The Coherent Pattern

The AV Method and an Ozone Case Example

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The Noise of the Little Self

When prescribing a homeopathic remedy my aim is to find the vital disturbance, which I believe is only one in a person and expresses itself by signs and symptoms on mind and body, as Hahnemann wrote in his Organon1. Since the disturbance is located beyond mind and body, it means that disease is not of the mind nor the body but that these are the areas to express – and for the homeopath to recognize – the disturbance. Hahnemann emphasizes several times the fact that when the expressions are taken away there is nothing of the disease left whatsoever.2

Disease is linked to the most strange, rare and peculiar features of the person, in other words his individuality. We all have a body and peculiar features of the person, in other words his individuality. We all have a body and are embedded in a yet “deeper” level which I call the vital level. Hence the cause of disease is a vital disturbance. Let me clarify this briefly as a more extensive explanation is to be found in my books “The Charm of Homeopathy” and “The Postgraduate Annual 2006”.

For practical reasons – as well as others which fall beyond the scope of this article – I use a scheme of five levels to navigate through a case. I call this the AV method (AV for Anne Vervarcke).

In teaching Sankaran’s method for many years, I found that the so-called sensation method frustrated my students. They felt they couldn’t “reach” the sensation level and therefore ended up with a “worthless” case. It gave them a continuous feeling of failure. Others prided themselves on achieving the almost unattainable goal but in the process sometimes came up with very weird prescriptions indeed. Also in my own practice the so-called sensation method led to extremely boring consultations and weird prescriptions. When I realized I was missing clear-cut Silica or Phosphorus cases with this method (giving the poor patients fanciful remedies like Lac equinum or Mantis religiosa!) I somehow understood the problem. In trying too hard to get to the sensation I was not listening carefully enough to what the patient was actually saying all along! Getting back to the basics, it dawned to me that it is fine when a patient happens to say in his own words something like: “this is my sensation, like an eagle in the sky” but in practice it rarely happens and it is not necessary. The disturbed vital force/vital sensation is expressed on all levels all the time and it yields reliable information making up a coherent pattern. So my method, which I have been teaching for a few years now and has proved quite solid, is aimed at spotting the vital information on the other levels.

Pattern Matching

Homeopathy, as I understand and apply it, is basically pattern-matching. We try to perceive the pattern of the patients’ particular way of being and match this with the particular pattern of some substance we have tested that evoked a similar experience.

This pattern is made up, as previously stated, of signs and symptoms in mind and body.

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In each person there is a physical, energetic, emotional and a mental level. All of these are embedded in a yet “deeper” level which I call the vital level. Hence the cause of disease is a vital disturbance. Let me clarify this briefly as a more extensive explanation is to be found in my books “The Charm of Homeopathy” and “The Postgraduate Annual 2006”.

Level 1 or the physical level is clear to everybody: the level of the physical pathology. I consider this pathology as already individualized, as there is no other possibility than to experience your own disease. The 2nd or energetic level is not always well understood; it is the qualitative part of the bodily parts, not the mass but the amount of vitality (to make the language confusion complete between Levels 2 and 5) con-

SUMMARY

For homeopaths looking for the vital sensation who feel frustrated when they don’t manage to reach this deep level, here’s some good news! The vital sensation is expressed on all levels all of the time and can’t in fact be concealed from the observant homeopath. An example of a straightforward case will demonstrate this.

KEYWORDS Vital disturbance, Levels of experience, AV method, Ozone

1 Organon of Medicine, translated by Boericke, Aphorism 6: “The unprejudiced observer (…) takes note of nothing in every individual disease except the changes in the health of the body and the mind.(…) All these perceptible signs represent the disease in its whole extent, together they form the true and only conceivable portrait of the disease”. Aphorism 11: “When a person falls ill it is only this spiritual selecting vital force everywhere present in this organism that is primarily deranged (…) it is only the vital principle deranged to such an abnormal state that can furnish the organism with its disagreeable sensations. (…) its morbid derangement only makes itself known by manifestation of disease in the sensations and functions of those parts of the organism exposed to the senses of the observer.”

2 Aphorisms 8 and 17: “Now, as in the cure effected by the removal of the whole perceptible signs and symptoms of the disease the internal alternation of the vital principle to which the disease is due – and consequently the whole of the disease – is at the same time removed. It follows that the physician has only to move the whole of the symptoms in order at the same time to abrogate and annihilate the internal change, that is to say, the morbid derangement of the vital force – consequently the totality of the disease, the disease itself.
Homeopathy for the Soul

There is nothing wrong or disturbed as such in being unique. I hope that is clear. But it is as if we all have a combination lock, a personal frequency pattern and when we are disturbed it is here that the disturbance is to be found.

On top of this, a vital sensation is only perceptible when disturbed. Again Hahnemann pointed to this in his Organon when he stressed that the disease is gone when the signs and symptoms are gone. A vital sensation that is not disturbed is not noticeable: it is still there but it operates quietly in the background, in the same way as an undisturbed stomach or bowel does. When they are disturbed there is nothing else one can think about: there is physical as well as emotional and mental suffering. The moment it is cured, though, there is freedom from thoughts, worries and pain again.

This means we are not trying to get rid of the vital sensation when treating a patient, in the same way that we are not trying to liberate him from his facial features or family name, but we are trying to find the match that will quieten down this “noise” made by it. When the egoist little self doesn’t insist so loudly on its uniqueness and separation, the natural freedom, happiness, health and joy of the Self gets the upper hand. It is as if we remember who we really are. In that way I’d like to call what we do “homeopathy for the soul” and that’s why I wouldn’t insist too much on homeopathy seeking scientific recognition for the time being...

The Quest for the Vital Disturbance

Now: all this caused many homeopaths to go on the quest for the vital disturbance on the 5th or sensation level or even on the 6th or energy level (the level of the substances’ energy expressed by gestures). Although I agree it is an amazing and exciting experience for the homeopath when a patient seems to start to talk the language of the substance he needs, more often than not we don’t make it to that depth. Then the homeopath is left with a feeling of frustration and of failure. He feels he has nothing to prescribe on. This “all or nothing” attitude my students were burdened with was, I felt, the wrong message given in so many teachings and trainings. Given that I made my own mistakes struggling to get to the vital level, and rectified them, the following is offered by way of encouraging homeopaths working with the sensation method.

As demonstrated in Master Classes with life cases, my method consists in recognizing the disturbance in the vital sensation on all levels. This means working out what comes, at each particular level, from the vital disturbance. Because it is on all levels all of the time, so in everything the patient reports the vital disturbance will be there. The way we can be sure it comes from the vital and is not a local phenomenon is that the information thus gathered will make a coherent pattern. It will fit and come together and in the end will cover and explain every feature of the case.

Simply put, what does not belong to the pathology belongs to the patient and is vital information on Level 1: the physical pathology; but in it there is information of Level 5: “tense and sweating among people”. The weeping seems to be Level 3 (emotions) but the patient starts to elaborate on the other symptoms first. It is normal in the first ten minutes for a patient to test out the homeopath a little bit, just to feel if it is possible and safe to tell more intimate things. But already we know there is tension and emotional disturbance. She uses the words “building up” tension, which might be a hint to the mineral kingdom.

Again: kingdom information comes from Level 5.

H: Can you tell me about the fits of weeping?

Whenever I think about sad things I start crying and I lose control… I wish I could… when I go to a funeral; the one who weeps most is me… whenever I read something sad in the newspaper, I start crying and this takes a lot of energy.

Asked about what sad things she is talking about, she says:

Something sad with children… a loss or a death… or when attention is put onto me… when I talk about myself I easily make contact with this grief… I wish it wouldn’t overwhelm me in this way… that feeling.

It required a little bit of help by questioning gently but persistently about what feeling was overwhelming her and what exactly she felt she couldn’t control. After a silence...
in which she tried her utmost not to weep she finally said with a smothered voice:

It’s a kind of inability to understand life... I'm too easily sliding into this grief... it’s taken me over and I'll do all I can not to get into that state.

Now the hand gesture she made that accompanied the “taken me over” was as if wiping a screen with one hand. This is not a gesture that fits the words accurately. Whenever this happens, the gesture is meaningful, important and significant since it escapes the patient’s control. Some patients use many hand gestures as a part of their overall body language but this patient didn’t. Therefore, whenever there comes a gesture it means that words are not sufficient to express her experience and thus it comes from her vital sensation or Level 5. (It is also a very common gesture for Ozone patients to make: from experience I can say it is a sure indicator of an Ozone patient.)

When asked to tell a bit more about this, she said she feels a lump in her throat, gets warm all over and feels as if dazed. Again she makes the same gesture like a screen between her and the outside world. She adds that she feels as if sucked into herself and not having much contact with the world.

Not all cases evolve to Level 5 so easily from the first 20 minutes but in her case the hints for a kingdom were persistent: sliding away also points to the sensation: an unstable fundament, easily sliding away under your feet: mineral kingdom again.

Grief itself could be understood as a Level 3 or as an emotional symptom but what the grief is about and what it does to the patient speaks of Levels 4 and 5. In her case it is about the “understanding of life”. Hence: a very basic problem, even one of the first things one must do when coming into this world!

Row 1 of the periodic table symbolizes the incarnation, the being but unborn. Row 2 is all about becoming a separate being and is easy to understand when we use the symbol of the birth process (from Lithium: “Oh my God, I can’t exist on my own”, over Beryllium: “extremely dependent”, Boron: “falling out and clinging”, to Carbon: “congratulations, it is a boy”, Nitrogen: “for heavens sake: breathe now!” to Oxygen: “first breath: I made it”, to Fluor: “now I’m disconnected, I’ll stay that way”) Row 3 is from the cradle to the university, Row 4 how to become a good citizen, Row 5: I'm special, Row 6: I know.

The patient here hasn’t yet reached the row of relationships and the issues concerning establishing an identity that come with it. We are thus on the second row. However an adult needing a remedy from the second row will rarely talk about a foetus-like dependency or a vulnerability of a baby: they will talk about “life”. Subconsciously they talk about “my life” and they are completely and exclusively focused on their own existential concerns, even when they project it to “the rest of the world”. This generalization, this “all or nothing” in the given examples, are more pointers to the second row.

Of course we have to stay open for possible twists in a completely different direction in a consultation but my experience over the years has taught me to trust the patient: he will always take me to where the treasure is hidden. This means that no single topic the patient chooses to talk about, no single example is ever coincidental: it always contains the vital sensation. Not only is what the patient is saying extremely important: what he is talking about is also vital.

When asked for an example of grief, the first one the patient gave was:

When I read something in the newspaper like… a mother from Ukraine who took her two children across the mountains barefooted! And funerals. And something happening to her children.

My biggest fear (she admitted) is to lose my children... fear of death, not so much the death in itself but the loss... the idea there are no certainties.... Absolutely nothing at all that could give some security.

H: What do you mean by uncertainty?

The main point is that you can lose what you have... like the children... I don’t know if I would be strong enough to... give meaning to my life... I don’t dare to think about what would happen if I lost my children... I can’t trust myself... I wouldn’t have the capacity to go on with life... it would be as if I’m not living any more... I would be death inside... difficult situations in life would make it impossible for me to give meaning to my life. So many dramatic stories I hear or read; like this book about this Jewish woman in the concentration camps: she still found the strength to give a meaning to this. Or I once read about a woman whose child drowned in the swimming pool and another one who had a child with a brain tumour... she found a way to handle this and I don’t think I could.

Her main fear is the loss: losing (at the right side of the periodic table, from Column 10 onwards, before that the feeling of lack is predominant) what you need in order to be complete or to exist at all is the mineral issue.

The depth of the grief and despair becomes apparent in her examples: concentration camps, brain tumour, drowning: these are the hardships of life! Remember she said she wanted to “understand life” and then she gave these examples. In her inner world, what is asked of a mother is to be able to cross Russian mountains with your two children barefooted. It seems too difficult a task for a person and the outcome is unsure. In all her examples death is lurking just around the corner or has already made its presence felt. The issue is still the same: grief about dramatic things in life, but the intensity is the pointer to the miasm: how these dramatic things are experienced: acute life threatening, to overcome with effort, to be accepted, suffocating, destructive or combinations of these. In her case, destruction/death is in virtually every example, hence the syphilitic miasm.

She keeps confirming the mineral kingdom by doubting her capacity, fearing loss, lacking strength, being unable to cope and being devastated by having no security at all.

The examples she gives refer to her delusions and deep irrational fears, hence Level 4. The likelihood that she will be deported to a concentration camp or will have to carry her children barefooted over the mountains to survive is very small, one must admit...

About her pregnancies and labour she says:

I felt guilty to bring a child into this world when I got my first baby... When I only lived for myself I’d do reckless things but as a parent... I realize a child is not mine, it is not my own...

3 From Sankaran: Acute miasm (panic), typhoid miasm (crisis), psoric miasm (effort), ringworm miasm (complaining because unfortunate), syphilitic (accept/avoid/hide), cancer miasm (control because chaos is fatal), tubercular miasm (must change), leprous miasm (outcast), syphilitic miasm (unbearable and fatal).
property: it can be taken away from you again. Somewhere in the back of my mind I’m always conscious of that. If they go on holidays or my husband and children take the car, I always wonder if I will ever see them again.

Now we arrive at a point in the interview where we are surprised to find the same things over and over again, in all different expressions and domains. This is sure confirmation that we have spotted the vital disturbance: we know it’s at all levels, all of the time, in all domains, in every period, in all topics.

When asked about her pregnancies, the message in the answer is: “I can lose my children or they might lose their parents!”

We shouldn’t disregard the “story” of the patient, her life situation or her examples because they are surely well chosen to convey the message.

The mineral kingdom is here confirmed again in the sense that everything she says is about fear to lose or lack the one thing a person needs in order to exist. It is the second row in the sense it is about the total dependence of the child or – even better – the newborn baby. It is also the second row in the sense that it is about “my life”. It is Stage 16 in the sense that it has the feeling of “climbing away, unable to prevent the fall, too incapacitated”, keywords that belong to all the elements in that vertical column of the periodic table. In the case of the patient it means that there is no security whatsoever from the connection/relationship with the other, nothing to hold on to, she is all on her own now. The umbilical cord is cut, she is separated and there is no way back.

If it were Oxygenium the focus would be on being (un)able to take your first breath and live! But in Ozone the emphasis is on the desperation that comes with suddenly being cut off and on your own. The sensation is of too many overwhelming impressions coming from the outside world and a need for protection behind a kind of shield or (transparent) wall.4

Spontaneously the patient says she feels so much better outside, even her fears and worries are less. She says that, although being low in energy most of the time, she feels boundless energy in her garden.

Maybe it’s because of the light, the air, the being alone and doing what I like, she says, outside I’m relaxed and in harmony, this is life to me.

She tells about her childhood when she was timid and didn’t dare assert herself in the outside world, whereas at home she was demanding and easily angered.

All this closely matches our analysis so far. The alternation in energy is a well-known feature of Ozone and we would expect the Ozone person who has so many difficulties to cope with the outside world, to prefer to be alone where he can do what he likes. And of course they prefer an environment with lots of air! It is a form of oxygen after all.

Another topic she mentions adds to the coherent pattern: her reaction to her father’s death when she was 12. She had a kind of a blackout, lived in a kind of daze, as if detached, not really there.

This again is typical of the remedy: the withdrawal when things get too much. And for Ozone, who is like a newborn baby, the reaction to the devastating demands of life is to withdraw. Their senses are dulled: often Ozone patients will say they don’t hear or see very well, their senses are as if blunted.

Our patient said at the end of the interview:

“It’s as if something is between me and reality, as if I don’t even know whether I am actually touching something or not… ”

“Something between me and reality” is one of the many ways an Ozone patient describes the shield or screen or glass dome between them and the outside world.”

Ozone is the example I’ve chosen to make my point that in every case the vital sensation is to be spotted on all levels – but it could just as well have been any other remedy from any other kingdom. Since I’ve seen many Ozone cases in my practice and I think it might be an under-prescribed remedy, I have chosen to use this as an example here. In my book “Behind the Glass Screen” (published by B. Jain in 2009), there are many more Ozone cases and a few Oxygen cases for comparison.

I followed the patient up until recently where she stated that she feels she has control over her weeping, which is in any case very rare now. She can hardly recall when the last time was.

In the first follow-up after two months, she said she had fewer weeping spells and had an overall feeling of inner calmness. Her concerns about her children were still there, however, as well as her tension and perspiration when among people. She was given Sac lac until about six months later, where she had a partial relapse brought on by an intense discussion with friends. She felt she had defended her life values fiercely but had felt drained afterwards. The discussion was about free will and choice in life and she said a person is always dependent on the situation. She recalled a movie where a mother had to make a choice between two of her children and she thought this was just awful.

After the repetition of Ozone MK two and a half months later she stated to feel much better. The weeping was rare and the fear that something would happen to the children was less. She gives a few examples where the children were on a day trip with a bus and she didn’t worry as she used to.

She confirms being calmer, also with the children, more in balance and less volatile. She also finds it remarkable that she doesn’t seem to need to find a meaning in life in her motherhood. Her fears and need for security are hardly there and she feels much freer and less inhibited in her NLP training with the other people. She is enjoying life now.

For the last few months she hasn’t needed a repetition as she said that for the moment she doesn’t have the feeling there is something she wants to change in her life.


4 Rubric: delusions, walls, transparent.
References

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