

KARNATAKA QUALIFIED HOMOEOPATHIC DOCTORS' ASSOCIATION ®

VOLUME: 1, ISSUE: 11, April 2024

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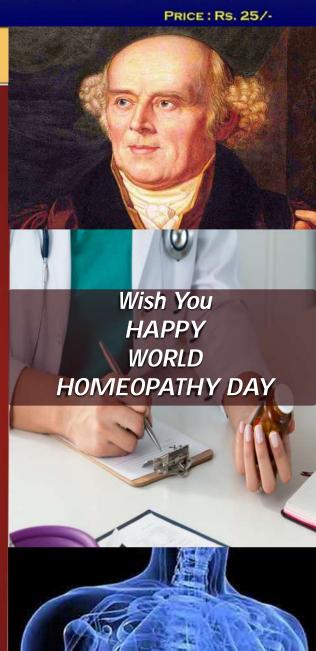
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Editor's Message

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Dear Friends, Warm wishes of the Season. Reading is important because it develops your mind and gives you excessive knowledge and lessons of life. It helps you understand the world around you better. It keeps your mind active and enhances your creative ability. Reading improves your vocabulary and develops your communication skills, thereby enabling you to be a better writer. Good communication is important in every aspect of life.

Reading a good magazine or a book takes you in a new world and helps you relieve your day-to-day stress. It has several positive effects on your mind, body, and soul. It stimulates your brain muscles and keeps your brain healthy and strong. When I read a medical magazine, I read it for pleasure. I just indulge myself in reading and experience a whole new world. Once I start reading, I get so captivated I never want to leave it until I finish. It always gives immense satisfaction to read a good book and cherish it for a lifetime.

Reading takes you to the world of imagination and enhances your creativity. It makes you think creatively, fantasize and use your imagination. Reading helps you explore life from different perspectives. While you read magazine, you are building new and creative thoughts, images and opinions in your mind. By active reading, you explore several aspects of life. It involves questioning what you read. It helps you develop your thoughts and express your opinions. New ideas and thoughts pop up in your mind by active reading. It stimulates and develops your brain and gives you a new perspective.



Editor's Message

One strategy for doctors to continue their professional growth is to read medical publications. It enables them to enhance their abilities, discover cutting-edge treatments, and improve their professional judgment. Keeping record of your reading journey helps to keep you accountable and on track. In addition, you can track your progress and see how far you've come, which is very motivating. Reading the medical journal is a standard method of increasing knowledge among the physicians world-wide. It enables medical practitioners to put to practice evidence base medicine. Any doctor who is not skilled in journal analysis is not likely to be skillful in medical practice.

It has therefore become essential for the clinicians, researchers, and students to read articles from scientific journals. As editor I request all the readers to give your evidence-based article to make KQHDA E-Sandesh more scientifically enhanced. Knowledge increases by sharing, lets share our evidence-based cases in our upcoming issues of Homoeo Sandesh.

I would like to thank Dr. Vijayalakshmi for sharing the article on Prescribing, Dr Shivaprasad K. for the Kannada article, Dr Chiranth & Dr Trupti Pai for contributing to the 11th issue of Homoeo Sandesh.

I wish each and every one" VERY HAPPY UGADI FESTIVAL-HINDU NEW YEAR" and "HAPPY WORLD HOMOEOPATHIC DAY"

- Prof.Dr.Shreepad Hegde drsreepad@gmail.com







DR CARROLL DUNHAM, M.D.

Birth: 29.10.1828, New York Death: 18.02.1877, New York

About Dr Carroll Dunham:

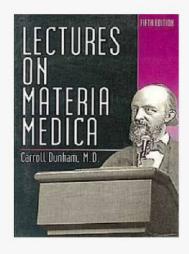
- President of American Institute of Homoeopathy and World's Homoeopathic Convention, 1876
- He did his medicine under Dr Whittaker. While in Dublin, he developed faith in Homoeopathy after he was treated and cured by Lachesis for his dissecting wound that showed no improvement with other system of medicine and was worsening.
- Being treated by Homoeopathy, he developed keen interest in knowing more about the system ending up being an ardent follower of Homoeopathy.
- Was a student of Bonenninghausen and follower of Dr J T Kent
- Due to Stress in his practice, he developed Rheumatic Carditis which was treated with Lithium Carb by Dr Hering, after which he formed the World Homoeopathic Convention, which was a huge success.
- Developed the Famous Dunham Potencies, High potencies.

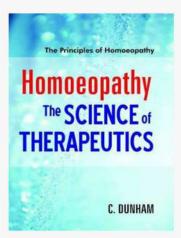
Achievements:

- 1847, Graduated in Medicine from the University of Columbia
- 1850, M.D degree from College of Physicians and Surgeons, New York
- 1852, Started Practice in Brooklyn
- 1860, Editor of American Homoeopathic Review
- 1865, Professorship of Materia Medica in the New York Homoeopathic Medical College, after many years was the dean of same college
- He has written many books and published many of them.

Contributions/Publications:

- Homoeopathy, the Science of Therapeutics,
 1877
- Lectures on Materia Medica, 1879









Dr Vijayalakshmi M Angadi мо (ном)

Professor

Department of Organon of Medicine, Government Homoeopathic Medical College and Hospital, Bangalore

BASIS OF PRESCRIBING

ABSTRACT:

Knowledge of basis of prescribing is an essential part of homoeopathic management of a case. To achieve this, the homoeopathic physician should study the entire representation of the disease and select the most appropriate similimum.

KEYWORDS: Characteristic symptoms, Hahnemann, Prescription.

INTRODUCTION: The objective homoeopathic physician is to cure the sick individual by the way of exact homoeopathic prescription. There cannot be any controversy over the fact that homoeopathic curative prescription is based on totality of characteristic symptoms. Hahnemann in his 153rd aphorism of 6th edition of Organon1 has made a statement regarding this and this is further testified by Boenninghausen by elaborating seven maxims of Characteristic symptoms². But, in a case where no such characteristic totality of symptom is possible, then the remedy which is suitable on the present few common symptom should be considered. Regarding this Hahnemann has made a statement in 163rd aphorism of 6th edition of Organon of Medicine¹.

This article is an illustration of two cases based on such prescription;

CASE REPORT: Case-01:

This is a case report of a female patient aged 62 years. She is a widow, housewife and resident of Bangalore who presented to the outpatient department of Government Homoeopathic Medical College and Hospital on 03.07.2022 with the complaints of burning sensation of bilateral foot and increased frequency of micturition in the last 2 years and pain in left knee joint with mild swelling since 15 days.

The patient was apparently healthy until 2 year back, after which she gradually started with burning sensation of bilateral feet and increased frequency of micturition. Over past 15 days patient even started developing stitching pain and stiffness over left knee joint, which aggravated on walking, standing for long time and got better with rest. The onset and progression of complaints has been gradual.

Negative history: No history of trauma, fall and fever

Past history:

Surgical history: Appendectomy 20 years back, Hysterectomy 7 years back



Medicinal History:

K/C/O- DM- on allopathic medication (Tab.Glycomet 500mg) since20 years. K/C/O – HTN on allopathic medication (Tab. Telma 40mg) since20 years

Family history: Nothing significant noted.

Obstetric history: G3P3L3A0 (FTND)

Personal history:

Diet- Mixed

Appetite- Reduced since 3 days

Thirst- Reduced since 3 days

Desire- Nothing specific

Aversion- Nothing specific

Micturition- 4-5 times/ day; 1time/ night;

increased frequency with scanty urine

Bowel- Regular, Satisfactory.

Sleep- Refreshing

Dreams- Nothing significant

Perspiration- Generalized, No odour, no staining

Thermals- Hot

Life Space Investigation:

Patient born and brought up at Magadi village. Not gone to school due to financial issue. She has 4 sisters and 4 brothers. Got Married at the age of 13 years. Husband was alcoholic. He was abusive and doubtful. He was not taking care of his family. This made her to work as a house maid. Husband passed away 2 years back due to health issue and 2nd son committed suicide due to marriage issue 12 years back.

General Physical Examination:

Nothing significant detected

Vital signs:

Crepitus

Temperature- afebrile at the time of examination.

Pulse- 76 beats /min.

Respiratory rate- 16 cycles/ min.

Blood pressure- 140/90 mm Hg

Locomotor system:- Lower limb- Left knee joint

Inspection: Mild swelling present, No redness.

Palpation: Tenderness present, Warm to touch,

Diagnosis: Osteoarthritis of Left knee joint

Movement

Analysis of the symptoms: (Table 1)

COMMON SYMPTOMS

Left knee joint pain

Stitching type of pain

Stiffness

< Walking

< Standing

Burning sensation of foot

Increased frequency of urine

Swelling on left knee

UNCOMMON SYMPTOMS

Anxiety about health

Forgetfulness

present.

Appetite reduced

Thirstless

restricted.



Evaluation of the case: (Table 2)

MENTAL GENERALS	PHYSICAL GENERALS	CHARACTERISTIC PARTICULARS
Anxiety about health Forgetfulness	Appetite reduced Thirstless	Left knee joint pain Stitching type of pain Stiffness < Walking < Standing Burning sensation of foot Increased frequency of urine Swelling on left knee

Repertorial Totality:

MIND- Anxiety- health about

MIND- forgetful

STOMACH- Appetite- Diminished

STOMACH- Thirstless

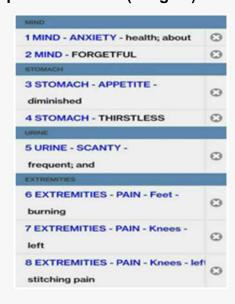
URINE- scanty- frequent

EXTREMITIES- pain- feet- burning

EXTREMITIES- pain- knee- left

EXTREMITIES- pain- knee- left- stitching pain

Repertorial sheet: (Image 1)



agg.				€
10 EXTREM	MITIES -	PAIN	- Knees - w	C
11 EXTREM	IITIES -	STIFF	NESS - Kne	e
12 EXTREM	AITIES -	SWEL	.LING - Kne	E
Remedies	ΣSym	ΣDeg	Symptoms	
	9	9	1001070	
ruta			1, 2, 3, 4, 6, 7, 8 9, 10	l.,
lach.	8	13		
			9, 10	
lach.	8	13	9, 10 1, 2, 3, 4, 6, 7, 9 10 1, 2, 3, 4, 6, 7, 9	
lach. sulph.	8	13	9, 10 1, 2, 3, 4, 6, 7, 9 10 1, 2, 3, 4, 6, 7, 9 10 1, 2, 3, 4, 5, 6, 7	

Prescription: (on 03.07.2022)

RX:

Bryonia Alba 200- 1 dose- (early morning empty stomach)

Calcarea flour 6x (2-2-2) x 1day Syzygium Q- 5drops in water BD



Follow up: (Table 3)

04.07.2023	Pain in left knee joint still persist. Stiffness still persists Burning in B/L foot reduced Sleep-Disturbed Appetite- Good	R _x : Ruta 200 (6-6-6) x 1 day CF6x (2-2-2) x 1 day Syzygium Q (5 drops in water BD)
14.07.2023	Pain in left knee joint Slightly better Other generals are good	R _x : Ruta 1M (6-0-0) x 3 day CP6x (2-2-2) x 10 days FP6x (2-2-2) x 10 days Syzygium Q (5 drops in water BD)
07.09.2023	Pain in left knee joint better Burning in B/L soles better Generals are good	R _x : Ruta Plain (6-6-6) x 3 day KP6x (2-2-2) x 15 days FP6x (2-2-2-2) x 15 days Syzygium Q (10 drops in water BD)

Case- 02:

This is a case report of a male patient aged 43 years, working as associate professor at a private college at Bangalore, presented to the outpatient department of Government Homoeopathic Medical College and Hospital on 27.04.2021 with the complaints of pain in the maxillary region, on and off since5 years, more from 4 days. Complaint of acrid nasal discharge and nose block on and off since 5 years. K/C/O Hypertension since 6 years.

Patient was apparently healthy till 6 years ago. He was diagnosed with hypertension 6 years back when he had been to hospital for recurrent headaches. He was under allopathic medication for hypertension for 6-8 months. Since 5 years,

he complains of recurrent facial pain which was gradual in onset, stuffiness and blockage of nose, alternates with nostrils, which is more in the night. Cold air or cold weather or air conditioning triggers the complaint. Occasionally he complaints of acrid nasal discharge, with stuffiness.

Negative history: No history of radiation of pain to jaw, gums or forehead and eye.

Past history:

Hypertension since 6 years. No significant allergic and surgical history.

Medicinal History: He initially took allopathic treatment, tablets for hypertension for 6-8 months.

Family history: Nothing significant.



Personal history:

Diet- Mixed

Appetite- Adequate; prefers hot food

Thirst- 2-3 litres / day

Desire-Spicy food

Aversion- Nothing specific

Micturition- 4-5 times/ day; 1 time/ night.

Bowel- Alternate days, Unsatisfactory.

Sleep- sound sleep, around 6-7 hours,

occasionally disturbed due to pain and wakes up

around 3 am

Dreams- Nothing significant

Perspiration- more on axilla, no staining on

clothes, non-offensive

Thermals- Chilly

Life Space Investigation:

Patient born and brought up in Manipal. He has completed his Masters in Technology and began to work in an esteemed firm. He got married at the age of 28 years. As a person he says, he is very

organised, gets easily irritated (even when children do little mistakes), if the things are misplaced, wants all things to be placed in the right order. Does all his work independently and does not prefer company. He is extremely sensitive to sound, light. Work front, he is satisfied with the job no much of stress, he is very passionate and zealous about his profession, he is doing his PhD.

General Physical examination:

Nothing significant noted.

Systemic examination:

Respiratory system-

Nose: Hypertrophy of turbinate's

Trachea - centrally placed

PNS: Tenderness elicited in the maxillary region.

Normal vesicular breath sounds heard.

Investigation: Endoscopy of the nose and

paranasal sinuses was already done **Diagnosis:** Chronic Maxillary Sinusitis

Analysis of the symptoms: (Table 4)

COMMON SYMPTOMS	UNCOMMON SYMPTOMS
Nasal obstruction	Aversion to company
Pain in maxillary region	Fastidious
	Desires spicy food
	Chilly patient
	Alternating nostrils
	Night aggravation



Evaluation of the case: (Table 5)

MENTAL GENERALS	PHYSICAL GENERALS	CHARACTERISTIC PARTICULARS
Aversion to company	Desires spicy food	Pain in the maxillary
Fastidious	Unsatisfactory stools	region with tenderness
Easily irritable	Chilly patient	Stuffiness and obstruction of alternate nostrils
		Aggravated at night and from cold

Repertorial Totality:

MIND - company - aversion to

MIND - Fastidious

MIND – Irritability

GENERALITIES - Food - spices (highly

seasoned food) – desire for

NOSE – obstruction – alternating sides

NOSE – obstruction – night

Repertorial sheet:

MIND	
1 MIND - COMPANY - aversion to	©
2 MIND - FASTIDIOUS	0
3 MIND - IRRITABILITY	0
NOSE	
4 NOSE - OBSTRUCTION - alternating sides	0
5 NOSE - OBSTRUCTION - night	©
GENERALS	
6 GENERALS - FOOD and DRINKS agg.	3

Remedies	∑Sym	∑Deg	Symptoms
nux-v.	6	15	1, 2, 3, 4, 5, 6
phos.	6	9	1, 2, 3, 4, 5, 6
vanil.	6	8	1, 2, 3, 4, 5, 6
ars.	5	10	1, 2, 3, 5, 6
lyc.	5	10	1, 2, 3, 5, 6
sep.	5	9	1, 2, 3, 5, 6
kali-bi.	5	7	1, 2, 3, 4, 5
bamb-a.	5	6	1, 2, 3, 4, 5
nat-m.	4	11	1, 2, 3, 5

Prescription: (on 27.04.2021)

Rx:

Nux Vomica 200- 1 dose- (early morning empty stomach)

Placebo- (4-4-4) x 15 days



Follow up: (Table 6)

12.05.2021	Complaint of nose block,	R _x :
	pain in the maxillary region	Nux Vom Plain (4-4-4) x 15
	better by 50%.	days
	Sleep - Good, refreshing.	SL packet- 2- SOS
	Stools-Regular, satisfactory	
	Complaint of nose block,	R _x :
30.05.2021	pain in the maxillary region	Nux Vom Plain (4-4-4) x 2
	better by 75%.	months
	Sleep - Good, refreshing.	SL packet- 10- SOS
	Appetite increased.	
	Bowels - Normal, passes	
	once in a day	
	Feels energetic nowadays.	
10.09.2023	Complaint of nose block	R _x :
	better, pain occasionally	Nux Vomica 200- 1 dose-
	and mild tenderness in the	(early morning empty
	maxillary sinus still present.	stomach)
	Sleep - Good, refreshing.	
	Doesn't get up at night also	Placebo- (4-4-4)x30 days
	Appetite Better.	
	Bowels - Normal, once in a	SL packet- 10- SOS
	day	
	Only during change of	
	weather, I feel some	
	suffocation. If I take steam I	
	will be better.	
	No Episode of Headache till	
	now and my BP is under	
	control 120/80 mm Hg	

CONCLUSION: For the first case, prescription was based on the present few symptoms because of lack of characteristic symptoms. As a result, patient's complaints were slightly better. Repetition was required here because the remedy was partially indicated. Whereas, for the second case the remedy was prescribed on the basis of characteristic symptoms and the patient felt completely better with the indicated medicine.

DECLARATION OF PATIENT CONSENT:

Patient consent was taken.

REFERENCE:

Hahnemann S, Boericke W, Dudgeon R. Organon of medicine. 6th ed. New Delhi: B. Jain Publishers; 2011.
 von, B.C.M.F., Bradford, T.L. and Tafel, L.H. (1994)
 The lesser writings of C.M.F. von Boenninghausen. New Delhi India: B. Jain.





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GHMC, Bengaluru

Homeopathy's Healing Touch for Ovarian Cysts and Fibrocystic Breast Disease

Introduction

Ovarian cysts and fibrocystic disease of the breast stand as two common yet challenging conditions that can significantly impact a woman's well-being. Homeopathy offers а holistic approach that considers not just the physical symptoms but also the emotional and mental aspects of health. In this article, we delve into the realm of homeopathic treatment for ovarian cysts and fibrocystic disease of the breast, exploring how this gentle yet powerful system of medicine can offer relief, restore balance, and promote overall well-being. Through a case and clinical insights, we uncover the principles, remedies, and holistic strategies that make homeopathy a valuable ally in the journey towards women's health and vitality.

Clinical feature of ovarian cyst:

Ovarian enlargement could be

- Non neoplastic is usually due to accumulation of fluid inside the functional unit of the ovary. These could be Follicular Cyst, corpus luteal cyst, theca luten cyst, granulosa lutein cysts, polycystic ovarian syndrome, endometrial cyst. Except endometrial cyst, all are functional cyst & loosely called cystic ovary.
- Neoplastic (benign)

Conservative management of ovarian cyst:

- Asymptomatic
- Unilateral
- Size < 8cm
- · Unilocular cyst without any solid area
- Normal CA 125 (0-35U/ml).

Surgical line of treatment –

cystectomy, oophorectomy

Clinical feature of fibrocystic breast:

Commonly benign lesion occurs in female between 20-50yrs of age. Patient usually premenopausal, C/O of breast pain present throughout the cycle but < pre-menstrual and pain either dull continuous or intermittent & severe.

O/E – coarsely nodular areas, ill-defined either localized or diffuse esp. premenstrual.

Treatment:

Assurance & re -examination at intervals, to wear a well-fitting brasier, to reduce intake of caffeine, Vitamin E may be helpful, cyclic combined oestrogen- progesterone pill, rarely surgery indicated.

Case history:

On 16/4/18, a Hindu, married, female patient, aged 41yrs, Smt S, working as supervisor, came with the



the complaints of menses once in 15days for the past 3 months and a known case of varicose vein, pain legs on & off, since 3yrs

H/O chief complaint:

Menses once in 15 days for the past 3 months, 4 days flow - 2/1/1/1 pads. LMP - 5/4/18 bright red menstrual discharge. Lower abdomen pain starts before menses & lasts for 2 days, radiating to thigh, some times more pain that she has to take off from office. Breast heaviness starts 1 week before menses, subsides during menses. Pain in the legs since 3 yrs < exertion, like standing or walking for long time. Has gone to allopathy doctor & has been diagnosed as varicose veins. She has been advised to sit or lay down with elevated legs & to use stocking.

OB& G History:

Married at the age of 27, 2 children both FTND.
 No major health issues during pregnancy, during delivery & after delivery. Not undergone tubectomy, not under any contraceptives.
 Last Delivery -10 yrs back

Family history:

- Father varicose veins
- Mother DM, fibroid uterus undergone hysterectomy
- MGM CA cervix
- MGF heart attack
- PGF varicose vein
- Siblings: apparently healthy

Personal history:

• Diet - mixed

- Appetite normal
- Aversion oily food (causes throat irritation)
- Stool once satisfactory
- Thermals chilly

Life space investigation:

Born & brought up in village. As a student studious, regular to school, would complete homework in time. Parents need not had to tell her to study. She wanted to get first place. Completed degree, working as supervisor. She has to do lot of field visits. Lot of travelling involved. Patient says -"I don't talk loudly & I do not like anybody talking loudly. At Work place - since I am supervisor, I have to manage my subordinates & also higher ups, somehow managing it, is difficult but, if they tell something to me, I keep quiet & do not talk much with them. Usually, I don't keep any work pending. In 2010, husband had lot of health issues, finally in 2015, underwent open heart surgery. I got down mentally after that. He is the head of the family, something happens to him, who will take care of us. My brother & sister helped me during that time. I want to be active & happy (but because of my health issue not able to), I have Fear of darkness, height, water." Anxiety health about investigations done. (I am 40 plus better to get investigation)

Mental generals:

- Conscientious
- Ambitious
- Mild
- Sensitive to rudeness
- -Sad
- Anxiety future about



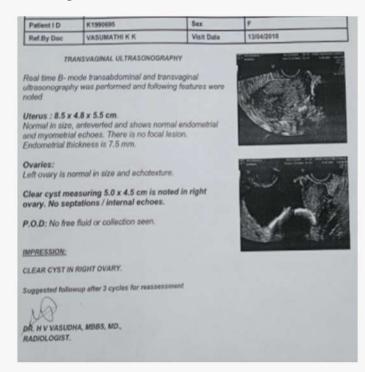
- Fear of darkness, water, height.
- Anxiety health about

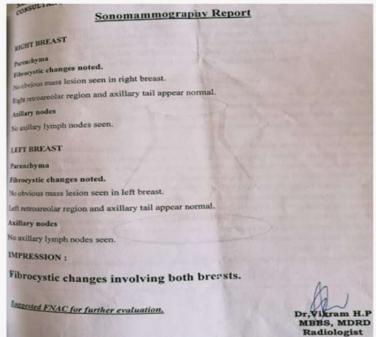
General physical examination:

- Height 5ft 4inch
- Weight 60 kgs
- Pulse 80/min
- BP 120/ 78mmhg
- Pallor absent

- RS NAD
- CVS- NAD
- CNS NAD
- Per abdominal examination no tenderness, no mass felt. NAD
- Legs examined slight enlargement of veins present in both popliteal fossa. No swelling, no color changes. No pedal edema
- Breast slight tenderness+, no mass felt, but patient says mass sometimes can be felt esp. Few days before menses & subsides with the menses. No axillary lymph node enlargement.

Investigation





Nosological diagnosis – Right ovarian cyst, fibrocystic disease breast, varicose vein.

16/4/18 - Apis 200 tds/3 days.

Ovarian tumor – Right side, (+ apis also is indicated in metrorrhagia, profuse, stinging pain, great tenderness over abdomen & uterine region).



Miasmatic diagnosis – psoro - sycotic

	psora	sycosis	syphylis
Family history		X (vv, fibroid uterus)	X(Ca cervix, heart attack)
Particulars			
Ovarian cyst		Х	
Varicose veins		х	
Fibrocystic breast		Х	
Early menses			х
Pain abdomen to leg			Х
Conscientious & diligent	х		

Evaluation of symptoms:

- Mental generals Ambitious, conscientious, diligent. Anxiety health, anxiety future about, fear of darkness, height & water. Mild person.
 Sensitive to rudeness
- Physical general Chilly patient
- Particulars Early menses (15 days), heaviness of breast before menses, pain lower abdomen radiating to thigh & leg, pain in legs
- < physical exertion. Throat irritation A/F oily food

Selection of Rubrics

Sl no	chapter	rubric	sub rubric
1	Genitalia female	menses	Early, frequent
2	Genitalia female	tumors	ovaries
3	Mind	Fear	Dark
4	Mind	fear	High places
5	mind	fear	Water
6	Mind	Anxiety	Health
7	Mind	Anxiety	Future about
8	chest	Pain mammae	Menses before
9	Extremities	Pain	Calf
10.	Generalities	Food	Fat <

Fear darkness, H2O	(Psora)	
Fear height	х	
Anxiety health	х	
Anxiety future about	X	
Ambitious	х	
Sadness	x	
Mild	х	
Sensitive to rudeness	х	

Repertorial Result

- Calc c 18/8
- Phos 14/7
- Puls 12/7
- Lach 10/6
- Nux v 10/6
- Calc c In addition to reportorial result, pain mammae menses before it covers, mild disposition & covers cyst pathology. Menses too early, too profuse, too long, cutting pain in uterus. Breasts tender & swollen before menses.

Follow up 3/5/18 - LMP - 2/5/18, pain abdomen ++, tenesmus + temporary relief passing stool.

- NV 200 bd/1day

Asked to take Calc C 200 bd /2 days on 5th day of menses.

Follow up 23/5/18 – LMP -19/5/18, flow 4 days, pain abdomen + not severe, heaviness of breast before menses +, cycle – 18days

- pl od /5days

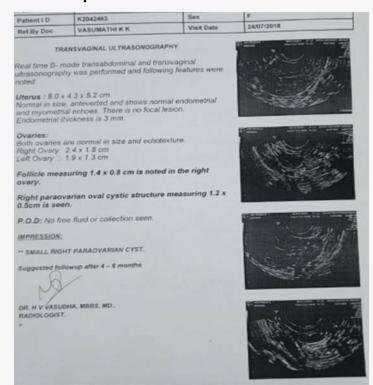


Follow up 12/6/18 – LMP – 7/6/18, cycle - Bry 200 bd/ 2 days 20/days, flow 4days, slight pain abdomen during menses, heaviness of breast +

- calc c 200 bd 2 days
- LMP 26/6/18 cycle 20 days, pain lower abdomen radiating to thigh & legs.
- Xanthoxylum 200 bd /2 days

Follow up 16/7/18- LMP - 15/7/18, cycle 20 days, pain abdomen +, heaviness of breast+. - pl od/ 5 days

Follow up 7/8/18 -



Para ovarian cyst LMP - 4/8/18, cycle 21 days. - Thuja 200 bd 2 days

Follow up 19/9/18 - Dry cough since 2 days, feverish, body ache, > lying down, headache. LMP – 27/8/18, cycle 23 days.

Follow up 9/11/18 – cycle 26 days, heaviness of breast + +, LMP - 8/11/18

- Conium 200 bd 3 days

Follow up 5/12/18- LMP - 2/12/18, cycle 26 days, flow 4days, slight abdominal pain, heaviness of breast much better.

- pl/ od/ 5 days

Follow up 16/1/19- LMP – 27/12/18, cycle 26 days, flow 4 days.

- pl od/ 5 days

Patient I D	K2124597	Sex	F
Ref.By Doc	LAKSHMI	Visit Date	09/01/2019
	TRASONOGRAPHY OF AS size and echotexture. No for		
GALL BLADDER	- Normal in size with normal lus / sludge. Wall thickness it		
PANCREAS - No	rmal in size and echotexture		
SPLEEN - Norma	in size and echotexture.		To see the contract of the con
Corticomedulary calculus. PELVIS	kidneys are normal in size ar differentiation is normal. No ded and appears normal.		
No free fluid in A	bdomen.		
IMPRESSION :			
NO SONOLOGIC	CAL ABNORMALITY DETER	CTED.	
DR. H V VASUD RADIOLOGIST.	HA, MBBS, MD.,		



Patient I D	K2124597	Sex	F
Ref.By Doc	LAKSHMI	Visit Date	09/01/2019
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MPRESSION:			NAMES AND ADDRESS OF

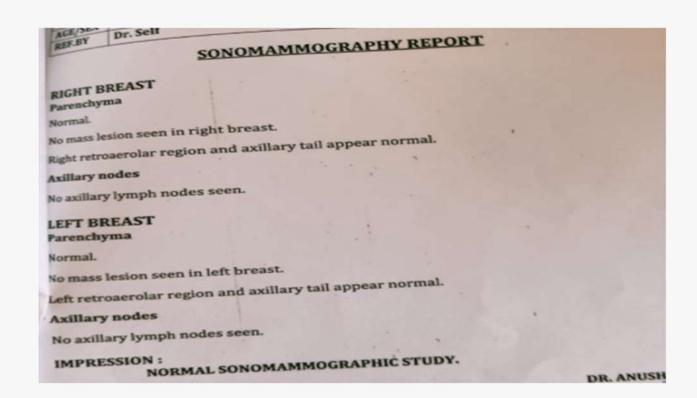
DR. H V VASUDHA, MBBS, MD.,

PADIOLOGIST.



Conclusion:

Through this case study, we witness the power of homeopathy in addressing menstrual irregularities stemming from underlying conditions like ovarian cysts and fibrocystic breast disease. By tailoring the treatment to the patient's unique symptomatology and constitutional characteristics, homeopathy offered a gentle, holistic approach to restoring menstrual harmony and promoting overall well-being.







ಪ್ರೊ .ಡಾ .ಶಿವಪ್ರಸಾದ್ ಕೆ.

ಪ್ರಾಂಶುಪಾಲರು, ಯೆನೆಪೋಯ ಹೋಮಿಯೋಪಥಿಕ್ ವೈದ್ಯಕೀಯ ಕಾಲೇಜು ಮತ್ತು ಆಸ್ಪತ್ರೆ ಯೆನೆಪೋಯ ಘಟಕ (ವಿಶ್ವವಿದ್ಯಾಲಯವೆಂದು ಪರಿಗಣಿಸಲಾಗಿದೆ) ನರಿಂಗಾನ, ದೇರಳಕಟ್ಟೆ, ಮಂಗಳೂರು

ವೈಜ್ಞಾನಿಕ ಪ್ರಗತಿಪಥ

ಹೋಮಿಯೋಪಥಿ ಔಷಧಿಯನ್ನು ಮೂಲವಸ್ತುಗಳಿಂದ ಪರಿವರ್ತಿಸಿ ಸಂಸ್ಕರಿಸುವ ವಿಧಾನವನ್ನು ಪರಿಕಲ್ಪಸಿ ಪ್ರಯೋಗಿಸಿದ ಮೇಧಾವ ದಾ.ಹಾನ್ನೆಮನ್ನರು ಕಾಸಾಯನಿಕ ಸಂಯುಕ್ತಮಳನಗಳ ಸಂಶೋಧನಾತ್ಮಕ ಪ್ರಯೋಗಗಳಿಂದ ಪ್ರಭಾವಿತಕಾಗಿ ಅದಕ ನೆಲೆಯಲ್ಲಿ ತಮ್ಮ ನಿಲುವನ್ನು ಪ್ರತಿಪಾದಿಸಿದಕು. ನಿಸರ್ಗದಲ್ಲಿರುವ ಪ್ರತಿಯೊಂದು ವಸ್ತುವಿನ ಕಣದಲ್ಲಿಯೂ ಅದಕದೇ ಆದ ಅಸ್ಥಿತ್ವವಿದೆ. ಅದಕದೇ ಆದ ಗುಣಲಕ್ಷಣಗಳಿವೆ. ಅವುಗಳ ಇಕುವಿಕೆಯಿಂದ ಇತಕ ವಸ್ಕುಗಳೊಂದಿಗೆ ಪಕಸ್ಪಕ ಸಮಸ್ವಯತೆಯನ್ನು ಹೊಂದಿ ನಿಸರ್ಗದಲ್ಲಿ ಸಮತೋಲನೆಯನ್ನು ಕಾಪಾಡುತ್ತವೆ. ಅನಾದಿಕಾಲದಿಂದಲೂ ನೈಸರ್ಗಿಕ ಕ್ರಿಯೆಗಳು ಸಂಪೂರ್ಣತೆಯನ್ನು ಅರಿಯುವ ಬಗ್ಗೆ ತೋರಿಸಿಕುವ ಆಸಕ್ತಿ, ಸಂಶೋಧನೆ ಮತ್ತು ಏವಕಣೆ ಮನುಷ್ಯನ ಮನಸ್ಸಿನ ಕುತೂಹಲದ ಪರಿಣಾಮ. ಯಾವುದು ಇಷ್ಟಕ ವಕೆಗೆ ನಮ್ಮ ಅರಿವಿಗೆ ಬಂದು ಒಂದು ಘಟ್ಟದಲ್ಲಿ ಸಾಕ್ಷಾಧಾಕಗಳಿಂದ ಪ್ರಮಾಣಿತವಾದದನ್ನು ನಾವು ಏಜ್ಞಾನ ಎನ್ನುತ್ತೇವೋ ಮತ್ತು ಯಾವುದು ಪ್ರಮಾಣಿತವಾದಕೂ ತನ್ನಿoತಾನಾಗ<u>ಿ</u> ನಿಸರ್ಗದಲ್ಲಿ ಮನುಷ್ಯನ ನಿಕಂತಕವಾಗಿ ಸೀಮತ ಸಮರ್ಥಿಸಲಾಗದ್ದನ್ನು ಅವೈಜ್ಞಾನಿಕವೆಂದು ಅಲ್ಲಗೆಳೆಯುತ್ತೇವ್ರೋ ಇದು ಪಟ್ಟಬದ್ಧ ಹಿತಾಸಕ್ತಿಗಳ ಸ್ವಾರ್ಥದ ಪರಿಭಾಷೆ. ಏಕೆಂದರೆ ಆಧುನಿಕ ಸೂಕ್ಷ್ಮಾಭಿಕುಚಿಯ ತಂತ್ರಜ್ಞಾನ ಮಾಧ್ಯಮಗಳ ಉಪಯೋಗದಿಂದ ನೈಸರ್ಗಿಕ ಕ್ರಿಯೆಗಳ ಸ್ಪಷ್ಟ ವಿವಕಣೆ ನಿಕಂತಕವಾಗಿ ಲಭಿಸುತ್ತಿವೆ. ಇಂತಹ ಮಾಹಿತಿ ಸಂಗ್ರಹದಿಂದ ಪ್ರತಿಯೊಂದು ವಿಷಯದ ಆಳ ಮತ್ತು ವೈಜ್ಞಾನಿಕ ಹಿನ್ನೆಲೆಯ ಅರಿವಾಗುತ್ತದೆ. ಹೋಮಯೋಪಥಿ ವೈದ್ಯಕೀಯ ಪದ್ಧತಿಯಲ್ಲ ಔಷಧಿ ಶಕ್ತೀಕರಣ ಪ್ರಕ್ರಿಯೆಯಲ್ಲ ಇಂತಹ ಮಹತ್ವದ ಚಿಂತನೆಯಿದೆ.

ದಾ. ಹಾನ್ನೆಮನ್ನರು ನಿಸರ್ಗದಲ್ಲಿ ಕಂಡುಬರುವ ಒಂದು ಕ್ರಿಯೆಯನ್ನು ವ್ಯಾಖ್ಯಾನಿಸುತ್ತಾ ದಟ್ಟ ಅಕಣ್ಯದಲ್ಲಿ ಅಗ್ನಿಯ ಮೂಲ ಹೇಗೆ ಉಂಟಾಗುತ್ತದೆ ಮತ್ತು ಹೇಗೆ ಅದು ಕಾಳ್ಗಿಚ್ಚಾಗಿ ಹರಡುತ್ತದೆ. ಕಾಡಿನಲ್ಲಿ ಸ್ವಚ್ಚಂದ ಏಹರಿಸುವ ಪ್ರಾಣಿಗಳ ಓದಾಟದಿಂದ ಉಂಟಾಗುವ ಕಲ್ಲುಗಳ ತಕ್ಕಾಟದಿಂದ ಅಥವಾ ಪರಸ್ಪರ ಘರ್ಷಣೆಯಿಂದ ಉಂಟಾಗುವ ಬೆಂಕಿಯ ಕಿಡಿಯಿಂದ ವ್ಯಾಪಿಸುವ ಬೆಂಕಿಯ ಮೂಲದ ಅರಿವು ಎಲ್ಲದೆ. ಇಂತಹ ಪ್ರಕ್ರಿಯೆಗಳನ್ನು ಏಶ್ಲೇಷಿಸುತ್ತಾ ನಿರ್ದಿಷ್ಟ ಪ್ರಮಾಣದ ಘರ್ಷಣೆಯಿಂದ ಶಕ್ತಿಯ ಉತ್ಪಾದನೆಯಾಗುತ್ತದೆ ಎನ್ನುವ ಪರಿಕಲ್ಪನೆಯೊಂದಿಗೆ ನಿಸರ್ಗದತ್ತವಾದ ಯಾವುದೇ ವಸ್ತುವನ್ನು ಸೂಕ್ತನಿಯಮಗಳ ಪ್ರಕಾಠ ತಟಸ್ಥ ವಸ್ತುವಿನೊಂದಿಗೆ ಘರ್ಷಣೆಗೆ ಒಳಪಡಿಸಿದಾಗ ಅದಕಲ್ಲ...



ಅಂತರ್ಗತವಾಗಿಕುವ ಶಕ್ತಿಯು ಉದ್ದೀಪನಗೊಂಡು ತಟಸ್ಥ ವಸ್ತುವಿಗೆ ವರ್ಗಾಯಿಸಲ್ಪಡುತ್ತದೆ. ಈ ಕ್ರಿಯೆಯನ್ನು ವಿವಿಧ ಕೋನಗಳಲ್ಲಿ ವಿವೇಚಿಸಿ ಪ್ರಯೋಗಗಳನ್ನು ಮಾಡಿ ವಿಮರ್ಶಿಸಿ ಹೋಮಿಯೋಪಥಿಯಲ್ಲಿ ಔಷಧಿಗಳ ಶಕ್ತೀಕಕಣ (ಡ್ರಗ್ ಡೈನಮೈಸೇಷನ್) ದ ಪರಿಕಲ್ಪನೆಯನ್ನು ಪರಿಚಯಿಸಿದರು. ಶಕ್ತೀಕಕಣದಲ್ಲಿ ತಟಸ್ಥವಸ್ತು ಮಾಧ್ಯಮವಾಗಿ ವಿಶೇಷವಾಗಿ ಸಂಸ್ಕರಿಸಿದ ಹಾಲ್ಸಕ್ಕರೆ, ಮದ್ಯಸಾಕ ಮತ್ತು ಬಟ್ಟಿಯಿಳಿಸಿದ ನೀಕನ್ನು ಉಪಯೋಗಿಸಲಾಗುತ್ತದೆ.

ಘನ ಔಷಧೀಯ ವಸ್ತುಗಳ ಶಕ್ತೀಕಕಣದಲ್ಲಿ ಅವುಗಳನ್ನು ಪುಡಿಗುಟ್ಟಿ ನಿರ್ದಿಷ್ಟ ಪ್ರಮಾಣದ ಹಾಲ್ಸಕ್ಕಕ್ ಪುಡಿಯೊಂದಿಗೆ ಬೆಕೆಸಿ ನಿಯಮಿತ ಸಮಯದ ಚಲನೆಯನ್ನು ನೀಡಿ ಆಯಾಯ ಶಕ್ತೀಕೃತ (ಪೊಟೆನ್ಸಿ) ಔಷಧಿಯನ್ನು ತಯಾರಿಸಲಾಗುತ್ತದೆ. ಉದಾಹಕಣೆಗೆ ದಶಾಂಶ (ಡೆಸಿಮಲ್) ಶತಾಂಶ (ಸೆಂಚಿಸಿಮಲ್) ಮಲಿಯಾಂಶ (ಮಿಲೀಸ್ಮಲ್) ಶ್ರೇಣಿಗಳ ಏವಧ ಬಗೆಯ ಅಂದಕೆ ೩,೬,೧೨,೩೦,೨೦೦, ೧೦೦೦, ೦/೧,೦/೨,೦/೩ ಇತ್ಯಾದಿ ಶಕ್ತೀಕೃತ ಔಷಧಿಗಳನ್ನು ಸಂಸ್ಕರಿಸಲಾಗುತ್ತದೆ.

ಅಂತಯೇ ದ್ರವರೂಪದಲ್ಲರುವ ಅಥವಾ ಮೃದುಸ್ವರೂಪದ ಔಷಧೀಯ ವಸ್ತುಗಳ ಶಕ್ಕೀಕರಣದಲ್ಲ ಅವುಗಳನ್ನು ಹದವಾಗಿ ಕತ್ತರಿಸಿ, ಮೆದುಗೊಳಿಸಿ ನಿರ್ದಿಷ್ಟ ಪ್ರಮಾಣದ ಬಟ್ಟಿಯಿಳಿಸಿದ ನೀಕು ಅಥವಾ ಮದ್ಯಸಾಕದೊಂದಿಗೆ ಬೆಕೆಸಿ ಮೂಲದ್ರವ (ಮದಕ್ ಟಿಂಕ್ಟ್ಟಕ್) ವನ್ನು ಹನಿಗುಟ್ಟಿಸಿ ನಂತಕ ಅದನ್ನು ನಿರ್ದಿಷ್ಟ ಪ್ರಮಾಣದ ಮದ್ಯಸಾಕದೊಂದಿಗೆ ಬೆಕೆಸಿ ನಿಯಮಿತನ ರೀತಿಯಲ್ಲಿ ಪ್ರಹಾಕ ನೀಡಿ ಆಯಾಯ ಶಕ್ತೀಕೃತ (ಪೊಟೆನ್ಸಿ) ಔಷಧಿಯನ್ನು ಮೇಲೆ ನಮೂದಿಸಿದ ಶ್ರೇಣಿಗಳಲ್ಲಿ ಸಂಸ್ಕರಿಸಲಾಗುತ್ತದೆ. ಈ ಶಕ್ತೀಕಕಣದ ಮೂಲಕ ಜೀವಶಕ್ತಿಗೆ ಸಮನಾದ ಔಷಧೀಯ ಶಕ್ತಿಯನ್ನು ಸಂಸ್ಕರಿಸಿ ಅಕೋಗ್ಯವಂತ ವ್ಯಕ್ತಿಯಲ್ಲ ಪ್ರಯೋಗಿಸಿ ಸಿದ್ಧೀಕರಿಸಿ, ಕೋಗಗ್ರಸ್ತ ವ್ಯಕ್ತಿಯ ಚಿಕಿತ್ಸೆಯಲ್ಲ ಉಪಯೋಗಿಸಲಾಗುತ್ತದೆ.

ಇದು ಯಾವುದೇ ಊಹೆಗೆ ನಿಲುಕದ ಸತ್ಯಾಂಶ. ಕಣ್ಣಿಗೆ ಕಂಡದ್ದೇ ಸತ್ಯ, ಸಾಕ್ಷಾಧಾಕಗಳಿದ್ದರೆ ಮಾತ್ರ ವೈಜ್ಞಾನಿಕ, ಕಾಣದ್ದು ಅವೈಜ್ಞಾನಿಕ ಅಥವಾ ಮೌಧ್ಯ ಎನ್ನುವ ಹುಂಬತನಕ್ಕೆ ಯೋಗ್ಯ ಉತ್ತಕ. ಏಜ್ಞಾನ ಎನ್ನುವುದು ಯಾವುದೇ ಏಷಯವನ್ನು ಸೈದ್ಧಾಂತಿಕ ಬುನಾದಿಯಲ್ಲಿ ಪರಿಕಲ್ಪಿಸಿ ನಂತರ ಅದಕ್ಕೆ ಪೂಕಕ ಏಧಿನಿಯಮಗಳನ್ನು ನಿಕೂಪಿಸಿ ಕಾರ್ಯಗತಗೊಳಿಸಿ ನಾನಾ ಕೋನಗಳಲ್ಲಿ ಏಮರ್ಶಿಸಿ, ಪ್ರಯೋಗಿಸಿ ಅದರಿಂದ ಉಂಟಾಗುವ ಪೂಕಕ ಅನುಭವವನ್ನು ದಾಖಲಿಸುವುದು . ಈ ಧ್ಯೇಯಗಳೇ ಡಾ.ಹಾನ್ನೆಮನ್ನಕ ಆವಷ್ಕಾಕಗಳ ಮೂಲ ಮಂತ್ರ. ಅವಕನ್ನು ಅನುಸರಿಸಿದ ಹೋಮಿಯೋಪಥಿಯ ಅನುಯಾಯಿಗಳು ಈ ತತ್ತ್ವೆಗಳ ಪರಿಪೂರ್ಣತೆಗೆ ತಮ್ಮ ಅನುಭವಗಳ ಧಾಕೆಯೆಕೆದಕು.

ಪ್ರಗತಿಪಥದಲ್ಲಿ ಮುಂದುವರಿಯುತ್ತಿರುವ ಐಶಿಷ್ಟ ವೈದ್ಯಕೀಯ ಪದ್ಧತಿಯ ಮೂಲ ಏಚಾಕಗಳ ಬಗ್ಗೆ ಸಂಶೋಧನೆಗಳು ನಡೆಯುತ್ತಿದ್ದು ವೈಜ್ಞಾನಿಕ ಲೇಖನಗಳು ನಿಯತಕಾಲಿಕೆಗಳಲ್ಲ ಪ್ರಕಟಿಸಲ್ಪಟ್ಟಿವೆ. ನಿರ್ದಿಷ್ಟ ಕಾಯಿಲೆಗಳಲ್ಲಿ ಹೋಮಿಯೋಪಥಿ ಔಷಧಿಗಳ ಪರಿಣಾಮ ಮತ್ತು ಆಧುನಿಕ ಚಿಂತನೆಗಳ ಬಗ್ಗೆ ವೈಜ್ಞಾನಿಕ ಏವಕಣೆಯನ್ನು ನೀಡುವ ಕ್ಲಿನಿಕಲ್ ಪ್ರಯೋಗಾತ್ಮಕ ಸಂಶೋಧನೆಗಳು ಸವಿಸ್ತಾಕವಾಗಿ ಏಶ್ವದ ಎಲ್ಲೆಡೆ ನಡೆಯುತ್ತವೆ. ಸಂಪೂರ್ಣ ಆಕೋಗ್ಯ ಭಾಗ್ಯವನ್ನು ನೀಡಲು ಹೋಮಿಯೋಪಥಿ ವೈದ್ಯಕೀಯ ಪದ್ಧತಿಯಲ್ಲಿ ಸರ್ವ ಪ್ರಯತ್ನವು ಸದಾ ನಡೆಯುತ್ತಿದೆ.



Report on Guest Lecture at J T Kent Auditorium Government Homeopathic Medical College, Bangalore

Date: 27th December 2023



The Government Homeopathic Medical College, Bangalore, in association with the Karnataka Qualified Homeopathic Doctors' Association (KQHDA), hosted a guest lecture at the J T Kent Auditorium Government Homeopathic Medical College, Bangalore on 27th December 2023.

The distinguished guests for this lecture included Prof Dr. B. D. Patel, the patron of KQHDA, Prof Dr. Shreepad Hegde, the president of KQHDA,

Prof Dr. H. L. Swamy, the chairman of KQHDA, and Prof Dr. V. Guruprasad, the Principal of GHMC&H. The invitees comprised of teaching staff, medical officers, postgraduate scholars, interns, 3rd and 4th-year students, and several homeopathic practitioners. The event commenced with an invocation song performed by Aishwarya Govind and Pragna, students from the 4th year. Dr. Lakshmi B. S, Professor at GHMC&H, formally welcomed the dignitaries. Subsequently, Dr. Shreepad Hegde gave a brief introduction of the speaker, Dr. Med Bridget John Wimmer, a senior homeopath Berlin, Germany.

Dr. Wimmer delivered a lecture on the "Status of Homeopathy in Europe," also presented several cases treated with classical homeopathy. She exemplified a case involving a patient suffering from depression and previously reliant on allopathic medication. Through homeopathic treatment, the patient's dependence on antidepressants decreased and was eventually withdrawn. Dr. Wimmer emphasized the significance of meticulous case-taking and comprehensive investigations, including vitamins and minerals, for better prescription. She also shared insights on observing Hering's Law of Cure while treating cases.

Dr. B. D. Patel, addressing the audience, encouraged students to become confident homeopathic prescribers. Dr. V. Guruprasad elaborated on advancing homeopathy to greater heights, emphasizing its prominence as the primary line of treatment. Dr. Wimmer was honoured with a letter of appreciation and a memento in acknowledgment of her informative session. The event concluded with a vote of thanks delivered by Dr. H. L. Swamy, followed by the national anthem. The entire event was skilfully anchored by Dr. Chiranth, the Secretary of KQHDA.

- Reported by Dr. Lakshmi B S

Prof. & HOD, Dept of FMT, GHMC, Bengaluru



Report on National Homoeopathic Seminar KLE Homeopathic Medical College, Belagavi

On 10-11th February 2024 K.L.E Homoeopathic Medical College in association with Karnataka Qualified Homoeopathic Doctors Association, Bangalore organised a National Conference that focussed on the theme of Empowering wellness for non Communicable diseases had been a feast of knowledge for us delegates which came from different states and far distances. Venue being K.L.E centenary convention centre J.N.M.C campus at Belgavi, Karnataka. The inauguration program was presided over by the honourable Vice Chancellor of KLE academy of higher education and research, an eminent pathologist Dr. Nitin Gangare in presence of Director of KLE Homoeopathic Medical College Dr. Mukund Udachankar, Principal of KLE Homoeopathic Medical College Dr. Swaroopa Patil, member of quality board of N.C.H Dr. Janardan Nair, Secretary of N.C.H Dr. Sanjay Gupta, and Dr. Shreepad Hegde President of Karnataka Qualified Homoeopathic Doctors Association. The N.C.H members were felicitated at the outset.

The keynote speakers of day one of the seminar were Dr Navin Pawaskar and Dr Shashikant Tiwari. Dr Pawaskar demonstrated that first we need to understand areas of our scope and then we can easily collaborate with super specialists for efficient management of cardiac diseases. Dr. Shashikant Tiwari inspired the audience by showing a case of an infant who was failing to thrive with remarkable improvement and he quoted Dr Kent saying that it is the trust of our patients which makes the physician take up new challenging cases and to work harder. Dr Janardan Nair reminded the audience how thorough our case records should be in order to run with the demands of the present times. Dr. Sanjay Gupta urged everyone to visit the N.C.H council site as well as other research websites. He encouraged teacher's to conduct O.P.D level research. Dr. Bhuvaneshwari delved deep into understanding of how to do anemnesis of cases of substance abuse in patients admitted in psychiatric wards and also keeping in mind the medicolegal aspect related to such cases. It was followed by cultural programme which culminated into a garden ambience dinner party with delicious Buffet at the lawns of K.L.E campus.

Day two of the conference began with Dr. Praveen Jain showed the type of cases, where paternal family history is to be considered especially if mutation occurs post delivery. This gave new insights for the audience. Dr. Anoop Nigwekar stressed on use of the value of empathy to geriatric age group of patients & how it would benefit our patients as well as the doctors in the long run. Dr.B. D Patel illustrated the different lifestyle influences resulting in the formation of P.C.O.S and explained healthy methods of life and living in order to attain wellness, in which case even medicines are not



required. He strictly warned the youngsters of the hazards of going to Malls, western dressing and eating styles. Dr. Shreepad Hegde showed outstanding results in complex cases of neuro-opthalmic manifestations of space occupying lesions of the brain. Dr. Shahala Nadaf presented the important highlights on the subject of Body Language on behalf of Dr. Ajit Kulkarni. This conference not only acted as a knowledge sharing platform but they also allowed delegates to showcase their paper presentation and poster presentation work assessment of which was a herculean task by the hands of noted judges who are highly eminent in the homoeopathic field. There were 23 posters and 47 scientific paper presentations.

The conference received 895 delegates with faculty and students from more than 25 Homoeopathic Medical Colleges distributed from nearly 15 different states of India. The valedictory ceremony was presided by the Registrar of K.L.E Dr. M.S Ganachari. The principal presented the report of the seminar. It was followed by a felicitation ceremony by the hands of Registrar and President of Karnataka Qualified Homoeopathic Doctors Association in which the undergraduate students who won 1st and 2nd place for poster presentation were from Housabai Homoeopathic Medical College, Kolhapur. The post- graduate students who bagged the 1st and 2nd place for poster competition belonged to Fr. Muller Homoeopathic Medical College, Mangalore and Bharatiya Vidyapeeth Homoeopathic Medical College, Pune. 1st place in Scientific paper presentation in category of faculty was won by Assistant Professor from Housabai Homoeopathic Medical College, Kolhapur and 2nd place was won by Assistant Professor from Arihant Homoeopathic Medical College & R.I, Gandhinagar, Gujarat. The feedback of the entire two days event was excellent on account of the courteous attitude of K.L.E faculty and students as well as massive participation from principals of neighbouring institutions along with their faculties and students.

For the first time KQHDA had an opportunity to join hands with KLE in organising this conference and Prof. Dr. Shreepad Hegde as a member in the Organising Committee and played a major role in making this event a grand success.KQHDA is thankful to KLE Institute and Prof. Dr. Udchankar and team for giving us this opportunity.

- Reported by:

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'BRAINVITA' Stimulate your grey matter

1. Identify the plant and give its Doctrine of Medicine?



2. Which Pioneer has said these lines?

"The Strain which runs through every pathogenic symptom complex has been called the 'genius' of the drug. To give its proper place in the prescription should be ideal for every prescriber."

- 3. Which Mineral group has "Rancour" as the main theme?

 The other characteristics of this group is grudge, anger, hate, criticism, Disappointment with bitterness and gloomy. They are closely held in, their idealized picture of the world is different than reality.
- 4. The proving of this Nosode was done in high Potencies only. Name the drug and the prover?

Send us your answers with your Full name and Address by E-mail to kqhda1992@gmail.com Before 31st May, 2024.

First 5 winners name will be announced in our next Issue.

Answers of 10th Issue

- 1. Thyroglossal duct and cyst
- 2. E A Farrington, Book on Clinical Materia Medica
- 3. Cocculus Indica
- 4. Digitalis Purpura, Family Scrophulariacea



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SEMINAR IN GHMC







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