

## KARNATAKA QUALIFIED HOMOEOPATHIC DOCTORS' ASSOCIATION ®

VOLUME: 1, ISSUE: 8, JANUARY 2023

PRICE: Rs. 25/-

# In this issue:

P2: Editor's Message

P4: Pioneer

Dr. E. B. NASH

P6: A CASE OF CONTACT DERMATITIS
TREATED WITH HOMOEOPATHY

Dr. Ashwini More, BHMS, MD (HOM)

P8: HOMOEOPATHIC MANAGEMENT OF

**VITILIGO** 

Dr. Sanjay Panicker, BHMS

P13: Kannada Article

Dr Anusha Kulkarni

P15: Brainvita

P16: Photogalaxy











## **Editor's Message**

the epidermis, dermis, and the hypodermis, all three of which vary significantly in their anatomy and function. It shields the body against infection, dehydration, and temperature Editor in Chief: provides sensory information changes; about environment; manufactures vitamin D; and excretes salts and small amounts of urea. The type of skin is determined by genetics, although it will also be affected by other factors and can change with time. Based on these characteristics, there are five types of healthy skin: normal, dry, oily, combination

> A skin condition, also known as cutaneous condition, is any medical condition that affects the integumentary system—the organ system that encloses the body and includes skin, nails, and related muscle and glands.

SKIN is the largest organ in the body and covers the

body's entire external surface. It is made up of three layers,

Functions of the skin are:

Protecting the body against trauma.

(both oily and dry skin) and sensitive.

- Regulating body temperature.
- Maintaining water and electrolyte balance.
- Sensing pleasant and painful stimuli.
- Participating in vitamin D synthesis. Some disorders can also cause the deficiency.

Some of the most common causes of skin problems include:

- Viruses.
- Bacteria trapped in the hair follicles and skin pores.
- Microorganisms, parasites, or fungi living on the skin.
- Genetic factors.
- Weak immune system.
- Different illnesses affect the kidneys, immune system, thyroid, and other body parts.

Dr. Shreepad Hegde

Editorial Team:

Dr. Latha Devarajan

Dr. Chiranth

Dr. Trupti Pai

Dr. Amit V. Rolli

Dr. Anusha Kulkarni

### **Advisory Committee:**

Dr. B.D. Patel

Dr. S.K. Tiwari

Dr. Anand Kulkarni

Dr. H.L. Swamy

Dr. P.D. Praveenkumar



## **Editor's Message**

Skin diseases are a major and worrying problem in societies due to their physical and psychological effects on patients. Detecting skin diseases at an early stage has an important role in treatment. The process of diagnosing and treating skin injury is related to the skill and experience of the Homoeopathic doctors.

According to Dr T. F. Allen most of the skin diseases are either secondary or tertiary state of miasmatic action. The skin diseases represent themselves depending on the underlying miasms. The psoric skin is dry, rough, unhealthy looking seems as if unwashed. Voluptuous itching and burning are always psoric manifestation while the psoric eruptions appear with dryness or little suppurative with seropurulent discharge. The syphilitic skin looks dull, sweaty, moist. There is a tendency to damage of inner tissue involvement and ulceration. The sycotic skin is oily, greasy, shiny appearance with presence of mole, freckles, warty growth and excess of hair on all over the body or a part of body. There is hyper pigmentation of the different part of the body. Rapidly healing injuries with little or no suppuration is psoric while pus, abscess, growth like formation of keloid, hypertrophic scar is sycotic. In case of psora-syphilitic patient there is also formation of pus and abscesses along with a tendency to glandular involvement. Psoriasis, skin cancers, erysipelas, lupus etc are trimiasmatic in nature. Ringworm, varicose ulcer, herpes, urticaria, hyperhidrosis, impetigo, leprosy, any form of purpura, impetigo, etc. are pseudo-psora in nature.

Theory of suppression is explained many ways in homoeopathic philosophy, that is based on the idea that the individual should be assessed as a whole rather taking local complaints in a disease process.

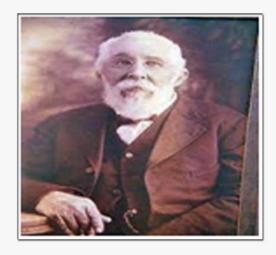
Prolonged use of ointments, liniments, lotions, glycerol, cosmetics etc for skin disease as local application may suppress the disease and take inward direction, causing more harm to the system. Hence is it advised to use the local application judiciously.

I thank Dr. Sanjay Panicker, Dr. Ashwini More, and Dr. Anusha Kulkarni for their wonderful articles. Without constant effort of active members of editorial team this issue would not have been a success, thanks to all members of Editorial Board.

- "Your skin is your best accessory."
- "Healthy skin is a reflection of overall wellness."

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





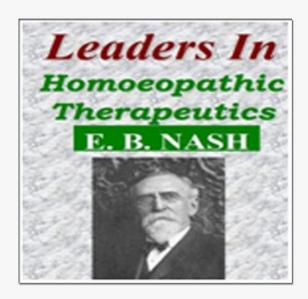
# PIONEER

# Dr. E. B. NASH (Eugene. B. Nash) Born on: 8th March 1838 Died on: 6th November 1917

- Dr E. B. Nash was born in Hillsdale, Columbia County, NY on 8th March, 1838.
- After graduation from the Local Academy, he pursued study of medicine from the Cleveland Homoeopathic Medical College in 1874.
- He started his practice in Triangle, NY, for a short time at Harpersville, NY and later continued at Cortland, NY till end of his life.
- He served as professor of Materia Medica in the New York Homeopathic medical College and also taught at Homeopathic hospital, London.
- He was well known as the most eminent American Homoeopath of the late 19th and early 20th Century.
- His Obituary in "The Homoeopathic Recorder" remembered him as one of the best teachers of medicine who inspired many allopathic as well as homoeopathic practitioners in healing the sick with Homoeopathy.
- In beginning of his medical career, Dr Nash was struck with paralysis. After considering his symptoms, he decided to take Lachesis, but it did not help him much to his satisfaction. Discouraged, he put himself under the care of the great master, Dr. Adolph Lippe.

- Dr Lippe gave him a remedy and asked him to come back once he is cured and he will reveal the name of the remedy at that time. Dr. Nash was cured and returned to know the remedy name and to his surprise it was Lachesis. He wondered how it did not help him initially when he took it. Dr Lippe said, he had not taken it high enough.
- This experience along with instruction from Carrol Dunham on the use of his sawmill 200c potencies, gave Dr Nash confidence in the use of higher potencies. This experience built his trust and confidence with Homeopathic medicines.
- Dr. Nash did not accept or believe in inimical remedies like Phosphorus and Causticum, neither that Sulphur and Phosphorus should not be given in last stages of Tuberculosis. In fact, when asked by his friend Dr Carr about Phosphorus after Causticum, he mentions that if the symptoms are indicative of the remedy, it should be given in higher potency to get perfect success, irrespective of its relationship.
- •• In one of his writings, he mentions that, "Phosphorus is the only remedy which never fails to cure Pigeon Chest, it should be given for a longer period of time, like 3 months repeatedly during which time the chest will be normal."





- His book, "Leaders in Homoeopathic Therapeutics" helped many students to understand Materia medica, repertory, more and less important symptoms, case taking and finding a Similimum in a simplified way.
- He was well known as a public-spirited citizen, a warm and faithful friend, a genial host, and a devoted Sunday school worker.
- He breathed his last on November 6, 1917 after a long and productive career serving and advancing his greatest passion in life homeopathy.

#### **Achievements:**

- Member of the American Institute of Homoeopathy, New York State Homoeopathic Medical Society
- An Honorary member of the Pennsylvania State Homoeopathic Society.
- Professor of Materia Medica at the New York Homoeopathic Medical College for seven years.
- In 1903, he became president of the International Hahnemannian Association (IHA).
- Leaders in Homoeopathic Therapeutics.

### **KQHDA** Activities:

- Free Medical camps conducted regularly for the benefit of suffering mankind.
- Immune Boosters distribute during epidemics as a gesture of social responsibility
- Free CMEs conducted on 1st sunday of every month since 1992 for the benefit of the practitioners and students of homoeopathy.
- Sponsors a Gold medal every year for the topper in Materia medica during the Convocation of RGUHS.
- Organises National Seminar in the month of April every year to commemorate the birthday of Dr. Samuel Hahnemann.

Come & Join as a Life-member of KQHDA....





**Dr.Ashwini More**BHMS, MD (HOM)
Bengaluru

### A CASE OF CONTACT DERMATITIS TREATED WITH HOMOEOPATHY

#### **ABSTRACT:**

A skin rash caused by contact with a certain substance. The substance might irritate the skin or trigger an allergic reaction. Some common culprits include soap, cosmetics, fragrances, jewelry and poison ivy.

The main symptom is a red rash wherever the skin came into contact with the irritant. Avoiding the irritant or allergen should allow the rash to clear in two to four weeks. Creams or medication can help reduce itching.

#### **KEYWORDS:**

Dermatology, contact dermatitis, homoeopathy, classical homoeopathy.

#### INTRODUCTION:

Clinically, the lesions represent a dermatitis reaction which may be acute, subacute or chronic depending upon the degree of individual's hypersensitivity and nature of the substance. Usually, liquids and volatile substances produce acute reaction in the form of severe itching, oedema, erythema, papules, papulo- vesicles while solid agents cause subacute reactions consisting of itching and erythematous scaly lesions.

# FOLLOWING IS A CASE OF ACUTE CONTACT DERMATITIS TREATED WITH HOMOEOPATHY:

An obese patient, name X, aged 56 years presented with complaints of severe itching over inner side of thighs due to rubbing of parts with clothes since 15 days on and off. Sweats profusely over the parts. Itching with burning sensation. Better by cold application, open air. Itching with oozing of watery discharge on scratching. Aggravation at night. Applied ayurvedic and allopathic ointment but no relief of complaints.

Past history -recurrent cough

#### Personal history:

Appetite- normal

Desires and aversions- nothing specific.

Bowels - normal

Sleep – disturbed due to itching.

Thermals – hot

Perspiration- sweats more on covered parts.

**Mentals** – Patient is very possessive of her son. Always complaining of her daughter-in-law. Domineering over everybody. Wants things to happen according to her way always.

#### Analysis:

Mental generals	Physical generals	Particular
Possessive	Sleep disturbed	Contact
Domineering	due to itching	Dermatitis
	Sweating++	



The above rubrics were considered and Repertorized.

The Reportorial Totality is as follows: HOMPATH CLASSIC 8.0

[Complete ] [Mind] Dictatorial, domineering, dogmatic, despotic:Control others, wants to:

[Complete ] [Mind]Irritability: Night:

[Complete ] [Female Genitalia] Itching: Night:

Bed, in:

[Complete] [Extremities]Itching:Thigh:Genitals, near:

[Complete ] [Extremities]Itching:Thigh:Night:

[Complete ] [Extremities]Perspiration:Thigh:Near genitals:

[Complete ] [Extremities]Itching:Thigh:Scratching :Does not amel.:

[Complete ] [Extremities]Itching:Thigh:Burning:

[Complete ] [Extremities]Itching: Warmth of bed

agg.:

[Complete ] [Skin]Itching:Cold:Amel.:

[Complete ] [Skin]Itching:Discharges, from:

On 15.11.2022, Sulphur 30 BD for 3 days was given considering above symptoms and suppressed skin condition due to external ointment.

#### Follow up chart:

There was more of itching on 20-11-2022, aggravation of complaints but next day there was relief of complaints.

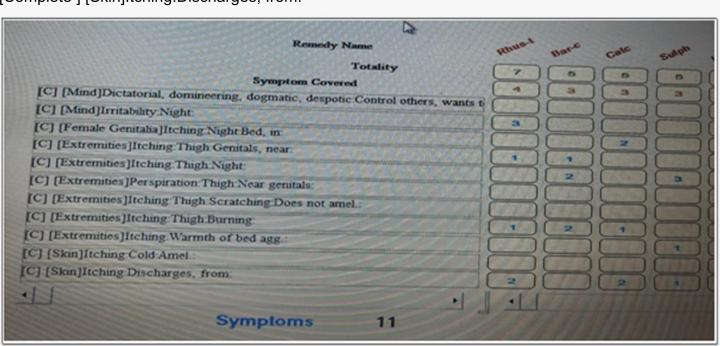
Rx: PL

16-12-2022 Better, no itching, Rx:PL

12-1-2023 Better, no itching, eruptions better

Rx: PL

There was no relapse of complaints till date.







# **Dr.Sanjay Panicker, BHMS**Founder & Director of Amrita Homeopathy

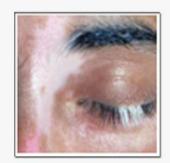
#### HOMOEOPATHIC MANAGEMENT OF VITILIGO

**INTRODUCTION:** Vitiligo is a disease in which the pigment cells of the skin, melanocytes, are destroyed in certain areas. Pre vitiligo is the stage of vitiligo when the patches start appearing and is only faintly visible.

#### **SIGNS OF VITILIGO:**

- \* Patchy loss of skin color. (Usually, first affects sun-exposed areas, such as the hands, feet, arms, face and lips.)
- \* Premature whitening or graying of the hair (on your scalp, eyelashes, eyebrows or beard)
- \* Loss of color of the mucous membranes of nose, mouth & genitals)





#### **CAUSES OF VITILIGO:**

The exact cause is not known. But it is understood that the disease is autoimmune.

The persons immune system fails to recognize his own pigment cells and mistakes it to be a foreign body, attacks and destroys it.

#### **TRIGGERING FACTORS:**

- \* Hormonal Thyroid, Diabetes, PCOD, Puberty, post-delivery generally after weaning, Addison's syndrome, Cushing's syndrome.
- \* Mental stress
- \* Physical stressors surgery, blood loss, head injury, major illness like after typhoid, after malaria etc.
- \* Genetic only 25% chance of inheriting. More than 30 genes have been identified as associated with the skin condition, two of which are NLRP1 and PTPN22
- \* Medication Antibiotics, penicillin, hepatitis b vaccine, hepatitis c vaccine, etc.
- \*Injury
- \*Extreme sunlight/long exposure to sunlight.





# Does Vitiligo increase One's Risk of Developing Skin Cancer?

The skin in the Vitiligo-affected areas can burn more easily, it may seem likely that those areas are at an increased risk of skin cancer. But data suggests that's not actually the case.

The reverse seems to be true: "Vitiligo protects the skin to some extent and lowers a person's risk for developing skin cancer by about threefold"

#### **DISEASE PATTERN:**

- \* Remissions and relapses are seen in Vitiligo.
- \* Presence of Triggering factors aggravate vitiligo.
- \* Cold weather aggravates. Rainy and winter flare ups are seen.
- \* Unpredictable course

#### **DIAGNOSIS OF VITILIGO:**

- \* TEST: WOODS LAMP TEST.
- \* *Investigations:* Serum Ferritin, Serum B12 levels, Serum Folic Acid, Vit D, Thyroid profile, Anti TPO levels, Liver Function test, FSH, LH, Prolactin, Free serum testosterone, DHEAS, Free Serum Cortisol.

#### TREATMENT DURATION:

It is individual specific.

- \* Cases with a genetic background take a longer time.
- \* Segmental and focal are the easiest types of vitiligo to treat.
- \* Lip tip, joint and bony prominence and the generalized type take long time to cure.
- \* Areas where hair follicles are there improve faster.

#### **DIET MANAGEMENT:**

#### Avoid:

- \* Corn, Peanut, Maida
- \* Red meat (Mutton, Pork, Beef)
- \* Citrus fruits Iemon, orange, Sweet Lime (Mosambi), Pineapple, Pomegranate, Guava, Gooseberry, nectarine, prune, peach, melon, watermelon, papaya, grapefruit, pear, tamarind, Sour mangoes and any fruit that has a good amount of vitamin C. Vitamin C inhibits the formation of pigments.
- \* Pears, Blueberries. These fruits are natural sources of hydroquinone's, which are known to have depigmentation properties.
- \* Sour food
- \* Eggplant, tomato, green chili, onion, and garlic
- \* Turmeric, it inhibits the production of melanin.
- \* Coffee, Excess Tea (not more than 2 cups per day)
- \* Carbonated drinks packaged fruit juices.
- \* Smoking and Alcohol

# THE FOLLOWING DIET IS PROVEN TO IMPROVE THE BACTERIAL FLORA IN THE INTESTINES

- \* Restrain the patients from using any other unwanted medication which can increase acidity and alter the bacterial flora of intestines.
- \* Half a spoon of turmeric powder and half spoon of fennel spoon powder in a glass of water daily morning for ONE WEEK ONLY
- \* Water stored in copper vessels should be used for drinking purpose.
- \* Spinach
- \* One spoon white butter once in a week
- \* Fresh curds daily--No sour curds
- \* One small piece of Jaggery daily



# THE FOLLOWING DIET IS PROVEN TO IMPROVE THE BACTERIAL FLORA IN THE INTESTINES

- \* Restrain the patients from using any other unwanted medication which can increase acidity and alter the bacterial flora of intestines.
- \* Half a spoon of turmeric powder and half spoon of fennel spoon powder in a glass of water daily morning for ONE WEEK ONLY
- \* Water stored in copper vessels should be used for drinking purpose.
- \* Spinach
- \* One spoon white butter once in a week
- \* Fresh curds daily--No sour curds
- \* One small piece of Jaggery daily

# HOMEOPATHY & VITILIGO: CLASSICAL HOLISTIC METHOD OF PRESCRIBING IS THE BEST FOR CASES OF VITILIGO

- \* Holistic approach and identifying why the patient developed vitiligo helps in proper treatment of the disease with minimum dose and single dose with correct Similimum.
- \* If not sure about the exact constitutional remedy despite a lot of probing, put the patient only on placebo and changes in lifestyle, investigate, improve diet till some acute illness comes up, like fever, cough or cold, and that almost always comes up for sure.
- \* Then take the totality of the symptoms of the acute disease and prescribe the Simillimum for the acute problem.
- \* Majority of the patients improve in vitiligo after an acute disease is successfully dealt with the homeopathic Simillimum.

Membership Fee Rs. 5000/-

**Donations are accepted** 

Account Name: KQHDA
State Bank of India
R.T. Nagar, Branch
Account No.: 64214361708
IFSC Code: SBIN0040617

Donations are exempted from Income Tax 80g of the IT Act 1961

#### **Commonly used medication are:**

\* Ars Sulph Rubrum, Ars Sulph Flavum, Arg -met, Dros, Mang, Sel, Ammi visnaga, Hydrocotyle, Bry, Nat-m, Lycopodium, Sulph-ac, Puls, Sil

#### CASE:

Mrs. S Age: 36 Yrs: Sex: F CHIEF COMPLAINT:

- \* Depigmented and hypopigmented macules on the skin of the face, arms and forearms chest and gluteal region since 2010, has started increasing since 4 to 6 months.
- \* The hypopigmented patches started around her eyes as a small round patch on the left side of her left eye, then on the left thigh then spread to the whole face, chin and upper lip areas are hyperpigmented.
- \* For the vitiligo she was using pro-topic initially which helped immensely. The skin temporarily improved while using the ointment and kept relapsing on stopping it. The patches increased during her pregnancy in 2013 (2nd pregnancy). It did not reduce after delivery. She has even tried ayurvedic medicines, which, she discontinued



later. Earlier there was itching but now no itching. The patches have increased in the chest and face. She took various other allopathic meds a year ago, which completely reduced the patches on the face and chest but increased after she discontinued the medicines. The patches have spread even to the shoulder area, after stopping allopathic medicines.

#### **ASSOCIATED COMPLAINT:**

- \* Eruptions on the face for 3-4 months. painful papular eruptions, many of them do turn pustular (diagnosis: acne vulgaris) skin has become very sensitive as well. Slight burning sensation in the acne.
- \* Recurrent headaches since childhood, either whole head or one-sided headaches mainly left sided headache. Sensitive to sound and light. orbits also pain. < lack of sleep, < skipping meals, < stress, < too much noise > pressure. She has vomiting when the headache is severe.
- \* Gets occipital headache when she is too overwhelmed especially happy emotions.
- \* Sweats more on the head and neck when having a headache wants the room to be cool.
- \* Sun headaches occasionally
- \* Hypothyroidism since her 2nd pregnancy in 2013
- \* Taking 50 mcg of Thyronorm daily

#### **FAMILY HISTORY:**

Paternal aunt- Vitiligo, cancer of stomach.

Paternal grandmother - ca stomach, hypothyroidism

Maternal grandmother - hypothyroid

Uncle and maternal grandmother- have hemorrhoids.

#### PAST HISTORY.

She has had a history of tinea corporis on the neck a few years back

#### **PHYSICAL GENERALS:**

Appetite: good

Thirst: less thirsty especially in daytime.

Motion: regular, clear, normal.

**Urine:** normal

**Sleep:** sound, feels very tired by the afternoon, feels too tired to even get up or walk, no sleep walking, no sleep talking, no snoring or drooling

in sleep **Dreams:** nil

Cravings: nil, doesn't like Indian food, doesn't

like the same kind of food al lathe time

Aversions: ladies' finger, sour food

Perspiration: scanty

*Menses:* menarche- 13yrs L.M.P- 15th march 2016, regular cycles, flow- 7 days, but last time had it only for 2 days, 1-3 days heavy, no clots, non-offensive, pain- cramps in thighs before or on 1st day, lower abdomen, no weakness, emotional / irritable around the periods, no bowel changes.

**Thermals:** prefers a cooler, fanning required, fan is irritating

#### **MENTAL GENERALS**

- \* Fun loving person, but likes to sit alone occasionally.
- \* Uncomfortable in an unfamiliar crowd.
- \* Anger/irritability short tempered, expresses her anger at home but not to outside people
- \* When she is sad, she likes to share her emotions, > consolation, cries easily but only in



front of known people.

- \* Fear of height, fear of darkness, stage fear++ is always there. She is very conscious in front of people mingles very easily once she gets to know them.
- \* Very much anxious about future. She likes to be very much punctual.
- \* Very much particular about perfection. Everything should be neat and clean, but not too finicky.
- \* If she can't do anything which she is expected to do, then she will be very unhappy.
- \* If others don't live up to her expectations will be irritated
- \* Fault finding nature
- \* Ambition before marriage was very career oriented but after marriage wanted to be a proper home maker. But says now she regrets not having done anything for herself.

#### LIFE SPACE:

an engineer. Mother is a house wife.

\* She is born and brought up in Dubai. Father is









She has 1 elder brother, 2 younger brothers and 1 younger sister, patient is 2nd child. She's married and settled in Kerala now. But all her siblings are in Dubai, feels very sad about it. She says I am still adjusting with that fact. graduated in Dubai. Her childhood was pleasant. She was very lazy in her work. She likes to listen to music, she loves cooking and designing clothes. Not very much into books. She loves to sleep. Her major stress and very bad phase are her married life. When she had to come to India, she realized was very comfortable in Dubai. She was very disturbed since she had to move. There were also certain cultural differences. The standard of living was also different, found difficulty to adjust as it was a joint family. But decided to stay with husband. Says husband behaved immaturely due to influence of certain porn websites. But she decided to forgive him. He realized his mistake. Things are better now. Staying with in laws was very stressful for her.

> On examination: nailsnormal: palms-warm, occ sweating, pain in soles for 2 days early morning on waking up.

Rx: 3rd April 2014: Puls 200





ಡಾ. ಅನುಷಾ ಕುಲಕರ್ಣೆ ಹೋಮಿಯೋಪತಿ ವೈದ್ಯರು ಬೆಂಗಳೂರು

ಮನುಷ್ಯನ ಇಡೀ ದೇಹವನ್ನು ಆಕ್ರಮಿಸುವ ಚರ್ಮವು ನಮ್ಮ ಆರೋಗ್ಯದ ಕನ್ನಡಿ. ಚರ್ಮ ನಮ್ಮ ದೇಹಕ್ಕೆ ಎಷ್ಟು ಪ್ರಮುಖವಾದದ್ದೋ ಹಾಗೆ ನಮ್ಮ ದೇಹಕ್ಕೆ ರಕ್ಷಣೆಯನ್ನ ಒದಗಿಸುತ್ತದೆ. ನಮ್ಮ ಈ ದೇಹದ ಆರೋಗ್ಯದ ವ್ಯವಸ್ಥೆಯನ್ನು ಪ್ರತಿಬಿಂಬಿಸುತ್ತದೆ ನಮ್ಮ ಈ ಚರ್ಮ. ಕೆಲವೊಮ್ಮೆ ಅಂತಹ ಪ್ರಮುಖವಾದ ಈ ಚರ್ಮಕ್ಕೆ ಕಾಯಿಲೆ ಬಂದಾಗ ಮನುಷ್ಯ ಧೈಹಿಕವಾಗಿ ಮತ್ತು ಮಾನಸಿಕವಾಗಿ ಕುಗ್ಗಿಹೋಗುತ್ತಾನೆ. ಆದರೆ ಹೊಮಿಯೋಪತಿಯಲ್ಲಿ ಯಾವುದೇ ತರಹದ ಚರ್ಮದ ಕಾಯಿಲೆ ವಾಸಿಯಾಗಬಲ್ಲ ಅತ್ಯಮೂಲ್ಯವಾದ ಔಷಧಿಗಳು ದೊರೆಯುತ್ತವ. ಇದಕ್ಕೆ ಉದಾಹರಣೆಯಾಗಿ ಸೋರಿಸಿಸ್ ಇಂದ ವ್ಯಕ್ತಿ ಹೊಮಿಯೋಪತಿ ಔಷಧದಿಂದ ಹೇಗೆ ಗುಣಮುಖರಾದರೂ ಎಂದು ಓದಿ ತಿಳಿಯೋಣ...

ಸುಮಾರು ನಾಲ್ಕು ವರ್ಷದ ಹಿಂದಿನ ಮಾತು.. ನಾನು ವೈದ್ಯಕೀಯ ವೃತ್ತಿ ಜೀವನ ಆಗತಾನೆ ಕಾರ್ಪೊರೇಟ್ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಆರಂಭಿಸಿದ್ದೆ. ಒಂದು ದಿನ ಒಬ್ಬ ಎತ್ತರವಾದ ವ್ಯಕ್ತಿ ಕ್ಲಿನಿಕ್'ಗೆ ಬರುತ್ತಾರೆ. ಡಾಕ್ಟ್ರೇ 'ನನಗೆ ಏಳು ವರ್ಷವಾಯಿತು ಸೋರಿಸಿಸ್ ಸಮಸ್ಯೆ ಇದೆ, ಎಷ್ಟೋ ಡಾಕ್ಟರ್ಗೆ ತೋರ್ಸಿದೀನಿ ಕಡಿಮೇನೆ ಆಗ್ತಿಲ್ಲ ಡಾಕ್ಟ್ರೇ... ನಿಮ್ಮ ಹೊಮಿಯೋಪತಿಯಲ್ಲಿ ಏನಾದ್ರು ಪರಿಹಾರ ಸಿಗಬಹುದಾ ಅಂತ ನಿಮ್ಮ ಹತ್ತಿರ ಬಂದಿದ್ದೇನೆ.. ಸಹಾಯ ಮಾಡಿ' ಎಂದು ಕೇಳಿಕೊಂಡರು. ಆಗತಾನೆ ಕ್ಲಿನಿಕ್' ಗೆ ಬಂದ ನನಗೆ ಅವರ ಸಮಸ್ಯೆ ನೋಡಿ ತುಂಬಾ ಬೇಸರವಾಯಿತು. ಅವರಿಗೆ ನಾನು ಇದನ್ನ ವಾಸಿಮಾಡಬಲ್ಲೆ ಎಂದು ಭರವಸೆಯ ಹಸ್ತವಿತ್ತೆ. ಏಕೆಂದರೆ ನನಗೆ ಹೊಮಿಯೋಪತಿ ಮೇಲೆ ಅಷ್ಟೊಂದು ನಂಬಿಕೆ.

ಅವರ ಕೇಸ್ ತಗೊಂಡಬಳಿಕ ಅವರಿಗೆ ಮಾನಸಿಕ ಒತ್ತಡದ ಬಗ್ಗೆ ವಿಚಾರಿಸಿದೆ ಆಗ ಅವರ ಮನೋರೋಗ ಅವರ ಚರ್ಮದಮೇಲೆ ಪ್ರಭಾವ ಬೀರಿದೆಯೆಂದು ತಿಳಿದುಬಂತು. ಅವರ ದೇಹದಮೇಲೆ ಹಾಗೂ ಮನಸಿನ ಮೇಲೆ ಪ್ರಭಾವ ಬೀರುವ ಮಾತ್ರೆಯನ್ನ ಕೊಟ್ಟು ಕಳುಹಿಸಿದೆ. ಬೇಗ ಗುಣವಾಗುತ್ತೇನೆ ಎಂಬ ನಂಬಿಕೆ ಬಂದಿತ್ತೋ ಏನೋ ಅವರಿಗೆ.. ಭರವಸೆಯ ಮಂದಹಾಸ ಬೀರುತ್ತಾ ಮೆನೆಗೆ ತೆರಳಿದರು.

ನಾನು ಅವರಿಗೆ ಕೊಟ್ಟ ಔಷಧಿ ಹೆಸರು ಸಿಪಿಯಾ 1M. ಒಂದು ವಾರದ ನಂತರ ಅವರು ಕ್ಲಿನಿಕ್' ಗೆ ಬಂದು ಮೇಡಂ ನನ್ನ ಕಾಯಿಲೆ ಸಂಪೂರ್ಣವಾಗಿ ವಾಸಿಯಾಗುತ್ತಿದೆ. ನವೆ, ನೋವು ತುರಿಕೆ ಯಾವುದು ಇಲ್ಲ. ಹಾಗೆ ಮೊದಲಿಗಿಂತ ಚೆನ್ನಾಗಿ ನಿದ್ದೆ ಮಾಡುತಿದ್ದೇನೆ. ಎಲ್ಲವೂ ಮೊದಲಿನಂತೆ ಆಗುತ್ತಿದೆ ನನಗಿದ್ದ ಭಯವೆಲ್ಲಾ ಹೋಯಿತು. ನನ್ನ ಕಾಯಿಲೆ ಗುಣಪಡಿಸಿದ್ದಕ್ಕೆ ನಿಮಗೆ ತುಂಬಾ ಥ್ಯಾಂಕ್ಸ್ ಡಾಕ್ಟ್ರೇ.. ಅಂತ ಹೇಳಿ ಆಶೀರ್ವದಿಸಿ ಹೋದರು.



ವೈದ್ಯರಿಗೆ ಕಾಯಿಲೆ ಗುಣಪಡಿಸಿದ್ದ ಖುಷಿ ಹಾಗೆ ರೋಗಿಗಳಿಗೆ ಕಾಯಿಲೆ ಗುಣವಾದ ಖುಷಿ.. ಅಕ್ಷರಗಳಲ್ಲಿ ವರ್ಣಿಸಲಾಸಾಧ್ಯ. ಈ ಖುಷಿ ಹೊಮಿಯೋಪತಿ ಇಂದ ಮಾತ್ರ ಸಿಗಲು ಸಾಧ್ಯ ಏಕೆಂದರೆ ನಾವು ಧೈಹಿಕ ಕಾಯಿಲೆಯ ಜೊತೆ ಮಾನಸಿಕ ಕಾಯಿಲೆಗು ಔಷದೋಪಚಾರ ಮಾಡುತ್ತೇವಲ್ಲವೇ..

ಸ್ನೇಹಿತರೆ ಯಾವುದೇ ಚರ್ಮ ಸಂಬಂದಿ ಕಾಯಿಲೆಯ ಮೂಲ ಕಾರಣ ಮನಸಿನ ಪ್ರಭಾವದಿಂದ ಕೂಡಿರುತ್ತದೆ. ಮಾನಸಿಕವಾಗಿ ನಾವು ಸದೃಢವಾದರೆ, ಧೈಹಿಕವಾಗಿ ಶಕ್ತಿಶಾಲಿ ಆಗುತ್ತೇವೆ ಹಾಗೆ ದೈಹಿಕವಾಗಿ ಯಾವದೇ ಕಾಯಿಲೆ ಬಂದಾಗ ಹೊಮಿಯೋಪತಿ ಮಾತ್ರೆ ಸಹಾಯದಿಂದ ನಾವು ರೋಗಿಗಳನ್ನ ಧೈಹಿಕವಾಗಿ ಹಾಗೂ ಮಾನಸಿಕವಾಗಿ ಗುಣಪಡಿಸಬಹುದು.



ಧನ್ಯವಾದಗಳು...



## 'BRAINVITA'

# Stimulate your grey matter

1. Identify the plant and give the common name?



3. Identify the pioneer and which book he has written?



2. Identify the Sign and diagnose the disease? Mention any key feature



- 4. Identify the drug?
- Formation of jelly-like mucus on mucous membranes. Tough stringy adherent discharges.
- Nose; pressing pain in root of nose; discharge of "clinkers", plugs.
- Yellow coating at base of the tongue; or dry, smooth, glazed, cracked tongue.
- Pains appear in small spots, can be covered by a silver dollar or the point of the finger.
- · Round deep ulcers, as if cut out with a punch.
- Gastric complaints; bad effects of beer.
- Migratory pains, which appear and disappear suddenly.

Please send us your answers with your Full name and Address at the earliest by email to kghda1992@gmail.com before 31st March, 2023.

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

#### Answers of the 7th Issue:

- 1. Pulsatilla, Common name: Pulsatilla nigricans
- 2. Koplik's spots in Measels, They are characterized as clustered, white lesions on the buccal mucosa (opposite the lower 1st & 2nd molars) and are pathognomonic for measles.
- 3. Dr Pichiah Sankaran, Author of: The Elements of Homoeopathy,• The Clinical Relationship of Homoeopathic Remedies, Some Cross References to Kent's Repertory
- 4. Nux vomica, Common name: Poison-nut



# PHOTOGALAXY



Patron of KQHDA Prof. Dr. BD Patel felicitated in Odisha



Team KQHDA



Chairman Prof. Dr. HL Swamy with students