






# FACIAL ANALYSIS AND HOMEOPATHY

Fulfilling Hahnemann's legacy

Grant Bentley





# FACIAL ANALYSIS AND HOMEOPATHY



---

Fulfilling Hahnemann's Legacy

---

Grant Bentley



An imprint of  
**B. Jain Publishers (P) Ltd.**  
USA - EUROPE - INDIA



## **FACIAL ANALYSIS AND HOMEOPATHY**

First Asian Edition: 2011  
First Impression

First published 2003/2006 in Australia by Grant Bentley

**For Sale within Asia and Africa (Except Japan)**

All rights reserved. No part of this book may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording or by any information storage and retrieval system, without prior permission in writing from the publisher.

Copyright © Grant Bentley

*Published by Kuldeep Jain for*



*An imprint of*

**B. JAIN PUBLISHERS (P) LTD.**

1921/10, Chuna Mandi, Paharganj, New Delhi 110 055 (INDIA)

*Tel.:* 91-11-4567-1000

*Fax:* 91-11-4567 1010 • *Email:* info@bjain.com

*Website:* [www.bjain.com](http://www.bjain.com)

*Printed in India by*

**J.J. OFFSET PRINTERS**

522, FIE, Patpar Ganj, Delhi - 110 092

*Tel.:* 91-11-2216 9633, 2215 6128

ISBN: 978-81-319-1826-5





# INTRODUCTION

*Facial Analysis and Homeopathy* is two books joined together and forms the underpinning development and knowledge that is known as Homeopathic Facial Analysis (HFA). The two books were published in the last decade

*Appearance and Circumstance* – 2003

Homeopathic Facial Analysis – 2006

Some upgrades and minor changes have been incorporated into this book but essentially it represents the majority of work from *Appearance and Circumstance* and *Homeopathic Facial Analysis*. My third book *Soul & Survival* – 2008 is a continuation of the HFA clinical work and details my interpretation of our defence mechanism (miasm) and how it is linked to inherited memory.

*Facial Analysis and Homeopathy* details the development of HFA from its humble beginnings as an attempt to both interpret but more importantly clinically use the concept of a miasm as a working diagnostic. HFA has surpassed my greatest imaginations as a clinical tool and is the foundation of not only my homeopathic practice but that of a growing number of HFA practitioners worldwide.

HFA has given me what I could only dream of as a new student and then practitioner and teacher – a measurable objective way of using the foundations of Hahnemann's miasm theory. Although I have developed and reworked his original disease theory I am indebted to the genius of this man who laid





out every brick of the foundation to allow me to build the HFA system.

The cases for each miasmatic group are presented in their original form but the graph software has been upgraded to RadarOpus – the rubrics are the same as originally used.

The acknowledgements, dedications and introductions remain in their original form as written in both 2003 and 2006.

**Grant Bentley – November 2011**





A scorpion wanted to cross a river so he asked a frog if he would carry him.

"No," replied the frog, "for if I let you on my back you might sting me, and the sting of a scorpion means certain death."

"Now where," asked the scorpion, "is the logic in that? For if I were to sting you, I would drown."

Convinced, the frog allowed the scorpion on his back. But then, in the middle of the river, the frog suddenly felt a terrible pain and realised that the scorpion had stung him.

"Why did you sting me?" asked the frog. "For now we will both surely die?" "I know," replied the scorpion, "but frog, I am a scorpion. It's my nature."

Proverb





# ACKNOWLEDGEMENTS

## (Appearance and Circumstance 2003)

I would like to thank all my patients. Every Homoeopath understands that the clinic is the real teacher. No new information can be gained without experimentation and so with much appreciation I say thank you for your trust and acceptance.

To my students, many of whom have been with me as this project developed, for your endurance to put up with all the confusion and for allowing me to use you as a sounding board for ideas, – thanks to you all.

To everyone that was willing to help by allowing their photographs to be displayed, thank you so much.

I would also like to thank Kent Homeopathic Associates; the research for this book could never have been accomplished so quickly if it were not for their software. Also thanks to Greg White for his help and technical advice.

To Allan Cornwell thanks for your help in making this book become a reality.

To my mother Betty, for her understanding and help and to my father Keith who recently passed away. I would have loved you to see this.

To Jill and Noel for their help, interest and encouragement.

To my step children Katie, Sophie and Emma. Thanks for your help and understanding. Having to be quiet so often was difficult I know but it helped heaps. Thanks for your understanding and interest too.

To my children Lauren, Andrea, Sally and Jack a big thank





you for your love, support, enthusiasm and all your questions. I hope I can give to you as much as you have given me.

Finally to my partner Louise without whom this book would not exist. Your support has been boundless and your encouragement unending. You gave love, patience and understanding at times when a response of exhaustion or frustration would have been more appropriate. On a practical level you have contributed by always knowing the right questions to ask and your development of the triangle as a way to highlight the miasms has helped enormously. Your valuable contributions to the facial features such as the asymmetrical nature of blue to take just one example have become trustworthy guides. For taking on extra duties so I would be free to give the book my full attention, the list is endless! For these reasons and many more with all my love, respect and appreciation, I dedicate this book to you.







# DEDICATION

For Louise



# CONTENTS

## Appearance and Circumstance 2003

Introduction

Chapter 1      Methodology

Chapter 2      What is a miasm?

Chapter 3      Homeopathic genetics

Chapter 4      The various ways miasms are applied

Chapter 5      The single dominant miasm theory

Chapter 6      Pathology and the miasms

Chapter 7      The number of miasms

Chapter 8      The new miasms

Chapter 9      Further development of the existing miasms

Chapter 10      Colour coding the miasms

Chapter 11      Facial features as indicators to the miasms

Chapter 12      How to use the miasms in clinical practise

Chapter 13      Frequently asked questions

Chapter 14      Introduction to themes

Chapter 15      Introduction to photos

Chapter 16      Miasmatic themes – Yellow

Chapter 17      Miasmatic themes – Red

Chapter 18      Miasmatic themes – Blue

Chapter 19      Miasmatic themes – Orange

Chapter 20      Miasmatic themes – Purple

Chapter 21      Miasmatic themes – Green

Chapter 22      Miasmatic themes – Brown

Bibliography





# INTRODUCTION

## (Appearance and Circumstance 2003)

A book is the culmination of a thousand different ideas and theories. Often they begin with nothing more than a faint flicker, a “what if” or a throwaway line. Most of the time, very little comes from these postulations, but occasionally one idea won’t go away it keeps building and evolving until it takes off like a wildfire and develops a life of its own; this book is the result of one of these ideas.

I would love to you tell a tale of development like that of Newton and the apple tree or Galileo and the pendulum, a precise moment of time when an idea was conceived. Perhaps a case of serendipity? A chance occurrence where one’s perspective is changed forever. But such a story would be untrue, for the development of this miasmatic model had humble origins. The truth is, I am uncertain as to how it all started - but it did and now I find the way I practice Homoeopathy has changed, and the world has become a far more interesting, yet at the same time understandable place in which to live. The development of this miasmatic model has been the single greatest learning tool in my understanding of Homoeopathy and life in general. What started as an attempt at understanding a few more remedies has become a way of life, a guiding philosophy that helps me understand why things happen and to whom they are most likely to occur.

In the past I knew the Miasms were important only because Hahnemann had said so, however for much of the time they





were seldom applied in practice. Miasms played little part in the process of case taking and even less in remedy selection. Patients with distinctly Syphilitic backgrounds were receiving doses of Nat Mur for their depression or perhaps Sulphur because they looked unkempt or were philosophical. Others were being administered Aurum because of a sense of responsibility even though their spirit was as light as helium. I look back in horror at many of my past prescriptions, cases that I can now see clearly then screaming out their miasm but falling on ears as deaf as a post. Today as my results show, I can tell a different story, one of vastly improved accuracy and professional confidence, a story where as a practitioner I am in control of the case from start to finish. I don't always get it right of course, but my chances have significantly improved and this is solely due to miasmatic awareness and categorisation method.

As a lecturer of Classical Homoeopathy, I am in a privileged position. Not only am I constantly reviewing *Materia Medica*, but I frequently re-read texts like the *Organon*, Kent's Lectures and other traditional works. I know well Hahnemann's story, his twelve years of labour formulating the doctrine of the Miasms. At its conclusion, Hahnemann believed he had the answer to what lies behind all chronic illness, a working model that, in his opinion explained the balancing act between health and illness. Here, thought Hahnemann, was the answer to that most allusive of medical questions; "why do we get sick?"

Things happen when they are meant to. Year after year I read the *Organon* in class with students when one day, the bell rang. To understand the miasms is to understand what sickness is, as miasms and disease are one and the same thing, there is only one true sickness in any individual's life and that is the miasm that dominates them. Everything else is simply how that miasm





manifests; this starting point highlighted three major questions;

1. What is a miasm?
2. How do I recognise it?
3. What do I do with it?

The development of this model is based on my attempt to answer these three questions. These questions have consumed me for the last five years, an obsession that has reached at times almost maniacal proportions. There were times when I wished I could drop the whole idea, and still others where I would become so thoroughly confused I was convinced that the model was either fundamentally flawed or just plain wrong. Then something new would fall into place and a new piece of the puzzle would unfold to show that the information was accurate, but incomplete. Enthusiasm would rekindle, awe would follow and the whole process would start again. Its beginnings were modest, no thoughts of lectures, much less a book, the drive was an effort to be a better Homoeopath and to understand, as much as one individual can, this system that we all admire and love so much.

There are always fears and reservations when venturing into new ground, and even more about presenting new ideas publicly, but the remarkable increase in the precision of my constitutional prescriptions provides a confidence that allows me to do so. Nonetheless there are some uncertainties I would like to address. These include:

1. **Miasmatic themes.** There was some hesitation as to how much detail a miasmatic theme should contain. By design a Homoeopathic theme is an attempt to standardise individual characteristics for easier





recognition. But it sometimes can reduce temperament to a cliché profile. A theme is a premise, a foundation on which other facts are built. The problem with personality profiles as a foundation is they are not concrete, they are just one demonstration of an assortment of possibilities and as a consequence, themes can lead you astray if you view them as set rather than flexible. Themes may shift and yield, like the water in our remedies, and as a consequence take on and mould itself to an influencing character. For example, Arsenicum is a remedy of many varied keynotes; fastidiousness being only one of them, however to expect to see this trait in every Arsenicum case is just as naive as expecting fastidiousness to always be associated as neatness. This will lead to as many failures as successes. At the same time many wonderful cures have only been made possible by drug pictures such as “Mr. Arsenicum”. In much the same way clinical cases have both exposed and confirmed distinct miasmatic issues. These issues often belong not solely, but certainly disproportionately, to a particular miasmatic group. These themes or issues are best understood if viewed as drives or energies rather than caricatures. This energy will influence decision making and can often be most accurately seen via events and patterns continually recurring throughout an individual’s lifetime. Rather than portraits, miasmatic themes symbolize a power or quality that lies behind the conditions and actions that take place in accordance to the laws of attraction and repulsion. They are magnets that draw equivalent people, happenings and dramas.

2. **Varying opinions.** There are a number of ways miasms





can be interpreted many of which are different to what I am submitting in this book, but that is to be expected, after all, for a method to be new, it must differ from that which came before it. However no creation is ever entirely original and this book is no exception, it builds upon foundations laid down long before I took my first breath. I will show, by highlighting passages scattered throughout the Homoeopathic classics that many other authors were arriving at the same conclusions in reference to miasmatic understanding. One of the main principles in the book is the theory that there is a single dominant miasm within every individual. This will unfortunately place the book in a position of disagreement with other authors whose miasmatic understanding varies from this, but differing opinions are a healthy sign of a thinking profession and should be viewed as such.

3. **References outside of Homoeopathy.** I have drawn many thoughts and opinions for the extension of this miasmatic model from areas outside of Homoeopathy. These areas include Christianity, Buddhism, the Kabbalah, traditional shamanism, Rosicrucian mysticism, psychology and quantum physics. Aspects of all of these have helped formulate a comprehensive theoretical model that defines a miasm.
4. **Facial feature recognition.** It needs to be clarified that when I talk of reading a face or understanding facial features as miasmatic indicators, I am not referring to either physiognomy or Siang mien. Both of these arts recognise individual facial features as external guides to internal character traits. Therefore both systems claim a degree of emotional diagnosis that is not undertaken





here. I have read many of their texts and have become acquainted with both systems during the research of this book, but in both cases I have found them inappropriate for our specialised Homoeopathic needs. It soon became apparent that the best way to develop a model that specifically catered for the needs of the Homoeopathic profession was to start the whole model from scratch. Therefore any crossover information is purely coincidental. Miasmatic prescribing through facial feature recognition gives a practitioner firm footing and confidence to place their patients into a miasmatic group, it does not define character.

With all these points in mind, I present to you my understanding of the miasms.





# ACKNOWLEDGEMENTS

## (Homeopathic Facial Analysis 2006)

To all who have been involved in this project and to those who support facial analysis, I wish to extend my deepest and most sincere heartfelt thanks.

To practitioners both local and international prepared to try facial analysis. I appreciate your enthusiasm and willingness to inform me of your successes, it has been a great encouragement and I am thrilled it has such supporters.

To my patients and students, especially those who once again answered the call to contribute by allowing me to use their features so others can learn.

To all my children for their cooperation and contribution to this book, thanks for your patience, your interest and your belief in facial analysis, your support is invaluable and I love you all dearly.

To my mother and extended family, for allowing their faces to be scrutinized, analysed and publicized just to help us out, thanks to you all.

To Allan for his publishing expertise and help once again.

To my homoeopathic teacher Denise, who was overlooked in the acknowledgements in *Appearance and Circumstance*.

To Heather Betts who has been nothing short of a Godsend. Heather's talent and commitment is responsible for all the illustrations in this book. Without Heather, this book would be nothing more than a good idea. Many people, patients and practitioners alike will benefit due to effort and skill.





Finally, to my wife Louise, the third party in the sleepless trio that put this book together. Her contribution to the book as well as to facial analysis as a system has been extensive. Facial analysis as a system would not exist if it was not for Louise and that is the plain and simple truth. Her contributions include the addition of certain facial features, help in the development of its theory and formulating an evaluation process to categorize remedies. Louise is responsible for many of the methods and remedies other practitioners using facial analysis put into practice every day. It may be my name on the cover but it is not a one-man show and Louise has achieved all this while running a family, a clinic and a college. It is my sincere hope that she finds pride in this achievement. From our family and from me we love you.





# CONTENTS

## Homeopathic Facial Analysis 2006

- Introduction
- Appearance and Circumstance
- How to read a face
- Charting features
- Taking photos
- Children
- Features
- Colour group examples
- Chart of features
- Features update 2006
- Contact us
- Hairlines
- Foreheads
- Bridge of nose
- Eyes
- Nose
- Cheek
- Mouth
- Lips
- Smile
- Teeth
- Chin
- Ears
- Lines
- Skin
- Asymmetry



# INTRODUCTION

## (Homeopathic Facial Analysis 2006)

It has been four years since *Appearance and Circumstance* was written and the system of facial analysis continues to evolve. Clearer facial features, better case taking and repertorising techniques, as well as a comprehensive understanding of homeopathic philosophy has shaped a complete picture of what miasms are and how they work.

With hindsight, *Appearance and Circumstance* is a better introductory book into the theory of facial analysis and miasms than it is an actual training manual. This second book is dedicated entirely to practical facial analysis, in an attempt to remedy any of the shortfalls found in *Appearance and Circumstance*.

One of the major challenges of facial analysis is defining normal limits. When does a nose become wide or a bridge indented? What does a cleft in the chin actually mean? While many have found the verbal definitions and photos in *Appearance and Circumstance* to be adequate, others require more visual parameters. In this book, every effort has been made to ensure each facial feature is as clearly defined as possible, making the system easier to use. Once mastered facial analysis offers a solid foundation for prescribing, and rewards homoeopaths prepared to give it time and practice with a consistency of success generally reserved to highly experienced practitioners.

Facial analysis is based on a perfect quality and knowledge of nature and while it still requires expertise and finesse, it does not rely on subjective interpretation and that is its greatest





strength. The weakness of subjective analysis is due to the fact that the range of human thought and emotion is limitless and beyond our verbal capacity to express it. Put simply, there are more experiences and feelings than there are words to describe them, therefore we have to squeeze experience into the barriers imposed by vocabulary.

Sadness for example is felt in numerous forms and degrees, but it is still called sadness by those who endure it. We often choose sadness as a word to best describe how we feel because there are so few available alternatives.

Words convey thoughts and emotions from one mind to another; they attempt to make others understand what we are thinking and feeling, words try to make another person understand what its like to be us. However, for language to be effective it must be basic, because only the basic can be understood by all. Language that inhibits communication is useless if the person we intend the words for fail to recognize them. For words to be useful, the thoughts or feelings they represent must be easily understood. Therefore, the most effective words to express emotions are those most commonly understood. Our problem is that common does not individualize. Therefore, we can never fully understand another persons experience via language because of the need to sacrifice the distinctive for the familiar. A system based entirely on subjective sensation and feeling walks a tight-rope. Boenninghausen recognized this over a century ago which is why he preferred generals over mentals, not because they are better per se, but because they are less subjective and therefore more reliable. Even Hahnemann, although he placed a great deal of emphasis on the mentals did so always in conjunction with the generals.





The law of similars is based on a faith in nature, follow her lead and things will fall into place, analyze without faith and you run the risk of intellectualizing yourself out of the natural and into a man-made theory based more on supposition than on fact. This was homeopathy's criticism of allopathy. Like the great homeopaths of old, our aim is to work with nature not to reinterpret it. Facial analysis is nature at work. Hahnemann understood that nature is all-knowing and that we are not. Hahnemann surrendered himself to nature and used signs and symptoms as a guide to health rather than an enemy to eradicate. By following nature's lead Hahnemann developed the most sophisticated medical system the world has ever known.

Homeopathy developed from what Hahnemann saw. He put speculation aside and used what existed as his guide to the truth. He knew that two similar diseases could not exist in the same body at the same time because nature told him so. He accepted it as fact and utilized it.

Homoeopathy proved itself in the acute diseases. Typhus, cholera, smallpox, and scarlet fever, all had their sting cut short thanks to Hahnemann. In chronic disease however, his approach needed to differ. Hahnemann acknowledged that he could treat acute disease successfully, but failed when it came to treating the predisposition to disease. We all know the story of his unflagging effort to find a solution to this problem as well as his steadfast belief in the correctness of the miasm theory and yet even now chronic disease continues to create uncertainty.

It would be fair to say that on an historical timeline homoeopathy reached its greatest height during the period when many homoeopathic doctors were using it for acute diseases and ailments. Its relatively recent demise is both fractured and





complicated and it is not just because the A.M.A declared war on us and didn't fight fair, that it far too simplistic. I am not saying that this was not a factor, as far as hurdles go, having the A.M.A against you is a 'big one' in anyone's language, but nothing is learned if we do not accept at least some of the responsibility.

As time progressed, homoeopathy's role has moved from the acute to the chronic especially for non-medical homoeopaths. The trouble is, without medical training the base line of diagnosis has disappeared. I understand that a homoeopath should never start with pathology yet at the same time 'genus epidemicus' was invaluable and consistently used.

Unfortunately, in chronic disease genus epidemicus does not apply and there is a good reason for this. Genus epidemicus is applicable in acute disease only because acute disease is more about the virus or bacteria and its impact on the individual than on the individual themselves. This is not the case with chronic disease because chronic disease is 'man-made' and therefore any viruses or bacteria that go along with the diagnosis do so as a consequence not as a cause. Chronic disease is about the person who has the disease - acute is a mixture of impact and resistance.

It is my belief that part of the reason homoeopathy is in its current depleted state is because chronic disease remains elusive and difficult to alleviate. Hahnemann knew the rules that had to be applied – work out the miasm according to psora, sycosis and syphilis then select the best remedy that fits both the totality of symptoms as well as the miasm, the rest should take care of itself. Yet Hahnemann's own records show that while he knew what to do in theory, the practical application of this theory remained troublesome.





Facial analysis overcomes the previous difficulties of chronic disease and brings homoeopathy into the position Hahnemann envisaged. I believe, facial analysis in chronic disease is the completion of Hahnemann's work.

'Nature always knows best' has always been homoeopathy's creed, facial analysis is an extension of this.







# PUBLISHER'S NOTE

Miasms remain a topic of controversy in homeopathy and on the majority of occasions views are different and varied. What is important for a theory or explanation is its practical application. As far as understanding miasms is concerned, the theory or method needs to have criteria which are less subjective, are quantifiable or measurable and therefore more reliable. The method of Homeopathic Facial Analysis (HFA) by Grant Bentley is very much on these lines. HFA is a research project of more than ten years, tested clinically worldwide and successful feedback has been received regarding its application.

What Grant says is that prescribing solely on personality types is a way which can be very successful at times and can lead to failures at times. The reason stated is very right that all people will not fit into the personality types at all times. People or remedies go through phases and they might not be in the phase you know that drug as. What is suggested is to prescribe on remedy criterion and miasm combined so the choice of medicine is reduced and it also checks the accuracy of the prescription at a certain level.

The intention of facial analysis is to give the practitioner a way to classify the patient into a miasmatic group and therefore the choice of remedy is reduced and accuracy of the prescriptions are increased. The steps to applying facial analysis are objective criteria and that is the greatest strength of this method.

We are happy to bring this work which has been very successful in the west and hope that it is used and applied by the practitioners in Asia and thus help in giving a newer understanding to miasms and their application. We are thankful to Grant and Louise for they agreed to bring this work to this part of the world through us and hope it's received with as much enthusiasm as we believe it deserves.

- Kuldeep Jain, CEO





# CONTENTS

Introduction	iii
Acknowledgements (Appearance and Circumstance 2003)	vi
Dedication	viii
Contents (Appearance and Circumstance 2003)	ix
Introduction (Appearance and Circumstance 2003)	x
Acknowledgements (Homeopathic Facial Analysis 2006)	xvi
Contents (Homeopathic Facial Analysis 2006)	xviii
Introduction (Homeopathic Facial Analysis 2006)	xix
Publisher's Note	xxiv

## PART 1 – MIASMS

Methodology	3
What is a Miasm?	17
Homoeopathic Genetics Miasmatic Inheritance	35
The Various Ways Miasms are Clinically Applied	41
1. Miasmatic "clearing"	42
2. The layers approach	43
3. Acquired miasmatic disease	43
4. Family history of an acquired miasmatic disease	44
5. Mismanaged or suppressed disease	44
6. Alpha and omega	45
7. The miasms as a state of stress reaction	46
8. The single dominant miasm	46
The Single Dominant Miasm Theory	49
Pathology and the Miasms	59





The Number of Miasms	67
The Development of the New Miasms	75
Further Development of the Existing Miasms	81
Colour Coding the Miasms	85
Facial Features as Indicators to a Miasm	93
How to Use the Miasms in Clinical Practice	99
FAQS	103

## PART 2 – MIASMATIC THEMES

Miasmatic Themes- Psora (Yellow)	121
• Work and business	122
• Laziness	125
• Intimacy and embarrassment	126
• The survivor	128
• Bragging and egotism	129
• Family and friends	129
• Getting on with it	130
• Ignorance	130
• Help and guidance	131
• Pessimism and hypochondria	132
• Recognition	133
• Yellow cases	133
• The generals of yellow	138
• Pathology	141
Miasmatic Themes- Sycosis (Red)	143
• Poor memory	143
• Dazed and confused	144
• Separate	145
• Altered states	146
• Wild	148
• Indifference	149
• Love, body image and sex appeal	149





• Moody and brooding	152
• Secretive and suspicious	153
• Space, time and other dimensions	154
• Intensity	155
• Red cases	155
• The generals of red	160
• Pathology	162
Miasmatic Themes- Syphilis (Blue)	163
• Depth	163
• Death and salvation	164
• Depression and happiness	165
• Insanity and mental instability	168
• Addictions and obsessional behaviour	170
• Drugs and alcohol	171
• Family and friends	172
• Childishness and naivety	173
• Special senses and sensitivity	174
• Blue cases	176
• The generals of blue	181
• Pathology	182
Miasmatic Themes- Syco-Psora (Orange)	183
• Inappropriate relationships	183
• Jealousy, deception and shame	185
• Once the romance is over	186
• Cheating	187
• Guilt and tragedy	187
• Loss	188
• Sympathy and charity	190
• Hysteria, quarrels and chaos	191
• Business	192
• Orange cases	194
• The generals of orange	203





• Pathology	205
Miasmatic Themes- Syco-Syphilis (Purple)	207
• Terror, torment and panic	208
• Suspicion, hatred and victimisation	209
• Haughtiness, contempt and arrogance	212
• Sex, perversity and communication	214
• Religion, spirituality and the supernatural	215
• Greed	216
• Childishness	218
• Violence and self-destructive behaviour	220
• Sweetness	221
• The generals of purple	229
• Pathology	230
Miasmatic Themes- Tubercular (Green)	231
• Fear, stress and escape	234
• Dissatisfaction and perfection	235
• Poor learning skills and feeling stupid	237
• Importance and recognition	239
• Respect and freedom	240
• The meaning of life	241
• Nothing for too long	242
• Pride and artistry	242
• Flirtation and stimulation	244
• Sensitivity and dependence	245
• Spiteful	246
• Summary	247
• Remedies	256
• The generals of green	257
Miasmatic Themes- Cancer (Brown)	259
• Fear, anticipation and the need for support	259
• Obsessive behaviour and attention to detail	260
• Enemies and paranoia	263



• Desire to self-nurture, purity and defilement	264
• The same mistakes	265
• Spirituality and the search for identity	266
• So perfect yet so destructive	267
• Suppression	269
• Brown cases	270
• The generals of brown	276
• Pathology	278

### **PART 3 – FACIAL FEATURES**

How to Interpret Facial Features	281
• Taking the photos	281
• Surgery/wigs/teeth	283
• Analysing the features	283
• Assessing the features	284
• Chart of features	287
• HFA remedy classification	288
How to Read a Face	289
• Categorising features	291
• Rubrics and facial analysis	293
• The practical aspect of facial analysis	294
• Themes	294
• Case taking	296
• Repertorising	297
• Results	298
Charting Features	301
Taking Photos	309
• Which camera	309
• What to tell the patient	309
• Taking the photos	310
• Five* essential photos	310
• Summary	313





xxx

## Facial Analysis and Homeopathy

• What doesn't show well in photos	314
• Taking photos – five correct images	315
• Taking photos – common mistakes	316
• About the photographs	319
Children	321
• Posing for photos	321
• Changing features	322
• Number of features	322
• Teeth	323
Hairlines	324
Foreheads	332
Bridge of nose	342
Eyes	346
Nose	366
Cheeks	374
Mouth	376
Lips	380
Smile	384
Teeth	388
Chin	396
Ears	415
Lines	416
Skin	425
Asymmetry	426
Yellow	428
Orange	430
Red	432
Purple	434
Blue	436
Green	438
Brown	440





Facial Analysis and Homeopathy

xxxi

Chart of features

442

Features update 2006

444

Samuel Hahnemann

446

Bibliography

447







## CHAPTER 19

# Miasmatic Themes - Tubercular (Green)

From looking at several copies of the portraits of Samuel Hahnemann it seems likely he belonged to this miasmatic group. The curved domed forehead of blue combined with the down-turned eyes of yellow. However his eyes are also quite deep set (blue), he had a small thin mouth (yellow) a deeply indented bridge of the nose (blue) as well as having the yellow bump in the nose often giving it a hooked curvature. All this is purely speculative of course and portraits vary considerably, nonetheless those facial structures are the most commonly reproduced features in the majority of his portraits.

Consider also the following quote with Hahnemann in mind.

*Green as tension therefore acts as a dam behind which the excitation of external stimuli builds up without being released, increasing the sense of pride, of self-controlled superiority over others, of power, of being in control of events, or at least of being able to manage and direct them. This damming-up and suppression of external stimuli lead to many forms and degrees of "control", not only in the sense of directed drives, but also as detailed accuracy in checking and verifying facts, as precise and accurate memory, as clarity of presentation, critical analysis and logical consistency –*





*all the way up to abstract formalism. This "green" behaviour can also find expression in a quest for better conditions, such as improved health, or a longer more useful life both for him and for others. In this case we have the reformer, bent on ameliorating conditions.*

Green has an arrogance that can only be matched by purple. Hahnemann had a self-assuredness that consistently placed him in positions of trouble. If Hahnemann was in fact green, this is hardly surprising, as no miasmatic group is more combative and downright contrary than this. To outsiders it can sometimes seem as if they deliberately go out of their way to cause trouble. Whenever Mother Nature decides that things are becoming complacent and a stir of the pot is needed, for better or worse it will often be a green she sends down.

Whether or not Hahnemann was truly green will never be known but it is safe to say that his life story was dominated by a green energy to the point that his biography is a good, if not somewhat exaggerated example of what this energy is capable of.

Hahnemann was critical and scathing of anyone for whom he had professional contempt. His passionate outbursts and fiery temperament in defence of homoeopathy were legendary. He was persecuted and ridiculed, continuously moving. Never resting, Hahnemann kept experimenting, discovering deeper insights into homoeopathy always mesmerised by what he found; the thrill never left him. Outside of his profession and certainly towards his patients, his tolerance and acceptance were boundless. But to those within the profession, if they showed ignorance or laziness of any kind or ridiculed his system, he was merciless in his counterattack. Hahnemann was clear, critical and detailed, he was indeed a reformer who knew he was right, if the rest of the world did not agree with him, then the rest





of the world was wrong. In his personal life he seems to have been well liked, not just respected for his achievements. Last, but not least, in a typically green fashion, Hahnemann always had people around him who cared for him and assisted him in every way possible, whether it was his daughters, his first wife whom he openly admits did virtually everything for him, or Melanie who took him to Paris and made sure he received the respect and prestige that was owed. This green need to have someone around to take on the practical responsibilities of life is ever present. Just as an artist needs a patron to finance them and give them the independence required to do their work, so too do many greens need a helping hand in matters practical. Very few greens can make it on their own; being alone is what they are worst at. Green is always ready to hand over the reins of a task they find monotonous, not because they're lazy, although that may be part of it, but because they have an all or nothing aspect to their character. This means that many can be accomplished, even experts in a given area, but completely incompetent outside of it. They may be the tradesman who can turn their hand to anything but has never had a deep conversation in their life, or a musician who would get regular work if they would just remember to turn up once in a while.

These extremes or opposites stem from the fact that both yellow and blue are literally poles apart; even red and blue are closer and have more in common. These two miasms, psora and syphilis, are the yin and the yang of the homoeopathic world. Introspective and deep (blue) but sunny and light (yellow), needing to withdraw from everyone (blue) but at the same time much worse for it (yellow). Constantly on the move either mentally or physically, green goes through their whole life swinging from hot to cold and back again. Easily bored, they will go from one subject or project to the other. They are a walking





inconsistency because of these two opposing miasms; therefore the energy around them will also be in constant disagreement.

## FEAR, STRESS AND ESCAPE

There is a strong potential for stress in this miasm. Whenever blue is joined to any colour it magnifies its co-tenant's qualities to even greater levels than the miasm it originated from. For example, red may have suspicion but purple or brown may have paranoia. Yellow has fear and anxiety and so in consequence, green may be subject to levels of stress that would constitute a nervous breakdown. The blue part of green prevents them dropping the anxiety and moving on to other things, even long after the actual stress has passed. Their initial reaction to stress is often either a frenetic tirade of abuse, accusations and threats or an immediate reliance on someone around them to take over and relieve them of the burden. More often than not, this stress will come from outside their area of expertise making them feel inept at dealing with it. Some, once reassured that everything will be all right, will finally begin to calm down and relax, others are not so easily swayed, can carry the stress for an eternity, needing positive reassurance over and over again. In stress, areas like in many other areas of their life, green may need continuous propping-up.

Phosphorus has a reputation for being able to tell the mood of a room the moment they walk into it, but many belonging to this miasm that are not Phosphorus have this same sensitivity. Green needs constant stimulation, praise and reassurance from those around them if they are to successfully navigate their way through life; many are totally dependent on the skills and friendship of others.

Stress is not good for anybody's health, but here it causes





more suffering than most, indeed Phosphorus itself is the only remedy in the rubric, “MIND; CARES, worries; full of; constitution, undermined by”.

Because it already contains two extremes, to add another, in any form, may quickly tip them over the edge. Some go into an instant frenzy, while others need dead quiet and calm to think before they act, either way the pressure must stop before any positive response can occur.

If stress becomes prolonged or insurmountable their first instinctive reaction is to head for the hills and put as much distance as possible between them and the problem. In regards to the two most basic stress responses, fight or flight, green instinctively chooses flight. Some as a compensation may train themselves in the area of fight, to overcome their flight like the temper and desire to fight exhibited by Tuberculinum but more often than not they will talk of how, all they want to do is pack it all in and move away to somewhere exotic so they don't have to worry about such stupid little details ever again. No such place on God's earth exists but it is still what they desire.

Panic and terror and the need for constant reassurance come from the giving ground and collapse of blue. Eventually though, their yellow survival side will kick in, and enough will be enough, a solution must be sought.

*MIND; Fits of violent temper; wants to fight.*

*MIND; CARES, worries; full of; constitution, undermined by.*

## DISSATISFACTION AND PERFECTION

The most well-known of all the tubercular traits, dissatisfaction, is constant because of the pull between the two distinct but opposing miasms. What will satisfy at one point of time will





not suffice at another, how could it when the two miasmatic demands are conflicting? This leaves many in a position of always feeling empty or unfulfilled; to them, no matter how good an event, it could have been better. Rarely do they ever have that 'simply perfect' feeling. As a consequence, many are on the lookout for an excuse, a cause, something or someone that is stopping things from being perfect. In their mind if this could be eradicated everything would be ideal. This means green is continually finding a cause or enemy on whom to redirect their energy. In an Orwellian fashion, war, by finding an external enemy, creates peace by having an excuse to legitimise their dissatisfaction; hence someone, or something, is always in the gun. Almost impossible to please when they reach this level green can be ferocious and infuriating, critical of everything and everyone.

Another way dissatisfaction may show itself is in the vacillation of its own desires. Manifested in their sexual life where their desire for something exotic and different may only be surpassed by their fear of getting it. This springs from their famous "grass is greener" attitude to life. Firstly they want something, then they don't, then they do again and then when they get it it's the wrong sort or colour or type. Yearning for something that they can't handle or don't really want makes those around them fed up, cross and impatient. Green in turn gets hurt and defensive. Because of their focus on what is *not* right, the slightest thing that goes wrong in their plan is focused upon and magnified out of all proportion.

They are demanding in regards to their environment; they crave aesthetic beauty because it is perfect. Green is demanding of their partners, and demanding of themselves. With such an eye for beauty and perfection, they may put themselves through





torture to get their project “just right”. They will labour for hours to get a picture, engine or sentence exactly the way they want it. They are not perfectionists per se, as rarely does this sort of effort and detail extend beyond what they are passionate about. Being so exacting with themselves is why Hahnemann thought he had the right to condemn others who would dare focus on him when their own practices were so transparent and shoddy. A green in defence of their work is a green in full flight, and a green in full flight, as Hahnemann’s reputation showed, is something to behold.

*MIND; DESIRES; numerous and various things.*

*MIND; DESIRES; indefinite.*

*MIND; COMPLAINING.*

## POOR LEARNING SKILLS AND FEELING STUPID

Green more than any other miasmatic group has a disproportionate number of people who are right-brained. Perhaps this accounts for its artistic reputation? This means some are likely to develop at a much later stage. Many green children live in a dream world, escaping to some mental oasis when times get tough. Schooling is a predominantly left-brained affair; hence some green children find themselves left behind and it’s at this stage that many become spiteful and rebellious. Knowing in their own minds they are not dull but being unable to academically prove it, they feel stupid.

Becoming deliberately contrary some develop bitterness, while others turn their attentions elsewhere, rejecting the system altogether. Contrariness and rebellion are part of their genetic

