

is no evidence of calculus, hydronephrosis or mass lesion in both kidneys. Rt kidney is 9.83. Lt Kidney is 10.14

Urinary bladder is distended well and appears normal. There is no evidence of calculus or intrinsic lesion in it. There is negligible post void residue.

Uterus is anteverted, measuring 8.37 x 3.66 x 5.63cm. Normal in echotexture.

Right ovary is 2.49 x 1.89 cm. Normal in echotexture.

Left ovary shows a cyst of size 4.23x 4.05cm. It shows septae and internal echoes inside it. It appears to be cyst adenoma.

Right adnexa is normal. There is no free fluid in pouch of Douglas.

OPINION: Mild Hepatomegaly. Cystadenoma left ovary.

AFTER TREATMENT: 01.11.2004. PELVIC USG

* Uterus is anteverted and measures 8.8 x 5.4 x 3.8 cm (LxTxA.P.)

* Uterine outline is smooth.

* Uterine parenchyma appears homogenous.

* Endometrial cavity is normal.

* Both ovaries are normal.

* Urinary bladder is normal. No vesical calculus or growth is seen. No post-void residue is observed.

* Iliac Vessels have normal course and caliber.

* There is no pelvic lymphadenopathy or free fluid.

Opinion: Normal Uterus and ovaries.

Psychosomatic Pain: A Case

Recently, when I was going through *Aconitum* in The Materia Medica Viva by Dr George Vithoulkas, an old case of Psychosomatic Pain cured under my care in 1993 flashed into my memory. The story of the case was as stated hereunder.

36 years old lady, was brought for consultation and treatment on 13th July 1993.

For the past one year she used to feel unusual sensation with pulsation in her head with following symptoms.

Pain in her left shoulder, left scapula and left side of her neck.

Pain in the frontal region and around the eyes.

The pain used to extend to the breast which becomes heavy and tender.

Vertigo³. Heaviness in eyes.

Loss of appetite. Thirst less.

Arms easily become numb.

The palms and soles often become very hot.

Menses very scanty, dark coloured with dark clots.

Leucorrhoea of long standing, white and yellowish, thick, bland, throughout the month.

Bowels constipated.

Urination frequent especially in the morning on waking and in cold weather.

She does not feel fresh / cheerful on waking from sleep.

Melancholy / sadness.

Temperament: Irritable, easily gets angry since the trouble started.

Liking for sour and sweet things.

Her complexion was getting darker.

On enquiry about any incident or accident or the circumstances after which the trouble was started, her husband, who was an Army Captain told that some soldiers of his Unit were coming from a hill station in an army truck. Their vehicle met with an accident on the way and fell down in a deep hill side. Some of the soldiers died at the spot and some got injured seriously. They all were brought to Military Hospital.



Dr S K MAMGAIN
Doon Ratna, Mamgain Homoeo Clinic,
218, D L Road,
Dehradun-248001
Tel: 0135-2656578 (Res)
Email: drmamgain@vsnl.net

Being wife of the Unit Captain, she visited the Military Hospital to give consolation to the injured. Seeing the condition of the seriously injured and the mutilated bodies of the dead ones she was deeply shocked. Only after this, the trouble started.

She was treated at the Military Hospital also by some Allopaths. But the trouble continued to get worse.

On the basis of shock / fright I gave her *Aconitum-napallus* 1M and she started responding instantly. And within two months' time she was CURED. Towards end of the treatment a dose of *Sulphur* 1M and a few doses of *Lac-caninum* 200 were also required to be given.

The lady remained perfectly well thereafter.

CASE 2

Here is another case of a 13 years old girl, who was suffering from low fever for about one month. This fever was not responding to the allopathic medicines. Similar incidence occurred about 10 years ago.

On inquiry about the circumstances after which the fever started, the mother of the patient told that the girl was working in a house, where about a month ago, an elderly person died in the evening. The dead body was kept in the house for the night. The girl was asked to stay in the house for that night.

I asked the patient if she was frightened to stay in the house with the dead body.

Her answer was affirmative. The fever started from the next day.

She used to feel chilliness towards evening followed by fever. She did not suffer from high temperature.

She developed loss of appetite.

She was not restless but felt some fear.

On the basis of fright I prescribed her *Aconite* 30 tds and the girl was well within four days. She had no relapse again.

Dr George Vithoukas gives the following symptom picture of *Aconitum-napallus* in his *Materia Medica Viva*,

"*Aconite*, for instance, is well known for producing inflammatory conditions from **sudden exposure to cold, dry winds**, but it has become increasingly apparent that there is another stimulus, namely **sudden fright**, that can also produce an *Aconite* state.

"*Aconite* individuals will not develop their symptomatology when the shock is caused by financial ruin, an exam failure, a grievous love affair, etc. They have a specific vulnerability to sudden stresses that can create a simultaneous overexcitement of both the circulatory and nervous systems. In simpler terms we can say that an *Aconite* state may develop if the organism is subjected to the shock of "**fright**" or of "**freezing**." "Frightful" shocks obviously affect or stimulate the nervous system first and, secondarily, the vascular system, while in "freezing" it is the vascular system that is primarily affected, through vessel contraction, and the nervous system that is secondarily affected or excited.

"It is important for the student of homeopathy to understand that a case that needs *Aconitum* will be cured in an impressive way only by this remedy alone; no other remedy can replace it, be it an acute or a chronic case. Do not hesitate to prescribe it if the symptoms agree in any case, no matter how severe its pathology may appear to be. I repeat, the information given by old masters that *Aconitum* is indicated only in the beginning stages of acute conditions is totally misleading." MM Viva, George Vithoukas.

"**SOME GENERAL REMARKS:** It is important to understand the remedies in their general action upon the human organism and apply this understanding to the diseases being treated. One should avoid the trap of getting stuck on little details and instead try to perceive the general image of the patient and then prescribe correspondingly. The student of homeopathy should make sure that he knows a wide range of homeopathic remedies before attempting to make a differential diagnosis; otherwise he will tend to see in all of his patients, the characteristics of the few remedies he knows." (ibid) □