

Homœopathic Diagnosis: Hahnemann through Bonninghausen

**By George Dimitriadis
Hahnemann Institute Sidney
(Australia). 2004.
ISBN 0-646-43380-6.
159 pages, paperback. \$79 (AU)**

Reviewed by George Guess, MD, DHT

For quite some time now George Dimitriadis and colleagues have been laboring extensively at resurrecting the repertory and methodology of Bönninghausen. In 2000 he published his newly revised edition of *The Bönninghausen Repertory* (TBR), which should itself be the subject of an extensive review (Suffice it to say that this reviewer was considerably impressed with the quality organization, cross-referencing, extensive introduction and reliability of said repertory) Now Dr. Dimitriadis has followed up on this important work with a second, indispensable companion and guide to TBR. This book is a labor of love and commitment to homeopathy that is truly humbling to behold. Its scholarship is extraordinary for a homeopathic text, or any text for that matter.

With meticulous accuracy Dimitriadis intriguingly defines what is meant by “homeopathic diagnosis,” employing constant reference to both Hahnemann’s writings and those of Bönninghausen. If I might paraphrase—the goal of the homeopath in pursuit of the suitable homeopathic diagnosis is to identify that symptom(s), which when sufficiently defined in all of its essential characteristics, accurately reflects the essential nature of the patient’s disease process. Said definition has three elements—complaint, location and modalities. These elements must be very precisely identified in the patient’s case. Once this sufficiently detailed symptom is defined, it is considered representative of the case as a whole and becomes the basis for remedy selection. Since most cases of chronic illness consist of multiple symptoms or

complaints, this approach often entails sequentially addressing principal or presenting complaints in their order of appearance as the case progresses. At other times, the characteristics of the multiple complaints of a case, when suitably defined and considered in concert, lead to a successful homeopathic prescription. In such cases the additional complaints attending the presenting symptom can be considered concomitants. This approach has a simplicity and elegance about it; hence its appeal. It can, though, seem rather confounding when juxtaposed to a highly complex case with a multitude of complaints and complex psychological characteristics. Such cases might, even in Dimitriadis’s hands, prove too great an obstacle to the application of the Bönninghausen method; nonetheless, it is quite apparent from the extensive number of case histories presented in this volume that this method, even today has quite wide and effective applicability

Dimitriadis places a premium upon accuracy and precision. This is apparent in his choice of words and the incredibly extensive endnotes he provides to convey his exact meaning. Reading this text takes time and, done properly involves constant referral to the endnotes. The yield is rich, though, and worth the *time* *Homeopathic Diagnosis* has enriched my understanding of homeopathy as promulgated by our founding fathers, so to speak, without distortion.

An innovation that Bönninghausen introduced was the concept of defining symptoms by analogy. This technique, adopted because of the incompleteness of many recorded proving symptoms, allows for the development of a composite picture of a full symptom whereby the characteristics of analogous symptoms are combined to form a more complete and descriptive symptom complex. Further, it advocates the application of general symptoms/modalities identified in provings to various local symptoms even when such modalities were not recorded relative to the local symptom(s) during the proving, as long as there is nothing in the proving to contradict this strategy.

Employing this concept of analogous symptoms, Bönninghausen, through a long evolutionary process detailed assiduously by Dimitriadis, constructed his *Therapeutisches Taschenbuch* (TT), now revived as TBR. In this repertory Bönninghausen abstracts symptom components as revealed in provings and lists them individually in various parts of the repertory. Thus, put quite simply if a symptom consisted of throbbing pain in the forehead aggravated by pressure and becoming cold, the remedy would appear in the rubrics Forehead (under Head section), Throbbing (under Pulsation in Generals), Pressure aggravates (in Modalities) and Becoming cold aggravates (in Modalities). When repertorizing, the rubrics are recombined to reconstitute the expressed symptom. Interestingly, such recombination can yield new characteristic symptoms of a remedy not previously revealed in provings. Several prominent earlier homeopaths found this technique highly efficacious; eg, TF Allen, C Dunham, JT Kent, PP Wells, etc. Yet the method was not without its critics too, among them Constantine Hering. Dimitriadis argues that Bönninghausen's detractors failed to really put his method to trial on their patients and/or misapprehended his genius.

Bönninghausen's reportorial work, it turns out, highly influenced other homeopaths as they rendered their own repertories. TT (or one of its precursor repertories) was incorporated into the repertories of Jahr and Kent and, of course, Boger, who published his own version with additions, of TT. Unfortunately however, many errors found their way into these later works, according to Dimitriadis. Even Allen's version of the *Therapeutic Pocketbook* contains numerous errors and varies considerably from the original text. Thus Dimitriadis felt a compelling need to publish a precise translation of TT.

"Part One—Conceptual" covers the above, as well as many additional aspects of the history, construction, conceptualization and application of TBR; such as, remedy grading, characteristics mapping, remedy concordances (how to use them), rubric exegesis, etc. We then turn to "Part Two-Practical" The Practical part of this book provides a large number of case studies analyzed using TBR. Dimitriadis gives examples of cases presenting with but a single complaint, with multiple complaints (presenting symptoms and concomitants), cases solved by the application

of only a single TBR rubric, and cases in which remedy concordances helped identify the simillimum. A number of interesting characteristics of this approach and these cases become readily apparent on reading this volume: the case taking approach is considerably different from that most practicing homeopaths are familiar with—the goal seems to be the precise definition of the chief complaint or complaints, which itself alone (or in conjunction with but one or two concomitant symptoms)—again, if adequately expressed—serves to sufficiently represent the patient's illness; rubrics are preferably very limited in number, five or less being preferable with eight as an absolute maximum; TBR rubrics must be applied with absolute precision (to this end Dimitriadis and colleagues have been assiduously researching original proving texts, even those in German in an effort to glean the exact meanings of these rubrics); the clinical course during treatment is viewed as a fluid process with remedies being changed as the symptom complexes vary overtime, all the while with the end goal of steadily optimizing the patient's health; mental rubrics are very limited and broadly defined (yet in this book the TBR approach is clearly applicable to mental and emotional cases); and not all cases will be amenable to this approach (many cases will need some remedy other than the 150 included in TBR and more complex, nuanced cases could present an insurmountable challenge to the practitioner employing only TBR).

I personally find this method of case analysis to be quite elegant in its simplicity and impressive in its efficacy. Although I have been employing it in my own practice but a short while, I have already had it come to my rescue, as it were, in more than a few cases. To my mind Bönninghausen's method is the forerunner of sorts of two parallel though quite different, approaches currently being promulgated in homeopathic practice—Paul Herscu's Cycles and Segments (in which in the course of repertorization several rubrics conveying one dynamic theme of a patient's case are conjoined into one large inclusive rubric) and the Themes Palette of the MacRepertory repertorization program.

One simple case, as Dimitriadis renders it, proves most illustrative of the power and simple refinement of this approach. It is the case of a two-and-one-half year-old

child with tantrums and skin rash, attributable to a dairy allergy *Belladonna* effected an initial favorable change, but then an intractable stubbornness overtook the child, coupled with episodes of hysterical, uncontrollable behavior and a striking ammoniacal stench of his urine. Two rubrics – “Urine, Odour, ammoniacal” and “Spasms, hysterical” – suggested *Moschus* as the most likely remedy and it was prescribed with impressive success. I seriously doubt another analytic approach would have yielded this remedy

This book is ripe with fascinating clinical observations. One, for example, is Dimitriadis’s resurrection of the utility of febrile symptoms in achieving accurate remedy selection. He recounts a *Stannum* case prescribed for the specific pattern of heat flush with perspiration followed by chill. Such sequencing of thermoregulatory symptoms was deemed of great consequence by both Hahnemann and Bönninghausen, and is another subject of ongoing research by the Sidney group of homeopaths.

Another interesting observation relates to Dimitriadis’s method of administration of remedies. Following the dictates of Hahnemann in both the fifth and sixth editions of *Organon*, he typically prescribes remedies continuously either as liquid dilutions of centesimal potencies or LM potencies. He contends that the continuous administration of the remedy even after full clinical improvement has been established forestalls early relapses and possible diminished physiological responsiveness to subsequent doses when given episodically as is now the usual custom. Only when, after a long symptom-free interval, assuming new symptoms have not appeared, the patient again displays the original symptoms is the remedy stopped, after which, typically the symptoms again subside and a cure is usually considered to have been completed.

One additional and intriguing strategy of repertorization demands comment—when analyzing TBR repertorization results, Dimitriadis ranks highest those remedies displaying both the highest number of rubrics

and, surprisingly the greatest consistency of remedy grading through the rubrics chosen. Preference is given to those remedies whose symptom grades vary by no more than one degree. Thus, if a particular repertorization revealed two remedies with highly consistent grading, one scoring all fourth and third degree grades and the other all first and second degree grades, with several remedies possessing many rubrics in high grade but also many of lower grade and much variation, his analysis would focus especially on the two most consistently graded remedies, high and low Experience has shown that the materia medica of remedies with the most consistent grading tends to possess a greater similarity to the case at hand than do remedies with highly variable grading.

While I took issue with the author’s prescribing decisions on a few cases overall the clinical cases offered clear and rather compelling evidence of the utility of TBR. I believe the resurrection of this repertory will help many practitioners solve many many cases. One such instance of great utility I believe is the case that presents only a few very common symptoms or conditions. Such cases typically present considerable problems in trying to narrow down the vast range of remedy possibilities, lacking any highly characteristic symptoms of any remedy Dimitriadis presents several cases of this nature.

The book closes with three interesting appendices— “The Sources of Our Materia medica,” “Primary & Secondary Reactions,” and “Facsimiles: The Repertorial Lineage of TBR.” The cover consists of a simple dark blue field with white lettering; the paper is of good quality and the print easy to read even though it is often quite small—there’s a lot of information packed in these 159 pages. Unfortunately there is no index.

I strongly recommend this book to all practicing homeopaths and homeopathic students. I believe that it will some day be regarded as a classic homeopathic text. “Homœopathic Diagnosis” is a work of impeccable scholarship and a perfect companion piece to TBR, almost essential, in my opinion, for the proper application of TBR.