DISEASE CLASSIFICATION: A SUMMARY: ACCORDING TO DR.H.A ROBERT

ABOUT THE AUTHOR

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Summary of different stigmata

Let us summarize the different stigmata

we may get all shadings of all the stigmata in their groupings in our patients.

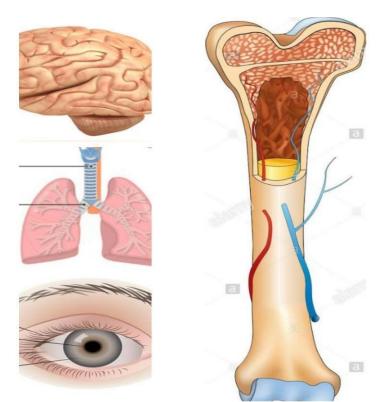
one stigma will predominate above all the others.

The accentuation of psora is function; the accentuation of the syphilitic taint is ulcerative; the accentuation of sycosis is infiltration and deposits.

FUNCTIONAL PSORA ULCERATION SYPHLITIC INFILTRATION AND DIPOSITION SYCOTIC

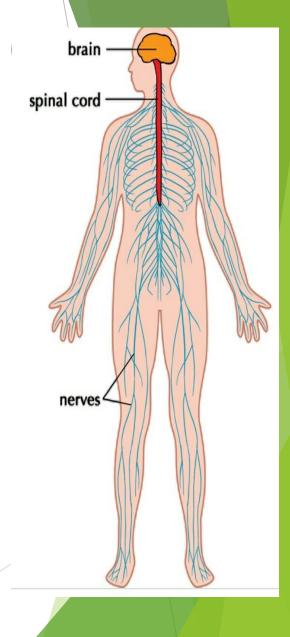
Syphilitic stigmata

▶ When suppressed, the syphilitic stigma spends itself on the meninges of the brain, and affects the larynx and throat in general, the eyes, the bones and the periosteum.



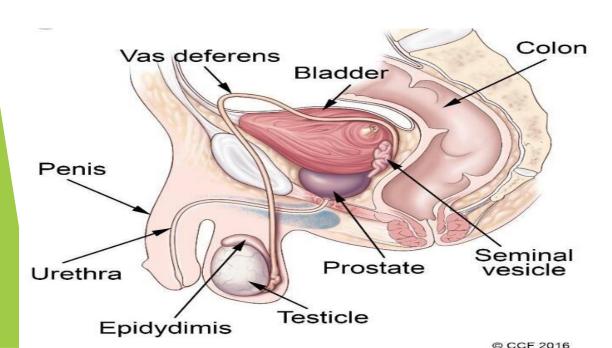
Psoric stigmata and it's spread

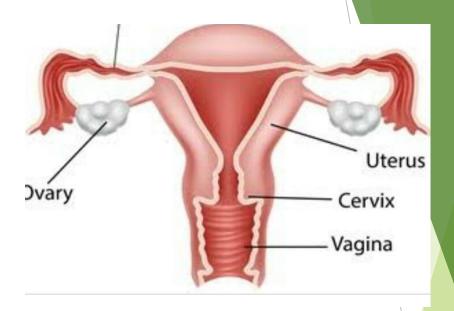
Psora spends its action very largely upon the nervous system and the nervous centres, producing functional disturbances, which are > by surface manifestations.



Sycotic Stigmata

Sycosis attacks the internal organs, especially the pelvic and sexual organs. In this stigma we find the worst forms of inflammation, infiltration of the tissues causing abscesses, hypertrophies, cystic degeneration; when thrown back into the system by suppression this stigma causes dishonesty, moral degeneracy and mania.





MENTAL SYMPTOMS OF SYCOTIC STIGMATA

DISHONESTY

MORAL DEGENRACY

MANIA

TREATMENT OF DIFFERENT STIGMATA

TAKE TOTALITY OF SYMPTOMS

SEE STIGMATA
IN THAT
INDIVIDUAL
CASE AND
STAGE OF
DEVELOPMENT

GIVE THE MOST SIMILLIMUM REMEDY

TREATMENT OF MIXED STIGMATA

IN CASE OF MIXED STIGMATA

THERE IS ALWAYS ONE STIGMATA PROMINENT

WHEN ONE STIGMATA RELIEVED, NEXT PROMINENT

TREAT CONTINOUSLY ,UNTIL THE PATIENT FREE FROM INHERITANCE OF GENERATIONS

	PSORA	SYPHILIS	SYCOSIS
	FUNCTINAL	ULCERATION	INFILTRATION AND DIPOSITION
HEADACHE	MORNING FRONTAL, TEMPOR AL, PARITAL	NIGHT BASE OF BRAIN	Midnight VERTEX
HAIR	DRY AND SCALY	MOIST, THICK , CRUSTY	FALLS OUT CERCULLER SPOT

EYE NO STRUCTRURAL CHANGES • UNCOMLICATED STIGMA	 INTOLERANT OF ARTHRITIC TROUBLES OF EYE ULCERATION OF LIDS PTOSIS ARTHRITIC TROUBLES OF EYE <rainy< li=""> </rainy<>
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	PSORA	SYPHILIS	SYCOSIS
EAR	 SMALL OR MEDIUM SIZE AUDITORY CANAL DRY AND SCALY OVERSENSITIVEN ESS TO SOUND NEVER TRANSPARENT 	 LARGE EAR PALE WHITE, TRANCEP ARENT ULCERATION 	
FACE	INVERTED PYRAMIDLIPS RED AND DRY	 GRAYISH GREASY DEEP FISSURE LIPS TELL-TALE FACE 	BLUISH CYNOTIC FACE

NOSE	 OVERSENSITIVEN ESS TO ODOUR PERFUME MAKE ILL OR FAINT 	 SMELL LOST BONE OF NOSE DISTROY 	 RED NOSE SMELL LOST FISHBRINE ODOUR

	PSORA	SYPHILIS	SYCOSIS
MOUTH (TASTE)	BURNT	METALLIC	MUSTY OR FISHY
SKIN	DRY AND SCALY	ULCERATED	INFILTRATION AND DIPOSITION

	PSORA	SYPHILIS	SYCOSIS
MODALTIES (AGGRAVATION) (AMELIORATION)	MORNING • LIE DOWN • NATURAL DICHARGE	• NIGHT • DAY TIME	 AFTER MIDNIGHT ABNORMAL DICHARGE

	PSORA	SYPHILIS	SYCOSIS
MENTAL	 QUICK ACTIVE ANXIOUS FEAR OF DEATH SENSITIVE ABSENT MINDED RESTLESSNESS 	 DULL ANXIETY AT NIGHT FIXED IDEA SLOW IN REACTION DEPRESSED MOROSE MISTRUSTFULL COMMITED SUICIDE 	 CROSS, IRRITABLE ANXIETY WHEN WEATHER CHANGE SUSPICIOUS JEALOUS MOST MISCHIEVOUS SELFISH FORGRTFULL FITS OF ANGER

Reference:

The principles and art of cure by Homoeopathy, A modern textbook by Dr. H.A Roberts; reprint edition:2000 page no . 180 - 241