Homoeopathic treatment of the urolithiasis: A case report

Dr. Mukesh CH Agarwal, Dr. Astha Mathur and Dr. Ravindra Singh Kuntal

Abstract
Urolithiasis refers to calculus anywhere in the urinary tract. Urolithiasis is an emergency condition often resulting in severe pain abdomen, back and flanks or groin pain. Here, a case of 21 year old patient is presented with pain in lumbar region, flank and in anterior abdomen, dysuria with nausea and vomiting and has been successfully treated with the individualised homoeopathic treatment Lycopodium clavatum.

Keywords: Homoeopathic medicine, urolithiasis, lycopodium

Introduction
Urolithiasis is global public health problem and its prevalence is higher in young and productive age group \(^1\), more common in men than women throughout most of adult life but in the sixth decade and incidence falls in men and rises in women. In this recurrent disease, relapse rate in 5–10 years is 50% and 75% in 20 years. It is the third most common affliction of the urinary tract \(^2\).

Calcium oxalate is the most common type of kidney stone which is formed at Randall’s plaque on the renal papillary surfaces. The stone formation mechanism is a complex process because it is a result of several physicochemical events, which includes supersaturation, nucleation, growth, aggregation, and retention of urinary stone constituents within tubular cells. These steps are modulated by an imbalance between factors that promote or inhibit urinary crystallization. Retention of particles on renal papillary surfaces is promoted by cellular injury \(^3\).

Various studies \(^4\)–\(^8\) have demonstrated the beneficial effect of homoeopathic treatment in cases of urolithiasis, Homoeopathic approach of totality of symptoms has given significant results in this area. However, Homoeopathic case taking and totality formation require a lot of time. With the increasing reliance on alternative treatments there is a need to formulate methods for fast and reliable prescriptions. Homoeopathic Materia Medica offers a wide range of medicines for the indications of urolithiasis, but a large number of these medicines are overlooked in the conventional totality of symptoms approach as they lack general symptoms.

Case

Presenting complaints
A 21 year old male patient of middle socioeconomic status, working in the MNC, attended my OPD (Savitri Homoeopathic Clinic And Research Centre) with the following complaints—Pain in the right lumbar region, radiating anteriorly towards the groin since night. Patient had frequent and urgent desire of urination but unable to pass out, scanty urination, only few drops passed during urination. Burning during urination, red coloured urine sometime colour is dark red, sometime light red.

Indigestion, flatulence, sour eructation, heart burn < after eating since 2 months.

History of presenting complaints: Patient was apparently well last 2 months back. Mild flank pain started after taking heavy meal or during gastric disturbance from last two months but patient was ignoring these complaints and get relieved after taking antacid tablet or any Ayurvedic powder.

TREATMENT HISTORY: 2 days before, due to sudden onset of severe pain with nausea and vomiting, he went to Naryana Multispecility Hospital, Pratap Nagar, Jaipur where he had
been treated with painkiller injections, hydrotherapy and kept for observation for 8 hours. Intensity was reduced but persistent.

Mental symptoms: Patient was not ready to tell anything due to pain. Attendant told that he does not tolerate contradiction, contradiction causes anger, wants someone around him, can’t live alone, loss of self confidence, thinks over small matter and suspicious.

Physical generals
1. Appetite- Diminished appetite with easy satiety since 1 month. Does not feel hunger. Takes only ½ or 1 chapati only in whole day.
2. Thirst- Only 4-5 glass of water per day, due to workload forgets to drink water usually.
3. Desire-salty and spicy food.
4. Stool- Once a day, semisolid, unsatisfactory due to flatulence
5. Urine- Frequent and urgent desire of urination, but scanty urination, only few drops passed during urination. Burning during urination. Red coloured urine sometime colour is dark red, sometime light red.
6. Thermal reactions - hot (prefer winter and cannot tolerate heat.)

General examination: Blood pressure - 100/70mmhg Pulse- 80/min
Resp rate- 20-22 breaths/min
Skin- Dry and lustreless

On systemic examination: Tenderness at the costovertebral angle (murphy’s punch sign positive)

Provisional diagnosis: nephrolithiasis

Investigation- Advice – USG whole abdomen

Final Diagnosis: Urolithiasis (USG of whole abdomen done on 14 oct 2019 which showed mild right hydroureteronephrosis with calculus in the distal ureter 6mm of size and a calculus of 3-4 mm are seen in the superior and middle calyx. figure-1)

Analysis and evaluation of symptoms
- Can’t tolerate contradiction
- Suspicious
- Can’t live alone
- Loss of self confidence
- Thirstlessness
- Loss of appetite, early satiety
- Pain in right lumbar region
- Frequent and urgent desire for urination
- Burning urination
- Haematuria

Totality of symptoms
- Can’t tolerate contradiction
- Suspicious
- Can’t live alone
- Loss of self confidence
- Thirstlessness
- Loss of appetite, early satiety
- Pain in right lumbar region
- Frequent and urgent desire for urination
- Burning urination
- Haematuria

Justification of Repertory: Considering the above symptomatology Boenninghausen repertory was preferred and using homoeopath Zomeo3.0 software, repertorization was done, (figure-1)
Reportorial analysis

- Nux vomica- 17/7
- Sulphur-17/6
- Calcarea-16/6
- Merc - 15/5
- Puls- 15/5
- Sepia-15/5
- Phos-13/7
- Bry- 13/5
- Lyco-13/5

Selection of medicine: Although there were many symptoms which did not cover by Lycopodium in repertorization but after considering the materia medica, (as we know the final selection depend upon Materia Medica), found that many symptoms were covered by Lycopodium which are mentioned below [10]. Suspiciousness, easily satiety, burning urination, haematuria, and right sided renal calculi.

Prescription: Lycopodium 30 bd*15 days

Justification of Potency: Lycopodium calvatum was prescribed with subsequent higher potencies from 30 to 10M according to susceptibility of patient and response of the medicine, which follows the principle of the homeopathy and second prescription of kentain philosophy.

Table 1: Prescription with follow ups

<table>
<thead>
<tr>
<th>Date</th>
<th>Changes in the symptomatology</th>
<th>Prescription</th>
</tr>
</thead>
<tbody>
<tr>
<td>14/10/2019</td>
<td>Patient was advised not to eat spinach, nuts and seeds, tomato, chocolate and drink plenty of water</td>
<td>Lycopodium-30/BD for 15 days</td>
</tr>
<tr>
<td>29/10/2019</td>
<td>Relief in intensity of pain and burning urination but still present. Relief in flatulence</td>
<td>Lycopodium -200/1 dose</td>
</tr>
<tr>
<td>14/11/2019</td>
<td>40% relief in the general complaints.</td>
<td>Phytum-30/TDS for 15 days</td>
</tr>
<tr>
<td>1/12/2019</td>
<td>Sudden pain in the lower abdomen and right flank with frequent desire to urinate. Patient felt that something has passed. But some pain persisted in right flank.</td>
<td>Lycopodium-1M/1D</td>
</tr>
<tr>
<td>18/12/2019</td>
<td>70% relief in the general complaints. but sometime tolerable pain appear in flank</td>
<td>Phytum-30/TDS for 15 days</td>
</tr>
<tr>
<td>4/1/2020</td>
<td>Pain subsided from the flank and started anterior abdominal pain radiate to groin.</td>
<td>Lycopodium-10M/1 dose state, phytum 30/TDS for 15 days</td>
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<td>06/03/2020</td>
<td>USG done on 6/3/2020 which showed no calculi. figure-3</td>
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Fig 2: Before treatment USG done on 14 October 2019

Fig 3: After treatment USG done on 6 March 2020
Discussion and Conclusion
Orthodox management of a clinical problem only alleviates symptoms, which recur on cessation of the treatment. Homeopathic treatment gives permanent or prolonged relief. *Lycopodium clavatum* is a deep acting medicine and acted wonderfully in urolithiasis.

References