



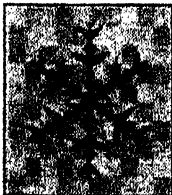
Emergencies in Homoeopathy: A Case

[EDITOR- INTRODUCTION: We have a unique set-up- a hospital in the Rural area which is Homoeopathic with access to the Allopathic mode and intervention. Our USP is handling emergencies. This facility is non-existent probably, in the rest of the world. Even senior Homoeopaths who treat many and varied cases and may even handle an emergency in the middle of the night, but not in this set-up with all facilities of doctors round the clock and help of emergency measures.

We want to give you cases of no miracle and unique drugs but actual day-to-day drugs, which wrought miracles when used rightly.

Our latest in the series was when a pair of children were brought in at 1 am, in serious state, having vomited for 12 times in last 2 hrs. in a state of Grade 2 dehydration. IV fluids were started immediately. Our hospital was chosen not out of choice but out of having no other choice and these were sent out with firmest belief in Homoeopathy and its efficacy in Homoeopathic system. If we could just produce this faith in our students All India, then the battle of Homoeopaths straying would be won forever. Handling is the key and therefore we are going to describe such emergency cases, where lives are saved and reputations made].

I had just completed my internship and had joined Palghar hospital as part of ICR Training. The incidence which I am going to share with you is the one which has touched me emotionally as well as motivated me and bound me to Homoeopathy forever.. There was an emergency call at 1.00 am at night ... around 5 to 6



DR NAVIN PAWASKAR - CONSULTANT
DR DIPTI THAKKER - RESIDENT
 The ML Dhawale Memorial Trust's
 Homoeopathic Hospital,
 Palghar
 Tel: 952525- 56933

people entered the casualty at Palghar Hospital in a panic state. . . two small children, a boy 4 y and his sister 7 1/2 were carried in. The boy was very drowsy, dull and had a toxic look; he was carried in, in an almost collapsed condition. He was passing involuntary stools and was vomiting since 2 hrs.

His sister was also having diarrhoea 6-7 and 3-6 vomits, weak, exhausted, Grade 2 dehydration, but comparatively less than her brother.

HISTORY: They were actually tourists who had come from Pune just 1-2 days back. That day in the evening both the children had eaten a lots of fruits, bhel, oily food etc. At around 11.00 pm they suddenly started having severe loose motions and vomiting. The boy had already passed around 20 motions and 10 vomits. The parents became very panicky as they were new to the place and even the relatives were not much aware of the medical facilities available. In this situation, some one told them about our hospital; only due to necessity having no other option that they came here. The father was terribly anxious; he did not know anything about homoeopathic treatment and he was petrified he would lose his son.

In such a situation, the casualty officer attended the case, took the basic history, examined the boy.

FINDINGS: Dehydration Gr II -III, tachycardia, tender abdomen. Respiratory system normal. Child conscious but drowsy, responding to oral commands with difficulty. He called the resident homeopathic consultant and reported the findings. The patient was advised immediate admission. IV Fluids were immediately started as grade II dehydration +, to replenish loss of fluids. At the same time the parents were reassured as well as made aware of the guarded prognosis of the case that if the child did not pass urine till the next morning he may go into renal shutdown.

On the basis of the acute totality available at that



moment i.e.:

1. A/F food poisoning (fruits, bhel, oily food.)
2. Rapid pace of the disease
3. Prostration³⁺
4. Vomiting-profuse.
5. Stools-watery³⁺, profuse³⁺, painless³⁺, involuntary³⁺.

The boy was given *Arsenic-album* 200 repeatedly on the above indications. (The follow up criteria was as follows: *weakness, general look, thirst, appetite, vomiting-intensity & frequency, stools-intensity and frequency, urine output, skin turgor, temp, pulse*). By next day morning the child had passed only 1 stool & no vomiting since admission, passed urine once. The generals were also better- he was more alert.

The parents were very happy with Homeopathy, the hospital and the sincerity of the attending doctors. They feel converted to the hom system of Therapeutics. They are originally from Pune and will continue regular treatment from Pune Hospital of ICR. Then they expressed the desire to take homoeopathic medicines for the recurrent episodes of respiratory tract infection & high grade fever for which the boy had been hospitalized 3 times in the past. Along with my colleague, I started the case definition at around 9.30 pm, since they were to be discharged the next day. Their parents were co operative and were impressed about the sincerity and willingness to define the case at this hour. After defining the case *Tuberculinum-bovinum* 1M was given as a constitutional remedy. His sister was also treated with *Arsenic-album* 200 for the acute

episode and was given *Natrum-mur* 200 as the constitutional remedy.

AS FOR MY PART: This whole episode left an indelible mark on me. It was the greatest learning experience for me—seeing how one could use homoeopathic medicine in cases of acute emergencies effectively, if one is alert and proper training for handling emergency cases is taken. The cost effectiveness of homeopathy impressed the parents as they were traveling with limited cash. This kind of an experience is the best way to convert a non-believer to be a die-hard Homoeopathic follower in less than 48 hours. This was expressed in the form of a letter of gratitude by the father addressed to the hospital along with a small donation, which will stay as a source of inspiration and motivation for a long time to come. The journey which started at 1.00am at night with tremendous anxiety and apprehension in my mind, as I had hardly seen emergencies handled with homoeopathy, was followed by the realization that through proper training and gaining of competence in clinical assessments, ancillary measures, proper knowledge of *Materia-Medica*, susceptibility and posology one could even handle emergencies with homoeopathy: here it was that the medicine was commonly indicated one, maybe 90% Homoeopaths would have given it; importance was of posology and the auxiliary measures of drip etc, which could be started immediately. In 36 hrs the patient, who had come in a near-death situation, left the hospital walking on his own 2 feet with hardly any weakness, a time period rarely paralleled by any in the world!



**1...God won't ask what kind of car you drove;
He'll ask how many people you drove who didn't have transportation.**

**2...God won't ask the square footage of your house,
He'll ask how many people you welcomed into your home.**