issues that aren't being controlled.” She gained insight into her friend’s issues and tendencies which she did not like.

**Cleaning**

Some provers took to cleaning up their environments during the proving. Prover 12F cleared up her room while Prover 08F spring cleaned her house, and cleaned her garden. She cleaned her house in such a manic fashion that her fingers hurt, and even then, she still could not stop cleaning.

**Miscellaneous Mind Symptoms**

Prover 12F found that she was better at expressing herself instead of holding back what she felt.

Prover 03aF desired to be outdoors. Provers 10F and 22F felt relief from their coryza or rhinitis while outside (see 5.3.6).
Prover 01M felt as if his mind was in overdrive and was tired. Prover 10F also felt that she was overthinking and “in your head all the time.”

Prover 10F noticed she was paying close attention to detail and that her brain was organized.

Prover 10F was afraid of her subconscious and feared falling asleep.

Prover 10F had a bout of courage and faced her fear of swimming.

5.3.2 Vertigo
Vertigo was experienced with a “concomitant” (accompanying) headache by provers 03aF, 08F and 10F. Prover 08F found her vertigo to be worse from turning her head quickly. Nausea and a sensation of fogginess accompanied the vertigo of Prover 03aF. Prover 10F felt dizzy when rising.

5.3.3 Head
Itching
Itching of the head was reported by Provers 08F and 24F. Prover 08F experienced this with generalized itching, of her arms, back, eyebrows, scalp and thighs. Prover 24F had scalp itching accompanied by itchiness of her arm, as well as itching of her head beginning at 21h00.

Pain
Many provers experienced headaches during this proving. These headaches had various locations and occurred at differing times of the day.

Prover 16M described his headache as “just an uncomfortable headache.” He also experienced a headache in the late afternoon following working on his laptop. Prover 08F reported feeling thirsty with a headache. Prover 01M had a headache with tension in his shoulders.
Prover 08F and 13F both experienced dehydration headaches from not drinking enough water on a hot day. Prover 16M experienced a right sided headache behind his eye which was also worse after becoming hot.

**Accompanied Vertigo**

The headache of Prover 08F was accompanied by a sharp pain behind her eyes and dizziness. Moving her head quickly made her dizziness worse. Prover 10F also had a sensation of dizziness with her occipital headache which was aggravated by rising. The headache of Prover 03aF was accompanied by vertigo as well as nausea.

**Left**

Prover 22F experienced a headache over the left half of her head which began behind her eyes. It was accompanied by neck pain and the sensation of sharp spikes in her head. She reported that she also had a lack of sleep and was stressed which may have been the cause of her headache.

Throughout a bout of sinusitis, Prover 09aM experienced symptoms worse on his left side which included a mild headache on the left side of his head with a sensation of heaviness.

**Right**

Right sided headaches were experienced by Provers 16M and 18F. Prover 16M reported a headache on the right side, behind his eye. He stated that there was no pain and only discomfort. This headache was worse after he was hot and started after talking on the phone. Prover 18F experienced a right sided, throbbing headache on the side and back of her head.

**Temples**

Temporal headaches were experienced by Prover 18F. These headaches began in her temples and moved to the top and front of her head.
Occipital

Provers 10F and 18F experienced headaches at the back of their heads. The headache of Prover 10F was accompanied by dizziness upon rising. One headache of Prover 18F began at 11h00 and was relieved by drinking water while the other headache was worse on the right side of her head and was described as throbbing. Prover 01M experienced a headache where his whole body was sore, but “worse in the head.” He described this second headache as “coming and going”, with an uncomfortable feeling in his occiput which was also worse for moving his head.

Behind Eyes

Provers 08F 16M, 17M, 18F and 22F experienced a headache behind their eyes. The headache of Prover 08F had a sharp sensation behind her eyes and was accompanied by dizziness. Prover 16M reported a headache on the right side, behind his eye. This headache was worse after he was hot and started after talking on the phone. The headache of Prover 22F began behind her eyes then moved over the whole left side of her head. She had the sensation of having sharp spikes behind her eyes.

Worse for movement of the head

Prover 02M experienced pain when shaking his head, moving his head slightly and bending over. These movements caused a pulsing sensation, also described as “waves of slight pain.” The headache of Prover 08F was accompanied by a sharp pain behind her eyes and dizziness. Moving her head quickly was also an aggravation for her, making her feel dizzy. Prover 01M reported a headache in his occiput which was “coming and going”, and worse for moving his head.

Dull

Dull headaches were reported by Provers 24F and 25F. Prover 24F had a light, dull headache upon waking which gradually became worse throughout the day, aggravating the most at 19h00. She also experienced a dull headache over her forehead in the afternoon and other slight, dull headaches. Prover 25F
experienced a dull headache on her forehead which was worse when exposed to light and relieved by sleeping.

**Heaviness**

Prover 09aM experienced a sensation of heaviness with a throbbing headache, either of his entire head or the left side of his head. The headache with heaviness of his entire head was accompanied by a cough and wheeze, and at times was also accompanied by the desire to sleep.

**Throbbing**

Provers 09aM, 18F and 24F experienced throbbing headaches. Prover 09aM reported throbbing headaches with a sensation of heaviness throughout the proving. The headaches of Prover 18F were in the morning, in her temples moving to the front of her head, causing eye strain, and another worse on the right side of her head and occiput. Prover 24F experienced relief from her headache at 08h00 and was aggravated at 20h00.

**Sharp**

Prover 08F experienced a sharp headache, on the sides and over the top of her head upon exposure to a cold breeze. She was relieved by being in a warm environment. She also experienced a sharp pain behind her eyes with her headache accompanied by vertigo upon fast movement of her head. Prover 22F had the sensation of sharp spikes in her head with a left sided headache accompanied by neck pain.

**Fullness**

Prover 22F experienced a sensation of fullness in her head. Prover 08F experienced a headache with the sensation that “somebody crammed something extra in and it’s too tight.”
5.3.4 Eyes

Dryness

Dryness of the eyes was experienced by Provers 08F and 16M. Prover 08F reported that her eyes feel dry as if she has been out in a hot wind. Prover 16M stated that his eyes were dry in the afternoon and were painful that night, which was due to the air-conditioning in his car.

Itching

Itching of the eyes was experienced on multiple occasions by Prover 08F. This itching was accompanied by thirst and dryness of the eyes. At times it was worse along her lower lid and other times her right eye was itchier. The fresh air at the seaside ameliorated her itching.

Swelling, Heaviness and Enlarged Sensation

Prover 08F woke up with swelling of her superior, right eyelid. It was hanging over her lower lid. She also experienced the sensation that her eyes were too large for her sockets. Provers 02M and 06M reported a heavy sensation of their eyes.

Pain

Pain in the eyes was experienced by Provers 08F and 09aM. Prover 08F reported pain behind and on her right eye while Prover 09aM reported pain over the entire left side of his face, including his eye, cheek and molars. This was during sinusitis.

Sensation of Foreign Object

Prover 12F felt as if there was something in her left eye.

5.3.5 Ears

Pain

Pain in and/or about the ear was experienced by Provers 01M, 08F, 10F, 18F and 20F. Prover 01M reported pain in his left ear from a scab inside. Prover 08F experienced pain in her lymph glands below her left ear, which were painful to
the touch. Earache was reported by Prover 10F in her right ear. Prover 18F experienced a stinging pain in her left ear accompanied by blockage of the ear. Prover 20F reported right sided middle ear pain radiating from her right tonsil. This pain was described as tingling.

Obstruction

The sensation of blockage was described by Provers 08F and 18F. Prover 08F woke up with coryza accompanied by obstruction of her ears. The left ear of Prover 18F was blocked in the morning and accompanied by a stinging pain.

5.3.6 Nose

Dryness

Dryness of the nasal mucosa was experienced by Provers 02M and 14M. Prover 02M described the dryness of his nasal passages as if he was exposed to cold air, although he wasn’t, this caused epistaxis. Prover 14M experienced dryness of his nasal mucosa and nostrils every morning and one evening. He described dry, sticky, crusted mucous “as if dried gel has been applied,” as if much wind was blown into his nostrils. He had much relief after cleaning his nostrils.

Post Nasal Drip

Post nasal drip was experienced by Provers 06M, 08M, 09aM, 16M and 17M. Prover 06M described an inability to blow out the mucous from his post nasal drip, beginning at 08h00 with relief at 17h00. A post nasal drip on first going to bed was experienced by Prover 08F, causing her to cough. Prover 09aM experienced a post nasal drip with much nasal congestion of bloody green mucous or greenish/yellow mucous and occasional sneezing. Prover 16M maintained a post nasal drip for a few days with a blocked or semi-blocked nose. The post nasal drip reported by Prover 17M was accompanied by dryness in the throat and some pain.
Obstruction

A blocked or stuffy nose was reported by many provers during the proving of *Anthropoides paradiseus* 30CH. Provers 09aM, 10F, 16M, 17M, 18F, 22F, 24F and 30F experienced blocked noses at some point, with varying concomitants and modalities. Prover 09aM experienced a left sided blockage of his nose, the mucous was white or aluminous. He also had left sided nasal congestion with bloody, foul, green mucous or greenish/yellow mucous, sneezing and a post nasal drip. A blocked nose accompanied by a sore throat and blocked nose was experienced by Prover 10F. Prover 16M reported having stuffy sinuses and a blocked nose throughout the afternoon which was relieved at 16h00. Prover 24F also experienced a stuffy nose on multiple occasions. He also reported a semi-blocked nose during the evening accompanied by a post nasal drip. Prover 17M had blocked sinuses throughout the day. Prover 18F woke up with a blocked nose and a wet cough. Prover 22F reported a blocked, itchy, ticklish and running left nasal passage which began on waking and was exacerbated by dust and smoking and accompanied by sneezing. A slightly blocked nose on waking was experienced by Prover 30F.

Foul odour/taste

The smell and taste of the mucous reported by Prover 09aM was described as “extremely bad. Like rotten egg or putrid flesh.”

Rhinitis, Coryza and Nasal Discharge

Acute coryza was reported by Provers 08F, 09aM and 10F. Prover 08F experienced a slight running nose with blocked ears. The acute coryza of Prover 09aM was described as “frequent coughing, slight wheeze and runny nose.” The mucous was yellow. He also experienced nasal congestion, a post nasal drip, sneezing with bloody, green mucous on the left side only during his coryza. Prover 10F experienced a running nose throughout the proving with an extremely dry throat.

Provers experienced discharge from the nose in different forms textures and colours. Prover 09aM reported a runny nose with yellow mucous. He experienced
this with frequent coughing and a slight wheeze. On other occasions, with occasional sneezing, left sided nasal congestion and a post nasal drip he had blood streaked green mucous. He also had dark blood present in the morning when blowing his nose with light blood tinged green mucous during the day. He also experienced a green staining, greenish/yellow nasal discharge, with traces of blood, and occasional sneezing. The smell and taste of his mucous was extremely bad, like rotten egg or putrid flesh.

Prover 14M reported hard, slightly dried mucous in his posterior nares. He also experienced dry, cream white to yellowish, painful crusts in his nostrils, as well as dry, crusted, sticky mucous as if “dried gel has been applied in the nostril walls.” He experienced crusts every morning.

Prover 22F experienced hayfever on waking. She also had sneezing attacks with yellow/white coloured mucous, and found relief outdoors.

**Heightened Sense of Smell**

A heightened sense of smell was experienced by Prover 08F. She smelled a “strange sweet perfumey smell in the evenings” as well as a “sweet smell of fruit also cleaning chem from outside.” Perfume smells caused her stress and she described a smell as “super strong sickly perfume.”

**Left**

Some provers experienced left sided nasal symptoms only. Prover 09aM experienced nasal congestion of the left side only. He was congested with blood stained green mucous or with aluminous mucous. This was accompanied by occasional sneezing and a post nasal drip. Prover 22F had a blocked, itchy, ticklish and runny nose, on her left side only. Dust and smoking made it worse. It began on waking and was accompanied by sneezing.
Better Outside

Provers 10F and 22F experienced a relief from their nasal symptoms from being outdoors. Prover 10F felt that her coryza was better when outside. Prover 22F felt that her rhinitis, with light yellow/white coloured mucous, was better outside.

On waking

Many nasal symptoms began when waking up. The rhinitis of Prover 22F began when waking up. It was accompanied by sneezing, a blocked nose, itchy, ticklish and runny left nasal passage which was worse for dust and smoking. Her rhinitis woke her up. Prover 30F woke up with a slightly blocked nose which cleared up during the day. Prover 18F woke up with a blocked nose and a wet cough. Prover 08F woke up with a slightly runny nose with blocked ears. Prover 14M woke up on multiple mornings with dryness of his nostrils. He experienced sticky, hard, crusts in his nose and felt much relief when clearing his nose.

5.3.7 Face

Dryness of lips

Dry lips were reported by Provers 01M and 08F. They both stated that their lips were peeling. Prover 08F described a papery feeling of her lips with cracking and feeling dehydrated.

Pain

Face pain was experienced by Provers 09aM and 20F. With sinusitis, Prover 09aM experienced left sided face pain which extended to his left eye, left cheek and left molars. Prover 20F reported pain in the right side of her jaw, extending from a tingling pain in her right tonsil. The pain also extended to her middle ear and was better when chewing or grinding her teeth. It began suddenly in the afternoon and lasted throughout the night.

Itching

Prover 12F experienced itching of her face due to the presence of a heat rash.
5.3.8 Mouth

Dryness
A dry mouth was reported by Provers 01M and 16M.

Swelling
The left, posterior aspect of the tongue of Prover 08F felt as if it was swelling. This made talking difficult.

Pain
Tongue pain was experienced by Provers 08F and 10F. Prover 08F reported tenderness of the left, posterior aspect of her tongue. Prover 10F experienced a stinging, irritating pain on the tip of her tongue which was worse for drinking. The following day she woke up with a white pimple-like eruption on the tip of her tongue. It was so painful that she went to bed early that night.

Discoloration
Prover 08F noticed a white fur on her tongue. She also reported a white tongue with a sore throat. Prover 14M reported having oral thrush with a whitish tongue. He described the sensation of his tongue not being his own, as if something covered the tip.

Slime
Prover 27F experienced the sensation of slime in her mouth. With this, her expectoration was sweet.

Offensive Smell and Taste
Prover 09aF experienced an extremely bad taste and smell of his nasal mucous, describing it as rotten egg or putrid flesh. Prover 14M reported having offensive breath.
Disorientated Sense of Taste

Disorientation in the sense of taste was reported by Prover 08F and 12F. Prover 08F described her coffee tasting unusually sweet, even though it contained no sugar, as well as the mint flavour of her toothpaste being too strong. Prover 12F described her BBQ sauce as being too bitter. Prover 27F described a sweet taste to her saliva.

5.3.9 Teeth

Pain

Prover 09aM experienced pain in his molars on the left side. This was with pain on the whole left side of his face, left eye and left cheek, with sinusitis.

5.3.10 Throat

Dryness

Many provers experienced dryness of their throats during the proving of *Anthropoides paradiseus* 30CH. Prover 08F had a dry and scratchy throat with much thirst. Prover 10F experienced a dry throat with a running nose. Prover 14M experienced a dry throat with hiccoughs. Prover 16M also reported having a dry throat. An extremely dry throat was described by Prover 17M with a post nasal drip and throat pain.

Pain

Throat pain was experienced by many provers, with various sensations, concomitants and modalities.

Prover 06M experienced pain in the throat with an itchy sensation. Prover 10F experienced a blocked nose and headache with her sore throat.

Prover 08F had a slight sore throat. The following day she reported having a white tongue and swollen lymph glands with a painful throat. She also described a sore throat only in the morning, lasting only an hour and being ameliorated by eating.
The tartness of salad dressing relieved the throat pain, which she described as “sting and soothing.”

Prover 09aM reported having a sore throat with a post nasal drip and malaise. Prover 17M also described having a post nasal drip with throat pain and a dry throat. Prover 14M experienced a slight pain on the right side of his throat, with his throat feeling enlarged. He describes this pain as sharp as if “a tiny pin might come out the tip of the tonsil.” He also reported having a dull throat pain when swallowing.

**Tonsils**

Prover 20F experienced a tingling pain on her right tonsil which radiated to her middle ear and right side of her jaw. This pain was better for mastication and bruxism and began suddenly in the afternoon.

Prover 14M reported a dull pain in his left tonsil. This pain was accompanied by thick, hard mucous which was difficult to hawk out. On another occasion he experienced a slight pain on the right side of his throat, with an enlarged sensation of his throat. He describes this pain as sharp as if “a tiny pin might come out the tip of the tonsil.”

Prover 08F experienced throat pain on waking accompanied by slight swelling of her right tonsil.

**Itching**

Itching in the throat was experienced by Provers 06F, 08F, 09aM and 14M. Prover 06M experienced itchiness with pain in his throat which began shortly after 11h30 and was ameliorated by eating coarse food such as toast. Prover 08F reported scratchiness in her throat with thirst and dryness. Burning in the throat with itching was experienced by Prover 14M. This was accompanied by a cough and change in voice and the sensation as if “another layer has been placed around the pharynx.”
Burning

Burning in the throat was reported by Provers 14M and 16M. This occurred with itching in Prover 14M, and was accompanied by a cough and change in voice and the sensation as if “another layer has been placed around the pharynx.” Prover 16M described throat pain with a burning sensation.

5.3.11 Stomach

Increased Appetite

An increase in appetite was experienced by many provers. Prover 14M experienced an increase in appetite, as if his stomach was empty. He stated, “the hunger is so excoriating as if being rubbed by a steel wool.” This so-called “excoriating hunger” was not satiated by rice and bread, and Prover 14M reported experiencing only temporary fullness. He described his hunger as “hunger and sharpness…felt as if it is from the heart.” Prover 14M also experienced a ravenous appetite upon waking, with the sensation that his stomach is so empty that it feels as if it has been enlarged like a deep pit. He reported having more energy with a large appetite.

Prover 12F woke up ravenous. After lunch, Prover 16M became very hungry. Throughout the day, Prover 30F described an increase in appetite with thirst which was aggravated in the afternoon. Prover 08F craved a large, rich meal with her increase in appetite. She also reported thirst with her hunger. Her hunger was not satiated by a big lunch. Prover 09aM reported having an increase in hunger with polyuria, polydipsia and fatigue.

Prover 01M experienced a hunger which caused him to over eat and resulted in abdominal cramping. He also had the desire to eat unnecessarily at times. Prover 22F reported being “very hungry”. An increase in appetite was also experienced by Prover 24F. Prover 25F experienced an increase in appetite which caused her to eat many food items at once. Prover 15F stated that her appetite increased and that she ate a lot. Increased appetite was also experienced by Provers 27F and 29M.
**Diminished Appetite and Appetite Fluctuations**

Prover 12F stated that it “felt good to keep it light”, barely eating for the day. Prover 08F reported having a decrease in appetite at night. Prover 20F reported not having an appetite, only eating a single meal for the day. Prover 03aF experienced a low appetite with a complete aversion to starchy foods, although she desired “comfort food” and protein.

Prover 30F experienced a lower than normal appetite and other days appetite fluctuations where her appetite was normal but decreased in the afternoon. She also reported having an “up and down” appetite throughout the day with intense cravings for sweet foods at night.

**Thirst**

A thirst increase was seen during this proving. Provers reported being very thirsty and increasing their water intake. Thirst was experienced throughout the day but most notably during the afternoon (Provers 16M and 30F) and night times (Provers 08F, 16M, 24F).

Prover 01M reported being thirsty with an uncomfortable feeling in his stomach. He stated that he was always thirsty. Prover 02M also reported being thirstier during the proving. Prover 09aM experienced an increase in thirst with polyphagia, polyuria and fatigue. Prover 15F reported that she increased her water intake during the proving. Prover 27F also experienced an increase in thirst and water intake.

Prover 08F experienced an increase in thirst with an increase in her water intake. This was at times accompanied by dry, itching eyes, a dry, scratchy throat or a headache. She felt the need to hydrate often, being very conscious of dehydration. Her increase in thirst was also reported at night and with feeling extremely hot. She stated that she “can’t get enough water” and at times craved sparkling water and other carbonated drinks.
An increase in thirst in the late afternoon and throughout the night was reported by Prover 16M. Prover 24F woke up several times at night to drink water. She also reported being constantly thirsty and increasing her water intake. An increase in thirst, aggravated in the afternoon was reported by Prover 30F.

**Nausea**

Nausea was experienced by Provers 01M, 03aF, 10F, 14M and 22F. Bloating accompanied the nausea in Provers 01M and 14M. Nausea was experienced at differing times of the day, although Provers 10F and 22F reported having nausea in the morning only. Prover 10F described it as a “weird feeling” in her stomach. Prover 03aM described a nausea with dizziness and a headache.

Prover 01M reported having abdominal cramps and much heat with nausea. Sugary drinks ameliorated him. He also experienced nausea upon waking in the morning. His nausea was aggravated by drinking water and eating. Shakiness, bloating and a cold feeling accompanied his nausea at times. He stated that he was afraid to eat due to his nausea and that he felt full.

Prover 14M described feeling nauseous with noisy rumbling in his stomach and much gas. He felt bloated and had flatulence with his nausea. He received relief from eructation.

**Hiccoughs**

Hiccoughs were experienced by Prover 14M. With his hiccoughs he reported having a dry throat “down to the oesophagus.” The aetiology of his hiccoughs was drinking cold, refrigerated water. Drinking warm drinks ameliorated the hiccoughs.

**Eructation**

Eructation was experienced by Provers 03aF and 14M. Prover 03aF reported tasting the food she had eaten when belching. Prover 14M stated that eructation ameliorated his nausea, bloating, rumbling of gas in his abdomen and flatulence.
Eating

Eating fast and over eating was experienced by Provers 14M, 08F and 01M, respectively. Prover 01M overate when hungry which caused abdominal cramping. Prover 08F ate so fast that it caused her to have a stitching pain in her abdomen. Prover 14M ate many consecutive meals.

On Waking

Stomach symptoms were described upon waking by Provers 01M, 12F, 14M and 24F. Prover 12F woke up with a ravenous appetite, as did Prover 14M who woke up feeling extremely hungry with an empty pit sensation in his stomach. Prover 24F was thirsty upon waking throughout the night and Prover 01M woke up with nausea.

5.3.12 Abdomen

Rumbling, Gas and Bloating

Prover 01M, 05aM and 14M experienced bloating. Prover 01M experienced nausea, shakiness and a cold feeling with his bloating. In Prover 14M the bloating was accompanied by rumbling, nausea and flatulence and ameliorated by eructation.

Prover 12F described her flatulence as “feeling a bit gassy.” Her gassiness continued with an unsettled sensation in her abdomen, as if “it was going to run at some stage.” This was ameliorated by lying pronated. Prover 03aF also reported having flatulence. The flatulence of Prover 14M was accompanied by noisy rumbling in the abdomen with nausea and bloating which was ameliorated by eructation.

Sharp, Stitching Pain

Sharp, stitching pains were described by Provers 01M and 08F. Prover 01M experienced sudden, sharp, abdominal pains. Prover 08F ate quickly which caused a stitching pain in her abdomen.
Cramps and Spasms

Abdominal cramping and spasms were reported by Provers 01M, 05aM, 10F and 12F. Whilst walking, Prover 01M experienced two separate abdominal spasms which caused him to stand still. He also reported having “stomach cramps” which were at times accompanied by nausea and heat. Overeating also caused cramps in Prover 01M.

Prover 05aM reported cramping with diarrhoea which was aggravated by eating. Prover 10F experienced abdominal cramping which was ameliorated by using a hot water bottle.

Prover 12F experienced cramping which she described as “knotting.” They began after eating bisque with sourdough bread and butter, at approximately 13h30 and lasted until 22h00. With the cramps she had the desire to double over. She described it as a constant grip where it felt knotted towards the superior aspect of her abdomen like “a massive stitch.”

Sensation as if Imminent Diarrhoea

Provers 12F and 14M experienced abdominal pains with the sensation that diarrhoea was imminent. Prover 14M experienced burning abdominal pains as if diarrhoea was imminent. Prover 12F reported abdominal pains as if “it was going to run at some stage.” In Prover 14M these pains caused him to stand up from a sitting position and were ameliorated by bending slightly forward and wrapping his arms around his abdomen. In Prover 12F these pains were ameliorated by lying prone and accompanied by flatulence.

Pains Worse for Eating

Eating caused (Provers 01M, 08F and 12F) or aggravated (Prover 05aM) abdominal pains in provers. Prover 01M had abdominal cramping from overeating, Prover 08F experienced stitching pains from eating quickly and Prover 12F reported knotted, gripping pain after eating bisque with sourdough bread and butter. Prover 05aM experienced diarrhoea and cramping which was aggravated by eating.
5.3.13 Rectum

Diarrhoea

Diarrhoea was experienced by Provers 03aF, 05aM and 12F. Prover 3aF described having an upset stomach for a few days. Prover 05aM experienced an increase in his bowel habits with diarrhoea that was aggravated by eating, with abdominal cramping. Prover 12F reported having dark diarrhoea after skipping her bowel movement for a day.

Constipation

Slight constipation was reported by Prover 28M.

Pain

Rectal pain was reported by Prover 08F. This pain was prickly in sensation, during passage of stool and was not accompanied by bleeding.

Bleeding

Prover 08F experienced painless rectal bleeding with her stool.

5.3.14 Stool

Stools were described as loose, difficult, dark, large and regular. Loose stools were reported by Provers 3aF and 16M. Large stools were reported by Prover 12F, who also experienced dark diarrhoea. Prover 30F described irregular, difficult stools. During the proving, Prover 14M experienced unusually regular stools without diarrhoea.

5.3.15 Urine

Frequent

An increase in the frequency of urination was experienced by Provers 09aM, 16M and 21F. Prover 09aM experienced polyphagia, polydipsia and fatigue with his polyuria. Prover 16M reported passing urine every 10 minutes. Prover 21F described frequent urination.
Odour

Prover 08F stated that her first urination of the day had a strong odour.

Concentration

Concentrated urine was reported by Provers 10F and 12F. Prover 10F described her urine as dark. Prover 12F experienced concentrated urine, despite a steady water intake.

5.3.16 Bladder

Pain

Prover 21F reported experiencing a throbbing pain in her bladder region which began after having a full bladder and was not ameliorated by emptying of the bladder.

5.3.17 Male

Increased Libido

A high libido was reported by Provers 01M, 09aM and 14M.

5.3.18 Female

Discharge

A stringy, clear, vaginal discharge was experienced by Prover 08F. This was accompanied by a full and heavy sensation of her breasts.

Pain

A burning sensation of the outer labia was reported by Prover 08F, as if thrush was going to start.

Menses

Late menses was reported by Prover 22F. She experienced severe cramps over her whole lower abdominal area starting five days prior to the start of her menses. When her menses began, she felt extremely weak.
Clotting was experienced by Provers 10F and 25F. Prover 10F experienced a painful menses which caused her to desire sleep. Her blood was dark, heavy and clotted and lasted longer than normal. She reported “blood coming out in chunks.” Prover 25F experienced lower abdominal cramps during her menses. They were aggravated by slight movement and ameliorated by walking, pressure or stillness. Her menses were light and clotted and accompanied by heat all over her body. The clots were approximately 1.5cm in size and were discharged at the end of urination.

Prover 15F reported feeling better than usual while on her menses. Her skin was clearer, and her flow was lighter. She was also in a good mood.

**Libido**

Prover 08F experienced moments of arousal during the proving. On one occasion she reported that this was due to the inhaling of pollen while gardening. Then was subsequently angered after being ignored by her boyfriend.

**5.3.19 Larynx and Trachea**

Voice changes were experienced by Prover 24M during coryza. This was accompanied by coughing, burning and itching of the pharynx, with the sensation that another layer has been placed around the pharynx.

**5.3.20 Respiratory**

**Difficult**

Difficult respiration was experienced by Provers 08F, 17M and 30F. Prover 08F reported feeling that the room she was in felt “unbearably stuffy.” Prover 17M stated that he was battling to breathe with the sensation that somebody was standing on his chest and that he could not inhale enough air. Prover 30F had difficulty breathing and coughed while jogging.
5.3.21 Cough

Coughs were reported by Provers 06M, 08F, 09aM, 14M, 18F and 28M. Prover 08F experienced a cough with a post nasal drip on first going to bed. Prover 14M described a cough with a change in voice experienced during acute coryza, this was accompanied by itchy, burning throat pain and the sensation that another layer had been placed around the pharynx.

On Waking

Provers 06M, 18F and 28M woke up with a cough. Prover 06M described his cough as a constant tickle, scratching and itching sensation that is relieved by coughing every few minutes. The cough of Prover 28M was aggravated by exertion especially when running.

Wheezing

A wheeze was experienced with the cough in Provers 09aM and 18F. Prover 09aM described a throbbing headache or running nose with his frequent cough and wheeze. The cough of Prover 18F began in the late morning and intensified during the day, becoming more wheezy, and then disappeared at night.

5.3.22 Expectoration

Yellow sputum accompanied by a heavy chest was reported by Prover 09aM. Prover 27F reported having sweet, slimy saliva.

Difficulty

Prover 14M experienced a thick, hard mucous at the back of his tonsils which was difficult to hawk out.

5.3.23 Chest

Pain

Chest pain, with differing locations and sensations, was experienced by Provers 08F and 14M. Prover 08F described a pain which was located under her sternum with swelling in the area. She stated that she could feel a “clear” lump in a long
shape and that it feels like indigestion. Drinking water aided the amelioration of this pain.

Prover 14M described a sharp, piercing pain in the inferior right aspect of his chest, radiating to his right shoulder and right side of his neck, and shifting to the centre of his chest. The intensity of the pain came and went intermittently as “if a volume of a radio being turned up.” The pain was aggravated by lying supine and ameliorated by sitting erect.

**Palpitations**

Heart palpitations were experienced by Provers 10F and 24F. Palpitations with anxiety before a nap in the afternoon was reported by Prover 10F. Prover 24F experienced late night and early morning heart palpitations.

**Heaviness**

Heaviness in the chest was reported by Provers 08F, 09aM and 10F. Prover 08F reported heaviness and fullness of her breasts. Prover 09aM experienced a heavy chest with coryza, a high fever and extreme fatigue. Prover 10F described her heart as being heavy and tired.

**Eruption**

Pimples on the chest were reported by Prover 08F. Prover 01M had pimples on the chest as well as on the shoulders which were bleeding upon waking up due to scratching them in his sleep.

**Breasts**

Breast symptoms were experienced by Provers 03aF and 08F. Prover 03aF reported very painful breasts unrelated to her menstrual cycle. Prover 08F described a heavy sensation in her breasts.
5.3.24 Back

Pain

Back pain was experienced by Provers 14M, 22F and 30F. Prover 14M described his back pain as dull and located in the lower thoracic/upper lumbar region which was aggravated by walking and ameliorated when lying supine. Prover 22F described her pain as tension in her neck and shoulders. The pain of Prover 30F was located in the lumbar region, on the right side.

Eruption

An itchy pimple-like lesion located on the right side of the neck was reported by Prover 08F. She wasn’t sure if this was a bite or a pimple.

5.3.25 Extremities

Numbness and tingling was experienced in the upper (Provers 08F and 30F) and lower (Prover 08F) limbs. Spotty, itching eruptions were also reported in the upper (Prover 08F) as well as the lower (Prover 15F) extremities. Itching without eruption was described in the upper limb (Provers 08F and 24F). Tension was experienced in the upper limbs (Prover 01M and 22F). Pain of varying sensations and differing locations were described in the lower limbs (Provers 08F, 09aM, 12F and 30F).

Upper Limbs

-Tingling

Numbness, tingling, pins and needles and a prickly sensation in the upper extremities were experienced by Provers 08F and 30F during this proving. Prover 30F reported pins and needles in her hands. Prover 08F also experienced tingling in her right hand with some numbness, as well as pins and needles with a blue discolouration of her fingers of her right hand.

A pricking sensation as “from tiny spines” as if “I’ve picked up a prickly pear” over the palm and fingers of her left hand, extending to her right arm, was described by Prover 08F. This was at times accompanied by itching of her right fingertips,
which was ameliorated by rubbing the fingers hard, and itching in her arms. The prickliness was also described as “waves of tiny shocks like an army of fast moving caterpillars” over her hand. The prickly sensation was at times accompanied by numbness in the fingertips and other times brought on by sweating in a hot car. The sensation was accompanied by thirst and a fuzzy, dull headache. Fright brought on the tingling on another occasion. An eruption of small red spots on the medial aspect of her right arm accompanied the prickly feeling at times.

-Itching
Prover 08F reported an incredible itch on the inside of the fingers in her right hand which was relieved by rubbing the fingers hard. She also experienced itchy arms and itching accompanied by a prickling sensation. An eruption of “a few small red spots” was noted on the medial aspect of her right arm with itching in the axilla. Prover 24F also reported itching of her upper extremities, including her left hand and right arm.

-Eruption
Prover 01M reported having pimples on his shoulders and arms which were bleeding upon waking in the morning due to him scratching it in his sleep. Prover 08F experienced an itching eruption on the medial aspect of her right arm, which she described as “small red spots.”

-Tension
Shoulder tension was experienced by Provers 01M and 22F. It was accompanied by a headache in Prover 01M and by neck tension in Prover 22F.

Lower Limbs
-Eruption
A papular eruption of the ankle was experienced by Prover 15F. It had the appearance of a mosquito bite, was extremely itchy and was relieved by scratching.
-Pain

Pain in the lower limbs was reported by Provers 08F, 09aM, 12F and 30F. A pinching, cramp-like, tingly pain, with pins and needles was experienced by Prover 08F, down the back of her right thigh and knee. Standing up and moving the leg aided the amelioration of this pain. She also experienced a severe, sharp pain on the right side of her buttocks.

Pain in the varicosities in the left leg, medial to the popliteal fossa was reported by Prover 09aM. He described this pain as stitching and worse on movement. Prover 30F experienced growing pain in her left leg in the afternoon.

Right heel pain was experienced by Prover 12F. It had a bruised sensation and felt worse for stepping barefoot on tiles.

-Numbness

Numbness and tingling in the feet was experienced by Prover 08F whist sitting at a desk.

5.3.26 Sleep

Sleep was described as restful by some (Provers 05aM, 10F and 12F) and poor or restless by others (Prover 01M, 03aF, 12F and 22F). Prover 03aF slept poorly due to eating a large meal late at night. Prover 08F reported having long afternoon naps and on one occasion dreamt of covering her head and woke up doing so. Prover 30F described sleeping deep in the beginning and struggling to sleep in the early hours of the morning and vice versa.

5.3.27 Dreams

Numerous themes emerged in the dreams that were experienced by the provers of *Anthropoides paradiseus* 30CH.

These themes include:

- Escaping harm (Provers 01M, 02M, 06M, 15F);
- Distorted dreams (Provers 02M, 08F, 08F, 12F, 30F);
- Unremembered dreams (Provers 02M, 03aF, 08F, 08F, 08F, 08F, 10F, 12F, 12F, 12F, 12F, 12F, 12F, 12F, 24F);
- Unsuccessful efforts (Provers 03aF, 03aF, 03aF, 08F, 10F, 15F);
- Anxiety (Provers 01M, 02M, 06M, 08F, 10F);
- Searching (Provers 03aF, 08F, 12F, 15F);
- Travel (Provers 03aF, 08F, 12F, 12F, 15F);
- Singing (Prover 08F, 08F) and dancing (Provers 08F, 10F);
- Mountains (Provers 02M and 08F, 08F) and wilderness (Prover 02M);
- Sensing tension (Provers 02M and 08F);
- Thieves (Prover 08F) and being robbed (Prover 15F);
- Being betrayed (Provers 12F, 12F and 15F);
- Working on a project or event (Prover 08F, 08F, 08F, 10F, 12F, 12F, 12F);
- Seeking protection (Prover 01M, 02M, 15F);
- Famous people (Prover 02M, 08F, 08F, 08F);
- Estranged family (Prover 02M, 12F);
- Concerned with appearance (Provers 02M, 08F, 12F);
- Animals: dogs (Provers 02M and 08F, 08F, 08F) and horses (Prover 08F);
- Danger (Provers 02M, 12F, 15F);
- Directions (Prover 01M and 03aF) and navigation (Prover 12F);
- Amorous (Prover 08F, 08F);
- Working in pairs (Prover 12F, 12F);
- Challenge (Prover 08F, 08F, 08F);
- Revenge (Prover 02M);
- Being sacrificed (Prover 02M);
- Agitation (Prover 02M);
- Own importance (Prover 03aF and 12F);
- Healing others (Prover 10F);
- Gardening (Prover 08F);
- Quarrels (Prover 08F);
- Real feeling (Prover 12F);
- Being judged (Prover 08F);
- Deceased friends (Prover 10F);
• Muddy water (Prover 08F).

5.3.28 Chill

Coldness with nausea and the feeling of being weak and shaky was experienced by Provers 01M and 22F. Prover 22F experienced hot and cold alterations with this and an attack of sneezing.

5.3.29 Fever

A high fever was experienced by Prover 09aM. The feeling of heat was reported by Provers 01M, 08F and 10F (see 5.3.32).

5.3.30 Perspiration

An increase in perspiration was reported by Provers 01M, 10F and 12F. Prover 01M felt intermittent hot sweats following a sexual conversation. Prover 10F experienced perspiration in the afternoon while feeling hot and had no energy. The perspiration of Prover 12F was experienced during the night, while asleep.

5.3.31 Skin

Itching and Eruptions

Itching was experienced with (Provers 08F and 15F) and without (08F and 24F) eruptions, on various parts of the body.

Prover 08F reported a generalized itch, without eruption, over her whole body, including her arms, back, eyebrows, scalp and thighs. She also experienced itching of her skin, especially on her legs, with dryness. She also complained of incredibly itchy fingertips on her right hand which were ameliorated by hard rubbing as well as extreme itchiness all over her arms with a prickling sensation over her left elbow. Her arms became itchy, especially her right arm. Prover 24F also experienced itching of her arms, without eruptions. She described the location as being on her left hand and right arm, and at times accompanied by itching of her scalp.
Itching eruptions were experienced by Provers 08F and 15F. Prover 08F described two itching eruptions. She spoke of “small red spots” on the inside of her right arm, with itching in her axilla. She also reported having a pimple or bite-like “bump” on the right side of her neck which was very itchy. Prover 25F had a similar eruption on the flexor surfaces of her ankles, and described four or five papules that “looked like a mosquito bite.” They were extremely itchy and better for scratching.

Breakouts of pimples on the chest were reported by Provers 01M and 08F. They were accompanied by pimples on the shoulders of Prover 01M and were noticed to be bleeding when waking due to scratching them in his sleep.

**Dryness**

Dryness of the skin with an itchy sensation, especially on her legs, was described by Prover 08F. She claimed that this was due to cold, windy weather.

**Heat**

Prover 01M experienced the sensation of his skin burning, and it was hot to the touch.

**5.3.32 Generals**

**Energy Increase**

An increase in energy was experienced by Provers 01M, 08F, 12F, 14M, 15F, 27F, 28M and 29M. Prover 08F felt this increase around 16h00 while Prover 15F reported it on waking. Prover 08F also experienced the feeling of hyperactivity following an exhausting day, and had intense concentration. Prover 12F reported having good focus along with her good energy throughout the day. Prover 14M had an accompanying ravenous appetite and the desire to take a long run.

**Fatigue, Malaise, Exhaustion and Weakness**

Some forms of weakness including fatigue, malaise, tiredness, lack of energy or exhaustion were reported by Provers 01M, 02M, 03aF, 08F, 09aM, 10F, 12F, 22F
and 28M. Prover 22F reported feeling weak. Weakness accompanied by feeling cold and shaky was also reported by Prover 01M.

Prover 09aM reported being very tired, even falling asleep during the day. He also felt malaise with the desire to sleep. Accompanied by a high fever and sinusitis, Prover 09aM felt “extreme fatigue and malaise.” He also experienced polyuria, polyphagia and polydipsia with fatigue.

Prover 12F reported being exhausted after dance class as well as having no energy, except while cooking. Prover 10F had no energy while she had the flu. She felt hot and sweaty with no energy. Prover 02M felt exhausted after a day in the sun. His body was still tired after having a nap. Prover 08F felt a disproportionate tiredness with her focus increasing but at other times could not concentrate due to being tired. Prover 03aF felt tiredness and avoided eating due to this feeling.

**Food and Drink**

Various food and drink cravings were reported during the proving. These food and drink items included:

- Junk food (Prover 12F);
- Fish and Chips (Prover 12F);
- Carbonated drinks (Prover 08F and 27F) and sugary carbonated drinks (Prover 01M, 08F, 12F);
- Alcohol (Prover 08F);
- Comfort food (Prover 03aF);
- Bread (Prover 14M);
- Rice (Prover 14M);
- Coffee with cigarettes (Prover 09aM);
- Eggs with a runny yolk (Prover 09aM);
- Rich food (Prover 08F);
- Protein (Prover 03aF);
- Chilly soup (Prover 14M);
- Meat (Prover 14M) and salted meat (Prover 14M).
The only food craving to stand out on the proving of *Anthropoides paradiseus* 30CH was the craving for carbonated drinks. Provers 08F and 27F desired carbonated drinks of no specific flavour, while 01M craved sugary drinks and 12F desired coke.

Food aversions were only experienced by Prover 03aF who became averse to starchy foods, although she craved comfort food at the same time. She felt like she needed protein. She also became completely averse to eating rolled oats for breakfast after eating too much of it.

Prover 01M experienced an amelioration from his nausea and the sensation of heat after having something sugary to drink.

**Hot and Cold**

Provers 01M, 08F and 10F felt hot at times. Prover 01M experienced flushes of heat which he could feel up to his feet and were ameliorated at 16h00. He also felt this more intensely in the mornings and his skin was hot to touch during such episodes. Prover 08F felt heat after dinner, accompanied by thirst. Prover 10F felt hot in the afternoon, with perspiration and no energy.

A cold feeling was reported by Prover 08F. Provers 01M and 22F experienced a chill with nausea and weakness (see 5.3.28).

**Pain**

Generalized body pain was experienced by Provers 01M and 08F. Prover 01M experienced an “intense body shock” one night. Both Provers 01M and 08F experienced aching of their entire bodies. In Prover 01M it felt worse in his head and in 08F it was aching from her feet up, as if she had done heavy physical exercise.
Time
Prover 06M felt amelioration from his symptoms at 17h00. Prover 01M experienced amelioration at 16h00.

Weather
On a “muggy” overcast day, Prover 08F desired wearing less clothing and no shoes.

Laterality
Noticeable laterality was seen in the proving of Anthropoides paradiseus 30CH. Although non-specific to left or right, provers experienced symptoms on either side. Table 5.2 below summarizes the number of symptoms reported in each section by side. Although the number of symptoms experienced on the left side was one hundred and twenty-nine and only twenty-eight on the left, this does not accurately reflect the preferred side as Prover 09aM reported daily left sided symptoms in various locations. When we look at how many provers reported left and right sided symptoms, it is seen that seven provers experienced left sided and nine provers experienced right sided symptoms. Symptoms were also not exclusive to a particular side as, for example, Prover 14M experienced right sided throat pain [14M: 06:06:33] followed by left sided throat pain [14M: 12:XX:XX] several days later.

Table 5.2: Laterality of symptoms per section

<table>
<thead>
<tr>
<th>LEFT</th>
<th>RIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Head</strong></td>
<td></td>
</tr>
<tr>
<td>09AM [09: XX:XX,</td>
<td>16M [04:XX:XX];</td>
</tr>
<tr>
<td>12: XX:XX, 13: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>14: XX:XX, 15: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>16: XX:XX, 17: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>18: XX:XX, 19: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>20: XX:XX, 21: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>22: XX:XX, 23: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>24: XX:XX, 25: XX:XX,</td>
<td></td>
</tr>
<tr>
<td>-----</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td>Ear</td>
<td>01M [15:XX:XX]; 08F [11:XX:XX]; 10F [06:XX:XX]; 20F [04:XX:XX].</td>
</tr>
<tr>
<td>Face</td>
<td>09AM [09: XX:XX, 20F [04:XX:XX].</td>
</tr>
<tr>
<td>Area</td>
<td>Time</td>
</tr>
<tr>
<td>--------------</td>
<td>---------------</td>
</tr>
<tr>
<td>Mouth</td>
<td>08F [01:09:45, 02:06:45]</td>
</tr>
<tr>
<td>Throat</td>
<td>14M [12:XX:XX].</td>
</tr>
<tr>
<td>Chest</td>
<td>14M [02:08:23].</td>
</tr>
<tr>
<td>Back</td>
<td>08F [26:16:00]; 14M [02:08:23]; 30F [02:XX:XX].</td>
</tr>
</tbody>
</table>
5.4 Ethological Comparison

5.4.1 Introduction

The symptoms which arose during the homeopathic drug proving of *Anthropoides paradiseus* 30CH were compared to the ethology of the substance. A summary of this comparison is given in table 5.2 below and elaborated upon in 5.4.2 to 5.4.38.

The summary is divided into two sections: “Behaviour” and “Anatomical and Physiological Adaptations.” This study aims to draw a comparison between the symptomatology which arose during the proving of *Anthropoides paradiseus* 30CH and the ethology of the substance. Although ethology is defined as the study of animal behaviour in their natural environment (Birkhead 2012: 185), the researcher recognizes the importance of understanding the internal and external environment and perception of birds when attempting to understand their behaviour.
Table 5.2: A summary of the comparison between the symptomatology of *Anthropoides paradiseus* 30CH and the ethology of the substance.

<table>
<thead>
<tr>
<th>Symptom</th>
<th><em>Anthropoides paradiseus</em></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Behaviour</strong></td>
<td></td>
</tr>
<tr>
<td>Isolated in Spring</td>
<td>• Dispersed as breeding pairs in warmer months.</td>
</tr>
<tr>
<td></td>
<td>• Distributed away from human activity.</td>
</tr>
<tr>
<td></td>
<td>• Flee when stressed.</td>
</tr>
<tr>
<td>Sociable in Autumn</td>
<td>• Flocking after summer.</td>
</tr>
<tr>
<td>Dreams of collaboration</td>
<td>• Noisy birds in flocks.</td>
</tr>
<tr>
<td>Dancing</td>
<td>• Young dance as part of motor development.</td>
</tr>
<tr>
<td>Desires dancing</td>
<td>• Dancing thwarts aggression.</td>
</tr>
<tr>
<td>Dreams of dancing</td>
<td>• Primary aspect of courtship is the “dance”.</td>
</tr>
<tr>
<td>Desire to run</td>
<td>• Courtship involves running in circles.</td>
</tr>
<tr>
<td>Dreams of singing, waking with</td>
<td>• Vocal displays.</td>
</tr>
<tr>
<td>song on mind</td>
<td>• Call at dawn and dusk.</td>
</tr>
<tr>
<td></td>
<td>• Song important.</td>
</tr>
<tr>
<td>Dreams of purring</td>
<td>• Chicks and subordinate cranes give a purring call.</td>
</tr>
<tr>
<td>Expressing herself</td>
<td>• Express emotions via vocalizations.</td>
</tr>
<tr>
<td>Category</td>
<td>Details</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Communication</td>
<td>• Communication important.</td>
</tr>
<tr>
<td>Instincts and intuition</td>
<td>• Rely on instinctive behaviour</td>
</tr>
<tr>
<td>Cleaning</td>
<td>• Female cleans the nest site.</td>
</tr>
<tr>
<td>Desire to decorate</td>
<td>• May build elaborate nests decorated by pebbles.</td>
</tr>
<tr>
<td>Dreams of navigation</td>
<td>• Migrates from low to high altitudes.</td>
</tr>
<tr>
<td></td>
<td>• Navigate using a magnetic sense.</td>
</tr>
<tr>
<td>Dreams of wild landscapes</td>
<td>• Found in Highveld grasslands, the Karoo and semi-desert habitats.</td>
</tr>
<tr>
<td></td>
<td>• Often nest near water.</td>
</tr>
<tr>
<td>Swimming without fear</td>
<td>• Young are known to be good swimmers.</td>
</tr>
<tr>
<td>Stress and anxiety</td>
<td>• Susceptible to stress from physical and behavioural disturbance, unfamiliar territories and disease.</td>
</tr>
<tr>
<td>Dreams of seeking protection</td>
<td>• Young cranes seek protection from their</td>
</tr>
<tr>
<td>Anatomical and Physiological Adaptations</td>
<td>Heightened or distorted senses</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>Sleeping covering head</td>
<td>• May sleep with head drawn to the rear, with bill tucked into scapular feathers.</td>
</tr>
<tr>
<td>Spring libido</td>
<td>• Highly sexed during mating and breeding seasons.</td>
</tr>
<tr>
<td>Shaking</td>
<td>• Shaking of the body for comfort.</td>
</tr>
<tr>
<td></td>
<td>• Aggressive displays involving shaking.</td>
</tr>
<tr>
<td></td>
<td>• Shivering thermogenesis.</td>
</tr>
<tr>
<td></td>
<td>• Senses not identical to humans.</td>
</tr>
<tr>
<td></td>
<td>• Beneficial olfactory system.</td>
</tr>
<tr>
<td></td>
<td>• Acute sense of smell.</td>
</tr>
<tr>
<td></td>
<td>• Highly developed hearing.</td>
</tr>
<tr>
<td></td>
<td>• Sensitive to low frequencies.</td>
</tr>
<tr>
<td></td>
<td>• Stressed by loud vehicles.</td>
</tr>
</tbody>
</table>
| Attraction to colours | • Able to perceive a greater spectrum of colours.  
| | • Pale bluish grey plumage.  
| | • Dark brown irises, pinkish bill, black legs.  
| | • Chicks have greyish down with a ginger crown.  
| Large quantities of food | • Consumes large quantities of food.  
| Appetite increase in Autumn | • Seasonal cycles in appetite. Increase in food consumption in Autumn, decrease in Spring.  
| Appetite decrease in Spring |  
| Desires protein | • High caloric foods consumed.  
| | • Omnivorous.  
| Desires bread |  
| Desires rice |  
| Desires comfort food |  
| Desires rich meal |  
| Desires meat |  
| Regular bowel movements | • Highly efficient digestive system.  

<table>
<thead>
<tr>
<th>Diarrhoea after eating chicken</th>
<th>• Most droppings result from foods eaten with high protein content.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Energy increase</td>
<td>• A high metabolism is required for the large energy output in a body of low weight. In order for this a basal temperature of approximately 40 to 43°C is maintained.</td>
</tr>
<tr>
<td>Regular stools</td>
<td></td>
</tr>
<tr>
<td>Diarrhoea</td>
<td></td>
</tr>
<tr>
<td>Hunger and appetite increase</td>
<td></td>
</tr>
<tr>
<td>Perspiring</td>
<td></td>
</tr>
<tr>
<td>Feeling hot</td>
<td></td>
</tr>
<tr>
<td>Fever</td>
<td></td>
</tr>
<tr>
<td>Polyuria, polydipsia, polyphagia and fatigue</td>
<td>• High levels of blood glucose.</td>
</tr>
<tr>
<td>Fullness sensation in the head</td>
<td>• Swollen head appearance.</td>
</tr>
<tr>
<td></td>
<td>• Large cerebrum.</td>
</tr>
<tr>
<td>Late menses following stress</td>
<td>• Stress can interfere with the onset and maintenance of reproduction.</td>
</tr>
<tr>
<td>Sternal swelling</td>
<td>• Enlarged sternum.</td>
</tr>
<tr>
<td></td>
<td>• Crop.</td>
</tr>
<tr>
<td>Heavy eyes</td>
<td>• Large eyes.</td>
</tr>
<tr>
<td>Extension of stomach</td>
<td>• Extension of stomach known as the crop.</td>
</tr>
<tr>
<td>----------------------</td>
<td>------------------------------------------</td>
</tr>
<tr>
<td>Abdominal cramps</td>
<td>• Stones grinded in the gizzard.</td>
</tr>
<tr>
<td>Battling to breathe</td>
<td>• Small compact respiratory system</td>
</tr>
<tr>
<td></td>
<td>• Requires two cycles of respiration to pass air though.</td>
</tr>
<tr>
<td>Heavy heart</td>
<td>• Large heart</td>
</tr>
<tr>
<td>Palpitations</td>
<td>• General rapid heart rate.</td>
</tr>
<tr>
<td></td>
<td>• Increased heart rate with fear.</td>
</tr>
<tr>
<td>Angina</td>
<td>• Prone to atherosclerosis.</td>
</tr>
<tr>
<td>Left sided symptoms</td>
<td>• High brain lateralization.</td>
</tr>
<tr>
<td>Right sided symptoms</td>
<td>• Individual sidedness.</td>
</tr>
<tr>
<td></td>
<td>• Sidedness of the species.</td>
</tr>
</tbody>
</table>

### 5.4.2 Isolated vs sociable

Provers 10F, 18F and 25F isolated themselves. The provings of Provers 10F and 18F occurred in Spring.

The Blue crane population favours areas with little disturbance from human activity (Johnsgard 1983: 89). *Anthropoides paradisea* are sociable, except during breeding season (spring/summer) (Ginn and McIlieron 1994: 194). Fleeing
behaviour indicates the crane is stressed by their environment (Swengel et al. 1996: 109).

Provers 08F and 12F became more sociable. Both these provings took place in Autumn. Prover 12F “enjoyed having someone else around.” Prover 08F found herself greeting people in the streets. Prover 12F also dreamt of having to work in pairs or collaborate with others in order to accomplish a task.

In summer they are not found in flocks and are instead dispersed as breeding pairs. At the end of summer, groups of Blue crane pairs and their young merge to form flocks. In the winter they are sociable and nomadic (Tarboton 1994: 194). They are known to be noisy birds, especially in flocks (Ginn and McIlherson 1994: 194).

5.4.3 Dancing

Dancing and the desire to dance was seen in Provers 08F and 12F. Dreams of dancing were experienced by Provers 08F and 10F. Cranes as young as two days old have been observed displaying dancing behaviours. Dancing is a part of normal motor development of young birds and also serves to thwart aggression, and facilitate pair formation while synchronizing pair members sexually prior to nesting (Johnsgard 1983: 14). The primary component of the courtship display of Anthropoides paradiseus is the “dance” in which they bow to each other, leap into the air, take short runs and toss up bits of grass and earth (Tarboton 1994: 194).

5.4.4 Running

The desire to run and be active was seen in Provers 14M and 15F.

The courtship dance of Anthropoides paradiseus begins with the pair running in circles as if the male is chasing the female. After each run, the two birds stop and call in unison (Johnsgard 1983: 91).
5.4.5 Singing
Prover 08F dreamt about singing and when she woke up she had these songs in her head.

Cranes have a wide variety of vocal displays (Swengel et al. 1996: 108). The “unison call” is made by pairs of Blue cranes at dawn and dusk (Tarboton 1994: 194). Being creatures of the air, which is the carrier of sound, music and voice, communication and song are known to be important to birds (Fraser 2009: 11).

5.4.6 Purring
Prover 08F described a dream in which she held a puppy that was purring.
A purring call is given by subordinate cranes, frequently seen in chicks. Adult cranes adopt this chick-like behaviour in the presence of a dominant crane or person (Swengel et al. 1996: 109).

5.4.7 Expression of self
Prover 12F found that she was better at expressing herself.

Vocalization of birds can be seen as an expression of their emotions (Birkhead 2012: 182). Communication and song are of vital importance (Fraser 2009: 11).

5.4.8 Intuition and instincts
Prover 3aF and 12F both experienced moments of being guided by their intuitive, instinctive nature.

Birds rely on instinctive behaviour in favour of complex problem-solving abilities, to save the energy of thought for when it can be more effectively used (Fraser 2009: 7).

5.4.9 Cleaning
Provers 08F and 12F cleaned their homes during the proving. Prover 08F reported cleaning in a manic fashion.
Once the male Blue crane has selected a suitable nesting site, and the female has accepted this site, the female begins cleaning the area (Johnsgard 1983: 91).

5.4.10 Decorating space

Prover 12F thought about decorating her work space.

The nests of *Anthropoides paradiseus* may range from a bare space to scattered debris or intricate nests of pebbles placed side by side surrounded by short grass (Johnsgard 1983: 92).

5.4.11 Navigation

Dreams of navigation was reported by Prover 01M who stood at an intersection trying to find safety, and Prover 12F who was in the car as the driver, assisted by the passenger, navigating dangerous roads. Prover 15F dreamt of trying to get back to her hometown. Prover 08F dreamt about trying to cross Johannesburg.

*Anthropoides paradiseus* migrates from lower altitudes, in winter, to elevations of 1300 to 1800m in the summer (Johnsgard 1983: 89). Birds navigate with the use of a magnetic sense, allowing them to detect the earth's magnetic field. They are able to migrate over vast distances and find their way home (Birkhead 2012: 175-178).

5.4.12 Wild

Prover 02M described dreams of being in the wild, the desert and in the mountains. Prover 12F reported a dream of going to a "nature spot." Prover 08F dreamt about falling into a dirty, brown lake. Another dream of Prover 08F involved crossing Johannesburg and gazing over at the top of Swaziland's cliffs nearby.

Blue cranes are found in the grassy habitats of South Africa. They are found in Highveld grasslands, the Karoo and semi-desert habitats. They often nest near water (Tarboton 1994: 194).
5.4.13 Stress
Feelings of stress and anxiety were experienced by Provers 3aF, 10F, 24F and 25F. Prover 25F described unnecessary anxiety over her research, which was an unfamiliar activity for her.

Cranes seem to be especially susceptible to stress. Disease, physical and behavioural disturbance and unfamiliar territories cause stress (Gee and Russman 1996).

5.4.14 Swimming
Prover 10F conquered her fears in a moment of bravery where she swam into the deep end of a pool.

Young Blue cranes are observed to be good swimmers (Johnsgard 1983: 92).

5.4.15 Seeking protection
Dreams of seeking protection from others were reported by Provers 01M, 02M and 15F.

Adult cranes protect their young in various ways. They may approach the intruder while uttering an “alarm call” until it retreats. They may display diversionary tactics by one parent moving away with an aggressive posture to draw the threat away from the young. When the pair has one chick, it may seek protection under the spread wings of the parents (Johnsgard 1983: 22-23).

5.4.16 Covering head during sleep
Prover 10F reported having a dream in which she was covering her head. She then woke up to find that she was in fact covering her head with her blanket.

While sleeping, adult cranes frequently rest on a single leg with the head either held fairly erect, resting near the breast or drawn to the side and rear with the bill tucked into the scapular feathers (Johnsgard 1983: 11).
5.4.17 Shaking

The symptom of “shakiness” was experienced by Provers 01M and 22F. Feeling cold accompanied the “shakiness” of Prover 01M while Prover 22F had an alternating cold and hot feeling.

When birds are cold, heat production is increased by the contraction of skeletal muscle without voluntary movement. This is known as shivering thermogenesis (Ringer 1986). Rapidly ruffling the feathers followed by vigorous shaking of the body is an individualistic behaviour by Anthropoides paradiseus which maintains comfort for the bird (Johnsgard 1983: 11). The “ruffle-preen” (Johnsgard 1983: 14) and “ruffle-bow” (Swengel et al. 1996: 107) displays are aggressive displays which also entail shaking of the crane.

5.4.18 Seasonal libido

Prover 01M, who participated in this study during Spring, experienced a heightened libido.

Birds become highly sexed during the mating and breeding seasons and become asexual during the rest of the year (Fraser 2009: 15).

5.4.19 Heightened and disorientated senses

Prover 08F described variance in many senses. Her taste was different from what it should have been, and she had a heightened sense of smell. Prover 12F was sensitive to, and stressed by, the sound of a revving engine and experienced a distortion in her sense of taste.

We can begin to understand the world of birds when we appreciate that they have senses which we don’t have and realize that the senses they share with us are not identical (Birkhead 2012: 206). Marsh-dwelling species have a beneficial olfactory system (Birkhead 2012: 140). Birds have an acute sense of taste (Birkhead 2012: 119). The avian sense of hearing is highly developed. They possess the ability to detect rapid changes in frequency (Villee et al. 1984: 708).
Sensitivity to low-frequencies is seen in larger birds while small birds are sensitive to high-frequency sounds (Birkhead 2012: 45).

Cranes in captivity become stressed if the surroundings of their breeding areas are affected by the sound of loud vehicles (Swengel et al. 1996: 115).

5.4.20 Attraction to colours

Prover 08F described an attraction to certain colours that she would not normally like. These colours were:
- black,
- silver,
- colours on the blue spectrum,
- browns,
- gold,
- orange, and
- dull pink.

Birds are able to perceive a greater spectrum of colours due to the presence of an extra photoreceptor in their eyes; this enables them to see ultraviolet light (Birkhead 2012: 24). The Blue crane’s plumage is a pale bluish grey, lightest on its head and darkest on its tertial plumes (Ginn and McLlaron 1994). They have dark brown irises, a pinkish bill and black legs (McLachlan and Liverside 1971: 146). Chicks are covered in greyish down, and are palest on their bellies with a ginger crown and forehead (Ginn and McLlaron 1994).

5.4.21 Consuming large quantities of foods

Many provers described an increase in their hunger or appetite. Eating or craving large or many meals was reported by Provers 01M, 08F, 14M, 15F and 25F.

Relative to humans, birds consume enormous amounts of food (Shore et al. 2004: 21). The maintenance of a relatively constant body temperature requires coordination of many related systems which includes food consumption (Ringer 1986).
5.4.22 Seasonal appetite fluctuations
Provers 01M, 08F, 09aM, 12F, 14M, 15F, 16M, 22F, 24F, 25F, 27F, 29M and 30F all experienced an increase in their appetite or hunger. The provings of Provers 08F, 12F, 14M, 15F and 29M took place during Autumn. Decreased appetite was reported by Provers 03aF, 08F, 12F, 20F and 30F. The proving of Prover 20F took place during Spring.

Seasonal cycles in appetite are displayed in Cranes. An increase in food consumption in Autumn occurs followed by a decrease in Spring (Swengal et al. 1996: 111).

5.4.23 Choice of food
A wide variety of food cravings were reported during the proving (see 5.3.32). Prover 03aF, a vegetarian, described a need for protein.

Blue cranes are omnivorous, eating small reptiles, grain, fish and insects, and in captivity almost anything (McLachlan and Liverside 1971: 146). Foods low in calories are not eaten due to the need for energy rich foods (Villee et al. 1984: 709).

5.4.24 Efficient digestion
Prover 14M experienced daily bowels movements during the proving, different from his previous three to four day intervals between bowel movements.

The digestive system of birds is known to be compact and highly efficient (Villee et al. 1984: 708).

5.4.25 Diarrhoea after protein
Prover 12F experienced diarrhoea the morning after eating chicken wings for dinner.
In birds, moist droppings result from foods eaten with high protein content. This is due to the increased water intake which is required for the excretion of extra uric acid (Ringer 1986: 69).

**5.4.26 High metabolism**

Provers 01M, 08F, 09aM, 12F, 14M, 15F, 16M, 22F, 24F, 25F, 27F, 29M and 30F all experienced an increase in their appetite or hunger. Regular stools were reported by Prover 14M. Provers 03aF, 05aM and 12F experienced bouts of diarrhoea. A high fever was experienced by Prover 09aM. Prover 01M, 08F and 10F all complained of feeling extremely hot. A perspiration increase was described by Provers 01M, 10F and 12F. Energy increases were experienced by Provers 01M, 08F, 12F, 14M, 15F, 27F, 28M, 29M.

Most features in the physiology of birds are related to the need for endothermy in flight (Villee et al. 1984: 701). Birds require a sufficiently high metabolism to power flight. A high temperature is required to maintain a high energy output (Fraser 2009: 13). Birds therefore maintain a body temperature of approximately 40 to 43°C (Villee et al. 1984: 703).

**5.4.27 High blood glucose**

Although his blood glucose was not sampled by the researcher, Prover 09aM experienced polyuria, polydipsia and polyphagia with fatigue; symptoms of hyperglycaemia.

Blood glucose in avian blood is approximately twice that of mammalian blood (Ringer 1986: 67-68). This is due to the need for high energy. During moments of stress, corticosterone is produced in the adrenal glands which triggers the release of glucose and fat into the blood stream providing the bird with a surge of energy to minimalize the impact of the stressful event (Birkhead 2012: 187).

**5.4.28 Fullness in head**

Prover 22F experienced a sensation of fullness in her head.
The Blue crane is identified by the appearance of its swollen head (McLachlan and Liverside 1971: 146). Birds in general have a large cerebrum due to the enlargement of part of the grey matter known as the corpus striatum (Villee et al. 1984: 708).

5.4.29 Reproductive derangement

A menstrual delay was reported by Prover 22F. She had experienced nausea [22F: 02:19:30; 03:XX:XX] and severe hay fever [22F: 02:XX:XX; 03:XX:XX] days prior to the expected onset of her menses.

Stress may cause the apparent reduction in reproductivity. Disease, extreme weather, moves to new pens, intraspecific conflict, and human activities can interfere with the onset and maintenance of reproduction (Gee and Russman 1996).

5.4.30 Sternal swelling

The sensation of swelling “in a clear lump in long shape” below her sternum was experienced by Prover 08F.

Birds have an expended sternum which contains a large midventral keel. This allows for a greater surface of attachment of flight muscles (Villee et al. 1984: 706). Grain-eating species also have a structure known as a “crop” located at the lower end of the oesophagus. The crop stores seeds temporarily where they are softened by water (Villee et al. 1984: 709).

5.4.31 Heavy eyes

Heaviness of the eyes was reported by Provers 02M and 06M.

The eyes of birds are relatively large. Those that become active soon after sunrise have larger eyes than those who become active long after (Birkhead 2012: 11). Twenty percent of cranes leave their roost by sunrise with the remainder out within one hundred minutes after sunrise (Johnsgard 1983: 21).
5.4.32 Distension of stomach

Prover 14M described a sensation in has stomach “as if it has been enlarged/extended to have a deep bottom pit” with ravenous hunger.

The “crop” is an extension of the stomach found in grain-eating species at the lower end of the oesophagus. It temporarily stores seeds where they are softened by water (Villee et al. 1984: 709).

5.4.33 Abdominal cramping

Abdominal cramping, unrelated to menses, was reported by Provers 01M, 05aM, 10F and 12F.

During digestion, small stones which have been ingested are vigorously ground into a pulp in the specialized posterior part of the stomach known as the gizzard (Villee et al. 1984: 709).

5.4.34 Breathing difficulties

Difficult respiration was experienced by Provers 08F, 17M and 30F.

Birds have relatively small lungs. Two respiratory cycles are required for a single unit of air to pass through the avian respiratory system (Villee et al. 1984: 709). Their high metabolism also requires large amounts of oxygen, requiring them to have a well-developed respiratory system (Fraser 2009: 13).

5.4.35 Heavy heart

A heavy heart [10F: 05:XX:XX] and chest [09aM: 07:XX:XX] was experienced by provers.

The heart of avian species is large in relation to that of mammals, being one point four to two times larger as a percentage of body weight (Ringer 1986: 68).
5.4.36 Heart beat

Provers 10F and 24F reported having heart palpitations. Prover 10F experienced this with anxiety.

Birds generally have a very rapid heart rate (Villee et al. 1984: 711). Due to an increase of corticosterone at the sight of a predator, researchers believe that birds experience the sensation of fear. This is accompanied by an increase in heart rate and breathing (Birkhead 182: 191-192).

5.4.37 Coronary heart disease

Prover 14M experienced angina-like pains during the proving.

Birds are prone to develop atherosclerosis (Ringer 1986: 68).

5.4.38 Laterality

Noticeable laterality was seen in the proving of *Anthropoides paradiseus* 30CH (see Table 5.2).

The study of brain lateralization, is a particular focus of study in birds due to the apparent use of different hemispheres in the avian brain for different types of information processing. Sidedness can be seen in terms of the individual (preferring the use of one foot over the other, for example) or in terms of the species (preferring a certain eye when scanning for predators, for example) (Birkhead 2012: 27-29). Magnetic sense is linked to the bird’s right eye. Birds are unable to navigate when this eye is covered (Birkhead 2012: 177).

5.5 Clinical indications for *Anthropoides paradiseus* 30CH

Various symptoms and conditions can be treated with *Anthropoides paradiseus* 30CH. It is important to prescribe based on the totality of symptoms and therefore the general symptoms of dryness, thirst, hunger, energy gain or loss and laterality must be acknowledged together with the following conditions.
5.5.1 Attention deficit disorder

Difficulty with concentration was marked during this proving. Provers battled to focus when needing to work and complained of their minds being “all over.” Another symptom of attention deficit disorder that was experienced during this proving was hyperfocus.

5.5.2 Anxiety disorder not otherwise specified

Provers experienced anxiety. Anxiety, unrelated to another clinical condition, such as hyperthyroidism for example, may be treated with *Anthropoides paradiseus* 30CH.

5.5.3 Hyperthyroidism

Increased metabolic rate, evidenced by diarrhoea, perspiration, increased appetite and energy, anxiety and heat intolerance, was noticeable during this proving. The researcher therefore suspects hyperthyroidism as a possible clinical indication of *Anthropoides paradiseus* 30CH.

5.5.4 Pre-diabetes

Polyuria, polyphagia, polydipsia and fatigue was experienced.

5.5.5 Rhinitis, sinusitis, coryza and postnasal drip

Rhinitis, sinusitis, coryza and postnasal drip characterized by dryness, thirst, one sidedness, heaviness of the head and/or eyes, itching, nasal obstruction and weakness are possible indications.

5.5.6 Gastroenteritis

Provers experienced diarrhoea, abdominal cramping and bloating, flatulence and nausea, without vomiting. These were acute episodes therefore the researcher suspects acute gastroenteritis as a possible indication for the remedy.
5.5.7 Headaches

Headaches of various locations and sensations were experienced. Concomitant thirst, dizziness and/or nausea are possible clinical indications.

5.5.8 Symptoms associated with HIV and AIDS

Diarrhoea, fever, night sweats, oral thrush and vaginal itching, skin eruptions and weakness were experienced by provers. The researcher believes these complications and symptoms of HIV and AIDS can be treated with *Anthropoides paradiseus* 30CH.

5.6 Miasmatic indication of *Anthropoides paradiseus* 30CH

This section aims at drawing a comparison between the symptomatology of *Anthropoides paradiseus* 30CH and the tubercular miasm (as presented by Sankaran (2005) and Watson (2009)) and the AIDS miasm, (described by Fraser (2002)).

5.6.1 Tuberculinic Miasm

The keywords of the tuberculinic miasm which coincide with symptoms arising from the proving of *Anthropoides paradiseus* 30CH were:

- Intense activity;
- Change;
- Oppression (Sankaran 2005).

Prover 12F [03:XX:XX, 26:XX:XX] was very productive during the proving. Exercise was enjoyed or desired by Provers 10F [25:XX:XX], 12F [04:XX:XX, 19:XX:XX], 14M [FUR] and 15F [FUR] who “desired being active.”

Prover 10F had the intense desire to change herself [25:XX:XX, 35:XX:XX]. She set goals and desired reading to try and change herself and to make herself a better person. She was motivated to read until she had a mind-set shift.
Oppression was seen in the chest of Provers 17M and 40F who struggled with breathing. Prover 17M described the sensation of someone standing on his chest.

Prover 22F reported feeling homesick, one of the main psychological states associated with the tubercular miasm (Watson 2009). Watson (2009) also speaks of “aspiration” as a key feature of this miasm. This is seen in both Provers 10F [25:XX:XX, 35:XX:XX], and 12F [27:08:30] who was aspiring to pursue a law career. The desire to travel is also seen in the tubercular miasm (Watson 2009: 67). Travel was reported by Prover 12F [26:XX:XX] when she was thinking about travel goals and with many provers dreaming of travel [03aF: 09:XX:XX], [08F: 01:XX:XX], [12F: 17:08:35, 28:XX:XX], [15F: 13:XX:XX].


### 5.6.2 AIDS Miasm

The symptomatology of *Anthropoides paradiseus* 30CH shows a striking similarity to the AIDS miasm as described by Fraser (2002). The table below summarises this comparison.

<table>
<thead>
<tr>
<th>THEME</th>
<th>DESCRIPTION</th>
<th>SYMTOMS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category</td>
<td>Experience Description</td>
<td></td>
</tr>
<tr>
<td>---------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Communication</td>
<td>Better at expressing herself [12F: 05:23:17].</td>
<td></td>
</tr>
<tr>
<td>Empathy</td>
<td>Emotionally hi-jacked, left feeling heavy and anxious [03aF: 00:XX:XX].</td>
<td></td>
</tr>
<tr>
<td>Nature</td>
<td>Desire to be outdoors [03aF: 11:XX:XX], Sinuses ameliorated outside [22F: 12:XX:XX],</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coryza ameliorated outside [10F: 13:XX:XX], Dreams of nature [02: 01:XX:XX], [08F:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>01:XX:XX, 09:07:00, 17:XX:XX], [12F: 28:XX:XX],</td>
<td></td>
</tr>
<tr>
<td>Detached</td>
<td>Too busy to connect with body [08F: 04:XX:XX], Forgetting basic needs of eating and</td>
<td></td>
</tr>
<tr>
<td></td>
<td>drinking [08: 21:22:00].</td>
<td></td>
</tr>
<tr>
<td>Disconnection</td>
<td>The Observer Sexual dream, feeling disembodied, as if observing rather than feeling [08F:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>20:XX:XX].</td>
<td></td>
</tr>
<tr>
<td>Cruelty</td>
<td>Said hurtful words to person of value [10F: 32:XX:XX].</td>
<td></td>
</tr>
<tr>
<td>Indifference</td>
<td>Despair Sadness [03aF: 00:XX:XX, 14:XX:XX], [08F: 13:19:00, 14:XX:XX], [10F: 26:XX:XX,</td>
<td></td>
</tr>
<tr>
<td></td>
<td>32:XX:XX].</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Water As if flowing with water [12F: 05:XX:XX], Drinking lots of water [08F: 00:19:00,</td>
<td></td>
</tr>
<tr>
<td>Dispersion</td>
<td>Thirst and dryness</td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>-------------------</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dry skin [08F: 23:XX:XX].</td>
<td></td>
</tr>
</tbody>
</table>

| Waves      | Waves of head pain [02M: 01:07:00], Waves of arm tingling [08F: 02:XX:XX]. |

<p>| Emptiness  | Stomach feels empty as if enlarged to have a deep pit bottom [14M: 09:XX:XX]. |</p>
<table>
<thead>
<tr>
<th>Music</th>
<th>Moved by music [14M: 03:XX:XX] [08F: 11:23:00], Desires listening to music [08F: 13:19:30, 27:16:00], [10F: 24:XX:XX].</th>
</tr>
</thead>
</table>
Extremes | Excess
---|---

5.7 Summary

General themes of dryness, thirst, increased or decreased energy, large appetite and one sidedness were seen. The common sensations were itching and heaviness. Focus and lack of concentration, isolation and sociability, music, dance and exercise, anxiety and calmness, disorientation and spirituality were mental themes which were clearly evident. The correlation between the ethology and the anatomical and physiological adaptations of *Anthropoides paradisus* to the symptoms produced by provers during the proving period was clearly evident.
CHAPTER SIX: RECOMENDATIONS AND CONCLUSION

6.1 Introduction

The hypotheses, aim and objectives of this study were confirmed and accomplished. The hypothesis that the 30CH potency of *Anthropoides paradiseus* would produce clearly observable proving symptoms in healthy provers was confirmed. The second hypothesis that a comparison of those proving symptoms to the ethology of *Anthropoides paradiseus* would expand the understanding of the therapeutic field of the substance was also confirmed.

The primary objective of this study was to determine the symptoms that would arise from the administration of *Anthropoides paradiseus* to healthy individuals. Symptoms were produced on the mental, emotional and physical spheres. Anxiety and calmness, disorientation, focus and lack of concentration, spirituality, music, dance and exercise, isolation and sociability were all seen on the mental sphere. Physically, symptoms produced by the proving included dryness, polyuria, polydipsia, polyphagia, headaches, muscle pain and spasms, post-nasal drip, hay fever, chest pain, energy increases, weakness and symptom one sidedness. Nausea, bloating and abdominal cramping were other characteristic symptoms.

The secondary objective was to compare the symptomatology of *Anthropoides paradiseus* with the ethology of *Anthropoides paradiseus*. The correlation between the symptoms produced and the behaviour and physiological adaptations of *Anthropoides paradiseus* allowed for a clearer understanding of the causes and processes involved in the symptoms produced during this proving.

6.2 Challenges and Limitations

The proving of *Anthropoides paradiseus* 30CH encountered two major challenges: incomplete or vague recording of symptoms by provers, and a large number of prover dropouts.
The symptomatology derived from a homoeopathic drug proving is greatly dependant on the individual input by the proving participants. Distinct and complete symptoms ensure a good quality proving. Proving participants underwent a pre-proving workshop during which a detailed explanation of correct journaling was presented to the provers. These instructions were further reiterated during the pre-proving consultation where instruction sheets were also distributed. Even though these directions were conveyed to all proving participants, there was great variability in the amount of detail and completeness seen in the recording of symptoms by provers.

A large number of dropouts were experienced during this proving. Reasons for this included:

- loss of journals,
- incorrect following of procedures,
- personal reasons, including death in the family, and
- unwillingness to continue after initially signing up.

As a result of this, extra provers had to be recruited in order to achieve the thirty prover sample size of this study.

6.3 Recommendations

6.3.1 The Prover Group

The difference in detail and completeness in the recording of symptoms was most notable, although not entirely exclusive, between the homoeopathic students and practitioners versus the proving population with no prior homoeopathic training. This could be attributed to the fact that provers who were neither homoeopathic students nor practitioners would likely have had less of an understanding of how homoeopathic provings work and what is expected of the symptom recording process. It is therefore recommended that future provings utilize a larger population of homoeopathic students and practitioners.

The poor quality of symptoms, i.e. the incomplete recording of the details of produced symptoms, can also be attributed to potential prover non-compliance
or lack of enthusiasm during this study, as well as poor self-awareness of the provers. It is therefore recommended that improved and more frequent contact with the provers by the researchers takes place in future studies. This will encourage prover self-awareness and compliance. Designing provings which utilize more than two researchers will reduce the workload on each researcher, and would allow for an increase in prover supervision and improvement of the quality of the proving.

Improved contact with provers and supervisors can also be accomplished with a meeting after the first week of ingestion of the substance. This will allow the researcher to observe the provers’ recording style and educate them further on better journaling methods if required.

It is also recommended that a more detailed outline of proving procedures and prover expectations be given before the participants agree to taking part in the study. This will ensure that provers are fully aware of what they are signing up for and can commit to the entire process.

It is further recommended that an alternate form of the paper-journal be used. In this modern media age, the creation of a mobile app, whereby symptoms can be recorded and sent directly to the researcher could combat many of the limitations of provings outlined in 6.2 Challenges and Limitations. This medium, which the general population is accustomed to, will:

- Ensure that journals are not lost;
- Allow consistency in the detail of the recording of symptoms and allow instant communicative education of the prover from the researcher regarding symptom recording;
- Make the researchers work easier, as additional transcribing of symptoms would not be necessary due to the digital data being available; and
- Merge traditional proving practices with the technological era of today.
6.3.2 Further provings and trials

It is recommended that further provings of *Anthropoides paradiseus* are conducted using various potencies other than the 30CH potency. Vithoulkas (2002) and Sherr (2003) suggest that provings should be conducted at high, medium and low potencies. This allows for a greater understanding of the remedy and its potential uses at differing potencies. The researcher further recommends conducting clinical trials and treating the indicated conditions with *Anthropoides paradiseus* 30CH.

An idea first proposed by Wright (1999), the “South African Materia Medica” is a composition of indigenous remedies which have the potential to treat ailments affecting the South African population. Being the national bird, *Anthropoides paradiseus* will now be added to this collection. It is recommended that more indigenous substances are proved and understood, and a physical manuscript of a “South African Materia Medica” is published.

It is also recommended that the avian group of remedies is expanded upon in terms of provings and homoeopathic classification. Being a relatively new group of remedies, there are numerous species and varieties of birds which have not been proved. Further provings and analyses of families of birds are needed in the terms of similarities and common themes within the groups of families.

6.3.3 Publication

The proving of *Anthropoides paradiseus* has produced symptoms on the mental, emotional and physical levels. It is recommended that this information be published as articles in journals for the use of homoeopaths worldwide.

6.4 Conclusion

The proving of *Anthropoides paradiseus* 30CH was a journey and growing experience for both the researchers and proving participants. The substance provided the participants with the tools and directions needed for them to navigate their environments and cope with their stressors, showing them the intuitive path
to attaining freedom. These were often tools which they had always had but had forgotten to use, which, if employed, will bring them a feeling which they know, freedom.

In the South African context, the researcher believes that *Anthropoides paradiseus* 30CH can aid the population in finding the mindset needed for better coping and growth. In the healthcare sector, while assisting with symptoms of diseases such as HIV, this remedy may also assist with the shifting of mindsets from feeling despair and loneliness to that of feeling motivated to improve their situations, wanting to be healthy and recovering a drive they had lost. This effect of *Anthropoides paradiseus* 30CH was seen by the researcher as a metaphorical symbol of South Africa’s national bird and applied to the greater socio-political sphere of our country. This symbol, which is in accordance with the AIDS miasm, represents a country with the ability to know how to improve the socio-political climate but lacking the correct motivation to do so.

The researcher found the proving process to be very fulfilling work and aims to undergo this process again in the future. The insight brought about during this proving will allow the prescription of a similimum to cure ailments that were previously treated symptomatically.
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Greetings to you

It is with great pleasure that I welcome you into this journey of discovery, and thank you for taking part in this proving. We are grateful for your willingness to contribute to the advancement and growth of Homoeopathic science, and are sure that you will derive benefit from the experience.

The only way to expand our armamentarium of homoeopathic remedies is through comprehensive provings. Many provings have already been conducted to reveal remedies' individual characteristics, but in order to keep expanding the therapeutic range of homoeopathy it is necessary to continually conduct provings on new substances.

Each homoeopathic prescription is unique to the individual patient. The totality of symptoms of the patient are matched up with the symptoms a particular remedy produced in healthy subjects during a proving study. Provings are therefore the main source of data for the homoeopathic materia medica.

Outline of the Procedures:

**Your Responsibilities as a prover:**

**Before the proving:**
Provers have to ensure that they have the following:
- The correct journal, provided by the researcher
- Read and understood these instructions
- Had a case history taken and a physical examination performed
- Signed both informed consent forms
The proving supervisor will contact you with the date you are required to commence the pre-proving observation period and the date you are required to start taking the remedy. You will also agree on a daily contact time for the supervisor to contact you.

**Taking the remedy:**
You will begin taking the remedy on the day you and supervisor have agreed upon. You will be required to record the time that you take each dose. Time keeping is an important element of the proving.

The remedy should be taken on an empty stomach with a clean mouth. Neither food nor drink should be taken for a half hour before or after taking the remedy. The remedy should not be taken for more than 3 doses a day for two days (6 powders maximum). In the event that the prover experiences symptoms or those in close proximity to the prover observe any proving symptoms, the prover will not take any further doses of the remedy. This is very important.

The term “proving symptoms” implies:
1) Any new symptoms, i.e. symptoms that the prover has 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 the prover has not experienced for more than a year.

If you have any doubt, you are encouraged to contact the proving supervisor.

**Lifestyle during the proving:**
It will be necessary for you to avoid all anti-doting factors such as coffee, camphor, and mints. If you normally use these substances, you will be asked to stop consuming them for two weeks before, and for the duration of the proving. You will be asked to protect the powders you are proving like any other potentized remedy, i.e. store them in a cool place, dark place away from strong smelling substances, chemicals, and electric equipment and cell phones. For a successful proving, moderation in work, alcohol, exercise and diet has to be maintained.

You will be required to avoid taking medication of any sort, including antibiotics and any steroid or cortisone preparations, vitamins or mineral supplements, herbal or homoeopathic remedies. In the event of a medical or dental emergency of course common sense will prevail. You will contact your doctor, dentist, or local hospital as necessary. Contact with the supervisor will need to be made as soon as possible.

**Recording of symptoms:**
Once you have commenced the proving, you will carefully note down any symptoms that arise, whether they are old or new, and the time of the day or night that they occurred. This should be done as vigilantly and frequently as possible so that the details of the symptom will be as accurate as possible. You will be encouraged to make a note even if no symptoms arise.

Each day will begin on a new journal page with the date noted at the top of each page, as will the day of the proving. Symptoms will be noted in an accurate, detailed but brief manner. You are encouraged to note symptoms in your own language.

Information about location, sensation, modality, time, and intensity is particularly important:

- **Location:** You need be accurate with anatomical descriptions. Simple, clear diagrams may be used, with attention to which side of the body is affected.
- **Sensation:** Description of this has to be as careful and as thorough as possible e.g. burning, shooting, stitching, throbbing, and dull, etc.
- **Modality:** A modality describes how a symptom is affected by different situations/stimuli. Better (>) or worse (<) from weather, food, smells, dark, lying, standing, light, people, etc.
**Time:** Noting of the time of onset of the symptoms is important, when they cease or are altered. Is it generally $>$ or $<$ at a particular time of day, and whether it is it unusual for the prover.

**Intensity:** This is a brief description of the sensation of any symptomatology and the effect it has on the prover.

**Aetiology:** This determines whether anything seems to cause or set off the symptom and whether this does do this repeatedly.

**Concomitants:** Any symptomatology arising will be classified as a concomitant sign or symptom whether or not these symptoms appear:
- together,
- always seem to accompany each other, or
- seem to alternate with each other.

**This is remembered as:**
- C - Concomitants
- L - Location
- A - Aetiology
- M - Modality
- I - Intensity
- T - Time
- S - Sensation

Full description of dreams is of importance to the proving study, and in particular, noting the general feeling or impression the dream left on the prover. Mental and emotional symptoms are important, and sometimes difficult to describe- you will be enthused to take special care in noting these. Reports from friends and relatives can be particularly useful; you will be required to include these where possible. A general summary of the proving will be made at the end of proving period. Detailed notes discussing how the proving affected you in general is required.

As far as possible each symptom will be classified by making a notion 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. Stating when the symptom occurred previously is required.
- **(AS)** – Alteration in the present or old symptom. (E.g. used to be on the left side, now on the right side).
- **(US)** – An unusual symptom for you.

**Experimental method:**

- An interview will be conducted with each chosen prover to decide whether they have met the necessary criteria. If they have met the criteria, they will sign the Preliminary Consent (Appendix E). The prover will be given a chance to ask any questions or address any concerns he/she may have. The prover will then be given a checklist to determine their suitability for inclusion in this proving (Appendix F).
- After the provers have been selected in the above mentioned process, a meeting will be conducted in the seminar room at the Department of Homoeopathy between the 30 chosen provers and the two researchers this serves to inform the provers of what is expected of them during the proving and will then be given an overview of the basic procedure of the proving (Sherr 2003:30).
- A physical examination will be conducted on a scheduled date. A thorough case history (following the given outline in the Case History Sheet in Appendix I) of each prover will be taken by the researchers prior to the commencement of the proving. A Prover Information Sheet (Appendix H) will be given to the selected provers and they will sign an informed consent (Appendix H).
• After the completion of the consultation, each prover will be given the following:
  o A personal prover code
  o A journal, in which symptoms will be recorded
  o The powders that the provers will have to consume
  o A starting date

• On the assigned starting date of the proving, each prover will have to record their ‘normal’ state in the given journal, at a minimum of three times a day. This is important to get the prover familiarized with self-observation and to set a standard for each prover’s normal state of health.

• The researchers will contact the provers to ensure accuracy and compliance in the recording of symptoms.

• One week after the pre proving journal keeping, each prover will take one dose of the proving remedy and record any symptoms that they come across. If severe symptoms do occur then the prover must not take any further doses of the proving remedy, if the symptoms are very mild, the prover may take one more dose (Sherr 2003: 34).

• If no symptoms occur, then the provers will continue taking the remedy three times a day for two days. If any symptoms do occur, they should not take any further doses.

• The daily recording of symptoms by the provers will continue for a total of four weeks.

• Telephonic communication between the researcher and the prover will be carried out to discuss the symptoms of each prover during the first week of the proving.

• During the second week, researchers will contact provers via the telephone every second day, during the third week researchers will contact the provers every third day and in the fourth week the researchers will contact the provers once a week.

• Recording of the symptoms will have to be done by the prover until all proving symptoms have run their full course.

• The journals from the provers will be collected at the end of the four weeks and a post proving meeting will be scheduled (Sherr 2003:32).

• Before symptom extraction begins, the proving will be disclosed to the researchers so that the verum and placebo groups may be distinguished.

• A study of the data collected and extraction of symptoms will proceed.

• Any symptomatology obtained from the proving research study will be collected and either included or excluded as valid symptoms according to their specific criteria. This information will then be written into materia medica and repertory format.

**Inclusion criteria:**

To participate in this proving you must meet all the inclusion criteria:

- He/she must be between the ages of 18 and 75 years old;
- Must not need any medication, including chemical, allopathic, homoeopathic or other;
- Must not be on, or have been on the contraceptive pill or hormone replacement therapy in the last 6 months;
- Must not be pregnant or breastfeeding;
- Must not have had surgery in the last 6 weeks;
- Must not use recreational drugs such as cannabis, LSD or ecstasy (MDMA);
- Must not consume more than two measures of alcohol a day;
- Must not consume more than 10 cigarettes a day;
- Must not consume more than 3 cups of tea or coffee a day;
- Must be in a general good state of good health;
- Must be willing to follow the proper procedure for the duration of the proving.
Exclusion Criteria:
You may not participate in this study if:

- You are younger than 18 years old or older than 75 years old,
- You are on chronic allopathic, homeopathic, or herbal medication,
- You are on, or have been on, the oral contraceptive pill or hormone replacement therapy in the last six months,
- You are pregnant,
- You have had surgery in the last six weeks,
- You use recreational drugs such as cannabis, LSD, or ecstasy (MDMA),
- You consume more than two measures of alcohol a day,
- You smoke more than 10 cigarettes a day,
- You consume more than 3 cups of coffee or tea a day,
- You are in a poor state of health,
- You are not willing to follow the proper procedure for the duration of the proving.

Randomisation:
The randomisation process will be carried out electronically. The aim of this process is so that neither the researchers nor the provers will have knowledge of who is in the placebo or verum group. Thus, a double blind status is achieved.
The powders of both the verum and control groups will be identical in presentation. An independent third party will administer the powders to the provers. This further ensures that the identity of the provers within the two groups remains unknown to the researcher.

Your Risks or Discomforts:
Mild discomfort may be experienced as a result of participating in the proving. These symptoms are “proving” symptoms and are functional and sensational in nature. Upon discontinuing the remedy these symptoms subside. Complete recovery is usual. On rare occasions that a symptom becomes distressing then the supervisor in charge will antidote the effects of the remedy. A specific remedy will be prescribed by the supervisor to antidote the symptoms. This will be done after a complete physical examination and case history process by the supervisor in charge.
All provers will be informed and warned about the inconveniences, potential risks, objectives and benefits of the study and they will be made to sign a consent form before commencing with the study.
You are free to withdraw from the study with no repercussions at any stage.

Benefits:
It is postulated that each proving undertaken strengthens the body’s vital force (Hahnemann, 1996: 208). Provers learn and develop the skill of observation and gain homoeopathic knowledge through direct involvement in proving. You may be cured of certain ailments if the remedy is your simillimum.

Reason/s why you May Be Withdrawn from the Study:
- Anti-doting of the prover may occur if too severe aggravations such as illnesses that threaten the patients health may occur or if you experience extreme discomfort during the course of the proving period.
• Acute medical emergencies not related to proving study occurring e.g. acute appendicitis, motor vehicle accident or any incident requiring immediate hospitalization/medical intervention.
• Non-compliance to the instructions presented to you.

Remuneration:
No remuneration is offered to the prover.

Costs of the Study:
There is no expense to the prover for participating in the proving

Confidentiality:
It is important for the quality and the credibility of the proving that the prover discusses their symptoms only with the supervisor. You are to keep your symptoms to yourself and will not discuss them with fellow provers.
Prover privacy is something that will be protected. Only the supervisor will know your identity and all the information will be treated in the strictest confidence.

Research-related Injury:
No compensation will be offered to the prover.

Persons to Contact in the Event of Any Problems or Queries:
Please contact the researcher, Miss Melissa Godfrey (B,tech Homoeopathy) (0722862939), Mr. Garatt Hamilton (B.tech: Homoeopathy) (0727491739), my supervisor Dr. M. Maharaj (M.tech: Homoeopathy) (0833882688) or the Institutional Research Ethics administrator on 031 373 2900. Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or dvctip@dut.ac.za.
INSTITUTIONAL RESEARCH ETHICS COMMITTEE (IREC)
CONSENT

Statement of Agreement to Participate in the Research Study:

☐ I hereby confirm that I have been informed by the researcher, Melissa Godfrey about the nature, conduct, benefits and risks of this study - Research Ethics Clearance Number,

☐ I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.

☐ I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.

☐ In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.

☐ I may, at any stage, without prejudice, withdraw my consent and participation in the study.

☐ I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.

☐ I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

______________    __________   __________   ________________

Full Name of Participant    Date    Time    Signature / Right Thumbprint

I, ____________ (name of researcher) herewith confirm that the above participant has been fully informed about the nature, conduct and risks of the above study.

______________    __________   ________________

Full Name of Researcher    Date    Signature

______________    __________   ________________

Full Name of Witness (If applicable) Date    Signature

______________    __________   ________________

Full Name of Legal Guardian (If applicable) Date    Signature

APPENDIX B
An exciting new proving is about to commence at DUT. You could be a part of it!

If you:
- Are between 18 and 75 years of age
- Are in a general state of good health
- Have not used the oral contraceptive pill or HRT within the last 6 months
- Are not pregnant or breastfeeding
- Are willing to follow the proper procedures (including undergoing a case history & physical examination)

Contact: Melissa Godfrey 072 286 2939 or Garatt Hamilton 072 749 1739 or the Homoeopathic Day Clinic 031 373 2041

PROVING BEGINS JULY 2015
APPENDIX C

PRELIMINARY LETTER OF INFORMATION

Title of the Research Study: A homeopathic drug proving of _____________ with a subsequent comparison the ethology of the substance.

Principal Investigator/s/researcher: M. Godfrey (B. Tech: Homoeopathy)
Co-Investigator/s: G. Hamilton (B. Tech: Homoeopathy)
Supervisor/s: Dr. M Maharaj (M. Tech: Homoeopathy)

Brief Introduction and Purpose of the study:
A homoeopathic drug proving will be conducted by M. Godfrey and G. Hamilton with subsequent analysis and comparisons being conducted individually. 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 they may experience. These symptoms are then said to form the drug picture for that substance and can be used as basis for prescription according to the Law of Similars, when a patient displays a similar symptom picture. Provings are vitally important to homoeopathy as they represent the only truly accurate manner in which to ascertain the action of the homoeopathic drugs and allow on to gain a practical and experimental understanding of homoeopathic medicines.

Outline of the procedures:
1. Once you have read and understood this information letter fully and had the opportunity to ask questions you will be asked to sign a preliminary consent form which allows the researcher to take you through the preliminary stage of this research.
2. After signing the preliminary consent form the researcher will determine if you meet the required criteria for this study, this will take place in the form of a set of questions about your lifestyle and medical history.
3. If you meet the required criteria in order to participate the next process can begin.
4. The researcher will then conduct a homoeopathic case history; this is a detailed interview where the researcher asks detailed questions about your health.
5. The researcher will then conduct a general physical examination and measure things like blood pressure, pulse, height, weight, etc.
6. The researcher will also request a urine sample from all potential female provers of child bearing age – this is so that a routine pregnancy test can be conducted on this urine sample. The urine sample test will be done at the end of the physical examination and the researcher will give you feedback immediately thereafter.
7. After all of the above are conducted (which should take about 1 hour to perform) the researcher will provide feedback on their finding and then if all the necessary criteria are met you will be invited to attend a prover training workshop where all provers will be trained on how to conduct a proving.

At any stage in the preliminary process you are free to change your mind and withdraw without having to provide any reason for doing so. All of the above will be conducted at the homoeopathic Day Clinic at Durban University of Technology.

Risk or Discomforts to the Participant: There is no risk to participation or risk of discomfort in this preliminary stage of the proving; no medicine is tested at this stage. Prospective provers are only being screened for suitability for the main part of the proving.
Benefits:
Although there is no direct benefit to participating in this preliminary stage of the proving; you will receive a comprehensive assessment of your health status which may be of indirect benefit to you, there will be no charge for this assessment and there will be no remuneration for your participation – you are requested to volunteer your time accordingly.

Reasons why the Participant May Be Withdrawn from the Study:
Participation in this study is purely voluntary and provers can withdraw themselves at any time should they wish to do so. Participants will however be excluded if they do not meet the inclusion criteria, in addition should participants fall ill or require orthodox or other medication during the study they may be excluded by the researchers.

Remuneration:
Participants will not be remunerated for participation in this proving.

Costs of the Study:
There will be no costs to the participants for partaking in this research.

Confidentiality:
All of the above will be conducted in private; and all information is kept strictly confidential, on the researchers will have access to the information and at no stage will your name be mentioned in the research process. Only the researcher will be present during you physical examination.

Research-related Injury:
Participation in this preliminary stage of the proving is highly unlikely to result in any injury, since the preliminary stage of the proving is merely a screening process, however all provers are covered by an insurance policy in the event that they incur any injury or harm.

Persons to Contact in the Event of Any Problems or Queries:
If you have any queries or concerns during the duration of this proving you may please contact the following individuals:

- Researcher: Melissa Godfrey (072 286 2939)
- Co-researcher: Garatt Hamilton (072 749 1739)
- Supervisor: Dr. M. Maharaj (083 388 2688)
- The institutional Research Ethics Administrator (031 373 2900)

Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or dvctip@dut.ac.za.
PRELIMINARY CONSENT
Statement of Agreement to Participate in the research Study:
- I hereby confirm that I have been informed by the researcher, __________________ (name of researcher), about the nature, conduct, benefits and risks of this study – Research Ethics Clearance Number: ______________.
- I have also received, read and understood the above written information (Participant Letter of Information) regarding the study.
- I am aware that the results of the study, including personal details regarding my sex, age, date of birth, initials and diagnosis will be anonymously processed into a study report.
- In view of the requirements of research, I agree that the data collected during this study can be processed in a computerised system by the researcher.
- I may, at any stage, without prejudice, withdraw my consent and participation in the study.
- I have had sufficient opportunity to ask questions and (of my own free will) declare myself prepared to participate in the study.
- I understand that significant new findings developed during the course of this research which may relate to my participation will be made available to me.

<table>
<thead>
<tr>
<th>Full Name of Participant</th>
<th>Date</th>
<th>Time</th>
<th>Signature / Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>________________________</td>
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<tr>
<th>Thumbprint</th>
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</thead>
<tbody>
<tr>
<td>I, __________________ (name of researcher) herewith confirm that the above participants have been fully informed about the nature, conduct and risks of the above study.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name of Researcher</th>
<th>Date</th>
<th>Signature</th>
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<tbody>
<tr>
<td>________________________</td>
<td>______</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Full Name of Witness (If applicable)</th>
<th>Date</th>
<th>Signature</th>
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<tbody>
<tr>
<td>________________________</td>
<td>______</td>
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<table>
<thead>
<tr>
<th>Full Name of Legal Guardian (If applicable)</th>
<th>Date</th>
<th>Signature</th>
</tr>
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<tbody>
<tr>
<td>________________________</td>
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</table>

APPENDIX D
Suitability for inclusion in the Proving
(All information will be treated as strictly confidential)
SURNAME: 
FIRST NAMES: 
SEX: M / F
TELEPHONE NUMBER: 

PLEASE CIRCLE THE APPROPRIATE ANSWER:

- Are you between the ages of 18 and 75? YES/NO
- Are you on or in need of any medication? YES/NO
  - Chemical/allopathic YES/NO
  - Homoeopathic YES/NO
  - Other YES/NO
- Have you been on the birth control pill/any form of contraceptive or hormone replacement therapy in the last 6 months? YES/NO
- Are you pregnant or nursing? YES/NO
- Have you had surgery in the last six weeks? YES/NO
- Must not have any surgical or medical procedures planned for the duration of the proving period YES/NO
- Do you use recreational drugs such as cannabis, LSD or MDMA (ecstasy)? YES/NO
- Do you consume more than: YES/NO
  - Two measures of alcohol per day?
  - (1 measure=) 1 tot/1 beer/ ½ glass of wine per day?
  - 10 cigarettes per day?
  - 3 cups of tea or coffee per day?
- Do you consider yourself to be in a general state of good health? YES/NO
- Are you willing to follow proper procedures for the duration of the proving? YES/NO

This appendix has been adapted from Wright, C. 1999. A Homoeopathic Drug Proving of Bitis arietans arietans, M. Tech. Hom. Dissertation, Durban University of Technology, Durban
**APPENDIX E**

**Proving Case History Form**

ALL INFORMATION WILL BE TREATED AS STRICTLY CONFIDENTIAL

<table>
<thead>
<tr>
<th>PROVER NUMBER</th>
</tr>
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<table>
<thead>
<tr>
<th>SURNAME:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>FIRST NAME(S):</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SEX:</th>
<th>M / F</th>
<th>AGE:</th>
<th>CHILDREN:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>OCCUPATION:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>MARITAL STATUS:</th>
<th>S / M / D / W</th>
</tr>
</thead>
</table>

1. **Past Medical History:**

(Please list previous health problems and their approximate dates :)

<table>
<thead>
<tr>
<th>Cancer</th>
<th>HIV</th>
<th>Parasitic infections</th>
<th>Glandular fever</th>
<th>Bleeding disorders</th>
<th>Eczema/ Skin conditions</th>
<th>Warts</th>
</tr>
</thead>
<tbody>
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</table>

Do you have a history of any of the following? [Please tick relevant blocks]

<table>
<thead>
<tr>
<th>Cancer</th>
<th>HIV</th>
<th>Parasitic infections</th>
<th>Glandular fever</th>
<th>Bleeding disorders</th>
<th>Eczema/ Skin conditions</th>
<th>Warts</th>
<th>Asthma</th>
<th>Pneumonia/ Chronic bronchitis</th>
<th>Tuberculosis</th>
<th>Boils/ Suppurative tendency</th>
<th>Smoking</th>
<th>Oedema/ Swelling</th>
<th>Haemorrhoids</th>
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</tbody>
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310
2. Surgical History:
(Please list any past surgical procedures [e.g. tonsils, warts, moles, appendix etc.] and their approximate dates :)
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

3. Family History:
Is there a history of any of the following within your family?
(including siblings, parents and grandparents)
Cardiovascular disease ☐ incl. hypertension, heart disease, etc.
Cerebrovascular disease ☐ incl. stroke, TIA, etc.
Diabetes mellitus ☐
Tuberculosis ☐
Mental illness ☐ incl. depression, schizophrenia, suicide, etc.
Cancer ☐
Epilepsy ☐
Bleeding disorders ☐

Please list any other medical conditions within your family:

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<thead>
<tr>
<th></th>
<th>Grand-</th>
<th>Mother</th>
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<tbody>
<tr>
<td>Mother</td>
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<tr>
<td>Grand-</td>
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</table>
4. Background Personal History:

Allergies:
___________________________________________________________________
___________________________________________________________________

Vaccinations:
___________________________________________________________________
___________________________________________________________________

Medication (including supplements):
___________________________________________________________________
___________________________________________________________________

Estimation of daily consumption:
Alcohol:
___________________________________________________________________

Cigarettes:
___________________________________________________________________

5. Generalities:

Energy:
Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

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<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
<td>8</td>
<td>9</td>
<td>10</td>
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</tbody>
</table>
Sleep:
Quantity: _________________________________________________________
Quality: _________________________________________________________
Position: _________________________________________________________

Dreams: _________________________________________________________
_______________________________________________________________

Time modalities:

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Weather modalities:

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Temperature modalities:

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Perspiration: _______________________________________________________

Appetite: _________________________________________________________

Cravings: _________________________________________________________

313
Aversions

>  

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Thirst:

___________________________________________________________________
___________________________________________________________________

Bowel habits:

___________________________________________________________________
___________________________________________________________________

Urination:

___________________________________________________________________
___________________________________________________________________

Menstrual cycle and menses:

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<thead>
<tr>
<th>Menarche:</th>
<th>Yrs</th>
<th>Regular</th>
<th>Irregular</th>
<th>Pre-menstrual:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LMP:</td>
<td></td>
<td>Interval: days</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nature of bleed:</td>
<td>Duration: days</td>
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<thead>
<tr>
<th>Meno-</th>
<th>Metro-</th>
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<table>
<thead>
<tr>
<th>Post-menstrual:</th>
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</table>

Pain:

___________________________________________________________________

6. Head-to-toe and Systems Overview:

Head:

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Eyes and Vision:

___________________________________________________________________
___________________________________________________________________
Ears and Hearing:

Nose and Sinuses:

Mouth, Tongue and Teeth:

Throat:

Respiratory System:

Cardiovascular System:

Gastro-intestinal System:

Urinary System:

Genitalia and Sexuality:

Musculoskeletal System:

Extremities:
Upper:
Lower: ______________________________________________________________

Skin: ________________________________________________________________

Hair and Nails: _______________________________________________________

Other: ______________________________________________________________
7. Psychic Overview:

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<thead>
<tr>
<th>Disposition:</th>
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<tr>
<th>Fears:</th>
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<th>Relationships:</th>
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<table>
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<tr>
<th>Social Interaction:</th>
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<tr>
<th>Ambition/ Regret:</th>
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<tr>
<th>Hobbies/ Interests:</th>
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</table>
8. The Physical Examination:

a) Physical Description

<table>
<thead>
<tr>
<th>Frame/ Build:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Hair colour:</td>
<td></td>
</tr>
<tr>
<td>Complexion:</td>
<td></td>
</tr>
<tr>
<td>Eye colour:</td>
<td></td>
</tr>
<tr>
<td>Skin texture:</td>
<td></td>
</tr>
</tbody>
</table>

b) Vital Signs

<table>
<thead>
<tr>
<th>Height:</th>
<th>m</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight:</td>
<td>kg</td>
</tr>
<tr>
<td>Pulse rate:</td>
<td>beats/min</td>
</tr>
<tr>
<td>Respiratory Rate:</td>
<td>breaths/min</td>
</tr>
<tr>
<td>Temperature:</td>
<td>°C</td>
</tr>
<tr>
<td>Blood Pressure:</td>
<td>/ mmHg</td>
</tr>
</tbody>
</table>

c) Pregnancy Test

<table>
<thead>
<tr>
<th>POSITIVE:</th>
<th>NEGATIVE:</th>
</tr>
</thead>
</table>

d) Findings on Physical Examination [Tick positive blocks]

<table>
<thead>
<tr>
<th>Jaundice</th>
<th>Oedema</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anaemia</td>
<td>Lymphadenopathy</td>
</tr>
<tr>
<td>Cyanosis</td>
<td>Dehydration</td>
</tr>
<tr>
<td>Clubbing</td>
<td></td>
</tr>
</tbody>
</table>
Specific System Examinations:

| Consultation Date: | Signature: |