
भारतीय मानक मसौदा

होम्योपैथी की पारिभाषिक शब्दावली
होम्योपैथी से संबंधित सामान्यतः प्रयुक्त शब्दों की मानकीकृत शब्दावली

Draft Indian Standard

Glossary of Homoeopathy Terminology
Standardized Terminology for Commonly Used Terms Related to Homoeopathy

Homoeopathy Sectional Committee, AYD 07

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FOREWORD

Homoeopathy, a system of medicine originating in the late 18th century, drew upon prevalent ideas and concepts of that era. The terms utilized today were initially translated from German in the original 18th-century writings. Many of these words and expressions have evolved from their original meanings and have taken on new connotations within the homoeopathic practice.

These terminology standards have been developed to cater to the needs of pharmaceutical professionals, practitioners, academics, students, and the public.

The aim is to provide standardized definitions for these terms pertaining to homoeopathic practice, prescriptions, pharmaceutical preparations, and homoeopathic philosophy. This standardization is intended to facilitate better understanding and consistent usage among various stakeholders. This document is not a treatise on homoeopathic philosophy and practice; therefore, operational modalities in the concepts are not elaborated upon.

The definitions presented here have been drawn from authoritative sources such as the Homoeopathic Thesaurus of the European Committee for Homeopathy (2016), the Homoeopathic Pharmacopoeia of India, incorporating the understanding of writings of renowned figures in homoeopathy, including Dr. Samuel Hahnemann, Dr. J T Kent, Dr. Stuart Close, and Dr. B K Sarkar. All efforts are made to compile the different ideas the authorities give into single definitions. A bibliography is added at the end of these definitions for a detailed understanding of the concepts, particularly those pertaining to the homoeopathic philosophy.

All definitions are attempted in contemporary English for better understanding across different stakeholders.

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Various stakeholders have raised issues regarding the spelling of Homoeopathy. The system is also spelled as Homeopathy in some parts of the world. Currently, the legislature in India uses the spelling Homoeopathy in all its legislative and regulatory documents, which are mandatory provisions. Considering the contemporary structure, BIS does not attempt to create a terminology and spelling debate and, therefore, uses the spellings Homoeopathy only in the title and elsewhere. The different spellings are, however, mentioned along with the main term.

The document is arranged alphabetically to avoid hierarchical conflicts and is not a thesaurus/indexing document to provide a tree format of terms. Terms that have substantial overlap between modern medical terminology and their usage in homoeopathy have not been included in this compilation.

It's important to note that these standards are subject to any applicable rules and regulations. It's also worth mentioning that these definitions do not encompass the operational mechanisms and procedures associated with the terms.

DRAFT

Glossary of Homoeopathy Terminology

1 SCOPE

This standard covers a brief description/definition of commonly used terminologies related to homoeopathy.

2. DEFINITIONS

2.1 Acute Disease

An illness with rapid onset, which tends to finish its course in a short period. It can be in the form of a sporadic illness, endemic illness, or epidemic condition. In some cases, it could be life-threatening.

2.2 Aggravation

Worsening or increase in severity or intensity, or frequency of symptoms, sensations, signs, or the general condition of an individual.

This aggravation can be:

- 2.2.1 *Disease aggravation*- An increase in intensity or severity of a disease condition.
- 2.2.2 *Medicinal aggravation* - An increase in intensity or appearance of new symptoms in response to the medicine given for treatment.
- 2.2.3 *Homoeopathic aggravation*- A slight transient aggravation of symptoms seen in the first hour or for a few hours (in case of acute disease) or first six, eight, or ten days (in case of chronic disease) when a well-selected homoeopathic medicine is given. It is, in reality, nothing more than an extremely similar medicinal disease resulting due to its superior strength but owing to its minuteness, it lasts only for a short duration. Homoeopathic aggravation is followed by amelioration in patients.

2.3 Amelioration

Decrease in severity or intensity, or frequency of symptoms, sensations, and signs with improvement in the general condition of an individual.

2.4 Anamnesis

Medical and psychiatric history before the onset of the condition is investigated based on the patient's personal account. The process of obtaining a person's history, including their symptoms, past illnesses, medications, and relevant personal information, through a detailed case taking helps to arrive at a conclusion that aids in moving towards the correct remedy selection.

2.5 Antidotes

Substances or circumstances which counteract the effect of a drug.

2.6 Aqua Purificata

Water used for the preparation and dispensing of medicines other than those that are required to be both sterile and apyrogenic.

2.7 Artificial Disease

Symptoms which are produced during drug proving. This is a transient condition which resolves once the action of the drug is over.

2.8 Autopathy/ Autonosodes

Nosodes prepared from pathological substances isolated from diseased individuals to be administered in the same individual.

2.9 Aversions

Strong and specific dislikes related to food, environmental factors, situations, and activities which may or may not affect the individual's health.

2.10 Bach Flower Remedies/ Therapy

A set of 38 drugs made from flower essences developed in the 1930s by Dr Edward Bach (1886-1936), an English bacteriologist. They are usually prescribed based on patient's psychological characteristics, particularly their response to their illness.

The therapy based on a theory developed by Dr Edward Bach and using Bach Flower Remedies is called Bach Flower Therapy

2.11 Basic Research/ Fundamental Research

Research concerned with fundamental aspects of Homoeopathy. These include studies conducted in basic sciences such as physics, chemistry, biology, mathematics, genomics, etc. validating the drugs, medicines, and principles of Homoeopathy.

2.12 Biochemic Drugs/ Schüssler Tissue Salts/ Tissue Remedies

Low decimal scale triturated preparations of 12 inorganic salts developed by Dr Schussler (1821-1895), a German Physician. The drugs are prescribed based on the premise that an illness is caused by deficiency of these salts and is corrected by giving these salts in low potencies as indicated by the characteristic clinical picture.

2.13 Boenninghausen Method

A method of case analysis according to Dr. CMF Von Boenninghausen (1785-1864), a German physician. The method involves analysis of symptoms presenting in a case as location, sensation, modalities, and concomitants.

2.14 Bowel Nosodes

Group of 12 homoeopathic drugs (nosodes) prepared from human intestinal flora (culturing non-lactose fermenting bacteria). This process was identified by Dr. Edward Bach (1886- 1936) and was further developed by Dr. John Paterson (1822-1880) and Dr. Elizabeth Paterson (1874-1966).

2.15 Case Analysis

A process undertaken by a homoeopathic physician of finding the ideal prescription by identifying the characteristics of the clinical picture of a patient. The symptoms and signs of the patient are segregated in a specific method (e.g., Kentian, Boenningausen method, etc.) and correlated with the characteristics in the homoeopathic Materia Medica information.

2.16 Causa Occasionalis

Maintaining or exciting cause; referring to the idea that certain external factors or events can trigger or influence a person's illness (exciting) or can maintain it (maintaining). These are obstacles to cure due to their sheer presence and their removal is essential to achieve cure.

2.17 Centesimal Potentization

Potentization where each stage of dilution is at a scale of 1 part of drug substance in 99 parts of diluent. It is based on the principle that the first potency contains one-hundredth part of the original drug, and each succeeding potency should contain one-hundredth part of the potency preceding it. The potencies thus prepared are called centesimal potencies or C potencies.

It is denoted by C, CH or CK depending on the method of preparation after dilution number or simply by dilution number. C or CH implies Hahnemannian potentization and CK implies Korsakovian potentization.

2.18 Characteristic Symptoms

A symptom which is well-marked, has typical feature(s), attribute(s) or trait(s) which serves as a distinguishing peculiarity of an individual.

2.19 Chronic Disease

Diseases with small, often imperceptible beginnings, that continue to derange the health of an individual. These usually have a long duration and need medicinal treatment for recovery.

2.20 Classical Homoeopathy

Method of homoeopathy therapeutics using a single drug, prescribed on the similia principle in a single prescription. The method was laid down by Dr Samuel Hahnemann (1755-1843) and takes into consideration the entire symptom presentation of the patient as a whole for prescribing the single most similar medicine.

2.21 Clinical Homoeopathy

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Method of homoeopathy therapeutics based mainly on guiding symptoms and on the predominant correspondence to somatic symptoms, organ affinities, tissue affinities, disease affinity, etiological prescribing, and specifics.

2.22 Clinical Research in Homoeopathy/ Homoeopathic Clinical Research

Clinical research is clinical investigations of humans and animals using homoeopathic drugs (or drugs prepared as per homoeopathic principles) to establish the safety and efficacy of diagnostic, therapeutic, or prophylactic drugs, devices, or techniques as well as to collect epidemiological data.

2.23 Clinical trial in Homoeopathy/ Homoeopathic Clinical Trial

A form of clinical research of systematic study of homoeopathic drugs or investigational homoeopathy Products (IHP) prepared according to homoeopathy pharmaceutical methods on participants (whether patients or healthy volunteers), to discover or verify the clinical, pharmacological (including pharmacodynamics/ pharmacokinetics), action of drugs, and/or their adverse effects with the object of determining their safety and/or efficacy and/or clinical utility.

2.23.1 Clinical Trials Phase I

A pre-planned, usually controlled, clinical trial of the safety and effects of diagnostic, therapeutic, or prophylactic drugs, devices or techniques based on a small number of healthy persons or patients according to the Good clinical Practices Guidelines. Phase I clinical trials in Homoeopathy include human pharmacology studies and drug proving studies.

2.23.1.1 Phase IA: Human pharmacology

Human Pharmacology studies aim at the estimation of safety and tolerability of new drug into humans with the initial administration, not intended for therapeutic use. It is conducted in healthy volunteers to check the safety and toxicity of the new homoeopathic drug (referred as investigational homoeopathy product or IHP in this document) for human use and identify the maximum tolerated dose (in tincture form or identified first safe dilution (FSD) from pre-clinical toxicity studies) and nature of adverse events (AE). The trial should be closely observed and monitored to identify safety.

For existing homoeopathy medicines which are recorded in the homoeopathic pharmacopoeia(s) or whose safety has been established by traditional clinical usage and records in authoritative literature, reverse pharmacology studies can be conducted in animal model to substantiate their therapeutic potential, instead of human pharmacological studies. Animal studies must be conducted in compliance with the legal provisions and regulatory guidelines for animal research.

2.23.1.2 Phase IB: Drug proving trials/ Homoeopathy pathogenetic trials

It is one of the most important and foremost steps of homoeopathy drug development and is an essential pre-requisite for inclusion of any drugs in the homoeopathic pharmacopoeia. Drug proving is a unique process of application of a homoeopathic drug preparation (above the FSD) on healthy human beings. Drug Proving is conducted to identify the pathogenetic effects of the drug substance and intends to collect possible therapeutic indications which are then subjected to clinical validation

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in subsequent phases of clinical trials. Proving should broadly follow any of protocols or guidelines by the CCRH or European Committee of Homoeopathy or Homoeopathy Pharmacopoeia Convention of the United States or other internationally recognized bodies, as amended from time to time.

All new drugs to be included in Homoeopathy must be first proved on healthy human volunteers. It can also be done for already existing drugs in homoeopathic literatures, but not proved in the past or only fragmentarily or partially proved. Re-proving of drugs already recorded in homoeopathic literature and/or in homoeopathic pharmacopoeia can also be undertaken to expand or validate the existing proving records.

2.23.2 Clinical Trials Phase II

Phase II clinical trials in Homoeopathy include Exploratory Studies.

The information gathered from folklore usage, toxicological, pharmacological studies and drug proving should be verified (or validated) on patients in a single group cohort or quasi- experimental or experimental designed study. The objective is to develop an image of drug according to the homoeopathic principle(s), for further usage by the profession. These Phase II studies are conducted to evaluate safety and efficacy of the drug in a limited number of patients of either gender for validation of symptoms data derived from Drug Proving in the Phase I trials or for specific disease conditions.

2.23.2.1 Phase-IIA: Clinical verification of pathogenetic effects evolved in drug proving using a systematically devised study protocol.

2.23.2.2 Phase-IIB: Clinical validation for confirmation of symptomatology of drugs on at least one clinical condition on a minimum requisite sample size (calculated statistically). These also include studies on validation of existing therapeutic approaches using specific homoeopathic medicines (based on existing authoritative records of homoeopathic philosophy and practice guidelines).

2.23.2.3 Phase-IIC: Clinical trial in therapeutic and/or preventive homoeopathy preparations and practices on a sample (calculated statistically) conducted on exploratory study designs encompassing existing homoeopathic drugs / IHP in routine clinical practice settings. Trials on pharmacopoeial drugs intended for repurposing for emergency use in epidemics/pandemics or in new emergent diseases or in emergency or disaster conditions can be undertaken in this phase of clinical trial. One homoeopathy drug can be used for treatment of number of different clinical conditions, based on symptomatic conditions. In case of emergent diseases, novel epidemics, new clinical syndromes, the existing homoeopathic drugs can be tested for use under this phase.

2.23.3 Clinical Trials Phase III

Phase III studies in Homoeopathy include Confirmatory Studies.

Confirmation of efficacy of drug(s) in a particular disease condition (existing or new or emerging) is determined during these trials. The test drug or the treatment profile is compared to a standard treatment or standard of care or a placebo (whichever is most appropriate as per ethical principles)

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in patients of either sex. These studies can be uni-centric or multi-centric on a statistically pre-determined sample size. These also include studies conducted for development of approaches in homoeopathic practice (based on homoeopathy philosophy and practices over the years) in terms of identifying most suitable medicine(s), potency(ies) or dosage(s) of medicines and development of novel therapeutic regimen(s).

2.23.4 Clinical Trials Phase IV

Phase IV studies in homoeopathy include post marketing studies and drug monitoring. These studies further enhance clinical, therapeutic, or prophylactic utility of homoeopathy medicine(s) or regimen(s) in existing or new and emerging disease(s) or symptomatologic or pathological presentations. These also include studies to identify adverse drug reaction (ADR) of the medicine(s) or of medicine dosage(s)/ potencies or preparations based on case studies, clinical trials and studies presented in scientific forum, and/or published by doctors, researchers, patient groups, etc. after the market authorization of a new drug or of already existing drugs.

2.24 Clinical Validation

Clinical research process where in the pathogenesis of the drugs is confirmed in pre-identified clinical conditions and diseases to evolve more precise and confirmed prescribing indications for the drugs. The research process is unique to Homoeopathy, considering that homoeopathy prescriptions are symptom based and not based on disease diagnosis or pathology based.

2.25 Clinical Verification

Clinical research process of application of drugs based on symptoms to confirm the symptoms produced during drug proving in healthy persons are alleviated by the same drug in persons with the disease. The process identifies clinical utility of the drugs in different disease conditions and the symptomatology of the patients on which future prescriptions can be made. The research process is unique to Homoeopathy, considering that homoeopathic prescriptions are symptom based and not disease diagnosis or pathology based.

2.26 Comparative Materia Medica

Branch of Homoeopathy that involves comparative study or comparisons of the drug pictures of different homoeopathy medicines.

2.27 Complementary Effects

The effects of certain homoeopathic drugs that complete the action of the previously medicine which has acted and tends to remove the remaining symptoms.

2.28 Complex Drug/ Homoeopathy Complex

Combinations of two or more homoeopathy drugs in one dosage form.

2.29 Complex Homoeopathy

Method of homoeopathic therapeutics using more than one homoeopathic medicine in a single product.

2.30 Concomitant Symptoms

Symptoms manifesting themselves simultaneously or in succession with the chief complaint which has no physiological or pathological relation with the latter.

2.31 Constitution

Unique morphological, physiological, and psychological characteristics of an individual, and combination of these having a balance and functional output of its own, a given capacity for adaptation and a mode of reaction of its environmental stimuli. It is a peculiar group of qualities and tendencies determined by the inherent peculiarities of the individual and by the influences exercised by the environment upon the individual.

Case analysis based on the study of the patient's constitution is called constitutional analysis. Prescription based on assessment of constitution is called constitutional prescribing. Medicines that match a patient's constitution are called constitutional drugs. A homoeopathy medicine prescribed based on the constitutional characteristics of an individual is known as a constitutional remedy.

2.32 Decimal Potentization

Potentization where each stage of dilution is at a scale of 1 in 9. It is based on the principle that the first potency contains one-tenth part of the original drug, and each succeeding potency should contain one-tenth part of the potency preceding it.

It is denoted by D or X after the dilution number.

2.33 Desires

Strong and specific likes related to food, environmental factors, situations and activities which may or may not affect the individual's health but may be associated with a physical or emotional comfort of the individual.

2.34 Diathesis

A mental or physical (inherited or acquired) chronic predisposition or disease state.

2.35 Diluent

De-concentration of a substance or mixture of substances by adding suitable diluent(s). By this process, there occurs a decrease in the quantity of the original matter in a given portion of the mixture and at the same time its physical and chemical properties are reduced. (GCPH)

2.36 Dilution

A homeopathic dilution is a medicinal preparation derived from mother tincture/solution or trituration, prepared using the method of succussion and diluted as per scale.

2.37 Direction of Cure / Law of Cure/ Hering's Law of Cure/ Herings Rule

Progressive improvement in a patient's state indicated by directional changes in the symptoms from above downwards, from within outwards, from more important to less important organs, and in the reverse order of their appearance.

2.38 Dispensing Material

Homoeopathy medicines prepared in liquid potencies are dispensed by adding the liquid medicine in vehicles. These vehicles can be water, sugar globules, tablets of neutral material or other forms depending upon the application of the medicines. The medicines used orally are added in sugar globules and dispensed in plastic or glass bottles, usually labelled with the name of the medicine and the potency. The dosage for oral medicines is identified as the number of globules or drops of medicine to be taken at a time.

2.39 Doctrine of Signatures

A postulate first proposed in the Middle Ages which says that external characteristics of a substance can indicate its possible therapeutic effects by matching of its physical appearances or characteristics with the body organs that it appears similar to.

2.40 Dosage Form

Solid or liquid form in which the patient is advised to use the medicine(s) prescribed.

2.41 Drug Affinity

Attraction between a drug and part of an organism. It refers to how strongly a drug tends to affect a body organ; high affinity means strong binding whereas low affinity means weaker binding and less potent effect.

2.42 Drug Combinations

Using more than one drug in a single prescription but not in one dosage form as a complex drug.

2.43 Drug Disease

Synonymous to artificial disease (2.7)

2.44 Drug Families/ Family Relationships

A group of homoeopathy drugs belonging to a particular class by virtue of its chemical composition or source used. This may include family in plants such as Liliaceae; chemical constituent, such as Kali salts (having potassium cation) or those from biological families such as the snake medicines, derived from snake venoms.

2.45 Drug Pathogenesis

Mechanism by which drug produces its effects or influences the development and progression of a disease condition.

2.46 Drug Picture/ Remedy Picture

Group of symptoms belonging to a specific drug comprising all the recorded characteristic symptoms and signs that the drug can be used for treating in an individual. It includes sphere of action, pharmacological action, symptoms produced during drug proving, toxicological symptoms, and clinical symptoms.

2.47 Drug Proving/ Homoeopathy Pathogenetic Trials/ Experimental Pathogenesis/ HDP/ HPT

Drug proving is a process unique to Homoeopathy and is a preliminary step of inclusion of a drug in Homoeopathy. Controlled clinical trials on healthy human volunteers (called Provers) with a drug prepared according to homoeopathic pharmaceutical techniques to identify symptoms and signs developing in the volunteers, which forms the proving data (Proving symptom) of the drug. The proving data is further tested by clinical verification studies to identify prescribing indications of the drugs. It forms the basis of the homoeopathic therapeutic principle, i.e., a set of symptoms produced by any substance on a healthy individual can cure similar symptoms in the sick persons.

2.48 Drug Relationships/ Concordance/ Drug Interactions/ Relationship of Drugs

The interactive relationship of different homoeopathic drugs which may have beneficial or detrimental effects on the organism. They can also guide towards remedies that should precede or succeed drugs for a favorable result.

2.49 Drug Sensitivity

The degree of responsiveness of an organism to a homoeopathy drug

2.50 Eliminating Symptoms

A characteristic symptom of the patient chosen as the defining criterion by which to eliminate medicines whose Materia Medica does not include it from the range of possible treatment.

2.51 Essence/ Genius of The Remedy/ Remedy Essence

Unique character of a medicine's Materia medica; its individuality; usually expressed in psychological or abstract terms which often reflect metaphorically the physical characteristics.

2.52 Evaluation of Symptoms/ Grading of Symptoms/ Hierarchization of Symptoms

A process undertaken by the homoeopathy physician of relative ranking of symptoms and their significance as indications for the choice of prescription.

2.53 Excipients/ Drug Carriers

Inert substances used to prepare homoeopathic drugs like water or alcohol as diluent to ensure their dilution, preservation, and stability.

2.54 Fifty Millesimal Potentization/ LM Potencies/ Q Potencies/ Quinquagen Millesimal/ 50 Millesimal Dynamizations

Potentization method where the total dilution is 1 part drug in 50,000 parts of vehicle. The scale developed by Dr Samuel Hahnemann is denoted as 0/1, 0/2, and so on to denote the extent of dilution.

It involves developing a trituration up to 3C potency in the ratio of 1:100. One grain of this preparation is mixed with 400 drops of water and 100 drops of alcohol which becomes the mother tincture/solution for LM Potency. To make the first potency represented as 0/1 (liquid): one drop of the mother tincture is taken and added to 100 drops of alcohol which is given 100 stokes to complete 1st potency in liquid state. This potency is used to medicate 100 poppy seed size globules. This is 0/1(solid) Further potencies can be made using 1 globule from the previous potency dissolved in a drop of water and 100 drops of alcohol added to it with 100 stokes given to make the next potency.

2.55 General Symptoms / Generals

Symptoms, not descriptive of the local pathology but relate to the patient as a whole, eg., bodily reactions to environment, mental & physical states, aversions & desires, body secretions and discharges. Definition as given by Dr JT Kent (1849-1916).

2.56 Genus Epidemicus/ Epidemic Remedy

A remedy which is found to be indicated in most cases of the same disease during a period of an epidemic.

2.57 Globules

These are solid preparations made from sucrose or lactose, used as a vehicle for homoeopathic medicines intended for oral or sublingual or olfactory use.

2.58 Good Clinical Practice (GCP)/ Guidelines for Clinical Trials In Homoeopathy/ GCP Homoeopathy

A standard document identifying a comprehensive set of minimum standards for undertaking clinical, public health, social and behavioral research using homoeopathic drugs or new substances to be incorporated in Homoeopathy.

2.59 Grades of Drugs

A hierarchical representation in the form of different typography of the drugs on the basis of validation of their use to give an indication of their importance under specific rubrics in many repertories.

2.60 Guiding Symptoms

Symptoms highly characteristic of a particular drug

2.61 Hahnemann Samuel

Dr Christian Friedrich Samuel Hahnemann, a German physician (1755-1843) who is credited as the founder of homoeopathy. Dr Hahnemann laid down the principles and philosophy of practice of homoeopathy including its Materia Medica and pharmaceutical procedures for preparation of drugs.

2.62 Hahnemannian Potentization/ Multi Glass Method/ Hahnemannian Dilution

Potentization technique requiring formation of each successive potency in a new fresh clean glass bottle. A new well cleaned stoppered glass vial is used for succussion for each potency raised with addition of 1 part of the original volume and addition of 99 parts of diluent to the new vial for each attenuation. It is represented as CH or C

2.63 Homoeopathy Doctrines

Philosophy and therapeutic principles upon which the practice of homoeopathy is based.

2.64 Homoeopathy Drug

A therapeutic agent, prepared pharmaceutically from standardized drug substance according to the rules and regulations of pharmacopoeia, which is sufficiently capable of affecting the vitality of living organism by altering the sensations and functions, even the structural change and may cause death, if continued for a sufficient time and dose.

A proved drug whose action on various constitutions and in various dosage is well established and can be predicted prior to its administration in disease condition is termed as Medicine and the indicated medicine given to the sick on the basis of individual symptom similarity, which can bring about cure in curable diseases is termed as a remedy.

Homoeopathic drugs can be prepared from different sources:

2.64.1 Plant drugs: Homoeopathic drugs prepared from plant kingdom. e.g., aconite, belladonna, lycopodium etc.

2.64.2 Animal drug: Homoeopathic drugs prepared from animal kingdom. e.g., Apis mel.; Lachesis; Tarantula cubensis etc.

2.64.3 Mineral drugs: Homoeopathic drugs prepared from mineral kingdom. e.g., gold, silver, lead, aluminium, copper etc., and their salts.

2.64.4 Sarcodes: Homoeopathic drugs prepared from healthy organisms, healthy animal tissue, gland, or its secretions. e.g., Thyroidinum, Adrenaline, Cholesterinum etc.

2.64.5 Nosodes:

Synonym: Bio-therapeutic preparations.

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Homoeopathic medicinal preparations derived from disease tissues, microbial cultures, and clinical materials such as disease secretions and discharges that are subsequently potentized to have therapeutic effect e.g., Tuberculinum, Medorrhinum, Syphilinum, Influenzinum, Morbillinum etc.

2.64.6 Imponderabilia: Homoeopathic drugs prepared from immaterial dynamic energies. e.g., magnets, electricity, radium, x-ray etc. Imponderabilia means not weigh-able, substances that have no perceptible weight, hence these remedies are prepared from energies from natural or artificial sources. They are immaterial dynamic energies that are utilized as potentized Homeopathic medicines.

2.65 Homoeopathy Medicine

Homoeopathy medicines include any drug which is recorded in homoeopathy proving or therapeutic efficacy of which has been established through long clinical experience as recorded in authoritative homoeopathy literature of India and abroad and which is prepared according to the techniques of homoeopathy pharmacy and covers combination of ingredients of such homoeopathy medicines but does not include a medicine which is administered by parenteral route (*Rule 2dd of Drugs and Cosmetics Rule 1945*).

2.66 Homoeopathy Philosophy

The whole theoretical approach to the principles and practice of homoeopathy.

2.67 Homoeopathy Stocks

Substance or preparation used as starting material for dilution or trituration in the preparation of homoeopathy potencies; may be the source material itself, or a mother tincture or macerate.

2.68 Homoeopathy/ Homeopathy

A therapeutic method which assumes that a deviation from the fundamental mean within reversible limits can be restored to normal by means of stimuli, usually applied in the form of drugs only sub-physiological doses of which are necessary because of hypersensitivity in disease and whose action is always directed towards normal by virtue to altered receptivity of tissue to stimuli in disease.

2.69 Hormesis

A concept that, low doses of toxin can have beneficial effect while high doses may be harmful on any organism.

2.70 Homoeopathy Physician/ Homoeopath/ Homoeopathy Practitioner

A practitioner qualified and trained in homoeopathy system of medicine by undergoing a graduate degree of five and half year's duration at bachelor's level viz. Bachelor of Homoeopathy Medicine and Surgery (BHMS) and registered with the state registration board in India. After graduation, master's qualification i.e., Doctor of Medicine in Homoeopathy (MD Homoeopathy) is available in India.

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May also include practitioners trained and qualified in homoeopathy as per the applicable laws and regulations, for practicing in the specific country.

2.71 Homoeopathy Authoritative Literature

Works identified as authentic, verified by time or practice or in research settings which provide foundational principles, material medica information and repertory references for homoeopathic practices.

2.72 Homoeopathic Pharmacopoeia of India

Formal document developed and maintained by the Pharmacopoeia Commission of Indian Medicine and Homoeopathy comprising of drug monographs. Each drug monograph describes the common name, description, part used (in case of animal and plant drugs), macroscopical and microscopical features, distribution, history & authority, preparation, and quality control of homoeopathic drugs.

2.73 Idiosyncrasy

Peculiar corporeal constitution which although otherwise healthy, possess the disposition to be brought into more or less morbid state by certain things that seems to produce no impression and no change in many other individuals.

2.74 Impregnation

The process or act of saturation of globules with liquid homoeopathic medicines

2.75 Incompatible

A drug producing an unfavorable interaction when used after another homoeopathic drug in an individual patient.

2.76 Inimical

Homoeopathy medicines which obstruct or interferes with the action of another but does not antidote it.

2.77 Intercurrent Drugs Prescribing

The drug used to provide renewed activity in a stalled case.

2.78 Individualization

Prescribing methodology in Homoeopathy where in drug pathogenesis is matched with the symptom complex of an individual, rather than based on the name of the disease. A commonly used methodology, because of which same drug can be used in treatment of several different disease conditions and the persons of the same disease may require different drugs identified from the homoeopathic Materia Medica. In studies based on individualization, treatment methodology is usually tested rather than efficacy of a single drug in a specific disease/symptom.

2.79 Investigational Homoeopathy Product (IHP)

Investigational Homoeopathy Product is any new substance usage of which is not recorded in any homoeopathic authoritative literature, and which has been prepared according to the homoeopathic pharmaceutical processes, intended for use as homoeopathic drug. This also includes combinations of existing drugs, standardization parameters of which are different from that of its individual constituents.

2.80 Isopathy

Treatment of a disease using drugs prepared from the causative agent of the disease itself, including organisms and allergens.

2.81 K Potencies

Homoeopathy drugs that have been prepared using the Korsakov method.

2.82 Kentian School

Approach of practicing homoeopathy with analysis of symptoms as mental symptoms, physical generals and particulars and using the repertory developed by Dr JT Kent (or its later versions and adaptations) based on teachings by Dr JT Kent (1849-1916). This approach is included in classical Homoeopathy.

2.83 Keynotes/ Keynote Symptoms

Leading characteristics of a drug which are a relatively specific to that drug. The term was coined by Dr H N Guernsey (1817-1885).

Case analysis in which a few representative leading symptoms or keynotes are taken as a guide to prescribing is called keynote analysis.

2.84 Korsakov Potentization/ Jarricot potentization/ Single glass method/ Single flask method

A well cleaned stoppered glass vial is used for succussion with removal of 99 parts of the original volume and addition of 99 parts of diluent to the remaining volume at each level of potentization. It is represented as CK instead of CH or C to distinguish it from Hahnemannian potentization.

2.85 Local Symptoms/ Locals/ Particular Symptoms/ Particulars/ Physical Symptoms/ Somatic Symptoms

Changes and ailments that appear on the external parts of the body expressing the local manifestation of the illness in relation to a particular organ or organ system or to regional anatomy.

2.86 Maceration

Specific process in which pulverized, or finely divided drug is simply soaked for a pre-specified number of days in a solvent, and is agitated occasionally, until the solvent penetrates the cellular structure of the dissolved substance in order to extract the active principles of a drug. Usual timeline for maceration is of 21 days with agitation twice a day using a freshly washed stirrer.

2.86.1 Alcohol Maceration

Maceration done with alcohol as a solvent.

2.86.2 Glycerin Maceration

Maceration done with glycerin as a solvent.

2.87 Materia Medica

A comprehensive collection of information about the therapeutics properties and effects of various substances used as homoeopathic medicines. It may include detailed description of the origin, preparation and indications for each medicine derived from proving, toxicity symptoms, clinical symptoms, and their interpretations and associations.

2.88 Mental Symptoms/ Mentals/ Mind Symptoms

Characteristic of the mental and emotional state of the patient, irrespective of whether the presenting features of the illness involve the mind and includes symptoms of will, understanding, memory and emotions.

2.89 Miasms

Philosophical principle proposed by Dr Samuel Hahnemann (1755-1843) wherein he suggested noxious material to be the root cause of all chronic diseases. These miasms were further segregated as psora, syphilis (not the disease caused by *Treponema pallidum*) and sycosis. Later authors have introduced miasms as tubercular, cancer, and other types.

Case analysis based on the study of the miasmatic burden of the patient is called miasmatic analysis (or miasmatic approach or miasmatic prescribing).

2.90 Modalities (Singular: Modality)

Factors which modify the behavior, level, degree of intensity or severity of a clinical state (symptom, sign, pathology, or disorder). These can be related to time of the day, season, environmental factors, food, or physical condition of an individual.

Factors such as time of day, weather, movement or position of the body, food or intake of any other substance, emotional status which causes aggravation in an individual are aggravation modalities.

Factors such as time of day, weather, movement or position of the body food or intake of any other substance, emotional status which causes amelioration in an individual are amelioration modalities.

2.91 Mother Tincture

The first preparation made from raw drug material as per the homoeopathy pharmaceutical techniques. These are prepared as per the directions of the Pharmacopoeia; they form the base solution of Homeopathic medicine preparation and can be used independently as well and are used for preparation of further potencies and preparation of other forms of usage (local applications).

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They are made from a variety of zoological or botanical substances that are wholly or partially soluble in alcohol of various percentages.

2.92 M Potencies

Part of the Centesimal Scale of Potentization where Roman Numeral "M" is used to denote 1000. Each further stage is potentized at a 1 in 1000 scale.

1M=1000C.

2.93 Obstacles to Cure/ Deflected current

Factors preventing favorable response to treatment.

2.94 Observational Study

In homoeopathy treatment studies, observational study designs collect findings on a therapeutic or prophylactic treatment under routine clinical conditions. It is a clinical research design where in investigators assess health outcomes in groups of participants according to a research plan or protocol, where participants receive interventions or procedures as part of their routine medical care. The participants are not assigned to novel interventions by the investigator as in a clinical trial. These studies may be conducted with or without a control group.

2.95 Organ Affinity

Tendency of certain remedies to have a stronger influence on specific organ or systems of the body

2.96 Organon

The text incorporating the rules and the guiding principles for rationalizing homoeopathy, written by Dr Samuel Hahnemann (1755-1843). Five editions of the organon were published during his life time and the sixth was published posthumously. The fifth and the sixth editions are the most frequently referred editions.

2.97 Organotherapy

Treatment of a disorder of a particular organ with a potentized extract of the same, healthy organ from another source.

2.98 Plussing

The practice of further diluting homoeopathic medicines and re-succussing before each dose or at regular intervals.

2.99 Polychrests

Medicines that are widely applicable because of their wide therapeutic action

2.100 Posology

The science of doses which includes the particular preparation of medicine used, its quantity and form of preparation and its administration.

2.101 Potency Selection

The choice of which potency of a particular drug is to be prescribed.

2.102 Potentization/ Potentisation/ Dynamization/ Serial Dilution

Homoeopathy pharmaceutical process of serial reduction or dilution of the crude drug substance in a pre-fixed ratio along with mechanical processing (either grinding called trituration or shaking downwards called succussion) to develop homoeopathic preparation called potency. The crude substance is chemically modified to a state of solubility in the vehicle and therapeutic activity for use as a homeopathic remedy.

2.103 Potency/ Succussed Dilutions/ Potencies/ Ultra High Dilutions

Dosage form used in Homoeopathy developed on a prefixed scale. These can be:

1. High potency – potencies more than 30C
2. Medium potency – potencies between 12C to 30C
3. Low potency – potencies less than 12C

2.104 Pragmatic Trials

Pragmatic trials are clinical research studies conducted in real-life routine practice conditions, designed to evaluate the effectiveness of interventions under flexible practical conditions.

2.105 Remedies that follow well

Medicines which are helpful on follow up prescription from the previous one

2.106 Repertorization

Technique of using a medicine index (called repertory) to identify the homoeopathy drugs whose Materia Medica corresponds most closely to the clinical picture of the patient and from amongst which the simillimum may be chosen.

2.107 Repertory

Systematic cross reference index of symptoms and disorders (called rubrics) to which a list of the medicines which are known to have produced that symptom or disorder in homoeopathy pathogenetic trials, or to have remedied it in clinical practice, is attached, usually along with its gradations.

2.108 Saccharose/ Sucrose

Prepared from cane sugar or beet sugar, used in Homeopathy for the preparation of tablets, globules, pellets, syrup and rarely as a vehicle for trituration.

2.109 Saccharum Lactis/ Sugar of Milk/ Lactose

Prepared from milk and is a frequently used solid vehicle in Homeopathic pharmacy due to inert medicinal activity. used in Homeopathy as a vehicle for trituration and for the preparation of tablets and globules.

2.110 Second Prescription/Follow up prescription

According to Dr J T Kent (1849-1916), the prescription after the previous remedy has acted; either repetition, antidoting, or complementing the previous remedy or change of plan of treatment.

2.111 Similia Principle/Law of Similar/Principle of Similarity

The principle "Similia Similibus Curentur" was given by Dr Hahnemann while laying the foundation of Homoeopathy. The underlying principle is that substances may be used therapeutically to treat disorders similar to that which they will themselves induce in a healthy individual.

2.112 Similimum

The most similar remedy that matches the totality of the symptoms of a given case.

2.113 Succussion

The pharmaceutical process of potentization forcefully striking a homoeopathic drug mixed with a diluent or liquid vehicles like alcohol or water, in a glass bottle, against a firm surface in a definite manner as prescribed by the Pharmacopoeia in order to deliver the mechanical energy to the preparation. The process is accompanied by successive dilutions to prepare potencies.

2.114 Susceptibility

Susceptibility is a sum total of such factors, which are responsible for the individual's reaction to disease stimuli, and therefore govern the identification of most similar medicine, appropriate potency and dosage affecting the outcome of treatment.

2.115 Tautopathy

The use of a potentized preparation of a conventional drug or drugs used in other systems proved on healthy provers and administered on the similia principle.

2.116 Trituration

A pharmaceutical process of potentization involving de-concentration of a raw drug material with another solid material (usually lactose or milk sugar) by grinding and mixing the two, in a prefixed concentration as defined in the Homoeopathy Pharmacopoeia with the aim of imprinting the pharmacological properties of the original drug substance onto the molecules of the diluent. The potency such prepared is called triturate.

2.117 Tissue affinity

The tendency for a certain homoeopathy drug to act on a particular type of body tissue.

2.118 Totality of symptoms/ Symptom complex/ Symptom totality

According to Dr Samuel Hahnemann (1755-1843) it is the outwardly reflected picture of the internal essence of the disease.

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Dr Stuart Close (1860-1929) elaborated it further as all the symptoms of an individual which are capable of being logically combined into a harmonious and consistent whole, having form, coherency, and individuality, not the mere numerical totality of symptoms.

2.119 Vehicle / Drug carriers

Vehicle is an agent, therapeutically inert, used as a solvent or carrier in the preparation, preservation, or administration of homeopathy medicine. They are non-reactive with the drug substance and act as a media for extraction of the properties of the drug, its preservation and conveyance of its therapeutic properties to the intended site. There are three types of vehicles: Solid, liquid and semisolid used in Homeopathy for Potentization, External Applications and for Dispensing Medicine

2.120 Vital Force/ Dynamis/ Entelechy/ Vital Energy/ Vis Mediatrix Naturae/ Vitalism/ Life Force/ Vital Principle/ Life Principle

Spirit like force, the dynamis that animates the material body (organism), rules with unbounded sway, and retains all the parts of organism in admirable harmonious, vital operation, as regard both sensations and functions, so that our indwelling, reason- gifted mind can freely employ this living, healthy instrument for the highest purposes of our existence.

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