

ELIMINATING PROCESS OF REPERTORISATION

One may claim that a few or some practitioners, who have profound knowledge of Materia Medica and endowed with prodigious memory are only able to prescribe successfully for cases, without the Repertory, but this type of memory is very rare to find, not generally marked with average Homoeopaths.

It is sure the task of remembering the vast Materia Medica containing myriad of symptoms is hopeless. Therefore, some form of reference book is quite necessary.

Here I quote J. H. Clarke saying " It is impossible to practice Homoeopathy as it should be practiced without the aid of Repertory".

Grimmer says " Repertory prescribing makes for greater accuracy and in the long run it is a time saver and with its use one grows in the knowledge of Materia Medica "

Next problem comes to our mind what is the process of doing this ? In this context Kent says- "The mechanical use of the Repertory never leads to artistic prescribing nor to remarkable result." Again he says, "We must study the Repertory until we learn how to use it so that we can find what we want & when we need it."

There are different methods & techniques of Repertorisation like

- a. Old method (using plain paper sheet)
- b. Modern methods like
 - i. Total Addition Process
 - ii. Eliminating Process
 - iii. Mechanical Process

Let us now discuss in length & breadth regarding *Elimination Process of Repertorisation*.

Explanation

This is the process where a most important symptom of the case is selected without which one cannot think of a prescription, preferably a *General symptom*.

This unexpected/uncommon/striking/singular/peculiar/queer/rare/strange symptoms should be placed on the top and the rest of the symptoms are placed below it, according to hierarchy. During Repertorisation only those drugs which covers the first symptoms are to be taken. Further rubrics can be referred to and marks added to those medicines only.

Some prefer to use second rubric also, while others even the third. There are also some physicians who use all rubrics till the end of the eliminating process.

Precautions to be observed while Repertorising with this process

1. Proper analysis/evaluation of the case is required, otherwise the eliminating process would be disastrous.

2. Hierarchy of symptoms should be adequately accurate.
3. However important the rubric may be that should not be taken for the purpose of eliminating process if it has only one of fewer drugs.
4. Preferably Generals should be used for this purpose

Advantages

1. First of evaluation of symptoms is strictly practiced then eliminating process will be marvelous.
2. First if hierarchy of symptoms are accurate adequately then the elimination process which will yield a transparent repertorial result.
3. First of all the rubric containing one or few medicines are avoided then justifiably one can reach a similimum.
4. As General symptoms are used for the purpose, it depicts the man as a whole not the part, Therefore on principle it is quite rational / acceptable dictum.
5. It is one of the process for systematic working out of a case, hence no ambiguity in the genuineness of it,
6. It is easy to practice with this process.
7. It is less confusing.
8. It is one of the modern method among other working techniques which are suggested for busy practitioner as it is time saving
9. physician gets acquainted with important rubrics and their drugs.

Disadvantages

1. Wrong evaluation of the case will lead to disastrous result.
2. As it is difficult to choose accurately the hierachial of symptoms the process will be dangerous.
3. While handling Kent's Repertory very often the individualising symptoms will have limited drugs. Therefore this process of Repertorisation will be misleading one.
4. Second prescription will require further Repertorisation.
5. Only polychrest drugs will be selected, as the general symptoms are preferred.
6. As there is scope in individualising features to take this process
 - It is sure a lot of subrubrics / sub-rubrics of Ken't cannot be used.
 - Lesser known drugs cannot be discovered to the horizon of our eportorial result
7. No scope for giving credence to the magnitude of symptoms in patient.
8. Complete symptom study concept will disappear from this kind of practice.

Conclusion

From above study it is envisaged that when there is day there is night, when there is happiness, there is unhappiness and when there are advantages, so also in "Elimination Process of Repertorisation" too. However, it is a modern process of Repertorisation, where there is scope for analysis / evaluation of symptoms and one gets acquainted with important rubrics and their drugs from Repertory. This Method of Repertorisation is easy / time saving / less confusing and can be a tool for busy practitioner.