



Homeopathic Remedies for Knee Pain

1. Go through the symptoms listed below.
2. Where the symptom applies to you, check the "O" across the *REMEDY* columns.
3. After you have gone through all the symptoms listed, count the number of symptoms checked in each *REMEDY* column, and put the number in the last row.
4. Select the Remedy that is the closest match to your symptoms.

| KEY SYMPTOMS | REMEDY | | | | | |
|----------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | <i>Arnica</i> | <i>Rhus-tox.</i> | <i>Ruta</i> | <i>Apis</i> | <i>Bryonia</i> | <i>Ledum</i> |
| CAUSE / TRIGGER (select max. 2) | | | | | | |
| Injury | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| Sprain / strain | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> |
| Arthritis | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Gout | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cold / wet weather / storms | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> |
| | | | | | | |
| PAIN | | | | | | |
| Bruised, sore | <input type="checkbox"/> | | <input type="checkbox"/> | | | |
| Burning / stinging | | | | <input type="checkbox"/> | | |
| Stitching / shooting / tearing | | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | |
| AFFECTED KNEE/S | | | | | | |
| Bruised / pale / purple | <input type="checkbox"/> | | | | | <input type="checkbox"/> |
| Red / puffy / shiny | | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| Feels hot / warm | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Feels cold | | | | | | <input type="checkbox"/> |
| Feels stiff | | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | |
| SENSITIVITIES / MODALITIES | | | | | | |
| Better with pressure / rubbing | | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | |
| Worse with touch / pressure | <input type="checkbox"/> | | | <input type="checkbox"/> | | <input type="checkbox"/> |
| Better with warm wrap / application | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | |
| Better with cold wrap / application | | | | <input type="checkbox"/> | | <input type="checkbox"/> |
| Better with rest / keeping still | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Better with gentle continuous movement | | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| | | | | | | |
| Number of Symptoms matched | | | | | | |

Potency: 30c is normally used for treatment at home, and can be repeated up to three times a day. Stop when there is relief. If there is no improvement after 2 days, stop and change remedy.

This is a simplified tool to help home prescribing for knee pain / arthritis flare-ups. Please seek help from a qualified homeopath when there are no improvements to symptoms after taking remedies selected from this list, or if you cannot find a remedy that provides relief.

This tool is not intended to replace medical advice.