

CLINICAL CASES.

A CASE OF SUSPECTED CANCER.

DR. N. GHATAK, B. A. CALCUTTA.

Sremati Nagendra Bala Devi, aged 39 years, had all along been suffering from a very peculiar pain over the left ovarian region, since her first puberty at 15, the pain she could hardly describe as to its nature. In fact it was a pain of variable character, sometimes pinching, sometimes stitching, sometimes aching, and sometimes only a dull a subdued nature of burning mixed with soreness. There was one thing which her attending physician, a good old and highly experienced Homœopath, said he had all along been observing. It was a mood of deep sorrow and apprehension, which she would invariably enter into as soon as and in proportion as the pain grew in intensity. When the pain was off, she was an ordinary soberly cheerful woman looking to the family affairs with a good deal of interest. The old worthy physician is one of the ablest prescribers that I know of, but he frankly declared his failure in the case and that was why he had advised the family for a consultation with me. The most awful part of the case was that there was hardly any modality of any value in relation to the coming and going of the pain, or in relation to amelioration and aggravation when the pain was on. The physician said that with the help of that mental symptom and of her restless nature as well as of her general relief from a bath, he prescribed *Argentum nitricum*, *Apis*, and such other remedies in various potencies with graduated doses at long intervals, but unfortunately to no effect, save and except, only occasional transitory pauses giving him sometimes tantalising hopes.

The case came up to us for the above consultation in the month of August, 1930, and before that the patient called in a meeting of five highly renowned Allopaths of the town, two of whom were very good surgeons as well, and they all advised X'ray Photo which was duly taken. They again met together and unanimously declared it to have been a case of hopeless Cancer. They would only advise her to go to a place of high altitude, remain there up to the eventual end. After all this, we met together, but could not come to any other conclusion except what arrived at by our Allopathic friends.

After various searchings and siftings, we got these things to our assistance. The gradual losing of flesh and energy, the restless mood, and specially the absolute want of modality brought in a ray of suspicion in my mind that

there must have been some Tuberculinism in the patient lurking very deep and deluding us and neutralising all our best efforts. After a laborious examination and cross-examination we found out that one of her maternal uncles had died of fullfledged Tuberculosis of the right lung and not only that, but also that our patient had been at her nursing for about a month. The Eureka was there, so we supposed, and determined to try *Tuberculinum Bovinum*. We two agreed over the remedy, and we administered in 1m, and 5 graduated doses were given in 5 consecutive days, and then stopped as we found a bit of aggravation in the fifth night. The aggravation of the pain continued for four days together making us a bit nervous, but thank God, there was no more pain after its cessation on the tenth morning. It was on the 19th of September, 1930, that we put the first dose of our remedy, and the patient is not only all right regarding the pain, but she has all along been regaining her previous good health and jolly mood.

Later on I shall report a few other cases of similar nature though of altogether different pathological manifestations, to have been declared hopeless, and then cured by the remedy "Blessed be the Art of Hahnemann that can heal and truly heal."

PULSATILLA vs. NATRUM MURIATICUM.

DR. K. B. SEN, H. M. B., CALCUTTA.

Mr. Mukherjee, aged about 38 years came to the *Regular Homœopathic College out-door Hospital* on the 21st August 1931 and reported the following:—

PREVIOUS HISTORY. I had been suffering from Malaria off and on from my 22 years of age.

Last year I was attacked with pleurisy—right lower lung was affected.

The last attack of Malaria was about 2 months ago. The fever used to come at 6 to 6-30 P. M. continuing for the whole night till dawn.

There was chilliness before fever.

Thirst and severe headache during fever; with the apyrexia the headache was less, followed by sweat. This attack lasted for about 10 days and was treated by Allopathy Quinine etc.

PRESENT COMPLAINTS.

In the evening feeling of a little fever. Burning in the palms and eyes. Bitter taste in the mouth.

Dull liver pain—lasting all along. Liver sensitive to touch.

Loss of appetite, weakness, constipation. Thirstlessness.

Liking—SALT, Sweet, daily bath, open air.

Disliking—Bitter.

Mental :—Wants company. *Very irritable.*

Pulse—82.

Temperature—97.

It was in the evening that I saw the patient and though he was complaining that he was not feeling alright in the evening for some time past yet there was no rise of temperature etc., noticed.

He had been to an eminent Homœopath who prescribed Pulsatilla perhaps on the supposition that he liked open air and there was aggravation in the evening and the patient was thirstless. Puls. did him no good and he was inclined to change treatment altogether. On the recommendation of one of his friends whom I treated successfully he was inclined to come under my treatment as a last trial to Homœopathy.

As reproduced above, on the totality of the following symptoms :

- (a) *Irritable temper.*
- (b) Fond of *Salt* and *open air.*
- (c) Enlarged liver.
- (d) Intense headache during fever.
- (e) History of taking *Quinine* off and on.

I prescribed Natrum Muriaticum 200—2 doses early in the morning on two consecutive days on the 21st August 1931.

After a week the patient came and reported that he was improving and that the malaise in the evening had gone and the appetite had returned. He was feeling much better.

On the 19th Sept. 1931 two globules of Nat. Mur. 1 M in one ounce of distilled water was prescribed, as the liver was still sensitive and he was not gaining health as he ought to have done.

This made him fit for duty within a very short space of time.

Here Puls. should have been ruled out as the patient was *very irritable* as opposed to Pulsatilla temperament. This shows the value of *mental symptoms* in homœopathy.

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