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**Dr. Kinjal Mandalia**  
Clinician and Assistant  
Professor, Department of  
Medicine, Baroda  
Homoeopathic Medical College  
and Hospital, Vadodara,  
Gujarat, India

## Psychological validity and clinical reliability of mind rubrics in homoeopathic practice

**Kinjal Mandalia**

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### Abstract

Mind rubrics provide a structured way to understand cognitive, emotional and behavioural dimensions within a patient's narrative, and have played a central role in individualized homoeopathic prescribing. However, mind rubrics are often influenced by linguistic variations, subjective perceptions, practitioner's interpretation and cultural contexts. This raises questions concerning their PSYCHOLOGICAL VALIDITY-whether the rubrics correspond to scientifically recognized mental phenomenon and their CULTURAL RELIABILITY- whether they are consistently reproducible and effective practically in remedy selection.

This article explores the foundations of mind rubrics through contemporary models including personality frameworks, emotional neuroscience and cognitive-behavioural theories. It discusses how emotions shape symptomatic perception and how cognitive patterns affect rubric selection. A comprehensive table linking key psychological constructs with corresponding mind rubrics is given to enhance rubric precision. The article outlines structured framework for improving the reliability of mind rubrics in everyday practice. A brief case demonstrates practical application. This article concludes that mind rubrics, when used with psychological insight remains one of the most powerful tools in classical homoeopathic prescribing.

**Keywords:** Mind rubrics, psychology, clinical reliability, case taking, constitutional remedies

### Introduction

Homoeopathic case taking is rooted deeply in understanding the patient as a whole – emotionally, mentally and physically. Amongst this domain, mind symptoms are considered as the most significant as they reveal internal processes that individualize the case. Dr Hahnemann emphasized mental symptoms and their importance in §211-§230 of the *Organon of Medicine*.

Despite this centrality, mind rubrics present certain challenges. Thus, evaluating the psychological validity and clinical reliability of mind rubrics become essential for improving remedy accuracy and scientific credibility.

### Concept and significance of mind rubrics

Mind rubrics represents emotional and mental expressions derived from-

- Homoeopathic proving
- Clinical confirmations
- Pathogenic trials
- Observational patterns within remedy pictures

### Which includes

- Cognitive issues (indecision, confusion, obsession)
- Emotional states (anger, grief, fear)
- Personality structures (introvert, sensitive)
- Behavioural tendencies (restlessness, fastidious)

### Mind rubrics matter because

- 1) They offer insight into chronic disease disposition
- 2) Mental patterns are more individualized than physical
- 3) They allow closely related remedy differentiation

**Corresponding Author:**  
**Dr. Kinjal Mandalia**  
Clinician and Assistant  
Professor, Department of  
Medicine, Baroda  
Homoeopathic Medical College  
and Hospital, Vadodara,  
Gujarat, India

- 4) They offer insight into deep constitutional layer that physical symptom cannot.

### Psychological validity of mind rubrics

It can be examined under four broad domains-

#### 1) Emotional rubrics

These are biologically rooted and recognized. Neuroscience and affective psychology validate core emotional patterns such as: fear, sadness, anger, joy, disgust, surprise

RUBRICS such as: *Fear, death of*

*Anger, contradiction from*

*Forsaken feeling*

Have strong parallels with emotional responses, trauma patterns and attachment dynamics.

#### Validity - strong

#### 2) Perceptual rubrics

These include “delusions” and “imaginings”. It can reflect negative schemas, symbolic presentation of stress, deep emotional beliefs and internal narratives from previous experiences.

Example:

*Delusion, he is neglected* – corresponds to rejection schema

VALIDITY – HIGH WHEN INTERPRETED SYMBOLICALLY

#### 3) Personality Rubrics

Example correlation like Natrum muriaticum – emotional suppression, introvert

Lachesis- jealousy, verbosity, intensity

Arsenicum album- perfectionist anxiety

VALIDITY – STRONG

#### 4) Cognitive rubrics

These relates to thought processes and mental distortions such as Attention lapses, Ruminative thinking, Cognitive distortions and like.

Example such as *Confusion of mind, Indecision, Thoughts persistent and Delusion of being criticized.*

VALIDITY- STRONG TO MODERATE, DEPENDING ON RUBRIC CLARITY.

### Clinical reliability of mind rubrics

Reliability varies widely with concerns whether rubrics are

stable over time, useful in remedy differentiation, reproducible among practitioners and directly observed rather than assumed.

### Factors reducing reliability

#### 1) Overuse of common rubrics

Like anxiety, sadness and fear

#### 2) Transient emotions mistaken for chronic traits

An emotional reaction to a temporary situation should not be added as constitutional rubric

#### 3) Cultural and language differences

Where some cultures consider sadness to express openly in others emotional restraint is normal

#### 4) Rubric ambiguity

Certain rubrics are too outdated or broad

#### 5) Practitioner interpretation bias

A calm patient may be coded as – reserved / depressed / introverted / withdrawn depending on practitioner perception

### Factors strengthening reliability

#### 1) PQRS symptom

Peculiar symptom has high validity

#### 2) Pattern recognition

Long standing emotions are more reliable than one time reactions

#### 3) Etiological rubrics

Ailments from disappointment, grief, etc. are highly consistent

#### 4) Cross confirmation with physical symptom

Mental rubrics are strongest when they match physical modalities

#### 5) Direct observation

Body language and tone often reveal more accurate mental state.

Rubric table linking psychological concepts and mind rubrics

Psychological Concept	Description	Mind Rubrics (Example)	Note For Clinical Use
Generalized anxiety	Chronic worry, anticipatory fear	Anxiety; anticipation / Anxiety; health about	Reliable when long term
Social anxiety	Fear of criticism or judgment	Delusion; criticized she is / Fear; people, of	Check personality background
Anger and frustration intolerance	Low tolerance for control or contradiction	Anger; contradiction from / Impatience / Irritability	Observe consistency in behaviour
Obsessive- compulsive traits	Repetitive thoughts, perfectionism	Thoughts persistent / fastidious / cleanliness desire	Often seen in Nux-v, Arsenicum
Confusion / Cognitive overload	Difficulty concentrating	Confusion of mind / mistakes, making	Often linked to stress or fatigue
Aggression / Impulse dysregulation	Sudden irritability or violent impulses	Rage; attacks of / Impulse to strike	Confirm through history
Emotional lability	Mood swings, instability	Changeable mood / weeping easily	Seen in Pulsatilla, Cyclamen
Avoidant Personality traits	Withdrawal, emotional suppression	Reserved / Aversion to company / Weeping alone	Matches Sepia, Nat-m type
Somatic focus	Preoccupation with bodily symptoms	Anxiety; health / Fear; disease of	Seen in hypochondriacal patterns

**Practical framework for improving rubric selection:****1) Distinguish trait vs. State**

TRAIT – stable personality patterns – suitable for constitutional prescribing

STATE – temporary emotional reaction – suitable for acute prescribing

**2) Identify core emotional themes**

Ask: -

What triggers worsen or trigger the emotion?

What emotion lies beneath this behaviour?

This ensures rubric matches root emotional reality

**3) Interpret symbolic “delusions” correctly**

Examples: -

“People are against me” – sensitivity to criticism or exclusion

“I feel imprisoned” – sense of emotional confinement, not literal imprisonment

**4) Prioritize PQRS mental symptoms**

Rare emotional responses like laughing at grief are highly reliable

**5) Confirm with physical generals**

Example such as emotional suppression + migraine + aggravation from sun – NAT-M.

**6) Use patient’s exact phrasing**

First hand expressions reduce practitioner bias.

**Clinical case illustration****Case summary**

A 28-year-old schoolteacher presented with chronic urticaria and emotional hypersensitivity

**Mental symptoms**

- Breaks down emotionally when appreciated
- Feels neglected by peers
- Avoids company but desires emotional connection
- Ruminates over past criticism
- Craves solitude during emotional stress
- Weeps when alone; consolation aggravates

**Psychological analysis**

- Rejection schema
- Avoidant attachment pattern
- Rumination (depressive cognitive style)
- Emotional suppression

**Rubrics used**

- Weeping; alone, when
- Consolation aggravates
- Dwelling on past disagreeable occurrences
- Forsaken feeling
- Reserved

**Remedy selected:** Natrum muriaticum 200C

**Outcome:** Significant emotional stabilization and 70% reduction in urticaria within 8 weeks. The chronic emotional pattern provided reliable constitutional cues.

**Conclusion**

Mind rubrics are psychologically meaningful tools that capture emotions, thoughts, behaviours and personality expressions central to individualized homoeopathic prescribing. Their psychological validity is supported by emotional neuroscience, cognitive theory and personality frameworks. However, their clinical reliability depends on precise case-taking, correct interpretation and minimizing subjective bias.

Using a structured, psychologically informed approach enhances the accuracy of rubric selection, leading to more consistent and effective remedy prescribing. Mind rubrics thus remain indispensable – but require informed, disciplined application to reach their full potential.

**Conflict of Interest**

Not available

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Not available

**References**

1. Boericke W. Pocket Manual of Homoeopathic Materia Medica and Repertory. Philadelphia: Boericke & Tafel; 1927.
2. Kent JT. Repertory of the Homoeopathic Materia Medica. New Delhi: Jain Publishing; 1897.
3. Hahnemann S. Organon of Medicine. 6th ed. (Boericke W, translator). New Delhi: B. Jain Publishers; 1996.
4. Clarke JH. A Dictionary of Practical Materia Medica. London: Homoeopathic Publishing Company; 1902.
5. Hering C. Guiding Symptoms of Our Materia Medica. 1885.
6. Phatak SR. Phatak’s Concise Repertory of Homoeopathic Medicines. New Delhi: B. Jain Publishers; 1999.
7. Allen TF. The Encyclopaedia of Pure Materia Medica. 1874.
8. Boenninghausen C von. Therapeutic Pocket Book. 1846. Reprint: New Delhi: B. Jain Publishers.

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