

**A homoeopathic drug proving of
*Acridotheres tristis***

by

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Master's Degree in Technology: Homoeopathy in the Department of
Homoeopathy at the Durban's University of Technology.

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

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*Dedicated to my parents and siblings for your patience and
unconditional support*

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ABSTRACT

Introduction

The aim of the study was to determine the effect of *Acridotheres tristis* 30CH on healthy volunteers (provers) and to record the clearly observable signs and symptoms produced, so that *Acridotheres tristis* 30CH may be prescribed according to the Law of Similars, as required by homoeopathy.

Methodology

The proving of *Acridotheres tristis* took the form of a randomised, placebo-controlled trial on 30 healthy volunteers who met inclusion criteria. The 30th centesimal potency of the tail feather was administered as lactose powders and fifty percent of provers were randomly administered an identical placebo-control substance.

The collection of the data from the provers took the form of a journal in which each prover's symptoms were recorded for six weeks, including a one-week observation period prior to taking the powders, and a proving period of five weeks after administration of powders. On completion of the proving, each journal was assessed by the researcher to determine the suitability of the recorded symptoms for inclusion in the materia medica of *Acridotheres tristis*. These symptoms were then translated into the language of the materia medica and repertory and the remedy picture then formulated. Data from case histories, physical examinations and group discussions were also taken into account during the analysis of the proving symptoms.

Results

The homoeopathic drug proving of *Acridotheres tristis*, conducted as a double-

blind, randomised and placebo-controlled study produced a wide range of symptoms. In the collated edited data arising from the proving 396 journal entries were extracted and 595 rubrics in total were formulated, of which 56 rubrics were new. The main symptoms belonging to the mental and emotional spheres of this remedy include depression, anxiety, memory weakness and isolation accompanied by a need for solitude. The characteristic physical symptoms include headaches, dizziness, extreme fatigue, skin eruptions especially pimples and rashes, haemorrhoids, numbness and severe dysmenorrhoea. Other symptoms indicate a possible use in the treatment of gastro-intestinal complaints which include nausea, abdominal cramps, abdominal distention and heartburn.

Conclusion

The investigation supported the hypothesis that *Acridotheres tristis* would produce clearly observable signs and symptoms in healthy volunteers. It is essential that the proving symptoms be verified and expanded through clinical trials and further provings of *Acridotheres tristis* in various potencies, so that it becomes well-utilized remedy in the future.

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DEFINITIONS OF TERMS

PROVING

A proving is a homoeopathic drug testing on healthy volunteers where symptoms that develop are recorded, compiled, and organised into materia medica and repertory formats (Rowe, 1998:158).

PROVER

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

LAW OF SIMILARS

A medicine that can produce symptoms in a healthy person will cure the same symptoms in a sick person (Danheisser and Edwards, 1998:14).

PLACEBO

Placebo is an inactive agent used for comparison with the substance or method to be tested in a control trial (Swayne, 1998:213).

VERUM

In the context of a homoeopathic drug proving, verum refers specifically to the substance that is administered to provers that is medicinally active in contrast to the medically inert placebo (Moore, 2006:XIV).

INDIGENOUS

Indigenous refers to a species that is native to a geographical area (Sikula, 2004).

PHARMACOPOEIA

A pharmacopoeia is the supreme authoritative book published by an authority or

government of any country that deals with the rules and regulations of the standardisation of drug substances (Goel, 2002:469).

POTENTISATION

Potentisation is the process of serial dilution with succussion, including trituration or fluxion, which is used in the production of a homoeopathic remedy to develop the activity of that remedy (Swayne, 1998:214).

TRITURATION

Trituration is the process of grinding the substance that is insoluble in alcohol, with milk of sugar in a mortar and pestle for three hours (Rowe, 1998:158).

SUCCUSSION

Succussion is the action of vigorously shaking a solution of a medicine during its preparation between dilutions (Roy, 1994:147).

30TH CENTESIMAL POTENCY

The thirtieth step in serial dilution with succussion, using a scale of one in one hundred, having a deconcentration of 1×10^{60} (Kerschbaumer, 2004).

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, derived from their toxicological, homoeopathic pathogenic trials (provings) and clinical experience of their use (Swayne, 2000).

MIASM

A miasm is a predisposition toward chronic disease underlying the acute manifestations of illness and is transmissible from generation to generation (Vithoulkas, 1986:130).

REPERTORY

Systematic cross reference of symptoms and disorders to the homoeopathic medicines in whose therapeutic repertoire (materia medica) they occur. The strength or degree of the association between the two is indicated by the type in which the medicine name is printed (Swayne, 2000).

RUBRIC

“An individual entry in a repertory that describes a symptom” (Rowe, 1998:158).

CHAPTER ONE

OVERVIEW

1.1 INTRODUCTION

The experimental pathogenesis of homeopathic medicines, commonly known as proving, investigates the effects of repeated doses of substances in healthy volunteers. These effects are used to identify the pathogenic properties of the substance, and hence its homoeopathic repertoire: the pattern of disorder that it may be used to treat homoeopathically (Swayne, 1998:170). It is this insight which is the fundamental pillar of the science of homoeopathy: The Law of Similiars which states: “any medicine capable of producing certain effects when taken by a healthy human being is capable of curing any illness that displays similar effects” (Sankaran, 1991:1; Vithoukias, 1998).

According to Sherr there is no other way to predict the effect of any given substance as a remedy with any degree of accuracy (Sherr, 1994:7). Hence the need for homoeopathic research provings as it demonstrates the efficacy of homoeopathic remedies and more importantly how homoeopathy works (Cook, 1989:93).

Provings are the only way of identifying new homoeopathic remedies, which may be added to the materia medica and as such provings will always take up a major part of the homoeopathic research effort (Cook, 1989:93). As explained by Shore, there is without doubt a need for new remedies: ‘Life around us is becoming increasingly complex. We are exposed to influences and pressures that were unimagined a few hundred years ago. Any discipline, any practice, any living process has no choice but to fall under the influence of the age that it lives. Thus if the science of Homoeopathic Medicine is to live, it must correspond to the

world around it' (Shore, 2004:14). Therefore the potential for new homoeopathic remedies is limitless (Cook, 1989:93).

It was noticed that in the 1990's, within the various groups of animals there exists a great disproportion in the distribution of classes of animals proved. Shore and his colleagues recognized that of all the animal groups, the avian species were the one group that was completely neglected. As a result great attention has been placed on birds and at present 16 bird provings have been conducted, contributing to a more reasonable distribution of the animal group in the materia medica (Shore, 2004:5).

As described by Shore, there is a set of symptoms and a manner that mark the bird remedies distinctly from other remedy groups, as well as general patterns that put them within the animal kingdom. It is clear that in birds the level of differentiation from other animal groups occurs at the level of mind and spirit (Shore, 2004:33). For example, in the bird mind the search for spiritual awareness is heightened, especially in connection with the need for freedom and a sense of rightness. Birds in nature are compassionate, protective, intuitive and helpful. Along with the spiritual awareness, may explain the involvement in the healing profession (Shore, 2004).

As far as prescribing in a clinical setting, the bird remedies have proven to be quite useful. For instance: the proving of *Ara macao* (Scarlet macaw) has shown that this remedy may be considered in a case of peripheral neuropathy and used successfully in a case of menorrhagia. *Corvus corax principalis* (Raven) has shown to be an excellent remedy for spinal injuries, opiate addiction and borderline personality disorders. In the case of *Falco peregrinus* (Peregrine falcon) and *Falco cherug* (Saker falcon) there appear minor differences in the proving symptoms; however the key elements affirm each other. These remedies have been proven to be useful in treating degenerative disorders of the nervous system leading to paralysis, peripheral neuropathy and claustrophobia (Shore,

2004). It is clear that the bird remedies have proven to be useful in the treatment of certain clinical conditions. There are, however no references in homoeopathy pertaining to the Indian myna, nor research data on the therapeutic uses of this bird. Although one may find that, the Indian myna is a bird of urban and cultivated areas, it is also closely associated to man, whether it being popular as pets or an unpopular invasive pest (Common Myna, 2007). This abundant passerine is both an aggressive and intelligent bird, which competes against any native species for food and nesting hollows. They are one of the world's most successful birds due to it being a formidable competitor and its ability to adapt easily to any environment (Indian myna birds, 2006).

1.2 OBJECTIVES OF THE STUDY

The objectives of this research study was to:

- Conduct a randomised, double-blind, placebo-controlled study to determine the action of *Acridotheres tristis* 30CH on thirty healthy volunteers in a formal Hahnemannian proving.
- To determine the signs and symptoms produced and therefore the substances potential usefulness in a future clinical setting according to the 'Law of Similars'.

1.3 THE HYPOTHESIS

It was hypothesised that *Acridotheres tristis* in the 30CH potency would produce clearly observable signs and symptoms in healthy volunteers.

1.4 THE DELIMITATIONS

This study did not:

- attempt to explain the mechanism of action of homoeopathically prepared *Acridotheres tristis* 30CH in its production of symptoms in healthy provers
- determine the effects of the proving substance in any potency other than the thirtieth centesimal potency
- seek to perform re-trials of the drug

1.5 THE ASSUMPTIONS

- The correct method of preparation of the remedy including trituration and potentization was used.
- The provers complied with all provers protocols and instructions for the duration for the proving.
- The provers took the remedy in the dosage, frequency and manner required.
- The provers observed themselves accurately and conscientiously for the effects of the remedy.
- The provers recorded all symptoms observed during the proving accurately and honestly.
- The provers did not significantly change their lifestyles or dietary habits prior to or during the proving.

CHAPTER TWO

REVIEW THE RELATED LITERATURE

2.1 PROVINGS

2.1.1 Introduction

It is argued that the best way to study a remedy is to make a proving of it (Kent, 1995:185), as provings are the only way of identifying new homoeopathic remedies which may be added to the materia medica and, as such, will always take up a major part of the homoeopathic research effort (Cook, 1989:93). As homoeopathy continues to advance, it is necessary to perform provings on new remedies so that the therapeutic armamentarium can be further expanded (Vithoukas, 1998:143), and as stated by Sherr a new remedy that is proved will cure cases that until then could have been partially and unsatisfactorily covered by existing remedies (Sherr, 1994:8-9).

2.1.2 Historical Perspectives

Hahnemann was the first to give medicine to healthy people in order to understand their effects on the sick. However, he was not the first to have the idea. Albrecht von Haller, a Swiss doctor and polymath, advocated it in 1771 and Anton Storck (1731- 1803) head of a Viennese hospital, experimented with pharmaceutical substances on himself (Walach, 1994:129). What was unique about Hahnemann was that he was the first person to provide a precise scientific basis for these disparate investigations, and to bring them into a comprehensive therapeutic context (Riley, 1996:4).

Hahnemann was given the task of translating the materia medica by William Cullen of London University, in which Cullen had devoted twenty pages to the

therapeutic indications of the Peruvian Bark, attributing its success in the treatment of malaria to the fact that it was bitter. This made no sense to Hahnemann and prompted him to take a series of doses of Peruvian Bark. Hahnemann discovered that a drug, which was known to be curative in malaria, actually produces those very symptoms when given to a healthy person (Vithoulkas, 2000:8-10). His experiments on Peruvian Bark led to his tentative formulation of the Law of Similars, and also marked the beginning of the systematic performance of homoeopathic drug provings (Riley, 1996:4).

Hahnemann also began experimenting on other drugs. He found that a drug produces in the healthy body a similar condition, which it cures in the sick (Sankaran, 1991:8). Six years later he published his essay on 'A new principle for ascertaining the curative power of drugs', in which he enunciated the fundamental principle of Homoeopathy – the 'Law of Similars' (Cook, 1989:8). This principle was not a new discovery because even the ancient Indian physicians used it. The poet Kalidasa said 'It has been said of old time in the world that poison is the remedy for poison'. The origin of this law is attributed to Hippocrates, the father of medicine (Sankaran, 1991:8).

2.1.3 Modern Developments

Although Hahnemann did not start with a set methodology, but developed and changed it several times according to his latest findings, his provings have yielded reliable symptoms. However, his methodology would not be called reliable when measured by today's standards for clinical trials for a variety of reasons (Wieland, 1997:229). The data from the materia medica is at times imprecise with regards to the source and method of preparation of the proving substances, which can be explained by the stage of knowledge, and scientific methods in that time. It is also noted that many of the more than 2000 homoeopathic drugs listed in the materia medica have been inadequately tested

(Riley, 1996:4), resulting in partial provings or toxicological reports (Sherr, 1994:9).

Furthermore, as emphasized by Fisher (1995) the reliability of earlier provings is in doubt as the most serious flaw being that they were uncontrolled (Fisher, 1995:129). It is useful to include placebo controls in parallel with the actual drug proving in order to obtain double-blind conditions and to promote a self-critical attitude in the volunteers and the investigating physician. This procedure assures the impartiality of the subjects and the investigator, and reduces possible suggestion effects (Riley, 1996:5).

In more recent times, the work of Sherr has set a template for practical rigour in the way provings are conducted (Shore, 2004:168). He was the first to re-develop the science and art of provings after a century in his book *The Dynamics and Methodology of Homoeopathic Provings*, which has become a standard textbook and the basis of worldwide proving guidelines. He conducted his first proving of *Scorpion* in 1982, and has since completed twenty-three provings (Homoeopathy Teachers- Jeremy Sherr, 2009).

According to Sherr's method there is a researcher, supervisors and provers. The researcher decides on the substance, known only to him or herself. Before the proving, the supervisors take the case of each of the participants under their management. The provers then take the actual remedy, in a range of potencies while others take the placebo, until symptoms are experienced (Sherr, 1994).

Notwithstanding Sherr's work on defining proving methodology, the proving methodology used to conduct most of the documented bird provings involved a trituration process, in which participants gathered for one or more days to actually prepare the substance. Notes are taken and experiences are shared either during or at the end of each trituration round (Shore, 2004:169). It is found that in the trituration to the C4 step delivers the essential knowledge of the

substance and with that the true essence of the remedy (Timmerman, 2007). However, it is also vital to conduct bird provings in a more rigorous manner which encompasses a research methodology that is consistent with the prevailing research standards.

In this study the methodology described by Sherr was adhered to.

2.2 THE PROVING SUBSTANCE

It was noticed in the 1990's that within the various groups of animals there existed a great disproportion in the distribution of classes of animals proved. Shore and his colleagues recognized that of all the animal groups, the avian species were the one group that was completely neglected. As a result great attention was placed on bird remedies as a group, and at present 16 bird provings have been conducted, contributing to a more reasonable distribution of the animal group in the materia medica (Shore, 2004:5).

As described by Shore, there is a set of symptoms and a manner that mark the bird remedies distinctly from other remedy groups, as well as general patterns that put them within the animal kingdom. It is clear that in birds the level of differentiation from other animal groups occurs at the level of mind and spirit (Shore, 2004:33). For example, in the 'bird' mind the search for spiritual awareness is heightened, especially in connection with the need for freedom and a sense of rightness. By nature, birds are compassionate, protective, intuitive and helpful. Coupled with the spiritual awareness, this may explain the involvement of 'bird' patients in the healing professions (Shore, 2004).

In a clinical setting, the bird remedies have proven to be quite useful. By way of illustration, the proving of *Ara macao* (Scarlet macaw) has shown that this remedy may be considered in a case of peripheral neuropathy and used successfully in a case of menorrhagia. *Corvus corax principalis* (Raven) was

shown to be an excellent remedy for spinal injuries, opiate addiction and borderline personality disorders. In the case of *Falco peregrinus* (Peregrine falcon) and *Falco cherug* (Saker falcon) there appear minor differences in the proving symptoms; however the key elements affirm each other. These remedies have been proven to be useful in treating degenerative disorders of the nervous system leading to paralysis, peripheral neuropathy and claustrophobia (Shore, 2004).

There are, no references in homoeopathy to the *Indian myna*, nor research data on the use of this bird as a medicine. Although the Indian myna is predominantly a bird of urban and cultivated areas, it is also closely associated to man, whether in being popular as a pet, or an unpopular invasive pest (Common Myna, 2007). This abundant passerine is both an aggressive and intelligent bird, which competes against any native species for food and nesting hollows. They are one of the world's most successful birds due to its being a formidable competitor and its ability to adapt easily to any environment (Indian myna birds, 2006).

There are many substances waiting to be proved, however some additional factors need to be considered. First, is the substance available? Some Homoeopaths subscribe to the idea that a useful remedy should be a local one, within easy reach of the patient, as nature will always provide an accessible cure (Sherr, 1994:49). As argued by Sherr the proving remedy of choice should be that of an indigenous source (Sherr, 1994:49). Even though the remedy of choice *Acridotheres tristis* is indigenous to South Asia, from Afghanistan to India and Sri Lanka, it is still a common bird in South Africa (Common Myna, 2007).

ACRIDOTHERES TRISTIS



Figure 1 – *Acridotheres tristis* (Morris, 2009)

2.2.1 Classification

The *Indian Myna* is a common bird throughout Natal, Witwatersrand and Pretoria (Ginn, McIlleron and Milstein, 1989:612). It is classified scientifically as set out below:

Scientific name: *Acridotheres tristis*

Kingdom: Animalia

Phylum: Chordata

Class: Aves

Order: Passeriformes

Family: Sturnidae

Genus: *Acridotheres*

Species: *A. tristis*

2.2.2 Distribution

Native range: Native to the Indian subcontinent and adjacent areas the *Indian myna* (*Common myna*, *Acridotheres tristis*) has expanded its range in the twentieth century, possibly assisted by introductions throughout the Malay Peninsula, Thailand, Vietnam and Southern China (Harrison, et al.1997:454). Their approximate range is from eastern Afghanistan to India and Sri Lanka to Bangladesh (May and Sodhi, 2006:2).

Known introduced range: *Indian mynas* spread throughout much of Southeast Asia in 1900s and have been widely introduced around the world, establishing itself in South Africa (May and Sodhi, 2006:2). *Indian mynas* were released in Durban around 1900, and now occur from Kwa-Zulu Natal to the Gauteng, Mpumalanga and the Free State provinces of South Africa (Harrison, et al.1997:454).

2.2.3 Field recognition

Indian mynas are generally dark or dull birds that have fluted calls, and like most starlings; the sexes are similar. This 25-cm long bird has a dark brown body and wing plumage, with brown wings and white primary coverts, and primaries black with basal half white (Common Myna, 2007). The face and at the top of the head black; the hind-neck slate, vinaceous-brown on black; pump and under-tail coverts white (Ginn, et al. 1989:612). The bill, bare skin around the eyes and strong legs are bright yellow (Common Myna, 2007:1). In flight the white patches of the wings and the dark tail with a white tip make this bird unmistakable (Liversidge, 1991:187).



Figure 2 – Field recognition of Common myna (Bird e-Guide, 2003)

2.2.4 Interspecific relationships

Raucous and conspicuous, it is often accused of displacing other bird species from gardens, probably unjustly (Harrison, et al. 1997). They are aggressive, and will attack almost any aggressor, including man, that threatens an active nest or young (Ginn, et al. 1989:612).

2.2.5 Feeding

Like most starlings, the *Indian mynas* are fairly omnivorous, eating fruit, nectar and insects (Tidemann, 2005), also following ploughs and grazing cattle to take any prey (Ginn, et al. 1989:612).

2.2.6 Breeding Biology

The *Indian myna* breeds from September to January. *Indian mynas* breed in hollows; building untidy nests of twigs, leaves, grass, paper and feathers that are placed in a tree or building, or even in leaf clumps of screw pines. They usually

lay two to five eggs, which are plain bright bluish-green with a glossy shell. The incubation period is about seventeen days. The fledging period is about twenty-four days (Ginn, et al. 1989:612).

2.2.7 Economic importance for humans

Negative impacts: *Common mynas* are able to establish themselves in almost any habitat and, as a result, have become an invasive species in some areas outside of the native range. They are considered a pest because they eat grain and fruit from agricultural crops, and they are also seen as an annoyance for their communal roosting behaviour and droppings in the vicinity of human habitation (Lin and Root, 2007).

Positive impacts: *Common mynas* may be helpful in reducing insect populations in agricultural areas. In India, *Acridotheres tristis* is known to protect the crops by feeding on insect pests (May and Sodhi, 2006:2). On the Hawaiiin Islands, they help control populations of cutworms (*spodoptera mauritia*). In 1883, *common mynas* were introduced into the cane fields of Australia to combat insect pests such as plague locusts and cane beetles. *Common mynas* also pollinate and disperse seeds of economical trees. *Common mynas* are often sold as pets for their intelligence and ability to mimic human speech (Lin and Root, 2007).

CHAPTER THREE

3.1 THE EXPERIMENTAL DESIGN

The homoeopathic drug proving of *Acridotheres tristis 30CH* took the form of a randomised, double-blind placebo-controlled trial. Thirty provers were selected to participate after fulfilling the inclusion criteria (Appendix A), which fifteen (50%) provers received the verum and fifteen received placebo in a random fashion. Neither the researcher nor the prover were aware of whether the prover was assigned the remedy or the placebo. The provers were unaware of the substance and potency of the substance being proven.

As an additional 'internal control' all provers were required to record their symptoms, in their journals, for one week prior to commencing the verum/placebo powders (Sherr, 1994:60). All provers recorded their symptoms in the assigned journals in the manner described (Appendix D). Such recording was completed at least once daily. Data extracted from journals were combined with case histories and physical examinations to compile the proving profile.

3.2 OUTLINE OF THE EXPERIMENTAL METHOD

- The research was conducted by a M.Tech homoeopathy student;
- The proving substance was prepared by a technician according to Methods 6 (*Triturations by hand*) and 8a (*Liquid preparations*), as specified in the German Pharmacopoeia (GHP), Fifth Supplement (1991) to first edition (1978) [*Appendix E*];
- Verum/ placebo powders were prepared according to the method described below [**3.1.1 (ii)**], and 6 powders each of the respective test substance (verum or placebo) were randomly dispensed by the technician to thirty provers (15 verum and 15 placebo);

- The researcher conducted interviews, with each prover, in which prospective provers were screened for suitability, and checked against the inclusion criteria (Appendix A);
- In the initial consultation the researcher explained to the provers all aspects of the research as well what was required of the provers;
- The provers were guided through the '*Instructions to Provers*' document (Appendix D), and signed the *Consent form* (Appendix C);
- Each prover was assigned a prover code, a personal copy of the *Instructions to Provers* (Appendix D), an appropriately numbered journal, a list of contact numbers, and a starting date;
- A thorough case history (Appendix B) followed by a physical examination was performed on each prover by the researcher;
- The provers then commenced recording their symptoms, in their journal, a week prior to taking the powders (Sherr, 1994:60). This is to establish a baseline for the provers;
- On completion of the pre-proving week, all provers then commenced taking the remedy, a maximum of three powders daily for two days or until the first symptoms appeared, whereupon no further doses of the remedy were taken (Sherr, 1994:58). The prover continued to record symptoms throughout. The researcher was in daily telephonic contact with each prover;
- Telephonic contact frequency was daily initially, reducing to 2-3 weekly, then weekly after the first week (i.e 1,2, 7, 14, 21, 28, 32 etc.);
- The proving was considered complete when there had been no occurrence of symptoms for three weeks;
- Journaling continued for a post-proving observation period of two weeks, to ensure that no late symptoms have been overlooked;
- A second meeting with the provers was required during which all journals were collected. This was followed by a repeated case history and physical examination of each prover;

- After submission of all journals, a group discussion around the proving experience took place;
- The verum/ placebo assignment was then unblinded to the researcher, so as to distinguish between placebo and verum groups;
- Extraction and collation of the data was then conducted where true proving symptoms were sifted from all the information provided;
- The data was presented in Materia Medica and Repertory formats.

3.3 THE PROVING SUBSTANCE

3.3.1 Potency

The proving substance in the 30th Hahnemannian potency (30CH) was utilised for the proving (***Acridotheres tristis 30CH***).

3.3.2 The collection, preparation and dispensing of the proving substance

The sample of the proving remedy *Acridotheres tristis 30CH* was attained, from the tail feather of an adult male, by Leon Harry Fourie, an Operator Lifting Equipment (OLE) at Transnet at the Durban Harbour and a breeder of *Indian mynas*. Leon Harry Fourie adopted the *Indian myna*, of which the sample was taken to manufacture the proving remedy, from the Centre for Rehabilitation of Wildlife (CROW) situated in Yellow wood Park, Durban.

- The proving substance *Acridotheres tristis* was prepared using the feather of the bird, according to Methods 6 (Trituration of insoluble substances) and 8a (Liquid potency from trituration), as specified in the German Homoeopathic Pharmacopoeia (GHP), Fifth Supplement (1991) to the First Edition (1978) (*Appendix E(i) and (ii)*);

- The verum was dispensed in the form of powders with lactose granules, which had been triple impregnated at 1% volume/volume with *Acridotheres tristis* 30CH in ethanol 73%;
- The placebo was dispensed in the form of powders with lactose granules, indistinguishable from those used for the verum, which were triple impregnated at 1% volume/volume with 73% ethanol only;
- Placebo and verum powders were prepared by adding ten of the respective impregnated granules to standard pure lactose powders (90 powders of verum and 90 powders of placebo) divided into packets of six (6) powders each;
- A technician (Dr Izel Botha, Technician, Department of Homoeopathy, DUT) dispensed the verum and placebo preparations so the researcher remained unaware of who received which preparation.

3.3.3 The Dose and Posology

- The provers took one powder sublingually three times a day for two days or until onset of symptoms. If no symptoms appeared, the prover continued until a maximum of six doses had been taken (Wieland, 1997; Gaier, 1991:135);
- The provers discontinued taking the powders as soon as they, or the researcher established the onset of proving symptoms (Sherr, 1994:53);
- Neither food nor drink was taken for half-hour before or after each dose;
- Provers were warned against repetition of the dose as this may upset the sequence of symptoms to appear. Continued repetition may destroy the knowledge of the latest symptoms

to appear which is most valuable and characteristic (Robert, 1993);

- The dosage and posology were clearly explained to each prover during the initial consultation by the researcher, and this was presented in writing in the *Instructions to Provers* document (Appendix D), a copy of which was provided to each prover for reference.

3.4 THE PROVER POPULATION

3.4.1 Sample size and demographics:

In the proposed double-blind homoeopathic drug proving, thirty healthy provers were selected. As advised by Walach (1997:222), the prover population consisted of provers who were thoroughly acquainted with homoeopathic principles as well as those who have no homoeopathic background which provided a well-balanced proving group.

The verum/ placebo distribution ratio was 15/15 (50% verum and 50% placebo) according to independent random allocation. Provers were aware of the presence and likelihood of receiving placebo.

3.4.2 Randomisation:

The verum and placebo groups were randomly distributed such that there were an equal number of provers in each group (15 provers in each verum and placebo group). This was done by writing each code on pieces of paper, which were folded and placed into a container and mixed thoroughly. Each piece of paper was drawn out and placed in one of two piles, A or B, such that there were an equal number of

prover codes in each pile. Pile A was made up of the verum group and provers. Provers in pile A received the verum, *Acridotheres tristis* 30CH. Similarly, pile B made up the placebo group. The provers' in pile B received placebo. The laboratory technician conducted this procedure. The technician also dispensed the powders so that the researcher remains blind as to which prover received placebo and which received verum. According to this distribution fifteen provers received verum, which corresponded well with Sherr's suggestion of fifteen to twenty provers (Sherr, 1994:45).

3.4.3 Criteria for inclusion of a subject:

The prover subject:

- was between 18 and 60 years old, so that the natural bodily degeneration that comes with age will not be a serious factor (Vithoulkas, 1998:149);
- had obtained parental consent if he/she is between 18 and 21 years old (Appendix C);
- was in a general state of good health, which must be decided by the proving director's standards (Walach, 1997).
- had no gross physical or mental pathology determined at case history and during the physical examinations (Sherr, 1994:44; Wieland, 1997; International Council for Classical Homoeopathy, 1999:34);
- was in no need of any medication (Homoeopathic, allopathic or otherwise) (Wieland, 1997; Riley, 1996).
- had not used the birth control pill or hormone replacement therapy (HRT) in the past six months prior to the proving (Koppers, 1987:81; Wieland, 1997; Riley, 1996; Sherr, 1994:44).
- had not had surgery in the past six weeks (Riley, 1996).
- does not consume more than two measures of alcohol per day, ten cigarettes per day, 3 cups of caffeine-containing beverages including

coffee or tea per day, nor herb teas (Koppers, 1987:81; Walach, et al. 1995:180);

- does not use recreational drugs or a heavy user of drugs such as cannabis or ecstasy (Sherr, 1994:44; Walach, 1997:222; ICCH, 1999:34);
- is not pregnant or nursing (Wieland, 1997:333; Sherr, 1994:44; Riley, 1996);
- does not suffer from hypersensitivity diseases such as asthma, hayfever, allergies or food hypersensitivities (Vithoukas, 1998:150);
- chosen for the experiment must above all be trustworthy and conscientious (Hahnemann, 1982:110; Walach, 1997:222);
- was co-operative and able to follow the proper protocols for the duration of the proving (Fuller Royal, 1991);
- was competent and had signed the **Consent Form** (Appendix C) (Riley, 1997:227).

3.4.4 Lifestyle of provers during the proving:

The provers were advised to:

- avoid antidoting factors such as camphor and menthol, and to cease their use for two weeks prior to the administration of the proving powders (Sherr, 1994:92);
- practice moderation with respect to work, alcohol, smoking, exercise, diet and sexual expression (Sherr, 1994:92);
- maintain their usual habits (Maish et al., 1998:18; Sherr, 1994:92);
- store the proving powders in a cool, dark place away from strong-smelling substances, electrical equipment and cellular phones (Sherr, 1994:92);
- avoid any medication (including antibiotics), vitamin and mineral supplements, herbal or homoeopathic remedies (Sherr, 1994:92);

- consult their doctor, dentist or hospital in the event of a medical emergency, and to contact their supervisor as soon as possible thereafter (Sherr, 1994:92).

3.4.5 Monitoring of provers:

To ensure significant information and the yielding of good proving results; supervision of the provers by the researcher is important (Sherr, 1994:47). The researcher ensured daily telephonic contact with each prover during the initial stages of the proving (Sherr, 1994:58; Walach, 1997; Wieland, 1997), that is on days 1 and 2. As symptoms abate contact frequency will decrease every two, three and then seven days (Sherr, 1994:58).

According to Wright (1999) this ensures three points:

- The researcher could ascertain when the substance had begun to act so that he could inform the prover to cease taking the substance.
- The prover does not neglect to record the symptom.
- The provers are closely monitored for any reaction, which may need to be antidoted with the remedy prescribed on the totality of the presenting symptoms.

3.4.6 Data recording

- *Case-History:*

Each prover who complies with the *Inclusion Criteria* (Appendix A), and who has read, understood and signed both the *Consent form* and the *Instructions to provers* documents (*Appendices C and D respectively*) was scheduled an appointment with the student researcher for

completion of a standard homoeopathic case history and general physical examination (Appendix B).

The purpose of the case-history is to confirm and to clarify a baseline status of each prover prior to administration of the proving substance.

- *Physical examination:*

The general physical examination (Appendix B) included physical description, assessment of vital signs, cursory overview and system specific examination (as relevant to the case-history).

3.4.7 The Duration

- *Pre-proving observation:*

A preliminary observation period for one week prior to the exhibition of the medicine took place, of which each prover recorded his/her symptoms (Wieland, 1997). This would ensure that the each prover's journaling is occurring as explained in the *Instructions to Provers* document (Appendix D), and that good journaling habits are being established.

- *Commencement:*
- On completion of the pre-proving observation week, each prover commenced taking the powders three times daily with a maximum of two days or until symptoms appeared;
- The prover continued to record his/her symptoms until the symptoms abate;

- Prover were monitored telephonically to confirm the onset of symptoms, that the methodology is being implemented appropriately, and to ensure the safety of the prover;
- The proving was considered completed when no symptoms have occurred for three weeks (Sherr, 1994:58).

- *Post-proving observation:*

- The proving was followed by a two-week post-observation period to see if any more phenomena occurred or if the proving effect is over (Riley, 1996).
- Journaling continued during the post-observation period of two-weeks.
- On completion of the two-week post-observation period the respective journals were recalled, and a post-proving case history and physical examination (Appendix B) was conducted on the prover, to confirm the return to the pre-proving state.

Although the duration of the individual prover’s reaction to the proving substance cannot be predicted, a broad prediction of the duration would be approximately 92 days as set out below:

• Initiation pre-proving period [variable]	15 days
• Pre-proving observation period (1 week)	7 days
• Proving period (5 weeks)	35 days
• Cessation of proving (3 weeks)	21 days
• Post-proving observation period (2 weeks)	<u>14 days</u>
	Approximately 92 days

3.4.8 Chronology

The prover should be a faithful recorder of symptoms, by recording the symptoms in their order of appearance (Robert, 1993). The prover recorded all his or her

sensations, complaints, attacks and changes in health the moment they occur, noting the time elapsed between taking of the medicine and with the appearance of each symptom (Hahnemann, 1982:116). This information could help the researcher understand the nature of the remedy, its opposing forces and its pace (Sherr, 1994:73).

Sherr provides a format of DD: HH: MM for days, hours and minutes which was considered in the proposed research. Each day of the provers notebook was recorded by a number, example the first day of proving was written as 00. After 24 hours the minutes become unimportant and were recorded as XX. After a few days hours become redundant and were represented by XX. In instances where the time is unclear or insignificant, XX: XX: XX was used (Sherr, 1994:73).

3.4.9 Group Discussion

At the conclusion of the experiment all journals from the provers were collected. Thereafter followed by a group discussion, where all provers and research information were present (Sherr, 1994; Vithoukias, 1998). These discussions are quite valuable as they may help to elaborate and clarify each symptom (Vithoukias, 1998) or trigger the provers' memories for symptoms that they did not notice and were unsure about (Sherr, 1994:66).

3.4.10 Ethical Considerations

It is the ambition of European Committee of Homoeopathy (ECH) to promote the implementation of modern homoeopathic provings, based both on traditional homoeopathic standards and contemporary research methods. The following criteria has been adapted by the ECH and the proposed research study meets those⁶:

- The size of the group (10-50 provers), age allocation, gender allocation and proving experience are identified and fixed. The exclusion criteria, which serves as the final formation of the group must be clearly defined. Every prover is required to sign an *Informed Consent Form* according to the principles of ICH-GCP guidelines;
- Proving medication: data concerning the origin, preparation procedure, manufacturer, pharmacology, toxicity are required;
- According to GCP guidelines a proving protocol has to be approved by an ethics committee. It would be appropriate if an ethics committee agreed on a standard proving protocol applicable in each member state;
- The protocol has to be finalised before the beginning of the proving. It must contain all data concerning duration, documentation, intake regime and attrition criteria;
- The proving director as well as the supervisors have to fulfil predefined criteria concerning qualification and aptitude (theoretical and practical knowledge of provings);
- The provers' state of health must be investigated before the start of the proving (both a medical evaluation and homoeopathic case-taking) and documented;
- Potency, dosage, duration of administration and attrition criteria are determined as well as the maximally desirable dosage and duration of administration. As a matter of principle, the proving substance is administered until the subject develops clear symptoms;
- In modern proving designs the following tools are used: pre-proving observation, placebo control (possibly symmetrical), randomisation, double blinding, run-in phase, post-proving observation, cross-over in biphasic design;
- Subjects are required to record their symptoms in their allocated journals for the duration of the homoeopathic proving and are in regular, if possible regular, contact with the proving director or supervisor. Unstructured journals for freely formulated entries can be used as well as diagrammed

journals for entries according to head-to-foot scheme;

- All symptoms that occur in connection with the proving have to be recorded. Acute intercurrent diseases or strong disturbing external factors lead to exclusion of the prover. This has to be recorded in the journal. Reporting paths in case of severe proving symptoms are delineated;
- Evaluation of journals, decoding and biometrics, assessment of the results and publication are accomplished according to given scientific standards. Verum and placebo symptoms are separately recorded after decoding and compared;
- Subjects are not allowed to have personal contact during the proving until decoding. Beginning and end of the proving can vary between subjects.

3.5 EXTRACTION PROCESS

The purpose of this stage of the proving is to convert the provers' written diaries into the format of the materia medica (Sherr, 1994:67). Symptoms will be scrutinized, validated or rejected according to the criteria detailed below by the researcher. Then it will be edited into a proving format, which is coherent, logical and unrepetitive (Sherr, 1994:67).

3.5.1 Inclusion and Exclusion Criteria for Symptoms:

The following criteria should be used together as a whole rather than individually (Sherr, 1994). It is in this of the proving in which the quantitative analysis is empirical to defining the symptoms of the drug picture. However, take into account that a quantitative approach does have a purpose in contributing a scientific argument and clarification to Homoeopathy (Walach, 1997).

- The timing of the symptom (periodicity, specificity of timing) (Riley, 1997:227).

- The symptom occurred soon after taking the test substance (Riley, 1996; Wieland, 1997:231).
- The intensity of the symptom having the most powerful effect (Vithoulkas, 1998:154; Riley, 1997:227).
- Any symptom that is usual or current for the prover should be excluded unless intensified to a marked degree (Sherr, 1994).
- The symptom is unusual, striking or rare (Riley, 1996).
- Accidents, coincidences and synchronistic events, which occur to more than one prover (Sherr, 1994:71). The symptom occurred in more than one volunteer (Riley, 1996; Riley, 1997).
- The symptom occurs in association with specific modalities (Riley, 1996) and concomitants (Riley, 1997:227).
- If a symptom experienced when the proving started and which disappeared or is significantly ameliorated after the administration of the proving medication, then it is classified as a cured symptom (Vithoulkas, 1998:154; Sherr, 1994:70; Riley, 1997:227).
- The symptom is new and has not been experienced in the last 12 months (Riley, 1996:6; Sherr, 1994:70; Riley, 1997:227).
- The symptom did not appear naturally or spontaneously, that is it did not have a clearly explainable cause extraneous to the proving (Sherr, 1994:70).
- The symptom occurred a long time previously (especially five years or more years ago) and there is no explainable reason for its recurrence at the time of the proving (Hahnemann, 1982:115; Sherr, 1994:70).
- A current symptom that has been modified or altered should be included while describing the current and modified components (Sherr, 1994:70). If the prover is under the influence of the proving substance (as can be seen by a general appearance of the symptoms) then all other symptoms are proving symptoms (Sherr, 1994:70).
- The symptom did not appear in a prover in the placebo group.

3.5.2 Collation and Editing of Data

At this stage the proving was edited into its final format (Sherr, 1994:77). The collating stage involves the extraction of symptoms in a form for inclusion in the materia medica (Wieland, 1997). Similar symptoms with similar meaning from different provers were grouped together and sorted by the following criteria:

- Nature or meaning of symptom
- Individual prover
- Sequence of development of symptom
- Chronology

This process was then carried out on the data for each prover in the placebo group. However, the results were recorded separately.

3.6 REPORTING OF DATA

The collated and edited data will be written up into the two standards accepted forms that is the Materia Medica and Repertory, which will be useful to homoeopaths in practice internationally.

3.6.1 The Repertory

Each proving substance was converted into the repertory language, rubrics. It is in the repertory that the proving information is made accessible and transformed into a useful tool (Sherr, 1994:81).

The proving symptoms were converted into rubric form using the modern repertory: Synthesis - Edition 7, edited by Dr Frederik Schroyens (2001).

3.6.2 The Materia Medica

The collated edited data arising from the proving were written up in the materia medica format correlating closely with the sections of Synthesis - Edition 7

(2001), to ensure standardisation. The symptoms were entered under the following materia medica subdivisions:

- Mind
- Vertigo
- Head
- Eye
- Vision
- Ear
- Hearing
- Nose
- Face
- Mouth
- Teeth
- Throat
- External throat
- Stomach
- Abdomen
- Rectum
- Stool
- Bladder
- Urine
- Male genitalia/ sex
- Female genitalia/ sex
- Larynx and Trachea
- Respiration
- Chest
- Back and Neck
- Extremities
- Sleep
- Dreams
- Generals

CHAPTER FOUR

MATERIA MEDICA

4.1 INTRODUCTION

The symptoms were extracted from the homoeopathic drug proving of *Acridotheres tristis* are presented in this chapter using both the materia medica and repertory formats. All of the symptoms that are presented in this chapter are extracted only from the participants in the verum group during the proving. Both of the materia medica symptoms and rubrics are categorised according to the sections as they appear in the *Synthesis Repertorium Homoeopathicum Syntheticum* repertory (Schroyens, 2001).

4.2 MATERIA MEDICA

4.2.1 Prover List

Listed below are the details of the verum provers that participated in the proving of *Acridotheres tristis*. The following table provides information regarding the age, gender, prover codes and whether the prover was a homoeopath or homoeopathy student, which will be indicated by a H. The non-homoeopaths are indicated by an N.

Table 1 – Details of Verum Provers

PROVER CODE	AGE	GENDER	HOMOEOPATH or NON-HOMOEOPATH
1	34	F	N
3	26	M	H
4	38	F	H
6	20	M	N
10	20	F	H
12	18	F	H
14	42	F	N
15	36	F	H
17	26	M	N
19	21	F	N
20	27	M	N
21	20	F	N
24	25	M	N
27	21	F	H
28	19	F	N

Graphical presentation of the age and gender distribution of the provers, and the ratio of homoeopaths (H) to non-homoeopaths (N) is shown in appendices G, H and I respectively.

4.2.2 Key

Example:

Symptom

Prover code, gender, days:hours:minutes

Each symptom is stated on a new line. Directly below each symptom, the prover code, prover gender and the number of days, hours and minutes that have elapsed since the first powder was taken, is stated. After 24 hours the minutes become unimportant and are recorded as XX. After a few days hours become redundant and are represented by XX. In instances where the time is unclear or insignificant, it is denoted as XX: XX: XX (Sherr, 1994:73).

4.2.3 Materia Medica symptoms of *Acridotheres tristis*

4.2.3.1 MIND

CONFIDENCE AND ENTHUSIASM

Emotions: feeling energetic, looking forward to the day already.

1F 04:XX:XX

At work, still feeling depressed, sad. Went for my first lecture. During the lecture I felt energetic, passionate about what I'm doing.

1F 11:XX:XX

Good mood, set a test without any problems. Concentration level was high, motivated, and confident.

1F 15:XX:XX

Have my first lecture- feel like a different person. Confident, energetic, positive.

1F XX:XX:XX

Divinely feeling within me. More energy and guts to face the busy I had.

3M 14:XX:XX

Felt so accomplished, full of enthusiasm and vigor to heal patients. Felt a powerful energy within me to recommend my source of energy to aid and heal my patients.

3M 17:XX:XX

The trigger of my other symptoms is not present. My run down feeling is starting to give way to a sort of 'hardness' inside. I feel somewhat positive.

17M 14:XX:XX

LEADERSHIP

Held a meeting to discuss assessment criteria for a course that I co-ordinate. Felt confident and at ease during and after the meeting. Much more comfortable with who I am and what I believe in.

1F 31:XX:XX

Awake with a rejuvenated spirit today as I was to give a peace prayer at a table of peace and unity today at the Botanic Gardens. On arriving at the event felt a great peace within me surrounded by people, the scenery of the fresh grass and trees and more so the birds flying and the ducks on the lake. Gave the prayer with much confidence and love within me as if to touch the audience with a moment of peace. During the program kept gazing upwards at the sky. Felt as if I am rising within my being to a greater height, my soul, mind was soaring high.

3M 12:XX:XX

TRANQUILITY AND CONTENTMENT

Started reading a book called Secrets of Success by Sandra Anne Taylor. Feeling a lot at ease, at peace, comfortable with who I am.

1F 10:XX:XX

Very calm, at peace- not affected by the lack of organization in the department.
Went ahead with my tasks with joy.

1F 13:XX:XX

Feeling content, at peace with myself.

1F 13:XX:XX

First patient for the day forgot to come, normally I would be irritable at the patient but today have heightened a calmness within and decided to spend time in inner reflection and to read.

3M 00:XX:XX

During the day felt spirited, peace and calmness within me. Felt a great divine bond with the lord and felt I have a great healing energy within me to heal and care for patients.

3M 06:XX:XX

After lunch I felt a sense of happiness and my stress levels subsided completely.

6M 01:XX:XX

I drove to campus feeling somewhat excited and happy. No anxiety, calm which was unusual for him.

6M 02:XX:XX

Throughout the day I felt stress free. Smoking habits has decreased along with the associated anxiety. My previous obsession for smoking has dropped.

6M 02:XX:XX

I was in a relatively happy mood throughout the day. My approach to problems has changed. I'm a lot calmer. Previous to the proving I would have an outburst

of anger when confronted with a problem as I was short tempered.

6M 06:XX:XX

Even though I don't feel like having people around me, I feel very calm and serene inside.

15F 02:XX:XX

Doing household chores. Have a calmness over me. Feels like I'm doing things in slow motion.

15F 03:XX:XX

CONFLICT OF WILL

Start feeling scared, anxious. I want to do something more with life. Something big, significant but I am scared that I may not succeed.

1F 06:XX:XX

At home, feeling sad again, very deep feeling of sadness in the pit of my stomach, feel like I want to cry but there no tears coming out- like my inner self wants to cry. I feel angry with myself about limiting myself. I feel like I can do so much with my life and that I am not doing that. I feel scared to try new things but a part of me wants to. I feel I need a change.

1F 11:XX:XX

Feelings of uncertainty, anxiety, fear returns. Part of me wants to make a change, excited about doing so and the other side is scared, feels that it's not going to work. Feeling confused. Want to change certain things in my life but afraid to do so because now the stress to explore something else or new avenues and the fear I might lose what I currently have, my job.

1F XX:XX:XX

LOATHING

Tired, went back to bed. Don't feel like going back to work.

1F 09:XX:XX

Feelings of sadness return. My body is tired, my muscles and every bone is aching. I am frustrated and angry. I want to go back to sleep. Forced myself to get ready for work. Driving to work. Starting to feel nervous. Don't feel like going to work, took a few deep breathes and feeling subsided.

1F XX:XX:XX

Have occasional feelings of sadness, unhappiness about my job- I don't enjoy the environment/ place where I work. Feeling irritated, frustrated at work. Talk to a few friends- everyone feels down, de-motivated to work.

1F XX:XX:XX

On the way to campus I felt extremely angry and frustrated. Stress of driving and studies were more intense than normal. Feeling lethargic and no will to go study.

6M 01:XX:XX

FREEDOM

Took a walk outside the office- felt light, free, happy.

1F 05:XX:XX

Before starting the day with patients decided to read some inspiring says. A line that struck my being was: "Those who rid themselves of unnecessary burdens can fly higher." Just within a few moments I feel a refreshed energy to soar to greater heights within my career, spirited life and personal relationships. A feeling to let go of the past and pain and be free and fly to higher realms at my souls

existence.

3M 00:XX:XX

Feel like a flying bird and like something lifted of my shoulders, sensation of a bird. Free, no sadness, not depressed and no guilt.

10F 18:XX:XX

SELF-REPROACH AND ANGER

On my way to work- feelings of sadness get stronger- I feel like I am betraying, lying to myself. I want to apologize but I don't know for what, it's like I need to be forgiven for doing something wrong. My eyes start to well up with tears but no tears start falling. I want to cry but I can't.

1F 12:XX:XX

At work - starting to question what I do? Feeling angry at myself for not doing more, not contributing to improving my surroundings. Feeling depressed, low energy level. I am worth much more than this. Why am I not applying myself? Read a few affirmations from Louise Hay. Felt slightly better.

1F XX:XX:XX

SUPPRESSION

Feeling irritable about my current job, complained to a friend- current job is very restrictive, cannot implement new ideas. Management is not willing to change and try new things. Work environment is also very isolated. Lacks a sense of community, belonging- select few are given privileges whilst others are forced to continue playing small, insignificant roles.

1F 06:XX:XX

Run down (more than usual), due to stress at work. Felt harassed, attacked. Indignation. I am unhappy with where I am and what I am doing with my life. Run down feeling has returned. Anxious feeling has appeared. I wasn't getting the exposure in my field. Wanted to progress in my field but was doing something totally out of my field. Felt like I was being mis-used and oppressed.

17M XX:XX:XX

CONFUSION AND FEAR

Feelings of uncertainty, fear returns. Took a few deep breathes, feeling subsided slightly.

1F 08:XX:XX

Thoughts about why I should not quite my job are flashing in my mind. Feeling scared and insecure.

1F 09:XX:XX

A sense of confusion is taking over the mind. Have many potential persons that are asking me out and in love with me. They all want to spend time with me. I am frustrated with them all as I want to be left alone. Don't know who to be with or what decision to make as I am already in a relationship. Confuse and frustrated as when you are in a relationship then you become wanted.

3M 03:XX:XX

FOCUS AND CLARITY

I was able to sustain attention on a relevant subject. This is a positive change. I think related to the reduction in work stress.

17M 27:XX:XX

Depression: slightly abated, more to do with remorse for having wasted time.

Clarity has emerged, no haze. Inattentiveness has become habitual. Back at work cheerful. Some purpose has re-appeared in mind. Still feel vengeful and hateful.

17M XX:XX:XX

REFLECTION OF PURPOSE

Got up from sleep. Felt refreshed energetic, cannot go back to sleep. Watched a program on TV called 'Journey to the core" about a professional businessman who leaves the corporate world to start a foundation for AIDS sufferers- he talks about giving back to the people and the world. I identify with what he is doing because for as long as I can remember I have always been questioning my purpose in this life "was I meant to do something more with my life." Felt a lot more at ease. Went to sleep.

1F 11:XX:XX

Invigilating a test, start to think about my life, what have I done so far with my life. I want to do more with my life. Been thinking of my life purpose.

1F XX:XX:XX

Depressed the whole day about the money problems. This fear of survival and not being able to meet basic needs is scaring me. Now I am thinking of getting a job. Didn't want any company because needed to internalise and think about what I want the future to be like for me and family. Also to think about what I have accomplished in my life so far and what I can do to improve my life.

14F 19:XX:XX

ISOLATION AND SOLITUDE

Desire to be left alone. Friends and family are calling to go out but I just feel so disconnected from all. A feeling of isolation is covering my being. Want to rest in

peace and just be within my own being.

3M 03:XX:XX

A busy day with patients and felt so preoccupied that had no time to absorb this new found isolation within me.

3M 06:XX:XX

Total exhaustion after a busy day with patients. Hence took the day to rejuvenate my body. Felt as if I am in hibernation. No desire to talk to people or even be around people. Generally I thrive on being surrounded by friends and family but now I want to be alone.

3M 07:XX:XX

As work is quiet I have time for solitude now. Spending time with myself however feeling a deep depression with me.

3M 08:XX:XX

Felt a rejuvenated spirit to heal today. Desire to heal and bring peace to patients symptoms. Even though a strong isolation feeling within me have a constant care for patients. Feel that they are my life's true purpose. No desire to go out with partner or friends. Just a constant feeling to rest and hibernate by myself. Feelings have heightened.

3M 10:XX:XX

Emotional about my same money problems. Still feel like no company. But I had this sudden feeling of doing something that make people's life easy and making a difference.

14F 24:XX:XX

Feeling very anti-social. Just want to sit quietly and watch DVD's. Don't want to entertain husband or kids. Don't want to be disturbed. Irritated when having to answer so answer short and abrupt.

15F 02:XX:XX

Supposed to go to fund raiser at neighbouring farm. I'm feeling very anti-social. Have told husband to go alone with kids so I can have some quiet and peace. My husband keeps asking if I am fighting with him because I'm so quiet but really just want to be alone. This is very unlike me!

15F 02:XX:XX

Went out with some friends but still would have preferred to stay at home.

15F 03:XX:XX

Etienne and kids have gone to neighbours but I've stayed at home where I am comfortable and warm. Don't feel like socializing.

15F 08:XX:XX

Tried to sleep while family is gone, but house is empty and lonely. Can't make up my mind. Do I want to be left alone or do I want company?

15F 08:XX:XX

Depressed throughout the proving. More quiet, not sociable, averse to company, would ignore people. Spend more time with self.

20M XX:XX:XX

LOST

Feeling lost, unhappy, sad, scared. Sat alone for a few minutes and just let myself experience the sadness and fear.

1F 23:XX:XX

As day progressed feeling a lost sensation, don't feel like going to dance class. Desire to be alone and wrapped in warmth. The rain has wet my body. Feeling cold and withered today.

3M 02:XX:XX

SADNESS AND DEMOTIVATION

Starting to feel down, depressed, tired. Read an inspirational novel. Mood picked up.

1F 09:XX:XX

Depressed, empty feeling. Scared feeling.

1F 25:XX:XX

Woke up this morning and didn't feel like getting out of bed. Felt depressed about the money problems. All my dreams I had are now gone. But what made me feel better was knowing that I had a family who care about me. Never felt this worried before.

14F 18:XX:XX

Brief depressive spell at work.

17M 18:XX:XX

VENGEANCE AND HATE

Vengeful and hateful feelings prominent in my consciousness. Excited and positive, my body feels a lot better, higher energy levels. Still experiencing thoughts of vengeance and hate.

17M XX:XX:XX

IRRITABILITY FROM IRRESPONSIBILITY

Irritated again but because of the lack of planning and organization in my department. Angry with people who are not carrying out their responsibilities, I approach them. I am angry but when I talk to them I am calm, I listen to them with compassion, no anger in my voice.

1F 12:XX:XX

Have to fetch Etienne from the neighbour's farm because they got a puncture on their dirt bike and now he can't get back home. This irritates me because I feel he is so irresponsible. This happens all the time and I've always got to pick up the mess! I am not impressed because they think it is funny and don't realise that their actions impact and inconvenience others! Have gone to bed. Can't take this irritated feeling.

15F 03:XX:XX

IRRATIONAL

My sister had the operation and she is fine. I decide to book the ticket for the weekend to spend some time with her. I normally have to think properly and thoroughly before making decisions, plan to the smallest details. This was an immediate decision, no thinking through and weighing options. Although I knew nothing was wrong, I felt I have to go and spend time with her.

1F 33:XX:XX

Have a "Mom's Tea" in Everton. Got very lost even with the GPS. Very panicky driving in new area. Not normal for me, as usually I just get in my car and drive. When I got lost I was calm. Usually I panic and call my husband. It's unlike me to be irrational.

15F 23:XX:XX

EUPHORIA, INVINCIBLE

Increased energy, feeling a powerful source of strength within. My mind, body and soul is exuding a high energy field. Am flying on my journey.

3M 00:XX:XX

Feel more focused and clear in my mind which only happens when I pray. Feel like I can do anything especially living my dreams.

14F 01:XX:XX

Have been in such a good mood all afternoon. Fantastic. I feel invincible- nothing can scare me. That's the euphoric sensation I have. It feels as if my head is floating on my shoulders. Still in a good mood. I feel so optimistic- as if nothing can stop me. Feel like I'm floating along above the ground.

15F 10:XX:XX

CONNECTION VERSUS SEPARATION

Staff is more comfortable talking to me- people who normally just say hi are now stopping to chat to me to find out how I am. It's like we bonding.

1F 16:XX:XX

Feeling irritable with the professional society I work with. Leading them is making me frustrated. Need the team to respond to me. So in this frustration I just disconnected. I can't and don't have the physical energy to co-ordinate everyone. When a team flies they all do in unity. Sadly am not going to fly if no one cares.

3M 01:XX:XX

No desire to meet people. Everyone is getting disheartened at me for not meeting people.

3M 02:XX:XX

Attended a spiritual gathering today. Generally I partake in the proceedings but today just meditated. However, mind felt too disconnected from concentrating during meditation. Felt a great peace within, however had constant thoughts of being an outcast. Felt so alone, so isolated and disconnected from people around me. A deep sense of loneliness. Even though my partner is around felt this deep void within me. Felt as if I have been forgotten by the people. Desire to be alone.

3M 05:XX:XX

Saw boyfriend today and felt great joy to see him. We went to a spiritual place together and sat outside. Felt a deep spirited connection with him. Spent the night in cuddled in warmth. Felt so warm again and felt I was removing the shackles of loneliness with him. We gazed at the moon and the stars and together felt a great peace and joy.

3M 12:XX:XX

Had busy day with patients and then had to attend a skype meeting. Really didn't want to log on and have an internet meeting. Felt disconnected with attendees at the meeting. A distant feeling. Want to be close to them so used my minds thoughts to disconnect from the meeting. The power of the mind is so amazingly powerful. Kept thinking of the idea of disconnection and within few minutes the connection to the internet and thus the skype meeting was truly truly disconnected in the physical. So my mind created a disconnection. Was so happy that I lost connection.

3M 13:XX:XX

Felt emotionally separated today. Met a friend for supper but felt to separated from his conversation. Generally my observant and empathetic nature allows me to listen with an attentive ear but body felt distant from friend.

3M 15:XX:XX

I had the stress of not paying my friend so I told my mom everything including the fact I owe my friend money and usually I don't confide in my mother because I have this thing that she might shout at me but after telling her I felt brave and that I need to be more responsible because she gave me advice that I need to be self satisfied. I also felt a sense of closeness with my mother like we are bonded. The relationship with my mother has developed, more understanding between her and her mother. I felt more liberated, like I can let go of hidden feelings and expressing myself to my mother.

10F 17:XX:XX

Only I don't want company, just want to be with the people I love.

14F 10:XX:XX

NATURE, FREEDOM AND TRANQUILITY

Feeling energized as I awoke. Off to see hospital patients which I truly look forward to. Drove past a forest of trees and beautiful scenes of nature. Felt the freedom of swiftly through the road as I gazed at the luscious trees and bushes.

3M 02:XX:XX

Desire to keep busy today to occupy myself. Had this calmness within me despite a rushed day with many appointments. Gazed at the sky and felt a great bond with nature around me. Desire to be in the sun and bask in the heat and light of the sun. Felt at peace to absorb the sun's heat through my skin.

3M 10:XX:XX

Felt moody, just wanted to be alone out in nature. I wanted to get away from all my problems and forget my responsibilities.

14F 22:XX:XX

FIRMNESS

Had a busy day with my patients. As day ended had a traumatic patient who was upset as she was late and I cancelled her appointment. Did not want to talk to her so secretary spoke to her. Felt to hurt and sad but have to be assertive also.
3M 03:XX:XX

I have been wanting to stay away from people who judge me especially about my beliefs and my way of life. I keep feeling like I am being attacked and more and more I don't want people around me especially people who are spiteful towards me and my family. This time when someone did something to spite me I reacted but did not do it to hurt them. It's not like me to react to spiteful behaviour. Noticed that I no longer allow people to exploit me also doesn't tolerate spiteful behaviour. I have realised that I have my own way of life, my own standards and people have to accept it and respect me for that, and stop judging me.

14F 10:XX:XX

I also noticed that I no longer put up with people who take advantage of me. I no longer bottle up how I feel anymore. I am also beginning to put my needs before others. I noticed that I have become more assertive about my own way of life; do not allow other people to dictate to me how to run my life.

14F 24:XX:XX

Very anxious and irritated. Open confrontation with problem factor. Feeling of intense anger, could not contain myself in face of provocation. Coldness and vengeful feeling replaced depression. Focus has returned. Problem factor is likely resolved. anger intensified and hate. I was aware of the oppression but did nothing about it but now I have confronted the problem. Now I see the problem as stupid.

17M 19:XX:XX

Had some conflict at work. Did something decisive. I did something that put in place a motion that would put an end to my depression.

17M XX:XX:XX

CONCENTRATION, MISTAKES

Went for a rehearsal today for a program I am attending. Felt confused, lost. A loss of thought in following what I am to say. A sense of confusion regarding word order.

3M 10:XX:XX

Decreased concentration amidst a busy day.

3M 16:XX:XX

I keep on making mistakes as I'm writing in the journal.

10F 10:XX:XX

Had lesson on horse that didn't go to well. I battled to focus on instructions so my horse didn't respond so well. It felt like I had cotton wool in my head. Decisions had to sift them before my limbs would respond.

15F 07:XX:XX

Felt sleepy and zoned-out all morning with a lack of appetite. Am having some difficulty focusing on studies and conversation.

21F 12:XX:XX

BLISS, JOY

Felt great after the spiritual weekend. Desire to dance and move limbs so I went dancing, a fusion dance movement. At dancing felt I glided with joy and bliss. A

supreme emotion of joy energized my body and inner self.

3M 13:XX:XX

MEMORY WEAKNESS

Forgot everything after writing or answering one question before brain went blank.

4F 03:XX:XX

Feeling well except for this forgetfulness. I even have something like my brain is shutting down even when I am driving, as I would remember being in one place and wake up and realise where I am at the moment and not remember what happened at certain distance.

4F 06:XX:XX

Today went to the shop. When there I forgot why I was there and had to come back to my place and retrace my steps to remember what I went there for.

4F 14:XX:XX

Went on a long ride this morning. Trying to keep my nerves in check for show on Sunday. Don't feel as if I practiced enough and for the life of me I can't remember the test by heart! Generally I have a good memory, focused and not nervous.

15F 08:XX:XX

Memory weakness: Did not return important phone calls. I had forgotten errands at work. I had forgotten things that I am responsible for example grocery shopping, picking kids up from school. Now I make a conscious effort to remember. I keep forgetting things to do at home.

15F XX:XX:XX

HEIGHTENED ANXIETY

Woke up early to prep horse for show. Feel all shaky inside. My horse is picking up on my nerves and is being impossible. She keeps stomping on me! I have to try to calm myself.

15F 10:XX:XX

Still at mall (Gateway), going to be late to fetch kids. Very panicky feeling. I don't like being late to fetch girls because I don't like being kept waiting. Also, I don't like them waiting alone, not today's world- better you never know what can happen. Panic, anxious – intensity increased.

15F 20:XX:XX

Nervous, related to stress at work.

17M 07:XX:XX

HEIGHTENED ENERGY AND CREATIVITY

Even my mind couldn't stop thinking, I started getting creative with baking.

14F 06:XX:XX

Feeling creative, want to try a new recipe. Usually creative but now I acted on it.

15F 09:XX:XX

Got neighbours and family over for Father's Day. Enjoying the company. Feeling animated and lively as if I need to expend some energy.

15F 24:XX:XX

4.2.3.2 VERTIGO

Started feeling dizzy and I couldn't study so I slept and woke up 1:30. I still feel

dizzy and even more tired and a bit nauseous. I'm so disappointed I couldn't study and I'm writing in two days (17/04/2009). Dizziness was associated with tiredness, nausea, lack of concentration. Eyes just started closing; head started spinning as if I am going to fall, experienced spinning when standing. Dizziness worse studying, night and better during sleep and in the morning. Didn't feel like studying, felt irritable. Nausea was mostly in the chest, like I wanted to vomit. > sleep.

10F 00:XX:XX

I feel dizzy and tired. It usually happens around 18:00 and 19:00 that I feel this way.

10F 09:XX:XX

I felt dizzy like I was drunk or something and my like whole body would fall on the ground and at the same time I felt sleepy really sleepy. All I could do is just sleep like that was what my body was wanting to just drop down on my bed and sleep. Felt like my body was slowly shutting down. Head had a floating sensation.

10F 09:XX:XX

Didn't feel the immediate effect of sleepiness- I felt awake for quiet some time until about mid-night. I was happy because I could study and then after I started feeling sleepy and dizzy.

10F 11:XX:XX

I wake up and feel dizzy. My head feels like its going around and around.

10F 19:XX:XX

I feel really sleepy and tired and my body feels like it's on air. Floating sensation.

10F 21:XX:XX

Feeling dizzy, mostly on my forehead and like something like a worm crawling on my forehead under my skin, going round and round. Dizziness is when I stand and walk, better when sitting. Had a headache with the dizziness. Feel like I'm

Falling. Dizziness was worse on left side.

14F 00:XX:XX

Had a floating feeling. Felt like my head was about to separate from my body, felt light and my head heavy. Felt this floating when sitting, stopped when I started walking.

14F 00:XX:XX

Felt the dizziness when sitting on the bed.

14F 04:XX:XX

Felt some light-headedness and felt sleepy most of the morning.

21F 09:XX:XX

Noticed some light-headedness along with some "zoning out" today.

21F 11:XX:XX

Some light-headedness and loss of balance.

21F 20:XX:XX

Slight dizziness.

21F 32:XX:XX

4.2.3.3 HEAD

Pain is little more intense. Headache is now on the left side of the head, above

temple. Applied pressure with left hand- pain subsided. Headache was a pounding pain, worse on left side above temple, more intense than usual, better for pressure.

1F 00:XX:XX

Headaches were behind the eyes and forehead. Headache was a throbbing pain, more intense, both forehead and eyes.

1F 01:XX:XX

Had a headache, pain in temples. Applied finger pressure. Headache was a pounding pain, more intense.

1F 03:XX:XX

Cannot get out of bed. Headache was at the back of head and neck, throbbing pain. Lower back was tired.

1F 25:XX:XX

In the afternoon I started feeling sick. I feel like vomiting and have a headache. It is like a cutting pain, on my forehead. I ended up vomiting. I took a mixture of salt and sugar in water, it was better.

4F 02:XX:XX

As the day progressed I started feeling sick again, with a headache. Took a lot of fluids and subsided.

4F 03:XX:XX

The headache started but I had no other alternative like sleeping or anything because I have a test at (16:30) this afternoon.

4F 03:XX:XX

My head feels like I had hit it against something.

4F 03:XX:XX

It feels heavy.

4F 03:XX:XX

I had a headache. I took a mixture of cinnamon and honey, made it better. Severe headache was mostly at the temples, sensation as if she banged her head against something.

4F 11:XX:XX

Feel weird, my head feels like it weighs a ton and I also feel like I'm slowly drifting into sleepiness and I don't know what I'm going to do.

10F 10:XX:XX

Had a headache with the dizziness. Starts on temples and moves to forehead like a pulsating headache, like I have been hit by a hammer.

14F 00:XX:XX

Face feels like bruised pain, pressing feeling, like it is about to fall out. Just the forehead and temples.

14F 00:XX:XX

Now my head feels heavy. Feels like the back of my head is getting bigger.

14F 00:XX:XX

Head feels like a pressing feeling (not pain) on the top of my head, from someone's hand. Headache worse from noise like packets crunching and left side and it is better when music or soothing music.

14F 00:XX:XX

Feeling a bit tired but I can manage reading and coming on with house chores. Feeling a bit of pain where the head and neck meet, like sore aching pain and

weakness, better when massaging and resting my head, worse when I look up and better when I stretch my head. But right now my head is so sore that I can't even touch it or move my head.

14F 00:XX:XX

Pain above the eyes, left eye. Sharp pain.

14F 16:XX:XX

The forehead on left side felt heavy, dragging feeling. Lasted for a few seconds.

14F 16:XX:XX

I have a terrible headache. Worse behind eyes but whole head involved.

Better when keeping still, sleep. Headache was worse for movement.

15F 04:XX:XX

Headache: worse for movement, and smells (especially mince), better for drinking water, and keeping still. Pain has now moved to behind the eyes, worse on right side.

15F 12:XX:XX

Watched a movie at mall (Gateway). Feeling a bit "woozy" in my head. A fluffy feeling behind my eyes and I feel like I can't think clearly. Even walking feels like each step is jolting my brain, probably from sitting in dark movie house for so long and then coming out into bright light. The fluffy feeling behind the eyes is a concomitant to the headache. Headache was worse for movement.

15F 20:XX:XX

Slight headache. Headache was in the temple region, worse in the left side, in the mornings, when concentrating and eating. Associated heartburn. Sharp pain, sensation of poked by needles.

20M 04:XX:XX

For some reason headaches seem to be a morning thing.

20M 07:XX:XX

Woke up with a headache.

20M 21:XX:XX

Woke up with sharp, throbbing headache over entire cap of head as well as nausea.

21F 05:XX:XX

Headache is much better but I am still slightly nauseous. I have slept all morning. This headache which had stopped at the beginning of the year has now returned during the proving. > sleeping.

21F 05:XX:XX

Woke up with a pulsating headache behind my eyes.

21F 15:XX:XX

Headache in the temporal area of my forehead, a lingering headache. The headache occurred the whole day, better for rest and no movement, worse when watching television (flashing light), movement of head. Moderate pain.

24M 18:XX:XX

Headache- developed in the morning, same as yesterday. Made me very grumpy, withdrew myself today.

24M 19:XX:XX

Headache in the forehead and occipital, worse on the right side and only in the morning. Associated exhaustion. Head felt hot as if boiling water has been poured onto head, better for cold bath and sleeping.

27F 07:XX:XX

My head feels hot, better for putting ice or cold towel.

27F 07:XX:XX

Headache in the forehead.

27F 09:XX:XX

Headache in the forehead, worse when looking down.

27F 09:XX:XX

Headache, terrible headache, very sharp pain between the eyes.

28F 01:XX:XX

Just woke up and my headache is gone. I feel better.

28F 01:XX:XX

Headache now. My head feels like it's going to explode. Went to sleep. 28F

04:XX:XX

I was very sick and the worse headache ever, it hurt everywhere.

28F 06:XX:XX

4.2.3.4 EYE

Both eyes- itching, slight burning- rubbed eyes, cleaned- burning sensation continued.

1F 01:XX:XX

Eyelids are dry- still itchiness.

1F 01:XX:XX

Burning eyes, itchy and starting to water slightly.

1F 02:XX:XX

Both eyes are burning. Left eye feels like something is in the eye.

1F 03:XX:XX

Eyes burning, headache, tired. headache was a pounding pain.

1F 01:XX:XX

Headaches - eyes burning. Headache – pounding pain, associated burning of eyes.

1F 19:XX:XX

I cannot open my eyes because the light is too much in my room, during headache.

4F 02:XX:XX

Eyes feel bruised and sore at the back of eyes. It is worse on part of eye near the nose. Eyes worse when staring, moving/looking side to side. Better when closed.

14F 00:XX:XX

Face feels like bruised pain, pressing feeling, like it is about to fall out. Just the eyes.

14F 00:XX:XX

Eyes also feel runny, associated runny nose.

15F 01:XX:XX

Eyes streaming, associated runny nose.

15F 02:XX:XX

Headache with burning and watery eye, worse in the right eye.

27F 07:XX:XX

The eyes were red, associated headache.

28F 01:XX:XX

4.2.3.5 EAR

Sharp pain in left ear.

1F 09:XX:XX

Poking pain in the right ear.

1F 12:XX:XX

Both eardrums itchy, ticklish feeling.

1F 24:XX:XX

My ears and Eustachian tubes are hurting. They feel full as if plugged with cotton wool. It feels as if they are being stretched from inside out. On a pain level from 1 – 10 it probably is 6 were 10 is extreme “cut your own leg off” pain, worse for

external pressure, and better swallowing.

15F 22:XX:XX

Feel hot especially the ears, a burning sensation of and a concomitant to the fever.

27F 01:XX:XX

Headache with burning ears.

27F 07:XX:XX

4.2.3.6 NOSE

Nose is congested, right and left, and increased mucous production, thin, clear discharge. I had flu-like symptoms, worse in cold air, with constant sneezing.

Itching at palate.

3M 04:XX:XX

Runny nose. Took a mixture of cinnamon and honey, made it better. Watery, transparent discharge.

4F 11:XX:XX

My nose is sort of runny and my eyes are also watering- it's sort of like flu-like symptoms, better during the day.

10F 22:XX:XX

I have woken up with a runny nose. It is clear mucous, very liquid. No smell to it. It was burning sensation in nose as if I've sniffed water, worse in right nostril and better for blowing nose.

15F 01:XX:XX

Woke up late- with sniffles. Nose burning and running, better for blowing nose, and getting up, out of bed. Worse for lying with head on pillow.

15F 02:XX:XX

Woke up with burning runny nose as before.

15F 04:XX:XX

My nose is runny. < on blowing- burning sensation in bridge of nose as if sniffed water.

15F 06:XX:XX

Sneezing frequently in sets of fits (sneezing very bad in the evening). Run down feeling (could be due to sneezing).

17M 02:XX:XX

Sneezed twice this morning, and then in the afternoon. Each time 3 sneezes in succession. Normally sneeze during spring time with hayfever but this time it was related to the cold.

24M 17:XX:XX

Runny nose in the morning, blew a lot.

24M 21:XX:XX

Clear nasal discharge.

24M 21:XX:XX

Blocked nose with watery fluid (transparent), Sinusitis.

27F 06:XX:XX

Blocked nose with thick yellowish discharge. When air enters nose, nose becomes dry especially the right nostril.

27F 07:XX:XX

Whitish discharge from nose.

27F 08:XX:XX

4.2.3.7 FACE

Face starts getting hot. Perspiration on upper lip, nose, eyebrows.

1F 00:XX:XX

Skin around the nose and lips- burning sensation.

1F 03:XX:XX

Face felt very hot, no perspiration. Anxiety related.

1F 11:XX:XX

Three small white pimples- on my face (near chin) - left side.

1F 13:XX:XX

Drank a lot of sugar (2 teaspoons) in my tea and normally I would get pimples this time I didn't, and it is strange because I would get pimples during my periods but I did not.

14F 01:XX:XX

Pimples during the second week of proving. Cheeks and chin. Pin-prick size, skin colour.

20M XX:XX:XX

4.2.3.8 MOUTH

Saliva starting to get thick, thick as mucous. Drank a glass of water.

1F 00:XX:XX

Dry mouth, very thirsty- drank water.

1F 14:XX:XX

Mouth: taking the first dose felt nauseating. The taste of the remedy is truly disgusting. A bitter almost rotten flesh taste.

3M 00:XX:XX

Mouth: gums started to bleed, dark red blood, gums felt sensitive.

3M 04:XX:XX

4.2.3.9 THROAT

Throat is dry- drank water.

1F 19:XX:XX

Throat also dry, scratchy.

1F 24: XX:XX

Keep having to clear my throat. It feels like a piece of bread stuck in my throat – a large obstruction. Very irritating. This is a new symptom. > clearing my throat, drinking water.

15F 00:XX:XX

My throat is definitely getting scratchy. It feels thick and inflamed inside. It's difficult to swallow because of the lump in my throat. I know I'm going to snore tonight.

15F 00:XX:XX

Constant itch in throat.

15F 16:XX:XX

Throat getting sore again.

17M 23:XX:XX

Throat sore and voice getting hoarse. Throat itchy, I keep scratching it, this might be making it sore. Post-nasal drip incites the itchiness.

17M 24:XX:XX

Dry throat, with associated sinusitis.

27F 06:XX:XX

4.2.3.10 STOMACH

Start feeling scared, anxious- stomach.

1F 06:XX:XX

Uneasy feeling in the stomach.

1F 08:XX:XX

Feeling sick in the stomach. Anxiety related.

1F 09:XX:XX

Mouth is dry- still feeling sick in the stomach- deep breathing. Anxiety related.

1F 09:XX:XX

Very thirsty- drank water.

1F 17:XX:XX

Thirsty- tongue feels dry- drank water.

1F 18:XX:XX

Feeling unusually hungry- had a snack.

1F 18:XX:XX

Empty feeling in the pit of stomach- feeling hungry- ate a snack.

1F 20:XX:XX

Hungry- appetite seems to have increased.

1F 21:XX:XX

Thirsty, tired.

1F 27:XX:XX

Slight increase in appetite, feeling hungry after having cereal at 5:45.

1F 30:XX:XX

I had a little bit of an appetite, which is unusual. I drank a glass of milo (hot chocolate). Appetite improved, I could manage eating breakfast without vomiting and eat all meals at correct times.

6M 02:XX:XX

Usually I have heartburn in my chest, this time in my throat. Usually spicy foods, garlic, smoke from cigarettes and stress cause it. This time stress caused it because I had a busy day and I was in a hurry to finish work at home. It's also different because toothpaste, cool, cold fresh open air makes the heartburn

better. It feels like heat from fire, like a ball of fire burning in my throat.

14F 02:XX:XX

No appetite. I was hungry but I had no appetite but my stomach started making these noises. Even when I ate my stomach started bloating and I had difficulty swallowing mainly through my chest. My whole stomach felt bloated so I wasn't comfortable eating because then my whole body would feel like I have eaten too much.

14F 09:XX:XX

Had to take vehicle today so have a very rushed morning already. Don't feel like breakfast this morning. My stomach feels a little "bubbly". I don't think I can stomach solids!

15F 20:XX:XX

I've stayed in bed all afternoon. Still feel quiet weak and shaky. Have zero appetite. My stomach also feels like a cramping pain, better when lying in fetal position.

15F 22:XX:XX

Still not feeling for food, just no interest. Too much effort to make something for myself.

15F 23:XX:XX

Felt very hungry but was put of food some reason.

20M 06:XX:XX

Felt very hungry but was put of food some reason.

20M 06:XX:XX

Today had heartburn but not that bad, better when eating apples. Felt the heartburn in chest.

20M 19:XX:XX

Woke with slight, dull pain in left upper quadrant of stomach, slight nausea. Nausea seemed to be better after eating breakfast at 6:30.

21F 03:XX:XX

Felt less tired today but had a returning hollow, dull pain in my stomach. (no change in mood).

21F 03:XX:XX

Have noticed a light nausea and the pain in the left stomach is back – it's a hollow feeling, like a hot hole is in my stomach.

21F 04:XX:XX

I am slightly nauseous and I have noticed that I wasn't hungry today. The nausea was with associated dizziness or with stomach cramps and loss of appetite.

21F 06:XX:XX

Have severe cramps in my upper stomach area.

21F 07:XX:XX

Have noticed a decrease in appetite.

21F 07:XX:XX

Still have a lack of appetite and have noticed some weight-loss.

21F 18:XX:XX

Lack of appetite and slight drowsiness.

21F 23:XX:XX

Have had the same stomach cramps all day (on-off) with some light nausea.

21F 08:XX:XX

Noticed some light-headedness, with stomach cramps and with associated lack of focus.

21F 08:XX:XX

Have stomach cramps coming in intervals but not as sharp as before. More noticeable on the right upper part of my stomach.

21F 11:XX:XX

Some stomach cramps again. In left upper quadrant. A hot wheat-bag relieved the cramps.

21F 22:XX:XX

Light stomach cramps and light dizziness.

21F 29:XX:XX

Did not have a good appetite as usually, associated with flu symptoms.

24M 19:XX:XX

Feel like vomiting, I feel dizzy. I ate and drank an energy drink. I feel fine.

28F 05:XX:XX

4.2.3.11 ABDOMEN

My stomach feels crampy like I'm getting my periods. The cramps felt like bubbling, and bloated sensation, better for stool.

10F 00:XX:XX

Still felt the cramps.

10F 00:XX:XX

My tummy has been acting on me, I'm having runny tummy, my stool are watery and my stomach feels bubbly, associated with stomach cramps. Stool was watery, light brown in colour.

10F 11:XX:XX

My stomach feels bubbly and gas.

10F 12:XX:XX

4.2.3.12 RECTUM

Bowel movement- soft, smooth, sticky- discomfort signs of piles. It felt like a protruding/bulge of the anus, but no bleeding or no severe pain.

1F 03:XX:XX

No discomfort, pain (piles).

1F 04:XX:XX

4.2.3.13 STOOL

First bowel movement. First stool dry, hard then soft, slightly sticky, runny but very sticky. The consistency of stool has changed, sticky.

1F 01:XX:XX

Bowel movement with odour, a slight chemical odour.

1F 02:XX:XX

Bowel movement with strong smell (pungent).

1F 04:XX:XX

Bowel movement with dark brown stool, and odour was a strong, pungent smell.

1F 05:XX:XX

Bowel movement with runny stools.

1F 25:XX:XX

4.2.3.14 URINE

Urine - dark yellow, strong odour.

1F 01:XX:XX

Urine - strong odour, yellow.

1F 01:XX:XX

Urine - yellow, foul odour (odour).

1F 15:XX:XX

Urine - thick, yellowish discharge.

1F 21:XX:XX

Urine was dark brownish orange, normal smell. Strange because even when I don't drink water I still have light colour urine.

14F 17:XX:XX

4.2.3.15 FEMALE GENITALIA

Normally on my second day of my menstrual cycle I experience cramps, pain in

lower stomach. No discomfort or cramps and no side pains.

1F 13:XX:XX

I have strong period pains and I haven't had these pains in a long time. Its like a sharp pain and more blood is coming out by the minute. That's how I feel and kind of unbearable because I haven't had these period pain for the past year and a half. Dysmenorrhea is more intense, radiate from pelvic area to lower back. Flow- heavy, clotting profusely (first 2 days). Dysmenorrhoea was worse for cold, sharp pain. Mood- lashed out at people (boyfriend).

10 F 32:XX:XX

Sharp pains in the pelvic area in the anterior of the body. Dysmenorrhea: area of pain was better when warm and with pressure.

12F 15:XX:XX

With my period I had this thick, slimy discharge and it was clear, very strange.

14F 22:XX:XX

Had slight discomfort in lower abdomen from period but nothing significant. Feels like a dull ache, as if my bladder is full.

15F 14:XX:XX

I have been moody and irritable all day, probably as a combination of headache, stress and pre-menstrual tension.

21F 05:XX:XX

Experienced some sharp period cramps.

21F 07:XX:XX

4.2.3.16 RESPIRATORY

Today, however, I could somewhat breathe better than normal and the air around me felt rather fresh.

6M 06:XX:XX

4.2.3.17 COUGH

Actually it feels like a flu with a little bit of coughing and tiredness, productive cough. I took a mixture of cinnamon and honey, made it better.

4F 11:XX:XX

Cough started. Irritating, dry cough. Felt like something small and hard in my throat which caused like a choking cough. The cough stopped when I sat up in bed, and it was worse when lying down. I think when I lie down my throat gets like compressed and that's what causes the cough. It was a choking, suffocating cough, worse at night, lying down and cold. Cough is better for drinking water, and sitting up. Coughed until I gagged, also vomited saliva.

14F 14:XX:XX

Have a slight cough. Irritating more than troubling. Cough seems to be better when keeping chest warm, and worse for movement, dust.

15F 06:XX:XX

Had a coughing fit, started as a tickle in my throat. When I tried to clear tickle it produced a cough, dry, no expectorant but continuous to a point of wanting to gag. Constant itch in throat.

15F 16:XX:XX

Was coughing a bit last night and later in the afternoon today. It was a hard cough, loud, barking cough.

24M 22:XX:XX

Coughing a lot last night. Could not sleep. Coughed throughout the day. Not productive. It feels like my headache is due to my coughing. Pain is in temporal regions.

24M 23:XX:XX

Woke a few times coughing and sweating last night. Dry irritating cough.

24M 24:XX:XX

4.2.3.18 EXPECTORATION

Post nasal- coughed phlegm- thick, slightly white.

1F 00:XX:XX

Coughed- dark grey phlegm- about 1 teaspoon.

1F 02:XX:XX

Post nasal- coughed thick white phlegm.

1F 03:XX:XX

Productive cough- clear, thick mucous.

24M 25:XX:XX

4.2.3.19 CHEST

Pain in chest muscles- deep breathing.

1F 02:XX:XX

Discomfort feeling- in the chest like a poking pain. Took a few deep breathes.

1F 26:XX:XX

Felt bloated the whole day same as before. Every time I bent down I wanted to vomit everything I ate. The bloated feeling was mostly in the chest all the way to the abdomen. Sensation as if everything inside is swollen and constricted, tight, felt as if I am about to burst.

14F 13:XX:XX

4.2.3.20 BACK

Tingling pain in the lower back just above the buttocks- left side.

1F 00:XX:XX

Tingling sensation below the left ear (neck gland), applied finger pressure.

1F 00:XX:XX

But neck and shoulder pain returned, numbing pain.

1F 09:XX:XX

Three small white pimples, on my back.

1F 13:XX:XX

Sharp pain on the lower right side, toward the back. Rubbed or massaged the side to ease the pain.

1F 23:XX:XX

Neck and lower back, a severe numbing pain, lay on the bed on my back. 1F 28:XX:XX

Neck, shoulder, upper back pain.

1F 29:XX:XX

Back pain, was worse for movement, lumbar disc went spastic and feel a light constriction along the lumbar spine. Back pain is better when lying down, and movement.

3M 16:XX:XX

Heaviness, like a big rock on my neck.

14F 00:XX:XX

Woke up with a stiff neck and slight dull headache to the back of my head. It's worse on the right side of neck, and better for massage, hot shower.

21F 17:XX:XX

4.2.3.21 EXTREMITIES

Similar sensation on left hand (elbow). Eased the pain by applying finger pressure and exercising the hand, stretching. It's a tingling pain on elbow.

1F 00:XX:XX

Left shoulder, close to the neck, numbing pain. Applied pressure with right hand, pain subsided at 9:00. It's better lying down, heat pad, fast jerking movement, cracking the joint.

1F 00:XX:XX

Left shoulder, arm and finger side on the left side- numbing pain- applied finger pressure and stretched out the hand (exercise).

1F 00:XX:XX

Under both feet- hot, slight burning sensation- front and middle part of feet- not the heel, worse for cold water and open air. Associated poking pain on the foot.

1F 00:XX:XX

Piercing pain in left shoulder- finger pressure, applied heat bag. Cold brought it on. Piercing like cut by a sharp knife.

1F 00:XX:XX

Piercing pain- left shoulder, arm, elbow and knee. Applied finger pressure and heat bag.

1F 00:XX:XX

Right and left shoulder, upper back – pounding pain, lay on my back for half an hour. Pain was more intense than usual, worse for cold.

1F 01:XX:XX

Under both feet hot and itchy. Skin under feet is dry.

1F 01:XX:XX

Right thigh and ankle- poking pain.

1F 02:XX:XX

Left shoulder and arm pain- applied finger pressure, (poking pain).

1F 02:XX:XX

Right side shoulder and jaw-throbbing pain- applied finger pressure.

1F 02:XX:XX

Left shoulder pain- poking and numbing. Stretched out the hand.

1F 03:XX:XX

Sharp poking pain in left knee and left ankle. Stretched out and bent the knee.

Turned the foot in clockwise and anticlockwise direction.

1F 03:XX:XX

Sharp, poking pain in right leg above the knee. Pain stopped after a few seconds.

1F 03:XX:XX

Numbing pain in left shoulder next to shoulder blade. Emotions: tired, don't want to wake up. Exercising left hand- pain subsided after 5 minutes.

1F 04:XX:XX

Shoulder and back pains return- exercise the hands and neck, numbness.

1F 06:XX:XX

Palms - very hot, no perspiration. Anxiety related.

1F 11:XX:XX

Heel of my foot has a sharp hurting pain. Pain is at the back of the heel. Apply finger pressure for about 5 minutes- pain subsided.

1F 13:XX:XX

Pain in the back of left heel returns. I can walk but there is discomfort. Apply finger pressure- massage.

1F 14:XX:XX

Sharp pain in left shoulder joint- stretching exercise.

1F 15:XX:XX

Cramping in the left leg (below the knee) - exercised the leg.

1F 20:XX:XX

Sharp pain in the left heel.

1F 21:XX:XX

Cramping in the left leg muscle- massaged.

1F 22:XX:XX

Feeling very tired- shoulder and neck pain is severe (numbness). Stretched out arms and did neck exercise.

1F XX:XX:XX

My legs and feet were burning the whole night but it is so cold tonight. My feet and legs felt better with no blanket, cold air.

14F 17:XX:XX

Noticed a tingling feeling in my left hand especially in thumb. Feels like a pulse.

15F 10:XX:XX

I have a pain in my right hip bone. This pain seems to come and go. I can't tell what triggers it but I become aware of it when I get up after sitting for a while. It's just a tender spot. I can't really say what either because I tend to forget to do anything. It doesn't go with rubbing and definitely < bending forward. The burning

sensation is worse on first movement, and better for continued movement. Pain has intensified.

15F 19:XX:XX

Feeling exhausted, as if something heavy on my shoulders- light heaviness. Physically and mentally tired, and sleepy. Shoulders felt as if a heavy load.

27F 01:XX:XX

Feel heaviness on shoulders- maybe because of the test tomorrow.

27F 03:XX:XX

4.2.3.22 SLEEP

Feeling exhausted and lethargic. Desire to sleep. Slept at 21:30 which rarely occurs as I sleep after 12 (midnight) daily.

3M 03:XX:XX

Sleep: awake at 4:30 and then slept again to wake up at 7:30. Slept from 21:30 last night. Had a deep sleep, rested well. Deep sleep is rare for me as I have insomnia often.

3M 04:XX:XX

Sleep, constant desire to sleep. Tired, exhausted. No energy to pursue my dreams or passions.

3M 08:XX:XX

(10:00) Felt sleepy at work today at 10:00.

4F 01:XX:XX

Last night I had good sleep which is unusual.

6M 03:XX:XX

I woke up at 5am feeling the same as yesterday. This was unusual; normally I wake up feeling extremely tired.

6M 07:XX:XX

Felt very tired. I put a DVD on but half an hour later I slept away, which is not like me, then I went to bed to sleep but I could not sleep.

14F 11:XX:XX

Battling to get out of bed, it is so very cold! The wind is blowing gales outside.

15F 05:XX:XX

Good night sleep. Woken up feeling good and refreshed. Seem to have a lot of energy.

15F 09:XX:XX

Slept like a baby. Maybe my imagination, but since taking the remedy have had more good nights than bad. I sleep solidly and soundly. Usually I get up 2/3am per night to go to loo, check why the dogs are barking, but not as much now.

15F 14:XX:XX

Sleep has improved since been on the proving. Deep sleep. Wakes up refreshed.

15F XX:XX:XX

I am able to sleep better since the confrontation.

17M 22:XX:XX

No longer waking groggy and de-motivated.

17M 22:XX:XX

Woke up later than usual.

21F 04:XX:XX

Have slept well all day.

21F 15:XX:XX

Slept very bad last night, struggled to fall asleep and then to stay asleep.
Restless sleep and difficulty going to sleep. Sleep for an hour then awaken.
Associated nightmares – something related to the course/studies. Talking in my
sleep. Fears of failure.

24M 10:XX:XX

I had a restless sleep again and was tired during the day. I took afternoon sleep.

24M 11:XX:XX

Uncomfortable sleep last night. Night sweats, but not bad.

24M 20:XX:XX

Restless sleep.

24M 30:XX:XX

According to parents was rolling around and very restless in bed last night. Don't
feel tired this morning though.

24M 31:XX:XX

Haven't slept like a baby in ages.

27F 08:XX:XX

4.2.3.23 DREAMS

Dream

I am driving my car to work. I am late. I realize that I am wearing my high school uniform which is very short. I am embarrassed, uncomfortable. I then realize that I can open the hem to make it longer. After opening the hem- I am at ease, comfortable. Related to being conservative. Contradiction, even though being in a uniform which is a discipline yet I still felt embarrassed. Before I followed what society says.

1F 00:XX:XX

Dream

Driving my father's car to work, wearing my sleep shirt and forgot to wash my hair. Its 5:30 and so I drive back home to bath and wash my hair and change. Feelings: initially embarrassed, shock, but after realizing the time I am relieved, calm, at ease.

1F 01:XX:XX

Dream

Had a dream that I'm being forced to continue studying towards Masters degree by the Dean of the faculty. I am angry, upset, irritated because I don't enjoy that aspect of research. Frustrated and angry and I am shouting at them saying that I don't want to do more research.

1F 06:XX:XX

Dream

I am at work lecturing- feeling at ease, enjoying what I am doing. As I am walking back to my office, I notice that the skin on the top of my foot is hurt. I am wearing sandals but I notice that only the right foot is affected- looks like the skin has been severely scratched/grazed- parts of the skin is out. I am not experiencing any pain- there is no blood but I am questioning myself: how did this happen to

only one foot- I did not walk on grass or through a shrub. Then I am wondering whether I have some kind of sickness or allergy. Start getting worried that I may have an illness. Anxiety, worry, fear.

1F 11:XX:XX

Dream

Hanging up my washing on the line but the line is coated with mud. I am irritated that I have to take off the clothes and re-wash because they are now dirty- more work but I wipe all the lines and re-wash.

1F 13:XX:XX

Dream

I am leaving my lecture in university (Steve Biko) but there is no paved walkway or gate through which I can leave. Security tells me that I have to climb a hill to get out of the campus. While I am climbing up I struggle because the hill is steep. I hold on to tufts of grass and try to climb up. I use my knees and feet to dig into the ground. As I move up the hill, I am being pulled back by my students who are also trying to get out. They are using me as support to get out.

1F 16:XX:XX

Dream

I am walking out of a lecture room and when I look outside I notice that I am standing on top of a very high staircase. I look down and am afraid that I may fall. I walk to the side to hold on to the railing. As I try to walk down the stairs, the staircase starts to move slowly, like it is pushed by wind. The stairs are very narrow and there are many people trying to climb up but they don't reach me. I remain standing at the top.

1F 22:XX:XX

Dream

I am carrying a baby (little girl) - less than a year old. She is holding onto me very

tightly and does not want to let go. She seems afraid and is crying.

1F 23:XX:XX

Dream

I am at work. There is no electricity so we (staff) are sitting in an open space and having a casual chat. Everyone is talking about how unhappy they are at work but they won't find anything better so they cannot leave. I am frustrated because I want to get away but they keep saying that I will regret it.

1F 23:XX:XX

Dream

My car is parked at the top of a tree. When I look closer it's parked on a metal track that is leaning against the tree. I asked security to release it and brought it on the car park.

1F 24:XX:XX

Dream

I am walking out of a lecture room with my books and bags. I have to climb a hill has grooves dug in it that I can use as steps. As I try to climb up the hill, I cannot go further than halfway because my bags and books are in the way. I throw my bags over the hill and then I am able to climb up to the other side of the hill without any trouble.

1F 24:XX:XX

Dream

I am in this huge building- looks like a mall or office building. I am climbing a spiral staircase. As I climb to the top, the staircase gets narrower. When I reach the top of the staircase, I find that there is a wall with spaces in it. The spaces are very small, I cannot fit through them. I call out for help and 2 ladies approach me from the other side of the wall. They tell me that they have an electricity problem that is why the wall is closed. They interfere with some switches and wires and

then the wall disappears. I climb out of the staircase and as I walk through the building everyone is so friendly and co-operative. I am happy to be there.

1F 24:XX:XX

Dream

I am outside in the garden with family. It is a bright, warm day. I feel drops of water falling on my face and when I look up, there is silver snake on the tree. It spits at me in very playful way- the snake seems to be smiling, friendly. I am calm and wipe of the water on my face.

1F 26:XX:XX

Dream

Got to work like normal. There are bird feathers on my desk and the floor. As I look around, I see remains of a dead bird. I am confused as to how the bird died and why its feathers are scattered around my office. I ask my other colleagues if they also have feathers in their offices. No one else had the same experience as me.

1F 29:XX:XX

Dream

I dreamt that my mother called me home today because she mentioned something about granny dying and that she didn't want dad to feel sad and lonely. At first when I spoke to her in my dream I was shocked because she has never asked me something like that before. I felt that she needed someone close to her to be with her and that she needed her own flesh and blood (ME) her daughter and I felt a sense of being close to her again- I felt a bit weird but also scared that something maybe wrong with granny because she is strong woman and I've never seen or heard of her being ill. Felt a sense of belonging to her mother. Shocked that I felt close to her mother. Felt happy that my mother can rely on me and that I could be there for her mum and that my mum could trust

me.

10F 17:XX:XX

Dream

Dreamt last night of my old school, strange dream, and all the people of past was there, all my school friends. All of a sudden I am running out of class because one of my friends were hurt. When I got there to the spot I see this person who used to give me a hard time at school. He starts stalking me. I was afraid at first but then I realised that he is harmless and that nobody can harm you only if you allow them, so I turned around and confronted him. He started to run, I ran after him and I caught him. I then beat him up to teach him a lesson for stalking me. The whole time I felt nervous and defensive but when I confronted him I felt good because I was able to build courage and face my fears.

14F 01:XX:XX

Dream

Dreamt I was at my cousin's place. I slept over because she needed company. Strange because she has so many sisters and brothers. It was her duty every night to close the drive way gate. It was a strange gate because every time you open the gate you had to remove the gate. One night I failed to lock it up, somehow I fitted it. The next morning the neighbours tell me that the gate was not fitted on properly. I was angry because it should be my cousin's responsibility not mine, but that's just like her not to sort her life out and leave unfinished work for others to complete, and I can't stand carelessness.

14F 01:XX:XX

Dream

I dreamt about being attacked and I had to survive. I was sitting in a car and all of a sudden I was being attacked by this man with sharp teeth and had full blood in his mouth. He started biting everyone. Somehow I escaped. I could jump on to roof tops which normally I can't. I eventually came to a building where I met these

nurses and then I knew I was safe. The whole time I felt scared, need to survive and escape. I was scared that I may die. Never had such a strange dream.

14F 03:XX:XX

Dream

I dreamt that I gave birth to kittens. As soon as these kittens were born they started walking and they could see. I just had these feeling or need to have a baby, but this was in the dream.

14F 12:XX:XX

Dream

I had a funny dream about being in a hotel with some people. They were carrying books with them, I think they were studying and I was sharing a room with a friend. Anyway while walking through the hotel I met someone who I don't talk to anymore. I greeted him and he gave me a box of pamphlets and he said that this is my box and that I lost it but I got angry and I said it wasn't mine. When I opened the box I saw some religious stuff in it and that friend said 'you know what that means' and I replied 'that is a conversation for later.' I think it meant that I am looking for answers which only my religion can help answer.

14F 17:XX:XX

Dream

Dreamt that I was hunting someone. I had a rifle and I was creeping through the bushes and trees around our farm. My adrenaline was pumping and I was filled with bloodlust. I wanted to kill this person.

15F 15:XX:XX

Dream

Woke up from a nightmare. Dreamt I was being chased through a building. Felt irritated when I woke up.

21F 08:XX:XX

Dream

Can't remember the second dream just that I woke up sweating. Must have been a nightmare, parents also reported me making noises or talking.

24M 18:XX:XX

Dream

This time my dad I were cycling somewhere in our town mountain.

24M 21:XX:XX

4.2.3.24 FEVER

Feeling feverish. I took a mixture of cinnamon and honey, made it better. Fever with no thirst, no perspiration. Body felt hot and cold alternating, better for covering, worse for cold and uncovering.

4F 11:XX:XX

My body feels hot. Temperature went beyond 37.2 degrees, no perspiration.

27F 07:XX:XX

4.2.3.25 PERSPIRATION

Face- hot, perspiration on upper lip, nose, eyebrows- took a few deep breathes. Anxiety related.

1F 09:XX:XX

4.2.3.26 SKIN

Noticed a small rash on right side of neck. Seems irritated by hot water. Started

burning/itching sensation after hot shower.

21F 01:XX:XX

Rash on right side of neck is seemingly brought on by hot shower. It's slightly bigger than yesterday with same burning/itching sensation, red macula rash.

21F 02:XX:XX

Rash on neck is back after a shower. Slightly stronger burning sensation.

21F 03:XX:XX

Return of rash – bigger than before with same sensation.

21F 04:XX:XX

Rash has returned after hot shower but now is on the left side of neck and over a much smaller area than before.

21F 05:XX:XX

Have a rash on the right side of my neck again with an itching, burning sensation.

21F 08:XX:XX

4.2.3.27 GENERALS

Craving chocolate- something sweet. Huge craving.

1F 00:XX:XX

My body is tired, my muscles- every bone is aching.

1F 12:XX:XX

Feeling extremely tired, body is aching. Drank water and went for a walk outside in the garden.

1F 18:XX:XX

Tired, body is aching- need to sleep more. Lay on the bed- took a few deep breathes.

1F 30:XX:XX

Craving nuts and seeds, ate poppy seed rolls and a seed mix which I rarely eat. I was nibbling on the seeds.

3M 00:XX:XX

Tired and exhausted. Desire to just lay down and not move.

3M 16:XX:XX

I feel like a walking zombie. I'm tired and a bit dizzy. I just wish I could go to sleep.

10F 11:XX:XX

I woke up and my body felt tight like my bones are aching- I didn't do anything rough or heavy on my body. Body aches felt like she exercised (only I didn't do any physical activity).

10F 20:XX:XX

Tiredness- associated vertigo, worse in the morning and on waking, better for sleep (to be alone, to be in my space, quiet time, no disturbance so I could gather my thoughts).

10F XX:XX:XX

Tired and dizzy at night and better during the day and afternoon.

10F XX:XX:XX

I am starting to feel like heat from back between shoulder blades, up to my ears and head and chest, inside out up to my ears. Feels like steam coming out of

ears. Sometimes happens when I sleep on a hot night but not when I am awake.

14F 00:XX:XX

Energy – I had high energy levels it was unbelievable. I completed my house chores, did the cooking and baking for the wedding in my family. Energy was high at night.

14F 06:XX:XX

I still had a lot of energy with this flu.

14F 09:XX:XX

Had a craving for junk food – fries.

14F 09:XX:XX

Craving for sweet things like sweets.

14F 11:XX:XX

Craving for fried eggs, so I fried egg.

14F 14:XX:XX

Craving chocolate.

14F 18:XX:XX

Craving for mint chocolate, but craving was strong.

14F 22:XX:XX

Was extremely hungry tonight and craving sweet stuff.

15F 07:XX:XX

Had stewed guavas with berry yoghurt. Seemed to appease the craving for sweet stuff. This is unusual for me. I usually crave chocolate specifically! I think my period might be on its way.

15F 07:XX:XX

I feel tired and weak. My legs feel very heavy and unsteady. My hands are trembling. I feel as if I'm about to get the flu.

15F 22:XX:XX

Going to bed, very tired all of a sudden.

15F 06:XX:XX

Had to buy chocolate because the desire to consume one far out weighted the fact that I should be watching what I eat!

15F 11:XX:XX

Have cleaned and scrubbed everything. Full of energy. Feeling good.

15F 24:XX:XX

My body feels a lot better, higher energy levels.

17M 22:XX:XX

Run down, more than most times. Inattentiveness.

17M XX:XX:XX

Have strong cravings for grapefruit and oranges. Craved for citrus fruits.

21F 17:XX:XX

Came from town my whole body is shaking. Don't know what is the cause of this but I'll go and sleep now. Just woke up and I feel better.

28F 02:XX:XX

4.3 REPERTORY

4.3.1 Key

The rubrics from the proving of *Acridotheres tristis* are presented as follows:

CHAPTER – RUBRIC – subrubric – grading – page number

Most of the rubrics are derived from the existing *Synthesis Repertorium Homeopathicum Syntheticum* edition 8.1, edited by Dr Frederik Schroyens (2001). The page numbers refer to where these rubrics can be allocated in the above mentioned repertory. The new rubrics presented below are underlined and denoted with the letter N. Grade 2 rubrics are typed in *italics>*. Grade 1 rubrics are typed in plain type.

4.3.2 Rubrics for *Acridotheres tristis*

4.3.2.1 MIND

MIND – ACTIVITY; desires	1	3
MIND – ACTIVITY; desires – creative activity	1	3
MIND – ACTIVITY; desires – work, at	1	3
MIND – AILMENTS from – anxiety	1	5
MIND – AILMENTS from – domination	1	5
MIND – AILMENTS from – indignation	1	6
MIND – AILMENTS from – mental exertion	1	7
MIND – ANGER – alternating with – affectionate	1	10
MIND – ANGER – alternating with – tranquility	1	10
MIND – ANGER – disorder, about	1	11

MIND – ANGER – himself, with	1	11
MIND – ANSWERING – abruptly	1	14
MIND – ANTAGONISM with herself	1	15
MIND – ANXIETY	1	16
MIND – ANXIETY – alternating with – exhilaration	1	18
MIND – ANXIETY – anger – during	1	18
MIND – ANXIETY – breathing – amel.	1	19
MIND – ANXIETY – children – about his	1	19
MIND – ANXIETY – money matters, about	1	23
MIND – ANXIETY – shuddering, with	1	24
MIND – ANXIETY – weariness, with	1	26
MIND – BLISSFUL feeling	1	30
MIND – CARES – others, about	1	33
MIND – CHANGE – desire for – life, in	1	34
MIND – CHANGE – desire for	1	34
MIND – CHAOTIC	1	34
MIND – CHEERFUL	1	34
MIND – CLARITY of mind	1	37
<u>MIND – CLARITY of mind – purpose, of</u>	1	N
MIND – COMPANY – aversion to	1	38
MIND – COMPANY – aversion to – alone, when, amel.	1	39
MIND – COMPANY – aversion to – bear anybody – cannot	1	39
MIND – COMPANY – aversion to – blanket, wants to wrap himself in	1	
a		
MIND – COMPANY – aversion to – desire for solitude – reflect, to	1	39
MIND – COMPANY – aversion to – desire for solitude	1	39
MIND – COMPANY – aversion to – friends, of intimate	1	39
MIND – COMPANY – aversion to – headache, during	1	39
MIND – COMPANY – desire for – amel in company	1	40
MIND – COMPANY – desire for – family, of his	1	40
MIND – COMPANY – relations and surroundings	1	41

MIND – CONCENTRATION – active	1	41
MIND – CONCENTRATION – active – alternating with – tranquility	1	41
MIND – CONCENTRATION – difficult	1	41
MIND – CONCENTRATION – difficult – conversation, during	1	42
MIND – CONCENTRATION – difficult – studying	1	42
MIND – CONCENTRATION – difficult – talking, while	1	42
MIND – CONFIDENT	1	43
MIND – CONFIDENT – alternating with – discouragement	1	43
MIND – CONFIDENT – natural, feel safe to be	1	43
MIND – CONFUSION – lost feeling	1	46
MIND – CONSCIENTIOUS about trifle	1	48
MIND – CONSOLATION – amel.	1	48
MIND – CONTENT	1	48
MIND – COURAGEOUS	1	50
MIND – DANCING	1	51
<u>MIND – DELUSION – motion – slow motion – work, in</u>	1	N
MIND – DELUSION – outcast, she were an	1	85
MIND – DELUSION – wrong – done wrong, he has	1	100
MIND – DISCONTENDED – himself, with – good for nothing, sensation of being	1	105
MIND – DISTURBED, averse to being	1	107
MIND – EASE, feeling of	1	112
<u>MIND – ESCAPE – responsibilities, from</u>	1	N
MIND – ESTRANGED – family, from his	1	115
MIND – ESTRANGED – friends and relatives	1	115
MIND – ESTRANGED – self, from	1	115
MIND – EUPHORIA	1	115
MIND – FASTIDIOUS	1	120
MIND – FEAR – failure, of – examinations, in	1	127
MIND – FEAR – job, to lose his lucrative	1	130
MIND – FEAR – new enterprise, of undertaking	1	132

MIND – FEAR – poverty	1	133
MIND – FEAR – sadness, with	1	134
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MIND – FORGETFUL	1	138
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<u>MIND – FORSAKEN feeling – isolation, sensation of – occupation –</u>	1	N
<u>amel.</u>		
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MIND – HIGH-SPIRITED	1	148
MIND – HOPEFUL – alternating with – discouragement	1	149
MIND – INDIFFERENCE – welfare of others, to	1	159
MIND – INSECURITY	1	163
MIND – IRRATIONAL	1	164
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MIND – IRRESOLUTION – indecision	1	164
MIND – IRRESOLUTION – irritability, with	1	
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MIND – IRRITABILITY – menses – during	1	168
MIND – IRRITABILITY – sadness, with	1	169
MIND – IRRITABILITY – waking, on	1	169
MIND – IRRITABILITY – weakness – with	1	170
MIND – JOY	1	171
MIND – LIGHT – desire to – sunlight, to be in	1	178
MIND – LOATHING – work	1	179
MIND – MEMORY – loss of memory – mental exertion, from	1	184
MIND – MEMORY – weakness of memory – do, for what was about	1	184
to		
MIND – MEMORY – weakness of memory – everyday things, for	1	185

MIND – MEMORY – weakness of memory – happened, for what has – just happened	1	185
MIND – MEMORY – weakness of memory – mental exertion, for	1	185
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MIND – MISTAKES – writing in	1	191
MIND – NATURE – loves	1	198
MIND – OCCUPATION – amel.	1	199
MIND – OCCUPATION – desire to	1	199
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MIND – POSITIVENESS	1	202
MIND – POWER – sensation of	1	202
MIND – PROSTRATION – mental exertion, slight	1	204
MIND – PROSTRATION – thoughts – work, of – agg.	1	204
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MIND – REASSURED – easily – anxious, when	1	208
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MIND – SADNESS – alone – when – amel.	1	219
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MIND – SPEECH – confused	1	234
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MIND – STUDYING – difficult	1	240
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MIND – UNDERTAKING – nothing, lest he failed	1	259
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MIND – WILL – loss of will power – insight, self awareness, with increased	1	268
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4.3.2.2 VERTIGO

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VERTIGO – MORNING – rising – amel.	1	272
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<u>VERTIGO – ACCOMPANIED by - concentration, difficult</u>	1	N
VERTIGO – ACCOMPANIED by – head – heaviness in head	1	273
VERTIGO – ACCOMPANIED by – head – pain in head - forehead	1	273
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VERTIGO – TURNING, as if – head, whirling in – forehead, in	1	283
VERTIGO – WALKING – amel.	1	284
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4.3.2.3 HEAD

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HEAD – ENLARGED sensation – occiput	1	294
HEAD – HEAT – cold – applications, amel.	1	303
HEAD – HEAT – hot – water	1	303
HEAD – HEAVINESS	1	305
HEAD – HEAVINESS – occiput – extending to – vertex	1	309
HEAD – LIGHTNESS, sensation of - float off, as if it would	1	312
HEAD – PAIN – morning	1	316
HEAD – PAIN – morning – waking, on	1	316
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HEAD – PAIN – accompanied by – neck – pain in – nape of neck	1	319
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HEAD – PAIN – cold – water, washing in cold water amel.	1	323
HEAD – PAIN – eating – after	1	324
HEAD – PAIN – light – artificial, from	1	327
HEAD – PAIN – looking – downward – from	1	327

HEAD – PAIN – looking – upward, from	1	327
HEAD – PAIN – menses – before	1	328
HEAD – PAIN – mental exertion – agg.	1	329
HEAD – PAIN – motion – agg.	1	329
HEAD – PAIN – motion – head, of	1	329
HEAD – PAIN – resting head	1	331
HEAD – PAIN – sleep – after – amel.	1	333
HEAD – PAIN – sleep – during – amel.	1	333
HEAD – PAIN – stepping – heavily agg.	1	333
HEAD – PAIN – tea – amel.	1	334
HEAD – PAIN – forehead – pulsating – extending to: temples	1	344
HEAD – PAIN – forehead – eyes – above – left	1	345
<i>HEAD – PAIN – forehead – eyes – behind</i>	2	347
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HEAD – PAIN – occiput – pulsating	1	350
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HEAD – PAIN – temples – wandering	1	357
HEAD – PAIN – burning – forehead – right	1	363
HEAD – PAIN – burning – forehead	1	363
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HEAD – PAIN – bursting	1	365
HEAD – PAIN – dull – occiput	1	373
<u>HEAD – PAIN – jerking - brain</u>	1	N
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HEAD – PAIN – pressing – forehead – extending to – eyes	1	383
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HEAD – PAIN – sharp – temples – left	1	391
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HEAD – PAIN – sore – temples	1	395
HEAD – SEPARATED – body; as if head were separated from	1	418
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4.3.2.4 EYE

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EYE – DRYNESS – lids	1	431
EYE – FALLING – out, as if eyes were falling	1	433
<u>EYE – FLUFFY sensation – behind eye</u>	1	N
EYE – ITCHING – rubbing – amel.	1	440
EYE – LACHRYMATION – coryza, during	1	441
EYE – LACHRYMATION – profuse	1	442
EYE – PAIN – closing – amel.	1	445
EYE – PAIN – looking, when – steadily	1	446
EYE – PAIN – burning – right	1	450
EYE – PAIN – burning – headache, during	1	450
EYE – PAIN – burning – itching	1	450
EYE – PAIN – burning – lachrymation, with	1	450
EYE – PAIN – sore – canthi – inner	1	456
EYE – PAIN – sore – headache, during	1	456

EYE – PAIN – sore – motion – eyes, of	1	456
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4.3.2.5 EAR

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EAR – ITCHING – meatus	1	496
EAR – PAIN – pressure – amel.	1	510
EAR – PAIN – swallowing	1	510
EAR – PAIN – eustachian tube	1	512
EAR – PAIN – burning – external ear	1	514
EAR – PAIN – burning – headache, with	1	514
EAR – PAIN – stitching – left	1	518
EAR – PAIN – stitching – right	1	518

4.3.2.6 NOSE

NOSE – CONGESTION – nose, to	1	533
<u>NOSE – CONGESTION – nose, to – cold air, agg.</u>	1	N
NOSE – CORYZA – morning – waking, on	1	533
NOSE – CORYZA – lachrymation, with	1	536
NOSE – CORYZA – lying	1	536
NOSE – CORYZA – sitting – up amel.	1	536
NOSE – DISCHARGE – blowing, soon after, amel.	1	538
NOSE – DISCHARGE – clear	1	538
NOSE – DISCHARGE – copious	1	538
<u>NOSE – DISCHARGE – copious – blowing, agg.</u>	1	N
<i>NOSE – DISCHARGE – watery</i>	2	541
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NOSE – DRYNESS – inside – right	1	544
NOSE – DRYNESS – inside – inspiration agg.	1	544
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NOSE – PAIN – burning – bones	1	556
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NOSE – PAIN – burning – nostrils – inside	1	556
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NOSE – PAIN – burning, smarting – around nose	1	556
NOSE – SNEEZING – constant	1	563
NOSE – SNEEZING – coryza – with	1	563
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FACE

<u>FACE – ERUPTIONS – pimples – chin – left</u>	1	N
FACE – ERUPTIONS – pimples – chin	1	585
FACE – ERUPTIONS – pimples – white	1	585
FACE – ERUPTIONS – Cheeks	1	589
FACE – HEAT	1	593
FACE – HEAT – anxiety, during	1	594
<u>FACE – PAIN – jaw – lower – throbbing</u>	1	N
FACE – PAIN – burning – lips – mouth – around	1	606
<u>FACE – PERSPIRATION – eyebrows</u>	1	N
FACE – PERSPIRATION – lips – upper	1	614

4.3.2.8 MOUTH

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MOUTH – ITCHING – palate	1	644
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4.3.2.9 THROAT

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THROAT – DRYNESS – itching	1	703
THROAT – DRYNESS – thirst, with	1	704
THROAT – HAWK, disposition to	1	705
THROAT – ITCHING	1	708
THROAT – LUMP, sensation of a – swallowing – amel.	1	709
THROAT – PAIN – burning – ball, as from a hot	1	716
THROAT – PAIN – burning – cold, air, amel.	1	716
THROAT – PAIN – rawness	1	718
THROAT – PAIN – scratching	1	718
THROAT – PAIN – sore	1	718
THROAT – SWALLOWING – difficult	1	724
THROAT – SWALLOWING – difficulty – liquids – amel.	1	725
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STOMACH – APPETITE – diminished- morning	1	738
STOMACH – APPETITE – diminished – indifference to food	1	738
STOMACH – APPETITE – increased	1	738

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STOMACH – APPETITE – increased – morning – breakfast, after	1	739
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<u>BACK – ERUPTIONS – rash – cervical region – alternating – sides</u>	1	N
<u>BACK – ERUPTIONS – rash – cervical region – left</u>	1	N
<u>BACK – ERUPTIONS – rash – cervical region – right</u>	1	N
<u>BACK – FORMICATION – pressure, amel.</u>	1	N
BACK – FORMICATION – cervical region	1	1237
<u>BACK – FORMICATION – cervical region – left</u>	1	N
BACK – FORMICATION – sacrum	1	1237
<u>BACK – FORMICATION – sacrum - left side</u>	1	N
BACK – HEAVINESS, weight – cervical region	1	1238
<u>BACK – NUMBNESS – part lain on – amel.</u>	1	N
BACK – NUMBNESS – cervical region	1	1241
BACK – NUMBNESS – dorsal region – scapulae	1	1241
<u>BACK – NUMBNESS – dorsal region – scapulae - left</u>	1	N
BACK – NUMBNESS – sacrum	1	1241
BACK – PAIN – lumbar region – right	1	1253
BACK – PAIN – lumbar region – lying – amel.	1	1254
BACK – PAIN – lumbar region – motion – during	1	1255
BACK – PAIN – constricting – lumbar region	1	1268
BACK – PAIN – cramping – lumbar region	1	1268
BACK – PAIN – lancinating – lumbar region – pressure, amel	1	1274
BACK – STIFFNESS – cervical region	1	1293
BACK – STIFFNESS – cervical region – right	1	1293
BACK – STIFFNESS – cervical region – headache, during – occiput, in	1	1293
<u>BACK – STIFFNESS – cervical region – pressure, amel.</u>	1	N
BACK – STIFFNESS – cervical region – waking, on	1	1294
BACK – STIFFNESS – cervical region – warmth, amel.	1	1294
BACK – WEAKNESS – cervical region	1	1297

BACK – WEAKNESS – lumbar region 1 1297

4.3.2.21 EXTREMITIES

EXTREMITIES – CRACKING in joints – shoulder – amel. 1 N

EXTREMITIES – DRYNESS – foot – sole 1 1332

EXTREMITIES – HEAT – hand – palm – anxiety, with 1 N

EXTREMITIES – HEAT – legs 1 1355

EXTREMITIES – HEAT – legs - cold air, amel. 1 N

EXTREMITIES – HEAT – legs – uncovers them 1 1355

EXTREMITIES – HEAT – foot – burning 1 1356

EXTREMITIES – HEAT – foot – burning – uncovers them 1 1356

EXTREMITIES – HEAT – foot – cold air – amel. 1 N

EXTREMITIES – HEAT – foot – open air, agg. 1 N

EXTREMITIES – HEAT – foot – pricking 1 1356

EXTREMITIES – HEAT – foot – sole 1 1356

EXTREMITIES – HEAT – foot – sole – burning 1 1356

EXTREMITIES – HEAVINESS – mental exertion, from 1 1357

EXTREMITIES – HEAVINESS – shoulder 1 1358

EXTREMITIES – HEAVINESS – leg 1 1360

EXTREMITIES – ITCHING – foot – sole 1 1371

EXTREMITIES – NUMBNESS – exercising, amel. 1 N

EXTREMITIES – NUMBNESS – lying, while – amel. 1 N

EXTREMITIES – NUMBNESS – pressure – amel. 1 N

EXTREMITIES – NUMBNESS – warmth, amel. 1 N

EXTREMITIES – NUMBNESS – upper limbs – shoulder 1 1382

EXTREMITIES – NUMBNESS – upper limbs – shoulder – left 1 1382

EXTREMITIES – NUMBNESS – upper limbs – shoulder – extending 1 1382
to, fingers, tips

EXTREMITIES – NUMBNESS – upper limbs - shoulder – stretched, 1 N
when – amel.

EXTREMITIES – PAIN – motion – continued motion amel.	1	1389
<u>EXTREMITIES – PAIN – shoulder – right – accompanied by – jaw,</u> <u>pain in right</u>	1	N
EXTREMITIES – PAIN – shoulder – cold – becoming, on	1	1391
EXTREMITIES – PAIN – shoulder – pressure – amel.	1	1398
EXTREMITIES – PAIN – shoulder – pulsating	1	1398
EXTREMITIES – PAIN – shoulder – warm – application – amel.	1	1398
EXTREMITIES – PAIN – hip – right	1	1411
EXTREMITIES – PAIN – hip – motion – beginning to move	1	1412
EXTREMITIES – PAIN – hip – rising, on – seat, from a	1	1412
EXTREMITIES – PAIN – hip – stooping, on	1	1412
EXTREMITIES – PAIN – thigh – right	1	1413
EXTREMITIES – PAIN – ankle – right	1	1420
EXTREMITIES – PAIN – foot – heel – left	1	1422
<u>EXTREMITIES – PAIN – foot – heel – pressure amel.</u>	1	N
EXTREMITIES – PAIN – foot – heel – walking	1	1422
EXTREMITIES – PAIN – burning – hip – motion amel.	1	1434
EXTREMITIES – PAIN – cramping – leg – calf – left	1	1438
<u>EXTREMITIES – PAIN – cutting - shoulder – left</u>	1	N
<u>EXTREMITIES – PAIN – cutting - shoulder – cold, when</u>	1	N
<u>EXTREMITIES – PAIN – sharp – foot – heel</u>	1	N
<u>EXTREMITIES – PAIN – sharp – foot – heel – left</u>	1	N
<u>EXTREMITIES – PAIN – sharp – upper limb, left – shoulder</u>	1	N
EXTREMITIES – PAIN – stitching – pressure – amel.	1	1475
EXTREMITIES – PAIN – stitching – warm – amel.	1	1475
EXTREMITIES – PAIN – stitching – upper arm – left	1	1477
EXTREMITIES – PAIN – stitching - shoulder – left	1	1477
EXTREMITIES – PAIN – stitching - shoulder – chilly, when	1	1477
EXTREMITIES – PAIN – stitching – elbow – left	1	1478
EXTREMITIES – PAIN – stitching – thigh	1	1482
EXTREMITIES – PAIN – stitching – thigh – above the knee – right	1	1483

EXTREMITIES – PAIN – stitching – knee – left	1	1484
EXTREMITIES – PAIN – stitching – knee – moving it back and forth	1	1484
EXTREMITIES – PAIN – stitching – knee – stretching – amel.	1	1484
EXTREMITIES – PAIN – stitching – ankle	1	1486
EXTREMITIES – PAIN – stitching – ankle – motion – amel.	1	1486
<u>EXTREMITIES – TINGLING – elbow – left</u>	1	N
<u>EXTREMITIES – TINGLING – elbow – exercising, amel.</u>	1	N
<u>EXTREMITIES – TINGLING – elbow – pressure, amel.</u>	1	N
<u>EXTREMITIES – TINGLING – thumb – left</u>	1	N
EXTREMITIES – TREMBLING – hand	1	1542
EXTREMITIES – UNSTEADINESS – leg	1	1552

SLEEP

SLEEP – DEEP	1	1564
SLEEP – DISTURBED – nightmare, by	1	1566
SLEEP – LIGHT – tossing around, much	1	1571
SLEEP – NEED of sleep – great	1	1571
SLEEP – REFRESHING	1	1574
SLEEP – RESTLESS	1	1575
<u>SLEEP – SLEEPINESS – morning – 10 h</u>	1	N
SLEEP – SLEEPINESS – evening – early	1	1579
SLEEP – SLEEPINESS – constant	1	1580
SLEEP – SLEEPINESS – heaviness, with – head, of	1	1582
SLEEP – SLEEPINESS – waking – after	1	1584
SLEEP – SLEEPINESS – work – during	1	1584
SLEEP – WAKING – difficult – morning	1	1597
SLEEP – WAKING – frequent – restlessness, with	1	1598
SLEEP – WAKING – late, too	1	1599

4.3.2.23 DREAMS

DREAMS – ANGER	1	1608
DREAMS – ANXIOUS	1	1609
DREAMS – ANXIOUS – perspiration, with	1	1609
DREAMS – ATTACKED, of being	1	1610
DREAMS – BIRDS	1	1610
DREAMS – CHILDBIRTH	1	1613
DREAMS – CHILDREN, about	1	1613
DREAMS – CLIMBING	1	1614
DREAMS – CONFIDENT	1	1614
DREAMS – DEATH – relatives, of – grandmother, of	1	1617
DREAMS – DIFFICULTIES – journeys, on	1	1617
DREAMS – DIRT	1	1617
DREAMS – DISEASE	1	1618
DREAMS – EMBARRASSMENT	1	1620
DREAMS – ESCAPING	1	1620
DREAMS – FEAR – falling, of	1	1622
DREAMS – FEATHER – room filled with feathers	1	1622
DREAMS – FIGHTS	1	1622
DREAMS – FLEEING	1	1622
DREAMS – FRIGHTFUL – waking him	1	1624
DREAMS – HUNTING	1	1626
<u>DREAMS – KILLING – desire to</u>	1	N
DREAMS – MOTHER	1	1630
DREAMS – MOUNTAINS	1	1630
DREAMS – PLEASANT	1	1632
DREAMS – PURSUED, being	1	1633
DREAMS – PURSUED, being – man, by a	1	1633
DREAMS – RELIGIOUS	1	1634
DREAMS – RESPONSIBILITY	1	1635

DREAMS – SNAKES – fear, without	1	1637
DREAMS – STRIVING	1	1638
DREAMS – UNSUCCESSFUL efforts	1	1640
DREAMS – VEXATIOUS	1	1641
DREAMS – WORK	1	1643

4.3.2.24 FEVER

FEVER – ACCOMPANIED by – thirstlessness	1	1663
FEVER – ALTERNATING, with – chills	1	1663
FEVER – HEAT	1	1668
FEVER – PERSPIRATION – absent	1	1670

4.3.2.25 PERSPIRATION

PERSPIRATION – ANXIETY, during	1	1679
PERSPIRATION – SLEEP – during	1	1686

4.3.2.26 SKIN

<u>SKIN – ERUPTIONS – rash – bathing – hot water, agg.</u>	1	N
SKIN – ERUPTIONS – rash – burning	1	1705
SKIN – ERUPTIONS – rash – burning – itching	1	1705
SKIN – ERUPTIONS – rash – red	1	1706

4.3.2.27 GENERALS

GENERALS – CONSTRICTION – Internal – bones, of	1	1756
<u>GENERALS – ENERGY – excess of energy – night</u>	1	N
GENERALS – ENERGY – excess of energy	1	1773
GENERALS – ENERGY – excess of energy – waking, on	1	1773

GENERALS – FOOD & DRINKS – apples – amel.	1	1781
GENERALS – FOOD & DRINKS – chocolate – desire	1	1784
GENERALS – FOOD & DRINKS – eggs – desire – fried eggs	1	1788
GENERALS – FOOD & DRINKS – fat – desire	1	1788
GENERALS – FOOD & DRINKS – food – aversion – accompanied by – hunger	1	1789
<u>GENERALS – FOOD & DRINKS – fruits – desire – citrus fruits</u>	1	N
GENERALS – FOOD & DRINKS – meat – agg: smell of cooking, agg.	1	1792
GENERALS – FOOD & DRINKS – nuts – desire	1	1794
<u>GENERALS – FOOD & DRINKS – seeds – desire</u>	1	N
GENERALS – FOOD & DRINKS – sweets – desire	1	1799
GENERALS – INFLUENZA – sensation as if	1	1813
GENERALS – LASSITUDE	1	1817
GENERALS – PAIN – bones	1	1835
GENERALS – PAIN – bone - aching	1	1835
GENERALS – PAIN – aching	1	1836
GENERALS – PAIN – aching – waking, on	1	1836
GENERALS – TREMBLING – externally	1	1884
<u>GENERALS – TREMBLING – externally – sleep – amel.</u>	1	N
GENERALS – WEAKNESS	1	1895
GENERALS – WEAKNESS – morning – waking, on	1	1896
GENERALS – WEAKNESS – lying – amel.	1	1901
GENERALS – WEAKNESS – sleep – amel.	1	1903
GENERALS – WEAKNESS – sleepiness, from	1	1903
GENERALS – WEAKNESS – vertigo, with	1	1904
GENERALS – WEAKNESS – walking –air, in open – amel.	1	1905
GENERALS – WEARINESS	1	1905

CHAPTER FIVE

DISCUSSION OF THE PROVING RESULTS

5.1 INTRODUCTION

In this chapter the proving symptoms, obtained from the verum group in the proving of *Acridotheres tristis* 30CH, will be discussed as one unit, as if all the proving symptoms belonged to one individual (Sherr, 1994:32).

The hypothesis that *Acridotheres tristis* 30CH would produce clear and observable signs and symptoms when administered to healthy volunteers were confirmed in this proving.

The materia medica symptoms of *Acridotheres tristis* 30CH were formulated into 539 rubrics, of which 56 rubrics were new rubrics, as shown in section 4.3.2 of this study. The existing rubrics obtained are shown in the table below along with the new rubrics which are included in brackets in the respective sections of the repertory.

Table 2 – Total number of Rubrics in each Repertory Section

Mind	139	(4)	Stomach	34	(1)	Chest	3	
Vertigo	24	(1)	Abdomen	7		Back	20	(9)
Head	56	(4)	Rectum	1		Extremities	45	(21)
Eye	17	(1)	Stool	5		Sleep	14	(1)
Ear	9		Urine	7	(1)	Dreams	33	(1)
Nose	24	(3)	Female	12		Fever	4	
Face	7	(3)	Larynx	1		Perspiration	2	
Mouth	7		Cough	21	(1)	Skin	3	(1)

Throat	14	Expectoration	4	Generals	26	(4)
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Appendix J *Total number of Rubrics per Repertory Section*, illustrates the graphical presentation of the quantitative distribution of rubrics in each section of the repertory.

5.2 THE SYMPTOMS OF *Acridotheres trisitis*

5.2.1 MIND

Four of the provers experienced a sense of tranquillity and contentment. Provers described this tranquillity as a heightened calmness. A feeling of peace and being comfortable with oneself. One prover felt a calmness and a sensation as if she is doing things in slow motion. In another experience, one prover who previous to the proving was short tempered and had an obsession with smoking now feels a lot calmer, stress free, and the smoking habit has decreased along with the associated anxiety.

The sensation of two wills came up quiet strongly in one prover, in which associated feelings of uncertainty, anxiety, fear and confusion were demonstrated extensively. These feelings were mostly focused on the prover's career life, where there was a strong will to change certain things but afraid to do so because of the stress to explore new avenues and the fear of losing what she currently has.

Two provers demonstrated loathing especially with one prover who didn't feel like going to work with the occasional feelings of sadness and unhappiness about her job. In the case of the second prover, there was no will to study accompanied by feelings of extreme anger and frustration.

A desire to be left alone was experienced in several ways, yet it brought on a deep depression within and at times an opportunity to rejuvenate. Four of the provers experienced these feelings of isolation and a need for solitude. This desire of solitude can be seen in three of the provers as an aversion to company and of both friends and family, even to a point of refusing to entertain husband and kids. Even though there was a desire to be alone one prover still had a constant care for patients and felt that they were his life's true purpose. The second prover had a similar experience in which there was a sudden feeling of doing something that makes peoples' life easy. It was also noted that in this moment of solitude provers used this time for quiet and peace and spent the time with self or as one prover described it as a feeling to rest and hibernate.

Provers experienced a sense of bonding and connecting with people who they usually don't have a steady relationship with. One prover felt a bond between her and her colleagues, whilst another prover felt her relationship with her mother has developed and she could express hidden feelings to her mother. Some provers described the connection as a deep spirited connection and felt more liberated. However, one prover experienced a disconnection while being in the company of people, accompanied by constant thoughts of being an outcast with a feeling as if he was forgotten. One prover, who previous to the proving was empathetic in nature, felt emotionally separated from conversation and distant.

The sense or desire to be in nature manifested in two provers. It was in nature that the provers felt freedom or to be alone in nature to get away from problems and responsibilities. The sense of freedom manifested in a different form, in which provers described their experience as a feeling of letting go of the past and pain and be free and fly to higher realms. Whilst other provers felt light, free, and like a flying bird, no sadness, no guilt.

Two provers had experienced difficulty with their memory throughout the proving. Both provers could not continue with a test as they had forgotten everything after

answering one question, whilst one prover felt like she had not practised enough and can't remember the test. Provers noticed that the memory weakness mostly surrounded the daily errands which they are responsible for at home and at work. One prover experienced memory loss when driving and could not remember what happened at certain distances.

Along with confidence and enthusiasm, provers found themselves engaging in activities that involved leadership in groups, where they either co-ordinated a meeting with confidence and ease, or delivering a peace prayer.

Three provers experienced a euphoric sensation which one prover described it as an increased energy, feeling a powerful source of strength within. Two provers described this experience as a feeling of being invincible, like they can do anything. Some provers felt like they were floating above the ground and flying on the journey.

5.2.2 VERTIGO

Vertigo was experienced by three provers and described in several ways. A sensation as if head was spinning, whilst one prover felt as if a worm was crawling on her forehead, going in circles. One prover had a sensation as if her head were floating and the body was about to fall, whilst one prover shared a similar experience in which it was described as if her head was about to separate from the body. Vertigo was also experienced when sitting, studying and accompanied by nausea, headaches and sleepiness.

5.2.3 HEAD

Headaches/head pain was reported in ten provers and will be discussed according to location, modality and sensation. The most prominent locations of the headaches were behind the eyes/around the eyes which were experienced in

five provers. Four provers experienced headaches in the temporal region and the forehead. Most of the headaches were ameliorated by keeping still or resting the head and sleep. The sensation of the headaches were described in various ways, however the most common sensations experienced was a sharp pain in various locations and the sensation as if the head felt heavy. Headaches in the morning were noted in three provers throughout the proving. Two provers developed sensitivity to light which either aggravated the headache or caused the headache.

5.2.4 EYES

Two of the provers that experienced eye pain described it as a burning pain accompanied by itchiness and lachrymation. One of the most common concomitant symptoms experienced with the eye symptoms were headaches which were reported in four provers. Apart from the eye pain three provers also experienced profuse lachrymation accompanied by profuse nasal discharge. One prover had difficulty in opening her eyes due to the eyes being sensitive to light.

5.2.5 EAR

A burning sensation of the ear was experienced accompanied by a fever and a headache. Prover 15 experienced pain of the eustachian tubes with the sensation as if they were stretched inside out and was ameliorated by swallowing. A sharp pain in both ears were experienced, which began in the left ear and moved to the right ear.

5.2.6 NOSE

Symptoms of nasal congestion accompanied by copious nasal mucous production were reported in six provers, of which three provers described these symptoms as flu-related symptoms. One prover described a burning sensation in

the bridge of nose with lachrymation an associated symptom. Three provers experienced constant sneezing in sets of fits.

5.2.7 FACE

Two provers reported having pimples, of which one prover previous to the proving never had pimples, however developed pimples in the second week of the proving. Pimples appeared in the region of the chin and cheeks. In contrast to the previous symptom an improvement to the skin was observed, even though the prover had consumed sugar, which is the aggravating factor, she had not experienced any skin eruptions. Perspiration that was anxiety related was reported.

5.2.8 MOUTH

Dryness of the mouth was reported accompanied by thirst. One prover had experienced sensitivity and bleeding of the gums.

5.2.9 THROAT

Two provers experienced a sore throat accompanied by itchiness. Prover 15 experienced difficulty in swallowing due to an obstruction in throat which was described as a piece of bread lodged in the throat. In the case of Prover 17, his voice became hoarse due to the sore throat. Dryness of throat was experienced by two provers accompanied by an itchy throat and associated with sinusitis.

5.2.10 STOMACH

An increase in appetite was experienced by two provers especially in the morning. One prover noticed an improvement in his appetite, in which previous to the proving he would experience a lack of appetite accompanied by vomiting. A

decrease in appetite was experienced by two provers accompanied by an aversion /no interest to food. In contrast to the previous symptom one prover had an appetite with an aversion to food. The concomitant symptoms such as nausea, vertigo and stomach cramps was reported. One prover experienced a lack of appetite due to the flu. A sensation of the stomach being bloated accompanied by difficulty in swallowing mainly through the chest was noted. Heartburn was reported in two provers, however in one prover it was experienced in the throat and was described as a ball of fire burning in the throat. A bubbly sensation was reported by two provers accompanied by loss of appetite.

5.2.11 ABDOMEN

Abdominal cramps were reported and was described as a bubbling and bloated sensation which was ameliorated after stool.

5.2.12 RECTUM

The development of haemorrhoids was experienced even though there were regular bowel movements. The prover described the haemorrhoids as a protruding bulge with no signs of bleeding and no severe pain.

5.2.13 FEMALE GENITALIA

Six of the ten female provers had noted menstrual symptoms. Dysmenorrhoea was experienced by three provers and described as a sharp pain in the pelvic region. However, in the case of Prover 10 the intensity of the menstrual pain was a severe pain accompanied by profuse clotting and heavy blood flow. In contrast to the previous symptom one prover there was an absence of menstrual pain. Leukorrhoea during menses was reported, which was described as a thick, slimy discharge.

5.2.14 RESPIRATORY

An improvement in breathing was reported, which previous to the proving the prover had experienced a difficulty with breathing that was worse during the day and while driving.

5.2.15 LARYNX

Hoarseness of the voice was discussed in section **5.2.9**

5.2.16 COUGH

A dry, irritating cough was reported in three provers. Two provers experienced continuous coughing to a point of gagging. In two provers the cough was worse at night causing a disturbance in sleep.

5.2.17 CHEST

A bloated sensation in the chest was reported accompanied by a sensation as if everything inside the chest was swollen and constricted. Pain in the chest muscles was noted and was described as a poking pain.

5.2.18 BACK

Numbness of the neck and back accompanied by numbness of the shoulders was reported. Constriction along the lumbar region was experienced and described as if the back went spastic.

5.2.19 EXTREMITIES

Many symptoms were experienced in the upper and lower limbs. Numbness/numbing pain of the shoulder which was more prominent on the left side and ameliorated by stretching the arm and neck exercises, were reported by Prover 1. In one prover a throbbing pain was experienced in the right side of the shoulder and radiated to the jaw. A tingling sensation in the left elbow and left hand were reported.

The symptoms of the lower limbs were experienced in several forms. A stitching pain, described as sharp poking pain, was reported and experienced in the right thigh, legs, knees, ankles and left heel. A severe burning sensation of the right hip was reported as being a tender spot that was ameliorated by continued movement and worse on first movement. A burning sensation of the feet was experienced by two provers.

5.2.20 SLEEP

An improvement in sleep was reported in six provers, which provers described as a deep sleep or felt well rested. Two provers felt a constant desire for sleep due to being tired and exhausted. In contrast to the previous symptom one prover experienced disturbed sleep due to having disturbing dreams. One prover described feeling sleepy at work specifically at 10:00 a.m. Three provers experienced waking up refreshed, feeling energetic and no longer de-motivated.

5.2.21 DREAMS

Six provers remembered having dreams, of which some provers could describe the content or the gist of the dreams, and two provers could only remember the feelings associated with the dreams. Three provers described having unpleasant dreams of being pursued or attacked, however in one case the prover could not

remember the content of the dream but described it as being frightful. Dreams of struggling and unsuccessful efforts came up quite strongly in one prover. Two provers had dreams of family, which entailed bonding with family and the death of a relative. One prover had vivid dreams of animals, in particular a dream of a dead bird in an office and a pleasant dream of a snake.

5.2.22 FEVER

Fever with no thirst and no perspiration was reported. One prover had experienced a fluctuation in body temperature between hot and cold.

5.2.23 SKIN

The skin eruption that developed was described as a red macula rash on the neck accompanied by a strong burning sensation and itchy, which was either caused or aggravated by exposure to hot water. The rash was more prominent on the right side of the neck, however the rash did appear on the left side of the neck over a smaller area.

5.2.24 GENERALS

Five provers were reported feeling extremely tired and exhausted. Prover 10 described the sensation as if she is a walking zombie, and Prover 17 felt run down, more than most times. The most common concomitant symptom was the desire to sleep which was reported in four provers. In contrast to the previous symptom, three provers reported an increase in energy levels.

Two provers reported a sensation as if every bone is aching, and was described by one prover as if her body felt tight.

In respect to food and drink, a strong craving for chocolate was experienced by three provers. A few other cravings reported included a desire for seeds, fried foods, sweets and citrus fruits.

5.3 REMEDY ABBREVIATION

The recommendations made by Schroyens in the *Blueprint for a New Repertory, Synthesis Repertorium Homeopathicum Syntheticum* (2001:39-41) have been utilized in order to follow a logical and coherent system of arriving at remedy abbreviations. The Latin name of the remedy, *Acridotheres tristis*, serves as the basis for the abbreviation. The researcher has chosen the unique root *Acr*, and the extension '-t', creating the abbreviation *Acr-t* for *Acridotheres tristis*.

5.4 SUMMARY OF SYMPTOMS

The predominant symptoms belonging to the mental and emotional spheres of this remedy include depression, memory weakness, isolation accompanied by a need for solitude and a great sense of uncertainty with a conflict of will. Anxiety was also reported in several of the provers however Prover 6 experienced a reduction of the normal anxiety (cured symptom). There were dreams of being attacked and pursued, and in particular dreams of struggling with unsuccessful efforts. An improvement in sleep was experienced (cured symptom).

The characteristic physical symptoms include headaches, dizziness, extreme fatigue, skin eruptions especially pimples and rashes, haemorrhoids, severe dysmenorrhoea and numbness of the upper limbs and back. Other symptoms to be taken into consideration include headaches, fever, general tiredness, loss of appetite and severe coughing, are suggestive of influenza. A number of provers experienced symptoms associated with rheumatic complaints such as general muscle aches accompanied by tiredness, trembling or unsteadiness of the limbs. Other symptoms indicate a possible use in the treatment of gastro-intestinal

complaints which include nausea, abdominal cramps, abdominal distention and heartburn. Nasal congestion, intense coryza and constant sneezing were reported.

5.5 POSSIBLE CLINICAL INDICATIONS OF *Acridotheres tristis*

Based on the proving symptoms and the homoeopathic *Law of Similars*, *Acridotheres tristis* could possibly be prescribed for the following symptoms:

- **Anxiety**

Anxiety was experienced by several of the provers, in particular performance anxiety and anxiety of impending danger which the prover felt panic stricken. The anxiety was accompanied by a sense of confusion and insecurity especially about exploring a new avenue.

- **Depression**

The depression experienced was described as a feeling of sadness, emptiness, being de-motivated with no will to study or work. It can also be seen that the depression is further extended into the physical plane, in that provers experienced lethargy and body aches.

- **Headaches**

The pain experienced was mainly of a sharp nature and a heavy sensation. The headaches reported had a great propensity to the region of the eye, behind or around the eyes.

- **Allergic rhinitis**

Characteristic symptoms of nasal congestion accompanied by copious nasal mucous production, profuse lachrymation and constant sneezing are suggestive of allergic rhinitis.

- **Haemorrhoids**

The development of haemorrhoids was reported and was described as a protruding bulge with no bleeding and no pain. Even though it was experienced by one prover it remains to be a significant manifestation as the prover was not exposed to the contributing factors in the development of haemorrhoids.

- **Fatigue**

Several provers experienced symptoms of extreme tiredness and exhaustion to a point where the provers felt a desire to lay still and sleep. There were also associated physical sensations of the body feeling tight along with body aches, unsteadiness and weakness of the limbs.

- **Insomnia**

An improvement in sleeping patterns was experienced in 40% of the provers. In most of the cases provers experienced deep sleep and waking refreshed.

CHAPTER SIX

Conclusions and Recommendations

6.1 Conclusions

The investigation supported the hypothesis that *Acridotheres tristis* would produce clearly observable signs and symptoms in healthy volunteers. The homoeopathic drug proving of *Acridotheres tristis*, conducted as a double-blind, randomised and placebo-controlled study, produced a wide range of symptoms. The main symptoms belonging to the mental and emotional spheres of this remedy include depression, anxiety, memory weakness and isolation accompanied by a need for solitude. The characteristic physical symptoms include headaches, dizziness, extreme fatigue, skin eruptions especially pimples and rashes, haemorrhoids, numbness and severe dysmenorrhoea. Other symptoms indicate a possible use in the treatment of gastro-intestinal complaints which include nausea, abdominal cramps, abdominal distention and heartburn. It is hoped that further provings and clinical application of *Acridotheres tristis* will provide confirmation and great value so that it becomes a well-utilized remedy in curing cases that until then could have been partially and unsatisfactorily covered by existing remedies (Sherr, 1994:8-9).

6.2 Recommendations

6.2.1 Provers

This study used both participants who had extensive knowledge of homoeopathy such as homoeopaths/homoeopathy students and patients, and those who had no exposure to homoeopathy (laymen), however understood the basic homoeopathic research protocols and philosophy as recommended by Walach (1997). It has been suggested that participants who are well acquainted with

homoeopathic methodology and above all he or she must have a good knowledge of the symptomatology found in homoeopathic materia medica (Nagpaul, 1987:78) be used. In this study 40% of the verum group consisted of both homoeopathy students and patients. Most of the best and profound symptoms were from these participants. It is therefore in the opinion of the researcher that at least 60% to 70% of the participants with an extensive homoeopathy background be used in provings to ensure high quality and accurate recordings.

In this study the verum/ placebo distribution was 15/15 (50% verum and 50% placebo) according to independent random allocation, with the result some of the valuable patients were distributed to the placebo group. It suggested by the researcher that a verum/ placebo distribution of 24/6 (80% verum and 20% placebo) be used as it may increase the likelihood of valuable participants being allocated to the verum group.

6.2.2 Future provings of *Acridotheres tristis* 30CH

It is recommended that a reproving of *Acridotheres tristis* 30CH be conducted to verify symptoms yielded from this proving and to elaborate more on the symptoms extracted from this proving.

Further provings of *Acridotheres tristis* 30CH in high and low potencies need to be conducted to explore existing symptoms yielded from this proving and to reveal more aspects of this remedy. As suggested by the researcher it is preferable that a high potency of 200CH and a low potency of 9CH be carried out. It is further recommended that a C4 trituration of *Acridotheres tristis* should be conducted.

6.2.3 Further bird provings

There are only 16 bird remedies that have been conducted thus far (Shore 2004:5). It has been observed that the bird remedies do have a strong potential in a clinical setting. It is therefore recommended that more homoeopathic provings should be conducted using other bird species.

6.2.4 Difficulties encountered with current methodology

In this study the collection of data took the form of a journal in which each prover's symptoms were recorded for six weeks, including a one week observation period and five weeks after administration of powders. It was observed that provers recorded for two to six days which was less than the required number of weeks. Despite the efforts of the researcher to train the provers individually there were still a degree of lack of understanding and poor journal recording. Due to the poor journal recording valuable symptoms experienced during the balance of the proving period were not accounted for in the journals and provers could not recall symptoms. This resulted in the replacement of these provers. It is recommended by the researcher that the required proving period for journal recording be emphasised, along with a date of commencement and completion as this may give the prover a clear indication of when to stop recording their symptoms, specifically in the *Instructions to Provers* document.

6.2.5 Discrimination of true proving symptoms

The method used in the validation and rejection of symptoms in this study took the form of a qualitative analysis that involved a criteria described in chapter three. As an additional 'internal control' provers were required to classify their symptoms, according to the criteria in Appendix D, to indicate whether the symptom had occurred before or during the proving as this notification assists the

researcher in ascertaining the true proving symptoms. However, it was observed that several provers had not followed the classification. As a result the researcher had to resort to alternative methods to evaluate symptoms by making reference to the pre-proving and post-proving case-histories. For instance, prover 21 had experienced dysmenorrhoea during the proving, however according to the case history there was no medical history of dysmenorrhoea. In the case of prover 12 the factors that usually ameliorate the dysmenorrhea had changed during the proving, however this fine alteration was not indicated appropriately and had to be verified by making reference to the case history. In prover 10 headaches were experienced during the proving, however there were no records of headaches in the case history. It is recommended by the researcher that a thorough case-history from each prover must be performed as it is this information that forms a more substantial baseline.

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APPENDIX A - SUITABILITY FOR INCLUSION IN THE PROVING

Suitability for Inclusion in the Proving All information will be treated as strictly confidential

Surname: _____
First Names: _____
Age: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F Telephone: _____

PLEASE CIRCLE THE APPROPRIATE ANSWER:

1. Are you between the ages of 18 and 60 years?	YES	NO
2. Are you on or in need of any medication? - Chemical/allopathic - Homoeopathic - Other	YES YES YES	NO NO NO
3. Have you been on the birth control pill or hormone replacement therapy in the last six months?	YES	NO
4. Are you pregnant or nursing?	YES	NO
5. Have you had surgery in the last six weeks?	YES	NO
6. Do you use recreational drugs such as cannabis, LSD or MDMA (ecstasy) ?	YES	NO
7. Do you consume more than: - two measures of alcohol per day? (1 measure = 1 tot/ 1 beer/ ½ glass of wine) - 10 cigarettes per day? - 3 cups of coffee or tea per day?	YES YES YES	NO NO NO
8. Do you consider yourself to be in a general state of good health (i.e. not acutely or chronically ill)?	YES	NO
9. If you are between the ages of 18 and 21 years, do you have consent from a parent/ guardian to participate in this proving?	YES	NO
10. Do you suffer from hypersensitivity diseases such as asthma, hayfever, allergies or food hypersensitivities?	YES	NO
11. Are you willing to follow the proper procedures for the duration of the proving?	YES	NO

(Adapted from Wright, 1999)

APPENDIX B (i) - PRE-PROVING CASE HISTORY SHEET
PRE-PROVING CASE HISTORY SHEET

PROVER NUMBER: <input style="width: 50px; height: 30px;" type="text"/>	
Name: _____	Sex: <input style="width: 30px; height: 20px; text-align: center;" type="text"/> M <input style="width: 30px; height: 20px; text-align: center;" type="text"/> F
Date of Birth: _____	Age: _____ Children: _____
Occupation: _____	Marital Status: <input style="width: 20px; height: 20px; text-align: center;" type="text"/> S <input style="width: 20px; height: 20px; text-align: center;" type="text"/> M <input style="width: 20px; height: 20px; text-align: center;" type="text"/> D <input style="width: 20px; height: 20px; text-align: center;" type="text"/> W

1. Past medical history:

(Please list previous health problems and their approximate dates:)

Do you have a history of any of the following? *[Please tick relevant blocks]*

Cancer	<input type="checkbox"/>	Asthma	<input type="checkbox"/>
HIV	<input type="checkbox"/>	Pneumonia/ Chronic bronchitis	<input type="checkbox"/>
Parasitic infections	<input type="checkbox"/>	Tuberculosis	<input type="checkbox"/>
Glandular fever	<input type="checkbox"/>	Tendency to suppurate/ boils	<input type="checkbox"/>
Bleeding disorders	<input type="checkbox"/>	Smoking	<input type="checkbox"/>
Eczema/ skin conditions	<input type="checkbox"/>	Oedema/ swelling	<input type="checkbox"/>
Warts	<input type="checkbox"/>	Haemorrhoids	<input type="checkbox"/>

2. Surgical History:

(Please list any past surgical procedures and the approximate dates:)
 (Tonsils, warts, moles, appendix)

3. Family History: (overleaf)

Is there a history of any of the following within your family:

Cardiovascular disease	
Cerebrovascular disease	
Diabetes mellitus	
Tuberculosis	
Mental disease	
Cancer	
Epilepsy	
Bleeding disorder	

*incl. Hypertension, heart disease, etc.
incl. Stroke, transient ischaemic attacks, etc.*

incl. Depression, schizophrenia, suicide, etc.

Please list any other medical condition within your family:

♂		♂♂	
			♂♀
♀		♂♀	
		♀♀	

4. Background Personal History:

Allergies:

Vaccinations:

Medication:

Estimation of daily consumption of:

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.

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

Sleep:

Quantity: _____

Quality: _____

Position: _____

Dreams:

Time modalities:

>	
<	

Weather modalities:

>	
<	

Temperature modalities:

>	
<	

Perspiration:

Appetite:

Cravings	
Aversions	
<	
>	

Thirst:

Bowel Habits:

Urination:

Description of menstrual cycle and menses:

Menarche: yrs	Regular	Irregular	<u>Pre-menstrual:</u>
LMP:	Interval: days		
<u>Nature of bleed:</u>	Duration: days		
	Meno-	Metro-	
			<u>Post-menstrual:</u>
<u>Pain:</u>			

6. Head-to-toe and System Overview:

Head:

Eyes and Vision:

Ears and Hearing:

Nose and sinuses:

Mouth, tongue, 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:

<i>Disposition:</i>
<i>Fears:</i>
<i>Relationship:</i>
<i>Social interaction:</i>
<i>Ambition/ Regret:</i>
<i>Hobbies/ Interests:</i>

8. The Physical Examination:

a) Physical description:

Frame/Build:			
Hair colour:		Complexion:	
Eye colour:		Skin texture:	

b) Vital Signs

Weight:	
Height:	
Pulse rate:	
Respiratory rate:	

Temperature:	
Blood pressure:	

c) Findings on Physical examination: [Tick positive blocks]

Jaundice	<input type="checkbox"/>	Oedema	<input type="checkbox"/>
Anaemia	<input type="checkbox"/>	Lymphadenopathy	<input type="checkbox"/>
Cyanosis	<input type="checkbox"/>	Hydration	<input type="checkbox"/>
Clubbing	<input type="checkbox"/>		
Specific System Examinations			
Consultation Date:		Signature:	

**This Appendix has been adapted by De Beer, E (2007). A Family Group Analysis (Sankaran) Evaluation of a Triple blind Homoeopathic Drug Proving of Erythrina lysistemon.*

APPENDIX B (ii) - POST-PROVING CASE HISTORY SHEET

POST-PROVING CASE HISTORY SHEET

All information will be treated as strictly confidential

PROVER NUMBER:	<input type="text"/>
Name: _____	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
Date of Birth: _____	Age: _____ Children: _____
Occupation: _____	Marital Status: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W

1. Background Personal History:

Allergies:

Vaccinations:

Medication (including supplements):

Estimation of daily consumption:

Alcohol: _____

Cigarettes: _____

2. Generalities:

Energy:

Describe your energy levels on a scale from 1 to 10, where 1 is the lowest and 10 is the highest.

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

Sleep:

Quantity: _____

Quality: _____

Position: _____

Dreams:

Time modalities:

>	
<	

Weather modalities:

>	
<	

Temperature modalities:

>	
<	

Perspiration:

Appetite:

Cravings	
Aversions	
<	
>	

Thirst:

Bowel Habits:

Urination:

Description of menstrual cycle and menses:

Menarche: yrs	Regular	Irregular	<u>Pre-menstrual:</u>
LMP:	Interval: days		
<u>Nature of bleed:</u>	Duration: days		
	Meno-	Metro-	
			<u>Post-menstrual:</u>
<u>Pain:</u>			

3. Head-to-toe and System Overview:

Head:

Eyes and Vision:

Ears and Hearing:

Nose and sinuses:

Mouth, tongue, teeth:

Throat:

Respiratory system:

Cardiovascular system:

Gastro-intestinal System:

Urinary system:

Genitalia and sexuality:

Musculoskeletal system:

Extremities:

Upper: _____

Lower: _____

Skin:

Hair and nails:

Other:

4. Psychic Overview:

<i>Disposition:</i>
<i>Fears:</i>
<i>Relationship:</i>

<i>Social interaction:</i>
<i>Ambition/ Regret:</i>
<i>Hobbies/ Interests:</i>

5. The Physical Examination:

a) Vital Signs

Weight:	
Height:	
Pulse rate:	
Respiratory rate:	
Temperature:	
Blood pressure:	

b) Findings on Physical examination: [Tick positive blocks]

Jaundice	<input type="checkbox"/>	Oedema	<input type="checkbox"/>
Anaemia	<input type="checkbox"/>	Lymphadenopathy	<input type="checkbox"/>
Cyanosis	<input type="checkbox"/>	Hydration	<input type="checkbox"/>
Clubbing	<input type="checkbox"/>		
Specific System Examinations			

Consultation Date:		Signature:	

**This Appendix has been adapted by De Beer, E (2007). A Family Group Analysis (Sankaran) Evaluation of a Triple blind Homoeopathic Drug Proving of Erythrina lysistemon.*

APPENDIX C - INFORMED CONSENT FORM

INFORMED CONSENT FORM

(TO BE COMPLETED IN DUPLICATE BY THE PROVER)

TITLE RESEARCH PROJECT:
A Homoeopathic Drug Proving

NAME OF SUPERVISOR:
Dr Ashley H.A. Ross (M.Tech.Hom. (TN) B.Mus. *cum laude* (UCT))

NAME OF RESEARCH STUDENTS
Asima Goolam Hoosen.

DATE:

PLEASE CIRCLE THE APPROPRIATE ANSWER:

1. Have you read the research information sheet?

YES	NO
-----	----

2. Have you had an opportunity to ask regarding this proving?

YES	NO
-----	----

3. Have you received satisfactory answers to your questions?

YES	NO
-----	----

4. Have you had an opportunity to discuss the proving?

YES	NO
-----	----

5. Who have you spoken to? _____

6. Have you received enough information about this proving?

YES	NO
-----	----

7. Do you understand the implications of your involvement in this proving?

YES	NO
-----	----

6. Do you understand that you are free to withdraw from this proving?

YES	NO
-----	----

- A) At any time
- B) Without having to give a reason for withdrawing, and
- C) Without affecting your future health care

9. Do you agree to voluntarily participate in this study?

YES	NO
-----	----

10. Selection criteria: To participate in this proving you must meet all the inclusion criteria. They are as follows:
- You must be between the ages of 18 and 60 years of age.
 - 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, MDMA (ecstasy).
- Must not consume more than two measures of alcohol per day (1 measure = 1 tot / 1 beer/ ½ glass wine).
- Must not smoke more than 10 cigarettes a day.
- Must not consume more than 3 cups of coffee or tea a day.
- Must be in general state of good health.
- If you are between the ages of 18 and 21 years you must have consent from a guardian/parent to participate in the proving.
- Must be willing to follow the proper procedures for the duration of the proving.

Have you completed *Appendix A*, which outlines in detail all the above inclusion criteria?

YES	NO
-----	----

Additional notes:

1. *Discomfort:*

Discomfort may be experienced as a result of participating in the proving. It is observed from previous homoeopathic provings that any discomfort experienced is generally of a transitory nature, and complete recovery is usual.

2. *Benefits:*

- It is postulated that each proving undertaken strengthens the body's vital force (Hahnemann,1996:160). Many provers report higher levels of mental and physical energy, and increased resistance after participation in homoeopathic drug proving (Sherr, 1994). The mechanisms responsible for this perceived
- Provers learn and develop the skill to observation and gain homoeopathic knowledge through direct involvement in a proving; and
- Provers may be cured of certain ailments where the remedy being proved corresponds closely to the prover's pre-proving state.

3. There is no expense to the prover for participating and no remuneration is offered to the prover.

4. Every prover is provided with the names and telephone numbers of the research student and the supervisor of the proving, if problems or questions arise.

Name:	Office hours:	Cellular number:	Homoeopathic Clinic:
Dr. A.H.A.Ross	031 373 2041	082 458 6440	

(Supervisor)			
Asima Goolam Hoosen	031 373 2041	076 733 3417	032 552 1502

If you have answered “NO” to any of the above, please obtain the information before signing.

If the prover is between **18 and 21** years of age, **written consent** from a **guardian/ parent** is required for the prover to participate in the proposed procedure.

I _____ (guardian/parent) hereby give consent for the proposed procedure to be performed on _____ (prover) a part of the above mentioned research project.

Signature: _____ Date: _____

I _____ hereby give consent for the proposed procedure on me as part of the above mentioned research project.

PROVER:
Name _____ SIGNATURE _____

WITNESS:
Name _____ SIGNATURE _____

RESEARCH STUDENT:
Name _____ SIGNATURE _____

SUPERVISOR:
Name _____ SIGNATURE _____

**This appendix has been adapted from Wright, C (1999). A Homoeopathic Drug Proving of Bitis arietans arietans*

APPENDIX D - INSTRUCTION TO PROVERS

Instructions to Provers

Dear Prover

Thank you very much for taking part in this proving. We are grateful for your willingness to contribute to the advancement and growth of homoeopathic Science, and sure that you will benefit from this experience in many ways.

Before the proving:

Ensure that you have the following:

- An assigned *prover number*, and corresponding *journal*;
- Read and understood these *Instructions*;
- Had a *case history* taken and a *physical examination* performed;
- Signed the *Informed Consent Form*; and
- Attended the pre-proving training course

Your proving supervisor (Asima Goolam Hoosen) will contact you with the date that you are required to commence the pre-proving observation period and the date that you are required to start taking the remedy. You will also agree on a daily contact time for the supervisor to contact you.

Should there be any problems or anything you don't fully understand, please do not hesitate to call your supervisor.

Beginning the proving:

After having been contacted by the supervisor and asked to commence the proving, record your symptoms daily in the diary for one week prior to taking the remedy. This will help you get into the habit of observing and recording your symptoms, as well as bringing you into contact with your normal state. This is an important step as it establishes a baseline for you as an individual prover.

Taking the remedy:

Begin taking the remedy on the day that you and your supervisor have agreed upon. 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 and with a clean mouth. Neither food nor drink should be taken for half-hour before and after taking the remedy.

In the event that you experience symptoms, or those around you observe any proving symptoms, **do not take any further doses of the remedy.** This is very important.

By proving symptoms we mean:

- Any new symptom, **i.e. ones that you have never experienced before**
- Any unusual change or intensification of an existing symptom
- Any strong return of an old symptom, **i.e. a symptom that you have not experienced for more than one year.**

If in doubt phone your supervisor. Be on the safe side and do not take further doses. **Our experience has shown again and again that the proving symptoms begin very subtly. Often before the prover recognises that the remedy has begun to act.**

Lifestyle during the Proving:

Avoid all **antidoting factors** such as **coffee, camphor** and **mints**. If you normally use these substances, please stop taking them for two weeks before, and for the duration of the proving. Protect the powders you are proving like any other potentised remedies; store them in a cool, dark place away from **strong smelling substances, chemicals, electrical equipment** and **cellphones**.

A successful proving depends on your recognising and respecting the need for moderation in the following areas; work, alcohol, exercise and diet. Try to remain within your usual framework and maintain your usual habits.

Avoid taking **medication** of any sort, including **antibiotics** and **steroids** or **cortisone preparations, vitamin or mineral supplements, herbal or homoeopathic remedies**.

In the event of a medical or dental emergency of course common sense should prevail. Contact your doctor, dentist or local hospital as necessary. Please contact your supervisor as soon as possible.

Confidentiality:

It is important for the quality and the credibility of the proving that you discuss your symptoms only with your supervisor. Keep your symptoms to yourself and do not discuss them with fellow provers.

Your privacy is something that we will protect. Only your supervisor will know your identity and all information will be treated in the strictest confidence.

All information will be treated as strictly confidential

Your supervisor will telephone you to inform you to begin your 1 week observation period and then daily from the day that you begin to take the remedy. This will later decrease to 2 or 3 times a week and then to once a week, as soon **as you and the** supervisor agree that there is no longer a need for such close contact. This will serve to check on your progress, ensure that you are recording the best quality symptoms possible and to judge when you need to cease taking the remedy.

If you have any problems during the proving, please do not hesitate to call your supervisor.

Recording of Symptoms:

When you commence the proving note down carefully any symptoms that arise, whether they are old or new, and the time of the day or night at which they occurred. **This should be done as vigilantly and frequently as possible so that the details will be fresh in your memory.** Make a note even if nothing happens.

Please start each day on a new page with the date noted at the top of each page. Also note which day of the proving it is. The day that you took the first dose is day zero.

Write neatly on alternate lines, in order to facilitate the extraction process, which is the next stage of the proving. Try to keep the journal with you at all times. Please be as precise as possible. Note in an accurate, detailed but brief manner your symptoms in your own language.

Information about **location, sensation, modality, time** and intensity is particularly important:

Location: Try to be accurate in your anatomical descriptions. Simple, clear diagrams may help here. Be attentive to which side of the body is affected.

Sensation: Describe this as carefully and as thoroughly 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. Try different things out and record any changes.

Time: Note the time of onset of the symptoms, and when they cease or are altered. Is it generally > or < at a particular time of the day, and is this unusual for you.

Intensity: Briefly describe the sensation and the effect on you.

Aetiology: Did anything seem to cause or set off the symptom and does it do this repeatedly.

Concomitants: Do any symptoms appear together or always seem to accompany each other or do some symptoms seem to alternate with each other?

This is easily remembered as:

C- concomitants

L- location

A- aetiology

M- modality

I- intensity

T- time

S- sensation

On a daily basis, you should run through the following checklist to ensure that you have observed and recorded all your symptoms:

- **MIND /MOOD**
- **HEAD**
- **EYES**
- **EARS**
- **NOSE**
- **BACK**
- **RESPIRATORY SYSTEM**
- **DIGESTIVE SYSTEM**
- **SKIN**
- **EXTREMITIES**
- **URINARY ORGANS**
- **GENITALIA**
- **SEX**
- **TEMPERATURE**
- **SLEEP**
- **DREAMS**
- **GENERALITIES**

Please give full description of dreams, and in particular note the general feeling or impression the dream left with you.

Mental and emotional symptoms are important, and sometimes difficult to describe- please take special care in noting these.

Reports from friends and relatives can be particularly enlightening, please include these where possible. At the end of the proving, please make a general summary of the proving. Note how the proving affected you in general. How has this experience affected your health? Would you do another proving?

As far as possible try to classify each of your symptoms 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. State when the symptom occurred previously.

(AS) – Alteration in the **present** or **old symptom**. E.g. used to be on the left, now on the right side

(US) – An unusual symptom for you.

If you have any doubts discuss them with your supervisor.

Please remember that detailed observation and concise, legible recording is crucial to the proving. One reads in the Organon of Medicine paragraph 126:

“The person who is proving the medicine must be pre-eminently trustworthy and conscientious... and be able to express and describe his sensations in accurate terms” (Hahnemann, 1997:200).

Thank you for participating in this proving. We are sure you will find that there is no better way of learning and advancing homoeopathy.

**Adapted from Jeremy Sherr – The Dynamics and Methodology of Homoeopathic Proving, second edition, 1994.*

I, _____,

Agree to participate in the proving outlined in Appendix D, and acknowledge that I have read and understand the instructions in regarding the proving.

Prover: _____ **Signature:** _____

Witness: _____ **Signature:** _____

Researcher: _____ **Signature:** _____

Date: _____

APPENDIX E - METHODS OF PREPARATION

Methods of Preparation

(German Homoeopathic Pharmacopeia)

i) Method 6: Triturations

Preparations made according to Method 6 and are triturations of solid basic drug materials with lactose as the vehicle unless otherwise prescribed. Triturations up to and including the 4th dilution are trituated by hand or machine in a ratio of [1 to 10 (*decimal dilution*) or]^a 1 to 100 (*centesimal dilution*). Unless otherwise stated, the basic drug materials are reduced to the particle size given in the Monograph (Mesh aperture). Quantities of more than 1 000g are trituated by mechanical means.

The duration and intensity of trituration should be such that the resulting particle size of the basic drug material in the 1st [*decimal* or] centesimal dilution is below 10µg.

Triturations up to and including the 4th [*decimal* or] centesimal are produced at the same duration and intensity of trituration.

Trituration by hand:

Divide the vehicle [**lactose 19.800g**] into three parts and triturate the first part [**6.600g**] for a short period in a porcelain mortar. Add the basic material [**0.200g**] and triturate for 6 minutes, scrape down for 4 minutes with a porcelain spatula, triturate for a further 6 minutes, scrape down again for 4 minutes, add the second part [**6.600g**] of the vehicle and continue as above. Finally add the third part [**6.600g**] and proceed as before. The minimum time required for the whole process will thus be 1 hour. The same method is followed for subsequent dilutions.

[For triturations above the 4x or 4c dilute 1 part of the dilution with 9 parts of lactose or 99 parts of lactose as follows: in a mortar, combine one third of the required amount of lactose with the whole of the previous dilution and mix until homogenous. Add the second third of the lactose, mix until homogenous, and repeat for the last third.]

[Trituration by machine: - not applicable]

ii) **Method 8a: Liquid preparation made from triturations**

Preparations made by Method 8a are liquid preparations produced from triturations made by Method 6.

[To produce a 6x liquid dilution, 1 part of the 4x trituration is dissolved in 9 parts of water and succussed. 1 part of this dilution is combined with 9 parts of ethanol 30 percent to produce the 6x liquid by succession. In the same way, the 7x liquid dilution is made from the 5x trituration, and the 8x liquid dilution from the 6x trituration. From the 9x upwards, liquid decimal dilutions are made from the previous decimal dilution with ethanol 43 percent in a ratio of 1 to 10.]

To produce a 6c liquid dilution, 1 part **[0.200g]** of the 4c trituration is dissolved in 99 parts **[19.800g]** of water and succussed. 1 part of this dilution **[30µℓ]** is combined with 99 parts of ethanol 30 percent **[2.970mℓ]** to produce 6c liquid dilution by succession. *[In the same way, the 7c liquid dilution is made from the 5c trituration, and the 8c liquid dilution from the 6c trituration.]* From the 9c **[7c]** upwards, liquid centesimal dilutions are made from the previous centesimal dilution with ethanol 43 percent in a ratio of 1 to 100.^c

[The 6x, 7x, 6c, 7c liquid dilutions produced from the above method must not be used to produce further liquid dilutions.]

- a) *[italics]* indicates portions of the methods which are not applicable to the preparation of **XXXX 30c**.
- b) *[bold italics]* indicates specific detail applicable to the preparation of **XXXX 30c**.
- c) In the preparation of **XXXX 30c**, the 7c and the 8c liquid dilutions will be made from the previous centesimal dilution with ethanol 43 percent in a ratio of 1 to 100. From the 9c upwards, liquid centesimal dilutions will be made from the previous centesimal dilution with ethanol 73 percent in a ratio of 1 to 100 (to allow for subsequent impregnation of lactose granules).

**DURBAN'S UNIVERSITY OF
TECHNOLOGY (D.U.T)**

**HOMOEOPATHIC
RESEARCH**

If you are between the ages of

18 and 55 years,

in **good health**

(i.e not acutely or chronically ill) and

interested in **taking part in a**

RESEARCH OF A NEW
HOMOEOPATHIC REMEDY, AT

NO COST.

PLEASE CONTACT:

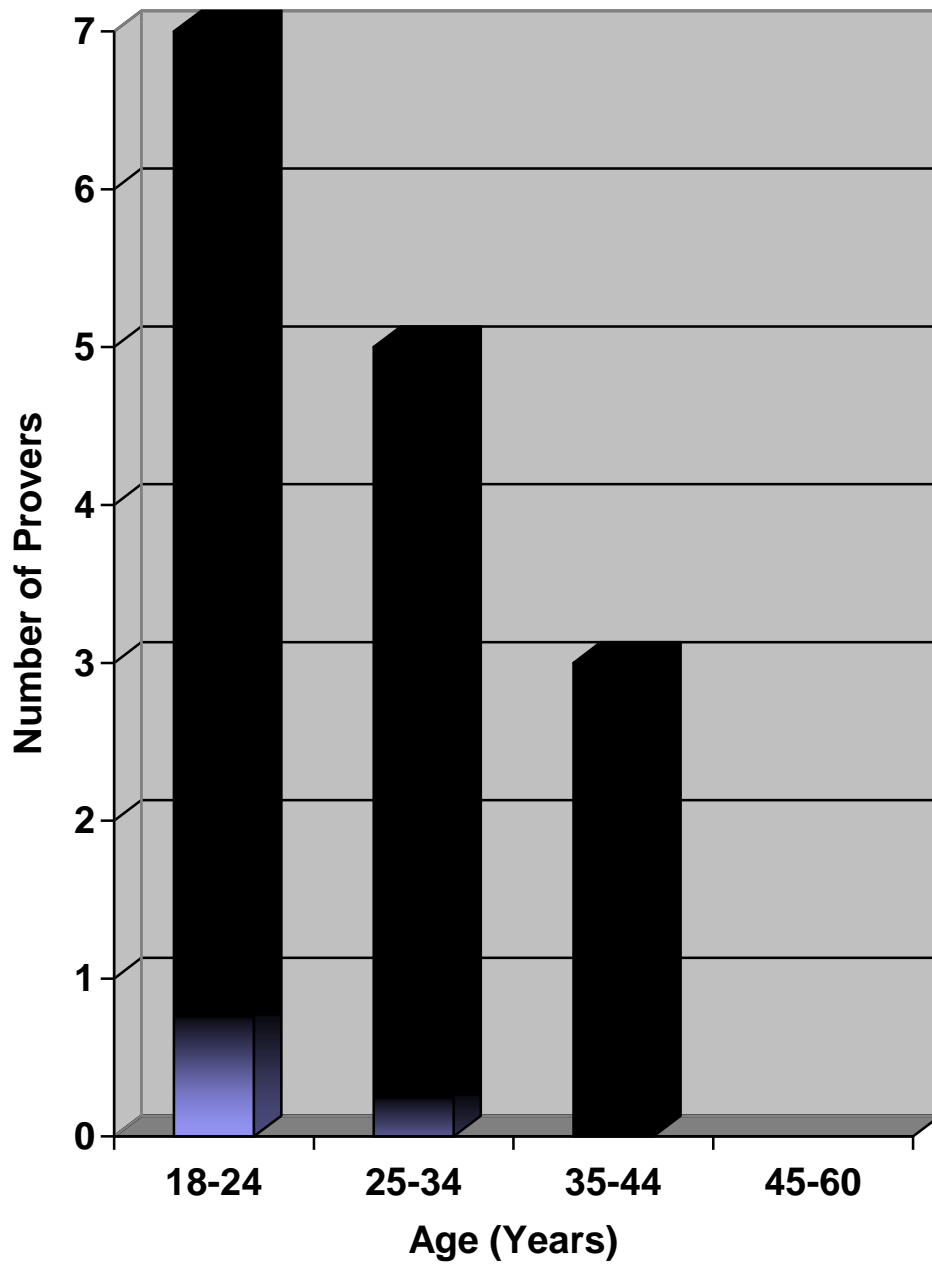
ASIMA GOOLAM HOUSEN: 076 7333 417

OR

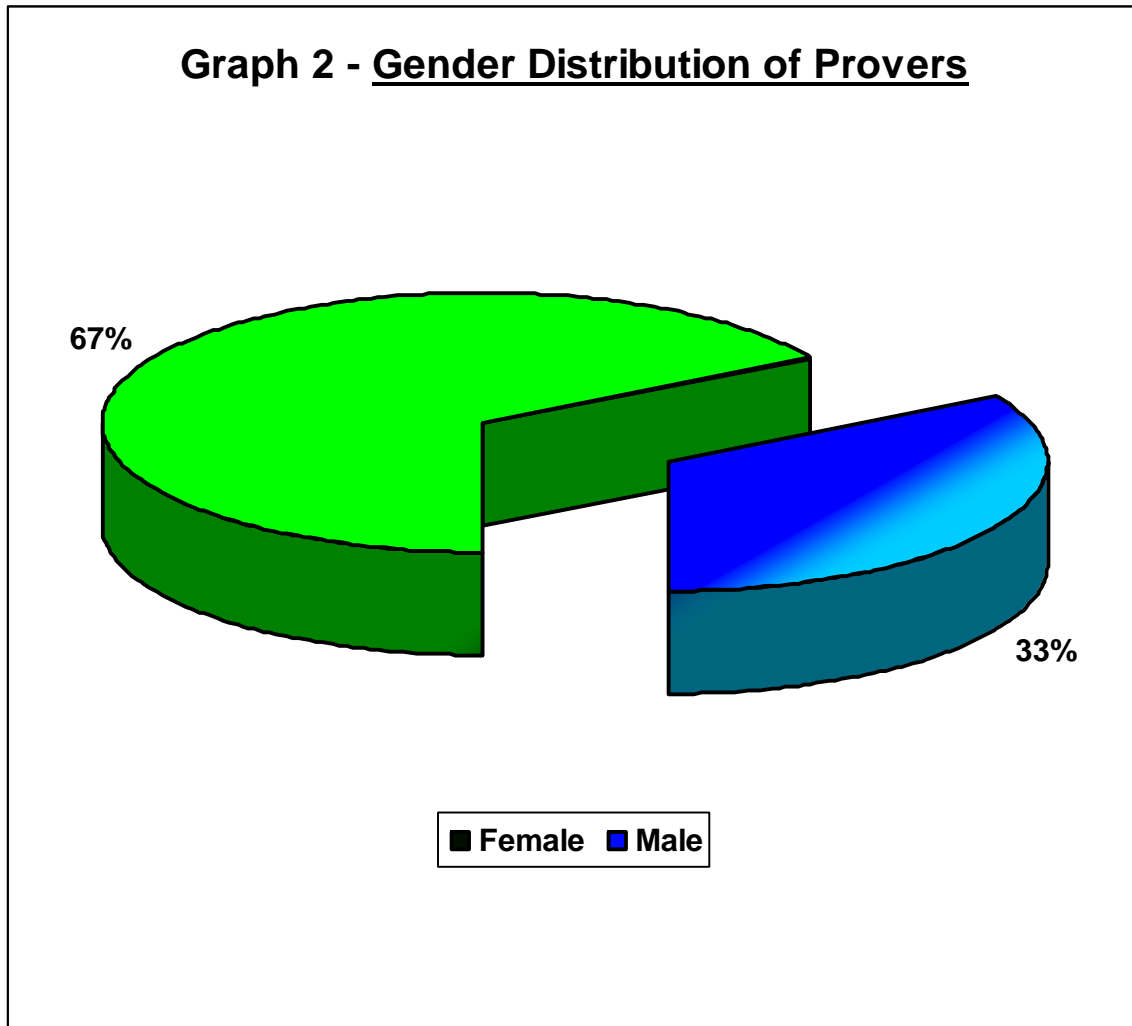
THE HOMOEOPATHIC DAY CLINIC: (031) 373 2041

APPENDIX G - AGE DISTRIBUTION OF PROVERS

Graph 1 - Age Distribution of Provers

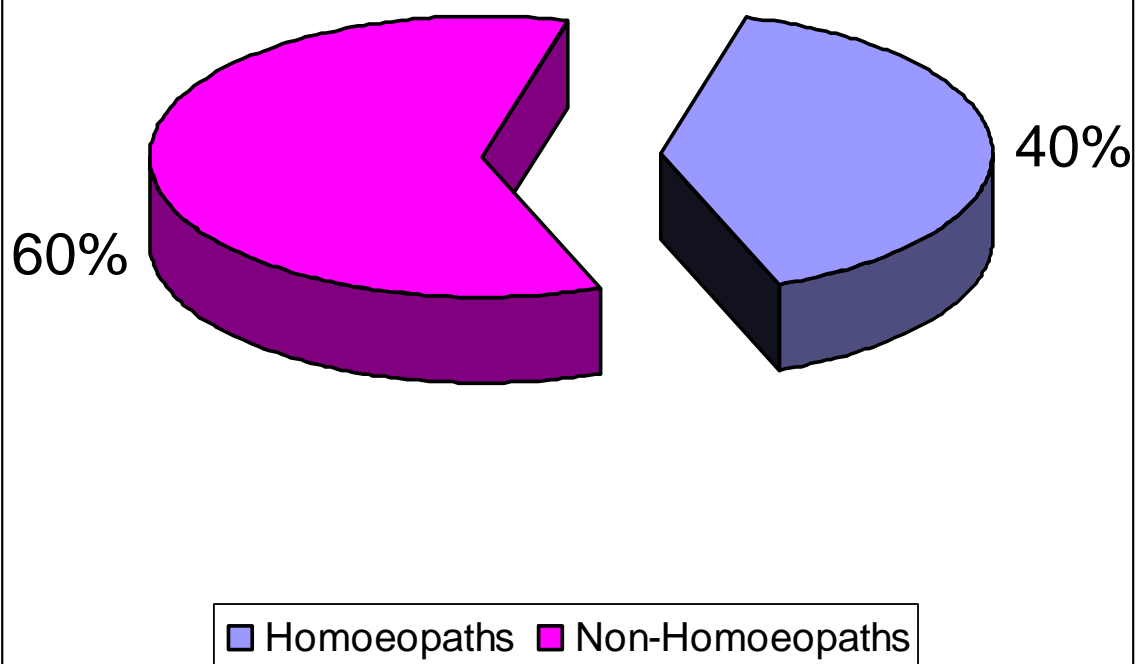


APPENDIX H - GENDER DISTRIBUTION OF PROVERS



APPENDIX I - HOMOEOPATHS vs NON-HOMOEOPATHS

Graph 3 - Homoeopaths vs Non-Homoeopaths



Graph 4 - Total number of Rubrics per Repertory Section

