Case Taking explained by means of paraplegic patients with relapsing urinary tract disorders, showing only few homeopathically exploitable symptoms.

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Abstract
This paper will give you an understanding of the case-taking method of Dr. M.S. Jus. Dr. M.S. Jus is an internationally renowned homeopath who developed his method of case-taking further based on “Kent's Method of Homeopathy” as it was used and taught by J.T. Kent3 and B.K. Bose.
A daily problem for each homeopath is, to find the proper remedy for patients, who show only a few exploitable symptoms. This problem appears with many patients, especially with patients with paraplegia, who are not able to sense many of their symptoms. Particularly, with such patients, the case-taking method of Dr. Jus leads to outstanding results, which is described exemplary using three case-takings of paraplegic patients.

Case-taking method according to Dr. M.S. Jus
The Jus-Method2 is well known among experts and has established itself. It matches individually to the patient and the situation.
The anamnesis is quick and very profound. It is based on a precise knowledge of the Materia Medica. Only a few questions are necessary to confirm or reject the observations and intuitions, enabling to differentiate possible remedies.
The Jus-Method doesn't use any standardized procedures or questionnaires. In each case, the homeopath sets the priorities individually. In some cases, he bases his prescription on the causa, in others the prescription is based on the modalities or on the colour of a secretion or excretion.
Each answer of the patient leads the homeopath to his next question, whereby it is unproblematic to switch between mind symptoms, general physical and local symptoms. During the whole case-taking, the homeopath reflects medical aspects and differential diagnosis. This allows him to ask key questions regarding remedies, miasms and medical problems.
The miasms, as further developed by Dr. M.S. Jus1, are an essential pillar of the Jus-Method. They help to understand not only the homeopathic remedies but also the course of treatment miasmatically. The miasms are a part of the Totality of Symptoms and strongly assist to choose the remedy.
The evaluation of symptoms according to J.T. Kent3 always match individually to the case. The main focus for the evaluation of the symptoms is based mainly on the causa, the §153 symptoms and the mind symptoms and generals. The mind symptoms, the reactions of the patient to the incidents of life are very important. In chronic cases, mind and general physical symptoms are more important than the local symptoms. All potencies are prescribed.
Case-taking 1: A Constitutional Case
A paraplegic woman of 37 years

The questions to the patient do not follow a scheme, but flow into a natural conversation. During the conversation, the obtained information is continuously assigned to one of the following groups: The causa, the mind symptoms, the general physical symptoms, the disorders and the local symptoms. Additionally, the miasma of each symptom is taken into account.

Here a few excerpts of the case-taking of this case:
The patient explains, that she suffers from up to 13 urinary tract infections per year. Every infection was treated with antibiotics.
This information belongs to the group of “Disorders”. Next question is related to the causa: The patient is asked, since when she suffers from these infections and what happened before the illness. She says:
• She’s suffering because she is paraplegic
• Before the injury, she was a landscape gardener
• She fell from a ladder, since then she is paraplegic
• She catheterizes several times a day (each time a minor injury)

She was asked for the causa but as you see, she gave us also a mind symptom: having been a landscape gardener describes her ambitions. This symptom belongs to the group of Mind.

The ongoing conversation leads to the following symptoms:
• Today she works in the office of a garden market
• She is a perfectionist
• She fears to fail
• She knows exactly what she wants, she is stubborn
• She is shy

From the very beginning of the case-taking, possible remedies are continuously reflected and a rolling differential analysis is done. The analysis will be corrected several times during the case-taking, not to forget the supplementary analysis of the miasmatic exposure of the symptoms.
At the actual point we have the following remedies in the foreground: lyc, carc, ars, nat-m, sil, sep, fitting best to the symptoms so far.

The case-taking progresses and leads to the following picture:

General physical symptoms
• lack of appetite, eating is not important
• feels chilly, has cold hands
• likes to wear a wool cap in wintertime

At the actual point we still have the following remedies in the foreground: sil and sep and additionally kali-c, because of the sensitivity to cold temperatures.
After a detailed differential diagnosis already at this point, which are not described in detail here, lyc, ars, and nat-m are not considered anymore.
We switch to the local symptoms:
- Cloudy urine
- Offensive urine
- Incontinence
- More spasticity

The symptoms of the urinary infections are not useful, because they belong to the disease and are not individual symptoms of the patient, that's why they're not assigned to a group.

The conversation switches several times from group to group, leading to the following overview:

The mind symptoms get complete with:
- Doesn't like physical contact
- If someone insults her, she has the urge to break away from this person (DD: sil, nat-m, staph)
- She lives alone and likes to be alone

And as a final step again, the group of the General Physical symptoms:
- Menstruation is regular, dark
- Digestion is regular
- Sleep is ok

All three symptoms are not peculiar.
The paraplegic patients have a disturbance in their circulation and therefore the symptoms of sweating can be omitted.

Here you see the summary of the symptoms of all groups of the case-taking of the Jus-method:

In this constitutional case, the prescription is based mainly on the mind symptoms. I have put the symptoms of the causa in one group, so they count as one symptom. Only 8-10 characteristic symptoms lead to the prescription.

We prescribed Silica Q1, which was prescribed based mainly on constitutional symptoms.

The patient receives homeopathic treatment according the Jus-method on a regular basis. After the first remedy until present (4 years), only 3 mild urinary tract infections occurred. These were cured using only Homoeopathy without the need for antibiotics.
Case-taking 2: A Case based on Mind Symptoms and Modalities
A paraplegic man of 45 years

The case-taking according to the method of Dr. M.S. Jus as described above, led to the following result:

Group of disorders:
- 8-10 urinary tract infections per year
- chronic Prostatitis
- Pain of the neck
- Slight incontinence, uses condom urinal
The patient doesn’t catheterize, the act of urination occurs by spontaneous reflex emptying.

Group of the causa is empty
- Because no causa was found

Group of mind symptoms:
- Works in an integration institution for paraplegics
- Works on his PhD, he is ambitious
- If he is offended, he fights back
- Sensitive to noise
- Does not like music
- Freedom is important

Group of General Physical symptoms:
We only found modalities and no other general physical symptoms:
- Sensitive to cold temperature, aggravated by cold
- Aggravated by change of weather
- Ameliorated by warm temperatures

Because of the paraplegia, we have a lack of the local symptoms.

Here you see the summary of the symptoms of mind and modalities of the case-taking by the Jus-method:

In this case, the prescription is based mainly on the mind symptoms and modalities. Only 4-5 characteristic symptoms lead to the prescription.

The patient received Nux vomica Q1, which was prescribed based mainly on mind symptoms and modalities.
The patient is in continuous homoeopathic treatment according the Jus-method. After the first remedy until present (1.5 years), only 2 infections occurred. Only one infection had to be treated with antibiotics.

**Case-taking 3: Case based only on the Causa**

A paraplegic man of 74 years.

The result of the case-taking was the following:

**Group of disorders:**
- Urinary tract infections every 2-3 weeks
- Spasticity is stronger on the right than on the left side.

After the first case-taking we tried to find a constitutional remedy and gave him Lycopodium, which did not lead to an improvement. The following case-taking led to the result described below:

**Group of causa:**
- The patient catheterizes intermittently. The causa is a result of injury by the catheter.

**Group of mind symptoms are only:**
- Diplomatic
- High level of self control

**Group of general physical symptoms:**
- Extremities are warm

In this case a lot of symptoms are missing and can not be investigated.

Here you see the summary of the symptoms of the causa of the case-taking by the Jus-method:

The patient received Staphysagria Q1, which was prescribed based mainly on the causa. The patient is free of urinary tract infections since one year.

**Conclusion:**

The presented three case studies illustrate, that the Jus-method ideally supports the case-taking of patients with major paucity of symptoms. The homeopath can apply the method very individually. He has to ask key questions to get the valuable symptoms, which resolve the case. This is only successful with an extensive knowledge of the symptoms of the Materia medica and always keeping these in mind.

With the explained technique of case taking and with accurate analysis, the selection of the remedy is possible, even if there is a major paucity of symptoms.
Literature:
