

FOREWORD FOR SYNTHESIS 9

Synthesis 9 is the first version that is being released in two steps¹. Synthesis 9.1 has more or less the same content as Synthesis 9.0. The difference between these two versions is a long awaited, crucial step in the development of the repertory. I have been dreaming about this improvement ever since I became accustomed to my very first Kent's Repertory, which I bought in 1977.

What then is this change?

1. STREAMLINING AND RESTRUCTURING

The change to Synthesis 9.1 addresses a problem well known to deft repertory users: *a lot of information is hidden in the subrubrics of the pain descriptions*. Let's clarify this with an example.

A patient tells you his pain in the eye is definitely better from rubbing the eye. Synthesis 9.0 offers 7 remedies with this modality in the rubric "EYE - PAIN - rubbing - amel.". The meaningful bit of information here is "rubbing amel.". The experienced repertory user knows that the "eye - pain" section contains other symptoms which include this same modality. These are hidden as subrubrics of the pain descriptions, as follows:

"EYE - PAIN - burning - rubbing - amel."

"EYE - PAIN - foreign body; as from a - rubbing amel."

"EYE - PAIN - pressing, pressure, etc. - rubbing - amel."

"EYE - PAIN - sand, as from - rubbing - amel."

These four rubrics all contain remedies whose pain in the eye is improved with rubbing. The relevance is that, if we combine these rubrics, we now look at 13 remedies instead of 7! Considering these additional remedies may increase the likelihood of choosing the correct remedy.

How has this issue been addressed in Synthesis 9.1?

In all the symptoms of the pain sections, the description of pain was always on level 3 ("eye - pain - *burning* - morning"). In Synthesis 9.1 this description has been moved to the last level of the symptom. The above symptoms therefore became:

"EYE - PAIN - rubbing - amel. - burning"

"EYE - PAIN - rubbing - amel. - foreign body; as from a"

¹ Synthesis 9.0 was finalized on November 21, 2003 and released as a software program in English on November 24, 2003. This version was only translated into German (December 22, 2003) and not printed in any language. Synthesis 9.1 was finalized on June 4, 2004 and released as a software program in English in July 2004. Version 9.1 will be translated into several languages and is the basis for the new printed version. The new veterinary information has been added to Synthesis 9.1 to create Synthesis 9.1V.

"EYE - PAIN - rubbing - amel. - pressing pain"

"EYE - PAIN - rubbing - amel. - sand; as from"

As a consequence, these rubrics containing the same modality are now positioned next to each other, on the same page or screen. In Synthesis 9.0 they were pages apart, pages that were seldom turned. This 'hidden' information is now easily visible and usable.

This **restructuring** increases the number of remedy choices for thousands of modalities, sides, times, extensions and localizations. These hidden symptoms and their remedies were hardly ever looked at before. Now it has become very easy to consider this information when necessary.

In addition, the remedies of these symptoms expressing the same side, time, modality, extension or localization have been **copied to the common superrubric**. Reverting to the example above, this means that "EYE - PAIN - rubbing - amel." has 13 remedies in Synthesis 9.1 (in stead of 7 in Synthesis 9.0). For each remedy the source rubric has been indicated².

In order to achieve this drastic change, it had to be preceded by another step: a thorough **streamlining** of all symptoms. Here is the explanation why:

The modality "cold air agg." is expressed in several ways at different places in the Repertory. For example, in Synthesis 9.0:

HEAD - PAIN - *cutting* - cold - air agg.

HEAD - PAIN - *tearing* - air - cold; from

If we restructure this information, these rubrics would become:

HEAD - PAIN - cold - air agg. - *cutting*

HEAD - PAIN - air - cold; from - *tearing*

This would result in a cluttered pattern of rubrics with identical meanings, expressed in different ways. Therefore, we have streamlined the modality "cold air agg." throughout the Repertory into "cold - air - agg." before undertaking the restructuring.

In Synthesis 9.1 the above rubrics have become:

HEAD - PAIN - cold - air - agg. - *cutting*

HEAD - PAIN - cold - air - agg. - *tearing*

As a consequence of this streamlining and restructuring process, some familiar rubrics may have undergone some changes.

² Only visible in the software: if you click on the 'down arrow' following the remedy you see the source rubric (in "Full Synthesis View").

First of all, the symptom level expressing the description of pain has been moved.

There is only one thing to remember in order to find the new symptom location: *move the "description of pain" to the last level of the symptom* and you will find the symptom in Synthesis 9.1. This applies only to pain symptoms that contain a "description of pain" (e.g. burning, cramping, tearing, etc.). Some examples:

<i>Symptom in Synthesis 9.0</i>	<i>Symptom in Synthesis 9.1</i>
HEAD - PAIN - stitching - evening	HEAD - PAIN - evening - stitching
HEAD - PAIN - stitching - coughing, when	HEAD - PAIN - coughing, when - stitching
HEAD - PAIN - stitching - Forehead - extending to - Occiput	HEAD - PAIN - Forehead - extending to - Occiput - stitching
HEAD - PAIN - stitching - Temples	HEAD - PAIN - Temples - stitching

Second, the streamlining may have moved a familiar rubric to a different place altogether, even considering the first explanation above. You look for a symptom modified with "air – cold", and in fact in Synthesis 9.1 you will find it under "cold – air"; not under the letter "a"(ir), but under "c"(old).

It may take some time to adjust to the new streamlined modalities and locations. The advantage is that this streamlining is now consistent throughout the repertory. Previously this was not the case. In Synthesis 9.0 and prior versions there were 36 ways to express "cold air agg."³!

Now either "cold – air – agg." or the collapsed form⁴ "cold air agg." is used– and that's it. This simplifies the search for rubrics in the repertory from now on.

Here are some rules that we have followed while streamlining.

- If a combined modality contains an element indicating **temperature**, then this latter part was put first: "cold air agg."; "cold bathing amel."; "warm food"; "warm bed"; etc. The only important exception to this rule is that we did not touch the existing groups under "weather" and "wind": they remain as they were ("weather – warm – amel."; "wind – cold – agg."; etc.).

³ air - cold/ air - cold - agg./ air - cold air - sensitive to/ air - cold air; sensitive to/ air - cold, from/ air - cold, in/ air - cold; from/ air - cold; in/ air - open – cold/ air; in cold open/ cold – air/ cold - air - agg./ cold - air – from/ cold - air - sensitive to/ cold - air agg./ cold - air, from/ cold - air, in/ cold - air; from cold/ cold - air; from exposure to/ cold - air; in/ cold - air; in cold/ cold - being in the/ cold - open air; in/ cold air/ cold air - agg./ cold air - sensitive to/ cold air agg./ cold air, from/ cold air, in/ cold air, when in/ cold air; exposure to/ cold air; in/ cold open air; in/ cold; to – air/ sensitive - cold – air/ sensitive - cold - air; to

⁴ A modality is collapsed when there are no similar modalities next to it. If "cold – air – amel." would be the next symptom, then these modalities would not be collapsed for that symptom.

- As much as possible and where applicable we have reduced modalities to either "**agg.**" or "**amel.**". "Walking – from"; "walking – when"; walking – while"; etc. have all been merged into "walking - agg.". Where doubt existed we kept a difference that will need to be clarified from a study of the *Materia Medica*. An example: you will find some remedies and subrubrics at "eating agg." and others at "eating while" because this is the way the original rubrics were written. These rubrics have not been merged as it could have induced errors.
- All through Synthesis the difference between "**after xxx agg.**" and "xxx agg." was maintained, even if in some instances this difference appeared to be minimal: is there a difference between "turning head agg." and "turning head agg.; after"? Further study of *Materia Medica* will answer in each instance.
- The difference between an **aggravation from food** and from *eating* that food has been maintained. The reason being that "eating warm food" indicates that the aggravation takes place while eating – or at least should indicate this. The modality "warm food" normally indicates that the aggravation takes place because of warm food, but not only and not necessarily *while* eating it. The same has been done for aggravation from *drinking* a drink and the aggravation from that drink (e.g. "tea" as opposed to "drinking tea"). In all these instances the original symptom information was carefully preserved.
- At last, some modalities that were depending from **common superrubrics** were split. In Synthesis 9.0 you will find "air – open"; "air – draft of"; etc. These rubrics depend from the common superrubric "air". In Synthesis 9.1 these modalities became "air agg."; "air agg.; in open" and "air agg.; draft of". The reasons for this change are to have a more obvious structure, that is easily perceived and to facilitate translation of these modalities.

These are some of the examples of the rules that we used for streamlining. More information can be found in the Textbook. Although dramatic changes have been applied, great care has been taken to avoid oversimplifying matters and inducing errors thereby.

For the software users there is an additional aid to easily find any restructured and/or streamlined symptom. At the end of Synthesis 9.1 there is an additional **chapter "Old symptoms"**. It contains all symptoms that have undergone a change, but in the "old format". Here you will find the rubric that you are used to, e.g.: "OLD SYMPTOMS - EXTREMITIES - PAIN - stitching - Ankle – standing". Hit enter and you will be at the restructured symptom: "EXTREMITIES - PAIN - Ankles - standing - agg. - stitching pain".

Likewise, software users have additional flexibility to use or not the remedies copied from the subrubrics. The "**Full Synthesis, rmd copied**" **view** contains all copied remedies. All other views do not contain these additional remedies. These views are a mouse click apart. In the printed version the remedies of the subrubrics have been copied as described. Such remedies are identified by a 'down arrow'.

Still another aid is available: software users get Synthesis 9.0 (without streamlining and restructuring) as well as Synthesis 9.1, they can both be used at the same time.

With all this flexibility and precision, it should be easy to start using Synthesis 9.1. This is important because it is our intention to build on Synthesis 9.1. Streamlining and restructuring is a major milestone⁵ in the development of Synthesis. If any change is needed, it is to improve this idea.

Some further improvement is still needed.

First, we did not streamline the Mind chapter. There were too many exceptions to undertake this with an automated process. It will be done manually for the next version of Synthesis. The Dreams chapter was not streamlined because there are no sides, times, extensions, etc.

Second, most of this process was creating and testing the programs and tables for this restructuring and streamlining. Once all was perfectly functional the actual conversion went very quickly⁶. Nevertheless we kept on improving our tables and insights until the end. As a result the first chapter we processed (Head) was restructured and streamlined up to 95 % of the ideal, and the last chapter (Generals) up to 98 %. You may not even notice this as I am referring to relatively small differences.

2. BÖNNINGHAUSEN AND BOGER

This brings me to the second major innovation of Synthesis 9⁷: adding the Repertory information of Bönninghausen and Boger.

Much could be said to explain why this was done. In this foreword I will mention two reasons: today's homeopathic community is increasingly aware of the value of these authors and Kent only partially included their information in his repertory.

⁵ This was also the title of the lecture when I first presented the ideas of Synthesis 9.1 to a wider audience: The Milestone Lecture. This happened on November 6, 2003 in London during a meeting organized by the Faculty of Homeopathy. At that time this meeting was coincident with my 25 years graduation from that same Faculty (June 1978). It comforted me most of all that each of the skilful repertory users there who spoke to me, told me that they grasped the idea within minutes (among others Roberto Bianchini, Nick Churchill, Phil Edmonds, Peter Fisher, Peter Fraser, Brian Kaplan, Bob Leckridge, Russell Malcolm, Jeremy Sherr and Elaine Walker).

⁶ The first time we did a test with *Eye* was October 17, 2003. The final streamlining and restructuring procedure then started with *Head* on April 9, 2004. This chapter still had to be processed 5 times before we could finalize it (May 11). By that time the programs had become so intelligent that we could finalize all other chapters by June 4 – amazing programmers-magicians once again!

⁷ Most of the following features apply to Synthesis 9.0 as well as to Synthesis 9.1. From now on, when referring to Synthesis 9, both versions are meant (except where indicated).

The gap between these two repertory worlds is now closing as both types of information, Kent and Bönninghausen/Boger has become available in Synthesis 9. Here is what we did.

A separate repertory was created for each of the **six b-bg repertories**⁸. A team added the symptoms to an Excel file, which was converted into an empty repertory (no remedies). Others then added the remedies to this empty repertory, and while doing so, checked the work of the previous people. Once a separate repertory was complete, it was printed in the same format as the original book, including the remedy abbreviations used in the original book. Again different people checked this print-out against the original book.

When a b-bg repertory had gone through all these steps, remedy abbreviations were converted to comply with the Synthesis standards. For each repertory the original printed version has been used, either German or English.

At last, for b4 and b7, the additions and corrections as written down by Bönninghausen's son have been added with the author abbreviations b4a and b7a⁹. These original **handwritten additions** are preserved in the Library of the Pierre Schmidt Foundation, St. Gallen, Switzerland and graciously given to us by Hans-Jörg Hee for integration into our databases. This work is substantial as it counts for more than 19,000 author references.

As a consequence a highly accurate and complete version of the repertory work of Bönninghausen and Boger is made available for the first time ever. These six repertories, or any single one of them, can be used next to Synthesis 9, and symptoms from different repertories can be added to the same repertorization. But we went one challenging step further.

We decided to **integrate the b-bg repertory information** into Synthesis.

This was a challenging decision as you may be aware that the type of information in both repertories (b-bg repertories and Synthesis) is based on a different concept.

The b-bg repertories offer predominantly generalized information (e.g.: "STOMACH - NOON"), which indicates that stomach symptoms of whatever type tend to occur at noon. The corresponding remedies have been added to the new Synthesis rubric "STOMACH - NOON". They have been kept separate from any other more specific Synthesis rubrics, such as "STOMACH - PAIN - noon".

The same has been done for generalized b-bg symptoms expressing sides, times, modalities or localizations. Most chapters in Synthesis 9 have such symptoms, which only contain generalized remedies as coming from the b-bg repertories. As a result, Synthesis 9 is easily recognized because the first rubric now is "MIND – DAYTIME".

⁸ Bönninghausen's "Therapeutic Pocket Book (b2)" and both volumes of his "Systematisch-Alphabetisches Repertorium (b4 b7)" and Boger's "Bönninghausen Repertory (bg2)" as well as his "Synoptic Key (bg3)" and the "General Analysis (bg11)".

⁹ One example: in the rubric "MIND – MORNING": Apis with author b7a.de.

On the other hand and most important: the existing, individualized and *known rubrics, from Synthesis 8 or Kent's repertory, were left as they were.*

Nevertheless, some symptoms could not easily be integrated into the existing 38 Synthesis chapters. These symptoms related to localizations that were larger than the existing chapter.

In order to resolve this, we have created **three new chapters**:

- *Neck* (this chapter contains symptoms related to the whole neck - the part joining the head to the body. It should be compared with the chapters "External throat" for the anterior part, and with "Back" (which contains the cervical region) for the posterior part.)
- *Urinary organs* (all urinary organs as a whole)
- *Male and female sex/genitalia* (if gender does not play a role, as this is often not specified in the b-bg repertories)

Synthesis 9, at least in the software version, now contains 42 chapters, because of another additional chapter: a **Personal chapter**. In this chapter you can add symptoms without respect for the structure of the repertory. As a consequence it will not be possible to exchange these additions with others, nor to add symptoms of someone else's "Personal chapter" to your Synthesis. Additions to this chapter are only useful as a temporary solution and the best way to add information to Synthesis remains the correct place within the existing chapters.

Synthesis 9 was ready to receive the information from the b-bg repertories. One more mammoth task was needed: to **link the rubrics** of the b-bg repertories to the correct Synthesis symptoms. This had to be done manually for each single b-bg rubric! A special thanks to the people who took care of this painstaking part of the job: Paul Debruyn (Belgium), Natasha Pelech (Canada), Dr. P. Sivaraman (India), Erik Van Woensel (Netherlands) and Peter Vint (Germany).

After the links were made, the remedies were copied from one b-bg repertory after the other into Synthesis by a computer program. In this way the vast majority of Bönninghausen's and Boger's repertory work was integrated, adding more than 481,000 author references¹⁰ to Synthesis 9. This figure corresponds to b2, b4, b7 and bg2. The smaller bg3 and bg11 are already available as separate repertories and will be integrated into a later version of Synthesis.

There is one further aspect to this integration. In the separate repertories, the degrees were entered as in the original. The definition of **degrees** in the b-bg repertories is quite different from what we are used to in Kent and Synthesis. Looking at the rubrics of any of these

¹⁰ As some remedies existed in Synthesis already, only an author reference was added to that remedy, not a new remedy.

repertories immediately shows that there are many more remedies in the third degree. These degrees were converted to the Synthesis standard following the table on the next page:

<u>b-bg degree</u>	<u>Synthesis degree</u>
1	1
2	1
3	2
4	3

This table corresponds to the way Kent converted b-bg degrees in his repertory for the rubrics he did use¹¹. Maintaining the degrees definition of Kent and previous versions of Synthesis guarantees a stable consistency in our repertorization results, where the degree sometimes is a deciding factor.

This integration of b-bg repertories has been **abundantly documented**.

In every separate repertory each symptom contains two types of information:

- Its origin: the page number, and for bg2 even the symptom number on the page (at the bg2 symptom "MIND - Homicidal, murder, etc.": you read "{{BG2-0203-24}}" in the symptom note (user).
- The Synthesis symptom text to which this bbg symptom is linked (at the same symptom you read "{{Synthesis: MIND - KILL; desire to}}" in the symptom note (Synthesis).

In Synthesis, every addition derived from the b-bg repertories is labeled with an author reference as usual. Clicking on this reference shows the origin of the symptom. In the symptom "MIND - PROSTRATION of mind", as you click on b2.de at the remedy *Acon.*, you see:

[B2.DE-171 :: Empfindungen und Beschwerden - Äußere und innere Körperteile im Allgemeinen - Nervenschwäche :: acon.2 :: DG1]

This shows, in this order: the source, the page number (B2.DE-171) :: the original symptom text :: the remedy abbreviation with the original degree (acon. 2) :: the degree as used in Synthesis (DG1).

In some instances, several b-bg symptoms are linked to the same Synthesis symptom. This is why some author references in Synthesis will mention more than one link. This is especially the case in bg2, where a lot of information was repeated. Clicking on bg2 at *Agn.* in the same symptom shows:

[BG2-0208-22 :: MIND - Intellect, impaired, mental exhaustion, weakness of, etc. :: agn.1 :: DG1]

[BG2-0935-11 :: SENSATIONS AND COMPLAINTS IN GENERAL - Weakness, exhaustion, prostration, infirmity - nervous, nervous debility, neurasthenia :: agn.1 :: DG1]

In other words, the source information has been integrated into Synthesis with the greatest care. Together with the *Materia Medica* notes integrated into Synthesis, we now have about

¹¹ See the Textbook about this topic.

488,000 notes with source information in Synthesis 9. When printed, this source information alone would amount to 21,480 pages, using courier font 10. This is why we decided, with some pride, to give this Synthesis the epithet of **The Source Repertory**.

3. OTHER FEATURES

The b-bg repertories were made available as separate repertories for another reason: if anyone wants to use just one of these repertories (with Radar) he can do so. In a similar way **additional separate repertories** are available for the software user¹². The relevance for Synthesis is that the repertories of **Boericke** and **Phatak** have been integrated into Synthesis 9, following the same procedure as for the b-bg repertories. This amounts to 70,078 and 63,791 additional author references respectively, including source information as explained above.

We will integrate the information of the other separate repertories into a later version of Synthesis¹³. Even if separate repertories are offered, we maintain our vision to *synthesize* all homeopathic information, such as these repertories, into one work.

I have always stressed that copying remedies to superrubrics had to be a thoughtful process. As explained above, this has now been done for the remedies hidden in the subrubrics of the descriptions of pain. This was also done for the whole Mind chapter, but not blindly. Each mind rubric received a label indicating if remedies could be copied to superrubrics or not. An example is that remedies of "MIND – JESTING – aversion" were not copied to its superrubric "MIND – JESTING". If remedies were to be copied, then superrubrics to which the remedies should *not* be copied were indicated if needed. It is only after this careful labeling of each single rubric that the computer took over and **copied the remedies to the appropriate superrubrics of mind**.

Another feature of Synthesis 9.1¹⁴ concerns one further step in the **sorting of symptoms**.

Sorting all symptoms in alphabetical order may appear to be the ultimate solution, yet it is not. There is a homeopathically meaningful relationship between certain symptoms and it makes sense to have these on the same page, rather than scattered because of the alphabet.

Here is the way that Synthesis 9.1 sorts symptoms according to this new perspective.

- The symptoms of *sides* have been kept together so you can easily compare the remedies affecting the left and the right side.
- The symptoms expressing *time* have been kept together so you can easily compare the remedies with an aggravation at certain times of the day or night.

¹² The known repertories of Boericke, Clarke, Phatak, Roberts and Ward as well as the "Repertory Compilation 1.0" with contains 9 smaller Separate Repertories on specific topics. Finally, three different repertories by Roger Van Zandvoort are now available with Radar 9.

¹³ Except for the repertories of Roger Van Zandvoort.

¹⁴ Not yet applied to Synthesis 9.0.

- The *modalities* and *descriptions* of pain are sorted alphabetically within one alphabet. You do not need to reflect any more whether "pain - rheumatic" would be a modality or a description of pain.
- All *extensions* depend from the rubric "extending to" and are sorted alphabetically.
- All *localizations* are sorted alphabetically¹⁵.

The sorting order of symptoms therefore is:

- sides
- times (in chronological order)
- modalities and descriptions of pain (one alphabet)
- extensions (all subrubrics of "extending to")
- localizations (alphabetical)

In addition, from this Synthesis version onwards, the sorting order on all levels is now the same. You may not have been aware but in Kent's repertory, in Synthesis 8 and previous versions, level 2¹⁶ was the exception to whatever rules were used elsewhere. In most chapters, the sorting order on that level was: sides / times / the rest of the symptoms¹⁷. In Synthesis 9.1, if you look for a localization at level 2, you will need to look at the end of the chapter, just as for any other level of symptom (where you were doing so already).

This is important if you look for generalized b-bg localization rubrics, such as "ABDOMEN - SOLAR PLEXUS; complaints of". Also some known Kentian rubrics, incoherently sorted, have now been moved applying only this one scheme: "PERSPIRATION - SINGLE parts"; "FEVER - COVERED PARTS"; "CHILL - SIDE not lain on"; etc.

4. NEW CONCEPTS

Concepts are a fabulous tool to more easily find symptoms in Synthesis. Four new concept chapters bring thousands of new concepts and a greater ability to find physical, mental, pediatric and latent psora symptoms.

Up to this point concepts were mostly focused on mind symptoms. The work of Dorin Dragos (Rumania) accomplishes this in a wonderful way for the physical symptoms. It is based on Roger **Morrison's DeskTop Companion**, with his kind permission. Roger initially divided the main complaints of the local chapters in the repertory into several categories. Example: headache related to weather, to cold air, to emotions, etc.

¹⁵ In Synthesis 8, all localizations were already sorted alphabetically, except for EXTREMITIES (which remained anatomically sorted). In Synthesis 9.1 we make no exception for EXTREMITIES.

¹⁶ Level 2 is the level of pain, as in "HEAD - PAIN".

¹⁷ To mention one exception most of us were used to: *sides* are in the beginning of the chapter, except in Generals, where it is in the middle of the alphabet. Were you aware of this? Now in Synthesis 9.1 it is in the beginning, as in all other places.

Dorin has taken this work a step further by adding numerous symptoms of Synthesis to all these categories. This allows you to find all the symptoms where cold air affects headaches in one easy step. In this instance, as in many other, there are many more symptoms for this category than the known rubric "head - pain - cold air agg."

There are about 1,000 new concepts to choose from.

Dorin Dragos also divided the symptoms of the mind into several practical categories. In order to do so, he used the **classification of mental symptoms** of Roget's Thesaurus of English Words and Phrases (new edition prepared by Betty Kirkpatrick MA, Penguin Books Ltd, London, 1999).

One example: "thinking" is divided into three possible disturbances: increased, decreased, and difficult thinking. For each category the repertory offers several precise symptoms, which are now easy to find.

There are about 200 new concepts to choose from.

Roberto Petrucci (Italy), listed more than **2,900 children's symptoms** in meaningful categories. This includes groups such as "dentition", "infectious diseases" and "development". Other concepts come straight out of the practice of Roberto and make many unknown repertory symptoms easily visible: "attitude towards animals", "attitude towards family", "observations during the night", "non-verbal symptoms - observed by the parents", etc.

Hahnemann drew our attention to the symptoms of **Latent Psora** in his "Chronic Disease". Isidre Lara (Spain) has collected these symptoms for each chapter so that they are an easy reference during the consultation.

5. NEW FAMILIES REPERTORY 2.1

Concepts are in fact a repertory working in the background of the Synthesis software version. There is still another source of information, working in the background: the Families repertory¹⁸.

This needs to be addressed because there is a rapidly growing interest among homeopaths to investigate the concordances between remedies bearing relationship to one another. This may be by way of taxonomic classification, chemical composition, source, or other forms of presumed resemblance.

In order to meet that interest, Radar 9 integrates this Families repertory with several new and improved functions for use in case analysis.

In the context of this Synthesis foreword we will focus on the data.

The previous version of the Families repertory has been thoroughly upgraded by about two year's work by Will Taylor (USA).

¹⁸ The functioning of these concepts and families repertories is most relevant for the software version of Synthesis.

The Families 2.1 repertory now offers a choice of more than 4,000 families.

The Kingdoms (minerals, plants and animals) are divided into 455 families and the Periodic Table contains 175 different families. For plants, they offer the three main classification systems: Cronquist, Dahlgren and Uppsala (Angiosperm Phylogeny Group).

Other families include: Bönninghausen Concordances¹⁹, Bowel Nosode related remedies, Boyd's Groups of remedies, Dorsci's Diathesis and Notions, families according to the five elements, Miasms, Nosodes, related remedies (more than 1,800 categories), families of state of matter and Teste's groups of remedies.

In addition there is a "Preferences" chapter where the user can create their own families.

These figures do not indicate all the effort Will made, with the help of different other specialists²⁰, to assure that some obsolete homeopathic remedy names were correctly interpreted. Synthesis 9 has the most complete and accurate homeopathic remedy family information so far available!

6. THE NEW INFORMATION

Synthesis 9 comes with even more new information.

- All the information from the Introduction and the Mind sections of all the remedies in **Boericke's Materia Medica** (br1) has been integrated (14,717 additions).
- New clinical information from André **Saine** (Canada) has been added to Synthesis 9 (more than 3,200 additions).
- More than 10,600 additions have been made on the basis of the popular book "Clinical Observation of Children's Remedies" by Farokh **Master** (India).
- The **major new remedies** in Synthesis 9.0 are: Argemone pleicantha (Todd Rowe, USA); Bitis arietans (Craig Wright, South Africa); Brosimum gaudichaudae (Mateus Marim, Brazil), Chironex fleckeri - box jellyfish (Alastair Gray, Australia), Bungarus fasciatus (Master, India), Coca cola (Rajan Sankaran, India), Cypraea eglantina (Anne Schadde, Germany), Desoxyribonucleic acidum - DNA (Phillip Robbins), Dioxinum (Philip Robbins, Australia), Ficus macrophylla (Alastair Gray, Australia), Gardenia jasminoides (Regina Vale, Brazil), Hippocampus kuda - seahorse (Susan Sonz et al., USA), Lapis lazuli (Anne Schadde, Germany), Lavendula angustifolia (Clayton Collyer and Jackie Davis,

¹⁹ Based on the Therapeutic Pocket Book (b2).

²⁰ Vilma Bharatan (Department of Botany, The Natural History Museum, London, England), Bernhard Bloesy (Germany), Michael Bonnet (England), Mitch Fleisher (USA), Caroline Vandeschoor (Homeoden-Heel, Belgium), Emiel Van Galen (Medicines Evaluations Board, Ministry of Health, Den Haag, Netherlands) and Prof. Walter Verraes (Department of Biology, University of Gent, Belgium)

UK), *Melaleuca alternifolia* - tea tree (Alastair Gray, Australia), *Musca domestica* - house fly (Susan Sonz and Robert Stewart, USA), *Neptunium muriaticum* (Didier Lustig and Jacques Ray, France), Ozone (Anne Schadde, Germany), Pertussis vaccine (Prakash Vakil, India), *Phascolarctos cinereus* - Australian Koala secretion (Philip Robbins, Australia), *Pycnoporus sanguineus* - a South-African fungus (Catherine Morris, South Africa), *Saccharum album* (Salvador Gamarra, Brazil) and Tempesta - storm (Mary English, UK).

- Remedies described in Julian's "Materia Medica of the **Nosodes** (j12)" have been integrated such as: Colibacillinum, Diphthero-tetano-typho-paratyphoidinum, Diphtherotoxinum, Eberthinum, Enterococcinum, Flavus, Gonotoxinum, Malaria nosode, Malandrinum, Morbillinum, Oscilloccinum, Osteo-arthriticum, Ourlianum, Parathyreoidinum, Pertussinum, Pneumococcinum, Serum anti colibacillinum, Streptococcinum, Toxoplasma gondii, Tuberculinum avis, Tuberculinum denys, Tuberculinum marmoreck, Tuberculinum residuum Koch, Vaccin atténué bilié, Vaccinum, Yersinium, etc.
- The information on **magnets** introduced by Bönninghausen, but kept out of the Repertory by Kent, has been added again - Magnetis polus arcticus, Magnetis polus australis and Magnetis poli ambo.
- There are also remedies whose information has increased substantially. 197 remedies contain more than **50% extra information** as compared to Synthesis 8.1V. Most remedies are expanded on the basis of different author references. The most important ones are: Adrenalinum, Aqua marina, Azadirachta indica, Bacillinum, Cassia sophera, Cina, Diosma lincaris, Gettysburg aqua, Heloderma, Manganum aceticum, Metylenum coeruleum, Natrium salicylicum, Ornithogalum umbellatum, Piper nigrum, Proteus, Rosmarinus officinalis (Bernard Long and P Cayrel), Strophantus sarmentosus (Stephenson), Strychninum phosphoricum, Sulfonalum, Ulmus campestris, Vanadium metallicum, Viola tricolor, and Xanthium spinosum.

While our core team was streamlining and restructuring Synthesis 9.0, some other collaborators continued adding new information. As a result Synthesis 9.1 comes with some additional new information as compared to Synthesis 9.0:

- The major new remedies in Synthesis 9.1 (so not yet existing in Synthesis 9.0) are: **Ancistrodon piscivorus** (Michael Thompson, Ireland); **Bellis perennis spagyricus** (Louise Deacon and Alan Ribot-Smith, England); **Bothrops atrox** (Michael Thompson); **Chlamydia trachomatis** (Richard Boocock et al., England); **Heroinum** (Janet Snowdon, England); **Loxosceles laeta** (Michael Bonnet, England); **Lignum naufragium helvetiae** (Mary English, England); **Oxyuranus scutellatus** - taipan snake (Paul Masci and Philip Kendall, USA); **Petroleum raffinatum** (Nandita Shah, India); **Spectrum** (Gill Dransfield, England); **Taosca aqua** (Anne Irwin, Ireland); **Thallium** (Jeremy Sherr, England) and **Threskiornis aethiopica** - the holy ibis (Elisabeth Schulz, Germany).

?? 161 remedies contain more than **50 % extra information** as compared to Synthesis 9.0. The most important ones are: Aesculus glabra, Bothrops lanceolatus, Calcarea hypophosphorosa, Dulcamara*, Ferrum aceticum, Glycerinum, Guaco, Indolum, Kalium sulphuricum*, Lappa arctium, Latrodectus mactans, Mentholum, Mercurius praecipitatus ruber, Myrtus communis, Naphthalinum, Pilocarpinum, Plumbum aceticum, Polygonum hydropiperoides, Quassia amara, Radium bromatum, Ruta*, Sanguinarinum nitricum, Solidago, Spongia*, Stellaria media, Strophanthus hispidus, Triticum vulgare*, Vanilla aromatica*, Xerophyllum asphodeloides and Zincum valerianicum.

The remedies with an "*" now also contain extended proving information from Peter Friedrich, Germany.

7. THE PRINTED VERSION

This printed version is very similar to book version 8.1.

Although so much more information has been added, we were able to stick to the **one volume** concept for the repertory part.

Information per page has been condensed to the maximum now, as had been done before for the French Synthesis 8.1.

In addition, we kept the larger paper size of the English Synthesis 8.1 (larger than the French Synthesis 8.1 paper size). As a result the repertory part of this Synthesis 9.1 book counts "only" 2,090 pages²¹.

Therefore we could again include the catalogs of remedies and authors in the repertory volume.

The **Full Synthesis View** was printed, with the possibility to differentiate information. The remedies copied to the superrubrics are included in the printed version.

The footers indicate some of these elements:

- A 'down arrow' following a remedy indicates that this remedy is copied from a similar subrubric.
- A black dot following a remedy indicates that this remedy is added either because of a more recent or because of a lesser-known author. These remedies correspond to the difference between the Millennium View (progressive) and the Quantum View (conservative); this is to say that remedies followed by a dot indicate more progressive information. Many thanks to Gregory Pais (USA)²² who has gone through the author catalogue with the greatest care to differentiate these views.

²¹ The repertory part of the English Synthesis 8.1 counted 1,912 pages, the repertory part of the French Synthesis 8.1 counted 2,068 pages (condensed page content, but smaller paper size, and including a dictionary for each chapter).

²² For several years Gregory has been my ghost writer. If you understand my English, it is with his help – thanks Gregory!

- The black dot should not be confused with the asterisk, which, as before, follows the remedy if more authors confirm its presence in the rubric.
- The more hypothetical remedies, if not confirmed by other authors, are now in a second alphabetical order, at the end of the rubric and surrounded by square brackets. This is an idea which we first implemented in the French Synthesis 8.1 and which was more useful than mixing them into one alphabetical order, as was done in English Synthesis 8.1.
- As a result, remedies without brackets and without a dot are the more classical ones.
- The descriptions and modalities are now contained within one alphabetical order. So the differentiation by symbols at the first modality and then at the first description is not needed any more.

The most important innovation of the printed version 9.1 is that we decided to make the information, normally reserved for the software users, available with the book. It is presented on a CD and compiled into **two additional volumes**.

The former Blueprint is now called the "*Textbook of Repertory Language*". It contains the following elements:

- The rules of Repertory Language Formatting – as before, but updated.
- Explanations about the integration of Bönninghausen, Boger and the separate repertory information.
- Interesting explanations of key symptoms (symptom notes).
- Index of important changes and corrections – as before, but updated.

The second additional volume is called "*Companion to Synthesis*". It contains all the information which may be helpful to find symptoms in Synthesis:

- An alphabetical listing of all concepts, with the main remedies per concept and the related symptoms per concept.
- The chapters of some often used concepts so that related information is in the same place.
- Index of words with page numbers of rubrics in Synthesis – as before, but updated.

More comprehensive information about these additional volumes can be found on the CD itself. In addition, the CD contains a demo version of the Radar 9 software.

8. THE FIGURES

The actual catalogue of **remedies** offers 4,497 standardized remedy names and abbreviations, and Synthesis 9.1 describes 2,373 of them²³.

The actual catalogue of **authors** describes 3,827 bibliographical references and Synthesis 9.1 uses 886 of them²⁴.

²³ Synthesis 9.0 describes 2,310 remedies. Synthesis 8.1 described 2,277 remedies and its catalogue offered 4,200 remedy names.

In the author catalogue there is an important change: the **language of the source** is now indicated. This is done by adding two letters behind the author abbreviation, e.g. *b2.de*. This indicates that we based ourselves on the German edition to make additions of *b2* (Therapeutisches Taschenbuch) and not on the English version.

The letters to abbreviate a language are the ones of ISO 639²⁵. If no letter follows, the book used is in English. These letters do not indicate that the original source is in that language: the original book may be written in English or in German.

This improvement allows increased precision. If someone makes additions based on the English translation of Hahnemann's *Materia Medica Pura*, he should use "h1". If based on the German version: "h1.de". This will permit us to assign a different confidence level to these two "different" authors.

The number of annotated corrections (**xxx**) has increased to 707²⁶.

Synthesis 9.1 has 1,066,987 **remedy occurrences**²⁷ and 1,773,453 **author occurrences**²⁸.

Speaking about quantity we have to remind you that this version of Synthesis now includes an enormous amount of source information as well. This is why the number of megabytes has exploded from 47.3 Mb (version 8.1V) to 205.4 Mb (Synthesis 9.1).

The information in Synthesis 9.1 has not been duplicated, except for a limited copying of remedies as described above. To your skill I therefore entrust what is probably the most complete and accurate repertory ever.

Dr. Frederik Schroyens
Gent, June 4, 2004²⁹

²⁴ Synthesis 9.0 uses 805 bibliographical references. Synthesis 8.1 used 655 bibliographical references and its catalogue described 3,031 bibliographical references.

²⁵ The most often used languages are Dutch: nl; French: fr; German: de; Italian: it; Portuguese: pt and Spanish: es.

²⁶ Synthesis 8.1 had 620 xxx references.

²⁷ Synthesis 8.1 had 760,000 remedy occurrences and Synthesis 9.0 has 926,000.

²⁸ Synthesis 8.1 had 1,074,000 author occurrences and Synthesis 9.0 has 1,491,000.

²⁹ June 4, 2004 was the last day that we worked on the content of Synthesis 9.1, until the very late hours. This foreword was written later, in Elios, Greece, after I gave the "First Seminar Ever With Synthesis 9.1" on Alonissos, Greece. The sunny seafront horizons and the scent of pine trees have been a true inspiration. As for the music, this version of Synthesis has been accompanied by the chanting of Lama Gyourme, I guess because, after all, it's a monk's work.

