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## Approach to case taking and application of repertory in orthopaedics

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### Abstract

The process of case taking involves a personalized assessment of a specific illness. It is a crucial component in the treatment of every patient, and one should be well-versed in this aspect. Additionally, the approach to case taking can vary across different condition. Repertories serve as resources for identifying the appropriate similimum. There are numerous repertories available that include rubrics related to orthopaedic symptoms and conditions. This article aims to clarify the case-taking approach and the usefulness of various repertories in orthopaedics.

**Keywords:** Orthopaedics, repertory, case taking

### Introduction

**Case taking:** Individualizing examination of a case of a disease. It is not merely a combination of symptoms, but an instance of disease, an event and a change in the whole person from his original state of health to his present state of sickness.

### Orthopaedics

Orthopaedics is a branch of medicine concerned with the diagnosis and treatment of disorders related to the musculoskeletal system, including bones, joints, muscles, ligaments, and tendons.

### Case history - Basic demographic details

1. Full name
2. Age
3. Gender
4. Occupation
5. Residential address
6. Hand dominance (especially in cases involving upper limbs)

### Chief Complaints

- Complaints may be single or multiple.
- Each complaint should be explored in terms of onset, duration, progression, aggravating or relieving factors, and any associated symptoms (e.g., radiation of pain, chills, fever).

### Common complaints in orthopaedic cases include

- Pain
- Swelling
- Weight-bearing difficulties
- Deformity
- Limb shortening or lengthening
- Joint instability
- Locking of joint
- Limp
- Systemic features like fever, weight loss
- Others

**History of present illness**

Each presenting complaint should be thoroughly assessed for:

- Time of onset
  - Duration and course
  - Factors that worsen or relieve the issue
  - Specific associated symptoms
- Relevant positive and negative findings should also be noted.

**Etiological possibilities**

- Congenital
- Traumatic
- Infectious
- Inflammatory
- Neoplastic
- Degenerative
- Metabolic
- Haematological
- Neurological
- Others

**Key notes on common complaints****1) Pain**

- Can be mechanical (due to activity/load) or at rest.
- **Mechanical:** Seen in osteoarthritis, tendinitis, etc.
- **Rest pain:** Associated with inflammatory or neoplastic causes; morning stiffness is a typical sign.
- **Neurological pain:** Burning/dragging in nature, with tingling or numbness.

**2) Swelling**

- **Immediate:** Indicates hemarthrosis.
- **Delayed (12-24 hrs post-trauma):** Suggests synovial fluid accumulation.

**3) Difficulty in weight bearing**

- Especially lower limbs.
- Sudden inability post-trauma could point to fractures or major joint injuries.
- Chronic ligament issues may tolerate weight better.

**4) Difficulty in joint movement**

- May involve stiffness, spasm, or joint locking.

**5) Deformity**

- Can be structural or due to muscle spasm.
- May affect bone or soft tissue structures.

**6) Limb shortening/lengthening****7) Joint instability****8) Joint locking**

- Often due to meniscal injuries or loose bodies.

**9) Limp****10) Systemic symptoms**

- Fever, weight loss, etc.

**Past history**

- **Personal habits:** Smoking, alcohol use, sleep, bowel/bladder routines
- Treatment history

- Family medical history
- Allergies

**Examination****General**

- Check vitals
- Look for pallor, icterus, cyanosis, clubbing, lymphadenopathy

**Systemic**

- Examine CNS, CVS, RS, and GIT

**Local examination**

- Gait (especially in lower limb or spine cases)
- **Attitude:** natural resting position of joints
- **Inspection:** deformity, limb length, muscle wasting
- **Palpation:** local tenderness, locate pathology, tenderness over bones, soft tissues, or joints
- **Movement**
  - Active and passive ROM
  - Painful or painless
  - Measure with goniometer
  - Note crepitus if present

**Measurement**

- Limb length and segmental discrepancy
- Extensor lag

**Neurovascular examination**

- Check NV status of affected limb

**Special tests**

- Explain and demonstrate as needed
- Always compare with the unaffected side
- Examine joint above and below the affected site

**Final diagnosis should include**

- Duration
- Site (Anatomical)
- Side (left/right)
- Pathological findings
- Etiology
- Complications, if any

**Plan of management**

- Investigations as needed
- Treatment approach (conservative or surgical)
- Choose treatment based on most appropriate option for diagnosis

**Common orthopaedic conditions**

- **Acute injuries:** fractures, dislocations
- **Arthritis:** Osteoarthritis, Rheumatoid arthritis, Psoriatic arthritis, Gout
- **Bursitis**
- **Muscle atrophy**
- **Bone cancers:** Osteosarcoma, Chondrosarcoma
- **Autoimmune orthopaedic disorders**
  - Rheumatoid Arthritis
  - Psoriatic Arthritis
  - Lupus
  - Scleroderma

- **Others**

- Osteomalacia
- Osteomyelitis
- Osteoporosis
- Tendinitis
- Pinched Nerve
- Tenosynovitis

**Application of repertory**

Repertory is a systematically and logically arranged index to the homoeopathic materia medica which is full of information collected from toxicology, drug proving and clinical experience.

Various rubrics which cover the above complaints are mentioned as follows

**Boenninghausen's therapeutic pocket book**

Chapter	Section	Rubric
Parts of the body	Back Upper extremities Lower extremities	Scapulae Lumbar and sacral region Coccyx Joints of the upper extremities in general Shoulder joint Elbow Wrist Finger joint Bones of upper extremities in general Tibia Foot Heel Back of foot Sole Toes Joints of lower extremities in general Hip joint Patella Ankle Toe Bones of lower extremities in general
		Benumbing pain Bruised pain-in general Externally, Internally Boring Burning - Externally, Internally Carphology Cracking of joints Cramps, internal of joints of muscles Carphology Cracking of joints Creptitation, sensation of Dislocation Distortion of limbs Gnawing in joints Gout like pain(arthritic) Jerking internally-in joints Muscles Rigidity of joints of extremities Shattering pain

**Repertory to the homoeopathic Materia medica - J.T. Kent**

There are total 37 chapters. Rubrics related to orthopaedic

condition can be found in following chapters-Extremities, Chest, Back, Generalities. They can also be found in the related parts.

Chapter-back	Rubrics
	Bifida Bruises on spine(injuries) Caries of spine(curvature) Concussion of spine Curvature of spine Dislocation in last lumbar vertebra, sensation of Emprosthotonos Pain, jarring agg-(spine) Pain,stepping when-(jarring) Spasm (ophisthotonus) Shortened (tension)

<p>Chapter-Extremities Parts covered in this chapter are-upper limb, lower limb Joints-shoulder, elbow, wrist, hip Knee, ankle Upper arm, forearm, hands, fingers, thumb, thighs, leg, calf, foot, sole, toes Bones-humerus, femur,tibia, fibula</p>	<p>Rubric Pain:- Pain-general group of medicines Subrubrics -Side-right to left Left to right Time-morning, forenoon, noon, afternoon, evening, night, midnight. Modalities -Air cold from-Wine Location -Attachment of muscles,bones,flexor muscles,joints, nails, tendon. Upper limb-side, time, modalities, extention, location Lower limb-side, time, modalities, extention, location Different types of pain-aching, boring, burning, cutting, darting, drawing, digging, gnawing, lacerating, lancinating, piercing, pinching. Clinical rubrics present in this chapter are-anthrax, arthritic nodosities, ataxia, callosities, carbuncles, caries of bones, chorea, gout, ganglion, exostoses, nodosities.</p>
<p>Chapter-Generalities</p>	<p>Rubrics-Brittle bones Bruises Caries of bones Change of position aggravation Change of position amelioration Change of temperature aggravation Change of weather aggravation Constriction, bones Exostoses Inflammation-bones Cartilage Joints Injuries-bone Periosteum Non union of bones Necrosis bones Sensitiveness-bones Periosteum Softening of bones</p>

### Repertory to the rheumatic remedies - HA Robert

Chapter -modalities	All modalities related to orthopaedic conditions can be found in modalities chapter and also under the parts concerned
Chapter-back	<p>Rubrics-&lt;morning:bruised pain &lt;morning on rising &lt;bending or stooping,drawing pain in spinal cord &lt;4-6pm &lt;climbing stairs,tensive feeling in small &lt;fall,pain in small following After all the aggravation, amelioration follows Rubrics-&gt;afternoon:tearing pain in lower back when sitting &gt;rising:lumbago all night &gt;urination:severe backache Location and extension Sensation are given for eg-aching, tired, across small Arch, bent backward like an Lameness Pain -along spine Stiffness Tension as if sprained In joints, especially fingers</p>
Chapter -Extremities in general	<p>Rubrics-Modalities-&lt; morning:drawing pain Paralytic drawing Shooting prickling &lt;hanging down, pain in limbs &gt; Change of position &gt;cold water, putting limbs in Sensation -Aching weariness in all limbs Arthritic nodes Rheumatism with dyspnea Atrophy of muscles of affected limb in</p>

	Rheumatic paralysis Pain -arthritic From least cold with irritable cough Pain-spasmodic jerking and drawing, in limbs and joints Swollen Soreness
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**Boger Boenninghausen characteristic and repertory**

Rubrics related to orthopaedics can be found in following chapters

Back

Upper extremities

Lower extremities

Sensation and complaints-In bones

Each chapter has been divided into location, sensation, modalities

Examples of rubrics

**Chapter-Back**

Scapular region	Rubrics
Location	Scapulae, about Right Left
Sensation	Alive sensation in Alternating between Dragging
Time	Morning Forenoon
Aggravation	Arms, bending backward Cold, in the
Amelioration	Bandaging Carried, when

**Chapter-upper extremities**

	Rubrics
Location	Shoulder Upper arm Forearm
Sensation	Biting Bleeding, easily Callosities
Time	Morning Evening
Aggravation	Lifting weights Lying in bed Menses, before
Amelioration	Pressure, external Raising up

**Chapter-lower extremities**

	Rubrics
Location	Loins, region Buttocks Calves
Sensation	Awkward Asleep as if Distortion Pain
Time	Morning Night Daytime
Aggravation	Books, drawing off of Breathing Summer, in
Amelioration	Running Standing Stepping hard

**Chapter-sensation and complaints-bones**

Rubrics
Abscess, of Band about Caries Fracture Fistula Ganglion, bursae Inflammation Marrow, as if absent Necrosis, gangrene Osteomyelitis Periostitis Projections Rachitis Suppuration Swelling, tumor Swollen, feeling Tearing-in periosteum, burning, crampy, paralytic Tuberculosis of Ulcerative pain Weakness, sense of

**Boericke's new manual of homoeopathic materia medica with repertory - Oscar E Boericke**

Chapter- Locomotor system	Rubrics
	Axillae, abscess Backbent, arch like, ophisthotonus Curvature (scoliosis) Lameness, stiffness Numbness Pain, in general Modalities, <after, from cold exposure From motion, beginning From warmth >after rising From bending backward From lying, sitting Coccyx-burning on touch Neuralgia Upper extremities, arm Inflammation-synovitis Nodosities Inflammation(arthritis) Inflammation(gout)

**Conclusion**

Each repertory has application in orthopaedics; it is essential to understand the design and structure of different repertories to use them efficiently.

**References**

1. Jaypee Brothers Digital. Available from: <https://www.jaypeebrothers.com/>
2. Boericke W. Boericke's pocket manual of homoeopathic materia medica and repertory. 3rd rev and augm ed. 30<sup>th</sup> impression. New Delhi: B. Jain Publishers; 2012.

3. Boenninghausen C. Therapeutic pocket book. Allen TF, translator. Philadelphia: Boericke & Tafel; 1891. Reprint: New Delhi: B. Jain Publishers.
4. Kent JT. Repertory of the homoeopathic materia medica. Indian ed. New Delhi: Indian Books and Periodical Publishers.
5. Roberts HA. The rheumatic remedies. 1st ed. New Delhi: B. Jain Publishers; 1994.
6. Boger CM. Boger-Boenninghausen's characteristics and repertory. 46<sup>th</sup> impression. New Delhi: B. Jain Publishers; 2018.

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