

# I am left High and Dry...

*Abstract: This case is very well described and also the analytical reasoning of the different remedies just stimulates the brain thus giving an insight on how to select a remedy. Truly the correct way of learning.*



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## CHIEF COMPLAINTS

LOCATION OPD	SENSATION & PATHOLOGY	MODALITIES	CONCOMITANT
<b>RESPIRATORY SYSTEM</b> Since 6 years	Sneezing Coryza: watery, thin. Then cough; followed by scanty, whitish, sticky, difficult to get detached	< Change of weather <sup>2</sup> < Night < Midnight after <sup>3</sup> < 2 am - 4 am <sup>1</sup> < Cereals <sup>2</sup> < Talking from <sup>2</sup>	Lachrymation. Sleep disturbance. Mouth breathing. Bodyache. Wants to take rest. Dullness <sup>++</sup> Thirst increased, large quantity at long intervals. Humming like noise in ears. Heaviness of head. Hoarseness of voice. Throat soreness. Palpitation.
Last for 3/4 days Origin - Sudden	then Breathlessness Sensation of obstruction		
Rt nostril— Lt nostril			
<b>MIND</b> Since 1½ years	Depression	AF heart attack in '97 < any complaints	

## PATIENT AS A PERSON

APPEARANCE: Obesity, Short,

Hair: Balding

PERSPIRATION: Scanty

DESIRES: Meat<sup>1</sup>, Sweets<sup>2</sup>, Milk<sup>2</sup>, Warm Food<sup>1</sup>, Salty things<sup>1</sup>

ELIMINATIONS: H/O constipation with unsatisfying, hard stools

URINE: Burning since three months, < after micturition.

SLEEP: Duration - 10 pm - 6 am Unrefreshing.

Sleeps on left side. Awakes around 2 am

DREAMS: Fearful, daily routine. I am wandering somewhere in the jungle. I am running and someone is behind me. Are they tigers? And I am alone in a jungle. Lonely feeling and I have fear of being alone.

I have these dreams almost daily since 1989.

CVS: Nil ECG- Old infarct.

LIFE SPACE

I feel nervous, I don't want to work and I prefer to take rest or sleep. Usually when I am nervous, I watch TV especially cricket matches and news channel. But in the last 8-10 months, I don't have interest even in those things. 7-8 months ago my wife moved to her mother's house for delivery. She was complaining of weakness and was insisting to go to her parents, So I permitted her. I stayed at my home alone with my daughter.

I miss my wife a lot. I feel nervous, I feel alone and sad. In the last few days I am not able to even read because I have no interest in that. Since the last 10 months, I have no interest in my work too.

Body language: Downcast eyes. Slumped and



slouched body posture. Sighing.  
One day I felt formication in my legs. While I was standing I felt giddiness that was at 2:30 am I went to consult a specialist; he took me to an emergency room. I was diagnosed for heart attack at that time.

I and my wife are quarrelling about a lot of things. We don't have sexual relations. She doesn't like it. I feel very bad about that. I have a lot of sexual desire but my wife never responds. It is like this since the beginning of our marriage. Previously we used to have contact after 2-3 months. Now there are no contacts at all. This is the only reason of my sadness and also of my illness.

My wife never takes care of my family and me. She always wants to go to her mother's house. If I resist, she quarrels with me. She insults me. She is very straight forward.

I have no other choice except adjustment. Whenever my wife refuses I become restless. I am unable to sleep even when I feel need to sleep. I have spent many sleepless nights. I become angry but keep quiet. I am never angry on students. Sometimes I have high sexual desire but I have to suppress it because when she refuses, I feel insulted. I don't talk about this with anybody.

Now our quarrels are reduced because I am taking the submissive role. When my voice increases during quarrel, she becomes angrier. She is haughty, irritable and after this we do not talk for 10-15 days. That's why most of the time I am taking the submissive role. I adjust a lot. I hate her mother and father because they never think of me; they never send her home early when she is there. That's why I have a strong hostile feeling against my in-laws.

During my hostel days, I used to feel alone and homesick.

I have three brothers and one sister. In my family, my father was the only earning member. It was not sufficient for us and many of my demands were not fulfilled eg good clothes etc. Hence I used to feel inferior when compared to

others. When I got a job these feelings were reduced. Now I feel lonely and very sad. Whenever I feel alone, I read spiritual books or listen to some CDs of spiritual masters. I like them. I am quite emotional, especially about my family members. With my children, I don't have any problem. They are very close to my parents also. My wife and my parents are not on good terms. She doesn't talk properly to them. They are not talking with each other since 13 years. So my parents do not want to visit us, which makes me feel very bad that I can't give them back what they did for me.

I don't have lot of friends. I like solitude, but I feel alone. I can mix easily in group. But if I am alone, I feel sad. Since my illness I have become more anxious. I failed once in a college and became very sad and nervous. I am aloof since then. Again I failed in Diploma Engineering Course. So I left it and went to learn teaching course. After completion I got a job immediately. But these failures still torment me.

I had lot of friends in college. After failure I started avoiding them because now they have good jobs and they are rich. I feel behind, I feel inferior.

I want everything perfect. Sometimes this is the reason of quarrel between me and my wife. I am fastidious; I want everything neat and tidy. If things are not at the right place, I become irritable.

Everybody knows that I am a good teacher, I am never angry at students. I used to be angry in the past. I feel disturbed, when any work has not been done on time. I am anxious about students and completion of their syllabus. I am impatient, I do things in a hurried way like my work, walking, eating etc. I am hurried since childhood.

### **In a nut-shell**

- Aloneness feeling but desire to be alone
- Inferiority complex
- Anxiety, health about
- Neglected, rejected feeling
- Anger, suppressed

- Sex desire, suppressed
- Fastidious
- Hurried
- Submissive
- Sensitive, criticism to
- High sexual desire
- Hatred feeling towards wife and her parents
- Sadness

REACTIONS: PHYSICAL FACTORS

Weather - < damp wet weather = body ache, laziness

Air - cold air < coryza. Fanning < bodyache.

Bath - warm water throughout year.

Covering - winter - 1blanket + 1chaddar

Uncovering in summer

HISTORY (PERSONAL, PAST AND FAMILY)

P/H-1986 - Typhoid

1997 Myocardial infarction

F/H- Mother - Rheumatism

Father - Hypertension

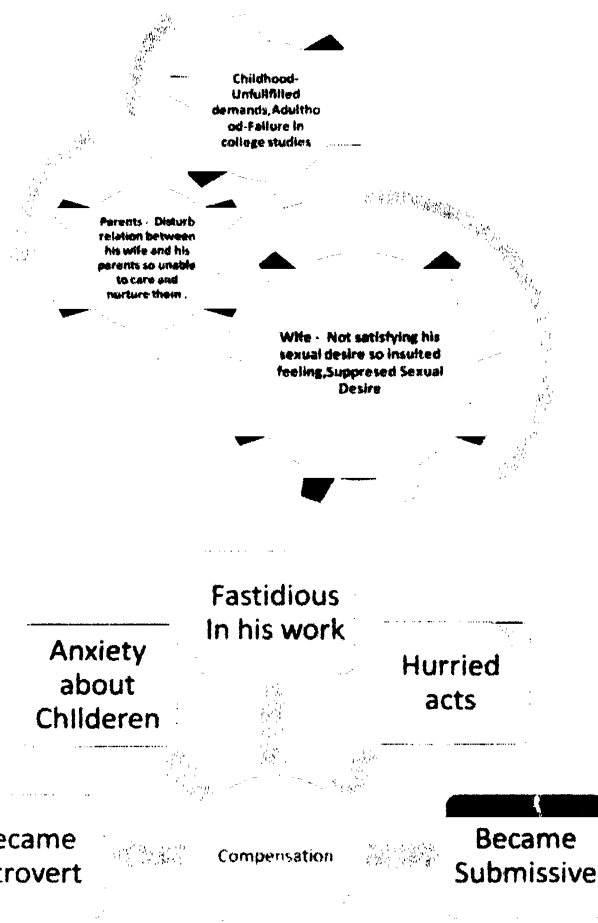
DISPOSITION

- Alone feeling
- Suppressed sexual desire
- Anger in
- Insulted feeling if sexual desire is not satisfied
- Introvert
- Unsatisfied demands in the childhood
- Feeling of low self esteem
- Caring about children
- Rejected feeling
- Alone feeling but desires solitude
- Hurried in acts
- Fastidious
- Hatred feeling towards wife and her parents
- High sexual desire
- Anxiety health about

EVOLUTION AS A PERSON

MIASM

Dominant Miasm is sycosis as the patient is suffering with chronic coryza with nasal obstruction, and h/o constipation. The past history of myocardial infarction was a syphilitic activity of episodic type. Patient recovered from it and is now in the syctic miasmatic influence.



ANALYSIS OF DATA

Here we find a sensitive person who is feeling low since childhood. Poverty during childhood appears to be a factor in the personality development. He used to compare himself with rich peers and used to identify himself as the inferior one. The seeds of depression and aloneness have been reaped during the tender age group.

After marriage there is a gap between his expectations as a human being and dispositions of his wife. The wife is unable to fulfill his needs and she has not the emotional stuff of caring this individual. It seems she has attachment towards the parents even now, after many years of marriage, he want to be in the same parental nest. She has not become an integral



part of husband's house. Moreover, she has no interest in sex. Wife appears more like a *Sepia* lady, dry and drab.

There is suppression of emotions in the case and this relates more to sexual type. The temperament is melancholic and the patient takes all this as a rejected feeling coupled with depression. The energy level is poor and now he doesn't find interest in day to day activities. In addition to suppression the patient has disposition to anxiety. There is insecurity related to whether wife will return back from her parental home. The chronic unfavorable atmosphere finally took its toll to allow the patient to land in myocardial infarction.

This case is a vivid example of Symbolic language of heart as an organ related to love as an emotion.

### RUBRICS

1. Forsaken
2. Mind, reserved
3. Mind, anxiety, health about
4. Mind, company, aversion to
5. Male, sexual desire suppressed, ailments from
6. Coryza, < night
7. Desires-meat
8. Desires-warm food
9. Desires-salty food

### REPERTORIZAZION

*Aur* 10/4, *Calc* 16/8, *Phos* 18/8, *Ph-ac* 12/6, *Puls* 16/5, *Nat-m* 13/6, *Nit-ac* 13/6, *Arg-n* 11/5, *Ars* 14/5, *Carb-v* 11/6, *Sil* 8/6, *Nux-v* 9/5, *Staph* 14/6, *Con* 10/4, *Lyc* 16/6, *Mag-c* 8/4, *Nat-c* 12/5, *Plat* 11/4, *Aur-m-n* 15/6, *Cycl* 10/5, *Germ* 10/4

### REMEDY SELECTION

*Aur*, *Phos-ac*, *Staph* and *Con* come close for differentiation. *Aur* goes for self-aggrandizement and renders two responses – the depressive melancholy culminating into suicidal disposition and the violent anger. Although the patient has melancholy, it has not evolved into the *Aur* state. Further, *Aur* is not yielding in disposition. In view of myocardial infarction in the past and

chronic depressive state, *Aur* has to be kept as a standby in this case. *Phos-ac* ranks high owing to indifference, sexual desire increased and ailments from suppressed sexual desire. Our patient also says, "in the last few days I am not able even to read because I have no interest in that. Since the last 10 months, I have no interest in my work too." But note that he says about having no interest in a depressed emotional tone, but he is doing his job with interest. The drive has not been hampered to the extent of the state of *Phos-ac* "Wants nothing and cares for nothing" is the evolution in *Phos-ac*. over the years of torture. Further *Phos-ac*. has no yielding disposition. *Staph* gets projected due to humiliated feeling and chronic anger. The identification of love with sex is a strong feature of *Staph*. But there are two types of *Staph* states – the sweet *Staph* that looks like *Puls* and the wild *Staph*. that resembles *Acid-nit*. *Staph* can't remain in mild and yielding state for long and becomes wild. There is want of self-control and violent outbursts of passion. This patient has coverage of 'ailments from' of *Staph*, but the behavioral response over the long period with wife, essentially, of sheepishness, is not the cup of tea of *Staph*.

The chief issue is the sexual sphere. The whole case revolves around sex and patient's identification of pleasure is sex. But behind sex, there is a strong need of intimacy and behind it is a strong feeling of being rejected. This issue combined with the following data shifts the case towards *Conium*.

- High sexual desire.
- Ailments from suppressed sexual desire.
- Rejected feeling.
- Suppressed anger.
- Sheepishness.
- Anxiety as a disposition.
- Hurried.
- Ego-atrophic response.
- A strong action on the heart.

(ABSTRACT FROM "A SELECT MATERIA MEDICA" BY P ISHWARDAS TARKAS AND AJIT KULKARNI).

*Conium* was also confirmed through body language. The patient presented himself constantly in fugitive mode, in the initial interview and in the subsequent follow-up interviews too. This was surely a sign of sheepishness which was the main feature of this case and of the *Conium* state.

(The fugitive mode reflects the disinterest, apathy, rejection or depression. Many melancholic, depressed and anxious patients manifest the gestures of fugitive mode. The fugitive mode is a good parameter of assessing low energy level of the patient).

Cues of the fugitive mode

- Glancing often at watch or other objects
- Sighing
- Yawning
- Fiddling with pen, eyeglasses, paper etc.
- Doodling
- Shifting weight
- Rolling the eyes
- Stretching
- Picking at fingernails or imaginary lint
- Pointing the body away from the other person
- Low tone of voice
- Relaxed, slumped or slackened body
- Downcast eyes
- Inattention to hygiene and dress
- Becoming silent
- Coughing nervously
- Clearing the throat
- Wringing the hands

(From Dr. Aji Kulkarni's book on "Body Language and homoeopathy")

#### POSICOLOGY

This is a psycho-somatic case. The dominant miasm is sycotic. But we must focus in this case on maintaining cause. This is related to his sexual sphere. Further, there are ample qualified mental symptoms in this case.

Although the patient showed myocardial infarction in the past we must remember that this is a past injury incidence in his life and no more the system has shown any syphilitic pathologies after the incidence. Hence it is not necessary to select a potency of low type.

Hence, *Conium* has been selected as a constitutional remedy to be given as a single dose in 1M potency.

#### Follow-Up

The patient was followed up for over two years. He was prescribed 3 doses of *Conium* 1M over a period of two years as and when necessary.

He showed improvement at all levels. His all physical complaints were reduced a lot. Previously he used to get up at night due to respiratory complaints and also there used to be sleep disturbances. They improved after the remedy. The recurrent cough spasms (were they due to attention seeking?) reduced gradually. There was appreciable change in his slouching body posture. His low tone voice was changed and we were able to see that he now talks in a more determining way.

His sensitivity towards wife was reduced gradually. In the subsequent follow-ups, he told me that he don't bother much about the wife's behavior. "I have my own life and I must find my own way of joy."

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*Every time you acquire a new interest, even more, a new accomplishment, you increase your power of life.*

*One of the greatest things about life is not so much where we stand as what direction we are going.*

*Appreciation can make a day - even change a life. Your willingness to put it into words is all that is necessary*

