

## REPERTORY

### Instructions:

- I. (a) Repertorisation is not the end but the means to arrive at the simillimum with the help of materia medica, based on sound knowledge of Homoeopathic Philosophy;
  - (b) Homoeopathic materia medica is an encyclopedia of symptoms. No mind can memorize all the symptoms or all the drugs with their gradations;
  - (c) The repertory is an index and catalogue of the symptoms of the materia medica, neatly arranged in a practical or clinical form, with the relative gradation of drugs, which facilitates quick selection of indicated remedy and it may be difficult to practice Homoeopathy without the aid of repertories.
- II. (a) Each repertory has been compiled on distinct philosophical base, which determines its structure;
  - (b) In order to explore and derive full advantage of each repertory, it is important to grasp thoroughly its conceptual base and construction and this will help student to learn scope, limitations and adaptability of each repertory.

### Third B.H.M.S

#### A. Theory:

1. Repertory: Definition; Need; Scope and Limitations.
2. Classification of Repertories
3. Study of different Repertories (Kent, Boenninghausen, Boger-Boenninghausen):
  - (a) History
  - (b) Philosophical background
  - (c) Structure
  - (d) Concept of repertorisation
  - (e) Adaptability
  - (f) Scope
  - (g) Limitation(s)
4. Gradation of Remedies by different authors.
5. Methods and techniques of repertorisation. Steps of repertorisation.
6. Terms and language of repertories (Rubrics) cross references in other repertories and materia medica.
7. Conversion of symptoms into rubrics and repertorisation using different repertories.
8. Repertory – its relation with organon of medicine and materia medica.
9. Case taking and related topics:
  - (a) case taking.
  - (b) difficulties of case taking, particularly in a chronic case.
  - (c) types of symptoms, their understanding and importance.
  - (d) importance of pathology in disease diagnosis and individualisation in relation to study of repertory.
10. Case processing

- (a) analysis and evaluation of symptoms
- (b) miasmatic assessment
- (c) totality of symptoms or conceptual image of the patient
- (d) repertorial totality
- (e) selection of rubrics
- (f) repertorial technique and results
- (g) repertorial analysis

**B. Practical or clinical:**

1. Record of five cases each of surgery, gynaecology and obstetrics worked out by using Kent's repertory.
2. Rubrics hunting from Kent's & Boenninghausen's repertories.

**Note:** There will be no Examination in the subject in Third B.H.M.S.

B.H.M.S