

REPERTORY



COUGH : A REPERTORIAL STUDY (PART-I)(OBJECTIVE SYMPTOMS)

by

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We read the repertories daily coming across numerous rubrics. The following article is based on those specific rubrics which can be observed clearly if known by the prescriber, allowing the physician to prescribe certain lesser used remedies more effectively. It mainly deals with those repertorial expressions which have been repeatedly observed, checked clinically and re-confirmed with results. If possible, the second part of this article, may be published in the subsequent issue.

Cough is one of the most common symptoms that we come across in a homoeopathic practice, posing quite often a real predicament in selecting a correct remedy to combat it. It is easy to contract cough and it appears a minor ailment but it is not always that easy to find the correct remedy. A prolonged episode of bronchitis with tormenting cough often puzzles the members of all faculties of medicine.

In this article we shall discuss and concentrate only on the objective signs and symptoms which form the reliable and solid base of prescribing. This article comes from practice and experience, not merely from the text-bookish or theoretical jargon. The objective symptoms are either observed by the patient, the relations or the physician.

It is my personal experience several times that while talking continuous for many hours, especially during a seminar, I develop a kind of irritating cough in the middle of a talk, which is quite embarrassing. The cough does not allow me to talk further for a few moments and compels me to drink a little water which provides relief. It is also accompanied with an irritating (tickling) sensation in my throat. On experiencing this kind of cough often, I gathered the following totality and found a lesser used remedy called *Cimicifuga* (*Actea Racemosa*), which was subsequently used later in over 12 cases success-

fully. It is now used in my practice as one of the common remedies for bronchitis and laryngitis, especially of allergic nature. It has been well said that if the mind knows, the eyes see. Familiarity with the objective repertorial rubrics helps to select the remedy. Important Cough totality¹ of *Cimicifuga*:

Cough, irritation in air passages, from
Cough, tickling in larynx, from
Cough, dryness in air-passage, from
Cough, dry spot in larynx, from
Cough, tickling, small spot in larynx, from
Cough, dry, talking on
Cough, talking, with inability to speak

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Besides the above important features the following symptomatology makes the complete totality of the remedy :

Cough constant
Cough, hacking, dry, short,
spasmodic, paroxysmal
Cough, < 7 p.m., 7.30 p.m.
Cough, evening, night

Cough, hands, must hold chest with both, while

The proving of *Cimicifuga* by Drs. Hills and Douglas (and others) on 40 males and 6 women² produced cough of above stated type, lasting for day and night almost for two weeks. My clinical experience confirms its role as a great laryngeal cough remedy.

While studying *Cimicifuga*, it reminds me to mention *Bufo Rana*, another important respiratory remedy useful for similar complaints. The reader may go through my separate article on the topic published in *Homoeopathic Links*.

Once a mother brought her child with violent, spasmodic cough of a many days duration, not responding to the usual allopathic medicines. She stated: '*every time the child coughs he would hold his chest while coughing and he would also have watering of eyes with every bout of cough.*' This was observed and confirmed in the clinic, too. Further, she also added: whenever the old grandma in the house coughs (she also had cough !), funnily enough, the little fellow would also wake up from sleep and start coughing! (Coughing, while listening to another person coughing, is a common feature in a ward of whooping cough.)

The following totality has helped me a number of times to prescribe *Arnica*

successfully. Arnica is a great homoeopathic antibiotic, so to say, and has helped me indeed, many times to take care of infective bronchitis, with high grade fever.

Cough:

Dry, sharp, hacking, constant
 Hands, must hold chest with both while
 Eyes, profuse lachrymation with every bout of cough (Kunzli)
 Crying, agg.
 Talking agg.
 Noise, agg. Sleep, during; waken from sleep
 Whooping

Other indications for Arnica are as follows:

Cough:
 Measles, after
 < Day, morning, afternoon, night
 < Anger, grief, mental exertion
 < Spirit, wine

After repeated success with remedies such as the above and many more underused remedies, do not we feel that how much narrow has been our applicability of the vital instrument that Dr. Hahnemann has bestowed upon us?

Coming back to some more of objective symptoms while treating cough, it would be interesting to know about various positions which may aggravate or ameliorate cough. Carefully listening ears, accurate observation by the physician and the spontaneous and casual description by the patients or relatives may turn out to be key-indicators in such prescribing.

Last winter, lady accompanied by an old man suffering from chronic bronchitis and C.O.P.D, came to me complaining: 'Doctor, my husband's tormenting cough neither allows him to sleep nor does it let me sleep in peace, perpetually in whole of winter...He keeps coughing at night, whenever he turns sides in bed.. On account of cough, he has to get up from bed, and gets pain in chest on coughing. He can not breathe enough, and brings out so much of phlegm...' This is not very uncommon description

of an old lady talking about her asthmatic spouse. If you study the following rubrics closely, you may discover another rarely used remedy, and you might say, oh, is that true that Kreosote could act for respiratory problems as well!?

Cough, winter, old people
 Bronchitis
 Cough, bed in, changing position
 Cough, turning in bed
 Cough, sit up must
 Cough, sleep during
 Cough, spasmodic
 Cough, with infiltration in lower chest
 Cough, spring
 Cough, painful
 Cough, must hold his chest
 Purulent expectoration
 Cough after influenza (Boericke)

Give Kreosote to such a patient and certainly the old lady will bless you. Remember also, that Kreosote has marked acidity and it produces even gangrenous pathology in the lungs (Boericke).

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If the patient holds chest with his hands, think of Bryonia, Drosera, Phosphorus and Sepia. All of the above three remedies (i.e. Cimicifuga, Arnica, Kreosote) do share this symptom.

If patient holds head while coughing, remember Nux Vomica and Bryonia. If the patient holds larynx during shattering cough, think of Allium-cepa.

If the patient holds his abdomen while coughing, consider Conium and Phosphorus.

If the patient holds the pit of the stomach, on coughing, it is Drosera. Drosera is known for its most violent and loud cough; also it would be worth noting that

Drosera is one of the few remedies for soundless (toneless) cough.

If a nervous delicate child with violent measly cough has to hold himself *inwardly*, think of Coffea.

Different positions modifying cough, may guide to the remedy. For instance, for cough aggravated on lying down in the evening, the important remedies to be considered: Pulsatilla, Ars-alb., Hyoscyamus, Drosera, Conium, Sepia, etc.

Conium has some characteristic modalities:

Cough, lying down, evening
 Cough, lying, only when first lying down; obliged to sit up and cough it out, then can rest
 Cough, sit up must

Innumerable times the above modalities have helped me to cure patients with prolonged bad cough.

Hyoscyamus is another such less commonly used remedy, but often of great help in treating acute bronchitis, even in the absence of its universally known vulgar mentals! The main features being:

Cough, night, lying while
 Cough, hacking, lying while
 Cough, first lying down, on
 Cough, lying, head low
 Cough, measles after
 Cough, sleep during; wakes up
 Cough, old people, night

There are different positions of aggravations in remedies, accordingly: e.g.: Lying on right side (Merc-sol., Stannum.), left side (Phos., Sepia, Sulph.), on abdomen, back, face, kneeling, etc. Please refer the repertory to have some exercise!

Different body movements that affect cough could help decide the selection. Walking aggravating the cough may suggest Ferrum, Calc. (Although, walking relieves dyspnoea in Ferrum.)

Ignatia and Drosera have definite relief in cough while walking.

Walking fast and exertion aggravate cough in Pulsatilla. A child playing an outdoor game and coughing thereby is often Pulsatilla. A dancer coughing while/after rehearsing for her dance may need Pulsatilla.

Rapid motion, manual labour and exertion provokes cough in Natrum-mur. Motion of the arms aggravate cough in Natrum-mur, Ferrum and Lycopodium. Laughing aggravates cough in Phosphorus, China and Stannum.

Excessive talking leading to cough is Collinsonia. Collinsonia is also a remedy for singers hoarseness.

A Stannum old man may laugh loudly and cough to bring out profuse expectoration very easily, and may start talking again, as if nothing has happened.

Iodum is a great lung remedy capable of curing Tuberculosis. It has painful hoarseness with violent cough. Iodum has a peculiar modality of an inability to lie down with cough. Please read the exact rubric:

Cough, lie down could not, sat bent forward

Head movement upwards or looking up aggravates cough in Spongia and Bryonia. Head movement forward incites cough in Causticum, and relieves in Spongia.

Raising arm, increases cough in Bryonia and Ferrum.

Rinsing mouth and brushing teeth, aggravates cough in Coccus cacti.

A person coughing more in the morning while brushing teeth and gagging with anguish while rinsing the mouth, near the wash-basin, strongly think of Coccus cacti. Read:

Cough, rinsing the mouth
Cough, brushing teeth
Stomach, gagging, coughing on
Stomach, gagging, expectoration, during

If I separately bring to your notice the contradictory symptom in Coccus-cacti, it will be remembered better, i.e.:

Cough, paroxysmal, rinsing the mouth with cold water, amel.

As described in the text, Coccus cacti has: Regular paroxysm of violent tickling, racking cough ending in vomiting or raising much clear rosy mucus hanging from mouth. If you observe such a

patient once, you will start prescribing this beautiful remedy much more often. Even your patient will describe it in a graphic manner. Coccus cacti has another time modality, i.e. Cough, < 11.30 p.m. ! I have yet to see such a patient.

When you ask your patient to open his mouth wide open to examine his fauces with torch, and if the patient starts coughing, you wait for a while and repeat your act. If he again gets the same cough, take that as a peculiar symptom. Many times this very indication has helped me to find the correct remedy. If you are not patient enough to find out the exact rubric yourself in the repertory, you find failures many a times in treating day to day cases of cough. Read the following rubric, and find out on your own the important remedy tip from the repertory!

Cough, putting out the tongue, from...
Cough, stretching out the throat
Cough, stretching out the arms

When you observe, the paroxysm of cough makes your patient bend double, it is not Colocynth but Agaricus or Theridion. Agaricus is another wonderful gift to the sufferers of Cough.

A paroxysmal bout of cough ending in sneezing, is a characteristic of Agaricus and Squilla. Often the patient does not realise this peculiarity, but the minutely observing physician shall not miss noting the peculiar symptom during the case interview while your patient coughs.

Cough leading to vomiting may suggest Alumina, Ip., Ant-tart.

Cough with eructation may lead to think of Pulsatilla.

When patient or the attending nurse in the ward says that he coughs and coughs and then vomits all the food consumed, only then he gets relief in the cough. It is likely that he may need a lesser used remedy like Mezerium. Look at the following rubrics, which are a little difficult to spot in the repertory:

Cough, violent, uninterrupted until relieved by vomiting: Mez
Cough, constant, vomiting, amel.
Cough, eating, until he vomits

Again, if the spasmodic cough ends into expectorating sputa, look at the following identical rubric to know the remedy:

Cough, hard, spells of, not ceasing until the masses of offensive sputa are raised: Carb-v.

Cough, paroxysmal, hard spells of coughing, not ceases until masses of offensive sputa are raised: Carb-v.

We shall not go into defining the types of cough, such as hacking, shattering, spasmodic, paroxysmal, etc.

When mother tells you that the child coughs at night during sleep but does not wake up on account of cough, then think of the following possibilities: Cyclamen, Bacillinum, Arnica, Chamomilla, Nit.ac.. In my experience, the first three remedies have been confirmed for this valuable indication.

Ignatia is another interesting cough remedy often underrated respiratory remedy. I have seen it more often indicated in non-hysterical individuals suffering from cough. It also has hysterical cough. The peculiarity of Ignatia cough is that as the patient starts coughing, the cough increases. Ignatia cough is typically hollow, which can be better imagined and observed then described in words. Have a look at the following characteristic in your repertory:

Cough:
Hollow, morning, waking on
Violent, Constant, day and night
Increases more as he coughs more

Inversly, it will be interesting to note that in Antim-crud, the cough becomes weaker and weaker on coughing. Look at the following rubrics:

Cough:
Paroxysmal, attacks, first the strongest, following ones weaker and weaker

It reminds me of Corallium Rubrum, which has a credit of treating difficult cases of cough which *almost runs into each other* (Boericke). It is a remedy for very rapid bouts of cough, often looks like a barking cough.

Besides, the definite time modalities could be observed which may help in the selection of the remedy.

When you observe a child rubbing his face and eyes with hands during cough, you should think of Causticum, Pulsatilla and Squilla. Squilla is a great cough remedy in my day to day practice.

A child waking up frightened from sleep with cough, or springing up in bed with clinging, may call for a common remedy like Antim-tart to a rare remedy like Kali-brom. If you resort to the repertory in an unbiased manner, it gives plenty of opportunities for making your practice much more rewarding and interesting. The contents of the entire article has been, of course, compiled from the repertories, but, I am confident that every sincere student of homoeopathy will agree that time-tested practice based teaching material is useful.

Needless to say that repertorial article such as this type, especially centered around the objective signs in relation to a specific symptom such as Cough, can never be claimed complete. It is more of the space limit what compels us to stop here. The reader is welcome to go further, study and apply.

Reference:

1. J. Kunzli's *Repertorial Generale*
2. Allen's *Encyclopedia of Pure Materia Medica*

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