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Understanding About Clinical Verification

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Abstract:

Homoeopathic materia medica is built upon the sign and symptom produces during proving of drug on healthy human volunteers, toxic effects as observed during prolonged use of the drug. Dr. Hahnemann was aware of the need to clinically verify the proving symptom on sick person. Clinical verification to update the materia medica

Keywords: Clinical Verification; Phases; Homoeopathic.

Introduction:

Some medicines produce many symptoms on nearly the entire healthy human body during homeopathic drug proving (controlled human pathogenetic trials), which often correspond to the morbid symptoms commonly met with; hence they admit of frequent homoeopathic employment and often do well. Hahnemann termed these remedies of many uses, both in acute and chronic morbid conditions.¹To observe with respect to medicine: The various clinical conditions in which it was prescribed; Posology; The minimum time of favorable response to the remedy in various clinical conditions; The mean time of recovery in each diagnostic condition, and The therapeutic outcome.²

Three phase for clinical verification:

Phase 1 Following a decision to collect and analyses clinical data related to one homeopathic medicine (to be specified). The factors listed below will be described as completely as possible from the literature and existing knowledge of the remedy: Listing, study and analysis of existing homeopathic proving(s) of the medicine concerned.² Classification of symptoms:

A1 generated by toxicological studies; A2 described by sensitive prover(s)

B1 clinical or local symptom(s); B2 chronic symptom(s).

Symptom evaluation: V1 number of provers (validated symptom); V2 accuracy of symptom's description; V3 unknown or unspecified.

Grouping of the symptoms; G1 anatomical symptoms; G2 meaning (essence -spirit- remedy problem); Stage (dynamic of the remedy)³

Phase 2

Clinical data collection: the level of the data collection is collection of clinical symptom not present in homoeopathic pathogenic trials.

Essential elements are: Age and sex; Must have a single remedy; Possible doubt, reasons of acceptance must be justifiable. All possible concomitant must be mention and detail description of intervention; only one or a few symptoms; syndrome; general improvement (local and general symptoms including general well being); global (physical, general and mind); behavioral (the global effect is accompanied with positive changes in behaviour); The reasons for the initial choice of the medicine will be described: examples: keynote(s); aetiologic circumstances; clinical indications; global or mind oriented repertotisation; 'meaning' of patient's problems (essence, spirit, remedy problem); More than one reason is possible for a case. Details of the e symptom(s) and its disappearance should be recorded, including; timing (histopathography); recurrence(s); results of a second prescription; confirmation(s) by other case(s).⁵

Phase3:

Analysis of data by the organizers of data; Factual: symptom originality; Anatomically; Keywords: for later comparison of gathered symptom for each other; Two separate lists will be generated for verified old and new symptom ;Grouping: symptoms will be grouped together in different sets, possible links between different symptoms are checked; Meaning: looking all these 'sets of symptoms' possible remedy 'picture(s)' could be proposed , a new framework of understanding for the remedy could emerge from this analysis;⁶ Evaluation: especially for new symptoms, the value of the symptom would be scrutinised (frequency of occurrence-accuracy) before possible inclusion within the framework of knowledge of the remedy.⁷

Conclusion:

Though the homoeopathic materia medica by stalwarts is irreplaceable, their clinical sections require a scientific appraisal. This work is a first attempt to identify the clinical conditions; gauge the posology and remedy response time as well as therapeutic outcome. Further multi-centric studies with more scientific rigour can validate as well as clinically verify the symptomatology.

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