

Materia Medica Pura Project

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Abstract: Many of the characteristic symptoms of most of our homeopathic remedies have yet to be incorporated into our materia medicas and repertories. The Materia Medica Pura Project, instigated by Dr. Saine and aided by the efforts of sixteen working groups in Europe and North America, is a project in process with the important goals, among others, of creating a summary of the most characteristic symptoms of lesser-known remedies and better developing the genius of our better-known remedies, and improving the thoroughness and accuracy of our repertory. In depth research is underway to achieve this goal, consisting of a thorough review of reliable provings, toxicology, cured cases and cumulative clinical experience.

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Introduction

The Materia Medica Pura Project originally began as a series of lectures on Illustrated Comparative Materia Medica Pura that have been offered in Niendorf, Germany and Montreal since 2005 and 2006, respectively. Over time, the preparation of these lectures has evolved into a revision of the homeopathic literature on each remedy taught. The ultimate objective of these lectures is to improve the clinical success of the homeopathic practitioner by making a review of the knowledge our profession has accumulated on a particular remedy, and updating our materia medica and repertories to render them more complete and accurate.

Materia medica and repertories are the most important tools of the homeopathic practitioner. As a profession, we have been neglectful in not keeping them updated with the ever-increasing knowledge of new provings, toxicology, cured cases and cumulative clinical experience. The words Hahnemann addressed to the French society of homeopaths when he moved to Paris in 1835 are very pertinent in this context, "When we have to do with an art whose end is the saving of humankind, any neglect to make ourselves masters of it, becomes a crime."

It would not be far from the truth to say that, on average, close to thirty percent of the characteristic symptoms of most of our remedies have **not** yet been incorporated into our materia medica and repertories. And many remedies have less than fifty percent of their characteristic symptoms represented in our repertories. Many remedies are unlikely to ever be prescribed even if they are clearly called for, simply because such remedies are not thought of, as they don't

frequently appear in the rubrics of our repertories.

Moreover, characteristic symptoms of better-known and older remedies are often not found in our repertories. For instance, about 1,500 additions have been made to the repertory in the study of *Nitricum acidum*, and more than 3,000 and 800 additions have been entered in the repertory for *Plumbum metallicum* and *Ipecachuana*, respectively.

As a rule, we can assume that everything published since Hering's *Guiding Symptoms* or Allen's *Encyclopedia* has not been incorporated into our materia medica or repertories. However, even from the oldest sources, as Hahnemann's *Materia Medica Pura* and *Chronic Diseases*, some characteristic symptoms of remedies have not yet found their way into our repertories.

To date, I have been the only one preparing these lecture notes for the Niendorf and Montreal courses. However, as this greatly needed revision of our materia medica and subsequent updating of our repertories was too much for any one individual to undertake, the Materia Medica Pura Project was initiated. Working groups were formed with participants from these courses who had the task to pick up part of this workload. In total, at this moment, we have sixteen working groups, seven in Europe and nine in North America, and close to one hundred participants of the courses. Each group has a leader directing and supervising the work being done. I have personally trained all the leaders of these groups. A team is composed of four to twelve participants.

Objectives

The main objectives of this project are:

- 1) To index our literature.
- 2) To collect as many known *reliable* provings, toxicology reports, clinical experience and cured cases of a remedy. Untrustworthy sources are not considered.
- 3) To read in a chronological order all the data accumulated on a remedy and transcribe for the lecture notes the most characteristic symptoms. The order in which the remedies are studied is established by their similarity to one of the twenty-four of our most used remedies. To date, 539 remedies can be found on the list of remedies to be studied.
- 4) To organize the symptomatology retained for the lecture notes in the Hahnemannian scheme, namely from above down and inside out.
- 5) To transcribe in a chronological order all *genuine* cured cases at the end of the symptomatology of a remedy.
- 6) To grade the most characteristic symptoms with *italics*, bold and bold underlined both in the symptomatology and cured cases of a remedy.
- 7) To integrate the information in the repertory and, at the same time, create repertorization clipboards of the different sections of a lecture, as indicated in the lecture notes.
- 8) To create a summary of the most characteristic symptoms of lesser-known remedies, or to develop the genius of better-known remedies.

End product

Before describing what the end product looks like, I will first mention what it is not:

- 1) It is not a work of ultimate precision. For instance, it is not always possible to obtain the exact reference of an original work without spending undue time researching the original primary source; *i.e.*, searching for the original publication of a case of Hesse referred to by Hoyne in his *Clinical Therapeutics*.
- 2) It is not a work of ultimate purity. A very small percentage of artifacts could creep into such a materia medica, as has always been the case in a homeopathic materia medica that relies on primary sources, namely the original provings and genuine cured cases. It is, however, important to realize, as Hering mentioned, that the inclusion of such artifacts is inevitable, and, to which Lippe rightly pointed out, it is better to let in three doubtful symptoms in order to save one true symptom.
- 3) It is not a work devoid of grammatical or spelling mistakes, as it is essentially composed of lecture notes, which were originally made available to participants of these lectures and are now made available to the profession at large.
- 4) It is not a complete work, as it is not possible to consult all the sources in all the languages. The best

known and most accessible sources are consulted first; the others will be consulted later, as time and resource availability permit.

- 5) It is not a printed work, as the work is in a constant state of being upgraded.

Now, let's look what the end product is:

- 1) It is, above all, a practical work, which should greatly help the busy practitioner to become a more accurate prescriber.
- 2) It is a materia medica in English that is available in a digital format only, as it will continually be updated with new provings, toxicology, cured cases and clinical experience.
- 3) It is a user-friendly materia medica, as
 - a) It is well organized in the Hahnemannian scheme.
 - b) Its most characteristic symptoms are appropriately graded.
 - c) The summary of the most characteristic symptoms, or genius of a remedy, provides the practitioner with a quick, concise and precise overview of a remedy.
- 4) The cumulative experience of our most reliable practitioners and authors is assembled in one text.
- 5) All symptoms are referenced to only with the author's name or identification number, and not their particular works. For instance, reference number 36 is given to identify T.F. Allen, even though the text referenced could come from his *Encyclopedia, Handbook* or a journal article. More precise references with the journal name, year, volume and page number are given to the cases added at the end of materia medica part of the lecture.
- 6) It greatly augments our knowledge of our materia medica.
- 7) Through time you can follow the evolution of any particular remedy, which is often perceived in a completely new light and should from now on be prescribed more accurately.
- 8) By making our repertories reflect our literature, the repertories become much more efficacious in pointing to the most similar remedies to be studied during case analysis.
- 9) The repertorization clipboards become a very useful tool for:
 - a) Learning how to transpose the language of the materia medica into the language of the repertory.
 - b) Comparing a remedy with other ones. For instance, one could look at the respiratory symptoms of *Ipecachuana* and compare them with those of *Lobelia inflata*, and quickly see the main differentiating points, or switch repertorization clipboards to their mental pictures, or their geniuses, etc., and reverse the process by comparing the symptomatology of *Lobelia* through the repertorization clipboards to that of *Ipecachuana*. Any aspect of a remedy can

thus be compared with any other remedy by using the repertorization clipboards in this way.

The final work resembles:

1) Hering's *Guiding Symptoms*, as we include as many characteristic clinical syndromes in the materia medica.

2) Tyler's *Drug Pictures*, because we quote many authors in their own words.

3) Clarke's *Dictionary*, as we relate anecdotes and provide a summary or genius of a remedy, as it is found in the *Characteristics* heading of his *Dictionary*.

But at the end it is a unique work because:

1) In Hering's *Guiding Symptoms*, the clinical picture of cases is summarized and we provide a fuller description of the context of each case, which enhances the richness and value of clinical cases.

2) We include as many reliable clinical cases to enhance the overall picture of a remedy. Hering mentioned, "Characteristics will grow out of these cured cases, like fruit on a tree. Characteristics will give us the first basis to measure the value and importance of all the symptoms of each drug." He referred thus to the "harvest" time of a remedy, which arrives when we are able to assemble about a remedy "the united experience of all."

3) The summary or genius, composed of the most distinctive features of a remedy, emerges after looking at all the available provings and cured cases, providing a new, fresh, more accurate and complete picture of a remedy. This can only be achieved once we have examined all the facts at our disposal. This is better done by reading all the material in a chronological order to better appreciate newly emerging characteristic aspects of a remedy. To perceive the genius of a remedy in all its complexity is one of the most important and most

rewarding tasks in studying a remedy with this method.

4) An important derivative of this work is a wealth of repertory additions that reflect the cumulative knowledge of the characteristic symptoms of a remedy to be found in these lecture notes.

5) And finally, knowledge of comparative materia medica is facilitated by the use of the incredible tool of repertorization clipboards, each pertaining to the different aspects of a remedy.

Conclusion

In conclusion, this Materia Medica Pura Project is a work in progress which is turning out an essential clinical tool. The time of "harvest" of a remedy, referred to by Hering, arrives when we are finally able to assemble all the cumulative clinical experience with all the characteristic symptoms found in the provings, intoxication reports and cured cases, thus developing a more comprehensive and precise picture of the remedy. The harvest of many of our remedies can now be found in this work. The true genius of a remedy finally emerges, one that is clear, accurate and reliable. Finally, upgrading our repertories to reflect our materia medica is a major step toward improving the overall clinical accuracy of the entire profession.

About the Author: Andre Saine, ND, DHANP, is the Dean of the Canadian College of Homeopathy. Dr. Saine has been busy for many years editing the voluminous work of Dr. Adolph Lippe, which will be published as a book entitled "Lessons in Pure Homeopathy, from the Writings of Hahnemann's Best Student and Medicine's Most Successful Practitioner, Adolph Lippe, M.D." The release date of this work will be announced at www.homeopathy.ca. Dr. Saine practices pure homeopathy in Montreal.

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