

**OBJECTIVE**

1. **TO LEARN** THE APHORISM OF 1 AND 3 IN SERO - NEGATIVE SPONDYLOARTHROPATHY.
2. **TO UNDERSTAND** THE ROLE OF DISPOSITION IN MAKING AND BREAKING OF A PERSON IN HEALTH AND DISEASE.
3. **TO UNDERSTAND** THE STRUGGLE OF A SENSITIVE INDIVIDUAL WHILE PLAYING DIFFERENT ROLES WITHIN THE FAMILY.
4. **TO UNDERSTAND** THE IMPORTANCE OF PLANNING AND PROGRAMMING IN A FRESHLY DETECTED AUTOIMMUNE INFLAMMATORY DISEASE.

**DIRECTIVE**

1. GIVE YOUR UNDERSTANDING OF THE CLINICO-PATHOLOGICAL CORRELATION OF THE PRESENT CLINICAL CONDITION (*S-F-F-T = STRUCTURE – FORM – FUNCTION - TIME*)
2. GIVE YOUR UNDERSTANDING OF THE PATIENT AS A PERSON, CONSIDERING THE VARIOUS ROLES SHE PLAYS WITHIN THE FAMILY.
3. GIVE YOUR FINAL REMEDY WITH DIFFERENTIATION OF CLOSELY RELATED MEDICINES, ALONG WITH THE APPROACH USED TO ARRIVE AT THE SIMILIMUM.
4. PREPARE THE **TPD and TPR (Therapeutic Problem Definition and Therapeutic Problem Resolution)**
5. GO THROUGH THE FOLLOW-UP AND PROVIDE YOUR ACTION WITH JUSTIFICATION.

Send your working to Dr Nilesh Karia – [hevtik@gmail.com](mailto:hevtik@gmail.com)

**PRELIMINARY INFORMATION:**

Doc – 7-3-23	Name – Mr –N	Age - 30 years	Sex- Male	Marital status - Married
Caste – Lohana	Religion - Hindu	Vegetarian	Vaishnav	<b>Wife – B E</b>
<b>EDUCATION –B TECH MECH ENGINEERING – RJA KOT</b>		M TECH MECH ENGINEERING MSU - BARODA		<b>COMPUTER – 29</b> H/O – Job; now house work
<b>Occupation – faculty in engineering college and tuition classes</b>		<b>Father – 56</b> accountant	<b>Mother – 52</b> House wife	<b>Sister – 23 Studying</b> MBA
<b>Son – 8 month old</b>		<b>Address – Junagadh</b>		

## CHIEF COMPLAINTS:

LOCATION	SENSATION AND PATHOLOGY	MODALITY	ACCOMPANIMENT
M S S 8 years back Rt thigh ++ medial side d – 1 week	sudden onset of pain 3 stiffness rom is restricted ++	< climbing stair No complain while getting down < pressure on joint lifting weight >with pain killers	
5 years back left L S region D-1wk	pain 3 stiffness numbness lower limb	>pain killers	
	pain ++ stiffness++	<3 anxiety wife health < pressure	
1- years back d – 1 week Since last 1 month Bilateral	Sadden sever spasmodic pain3 Stiffness 3 Difficulty while walking Gait - leaning forward with bent back  I have to keep myself moving otherwise stiffness sets in  Shown to nuero physician  <b>MRI SPINE</b> – subtle articular surface irregularity with sub articular fatty narrow changes. Patchy area of sclerosis involving both S I joints. May indicate chronic arthropathy.  Advise rheumatologist opinion	< anxiety about son health <first movement >walking ++ <3 morning >with pain killer < cold draft of air under fan >warm fomentation Pain killers 1-0-1 Antacid 1-0-0 Calcium tables	Pt came in clinic in leaning posture with stick in hand
GIT Since college life Abdomen  Retrosternal region	Weak digestion – fullness 2 Pain Nausea □ vomit2  Sometime acidity + burning	< outside food 2 < spicy seasoned food 2 < pain killers after < over eating 2	

### PHO

1. 3 years back - Dengue fever – was Hospitalized for 3 days

### FHO

1. Father – polio
2. sister – pertussis in childhood ,low body weight – lot of investigations done but no exact cause is detected
3. paternal uncle – died M I
4. hypertension in paternal side to many relatives

### PHYSICAL GENERALS

- **PERSPIRATION** – PROFUSE WHILE PLAYING, FACE 2, SCALP 2 –BACK 3.  
STAIN – YELLOW (DELIBLE) IN AXILLA

- **ODOR** - - OFFENSIVE 2, FOOT SWEAT OFFENSIVE 2
- **SKIN** - H/O BOILS RECURRENT IN CHILDHOOD
- **HUNGER** - <2 - I NEED TO EAT SOMETHING
- **CRAVINGS** – SWEET 2; TASTY FOOD (*I HAVE TO CONTROL MYSELF IF THERE IS TASTY FOOD*) SPICY +; SOUR 2
- **FOOD AGG-** - < OVER EATING
- **STOOL** - - 2-3 TIME PER DAY – HABITUALLY < EATING MEAL – CONSISTENCY NORMAL
- **THERMAL STATE** –  
**BATH** – LUKE WARM BATH ROUND THE YEAR, PREFER HOT BATH IN WINTER  
**COVER** – MOSTLY THIN COVER ROUND THE YEAR – BUT IN WINTER THICK BLANKET – WOOLENS ++ IN WINTER  
**FAN** - SLOW TO MEDIUM; < DRAFT OF AIR 2  
**CHILLY** 2
- **THIRST** – THIRST LESS

**O/E** –

<b>VITALS</b>	P- 72 , BP 120-80, WT- 63.1, 02 – 99
<b>SYSTEMIC</b>	CVS – NAD ,RS – NAD , ENT OK BACK – ROM REDUCED –LYING IN SUPINE POSITION WAS PAINFUL FOR HIM DURING EXAMINATION TENDERNESS 2 AT LUMBO SACRAL REGION SLE AND SLR- 50%
<b>INVESTIGATION</b>	HB – 15-3, , TC – 5380, PC – 491000, DC – 62-29-2-7-0, CRP -10, RA - <10, ESR – 24.50, CCP < 0.40, HLA B 27 - DETECTED POSITIVE ON RT-PCR
<b>MRI SPINE</b>	REPORT WRITTEN IN CHIEF COMPLAIN

**LIFE SPACE DATA:**

The patient came to the clinic with a leaning gait and was using a hockey stick for support while walking. He appeared to be in discomfort due to stiffness in his back. Jokingly, he said, “I look older than my father and even older than you.” It took him some time to settle into a sitting position.

The patient comes from a middle-class family from a small town near Jamnagar. His father was an accountant and rendered his services to many well-known businessmen in the town. The patient described his father as very punctual, perfectionist, and ethical in his work, and someone who had earned a good reputation because of his sincerity and dedication. The patient said that he is very much attached to and influenced by his father’s attitude towards work, as his father considered work to be a form of worship.

The patient’s father is a polio patient, and his mother has a deformity in her legs due to an accident she met with during childhood. According to the patient, both of his parents are very loving and caring.

The patient is the elder child in the family and has one younger sister who is currently pursuing an MBA in Rajkot. He described her as very good-natured. The patient mentioned that their home was like a meeting point for everyone. Many of their relatives lived in the same town, so Sunday evenings were usually spent together as family gatherings.

The patient said that he loves company and does not like to be alone. He liked all his classmates during his school days and described himself as a very emotional person. He shared an incident from when he was in the 12th standard (A group) and preparing for his examinations. During that time, one of his uncles passed away. The patient was emotionally disturbed and could not attend the last rites because of his examinations. He mentioned that the incident affected him deeply and that he eventually scored less than he had expected in his exams.

The patient studied up to SSC in the same town and then went to Rajkot for his HSC. He was a studious and sincere student and used to become anxious before examinations in order to score good marks. He chose the A group and later secured admission to B.Tech in Mechanical Engineering in Rajkot.

During his college years, he developed a desire to pursue M.Tech and wanted to become a faculty member in a reputed engineering college. He successfully cleared the GATE examination and secured admission to M.S. University, Baroda.

The patient said that it was his dream to...

He joined as a faculty member in a B.Tech college in the Mechanical Engineering Department in Junagadh. The patient said that he enjoys working in a team and usually forms a group of faculty members to work collaboratively. He mentioned that he had a good rapport with his colleagues. Together, they used to plan the curriculum for the year and make sincere efforts to execute it effectively.

The patient described himself as very punctual and said that he always tries to perform his work with as much perfection as possible. Soon, he became popular in the college. He was appointed as a member of the admission committee and was also given the responsibility of heading sports and cultural activities.

He shared, in detail, various cultural programs that were organized in the college, including events conducted at the GTU level. He laughingly remarked that when you are surrounded by college students, you also start feeling younger and more energetic.

The patient also mentioned that he has a stand-up comedian-like personality and enjoys delivering lectures in the classroom in a similar engaging style. Recently, he started a tuition class for higher secondary students in the city in collaboration with some of his friends. He said that he enjoys working and prefers to remain busy with his professional activities.

He married a girl who is also a faculty member in the same college, in the Computer Department. Both of them were in contact as staff members, and when a matrimonial proposal was suggested, the matter was settled quickly.

They were both staying in Junagadh as they were working in the same college. The patient's parents are still staying in their native place.

The patient described his wife as very good-natured, loving, caring, and somewhat anxious by nature. He said, "I am her security. If I am away from home, she becomes very anxious, and once I return home, she feels immensely relieved."

His in-laws stay nearby, so they receive considerable help from them in taking care of their young child on a regular basis.

The patient shared that one of the major concerns in his life occurred during the COVID era, when his wife was pregnant and tested positive for COVID. The patient became extremely



Date	1	2	3	4	5	6	7	Action
27-5-23	Much better	Ok	No	Ulcer + < last Rx			Mouth redness ulcer + SLE – 80 % 63.5	
7-6-23	Ok	Ok	No	No c/o			63.5 120-80 SLE-90%	
27-7-23	++ for 30 min in am	<bike riding 100 km	For 2-3	++			63.4 120-80 Rom back reduced	
Pt went to native by riding bike 100 km, eaten out side food								
30-8-23	Ok	No	No	< spicy oily food			65 kgs	
28-10-23	+ in am	+	one				66 kgs Back rom reduce	
Pt is playing Navratri till late night, eating regularly outside food								
<p><b>During – years 2024 – 2025</b> □ pt met me in many social occasion- he don't have any complain. Pt came for the treatment of his wife and sister and other relatives as well. He reported that he don't have any complain and doing well.</p> <p>Patient was anxious during the marriage of his sister. He came to clinic to discuss some issues about matrimonial proposals of his sister but he appeared very confident during that time.</p>								
<p><b>Date - 15-1-26</b> Pain in lower back since last 10-15 days a/f sprain – while lifting weight, morning stiffens 10-20 min X ray – L 4-5 and L5 – S1 disc space reduced – mineralization is ok. CBC CRP WNL Wt. – 78.9 120-80 0/e tend at lumbosacral region + SLE- can't able stretch at extreme flexion of limb</p>								
<p><b>Date - 22-1-26</b></p> <ul style="list-style-type: none"> <li>- On next day of the dose of x remedy – he don't have any complain – he had started riding bike on next day.</li> <li>- Since yesterday again there is pain 3 – because he had lifted the filled gas cylinder.</li> <li>- Wt. – 78.2 120-80 Ten at limbo sacral region</li> </ul>								
<p><b>Date – 17-2-26</b></p> <ul style="list-style-type: none"> <li>- Pt came after 3 weeks almost – he was busy in sports week and cultural activity of the university. He played cricket, he was captain of the team and won the trophy</li> <li>- Pt said If I regular paly or do exercise I don't have any complain in back</li> <li>- 0/e wt. 78 120-80 No tend in back</li> </ul>								
<b>Date – 3-3-26- No complain- report SOS</b>								



