

Using *Medorrhinum* LM Potency

Mrs Banerjee, 32 years, of Konnagar, Hooghly, W B, visited me on 12.05.2000. She was 12 weeks pregnant Her LMP was on 17.02.2000. Pregnancy test was positive.

CONSTITUTION: Slim and tall figure. Medium complexion. Hair black and thin. Second gravida.

PRESENT COMPLAINTS: Severe weakness. Vertigo. Heat in scalp. Pinching pain in the chest. < Movement, coughing, sneezing.

Burning sensation all over the body, except in head. Rolling sensation in the abdomen. Nausea. Anorexia. Ulcer in the nail bed. Appears in every rainy season. Pus formation, inflammation and pain in that ulcer. Pain all over the body. Occasionally backache. Continuous leucorrhoea, less during pregnancy.

GENERALITIES

Stool—Hard

Urine—Occasional burning. Reddish. Offensive.

Sweat—Excessive.

Sleep—Less.

Dream—Of snacks, friends, relatives.

Appetite—Less but excess earlier. Prefer green leaves.

Cravings for sour and piper. Like lukewarm food.

Thirst—Excess.

Sexual desire—Excess.

Thermal relation—Hot patient. Prefers winter and autumn. Rainy season brings Joint pain. Desire for open air. Like bathing regularly in cold water, even in winter.

MENTALS IN GENERAL

Temper—irritating. Memory—Weak.

Introverted. Likes to keep clean³.

Likes company and music.

PAST HISTORY



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No. Childhood and puberty without major complications. Sufferings after marriage.

At the age of 8-9 years, one boil was suppressed through injection.

Dysentery—once at the age of four.

Vaccination—taken one time.

Menstrual history—irregular. Some times excess. Color—generally reddish and watery, occasionally clotted and blackish in color.

History of leucorrhoea—since last 8-9 years, i.e. after marriage. Aggravates—before and after menstruation. Some times thick, sometimes watery, some times excoriated. Hot feeling during excretion.

FAMILY HISTORY

Father—Chronic dysentery, rheumatism.

Mother—Gout.

Husband—History of suppressed gonorrhoea.

ANALYSIS OF THE CASE

History of rheumatism, gout in the family indicative of sycotic diathesis. This state was further complicated by acquired sycosis from her husband (suppressed gonorrhoea). Boil suppressed by injection in childhood and some of the mental symptoms indicate the latent psoric state. So, it was a case of mixed miasm.

TREATMENT

12.05.2000. *Medorrhinum* – LM/6. One medicated globules No.10 mixed in 100ml of distilled water. Add 15-20 drops of alcohol for preservation. The phial divided into 8 equal doses. After 10 succussions, one dose to be mixed in 3/4th glass of H₂O. From that solution, only two teaspoon was taken in the morning in empty stomach, every 48 hourly. Advised to report after two weeks.

03.06.2000. Improvement continued. *Medorrhinum* –LM/7. Mode of preparation and administration was same.

24.06.2000. No complain regarding leucorrhoea,

sleep, appetite, urine and stool. Weakness reduced. *Placebo*—LM/0. 10 doses in 100 ml of D.W. One dose daily.

13.07.2000. More improvement. *Placebo* LM/0.

02.08.2000. Burning during urination again reappeared. *Medorrhinum*—LM/8. The process of application was same.

27.08.2000. Improvement—90%. *Placebo* LM/0.

14.09.2000. Apthae since last 2-3 days. Burning sensation all over the body. Offensive breath.

Sulphur—LM/3, LM/4. 8 doses in 100 ml of D.W. One dose daily morning after diluted as before.

13.10.2000. No such problem. *Sulphur*—LM/5. One dose in every 48 hour.

04.11.2000. Improvement in all respect. *Sulphur*—LM/6. Mode of administration was same.

28.11.2000.

“My wife delivered a male baby without any noticeable trouble on last 23rd November. At that time she felt more comfort then previous one. The health of the baby is also good in comparison to the eldest one.”

Report of her husband.

Arnica-montana—LM/3, LM/4. 8 doses each in 100 ml vial. TDS x 2 days and BD x 3 days and rest OD.

COMMENTS

Based on my 14 years clinical experience, I can say confidently—LM potency is the safest. We can cure the sufferings without any fear of medicinal aggravation. She was a pregnant women. We must avoid any danger that might happen at that stage. So, I used the dose in more diluted form. If we would apply low potency nosodes, there would be possibility of aggravation. So, LM/6 potency of *Medorrhinum* was used.

Hering's Law Demonstrated

One of my early experiences which convinced me about truth of Hering's law was after administration of Medorrhinum by appearance of Menses and Suppressed Eczema after Medorrhinum.

This case, therefore, occupies a special position in my education and I would like to share it with all.

A 14 year old Keralite Christian girl was brought to me for asthma by her mother. I had selected *Calc-iod* as her constitutional & *Ars-iod* as her acute.

During the first week of treatment itself she developed an acute exacerbation which did not respond to *Ars-iod*. On further enquiry her breathlessness was relieved in knee chest position. I gave her a dose of *Medorrhinum* 200 at bedtime. This was followed by

relief of breathlessness along with appearance of first menses on the very next day. (Can we say that she had a relatively delayed menarche & *Medorrhinum* facilitated the menarche?) She also developed weeping eczema on her foot in next 2-3 days. The mother informed that the girl had eczema in childhood. It had disappeared after local application of herbal medicine at the age of 5. Patient's asthma had started after this event.

A single dose of *Medorrhinum* had brought back old skin complaint suppressed 9 years ago by local application! The patient was kept on placebo for 3 weeks during which the eczema cleared up along with the asthma.

Unfortunately I lost track of this case as this patient subsequently developed pulmonary tuberculosis & was put on Anti Koch's Therapy.

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