

Case 1:

Date: 6th Oct 2020

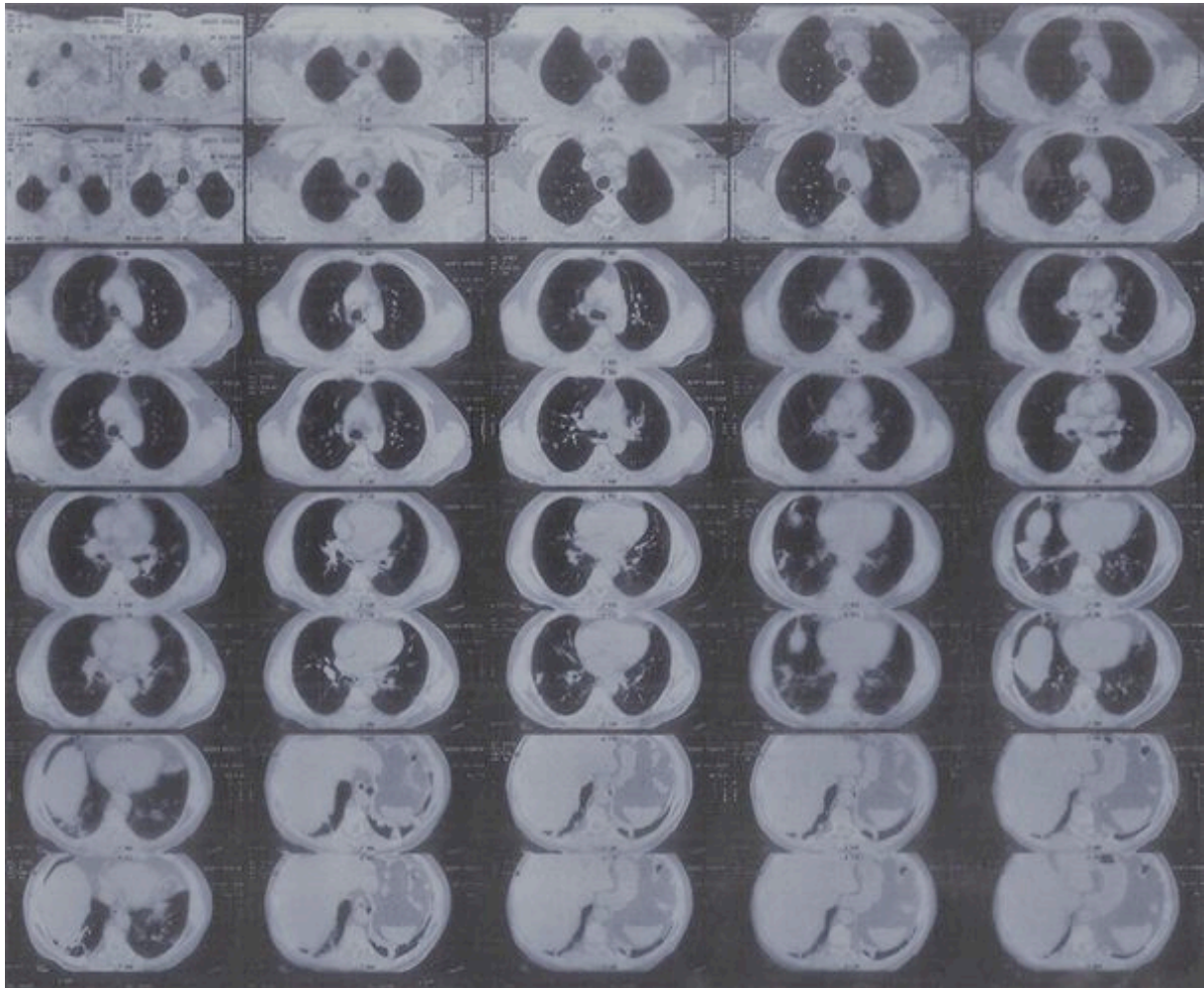
B.N: A 63 year-old male; Hx of Hypertension and reactive airway disease. His job involves close contact with plastic products and once or twice annually he gets allergic respiratory reactions and has to use inhalers.

The patient was unwilling to give his case by himself so the information was provided by his wife. The symptoms started approximately 10 days to 14 days prior to the initial case taking. He was prescribed multi vitamin, cough relieving syrup, Pinen Hydronoplacton Ribonucleic acid (PHR) inhaler, Hydroxychloroquine, Dexamethasone IV. The medications were used for a week and as none made him better, he decided to only use oxygen therapy. Later in the course of the disease they started homeopathy.

To explain his unwillingness to communicate directly, his wife said when he gets sick, even the relatives know that asking or calling him directly is irritating so they call the wife, though this time she was also affected with Covid.

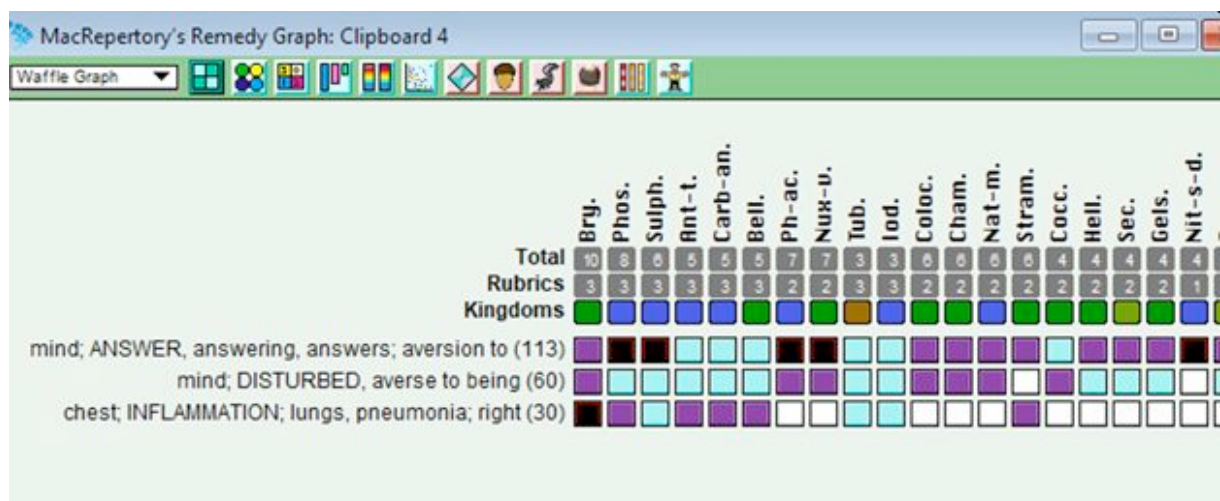
She said he sleeps in his room and the rest of the family, all Covid positive, are careful not to disturb him. He doesn't like visiting doctors as he is afraid of hospitals and that is the reason he delayed in getting himself checked.

SpO2 was fluctuating between 82% to 84% while resting and he had to use oxygen therapy quite frequently during the day. His complexion was darkened and the lips turn bluish since 5th Oct evening.



(The photo is taken from the CT scan paper hence the poor quality)

Analysis:



Rx: Bryonia alba 1M every 4 hours

No change after 24 hours; he needs oxygen therapy quite a lot and his lips turn bluish if he attempts to walk.

Retake case on 8th Oct 2020:

He was still unwilling to give his symptoms directly. The problem started with severe body pain about 10 days ago; he was only taking paracetamol; he was very busy at his work place; for a week he had body aches and after a week he developed fever and chill; after 10 days, symptoms not subsiding, with the insistence of the family, he went for a check-up.

When the doctor said he is in acute phase of the disease and that the lungs are involved, he froze and went silent. He is generally a very fearful person; he is afraid of hospitals, doctors; injections. The reason he was not going to get himself checked was that he said "If I step in the hospital I will die."

When he heard the doctor saying that he doesn't need to get admitted right away, he opened up a little bit but the doctor also said that he needs to get admitted immediately if the breathlessness increases. His eyes rolled round out of fear waiting for the doctor's response but then he was relieved that he could stay at home.

Every time he is sick he becomes quiet, becomes sedentary and does not communicate and if he is asked to communicate he gets irritated. Even his brothers want to ask how he is, they ask me, because when he is contacted by phone he reacts irritated.

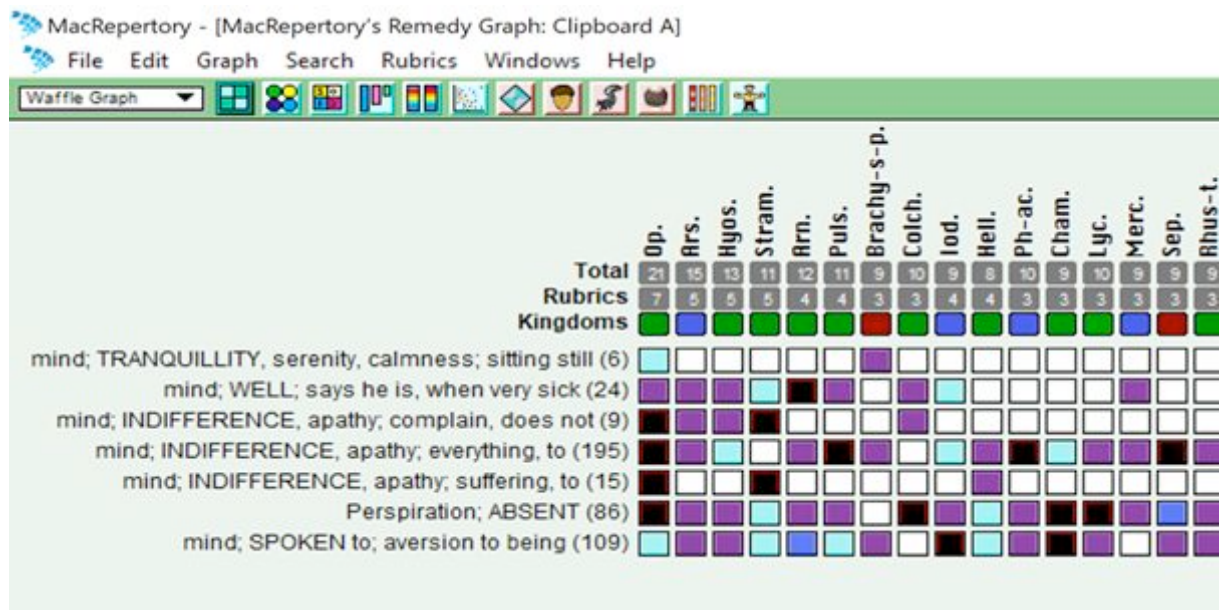
Now he is just lying down on the bed. On and off needs oxygen. Last night his complexion was very darkened. Lips bluish. Pulse oximetry reading was around 83%. Despite his breathlessness, out of fear of being admitted to hospital he says he is well.

He has not had perspiration, but he had fever and chill even when he covered himself. Habitually, his home treatment is to put on many clothes and cover himself with many blankets to make himself sweat and when he perspires profusely the fever goes and he feels fine. He did the same this time. That is why he had perspiration, otherwise the perspiration was not because of the disease. The fever and chill was throughout the day.

Thirst: He doesn't say whether he is thirsty or not; whatever is offered to him, when we come back, we see that only little bit of it is drunk. If we offer him something or not he is just sitting very quietly; not really asking for anything. We offer him everything. But he is like a statue. He has switched his phone; eyes closed and just resting. I feel he doesn't have the energy to do anything.

If we speak loudly, switch the TV on or etc., he doesn't say anything. He just doesn't have anything to do with us. He likes moderate weather but is generally inclined towards warmth. Now he feels more chilly and he persuades us to open the windows so that fresh air comes in but he has to really cover himself, or else he asks us to close the windows.

Analysis:



Rx: Op 1M every 6 hours

Follow- up: He joined the family for the next day's breakfast; within 24 hours he stopped using oxygen. Within 2 days he increased his in-home activities. Didn't anymore stay alone in his room and became much more communicative.

"We used to take his food to his room but after the first 3 doses, he joined us in the living room." In 3 days his appetite came back completely. SpO2 reading was done after 3 days of homeopathy treatment, 93-94% without oxygen despite exertion.

He continued to progressively improve and we didn't encounter any fluctuations during the treatment. He was kept on Opium 1M every 6 hours for 7 days and then BID for another 5 days. After 14 days he returned back to his work, initially 2-3 hours daily and in the 3rd week he was fully active.

Scan is not repeated due to the unwillingness of the patient.

Note:

As physicians we can be taken away by the state of the patient or the family and fail to see the complete picture of the disease which was there since the first day. It is very possible that in the urge to find a solution quickly our senses tend to be prejudiced and only grasp the partial picture. This case emphasises the need to ground ourselves when we are sitting with a patient, as well as making sure to ground our patient and create a plain slate on which the complete picture of the disharmony unfolds.

Der Fall entstammt einer Covid-Fallserie, die gesamte Serie findet man unter:

<https://hpathy.com/clinical-cases/homeopathy-and-covid-a-case-series/>