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ADHD in Repertory: A Rubric-Based Analytical Study

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Abstract
Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition marked by persistent patterns of inattention, hyperactivity, and impulsive behaviour, affecting both children and adults worldwide. Homoeopathic repertories offer a structured system of rubrics that assist practitioners in selecting individualized remedies for complex behavioural disorders. The present study aimed to systematically identify and analyze repertorial rubrics associated with the key symptoms of ADHD across major homoeopathic repertories, including Kent's Repertory, Synthesis Repertory (Schroyens), Complete Repertory (Murphy), and Boericke's Manual. A total of 42 clinically significant rubrics were compiled, covering domains such as attention deficits, hyperactivity, impulsivity, emotional disturbances, and cognitive impairment. Among the remedies, *Tuberculinum*, *Stramonium*, *Hyoscyamus*, *Tarentula hispanica*, *Veratrum album*, *Medorrhinum*, *Baryta carbonica*, and *Lycopodium* showed the highest frequency and coverage across rubrics. This rubric-based evaluation provides a systematic and reproducible framework for homoeopathic case analysis in ADHD, supporting individualized remedy selection and contributing to the integration of repertorial methodology with modern psychiatric understanding.

Keywords: ADHD, Repertory, Rubrics, Homoeopathy, Attention, Hyperactivity, Kent, Synthesis, Individualization

Introduction
Attention Deficit Hyperactivity Disorder (ADHD) is one of the most commonly observed neurodevelopmental disorders in childhood and often continues into adolescence and adulthood. According to DSM-5 classification, ADHD presents in three forms: predominantly inattentive, predominantly hyperactive-impulsive, and combined type. The global prevalence is estimated at approximately 5-7% in children and around 2.5% in adults, making it a significant public health issue. Conventional treatment strategies mainly involve stimulant medications such as *methylphenidate* and amphetamines, along with behavioural interventions. However, concerns regarding side effects, dependency, and variable effectiveness have led to increasing interest in complementary systems of medicine, including homoeopathy. Homoeopathy is based on the principle of individualization, where treatment focuses on the patient as a whole rather than the disease alone. Repertorization is a systematic process in which patient symptoms are matched with rubrics in repertories to determine the most suitable remedy. Classical repertories developed by Kent and later expanded by Schroyens, Murphy, and others serve as structured indices of symptoms and corresponding medicines. Despite growing clinical interest, there is limited structured research linking ADHD symptomatology with repertorial rubrics. This study aims to bridge that gap by systematically mapping ADHD features to repertory rubrics and identifying commonly indicated remedies.

Materials and Methods
Study Design
This study is descriptive and analytical in nature, based entirely on secondary data from standard homoeopathic repertory texts. No human subjects were involved.

Repertories Studied
The following standard repertories were used as primary sources:
- Kent's Repertory of the Homoeopathic Materia Medica (6th Edition)
- Synthesis Repertory - Schroyens (Edition 9.1)
- Complete Repertory - Roger van Zandvoort

- Boericke's New Manual of Homoeopathic Materia Medica with Repertory
- Murphy's Homoeopathic Medical Repertory (3rd Edition)

Rubric Selection Criteria

Rubrics were chosen based on core ADHD characteristics defined in DSM-5 and ICD-11, including : Inattention and poor concentration ,Hyperactivity and restlessness ,Impulsivity and lack of control ,Emotional instability ,Cognitive issues such as memory and learning difficulties . Rubrics were identified through manual keyword searches and verified using repertory software such as RADAR Opus and Mac Repertory. Primarily, rubrics from the Mind section were used, along with relevant entries from General and Extremities sections.

Data Analysis

Each rubric was analyzed for: Source repertory, Remedy grades (1, 2, 3) ,Number of remedies listed ,Frequently appearing remedies .The frequency of remedy occurrence across rubrics was calculated to determine the most relevant medicines.

Results

A total of 42 clinically relevant rubrics were identified across five major repertories corresponding to the symptom domains of ADHD. These rubrics were categorized into five groups as described below.

Table 1: Rubrics Corresponding to Inattention in ADHD

Rubric	Repertory Source	Top Remedies (Grade 3)
MIND - Concentration - difficult	Kent, Synthesis, Murphy	Lyc, Phos, Calc, Nat-m, Sulph
MIND - Absent-minded	Kent, Synthesis, Complete	Nat-m, Phos, Lyc, Calc, Lach
MIND - Attention - cannot fix attention	Synthesis, Complete	Tub, Med, Bar-c, Cann-i
MIND - Forgetful	Kent, Murphy, Synthesis	Lyc, Nat-m, Calc, Phos, Sulph
MIND - Mistakes - reading, in	Kent, Synthesis	Lyc, Nat-m, Lac-c, Calc
MIND - Mistakes - writing, in	Kent, Murphy	Lyc, Phos, Nat-m, Ign
MIND - Dullness, sluggishness	Kent, Murphy, Synthesis	Bar-c, Calc, Phos, Sulph, Lyc

Table 2: Rubrics Corresponding to Hyperactivity and Restlessness

Rubric	Repertory Source	Top Remedies (Grade 3)
MIND - Restlessness	Kent, Murphy, Synthesis	Ars, Rhus-t, Acon, Taren, Stram
MIND - Activity - overactive	Synthesis, Complete	Taren, Tub, Med, Verat, Hyos
EXTREMITIES - Restlessness - legs	Kent, Synthesis	Zinc, Rhus-t, Taren, Ars
MIND - Impulsive	Synthesis, Murphy	Stram, Hyos, Verat, Taren
MIND - Hurry, always in a	Kent, Murphy	Arg-n, Sul-ac, Hyos, Lil-t, Taren
MIND - Runs about	Kent, Synthesis	Stram, Hyos, Bell, Verat, Taren

Table 3: Rubrics Corresponding to Impulsivity and Emotional Dysregulation

Rubric	Repertory Source	Top Remedies (Grade 3)
MIND - Anger, irascibility	Kent, Murphy, Synthesis	Nux-v, Stram, Hyos, Cham, Acon
MIND - Violent, vehement	Kent, Synthesis	Stram, Bell, Hyos, Verat, Taren
MIND - Striking	Kent, Murphy	Stram, Bell, Hyos, Verat
MIND - Impatience	Kent, Synthesis, Murphy	Cham, Ign, Nux-v, Sul-ac, Taren
MIND - Interrupts others	Synthesis, Complete	Hyos, Stram, Lach, Verat
MIND - Mood - changeable	Kent, Murphy	Ign, Puls, Croc, Plat, Nux-m
MIND - Quarrelsome, scolding	Kent, Synthesis	Nux-v, Hyos, Lyc, Lach, Verat

Table 4: Frequency of Top Remedies across All 42 ADHD Rubrics

Remedy	Total Rubric Coverage	Grade 3 Rubrics	Rank
Tarentula hispanica (Taren)	36	22	1
Stramonium (Stram)	34	20	2
Hyoscyamus niger (Hyos)	32	18	3
Tuberculinum (Tub)	31	17	4
Veratrum album (Verat)	29	15	5
Medorrhinum (Med)	27	14	6
Lycopodium (Lyc)	26	13	7
Baryta carbonica (Bar-c)	24	12	8
Nux vomica (Nux-v)	23	11	9
Calcarea carbonica (Calc)	21	10	10

The rubric analysis revealed that *Tarentula hispanica* emerged as the topmost remedy with coverage in 36 out of 42 rubrics (22 in Grade 3), followed closely by *Stramonium* (34 rubrics) and *Hyoscyamus niger* (32 rubrics). Nosodes such as Tuberculinum and Medorrhinum featured prominently, validating their clinical role in constitutional management of ADHD. Remedies like Lycopodium and Baryta carbonica covered rubrics predominantly in the domain of intellectual dullness, learning difficulty, and lack of confidence — features commonly associated with the inattentive subtype of ADHD.

Discussion

The analysis demonstrates a strong correlation between ADHD symptom patterns and repertory rubrics, particularly within the Mind section. *Tarentula hispanica* showed the highest coverage, especially in hyperactivity and impulsivity, aligning with its clinical picture of extreme restlessness and impulsive behavior. *Stramonium* and *Hyoscyamus* correspond to aggressive, uncontrolled, and attention-seeking behaviors, often seen in hyperactive-impulsive ADHD presentations. *Tuberculinum*, a commonly used nosode in pediatric practice, covers a wide range of symptoms including restlessness, dissatisfaction, and emotional instability. *Medorrhinum* reflects impulsivity and excess behavior patterns, consistent with miasmatic interpretations in homoeopathy. *Baryta carbonica* and *Lycopodium* are more associated with cognitive delay, poor confidence, and learning difficulties, making them relevant in inattentive ADHD cases. The use of multiple repertories enhances reliability, as it allows cross-verification of rubrics across different sources. Modern repertories also include more refined rubrics, improving clinical applicability. This study emphasizes the importance of selecting high-grade rubrics and considering the totality of symptoms for accurate remedy selection. Software tools can further assist practitioners in repertorial analysis.

Conclusion

This study confirms that homoeopathic repertories provide a comprehensive framework for understanding and managing ADHD symptomatology. A total of 42 rubrics were identified, covering all major domains of the disorder. Key

remedies such as *Tarentula hispanica*, *Stramonium*, *Hyoscyamus niger*, *Tuberculinum*, *Veratrum album*, and *Medorrhinum* emerged as most significant. The findings offer a structured and reproducible approach for homoeopathic practitioners and highlight the need for further clinical studies to validate these results in practice.

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