

CLINICAL TESTIMONY ON DIABETES

R.S. Rastogi, B.A., M.D.H.

A few cases are cited below from the author's case records to give the reader an idea of the efficacy of Homoeopathy in diabetic conditions.

Case 1—Jan. 1938. Mr...., a judicial officer, had been suffering for about 2 months from an abscess on the left leg ; about two and a half inches above the abscess opening was a pouch connected with the opening by a canal ; when the pouch was pressed from above, its contents, thin bloody pus, were discharged through the opening below. The patient was passing 7½% sugar. The usual orthodox treatment of fomentations and Magnesium Sulph. paste externally, and Pan Mellitus and Prontosil internally, was being given. The surgeon was insistent upon the patient taking leave and undergoing an operation so that the pouch and the canal could be opened and medicine applied.

The patient was sensitive to cold, and for the last few years often remained constipated ; not much thirst ; liked moderately cold water. His diet had already been sufficiently curtailed ; so no further curtailment was attempted.

Silica 200. was administered, two doses with an interval of 10 days. After the very first dose the sugar started coming down and the patient soon started feeling better generally ; after about 20 days of treatment the sugar was found to be between 1 and 2 per cent. The inflammation started subsiding from the very next day of starting the treatment ; the colour of the surrounding skin soon became normal. After 3 weeks a dose of *Silica* 1000. was given followed by steady improvement. In the beginning of the 5th week, the sugar was to be found generally in traces, and at the close of the 5th week there was hardly any discharge from the abscess. The patient had put on some flesh and felt much

better and stronger. About the middle of the 7th week, another dose of *Silica* 1000. was administered and that was all. In a little over two months, the leg was completely healed, with all round general improvement in his health. The patient did not take any leave and had all through been performing his official duties with full efficiency.

No external treatment was given ; only a protective dressing of sterile gauze was used. Urine was frequently examined to keep a watch on sugar.

Case 2—Feb. 1950. Mr....., aged 41 years, short-saturated, quite fat, sensitive to heat, mild and gentle disposition, has been a diabetic for over twelve years. Started developing a hard painful swelling in the natal cleft, which rapidly increased in area and left no doubt that a carbuncle was forming. *Rhus tox.* 30. was tried but with little or no improvement. The third day, the patient developed a diarrhoea as a result of eating very rich and fatty food, and also started developing a sty in the right eye. He was given *Pulsatilla* 30. three times a day for two days with complete cure of the diarrhoea and the sty, and much improvement as regards the carbuncle. It was continued twice a day for another three days and *no trace of the carbuncle was left.*

Can you imagine the consequences if the carbuncle had not been aborted by the homoeopathic remedy, and if it had developed in the ordinary course and needed a surgical operation ? A stitch in time saves nine.

Case 3—January 1950. Mrs....., aged 45 years, lean and thin, discovered herself to be a diabetic about 2 years ago. Has had a tendency to get boils and carbuncles. For the last few months has been having *Silica* 200. and later *Silica* 1000. in infrequent doses, but the tendency still persists. Now she has come in for a large abscess on the thenar eminence of right hand; complains of severe throbbing pains which keep her awake nights; the affected area is very sensitive to touch. *Hepar sulph.* 200. failed to make any difference. Now there appeared a swelling in

the vagina with much pain and a burning in the hand abscess also, which she had forgotten to state earlier *Arsenic alb.* 30. was given in four hourly doses with great relief in both the swellings within the first 24 hours. It was continued three times a day and later twice a day, off and on, for about sixteen days, with complete subsidence of both the swellings. A little pain and burning sensation persisted in the hand abscess for which a dose of *Ars. alb.* 200. was given to give the finishing touch.

After this the patient has not had any abscess or carbuncles so far which she had been having almost every month, and she has also put on a little flesh, feels more energetic and look much healthier.

Case 4—March 1947. Dr....., fat and flabby, aged 39 years, has been a diabetic for a number of years. Had a fall in August 1946 and injured the ulnar side of his right wrist. The acute pain and swelling subsided, but he continued to feel pain while writing or when the part was pressed. In December 1946 the part was put under plaster of Paris to make it immobile and give it rest, but to no advantage. In March 1947, the pain suddenly increased after he had taken a dose of *Lycopodium* 200. for some other complaints. A surgical operation was considered inevitable, and to prepare the patient the surgeon ordered him to be put on *Insulin* to make him sugar free, and on *Cibazol*, 2 tablets three times a day. For the sake of precaution, blood sugar was examined after 3 days of this treatment and was found to be within normal limits. The operation was performed under local anaesthesia, penicillin was dusted in to the wound, and every possible care was taken to ensure success. On the 7th day when the dressings were removed to take out the stitches, the surgeon found that the wound had not healed properly and that there was a discharge from a small portion between to stitches. When after careful treatment for some days (including penicillin and Sulpha thiazol locally), the wound continued to show the non-healing tendency, in spite of keeping the urine and blood sugar under strict control all through from before the operation, the surgeon naturally

became anxious, and with his consent, homoeopathic treatment was resorted to. The first dose of *Silica* 200., prescribed on constitutional indications, made a very perceptible difference within two days. Weekly doses were continued, not in any routine way but because the patient's condition called for the medicine at such intervals. Complete healing took about 2 months.

The patient had a typical *Silica constitution* : faint-hearted, lack of stamina, sensitive to cold, perspired a lot on forehead and face, and also had offensive footwear; skin injuries took a long time to heal.

Case 5—May 1938. Mrs.... very fat, aged 61 years. Much debilitated; movements very clumsy; wept at trifles; could not even give her symptoms without weeping. Has been a diabetic since 1925. In July 1933, got an abscess near anus which was operated upon and healed in about 2 months. In December 1933, consulted a homoeopath for her ill health, complaining of diabets, burning and great restlessness in her legs and feet with a desire to have them pressed, much thirst and great general debility. He gave her a dose of *Sulphur* 200., and the same evening she got fever and cough. She was told that it was a reaction which would automatically pass off in about three days. The fever and cough got more and more severe till on the 6th day her husband was obliged to call in an allopathic physician who after a microscopic examination of the sputum declared it to be a case of tuberculosis. When after about ten days' treatment her condition showed no satisfactory improvement, her husband was advised to have the trouble undone by a homoeopath. Under homoeopathic treatment, mainly *Pulsatilla*, she came round gradually. Has been growing weaker, and weaker. Has been passing about 3 per cent sugar, and albumin in urine quite some time. Since January 1937, she has occasionally felt breathing difficulty which had been ascribed earlier to kidney disease, and for the last few months to heart disease. Off and on for the last few months she has had a dry, hacking cough worse on lying down. Has got heart disease for about a year and a half. Pulse rate 105 per minute. Blood pressure high.

The condition for which I was called upon to treat her on 15th May, 1938 was as follows :

For the last two days she has had a very tormenting dry cough which has been almost incessant ; little expectoration of greenish-yellow colour be raised with great difficulty and made her gag and vomit it out. Cough and dyspnoea make it impossible for her to lie down. Fever varies between 100° in the morning and 103° in the afternoon. Has been sitting up for the last two days and two nights. Feels much restlessness in her feet, and wants to have them pressed. Several times during examination she burst into tears. Considerable oedema on the feet and ankles. Has passed about 1 ounce urine during the last 24 hours. Stinging pains here and there, especially in the feet. Delirious ; sometimes talks without sense, but mostly keeps on muttering "Oh what shall I do, my feet, my feet."

Apis and *Spongia* failed to bring about relief.

On the 19th May, 1950, *Pulsatilla* 200. was given with the result that all round improvement commenced from the very next day.

22.5.38. Patient steadily improving. Yesterday the temperature ranged between 98.4 and 99.6. Quantity of urine has been steadily increasing. Restlessness in the legs continues much less.

23.5.38. For the first time she could lie flat on the back for short periods, though had to wake up several times.

25.5.38. Can lie down for hours and can sleep well. No more stinging pains. Expectoration free and easy. Urine sugar—traces only. Albumin much less than before.

26.5.38. Did not feel quite so comfortable in the night and had to sit up more often. She was given another dose of *Pulsatilla* 200.

27.5.38. Restlessness in the legs much increased. Feels as if her disease was relapsing. No medicine was given.

31.5. 38 Steadily improving. Passing large quantities of urine, feels light and happy. Pulse rate 82 per minute. Has never felt so well for more than a year.

In Nov. 1939, she again had a repetition of the same trouble more or less. She was persuaded by some friend to try allopathy again this time. The doctor came to the conclusion that the kidney trouble was secondary to the heart, and gave her an injection of Salyrgan (a mercurial diuretic), which so much irritated the kidneys that instead of increasing in quantity, the urine totally stopped.

She now demanded homoeopathic treatment again, but it could not give her new kidneys. It could only relieve her sufferings to enable her to die somewhat peacefully.

Dehra Dun, U. P., India

[*Courtesy : The Homoeopathic Recorder, May 1951*]

□ □ □

FOR SALE

Transactions of the XXXII International Homoeopathic Medical Congress	Rs. 40'00
Souvenir of the XXXII International Homoeopathic Medical Congress	20'00

(Postage Rs. 4.00 extra)

Contact :

M/S HARJEET & Co.

Post Box 5752

New Delhi-110055