



A Case Report on Nephrolithiasis treated with Similimum

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ABSTRACT

A crystal concretion called a renal stone normally forms inside the kidneys. It is a growing urological condition that has an impact on human health and affects 12% of the global population. End-stage renal failure has been linked to an increased risk of it. According to the ultrasonography results used in the case report here, the patient had right renal calculi. The homoeopathic similimum prescribed after careful case taking, in-depth analysis, evaluation, and repertorisation, was successful in treating the patient.

Keywords: Renal Calculi, Homoeopathy, *Phosphorus*.

Introduction

Hematuria (blood in the urine) and pain in the belly, flank, or groin are symptoms frequently associated with renal calculi. Stone development is correlated with lower urine output or increased excretion of substances that contribute to the formation of stones, including calcium, oxalate, uric acid, cystine, xanthine, and phosphate. Calculi can also result from high urine acidity or low urinary citrate levels (1). Conventional treatment primarily includes surgical intervention. Homoeopathic literature has shown the importance of individualization in homoeopathic prescription and the efficacy of homoeopathic medicines in eliminating renal calculi (2,3). The most natural method of treating kidney stones is Homoeopathy, which also treats the problem's root cause.

In Homoeopathy, kidney stone treatment has a twofold action and are secure and natural. Initially, they aid in the removal of stones that are present in the urinary tract by either reducing them to tiny sand-like particles or, in a few instances, leaving them intact. Second, they provide the hope of eventually eliminating the propensity for stone production (4).

Case Study

The reported case is 35 years old, hindu, vegetarian, male engineer by profession, belonging to a middle socio-economic family, residing in rural area who came to our OPD (12598) of on 20/10/2021 with the complaints as follows:

1. Stitching pain in right lumbar region > pressure
2. Nausea < morning > eating after
3. Stitching pain with intermittent urination < after urination

History of Presenting Complaints-

Patient as suffering from pain in right lumbar region for 15 days after which nausea and stitching pain during urination started. He has been having a problem of intermittent urination for the last 5 days.

Treatment History - He took allopathic treatment for 4 days, but temporary relief was obtained.

Family History - Father suffering from asthma for the last 5 years. Mother and all siblings are healthy.

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Patient as whole

- Appetite- Adequate, 3 meals/ day and 4 chapati/ meal.
- Thirst- Thirsty, drinks 7-8 glasses / day.
- Desire- Adds extra raw salt.
- Aversion- Pumpkin
- Stool- once a day, satisfactory, hard solid.
- Urine- D₇₋₈N₃₋₄, pale yellow, non-offensive, stitching pain, intermittent.
- Perspiration- Profuse, Generalized, non-offensive, non-staining.
- Thermal reaction- Chilly.

Mentals

Likes to be around people and going to parties, avoids being alone. Irritability was observed during case taking. Anger expressive and violent.

She could say anything to anyone in anger and she did not care about what she said to the person.

General examination

Patient was apparently healthy looking, decubitus/attitude on back, Anaemia/pallor- Absent, facies absent, cyanosis- absent, deformity- absent, oedema absent, skin- dry, cachexia/ emaciation-absent, weight – 65 kg, SpO₂- 97%, temperature – afebrile, height – 166cm, built – ectomorphic, blood pressure- 130/80 mm Hg, respiratory rate - 18/ min, tongue – clean, pulse- 80/min.

Local examination

Tenderness in right lumbar region.

Provisional diagnosis

Renal calculi present in right ureter-5.8mm and right kidney-4mm (Figure 1)

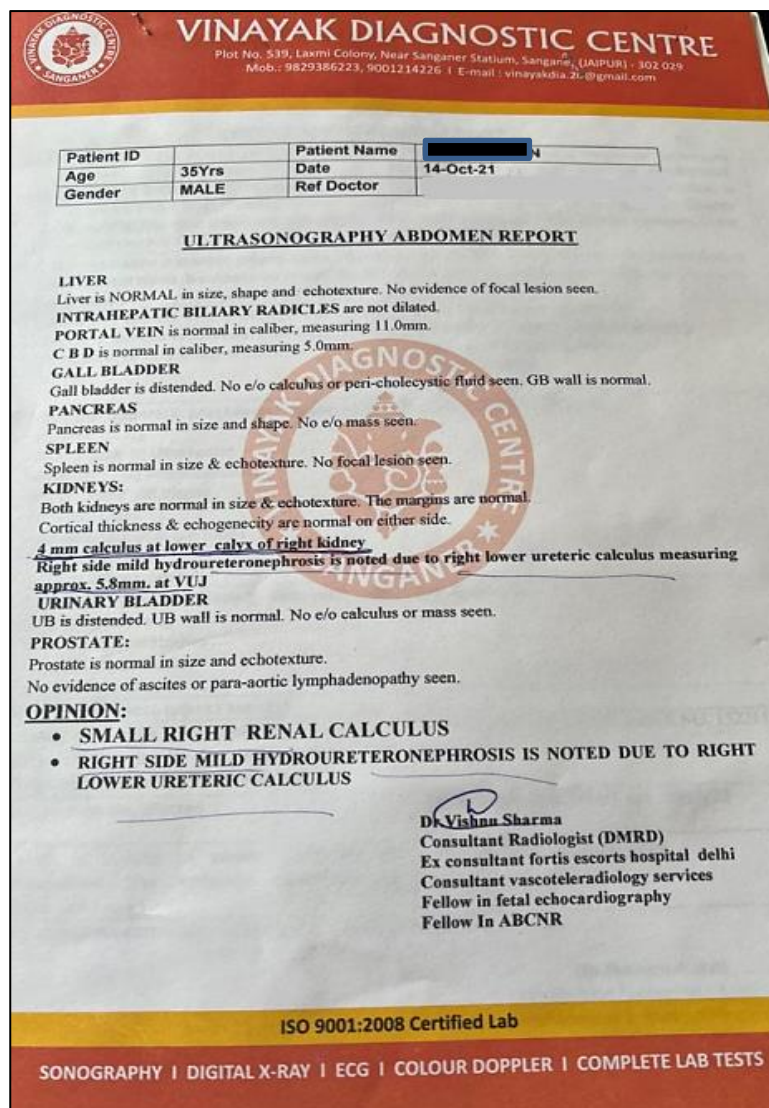


Figure 1: USG before Treatment

Case Processing

Table 1: Evaluation and Miasmatic Analysis of Mental Symptoms

Symptoms	Evaluation	Miasmatic analysis (5)
Anger violent	3+	Psora
Irritability	3+	Psora
Desire company	2+	Psora

Table 2: Evaluation and Miasmatic Analysis of Physical Symptoms

Thirst- Thirsty	1+	Syco-Syphilis
Desire- Raw salt	2+	Psora- syphilis
Aversion- Pumpkin	1+	Psora
Stool - Satisfactory, Hard	2+	Psora
Urine - stitching pain after urination, intermittent.	2+	Syco-Syphilis

Table 3: Evaluation and Miasmatic Analysis of Particular Symptoms

Stitching pain in right lumbar region > pressure	2+	Psora -Sycosis
Nausea < morning	2+	Sycosis
Nausea>eating after	2+	Sycosis

Miasm - Mix miasm but predominantly Psora (5)

Repertorisation- As the generals were marked, this case was repertorised with the help of the *Synthesis Repertory* from RADAR 10.0 version. (Figure 2)

Selection of remedy- *Phosphorus* was selected on the basis of repertorisation (Figure 2) and after the consultation of materia medica, considering the symptom similarity (6, 7).

Selection of potency and dose - 1 dose of *Phosphorus* 200, 4 globules were prescribed.

20/10/21: *Phosphorus* 200/1 dose of, Rubrum 30/TDS for 7 days

General Management (8)

- Drink 4-5 L of water every day.
- Avoid consuming seedy vegetables and fruits.
- Avoid milk products.

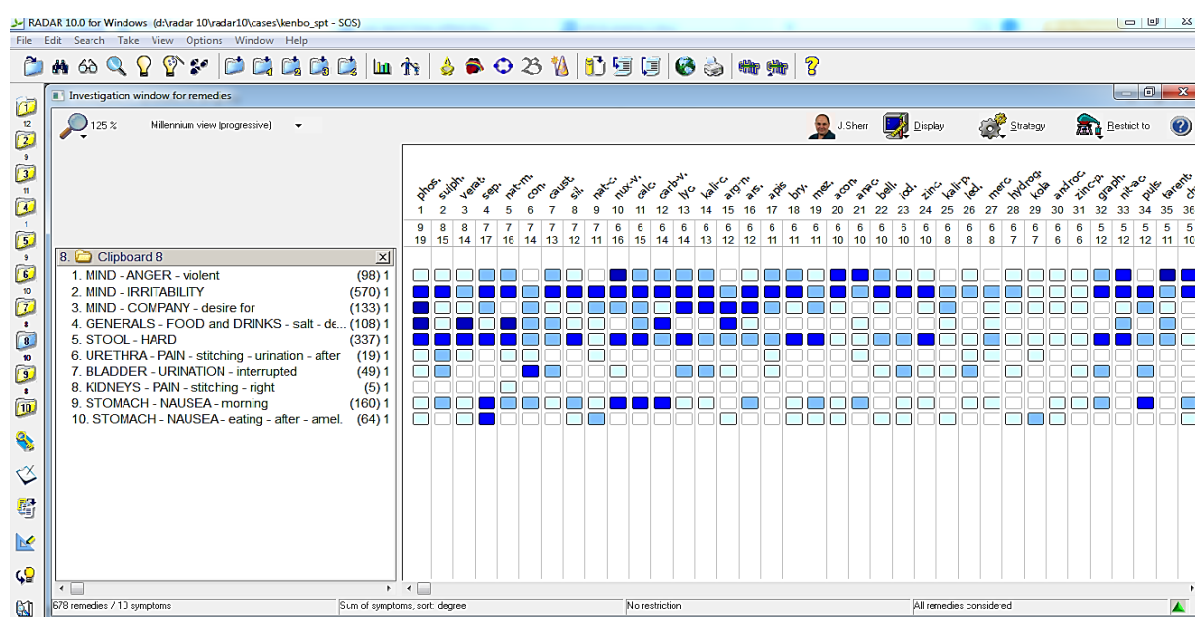
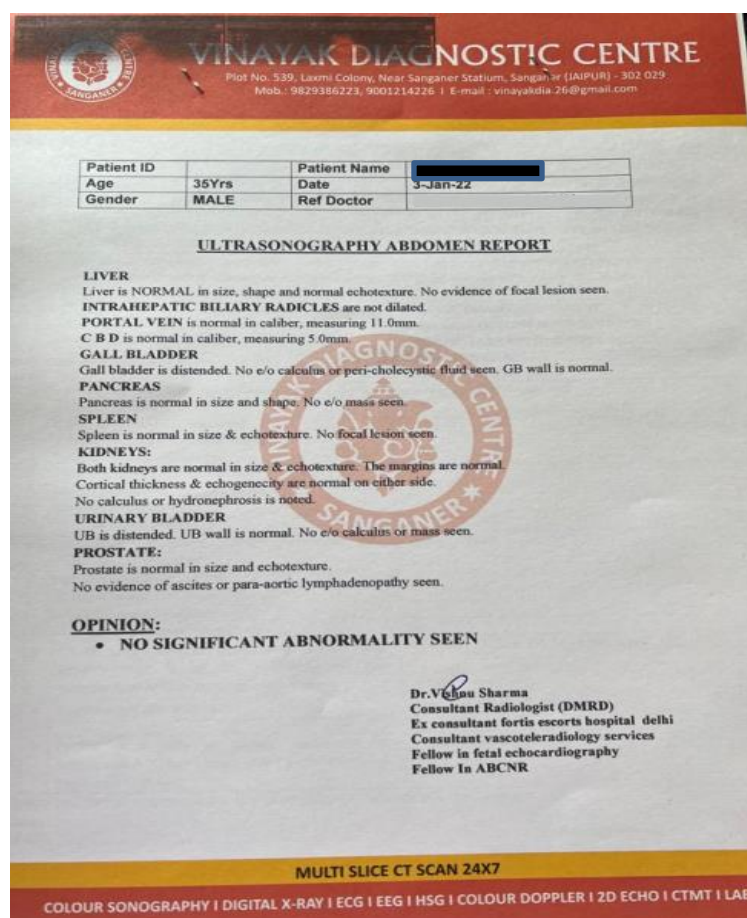


Figure 2: Repertorisation Sheet

Table 4: Follow Ups during treatment

Date	Changes in symptoms	Prescription	Justification
27/10/2021	> Stitching Pain in right lumbar region	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days	Improvement was observed so no change of medicine and placebo was given.
5/11/2021	> Stitching pain in right lumbar region on and off, nausea persisting.	Phosphoros 200 / 1 dose Rubrum 30 / TDS X 14 days	Same symptoms recurring so same medicine repeated for more stable relief
20/11/2021	> Pain, nausea, intermittent urination.	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days	Improvement was observed in urinary symptom as well so placebo was given.
6/12/2021	No pain, nausea, intermittent urination	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days.	Marked improvement was observed so no need to change or repeat the medicine and only placebo was given.
20/12/2021	No pain and nausea. Patient felt something passed while urinating. Patient as advised to get sonography.	Phytum 200/ 1 dose Rubrum 30/ TDS X 14 days.	No recurrence of any symptom so placebo was given.
4/1/2022	No symptoms. USG showed no stone.	No prescription	No calculi seen in sonography.

**Figure 3:** USG after treatment

Discussion and Conclusion

In cases of surgical illnesses like nephrolithiasis, homoeopathy offers a secure and efficient option, according to this case study. We also found that a similimum medicine provided individually and based on totality can work in this situation. Here Phosphorus being the similimum cured the patient. Some symptoms for considering Phosphorus as given in literature are - Congestive and inflammatory symptoms in renal calculi with purulent, chalky, or sandy deposits. Dull discomfort near the kidneys and tension in the bladder area. Urination without pain. Urine contains albumin and exudation cells (9).

This case report promotes homoeopathic treatment as a possible complementary or alternative therapy, as well as emphasizing the importance of repertorisation in individualized homoeopathic prescription. Further analysis of the constitutional approach requires investigation into related cases.

Acknowledgement

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Conflict of Interest

The authors declare that there is no conflict of interest regarding the study or this article.

Abbreviations

Outpatient department (O.P.D.), thrice a day (T.D.S.)

Adverse Drug Reaction

Not reported

Limitations

- Nephrolithiasis cases complicated with other renal disease requiring urgency should not be treated with Homoeopathy.

- Large Staghorn calculi obstructing urinary passage may require emergency treatment.
- This is a single case report. In future case series can be recorded on effectiveness of individualized homoeopathic medicine in renal stones.

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Nil

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