

ICR Symposium: Homoeopathic Management of Epileptoid Disorders

Vadodara, September 2018

CASE - 2

DR NAVIN/DR JIGAR

Objective:

1. To experience the impact of constitutional medicine in development of children who is having neurological insult.
2. Learning how the constitution responds to the similimum.
3. Learn that How the early introduction of homoeopathic treatment helps a child with neurological disease.

EXHIBIT 1:

Directives:

1. Share your feeling after going through the history form.
2. Go through the history submitted by parents and come to your understanding about the disease.
3. Whether you want to accept the case? Why?

EXHIBIT 2:

Directives:

1. Focus on the presentation and examination and come down to your clinical diagnosis.
2. Form your totality and come to remedy with differentiation.
3. Come down to your expectation from the treatment (TPD TPR)

Please Send Your Working To

Dr Jigar Shah :- drjigarhomoeo@gmail.com

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EXHIBIT 1:

History submitted by parents:(11-3-08)(History is translated from gujarati)

'Jai swaminarayan'

Preliminary Information:

Name: B.A.P. , Address: Bhimpura, Ta-Amod, Dist: Bharuch

D.O.B: 7-8-2007, Pure vegetarian

Family information:

No	Name	Age	Business	Relation with child
1	M.G.P	55 yrs	Farmar	PGFa
2	I.M.P	51 yrs	H.W.	PGMo
3	A.M.P	27 yrs	Service	Fa
4	N.A.P	23 yrs	H.W.	Mo

Children's daily schedule:

Child is 6 months old. Therefore the child doesn't have any study or games like activity.

Chief Complaints:

B has born on 7-8-2007.The delivery was done by 'Dai' at home. Child cried after her birth. Child and mother was o.k. after the delivery. Not taken any medicines from doctor.

The child had fever and cold after 1 month and 15 days. And for that we have taken medicines from Dr. M.P(child specialist).

After that on 2-1-2008 the child had fever with cold with convulsion. For that we have taken the treatment from Dr. M.P. but she was not well and so we have shown to other doctor. But from treatment of other doctor there was no improvement in fever. At last, we shown to Dr.H.M.(child specialist from Bharuch). Doctor advised us do investigation of brain and eye. The report of it is attached with this form.

The doctor told us that the child's brain nerves are drying up and so they referred us to other doctor.

So, we went to Dr.B.D of surat. Doctor has told us that the " balak ne kudarati naso ni bimari che. Janm pachini koi bimari thai nathi. So, there is no treatment for her. Do the 'seva' of the child as much as you can. The baby will not able to do any work when she will grow. Please see the letter written in file.

Other Complaints:

Child had fever, cold and convulsion on 3-1-2008. And for that she had taken treatment. The child can not able to do eye to eye contact after 3 months. The child cannot sit. We are giving her milk with glucose biscuits 1 to 2 times in a day. We are not giving him anything apart from this.

The child's developmental record:

The child was delivered at home and we have not shown him to any doctor.

Birth weight - 3 kg, Weight on 5-10-2007 - 3 kg 660gms, Weight on 3-1-2008 - 5 kg 500 gms, Dentition - not yet started

Child is 7 month old now but she cannot able to sit.

Other information regarding the child:

Doctor has told us regarding the condition of the baby. So, please tell us that the baby will become alright or not?

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Report attached with history form:

Dr. B.D(M.D. D.PED): February 2008

Dear Doctor H,

I thank you very much for referring pt. She has GTC which is due to her prenatal CNS defect. She has severe hypotonia with delayed milestones, mild optic atrophy (optic nerve is direct extension of brain matter), so naturally there is brain atrophy. ***This baby has bad prognosis for useful life.*** MRI like costly investigation will not help baby, or change clinical condition. Please give

- Epival 2 ml BD
- Calpol drops 10 sos
- Tonoferron drops 10 OD

Eye hospital – Dr. Y.M., Bharuch: 5-2-2008

Baby B: Fundi (BE) - Disc: No papilloedema, pallor present.

? early optic atrophy.

6-2-2008: EEG & Brain map analysis:

History: Episodic generalized convulsions staring at one place, salivation, incontinence lasts for few mits since 2 months

Observation: The background activity consists of 9-10 Hz, 30-50 Hz microvolts of alpha activity arising from both the occipital areas and replaced in front by fast beta waves. PS doesn't potentiate any abnormality.

There are scattered that waves getting intermingled with background activity. Right hemisphere show sharp waves and spikes which occasionally become generalized.

Normal sleep spindles are occasionally seen.

Impression: The sedated EEG record is abnormal showing interictal discharges arising from right hemisphere.

EXHIBIT 2:

No	Location	Sensation	Modality	Accom
1	3/1/08 Till 5-2-08 CNS After 2-3days Since then F2-3/day D- 2 min At Present	Sneezing Watery discharge Fever with seizures Seizure clenching of teeth UREB / GTC No unconscious No Involuntary urine / stool Delayed milestones No monosyllabic babbling Delayed social smile Not able to sit/turn	<1 7- 8am <1 8-9 pm (night) >2 Syp Epival(Sodium valproate) 1.3 ml BD Calpol drop sos	

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		Weakness No Convulsion	Taken: Baryta Carb 30, Phosphorous 30, Agaricus 30, Gelsemium 30	
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PATIENT AS A PERSON

Lean Perspiration: Partial forehead² Excessive+

Mother's obstetric history:

Deliver FTN home delivery.

Birth weight: Approximately 3kg Lactation: N

Social smile: 5 months

Dentition: not yet started

Turning in bed: absent

Sitting: Not yet developed

Sleep: Duration - 2-3 hrs, Deep, Keep mouth open during sleep²

Fan: W/S/M – doesn't need

Covering – likes

Woolen takes

Bath desire with hot water

C₃H₂

Life Space:

A 7 month old child has come to our hospital with parents. She is the only child. Fa is working in GIDC at Ankleshwar, Mo is home wife, PGFa is retired and PGMo is also house wife. Fa & Mo are calm in nature. Pt is more attached with family especially with Mo.

By nature child calm, cool & playful. She is mixing easily with others. But if anybody teases her then she became angry and she grinds her teeth and tries to beat. But after some time she plays with that person. She startles from noise of whistle.

Observation: Baby is active and playful with everybody with calm and mild look.

PHYSICAL EXAMINATION:

Pulse: 140/min.

RR: 34

Wt: 6.100kg

Head Circumference: 42 cm

Height: 69cm

Chest: 40 cm

CNS:

Head holding: +nt, Eye co-ordination: good, Cannot able to sit, stand. Hypotonia++

DTR: +, Parachute reflex – absent

P/H/O: MGFa: CVA, MI,HT

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Follow up criteria:

- | | |
|--|---|
| <ol style="list-style-type: none"> 1. Unable to sit with support / No Turning 2. Unable to sit without support 3. Unable to Stand with support 4. Unable to Stand without support 5. No Teething 6. No Walking 7. No Visual – eye co-ordination | <ol style="list-style-type: none"> 8. Seizure 9. Weight 10. Height 11. CNS examination: 12. Allopathic medication: Syrup Epival 1.3ml BD 13. Speech |
|--|---|

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	Action
11-3-08														ACTION A
1-4-08	A/A	Few seconds	S	S	S	S	S	A	6.3kg		Hypotonia Same	S		ACTION B
13-5-08	A/A	For Few minutes	S	S	S	S	>+	A	6.7kg		Hypotonia>+	S		ACTION C
28-5-08 (9 mths)		>+	S	S	S	S	A	A	6.75kg			S		ACTION D
25-6-08		A	Walk with walker	S	Appeared	S	A	A			Hyptonia >++	S		ACTION E
23-7-08 (11 mths)			>+	>+		S	A	A				S	Say: Ba,Pa	ACTION F
22-8-08			A	>+	2 teeth	S								ACTION G
23-9-08				>+					7.5Kg					ACTION H
18-11-08 (1 year 3 month)				>+		S		Yest GTC						ACTION I
24-2-09				A		Walk without support but falls after short		A					2-4 words	ACTION J

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						distance								
21-4-09						Walk without support	A	8.5kg		Power 5/5 UL, LL			ACTION K	
22-5-09						>+						1-5 no, dudh word	ACTION L	
23-6-09	Bladder & Bowel control poor						No since 6 months	8.5kg	80cm			Words	ACTION M	
22-7-09	Walk without support							A					ACTION N	
21-8-09	Walking normal							A					ACTION O	
6-11-09	Since 1 month recurrent diarrhea & for that she takes allopathic treatment. Since 2 days fever, water nasal discharge, thirst decreased++, Dullness												ACTION P	
15-12-09												Speech words, no sentences,	ACTION Q	
12-1-10										Head: 47 cms, Chest : 50 cms	OD		ACTION R	
10-2-10	Overall >+, cold & cough since 4-5 days							A				OD	ACTION S	
12-3-10	Ophthalmologist report: NAD, Speaks: Ba, Da,dada,kaka,mama.							A	10kg			OD		ACTION T
1-4-10	Watery, offensive diarrhea since 2 days, weakness++, Thirst increase,													ACTION U
12-5-10												Speaks words & Few sentences	ACTION V	
16-6-10									11 kg	85.5cm				ACTION W
19-1-11	Pt was regularly coming every monthly. Opinion of Pediatrician taken. Good progress & continue homoeopathic medication Pt was taking Epival in 2-3 day interval												ACTION X	

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9-11-11	Now able to speak almost all words, sentences. Off Epival										ACTION Y
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23-2-12: Psychologist assessment: Average Development on intellectual functioning. IQ: 97

Pt was under treatment till December 2013. She was off homoeopathic treatment from December 2013.

Called up on 25/8/2018: Pt is absolutely ok. No convulsion. Not on any medication.