

Obstructive Jaundice and Ca GB with Secondaries in Liver



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Honors and Awards: Doon Ratna; Garhwal Gaurav; Gold Medalist; Veteran Homoeopath

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PAST HISTORY

The patient had jaundice for over a month but in January 1990 his condition became critical, and he was admitted to All India Institute of Medical Sciences, New Delhi on 11th January 1990.

His history and physical findings were:

- Significant weight loss: 6 months
- Jaundice
- Bulky, frothy, pale stools
- Itching
- No H/o pain abdomen
- H/o Prostatism +ve

PHYSICAL FINDINGS

- Icterus ++.
- P/A: Free fluid +.
- Liver left lobe 5 cms.
- Right lobe 3 cms.
- GB mass palpable: Firm, smooth.
- Liver surface: Smooth.
- Free fluid +ve.
- P/R: Prostate size normal; no growth.

OPERATIVE PROCEDURE AND FINDINGS

No surgery performed in view of liver secondaries seen on laproscopy.

DIAGNOSIS

Surgical obstructive jaundice

CAUSE: Cancer gall bladder with

?Secondaries liver.

INVESTIGATIONS

8/1/1990: Hb 13.0, TLC 4,900, Sugar 108, Urea 15, Na/k 139/4.5, Bil 15.8, Alk PO 35.4, OT/PT 129/96, T Prot/A/G 6.1/3.0/3.1

ULTRASOUND

Liver grossly dilated. GB distended with an irregular mass in the neck region. CBD dilated (23 mm). Porta hepatica has a hypoechic mass contiguous with the GB. Pancreas N.

LAPAROSCOPY 19/1/1990

GB distended, Fundus: Thickened white wall. GB neck not clear. Liver: 2 secondaries seen. Ascites +ve. Biopsy from liver secondaries taken (See Discharge Summary 2 pages below):

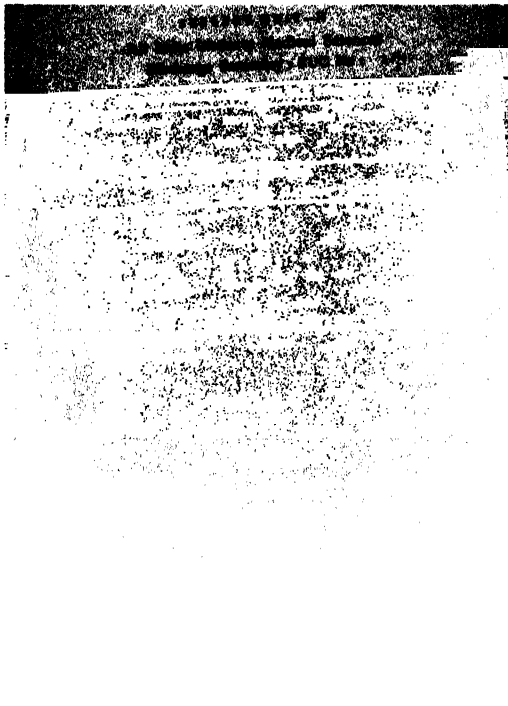


Fig 1

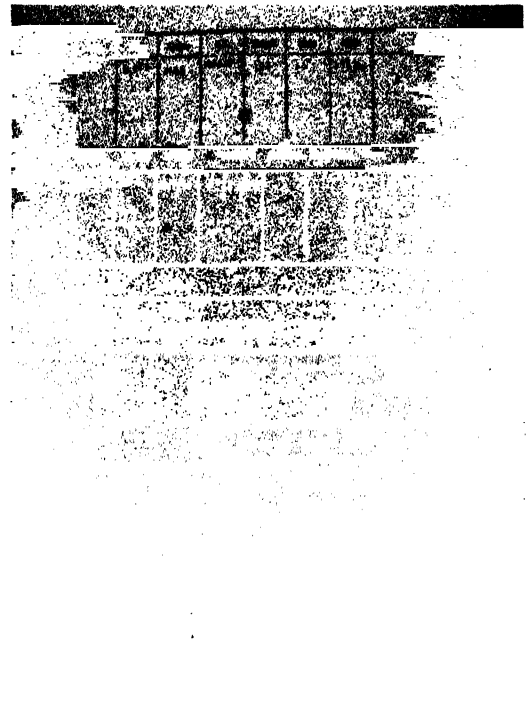


Fig 2

Histopathology Report 27th January 1990

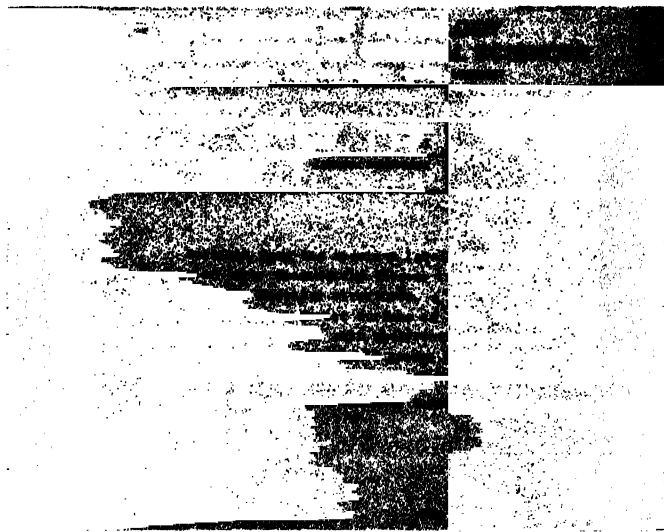


Fig 3

The patient was admitted on 2nd February 1990; within this period his condition worsened.

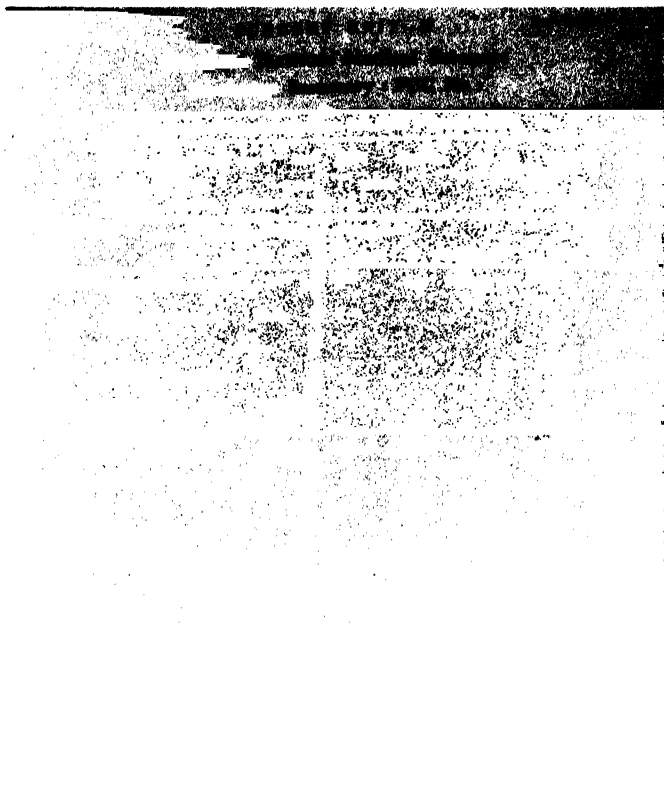


Fig 4

THE INVESTIGATIONS ON 2ND FEBRUARY:

Hb 12.1, TLC 9,900, Sugar 82, Urea 39, Na/k 138/4.3, Bil 19.5, Alk PO 681, OT/PT 198/123, T Prot/A/G 6.6/3.0/3.6

THE DISCHARGE SUMMARY

It is necessary to note here that the patient was sent back without surgery in view of liver secondaries on laproscopy (With a verdict on 3rd February that he may live barely three weeks). On first visit 15th February 1990 the following symptoms were present:

- Severe jaundice – Skin and eye deep yellow.
- Anasarca.
- Urine deep yellow and scanty.
- Tongue swollen and fissured.
- Abdomen much distended.
- Dropsical swelling on hands and feet.
- Increased appetite.
- Stool whitish and hard.
- Coughing spells with expectoration which

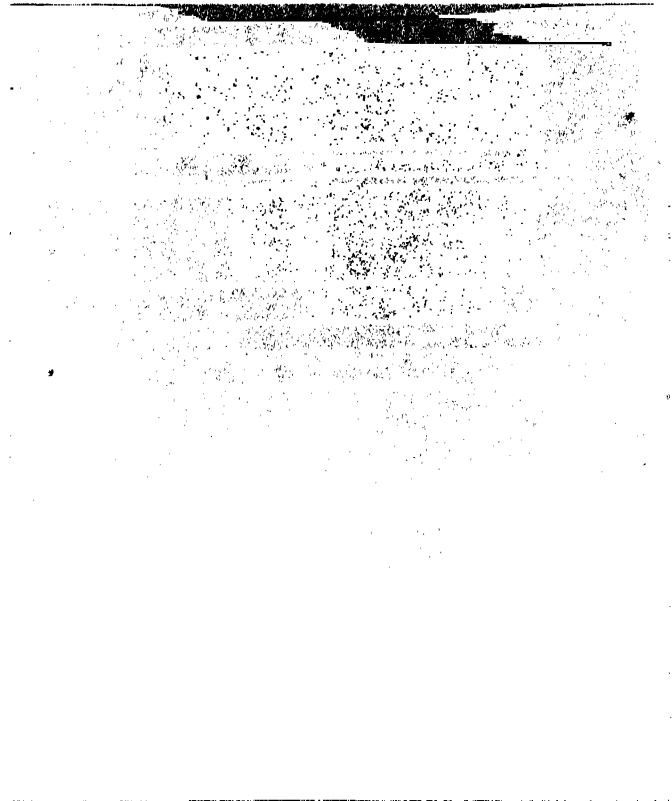


Fig 5



- was ropy mucus and hard to expel.
- Coughing bouts often accompanied by retching and vomiting of sour matter.
- Sensation as if something was sticking in the throat.
- Great restlessness, agg evening and night.

TREATMENT

Hydrastis-canadensis 200 3 doses 8 hourly
 7/2/ 1990: Felt better. Color of eye little better. Ascites better. No vomiting during past two days. Same medicine repeated, 12 hourly.
 19/2/90: He took a tumbler full of vegetable soup after which he felt great restlessness. He felt some relief only after vomiting a huge quantity of sour water and mucus in the night.
 21/2/90: Felt better on the whole for past two days.
Hydrastis-canadensis 200 one dose
 23/2/90: Passed a large watery foul stool; after which felt faint with prostration and loss of voice. *China* 30, 6 hourly.
 25/2/90: For two days only occasional foul

watery vomit with rumbling in stomach and sensation of a lump in the throat.
Hydrastis-canadensis 200; one dose .
 1/3/90: Urine scanty, distension of abdomen; Dropsy on feet.
Hydrastis-canadensis 200; one dose.
 3/3/90: Distension persisting. Passed no stool; though feeling urging to stool since morning.
Lycopodium 200 one dose.
 Evening report: Passed stool during the day. Some distension persists.
 Color of skin and eyes much improved. Dropsy and anasarca much better.
 6/3/90: Vomiting at night. Urine scanty. No thirst, Av water; if drinks, vomits immediately.
Hydrastis-canadensis 200, one dose.
 8/3/90: Fetid vomiting during the past two nights.
 Serum bilirubin had come down to 6.7 mg/dl. (See report below)
 Due to recurrent vomiting he became tremendously weak. The need to provide some

supportive measures made me consult my friend, a medical officer in a Govt hospital. But by then the general condition of the patient deteriorated due to generalized weakness. The medical officer told that now it was too late, yet he admitted the patient and tried his best but the patient expired on 23rd February 1990.

Still his wife and son came to thank me for alleviating his suffering (predicted by the doctors at AIIMS - severe agonizing pain which even pain-killers may not be of any help. But under Homoeopathic medicine he did not require any pain-killer nor did he suffer from any pain.

DISCUSSION: In such terminal cases no one can give a new lease of life, but if the patient leaves this mortal world comparatively at ease, the doctor is still a winner.

Editor: Amen. Yes Homoeopathy is a true panacea and often gives peaceful euthanasia.

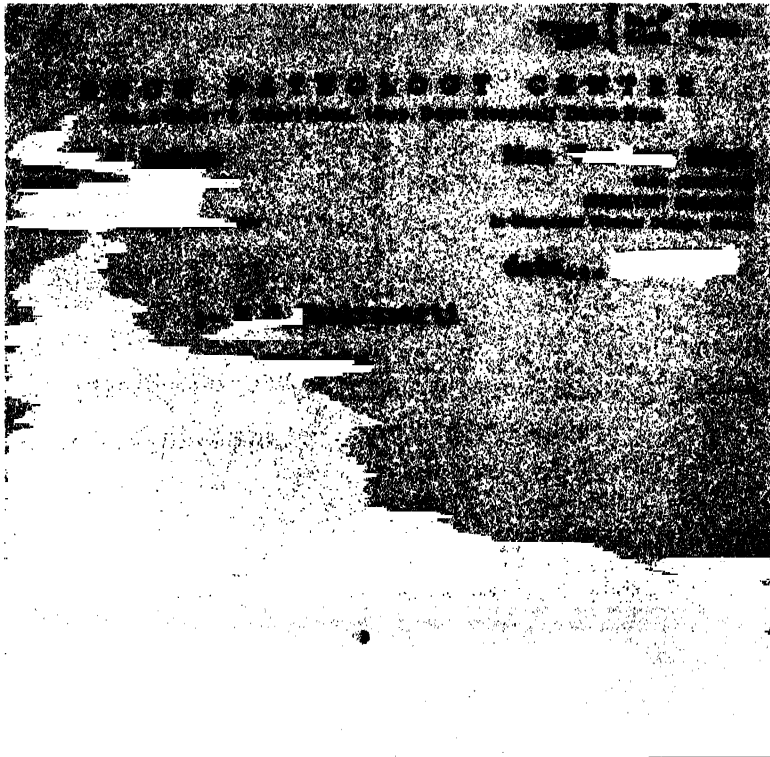


Fig 6



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The summer vacation was spent in a blissful way by the huge family of *Homoeonagar*. The elders were getting ready for their work and the children to go to their school while the housewives were busy in the kitchen preparing mouth-watering dishes for them.

But one thing was missed by everyone, but not by the investigating eyes of the Grandmother, *Materia Medica*. She found her beloved ones to suffer from cough and other forms of respiratory complaints.

It was embarrassing to see *Squilla* wearing nappies. She had loose cough, in the morning which was more fatiguing than the dry one in the evening. With each bout of cough she would spurt urine and quite frequently faeces. *Causticum*, as she was a born sympathizer, went near *Squilla* and asked her not to worry and revealed to her that even she was wearing one as she also sprayed urine while coughing. She coughed like as if she was coughing into a barrel and she drank ice-chilled glass of water which surprisingly abated the cough.

Senega, the quarrelsome teacher, who was inclined to quarrel, was climbing the stairs of his school but he could not do so as going against the wind and it bought chest symptoms and dyspnoea. The grand mother was appalled to see the horrendous state of *Ant-tart*. The drowsy tiny tot who was clinging to her mother had his chest full of mucus. He had a rattling cough but the mucus could not be raised or it came in only small

quantities which did not pacify the toddler. *Ipecac*, another discontented child, was always hard to please. The gagging and suffocating cough with coarse rattling could be heard throughout the room. He became quite stiff and cyanosed. The grand old lady was mystified to see the tall slender narrow chested *Phosphorus* growing so rapidly, as if there was no tomorrow. The stooped officer had congested lungs and he expressed it as tightness across the chest and great weight on the chest. His whole frame trembled during cough. *Nat-sulph* was sitting quietly - averse to speak or be spoken to.

He could not bear water in any form and also could not eat fruits growing near water. He had severe cough and used to hold the chest during coughing ending in greenish expectoration. *Bryonia*, even during the acute suffering was busy talking about business. The thirsty *Bryonia* had dry cough with chest pain which made him support it just like *Nat-sulph* but it was not a productive cough. Elderly *Carb-veg* was looking haggard due to the breathlessness which had taken its toll on this sluggish, fat and lazy person. He constantly demanded fan at its fastest speed though his body was cool.

The Grand mother did not waste even a single moment and rushed them to the nearest Homoeopath to rid them from these trouble some ailments

I met money one day. I said, "You are just a piece of paper."

Money smiled and said, "Of course I'm a piece of paper, but I haven't seen a dustbin yet, in my life

