



Synopsis of Other Journals

HOMEOPATHY TODAY: Vol 23, March 2003.

Theme of issue: **MENOPAUSE:**

Apart from the commonly used *Sepia*, *Lachesis* and *Natrum*, Dr Dooley, Dr Castro and Dr Master mention other medicines in their articles.

a) *Glonoine*: Sudden, hot flushes with upward rush of blood and palpitation. Also nausea and fainting feeling. In mentals – often forgets things and scared to go out alone.

b) *Sanguinaria*: Burning heat, less violent than *Glonoine* and not as weak as *Sepia*.

c) *Sulphur*: The feet are hot, craving for sweets and hunger in the morning. Weepy and feels out of touch with people.

d) *Amyl-nitrate*: Drenching sweats, tremendous anxiety. The cause may be emotional excitement or grief. Extremely fearful and feeling that something horrible is going to happen. Requires a lot of support.

e) *Trilium*: Anxiety with restlessness. Often there will be uterine hemorrhage.

f) *Asteria-rubens*: Estranged during menopause. Emotional upsets or conflict with family members. Delirium stems from low self esteem and poor body image.

g) *Androctonus*: When Anxiety with fear during menopause is prominent, this is the first remedy to be considered. The cause may be sexual abuse, persecuted at work or not being appreciated. Forsaken feeling, feels alone and like a stranger. Feels I am not strong enough to fight, how will I face the world? < 10 pm and midnight.

h) *Cyclamen*: Indifference, apathy in menopause, strong

desire to live a perfect, meticulous, duty conscious life but while doing so, turns hypersensitive to slightest mistake or defect. Tendency to paint a darker picture of situations facing her guilt and self reproach. Bears moral responsibility for the world. 'Delusion – neglected their duty'. 'Delusion – committed a crime'. H/o heavy flow, less thirst, or well as aversion to fat.

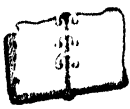
RUINS A WHOLE FAMILY - Dr Dooly in his article also mentions that HRT study in US that was to continue for 8 years, was stopped within 5 years, as the women taking actual hormone were at increased risk of breast cancer, stroke, heart disease and pulmonary embolus. Women were angry because they had been convinced by their health care providers that they would be irresponsible if they did not take HRT.

Dr BONNIE ROTENBERG: When she was diagnosed with CA uterus, she resorted to *Aurum-met*. The cancer did not increase, when the surgery was scheduled, *Arnica* for some bruised feeling, *Phosphorus* for raised and *Staphysagria* when pain became stabbing. These three medicines completely eliminated the need for a pain killer.

An interesting letter by Randall Neustadter initiates a healthy debate on vaccination. He feels a further scrutiny is required regarding Dr Hoover's article on small-pox vaccination and its efficacy. His points are: a) Reliable data are sparse as to efficacy and durability of protection afforded by vaccines. b) Number of victims who had never received small-pox vaccine was nearly equivalent to the number of cases with a history of vaccination in the previous 10 years. c) There is abundant evidence that vaccination does not prevent epidemics. To this Dr Hoover replies that the conclusions drawn are one sided. Yet both of them agree over the common facts like: The overall effect of small-pox vaccine is of limited duration. Even having the disease itself is not a guarantee. 1 in 1000 may develop



Dr RASHMI NAGAR LCEH
4, Parijat, North Avenue,
Santacruz (West),
Mumbai-400054
Tel : 2-6490215



small-pox second time. Most people will lose immunity in 5-10 years. b) Favouring isolation of the victim would be an acceptable approach during attack but not necessarily stop the spread of the disease. c) Severe side effects and limited efficacy are most significant. We need more supporting data for efficacy of Hom medicine.

HOMOEOPATHY TODAY : Vol.23 No 4 April 2003 This issue is devoted to 'Autism epidemic; comes as NJH completes the Mercury issue and first article that catches our attention is 'Land of the free' by Dr Dooley. In this article he talks of litigation filed against by parents of autistic children. It contends that the use of a mercury preservative (thimerosal) in vaccines far exceeded the levels of mercury allowed by the environmental protection agency and caused damage in the children's developing nervous systems resulting in autism. He also mentions the power, political and economic interests of the ruling party as well as the pharmaceutical giants. Homoeopathy is the correct alternative to regain confidence in the body's ability to heal itself and our ability to aid that process.

JUDYTH REICHENBERG: In her article 'epidemic of autism' Autism falls under pervasive Developmental Disorders and affects children in many ways. Extreme cases can be diagnosed before the age of one but those with Asperger's Disorders may be diagnosed by the time a child enters school. MMR vaccine could be the culprit in many cases. In her practice, she has treated some children of autism who were perfectly healthy prior to MMR vaccine and autistic immediately afterwards. Autistic children experience the world differently, they have more interest in trains, fans, cyclone than little Paul from next door. They may exhibit repetitive, peculiar habits. They are inarticulate or ask the same question again and again. May be gifted in one particular area or may have a wide range of behavioral problem. Homoeopathy helps depending on where the child falls on the autistic spectrum. There is

more success with Asperger's disorder where children may be more articulate, verbal and socially interactive. The approach is individualization.

ROBERT ULMAN: His case 'beautiful mind' is really a beautiful case of an 11 yr old autistic child. Sam, who at age five could calculate cube roots but never made eye contact at his mother. He banged his head hundred times a day and did not speak till age three. He was a maths genius with difficulty in relating to children and adults. The rubrics taken were : a) conscientious about trifles b) counting continually c) Mathematics calculating apt for d) Monomania e) Noise – inclined to make a f) Reserved g) retarded children h) Rigidity i) talk, slow learning to and j) vaccination after. *Silicea* was the medicine that gave amazing, results with overall improvement.

Other articles: Cases of ADD, skating accident : 3 medicines to know etc. The editorial voices a universal feeling that presenting Homoeopathy to the world is very important and good introductory talks can be efficient tools.

THE HOMOEOPATHIC HERITAGE VOL 27 DEC 2002:

In this issue Jeremy Sherr talks about Homoeopathy as 'Medicine of the Future'. Allopathic thought spread its tentacle over the last thousand years, providing violent answers to problems of health, economics, society and ecology. Last 200 years were gestational period for Homoeopathy. Holistic concepts have changed our perceptions and actions. As the science matures, more questions will surface: Is there only one constitutional remedy for life? Is the remedy that helped a case for some period of time the *similimum*? Can Homoeopathy suppress? Are old provings better than new ones? Etc. The path of Homoeopathy is long, yet its essence is simplicity. For the Homoeopath, it provides nourishment of soul, challenge of mind, harmony of body. We are truly blessed.

Dr Gracia Trevino in 'Treatment of Bronchial Asthma' gives three cases of Bronchial Asthma treated with *Ant-*



tart, Kali-carb, Calc-carb, Merc etc where auto nosode in 30th potency was found to accdtrate the curse². The auto-nosode was prepared by collecting to Dr Duncan's method and following class V of the pharmacopoeia. The filtrate was run upto 30th decimal potency. Dr Dorothy Shepherd's article on *Thuj* gives various cases of ill effects of vaccinations from loss of cut, infantile eczema to naevi and amenorrhoea. All affections are mostly antidoted by *Thuja*.

JIGYASA 2001 ISSUE OF LUCKNOW

This 13-page bulletin published after two years is small and beautiful. There is no dearth of theory and reported cases in Homoeopathy, but this full issue has coloured photographs of cured cases of psoriasis, leucoderma, haematoma of basal ganglion cystic hygroma of submandibular region and others. Photographs of the Hahnemann house is the icing on the cake. It is true for this issue – the proof of the pudding lies in eating. To sum up in Dr Satish Rana's words on the reader's page: If all homoeopaths record cases in such a way, the myth that Homoeopathy is unscientific or placebo therapy can easily be dispelled.

HOMOEOPATHIC CLINICAL CASE RECORDER: VOL 10 ISSUE

This issue contains 8 extensive case reports; interview of Natalie Tobert and reviews of books and journals. Dr Mistry reports the case of Sana-the little Zen master who had calcified cranio-pharygioma lesion with a poor prognosis. She was treated for about 2 years with Homoeopathy with different medicines like *Phos*, *Carcinocin*, *Opium*, *Calcarea* etc according to her clinical conditions. The tumour did not show significant enhancement at the end of 2 years, but she was operated due to pressure from relatives. She passed away having many questions like, would it have been correct to follow mother's intuition of no operation? Would she have survived for few more months with Homoeopathy? Such cases teach so much in life but do we learn? We still continue to subject them to hi-

tech, harmful, investigations and unnecessary surgical interventions.

Dr SUBHASH MASTER gives a case of 20 years old woman who's USG showed gall bladder calculi of 5 mm & 4 mm with dilatation of CBD. She was advised immediate surgery but 15 days treatment with *Chelidonium 6*, *Nat-sul 6* and *Cholesterinum 30* all 4 BD 1 hour apart cured her completely and confirmed by USG.

Dr JOSHI vividly describes a case of carpal tunnel syndrome in a 36 year woman of a royal family, who had pain in her right wrist, elbow and fingers- as if the hand was kept on fire. Detailed life history revealed she was suspicious and revengeful; she hit sister with a metallic basket; sexual suppression and hot flushes – where *Lachesis* was the similimum (Husband HIV + ve). A single 1M dose given; 4 days later patient showed her diary where she wrote in Dec '02, "I wish I could take sleeping pills and sleep for 8-10 hours". I feel like having a sleep of 72 hours since 2 years". She now reported that since last four days she is sleeping exactly the way she has mentioned above. All her physical pains also vanished. Though the complaint was right-sided, the *Lachesis* mind was clear and pointed to the remedy.

Dr AMAR NIKAM gives 3 cases of chronic renal failure treated respectively with *Phos-acid*, *Opium* and *Nuxvom* in 30 potency, single dose. The approach is individualization and repertorization. All cases improved with reversal of pathological changes; dialysis and transplant could be averted.

Dr HARPREET has given 2 cases of *Aur-mur* and *Lachesis*.

The general article by **LIONEL MILGROM** gives an in-depth understanding of the Laws of Physics, memory of water, Benevensite's experiments, Avogadro Laws and an attempt to explain the working of Homoeopathic remedies. This is a 'must-read' article for skeptics.



Dr MISTRY in his interesting interview, talks of his spiritual calling, Aurobindo's teachings, Shamanism, his shifting to Homoeopathy from Surgery and many other topics on spirituality. His message to Allopath is: there are different kinds of practitioners- rigid and fixed types with fossilized brain, those who are becoming aware of toxicity of drugs and pitfalls and the pioneers who are open to new ideas who explore consciousness, oriental medicine and the Masters good luck.

We would like to wish Dr Mistry good luck to bring out many more issues and hope that Nov' 03 is not the last issue - as he has mentioned in the editorial. WE do hope the Homoeopathic profession raises to the need of the hour, which is to publish accurately reported cases, which will not only enhance learning in the young homoeopath but enhance the standing of the profession at large. Dr Mistry we continue to need you. □

Homoeopathy Festival-2003

Dr Hahnemann's 248th Birthday and Homoeopathy Awareness Association's (HomAA) 8th Anniversary celebrated well along with Mega Homoeo Medical Exhibition on 3rd and 4th May in the name of HOMOEOPEST - 2003 at Coimbatore.

Mr K Ramakrishnan, General Secretary-HomAA, presided over the function. He said there is necessity to take the Homoeopathic system to all villages to create awareness. Vice President. Mrs R Loganayaki gave welcome address.

The function commenced with a song "Praise of Hahnemann". The chief guest. City Mayor T Malaravan unveiled Dr Hahnemann's Potrait and inaugurated Homoeo Medical Exhibition.

'HOMOEOP MURASU' HomAA's Homoeopathic Monthly Magazine was introduced by Dr KS Srinivasan- Editor, Quarterly Homoeopathic digest-Chennai.

Dr T Chandrasekar, MBBSMD, The Dean, Tamilnadu Homoeopathy Medical College, Salem, delivered a speech about Homoeopathy.

Conference held for two days on different topics of Homoeopathy:

1. "ROH Method" by Dr R Victor
2. Homoeopathy in Mental diseases" by Dr K

- Ambalavanan,
3. Children's health and Homoeopathy by Dr K S K Srinivasan,
4. Law of signature by Dr N Solaiappan – Jabalpur,
5. How to read Materia Medica' by Dr Joseph Pal,
6. The Advantages of Homoeopathy by Dr K V Appukuttan – Principle, Nehtra Homoeopathy Medical College – Coimbatore.

Public, Doctors, Homoeopathic College students in and around the district and states, visited the exhibition. It took nearly 4 hours to see the exhibition stall by stall, contain more than 300 specimens of animals, mineral, metal and vegetable sources of medicine. Rare Photographs of Hahnemann, Hahnemann Family Tree, general health awareness charts all were displayed in an orderly, easily comprehensible manner.

It was the first Mega Medical exhibition for Homoeopathic system of Medicine in South India.

Homoeopathic Awareness cultural programme was performed by HomAA members.

The HOMOEOP FEST 2003, curtained down with "Homoeo Anthem".

(Editor: We are happy that everywhere in the country, awareness programmes are conducted which contribute to the popularity of Homoeopathy, but we do request the organizers to write presented clinical papers details in their reports so that learning can occur for the readers of NJH.) □

	<p>Reported By</p> <p>K RAMAKRISHNAN</p> <p>General Secretary</p>
--	--

Jammu Seminar

This Report has been sent by Dr S S Vithal. It will be given in 2 parts.

CASE 1:

SMT H, F 48 yrs. R/o Ludhiana Housewife. Non veg.

DIAGNOSIS: D/M, Bone TB, RA?

A chronic diabetic patient with polyarthritis since last 14 yrs. Has taken lot of Allopathic, Ayurvedic even Intra- articular inj of steroids. Presently she is on Wysolone 30mg.

CHIEF COMPLAINTS – Acute pains all over body, more in legs and back. Unable to walk, sit or lie down. Weeps because of pain. Known diabetic, Dionil dependant. Piles, Anorexia, nausea dry mouth with thirst. Constipation for 1 1/2 yr. Urine. **THERMALS** – Hot + + Persp ++ offensive.

MENTALS – Introvert, Timid, mild, weeps on trifles. **ANXIOUS:** Suppressed by parents in childhood and by her in-laws after marriage. Fastidious and a workaholic. Says I am not looked after well after marriage. Conversation > despair

PAST H/o – Skin eruption in childhood, Eye problem, fever, nausea vomiting, cholecystectomy 13 yrs back. Tubectomy 22 yrs back. Rheumatic pain 20 yrs. Misconception thrice, H/o UTI.

FAMILY H/o - Father Sciatica died of brain hemorrhage. Mother: HT, DM, brothers – 3, sisters 4 – 1+7 RA, Diabetic

13/01/99 Puls 200 x 1 10ml drops SL TDS

20/01/99 Same No relief. Repeat. SL.

26/01 Immobile lower limbs, relieved with injection vertigo, constipation, Piles bleeding, Restlessness, despair, sleeplessness, thirst increased, wants recognition. Calc-s 2X 1/20



Reported By
Dr S S Vithal

17/03 Pain in legs>, can walk. No desire to work. Vertigo, neck rigidity increased Anxiety +++ Kali-s 0/3

2/04 Generals better. No pain C/o UTI. Persp increased .Fever 101 F .Rpt SL

17/05/99 Better as a whole. Pain Lt Leg < but wants to walk, work. Hopeful of recovery.

16/03/2000 >> walks with Aid, Sleep Appetite thirst, stool, urine normal Desire to work

20/04/2000 Feeling Better as a whole. Walks with little support. Hair which had fallen are growing now. Nails were brittle & dry, are now growing normal Feels Happy & charged.

FINAL DIAGNOSIS & COMPLICATION Rheumatoid Arthritis. Steroid dependent

PHYSICAL FINDINGS: H/o Morning Stiffness (+). H/O weight loss (+), H/o loss of appetite. H/o weakness B/L upper and lower limb. O/E – Pulse – 92/, min. BP-120/80mm Hg. Crepitus (+), Patellar tap: - Neg. Flexion is possible full range. Extension is restricted. LT Knee Joints swelling (+), obliteration of supra/ Intra patellar fossa FFD is 30 degree. Crepitus (+), Patellar tap-Extension restricted. Rt elbow : swelling (+) non tender, Extension restricted (L) elbow, Swelling (+), Non tender extension restricted. Involvement of other joints of fingers & toes also presented.

INVESTIGATION : Hb 8.6 gm%, ESR -110, TLC : 7.2, N 68, L 24, E-08, RBs-150 RFT:WNL. R/E Urine: pus cell 4-5 Urine C/s: No growth. ECG WNL C X R : WNL X-Ray Knee : Reduced joint space B/L knee.

Rx GIVEN : Analgesics, Vit B complex, Methatrexate.

COURSE IN HOSPITAL: On discharge pain reduced.

Patient afebrile through the course .

Adv: Tab Dolonex 1 OD. Tab Colsprin 650 m QID

Tab Polybion 1 O.D. Cap Autrin 1 O D

Tab Neotraxate 2.5 mg 3 tabs

F.U. after 1 month.

18.12.1997

BIO-CHEMICAL EXAMINATION

BLOOD SUGAR: PP/RANDOM 488mg

Normal : 140 mg/dl

LIVER FUNCTION TEST

Total 0.41mg/l 0.2-1.0 mg/dl

Direct 0.11mg/l 0.0-0.2 mg/dl

S. Protiens

Total 7.27 6.0-8.0 mg/dl

Albumin 4.23 3.8-5.0 mg/dl

Globulin 3.04 2.3-3.5 mg/dl

A/G Ratio 1.39

Alk Phosphatase 187. 37-147U/L

SGOT/AST 42.07 U 10-35 Units/ml

SGOT/ALT 61.88 U 5-35 Units/ml

Australia Antigen: Negative

TUBERCULOSIS ANTIBODIES TO MYCOBACTERIUM

IGM TEST: 1.43 UNITS POSITIVE

24.12.1997

BLOOD SUGAR: FASTING 294.6mg

PP 431.2 mg

TUBERCULOSIS ANTIBODIES TO MYCOBACTERIUM

IGM TEST: 0.80

UNITS -VE

BIO CHEMISTRY

Blood Sugar

Fasting 92.0 mg/dl

Kali- Sulph (POT-SULPHATE)

MIASM: Syphilo-sycotic, Tubercular

IN ACUTE PHASE : Restless but no anxiety. Timid, fair, lean, thin. Thirsty or Thirstless .Physically active. Hot.

The child has no anxiety, no weeping, plays, jumps but the parents are more anxious because of high fever, cough, rattling chest. Never Well SINCE PNEUMONIA

CHRONIC PHASE : Hot. Thermals < warm room, after eating < consolation (Opp Tuber)

> Cold air, open air, motion, walking

> Passing of gas (eructation, flatus) obstinate easy, indolent, impatient, (Anxious) Thirsty desires sweets, egg Aversion / Aggravate .

When *Puls & Sulphur* seems to be indicated.

Yellow discharges hands & feet cold (MAP OF INDIA FACE)

“Let yesterday be your lesson, today your study and tomorrow your test.”

- Mary Jo Pham -

The cynic knows the price of everything and the value of nothing

-Oscar Wilde