

The Role of Homeopathy in Surgical Cases

Dr. Pawan Pareek, BHMS

Abstract: Homeopathy as both an adjunct and alternative method of treatment to surgery is discussed. Two cases, one of hydrocephalus, the other of coma following a hemorrhagic stroke, that responded favorably to homeopathy in lieu of surgery are presented.

Keywords: surgery, homeopathy as adjunctive treatment; surgery, homeopathy as an alternative to; hydrocephalus, cerebrovascular accident, coma, pseudobulbar palsy following CVA; *Zincum metallicum, Arsenicum album, Opium, Ignatia, Bothrops lanceolatus.*

A Few Brief Highlights in the History of Surgery

The first surgical procedures were performed in the Neolithic Age (about 10,000 to 6000 B.C.). Trepanning, a procedure in which a hole is drilled in the skull to relieve pressure on the brain, may have been performed as early as 8000 B.C.

In ancient India, evidence suggests that plastic surgery made its appearance as early as 2000 B.C., rendered necessary by the then in vogue punishment of cutting off a person's nose or ears for certain criminal offenses.

In the fourth century B.C., the Greek physician Hippocrates published descriptions of various surgical procedures, such as the treatment of fractures and skull injuries.

French surgeon Ambrose Pare, successfully employed the method of ligating, or tying off, arteries to control bleeding, thus eliminating the old method of cauterizing the bleeding part with a red-hot iron or boiling oil.

American surgeon Crawford W. Long used anesthesia in 1842 during the removal of tumors, but did not publish his results until 1849.

In 1865, the British surgeon Joseph Lister applied Pasteur's work to surgery, developing antiseptic techniques, including the use of a carbolic acid spray to kill germs in the operating room before surgery.

At the turn of the 20th century, when the German physicist Wilhelm Conrad Roentgen invented X rays in 1895 to "photograph" the inside of the body, he changed the way surgery was performed.

The first kidney transplants were performed in the 1950s, and the first heart transplant, in 1967, was performed by South African physician Christian Barnard.

Utilization of Homeopathic Medicine to Avoid Surgery

Below are a few of the frequently surgical conditions that homeopathic medicine has helped patients avoid:

- Appendicitis
- Benign Prostatic Hypertrophy
- Prostate Cancer
- Fissure
- Fistula
- Gangrene
- Hemorrhoids
- Hydrocephalus
- Osteomyelitis
- Renal calculi
- Tumors
- Urethral Stricture

Post-Surgical Efficacy of Homeopathic Medicine

Homeopathy has demonstrated its efficacy in the post-surgical setting for the following conditions/settings:

- Surgical flatulence
- Post-operative pains
- Adverse effects of anaesthesia
- Septic fever
- Recurrence of tumors, renal or ureteric calculi
- Uterine hemorrhage after Dilatation & Curettage
- Bed sores
- Hemorrhage
- Surgical shock
- Jaundice
- After organ transplantation

Usefulness of Homeopathy for Pre-surgical Emotional Distress

Many patients experience anxiety, fear, insomnia, high blood pressure, etc. before surgery. In such circumstances homeopathic medicine – including such remedies as *Aconitum*, *Arsenicum album*, *Argentum nitricum*, *Crategus oxycantha*, *Gelsemium*, *Kali phosphoricum*, *Passiflora incarnata* - plays a vital role before (and after) surgery by stabilizing the central nervous system when an operation is required.

Cooperation between the homeopathic physician and surgeon can both eliminate a large number of surgeries and lessen the incidence of post-surgical complications and discomfort.

Limitations of Homeopathy

No single medical methodology is capable of meeting every medical need; even homeopathy has its limitations. Applying homeopathy injudiciously by either unwittingly or intentionally attempting to treat serious, urgent surgical conditions runs the real risk of causing significant complications and catastrophic outcomes that would jeopardize the reputation of both the physician and homeopathy.

The following conditions consistently require surgical intervention.

- Large tumors.
- Large renal calculi.
- Intestinal obstruction.
- Congenital deformities.
- Compound fractures.
- Appendicitis threatening suppuration.

Dr. Stuart Close once remarked: "I cannot be charged with having undue leaning towards surgery, but there are times and place where good, skillful surgery is an absolute necessity.... We must acknowledge that we have limitation."

Misuse of Surgery

The relative ease and safety of surgery has led to significant abuses and misapplications. The list is rather long of conditions oft treated surgically that homeopathic treatment is quite capable of successfully curing or, at the least, alleviating to a great extent. Below is an incomplete list of such conditions:

- Small to medium size tumors
- Gangrene
- Hydrocephalus
- Sinusitis
- Tonsillitis
- Vocal cord nodules
- Benign mammary tumors
- Benign prostatic hypertrophy
- Renal calculi, etc.

Illustrations of the Homeopathic Approach to Surgical Cases

Two cases are here presented illustrating homeopathy's impressive efficacy in conditions that would otherwise have resulted in surgery.

Case 1

A six month-old, only child presented with hydrocephalus and otorrhoea. He was under the treatment of a neurologist and, earlier, an otolaryngologist, whose ministrations has managed to completely stop an ear discharge. In spite of the best efforts of the neurologist, the size of the head was increasing, with downward deviation of the eyes, and there was some slight evidence of seizure activity.

Past History: Recurrent colds and cough since immediately after birth.

Family History: Sister died of hydrocephalus at the age of five.

Investigation before Treatment

CT Scan demonstrated the third, fourth, and both lateral ventricles to be dilated. The rest of the cerebral parenchyma showed a normal attenuation pattern. Basal ganglia and thalami were normal. No midline shift was seen. The cerebellum and brain stem were normal. Basal cisterns and sylvian fissures were normal; cortical sulci normal; calvarium intact.

Impression: Hydrocephalus

The parents sought the expert opinion of a neurosurgeon, who advised the surgical placement of a ventricular shunt. The child's mother, having been made aware of the potential complications of shunting – insufficient or excessive drainage via the shunt, impaired cognitive and/or physical development, etc. – opted to try homeopathic medicine. In the meantime, as she was making her decision, the child was prescribed antibiotics for a high fever, which then subsided only to be succeeded by unconsciousness.

Homeopathy in the Neurosurgical Ward

March 17, 2006

The patient presented with the following symptoms at the time of the first consultation:

- The patient was completely unconscious.
- Head enlarged, mild swelling of the face.
- Eyes half closed and squinting.
- Lying on back and sliding in bed.
- Trembling and twitching all over the body; had to be held.
- Pulse intermittent and uncountable.
- Urine scanty.
- Extremities cold to touch.

Prescription: *Zincum metallicum* 200 C, single dose in drops, sublingual.

Four days later:

Otorrhoea appeared within half an hour, and the child

turned down his eyes and cried as if hungry.

Milk was administered via tube, of which 150 ml was swallowed, the first nourishment taken after days of unconsciousness.

The patient regained consciousness and his facial expression improved.

Swelling on face and head remained the same.

Urine continued to be scanty.

Trembling all over the body subsided, but fidgetiness of the feet persisted.

Prescription: Zincum metallicum 200C repeated

Seven days later:

Restlessness had developed.

Face bloated, head enlarged.

Thirsty: withdraws mouth from breast and sips water.

Urine scanty.

Painless offensive stool < after feedings.

Chilly.

Prescription: Arsenicum album 200 C weekly, at bed time.

Soon thereafter, the swelling over the face disappeared and the size of the patient's head reduced. Thirst had become normal, and urination more normal.

The restlessness was very much reduced.

Prescription: Arsenicum album 200 C weekly, at bedtime, was continued for two months.

13.6.2006: A CT Scan performed on this day, during treatment with *Arsenicum album*, revealed the lateral and third ventricles to be only mildly dilated.

The child did not return to the clinic for some time. In the meantime, he developed a severe cold and cough, and was on allopathic drugs to get quick relief.

Prescription: Bacillinum 200, a single dose, was prescribed on his return. Then *Arsenicum album 200* was resumed after fifteen days.

Investigation after Treatment

April 24, 2007

CT Scan Report: Posterior Fossa: fourth ventricle normal in size, shape and location. Region of brain stem and cerebral hemispheres normal. Perimesencephalic cisterns normal.

Supratentorial Compartment: Cerebral parenchyma revealed a normal attenuation value. Lateral ventricles prominent with septum in midline. Basal cisterns, sylvian fissures and sulci normal.

Impression: CT scan of the brain within normal limits.

Discussion

Homeopathy can easily alleviate emergency conditions, if and only if the homeopathic practitioner possesses a very good knowledge of the practical application of the *materia medica* and homeopathy's basic principles.

Zincum metallicum can cure the consequences of suppression and restore a suppressed eruption. *Zincum* also has a profound action on the cerebrospinal system.

Arsenicum album is our most important diuretic; it has been called a "liquid trocar."

Case 2

This is the case of an emotional lady, aged 68 years, with known hypertension. She was suffering from hysterical fits and sleeplessness. She was taking antihypertensive drugs and tranquilizers.

Past History: There was a history of grief as her daughter's marriage had ended in divorce seven years previously after a lengthy period of having been figuratively 'tortured' by her in-laws.

One day, while taking dinner, as the telephone rang, she suffered the following symptoms:

Intense pain in the head at the root of nose.

Uncontrollable laughter alternating with bursts of tears.

Choking on swallowed food.

Stertorous breathing.

Then the patient became completely unconscious, with involuntary flow of urine.

Paralysis of right side of the body followed.

MRI before Treatment

There was evidence of a large intracerebral hematoma measuring 4.3 x 3.0 cm in size in the left frontoparietal periventricular region and left anterior centrum semiovale. Age-related diffuse cerebral atrophy was noted.

Laboratory Findings

Hemoglobin: 11.2. WBC: 11,800 (Neutrophils 87%, Lymphocytes 10%, Eosinophils 0, Monocytes 3%).

BUN: 41.8, Creatinine: 0.95, Sodium: 149.1, Potassium: 3.54, Calcium: 9.58, Total Cholesterol: 246, Triglycerides: 94 (HDL: 42.9, LDL: 153, VLDL: 18.8)

In spite of her attending physicians' best efforts, her condition deteriorated. Her neurologist informed the attending physician that the patient might or might not recover, and that the risks of paralysis or other neurological impairment if surgery were attempted was too great to consider a surgical option. Homeopathy was therefore considered.

On Admission to ICU

The patient was completely unconscious and had been for the preceding seventeen days.

Eyes half closed (retinal hemorrhage).

Spasmodic facial twitching, especially the corner of the mouth.

Stertorous breathing.

Feet and extremities hot to touch.

Prescription: Opium 200, single dose sublingually.

No response was noted after waiting for whole one day.

Prescription: Opium 1M, single dose sublingually.

Patient in a Semiconscious State

After *Opium* 1M the patient became semi-conscious. Additional signs and symptoms noted were:

Tears from the eyes on seeing her divorced daughter.
Retinal hemorrhage.

Face blue.

Twitching of the muscles of face and eyes.

Thumbs clenched.

Prescription: Ignatia 1M was prescribed.

Consciousness Restored

The patient's consciousness became fully restored after the *Ignatia*. The tearfulness and twitching subsided, the thumbs unclenched, and the following was noted:

Stupefied facial expression.

Retinal hemorrhage persisted.

Unable to open the right eye.

Swallowing and speech was difficult; drinks dribbled from the right side of the mouth.

Paralysis of the *right* side of the body.

Prescription: Bothrops lanceolatus 200, weekly, at bed time was prescribed.

After Four Weeks of Treatment

Retinal hemorrhage resolved.

The patient began sitting up and was able to talk with difficulty.

Liquids no longer escaped from the mouth.

Paralysis began improving.

Prescription: Bothrops lanceolatus 200 continued.

Investigation after Treatment (MRI Report)

Sub-acute infarct in the left frontal lobe with generalized cerebral atrophy (age related).

On the Road of Recovery

The patient had been rescued from the very jaws of death, the neurologist and neurosurgeon surgeon having essentially surrendered by pronouncing the case basically hopeless.

Conclusion

One must never consider a case hopeless or incurable from the start. Patients usually respond rapidly and readily to proper homeopathic treatment. Many surgical operations are unnecessary and potentially harmful. Thus, in an ideal world, a homeopathic physician would be consulted in all surgical cases before a surgical option is finally decided upon.

About the Author: Dr. Pareek has been practicing homeopathy for sixteen years, with considerable experience in the treatment of brain tumors, cerebrovascular accidents, epilepsy, cirrhosis, renal failure, cancer, and, most recently, AIDS and surgical cases. He has published in several journals and participated in conferences around the world. He was awarded the 'Star of Excellence' by the Faculty of Homœopathy, Malaysia.

Email: drpawanpareek@rediffmail.com.

Website: www.drpawanhomeopathy.com.

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