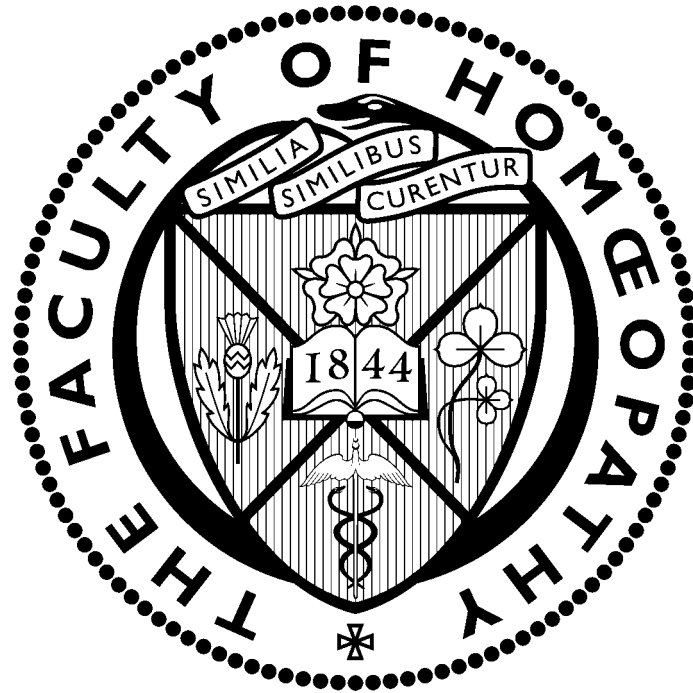


Faculty of Homeopathy

PRIMARY HEALTH CARE EXAMINATION



PODIATRY GUIDELINES

2010

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Faculty of Homeopathy

PRIMARY HEALTH CARE EXAMINATION FOR PODIATRISTS

SECTION 1

1. The examination

The Primary Health Care Examination is a preliminary examination for statutorily registered healthcare professionals that entitles successful candidates to become Licenced Associates (LFHom) of the Faculty of Homeopathy. **Specific guidelines are available for dentists, nurses and podiatrists on request from the Faculty's Academic Office. A separate preliminary examination, the Veterinary LFHom Examination is available for veterinarians and veterinary nurses. Guidelines are available from the Faculty.**

The Primary Health Care Examination has been developed over a number of years of educational and clinical research by the Academic Departments of Glasgow Homoeopathic Hospital and was piloted in 1994. The Faculty of Homeopathy has accredited the examination.

Through its Academic Board, the Faculty of Homeopathy monitors the standard of the examination and curriculum. The Academic Board includes representatives of all Faculty-accredited teaching centres – Aberdeen, Bristol, Glasgow, London and HPTG in York.

The examination paper consists of 100 multiple choice questions. The duration of the examination is a maximum of two hours although many people may finish the exam in less than the allotted time.

2. Entry criteria

The PHCE is open to healthcare professionals who hold a qualification that is registrable in the UK, or hold a qualification registrable in the EU country where they practice. When you apply to sit the examination **it is your responsibility to provide the Faculty with your professional registration details.**

3. LFHom qualification

If you pass the PHCE, you may become a Licenced Associate of the Faculty of Homeopathy. Once your application has been accepted, you may use the letters LFHom followed by a suffix denoting your profession thus: LFHom (Pod).

The examination paper is adapted to meet the needs of specific groups of healthcare professionals. There are papers for dentists, doctors, nurses and midwives, pharmacists and podiatrists.

The qualification LFHom is awarded to overseas candidates provided that their qualification is registrable within the UK.

If you become a Licenced Associate, your continued use of the qualification LFHom depends on your fulfilling these two requirements:

- (i) you do not allow your Faculty membership to lapse.
- (ii) you fulfil the Faculty's Continuing Professional Development requirement. For LFHoms, currently, this is a minimum of 6 hours per year attendance based activity plus 10 hours per year of self-directed study, averaged over three years. This is in addition to the CPD requirement of your own profession. Further details will be supplied to you once you become a Licenced Associate. Overseas members are encouraged to fulfil the CPD requirement but it is not mandatory to retain membership.

4. Aims and scope of the PHCE

As interest in and demand for homeopathy grows, it is important that health care professionals are able to give informed guidance to patients and clients. If you pass the examination, you will have knowledge and understanding of:

- i. what homeopathy is
- ii. what it can achieve
- iii. what its limits are
- iv. how it integrates with contemporary health care
- v. when a patient would benefit from referral to a specialist
- vi. how to arrange a specialist referral
- vii. how to act supportively while a patient is receiving care from a specialist
- viii. how to use homeopathy in a specified number of targeted clinical situations integrated with normal professional practice in day-to-day patient care

Attendance at a foundation course accredited by the Faculty involves receiving a minimum of 30 hours of teaching. In addition you will normally need to undertake a further 120 hours of private study.

Success in the examination denotes a basic level of competence which will enable you to augment your existing professional skills through the practice of sound, basic homeopathy. It does not equip you to analyse and treat chronic or complex cases other than by the circumscribed use of the particular targeted applications defined in the curriculum. Neither will you be able to take referrals from other colleagues. At all times you are expected to practise within the scope and limits of responsibility of your normal professional practice. These limits are fully described in the syllabus on pages 6 to 20.

5. Faculty-accredited training

The examination is based upon the syllabus studied in the Faculty-accredited foundation course. You may apply to sit the PHCE without having undertaken Faculty-accredited training, although it is strongly recommended that you complete the foundation course to avoid the risk of failure in the examination.

6. Results

After the examination, the Faculty of Homeopathy will let you know (i) whether you have passed or failed, (ii) your mark and (iii) the average mark for those sitting your paper (depending on the number of candidates who sat the exam). Results are sent by post within approximately one month of the examination for sittings in the UK (or two to three months if outside the UK). **Results cannot be given out by telephone.**

If you wish to appeal against your result you should write to Academic Office, Faculty of Homeopathy, Hahnemann House, 29 Park Street West, Luton LU1 3BE within one month of receipt of your marks.

7. Regulation of standards and safety

If you become a Licenced Associate (LFHom), the Faculty will ensure safety and quality of clinical care by requiring that you adhere to certain professional standards and remain within the normally recognised limits of practice and competence of your professional discipline. You are also bound to practise within the limits of your homeopathic competence at LFHom level.

If you breach the above, the Faculty may implement its disciplinary procedures which may include those of your professional regulatory body. The Faculty may withdraw your Licenced Associateship.

8. Further study

LFHom level training is limited to familiarisation with homeopathy and targeted clinical competence. Those who wish to move towards the goal of more advanced clinical practice should undertake DFHom(Pod) training and may eventually progress to MFHom(Pod) training. If you would like further information please contact the Faculty of Homeopathy at the address overleaf.

9. Practical details

Administration is undertaken by the Faculty and queries, application forms and fees should be directed to the Faculty Academic Office at the address below. **Application forms must be submitted by the published closing date.**

The examination is held at Faculty-accredited teaching centres in Aberdeen, Bristol, Glasgow, London and HPTG in York, and other locations overseas. Examination sittings and closing dates for applications are listed in the Faculty examinations calendar which can be obtained from the Faculty Academic Office.

Overseas students

Candidates whose native language is not English may use a foreign language dictionary. Dictionaries will be scrutinised by the invigilator before the exam.

Withdrawals

Notice of withdrawal from the examination must be given in writing to the Academic Office at the Faculty of Homeopathy (address below). The examination fee less a 10% administrative charge will be refunded when notice of withdrawal is received before the published closing date for applications. No other refunds will normally be made. The Faculty will consider refund less an administrative charge for withdrawals because of illness, or instead will transfer the application to another sitting.

Transfers

Candidates may transfer their application to a future sitting provided that they notify the Faculty in writing before the published closing date for return of applications. A 10% administrative fee will be charged. Candidates may not transfer their application more than once unless they have obtained special approval from the Exams Administrator.

Re-sitting the examination

Candidates who fail the PHCE may re-sit the examination during the following season - for example a candidate who fails the examination in the spring may re-sit it during the autumn. Candidates cannot apply to re-sit the examination at another centre during the same season. Candidates are also limited to no more than four attempts at the examination, unless they can give good reasons for further attempts and are supported by their teaching centre. Please note that if the PHCE exam is cancelled candidates will be allowed to take the exam at the next available sitting. Candidates who re-sit the examination pay a reduced examination fee.

Applying for membership

Candidates who pass the examination will be sent a membership application form inviting them to become a Licenced Associate of the Faculty. A separate fee is payable to the Faculty for this and must be paid annually to maintain LFHom status.

Faculty contact details

Academic Office, Faculty of Homeopathy, Hahnemann House, 29 Park Street West, Luton LU1 3BE. Tel: 01582 408680 Fax: 01582 723032 Website: www.facultyofhomeopathy.org

SECTION 2

A. Syllabus outline

AIMS AND OBJECTIVES

- to provide students with a well-rounded general education in homeopathy at an introductory level.
- to educate students about targeted homeopathic medicines for podiatric disorders seen in general podiatric practice.
- to introduce Marigold Therapy and its principles and methodology into podiatric practice and develop the podiatrist's understanding and skill in application.
- to provide a unique hands-on clinical experience through a special podiatry module.
- to equip podiatrists who complete the course with the ability to integrate homeopathy in a limited way within their practice.

BASIC PRINCIPLES

A basic understanding of historical and contemporary development, concepts and evidence including:

- Auto-regulation, hormesis, similars and minimum dose.
- Sensitivity in the ill person. individualisation, totality of symptoms.
- Materia medica sources: toxicology, provings, clinical.
- Outline of the theory of chronic disease and miasms.
- Scientific evidence: clinical data, trials and meta-analyses, laboratory experiments.
- Integration / relationship to other forms of care including conventional medicine and herbalism.
- Self-healing and placebo responses.

PHARMACY

Sources and preparations including:

- Mother tincture, trituration, succussion, serial dilutions
- Dilutional scales: X (D), C, LM
- Low & high potencies
- Hahnemannian & Korsakovian methods
- Biophysical models
- Prescription writing

CONSULTATION & CLINICAL SKILLS

A basic understanding of the consultation, history taking and case analysis in homeopathic care:

Perspectives of the illness:

- Presenting problem
- Aetiology
- Diagnosis & pathology
- Patients' disease reactions: the clinical picture
- Constitutional / fundamental reactions
- Constitution
- Biographical & past history including family history
- Typology & drug types
- Basic understanding of the concept of layers
- Concepts of acute and chronic case management

History taking and analysis:

- Understanding and categorising symptoms and their modalities
- Keynotes, totality, essence, strange rare and peculiar reactions
- Hierarchy of symptoms
- The repertories: their development and content, and their role in case analysis

THERAPEUTICS AND CASE MANAGEMENT

A basic understanding in the following topics:

- Clinical applications of low & high potencies
- Speed of responses
- Repetition of the dose
- Changing dosage
- Changing remedy
- Schools of practice including Classical, Pluralistic, Complex and proprietary mixtures.
- Clinical reaction patterns
- In acute, chronic and incurable cases
- Initial reactions - aggravations
- Direction of cure (Hering's law)
- Suppression
- Isopathy and tautopathy
- An introduction to nosodes

GENERAL CLINICAL APPLICATIONS

Materia medica as listed, in the context of the specified clinical conditions, modified by the boundaries of each professional discipline.

Legal and ethical aspects of homeopathic prescribing within the context of different healthcare professions, including non-medical practice.

PODIATRIC APPLICATIONS

The following conditions are amenable to treatment by podiatric practitioners at PHCE level:

- Corn/callus/fissures
- Verruca pedis
- Fungal infections
- Ulcer (wound management)
- Pain/inflammation/neuritis

Homeopathic treatment of these conditions will be demonstrated and taught in the podiatry-specific module.

B. PHCE medicines syllabus

Learning objectives and outcomes

1. TARGETED CLINICAL APPLICATIONS

Students will acquire the materia medica knowledge necessary to enable effective prescribing of a limited range of homeopathic medicines giving reliable results in a limited number of specified clinical applications in Primary Care.

OUTCOME: Students will be able to apply their materia medica knowledge to prescribe the named medicine effectively in given clinical conditions.

2. KEY CHARACTERISTICS

Students will be able to recognise the key characteristics indicating named medicines in specific clinical conditions.

OUTCOME: Students will know the essential outline of the clinical picture on which a prescription for the named medicine in the specified clinical conditions will be based.

Students will be able to differentiate between named medicines indicated for the same specified clinical condition. Students will understand the significance of detailed symptomatology in making the differentiation of the homeopathic prescription in individual patients.

OUTCOME: Students will be able to identify the key individualising characteristics of the named medicines.

3. DIFFERENTIATION OF MEDICINES

Students will be able to differentiate between the indications for the use of a number of named medicines in specified clinical conditions.

OUTCOME: Students will be able to differentiate between the symptom pictures of the named medicines in the specified clinical conditions. Minimal symptom picture only required of secondary medicines, shown in brackets.

4. 'SEE ALSO'

An aide memoir of medicines with similar uses. The differentiation of these medicines will not be tested in the exam.

C. Materia medica A-Z

Materia medica listed by medicine name

(Medicines for comparison and differentiation are shown in relation to each targeted clinical application)

ACONITE

| Targeted applications | Differentiation | See also |
|------------------------------------|------------------------|-----------------|
| CROUP | | |
| URT; CORYZA | | Allium, Ars alb |
| SHOCK | Arn | |
| ANTICIPATORY ANXIETY [PANIC, FEAR] | Arg nit; Ars Alb; Gels | |
| FEVER | Bell; Ferrum phos | |

Key characteristics

Acute conditions. Sudden or violent onset. Intense fear (death)

Restlessness, excitement, agitation

Fever. Thirst

Ailments from shock, fright, fear

Ailments from exposure to cold, dry wind

Modalities: < violent emotions, cold dry wind, night, especially around midnight; > open air

APIS MELLIFICA

| Targeted applications | Differentiation | See also |
|-------------------------|------------------------------|----------|
| ACUTE M/SKEL CONDITIONS | Bryonia; Puls; Rhus; (Ledum) | |
| CONJUNCTIVITIS | Arg nit; Euphr; Puls | |
| ACUTE ALLERGIC REACTION | | |

Key characteristics

Hot, red, swollen, shiny, acutely painful joint(s)

Red, swollen painful conjunctiva and/or lids

Photophobia

Acute dysuria, frequency, painful urging

Oedema of face and/or eyes

Swelling eruptions and reactions to bites and stings

Swelling/oedema

Stinging and burning pains

Heat

Thirstless (in acute state)

Modalities: < heat, touch, pressure, afternoon; > cool air, cold applications

ARGENTUM NITRICUM

| Targeted applications | Differentiation | See also |
|-----------------------|-------------------|----------|
| ANTICIPATORY ANXIETY | Acon; Gels; Lyc | |
| CONJUNCTIVITIS | Apis; Euphr; Puls | |
| GIT: DYSPEPSIA | Lyc; Nux | |
| DIARRHOEA, NERVOUS | Ars alb; Gels | |

Key characteristics

High energy

Impulsive and hurried

Anxiety, anticipatory; phobia – with restless agitation

Diarrhoea; sweat; palpitation; flatulence (burping)

Purulent, acrid conjunctivitis

Pains like splinter

Modalities: < heat, stuffy, stress, sweets; > cool, open air, motion

Food: Desires sweets AND salt < sweets

Temp and weather: hot, craves fresh air > cool air

ARNICA MONTANA

| Targeted applications | Differentiation | See also |
|---|-------------------|-----------------------------------|
| TRAUMATIC SHOCK | Acon | |
| TRAUMA: PRE/POST-OP, DENTAL, POST-PARTUM; OVER-EXERTION (CRAMP) | Staphys | Rhus; (Hyp); (Led); (Ruta); Symph |
| BLEEDING | Ferrum phos; Phos | |

Key characteristics

Bruising

Soft tissue damage

Capillary bleeding

Soreness

Stiffness

Mental state: denies problem, resents interference. Aetiology of trauma

Modalities: < touch, avoids touch; jarring, motion; > lying, rest

ARSENICUM ALBUM

| Targeted applications | Differentiation | See also |
|------------------------|---|----------|
| CONSTITUTIONAL PICTURE | | |
| HAY FEVER; CORYZA | Euphr; (Allium); (Ambrosia); (Sabadilla) | |
| GIT: D AND V | Arg nit; Gels | |

Key characteristics

Anxiety: insecurity, health, trifles, worrier; agitated restless; fastidious

Burning pains > warmth

Acrid, scanty, watery (nasal) discharges; nasal discharge alt. obstruction; sneezing. Very chilly

Modalities: > warmth, hot applications, hot food, motion; < rest, midnight to 2 am; all cold, incl. cold food and drink, exertion

Food: Thirst warm drinks, small amounts. Desires: sour things; Averse: fat; < fruit

BELLADONNA

| Targeted applications | Differentiation | See also |
|-----------------------|---|----------|
| FEVER | Acon; Ferrum phos | |
| ACUTE OTITIS | Cham; Ferrum phos; Merc; Puls; (Hepar) | |
| PHARYNGITIS | Lach; Lyc; Merc; (Hepar) | |
| ABSCCESS | (Hepar) | |
| SUNSTROKE | | |
| TEETHING | Cham | |

Key characteristics

Acute condition. Suddenness, intensity

Red, hot and dry. Thirst +/- High fever

Intense, throbbing, burning pain. Bright red face (flushed), eardrum or throat

Dilated pupils. Throbbing head. Febrile convulsion. Jerks and spasms

Oversensitiveness - all senses. Irritability. Night terrors, hallucinations, delirium, confusion

Modalities: < draft, light, noise, touch, jarring

Food: Desires lemons

BRYONIA ALBA

| Targeted applications | Differentiation | See also |
|-------------------------|---------------------------|----------|
| ACUTE M'SKEL CONDITIONS | Apis; Puls; Rhus; (Ledum) | |

Key characteristics

Irritable, wants to be left alone. Joints red, swollen, hot

Stitching or bursting pains. Dry, thirsty

Modalities: < least motion; touch; heat; eating > pressure; lying on painful side; cool, open air

Food: Thirst for large amounts, cold drinks

CALCAREA CARBONICA

| Targeted applications | Differentiation | See also |
|------------------------|-----------------|----------|
| CONSTITUTIONAL PICTURE | | |

Key characteristics

Anxiety/depression: fearful, state of mind, being observed, duty

Family cares

Characteristic morphology. Slow, sluggish – mind and body

Overweight, chilly, sweaty

Constipation (feels better)

Lymphadenopathy

Delayed development

Modalities: < cold, physical and mental exertion, pressure of clothes, milk, dentition; > rubbing, lying on back, dark

Food: Desires eggs, ice cream, sweets, indigestible things; averse coffee, meat. < milk

CHAMOMILLA

| Targeted applications | Differentiation | See also |
|-----------------------|---|----------|
| TEETHING | Bell | |
| ENT: ACUTE OTITIS | Bell; Ferrum phos; Merc; Puls; (Hepar) | |
| COLIC | Coloc | |

Key characteristics

Frantic, angry, intolerance of pain; ugly, cross, uncivil and quarrelsome
 Twitchings and convulsions during teething
Modalities: < evening/night, anger; > warm wet weather, being carried
Food: < Coffee

COLOCYNTHIS

| Targeted applications | Differentiation | See also |
|-----------------------|-----------------|----------|
| COLIC | Cham | |

Key characteristics

Cramping pain - > pressure, doubling up, warmth
 Diarrhoea: watery, < after eating/drinking
 (Ailments from) Anger

EUPHRASIA OFFICINALIS

| Targeted applications | Differentiation | See also |
|-----------------------|---|----------|
| CONJUNCTIVITIS | Apis; Arg nit; Puls | |
| HAY FEVER; CORYZA | Ars alb; (Allium); (Ambrosia); (Sabadilla) | |

Key characteristics

Acrid tears, bland nasal discharge itching eyes, photophobia
Modalities: < evening, indoors, warmth, light; > open air, dark

FERRUM PHOSPHORICUM

| Targeted applications | Differentiation | See also |
|-----------------------|---------------------------------|----------|
| FEVER | Acon; Bell | |
| ENT: ACUTE OTITIS | Bell; Cham; Merc; Puls; (Hepar) | |
| BLEEDING | Arn; Phos | |

Key characteristics

Early stages of febrile illness and inflammation
 Slow onset. Full, soft, flowing pulse. Flush/pallor
 Dull red eardrum
 Thirsty, sweaty, shivery
Modalities: < exertion, open air, jarring; > gentle motion

GELSEMIUM SEMPERVIRENS

| Targeted applications | Differentiation | See also |
|-----------------------|--------------------|----------|
| ANTICIPATORY ANXIETY | Acon; Arg nit; Lyc | |
| URT: FLU | Merc | |
| DIARRHOEA, NERVOUS | Arg nit; Ars alb | |

Key characteristics

Weakness. Anxiety, anticipatory, stage fright; phobia

'Paralysis' of mind, voice or body; heaviness, tremor, inco-ordination

Flu: shaky, listless, heavy, drowsy, dull, headache; thirstless

Gradual onset, low grade fever

Modalities: < damp weather, heat, thinking of symptoms; > sweating, urinating, open air, motion

IGNATIA AMARA

| Targeted applications | Differentiation | See also |
|-----------------------|------------------|----------|
| EMOTIONAL AILMENTS | Nat mur; Staphys | |

Key characteristics

Grief - silent, sighing

Volatile emotions. Disappointed love

Contradictory/paradoxical symptoms

Sensation of a lump. Spasm

IPECACUANHA

| Targeted applications | Differentiation | See also |
|-----------------------|-----------------|----------|
| URT: COUGH | Phos | |
| GIT: NAUSEA; VOMITING | (Cocculus) | |

Key characteristics

Cough: wheezy, spasmodic, causing vomiting, < movement

Nausea, constant; vomiting (doesn't relieve) – nothing ameliorates, clean tongue

< smell of food, movement; salivation

LACHESIS

| Targeted applications | Differentiation | See also |
|-----------------------|--------------------------|----------|
| PMT AND MENOPAUSE | Nat mur; Puls; Sep | |
| ENT: PHARYNGITIS | Bell; Lyc; Merc; (Hepar) | |

Key characteristics

Anger, jealousy, tirades, loquacity. High libido

Bloating, < tight clothes. Purplish discolouration

Flushes of heat. Left sided. Hot. Intolerance of tight clothes

Pharyngitis: L sided, < warm food/drinks, < liquids cf solids

Modalities: > free discharges, e.g. onset menstrual flow, cool air; < after sleep/waking, morning, heat (sun), alcohol

LYCOPODIUM CLAVATUM

| Targeted applications | Differentiation | See also |
|-----------------------|---------------------------|----------|
| ANTICIPATORY ANXIETY | Arg nit; Gels | |
| GIT: FLATULENCE | Arg nit | |
| ACUTE DYSPEPSIA | Arg nit; Nux | |
| ENT: PHARYNGITIS | Bell; Lach; Merc; (Hepar) | |

Key characteristics

Anxiety, anticipatory, lacks confidence, but performs well – conscientious, desire to be in control, irritable, hypochondriacal

GIT symptoms: heartburn, fullness, distension, flatulence (belching, passing flatus; both ameliorate) Pharyngitis: R sided, > warm drinks

Modalities: < 4pm - 8pm, heat (exc throat), eating; > after midnight, cool air, motion, urinating, belching

Food: Desire sweets; < Onions

MERCURIUS SOLUBILIS

| Targeted applications | Differentiation | See also |
|-------------------------|---|----------|
| URT: FLU | Gels | |
| TEETHING | Cham | |
| ENT: ACUTE OTITIS | Bell; Cham; Ferrum phos; Puls; (Hepar) | |
| PHARYNGITIS/TONSILLITIS | Bell; Lach; Lyc; (Hepar) | |

Key characteristics

Fever: sweat ++, offensive, < heat and cold, tongue swollen and indented, metallic taste

Teething: sweaty, salivation ++. Offensive sweat, breath, discharges. Mouth ulcers

Modalities: < night, sweating, lying on right side, when heated, drafts, damp cold; > moderate temperature, rest

NATRUM MURIATICUM

| Targeted applications | Differentiation | See also |
|------------------------|-----------------|----------|
| CONSTITUTIONAL PICTURE | | |
| EMOTIONAL AILMENTS | Ign; Staphys | |
| PMT AND MENOPAUSE | Lach; Puls; Sep | |

Key characteristics

Grief, ailments from grief – can't cry or weeps alone, < consolation; hides feelings

Irritable, resentful, critical, dwells on upsets; self-doubt/self-criticism

Greasy skin and hair. Cold sores

Modalities: < sympathy, sea air, exertion, before menses, morning and forenoon; > fresh air, gentle exercise

Food: Desires salt or averse salt. Aversion to fat and slimy food. Thirsty

Temp and weather: Desires fresh air; chilly but intolerant of heat

NUX VOMICA

| Targeted applications | Differentiation | See also |
|------------------------|-----------------|----------|
| CONSTITUTIONAL PICTURE | | |
| GIT: DYSPEPSIA | Arg nit; Lyc | |
| OVER-INDULGENCE | | |

Key characteristics

Anger, irritability, impatience, hard working (workaholic), hard living, fastidious, desire stimulants

GIT symptoms: indigestion, nausea (> vomit), constipation

Driving, efficient type A personality. Oversensitive: noise, smells, light

Modalities: < early morning, dry cold, open air, uncovering, high living, slight causes; > warmth, damp (exc before rain), lying

Food: Desires alcohol, spices, tobacco

Temp and weather: Chilly; intolerant of wind, < wind

PHOSPHORUS

| Targeted applications | Differentiation | See also |
|------------------------|------------------|----------|
| CONSTITUTIONAL PICTURE | | |
| URT: COUGH | Ipecac | |
| BLEEDING | Arn; Ferrum phos | |

Key characteristics

Sympathetic, affectionate and very sensitive to others' feelings

Desires company; > reassurance and consolation

Anxious; Fears - something will happen, imaginary things, dark, thunderstorms

Cough: tickling, < cold air, talking; painful laryngitis. Burning pains > cold. Tendency to bleed

Modalities: < lying on left side, emotions, cold, evening; > eating; sleep

Food: Desires cold food, cheese, ice-(cream), salt, spices. Thirst for cold drinks

PULSATILLA NIGRICANS

| Targeted applications | Differentiation | See also |
|-------------------------|---|----------|
| CONSTITUTIONAL PICTURE | | |
| URT/ENT: ACUTE CATARRH | Merc | |
| OTITIS MED | Bell; Cham; Ferrum phos; Merc; (Hepar) | |
| CONJUNCTIVITIS | Arg nit; Euphr | |
| ACUTE M/SKEL CONDITIONS | Apis; Bryonia; Rhus; (Ledum) | |
| PMT AND MENOPAUSE | Lach; Nat mur; Sep | |

Key characteristics

Timid, shy, weepy, desires company and consolation/affection; changeable, obstinate, flirtatious

Catarrh, snuffles – profuse, bland, yellow/green (and all discharges). Conjunctivitis. Styes - upper lid Symptoms changeable. Onset of symptoms at puberty

Modalities: < warmth, rest, beginning of motion, twilight, rich foods, fat; > cold, continued gentle motion, open air; after crying, lying on back

Food: Thirstless. Desires pastry and rich food, cold food. Averse to fat, hot food < bread, fat, fruit, pastry, rich food

Temp and weather: >open air, < heat, and stuffy/warm rooms

RHUS TOXICODENDRON

| Targeted applications | Differentiation | See also |
|-------------------------|------------------------------|----------|
| ACUTE M/SKEL CONDITIONS | Apis; Bryonia; Puls; (Ledum) | |

Key characteristics

Joint pain and stiffness: Any joint
 Restlessness. Cold sores
 Essential modality cluster: temperature + weather + movement
Food: Desires milk

SEPIA

| Targeted applications | Differentiation | See also |
|------------------------|---------------------|----------|
| CONSTITUTIONAL PICTURE | | |
| PMT AND MENOPAUSE | Lach; Nat mur; Puls | |

Key characteristics

Depressed, apathetic, irritable, put-upon, weary/worn out, averse loved-ones; < consolation
 Libido low or lost. Never well since child birth
 Pelvic bearing down pain. Sweaty. Sallow complexion
Modalities: < cold air, before menses, afternoon and/or evening, before storm; > dancing, strenuous exercise, warmth, thunderstorm
Food: Desires vinegar, pickles and acids. Aversion to meat, fats and rich food which <

STAPHYSAGRIA

| Targeted applications | Differentiation | See also |
|---|--------------------------|----------|
| TRAUMA: SURGICAL, INVASIVE, -OSCOPIES, -OTOMIES | Arn; (Hypericum); (Ruta) | |
| EMOTIONAL AILMENTS | Ign; Nat mur | |

Key characteristics

Incised wounds, surgical trauma, invasive procedures; cystoscopy, shincterotomy, etc.; pre-/post op care Cystitis after intercourse; Recurrent styes
 Ailments from anger, grief and disappointed love, 'mortification' and humiliation, anger, suppressed anger/indignation

SULPHUR

| Targeted applications | Differentiation | See also |
|------------------------|-----------------|----------|
| CONSTITUTIONAL PICTURE | | |

Key characteristics

Lazy, selfish, philosophical, opinionated, untidy, hoarding
 Redness of orifices. Hot feet - has to stick them out of bed
 Faint sinking feeling (in abdomen) about 11am
 Eruptions: itchy (< scratching, washing, at night), hot, red, excoriated
 Conjunctivitis, blepharitis and styes: burning, itching, hot, red
 Diarrhoea - driving out of bed in the morning
Modalities: < 11 am, bathing, becoming overheated, overexertion, standing, milk, >dry, warm weather, open air, motion

D. Secondary target medicines

For 'usefulness' in targeted clinical applications only

| MEDICINE | APPLICATION | KEYNOTES - FOR DIFFERENTIAL DIAGNOSIS |
|---|--|--|
| ALLIUM CEPA | Coryza, Hay fever | URT and conjunctiva: Watery eyes; excoriating watery nasal discharge; sneezing; rasping, spasmodic cough Modalities: < evening, warm room; > open air, cold room |
| AMBROSIA | Hay fever | URT and conjunctiva: Wheezing; watery discharge, eyes and nose; itching lids; sneezing |
| CANTHARIS | Insect bites (inflamed), burns | Burning vesicular eruption |
| COCCULUS INDICUS | Nausea and vomiting | Nausea with vertigo |
| CUPRUM METALLICUM | Cramp, night | Cramp in the calves and feet at night |
| HEPAR SULPHURIS CALCAREUM | Septic states: abscess, otitis, pharyngitis | Sudden, intense, foul discharge, offensive sweat, chilly, extremely irritable, oversensitive, thirsty. Helps abscess to mature/discharge. Sensitive to drafts |
| HYPERICUM PERFORATUM | Injury | Damage to sensitive/nerve-rich tissues; penetrating wounds; spinal injuries. Centripetal spread of pain |
| ISOPATHIC MEDICINES - HOUSE DUST MITE - MIXED POLLENS AND GRASSES | Homeopathic immunotherapy | |
| KALI BICHROMICUM | Acute Catarrh | Sticky, stringy catarrh; maxillary sinus pain, root of nose |
| LEDUM PALUSTRE | Injury; puncture wounds; eye injury; insect bites, stings Acute m/skel conditions | Painful joints, > cold, pale; ascending progression. Chilly patient, symptoms > cold |
| RUTA GRAVEOLENS | Injury/strain: tendon, periosteum, joint | Temp and weather modalities as Rhus tox |
| SABADILLA | Hay fever | Profuse watery nasal discharge and sneezing; < cold room, cold drinks; > warm room, warm food and drink |
| SILICEA | Abscess, suppuration. Splinters, foreign bodies CONTRAINDICATIONS | Later stages of suppuration: aids resolution Sweats: Foot sweat foul. Chilly but sweaty Modalities: < cold air, damp, change damp to dry, pressure; > warmth, warm wraps |
| SYMPHYTUM OFFICINALE | Fractures; injury to bone, periosteum. Injury to eye and orbit | |

E. Podiatric specific materia medica

The medicines are divided into categories of 'primary' and 'secondary' indications. The secondary medicines have indications which are not covered in the general PHCE modules but have a specific podiatric application and are essential learning podiatry module. These will be studied to provide a targeted understanding of their indication and will be covered in depth at the next level of training (Diploma).

The list of medicines is does not give comprehensive coverage of all the conditions that will be met in podiatric practice. However, they are 'key' medicines, which are used successfully by podiatrists in the treatment of indicated conditions.

All the listed medicines have been reviewed under the five topic areas shown below and indicated accordingly.

PRIMARY INDICATIONS

Antimonium crudum
 Apis mellifica
 Arnica
 Arsenicum album
 Arsenicum iodide
 Calcarea carbonica
 Causticum
 Dulcamara
 Ferrum picrium
 Graphites
 Hypericum perforatum
 Lachesis
 Ledum palustre
 Natrum muriaticum
 Nitric acid
 Petroleum
 Ruta graveolens
 Silica
 Sepia
 Sulphur
 Symphytum
 Thuja

SECONDARY INDICATIONS

Bellis perennis
 Benzoic acid
 Berberis vulgaris
 Cinnabaris
 Hepar sulphur
 Kali bichromium
 Mezereum
 Medorrhinum
 Psorinum
 Rhododendron

| CLINICAL APPLICATION | PRIMARY INDICATION | SECONDARY INDICATION |
|------------------------------|---|--|
| CORN/CALLUS, FISSURES | Antimonium crudum; Graphites; Hypericum perforatum; Petroleum; Sepia | |
| FUNGAL INFECTIONS | Arsenicum iodide; Graphites; Sepia; Silica; Sulphur; Thuja | Berberis vulgaris; Psorinum |
| PAIN AND INFLAMMATION | Apis mellifica; Hypericum perforatum; Lachesis; Ledum palustre; Nitric acid; Rhus toxicodendron; Ruta graveolens, Symphytum | Kali bichromium; Rhododendron; Bellis perennis; Benzoic acid |
| ULCERS | Arnica; Arsenicum album; Lachesis; Nitric acid; Silica | Hepar sulphur; Kali bichromium; Mezereum |

| | | |
|----------------------|---|-------------------------|
| VERRUCA PEDIS | Antimonium crudum; Calcareo carbonica; Causticum; Dulcamara; Ferrum picrium; Graphites; Natrum muriaticum; Nitric acid; Thuja | Cinnabaris; Medorrhinum |
|----------------------|---|-------------------------|

F. Podiatric materia medica A-Z

ANTIMONIUM CRUDUM (PODIATRY ONLY)

Targeted applications

CORN/CALLUS
FISSURES
WARTS/VERRUCA PEDIS

Differentiation

Nitric acid; Petroleum; Graphites; Nat mur;
Thuja; Calc Carb

Key characteristics

Corresponds to cornified, hard, hyperkeratotic lesions, often multiple
Hyperkeratotic fissures, often found on heels or external borders of feet, are indication for this remedy

APIS MELLIFICA

Targeted applications

PAIN
INFLAMMATION

Differentiation

Bryonia; Ledum

Key characteristics

Affected joints are reddish-pink and swollen
The stinging, burning pain improves with cold applications

ARNICA MONTANA

Targeted applications

ULCER
PAIN, INFLAMMATION

Differentiation

Silica
Ruta; Bellis perennis; Symphytum

Key characteristics

Ulcer: prescribed always because of specific action on venous capillaries (varicose ulcer)
Pain/inflammation: remedy is indicated following physical effort or repeated micro-trauma (e.g. badly fitting shoes). There is purplish oedema and intense pain which improves after hot applications
Joints are very sensitive to any contact

ARSENICUM ALBUM

Targeted applications

ULCER
PAIN, INFLAMMATION

Differentiation

Hepar sulph
Hypericum

Key characteristics

Ulcer: relieved by hot application. Bloody, foetid, burning discharge irritates surrounding skin
Intense pain worsens at night between 1 and 3am. Arterial disorders can also be present
Pain/inflammation: patient is often agitated and anxious. If the patient has been suffering from sciatica for long time, general condition can deteriorate with loss of weight

ARSENICUM IODATUM (PODIATRY ONLY)**Targeted applications**

FUNGAL INFECTIONS

Differentiation

Graphites; Berberis vulgaris; Sulphur

Key characteristics

Erythematous desquamating eruptions are characteristic of this remedy which is suitable in cases of skin mycosis due to Candida albicans or trichophytans

BELLIS PERENNIS (PODIATRY ONLY)**Targeted applications**PAIN
INFLAMMATION**Differentiation**

Arnica

Key characteristics

Acts upon muscular fibres of blood vessels. Much muscular soreness. Lameness, as if sprained. Venous congestion, due to mechanical causes. First remedy in injuries to deeper tissues, after major surgical work. Results of injuries to nerves with intense soreness and intolerance to cold weather.

BERBERIS VULGARIS (PODIATRY ONLY)**Targeted applications**FUNGAL INFECTIONS
ATHLETE'S FOOT**Differentiation**

Arsen iodide; Graphites; Psorinum

Key characteristics

Indicated when there are circinate, dry, scaly lesions with circumferential progression and healing from centre outwards

BRYONIA ALBA**Targeted applications**PAIN
INFLAMMATION**Differentiation**

Apis; Colocynthis; Ledum

Key characteristics

Preferential action on serous membranes, particularly articular synovia where it causes irritation and effusion. Joints are red and hot, frequently swollen and sensitive to slightest touch. Pain throbbing, acute and stinging. It is aggravated by slightest movement or jar

CALCAREA CARBONICA**Targeted applications**

VERRUCA PEDIS

Differentiation

Ant crud; Thuja; Nitric acid

Key characteristics

Indicated in round, solitary, isolated, hard warts, verrucae

CAUSTICUM (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-----------------------|--------------------------------|
| VERRUCA PEDIS | Cinnabaris; Nitric acid; Thuja |

Key characteristics
 Specific for subungual verrucae
 Also for plain, crenated pendunculated verrucae which bleed easily

CINNABARIS (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-----------------------|---|
| VERRUCA PEDIS | Causticum; Dulcamara; Cinnabaris; Thuja |

Key characteristics
 This remedy has therapeutic action on senile keratosis
 Indicated in Mollusca contagiosa with a reddish periphery as well as for its pruritic nature

COLOCYNTHIS

| Targeted applications | Differentiation |
|-----------------------|-----------------|
| PAIN INFLAMMATION | Bryonia |

Key characteristics
 Remedy is essentially suitable in acute neuralgia, mostly in sciatica or the crural nerve
 Pain is cramp-like, intermittent and occurs sometimes in a flash
 Pain is improved by flexing, bending over, strong pressure and heat and aggravated by movement

DULCAMARA (PODIATRY ONLY)

| Targeted applications | Differentiation |
|---------------------------------------|--|
| VERRUCA PEDIS PAIN INFLAMMATION | Rhus tox; Ruta; Cinnabaris; Thuja; Sepia |

Key characteristics
Verruca pedis: Transparent plain warts more visible in low angled rather than direct light and located on the back of hands or on the face
 Seborrhoeic, wide and soft, brownish warts, most often located on the back
Pain/inflammation: Joint pains caused or aggravated by cold, damp weather

FERRUM PICRIUM (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-----------------------|--------------------|
| VERRUCA PEDIS | Medorrhinum; Thuja |

Key characteristics
 Particularly indicated in small, pointed warts/verruca occurring in large groups

GRAPHITES (PODIATRY ONLY)

Targeted applications

FISSURES
FUNGAL INFECTIONS
CORNEOUS, PER-UNGUAL WARTS/VERRUCAE

Differentiation

Ant crud; Arsen iodide; Berberis vulgaris;
Kali bich; Nat mur; Petroleum; Psorinum;
Sepia; Silica

Key characteristics

Oozes the thick, viscous, honey-like fluid characteristic of this remedy

The pruritis is relieved by localised cold while the individual sensitive to Graphites tends to be sensitive to cold

HEPAR SULPHURIS CALCAREUM

Targeted applications

ULCER

Differentiation

Arsen alb; Lachesis

Key characteristics

The infection has appeared recently

Ulceration smells offensive

Marked hyperesthesia at slightest touch and cold

HYPERICUM PERFORATUM

Targeted applications

CORN/CALLUS
FISSURES

PAIN
INFLAMMATION

Differentiation

Ledum; Nitric acid

Ruta

Key characteristics

Corn/callus; fissures: indicated for neuro-vascular corns which are painful and inflamed

Pain/inflammation: throbbing pain follows the course of the nerve from the foot to the lumbar region

This remedy is most often indicated in sciatica following a fall

KALI BICHROMICUM

Targeted applications

ULCER
PAIN
INFLAMMATION

Differentiation

Nitric acid; Graphites

Ruta

Key characteristics

Ulcer: suitable for ulcerations with regular, clear margins which appear to have been cut with a blade

Stubborn, with oozing yellow or yellowish-green exudation

When there is pain, it is relieved by heat

Pain/inflammation: Pain that has a sudden onset and conclusion

Sciatica, mostly left side improved by movement and flexing limb

LACHESIS MUTUS**Targeted applications**

| | |
|----------------------|--------------------------|
| ULCER | Nitric acid; Hepar sulph |
| PAIN INFLAMMATION | Colocynthis |

Differentiation**Key characteristics**

Indicated in pseudo-phlegmonous attacks

Characterized by purplish oedema, throbbing pain and extreme sensitivity to slightest contact

Lachesis is particularly suitable for gout occurring in alcoholics

LEDUM PALUSTRE (PODIATRY ONLY)**Targeted applications**

| | |
|----------------------|---------------------------------------|
| PAIN INFLAMMATION | Apis; Bryonia; Hypericum; Nitric acid |
|----------------------|---------------------------------------|

Differentiation**Key characteristics**

Joints are swollen, hot and pale

Pain is aggravated at night and by warmth of the bed and improved by cold applications

Patient immerses foot in cold water if the big toe is affected

MEDORRHINUM (PODIATRY ONLY)**Targeted applications**

| | |
|---------------|----------------|
| VERRUCA PEDIS | Ferrum picrium |
|---------------|----------------|

Differentiation**Key characteristics**

Warts/verrucae in patients with family history of urino-genital infection

Extremely stubborn warts/verrucae, warts with pointed appearance

MEZEREUM (PODIATRY ONLY)**Targeted applications**

| | |
|-------|-------------|
| ULCER | Nitric acid |
|-------|-------------|

Differentiation**Key characteristics**

Ulceration surrounded by area of cyanosis which is hypersensitive to touch

Bloody, foetid discharge

Pain improves when ulcer bleeds and also during menses

NATRUM MURIATICUM**Targeted applications**

| | |
|---------------|---------------------|
| VERRUCA PEDIS | Ant crud; Graphites |
|---------------|---------------------|

Differentiation**Key characteristics**

Corresponds to warts located on folds or wrinkles of forehead

Depending on presence or absence of sensitive type criteria

NITRICUM ACIDUM (PODIATRY ONLY)

| Targeted applications | Differentiation |
|------------------------------------|---------------------------------------|
| WARTS VERRUCA PEDIS FISSURES | Ant crud; Causticum; Calc carb; Thuja |
| DIGITAL NEURITIS | Hypericum; Ledum |
| ULCER | Mezereum |

Key characteristics

Warts/verruca pedis, fissures: golden-yellow warts, local pathogenic action of nitric acid, painful fissures which bleed giving impression of being stuck by needles

Hyperkeratotic warts/verrucae pedis where adjacent skin has golden-yellow characteristic

Digital neuritis: splinter-like pain

PETROLEUM (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-------------------------|---------------------|
| CORN/CALLUS FISSURES | Ant crud; Graphites |

Key characteristics

Suited to fissures on dirty, unhealthy skin with tendency to easy suppuration

Worse in winter

PSORINUM (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-----------------------|--|
| FUNGAL INFECTIONS | Graphites; Berberis vulgaris; Ant crud |

Key characteristics

Nosode prescribed according to criteria of the psoric reactional mode in subjects where mycosis found on unhealthy, dry, wrinkled, scaly, pruritic skin. In this case, can be prescribed regardless of any modalities related to heat

RHODODENDRON (PODIATRY ONLY)

| Targeted applications | Differentiation |
|-----------------------|-----------------|
| PAIN INFLAMMATION | Rhus tox; Ruta |

Key characteristics

Generally erratic, searing pain is aggravated by stormy weather, particularly before storm and improved as soon as storm breaks out

RHUS TOXICODENDRON

Targeted applications

PAIN
INFLAMMATION

Differentiation

Ruta; Dulcamara; Rhododendron

Key characteristics

A target of proving this remedy is the periarticular fibro-connective tissue

Patient complains of painful, articular stiffness which occurs at start of a movement then disappears as movement is continued

Pain aggravated by damp weather, cold and rest

RUTA GRAVEOLENS

Targeted applications

PAIN
INFLAMMATION

Differentiation

Rhus tox; Ruta; Kali bich

Key characteristics

Pathogenic action of this remedy mainly concerns the periosteum and tendons

Acts on articular pain aggravated by rest and improved immediately by movement but without warming up phase of Rhus tox

Ruta causes less stiffness than Rhus tox

SEPIA

Targeted applications

CORN/CALLUS
FUNGAL INFECTIONS

Differentiation

Dulcamara; Graphites

Key characteristics

Lesions are blackish-brown in colour, are scattered all over the body and generally not pruritic, resembling pityriasis

This remedy is further indicated if the general characteristics of Sepia are present

SILICEA

Targeted applications

ULCER
FUNGAL INFECTIONS

Differentiation

Kali bich; Arnica

Thuja; Graphites; Berberis vulgaris

Key characteristics

Ulcer: Infection lingering for a while

Fungal infections: Nails break easily, have white spots and are prone to development of paronychia

SULPHUR**Targeted applications**

FUNGAL INFECTIONS

Differentiation

Arsen iodide

Key characteristics

Indicated when nails are either longitudinally striated, have white spots and prone to development of paronychia

Burning sensations improved by coolness

Mycotic lesions which may develop into eczema with heat-aggravated pruritis as observed in athlete's foot

SYMPHYTUM OFFICINALE**Targeted applications**

BONE INJURY
MARCH FRACTURE
POST-OPERATIVE COMPLICATIONS

Differentiation

Arnica

Key characteristics

Stimulates growth of epithelium on ulcerated surfaces

Injuries to sinus, tendons and periosteum

Acts on joints generally

Of great use in wounds penetrating to perineum and bones, and in non-union of fractures; irritable stump after amputation

THUJA OCCIDENTALIS (PODIATRY ONLY)**Targeted applications**

VERRUCA PEDIS

FUNGAL INFECTIONS

Differentiation

Ant crud; Nitric acid; Causticum; Nat mur;
Dulcamara; Calc carb; Cinnabaris; Ferrum
picrium

Silica

Key characteristics

Verruca pedis: To be prescribed in almost all cases whatever verruca lesion is to be treated. All potencies can be used

Fungal infections: Nails are either longitudinally striated, have transverse ridges, are soft and break easily or tend to split

G. Sample PHCE questions

1. **The sensation of a lump in the throat (globus hystericus) is a feature of which of the following medicines?**
 - a) Carbo vegetabilis
 - b) Ignatia
 - c) Natrum muriaticum
 - d) Phosphorus

2. **Which of the following statements is FALSE?**
 - a) Nosodes are very deep acting medicines
 - b) Nosodes can be prone to cause aggravations
 - c) Nosodes provide good prophylaxis as travel immunisations
 - d) Nosodes should not be repeated frequently

3. **Hierarchy of symptoms means:**
 - a) The more symptoms of a particular type you have, the more important they are
 - b) Every case must have symptoms at all levels before you can prescribe accurately
 - c) Symptoms are related to the central nervous system
 - d) Symptoms are evaluated according to a set order of importance

4. **Which of the following groups best represents the picture of *Sepia*?**
 - a) Hyperactive and playful
 - b) Friendly and submissive
 - c) Tired but stimulated by activity
 - d) Aggressive and dangerous

5. **Which of the following is a typical feature of *Arsenicum album*?**
 - a) Restlessness
 - b) Aggravation by warm applications
 - c) Midday aggravation
 - d) Profuse salivation

6. **In waiting room fear, which one of the following is best indicated?**
 - a) Gelsemium
 - b) Ignatia
 - c) Lachesis
 - d) Nux vomica

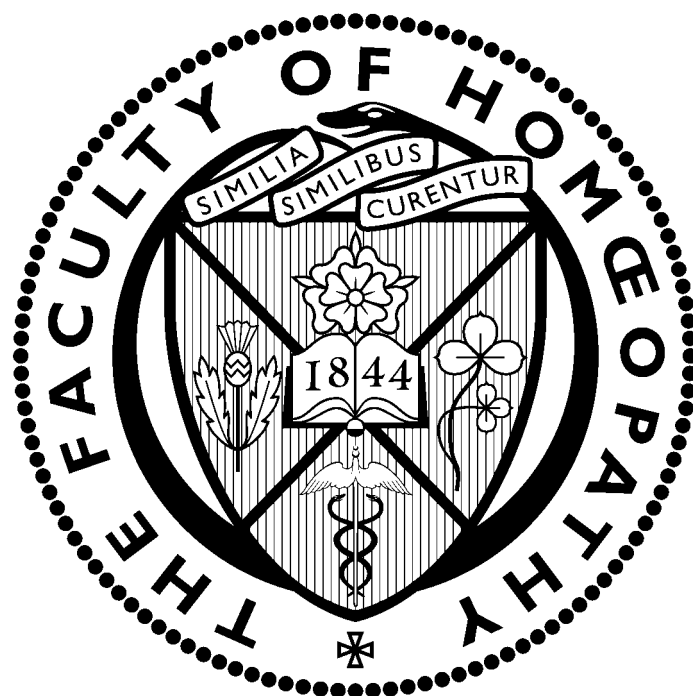
7. **Which of the following is best indicated for the treatment of paronychia or onychia with throbbing pain?**
 - a) Belladonna
 - b) Hypericum
 - c) Graphites
 - d) Antimonium crudum

H. Further information

If you have a general enquiry, or would like to know more about:

- **your registration as a healthcare professional**
- **your Faculty membership**
- **how to apply for the exam**
- **the technical/homeopathic aspect of the examination**
- **Licensed Associateship**

please contact the Faculty academic office at the address on page 5. We can also supply you with a copy of the Faculty education leaflet which will give you details of the accredited teaching centres and the exam calendar which will tell you where you can sit the exam.



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