



CASE REPORT

A CASE REPORT ON RENAL CALCULI TREATED WITH HOMOEOPATHY

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Abstract

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Key Word- Renal calculus, Polyuria, Lycopodium, Homoeopathy

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This is a case report of 57 years male presented with a complaint of pain in lumbar region since 6 months. He was also suffering from weakness of memory and polyuria at night. His pain gets aggravated on lying down and ameliorates after urination. His pain radiates from lumbar region to ureter. On investigation it is found that he is suffering from left renal calculi. Systematic case taking followed by repertorisation of totality of symptoms was done by Synthesis Repertory using RADAR software in order to select individual remedy for the case where Lycopodium, Argentum nitricum, Belladonna, Nux vomica and Calcarea carbonica were shortlisted.

INTRODUCTION

Kidney stone disease is a crystal concretion formed usually within the kidneys. It is an increasing urological disorder of human health, affecting about 12% of the world population. It has been associated with an increased risk of end-stage renal failure. The etiology of kidney

stone is multifactorial. The most common type of kidney stone is calcium oxalate formed at Randall's plaque on the renal papillary surfaces. The mechanism of stone formation is a complex process which results from several physicochemical events including supersaturation, nucleation, growth,

aggregation, and retention of urinary stone constituents within tubular cells. These steps are modulated by an imbalance between factors that promote or inhibit urinary crystallization. It is also noted that cellular injury promotes retention of particles on renal papillary surfaces. The exposure of renal epithelial cells to oxalate causes a signaling cascade which leads to apoptosis by p38 mitogen-activated protein kinase pathways. Currently, there is no satisfactory drug to cure and/or prevent kidney stone recurrences. Thus, further understanding of the pathophysiology of kidney stone formation is a research area to manage urolithiasis using new drugs. Therefore, this review has intended to provide a compiled up-to-date information on kidney stone etiology, pathogenesis, and prevention approaches.¹

TABLE 1

Composition of Kidney Stones in Developed Countries

Stone type	Children (%)	Adults (%)
Calcium	50 to 90	64 to 92
Calcium oxalate	60 to 90	32 to 46
Calcium phosphate	10 to 20	3 to 5
Both	—	29 to 40
Cystine	1 to 5	1
Struvite (magnesium ammonium phosphate)	1 to 18	2 to 15
Uric acid	1 to 10	3 to 16
Other	4	1

Source: from reference 2,3 and 5

TABLE 3

Risk Factors for Kidney Stone Recurrence

Anatomic abnormalities

Calyceal diverticulum or cyst
Horseshoe kidney
Medullary sponge kidney (tubular ectasia)
Ureteral stricture
Ureterocele
Ureteropelvic junction obstruction
Vesicoureteral reflux

Diseases

Gastrointestinal diseases and bariatric surgery (e.g., Crohn disease, enteric hyperoxaluria after urinary diversion, intestinal resection, jejunioileal bypass, malabsorptive conditions)
Hyperparathyroidism
Nephrocalcinosis
Sarcoidosis

General factors

Calcium phosphate stones
Early onset of urolithiasis (especially children and teenagers)
Family history of stone formation
Infection-associated stones (struvite or carbonate apatite stones)
Solitary kidney*
Uric acid- and urate-containing stones

Genetic factors

2,8-dihydroxyadenine
Cystic fibrosis
Cystinuria (types A, B, and AB)
Lesch-Nyhan syndrome
Primary hyperoxaluria
Renal tubular acidosis type I
Xanthinuria

Source: (reference 4, 5) Adapted with permission from Skolarikos A, Straub M, Knoll T, et al. Metabolic evaluation and recurrence prevention for urinary stone patients: EAU guidelines. *Eur Urol.* 2015;67(4):752.

CASE SUMMARY

Personal Data

Name: ABC

Age: 57 yrs.

Sex: Male

Marital Status: Married

Dated:20/03/2022

Presenting Complaints

Patient is presented with the complaint of pain in lumbar region since 6 months.

Location: left lumbar, hypogastrium

Sensation: cutting, stitching

Radiation: to ureter

Aggravation: lying down, 4-6 p.m.

Amelioration: motion, urination

He is also suffering from weakness of memory and polyuria at night.

He is sensitive towards tight clothing around his waist.

Past History

He has suffered from right sided renal calculi one year ago and treated with the ayurvedic treatment and got relieved.

Family History

His father was diabetic.

Physical Generals

- Appetite: Good, easy satiety
- Thirst: Thirsty
- Desire: Sweets
- Aversion: Nothing specific
- Intolerance: Nothing specific
- Bowel: Hard with much flatulence
- Urine: Clear, copious at night
- Sleep: Refreshing
- Perspiration: Profuse, non-offensive
- RHC: Chilly

Mental Generals

Patient has weak memory since few years and he has disposition to contradict others statement. He gets angry if someone awakes him from the sleep.

Provisional Diagnosis - Renal Calculus⁶

Totality of Symptoms

- Pain in lumbar region
- Pain in bladder
- Pain aggravates by lying, 4-8 p.m.
- Pain ameliorates by urination
- Pain is of cutting and stitching type
- Sensitiveness of abdomen towards clothing
- Polyuria at night
- Desire of sweets
- Formation of renal stones
- Weakness of memory
- Disposition to contradiction

Rubrics Selected⁷

1. Mind – contradiction- disposition to contradict
2. Mind - memory – weakness of memory
3. Abdomen - clothing; sensitive to
4. Bladder - pain – lying – agg.
5. Kidneys - pain – left
6. Kidneys - pain – afternoon-16-20h
7. Kidneys - pain – cutting pain
8. Kidneys - pain- urination – amel.
9. Kidneys - pain – extending to- bladder
10. Kidneys - pain – extending to – ureter;down- stitching down
11. Kidneys-stones
12. Urine- copious- night
13. Generals - food and drinks – sweet – desire
14. Generals- Stone – cutters;for

Analysis Of The Case

After analysis and evaluation of the case the characteristics symptoms were used to form the totality “pain in lumbar region of cutting and stitching type, aggravated by lying and ameliorated by urination, radiating to bladder and ureter” were important particulars in this case, “desire for sweets, copious urination, sensitiveness to tight clothing” were important physical general and “weakness of memory and disposition to contradict” were important mental generals in this case.

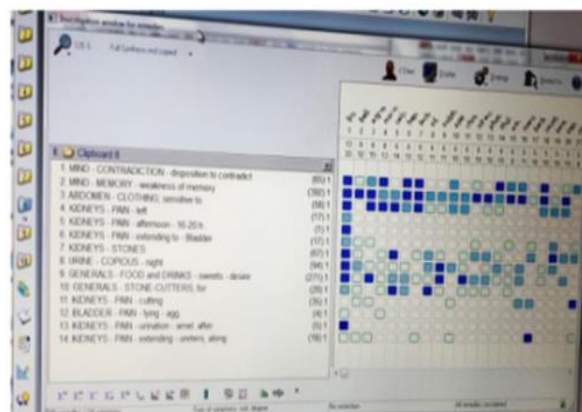
The selection of remedy was based on repertorisation from RADAR 10 software using Synthesis Repertory 9.1 by Frederick Schroyens with repertorial result showing top five remedies as Lycopodium⁸ (33/13), Belladonna (9/12), Argentum – nit. (8/15), Nux vomica (8/13) and Calcarea (6/14).

Follow Up

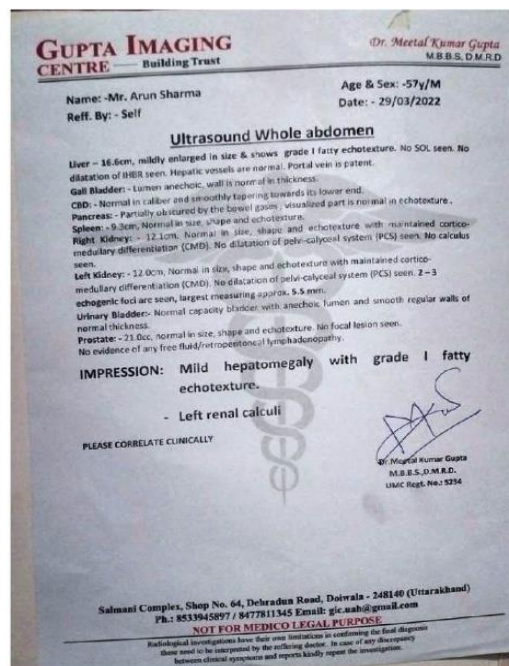
DATE	SYMPTOM	MEDECINE
20/03/20 22	Patients' 1 st visit	<i>Lycopodium</i> ⁸ 30/ 4 dose
02/04/20 22	Relief in flatulency	Placebo
16/04/20 22	Slight relief in copious urination at night	Placebo
05/05/20 22	Slight relief in pain	Placebo

18/05/20 22	No further relief	<i>Lycopodium</i> 30/ 4 dose
08/06/20 22	Episodes of pain reduced	Placebo
09/07/20 22	Intensity of pain reduced	Placebo
06/08/20 22	No new symptoms appeared	Placebo
25/08/20 22	Relieved	Placebo

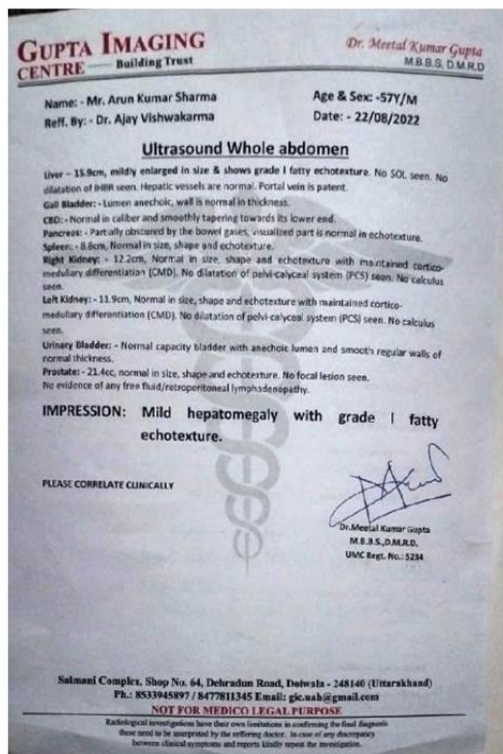
Repertorial Sheet



Before Treatment



After treatment



Prescription

Lycopodium 30/4 dose

Basis for Prescription - After analysing the reportorial results and with the knowledge of our Materia Medica, LYCOPODIUM 30/ 4 doses were prescribed as it gains maximum marks in reportorial sheet and as patient has suffered from right sided renal calculus in past which shows characteristic of lycopodium i.e., direction of complaints from right to left. Patient showed marked improvement after the medicine administration.

DISCUSSION AND CONCLUSION

Homoeopathic medicine selected on the basis of homoeopathic principles proved to be very effective in this case of

renal calculi and shown remarkable results in the treatment. Lycopodium was selected on the basis of particulars, mental generals and physical generals and keeping in mind the knowledge of Materia Medica and homoeopathic philosophy. Treatment was continued for 5 months. Medicine was given in very few doses which appeared very effective in treatment of the case.

The potency selection was done on the basis of susceptibility of the patient as stated by Dr Close⁹ :

- The greater the characteristic symptoms of the drug in the case, the greater the susceptibility to the remedy and the higher the potency required.
- Age: Medium and higher potency for children.
- 3.Higher potencies for sensitive, intelligent persons.
- Higher potencies for person of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.
- 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 low so 30 potency was selected.

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

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