

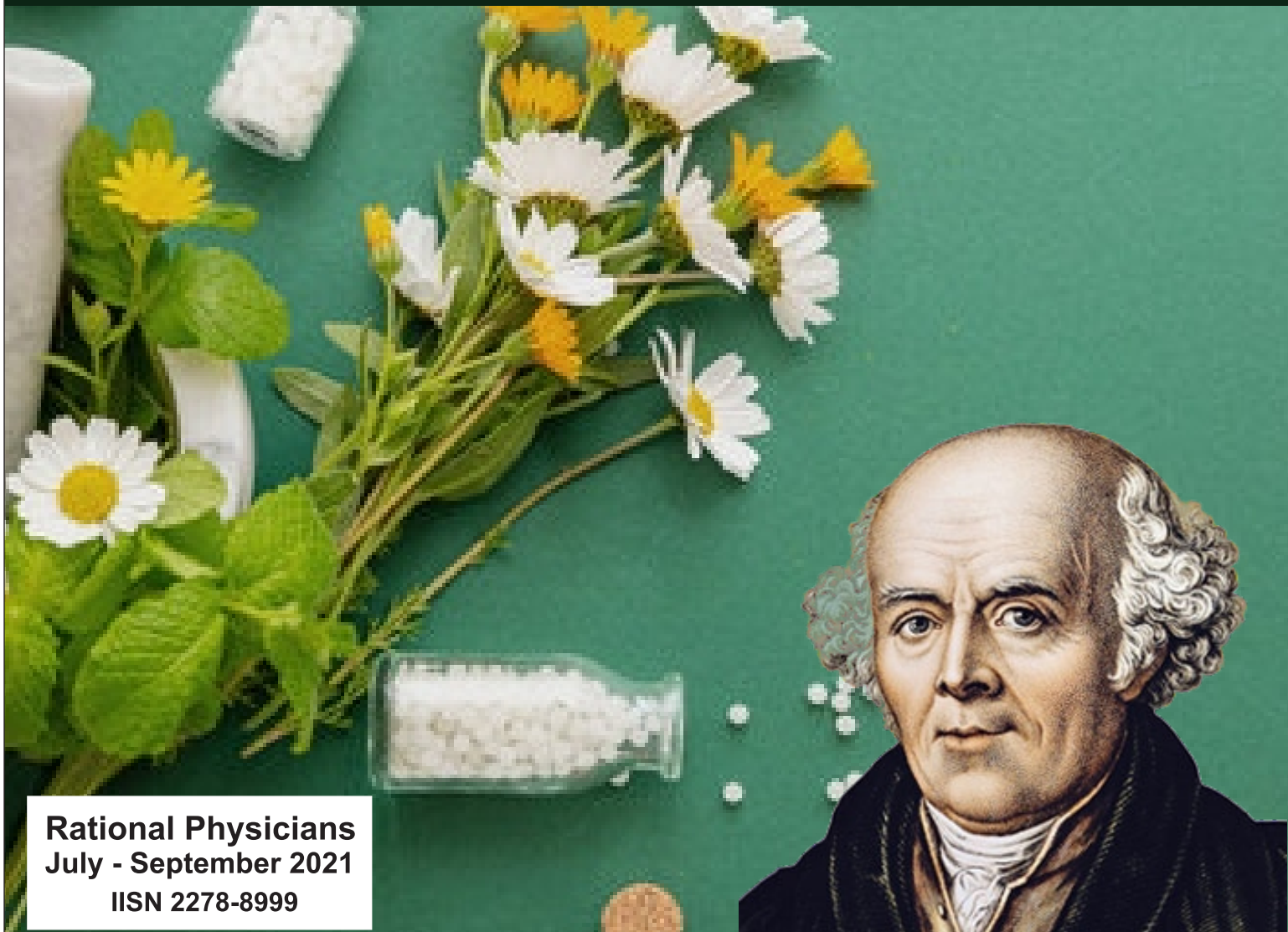


INDIAN INSTITUTE OF HOMOEOPATHIC PHYSICIANS

July - September 2021

RATIONAL

PHYSICIANS



Rational Physicians
July - September 2021
IISN 2278-8999



Dr Nyapati Srinivasa Rao

Advisor to IIHP and Homoeopath of International Fame

Homage by

Indian Institute of Homoeopathic Physicians

(in a virtual meeting on 4 July 2021)

KEY NOTES

The Editorial



It is with profound pleasure and anticipation that we celebrate the re-launch of the Rational Physicians, the voice of the Indian Institute of Homoeopathic Physicians, bang in the middle of this year 2021 and Corona pandemic. On behalf of the IIHP Central Executive Committee and IIHP Scientific Committee, I would like to extend a very warm welcome to the readership of RP. I take this opportunity to thank our authors, editors and readers for their contributions that will lead to the success of this publication. There was a very strong demand from the members of the IIHP for the revival of our esteemed journal the Rational Physicians, we hope to live up to their demand and expectation through this journal.

Out of sheer luck I got an extended tenure to serve IIHP and again I feel lucky to have a great team of enthusiastic, supportive and highly qualified members in my team. Their support has made a huge positive change in the way IIHP works. The quality and the scope of our work have improved a lot. This journal is just one example of our enhanced and efficient working.

While the success of our new team is a reason for joy it is equally saddening to know we lost many important members and team mates at IIHP in these tough times. It is a great personal and organizational loss. In their loving memory we pledge our dedication to the cause of IIHP and homoeopathy with renewed vigour.

Homoeopathy is a great science and deserves world class professional approach towards every aspect of it including this journal. I close this message by inviting everyone to submit their exciting cases, researches and other articles related to homeopathy in the best professional manner.

We hope to hear from you soon, and we welcome your feedback!

If you have any questions, suggestions, or concerns, please address them to raocghs@gmail.com

Thank you. We hope you will find Rational Physicians informative and useful.

Dr M A Rao
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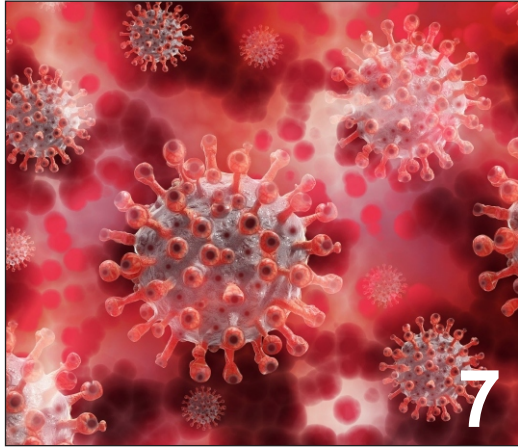


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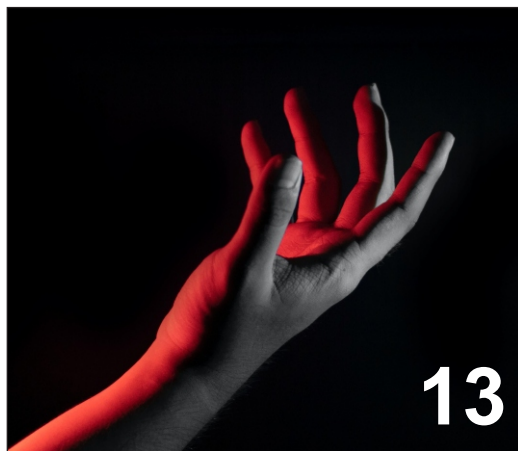


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July - September 2021

RATIONAL

PHYSICIANS

A Case of Bladder Outlet Obstruction

DR. V SREEGEETA, MD (HOM)

Sri Krishnamaitreya Homoo Clinic

Nirmala Convent Road

Patamata, Vijayawada-10

9703286861, drvsggeetha@gmail.com

The patient was 34yr old female who came for consultation for the complaint of inability to void urine without catheterization since 2 months. She is hardly able to pass 50 to 100 ml per day without catheterization. For this reason to empty her bladder, she was using catheter 2 to 3 times per day. Her ultrasonographic reports showed post voiding residual volume as 1050ml. She had history of pain in the lower abdomen pain and burning micturition since 6 months. She used anti-biotics for 2 to 3 times within a duration of 4 months. Her pain and burning reduced. But, gradually urine output per day reached less then 100ml without catheterization. She had history of chicken pox at the age of 8yrs, recurrent urinary track infections after marriage and an induced abortion 3 yrs ago.

Her parents were diabetic and hypertensive. One sibling is apparently healthy.

Patient is the mother of one child who is apparently healthy.

Her appetite reduced recently with distended feeling in the abdomen. She is **thirst-less, thermally hot ++, desires open air++**, bowel movement is regular **urine output is scanty**, sweats only in summer. Her sleep is refreshing and she doesn't remember her dreams. No specific desires and aversions. No intolerances and allergies.

LSI: She was born in a middle class family. Her parents passed away when she was 15yrs old. After death of parents, she was taken care of by her brother. She got married at the age of 18yrs and at the age of 20yrs she delivered a male child. When she was 25yrs old, her husband was affected with malignancy and died when she was 27yrs old. When she was 28, she got married again to a person who has 2 children and his first wife also passed away due to cancer. At the time of 2 nd marriage, she left her own son with her brother according to her 2 nd marriage agreement. She used to adjust in her new family and is taking care of her husband's children very well. But she kept on thinking about her own child who was left with her brother. She felt guilty about her child and that she committed wrong. She used to weep about this issue again and again but she could never share her feelings. She gets irritable on trifles but she becomes silent and moves away from that situation. She is very timid since childhood. Due to her timidity, she cannot mingle with people very easily. She is much affectionate with her step children also. She never had any other complaints in her 2 nd marriage.

On examination, tenderness in hypogastrium.

Ultrasonographic reports on 5.11.2020, bilateral moderate hydro uretero nephrosis with over distended urinary bladder. Impression – **bladder outlet obstruction, cystitis.**

Blood investigations- VDRL negative, blood urea-32mg%, creatinine-1.0mg%

Urine examination- albumen traces, RBC plenty, pus cells plenty.

Probable diagnosis: **E. coli infection**

U/S abdomen on 16.11.2020 **bilateral moderate hydro uretero nephrosis with over distended bladder and significant PVR, S/O bladder outlet obstruction, bilateral grade 1 renal parenchymal changes due to reflux of urine**

Blood urea -95 mg%, serum creatinine-1.2mg%

Urine albumen 1+, appearance turbid, pus cells plenty, RBC plenty, epithelium cells – 3 to 5

At this point of time, urologist suggested for suprapubic catheter permanently.

Repertorial totality

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Rx

29-12-2020

Rx Puls 30 daily one dose for 10 days

12-01-2021 urine flow improved naturally without catheterization, appetite improved.

Rx

Placebo for one month.

01-02-2021

Blood urea -26, Sr.creatinine 1.0, urine albumen traces, pus cells 6-8,PVR 150ml.

Rx

Placebo for one month.

02-03-2021

Urine flow better , menses early by 8 days, flow normal.

Rx

Placebo for one month.

Patient is able to pass urine without catheterization and is maintained on placebo.

A Case of Bleeding Eczema

Dr. Renuka Kandimalla, B. H. M. S.

Srisurya Homeo Care, Motinagar, Hyderabad 18

Cell: 9948594090 & 9177089666

Email: drkrenuka@gmail.com

Overview

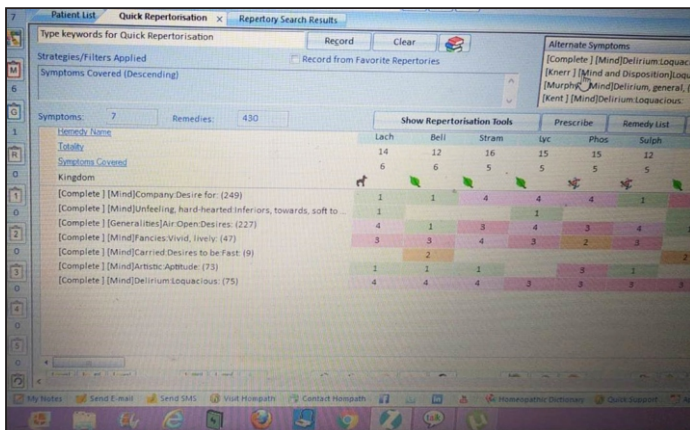
Eczema is a gene variation where patient gets itchy red eruptions where on course they may get sensitivity to dust and allergens. In mean course they may get cosmetic overlook and lots of mental irritation. That too in children intolerance levels will be high. Difficult to manage. Here in this case girl will scratch the patches until they bleed. With our homeopathy that condition was corrected and she is without inconvenience.

Case Details: Patient is an 11 yr girl.

K/c/o: she came with itching, rawness, burning on face, nape of neck, elbow s since last 5 yrs. She scratches until it bleeds on neck, elbow s.

On taking history, onset was sudden. She had some allergy on arms. Applied Desobin ointment. Underwent leech therapy. She had recurrent epistaxis & colds. Highly emotional and affectionate. Desires non-veg & spicy food. Has constipation and has to strain.

Coming to mentals, Desires company, Desires open air, Lively kid, Hard to her maids, kind to her brother, Good at studies and dance, Very aggressive, Fast learner, Courageous and timid too, Attention seeker, Loquacious



Based on above criteria in case taking and on repertorization I selected Lachesis 30 inhalation on January 31st 2021.

On next visit she complained of aggravation in her condition and relieved of constipation.

Later she was on placebo for one month.

Meanwhile her skin irritation was treated by Ars. album 6 as maintaining dose.

In March she was given another dose of Lachesis 30 (inhalation). Her mental state improved. That's why kept on Lachesis. Even her thermals(hot), Thirstless, her protruded tongue all supportive of her Constitution.

One month later she got relief of her eczema and bleeding came down as her scratching came down.

In May she was given one dose of Psorinum 200 as an intercurrent dose for her psoric tendency.

In June she is very much progressive and relieved of her bleeding eczema.

TREATMENT HIGHLIGHT

ELBOW



Elbow - Before

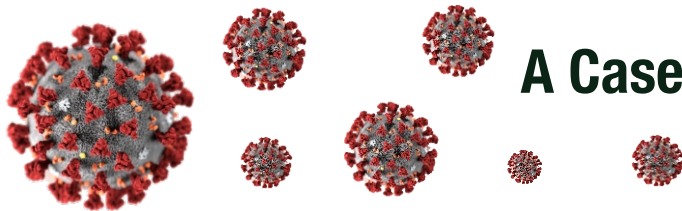
Elbow - After

NECK



Neck - Before

Neck - After



A Case of COVID

Dr Sonia Hemnani Taskande, BHMS MD
Mumbai

It is a case of a senior citizen. Female, Covid-19 positive with several pre-existing comorbidities treated at home under careful supervision of a Homeopath.

Why fear when I'm here, this is the phrase I've been hearing since childhood, from the religious teacher and even my father, eventually developed into a belief that Fear doesn't exist but Faith does which I think is transferred to my family and patients.

In the present context of Homeopathy, why Fear when Homeopathy is here.

Today we are overruled by the Fear of Fevers, what it might be, which virus or bacteria, what it can cause, DEATH? What will happen if I die? Family, possessions, love and care, ambitions, losing everything- when there is fear of losing, the curtain over our mind is even darker to see the brighter side.

This curtain can be on both patients and doctors.

So, for treating a patient, first the physician has to be aware and well read about the consequences of what and how he is treating. If not now, we are answerable to the universe or ourselves at the end of our life. Dare to be wise as Hahnemann has always said.

In cases of Covid, my experience started as I received patients of both kinds. One, trusting me and relying only on Homeopathy and others using Allopathy, Ayurveda and Homeopathy together. Initially for a month I was doubtful as to what was working. Eventually I figured out that Homeopathy is doing a great job of saving lives.

In cases of Covid, my experience started as I received patients of both kinds. One, trusting me and relying only on Homeopathy and others using Allopathy, Ayurveda and Homeopathy together. Initially for a month I was doubtful as to what was working. Eventually I figured out that Homeopathy is doing a great job of saving lives.

Case Details

Patient: Mrs K T, 69, F

K/C/O- DM, Asthma, Thyroid, History of breast cancer, shoulder implant 2 months ago due to accident.

Past CT scan indicated only 75% lung functionality.

First her husband and son became Covid positive. We started her with ARS ALB 200 Daily once for a week as a preventive, as she was asymptomatic.

Later she developed 99.0 F temperature and started her on FERRUM PHOS 1M as it can control the initial stage of inflammation.

Got her tested which turned out to be Covid Positive with CRP of 10.

After three days there was weakness and mild cough, anxious ++, about herself and husband and CRP increased from 22 to 32. SPO2-94.

Developed Cough with slight stitching pain in the chest while breathing.

Had to get up and sit at cough, with amelioration after expectoration.

Profound weakness.

PATIENT NAME : KESHAR TAKSANDE		PATIENT ID : KESHF22035265	
ACCESSION NO : 0002UD154979	AGE : 69 Years	SEX : Female	DATE OF BIRTH : 22/03/1952
DRAWN : 21/04/2021 12:00	RECEIVED : 21/04/2021 20:14	REPORTED : 22/04/2021 22:41	CLIENT PATIENT ID :
REFERRING DOCTOR : SELF			
CLINICAL INFORMATION :			
ICMR Registration No: SRLRL002 NASOPHARYNGEAL AND OROPHARYNGEAL SWAB.			
Test Report Status	Final	Results	Biological Reference Interval Units
MOLECULAR BIOLOGY			
SARS COV-2 REAL TIME PCR			
SARS-COV-2 RNA		POSITIVE Ct = 22 (Orf1ab gene)	
METHOD : RT-PCR TARGETING E AND ORF1AB GENE			
Comments			
There are no reliable studies to definitively prove a direct correlation between disease severity / infectiousness and Ct values ,there fore it is not recommended to rely on numerical Ct values for determining infectiousness of COVID-19 patients and deciding patient management protocols			

PATIENT NAME : KESHAR TASKANDE		PATIENT ID : KESHF30045365	
ACCESSION NO : 0065UD008717	AGE : 68 Years	SEX : Female	DATE OF BIRTH :
DRAWN : 30/04/2021 10:08	RECEIVED : 30/04/2021 10:08	REPORTED : 30/04/2021 16:10	CLIENT PATIENT ID :
REFERRING DOCTOR : DR. SONIYA			
Test Report Status	Final	Results	Biological Reference Interval Units
NEPHELOMETRY			
C-REACTIVE PROTEIN, SERUM (QUANTITATIVE)			
C-REACTIVE PROTEIN		32.1	High < 5.0 mg/L
METHOD : NEPHELOMETRY, PARTICLE- ENHANCED IMMUNONEPHELOMETRY			
Interpretation(s)			
C-REACTIVE PROTEIN, SERUM (QUANTITATIVE)-CRP is one of the proteins commonly referred to as acute phase reactants. CRP is distinguished by its rapid response to trauma or infection. Elevated levels of CRP may be seen in inflammatory disorders, tissue injury or necrosis and infections. Synthesis of CRP increases within 4-6 hours of onset of inflammation, reaching peak values within 1-2 days. CRP levels also fall quickly after resolution of inflammation since to half life is 6 hours.			
Reference for Pediatric range: Monagle P. et al. Thromb Haemost 2006; 95: 362-372. Summerhayes R. et al. Thromb Haemost, 2007; 5, Supp 2: P-M-105. Summerhayes R. et al. Thromb Haemost, 2007; 5, Supp 2: P-S-397.			
Testing for CRP is indicated in the following clinical situations - monitoring recovery from surgery, myocardial infarction, transplantation, inflammatory bowel disease, rheumatic diseases and infectious diseases. Measuring and charting C-reactive protein values can also prove useful in determining disease progress or the effectiveness of treatments.			
CRP levels in autoimmune diseases may show little or no increase unless infection is present. Levels may not increase in conditions like pregnancy, angina, seizures, asthma, common cold. The main limitation of CRP is in its non-specific response and should not be interpreted without a complete clinical history and evaluation.			
End Of Report			
Please visit www.srlworld.com for related Test Information for this accession			

BLOOD COUNTS			
HEMOGLOBIN	9.4	Low 12.0 - 15.0	g/dl.
METHOD : PHOTOMETRIC MEASUREMENT, CYANMETHEMOGLOBIN METHOD			
RED BLOOD CELL COUNT	3.72	Low 3.8 - 4.8	mil/jul.
METHOD : COULTER PRINCIPLE			
WHITE BLOOD CELL COUNT	5.4	4.0 - 10.0	thou/jul.
METHOD : COULTER PRINCIPLE			
PLATELET COUNT	342	150 - 410	thou/jul.
METHOD : ELECTRONIC IMPEDENCE & MICROSCOPY			
RBC AND PLATELET INDICES			
HEMATOCRIT	29.0	Low 36.0 - 46.0	%
METHOD : CALCULATED PARAMETER			
MEAN CORPUSCULAR VOLUME	78.0	Low 83.0 - 101.0	fL
METHOD : DERIVED PARAMETER FROM RBC HISTOGRAM			
MEAN CORPUSCULAR HEMOGLOBIN	25.3	Low 27.0 - 32.0	pg
METHOD : CALCULATED PARAMETER			
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION	32.5	31.5 - 34.5	g/dl.
METHOD : CALCULATED PARAMETER			
RED CELL DISTRIBUTION WIDTH	19.4	High 11.6 - 14.0	%
METHOD : DERIVED PARAMETER FROM RBC HISTOGRAM			
MEAN PLATELET VOLUME	7.0	6.8 - 10.9	fL
METHOD : DERIVED PARAMETER FROM PLATELET HISTOGRAM			
WBC DIFFERENTIAL COUNT - NLR			
NEUTROPHILS	61	40 - 80	%
METHOD : VCS TECHNOLOGY/ MICROSCOPY			
ABSOLUTE NEUTROPHIL COUNT	3.29	2.0 - 7.0	thou/jul.
METHOD : CALCULATED PARAMETER			
LYMPHOCYTES	36	20 - 40	%
METHOD : VCS TECHNOLOGY/ MICROSCOPY			
ABSOLUTE LYMPHOCYTE COUNT	1.94	1.0 - 3.0	thou/jul.
METHOD : CALCULATED PARAMETER			

1. Clipboard 1

- 1. MIND - ANGER - trifles; at (94) 1
- 2. MIND - ANXIETY - sleep - during (49) 1
- 3. GENERALS - WEAKNESS - lying - amel. (19) 1
- 4. COUGH - ASTHMATIC (131) 1
- 5. COUGH - EXPECTORATION - amel. (38) 1

	ars.	kali-c.	hep.	ip.	phos.	sep.	stann.	bell.	nat-m.	nit-ac.	bry.	zinc.	nux-v.	acon.	cocc.	drog.	lach.	sang.	spong.	cham.	chin.	con.	duic.	kres.	lyc.	mez.	rhut-t.	sil.	caust.	ferr.	kali-n.	petr.	sabat.
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On the basis of totality, KALI CARB 1M, 6 pills every 3 hours for 2 days.

Follow up- SPO2 maintained at 97-98 levels with KALI CARB 1M.

Weakness reduced, appetite also increased, patient started feeling better and slept well.

Continued with KALI CARB 1M four times a day for another 3 days.

The period of risk that is between 8-14 th days passed by and patient's cough also reduced and fever, weakness did not reoccur.

And finally, test report came Negative.

CLIENT CODE : C000051972

CLIENT'S NAME AND ADDRESS :

HEALTH CARE CENTRE
SHOP NO-5/55, 1ST FLOOR, CORPORATE AVENUE BUILDING,
SAKI VIHAR ROAD, POWAI
MUMBAI 400072
MAHARASHTRA INDIA
9167738566

SRL LIMITED
PRIME SQUARE BUILDING, PLOT NO 1, GAIWADI INDUSTRIAL
ESTATE, S.V. ROAD, GOREGAON (W)
MUMBAI, 400062
MAHARASHTRA, INDIA
Tel : 9111591115, Fax : 022 - 67901212
CIN - U74899PB1999PLC045956
Email : connect@srl.in

PATIENT NAME : KESHAR TAKSANDE

PATIENT ID : KESHF090532

ACCESSION NO : 0002UE042727 AGE : 68 Years SEX : Female DATE OF BIRTH :

DRAWN : 09/05/2021 08:40 RECEIVED : 09/05/2021 16:39 REPORTED : 09/05/2021 22:06

REFERRING DOCTOR : SELF CLIENT PATIENT ID :

CLINICAL INFORMATION :

ICMR Registration No: SRLRL002
NASOPHARYNGEAL AND OROPHARYNGEAL SWAB

Test Report Status	Final	Results	Biological Reference Interval	Units
MOLECULAR BIOLOGY				
SARS COV-2 REAL TIME PCR				
SARS-COV-2 RNA				
NEGATIVE				
Comments				

Reason for Selecting KALI CARB

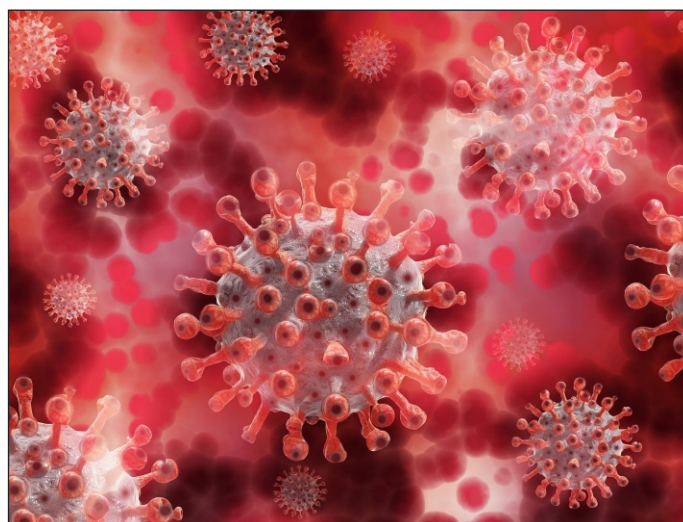
OVER SENSITIVE. CATARRHAL. LOW WILL POWER. ANXIETY + FEAR. DYSPEPTIC. CHILLY.

Reference Book [Absolute Homoeopathic MM by Dr P I Tarkas and Dr Ajit Kulkarni, Pune]

LESSONS LEARNT

- It's just not a seasonal flu causing virus. But a very partial virus which favours some people by being mildly attacking and punishes some by being cruel.
- Most of my patients who took exclusive Homeopathic treatment right from the beginning responded well and they didn't face the further stages of severe and critical and further, their recovery was very quick.

- You can really help and save the people around you.
- Keep yourself updated about Materia Medica and Repertory. The world will value you if you value yourself as a homeopath.
- Don't be fearful in using low or high potencies when required. In handling evolving covid cases, there is less time to wait and watch.
- Carry at least 20- 25 important remedies in your bag so that you can use them at any time and place.
- Give your patients the list of medicines they need to keep at home as an emergency kit.
- Keep a good network of people who can help you arrange medicines for your parents if they are away in times like these.
- Keep two Pulse Oximeters, many times they are not accurate.
- Fever is a natural defence of the body and don't suppress it by anti-pyretics. My experience is that covid cases improve fast when fever is not suppressed.
- Be confident, but take every step with caution.
- DO MEDITATION TO KEEP YOURSELF SANE.



Silicea: Homoeopathic Surgeon's Knife

Dr.Làkshmi Kanth Ponnuru
B.H.M.S.

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Satyanarayana Puram Vijayawada 520011 Krishna District AP
Mobile: 9790733851

Five years female baby along with father visited me for help.

She developed a soft growth on right lower lip since few months, gradually increasing size.

She felt NO pain but little difficulty in eating and tend to bite it sometimes but constantly she is showing it to his father. His father said that he searched for Homoeopathic Consultant on Internet and made a visit to me. Already he consulted two paediatric specialists who referred that girl to a paediatric surgeon. Upon the advice of paediatric surgeon she underwent a resection of that Mucus Cyst. On seventh day of resection, it started re growing and reached this size in two months. Surgeon advised to admit her again for a deeper resection. Father refused and sought help from a Homoeopath with an expectation of avoiding surgery again.



10th Sept 2020:- Father says that she is younger one and active than her sister. Normal eater no fuss in eating. Affectionate upon younger ones and little hesitant to meet new people and friends on first visit. Once she becomes a friend then mingles easily. No specific desires and aversions. No specific past health history.

I asked her to come near to me. Little worried and upon her father prompted her - NO injection, don't worry and GO, then only she allowed me touch her.

Normal physical findings of heart and lungs.

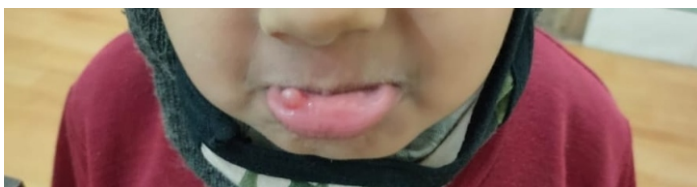
Soft cyst, no pain or bleeding on compression.

Considered following four rubrics from my favourite PHATAK'S Repertory.

1. Direction of symptoms: Side, Right
2. Children, Infant Complaints
3. Lips
4. Cysts in general

Treatment Given:

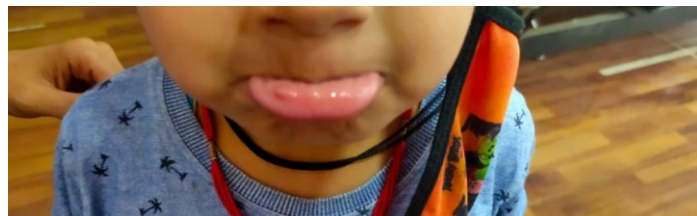
Silicea 200 given two doses on first day. Sac lac for six weeks. Photo taken with consent.



2nd Dec 2020:

Patient visited along with her father. Father said that he feels improvement in cyst size comparatively.

Silicea 1M given one dose and Sac Lac for six weeks

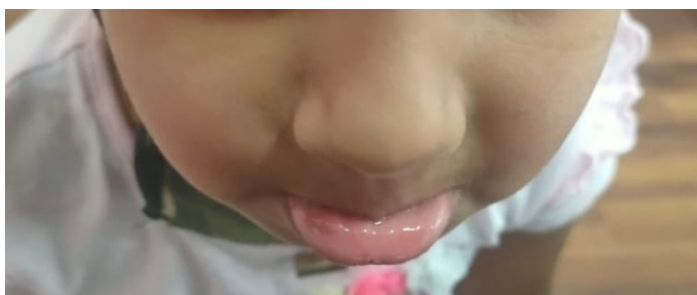


10th January 2021:

Patient along with father visited.

More confidence in both seen. Baby more comfortable to my call and examination. Cyst size much reduced. Photo taken with consent.

Treatment given: Sac Lac for six weeks.



25th March 2021:

Cyst reduced further. No other complaints.

Treatment given: Sac Lac for Six weeks. Asked to visit if required.

CONCLUSION:

- Simple and straight forward rubric selection.
- PHATAK'S Repertory a dependable weapon in our armoury.
- Silicea 1M given on 2nd December 2020 could be a hasty decision to go for higher potency
- Drug selected is helping the patient as evidenced by Photographs
- Mind symptoms also exhibited clearly in this case like Shyness, Injection fear etc convinced the prescriber to go ahead with selected drug.
- Dr Kent's fourth observation noted here
- 9 months follow up with no recurrence and steady decrease in cyst size suggests that case is in right track.

Patient's father said Homoeopathy helped her daughter from Knife again.

Hail Hahnemann & Hail Homoeopathy

A Surgical Case of Follicular Tonsillitis

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ABSTRACT- Tonsillitis is an inflammation of the tonsils. They are collection of lymphoid tissue that forms a part of the immune system. Hence they act as filter trapping the germs that could otherwise enter your airways and cause infection. They produce antibodies to fight against infection. This is an article regarding a follicular tonsillitis an example how homoeopathy is useful in the treating the tonsillitis without the aid of surgery.

KEYWORDS- Tonsillitis, Surgical case, Lycopodium

INTRODUCTION- The tonsils are lymph nodes in the back of the mouth and top of the throat. They normally help to filter out bacteria and other germs to prevent infection in the body. Tonsillitis is inflammation (swelling) of the tonsils. Frequent bouts of tonsillitis suggest that our immune system is deficient, and so the tonsils are working overtime, naturally enlarging in the process as would many organs in our body if they were overworked. Removing them is not always the answer.

CASE PRESENTATION- A female patient named xyz, aged 6 years, complaining of recurrent attacks of cold cough and vomitings from 15 days. History of frequent attacks once in two months since one year. Ailments from-cold drinks and cool weather. Used allopathic medication during the acute attacks.

PAST HISTORY-

Chicken pox at the age of four years.

Diagnosed with right inguinal hernia two years ago.

PERSONAL HISTORY- Desires ice creams, intolerant to cool food and ice creams, thirsty, bowels alternate days, hard stool, increased frequency of urination more at evening

MENTAL DISPOSITION- Timid and cries for slightest reason

PHYSICAL EXAMINATION- Medium built fair, P, 0 I, 0 CY O, CLO, LYM +cervical

VITAL DATA- H.R- 74/Min, P.R- 74 PRM, R.R- 16/Min, TEMP-afebrile

EXAMINATION OF TONSILS - bilaterally symmetrical enlarged tonsils on both sides with pus pockets on left tonsils

LABORATORY INVESTIGATIONS- C.B.P – raised WBC counts

CLINICAL DIAGNOSIS- Chronic follicular tonsillitis.

GRADING ACCORDING TO FRIEDMANN SCALE
–Grade 2

REPERTORIAL TOTALITY-

1. THROAT- tonsillitis, infection, chronic recurrent
2. THROAT- tonsils – enlargement, tonsils
3. THROAT- tonsils –general, suppuration, tonsils on left
4. THROAT- tonsillitis- infection, painless
5. CLINICAL-Hernia, general, inguinal, children, right side
6. BLADDER- urination, general, frequent. & Night
7. STOOL- hard, stool
8. FOOD- Cold food, general agg
9. COMBINED- FOOD- ice desires, and agg
10. COMBINED- food, chocolate desires and agg

REPERTORIAL RESULT- lyc- 17/7, lach- 14/6, sep- 13/7

REMEDY SELECTED- Lycopodium–swelling and suppuration of tonsils, in general aggravation from cold food, chilly patient, polyuria and right sided hernia

PRESCRIPTION-LYCOPODIUM 200 one dose given on 16-7-2019

FOLLOW UP-

DATE	OBSERVATION AND PROGRESS	TREATMENT
19-8-19	Painless tonsils in general, o/e pus pockets on left tonsil. Cold and cough +, increased frequency of micturition. Grade 2 tonsils.	Lyco 200 one dose Sac lac for one month od
17-9-19	O/e pus pockets on left tonsil, no attacks of cold and cough, betterment in tonsillar size	Sac lac for 2 weeks od
7-10-19	O/e- left side tonsil with pus pocket and enlarged, frequency of micturition +	Lyco 1M one dose Sac lac for one month od
9-11-19	O/E- No pus pockets, tonsils grade 1, general condition –improved.	Sac lac for one month od

IMAGES SHOWING BEFORE AND AFTER TREATMENT



Before

After

INFERENCE- After administering LYCOPODIUM in 1M potency there is complete recovery of the patient with no further relapses with marked improvement in general condition.

CONCLUSION -Homoeopathy is a system of medicine based on holistic concept of disease, the selection of remedy is based on the individualization and symptom similarity. Homeopathic medicine does not simply treat tonsils or any particular part of the body but it treats your whole body by strengthening your immune system. As an alternative to surgery homoeopathy helps in preventing further relapses and recurrences of tonsillitis.

Clinical Utility of Ipecacuanha Chehalis

Dr. Anusha Giddi

M.D.[Hom]

INTRODUCTION:

Asthma is one of the most common respiratory problems in modern industrialized countries, affecting over 5% of the population. It affects all age groups from infants to elders and mortality rates from asthma appear to be increasing during the past few years in the United States as well as in other industrialized countries. Asthma tends to occur in families, associated with other allergic disease, and may be induced by a wide variety of environmental antigens, most commonly inhaled allergens such as pollen and dust.

Asthma is a disease of airways that is characterized by increased responsiveness of the tracheobronchial tree to a variety of stimuli resulting in widespread spasmodic narrowing of the air passages which may be relieved spontaneously or by therapy. Asthma is considered an idiopathic disease which increasingly affects more and more people around the world. In bronchial asthma there is a breakdown in the regular functioning of the lung manifest as narrowing of the bronchial airways. The asthmatic experiences varying degrees of difficulty in breathing during episodes referred to as asthma attacks. When an attack is severe it is technically referred to as Status Asthmaticus. Asthmatics are frequently associated with other atopic conditions, such as eczema, urticaria, allergic rhinitis, and hay-fever.

Genetics play an important role in asthma. For many years, it has been reported that individuals with asthma have a higher probability of having a parent or sibling with asthma than those without asthma. The risk of asthma in children increases as the number of parents with asthma increases, up to a six fold increase if both parents have asthma. A parental history of asthma compared with other allergic diseases is more predictive of development of asthma in their children. Maternal factors seem more important than paternal, at least through 5 years of age.

Bronchial asthma has a marked hereditary tendency. One attack is predisposed to another. The main emphasis is laid on the explanation of Ipecacuanha which can modify the susceptibility of the individual and set him right. Thereby ascertaining to the mental and physical planes of suffering, in Homoeopathy refers to constitution of the patient which becomes important in management of Bronchial asthma.

In Homoeopathic repertories and books we generally come across many remedies which have strong affinity towards...

asthma. Out of these remedies Ipecacuanha stands out with higher marks in most of the cases of spasmodic asthma.

HOMOEOPATHIC APPROACH:

IPECACUANHA

SYNONYMS: Ipecac.

SOURCE: A small shrub growing in moist shady woods with small white flowers; belongs to the natural order of Rubiaceae.

PREPARATION: Mother tinctures and triturations are prepared from the dried roots of the plant. The tincture is prepared by adding five parts by weight of alcohol to the coarsely powdered root of this plant.

PROVED BY: Dr. Hahnemann.

PHYSIOLOGICAL ACTION

- Ipecacuanha contains as its active principle a substance called Emetin, which gives to the drug its property of producing vomiting. It also contains an acid called Ipecacuanhic acid, and a small quantity of a foetid volatile oil.
- It acts upon the nerves (especially the pneumogastric) and mucous membranes. It has been employed by allopathic physicians as an anti-spasmodic in asthma and in pulmonary catarrhs. In the latter class of troubles it is used to provoke vomiting, and, of course, gives temporary relief.
- Ipecacuanha seems to have a special affinity for the mucous membranes lining the bronchial tubes and alimentary canal. One of the most prominent features of this drug is its property of producing nausea and subsequently vomiting. So prominent is this symptom that you will find it present in almost all the cases in which Ipecacuanha is required.
- Ipecac is a great haemorrhagic remedy.

RESPIRATORY

- Asthma-Yearly attacks of difficult shortness of breathing.
- It is useful in cases of humid asthma, in cases of asthmatic bronchitis, when they suffer from the damp weather and from sudden weather changes; every little cold rouses up this bronchial attack, and he suffocates and gags when he coughs, or spits up a little blood.
- He has to sit up nights to breathe, and the attacks are common and frequent.
- Useful in affections of asthma, in which disease it is indicated when there is a
- sensation as of constriction of the chest, worse from the least motion.
- The cough of Ipec. is dry, spasmodic, constricted, asthmatic. Violent degree of dyspnoea, with wheezing

- When the patient coughs you hear the rattling of mucus in the chest, yet none is expectorated.
- Especially will you find this kind of asthma calling for Ipecacuanha in stout persons of lax fibre, either adult or child, who are particularly sensitive to a warm moist atmosphere.
- The cough is spasmodic and attended with vomiting of phlegm.
- Ipecacuanha frequently in whooping-cough, by virtue of the spasmodic character of the cough and the action of the drug on the pneumogastric nerve.
- In whooping-cough a characteristic is the spasmodic rigidity of the patient.
- Spasmodic convulsive symptoms are present. During the cough the child stiffens and becomes rigid from tonic spasm of the extensor muscles; loses its breath and turns pale or blue in the face.
- Loose coarse rattle in chest without expectoration.
- Bronchopneumonia.
- Haemoptysis agg. from slightest exertion.
- Asthma accompanied with skin disease.
- The tongue is usually clean.

STALWARTS ABOUT IPECACUANHA CEPHALIS

- Dr. Jahr recommended that in all cases of intermittents in which no other remedy is particularly indicated Ipec. should be given to begin with. Says "I always commence the treatment of Asthma with Ipecacuanha." It will either cure the case or bring out more definitely indications for another remedy. I have frequently found this advice useful; and it occurs to me that as most intermittents have been treated with quinine it is through its antidotal properties that Ipec. exerts some of its good effects.
- Dr. Roger Schmidt "I would say that 8 to 9 times out of ten Ipecac has been the one remedy that has given me good result in Asthma of children."
- Dr. Laurie "For Bronchial Asthma during the paroxysms, Ipecacuanha is one of the most frequently used remedies.
- Dr. Nash in his Leaders states that Ipecac is the best remedy in the first stage of Asthma before much mucus is present.
- Dr. Kent in his lectures uses Ipecac as a palliative to deal with acute episodes in incurable old cases of Asthma, attacks often start by catching cold.
- Dr. Clarke says Ipecac is useful in cases where cough is excited by a contractive tickling sensation extending from upper part of larynx to lowest part of bronchial tubes; agg. on walking in cold air; on retiring; in morning and evening; on taking a deep breath.
- Farrington says in his Clinical Materia Medica, Ipecacuanha is one of the best remedies we have for capillary bronchitis in infants. There is a great accumulat

of mucus in the chest. The examining ear hears rales all through the chest, both anteriorly and posteriorly. The cough is spasmodic and usually attended with vomiting of phlegm. There may be fever and Ipecacuanha still be indicated. The child may have difficulty in breathing from the marked accumulation of mucus in the chest. In such cases, I have used the remedy in all potencies; that is to say, from the third to the twenty thousandth, and I have been well satisfied with its action. When Ipecacuanha is indicated, the stage for giving Aconite has passed, because exudation has begun. If you adhere to the principles of homoeopathy, you will not give Aconite and Ipecacuanha in alternation. After giving Ipecacuanha, you will notice that the mucus does not adhere so firmly to the walls of the bronchial tubes, but it becomes less tenacious and is raised more readily.

- Herring in his Guiding Symptoms gives about Asthma - Spasmodic asthma : with great constriction in throat and chest; with peculiar wheezing noise; with danger of suffocation; with bronchial catarrh; of adults; in hysterical subjects; after suppressed miliary eruptions. Asthma of emphysematous subjects, when auscultation detects considerable quantity of mucus accumulated in bronchi, which patient cannot by any effort throw up in sufficient quantity; coughing brings on nausea.

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De Quervain's Tenosynovitis

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BHMS (2012-2018)

Dr.Allu Ramalingiah Govt. Homoeo College

Rajahmundry.



Introduction: Dequervain's tenosynovitis is a painful condition affecting the tendons on the thumb side of the wrist. Repetitive hand and wrist movements like gripping and rotating make the condition worse.

It is a very lesser known condition affecting women commonly during (third trimester) or after pregnancy.

Diagnosed clinically by Finkelstein's test (Eichhoff manoeuvre)

When the person has their thumb held within fist and the hand grasped and deviated to ulnar side sharp pain occurs along the distal radius – indicating a positive test.

When the person has their thumb held within fist and the hand grasped and deviated to ulnar side sharp pain occurs along the distal radius – indicating a positive test.

Case summary: A pregnant female of 24years age in her second trimester (5 th month) presented with pain and swelling under the left thumb and also pain under right thumb. Pain got aggravated by touch and movement of thumb. Crackling sounds and excruciating pain by sudden jerk or movement of left thumb making it difficult to do any kind of work. She was first adviced with painkillers and a thumb splint by an orthopedician. Got better after a few days but symptoms started to aggravate on doing any kind of work. After her delivery she started finding it difficult to even hold the baby but managed to

Conclusion: To conclude the case this is my personal experience and what I have gone through. I am very much thankful to the homoeopathic science as I thought I could never be relieved of the pain. Homoeopathy believes in minimal dose and it is true so.

Life Lessons as a Fresher

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Take a chance and have the courage to take a risk. Aude sapre – dare to be wise. These are the first few lessons we learn as a homoeopathy student.

The excitement of learning medicine, the curiosity of the intrinsic wiring of a human body and the unhinged nervousness of being called a doctor at the end of it all, seem like a far away feeling once one steps out of college.

As a fresh doctor I always thought that all the late nights in college will surely help me as soon as I graduate, just to realize that all of that was only practice for what is in store.

Having graduated just a couple of months ago, I have had the privilege of closely experiencing four homoeopathy physicians. To put their wisdom in words is not easy, but the following have stayed with me and will continue to do so for the rest of my life - personally and professionally.

1. YOU'RE ALL IN OR YOU'RE ALL OUT - IT IS NEVER INBETWEEN WITH HOMOEOPATHY. If you want to make a change and truly impact the health of a society, taking that first step of unlearning conventional practice of medicine and relearning a holistic approach to health and life is of utmost importance. True justice to homoeopathy and those seeking a treatment happens only when the art of homoeopathy is practiced like it should be.

2. DON'T BE SCARED TO MAKE TOUGH CHOICES. Just to become a better physician and earn a few quick bucks, it is important that your personal ideals are not compromised. Make a boundary, be a better physician and ensure to stick to your rules. Discipline in life seeps into the profession as well. It helps improve doctor – patient rapport and builds trust and confidence in the long-run. It is important to be a better physician with time and not regress. It is hard, but the only way to make it to the top.

3. FAMILY AND PERSONAL LIFE ARE IMPORTANT. Just to succeed professionally, never underestimate the power of the support a loving family gives. All the work is insignificant if it can't be used for the people who give you a safety net and fire your passion. Create such an atmosphere at home. Good personal relationships result in good health in the long run.

4. DRESS YOUR PART, ESPECIALLY AS A WOMAN. For your own safety and comfort – it is best to dress up in away which is comfortable to the patient. Body language, dress code, receiving a patient, and being polite are all a test of the doctor as a person and his/her wisdom. Do not take the privilege of handling someone's life lightly.

5. DO NOT GET EMOTIONALLY INVOLVED. This is extremely difficult as a physician, because the patient reveals a lot of personal information. For your own sanity, just be a good listener and help in your capacity as a doctor only. Everybody has personal problems. It is important to respect the emotions and still keep the business intact. Be stern but respectful and do not get into too much personal space. It will definitely lead to trouble.

6. READ. STUDY. BE A STUDENT FOR AS LONG AS YOU CAN AND WHENEVER YOU CAN. Every case is new. Every case is a new lesson. Treat each case like it's your first. Do not get into a routine with every patient. Each fever is different. Each cold is different. Treat it likewise. Take active responsibility for each case.

These are not taught in college. We learn as we grow and with exposure. So, be willing to spend time with people with more experience for both personal and professional growth.

My words do not justify the wisdom of the people I have spent time with, but this is a small message from one fresher to another – to be patient and to keep learning.

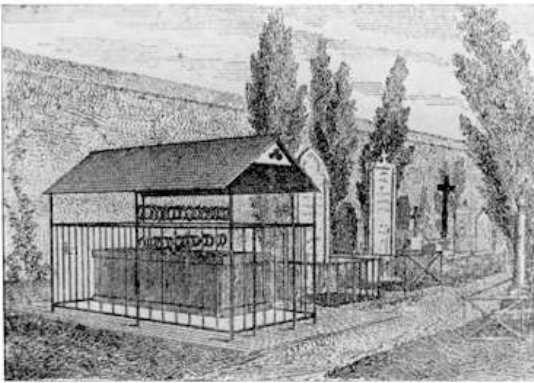
QUIZ : Compiled and Presented by Dr Kaumudi Padmamala, MD Hom, Visakhapatnam

1



The end of Dr. HAHNEMANN.....
early in the morning, 5 a.m. of Sunday, July 2, 1843,
With..... attack that exhausted him
very much.

2



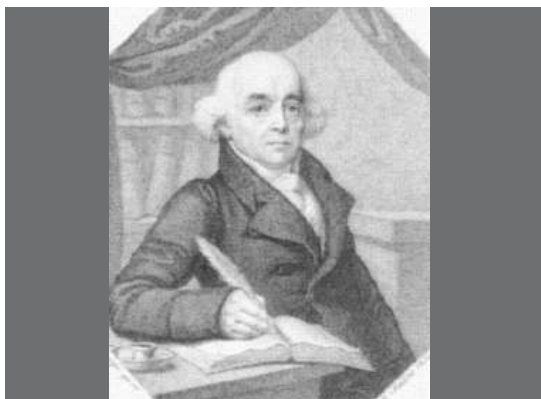
Name this place of burial of Dr. HAHNEMANN

3



Name the biographer of Dr. HAHNEMANN

4



The editions of the Organon of 1819, 1824 and 1829
each contained a half length engraving, in which Dr.
Hahnemann is represented sitting with a pen in hand-
drawn by.....and engraved by.....

5



This building which is associated with Dr. HAHNEMANN'S education is known as.....

6



This is the famous patient of Dr. HAHNEMANN, named.....

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