

“An acute case is like a Pandora’s box; you never know what will pop out once you open it!”

Emma Cox is a supervisor and tutor at the North West College of Homeopathy. She presents issues around acute case taking and supervision in her first-year students, who give us a taste of their first cases and their feedback about the value of supervision.

ACUTE AWARENESS AT NWC

Homeopathy is a wonderful and remarkable thing; anyone reading this probably feels the same way. But there’s something specifically about acutes that feels like little bursts of actual magic.

I had suffered repeated throat pathology since I was a child – with one throat infection after another. to the point I’d begun to feel isolated from my family with the pain. Aged 14, and in desperation one day I procured some pills, from a high street pharmacy, and following the instructions, took just two. I must have fallen asleep straight away, because when I woke up three hours later, my violently painful, raw, miserable throat felt completely normal! And I didn’t feel shattered and weary and eerily shut away from everyone. It was honestly like it had never been there at all. At 14, I simply gave a wide-eyed shrug and muttered “Wow. Magic.” I still have a tenderness for *Gelsemium* and never overlook the 6C potency because of this experience.

In 2001 after a long illness with flu, from which I never seemed to properly recover, I saw a homeopath for constitutional treatment, and I have seen several homeopaths since. I didn’t connect my first appointment with those earlier pills. Not until she sent the prescription did I realise that they must have been ‘this homeopathy thing’. The first of these homeopaths certainly improved my whole quality of life enough to want to study homeopathy, and the subsequent ones have significantly improved things for me, but I have never forgotten the wonder of that little bottle of *Gelsemium* 6C.

Keep the magic going

The wonderful, complete healing that is possible in chronic cases is where the heart of our work and philosophy exists, but acutes continue to provide me clear insights to the ‘sensation’. It’s also in treating friends for acutes; gastroenteritis, cystitis, mouth ulcers, flight anxiety, coughs, hangovers, aches, dental pain etc. that I have found a lot of chronic patients.

Supervising magic

I work at North West College in many capacities but most pertinently here, as a supervisor of acute cases. At NWCH we are passionate about rigorous and interactive training in acute casework. The reasons for this are numerous: we feel that in learning to present and treat acutes in a formal, thorough way, it grounds students and promotes a space in which they will find it less stressful to later move into ‘starting’ their chronic cases. By the time our students are at that point they already have experience of presenting detailed work on a case, having their work scrutinised and skills in sharing ideas with a supervisor – not to mention feeling more au fait with the entire supervisory process. Often students comment on how much they learn about remedies beyond taught materia medica theory in classes, and their repertory skills improve ten-fold when they start acute cases. It also tends to increase confidence quite quickly as opposed to ‘dabbling’ with acute remedies for two years then suddenly feeling ‘watched’ in their case taking for chronic work.



About the author

After graduating in Philosophy Emma Cox worked as a research assistant for a period before studying homeopathy following incredible treatment. She graduated from the North West College in 2014 and has since been seeing patients in her own practice alongside teaching and supervising students at the College. She is passionate about supporting students to become the best homeopaths they can be and has a particular interest in the Repertory and the value of academic standards in strengthening our beliefs and doctrines.

“ They really made me feel like no question was silly and I was supported very well throughout the entire case taking process. ”

H: OR IT'S A KINDA MAGIC!

Finally, there's the possibility that spreading that magic of relief in an acute sense, may attract patients and spread interest amongst their own family and friends for later homeopathic treatment.

All our students are asked to present two complete acute cases in April of year one. These will have been supervised and presented to a particular specification which helps students to understand concepts of professionalism, ethics, reflective learning and case analysis from a very early stage. In the final year portfolio, there should then be a minimum of five acute cases. Overall, we continue to encourage students that acute treatment is an essential part of homeopathy, especially in bringing the world of what we do to a wider audience.

Being an acute supervisor

My role as an acutes supervisor is a favourite. However, these are not chronic cases, which we can pore over for days; they need immediate treatment. It requires prompt responses which can sometimes be challenging. Technology has greatly aided successful acute case supervision. Email and chat messengers such as WhatsApp mean that a supervisor can respond quickly to a brief of the case, some rubrics and a possible remedy.

It is later that the student can fully write up the case – applying philosophy, pathology and differentiation skills they have learned in classes, and demonstrating their ability to present cases and analysis formally with the acute totality. Splitting supervision for acutes into this

two-phased process – handling the immediate prescription in real time and assessing case write ups and formal presentation of work later – provides a thorough package of support which is appropriate for the specific needs and challenges of supervised acute cases.

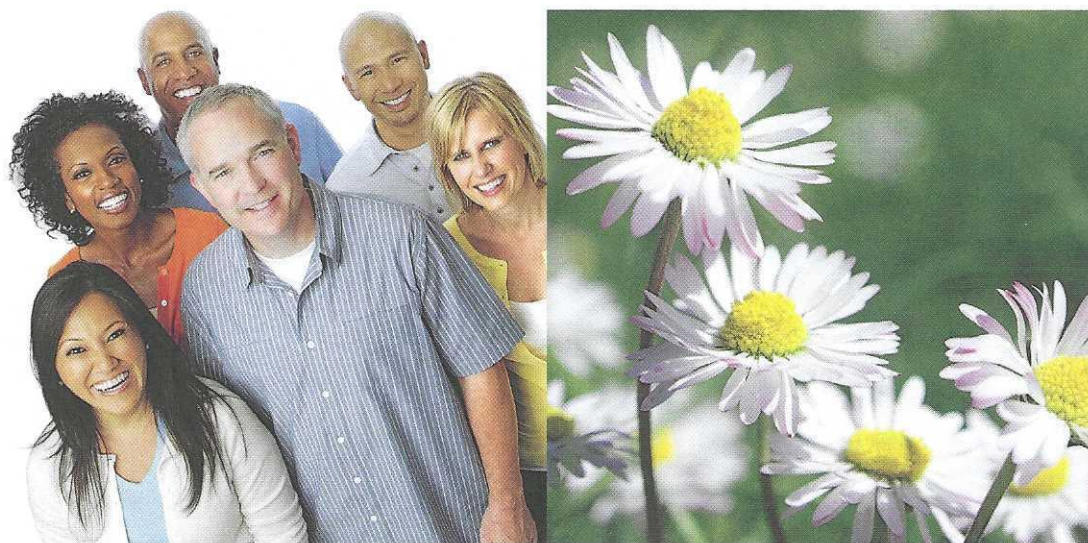
Our Students

It is always rewarding to see students grow in confidence and knowledge through their acute casework – to me, this represents a continuation in my life of the magic of acutes and is a giving back to the universe in continued gratitude for the relief from that 6C dose of Gelsemium.

I wanted to leave the final word on this with our students. They have engaged positively and enthusiastically with the acutes process; our first-year group is no exception. I invited them to speak a little about their experiences and here's some of what they said!

Melanie

Acute case: Young woman, SW, 40 weeks pregnant with her first baby. The patient requested that I visit her as soon as possible: the emotional urgency in her voice told me not to delay. The midwife had done a “cervical sweep” to try to commence labour four days previously, since when the patient had had no sleep at all with the labour pain and was really anxious. Her partner had to work, so she was alone and afraid, with no family or friends available to support her. The hospital visit



“Acutes never happen when you have time for them.... Be prepared for the unexpected at all times but embrace the challenge.”

that morning had confirmed that she was only four cm dilated and she was told to go home until labour progressed further. She was warned it could be several days, being her first baby. This added to her upset and anxiety, escalating her emotions and tearfulness. Her waters hadn't broken at this point. She was in extreme lower back pain and her ankles were very swollen. The baby was very low and her pelvis and hips also ached.

I reached for Bach's *Rescue Remedy* both for her and for me, diluted in water, to keep us calm, remembering that my college principal always reached for this if any of the students were going through an emotional transition.

Together we discussed her symptoms, and a plan of action was made. I called my supervisor, believing that the best course of action would be the birth of this baby sooner rather than later. Between us we prescribed *Pulsatilla* 200c dry, then a second 200c dry 30 minutes later, plus *Pulsatilla* 200c in water to be sipped to enable the cervix to soften and labour to get going, and to encourage this shy baby to come and join the world.

SW was physically weary and battered so we also used *Arnica* at this point. We committed to getting through the time we had together until her partner returned, using breathing exercises, relaxation music and meditation, (with my NWCH Supervisor on call throughout for additional support). I continued to massage her feet which she found really helped, paying particular attention to the Shiatsu point of the cervix which is situated on the base of the heel: all methods she was familiar with but alone, had abandoned. Laughter became abundant in between contractions that rapidly sped up and the energy in the room changed to a happy place.

17.43 pm, saw the grand arrival of a 6lb 6oz girl, and the dad arrived with us in the hospital just as the baby came into the world. No drugs at all were used in her arrival, only homeopathic remedies.

Mum was given *Arnica* 200c dry, to take over the next three days to help with the bruising of the birth canal and the start of breast feeding.

Barbara

Acute cases: My two acute cases were completely different. The first one was very sudden and violent ~ my three-year-old nephew had sudden

fever and I had to find the remedy immediately. The second case was an acute flare up of a chronic - my hairdresser suffered with a flare-up of joint pain, so I had more time to search for a remedy.

From both cases I have learned to listen to the patients and work only on the symptoms they provide you with.

Gwen

Acute case: Broken rib in a 60-year-old man who fell while getting on his bicycle.

Prescribed two days *Arnica* 200c three times a day, then moved onto *Symphytum* 200c three times a day for two days. Prescribed *Bryonia* 200c to dose as a water dose as needed throughout the day for pain relief. Also recommended cell salts for bone healing and to ensure he was breathing sufficiently deeply to avoid pneumonia.

Excellent pain relief on *Bryonia* and was able to stop Tramadol™ and paracetamol very quickly. Within a week had almost no pain and easy breathing.

Katarzyna (who is a dressmaker)

Acute case: I had a phone call from a lady I used to work with, who needed alterations to a dress. She had a cold and didn't feel great to come to me with her garment. I asked nicely, would it be possible to take her case because I study homeopathy and I need to gain experience in treating people with acute symptoms. She finally said yes. I really liked talking to her and asking her questions.

I was stunned and completely surprised at the result. I was very surprised when I contacted her on the third day, her symptoms improved by half. However, a day before, she was not able to drive because she felt weak, so I decided to deliver her remedy (which was suggested by my supervisor). Next day, she was much better and was shopping at Tesco!

Everything I learnt in college and in my own time (so far) have a massive impact on my overall approach. I can see the benefits of studying and analysing cases from which I learn a lot. It helps me to apply my current knowledge to everyday complaints and treat them effectively. I absolutely love Homeopathy!



“ Whilst my first year in NWCH has passed in a heartbeat, I have learnt and retained a lot of valuable information. ”

Idris

Acute case: Post operative care after breast enlargement surgery.

I thoroughly enjoyed the background study of the procedure in terms of understanding the surgical process. I enjoyed studying the remedies which the rubrics grid presented. Delighted that these were recognised for this acute situation by the pharmacy (post operative group remedy). It was a challenge to refine and arrange the symptoms accordingly so that the correct and suitable rubrics were selected for the grid analysis. I wasn't aware of remedy groups prior to this case. My supervisor highlighted these during the case development. The daisy flower family remedies (*Arnica*, *Bellis perennis* etc.) proved interesting and useful.

Ifat

Acute case: Severe catarrh and phlegm build up. The patient suffered severely with phlegm and mucus irritation, to the point it affected their sleep and day to day life. Night-time and mornings were particularly worse, having warm drinks and warmth in general seemed to ameliorate the symptoms. The modalities really aided me in pin-pointing a particular remedy as many came up from my rubrics. The remedy was *Kali bich 30c*, which the patient found to be very effective.

Although initially overwhelmed by the number of possible remedies, the modalities pointed me to the correct remedy, making an 80% improvement with *Kali bich 30c*, and finishing the case with *200c*.

Student experience

Students were asked specific questions about their experience of supervision in taking acute cases.

This is a summary of their replies in their own language.

What did you enjoy about taking the cases?

- ▣ The need to rely on my training of remedies that I had been taught. And learning new remedies.
- ▣ Being able to remain the unprejudiced observer, a sense of calmness and clarity allowing me to be present and supportive in

the many different and difficult emotional and painful moments in the five hours we spent together.

- ▣ Knowing that my supervisor from NWCH was on standby.
- ▣ The excitement of the patient as he stopped pain relief medication and found the *Bryonia* enough, also the speed of pain reduction, being able to sleep better from the first night and being able to get back to work within four weeks instead of the predicted eight weeks by the GP.
- ▣ I enjoyed being able to help in a situation I was previously feeling quite helpless in.
- ▣ Putting myself in the role as a homeopath and imagining this was me in four years' time as a qualified professional homeopath – it felt really motivating and encouraged me to do all I could.

What did you find challenging about doing it?

- ▣ The challenge was working the case quickly enough to start treatment the next morning. It was a late night! Also thinking through all the possible outcomes, such as higher risk of pneumonia.
- ▣ The number of remedies that came up on my rubric sheet! First, I was a little overwhelmed as to how I would choose the correct remedy. I overcame this by referring to the patient and taking more details in relation to their modalities. Ultimately, this directed me to the correct remedy as the modalities for each remedy differed so much.
- ▣ Time frame and only a few details about the case. Searching repertory for symptoms.

What did you feel about the results?

- ▣ It was a privilege trying to help someone with natural remedies, knowing there will be no side effects afterwards. Immediate feedback from both patients that symptoms have been relieved – this was the most satisfying part.



“The supervision process has been brilliant, guidance with care and confidence. It's provided much needed reassurance and guidance to enable confidence in prescribing remedies for these acute cases.”

- Really pleased for the patient, and that I had made a significant difference.
- Shocked that I had been party to the safe and swift arrival of a new life with skills I had only been learning for seven months and the knowledge that a remedy could have such a rapid impact. The awesomeness of homeopathy to treat the whole body, not just one symptom.
- I was stunned and completely surprised!
- I was happy when the patient told me their symptoms were 80% better, however, I knew if I gave them a single higher dose of the same remedy it could possibly relieve them of their symptoms completely.

Was there anything you learned along the way of particular interest or surprise?

- Yes, sometimes patients can easily become side-tracked and steer away from the ailment they came to discuss. In which case a gentle sway to encourage them back onto topic may be needed. Also, sometimes it helps to get the patient to physically show you where the pain is, rather than just telling you as you may find the part they are describing is in fact a completely different organ!
- Yes, I was very surprised when I contacted her on the third day, and her symptoms had improved by half, whereas a day before, she was unable to drive because she felt weak.
- Layering the remedies, using *Bryonia* for something other than a cough. How quickly the *Arnica* and *Symphytum* worked.
- From both cases I have learned to listen to the patients and work only on the symptoms they provide you with.
- I wasn't aware of remedy groups prior to this case; my supervisor highlighted these. Whilst I understand the classical homeopathic method is to strive for a single remedy, in this instance, group

remedies can be prescribed. This was a great experience in confirming my faith in the process we learn at NWCH.

What has your experience been of NWCH acute supervision processes?

- I have been challenged to show up and not be frightened to speak about what I have learnt. The care, support and guidance has been incredible from everyone, tutors and students in our year alike.
- When I decided to take an acute case, I didn't feel that I was left on my own. I have learned a lot from supervisors' feedback afterwards while I write up my case. It was nothing negative, but great advice which will help for my homeopathy future.
- My supervisors are good at guiding and questioning my thought process and differentiation. They also give good feedback and are supportive when cases do not get resolved homeopathically for various reasons.
- Communication with my supervisor was very dynamic and effective in improving my patient's condition.
- The supervision process has been brilliant, guidance with care and confidence. It's provided much needed reassurance and guidance to enable confidence in prescribing remedies for these acute cases. I feel well prepared and able to continue my learning at NWCH with such a solid foundation from year one acutes.
- I found both my acute case supervisors incredibly approachable and helpful. They really made me feel like no question was silly and I was supported very well throughout the entire case taking process. I am extremely grateful to them both as the first acute cases you take are a big personal milestone!
- It allows you to bring the theory element of your learning with the real life practical element together seamlessly, whilst simultaneously boosting your confidence for future case taking. ●