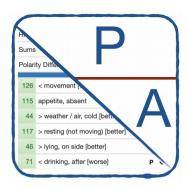


PA Session 16 of 17

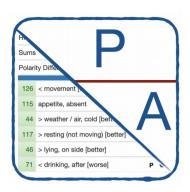
Text Review: Chapter 6

Polarity Analysis Training

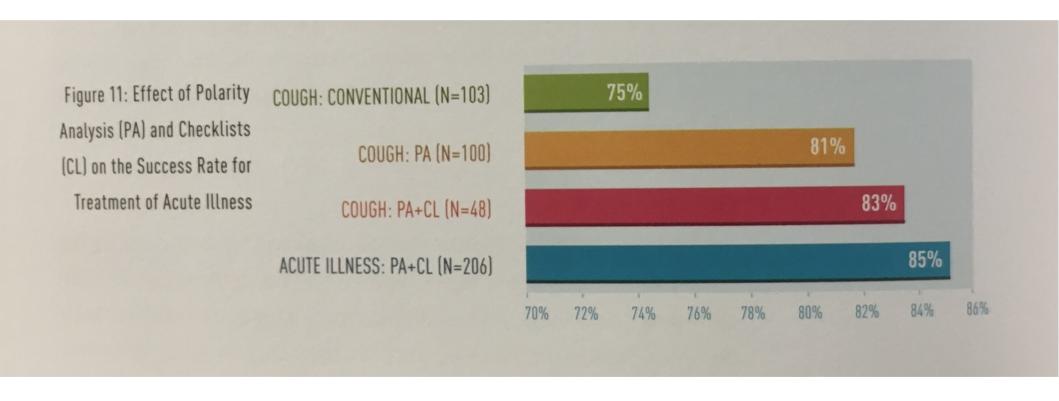


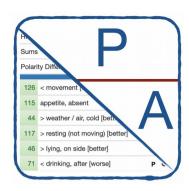
Plan for Today

- Final session! Congratulations on your studies!
- Research Review: Heiner's Studies
 - Cough (Acute)
 - Influenza (Interesting look at remedies!)
 - ADD/ADHD
 - Chronic Illness
- Review / Lessons Learned: using PA day to day
- Next Steps: Implementing in YOUR practice
- Your questions?

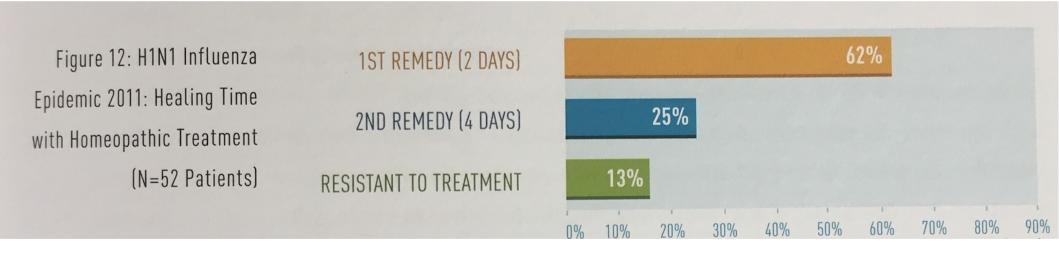


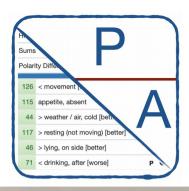
Acute Cough Study (p 217 - 218)





Influenza Study (p 219 - 224)





Influenza Remedies and that Bryonia thing....

Table 64: Influenza Epidemic 2011,

Successful Remedies

SUCCESSFUL REMEDIES	
Coccul, Nat-m, Phos	5 patients each
Bry, Nux-v	4 patients each
Ars-a	3 patients each
Croc, Graph, Hep, Sulph,	2 patients each
Ant-t, Calc-c, Camph, Ipecac, Lyc, M-art, Plat, Seneg, Spong, Thuja, Zinc	1 patient each

Table 65:

Influenza Epidemic 2011,

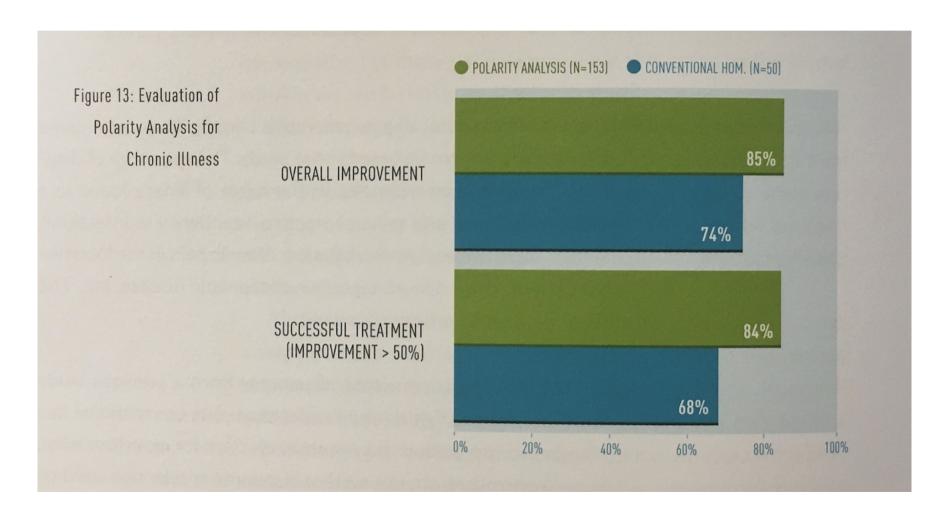
Remedies with Insufficient

Patient Reaction

REMEDIES WITH INSUFFICIENT PATIENT RE	ACTION
Bry	10 patients each
Coccul	3 patients each
Nux-v, Calc-c	2 patients each
Aco, Arn, Ars-a, Bell, Cham, Cupr, Graph, Iod	1 patient each

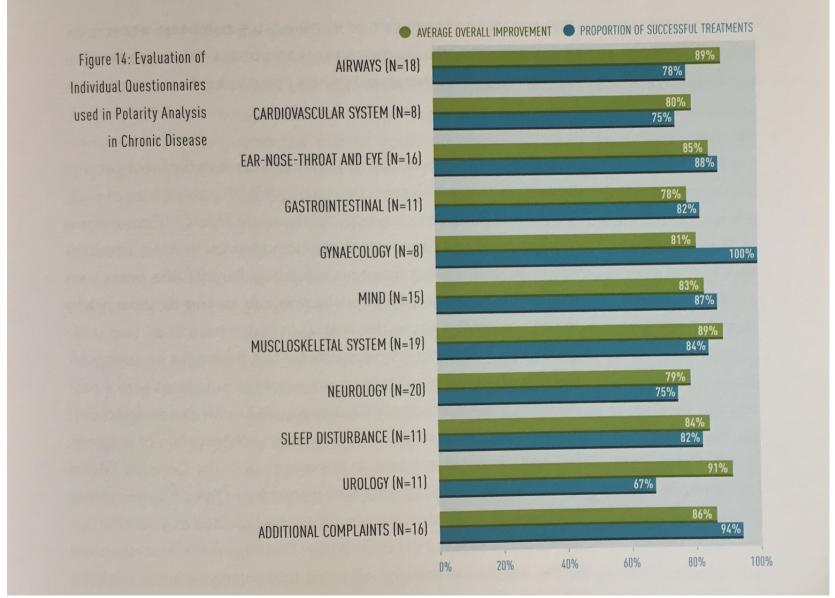


Chronic Illness Study (p 225 - 227)





Chronic Illness Study (p 225 - 227)





ADHD / ADD Study

(p 228 - 237)

REMEDY

The 62 patients were successfully treated with 17 different homeopathic remedies (table 67). Remedies were classified as successful if the patient met the eligibility criteria for the test phase. Further remedies were used but did not lead to a sustained improvement at the required level; they are therefore not included.

Table 67: ADHD/ADD Study, Remedy List

Calcium carbonicum (15)	Mercurius solubilis (3)
Sulphur (8)	Capsicum (1)
Chamomilla (5)	Causticum (1)
Lycopodium (5)	Hyoscyamus (1)
Hepar sulphuris (4)	Phosphorus (1)
Nux vomica (4)	Phosphoricum acidum (1)
China (3)	Sepia (1)
Ignatia (3)	Staphisagria (1)



ADHD / ADD Study

(p 228 - 237)

WITH OPEN HOMEOPATHIC TREATMENT

Comparisons of evaluations with the Conners' Parent Rating Scale (CPRS) before treatment and 14 weeks after the crossover study show highly significant improvements in all rubrics: behaviour, learning/attention, psychosomatic complaints, impulsiveness/hyperactivity, shyness/anxiety and Conners' Global Index (table 69).

Table 69: ADHD/ADD STUDY, RE-SULTS OF LONG-TERM TREATMENT Parental rating of differences in the Conners' Parent Rating Scale between diagnosis and investigation 14 weeks after the crossover study (Wilcoxon signed-rank test)

PARENTAL RATING	MEDIAN OF DIFFERENCE %		P-VALUE	EFFECT
Behaviour	3.5	42.5	0.0001	Improvement
Learning, attention	3	36.5	0.0001	Improvement
Psychosomatic complaints	1	46.5	0.0001	Improvement
Impulsiveness, hyperactivity	3	41.5	0.0001	Improvement
Shyness, anxiety	1	39.5	0.0001	Improvement
Conners' Global Index	7	43.3	0.0001	Improvement



ADHD / ADD Study (p 228 - 237)

The ratings with the Conners' Teacher Rating Scale (CTRS) also showed a significant improvement in behaviour, as well as trends towards improvement in learning and attention, passivity and the Conners' Global Index (table 70).

Table 70: ADHD/ADD STUDY,
RESULTS OF LONG-TERM
TREATMENT

Teacher rating of differences in the Conners' Teacher Rating Scale between diagnosis and investigation 14 weeks after the crossover study (Wilcoxon signed rank test)

TEACHER RATING	MEDIAN OF DIFFERENCES	DIFFERENCE %	P-VALUE	OUTCOME		
Behaviour	3	36.4	0.0347	Improvement		
Learning, attention	2	27.8	0.1932	Improvement		
Passivity	2	27.8	0.1194	Improvement		
Conners' Global Index	3	30.8	0.0561	Improvement		



Multimorbid Client Study

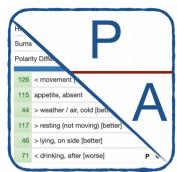
(p 228 - 237)

Table 73: CC Study,
Most Common Diagnoses

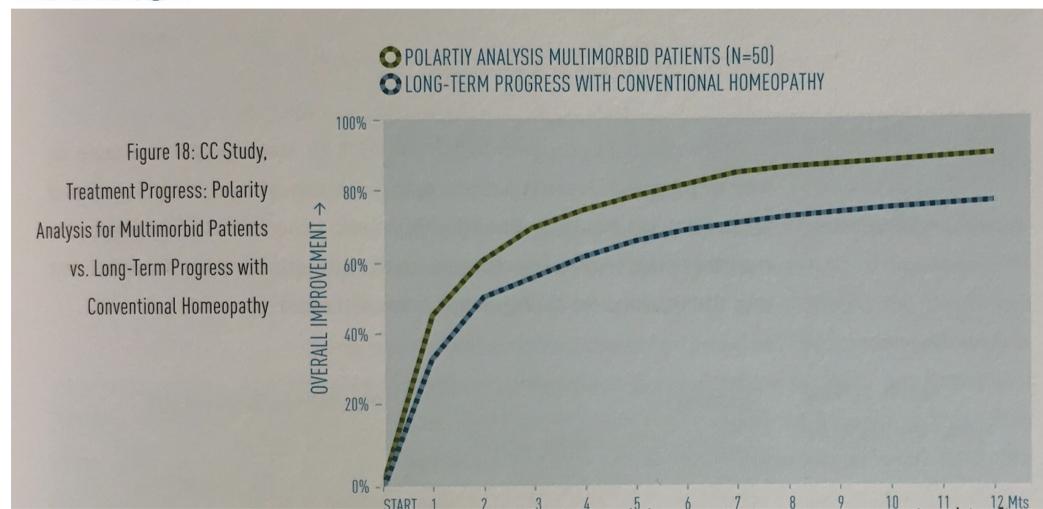
MOST COMMON DIAGNOSES	
Asthma, hay fever, eczema	
Soft-tissue rheumatisms, chronic arthritis	
Dysmenorrhoea, menopausal complaints	
Recurrent respiratory infections	
Cardiac dysrhythmia	
Heartburn, irritable bowel	
Headache, migraine	
Depression, anxiety, exhaustion	
Sleep disorders	
Recurrent cystitis	

PROPORTION OF PATIENTS
SUCCESSFULLY TREATED
WITH HOMEOPATHY

Forty-three of fifty patients (86%) achieved an average improvement of 91% after twelve months. Six patients dropped out of the study. One patient with chronic sleep and anxiety disorders as well as polyarthritis only achieved an improvement of 55% after twelve months (see below).



Multimorbid Client Study (p 228 - 237)





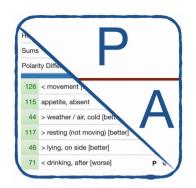
Lessons Learned: Guidance About Symptoms Ch 1.2.1

- Symptoms NOT included:
 - Character traits / Characteristics (EVEN if MALADAPTED?)
 - Anything unchanged from healthy state
- Best Test Question:
 - Does this symptom belong to CURRENT case of illness?
 - (Especially if current sx contradicts prior sx)
- Hering / Full symptom detail:
 - Location / Sensation / Modalities / Concomitants/Extent
 - Clinical findings



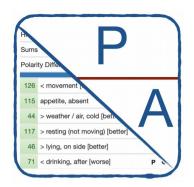
Review Hahnemann and Frei's Guidance on Symptoms (Ch 1.2.2)

- Org 153: SRPs / unusual / striking
 - Current interpretation look for the unusual
 - Contemporary homeopathy tilts this to mental/emo/experiential
 - HF says ONLY DURING CURRENT ILLNESS
- Org 133: Importance of determining modalities
 - Specifically investigating through experiment
 - Not enough to rely on initial client statement ("I don't know...")
- KEY BUILDING BLOCK
 - Client modalities are crucial in symptom match to remedy
 - Boenninghausen: Modalities outweigh peculiarities every time



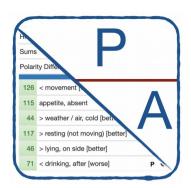
Lessons Learned: Polar Symptoms - What and Why

- Polar symptom:
 - Symptoms that can have an opposite
 - Examples: Thirstless / Thirsty
 - Examples: Better from Movement / Worse from Movement
 - Marked with a P in the PA software
- Remedy materia medica OFTEN includes BOTH poles
 - Both poles of a symptom may be present in materia medica
 - One will generally appear more strongly than the other
 - Most reliable remedy choices include the STRONGER pole



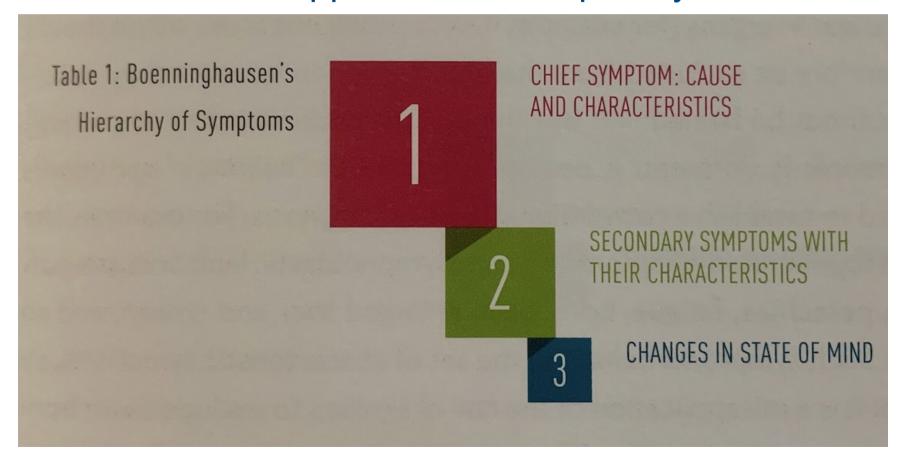
Review Contraindications: PA Provides Visibility

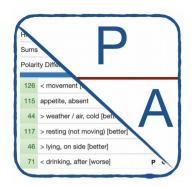
- Polar symptoms allow us to see:
 - Client symptoms on the axis of a polarity
 - Examples: Thirstless / Thirsty
 - IF client is THIRSTLESS, avoid thirsty-dominant remedies!
- Remedy with strong pole of THIRSTY is contraindicated
 - PA marks these with #/CI
 - The symptom does not correspond to genius of client's remedy
 - Contraindicated remedy column is "greyed out" we ignore it
 - We can double check / verify the specific symptom that is CI



Lessons Learned: Hierarchy of Symptoms

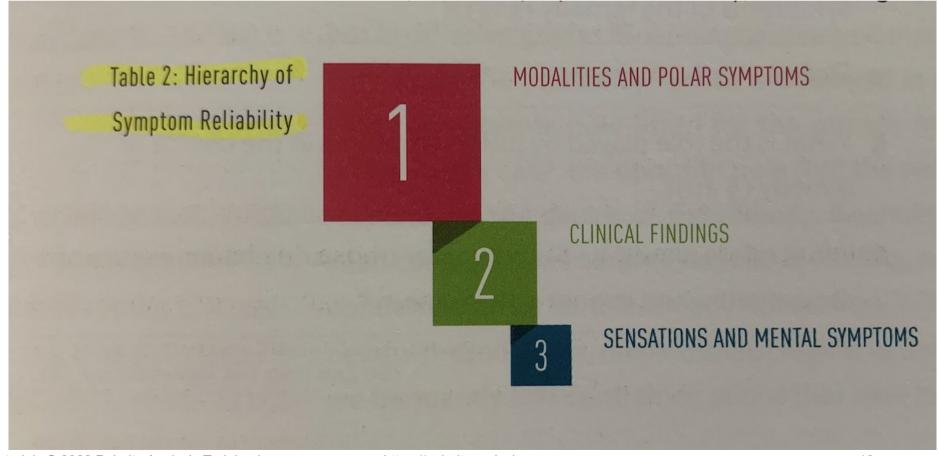
Review the PA approach to data priority

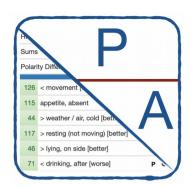




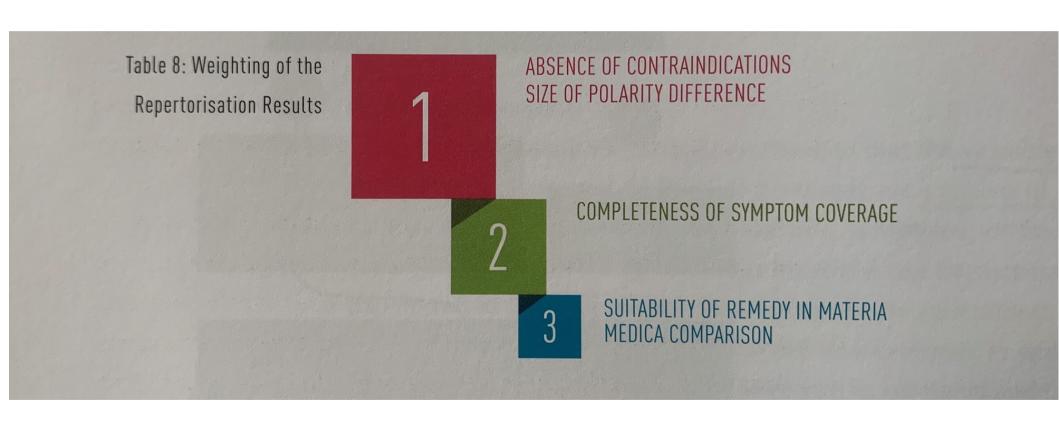
Lessons Learned: Hierarchy of Symptom Reliability

Prioritize and use the MOST reliable symptoms





Lessons Learned: Skip Contra-Indications!





Lessons Learned: Boenninghausen's Data Dissociation

- Boenninghausen broke symptoms into components
 - Full client report: Vomiting after coughing, worse after eating, better from laying on back
- Dissociative repertorization
 - Dissociated component: Cough
 - Dissociated component: Vomiting
 - Dissociated component: Aggravated after eating
 - Dissociated component: Ameliorated when laying on back



Lessons Learned: Match the Modalities

VOTE

WE CAN STRONGLY EXPECT
A REMEDY TO HEAL EVEN IF
IT ONLY MATCHES THE
MODALITIES OF THE PATIENT'S SYMPTOMS.

For day-to-day practice, we can draw a key conclusion from this case and very many others like it: We can strongly expect a remedy to heal even if it only matches the modalities of the patient's symptoms.

With many successfully healed cases, the materia medica comparison does not list the symptom quoted by the patient in the given localization, since the rubrics of the PB are based on generalization of several similar modalities, sensations and findings from various different organs or parts of the body.



Lessons Learned: Pattern Shown By Entire Organism

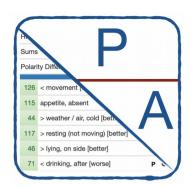
"...we look at the use of polar symptoms for the treatment of mental illness in exactly the way recommended by Hahnemann, avoiding currently fashionable speculation about the patient's mental state."

"Since mind symptoms, due to the wide variability in their formulation, are more difficult to generalize, they are only included in a 'rough' way in Boenninghausen's PB and they are only used in the final stage of the procedure, the materia medica comparison."



Lessons Learned: Questionnaires Improve Outcomes

- Questionnaires increase client investment / partnering
- Improve accuracy of data used for remedy selection
- Familiarity of use / efficacy increases over time
- Heiner started with many, now only uses 2
 - Standard questionnaire
 - Perceptual questionnaire
- Ongoing use, not just for the first consult!!

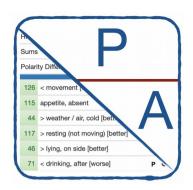


Lessons Learned: Benefits of Using a Case Log

- AFTER the Preparatory Consult + Completed Questionnaire
- Create a graphic / trackable log at MAIN Consult
- For EACH complaint within the multimorbid array
 - First occurrence (year)
 - Frequency of complaints
 - Localizations, sensations and modalities (recognize NOT congruent)
 - Average intensity of each complaint on scale 1-10 (client rates this)
- Use symptoms in case log to create the repertorization chart
- Use the case log to track the progress of the client over time



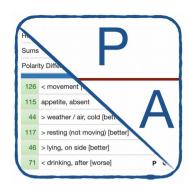
CASE LOG G.G. 33 YEARS OLD			Consultation Dates DD/MM/YYYY							
DIAGNOSIS, START OF SYMPTOMS	FREQUENCY OF COMPLAINTS	CHARACTERISTIC SYMPTOMS	12.06.2009	02.07.2009	10.08.2009	14.09.2009	14.10.2009	28.11.2009	25.01.2010	25.05.2010
		Mean Symptom Intensity (Scale 10-0)	6.8	2.0	1.0	0.5	1.0	0.8	0.3	0
		Global Improvement (Scale 0-10)	0	7.0	8.5	8.8	9.0	9.3	9.8	10
Exhaustion 2 months	Always	Befuddled Tiredness Feeling of drunkenness Seriousness (always) ¹ Sleeps soundly, deeply Irritability P ¹¹ Sadness P ¹¹ < Anger > Movement P (always) ¹ > In open air P (always) ¹	8	4	2	2	4	1	0	0
Headaches 12 months	Daily	Dull pain Dizziness < Worries / anger < after midday meal (= < after eating) P < Cold weather P ^{III} < Getting cold P < Physical effort P < Looking intensely P < Shaking head P > Closing eyes (= < light) P > Wrapping up head P > Rubbing (massaging) P > Rest P	9	0	0	0	0	0	0	0



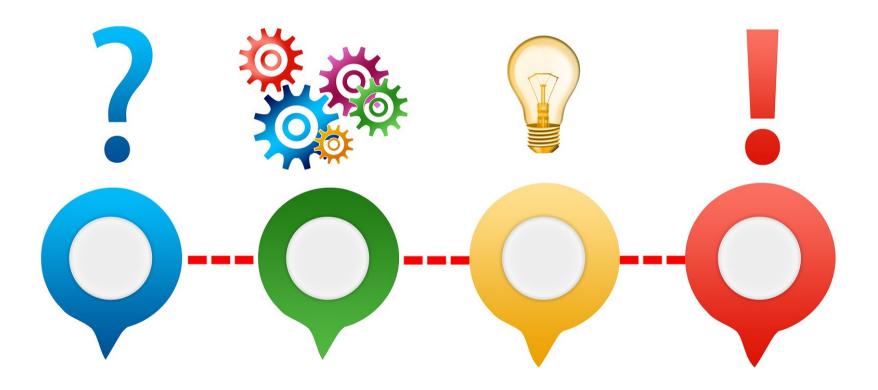
Lessons Learned: Heiner's Advice to All

"Correct homeopathic treatment means simply sticking to the currently presented symptoms, which point to the correct remedy with unerring precision.

Homeopathy thus becomes much less complicated than it may appear in certain theories."



Questions?



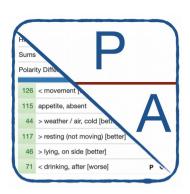




Enrollment is open now for the Summer Bridge Program

Case Supervision will be for your PA CLINIC clients only

- May 11, 2022: Strategies for Peer Case Review
- June 9, 2022: Case Prep for Publication
- July 14, 2022: Case Prep for Presentation at Conference or Grand Rounds
- August 11, 2022: Setting Up Your Retrospective Case Review





Enrollment is open now for the Autumn PA Program. If this is your 1st time enrolled in PA Series

- You are entitled to audit the series again as part of your purchase
- Enroll at the PA website, use coupon code PA2AUDITAug22

Autumn 2022 Series (17 Sessions / 47.5 hrs)

August 25** / 27 - September 1 / 10 / 15 / 19 / 24 / 29 - October 8 / 13 / 17 / 22 / 27 - November 5 / 10 / 14 / 30

Mondays: 1:30pmET / 10:30amPT (1.5 hr) **Thursdays:** 8pmET / 5pmPT (2.5 hr)

Saturdays: 11amET / 8amPT (4 hr) Optional 30 min informal chat before class

** Orientation session required for all new students; optional for returning students.



PA Session 16 of 17

This Polarity Analysis training program and the PA team acknowledge our debt of gratitude to Boenninghausen, 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!