

## **The use of manual and computer aided search methods in the homeopathic repertory**

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## **Abstract**

This document describes the importance of the structure of the homeopathic repertory and its negative aspects in the computer model of the homeopathic repertory and the comparison of the manual search in the repertory structure and the computer search routine.

## **Introduction**

The basis for the decision-making process during the homeopathic prescription is the information. The correct prescription depends on the quality, validity and availability of the information.

The primary source of information in homeopathy is the Materia Medica. The Materia Medica contains all information about homeopathic remedies that have been discovered during homeopathic provings, research, and clinical information or by other means. Although the Materia Medica contains huge amounts of information, its uses during the homeopathic prescription are very limited.

The basic drawbacks of the Materia Medica are:

- Large amounts of information cannot be completely and effectively perceived
- The use of one Materia Medica provides only incomplete information
- The use of many Materia Medicae provides duplicate information
- The search through Materia Medicae is very time-consuming
- The language of the Materia Medicae is not consistent (different authors of Materia Medicae use different words to describe the same meanings)
- The Materia Medicae contain the information in the primary form and in order to search for the occurrence of a specific symptom, the homeopath would have to search through the whole content of the Materia Medica

As the amount of available information increased, the need for a more effective structuring of huge amounts of information has become more important.

The homeopathic repertory has solved some of the problems posed by the use of Materia Medicae as the primary source of information. It re-structured the information in a way that could be more effectively used by in the process of the homeopathic prescribing.

### The structure of information in the homeopathic repertory

In *Materia Medicae*, each section that was dedicated to a specific remedy contained all the known information about the remedy and its symptoms. If the homeopath wanted to find all remedies, that contained a specific symptom, he had to search through the whole *Materia Medica* content.

In *Materia Medica*, one remedy contains the list of all its symptoms. In the homeopathic repertory, one symptom contains the list of all symptom-specific remedies. Therefore, the homeopathic repertory can be described as a “reversed *Materia Medica*”. The informational structure of the repertory is the reversed informational structure of the *Materia Medica*.

The homeopathic repertory is by the means of the reversed structure very useful and effective in the process of remedy prescription. The homeopath can select the symptoms of the patient and he should be able to perceive all relevant homeopathic remedies.

Although the reversed informational structure of the homeopathic repertory solves some of the problems connected with the use of *Materia Medicae*, it does not solve all the problems and creates its own specific problems.

### Categorization of symptoms and the structure of repertory

Although the categorization of symptoms was necessary in the time of the book versions of repertory and it has made the effective repertorization possible, as the amount of symptom increased, the categorization ceased to solve the problem of effective perception of large amounts of information.

#### Example <sup>1</sup>:

Rubric	Number of sub-rubrics
Extremities	29,159
Extremities, phenomena, pain	14,705
Extremities, phenomena, pain, lower limbs	2,792
Abdomen	11,127
Abdomen, phenomena, pain	7,070
Abdomen, phenomena, pain, cramping	835

As we can see, the amount of data in the repertory has reached a limit, where even the structure of the repertory has failed to solve the problem of effective categorization of information.

If the homeopath would search for the pain in the lower limbs, he would have to make decision between 2,792 different symptoms differing in the location, or the type of pain.

The cramping pain in the abdomen encompasses 835 different modalities, which would have to be reviewed before a selection of the correct symptom could be accomplished.

This leads to a conclusion, that although the use of structuralization of data can solve the problem of effectively perceiving large amounts of data, this solution is not a permanent one and as the number of data increases, the usability of the structuralization decreases. The decrease of the usability of the structuralization of data is caused by increasing complexity of the structure.

#### Table:

	<i>Kent's Repertory</i>	<i>Complete Repertory 4.5</i>	<i>Complete Repertory 2003</i>	<i>Repertorium Universale III</i>
<b>Number of symptoms</b>	64,096	125,583	147,078	153,828

As we can see from the table, the natural evaluation of the repertory means the increasing complexity of the repertory structure. The number of symptoms (as an indication of the complexity of the structure) in the Repertorium Universale III in comparison with the Kent's repertory has increased by approximately 140 %.

As the complexity of the structure increases, the method of categorizing and structuralizing as a solution for the effective perception of data becomes less and less effective. The human being is usually unable to work within ever-growing large structure of data, since the structure itself is too complex.

### **Requirements for the effective use of the structuralized repertory without the use of a computer aided search algorithm**

The repertory structure, similar to every other system, has its internal rules. These rules exist in order to retain the consistency of the contained data. Although the internal rules, by which the structure is formed, solve the problem of the data consistency, it poses a problem for the homeopath.

Every homeopath who wants to work with the repertory structure without the use of a computer aided search algorithm has to know and understand the internal rules and the repertory structure. Without the knowledge of the repertory structure and the internal rules or without the use of a computer aided search algorithm the homeopath cannot work effectively with the repertory. Without the knowledge of the repertory structure, the homeopath would not be able to find correct phenomena, modalities, and rubrics.

The fact, that in order to work with the repertory, the homeopath has to learn the repertory structure poses an unnecessary problem for the beginning homeopaths. The beginning homeopaths need more time before they can start prescribing with the use of the repertory. Another problem is that when the structure of the repertory changes, all homeopaths have to learn the new repertory structure, which is a time-consuming and unnecessary process.

### **Limitations of the repertory structure**

Repertory structure, like every fixed system, has its limitations. Because the structure of the repertory is not perfect, there is a risk, that because of the fixed structure, the homeopath will not always find desired symptoms.

If the symptom consists of more locations, it is uncertain, where the symptom will be located in the repertory.

#### **Example:**

**Pain in temples with coryza**, is located in the symptom:

„**Nose, phenomena, coryza, general pain in, temples, with**“, but it is not located in the section of „**Head, phenomena, pain**“.

If the homeopath would search for this combined symptom, he would have to search both in the section „**Nose, phenomena, coryza**“, as well as in the section „**Head, phenomena, pain**“.

**Hoarseness with the pain in the throat** is located in the symptom: „**Throat, phenomena, pain, hoarseness, with**“ and not in the section of „**Speech & voice, phenomena, voice**“.

In this case, the homeopath could choose the symptom „**Speech & voice, phenomena, voice, hoarseness**“ without knowing that the combined symptom that exactly characterizes the problem exists in the repertory.

### **Solution of the problem**

Although the computer version of the homeopathic repertory offers many possibilities of intelligent search through symptoms, most homeopathic software treat the repertory as a book version, which is located inside of the computer. They offer no additional functionality in comparison with the book version of the repertory.

The homeopaths use the computer version of the repertory exactly as they would use a book version of the repertory. They rely on the fixed repertory structure and browse through the repertory structure exactly as if they would read a book. This method can be usable for the simple repertorization process or in case that the homeopath has an excellent knowledge of the repertory structure.

Yet as the computer model of repertory allows for a more sophisticated search algorithms, the structure of the repertory becomes less important. It ceases to be important whether the homeopath has any knowledge of the repertory structure and its internal rules. This enables easier prescription even for beginning homeopaths.

### Example:

The **Pain in temples with coryza** would have to be (for a homeopath without the knowledge of the repertory structure) unsuccessfully searched within the section „**Head, phenomena, pain**“ and the homeopath that has an excellent knowledge of the repertory structure would in the end possibly find the symptom in the section „**Nose, phenomena, coryza**“.

By entering a search line „**coryza pain temple**„ in the Mercurius, the homeopath finds only the correct symptom without the knowledge of the repertory or without the performing a manual search within the structure. With the help of the advanced searching method in the Mercurius, even the homeopath without any knowledge of the repertory structure is able to find the correct symptom.

**Hoarseness with the pain in the throat** would have to be searched within „**Throat, phenomena, pain, hoarseness, with**“ or in the section of „**Speech & voice, phenomena, voice**“.

In this case, the homeopath could choose the symptom „**Speech & voice, phenomena, voice, hoarseness**“, without knowing that the combined symptom, that exactly characterizes the problem, exists in the repertory.

By entering a search line „**hoars throat pain**„ in the Mercurius, the homeopath finds only the correct symptom.

As we can see from the previous examples, the repertory structure without the use of a computer searching model poses certain problems and does not allow an effective searching. Furthermore, the homeopath who works with the repertory structure needs to have a very good knowledge of the structure and has to update his knowledge every time the structure changes. The computer search model removes these problems and enables the homeopath to concentrate on the more important parts of the prescribing process.

### Conclusion

The existence and the good orientation in the repertory structure was very important in the times, when only the book versions of the repertory existed and when there was no possibility of computer based search routines. As the repertory structure has become more and more complex, and together with the changes in the repertory structure of the modern repertories, the perfect orientation in the repertory structure has become more difficult.

The main problem in manual searching within the repertory structure is that the huge and very complex structure creates a too big picture that cannot be perceived by a human being in its entirety and complexity. The searching capability allows to instantly find and perceive only the **relevant** portion of the structure, so that the homeopath can focus on analyzing only the information that is relevant to him. The computer aided search removes also the problems caused by the limitations of the fixed structure (see example) and the homeopath can perceive more easily all the information that is relevant to him without any limitations.

The manual search within the ever-growing and constantly changing repertory structure has become more difficult and with the existence of sophisticated search algorithms, such as the ones in the Mercurius homeopathic software has made the manual search through the repertory obsolete. The

manual search without the perfect knowledge of a extremely complex data structure of the repertory returns only incomplete information that cannot be used as a basis for an accurate repertorization.

The advanced search algorithms in the Mercurius homeopathic software remove the limitations of the repertory structure (as discussed in this article) and serve as a basis for accurate repertorization for professional homeopaths as well as for the beginners.