

## New contribution to a medicinal product or an indication

Dear Colleagues,

Via the formulary you can share your experience and thus contribute to the future development of the Vademecum and to maintaining the best possible level of current knowledge in the practice of anthroposophic medicine worldwide.

Two kinds of reporting are possible:

- Reports on medicinal products and indications which have already been described in the Vademecum.  
Your report may confirm, refine, supplement, refute or correct the given data.  
Please use the „Feedback on a medicinal product or an indication already described in the Vademecum“ formulary (EN-Form-Feedback.pdf).
- New reports on medicinal products or indications not yet presented in the Vademecum.  
Please use this form to submit your message.

Please only submit a new report if you have had repeatedly good experience with a medicine and are able to describe the indication and symptoms, dosage, effects, side effects, comedication and additional therapy recommendations, and limitations for a particular condition – in a way that allows a lesser experienced colleague to replicate your positive results. We also ask for a rough estimate of how many treatments you have given and how certain you are about the medicine’s efficacy. The details that are important in a holistic context, such as age, constitution and life situation, should be included where possible. Literature references are welcome but not essential.

We look forward to your contributions!

For the Editors

Georg Soldner, Markus Karutz

4th January 2017

You can download the current version of the formulary from [www.vademecum.org](http://www.vademecum.org).

If you have any questions, please contact [editor@vademecum.org](mailto:editor@vademecum.org).

## New contribution to a medicinal product or an indication

- Please use *one* form per indication and tick as appropriate.
- Please use Adobe Reader also on Mac computers. The Preview Apple program is not suitable for completing PDF forms.

### Report to the Editorial Team

Please complete as fully and succinctly as possible.

.....  
Medicine

.....  
Manufacturer, country of manufacture

.....  
New indication

Diagnosis and detailed description so that the reader can know when the medicine is indicated.

.....  
Typical symptoms and findings, triggers and causes, age and gender, typical modalities

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## Constitution

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## Dosage

Where relevant: dosage form, potency or variations thereof, amount, frequency of dosage and specific time of day and any special instructions for administration

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## Dosage for adults

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## Dosage for children

Specify: <2 yrs, 2-6 yrs, 7-12 yrs

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## Effect

Time until the effect can be expected, or time after which ineffectiveness must be assumed if no effect is registered

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First symptoms to improve, thus signaling onset of effectiveness

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Average treatment duration

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### Side effects

Repeatedly observed side effects or side effects that one should be aware of

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### Accompanying therapy

Accompanying therapy or other therapies, e.g. conventional medicine, eurythmy therapy, art therapy, rhythmic massage etc.

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### Differential therapeutic indications

If appropriate or applicable, differential therapeutic indications (suggestions and indicative aspects or symptoms for alternative therapies for this indication)

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### Approximate number of cases successfully treated in this way

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### How sure are you that this medication was key to the successful outcome?

Effectiveness certain or reliable

Effective

Effective in some cases

Effective in some cases, only a few observations

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### Additional literature

## Declaration of consent

I hereby consent to the publication of the above information in a future edition of the *Vademecum of Anthroposophic Medicines* published by the Gesellschaft Anthroposophischer Ärzte (GAÄD).

Yes                  No

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I consent to the inclusion of my name in a future edition of the *Vademecum of Anthroposophic Medicines* published by the Gesellschaft Anthroposophischer Ärzte (GAÄD).

Yes                  No

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Date                          in the format DD.MM.YYYY

---

First name

Last name

Title

Address

Postal code

City

Country

Telephone

Fax

Email

- After completion, please preferably send this form by email to [editor@vademecum.org](mailto:editor@vademecum.org) by clicking on the button
- Or print the form and send it by post to:  
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