A case report on diabetes mellitus

Dr. Ajay Vishwakarma

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Abstract
This is a known case of hyperglycaemia of a 50 years male, presented with the complaint of blurred vision, weakness, frequent micturition and pain in throat. On investigation his RBS (Random blood sugar) is found to be very high i.e., 374mg/dl. Systematic case taking followed by repertorisation of the totality of symptoms was done by Synthesis Repertory using RADAR software [4] in order to choose the individualised remedy where Tuberculinum, Phosphorus, Calcarea, Arsenic and Sepia were shortlisted.

Keywords: Hyperglycaemia, blurred vision, random blood sugar (RBS), Tuberculinum [5]

Introduction
The term diabetes mellitus describes a metabolic disorder of multiple aetiology characterized by chronic hyperglycaemia with disturbances of carbohydrate, fat and protein metabolism resulting from defects in insulin secretion, insulin action, or both. The effects of diabetes mellitus include long–term damage, dysfunction and failure of various organs. Diabetes mellitus may present with characteristic symptoms such as thirst, polyuria, blurring of vision, and weight loss. In its most severe forms, ketoacidosis or a non–ketotic hyperosmolar state may develop and lead to stupor, coma and, in absence of effective treatment, death. Often symptoms are not severe, or may be absent, and consequently hyperglycaemia sufficient to cause pathological and functional changes may be present for a long time before the diagnosis is made.

The long–term effects of diabetes mellitus include progressive development of the specific complications of retinopathy with potential blindness, nephropathy that may lead to renal failure, and/or neuropathy with risk of foot ulcers, amputation, Charcot joints, and features of autonomic dysfunction, including sexual dysfunction. People with diabetes are at increased risk of cardiovascular, peripheral vascular and cerebrovascular disease [1].

Corresponding Author:
Dr. Ajay Vishwakarma
BHMS, MD (Hom), Ph.D. (Hom), Dean Homoeopathy, Uttarakhand Ayurved University, Dehradun, Uttarakhand, India

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Fig 1: Disorders of glycemia: etiologic types and stages. *Even after presenting in ketoacidosis, these patients can briefly return to normoglycemia without requiring continuous therapy (i.e., “honeymoon” remission); **in rare instances, patients in these categories (e.g., Vacor toxicity, type 1 diabetes presenting in pregnancy) may require insulin for survival [2], D-dimers, and inflammatory markers than those with normal glucose [4].
Case Summary

Personal data
Name: Mr. W
Age: 50
Sex: Male
Marital status: Married
Address: T. Camp Udham Singh Nagar, Uttarakhand
Dated: 13/12/2021

Presenting Complains
Patient presented with the complaint of hyperglycaemia since 4 years, blurred vision, weakness, frequent micturition and sore throat since 1 year. Mentally the patient is very forgetful and quarrelsome and fears that something will happen to him very often.

Past History
Covid –19 in 2020, treated with allopathic treatment got relieved

Family history
Nothing Significant

Physical Generals
- Appetite: Good, Regular, 3 meals/day
- Thirst: Thirsty especially at night
- Desire: Cold drinks, Cold food
- Aversion: Nothing Specific
- Intolerance: Nothing Specific
- Bowel: Satisfactory, regular
- Urine: Frequent urging, Clear, Regular
- Sleep: Unrefreshing and disturbed due to frequent urination and thirst
- Perspiration: Profuse, generalised, nonoffensive

Mental Generals
- Anger3+
- Quarrelsome3+
- Forgetful3+
- Dreams of dog (black)2+
- Fear that something will happen to him2+

Provisional Diagnosis
Diabetes mellitus [3]

Totality of symptoms
- Fears something will happen to him
- Dreams of black dog
- Forgetful
- Quarrelsome
- Desire for cold drinks and cold food
- Thirsty at night
- Frequent urging to urinate
- Blurred vision
- Pain in throat

Rubrics Selected [4]
1. Mind – fear- happen, something will – himself, to
2. Mind – forgetful
3. Mind – quarrelsome
4. Dreams- dogs – black
5. Vision – complaints of vision
6. Throat- pain
7. Stomach – thirst – night
8. Generals – food and drinks- cold drinks, cold food
9. Disease – diabetes mellitus
10. Bladder – urging to urinate – frequent

Analysis of the case
After analysis and evaluation of the case the characteristics symptoms were used to form the totality “blurred vision, throat pain” were important particulars, “thirsty at night, desire of cold drinks and cold food, frequent urging to urinate” were important physical generals “fear of something will happen to him, forgetful, quarrelsome, dreams of black dog” were important mental generals in this case.

The selection of remedy was based on repertorisation from RADAR 10 software using Synthesis Repertory 9.1 by Frederick Schroyens [4] with repertorial result showing top five remedies as Tuberculinum (11/10), Phosphorus (18/8), Calcarea (14/8), Arsenic (13/8) and Sepia (12/8).

Fig 1: Repertorial Analysis Sheet [4]
**Prescription**

Tuberculinum $^{[5]}$ 1M/ 2 dose

**Basis for Prescription**

After careful analysis of mental, physical generals and the repertorial results, according to the characteristic symptoms and taking into consideration the knowledge of Homoeopathic Materia Medica, Tuberculinum 1M / 2 doses was prescribed as it covered maximum symptoms in repertorization and patient showed marked improvement after the medicine administration.

**Potency:** Tuberculin needs more frequent repetition in children's complaints than nearly every other chronic remedy (H. Fergie Woods). Thirtieth and much higher, in infrequent doses. When Tuberculinum fails Syphilinum often follows advantageously, producing a reaction $^{[5]}$.

**Follow – up**

<table>
<thead>
<tr>
<th>Date</th>
<th>Symptoms</th>
<th>Medicine</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>13/12/2021</td>
<td>Patients' 1st visit</td>
<td>Tuberculinum 1M/ 2 dose</td>
<td>In the commencement of the treatment Tuberculinum 1M / 2 doses was given</td>
</tr>
<tr>
<td>20/12/2021</td>
<td>Blood sugar was reduced slightly, Pain in throat also reduced</td>
<td>Placebo</td>
<td>As improvement was seen in the case so no medicine was prescribed</td>
</tr>
<tr>
<td>27/12/2021</td>
<td>Blood sugar level reduced, pain in throat relieved</td>
<td>Placebo</td>
<td>Patient has marked improvement so the case was continued with placebo</td>
</tr>
<tr>
<td>03/01/2022</td>
<td>Blood sugar level was not reduced it was slightly inclined</td>
<td>Tuberculinum 1M/ 2 dose</td>
<td>Medicine was repeated as the improvement ceases</td>
</tr>
<tr>
<td>10/01/2022</td>
<td>Level of blood sugar has reduced considerably</td>
<td>Placebo</td>
<td>Marked improvement in the complaints was seen</td>
</tr>
</tbody>
</table>

**Investigations**

![Investigation on 1st visit](image1)

**Discussion and Conclusion**

Homoeopathic medicine selected on the basis of homoeopathic principles proved to be very effective in this case of hyperglycaemia and shown remarkable results in the treatment. Tuberculinum was selected on the basis of mental generals, particulars and physical generals and considering the repertorial results keeping in mind the Homoeopathic Materia Medica and homoeopathic philosophy. Treatment was continued for around 1 month. Medicine was given in very few doses which appeared very effective in treatment of the case. There was marked and speedy recovery in this case of Hyperglycaemia.

The potency selection was done on the basis of susceptibility of the patient as stated by Dr Close $^{[6]}$.

1. The greater the characteristic symptoms of the drug in the case, the greater the susceptibility to the remedy and the higher the potency required.
2. Age: Medium and higher potency for children.
3. Higher potencies for sensitive, intelligent persons.
4. Higher potencies for person of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.

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![Investigation on 3rd visit](image2)
5. In terminal condition even the crude drugs may be required.

He also writes “Different potencies act differently in different cases and individuals at different times under different conditions. All may be needed. No one potency, high or low, will meet the requirement of all cases at all times”.

Potency was selected on the basis of susceptibility of the patient and organic condition of the disease, the susceptibility of the patient was high so 1M potency was selected.

This case of hyperglycaemia re-established the strength of homoeopathy and proves the homoeopathic principles and philosophy as stated by Dr Hahnemann. It also elicited that homoeopathy can manage such type of case in very few doses in a very short period of time without any aggravation and side effects.

References


