

**ICR NATIONAL SYMPOSIUM
MIND & MATERIA MEDICA: PSYCHOLOGICAL DIMENSIONS IN CLINICAL
PRACTICE**

Case: 5

Dr Rajesh Yadav

Objectives-

1. Demonstrating perceiving the “Case” during screening, its advantages and disadvantages
2. Experiencing the conflict of a young ambitious athlete battling with his Desire and Conscience
3. Understanding the interpersonal conflicts in a sensitive individual and actions taken to strike a balance.
4. Demonstrating the role of the T-F-C-A-R model in understanding the athlete, his actions, the nature of balance / imbalance struck and perceiving the Materia Medica image.
5. Assessing the remedy response and its role in tapering off anti-epileptic drugs

Directives-

Exhibit 1: Screening

1. Study the screening and suggest your action plan for proceeding in the case.

Exhibit 2: Case recording

1. Study the whole case record and comment on the conflict between the mother and the patient and its effect on him.
2. Analyze the various relationships of the patient and comment on how he deals with them
3. Process the case through the mental state SCR and give your comprehensive understanding of the T-F-C-A-R of the case
4. Process the case and select a suitable approach, arrive at group of remedies and differentiate them to arrive at the similitum.
5. Give your planning and programming and TPD / TPR of the case including what would you like to do with the allopathic medications that are going on.

Exhibit 3: Follow-ups

1. Study the follow-ups and give your suggestions on changes in the remedy and tapering the anti-epileptics

Send your working to: docrajesh87h@gmail.com

Exhibit -1: Screening

Screening -

Date- 20/02/2017

Name- Mr. D.L. Age / sex- 16yrs / male education- 11th std / commerce

Religion- Nomadic Tribe Father- 44yrs/ BST supervisor Mother- 39yrs. Aanganwadi worker

Brother- 18yrs. F. Y. B.sc

Chief complaint-

Patient was brought by his mother who is an Aanganwadi worker for his complaint of seizure disorder since childhood (febrile). Recurrent tonic clonic convulsions with loss of consciousness. Complaint more in summer and with any stress. Frequency is less since 2 – 3 years. Along with this, he has an aggressive nature and at times constantly thinks about the same things in anger.

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(Patient was shy to enter the clinic / cabin and to talk; had some smile on face). The patient agreed with the history given by the mother and added that he always chose sports to ease his anger. Gets headache with anger and feels shy to face the crowd with some uneasiness in body. Anxiety before the exams and feels people will tease him if it doesn't pass. Constantly gets into deep sleep and has to be shaken to wake him up.

Likes fish and gets perspiration on nose mostly.

Past history of right-sided renal calculi.

Thermally chilly

On regular medications- Tablet Valparin 300 BD, Tablet Frizium 10 bd, Tablet Vinlap 300 bd

On examination-Tall, stocky built, shy in appearance and talk up-front, long hands and fingers

Afebrile, p- 74b/min. No- pallor, icterus, clubbing.

Systemic examination-

Respiratory system- Clear, AEBE

Cardiovascular- NAD

Central nervous system-

Conscious, oriented, Attention- Normal, All sensory functions- Normal, 5/5 power in all extremities, Reflexes- Both superficial and deep are Normal, Co-ordinations - Normal, Romberg's- negative, upright gait without any asymmetry with normal arm swing.

Exhibit-2

Note: The case was defined in the screening itself

Name- Mr. D. L. Age/sex- 16yrs / male education- 11th std / commerce

Religion- Nomadic Tribe Father- 44yrs/ BST supervisor Mother- 39yrs. Aanganwadi worker

Brother- 18yrs., F. Y. B.sc

Chief complaint-

Location	Sensation	Modality	Concomitants
CNS Since 16 years Earlier-	Febrile convulsions with frequent hospitalizations	<exams2 <stress2 <summer2	
Currently- F-3-4/year (since 8-10 years) d- 4-5mins.(Total episode)	Aura- Sadness before starting+ Whirling sensation+ Feels going in another world+	>sleep+ >lying down+	
	Ictal- Tonic & clonicity of	Tab.Valparin300- BD	

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F- 3-4 times till now	body2 Food falls from hands Unconsciousness with+ Frothing from mouth Post ictal- Perspiration on face	Tab. Vinlap 300-BD Tab. Frizium 10- BD	
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Physical generals-

Tall boy with stocky built. Shy to come to clinic on his own and also in the chamber.

Perspiration- Palms² soles² nose², usually after anxiety², offensive+ non staining

Cravings- chicken² cold water² salty foods² spicy³ fish² and pulses+

Aversion to vegetables+

Stool / urine – Nothing Abnormal

Sleep- deep since 2 years has to be pushed to get up.

Dreams- becoming big shot and roaming around in Big expensive car+

Travelling in bus causes nausea² and abdominal pain+

Sun exposure causes headaches²

Thermally-C3H2

P/H/O- rt. Sided renal calculi, 2012. Relieved by allopathic medications.

On examination-

Afebrile, p- 74b/min. No- pallor, icterus, clubbing.

Systemic examination- NAD

Reports- EEG

9/8/2005- Mildly abnormal.

9/3/2013- Generalized Epileptiform activity suggestive of idiopathic generalized epilepsy most likely to be juvenile myoclonic epilepsy.

16/4/2015- Abnormal revealing presence of epileptiform activity over left frontal region with secondary generalization.

Life space-

A tall boy came with his mother for case definition. He comes from a moderate economic family but parents made all efforts to manage and fulfill all needs of the family. Mother is a very hard-working woman who apart from managing her Aanganwadi work is involved in Amway business. Both sons take care of all the household work once the mother is out at work. His elder brother avoids doing a lot of work which ultimately has to be done by the patient. Patient does it as he feels he (Brother) is elder and if he doesn't do this then mother has to do it after her work. At times the patient feels irritated because of brother's behavior, and occasionally fights happen between them. Patient especially gets irritated and angry when anyone comments on his work and usually takes time to forget those comments (*sarkhi gosht manat firat rahate*-things constantly go around in my mind) and remains angry. Usually skips food

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when in anger and stops talking to the concerned person unless they come to talk on their own. Gets headache during these episodes.

He has always liked running since early age and has a desire to progress to national and international level. He has got many inter school competition prizes and wants to pursue it seriously. Also running helps to calm his anger. But the mother feels that at times he neglects his studies due to sports. As the patient wants to have his personal coach for training, mother keeps telling him to first finish the 12th and get at least 50-60 percent then the parents will arrange for the coach. Though he doesn't like this and gets angry and constantly thinks about it, he has a lot of respect for the parents and follows as they guide him to.

He isn't interested in academics and gets hardly 50 % marks. Always feels tensed before exams or for their preparation. He wonders whether he will be able to get good marks and gets perspiration and giddiness. He feels people will pass comments or tease him if he doesn't pass. Also he is emotional by nature and feels sad when looking at poor and needy people and tries to help them. He feels shy and anxious to face public and gets trembling of the body.

He was in a love affair since the 9th with one classmate. He never liked one of his teachers who used to always go to his girlfriend's bench and ask her something. This conduct of the teacher used to irritate him a lot. He always used to remain in an angry state and at times had bunked his class. He desired to smack the teacher and once was about to do it but did not because of his friend's pressure and suggestion that he doesn't have a valid proof regarding that teacher. So it was better to avoid. But after 10th he found that his girlfriend was rude with him at times and spent more time with others. He was very sad because of this behavior for many months (2-3 months) and ultimately the relationship ended. But soon he got attracted to another girl and was about to approach her but found his close friend had sneaked in and had started talking with her. That made him very angry and he was about to hit him. They had some argument but he was stopped by other friends. His anger remained for long and he stopped talking to that boy. He indicated that often he converts his anger into more energy for himself and indulges into more sports. In running he has won a few prizes. He feels better after that. He practices and participates in sprints race (100 meter – 400 meter race) Kushti and Kabbaddi at times. Has won 4-5 inter-school and college competitions and one state-level competition and wishes to participate in big interstate competitions.

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Exhibit 3: Follow up

Follow up criteria-

1. Excessive sleep
2. Anger/irritability
3. Anxiety
4. Seizure episodes
5. Body heaviness

Date	1	2	3	4	5	Comments	Prescription
20/02/2017						Case done	A
24/7/2017	>2	>3	+	-	>	Was much better, his anger reduced and patient found it to be abnormal, that's why didn't come for follow up	B (oriented about the homoeopathic action and its deeper action- he and mother got convinced)
7/8/17- 18/9/17	>3	Once, but no reaction, no constant thinking.	>	-	-	Feels much better, as no excessive sleep and body ache.	C
30/10/17- 27/11/2017	-	Once after brother teased him at home.	>	-	-	Mother is very happy, as now he can control his anger and anxiety. More importantly no any seizures. No any side effect of allopathic drug withdrawal.	D
19/2/18 – 9/4/18	-	Very rare	>2	-	-	Went to village for a month, no complaint. Adv- EEG	E
4/6/18- 23/7/18	-	Occ. But not long lasting	-	-	-	According to mother- gets emotional at times, very helpful, doing good in academics too. Eeg not done, advise to do in next time.	F
11/8/18- 27/8/18	-	-	-	-	-	EEG s/o- no epileptiform activity.	G

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4/9/18- 5/12/18	-	-	-	-	-	-	H
5/12/18- 21/02/19	-	-	-	-	-	- One episode of cold > with Puls 200	I
21/02/19- 23/05/19	-	-	-	-	-	Participated in state competition and won gold, got opportunity to participate at National level (Call from Delhi)	J
23/05/19- 19/11/19	-	-	-	-	-	No further episodes, all consultation telephonic as he was practicing in Delhi.	K
Since covid	Shifted to Konkan (Native Place), Completed B.Com and into running and wrestling at national levels. Won silver medals and is currently preparing for job in police.						Homoeopathic medicine was continued till May 2020.