A Case Study of Renal Calculi and Hydronephrosis Treated with Individualized Homoeopathic Medicine

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Abstract: Renal calculi is a condition in which one or more stones are present in the pelvis or calyces of the kidney or in the ureter. The objectives of this study are to study the efficacy of Homoeopathic medicine in the management of Renal Calculi and to study the Homoeopathic approach to avoid Surgery and recurrence of Stone formation. Over a period of years, different varieties of Renal calculi were recognized and different types of medical treatment like Lithotripsy, Percutaneous Nephrolithotomy and Open surgery came into the fields. Even though surgery helps in removing the stone, it fails to avoid the recurrence. Here the Homoeopathic drugs can prove their efficiency⁹. A 49yrs old male presented with the complaints of frequent and painful urination with pain in the lumbar region which treated with Lycopodium 200 C. This case study stands as further evidence of the value of individualization and, consequently, the effectiveness of Homoeopathic remedies in treating the underlying cause and evacuation of renal stones.

Keywords: Homoeopathy, Renal calculi, Lycopodium

1. Introduction

The incidence of renal calculi varies in different countries depending upon the environmental conditions of the area. In India the incidence of Renal calculi is higher in Northern states, compared to that of southern states. Kidney stones are more frequently seen in warmer climate and during summer. This may be due to dehydration and increased concentration of urine, which is one of the causes of calculi formation. Easy availability and more consumption of vegetable like tomato & spinach, which are rich source of calcium leads to calculi formation. A patient with a history of stones has 50% risk of developing another stone within 5 - 10 years. Moreover in selected patients repeat stone formation rates may approach 80% over their lifetime. The prevalence of renal calculi in children and adolescents occur less commonly than in adults. Above all many people drink bore well water, which contains more minerals. So there is a tendency for calculi formation. Tiny stones may pass unnoticed with urine, larger stones or those with rough edges can cause significant pain during passage through the urinary tract.¹,²

Etiology
Organisms such as Proteus, Pseudomonas, and Klebsiella produce recurrent UTI. These organisms produce urea, cause stasis of urine and precipitate stone formation.

Dietary factors, hot climates, metabolic causes decreased urinary citrate, inadequate urinary drainage & Immobilizations,³

Types of renal stones
- Calcium Oxalate Stones: Most common type of stone. It occurs when urine has high levels of calcium, oxalate, or uric acid and low levels of citrate.
- Calcium Phosphate Stones: It is caused by abnormalities in the way the urinary system functions.
- Struvite Stones: Most common in women. Certain forms of urinary tract infections are the cause. These bacteria or pathogenic agents frequently take up the entire kidney due to their rapid growth and size.
- Uric Acid Stones: Most common in men who have gout, family history or had chemotherapy. It affects those who don't drink enough water or consume a lot of animal protein in their diet.

Clinical features
Pain in lower back which begins as a dull aching pain that comes and goes. Pain in the loin which radiates around the flank to the groin. Pallor, Sweating, Pain with nausea and/or vomiting, Blood in urine, Pain when urinating, Frequent urination, Fever or chills, Urine offensive and looks cloudy.

Case Report
A 49yrs old male presented with the complaints of Pain in the right lumbar region since one week on & off. Sudden onset and rapid progression. Stitching pain in the lumbar region. < Walking, urination > Rest, before urination. Burning pain while passing urination on & off. Urine passes by drop by drop. Feeling of urgent present. Urine very hot and burning in nature. < During and after urination. > Before urination. No history of nausea, vomiting, fever, hematuria, offensive urination present.
Past history & Family history
No relevant history in the past.
Mother – osteoarthritis of right knee joint

Personal history
Diet – non vegetarian
Nutritional status – moderately nourished
Occupation – coolie worker

Physical generals
He had good appetite & thirst, desire for meat and spicy foods and aversion for vegetables. Bowel movements normal.
Tongue moist & clean, frequent & painful urination.
Perspiration is moderate, more on face.

Reactions to
Fanning desire++
Covering aversion++

Life Space Investigations
He is a coolie worker and his wife is a tailor. Despite being content with his family, he often worries about their future and struggles with managing their needs with limited finances. This concern leads him to feel depressed and anxious when alone, fearing potential challenges that may arise for him or his family. He seeks comfort in the presence of loved ones and avoids solitary outings. After this complaints he is constantly thinking about his complaint and fear about that.

Mental generals
He has fear about his complaints, afraid to be alone, Desire Company, always thinking about his complaints, fear of poverty, loquacious and easily get depressed.

Totality of symptoms
Fear about his complaint
Afraid to be alone
Desire Company
Loquacious
Fanning desire++
Covering aversion++
Aversion to vegetables and fish
Stitching pain in the right lumbar region
< Walking, urination. > Rest, before urination.
Burning pain in urethra while passing urination
< During and after urination. > Before urination

Reportorial totality
Afraid to be alone
Loquacious
Fear about his complaint
Fear of failure
Desire Company
Fanning desire
Aversion to vegetables
Frequent urination
Stitching pain in the right lumbar region
Burning urination
Renal calculi
Covering aversion

Reportorial analysis

Repertorial results

<table>
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<tr>
<th>Medicines</th>
<th>LYCO</th>
<th>ARS ALB</th>
<th>PHOS</th>
<th>PULS</th>
<th>CALC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marks</td>
<td>35</td>
<td>33</td>
<td>31</td>
<td>29</td>
<td>28</td>
</tr>
<tr>
<td>Symptoms covered</td>
<td>12</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>11</td>
</tr>
</tbody>
</table>

Prescription
After a careful evaluation of patient’s case history a remedy Lycopodium 200 C was prescribed two weeks for three times. Lycopodium covering the whole range, including the general physical, mental, and thermal pictures. [8, 9, 10]
Follow up

<table>
<thead>
<tr>
<th>Date</th>
<th>Changes</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.10.2023</td>
<td>Pain in the right lower back reduced &amp; Burning urination slightly present</td>
<td>Lycopodium 200 / BD for 2 weeks</td>
</tr>
<tr>
<td>28.10.2023</td>
<td>Pain in the right lower back and burning urinations better</td>
<td>SG / BD for 2 weeks</td>
</tr>
<tr>
<td>15.11.2023</td>
<td>Patient feels better and no new symptoms</td>
<td>SG / BD for 1 week</td>
</tr>
</tbody>
</table>

Before treatment

After treatment

2. Discussion

Though surgery continuous to be an important type of treatment, this line of treatment is costly, unaffordable and not easily available to the people. Moreover it only removes the calculi, which are the effects of the disease, but the tendency for calculi formation remains untouched. Hence there is reoccurrence of calculi formation in the same individual. In Homeopathy we do not treat the disease but the diseased man. It is holistic system of medicine in which we treat the patient as a whole taking into account the role of the body, mind & spirit and not just the disease. Hence there is a need to develop a simple cost effective, painless line of treatment, which not only removes the calculi, but also helps in removing tendency for Calculi formation. Now a days Homoeopathy is playing a
crucial role in the management of renal calculi and this helping in treating the problem without surgery.

3. Conclusion

Renal calculi present as an important and challenging clinical problem. The basic concept of homeopathy is not only to treat renal calculi but to address its underlying cause. Homeopathy used as a safe alternative to surgical intervention especially when the calculi are not of very large size or staghorn variety. It also suggests that proper and rational use of repertories is also helpful in indicating leading remedies in a case.

Conflict of interest
Not available

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Not available

References

[1] Rao RK. A Study on Renal Calculi its Miasmatic Background and Homoeopathic Management (Doctoral dissertation, Rajiv Gandhi University of Health Sciences (India)).