Study of homoeopathic therapeutics for renal calculi

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Abstract

Treating patients with Homoeopathy needs individualization. Few cases in clinical practice, do not express characteristic symptoms, leading to routine pathological prescription. Studying Homoeopathic therapeutics helps us to understand the propensity of some drugs in terms of their action towards some specific organs as well as some specific diseases, which helps in finer way of pathological prescription in cases where characteristics are absent, and if the characteristics are present, it helps in selection of simillimum easily with proper differentiation. This article deals with study and understand therapeutics for renal calculi based on symptomatic expression of drugs.

Keywords: Individualization, characteristic, peculiar, renal calculi, therapeutics, pathological prescription

Introduction

Renal stone is simply called as aggregation or crystal concentration with in kidney. There is a growing trend of renal stones among human race, mostly associated with life style, i.e., lack of physical activity, decreased water intake, and dietary habits. The symptoms produced by renal calculi depends on the type of stone, location and the movement of stone. The stone may be present anywhere - calices, the pelvis and the pyeloureteric and vesicoureteric junctions. Homeopathy has vast number of remedies having affinity for renal calculi. Each remedy gives out different symptomatology.

For academic and clinical purpose, for better study and understanding therapeutics, here an attempt was made to classify drugs based on types of prescription, yet any remedy can be prescribed as per clinical indications at bed side.

Therapeutics: For easy memorizing, the common remedies which have affinity for the renal canculi can be divided as:-

<table>
<thead>
<tr>
<th>Acute</th>
<th>Constitutional</th>
<th>Sector/Organ Specific</th>
<th>Anti-Miasmatic</th>
<th>Bowel Nosode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aconite</td>
<td>Lycopodium</td>
<td>Hydrangea Calculus Renalis</td>
<td>Sulphur</td>
<td>Bacillus Morgan Gaetner</td>
</tr>
<tr>
<td>Apis</td>
<td>Nuxvomica</td>
<td></td>
<td>Thuja</td>
<td></td>
</tr>
<tr>
<td>Belladona</td>
<td>Calcarea Carb</td>
<td></td>
<td>Medorrhinum</td>
<td></td>
</tr>
<tr>
<td>Cantharis</td>
<td>Medorrhinum</td>
<td></td>
<td>Mercsol etc.</td>
<td></td>
</tr>
<tr>
<td>Colocynthis</td>
<td>Sepia</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Diascorea</td>
<td>Phosphorus</td>
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<tr>
<td>Magphos</td>
<td>Lachesis</td>
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</tr>
<tr>
<td>Solidago</td>
<td>Sarsaparilla</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Thlalsi Tabacum</td>
<td>Benzoic acid</td>
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</tbody>
</table>

Acute remedies can be given to manage the episode. Constitutional remedies are prescribed to remove the tendency of formation of renal stones generally. But, sometimes as per clinical presentation constitutional remedies can also be prescribed in acute episode, which work as acute and also removes tendency of stone formation constitutionally.

If the patient do not express individual characteristics, sector remedies can be given. If there is miasmatic obstruction, anti-miasmatic remedies can be prescribed based on the dominant miasm expressed by the patient. Bowel Nosodes prescribed when there is no remedy is clearly indicated, or when several remedies acted, but not cured.
Side Affinity: There are some renal remedies which have affinity for side. They are

<table>
<thead>
<tr>
<th>Some Right sided drugs</th>
<th>Apis, Calcarea Carb, Cannabis Sativa, Lithium Carb, Lycopodium, Nux Vomica, Occimum Canum, Sarsaparilla.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some Left sided drugs</td>
<td>Berberis Vulgaris, Benzoic Acid, Hydrangea, Lachesis, Phosphorus, Sepia.</td>
</tr>
</tbody>
</table>

Symptoms are different, depending on Location of renal calculi and its type. If the calculi is stable, at lower pole of kidney, with no symptoms, known accidentally, during screening for some other disease, or purpose like or medical checkup, constitutional, anti-miasmatic and sector remedies help in such cases.

If the renal stone moving from kidney to bladder, symptoms vary according to location of stone. Stone at upper ureter, radiates pain to testicles. Stone is in mid portion of ureter, at right side, it mimics appendicitis, and on left side it mimics diverticulitis. When the stone is in lower portion of ureter, proximal to orifice, pain refers to inner side of thigh or groin. Stone at intramural potion of ureter, at the level of orifice, symptoms of bladder irritability, such as frequency, urgency may occur.

Oxalate stones which are very common, causes more haemorrhagic symptoms than other stones because of its spiky edges. The pain may be intermittent in lumbar region or flanks, comes in waves, and bloody urine is seen. Due to irritation, nausea and vomiting may be seen. Ineffectual urging, Obstruction symptoms can be seen.

Struvite or Magnesium Ammonium Phosphate Stones are formed due to recurrent UTI, the urine may be offensive, foamy or cloudy, with fever and chills. Urinary pH will be persistently elevated (> 7.2). Some patients can present with chronic pyelonephritis when an infected stone causes focal areas of renal parenchymal scarring. Some may not show any symptoms until the stone fills up entire pelvis.

In uric acid stones, very strong offensive urine is observed, urine may have different colours, urine pH is low, acidic urine, and so burning may be commonly seen. Uric acid diathesis patients. Comprehensive past medical and family history should be obtained, focusing on problems related to uric acid stone formation like cancers, myeloproliferative neoplasms, and inherited disorders related to hyperuricosuria, indigestion, and chronic diarrhea. Cystine stone patients have tendency to go to CKD [7], Cystein stones have tendency to select aconite.

Therapeutic Indications for some important remedies

**Aconite:** Pain in loins as if bruised. Cutting pain from spine to abdomen. Cramping pain and contraction in hypogastrium, at bladder region. There is frequent and violent urging to urinate with scanty emission of red turbid urine. By these symptoms we can assume that the stone is moving to words bladder, or stone at intramural part of ureter. General symptoms like anxiety, fear of death, anguish, restlessness, intolerable pain should always be present to select aconite.

**Apis:** Stinging, stitching, burning pains. Burning in the urethra before, during and after micturition. Urine incontinence. Frequent desire to pass urine. Urethra feel scalded. Scanty urine, strangury, last drop burns and smarts. Frequent sudden attacks of pain along ureters. Urine suppressed, loaded with casts, Dark, with sediment like coffee grounds. To select APIS as similimum, concomitants like edema under lower eyelids, thirstlessness and thermally hot patient are to be considered.

**Calculus Renalis:** prepared from renal stones. Used as specific remedy for bladder and kidney stones with pain. The pain is burning often due to catheter. Patient may have joint pains and hypertension with renal complaints which can be considered as concomitant for selection of this remedy as similimum.

**Belladona:** Right sided pain, comes suddenly and goes, in paroxysms. < Least jar, even of the bed, slight noise, light, lying down. > Pressure, tight bandaging, wrapping up. There is redness of eyes & face, throbbing of brain & carotids. Bell patient is very violent, and have fever with the complaints.

**Berberis Vulgaris:** This drug is useful for left sided renal colic. There is tendency to the formation of calculi and lithaemia diathesis. Urine with thick mucus, bright-red, mealy sediment. Peculiar bubbling, sore sensation in kidneys. Pain in bladder region and in the thighs and loins on urinating. Worse by motion and standing.

**Cantharis:** There is violent paroxysms of cutting, burning in whole renal region, with painful urging to urinate, constant desire, bloody urine, comes in drops. Intolerable tenesmus is present. Cutting before, during, and after urine. Urine scalds him, and is passed drop by drop. Membranous scales looking like bran in urine. Patient is chilly thermally. Have thirst but every time when he drinks pain increases. There are some concomitants for selection of this drug.

**Colocynthia:** Renal colic is mostly left side in colocynthia. The pain is agonizing, shooting like electric shocks in abdomen causing patient to bend double, with restlessness. Patient Twists & turning to obtain relief. Pain > hard pressure and warm application, and agg by eating & drinking. Complaints are from anger, indignation, and mortification.

**Diascorea:** Very important characteristic is renal colic pain radiates to extremities or Pain suddenly shift to different parts, appear in remote localities as fingers & toes. Colic pains are < bending forward & while lying, > on standing erect or bending backwards. Colic pains are violent, twisting, occurs in regular paroxysms as if abdomen were grasped & twisted by a powerful hand.

**Hydrangea:** Hydrangea arborescence is useful when stones are in ureter. This medicine acts as a stone breaker and treats the condition without any problem. Yellow sand or the white deposits are detected in the urine which indicate the need for this medicine in kidney stone treatment.

**Lycopodium:** Right sided complaints. Pain in back before urinating; ceases after flow; slow in coming, must strain. Retention of urine or red sediment. Right sided pains. Peculiar agg from 4 to 8 pm, heat. Feel better with cold applications, and hot food and drinks. These persons are intellectually keen, but physically weak. They always have gut troubles, flatulence, and acidity. This remedy works as chronic deep acting constitutional remedy and removes...
tendency for recurrent renal formation.

**Nitric acid**: Oxalic acid calculi in the urine, and urine is scanty, dark, bloody, aluminous and offensive. In this remedy offensiveness of urine is marked, explained as “smells like horse’s urine”. Cold on passing one peculiar symptom. Burning and splinter like pains are seen.

**Nux Vomica**: In this remedy ineffectual desire predominates. Patient wants to vomit but cannot, goes to urine and stool which is unsatisfactory. Right sided renal colic (right), extending down to genitals and legs; with dribbling urine which ameliorated by lying on back. There is Painful ineffectual urging to urinate, spasmodic stranger.

**Ocimum Canum**: In this drug, there is right sided renal colic, with uric acid diathesis. High acidity, formation of spike crystals of uric acid. Thick, turbid, purulent, bloody, brick dust red or yellow sediment. Red sand in urine. Odour is like that of musk. Pain in ureters, cramps in kidneys. This remedy helps to manage case acutely.

**Pareria Brava**: This remedy is also useful in treating pain in the kidney due to stones. Symptoms are Black, bloody, thick mucus urine. Constant urging and great straining with pain down thighs during efforts to urinate. Peculiar is he can pass urine only when he goes on his knees, pressing head firmly against the floor.


**Solidago virgaurea**: This remedy can replace catheter. The kidneys are sore and tender, they ache and feel distended. Pain in kidneys extend forwards to abdomen, bladder and down the thighs. Urine is dark, scanty, brown, and offensive with sediments.

**Thlapsi**: This remedy is known to replace catheter. Uric acid diathesis. Hemorrhage predominates in this remedy. Urine is like brick dust sediment. Urine comes in little jets. There is frequent desire and accumulation of gravel.

**Tabacum**: Left sided renal colic with violent spasmodic pains along ureter. When deathly nausea with vomiting dominates along with renal colic this remedy comes into action. Vomiting is violent, with cold sweat, on least motion, with faintness > open air. There is vertigo, death like pallor < on opening the eyes. Face is pale, pinched, blue, sunken, collapsed. Terrible, faint, sinking like feeling at the pit of stomach and Icy coldness of surfaces are important concomitants to this remedy.

**Discussion and Conclusion**

Homeopathic Material Medical are old literature written some hundreds years ago. The facts, observations and proving symptoms provided by Hahnemann and other stalwarts are consistent for centuries. Literature cannot be changed but the method of study can be modified. As the field of medicine is expanding, Clinical and therapeutic approach of study of homoeopathic Material Medical helps to combat challenges of modern era. This method of study is very useful in daily clinical practice. It helps in snap shot prescriptions where there is a need for quick prescription.

**References**

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