

The Proving of *OPV-Num* in Infantile Dementia

ABSTRACT: Like conventional vaccines homeopathically prepared nosode (vaccine) can also activate the T-cells, which causes body's immune system to attack malignant growth. Antibodies are like key to a particular lock if produced homeopathically on the line of similars.



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KEYWORD: Premature fusion of sutures of the skull!

MATERIAL USED: Potentized Oral Polio Drops (*OPV-Num*)

METHOD: Used in molecular dilution in form of a vaccine and not as remedy.

RATIONALE: Certain viruses, like HIV-1 and Polio, are similar in many ways. They are instrumental in formation of cyst and tumour since they can also temper genes. If used homeopathically they can also be instrumental in resolving them. Fibromatosis is a process which occurs either when some gene (oncogene) gets tampered or if has triggered by the defence system in order to protect. The immune system can fuse virus inside through process of fibromatosis and calcification by forming cysts or tumours as a defense to check the virus within the nodules.

INTRODUCTION: Dementia is a symptom, not disease and it is as simple as we say. It is easy to forget in order to do the simplest things. The dictionary meaning is an irreversible organic deterioration of mental faculties.

But the fact is, it is difficult to define dementia? The books on neurology science have described more or less fifty diseases where dementia is a predominant symptom. They are degenerative, vascular and metabolic diseases. In some of them dementia is present in a variety of forms, as most divesting symptoms where memory fails, language capacities deteriorate, judgement suffers and personality disintegrate. Amongst them some are psy-

chiatric and some are neurological and some are metabolic and mysterious like Alzheimer's disease. The exact cause of this type of dementia is still unknown and has no remedy, except that those who smoke may not be getting it! This is what has been observed by its discoverer, Dr Alois Alzheimer after many years research.

Alzheimer, a German neuropathologist and clinician, used to smoke too much. In his findings he described the pathogens as tangles. Tangles look like the ashes of cigarette! Perhaps he applied homeopathic law in saying, 'Smokers are prone to get Alzheimer's disease'.

To me, Alzheimer is a malignant disease like infantile dementia, both are progressive in nature and here also pathogens are tangle like, which fuses the sutures prematurely, not allowing the brain (of an infant) to grow? In my practice the cases of infantile dementia is increasing, since last few years I have seen 5 to 7 cases of such type, following is one such:

CASE REPORT: Baba Alfaran: Born on 10.9.02 through Caesarian. Sonography, performed on 9.8.02 was normal. Premature birth took place because of rupture of membranes. History revealed that mother during 7th month of pregnancy had severe stiffness and pain because she traveled in train from one state to other. Baby's birth weight was 1.5 kg. Child underwent phototherapy and was given sedatives. Also underwent for an ophthalmic check up which was normal.



Towering Vertex



Not able to Propel

Child received 3 live vaccines, BCG, Hep B and Polio together at the age of two months. He had BCG when just one week old; but it had not taken. BCG was repeated because he had no BCG scar. Thereafter he had routine immunization more or less for all.

By age 7-8 months he developed the symptoms and signs of Dolichocephaly, which means no milestones. Child was not able to suck mother's milk, was not holding his head, no other milestones seen, not even smile. On 24.6.03, head circumference was 41 cm, and height 68 cm. On this day measles vaccine was given, soon after which, child developed brain cry with bulging of eyes, (proptosis). History further revealed that child was not able to suck mother's milk till 11/2 mths although was

playful but was not able to propel himself backward in bed with his feet. At times, he was not able to hold head, cannot sit unsupported or if even supported, would slide forward. Child was not able to gain weight, was not able to pass urine in sleep. On awakening, passes urine enough to soak nappy, which goes for 20-30 minutes ie in 5 minutes after passing urine, soaks nappy again, while passes stools once daily.

The neurosurgeon, Dr Sunil K Pandya (Jaslok Hospital), examined his vision on 3.7.2003 and noted in his record: As far as the family says- the child can follow objects, persons, with full eye movements. Eyes prominent, good facial movements, tries to hold objects so that he can pull them to his mouth. He added, "When we attempt making him stand, keeps hips, knees somewhat fixed. Can't stand, bearing weight on lower limbs. Occasional feeble attempts at stooping, all Fontanelles closed except small anterior fossa, diagnosed as a Towering Vertex. Spine normal. Suggested surgery to allow brain expansion, also wanted to know preoperative pediatric neurological assessment from other specialists to document the extent of brain dysfunction, whether the brain has already damaged due to this tumour like condition. He sent him to yet another child specialist Dr Goleria.

The case was referred to him by Dr Bhupendra Avasthi, a child specialist, who noted in his notes, (dated 25.6.03): X-ray films showed deformity of skull and delayed development ie a Tower Skull (Craniosostenosis), Turret Cephalo. There was generalized silver beaten like appearance of wall of skull with early closure of sutures He found marked gyral markings on inner table. Blood chemistry on 25.6.03: S. Alkaline Phosphate 467, S. Calcium 9.5 and S. Potassium 6.7.

CT SCAN (28.6.03, Nanavati Hospital) revealed small skull with shallow anterior fossa with elevated vertex. The parietal and Rt occipital emissary chambers were very prominent, and the cerebral sulci were flattened.

In fact the child was also seen by us, on 28.6.03, when parents were desperately taking him to one

doctor to another, since some Doctor told them if they will not go for immediate surgery, the child will die any time within 11 hours.

I prescribed him *Natrum-mur* followed by *Apis* on 28.6.03. The criteria for prescription were prominent proptosis and brain cry, and with the history of 3 live vaccines at a time. The intercurrent remedy was *Thuja*. They did not continue and returned only on 7.7.03, since they didn't want to go for surgery. Neurosurgeons wanted to open his skull, as the final option. According to them the child's brain was already dead and the surgery was only palliative and was very, very expensive. Therefore the parents had no other choice than to go for alternative therapy.

Then there was a long battle fighting for his survival, the remedies which helped as per the symptoms were *Zincum-met*, *Iodium*, *Silicea* and various other. But the remedy, which helped him maximum and brought down the tumour like structure, was specific nosodes, (Nosode I and Nosode X) in which Nosode X (*OPV-Num*) was in repeated doses, which brought his BCG scar out by raising his immunity! **After that the child showed improvements with all his milestones, could stand and walk with support.**



OPV-Num has been given to him previously in molecular dilution repeatedly, every alternate week with some other medicines as per the situations as described above.

He completed five years this September and is having no complications. His behaviour and milestones are just like a normal child. The abnormality of head is decreased to normal. He is absolutely fine like a normal sibling, eating, playing and doing whatever he likes. His favourite is Adnan Samee, sings his songs.



He visited us in November, normal in all respects except his leg shakes while standing as a year old child experiences while learning to stand. He tries to hold something as if he would fall. This shaking is still persisting. He is still under observation and *OPV-Num* in molecular dilution (as a preventive to bring out exanthematic tuberculosis type of discharges) is the only remedy he is taking along with some bio-chemic medicines.



Al-Faran: Recently photographed, is 5 year old now.