

MODEL QP 1

QP Code:

M.D. (HOMOEOPATHY) PART-I EXAMINATION

Paper II- Fundamentals of Clinical Medicine to Organon of Medicine

Specialty: Organon of Medicine and Homoeopathic Philosophy

Time: 3 hrs

Max Marks:100

(Answer all questions)

Problem-Based Question (10+10=20)

CaseScenario:

Dr. A, a homoeopathic physician with over 10 years of experience, encounters a patient suffering from chronic migraines. The patient, frustrated with previous unsuccessful homoeopathic treatments, demands immediate relief. Under pressure, Dr. A prescribes a combination of multiple remedies instead of following the principle of individualization and symptom totality.

Subsequently, Dr. A decides to publish a case report on this treatment. To enhance the perceived success of his approach, he exaggerates the patient's improvement and alters some details before submitting the report to a reputed homoeopathic journal.

Additionally, during the initial consultation, the patient had disclosed significant emotional trauma. However, Dr. A, being inattentive, failed to record these mental symptoms properly. Later, upon the patient's return, he realizes that these symptoms were crucial for accurate remedy selection.

Questions:

- a. Critically evaluate Dr. A's ethical and professional violations in both clinical practice and research, referencing the Organon of Medicine (Aphorisms 1, 5, 6, 83-104, 270-272, 285). (10 marks)
- b. How do polypharmacy, inaccurate case documentation, and data falsification undermine the scientific credibility of homoeopathy? Discuss the significance of rigorous case-taking, ethical clinical practice, and truthful reporting in the advancement of evidence-based homoeopathy. (10 marks)

Long answer questions

4×10=40

2. Describe the principles of **Evidence-Based Medicine (EBM)** in relation to **Hahnemann's Organon of Medicine**. Explain the merits and demerits of integrating EBM with the philosophical and methodological foundations of homeopathy. Support your answer with relevant examples and references

3. A 40-year-old male presents with chronic lower back pain for the past six months. The pain is worse in the morning, improves with movement, and is associated with stiffness. He has a sedentary lifestyle and a history of recurrent gastric issues and mental stress. Examination reveals tenderness in the lumbar region and restricted spinal mobility. X-rays show mild lumbar spondylosis, and blood tests indicate elevated inflammatory markers.

a. Explain the pathophysiology of chronic backache and its progression. Classify the symptoms based on Hahnemannian principles (Fundamental, Accessory, Complete, Incomplete).

b. Discuss the miasmatic classification of chronic back pain and its evolution.

4. A 55-year-old male presents with cold, clammy skin, rapid pulse, low blood pressure, and altered sensorium following severe blood loss.

a. Discuss the possible etiopathogenesis of shock from both a clinical medicine and homoeopathic perspective.

b. List five key clinical signs that help differentiate different types of shock (hypovolemic, cardiogenic, septic, neurogenic, and anaphylactic).

5. A 35-year-old female presents with recurrent episodes of nausea, vomiting, and bloating after meals, associated with occasional heartburn.

a. What laboratory and imaging investigations would you suggest to confirm the underlying cause of nausea, vomiting, and indigestion?

b. Hahnemannian Classification

Classify nausea, vomiting, and indigestion based on Hahnemannian classification of diseases

Short answer questions

8×5=40

6. Define malnutrition and classify it according to Hahnemannian principles.

7. Describe the different stages of fever from a homoeopathic perspective.?

8. Discuss the scope and limitations of homoeopathic management in urinary incontinence.

9. List the common causes of erectile dysfunction from a clinical and homoeopathic perspective.

10. Explain the Hahnemannian classification of itching disorders.

11. Explain how striking, singular, uncommon, and peculiar symptoms guide remedy selection in liver diseases.

12. Explain the miasmatic classification of hormonal and immunological disorders (Psoric, Sycotic, Syphilitic).

13. Explain how imaging findings (X-ray, CT, MRI) can influence the selection of remedies in homoeopathic practice.

MODEL QP 3

QP Code:

M.D. (HOMOEOPATHY) PART-I EXAMINATION
Paper II- Fundamentals of Clinical medicine to organon of medicine
Specialty: Organon of Medicine and Homoeopathic Philosophy

Time: 3 hrs

Max Marks:100

(Answer all questions)

Problem based questions

(5+5+5+5=20)

1. *A 28-year-old female presents with progressive weight loss, fatigue, hair fall, and brittle nails over the past six months. She follows a restrictive diet due to body image concerns and often skips meals. She experiences dizziness, mood swings, and irregular menstrual cycles. Laboratory investigations reveal low hemoglobin (9 g/dL), low serum iron, and vitamin B12 deficiency. She has a history of anxiety and obsessive tendencies toward calorie counting.*
 - *Discuss the role of the psycho-neuro-endocrine axis in the genesis of nutritional deficiencies.*
 - *Identify predisposition and susceptibility factors that contribute to malnutrition and eating disorders.*
 - *Classify malnutrition and nutritional deficiencies according to Hahnemannian principles (Psora, Syphilis, Sycosis).*
 - *Discuss the scope of homoeopathy alone in the management of malnutrition and eating disorders.*

Long answer questions

2. A patient with a terminal illness approaches a homoeopath for treatment, believing homoeopathy alone can cure them. The homoeopath knows the prognosis is poor but does not want to discourage the patient.
 - a. What ethical principles should guide the homoeopath in this case?
 - b. How can the practitioner balance realistic expectations with compassionate care?
3. A 72-year-old female presents with a gradual decline in memory, disorientation, and difficulty in performing activities of daily living. Her family reports that she frequently forgets appointments, has trouble recognizing familiar faces, and occasionally becomes confused about time and place. Medical history reveals hypertension, diabetes mellitus, and a history of depression.

a.Explain the pathophysiology of dementia, particularly Alzheimer's disease, including its neurological and biochemical basis.

b.Classify the symptoms of dementia based on Hahnemannian principles (Fundamental, Accessory, Complete, Incomplete).

4.A 60-year-old female presents with bilateral pitting oedema of the lower limbs, breathlessness, and fatigue.

- a. Discuss the possible pathogenesis of oedema from both a clinical medicine and homoeopathic perspective.
- b. List five key clinical signs that help differentiate between cardiac, renal, hepatic, and inflammatory oedema.

5.A 50-year-old male presents with yellowish discoloration of the skin and sclera, dark urine, clay-colored stools, and fatigue.

- a. Classify jaundice based on Hahnemannian classification of diseases.
- b. Outline a comprehensive homoeopathic management plan for a case of jaundice, including medicinal and auxiliary measures.

Short answer questions

6.*Explain the role of diet and nutritional supplements in conjunction with homoeopathic treatment for mineral deficiencies*

7.Discuss the scope and limitations of homoeopathic management in anaemia.

8.Describe the predisposing factors for urinary abnormalities from a homoeopathic perspective.

9.Discuss the scope and limitations of homoeopathic management in infertility.

10.Explain the Hahnemannian classification of skin eruptions.

11.How can LFT findings aid in selecting the appropriate homoeopathic remedy, potency, and repetition of doses?

12.How can dietary and regimen modifications be planned based on hormonal assay findings?

13.Discuss the role of USG findings in homoeopathic treatment planning for abdominal or pelvic disorders

