

## APPENDIX

### TABLE OF TIMES

- In general: first put the times, then the modalities. Periods of time are subrubrics of precise (beginning) hours. The space preceding each level indicates the different hierarchical levels.

daytime  
day and night  
morning (= 6-9 h)  
    7 h  
    8 h  
    modalities  
    sunrise  
forenoon (= 9-12 h)  
    9 h  
noon (= 12-13 h)  
    12 h  
afternoon (= 13-18 h)  
    14 h  
    siesta, during  
evening (= 18-22 h)  
    modalities evening  
    sunset  
night (= 22-6 h) <sup>1</sup>  
    **midnight** <sup>2</sup>  
        **before**  
            times  
            modalities  
        **at** <sup>3</sup>  
            2h, until  
        **after**  
            2 h <sup>4</sup>  
                    2-3 h <sup>5</sup>

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<sup>1</sup> The subrubrics of night indicating times are: "midnight before / at / after". All hours are subrubrics of these "midnight" rubrics. They precede the modalities of night.

<sup>2</sup> The rubric "midnight" is always an empty rubric: the remedies with an aggravation at midnight should be placed in the rubric "midnight - at". The subrubrics indicating times and depending from "midnight" are "before, at and after", they come first and precede modalities depending from "midnight".

<sup>3</sup> Here the remedies and subrubrics of aggravation at midnight follow.

<sup>4</sup> The subrubrics of "midnight -after" indicating times precede the modalities.

night - midnight - after - 2 h (continuation)

2-4 h

until <sup>6</sup>

before

at <sup>7</sup>

after

any other modalities of 2 h

3 h

3 or 4 h

3.30 h

4-17 h <sup>8</sup>

4.30-6 h

5-6.30 h

...

daybreak, at <sup>9</sup>

heat, from

morning - towards

morning - until

sleepy in the day; and

...

**modalities night** <sup>10</sup>

waking, on

...

### Remarks

- 12 p.m. >< 12 a. m.

noon = 12 a.m. = 12 h; 12.30 p.m. = 12.30 h;

midnight = 12 p.m. = 0 h; 12.30 a.m. = 0.30 h

(See in Repertory: "Chill - Time" and "Generals - Weakness")

- "sunrise" is always a time modality of morning; "sunset" and "twilight" always a time modality of evening.

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<sup>5</sup> The subrubrics indicating a time period are subrubrics of the precise beginning hour and precede the modalities of 2 h.

<sup>6</sup> Following the hours the other time modalities (until, before, after) precede any other modality of 2 h.

<sup>7</sup> The remedies which are aggravated at a precise hour should be written at the rubric "2h" (as opposed to "midnight - at"). If it exists, the symptom "2h - at" should be merged into "2 h".

<sup>8</sup> Periods do not have to depend from the precise hour on which they begin if only very few time modalities exist.

<sup>9</sup> After the times, the modalities of "midnight -after" follow.

<sup>10</sup> The rubrics indicating modalities of "night" follow at the same level as "night - midnight", which was the first time modality of "night".

- "twilight" indicates the subdued light after sunset or, less common, before sunrise. If the symptom is specific for one such period, "twilight" should be a subrubric of morning or evening. If twilight is not a subrubric of these latter symptoms, it means that the symptom is influenced by both types of twilight.

- note the time symptoms always in the most compact possible way and in such a way they fit into the above structure:

e.g. do not write "lasting until 17 h" but "17 h, until"

### TABLE OF PERIODICITY

The rubrics are sorted as follows:

- hour - every
- hour - two hours; every
- hour - same hour; at the
- ...
- day - every
- day - every - morning
- day - every - forenoon
  - etc.: ... - noon / ... - afternoon / ... - evening / ... - night
- day - alternate (= "day - second, every" and = "day - other day, every")
- day - alternate - morning
- day - alternate - forenoon
  - etc.: ... - noon / ... - afternoon / ... - evening / ... - night
- day - third, every ...
- day - Sunday, every (or another day of the week)
- ...
- week
- ...
- month
- ...
- year
- year – spring; every
- year – summer; every
- year – autumn; every
- year – winter; every
- year - August; in (or another month)
- ...
- intermittent

## TABLE OF COMBINED MODALITIES

Note: the combinations that should be avoided are indented to the right

affected parts

air - draft of

air - open

air - seaside

amel. - not amel. by

    appearing (of pain) → increasing or decreasing

bathing - cold

bathing - hot

bathing - sea, in the

bathing - warm

bed - going to

    bed - heat of → warm - bed

    bed- rising, from → rising - bed, from

    bed - sitting up in → sitting - up in bed

    bed - warm → warm - bed

breath - holding; when

breathing - deep

    change - temperature, of → temperature- change of

    change - weather, of → weather - change of

    clearing throat → hawking

    cold: should be avoided: use "cold air", cold applications", etc.

cold - air

cold - air - going into cold air from a warm room

    >< going into a warm room → warm - room - going ...

cold - applications

    cold - drinks / food → drinks / food - cold

cold - (agg. / amel. -) icy cold

cold - room - going to a cold room

    cold - water → "cold - applications" or "water, drinking"

    cold - wet weather: all weather modalities go as subrubrics of "weather"

    damp - weather → weather - wet

    deep inspiration / breathing → inspiration - deep or breathing - deep

decreasing - gradually / suddenly

drinking (if no specification of what is drunk, else see "drinks" or drink drunk, e.g. beer)

drinks - cold / warm

    drinks and food → food and drinks

eating (if no specification of what is eaten, else see "food" or food eaten, e.g. fat food)

eating - satiety, to

    effort, physical → exertion

emotional excitement → excitement, emotional  
 entering - house  
     entering a cold room → cold - room - going to a cold room  
     entering a warm room → warm - room - going to a warm room  
 excitement, emotional  
     excitement, sexual → sexual - excitement  
 exertion - eyes; of the  
     exertion - mental → mental exertion  
     exertion- physical → exertion  
 flatulence - obstructed; from / with  
 flatus; passing - amel. / as from / before  
 food - cold / warm  
 food and drinks - cold / warm  
     going to bed → bed - going to  
     ground - level → level ground, on  
     ground - uneven → uneven ground, on  
 hat - tight hat; as from a  
 hat - weight of  
     heat - bed, of → warm - bed  
     hot → warm (- agg. / amel. -) hot  
     icy cold → cold (- agg. /amel. -) icy cold  
 increasing - gradually - decreasing - gradually / suddenly  
 increasing - suddenly - decreasing - gradually / suddenly  
 inspiration - deep  
 level ground, on  
 looking steadily  
 lying - side; on the - left / right  
 lying - side; on the - affected / painful / painless - only  
 menses - before / during / after  
 menses - as if menses would appear / beginning of  
 menses - instead of / suppressed, from  
     mental excitement → excitement  
 mental exertion  
 moon - full / decreasing / new / increasing  
 motion - arm, of / eyes; of / head, of  
 motion - beginning to move / continued motion  
 motion - quick / slightest  
     open air → air - open  
     move → motion  
     nervous excitement → excitement, emotional  
 painful parts  
     parts, affected → affected parts  
     parts, painful → painful parts

physical exertion → exertion  
 pulse, synchronous with → synchronous  
 respiration → inspiration OR breathing  
 rising - after  
 rising - bed, from  
 rising - lying, from  
     rising, on: most often equals rising  
 rising - seat; from a  
 rising - stooping; from  
 sexual - desire - diminished / increased / suppression of / with / without  
 sexual - excess  
 sexual - excitement  
 side lain on - not lain on  
 sitting - up in bed  
 sleep - going to; on / preventing  
 stool - urging to  
     urging: goes as a subrubric of the subject of the urge  
     suffering parts → affected parts  
     suppressed <whatever> → <whatever> - suppressed  
 swallowing - empty  
 swallowing - not, when  
 synchronous with pulse  
 temperature - change of  
 uneven ground, on  
 urination - during - close of, at  
 urination - urging to  
     walking - while / when → walking (see point about prepositions)  
 walking - after / amel.  
 walking - air; in the open - after  
 walking - air; in the open - amel.  
 walking - beginning to walk  
 warm - applications  
 warm - bed  
     warm - drinks / food → drinks / food - warm  
 warm - (agg. /amel. -) hot  
 warm - room  
 warm - room - going into a warm room from cold air  
     >< going into cold air → cold - air - going ...  
     ><going into a cold room → cold - room - going ...  
 warm - water  
 warm - weather: all weather modalities go as subrubrics of weather  
     warmth should be avoided: use "warm applications", "weather - warm", etc.  
     washing: is considered to be different from bathing (= long duration ><

washing: short duration: an application of cold/warm water); but  
synonymous to "cold water" or "warm water", ...  
(e.g.: washing in cold water → cold applications)

water, drinking - cold / warm

weather - change, of - cold to warm / warm to cold

weather - cold - dry / wet

weather - dry

weather - warm - dry / wet

weather - wet

wet - applications

wet - getting - feet / head / ...

wet - ground

wet - sitting → wet - ground

wet - weather → weather - wet

wind - cold

wind - warm

work, mental → mental exertion

work physical → exertion

## DEGREES IN THE REPERTORY OF ADDITIONS FROM THE MATERIA MEDICA

This proposal gives an example for the most frequently used books.

<u>In the book</u>	<u>Meaning</u>	<u>In Synthesis</u>
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### **A1: Allen Timothy: Encyclopedia of the Materia Medica**

plain type	one/few provers, not verified	1
*plain type	one/few provers, verified	1
italics	more provings, no verification	1
*italics	more provings, verified	2
(*)bold	many provings (*= verified)	3

### **AL2: Allen Henry: Materia Medica of the Nosodes**

plain type	?	1
one bar	?	1
two bars	?	2
three bars	?	3

The correspondence with grades is made here on the basis of comparison with existing additions since an explanation was not found.

### **BG2: Boger-Boenninghausen Repertory**

plain type	?	1
italics	?	2
bold	?	2
capitals	?	3

### **BR1: Boericke William: Materia Medica**

plain type	normal intensity	1
italics	strong characteristic	2

If the italics are present in the description at the beginning of the remedy, and if the symptom is said to be important, it can be converted to a third degree in the Repertory.

### **BRO1: Boericke Oscar: Repertory**

plain type	first degree	1
italics	second degree	2

### **C1: Clarke: Dictionary of Materia Medica**

clinical, causation, symptoms		1
italics in clinical		2
characteristics		2
stressed characteristics		3

In fact most text in Clarke is in plain type. One should first add from the characteristics,

where the stronger symptoms are present (even if they may be repeated in the scheme of symptoms). If expressions such as "the leading symptom is ...", or, on rare occasion, italics are used in the characteristics, they get the third degree.

**H: Hahnemann**

plain type	normally mentioned	1
bold type	more strongly present ?	1

If a symptom in Hahnemann is mentioned by different provers one can consider putting it in the second degree.

**HR1: Hering: Guiding Symptoms**

no / thin bar	occasional proving	1
two thin bars	more provings	1
one thick bar	verified by cures	2
two thick bars	repeated cures	3
a hand	approved characteristic	4

DEGREES IN THE REPERTORY AS RELATED TO PROVINGS

Nr. of provers:	1	2-4	5-9	10 and more
Degree Sy:	1	1	2	3

Third degree for proving symptoms is only used when there is a confirmation from a different proving (director) or from clinical experience by a different homeopath. To start, symptoms of provings are introduced only in the first or second degree.

## LIST OF COLLABORATORS

Last but not least: all those who have contributed to Synthesis, with many thanks for every little help. I apologize if someone was not mentioned here, we did not start to make this list until recently and I am afraid some collaborators may not be included. Please notify us and it will be corrected. <sup>11</sup>

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<sup>11</sup> The updated list of collaborators will be posted on our website [www.archibel.com/synthesis](http://www.archibel.com/synthesis), section "FAQ - The Synthesis Team".

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