

HAYFEVER: TREAT WITH CONFIDENCE

By Dr. Subrata K. Banerjea,

GOLD MEDALIST

B.H.M.S. (HONOURS IN NINE SUBJECTS OF CALCUTTA UNIVERSITY)

FELLOW : AKADEMIE HOMOOPATHISCHER DEUTSCHER ZENTRALVEREIN (GERMANY)

HOMOEOPATHIC MEDICAL ASSOCIATION OF THE UNITED KINGDOM (U.K)

DIRECTOR : BENGAL ALLEN MEDICAL INSTITUTE

PRINCIPAL : ALLEN COLLEGE OF HOMOEOPATHY, ESSEX, ENGLAND

**“SAPIENS”, 382, BADDOW ROAD, GREAT BADDOW,
CHELMSFORD, ESSEX CM2 9RA, ENGLAND**

Tel & Fax No. 44 (0) 1245 505859

E. Mail No. allencollege@btinternet.com

Website : www.homoeopathy-course.com

MODERN CLASSICAL-PRACTICAL PRESCRIBING: METHODOLOGY OF HAY FEVER TREATMENT

TREATMENT METHODOLOGY IN ACUTE STAGE OF HAY FEVER:

The treatment of Hay Fever should be divided into two phases: -

- (i) Acute stage ((approximately March till August) &
- (ii) Latent Chronic stage.

Treatment during the acute exacerbation of the Hay Fever, manifested as sneezing, itching of the nose, eyes, palate; profuse coryza, etc.; which is predominant manifestation of Syco-Psora: the Surface Miasm, generally pronounced during March to August every year when the pollen count is high. Here Tubercular Miasm remains latent or dormant during the acute stage.

ACUTE STAGE OF HAYFEVER: DRUG DEPENDENT CASES: CASES WITHOUT CLARITY OF SYMPTOMS:

During acute stage, we Homoeopath can handle the Hay fever with courage and prescribe the following medicines. **As the patient wants immediate relief, so in my long experience, I have extensively used the medicines, which has pronounced action on the main symptoms of hay fever as well covers the presenting totality and have the capability of giving the patient a quick relief** (according to §173--§178, Ref. Organon of Medicine: Treatment of One Sided Diseases with scarcity of symptoms) and gradually the conventional medication is withdrawn [Subrata asks the patient to sip the homoeopathic medicine prescribed on the basis of few available symptoms in those drug-dependant (histamine dependant) acute hay fever cases, considering the symptomatic similarity of few presenting symptoms. So when the patient have acute problem and in need of conventional medicine, patient takes the homoeopathic medicine and tries to defer the conventional medicine as much as s/he can. In this way, a drug dependent patient who used to take conventional medication 8 hourly; can, with the help of homoeopathic medicine now defer the medication to 12 hourly, then 24 hourly and so on. In this way the conventional medication is gradually weaned off]. In such way patient can avoid the use of conventional chemicals (as patients get frustrated of prolonged / regular use of conventional chemicals in this era of organic food; and also suffer from the side-effects etc. I get a disclaimer signed by the patient who wishes to wean off the conventional medicines gradually, at their own choice (no pressure from me). I give the entire power and decision in the hand of the patient (as the patient is also aware of the side effects of the chemicals of the conventional medicine and wants to wean-off them). Giving the “weaning off power” in the hand of the patient, makes him/her feel that s/he is taking control of what s/he is taking and therefore patient’s will power of weaning-off the conventional medicine work as well towards raising of patient’s energy level, so that they can very gradually wean off without much suffering. I do not advice exactly how much to wean-off because that should be guided by the G.P or patient can decide according to his/her severity of symptoms.

I like to share the courage with my fellow homoeopaths, so that they can confidently prescribe the indicated acute medicine and handle the acute attack. Homoeopathy is not complementary medicine but it is an Alternative medicine to the conventional chemicals and we can do this by adopting proper methodology and thereby give fast relief to our patients during their acute suffering, as well.

In drug dependent hay fever cases, when the patient is on histamine and other medications; in such cases it is very difficult to get a clear picture of the case. The artificial chronic disease is superimposed on the original natural disease (Aphorism 91, Organon), therefore symptoms are contaminated or suppressed and the patient cannot give a clear picture e.g., sensations, modalities, etc. I select Lesser Known Organopathic Medicines (e.g. Ambrosia, Arundo, Rosa, Linum, etc.) to open histamine - dependant hay fever cases, where

there is absence of good totality for polychrest prescribing. In such cases lesser known organopathic medicines have capability to alleviate the symptoms to a certain extent, thereby giving the chance to wean off the conventional chemicals, and experience shows that after 40-50% weaning off; the uncontaminated symptoms of the natural disease surfaces and gives us the proper modalities, sensations etc which will enable for constitutional prescribing, which is obviously our final motto. For further reading about Modern Classical Prescribing, please follow the link:

<http://www.homoeopathy-course.com/index.php/about-us/our-prescribing>

In the same way, for conventional pain killer dependent Migraine cases, the artificial chronic disease is superimposed on the original natural disease, therefore symptoms are contaminated or suppressed and the patient cannot give a clear picture for a constitutional medicine as well as the modalities of the pain are masked. In such cases, the following medicines can be selected on the basis of few available symptoms, e.g., Acetanilidum, Anagyris, Bromium, Chionanthus Virginica, Epiphegus, Ferrum Pyro-Phosphoricum, Indium, Iris Versicolor, Kalmia Latifolia, Lac Defloratum, Melilotus, Menispermum, Menyanthes, Oleum Animale, Onosmodium, Saponin, Usnea Barbata, Yucca Filamentosa etc. Accordingly the conventional allopathic pain killer is gradually withdrawn and after approximately 50% weaning off of the conventional medicine, suppressed symptoms surfaces and now the patient can give much clearer modalities. This will lead to making a change in the plan of treatment and on the basis of 'MTEK' [Miasm + Totality + Essence + Key notes] a constitutional prescription can now be made.

Similar example for Drug Dependent Hypertensive cases where the following medicines Allium Sativa, Crataegus Oxyacantha, Eel Serum, Ergotinum, Lycopus Virginicus, Rauwolfia Serpentina, Spartium Scoparium, Strophanthus Hispidus etc. are capable of gradually weaning off the conventional medication. Similarly also in drug dependent arthritic cases where medicines like Actaea Spicata, Angustera Vera, Benzoic Acid, Caulophyllum, Cobaltum Nitricum, Cyclamen Europaeum, Eupatorium Perfoliatum, Formica Ruffa, Franciscea Uniflora, Gettysburg Water, Ginseng (Panax), Gnaphalium, Guaiacum, Hedeoma Pulegioides, Helonias, Kali Iodatum, Lacticum Acidum, Lithium Carbonica, Macrotin, Manganum Aceticum, Natrum Salicylicum, Oleum Jecoris Aselli, Pimpenella Saxifraga, Radium Bromatum, Rhamnus Californica, Rhododendron, Stellaria Media, Viola Odorata, X-Ray etc can successfully wean-off the conventional medication.

Through this approach, not only does the patient gain immediate confidence that homoeopathy works, but can also wean off the conventional medication to a certain extent.

ACUTE HAY FEVER: 6 LESSER KNOWN ORGANOPATHIC MEDICINES FOR DRUG DEPENDANT CASES

POINTS	AMBROSIA	ARUNDO	LINUM USITATISSIMUM	PHLEUM PRATENSE	ROSA DAMASCENA	SKOOKUM CHUCK
1) AETIOLOGY	<p>A remedy for hay-fever (specially from Rag weed / Hog weed).</p> <p>Botanical reference: <i>Ragweeds (Ambrosia), also called bitterweeds and bloodweeds, are a genus of flowering plants from the sunflower family. The scientific name of this genus is sometimes claimed to be derived from the Ancient Greek term for the perfumed nourishment of the gods, ambrosia (ἀμβροσία) which would be ironic since the genus is best known for one fact: its pollen produces severe and widespread allergies. Ragweeds occur in temperate regions. Each plant is reputed to be able to produce about a billion grains of pollen over a season, and the plant is anemophilous (wind-pollinated). It is highly allergenic, generally considered</i></p>	<p>Prepared from Reedy grass: Hayfever irritation begin from outdoor activities (BBQ etc.)</p>	<p>Prepared from Flax (source of linseed): Hayfever irritation begin from outdoor activities. People driving or passing through linseed farms.</p>	<p>Prepared from timothy grass: Hayfever irritation begin from outdoor activities: Walking in the woods or the fields.</p> <p>Botanical reference: <i>Timothy-grass (Phleum pratense), is an abundant perennial grass native to most of Europe except for the Mediterranean region. It grows to 50–150 cm tall, with leaves up to 45 cm long and 1 cm broad. The flowerhead is 7–15 cm long and 8–10 mm broad, with densely packed spikelets.</i></p>	<p>Rose-Cold: prepared from Damascus Rose: Pollen from flowers. Exposure to Pollen during BBQ or gardening.</p> <p>Botanical reference: <i>Rosa damascena, more commonly known as the Damask rose or simply as "Damask", or sometimes as the Rose of Castile, It is a deciduous shrub growing to 2.2 m tall, the stems densely armed with stout, curved prickles and stiff bristles. The leaves are pinnate, with five (rarely seven) leaflets. They are renowned for their fine fragrance, and their flowers are commercially harvested for rose oil used in perfumery. The perfume industry often refers to this note as Damascus rose.</i></p>	<p>N.B.W.S. Vaccination: especially in children. Vaccination → upper respiratory tract infection.</p>

POINTS	AMBROSIA	ARUNDO	LINUM USITATISSIMUM	PHLEUM PRATENSE	ROSA DAMASCENA	SKOOKUM CHUCK
	<p><i>the greatest allergen of all pollens, and the prime cause of hay fever.</i> Common Ragweed (<i>A. artemisiifolia</i>) and Western Ragweed <i>A. psilostachya</i> are considered the most noxious to those prone to hay fever. Ragweeds bloom in the northern hemisphere from early July-mid August or until cooler weatherArrives. A plant usually produces pollen more copiously in wet years. When the humidity rises above 70 percent, however, the pollen tends to clump and is not so likely to become airborne.</p>					
2) MANIFESTATIONS	<p>(a) Lachrymation and intolerable itching (++) of the eye-lids. (b) Watery coryza; sneezing; respiratory tract in its entire length stopped up. (stuffed-up+++).</p>	<p>(a) Hay fever begins with itching and burning (++) of palate and conjunctiva (internal and external itching+++). (b) Terrible itching (+++) in the nostrils and roof of the mouth. (c) A remedy for catarrhal states: sneezing (+++).</p>	<p>(a) Intense irritation ++. (b) Severe allergic disturbances: like allergic bronchospasm (+++): as if the patient would suffocate; hives). (c) Urticaria (skin complaint) and asthma (respiratory complaint) are often associated (Ref. Dr. Clarke).</p>	<p>(a) Hayfever with asthma. (b) Watery coryza with itching of the nose and eye. (c) Frequent sneezing.</p>	<p>(a) Beginning of hay-fever. (b) Hardness of hearing; tinnitus. (c) Eustachian catarrh.</p>	<p>(a) Hay fever; dry skin and psoric preponderance are the triad for selection of this remedy. (b) Has strong affinity for skin and mucus membranes. (c) Profuse coryza and constant sneezing+++.</p>

POINTS	AMBROSIA	ARUNDO	LINUM USITATISSIMUM	PHLEUM PRATENSE	ROSA DAMASCENA	SKOOKUM CHUCK
3) PRESCRIBING TIPS	Watery coryza; sneezing; respiratory tract in its entire length stopped up. More stuffed-up+++ , better Ambrosia is indicated.	Internal and external itching+++ . Terrible itching (+++) in the nostrils and roof of the mouth. Sneezing (+++). More itching(+++) and sneezing better Arundo is indicated.	Severe allergic disturbances: like allergic bronchospasm (+++). Urticaria (skin complaint) and asthma (respiratory complaint) are often associated. More respiratory and skin allergy better Linum is indicated.	Prepared from timothy grass: Hayfever irritation begin from outdoor activities: Walking in the woods or the fields. Hayfever with asthma. More asthma with coryza and sneezing are present better Phleum is indicated	Hardness of hearing; tinnitus. Eustachian catarrh. Hayfever with ear involvement, better Rosa is indicated.	Hay fever; dry skin and psoric preponderance are the triad for selection of this remedy. Profuse coryza and constant sneezing+++.
4) POTENCY OF CHOICE	If given in Q (Mother Tincture): (8 to 10 drops → in ½ cup of luke warm water → 6 to 8 hourly → during acute attack of hayfever → for emergency → S.O.S.(as & when required)→ Stop soon improvement ensues: in this way we can gradually wean off according to the patient's wish the chemical medications (e.g.histamine). I generally ask my patient to sip slowly the tincture (mixed with water) during the acute attack and	Q., 6C.	6C, 30C.	6C, 30C.	6C, 30C.	6x trituration (¼ tea spoon in half cup of luke warm water → 6 to 8 hourly → SOS → during acute attack of Hayfever with coryza and sneezing; 30C.

POINTS	AMBROSIA	ARUNDO	LINUM USITATISSIMUM	PHLEUM PRATENSE	ROSA DAMASCENA	SKOOKUM CHUCK
	<p>wait / delay as much as s/he can with the conventional medication. If s/he was taking the conventional medication 8 hourly → even with homoeopathic support → delaying the conventional medication by 2 hours e.g. 10 hourly will be 10 – 15% weaning off).</p> <p>If given 6C: 1 globule → in water → to sip slowly during the acute attack; stop soon improvement ensues. Can be repeated as & when required.</p>					

ACUTE HAY FEVER: 6 FREQUENTLY USED MEDICINES

POINTS	ALLIUM CEPA	ARS. IOD.	DULCAMARA	LAC CAN	SABADILLA	WYETHIA
1) AETIOLOGY	(a) Colds in damp cold weather (Dulc). (b) From getting wet (Rhus Tox).	(a) Past History of tubercular affections. (b) Study (brings headache). (c) Warmth.	(a) Sudden change of weather: dry to moist; from hot to cold. (b) Days hot & nights cold (late onset hayfever during August: beginning of autumn). (c) Checked perspirations.			Prepared from poison weed: Hayfever irritation begin from outdoor activities.
2) ONSET	(a) Late onset. (b) Full blown Hay fever (esp. in August). (c) Spring coryza (with less itching early onset but generally more indicated for late onset.).	Early onset.	Late onset.	Early or regular onset.	Early or regular onset.	Early or regular onset.

POINTS	ALLIUM CEPA	ARS. IOD.	DULCAMARA	LAC CAN	SABADILLA	WYETHIA
3) MANIFESTATIONS	<p>(a) Acrid coryza.</p> <p>(b) Bland lachrymation.</p> <p>(c) Cough: (i) Hacking, (ii) Tickling, (iii) Hoarse.</p> <p>(d) Singer's cold (mucous in larynx).</p>	<p>(a) Persistence acrid coryza (characteristic).</p> <p>(b) Irritation and tingling of nose with constant desire to sneeze.</p> <p>(c) Chronic nasal catarrh profuse, thick yellow. Can be thin & watery as well.</p> <p>(d) Associated symptoms: Cervical glands are swollen.</p> <p>(e) Associated symptoms: Voracious appetite & emaciation.</p> <p>(f) Associated symptoms: Physical and mental restlessness.</p>	<p>(a) Nose stuffing relieved by closing the nose with handkerchief.</p> <p>(b) Stage 1: dry coryza → stage 2: stoppage of nose → stage 3: profuse watery coryza → stage 4: thick yellow mucus.</p> <p>(c) Stuff up when there is cold rain.</p> <p>(d) Nasal discharge: Profuse watery.</p> <p>(e) Associated symptoms: Cold air aggravates (therefore keeps the nostrils covered with handkerchief which relieves nose-block.</p> <p>(f) Associated symptoms: Coughing, sneezing, watering +++ from nose & eyes.</p>	<p>(a) One nostril stuffed up, the other free, alternates.</p> <p>(b) Nostrils are ulcerated.</p> <p>(c) Bones of nose: sore.</p> <p>(d) Nasal discharges: Acrid and Excoriating.</p> <p>(e) Nasal discharges: Profuse, staining pillow: greenish yellow.</p> <p>(f) Frequent change of affections in the nostril (side changes).</p> <p>(g) Bloody pus discharge.</p>	<p>(a) Sorethroat > warm food.</p> <p>(b) Coryza, sneezing < new ofr full moon.</p> <p>(c) Sneezing (+++).</p> <p>(d) Skin: loosely hanging in throat.</p> <p>(e) Fears: has some horrible throat disease: will prove fatal.</p> <p>(f) Tendencies: Chilly.</p> <p>(g) Thirstless.</p> <p>(h) Desire warm food.</p>	<p>(a) Hayfever with itching of posterior nares.</p> <p>(b) Throat feels swollen → constant clearing and hemming → No relief → constant desire to swallow saliva.</p> <p>(c) Associated symptom: follicular pharyngitis.</p>
4) MODALITIES	<p>(a) Aggravations: < Afternoon, evening. < Damp, cold wind / weather.</p> <p>(b) Amelioration: > Open air (Ref. Clarke).</p>	<p>Aggravations: (a) Agg. from cold bath. (b) Patient likes cold but that aggravates. (c) Agg. by sneezing. (d) Hot patient but hayfever symptoms are ameliorated by sipping warm water / drink</p>	<p>(a) Aggravation: Aggravation in cold, open air.</p> <p>(b) Aggravation: Aggravation during rainy, cold damp days.</p> <p>(c) Aggravation: Rest.</p> <p>(d) Amelioration:</p>	<p>(a) Aggravations: < Night; < Cold air.</p> <p>(b) Amelioration: > by warmth.</p>	<p>a) Sorethroat > warm food.</p> <p>(b) Coryza, sneezing < new or full moon.:</p>	<p>(a) Aggravations: < Afternoon.</p> <p>(b) Amelioration: < by exercise; < from perspiration.</p>

			Better in closed			
POINTS	ALLIUM CEPA	ARS. IOD.	DULCAMARA	LAC CAN	SABADILLA	WYETHIA
			room. (e) Ameliorations: Amel. from exertion; from moving about. (f) Amelioration: External warmth.			
5) PRESCRIBING TIPS	Late onset. Full blown Hay fever (esp. in August). Singer's cold.	Persistence acrid coryza (characteristic). Irritation and tingling of nose with constant desire to sneeze. Physical and mental restlessness.	Sudden change of weather: dry to moist; from hot to cold. Late onset hayfever during August: beginning of autumn. Nose stuffing relieved by closing the nose with handkerchief. Nasal discharge: Profuse watery. Better in closed room.	One nostril stuffed up, the other free, alternates. Nostrils are ulcerated. Nasal discharges: Acrid and Excoriating.	Sorethroat > warm food. Sneezing (+++). Fears: has some horrible throat disease: will prove fatal. Tendencies: Chilly. Thirstless.	Hayfever with itching of posterior nares. Throat feels swollen → Constant clearing and hemming → No relief → Constant desire to swallow saliva.
6) POTENCY OF CHOICE	30C.	6x (Tablet or Trituration), 30C.	30C.	6C, 30C.	30C.	30C.

FEWS ADDITIONAL LESSER KNOWN MEDICINES OCCASIONALLY INDICATED IN HAYFEVER (ACUTE PHASE):

- (i) **Brassica Napus**:- Prepared from rape seed: 6 and 30C:- Dropsical swelling with pyogenic inflammation of gum; Scorbutic gum.
Botanical reference: Rapeseed (Brassica napus), also known as rape, oilseed rape, rapa, rapaseed and (in the case of one particular group of cultivars) canola, is a bright yellow flowering member of the family Brassicaceae (mustard or cabbage family).
- (ii) **Naphthalene**: 6 and 30C- Hayfever with eye involvement

- (iii) **Magnesia Phos:** 6x Biochemic tissue salt:- Ability to prevent a threatening attack of hay fever. If the weather has been sultry, and the patient is stuffy during the day, oppressed with short, anxious breathing, the spasm during the night.
- (iv) **Succinic Acid:** 6, 30C:- Hay-fever. Paroxysmal sneezing, dropping of watery mucus from nostrils; asthma. Inflammation through respiratory tract; causing asthma, chest pains etc.; itching of eyelids and canthi and nose worse drafts.

TREATMENT METHODOLOGY IN CHRONIC/LATENT STAGE OF HAY FEVER: GENERALLY DURING SEPTEMBER TO MARCH:

Treatment during chronic, latent stage of Hay Fever (generally manifest as **tri-miasmatic miasm of the person with tubercular preponderance** because of the allergic, recurrent and periodic manifestation; latent period is generally from September till March every year).

MTEK is an useful memory aid to arriving at a correct prescription.

- M** = Miasmatic Totality
T = Totality of Symptoms
E = Essence (should include gestures, postures, behaviours etc)
K = Keynotes (which should encompass PQRS symptoms, refer §153 and §209 of Hahnemann's Organon)

When the above criteria are considered and the steps below followed, a correct constitutional prescription can be made.

Step-I: Make the miasmatic diagnosis of the case i.e. ascertain the surface miasm. Refer Subrata's book: "Miasmatic Prescribing"; some part can be viewed at:
<http://www.homoeopathy-course.com/index.php/homoeopathy-resources-media/homoeopathy-books/dr-banerjea-book-on-miasm/2-uncategorised/94-philosophy-utility-of-miasm>

Step-II: Assess the Totality of Symptoms + Essence + Keynotes and PQRS (if any) of the case and formulate the indicated remedy.

Step-III: Ensure the indicated remedy covers the surface miasm, as diagnosed in Step I (see the miasmatic weightage of the indicated medicine:

<http://www.homoeopathy-course.com/index.php/homoeopathy-resources-media/homoeopathy-books/dr-banerjea-book-on-miasm/2-uncategorised/133-part-vi-miasmatic-weightage-of-medicines>

Step-IV: Administer the remedy, which encompasses the miasm as well as the Totality of Symptoms.

Treatment during chronic, latent stage of Hay Fever should be done by chronic constitutional anti-miasmatic medicines:

- (I) **Mixed Miasmatic medicines with Tubercular preponderance or**
- (II) **Syco-tubercular medicines;** as given below.

Generally hay-fever manifest as tri-miasmatic with tubercular preponderance because of the allergic, recurrent and periodic manifestations.

(I) MIXED MIASMATIC MEDICINES WITH TUBERCULAR PREPONDERANCE:

- 1) BACILLINUM (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular+++).
- 2) CALC. CARB. (Miasmatic Weightage:- Psora+++, Sycotic+++, Syphilitic++, Tubercular+++).
- 3) CALCAREA IODATA (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic+, Tubercular+++).
- 4) CALC. PHOS (Miasmatic Weightage:- Psora++, Sycotic+, Syphilitic++, Tubercular+++).

- 5) IODUM (Miasmatic Weightage:- Psora++, Sycotic+, Syphilitic++, Tubercular+++).
- 6) KALI CARB (Miasmatic Weightage:- Psora++, Sycotic++, Syphilitic+, Tubercular+++).
- 7) LYCOPODIUM (Miasmatic Weightage:- Psora+++ , Sycotic+++ , Syphilitic++ , Tubercular+++). (Tri-Miasmatic with Psoric Preponderance)
- 8) NITRIC ACID (Miasmatic Weightage:- Psora++ , Sycotic+++ , Syphilitic+++ , Tubercular+++).
- 9) PHOSPHORIC ACID (Miasmatic Weightage:- Psora++ , Sycotic++ , Syphilitic+ , Tubercular+++).
- 10) PHOSPHORUS (Miasmatic Weightage:- Psora+++ , Sycotic++ , Syphilitic+++ , Tubercular+++).
- 11) PSORINUM (Miasmatic Weightage:- Psora+++ , Sycotic++ , Syphilitic++ , Tubercular+++). (Mixed Miasmatic with Psora Tubercular Preponderance) :
- 12) SILICEA (Miasmatic Weightage:- Psora++ , Sycotic++ , Syphilitic+++ , Tubercular+++).
- 13) SULPHUR (Miasmatic Weightage:- Psora+++ , Sycotic++ , Syphilitic+++ , Tubercular+++). (Mixed Miasmatic with Psora Tubercular Preponderance):
- 14) TUBERCULINUM (Miasmatic Weightage:- Psora+++ , Sycotic+++ , Syphilitic++ , Tubercular+++).

(II) CHRONIC CONSTITUTIONAL SYCO-TUBERCULAR MEDICINES:

- 1) BRYONIA (Miasmatic Weightage:- Psora++ , Sycotic+++ , Syphilitic+ , Tubercular++).
- 2) CAUSTICUM (Miasmatic Weightage:- Psora+++ , Sycotic+++ , Syphilitic++ , Tubercular+++). (Tri Miasmatic with Sycotic Preponderance)
- 3) CONIUM (Miasmatic Weightage:- Psora++ , Sycotic++ , Syphilitic+ , Tubercular+).

- 4) KALI SULPHURICUM (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic+, Tubercular++).
- 5) LACHESIS (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular+++). (Syco-Tubercular Preponderance)
- 6) MEDORRHINUM (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular++).
- 7) NATRUM SULPHURICUM (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic+, Tubercular+).
- 8) PULSATILLA (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic+, Tubercular++). (Mixed Miasmatic with Sycotic Preponderance)
- 9) STAPHYSAGRIA (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular++).
- 10) SULPH IOD. (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular+).
- 11) THUJA (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular++).
- 12) THYROIDINUM (Miasmatic Weightage:- Psora++, Sycotic+++, Syphilitic++, Tubercular+++).