

Acute Prescribing

Abstract: The author has given a brief note on acute prescribing followed by few cases for the students to have a quick reference to the few of common conditions they would come across in their practice. Readers are requested to go through the cases and write on the paper which remedy would they give. Compare your answer on page no 26 (Be truthful for your own good)

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Acute disease is defined as disease with sudden onset, rapid progress and terminates in recovery or death if not treated.

In Acute Case-Taking (Aph 82), "Chief symptoms strike us and become evident to the senses more quickly and hence much less time is requisite for tracing the picture of the disease and fewer questions are required to be asked".

Acute Prescribing is conducted for an Acute disease and Acute exacerbation of a chronic disease. The Principles involved are the same in either unless there is a definite clinicopathological influence of the chronic disease on its acute exacerbation.

IN AN ACUTE CONDITION

- Susceptibility is high
- Sensitivity is high
- Reactivity is high
- Vitality is good or poor if it is an acute exacerbation of a chronic disease with advanced pathology.

SUSCEPTIBILITY IS HIGH FOR FOLLOWING REASONS

- Seat of disease is Mucous membrane of GIT or RS and Skin ie superficial or peripheral tissues. If it is deeper tissues or internal organs, in case of acute exacerbation of chronic disease, type of pathology superimposing is membranes or vascular tissues of the organ
- Pathology is functional or superimposed functional and /or reversible structural
- Progress/ Pace is rapid

TYPE OF SYMPTOMS ARE

- Characteristic physical particulars
- Characteristic physical generals, as concomitants
- Characteristic / Qualified mental symptoms; as concomitants

REACTIVITY IS HIGH FOR FOLLOWING REASONS

- High intensity of symptoms
- Marked and peculiar sensations
- High cellular and inflammatory turnover
- Profuse discharges
- Intense reactions as emotional state

SENSITIVITY IS HIGH FOR THE FOLLOWING REASONS

- Pains intense and
- Peculiar: Sensation as if

TOTALITY OF SYMPTOMS IN ACUTE PRESCRIPTION

Symptoms contributing to the Totality variably as per individual cases are characteristic as follows:

- Characteristic physical particulars: As chief complaint
- Characteristic physical generals
- Characteristic data pertaining to sleep, eliminations, appetite, thirst, sexual generals as concomitants
- Characteristic mental symptoms: Qualified mental symptoms
- Characteristic dreams as concomitants (unless case is a mental disease)

In Acute exacerbation of a chronic disease with advanced pathology of usually Irreversible structural type:

- Characteristic pathological particulars
- Characteristic pathological generals: As chief complaint contribute to the acute totality.

DOSE OF THE REMEDY IN ACUTE PRESCRIPTION

Susceptibility high → high potency
Sensitivity high → infrequent repetition
Reactivity high → frequent repetition
Vitality good → infrequent repetition
Poor → frequent repetition

However, Reactivity high predominates high Sensitivity is reason for frequent repetition in acute prescribing for potency exhaustion occurs in an acute condition leading to Short Amelioration or Amelioration followed by Aggravation of the disease symptoms type of Remedy Reaction occurs. In an Acute exacerbation of a chronic disease, if sensitivity is low, low potency with frequent repetition is indicated.

CASES

CASE 1: Fever with chills since 7 days off and on. Cough with yellow expectoration in the morning. Appetite decreased, weakness++, drowsiness++, thirst decreased++

Vomiting

O/E RS: NAD, P/A: Right Hypochondrium: tenderness +

CASE 2: Diarrhoea since 5-6 days, almost 5-6 times a day. Watery stools immediately after eating and patient has to rush. Pain sometimes < before stools. No weakness.

CR: Cold drinks++

CASE 3: 6 months baby: Since 2 weeks, Vomiting of milk A/F weaning.

Regurgitation of food <3-4 hrs after eating

CASE 4: Retrosternal burning since 5 days, eructations³, loud and rancid, <spicy³, <cabbage++, <tur+, <brinjal+, <potato+, Flatulence, gurgling abdomen, unsatisfactory stools.

CASE 5: Since 2 days backache < during menses², <motion², Nausea², vomiting, headache².

CASE 6: Since 10 days, cough: dry², continuous² with every breath <am², <sleep during², sleepless², feverish feeling, no cold, no throat pain.

CASE 7: Never well since Malaria which occurred 3 wks ago, now no fever but chilliness, sensitivity to cold, throbbing headache², abdomen feels full², taste is bitter

CASE 8: Since 1 week, pain in anal region, prickling like a splinter, bleeding ++, bright red in drops, <passing stools, <spicy food². Sensation of mass in the rectum after stools

CASE 9: Paronychia R middle finger, <putting finger in cold water, swelling of the nail bed², pain². O/E: Tenderness², warmth².

CASE 10: URTI since 1 week: Sneezing³, violent and paroxysmal, coryza², no fever, no cough or throat pain. Thirstless³. Chilly² O/E RS: NAD

(Ans on Page 30)

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