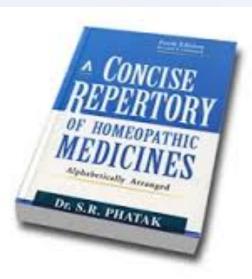
Phatak repertory A CONCISE REPERTORY OF HOMOEOPATHIC MEDICINES

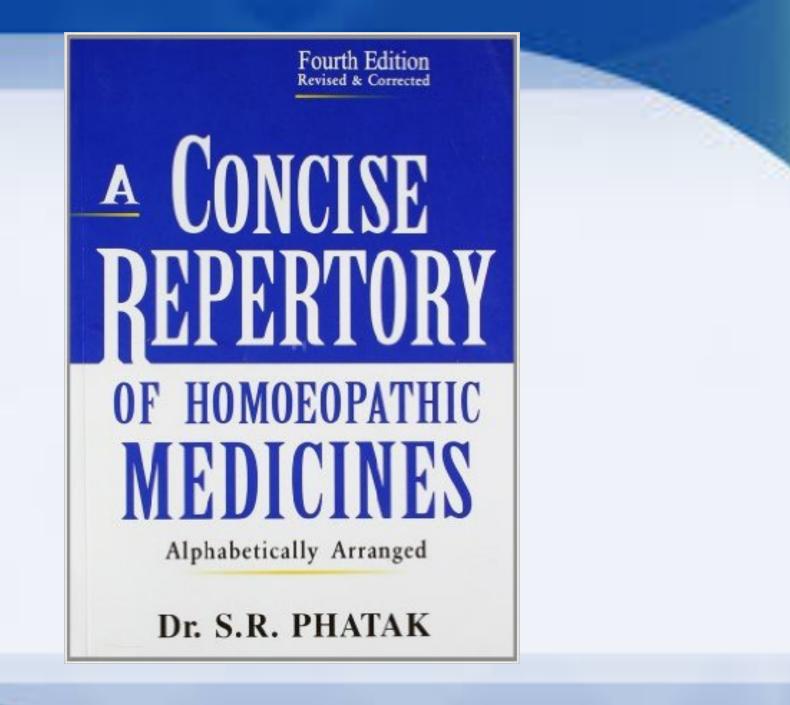


K.K.RATHIBHA 3RD MD CR

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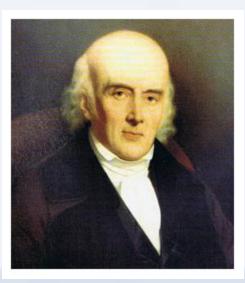
DR.S R PHATAK





Its place....

- one of the most reliable alphabetical repertory
- Aimed at reducing the burden of prescriber, in every sense of the word



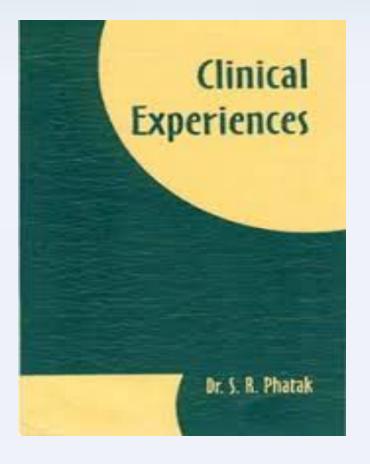
- Glazor-First alphabetical pocket repertory-Leipzig-1833
- Clofar Muller- Systematic alphabetical repertory-1848
- Bryant-An alphabetical repertory-New York-1851
- Homoeopathic medical repertory- Dr. Robin Murphy-1993 (Chapters in alphabetical order)

- Dr. S.R. Phatak was basically an allopathic doctor with M.B.B.S.
- He had sound knowledge in organon, Materia Medica and various repertories



OTHER WORKS

- **1. Repertory of Biochemic remedies**
- 2. Homoeopathic Materia medica and Repertory of Homoeopathic medicines(in Marathi)
- 3. Materia medica of Homeopathic medicines



Arranged Alphabetically with Many Additions

Phatak's REPERTORY of the BIOCHEMIC REMEDIES

Dr. S. R. Phatak



Materia Medica of Homoeopathic Medicines

Second Edition-Revised & Enlarged

Dr. S.R. Phatak

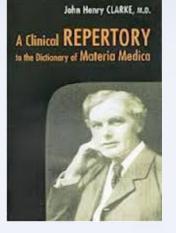
beginning.....

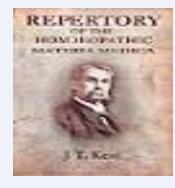
- got the idea of alphabetical repertory while teaching his fellow doctors.
- felt that repertory should be concise, handy and useful for ready reference.
- It should reduce the difficulty of the physician in searching a rubric.
- included rubrics duly verified by him.
- does not take the place of exhaustive repertory like Kent's or Boenninghausen's repertory.

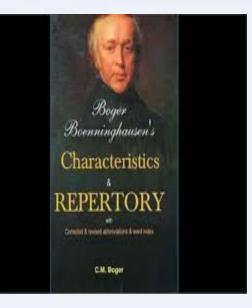
- Name of book A CONCISE REPERTORY OF HOMOEOPATIC MEDICINES alphabetically arranged .
- Latest edition 4th- revised and corrected by Dr. C . Jeevanandam
- Published by- **B JAIN** P PUBLISHERS
- USA-EUROPE-INDIA
- Dedicated to his friend SL . Kapadi

Relied on....

- Dr. Kent
- Dr. Boger
- Dr.Clarke





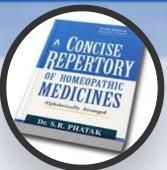


- Remedies are reduced to minimum possible .
- No drug is given unless the author has used it in his own practice or unless there is strong justification provided for it, by authorities like
- Dr. Boger
- Dr. Kent
- Dr. Clarke



 Every remedy high grade or low grade is equally important when it is connected with concomitant or with an unusual modalities ...





<u>Story</u>

- **Dr.phatak** had idea of preparing a repertory
- fragile health prevented him.
- Mr.S.L. Kapadi, took rough draft and notes of his Marathy repertory and formed skeletal copy.
- author arranged the work properly and made many additions.
- Dr. Homai Merchant typed this hand written copy.
- This copy was lying on authors table for nearly 10 years.

First edition- 1963

- Mr. Kapadi author's son Dr.D.S. Phatak
- They went through all the sections did the preliminary works and with the help of Mr. Datay first edition was printed in September 1963 at Mouj Printing press.

PREFACE TO THE FIRST EDITION

- Aim of this book as a handy and useful reference book
- It is an attempt to lessen difficulties of the prescriber
- Remedies for particular rubrics are reduced to minimum
- No medicine given unless the author has used it in his own clinical practice or from genuine authorities like Boger, Kent, Clark etc

After first edition...

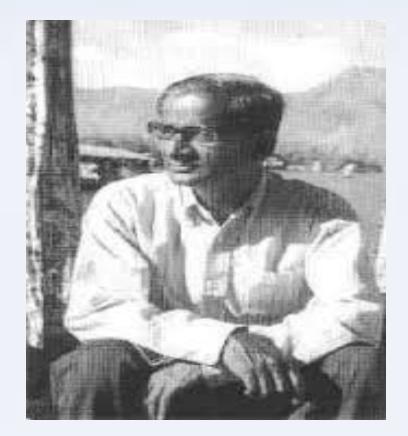
- compiled a Materia medica
- Extracts of Materia medica of Boger, Boericke, Clark, Hering and Kent.
- he found many clinical and pathological symptoms



Second edition-1977

- Clinical and pathological symptoms added
- 1977- October
- with the help of Dr. P. Sankaran (Jakap Printers).
- Due to demand this book went for reprint edition.

Dr. P sankaran



PREFACE TO 2ND EDITION

- Author had gone through mms of HERING, CLARKE, BOGER, BOERICKE, KENT
- Many clinical and pathological symptoms are added
- This repertory was well received in America and England
- 2nd edition was published by his friend Dr.P Sankaran-expresses his gratitude.....
- Given thanks to Dr. miss Homai for typing the manuscript

3rd edition-2000

- 23 years after 2nd E
- additions by Dr. D.S. Phatak
- in **2000**
- B Jain Publishers
- additions by Dr. D.S. Phatak marked with + sign.
- Eg. Abdomen pain + coffee amel.

- No of pages are increased
- Given thanks to B Jain publishers
- PUBLISHERS NOTE 4TH EDITION -column begins as by Kuldeep Jain
- It is the alphabetized re working of Boger and Boenninghausen

CHANGES IN 4TH EDITION-2005

- 5 levels of rubrics are there
- In each level symptoms of previous level is repeated
- Natural language has been maintained as far as possible
- Though alphabetical, under rubrics of major organs location → complaints → sensation order is followed
- Locations right \rightarrow left

- For stool, meses etc, before, during and after are give
- 2 types of alternating symptoms
- Alternating sides -same organ/location and other organs/ locations
- Additions are marked by + sign



- Gradations are the same
- Abbreviations are like Boger
- cross references- same level rubricsroman, different levels- CAPITALS
- General agg rubric-CAPITAL, particularordinary
- each column begins with full details of the rubric

Editions

- First edition: 1963
- Second edition: 1977
- Third edition: 2000
- Fourth revised edition: 2005

Gradations

- 3 grades like Kent
- First grade-CAPITAL
- Second grade---- italics
 - Third grade--- roman

Plan of construction

- printed in **2** columns in each page
- Unlike in Kent and Boenninghausen there are no sections in repertory.
- All the headings are arranged alphabetically
- repertory begins with Abdomen: affections in general and ends in Zygomae.

FEVER

154

FIGWARTS

FEVER, night agg FEVER, sweat · Periodically: Flu-ac. Noise, from: Bry. One sided: Alu; Bry; Cham; Dig; Lyc; Mos; Nux-v; Par; Pul. · Right: Alu: Brv+: Cham+: Pho. · Left: Lyc: Rhus-t: Stan. · Lain on: Mag-m. Oscillating: Chel; Chin-ar; Echi; Pyro; Sul-ac; Ver-v; Zin. Pain, from: Carb-v: Cham. Abdomen, in: Sec. Painful: Bry; Canth; Rhus-t. Painless: Pho; Pho-ac. Paroxysms, irregular: Ars; Nux-v; Psor; Pul; Sep. Puerperal: See PUERPERAL sepsis. Pulsations, with: Urt. Relapsing: Calc; Fer; Psor; Sul; Tub. Remittent: Aco; Ars; Bell; Bry; Cham; Gel; Merc. · Bilious: Merc-d. Infantile: Ip. Septic: See BLOOD SEPSIS. Shivering, with: Arn; Caus; Gel; Kali-io; Nux-v; Sul. Sleep · Agg: Calad; Mez; Op; Samb. · Amel: Calad; Pho; Sep. Stupid form: Bap; Carb-v; Hell; Hyo; Mur-ac; Op; Pho-ac. Subnormal, persistent: Cact; Chin-s; Kali-p; Nat-sal. Suppression, from: Cham: Merc.

Sweat Absent: Ars; Bell; Bry; Cact; Gel; Nux-m; Scil.

 Amel: Ars; Lyc; Rhus-t. · Thighs on, with: Spo. - cold: Caps.

· With, continues, after: Calc; Chin: Hell: Merc: Op: Pho: Pho-ac; Pul; Pyro; Stram; Sul; Tub; Ver-v.

Then sweat, then chilliness: Calad; Kali-bi.

Thirst, without: Cham; Cina; Ign: Pul.

Traumatic: Cof.

Vertigo, with: Urt.

Weakness disproportionate+: Sul-ac.

Yellow: Ars; Cadm; Canth; Carb-v; Crot-h; Nux-v.

FIBROID (See GROWTHS, new): CALC; Calc-f; Calc-s; Con; Grap; Kali-br+; Pho; Sil; Thyr+; Tril; Ust.

Bleeding: Bur-p; Calc; Hyds; Led; Nit-ac; Pho; Sul-ac; Tril; Vinc.

Burning: Lap-alb.

Cramps, with+: Bur-p.

Hard, stony: Merc-i-r.

FIBROID TISSUE, ligaments: Bry; Calc; Calc-f; Colch; FLU-AC; Grap; GUAI; Kali-m; Lyc; Phyt; Rhod; RHUS-T; Rut; Sabi; Sec; Sil; Stap.

FICKLE: See PERSEVERE. cannot.

FIDGETY: Ap; Bor; Cimi; Grap; Kali-br; Meny; Pod; Sep; Sil; Sumb: Tarn; Vib.

Women, urinary troubles, with: Meny.

- All the physiological or pathological conditions, mental symptoms, generals, particulars are arranged alphabetically.
- Cross references are given where ever necessary. eg: Sarcoma-see Fungus growths.
- To every symptom modalities and concomitants are given

Modalities...

- General -capitals AGG OR AMEL
- particular small letters Agg or Amel
- Eg: eyes closing AGG (general agg)
- Eyes cold application Agg (particular modality)

Generalisations.....

- Appreciates Boger for his remarkable ability for generalizing a symptom
- Eg. Awkwardness is given in Kent -EXTREMITIES, Boger raised it to mental and physical, a person can be awkward mentally as well as physically

New rubrics...

- Dr.phatak coined new rubrics
- eg. unsteady sensation
- this patient whenever he used to stand more than a few minutes , used to feel unsteady

Some practical/ tips.....

- Modalities and concomitants are most important in a case
- Advised leraning of mm along with repertory
- Holding breath amel. Is a rubric from BTP, author used this in a case of TAO
- Every remedy, high or low grade is important
- He believed in QUALITATIVE TOTALITY

- All modalities are not important
- Positional modalities are most important eg strange positions (unusual modalities)
- Modalities which are not related with the disease are most valuable

A case.....

- In a case of peripheral neuritis (non DM), patient had pain in both legs amel moving , patient had amel from belching and passing flatus.
- He raised this symptom to general
- took rubric passing flatus up and down amel. From Boger rep.

- Desires and cravings are two separate rubrics
- Under desires.....all mental rubrics. Eg: desire: change, always more than she needs
- Under cravings.....regarding food and drinks.
 - Eg: craving: coffee, black ashes

- Under aversion...... both mental and food aversions are given.
- "FOOD AND DRINKS,
- AGG and AMEL"
- under that all the agg and amel of food stuffs are given.

- Indian foods are included:
- Chilies agg, tamarind water agg.
- Rubrics and remedies are reduced to minimum. Eg: spondylitis, cervical: Phosac
- Eg: Spoonerism- Interchange of initial sounds of two words- new rubric /new termonology

Rubrics from other repertories...

- incorporated some rubrics from Boger's Synoptic Key
- e.g.: itching , in diabetes
- From TPB
- holding the breath>

Rubric construction

- Location/sensations, affections in general
- Side- right
- Left
- Alternating sides
- Extension
- Sublocation/ subsensation, Aggravation, Amelioration and concomitants are intermingled and given alphabetically.

Eg: EARS **RIGHT** LEFT **ALTERNATING** Abdomen with **BETWEEN** GLANDS, OF **ABSCESS COLD** Agg **DISCHARGE Deafness** with



- 1. It is a hand book for easy reference.
- 2. Alphabetical arrangement of rubrics.
- 3. Limited number of remedies and rubrics.
- 4. Under food and drinks Indian diet is given.
- 5. There are number of clinical and pathological rubrics.
- 6. It includes the clinical experience of many years collected together.
- 7. More number of clinical rubrics is added than in Kent's repertory.

eg: acromegaly, arteriosclerosis

Criticism:

- Mental symptoms are scattered
- Rubrics and remedies are minimized
- Exact sources of words not known
- A concise repertory can never replace exhaustive repertories like Kent's Repertory
- No full remedy index
- Certain rubrics are not defined well. Eg. Associated effects ?, axilla menses before agg ?
- Fainting menses during, Menses faints at—Change in medicines
- Spelling mistake
- Rare drugs are rarely represented though given in the abbreviation after the preface

Thank you.....