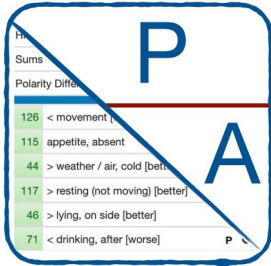


Polarity Analysis

A highly effective/efficient form of evidence based homeopathy

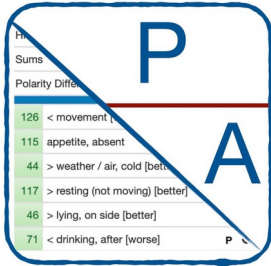
With Tim Shannon ND, DHANP

Content Class #1 of 4
Winter 2022



Overview of Today's PA Seminar:

- What is PA ?
- Efficacy of PA (studies conducted)
- Relevance to homeopathy
- Differentiating PA from modern “Constitutional” prescribing



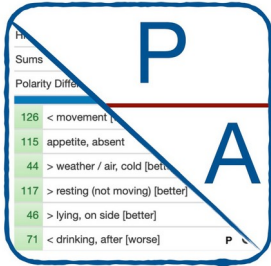
Overview of Today's Polarity Analysis Class (continued):

- Introduce the tools of PA -- Repertory, questionnaire's, & CGI (ADHD).
- Elucidate Repertory workflows
- Use Cases to illustrate the “how” of this system

What is Polarity Analysis?

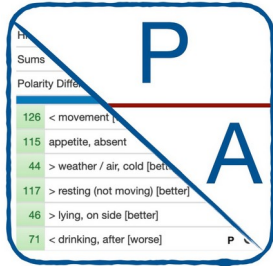
	P
126 < movement [better]	
115 appetite, absent	
44 > weather / air, cold [better]	
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

- A neo Boenninghausian approach developed & thoroughly tested & refined by Dr. Heiner Frei



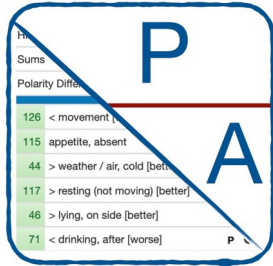
Who was Clemens Maria Franz von Boenninghausen?

- A lawyer & trained botanist
- Hahnemann's right hand man
- Developed the repertory that Hahnemann himself preferred



Who was Clemens Maria Franz von Boenninghausen?

- Cured of terminal TB by homeopathy
- Converted to advocate and homeopath.
- Initially did literary work due to NOT a doc
- Order of King Friedrich Wilhelm IV. to practice



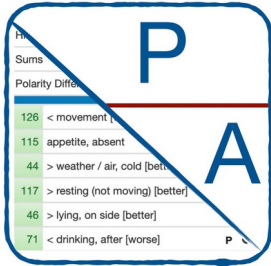
Who was Clemens Maria Franz von Boenninghausen?

- Was reputed to be one of the most highly proficient clinical prescribers of his time.
- Carroll Dunham found 600 cured cases of epilepsy in Boenninghausen's case books.

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126 < movement		
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44 > weather / air, cold [better]		A
117 > resting (not moving) [better]		
46 > lying, on side [better]		
71 < drinking, after [worse]		P

Who was Clemens Maria Franz von Boenninghausen?

- Meticulously confirmed/ratified the “genius” of each homeopathic Rx
- Collected cured cases and diligently created/recorded his underlining system.

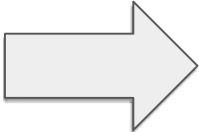


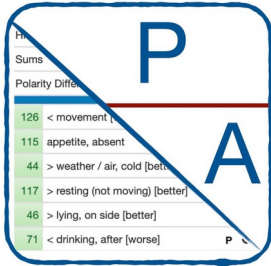
Hahnemann & Boenninghausen

- Hahnemann was original genius - the “spark” -- the initiator of homeopathy.
- He was the genius who precisely mapped out the principles & therapeutics of homeopathy

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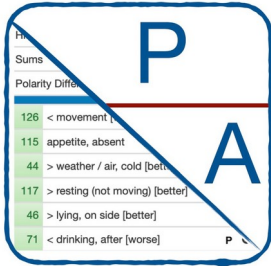
Hahnemann & Boenninghausen

- Boenninghausen was the genius of implementation.
- Connected principles  clinical utility



Hahnemann & Boenninghausen

- Hard to imagine homeopathy's amazing success w/o Boenninghausen.
- Yet for many in homeo, he's very much in the shadows



Boenninghausen's publications:

- 1831 - The Cure of Cholera and Its Preventatives (according to Hahnemann's latest communication to the author)
- 1832 - Repertory of the Antipsoric Medicines, with a preface by Hahnemann
- 1833 - Summary View of the Chief Sphere of Operation of the Antipsoric Remedies and of their Characteristic Peculiarities, as an Appendix to their Repertory
- 1833 - An Attempt at a Homeopathic Therapy of Intermittent Fever
- 1833 - Contributions to a Knowledge of the Peculiarities of Homeopathic Remedies
- 1833 - Homeopathic Diet and a Complete Image of a Disease (For the non-professional public)
- 1834 - Homeopathy, a Manual for the Non-Medical Public
- 1835 - Repertory of the Medicines which are not Antipsoric
- 1836 - Attempt at Showing the Relative Kinship of Homeopathic Medicines
- 1846 - Therapeutic Manual for Homeopathic Physicians, for use at the sickbed and in the study of the Materia Medica Pura
- 1849 - Brief Instructions for Non-Physicians as to the Prevention and Cure of Cholera
- 1853 - The Two Sides of the Human Body and Relationships. Homeopathic Studies
- 1833 - The Hom. Domestic Physician in Brief Therapeutic Diagnoses - An Attempt
- 1860 - The Homeopathic Treatment of Whooping Cough in its Various Forms
- 1863 - The Aphorisms of Hippocrates, with Notes by a Homeopath
- 1864 - Attempt at a Homeopathic Therapy of Intermittent and Other Fevers, especially for would-be homeopaths
Second augmented and revised edition. Part I. The Pyrexia

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Trials and tribulations of Boenninghausen

- Boenninghausen mapped out the characteristics of each Rx
- Via years of extensive verification

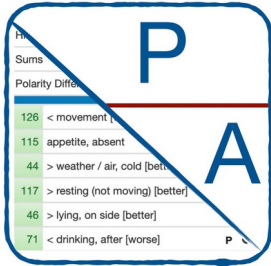


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Trials and tribulations of Boenninghausen

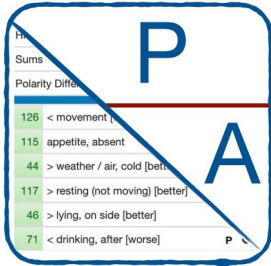
- How extensive BOENNINGHAUSEN viewed his work is evident in the line in “Die homöopathische Behandlung des Keuchhustens”, p.XVI”: ... one can appreciate how many endless trials with healthy subjects, observations and experience at bedside were necessary to determine and classify the characteristic elements of each remedy.”





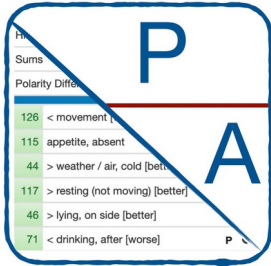
Trials and tribulations of Boenninghausen

This is surely why BOENNINGHAUSEN requested HAHNEMANN's assistance in verifying the Proving symptoms. But HAHNEMANN had to respond: "But my current condition prevents me in all regards. Perhaps, were I forty years younger, I could come up with something similar. But then I would only be able if I had a homeopathic hospital at my disposal in order to verify the matters in question by my own trials on many subjects.



Trials and tribulations of Boenninghausen

There are indeed still many obscure and only partially correct items in the current list of symptoms which are in desperate need of verification or correction. Who would want to conclude positive results already? Pity this young great art. It is impossible for one person to put this all together.



Trials and tribulations of Boenninghausen

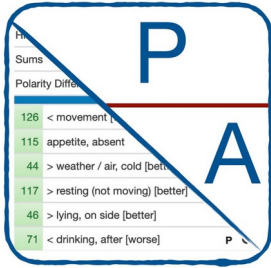
We need thousands and a well-equipped hospital; it is, to this end, absolutely indispensable, without which the Pure Materia Medica cannot be ascertained.” (see HAHNEMANN’s letter to BOENNINGHAUSEN of 3/16/1831, M. STAHL, letters between Samuel Hahnemann and Clemens v. Boenninghausen, Haug Verlag, 1997).

	P
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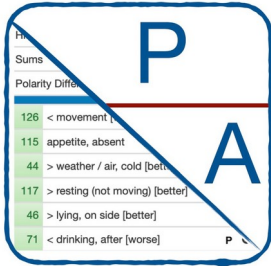
A

Enter Dr. Heiner Frei of Laupen
 Switzerland
 (~ 189 years later)

Dr. Heiner Frei



- Dr. Frei worked with Boenninghausen's PB for 30 years
- He wanted to refine it and make it applicable to our modern times



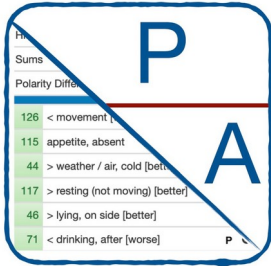
Dr. Heiner Frei's rigorous process

- Using modern methods of scientific evaluation, he began the lonely work of verification.

Number	Text	Polarity
126	< movement	P
115	appetite, absent	P
44	> weather / air, cold [better]	A
117	> resting (not moving) [better]	A
46	> lying, on side [better]	A
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Dr. Heiner Frei's rigorous process

- Thus was born Polarity Analysis
- Heiner believes the core of Boenninghausen's PB are the "polar symptoms."

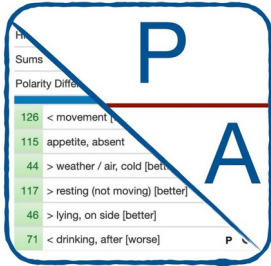


Dr. Heiner Frei's rigorous process

- He developed Polarity Analysis using thousands of patients over 30 years
- A physician seeing 40 + patients/day

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Polarity Diff.	
126 < movement	
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His hypothesis has been verified via multiple studies he's conducted on his own results.



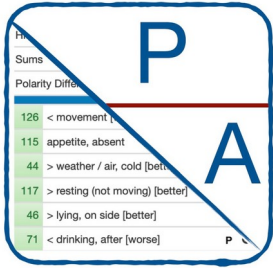
Dr. Heiner Frei's rigorous process

- Dr. Frei conducted several studies to determine the “hit” rate of Polarity Analysis as well as refine/correct the system to get the best outcomes

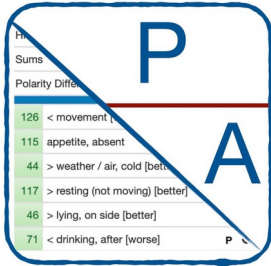
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Examples of audits/studies Dr. Frei performed:

Acute Disease Studies

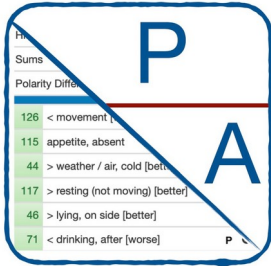


- 103 children with acute cough using PB only
 - Results: 75%
- 100 children with acute cough PA w/o Q sheet
 - Results: 81%



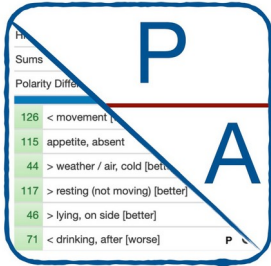
Acute Disease Studies

- 48 children w/acute cough PA w/ Q sheet
 - Results: 83%
- 206 children w/acute peds disease PA w/ Q sheet
 - Results: 85%



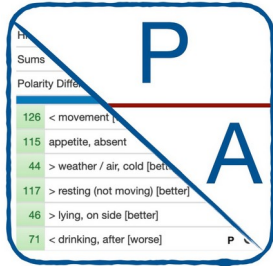
Acute H1N1 Epidemic 2011 Switzerland

- 52 pt evaluated in prospective study
- 13 adults, 39 children
- Used PA with Q Sheet



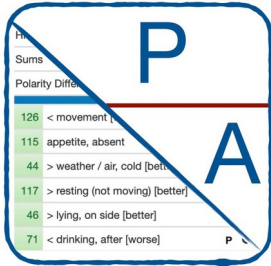
Design of Acute H1N1 2011 Swiss Epidemic

- Patients were given a 1st Rx and a 2nd reserve
- Sx's not 50% better @ day 2, take reserve Rx



Results of Acute 2011 H1N1 Epidemic Study

- Patients better with 1st Rx (at least 50% better)
 - 62%
- Patients better with 2nd Rx (at least 50% better)
 - 25%
- Rx 1 AND 2 failed to help
 - 13%
- Overall success rate:
 - 87%



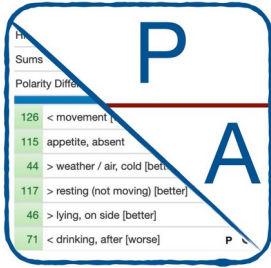
PA & Chronic Disease Studies:

- Dr. Frei compared results of two methods:
 - 50 patients using different formats of homeopathy
 - 153 patients treated with PA & Questionnaires

	P
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PA & Chronic Disease Studies:

- Each patient was given a single 200c dose
- Success = at least 50% better by 2 month fwp



PA & Chronic Disease Studies:

- 153 patients (PA) had 84% success rate
 - Patients rated themselves as 85% better @ 2 months
- 50 patients (Other Homeo) had 68% success
 - Patients rated themselves as 74% better @ 2 months

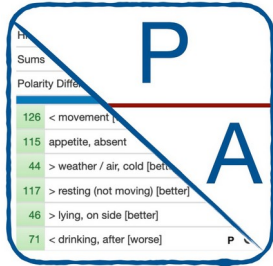
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Now onto double blind crossover
placebo trial:

	Polarity Diff	Sums
126	< movement	
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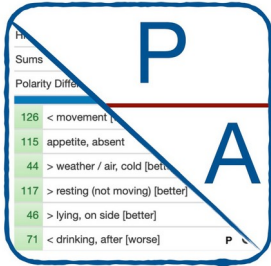
Dr. Frei & Polarity Analysis's efficacy: ADHD Crossover double blind

- 62 children were in study
- The children were followed for 8 years



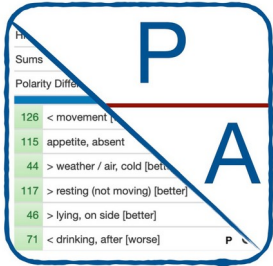
Dr. Frei & Polarity Analysis's efficacy: ADHD Crossover double blind

- **Initial Results:** roughly 88% of kids are doing well w/o drugs and continuing homeopathy or many needing no treatment.
- **Conclusion:** Using PA, expect roughly 75% of kids to do well overall



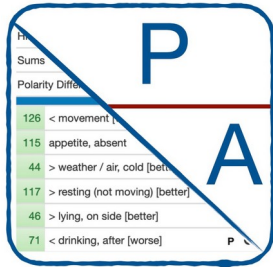
Dr. Frei , PA & Multi-morbid dz:

- Dr. Frei tested PA against multi morbid disease (N=50)
 - Multi-morbid defined as at least 3 chronic diseases
- 86% of patients averaged 91% better by 12 months



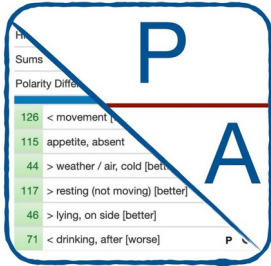
My rationale for trying PA:

- I have seen good results in my practice
- I was NOT having PA level of success using contemporary methods (mostly Massimo's approach)
- Therefore, let me try Polarity Analysis!



My rationale for trying PA:

- I see many more patients yet have less time
 - Compared to my old practice in PDX
- PA is simpler and often demands less of me
 - Yet, results are often quite good, sometimes surprisingly so.



PA sounds great, but...
Do we REALLY need another
homeopathic system?

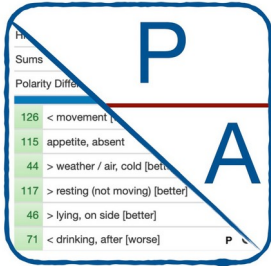
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Let's find out!

	P
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Polarity Analysis Upsides:

- Extensively tested - 75 to 85% success
- Only specific approach with placebo trial
- Takes MUCH less time to get great results
- Don't need to be a genius to solve the case



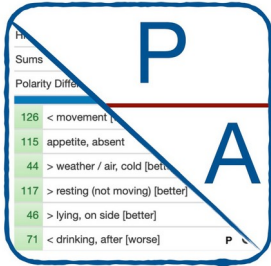
Polarity Analysis Upsides:

- Can see MANY more patient/day
 - Double or more pt's access to homeo
 - More pt's experience homeo, more it grows!
- More attractive to ND's & integrative MD's
 - Potentially increase access to homeopathy

	P
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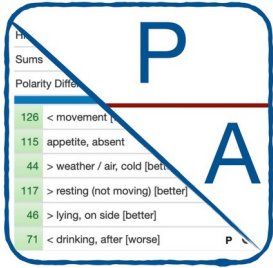
Polarity Analysis Upsides:

- MUCH easier for beginners to get great results
- Requires MUCH less training to reach efficacy
- Based on H&B's incredibly effective method
- Only need 135 Rx's to start practicing
 - Practically speaking, this is really less than 100 Rx's



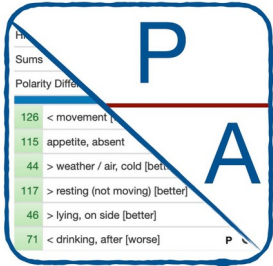
Polarity Analysis Upsides:

- Don't need to know THOUSANDS of Rx's
- This is a SMART system - with precise guidelines/heuristics
- Successfully addresses PHYSICAL pathology
 - Relevant to MD's & ND's particularly - ↑ acceptance/access for everyone.



Polarity Analysis Downsides:

- No rare orchids or Spitting cobras 🥰
- NOT great fit for unobservant patients



Polarity Analysis Downsides:

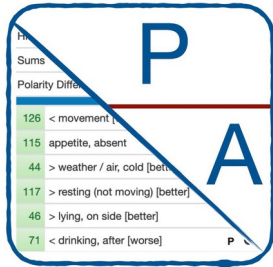
- Likely too confining for some homeopaths
 - Many Modern homeopaths likely to reject it out of hand
- Creative in a different way than contemporary
- Chronic PA cases rarely also cure acutes

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**Okay enough about research &
rationale
Let's learn PA!**

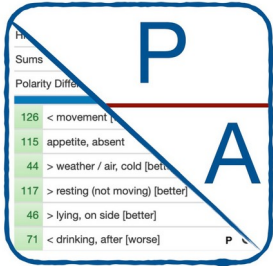
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Back to Boenninghausen & Hahnemann's epoch



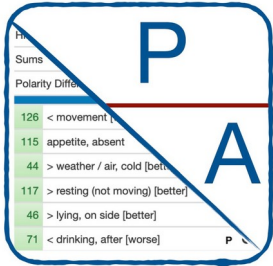
Understanding homeopathy @ Hahnemann's & Boenninghausen's time:

- Roughly 135 Rx's proved
- What strategies beget the greatest efficacy?
- Remember NO internet, NO computers - only books/lists, cross references, etc.



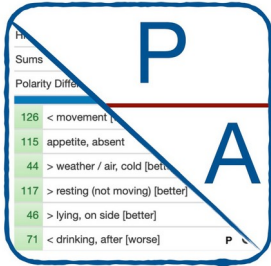
Understanding homeopathy @ Hahnemann's & Boenninghausen's time:

- Homeopaths treated dz we rarely treat in modern times;
 - Contagious disease with high mortality, epilepsy, cancer, intractable hemorrhaging, etc
- Homeopaths needed methods to treat serious and life threatening disease as well as milder diseases.



Understanding homeopathy @ Hahnemann's & Boenninghausen's time:

- Not commonly treating incest/abuse/PTSD, etc.
 - However, PA works GREAT for contemporary issues too!
- Often treating physical issues - from mild to grave disease



Understanding homeopathy @ Hahnemann's & Boenninghausen's time:

- Speaking to reliability:
 - Hering sent out one case to 30 graduates
 - Most Doctors came up with the same Rx - the simillimum.

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Sums		
Polarity Diff.		A
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Noteworthy approach as defined by Boenninghausen:

- Primary “Chief Complaint”
 - + Characteristics (modalities)
- Additional Symptoms
- Lowest level Mental “changes”

	P
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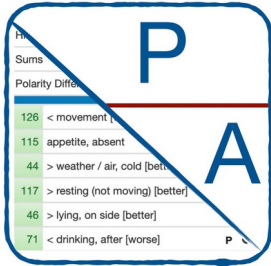
Boenninghausen's assertion: *Generals vs locals*

- Generals run deeper than locals
- Most cases will see same generals in many locations
- If don't get ALL of the sx's, but have solid generals, can still solve the case reliably.

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Mentals as LEAST reliable!

- Considering modern theories, downgrading mentals is counter intuitive to say the least!
- Some difference between modern & past relate to WHAT they treated vs what WE treat.



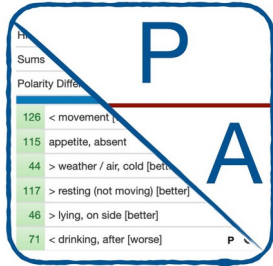
Mentals as LEAST reliable!

- Consider that many if not most modern homeopaths don't treat chronic physical pathology commonly

	P	
		A
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Let's look @ how downgrading mentals can make some sense

- Advantages of using modalities over mentals in PA:
- If someone is worse from warm or cold - that's relatively concrete - and therefore reliable



Advantages of using modalities over mentals in PA:

- OTOH easy to project our interpretation on someone's mental state:
- For instance, is the patient REALLY haughty, or is it mostly our interpretation/judgment?

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46 > lying, on side [better]	
71 < drinking, after [worse]	P

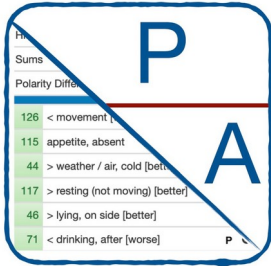
Advantages of using modalities over mentals in PA:

- According to PA, not reliable to hang hat on mentals
- Especially when generals run throughout case and are less susceptible to projection/error.

	P	
126	< movement	
115	appetite, absent	
44	> weather / air, cold [better]	A
117	> resting (not moving) [better]	
46	> lying, on side [better]	
71	< drinking, after [worse]	P

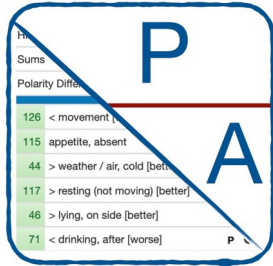
Noteworthy about using modalities over mentals in PA:

- The Boenninghausen rep has minimal mentals
- Polar generals affect ENTIRE organism w/little interpretation needed.
- Do ALL mentals effect the general state as convincingly?



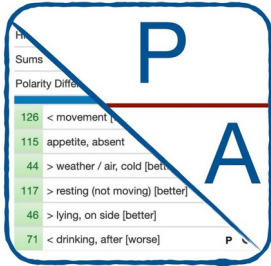
Noteworthy about using modalities over mentals in PA:

- Does NOT negate modern theory
- However, in a PA context, this is a vital distinction that yields reliable clinical results.
- Burden is less on homeopath to be brilliant



Noteworthy about using modalities over mentals in PA:

- Dr. Frie got roughly 87% success rate with ADHD in double blind trial!
 - Considered a “mental” phenomena
 - # of contemporary homeopaths \Rightarrow 84% with ADHD?
- Heiner used general polar sx's and “perception” based modalities -- for ADHD



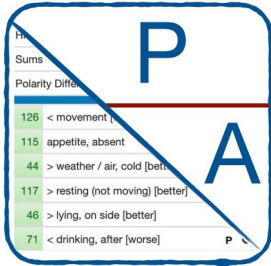
Noteworthy approach as defined by Boenninghausen:

- Defining the “genius” of the case
- Match the genius of the patient to the genius of the Rx
- Define the contraindications and rule out Rx's

	P
Sums	
Polarity Differences	
126 < movement [better]	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Noteworthy approach as defined by Boenninghausen:

- Genius is defined as Characteristic of a Rx
- Characteristics throughout Rx & repeatedly so
- Graded Genius is primarily modalities, physical locations & clinical affinities.



Graded approach as defined by Boenninghausen:

- He used underlines in his repertory to help articulate the reliable characteristics of Rx:
- 1st grade - occurs rarely in proving
- 2nd grade - occurs commonly in proving

Hi	P
Sums	
Polarity Diff	
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

“Genius” Level as defined by Boenninghausen:

		P
126	< movement	
115	appetite, absent	
44	> weather / air, cold [better]	A
117	> resting (not moving) [better]	
46	> lying, on side [better]	
71	< drinking, after [worse]	P

“Genius” Level as defined by Boenninghausen:

- 3rd grade - occurs in proving and in cures
- 4th grade - occurs in proving and frequently cured
- 5th grade - same as 4th - but Boenninghausen saw this feature repeatedly in clinical cases

	P
Sums	
Polarity Differ	
126 < movement [
115 appetite, absent	
44 > weather / air, cold [bet	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Noteworthy approach as defined by Boenninghausen:

- Boenninghausen was using grading to distinguish most important aspects from more transitory aspects of a Rx

		P
Sums		
Polarity Diff.		
126	< movement	
115	appetite, absent	
44	> weather / air, cold [better]	A
117	> resting (not moving) [better]	
46	> lying, on side [better]	
71	< drinking, after [worse]	P

Noteworthy approach as defined by Boenninghausen:

- Boenninghausen's approach is partly based on “calculating” the correct Rx.
- Surprising how effective & reliable this method is juxtaposed to today's tools/methods.

	P
Sums	
Polarity Diff.	
126	< movement [better]
115	appetite, absent
44	> weather / air, cold [better]
117	> resting (not moving) [better]
46	> lying, on side [better]
71	< drinking, after [worse]
	P

Noteworthy approach as defined by Boenninghausen:

- Define the contraindications and rule out/in Rx's accordingly.
- Example: Rhus-t is known as a 4 for low appetite, but pt. has a very high appetite.

	P
126 < movement [
115 appetite, absent	
44 > weather / air, cold [bet	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

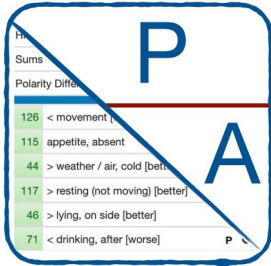
Noteworthy approach as defined by Boenninghausen:

- Working hypothesis;
 - if a Rx fits most aspects of a case but a “polar” modality is opposite to the patient, the Rx will rarely work -- according to Dr. Frei’s clinical findings.

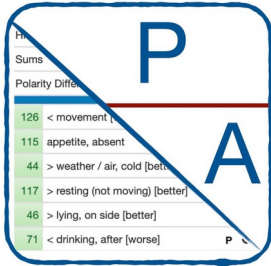
	P
Sums	
Polarity Diff	
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Noteworthy approach as defined by Boenninghausen:

- “Polar Symptoms”
 - Warm amel vs Cold amel
 - High sex drive vs low sex drive
 - Averse to movement vs Desire movement

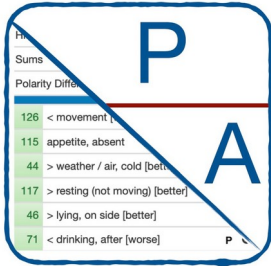


There are “technically” 354 polar symptoms in Boenninghausen’s pocket book



About polarity

- Of course in any proving, the Rx can cover both poles - a no brainer
- Often a Rx has a **pronounced** pole - such as Bryonia is clearly worse from movement.



Similarly look @ dryness in Arsenicum

- Arsenicum is well known for dryness via sx's such as thirst for little sips to wet the mouth
- Many other such dryness of tissue symptoms are noted in provings and clinical cures

Number	Symptom	Polarity
126	< movement	P
115	appetite, absent	P
44	> weather / air, cold [better]	A
117	> resting (not moving) [better]	A
46	> lying, on side [better]	A
71	< drinking, after [worse]	P

Similarly look @ dryness in Arsenicum

- In PA, if Ars looks promising for the totality
- But the patient is strongly LACKING in thirst, arsenicum is ruled out.
- This is noted by Boenninghausen & confirmed by Dr. Frei repeatedly

	P
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

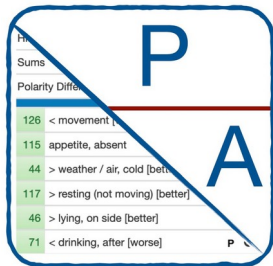
Dr. Frei's use of Questionnaire's

- Dr. Frei tested his results with the questionnaire's and w/o them
 - Results were better WITH questionnaire's
- Questionnaire's are a support, NOT a substitute for good case taking***

	P
Sums	
Polarity Diff	
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Generally two noteworthy questionnaire's:

- One for ALL general complaints
 - Acutes, Chronic dz, M&E complaints, etc.



Copyright H. Frei, 2017

Polarity Analysis: Checklist of reliable Symptoms

Last Name , First Name: _____ **Date:** _____

Diagnosis, Primary and Secondary Symptoms (description):

Mark between 8 and 16 important symptoms that pertain to the current disease. Symptoms are changes during a disease that differ from the healthy state.

Air, Weather, Temperature, Wrapping			Movement (continued)		
Desire for open air	increased	diminished	Physical effort		aggravates
Open air	improves	aggravates	Raising affected limb	improves	aggravates
Room	improves	aggravates	Hang down, letting limbs	improves	aggravates
Weather / air, wet, damp	improves	aggravates	Stretching out affected limb	improves	aggravates
Weather / air, dry	improves	aggravates	Bending over, while	improves	aggravates
Weather / air, cold	improves	aggravates	Standing up / straightening up	improves	aggravates
Weather / air, warm	improves	aggravates	Sitting down, while	improves	aggravates
Cold in general	improves	aggravates	Rising from bed, while	improves	aggravates
Cold, when getting cold	improves	aggravates	Rising from seat, while	improves	aggravates
Warm, becoming heated in bed	improves	aggravates	Turning affected part	improves	aggravates
Warmth, in general	improves	aggravates	Walking up stairs, hill	improves	aggravates
Warmth, of room or stove	improves	aggravates	Walking down stairs, hill	improves	aggravates
Warmly, from wrapping up	improves	aggravates	Writing		aggravates
Uncovering	improves	aggravates	Traveling (bouncing) in a vehicle		aggravates
Wet compress on body	improves	aggravates	Muscles	flabby	tense
Wet, getting, drenched		aggravates	Perception		
Position			Light in general	improves	aggravates
Lying position	improves	aggravates	Darkness	improves	aggravates
Lying, on back	improves	aggravates	Looking, eyes strained		aggravates
Lying, on side	improves	aggravates	Reading		aggravates
Lying, on right side	improves	aggravates	Touch		aggravates
Lying, on left side	improves	aggravates	Pressure, external	improves	aggravates
Lying, on painful side	improves	aggravates	Rubbing	improves	aggravates
Lying, on pain-free side	improves	aggravates	Noises		aggravates
Sitting	improves	aggravates	Smell	sensitive	diminished
Sitting, bent over	improves	aggravates	Taste		diminished
Standing	improves	aggravates	Discomfort, Side	left	right
Lying down, after	improves	aggravates	Head		
Rising from bed, after	improves	aggravates	Warmly, from wrapping up head	improves	aggravates
Rising from seat, after	improves	aggravates	Shaking head		aggravates
Resting limbs on something	improves	aggravates	Movement, of head		aggravates
Movement			Movement of eyes		aggravates
Resting (not moving)	improves	aggravates	Eyes, closing	improves	aggravates
Movement	desire	aversion	Eyes, opening	improves	aggravates
Movement, during	improves	aggravates	Pupils	dilated	contracted
Movement, of affected parts	improves	aggravates			
Walking, while	improves	aggravates			
Walking, in open air	improves	aggravates			
Running, jogging		aggravates			
Stepping hard		aggravates			

See Back for continuation

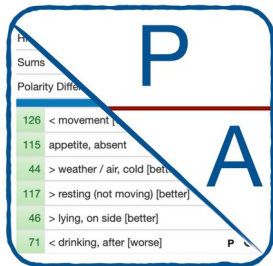
Sneezing		aggravates	Gynecology/Urology		
Teething, during, in children		aggravates	Menstruation	too often	to seldom
Talking, speaking		aggravates	Menstruation	too short	too long
Mental effort		aggravates	Menstruation	profuse	too weak
Inner head	left	right	Menstruation, blood, clotted (lumpy)		
Eating and Drinking			Menstruation worse	before	at start
Swallowing	improves	aggravates	Menstruation worse	during	after
Chewing		aggravates	Sexual instinct	strong	weak
Eating, before		aggravates	Menstruation, blood, acrid		
Eating, during	improves	aggravates	Urination	profuse	scanty
Eating, after	improves	aggravates	Urination	frequent	infrequent
Change of appetite	hunger	no appetite	Sleep		
Desire to drink	thirst	no thirst	While falling asleep		aggravates
Before breakfast	improves	aggravates	Sleep, during		aggravates
After breakfast	improves	aggravates	After waking up		aggravates
Food and drink, cold things	improves	aggravates	Sleep, after	improves	aggravates
Food and drink, warm things	improves	aggravates	Mind and Intellect		
Food and drink, cold water	improves	aggravates	Irritability (anger, aggression)		
Drinking, while		aggravates	Sadness (dejection, inclined to weep)		
Drinking, after		aggravates	Solitude, being alone	improves	
Food and drink, alcohol		aggravates	Emotions, company of people		aggravates
Food and drink, coffee		aggravates	Consolation		aggravates
Food and drink, milk		aggravates	Grinding teeth		
Saliva	increased	diminished	Understanding difficult		
Breathing					
Breathing	quickened	slowed			
Breathing, in (inspiration)	improves	aggravates			
Breathing, out (expiration)	improves	aggravates			
Breathing, deeply	improves	aggravates			
Heart-Circulation					
Pulse	too fast	too slow			
Pulse	hard	soft			
Pulse	strong	weak			
Digestive Tract					
Eruptions (burping)	improves	aggravates			
Stool, before		aggravates			
Stool, during		aggravates			
Stool, after	improves	aggravates			
Flatus, after discharge of	improves				

Checklist for General issues:

- Acutes
- Chronic
- M&E

	P
126 < movement [better]	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

- One for ADD, ADHD, ASD and perceptual issues
- E.G. Post Chemo (“chemo-brain”), Head Trauma, POSSIBLY dementia/Alzheimer’s, generally significant cognitive deficits



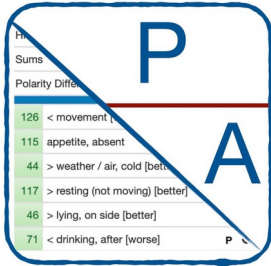
- “Perceptual” issues:
- ADD/ADHD
 - “Chemo-Brain”
 - Cognitive
 - Brain Trauma
 - Autism

Checklist for Perception Disorders	
Copyright 2018 by Dr. med. Heiner Frei, CH-3177 Laupen	
Name of Patient	Date
For a homeopathic remedy determination we need to know exact symptoms. Please note in the field below what you find most striking.	
Main symptoms	
Now mark on this side between 8 and 16 important symptoms that pertain to the perception disorder. Symptoms are changes when the patient is not well. They differ from the healthy state.	
High Reliability	Interpretation
Light (bright) aggravates	Over-sensitivity to bright light
Looking, eyes strained, aggravates	Irritability after media consumption (TV/PC)
Reading aggravates	Dislikes reading, tires quickly
Talking aggravates	Slow speech development, speech disturbances
Touch aggravates	Dislikes touch
Warmth in general aggravates	Irritability in warm environment
Warmth of Room/Stove aggravates	Irritability in overheated room
Uncovering ameliorates	Uncovers or takes off clothes often
Cold in general aggravates	Feels cold easily
Uncovering aggravates	Covers himself or wraps up warmly
Aversion against movement	Laziness
Writing aggravates	Writes/draws in cramped way, tires easily
After waking up, aggravates	Irritability after waking up
Before falling asleep, aggravates	Irritability in the evening, before sleep
Understanding difficult	Grasps complex issues only slowly
Sadness	Downcast, weepy
Irritability	Aggressive, fits of rage
Intermediate Reliability	
Noise aggravates	Irritated by noise of others
Smell sensitive	Intolerant of smells
Taste diminished	Adds spice to everything
Travelling in car aggravates	Nausea/headaches while being driven in a car
Movement ameliorates	Restlessness/irritability improved by sports
Memory weak	Easily forgets things just learned
Muscles tense (must be confirmed by physician)	Basic muscle tone high
Muscles flabby (must be confirmed by physician)	Basic muscle tone low

3. The following symptoms are common in disturbances of perception and ADD/ADHD but **have proved to be unreliable when choosing a homeopathic remedy**. They still may play a certain role in the fine tuning of the remedy determination. Therefore underline only symptoms here which are very pronounced.

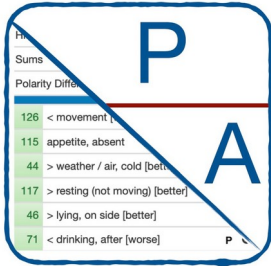
Mind	Performance	Hunger aggravates
Mood swings	Mistakes in arithmetic	Sweet things aggravate
Sulky	Slowness	Milk aggravates
Serious	Fresh Air/Movement	After eating ameliorates
Fearful	Desire for fresh air	After drinking ameliorates
Compulsive ideas	Aversion to fresh air	
Proud, arrogant	Fresh air ameliorates	
Nasty	Walking in fresh air ameliorates	
Jealous	Physical effort ameliorates	
Greedy, stingy	Involuntary movements (tics)	
Brash, cheeky, rude	Touch	
Dictatorial	Pressure of clothes aggravates	
Dislikes washing himself	Combing hair aggravates	
Modalities of Mind	Touch ameliorates	
Mental effort aggravates	Rubbing, massaging ameliorates	
Being alone aggravates	Weather/Phases of Moon	
Being with people aggravates	Cold weather aggravates	
Darkness aggravates	Autum aggravates	
Room full of people aggravates	Winter aggravates	
Strangers aggravate	Windy weather aggravates	
Being consoled aggravates	Change of weather aggravates	
Fear aggravates	Full moon aggravates	
Upset aggravates	New moon aggravates	
Annoyed aggravates	Eating/Drinking	
Anger aggravates	Disgust	
Lack of sleep aggravates	Desires sweet things	
Motor phenomena	Desires salty things	
Stammering	Desires milk	
Grinding teeth	Middday aggravates	

Please note here further specific symptoms not mentioned on this checklist:



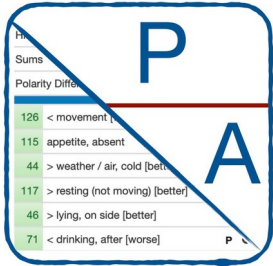
Case # 1

Acute Pharyngitis, Sinusitis, & Minor cough



Female patient (50's?): *Covid 19* *August 7th 2021*

Symptoms? Mostly it's a terrible h/a - was on left, now on right in temple, sensitive to light. With cough which hurts the h/a. I was really sneezy and runny, and a white watery stuff coming out of my nose now. Now my mouth is very dry. The body aches come and go. The fever comes and goes. When I think I'm in the clear - get a fever again. Not much appetite, just having enough to have vitamins and ivermectin. Don't feel I'm getting anywhere, it's very up and down. Mostly my head is wow! Not sure how I'll sleep tonight.



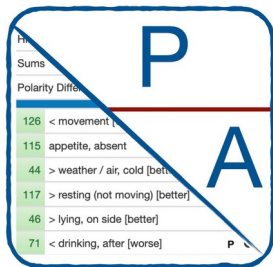
Female patient (50's?): *Covid 19* *August 7th 2021*

Symptoms? Worse h/a I've had in a long time. Worried it'll lead to a bad migraine. I'm feeling very sad, very despairing - like when it'll end. Started out with neck, shoulder and back a week ago. Tuesday started having a fever, Then Wed all the sx's came on. Feeling really weak and exhausted - spending most of my time in bed. Worst of it is h/a and fatigue? Yes, body aches come and go - hard to get comfortable. Also I have clearly diminished smell and taste.

The image shows a screenshot of a software interface, likely for a patient assessment tool. It features a list of symptoms with corresponding numerical values. A diagonal line runs from the top-left to the bottom-right, separating the list into two sections. The letter 'P' is in the top-left section, and the letter 'A' is in the bottom-right section. The list includes:

Value	Description
126	< movement
115	appetite, absent
44	> weather / air, cold [better]
117	> resting (not moving) [better]
46	> lying, on side [better]
71	< drinking, after [worse]

Here are the patient's answers as entered into the PA software :

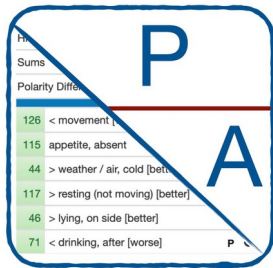


Good time to enter into Repertory (21 Rubrics)

74	> cold, when getting cold [better]
115	appetite, absent
80	< lying, on painful side [worse]
68	movement, aversion to
70	< physical effort [worse]
117	> resting (not moving) [better]
80	< light (bright) [worse]
74	> rubbing [better]
106	> lying position [better]
126	< walking [worse]
65	< mental effort [worse]
61	sadness (dejection, inclined to weep)
85	< looking, eyes strained [worse]
93	< swallowing [worse]
99	thirst
113	< sleep, during [worse]
111	< while/after waking up [worse]
121	< touch [worse]
79	< rising from bed, while getting up [worse]
24	> eyes, closing [better]
111	saliva, diminished

Hi	P
Sums	
Polarity Diff	
126 < movement [
115 appetite, absent	
44 > weather / air, cold [bet	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

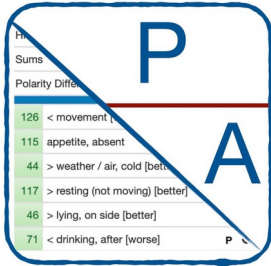
Here are the rubrics along with the DDX
of Rx's to consider:



Covid	07 Aug 2021	Nux-v.	Nat-m.	Sulph.	Acon.	Bry.	Cocc.	Lyc.	Hep.	Merc.	Nit-ac.
Hits		21	19	19	18	20	18	20	17	19	19
Sums		64	51	53	41	59	45	60	44	48	40
Polarity Difference		41	39	33	33	32	32	31	31	30	29
74	> cold, when getting cold [better]	P	1	1	3	1	3	2	4	3	1
115	appetite, absent	P	4	3	3	1	3	3	3	1	3
80	< lying, on painful side [worse]	P	3	1	1	3	1	3	4	1	3
68	movement, aversion to	P	4	3	1	4	2	3		2	1
70	< physical effort [worse]	P	3	3	4	3	4	3	5	2	2
117	> resting (not moving) [better]	P	4	3	1	1	4	3	1	3	3
80	< light (bright) [worse]	P	3	1	3	3	2	1	3	3	3
74	> rubbing [better]	P	1		3		2		1	3	1
106	> lying position [better]	P	4	3	1	1	4	2	1	2	2
126	< walking [worse]	P	4	3	1	1	4	3	1	3	4
65	< mental effort [worse]	P	5	4	3		3	5			
61	sadness (dejection, inclined to weep)	P	2	4	2	4	2	2	3	1	1
85	< looking, eyes strained [worse]	P	1	4	2		1	1	4	1	1
93	< swallowing [worse]	P	3	2	4	2	4	3	2	4	3
99	thirst	P	3	3	4	4	4	1	1	3	4
113	< sleep, during [worse]	P	2	3	4	3	4	2	4	4	3
111	< while/after waking up [worse]	P	4	4	5	1	2	4	4	4	4
121	< touch [worse]	P	4	2	4	3	3	2	4	4	2
79	< rising from bed, while getting up [worse]	P	3	3		3	4	4	3	3	1
24	> eyes, closing [better]	P	3			1	3		3		
111	saliva, diminished	P	3	1	4	2	3	3	3	1	3

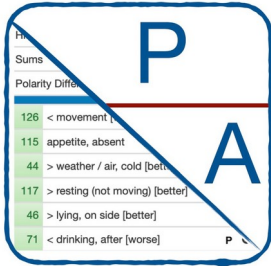
Polarity Difference	P	A
126 < movement [better]		
115 appetite, absent		
44 > weather / air, cold [better]		
117 > resting (not moving) [better]		
46 > lying, on side [better]		
71 < drinking, after [worse]	P	

Patient was given Acon 30c hourly



Sunday August 8th (next day) email from Husband:

She is about 80% better! Oddly the headache was not impacted so much, but she was up on the computer 1/2 hour after her first dose. With some Ibuprofen, she could sleep, and is now with much milder symptoms and weakness, some of which is presumably from not eating in a few days. Says she lost about 10 pounds.



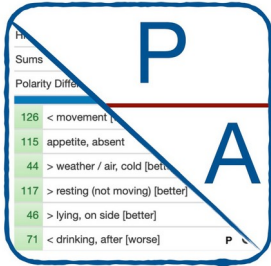
Additional email from Husband:

8/14/21 My wife is much better and out of the woods with this virus.

Email from Patient:

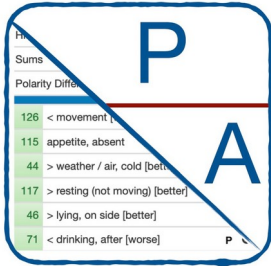
9/8/21

Thank you so much for your help during my bout with the vid. I am beyond grateful. I felt an immediate reaction upon taking the Aconite: a flush of heat, my headache backed off and my fear and negative state dissipated into relief and hopefulness. It literally turned the corner for me even though I had muscle pain throughout and sinus pain until the end. The whole thing lasted from August 2-12 with the last few days being fever free. I hope that's enough info-- to tell you the truth it's pretty much a blur to me as I was out of it and/or sleeping most of the time.



Case # 2

**Acute URI with Congestive
h/a and dry cough**



Case # 2 - Acute URI with Congestive h/a and dry cough

Apr 18
2019



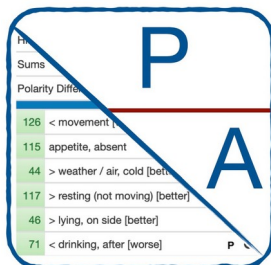
Office Visit Note 04/18/2019 Thu 3:00 pm Collapse

CC/Reason: acute pharyngitis, headache, and acute cough

HPI:

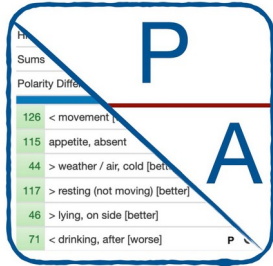
A few weeks ago, got sick. Think I have a cold or something. Stayed home from work, got a bit better. Since then waking with sore throat or mucus in my throat. Yesterday felt almost hot for half the day. Usual I'm not warm unless over dressed. This morning woke up with head congestion and h/a - and not getting away and not getting any better. I've also been coughing with a dry cough for a week or so. Other current sx's? No. The consistent sore throat and mucus in morning has been 2 weeks. Energy levels? My normal is pretty tired, but am more tired than usual. Denies aches

Physical exam - Throat: Dark red erythema @ pharynx, no exudates, no lesions.



Patient marked the following:

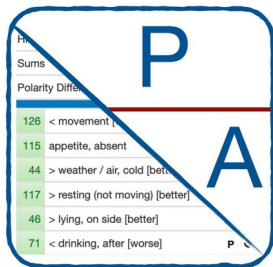
111	< while/after waking up [worse]	P	⊗
73	< warmth, in general [worse]	P	⊗
48	< lying, on back [worse]	P	⊗
126	< walking [worse]	P	⊗
93	< swallowing [worse]	P	⊗
42	> food and drink, warm things [better]	P	⊗
124	> rising from bed, after [better]	P	⊗
57	< breathing, deeply [worse]	P	⊗



Now's a good time to enter in the rubrics
in the program

Hi	P
Sums	
Polarity Diff.	
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

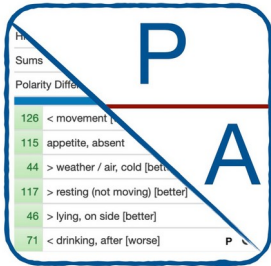
Here's my Repertory workup:



Acute URI	18 Apr 2019	lod.	Merc-c.	Merc.	Graph.	Lyc.	Kali-n.	Plb.	Fl-ac.
Hits		5	5	7	7	7	7	6	5
Sums		16	13	20	19	19	14	12	11
Polarity Difference	⌵	14	13	11	11	11	11	11	11
111 < while/after waking up [worse]	P ⊗		2	4	5	4	1		2
73 < warmth, in general [worse]	P ⊗	4		1	2	2			2
48 < lying, on back [worse]	P ⊗	3		2			3	3	
126 < walking [worse]	P ⊗	3	3	4	3	1	1	2	3
93 < swallowing [worse]	P ⊗	2	3	3	1	2	2	1	
42 > food and drink, warm things [better]	P ⊗				3	4	2	2	
124 > rising from bed, after [better]	P ⊗	4	3	3	2	3	2	2	2
57 < breathing, deeply [worse]	P ⊗		2	3	3	3	3	2	2
28 > sleep, after; while waking up [better]									
90 > warmth, in general [better]				1	2	1			
50 > lying, on back [better]				3/CI		3/CI			
102 > walking [better]				1	1	3/CI	2	1	
47 > swallowing [better]		1		2	2				
52 < food and drink, warm things [worse]				2					
80 < rising from bed, after getting up [worse]					3/CI	1	1		
18 > breathing, deeply [better]		1							

		P
Hi		
Sums		
Polarity Diff		
126	< movement	
115	appetite, absent	
44	> weather / air, cold [better]	
117	> resting (not moving) [better]	
46	> lying, on side [better]	
71	< drinking, after [worse]	P

Patient was given **Merc-c 30c**
hourly til better, back off
frequency as she improved.



Apr 19
2019



Tim Shannon, ND



Collapse



Opened on 04/19/2019 1:19 pm

Re: How are you doing with sore throat and cough?

Hi



It's been many hours since I gave you that Rx, are you better or do you need the back up Rx?

NOTIFICATIONS:

To be notified if not opened by 04/22/2019

4 RESPONSES:



04/19/2019 at 1:20 pm

Yesterday i felt horrible, but today i am feeling better. I think i will be ok.

Opened on 04/19/2019 at 2:10 pm by Tim Shannon, ND.



Tim Shannon, ND 04/19/2019 at 2:10 pm

Thanks for the update. How much better are you feeling today? Would you say you are 25% better, 50% better or...?

Once I know how much better you are, I can more easily determine if the will resolve it or if you need backup. So, how much better would you say?

Peace

Opened on 04/19/2019 at 4:38 pm by



04/19/2019 at 4:39 pm

Im probably 50% or more better.

Opened on 04/19/2019 at 5:17 pm by Tim Shannon, ND.



Tim Shannon, ND 04/19/2019 at 5:17 pm

Awesome! Thanks for the feedback. I'd recommend continuing with the dose - but now more like 4x/day for the next few days - that should definitively kick it out.

Peace

Opened on 10/28/2019 at 11:07 am by



Reply

End Conversation

Signed off by Tim Shannon, ND on 04/18/2019 3:54 pm

	P
126	< movement [better]
115	appetite, absent
44	> weather / air, cold [better]
117	> resting (not moving) [better]
46	> lying, on side [better]
71	< drinking, after [worse]

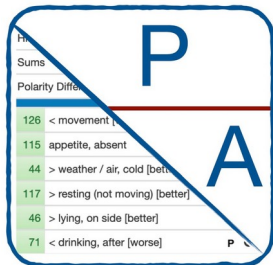
A

Discussion/Questions:

Hi	P
Sums	
Polarity Diff	
126 < movement [
115 appetite, absent	
44 > weather / air, cold [bet	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Case # 3

Acute Gastritis, Nausea & Dysphagia



Acute Gastritis, Nausea & Dysphagia

26 year old female

Mar 6
2020

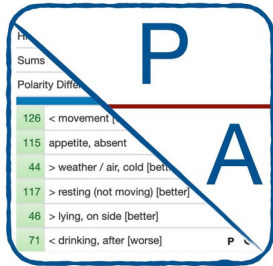


Office Visit Note 03/06/2020 Fri 8:00 am Collapse

CC/Reason: gastritis, nausea, dizziness, dyspareunia, facial acne and pelvic pain

HPI:

I went to urgent care. Felt I couldn't breathe, chest felt heavy. Also upper stomach and up to chest. Gave an EKG, all normal. Urine test was normal too. They didn't know what it was, but thought it could be acid reflux. The pain I'm describing goes through my chest, all the way to my back. She gave me some pills for acid reflux. Yesterday was a bit better. Went to urgent care Wed. Today is better than yesterday. I think it's gastritis, i'm nauseous, not throwing up, stools normal. Yesterday having a lot of hunger pains. Swallowing a pill hurts Anything I eat hurts. S/t it's really crampy and really hurts. It'll relax a bit then hurt. S/t hunger pains non stop. and my stomach is growling all the time even though full. Began? Wed morning @ 4 AM. Off foods Tuesday? had greasy foods and also took 4 aleve before going to bed. I took the aleve for headaches. I'm also burping a lot.



Case # 3: Acute Gastritis Modalities Selected

76	air, desire for open air
93	> open air [better]
106	> lying position [better]
117	> resting (not moving) [better]
126	< sitting [worse]
91	< eating, during [worse]
65	< stretching out affected limb [worse]
121	< eating, after [worse]
65	> before breakfast, fasting [better]
48	< after breakfast [worse]
44	> eructations (burping) [better]
113	< sleep, during [worse]
111	< while/after waking up [worse]
37	> uncovering [better]

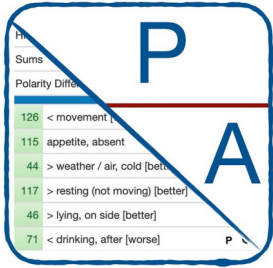
Hi	P
Sums	
Polarity Diff	
126 < movement	
115 appetite, absent	
44 > weather / air, cold [better]	A
117 > resting (not moving) [better]	
46 > lying, on side [better]	
71 < drinking, after [worse]	P

Now's a good time to enter in the rubrics
in the program

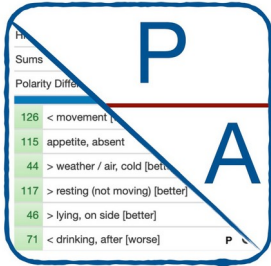
Polarity Difference	Sums	Polarity Difference
126	< movement	
115	appetite, absent	
44	> weather / air, cold [better]	
117	> resting (not moving) [better]	
46	> lying, on side [better]	
71	< drinking, after [worse]	P

Here's my Repertory workup:

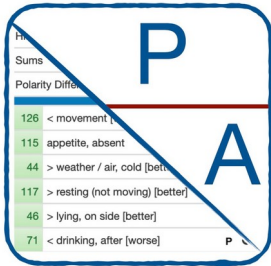
belching, stomach pain, nausea, bloated. 06 Mar 2020			Graph.	Lyc.	Nat-m.	Caust.	Bry.	Sulph.	Dig.	Borx.	Nit-ac.	Carb-v.	Kali-c.	Sars.
Hits			13	14	12	12	14	14	13	13	12	14	13	12
Sums			37	40	33	31	37	34	25	25	27	29	31	22
Polarity Difference			26	25	23	21	20	20	19	17	17	16	15	15
76	air, desire for open air	P ⊗	1	3	2	2	1	1	1	3		1	1	2
93	> open air [better]	P ⊗	3	2	2	2	2	2	1	2	1	1	1	2
106	> lying position [better]	P ⊗	2	1	3	2	4	1	2	1	1	1	1	2
117	> resting (not moving) [better]	P ⊗	3	1	3	1	4	1	3	2	2	2	1	3
126	< sitting [worse]	P ⊗	4	4	1	3	1	1	1	2	1	1	1	1
91	< eating, during [worse]	P ⊗	3	3	3	3	2	1	1	2	4	4	4	2
65	< stretching out affected limb [worse]	P ⊗	1	2	1	2	3	4	1			2	1	
121	< eating, after [worse]	P ⊗	3	4	4	4	4	4	2	2	3	4	5	2
65	> before breakfast, fasting [better]	P ⊗	2	2	4	3	3	2	3	2	2	1	3	2
48	< after breakfast [worse]	P ⊗	3	2	3	3	3	3	3	1	2	2	3	2
44	> eructations (burping) [better]	P ⊗	4	4			3	3	3	2	3	4	4	1
113	< sleep, during [worse]	P ⊗	3	4	3	2	4	4	1	2	2	1	3	1
111	< while/after waking up [worse]	P ⊗	5	4	4	4	2	5	3	1	5	4	3	2
37	> uncovering [better]	P ⊗		4			1	2		3	1	1		



Patient was given Graph LM1
4 drops daily



I reached out to patient via our Patient Portal a few days later:



Mar 11
2020



3

Tim Shannon, ND ▶



Collapse

Opened on 03/11/2020 11:04 am

Re: Saw you this past Friday

Hi

You were struggling with some acute GI issues when I saw you last Friday. You should've had 2 or 3 doses by now. How are you feeling?

Peace

NOTIFICATIONS:

To be notified if not opened by 03/14/2020

3 RESPONSES:



03/11/2020 at 11:05 am

Great, I felt like it started working that afternoon. Ive had a little pain in the last day and didnt take the drops so Im going to take them today at lunch to see if that helps

Opened on 03/11/2020 at 4:11 pm by Tim Shannon, ND.



Tim Shannon, ND 03/11/2020 at 4:11 pm

Lovely glad to hear it. I'd recommend taking them for a good week or so AFTER all the symptoms have resolved. That'll likely prevent recurrence.

Peace

Opened on 03/11/2020 at 4:11 pm by



03/11/2020 at 4:12 pm

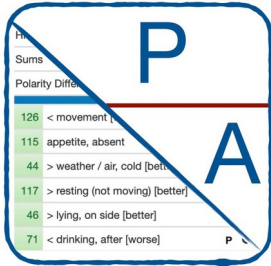
Perfect, thank you!

Opened on 03/11/2020 at 4:29 pm by Tim Shannon, ND.

Tim Shannon, ND ended this conversation on 03/11/2020 4:29 pm

Reopen Conversation

Signed off by Tim Shannon, ND on 03/08/2020 5:55 pm



This Polarity Analysis training program and the PA team acknowledge our debt of gratitude to Bönninghausen, Dr. Heiner Frei and his colleagues for decades of meticulous and insightful work. We are fortunate to stand on the shoulders of giants. We extend their accomplishments and contributions into daily practice by training practitioners like you!

Hi	P
Sums	
Polarity Diff	
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– Fin –