

Passage of Calculus at Lower Pole of Kidney Facilitated by Individualised Homoeopathy: A Case Study

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ABSTRACT:

A diagnosed case of renal stone of 5.3 mm size located at lower pole of left kidney visited the out-patient department of RRI(H), Guwahati. The presenting symptom was recurrent pain with soreness in left lumbar region of abdomen. Burning and stitching sensation in left renal region for one week. Patient was taking allopathic treatment before opting for homoeopathy. After case taking and repertorisation, homoeopathic medicine *Berberis vulgaris* (*Berb-vul*) was prescribed in 30C potency. The severity of pain gradually diminished. But patient could not recover completely. The case was again reviewed. It was found that there may be some miasmatic block which could hinder the complete recovery. The case had a sycotic background as he was having thick and bushy eye brow and asthma in the family history. *Thuja occidentalis* was prescribed in 30C and 200C potencies at different intervals. After administration of anti-sycotic medicine pain completely subsided. Patient reported the passage of one stone through urethra within 2 months since beginning of homoeopathic treatment which was confirmed by the report of ultrasonogram of abdomen.

KEY WORD: Homoeopathy, Renal calculus, *Berberis vulgaris*, *Thuja*.

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INTRODUCTION:

Now a day's renal calculus is threatened to be one of the common health problems. There is growing trend of higher incidence of kidney stone cases in developed and developing countries. As per the latest data 12% of the world population suffers with this condition at some point in their life time.^[1] It is prevalent in all age groups, sexes and races. The most common cause of the stone disease is inadequate hydration and subsequent low urine volume. Patients with renal stone most commonly present

with acute, severe flank pain that will often radiate to the abdomen and especially to the groin, testicle, and labia. The pain is often associated with nausea and vomiting. Patients sometimes also present with haematuria as 85% of patients demonstrate at least microscopic haematuria on urinalysis. Abscess, Urosepsis, Ureteral scarring/perforation, Urine extravasation, Kidney atrophy in chronic cases are the common complications of kidney stones. Stones most commonly develop in the lower pole of the kidney (in ~35% of cases) and

from here are least likely to pass without intervention. There are different types of kidney stones like Calcium stones, Uric acid stones, Struvite/infection stones, Cystine stones. The prevalence is 80 %, 5-10%, 10%, <1% respectively.^[3] ^[4] shockwave lithotripsy, ureteroscopic stone removal, laser lithotripsy, percutaneous nephrolithotomy (PCNL). Smaller stones (less than 5 mm) have a greater chance (90%) of passing on their own with medical expulsion therapy. Renal stones can also be managed through homoeopathic medicines.^[5] *Berb- vul*, *Sarasaparilla*, *Cantharis*, *Tabacum*, *Pareira- bra* etc are the important homoeopathic medicines whose symptomatology covers renal pathology including calculus. *Berb- vul* Q is quite commonly used or used when other medicine is not indicated in expulsion of stone from urinary system. Even the research studies have shown the effectiveness of homoeopathic medicines in treating this condition successfully. ^[6-8] Study conducted by T. Ganeshan, Dr. Khurana et.al has shown that *Berb-vul* is efficacious in modulating the primary events of stone formation. In a case reported by P. Paul Sumithran *Nux- vom* 30 C was effective in expulsion of renal stone.

CASE HISTORY:

A male patient aged 17 years visited the General OPD of Regional Research Institute (Homoeopathy), Guwahati in August 2017. He was suffering from stone in lower pole of left kidney of 5.3 mm size. After case taking following symptoms and points were noted

Presenting complaints: Recurrent pain with soreness in left lumbar region of abdomen. Burning and stitching sensation in left renal region for one week. Patient was undergoing allopathic conservative treatment before start of homeopathic medicine.

Mentally, patient was mild. He had a good appetite with desire for sour and meat. Thirst was excessive but tongue was moist and clean. There was profuse perspiration. Stool and urine were regular and clear respectively. On observation it was found that the eyebrows were thick and bushy. Nothing specific in past history of the patient but in family history his grandmother suffered from Diabetes mellitus & asthma. Ultrasonogram report of abdomen showed 5.3mm calculus in lower pole of left kidney (*Fig.-2*). Urine analysis report showed no growth of aerobic organism.

Totality of symptoms: After case taking following totality was gathered.

- Burning and soreness sensation in the left iliac region
- Stitching pain in lower abdomen
- Mentally mild.
- Profuse perspiration
- Desire for sour, meat

Miasmatic analysis:

As far as the miasmatic background is concerned, this case was a multi-miasmatic with sycotic predominance (**Table-1**).^[9]

Repertorisation:

Repertorisation was done with the help of Kent Repertory through RADAR 10.5 software. Medicines appeared are given in the repertorial sheet (*Fig.-1*). ^[10]

TREATMENT GIVEN:

Though *Natrum muriaticum* appeared as the first medicine after repertorisation but the character, intensity and acuteness of the pain and consultation with materia medica led me to *Berberis vulgaris* for administration as first prescription. *Berberis vulgaris* (*Berb-vul.*) in 200 potency and *Thuja occidentalis* (*Thuja-occ*) in 30 potency was prescribed to complete the cure. The details of prescriptions and follow ups are given in *table no 2*.

Table-1: Miasmatic analysis:

Symptom	Miasm
Mild-	Sycotic miasm
Desire for sour	Sycotic miasm
Desire for meat-	Psoric miasm
Profuse perspiration	Psoric miasm.
Family H/O Diabetes mellitus	Sycotic miasm.
Thick eyebrows	Sycotic miasm.

Table -2: Details of prescription and follow ups.

Date	Symptoms	Medicine
02.08.2017	Known case of Renal calculus. Recurrent pain in left lumbar region for 1 week with burning and soreness sensation in lower abdomen and stitching type of pain in left lower abdomen. Electric like sudden pain in right hand for 1 week. USG Lower abdomen on 26.07.2017 showed 5.3mm calculus in lower pole of left kidney.	<i>Berb-vul</i> 30 two times a day ^x 2 days Placebo once daily ^x 14 days
03.08.2017	Pain in right umbilical region with loose watery stool, twice, No H/O rich food and no vomiting.	Placebo once daily ^x 3 days
10.08.2017	Pain was diminished within 3 hours, after last visit. No pain since then.	<i>Berb-vul</i> 200 once daily ^x 1 day Placebo once daily ^x 14 days
24.08.2017	Intermittent pain in left lumbar region on 10.08.2018, evening. Lasts for 1-2 min.	<i>Berb-vul</i> 200 once daily ^x 2 days Placebo once daily ^x 14 days
07.09.2017	Recurrent Pain. Miasmatic block	<i>Thuja-occ</i> 30 once daily ^x 4 days Placebo once daily ^x 14 days
22.09.2017	No pain after taking medicine of last visit. Frequently micturition with less amount passing of urine. Adv: USG for L/A	Placebo Two times a day ^x 10 days
04.10.2017	USG Lower abdomen on 02.10.2017 showed no calculus in left kidney, both kidneys were normal. No pain in abdomen.	Placebo Two times a day ^x 7 days
06.10.2017	No pain in abdomen, Patient said that one stone had passed with urine few days ago.	Placebo Once daily ^x 14 days

This analysis contains 202 remedies and 7 symptoms.
Intensity is considered

			nat-m.	phos.	sulph.	chel.	mang.	ars.	kali-c.	rhust.	sep.	bell.	carb-an.	kali-p.	zinc.	berb.	verat.	am.	calc.	hep.	kali-bi.	lyc.
			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Sum of symptoms (sort:deg)			6	5	5	5	5	4	4	4	4	4	4	4	4	3	3	3	3	3	3	3
			12	8	8	7	5	10	8	8	8	7	6	6	4	8	8	7	7	7	7	7
01. MIND - MILDNESS	1	60	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
02. PERSPIRATION - PROFUSE	1	133	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
03. STOMACH - DESIRES - sour,acids,etc.	1	77	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
04. STOMACH - DESIRES - meat	1	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
05. KIDNEY-URINARY ORGANS - PAIN - burning - region of	1	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
06. KIDNEY-URINARY ORGANS - PAIN - sore,bruised - region of	1	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
07. KIDNEY-URINARY ORGANS - PAIN - stitching,stinging,stickng	1	58	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Figure 1 Repertorial sheet



Figure- 2:USG of abdomen before treatment

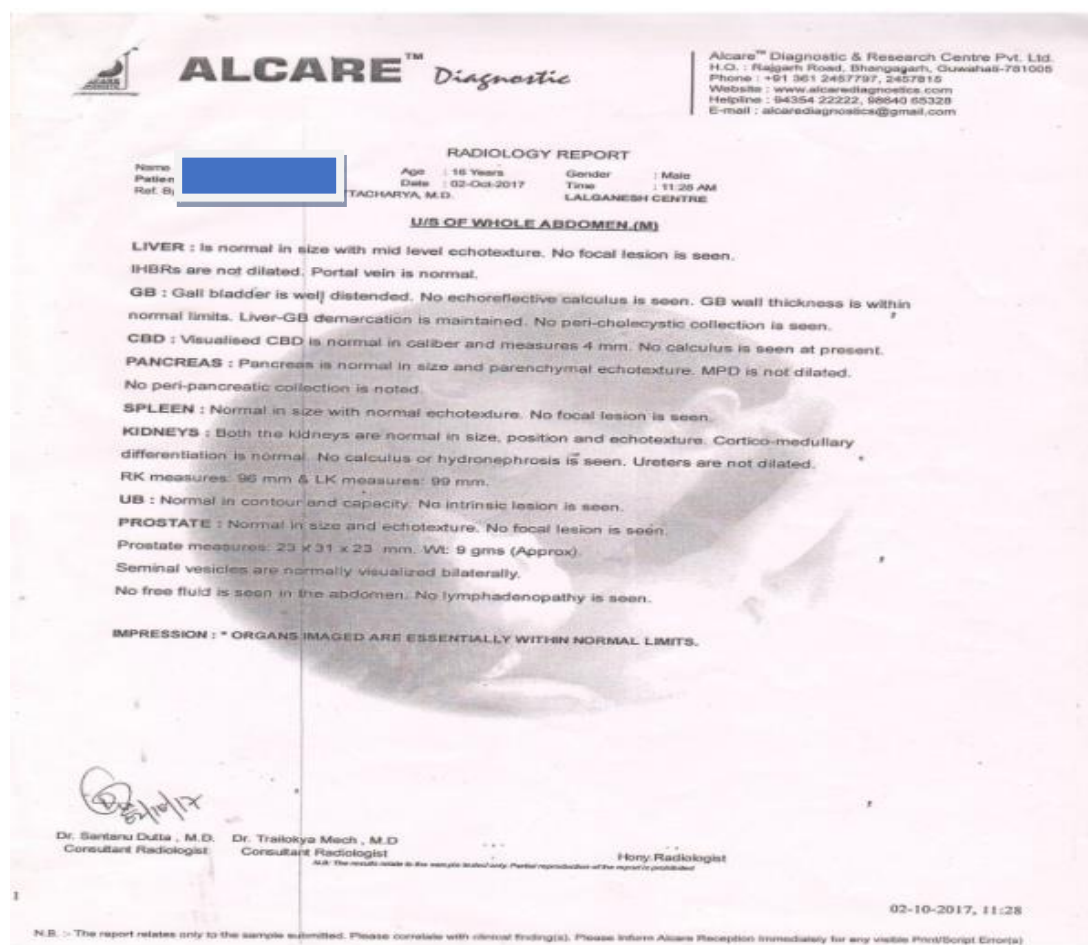


Figure- 3: USG report after treatment

RESULT:

One stone passed through urethra while urinating after 2 months of treatment. USG of abdomen done after treatment reported no calculus (Fig.-3).

DISCUSSION:

Homeopathy enjoys a reputation of successful management of renal stones with some rider. This notion gave a kind of confidence in treating this particular case. Disease like renal stone having insidious origin, slow progress and its disposition comes under category of Chronic diseases as conceptualised in Organon of Medicine [11]. Various medicines in our Homoeopathic Materia medica, having sphere of action on renal system, produce the symptomatology similar to the symptoms of renal calculus.

[12-13] In this case the character and sensation of the pain was similar to the *Berb-vul*. After *Berb-vul* acuteness and recurrence of pain in left flank diminished in one month as given in follow -up table but intermittent pain in left side of abdomen was still persisting. Persistence of symptoms despite administration of indicated medicine is indicative of some kinds of block in the path of recovery. As per homeopathic philosophy underlying miasm may be the most probable block. *Thuja-occ*, an anti-sycotic medicine, was prescribed in 30C potency. Subsequently, patient started improving with complete subsidence of pain and increased frequency of urination. In this case *Berb-vul*, complemented with *Thuja-occ*, resulted in expulsion of the stone from the lower pole

of the kidney. USG report of abdomen showed no calculus in the entire urinary system (fig.-2). Here, *Thuja-occ.* was prescribed as anti-sycotic but it was based on indication i.e thick or bushy eyebrow of the patient. Stone was expelled in very short period of time which is expected by all. In this case the stone size was 5.3 mm just above 5mm up to which it is expected that renal stone may pass easily through urethra. But it is not that all stone below 5 mm size will pass. Location of stone is also an important factor. Here stone was at left lower pole from where stones are difficult to pass easily but *Berb-vul.* complemented with *Thuja -occ.* helped in the passage.

CONCLUSION:

This case of renal calculus is one of the cases, which shows the prowess of homoeopathy in management and expulsion of renal calculus. Though this condition is largely considered as surgical but its smooth remission is possible through Homoeopathy, if proper and tactful case taking followed by prescription on basis of symptom similarity is done with removal of miasmatic block. Further studies with statistical rigor is required to assess the effectiveness of *Berb-vul.*

LIMITATION OF STUDY:

There are some limitations in this case report. Though mental and physical general symptoms were characteristic but not covered by *Berb -vul* convincingly. The type of stone could not be mapped out. Predominant miasm was decided mainly by few symptoms. Some more symptoms indicating miasm should have been present. As the size of stone in this case was 5.5 mm, but effect of *Berb vul* must be tested in bigger size renal stones.

PATIENTS CONSENT:

Patient's consent was taken for dissemination of the case.

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