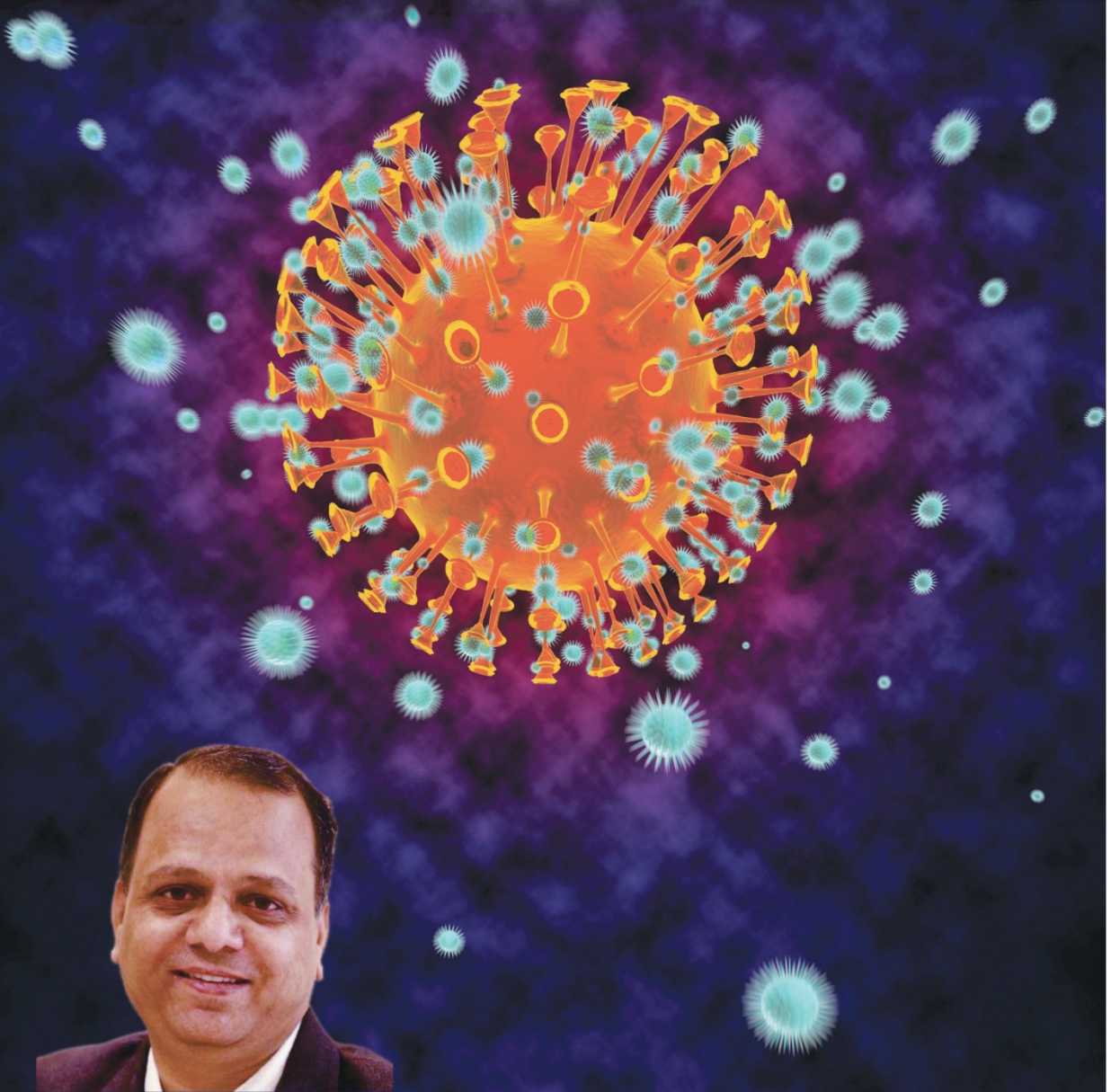


# SCOPE OF HOMOEOPATHY IN CORONA VIRUS INFECTION

*A Scientific Empiricism*



*Dr. Dilip Soni*

[www.limitlesshomoeopathy.com](http://www.limitlesshomoeopathy.com)

**SCOPE OF HOMOEOPATHY**  
**IN**  
**CORONA INFECTION**

**2<sup>nd</sup> Edition**

**Dr. DilipSoni**

Dedicated

To

Master Dr C.F. Samuel Hahnemann,

The founder of Homoeopathy,

Who showed the path of prevention and healing...

&

The Suffering Humanity

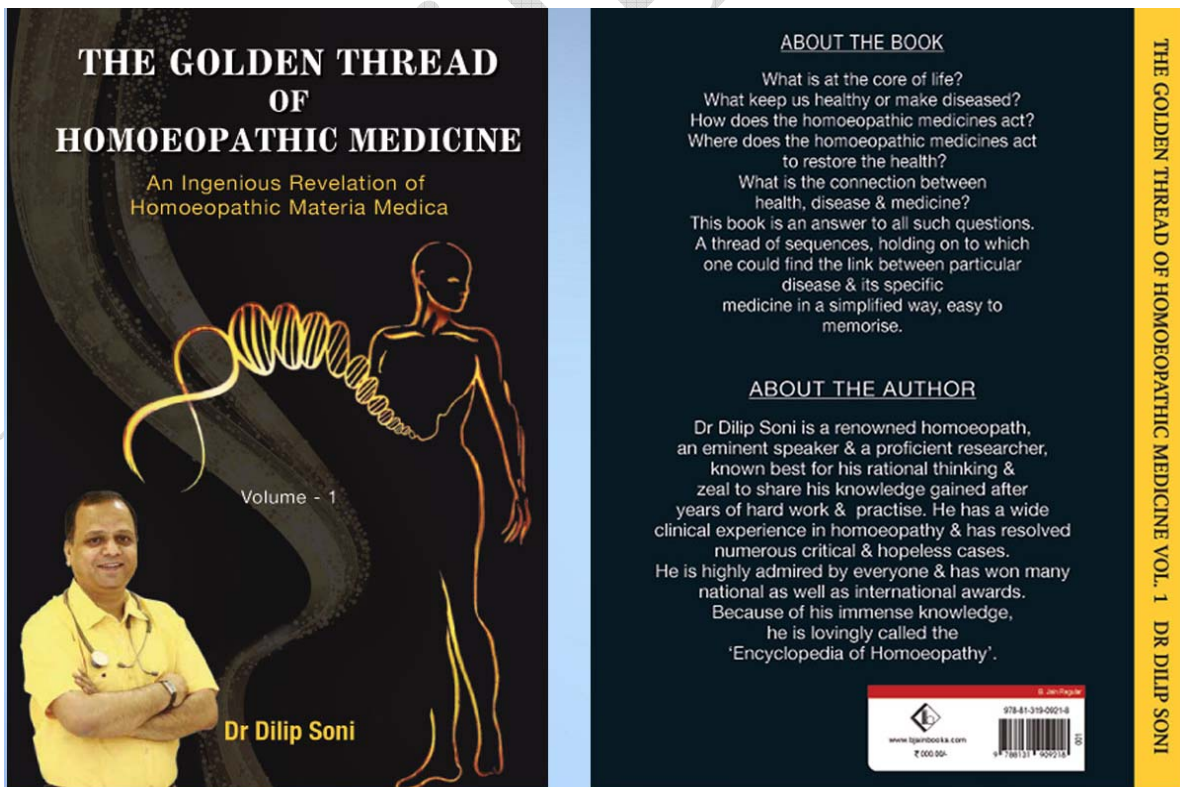
Of

Planet Earth

## About the Author....

Dr. DilipSoni, a renowned Homoeopathic Physician practicing at Jaipur, India. He completed his BHMS from Rajasthan University in the year 2000 with distinction. He is also a distinction holder at SCPH, Mumbai. He has several years of experience in handling a wide variety of cases including congenital disorders, complicated cases and emergency medicine. He has been instrumental in resolving numerous critical and hopeless cases. He is a voracious reader, a great teacher, an eminent speaker and a proficient researcher known best for his rational thinking and zeal to share his vast knowledge. He is highly admired by everyone and has a humorous way of communicating and teaching. Among homoeopathic doctors he is known as '**THE ENCYCLOPEDIA OF HOMOEOPATHY**'. Dr. DilipSoni is an excellent academician and has numerous publications in various journals. He has also been a speaker at multiple national and international seminars. Besides this, he takes a keen interest in outreach camps for the treatment of Congenital and Hereditary Disorders treating those cases which are generally considered incurable.

He is also the author of, '**THE GOLDEN THREAD OF HOMOEOPATHIC MEDICINE**', an unparallel book, in which he has explained how homoeopathic medicine acts on body and the ways by which a reader can learn whole medicine scientifically and logically.



# ACKNOWLEDGEMENT

*“Achieving a milestone for any person alone is extremely difficult.  
However, there are motivators which come across the curvaceous path like  
twinkling stars in the sky and make out task more easier.....  
It becomes my humble and foremost duty to acknowledge all of them”*

-- Anonymous

At the very outset, I am thankful to the *Almighty* and *Universe*, without whose Grace nothing is possible.

Writing a book is could be quite challenging on a topic which still on verge of exploration. The time when almost whole of world is suffering and there is *little hope* among experts as how to remove the *sufferings of humanity*. This wouldn't have been possible without the support of my colleagues, friends, family and the blessings of my parents, who have been standing by my side in all the ups and downs of my life.

I will always remain thankful to my first Guru, Dr P.L. SHARMA, who held my hand and taught me to walk in the initial years of my practice. I am thankful to Dr Prafull Vijayakar, who lit the light of sharing and helped me to find my way. I acknowledge the contributions of my all teachers and seniors for igniting the quest of knowledge in me.

The book version would have remained incomplete if I do not mention the contribution of my friend Dr Jaswant Singh Jain, an enthusiastic and always supporting personality, who discovered my hunger for knowledge and sharing with others. He has encouraged and inspired me to write a book on such a topic. He is the Editor and Proof reader of this book. Our journey and friendship, with the Grace of God, shall continue forever.

I am grateful to Dr Rashmi Arora and Dr Yogita Singh who have helped me in editing the book. I would also express my gratitude to Dr Vinod Mev for his whole-hearted efforts to give final shape to this book in a very short span of time. Thanks to Dr Suresh Jatolia, for being a continuous inspiration to develop the *Materia Medica* of Corona virus infections.



I find this unique opportunity to thank all the friends and supporters who have shown faith and inspired me to write this book. Their contribution in shaping this book is unparalleled. Special thanks to Dr Rajiv Kotgire, Dr Renu Kulshreshtha and Dr Abha Gupta, the founders of the following teams 'Mind of Pathology, 'Learn Limitless Homoeopathy' and 'Mission Sunrise' for their untiring efforts and constant questioning which encouraged me to explore more. I acknowledge the contribution of Dr Umesh Fatehpuria, Dr Satyendra Singh, Dr Deepak Verma, Dr Shubham Dadhich, Dr Chandra Mohan, Dr Ram Kripal Lakhwat, and Dr Pranjli Agarwal. I am also thankful to Dr Sanjeev Bhama for making the beautiful cover page of this book.

I owe my honest gratitude to all my patients who, in these 20 years of my practice, have helped me directly and indirectly in making or developing this book and the process of gaining experience continues....

At the most, I pay my tribute to Dr C.F.S. HAHNEMANN for sharing his knowledge and experiences to the world for the benefit of the suffering mankind.

I will always remain indebted to my beloved wife Usha, for being so kind even in the times, when I could not manage to give her due attention. She has always been supportive and has encouraged me to do better & better. From reading early drafts to giving me advice on the cover, she owes an equal contribution to this book as mine.

My wonderful kids, Mukul and Palak, thank you for your love. I feel blessed to have you in my life.

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## **How to read.....ABOUT THE BOOK...**

This book is about the Acute Respiratory Distress Syndrome (ARDS) which has affected humanity from time to time, the different parts of the world.

Although we have not treated the cases of present pandemic disease but our understanding is based on the Golden words of Master Hahnemann in Organon of Medicine, the cases available on media and through the experience of treating doctors.

Homoeopathy treats the MAN IN DISEASE not the DISEASE IN MAN. Every time a patient comes to a Homoeopathic doctor for the treatment, he should always be treated on the Homoeopathic Principles that is, treat the sick on the basis of totality, not on the disease diagnosis.

In the present scenario the ARDS not only affects the human respiratory system but also other organs and systems. We suggest Homoeopathy for the above. In the last several pandemics (scarlet fever, Spanish flu of 1918, cholera) it has proved its efficacy.

It is high time for the Homoeopaths to come forward and help the sufferers. The homeopathic physicians, as of now they are not allowed by the Government of India to treat the patients of present ARDS cases, if get a chance in future, we should be ready for that. This is like a preparation before going into a battle.

We are providing certain guidelines for case taking in such cases, how to analyze and to treat them on the basis of Homoeopathic Principles.

This book is not only for the present crisis but it can also help in the other such conditions.

As the reader can be a medical personnel or a lay man, I warn the non-medical reader, after reading this book, not to do self-medication without consulting a Homoeopathic physician.

This book is divided in two parts. In the first part I have given the prevention chart and in second part the suggested treatment. Prevention chart is divided into

hot, chilly, thirsty and thirst less with their indicated medicines and their behavioral differences.

The treatment part is divided into three sections; stage one, two and three based on the severity of complaints and involvement of other organs or systems along with their best indicated medicines with their indications. *Stage 1 & 2 medicines are also subdivided as chilly, hot, thirsty & thirst less, because this helps in deciding the appropriate medicine; in stage 3 thermals & thirst becomes insignificant unless and otherwise very prominent, in this different parameters are to be considers as mentioned this book.*

I strongly warn the reader, not to take or give any medicine on their own. One must always seek the guidance of a specialist in Homoeopathy.

This book is just a guideline not a guarantee of any cure in anyway.

I request all the readers to follow the guidelines issued by their respective Governments and the World Health Organization.

Much emphasis has been put on the editing of this book, if there is any correction, please feel free to suggest.

Thank you.

Dr DILIP SONI

*A Student of  
"Homoeopathy in particular & Life in general"*



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## **SCOPE OF HOMOEOPATHY IN CORONA INFECTION**

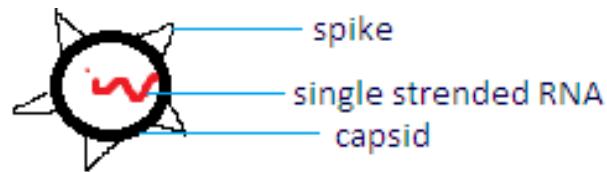
It is fact that whole world is fighting with corona and it just wants to get rid of this pandemic disease. In my view, homoeopathy is best for this pandemic. Why, because it treats the man in disease not the disease in man, means name of disease or a syndrome doesn't matter much. A person who is sufferer or any other patient suffers in little differently and requires different remedy; so it is the sick person who is important than the name of disease. Therefore it might be the best medical tool to win the battle but it is neglected due to some reasons.

I want to show the utility of Homoeopathy in corona through this book. I have gone through various web sites and media to get details of corona, to search out probable useful homoeopathic medicines and to get rid from corona. It is just an educative book for Homoeopathic doctors of the world, to enhance their knowledge of disease and medicines, which can annihilate it. According to me, physician must have knowledge of virus, route of infection, homoeopathic prevention and probable treatment; follow up of recovery; and also how homoeopathic medicine acts on different parts.

Therefore, I feel this book may be a boon for whole homoeopathic fraternity.

### ***What is corona virus?***

Corona is a family of many viruses. COVID-19 also belongs to this family of corona viruses. In the 1960s, scientists discovered the human coronavirus for the first time, then in 2002, it was known as SARS, then after ten years in 2012 with the name MERS and in 2019 with the name of COVID-19. It is a single-stranded RNA virus with a protein coat known as a capsid. There are spicules of glycoprotein on the surface known as spikes of the corona (fig. 1). The difference between MERS and COVID-19 is only one amino-acid in RNA structure. COVID-19 has one amino acid more than MERS. Corona viruses are fastidious, because they grow in particular or specific cells only. Scientists assume that *Corona virus* first developed in Bats, then spread to humans through a carrier means SARS- it spread from Bat to civet to human; MERS-Bat to Camel then to humans and COVID-19-Bat to pangolin then to human.



**Fig. 1**

### **TRANSMISSION OF THE CORONA VIRUS TO HOST:**

The transmission of the infection is through droplets that come out while sneezing, coughing or spitting. The droplets remain in the air for around 1 to 8 hours because of the different molecular weights. When the host comes in contact with carrier and surfaces where the droplets have settled, then the host may get infected, if they reach their respiratory tract by any means. It can also be transmitted via fecal-oral route as well.

That is why WHO gave guidelines for social distancing, wearing masks, sanitization, quarantine, etc.

### **PATHOPHYSIOLOGY:**

The favorite place for corona virus is the respiratory tract of human beings, and most favorable site is the alveoli of lungs. Alveoli are of two types – pneumocyte type -1 (for gaseous exchange), and pneumocyte type-2 (producing surfactant to maintain the size of alveoli).

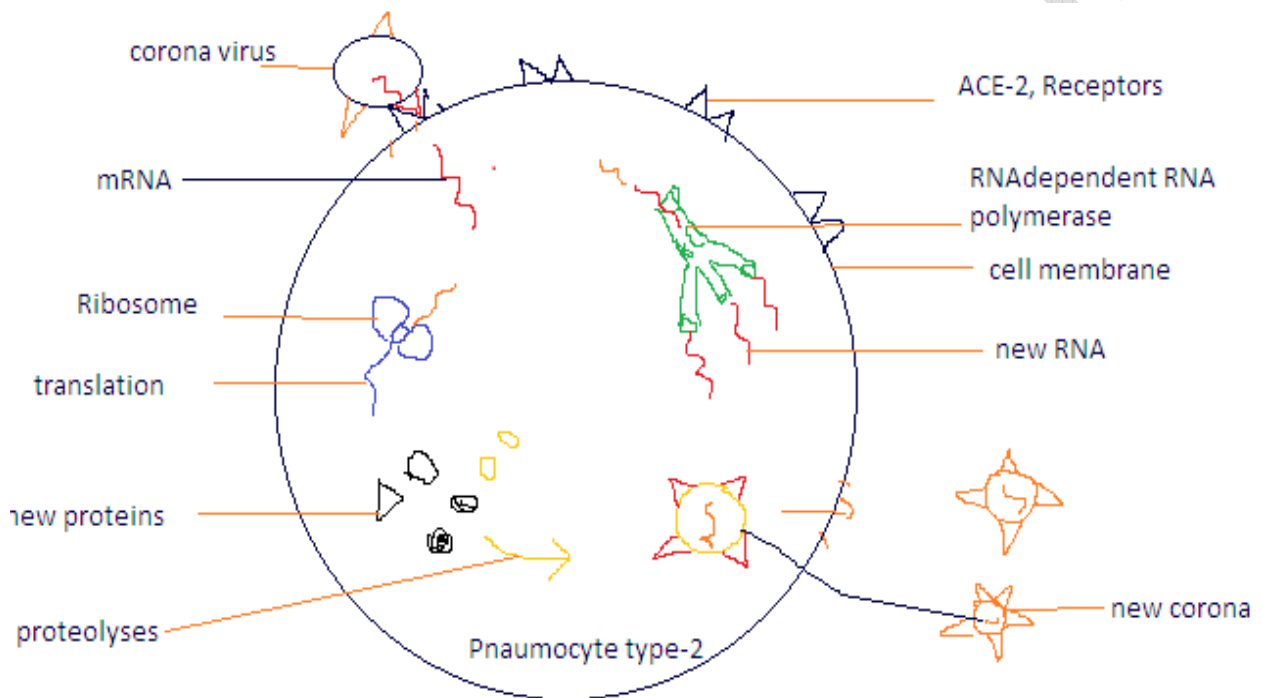
COVID-19 likes to live in pneumocyte type-2, because it has ACE-2 receptors. When corona infects the host, its (corona's) spike of glycoprotein fits in ACE-2 receptors just like ligands, while inside the cell; some lysosomal activity starts due to stimulation of the inner side of the cell membrane. The RNA of the single-stranded virus ultimately enters the cell just like phagocytosis.

Now the RNA of virus acts as mRNA in the cytoplasm. Ribosome's do translation and form different type of proteins. These poly-proteins are collected in the cytoplasm and form the capsid and spikes of the virus (fig. 2).

In another mechanism, viral RNA reaches to an enzyme known as RNA dependent RNA polymerase. It forms many RNAs from the single RNA in the cytoplasm.

These RNAs make coating from the fragmented poly-protein by translation in the ribosome, resulting in forming a new corona virus inside the cytoplasm, which comes out from the pneumocyte type-2 by breaking its cell membrane. These viruses can infect the other pneumocytes type-2 of alveoli, and from here the disease progresses rapidly.

So, now we know that the first effect is on surfactant then it affects the other pneumocyte indirectly.



**Fig.2**

**SECOND PHASE:**

When these cells burst, they release some inflammatory mediators that invite macrophages which releases - IL-1 (interleukin), IL-6, IL-7, TNF-Alfa, IP-10, and more. These mediators enter from alveolar space into the blood and act as vasodilators. Vasodilation causes the pooling of blood. In contrast, vasodilation of alveolar capillaries results in increased permeability, so plasma may enter into



interstitial spaces and accumulate, which leads to compression of alveoli due to which some of the fluid is able to enter into the alveoli causing alveolar edema, which drowns out the surfactant (that decreases the surface tension of the alveoli in order to maintain its shape). Due to increase surface tension, the alveoli collapse or shrink. The accumulation of the fluid between the capillaries and the alveoli interrupts the gaseous exchange at the alveolar membrane. It causes **hypoxia**, and the patient faces difficulty in normal breathing. At the same time, during an inflammatory reaction, many neutrophils enter into alveolar space, which releases reactive oxygen species and proteases. It destroys some of the viruses along with pneumocyte type-1 alveolar cells, due to which gas exchange drastically reduces and further increase in **hypoxia**. All the slough of the destroyed cells collects in the alveolar cavity along with some proteins. This causes **consolidation**, which also alters the gaseous exchange. There is little expectoration and its color may vary as per secondary infection, which helps in diagnosis and selection of proper medicine to a homoeopathic doctor.

Simultaneously, the inflammatory mediators IL-1 & IL-6 reach to the hypothalamus of CNS and stimulate it to secrete prostaglandin (PG-2) which reestablishes the thermostat and increase the body temperature which is known as **fever**.

[The low partial pressure of oxygen → chemoreceptor → CNS stimulation → increase heart rate (tachycardia) + increase respiratory rate (change in the pattern of breathing)]

Prolonged Inflammation causes **Septicemia** → CVS – vasodilation and increase capillary permeability, fluid accumulates in extracellular space → decreased pressure on vessels (causing low BP or **hypotension**) → reduce cardiac output which may lead to multi organ failure.

**Kidney** – increase in creatinine & BUN;

**Liver** - releases inflammatory enzymes like SGOT/ SGPT / BILIRUBIN/ CRP /FIBRINOGEN/ IL-6, that lead to fibrosis of lungs.

## **HOMOEOPATHIC APPROACH:**

These types of pandemic can be prevented and treated by homoeopathy in a scientific manner. So before this, the reader should know about the ACE-2 receptors and how they form. According to aphorism 73 of Organon of Medicine, Dr. Hahnemann says, that the causative factor of these sporadic or pandemic disease is telluric and meteoric change and noxious or injurious agents. These changes can open the promoter box (starting point of transcription) of DNA.

Then DNA starts the process of transcription to make mRNA in the nucleus which enters into the cytoplasm after maturation. Ribosome of cytoplasm translates it and synthesizes the required protein ACE-2, which then attaches to the outer side of the cell membrane, and then it is known as the ACE-2 receptor. The synthesis of such protein is variable depending on the environmental changes.

These receptors resemble the susceptibility, or we can say sensitivity in simple words. The sensitivity of the individual for particular infection depends on the number of the receptors on the cell membrane, meaning that individuals having more ACE-2 receptors are more vulnerable to Corona virus infection.

## **HOW HOMOEOPATHY HELPS:**

Most of the homoeopathic medicines balance the sensitivity; meaning that, when sensitivity is more, homoeopathy reduces it; and if the patient is less sensitive then homoeopathic medicines balances the sensitivity. When receptors are less in number, then chances of infection are very less. So in prevention, homoeopathic medicine may balance the sensitivity that reduces the chances of corona infection. That is why whenever we attempt for preventive measures, we should know the sensitivity level of the patient. Patients having more receptors develop **anticipation or anxiety** and some can even develop delusions and properly selected medicine based on sensitivity certainly benefits the patient.

**CORONA FIGHTER CHART OF HOMOEOPATHY (CFCH) – the preventive chart** (fig. 3) covers around 70% of the sensitivity of the individual, particularly for this disease.

These medicines can be given to the first or second stage patients also.

## **SYMPTOMS OF CORONA INFECTION:**

- The patient is Sneezing like influenza with malaise and fever with loss/alteration of taste or smell.
- Roughness, scrapping or pain in the throat with difficulty in swallowing.
- Cough initially dry; followed by productive cough.
- Respiratory distress and cough with heaviness in the chest, pain in chest in different postures and movements.
- Wheezing, rattling or crackling on auscultation.
- Severe Acute Respiratory Distress Syndrome
- Hypoxia or cyanosis and swelling of the body, high fever and hypotension and hypervolemia with enlargement of liver and spleen.
- At the end septicemia / cardiac / renal failure, or altogether present.

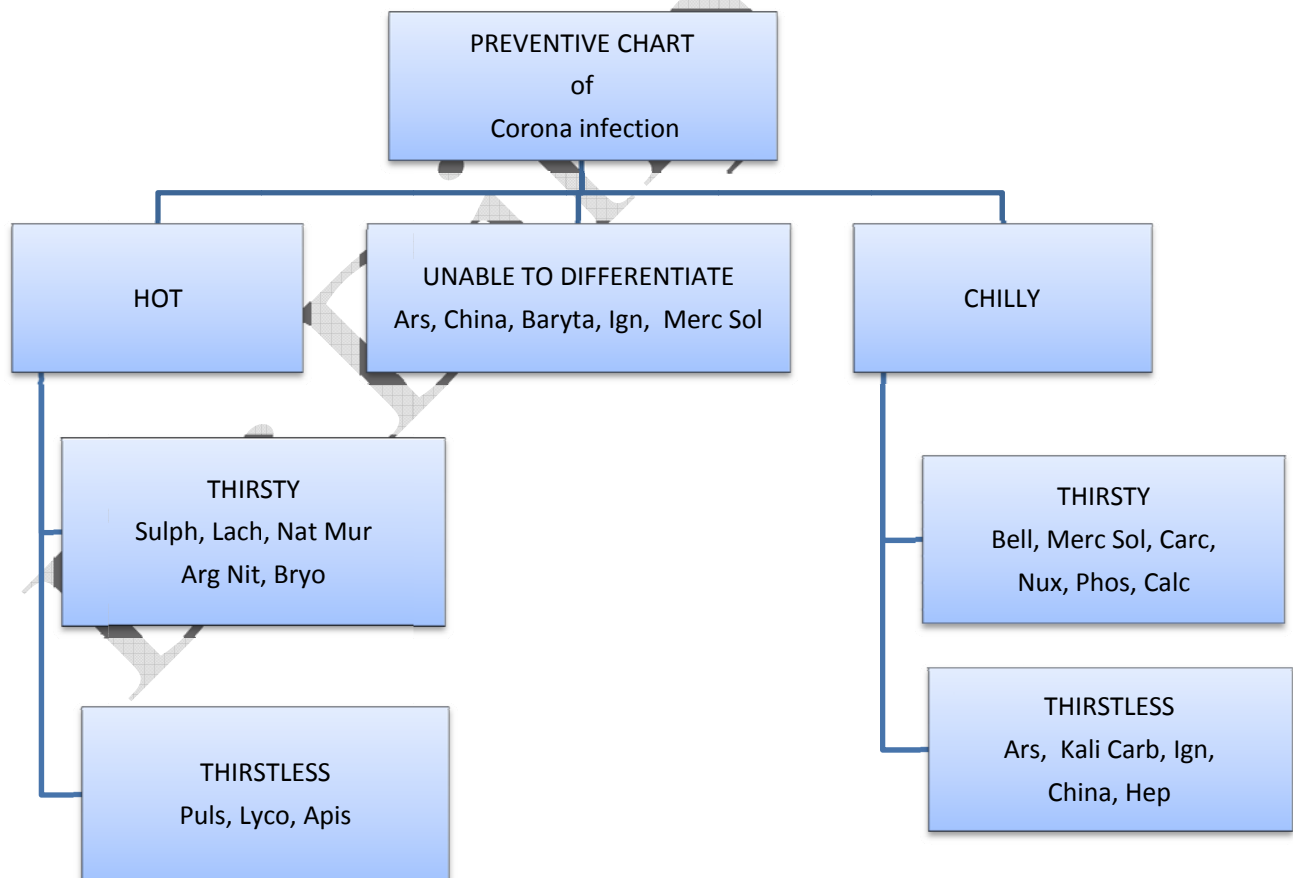
## **LAB INVESTIGATIONS:**

- Decrease in neutrophils and WBC, lymphopenia
- Increased D-dimer, increased ESR
- Increased SGOT, SGPT, SERUM BILIRUBIN
- INCREASED – CRP, FIBRINOGEN, IL-2, AND IL-6
- INCREASED SERUM CREATININE AND BUN
- POSITIVE - RT-PCR, POSITIVE – NUCLEIC ACID AMPLIFICATION TEST (NAAT), procalcitonin – elevated, superadded by bacteria.
- X-RAYCHEST - GROUND GLASS HAZINESS
- CT-SCAN - ground glass, consolidation, crazy paving pattern.
- USG – increasing B-line

## PREVENTIVE CHART:

There are two parts of the homoeopathic approach, one is the prevention of disease, and the other is the probable cure. In the first part, there is a chart of prevention of Corona virus, and other part includes the approach towards an infected case. So for a proper result, we should follow the Organon, aphorism 150 and 262, 291.

We do not advice or promote self-treatment. One should always and always consult a homeopathic expert and follow their government's directions without any ifs and buts. There is a possibility that there may be different medicines for different personalities because of their different behavioral patterns.



## TO ZERO DOWN THE MEDICINE

<b>Apis mel</b> - Does hard work for people like doctors and medical staff
<b>Argentum nitricum</b> - Restless and anxiety about the future. Suffers from hospital phobia. Keeps thinking about what will happen if he would have to go the hospital for treatment.
<b>Arsenic album</b> - Does not wish to quarantine, if he has a slight fever/prodromal
<b>Belladonna</b> - Aversion to visit a doctor, Sleeplessness and restlessness
<b>Bryonia</b> - Likes to be at home but cannot sacrifice his income so he goes to his workplace and creates money even in during such a crisis.
<b>Calcarea carb</b> - Does not go out from the home and is busy in prayer or touch in the doctor
<b>Carcinosin</b> - Obeys the rules laid by the authorities and tries to disinfect everything by washing or sanitizing
<b>Cinchona officinalis</b> - Prodromal symptoms with anxiety but ready for quarantine
<b>Ignatia</b> - They are in panic mode or keep brooding on the situation of the world. Too emotional about others while watching television.
<b>Kali carb</b> - She thinks that she does not have any immunity and her body is hollow and she can easily get infected. This medicine may be used after infection also.
<b>Lachesis</b> - Thinks or talks about that whatever is happening is a chemical war and is being purposefully spread by someone.
<b>Lycopodium</b> - Avoids meeting friends or new people, wants to stay at home with family but sits alone in the room.
<b>Merc sol</b> - Does opposite of any advisory or rules laid by any authority
<b>Natrum mur</b> - Engages in preventive activities like sharing or distributing masks, sanitizers or other preventive things to others but does not pay attention to her family.
<b>Nux vomica</b> - These people use alcohol, ayurvedic or homemade decoctions, multivitamins and other things to save himself from the virus.
<b>Phosphorus</b> - Read the medical or treatment-related books to know about the disease because they are the most affected individual's. Anxious and wants therapy especially something like nature-therapy or yoga.
<b>Pulsatilla</b> - Depressive due to the prohibition of hugging or kissing and maintaining social distance.
<b>Sulphur</b> - Creates strange ideas to for prevention like making underwear mask, tissue paper, cloth mask

## *Scope of homoeopathy in treating positive cases or suspected positive cases*

How homoeopathy can help in these cases –

1. By reducing the ACE-2 receptors.
2. By reducing the activity of RNA dependent RNA polymerase.
3. By lowering the lysosomal activity, so cell membrane could not express phagocytosis.
4. By lowering the ribosomal activity.
5. Increasing healing by the formation of new tissue, so new alveoli can replace the older ones.
6. By expanding the surfactant.

Among these few are confirmed in clinical practice with lab diagnosis. There are certain medicines which have curative power at a particular point. As per aphorism -3 of Organon of medicine, the physician should know that what is therapeutic power of medicine and where it acts, e.g. Bryonia medicine is the best for increasing surfactant (how homoeopathic medicine acts on the body and organs, is described in my other book ,"**The Golden Thread of Homoeopathic Medicine**").

For proper treatment, we divide this disease into three stages –

***The first stage:*** it includes the primary infection in the patient or incubation period. The patient may have primary symptoms like sneezing, irritation in the nose, slight fever, irritation in the throat and loss of taste and smell, means it covers the nose, buccal cavity, throat and larynx.

***The second stage:*** it includes symptoms like coughing, irritation in trachea and bronchioles. The coughs mostly dry, sometimes with slight expectoration. However, most of the time, this stage has fewer symptoms only. The area involved is from the larynx to bronchioles or bronchial trees. Mostly infection creates irritation, as virus stuck in the mucus membrane of respiratory tracts.

***The third stage:*** it involves and damages the alveolus and secondary infection to other organs with septicemia and other emergencies. The significant symptoms are severe respiratory distress syndrome, rattling and wheezing in chest, fibrosis of lungs, pneumonia, emphysema and atelectasis; here most of the time patient needs respiratory supporting apparatus like ventilators.



**Causative factor**- in Aphorism 73, Dr.Hahnemann describes telluric and meteoric changes:

**Telluric changes**– telluric changes denotes about the flow of telluric current on the surface of the Earth which is disturbed by solar wind, solar radiation and effects on the ionosphere of the Earth.

The telluric currents flow from shadow to the sunlight means toward the equator on the side that is facing the sun in the day time, while at night it flows towards the pole.

**Solar wind**– it is a stream of charged particles released from the upper atmosphere of the sun called **CORONA**. This plasma consists of electron, proton and Alfa particles with kinetic energy. This produces high electrical conductivity due to high temperature, and this electric conductivity produces a magnetic field, and this magnetic field is frozen into fluid due to infinite electronic activity. This magnetic field provides spiral pressure on the Earth at 45degree, and creates change in the magnetic field of Earth as well as telluric current. These phenomena happen in breakneck speed, or we use the term meteoric means rapid, sudden or spectacular change in the electromagnetic field of the Earth.

The magnetic field of Earth develops from the telluric currents, because the electrical activity can produce a magnetic field known as geomagnetic field and collectively known as geo electromagnetic field. When this is disturbed by the solar wind, it produces two types of radiation in the upper atmosphere, the ionosphere. These radiations are of two types- one is ionizing radiation which includes radio wave, the microwave, produces slow changes. Second is no ionizing radiation which produces rapid changes as more powerful radiation like UV rays, X-rays, Gamma rays; in other words, these waves are the polarized waves.

The human body, as well as cell, faces the same turmoil because the human body is a unit of the universe. The cell is the unit of the human body. In other words, it means the unit of the Universe is the Cell.

In this combination, the body represents the Earth, while the mind represents the universe.

This turmoil change in mental exercise produces abnormal and unhealthy activity that is known as morbidity, or we can say in other words sensitivity gets altered due to this phenomena and it occurs in mass population, so it is known as epidemic or pandemic.

Here the question is why one needs to know this phenomenon?

Because some homoeopathic medicines can un-polarize these waves, which are polarized before. These medicines maybe minerals like phosphorus, sulphur, kali-phos, and nat-carb or from animal group like- lac delf and Sep. On applying, these medicines can un-polarize the energy and can save the body from their bad effects or in other words, theses medicines can de-channelize the adverse energy or can produce resistance against these changes.

### **TREATMENT:**

Before proceeding further for treatment, we should know how to take the case and case taking is different in different stages.

For case taking our master Dr. Hahnemann describes in aphorism 83 to aphorism 104, and for the epidemic in Aphorism 100, 101, and 102 of Organon of Medicine.

*Now the case taking....*

### **Case taking of stage one:**

After fulfilling the usual case taking details like name, age sex, address, phone no, travel history if any, and then concentrate on the following symptomatology:

1. In the first stage, everyone should ask the usual disposition of the patient –
  - a. Thermals – the patient is hot/ chilly / ambithermal / neither hot nor chilly,
  - b. Thirst – increased/decreased/ and if relation present like usually thirsty but in fever becomes thirst less or thirsty only at night or any specific in reference to the thirst,
  - c. Desires and aversions if any, specific and strong,
  - d. If there is any symptom that is representing generality.

2. Presenting symptoms:
  - a. Nasal discharge either profuse or scanty, Color, acidity,
  - b. Throat pain on swallowing, coughing, continuous hawking
  - c. *Postnasal drooping* must be given importance.
3. Search for psoro-syphilitic symptoms for example:
  - a. Loss of smell or perverted, like the sense of smell of anything is more than usual or a strange smell,
  - b. Loss of taste or perverted or a peculiar taste.
4. There is any strange, rare or peculiar symptom in the patient than it is just like the key to cure, as per Aphorism 153 of Organon of Medicine.
5. Any causative factor either mental or physical, if present, should be considered.
6. Mentals – anticipation or anxiety is most important.

### **Cases taking of stage two:**

The leading case taking tips are -

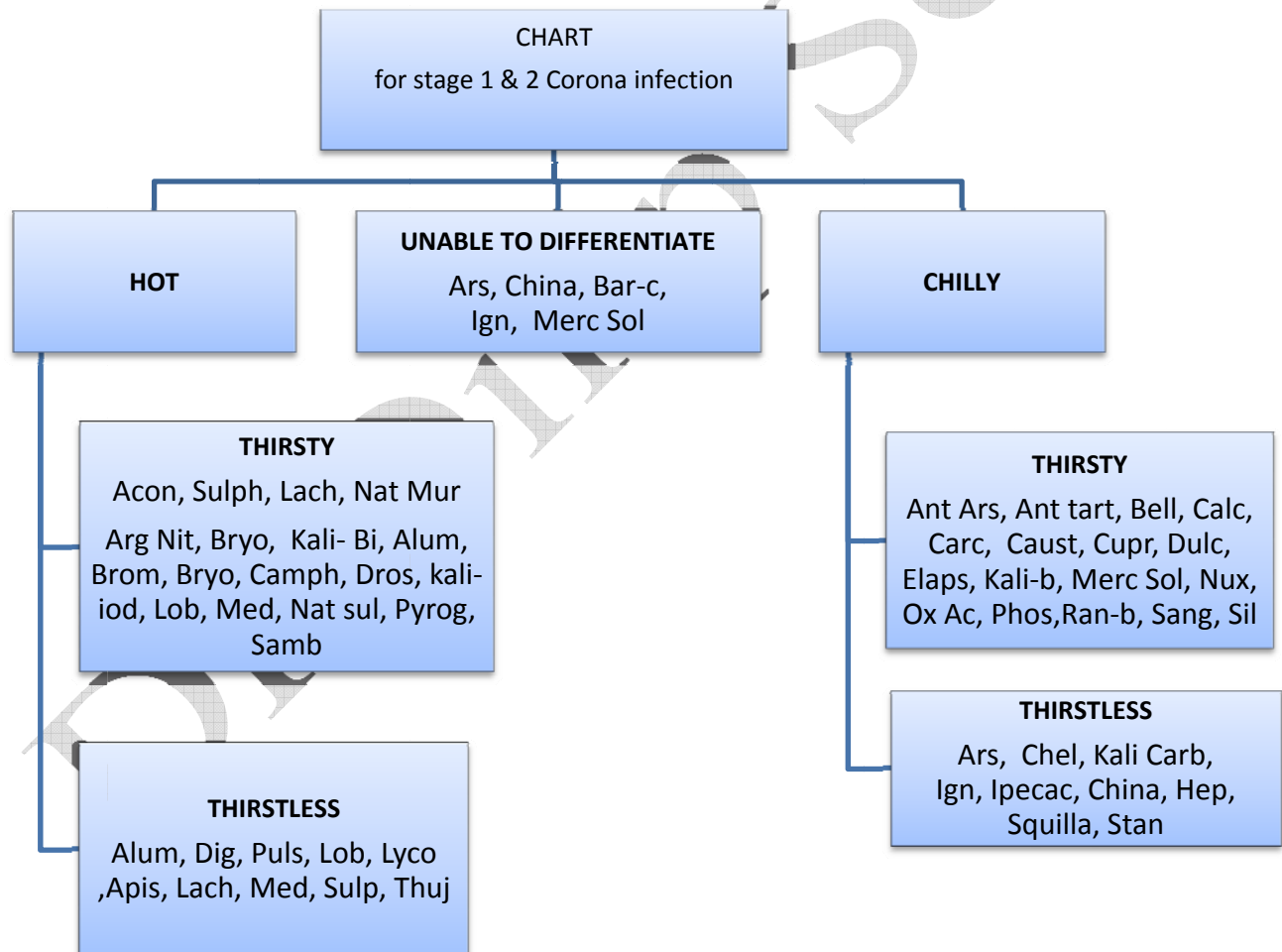
1. The physician should take General disposition as described before.
2. Physician must consider the color and smell of expectoration, consistency, stickiness, dryness if present.
3. Cough and its modalities are significant; here aggravations are more important than amelioration.
4. If there is wheezing or rattling or any type of noisy respiration present, then that should be considered.
5. Headache or fever symptoms are also significant especially type of pain and modalities.
6. Consider the involved part like one side of lung or chest.
7. Any syphilitic symptoms like night aggravation; characteristic symptoms are most important.
8. Fears are more valuable than anxiety if they are prominent, like extreme fear of death or anguish and behavior, like do not want to take medicine or any other curative things.
9. Golden checkpoints or clinical symptoms are most important.

### Case taking of the third stage:

1. Take the important generals if they are more striking or prominent.
2. Here mostly hypoxia presents, their ameliorations are most important then aggravations.
3. Position of the body is most important, in which posture patient wants to be, means ameliorating position or if a patient can stay in a particular position then it is most important, the physician will get it in the materia medica section of this book.
4. Pattern of breathing is most important like gasping / double/ slow /deep /shallow/expiration/inspiration/jerky /violent etc.
5. Status of the lung or part of the lung affected, in x-ray whether there is inflammation or emphysema or atelectasis.
6. Accompanying symptoms or secondaries, like the involvement of liver, kidney or heart, must be considered.
7. Type of expectoration.
8. Everyone should be aware of the sign of septicemia.
9. Sign of cyanosis or paleness may be taken as the direct entry point.
10. Golden checkpoints are the most important in this stage.

## MATERIA MEDICA OF CORONA

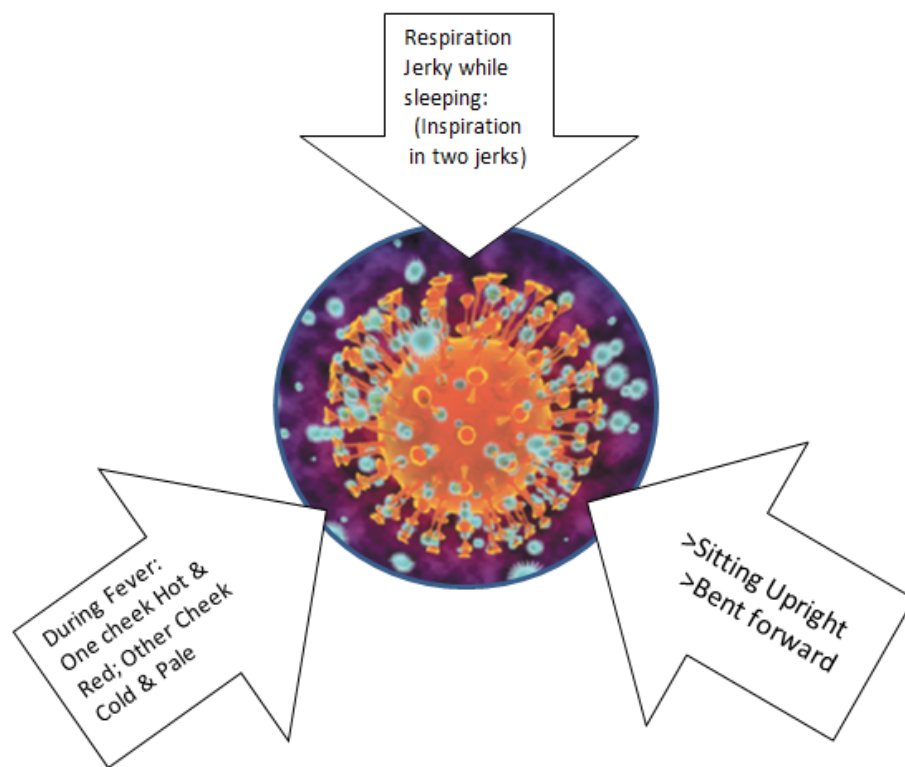
First stage Medicines	Second stage Medicines	Third stage Medicines
Acon, Alum, Ars-alb, Bell, Caust, Dulc, Ign, Kali-bi, Lyco Nat-mur, Nux-v, Ran b, Samb.nig, Sulph, Squil,	Bell, Brom, Bry, Camph, Calc-carb, Caust, Chel, Cupr, Dros, Ign, Kali bi, Kali-c, Kali-iod, Lach, Lob, Lyco, Medo, Nux-v, Nat- mur, Phos, Puls, Ran b, Sang.can, Sep, Stann, Sulph, Tub, Thuja	Antim ars, Antim- tart, Bry, Carb.v, Cupr, Dros, Grind, Ipec, Iod, Lach, Lob, Lyco, Medo, Nat-s, Op, Phos, Psor, Pyrog, Sep, Stann, Sulph, Tub, Verat.Vir



Some important indications of medicines, *they don't replace the proper study at all*. Some of them, reader may not find in literature but they are added after the experience.

## ACONITENAPPELUS

❖ 1<sup>st</sup> stage medicine; hot+ thirsty + suddenness



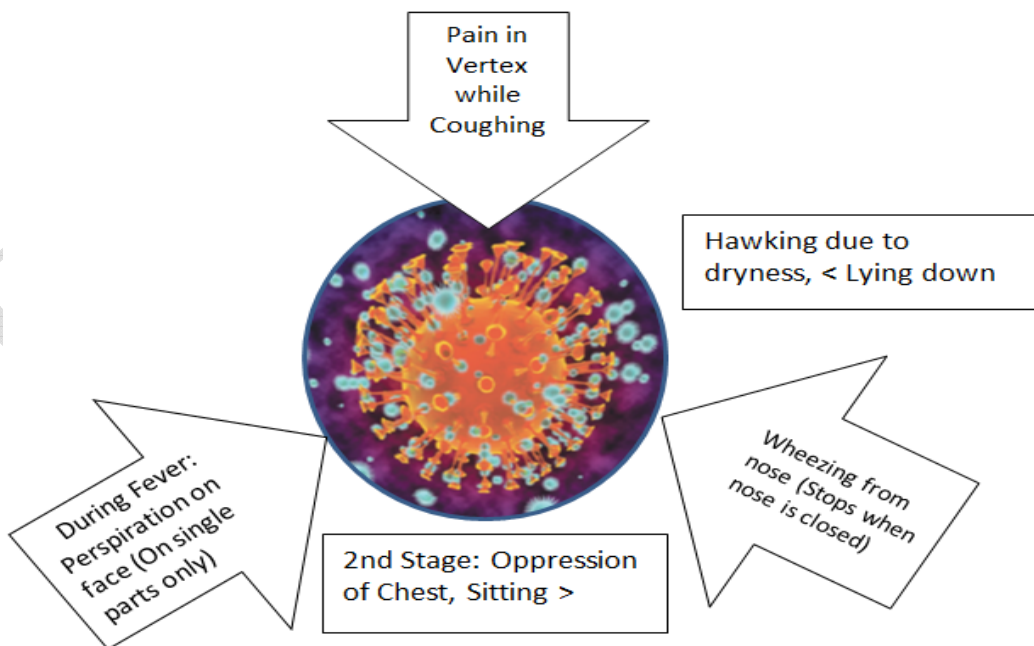
- **Pathology** : laryngitis, trachitis
- **Clinical** : sudden inflammation of lungs
- **Posture: sitting upright and bending forward ameliorates, lying left side agg in first stage of pneumonitis.**
- **Breathing pattern:**
  - Difficult inspiration through nose
  - Inspiration in two jerks during sleep



- **Symptoms:**
  - Sensation of cold air in mouth on tongue
  - Croupy cough on expiration
  - Fish like taste of expectoration
  - Sensitive to pain
- **Mentals:**
  - **GREATFEAR** of death, during hemoptysis and pneumonia
  - Predicts the time of death
- **Others:**
  - Difficult respiration and sighing during fever
  - Headache with vertigo
  - Fever with thirst for cold water
  - Fever with one cheek red and hot other one is pale and cold

## ALUMINA

❖ 1<sup>st</sup> and initial stage of the 2<sup>nd</sup> stage medicine; Inter-neuronal medicine, Chilly



- **Pathology:** Loose mucus membrane of throat/ pharyngitis/bronchitis.
- **Clinical:** Forgetfulness, cough, anosmia, acute senses, allergic reactions (hyper / hypo / no sensitivity), elongated uvula, wheezing
- **Posture:** Cough, sitting agg while oppression of chest amelioration by sitting
- **Breathing pattern:** There is disposition to hawk with normal breathing
- **Symptoms:**
  - Irritation of the nose, palate and larynx
  - Cough reflex with enlarged uvula, agg from lying straight.
  - While coughing there is pain on the vertex
  - Cough after eating chilies, sour food, salt and smoke or may be use of sanitizer etc. agg.
  - ACUTE RESPIRATORY WHEEZING, BECAUSE OF DRYNESS with scraping sensation, from throat not from lungs (if on closing the nostrils the sound disappears then it confirms the sound is from the nose)
- **Mentals:** Restlessness, forgetfulness
- **Others:** Fever in a single part, perspiration only on the face during fever

## ANTIMONIUM ARSENICUM

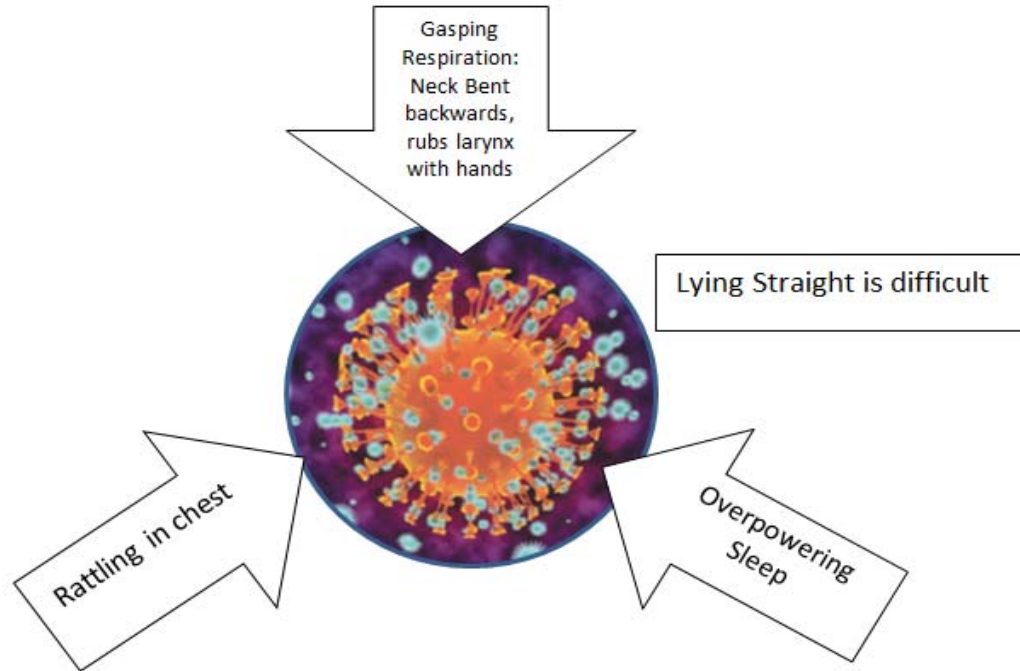
❖ Ant ars, a 3<sup>rd</sup> stage remedy; Chilly + Thirsty

**Swelling of face**  
(Due to vasodilatation)  
(Edema due to cardiac involvement)

- Respiratory problems accompanies with swelling /edema or pleural exudation.
- Swelling is more prominent on face.
- Sudden weakness due to hypoxia and weakness of heart.
- Complaints are aggravated by eating and lying down.
- X-ray shows emphysema.

## ANTIMONIUM TARTARICUM

❖ 3<sup>rd</sup> stage remedy especially for elderly patients; CHILLY



- **Pathology:** Hepatization of both lungs after pneumonia, broncho-pneumonia and ultimately paralysis of lungs.
- **Clinical Symptoms:**
  - Paleness or cyanosis on face with sleepiness, which gradually increases to comatose sleep
  - The eye lids are covered with mucus
- **Posture:**
  - Lying on back aggravates
  - Letting the head down on lying also aggravates, so the patient wants to sit erect. If at all patient lies down then can lie on right side only
- **Breathing Pattern:**
  - Inspiration gasping, while expiration is long and slow
  - Respiratory rate irregular, aggravation on lying down and sleeping
  - Respiratory rate accelerated on being disturbed while sleep

- **Symptoms:**

- Coldness of extremities and cold breath with rattling of chest
- Due to cough child jumps and calls for help
- Patient bends backward and grasps the larynx
- Coughing and yawning consecutively
- Rattling of mucus too much in lungs
- Expectoration copious but very difficult, coughs much for little which amel.

- **Mental symptoms:**

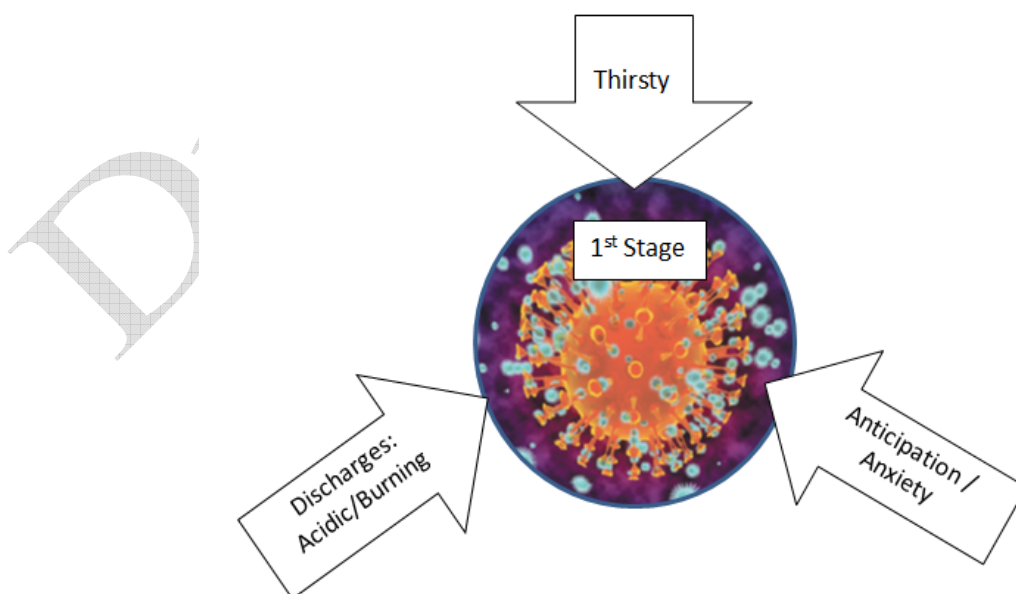
- Irritability when sick; clings to attendant or nurse or doctor out of fear

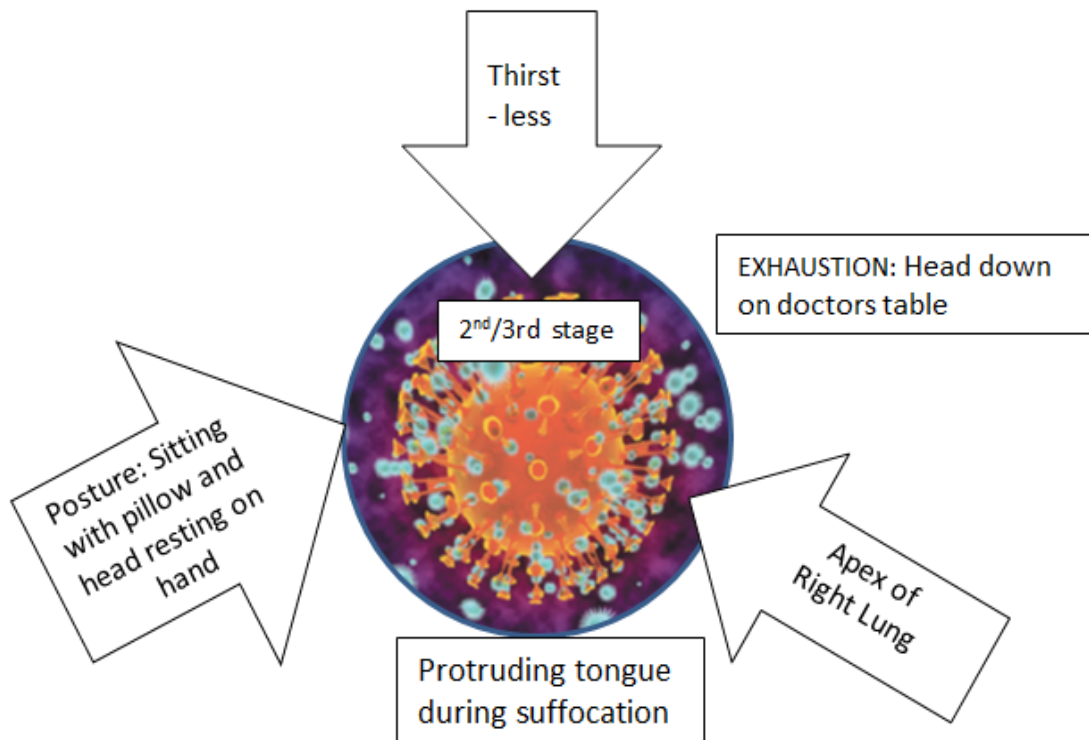
- **Others:** Mild or low fever during the whole episode

Reference: For scientific explanations please go through “*The Golden Thread of Homoeopathic Medicine*” by Dr. DilipSoni.

## ARSENICUM ALBUM

- ❖ Medicine of all three (1,2,3) stages,(chilly+right side+thirsty+fastidiousness)



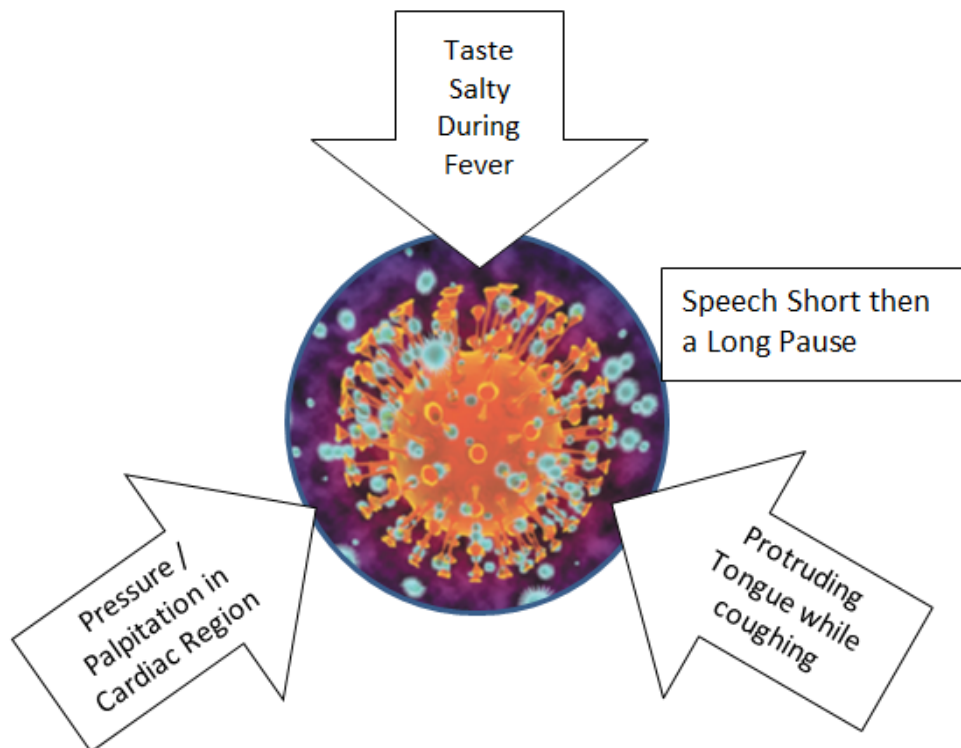


- **Pathology :**
  - Coryza, catarrh, apex of right lung is mostly affected
- **Golden check points:**
  - **When patient raise his hands up there is vertigo, therefore puts head on the table of physician**
- **Posture:**
  - **Difficult respiration better by sitting bending forward with pillow on the lap and head rest on hands, unable to lie down**
- **Breathing pattern:**
  - Expiration jerky and interrupted
- **Symptoms:**
  - Mid-day and mid night agg
  - Headache by pressure on abdomen better by cold application

- Thirsty for little quantity
- Head hot rest body is cold to touch
- Protruding tongue during suffocation
- Throat membrane wrinkled
- **Mentals:**
  - Anger with respiratory difficulty
  - Anguish-constricted everything
  - Mental restlessness with physical weakness
- **Others:**
  - Severe weakness, burning heat outside and cold inside
  - Diarrhea after fever

## **BELLADONNA**

❖ **1st stage; mild chilly+ thirsty + redness**

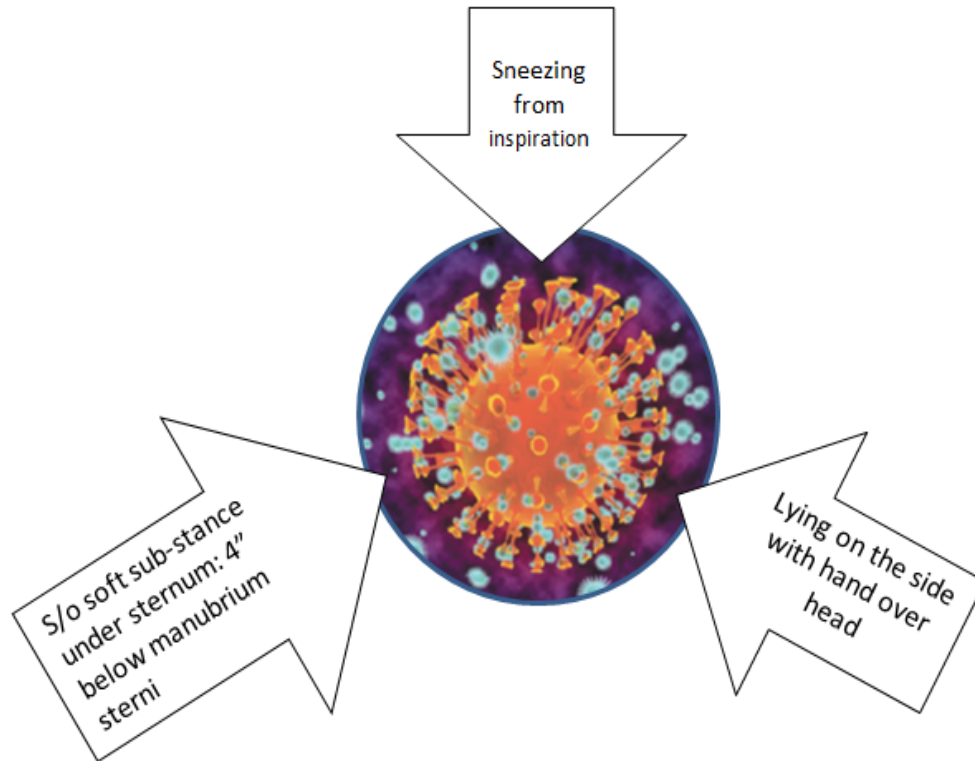




- **Pathology:**
  - Coryza, catarrh, tonsillitis
- **Golden checkpoints:**
  - *Slow and forceful speech with long pause, protruding tongue while coughing*
- **Posture:**
  - Sitting with bending head forward
- **Breathing pattern:**
  - Pause between expiration and inspiration
  - Constant swallowing
- **Symptoms:**
  - Headache appears suddenly and disappears suddenly
  - One cheek hot and other cold
  - Cough with protruding tongue
  - Taste salty during fever
- **Mentals:**
  - Attempt to escape from quarantine
  - Spit on others
  - Striking himself on abdomen and face or against wall
  - Remove cloths
  - Sensitive to noise specially own voice
  - Angel when well, devil when sick
- **Others:**
  - Pressure feels at cardiac region with respiratory trouble
  - Retention of urine,
  - fever with delirium and headache

## BROMIUM

❖ 2<sup>nd</sup> stage medicine; Hot + thirsty

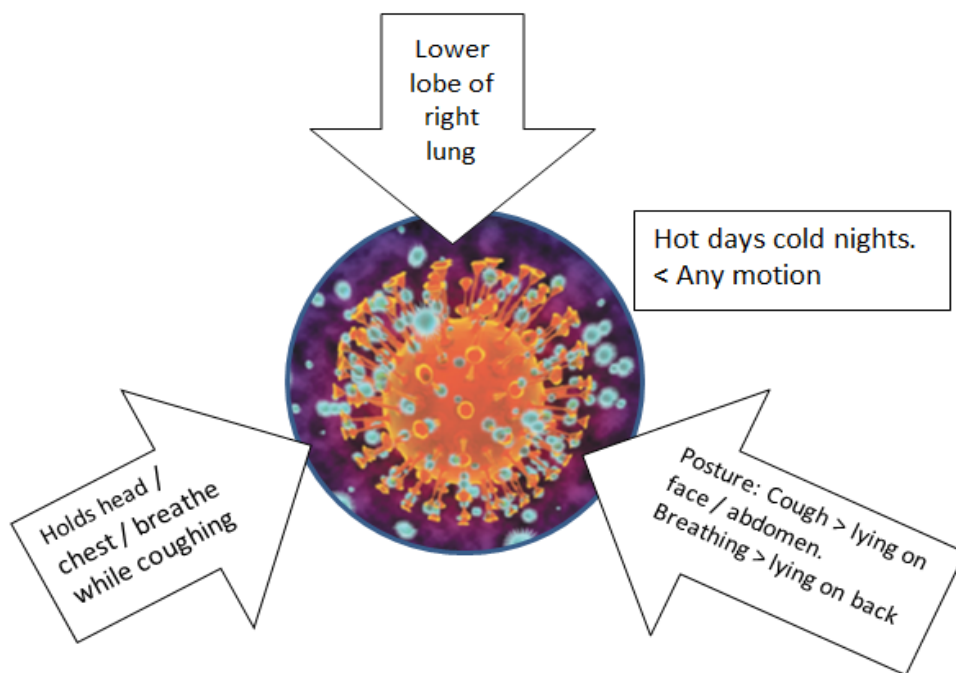


- **Pathology:** Croup, inflammation of lung
- **Golden check points:**
  - Sneezing from inspiration
  - **Coldness of breath when inspires**
  - **Cyanosis on face seen during asthma**
- **Posture:**
  - Lying on side with hand over the head
- **Breathing:**
  - Impeded, grasping
- **Symptoms:**
  - Scabs and clinkers in nose with dryness
  - Croup extending from larynx to bronchioles
  - Loose cough from exercise and warm room
  - **Sensation of soft substance under sternum**

- **Mentals:**
  - Desire to be carried or help during croup
  - Causeless sick feeling
- **Others:**
  - Headache better by lying on side with hand over the head
  - Burning heat within and without, during fever

## **BRYONIA ALBA**

❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage remedy. *Hot + thirsty + summer aggravation*

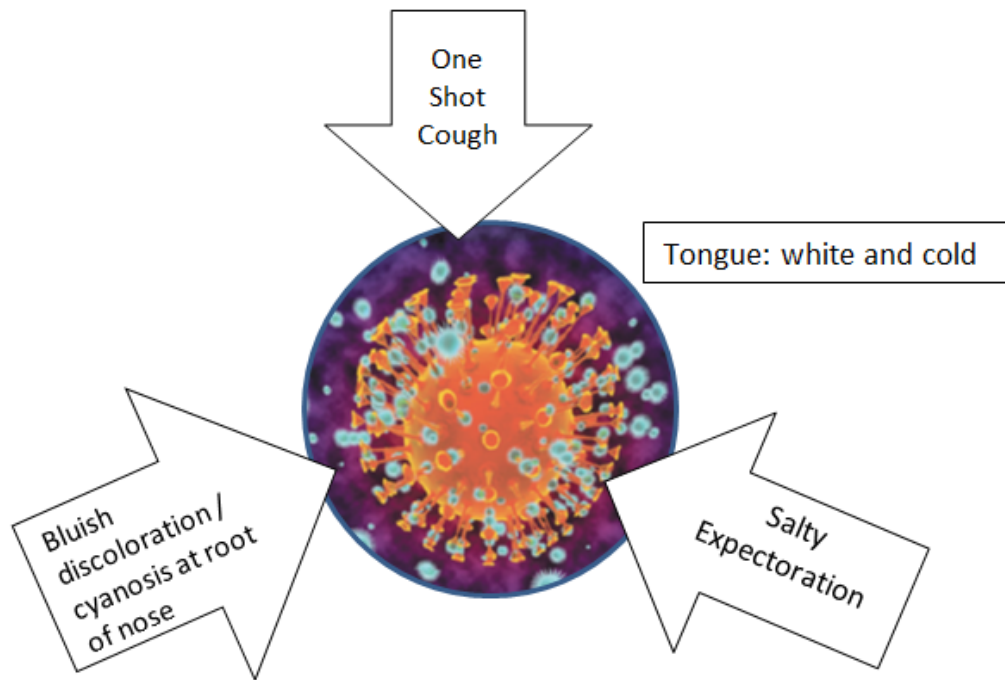


- **Pathology:**
  - Inflammation and hepatization in lower lobe of right lung
  - Coagulated brown hemoptysis
  - Decreased surfactant or damage of pneumocyte type -2
- **Clinical Symptoms:**
  - Coryza extends to chest from nose
  - Sneezing between two coughs
  - Gasping or catching before cough (Antim tart)

- **Posture:**
  - Desires to lie down on face or abdomen due to chest pain, and on back due to respiratory trouble, which ameliorates
  - Holding head as well as breath while coughing
  - Bending backward aggravates cough
  - Patient sits up as soon as cough comes up
- **Breathing Pattern:**
  - Difficult and slow, after eating or drinking as it restricts the expansion of diaphragm, as unable to expand the chest due to pain and fibrosis
  - Slow, stertorous breathing
- **Symptoms:**
  - Bursting headache in patient after drinking cold water in heated condition. She wants to let hair down because binding hair causes headache
  - Throat pain extends to ear on coughing, aggravated from any motion while ameliorated from hard pressure, drinking or lying down
  - *Dryness of respiratory tract*
  - *Cough comes from deep, as if from trachea or abdomen*
- **Mental symptoms:**
  - Aversion to answer, if answers then in haste
  - Anxious about business and future
  - Feeling of heaviness of head
  - Fear of talking or laughing or motion because it causes cough
  - *Always want to go home*
- **Others:**
  - Quiet disposition during fever with thirst, oily perspiration

## CALCAREA CARBONICA

❖ *Medicine of all three stages; Chilly +thirsty+ perspiration profuse*

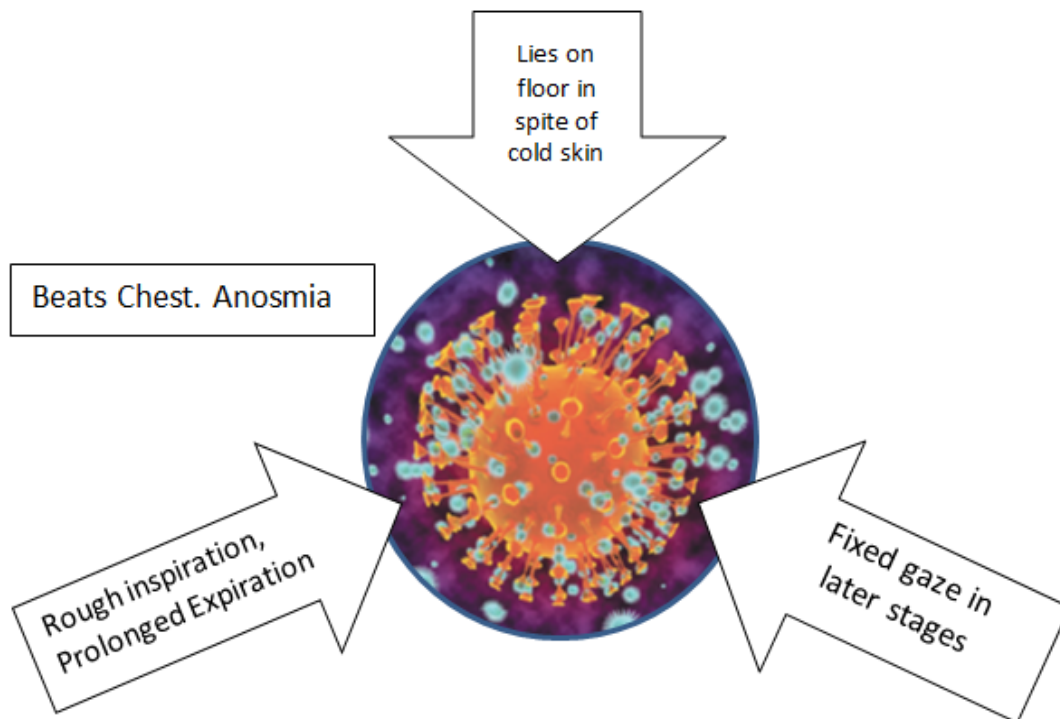


- **Pathology:**
  - Right upper lobe of the lung affected, emphysema, bronchitis, atelectasis
- **Golden check points:**
  - Patient holding shoulders retracted, respiration catching on bending
  - **Bluish discolouration at the root of nose**
- **Posture:**
  - Lying on affected side agg
- **Breathing Pattern:**
  - *Loud respiration through the nose while walking; sibilant, sobbing during sleep and panting on exertion*
- **Symptoms:**
  - Nose dry at night and moist in the day
  - **The tongue is white and cold**
  - Throat pain from the change of weather

- Obstruction of the nose
  - The rawness of larynx on swallowing
  - **One-shot cough at night with salty expectoration**
  - Cough from roughness in the palate
- **Mentals:**
    - Curious about supra-natural or spiritual matters, scratching head on waking
  - **Others:**
    - Bursting headache on the forehead to occiput
    - *Perspiration of scalp*

### **CAMPHORA OFFICIALIS**

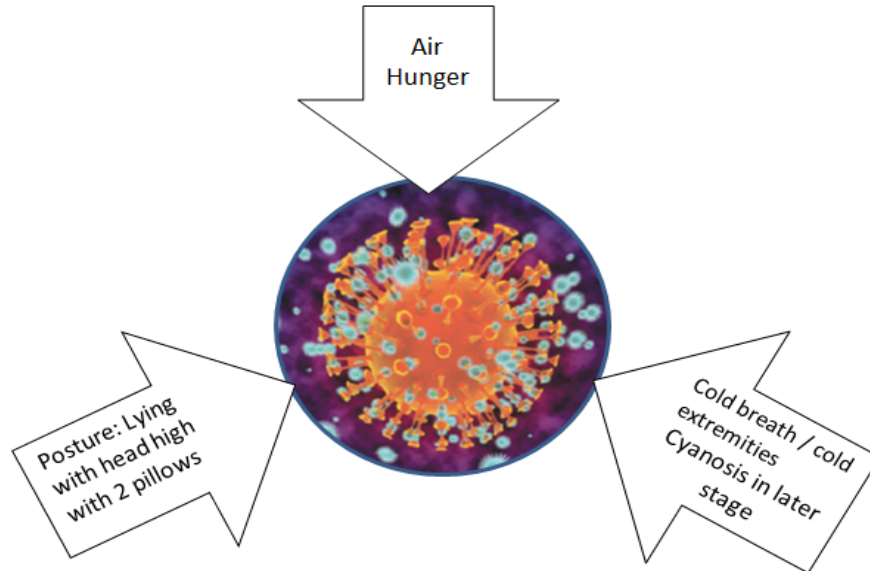
- ❖ 1<sup>st</sup> & 2<sup>nd</sup> stage remedy, SPASMODIC remedy; *THIS is the only medicine for feeling of cold sensation. Hot/Chilly + Thirsty/ thirst less*



- **Pathology:**
  - TRPM 8 RECEPTORS affections present on tongue, nasal mucosa, skin and respiratory system; controlled by temporal lobe of the brain
- **Clinical Symptoms:**
  - **Sensation of coldness in a buccal cavity on inspiration**
  - **The motion of left arm agg.**
  - *Staring with fixed eyes*
- **Posture: Wants to lie down bare on the ground**
- **Breathing pattern:**
  - Rough inspiration
  - Respiration accelerated while expiration is prolonged
- **Symptoms:**
  - Coldness in throat, trachea, and larynx on breathing in as if one has eaten mint, coldness of inner surface
  - Cough, cramp, diarrhea, high fever, flu, memory loss, anosmia
  - *Beats chest with dyspnea*
- **Mentals:**
  - *Affections of geometrical analytical area, loss of judgment of thickness, length, height, volume*
  - *Fear of death or admission in the hospital or being isolated*

## CARBO VEGETABILIS

❖ 3<sup>rd</sup> stage medicine, Hot + Thirsty

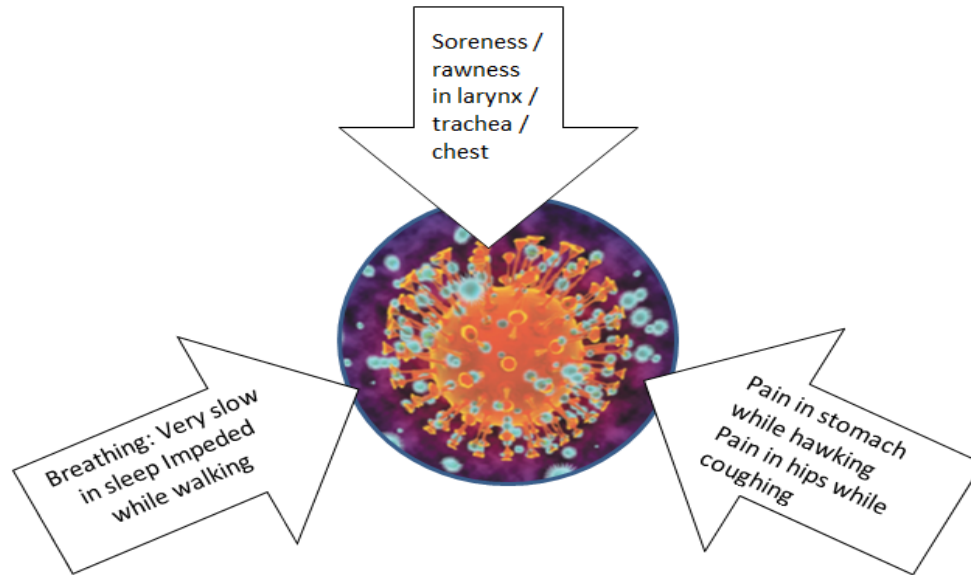


- **Pathology:**
  - For old people or cardiac patients (congestive heart failure) who gets infected with the virus
  - Emphysema with gangrene in lungs
  - *Utter last stage*
- **Clinical Symptoms:**
  - This medicine could be a boon for cardiac patients, who if get infected, their condition mostly proceeds towards death
- **Posture:** Lying with head high (China and Sepia)
- **Breathing Pattern:** Breathing accelerated while lying down
- **Symptoms:**
  - Cold breath with *coldness of extremities*
  - Cough hard, not ceasing until the masses of sputa is raised
  - *Respiration arrested while changing sides in lying position*
  - *Increased salivation during asthma*
- **Mental symptoms:** Rocking causes mental symptoms



## CAUSTICUM HAHNEMANNI

❖ 1<sup>st</sup> & 2<sup>nd</sup> stage medicine; Chilly + thirsty + right sided

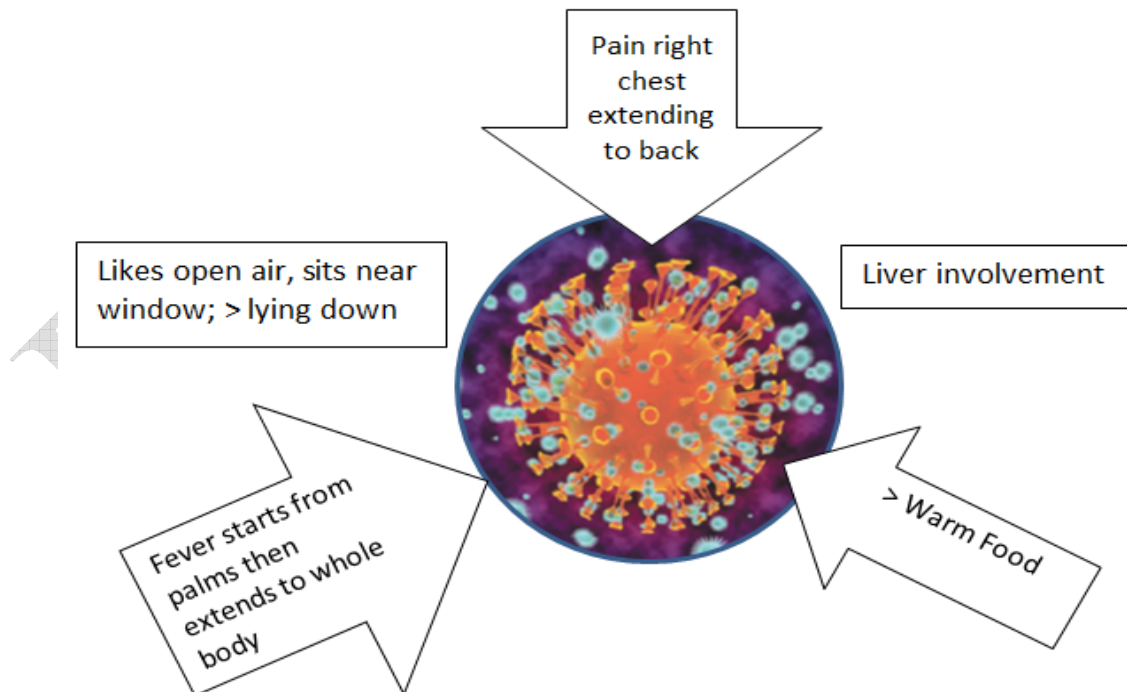


- **Pathology:**
  - Bronchitis, pleuritis, laryngitis
- **Clinical Symptoms:**
  - Right side of chest is affected, slight exertion causes breathing problem
- **Posture:**
  - Kneeling amel, sitting aggravation
- **Breathing pattern:**
  - Expiration aggravates
  - *Imperceptible during sleep*
  - *Impeded while talking*
- **Symptoms:**
  - Itching in throat and eustachian tube
  - Throat pain during inspiration
  - Sensation of foreign body at throat pit
  - Pain in trachea during coughing
  - Pain in larynx and trachea on blowing nose

- Pain in sternum during expiration and exertion
- *Impeded respiration during talking*
- Abdomen is sensitive to cold air
- Pain in stomach during hawking of mucus
- **Mentals:**
  - Hurriedness with shortness of breath
  - Sensitive to mental exertion
  - Sympathy to other patients in isolation
  - Challenges to isolation authority if sees something wrong
- **Others :**
  - Warmth of bed ameliorates respiratory complaints
  - Profuse perspiration during sleep in day time
  - Sensation of wind between shoulder blade

## **CHELIDONIUM MAJUS**

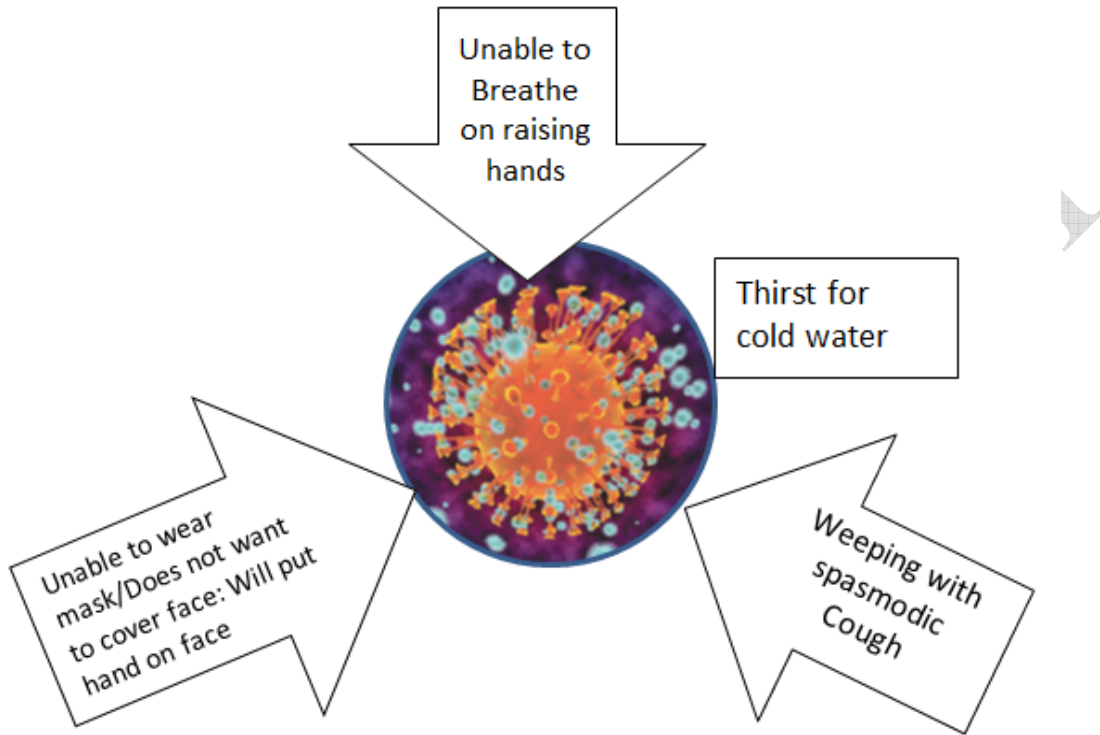
❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, Chilly + right sided



- **Pathology:** Hepatization or congestion in upper lobe of right lung
- **Clinical Symptoms:**
  - Pain starting from right chest extending to back
  - Throat stiff/rigid. While coughing mucous flies out far
  - Fan-like motion of alainasi with pneumonia
- **Posture:**
  - Better by lying, sitting near the window, open-air
  - Unable to raise the head while lying on the back
- **Breathing Pattern:**
  - Asthma ameliorated by deep inspiration and urination
  - Wheezing or whistling while sleeping
- **Symptoms:**
  - Right sided affection from nose to the lungs
  - Every problem is better by warm food
  - Severe cough from irritation as if dust in the larynx
  - Better by rubbing his soles
- **Mental symptoms:**
  - Fear that pneumonia might cause unconsciousness or stupor
  - Thinks that he has ruined his health himself
- **Others:**
  - Fever starts from palms and extends to whole body
  - Secondarily involved is the liver

## CUPRUM METALLICUM

❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine; Chilly + Thirsty



- **Pathology:**

- Pneumonia with cramps, mostly on left side
- Emphysema and spasmodic cough in the second stage

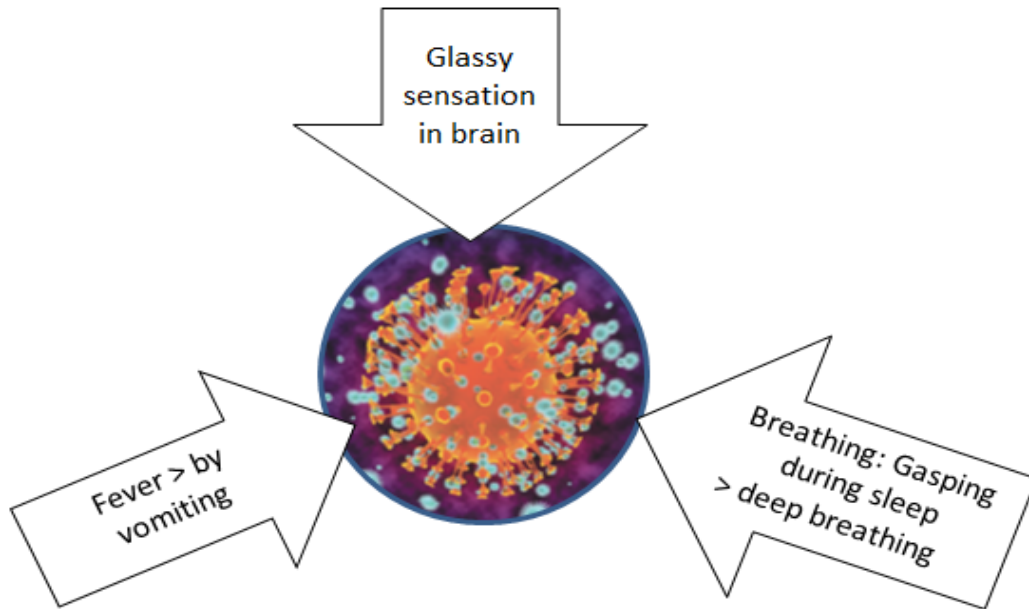
- **Golden checkpoint:**

- When a patient is asked to raise his hand above the head, that time respiration would stop and may be unable to breathe
- He is unable to wear a mask, like Lach, arg-nit and amm-carb (Lachesis & cuprum met patient does not allow anything to touch the face but Lachesis does not allow to touch the throat also)
- Bluish discoloration near clavicles (Lachesis, thuja, and ars alb)

- **Posture:** Cough or asthma from bending backward
- **Breathing:** Deep breathing which ameliorates
- **Symptoms:**
  - Inability to speak during asthma so the patient starts weeping involuntary and when water is offered, unable to drink
  - Likes cold water
  - Difficult respiration or attacks of asthma
  - Spasmodic cough makes him unconscious or faints (cina, cadm-s, and kali carb); *strokes cough*
  - Expectoration metallic in taste
  - Constriction of left side of the chest with stitching pain
- **Mental symptoms:**
  - Behaves like a commander or general, speech excited, does not like to talk to everyone
  - Anxiety with a red face and aversion to being caressed but still clings to the nurse
- **Others:**
  - *Fever* -Chill only in daytime and drinking cold water ameliorates
  - *Headache* - From occiput to face
  - Sensation of head falling hither and thither
  - *Cold water ameliorates every problem of the patient*

## DIGITALIS PURPUREA

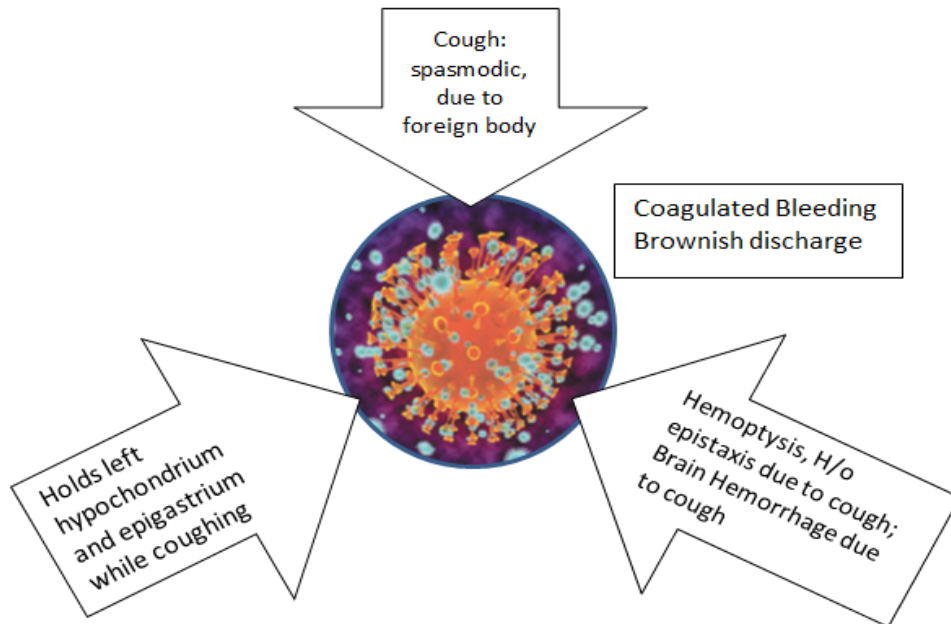
❖ Medicine of secondaries; Chilly



- **Pathology:** *Bronchitis, cerebral involvement*
- **Golden check points:**
  - Patient *feels that his brain is made of glass* or glass like feeling when disease is in advance stage
- **Posture:**
  - Respiration painful on *lying down*
  - Coughs agg from bending forward
- **Breathing:** Gasping during sleep, deep breathing ameliorates
- **Symptoms:**
  - Rawness and ulceration of posterior nares
  - Sneezing deep, seems as coming from stomach
  - Dry cough in evening , during coryza, aggravation from inspiration
- **Mentals:**
  - All mental symptoms are better by *weeping or urination*
  - Fear of death during fever
- **Others:** Fever better by vomiting

## DROSER ROTUNDIFOLIA

❖ 2nd & 3rd stage medicine; **Hot**

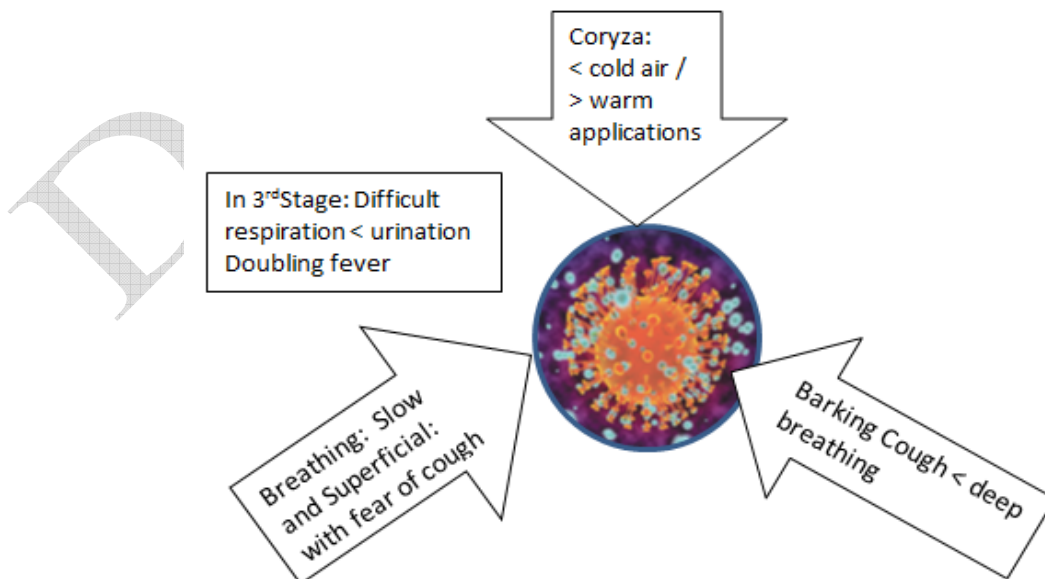


- **Pathology:**
  - Hemoptysis and Bronchitis
  - Hemorrhage from the lungs, especially left lung and probably from upper lobe
- **Clinical Symptoms:**
  - Sensitive cough reflex excited by any stimulus, the reaction is so severe that it causes strong spasmodic cough which even causes epistaxis and expectoration of bloody saliva
- **Golden checkpoints:**
  - Pain aching, below the clavicle extends up to scapula, during inspiration
  - *Paroxysmal cough follows one after another and causes all type of problems related to the respiratory tract like scrapping, stitching, irritation, soreness, etc.*
- **Posture:**
  - Holds left hypochondrium and epigastrium region while coughing
  - Better by motion & pressure; aggravation from lying on the painful side

- **Breathing:**
  - Accelerated during a paroxysm of cough,
  - Retching with asthma
- **Symptoms:**
  - Any foreign body like dust, bacteria, virus (sensation of the foreign particle) causes irritation deep in fauces and forceful cough to throw it out
  - Painful forceful sneezing
  - Dryness of posterior nares
  - Greenish expectoration
- **Mental symptoms:**
  - Anguish during whooping cough and talkative after cough but it causes constriction in the throat.
  - Fear of coughing
  - Intolerance to injustice
- **Others:**
  - Swallowing difficult for solids
  - Loss of taste

## **DULCAMARA**

❖ Medicine of all stages ; chilly + thirsty

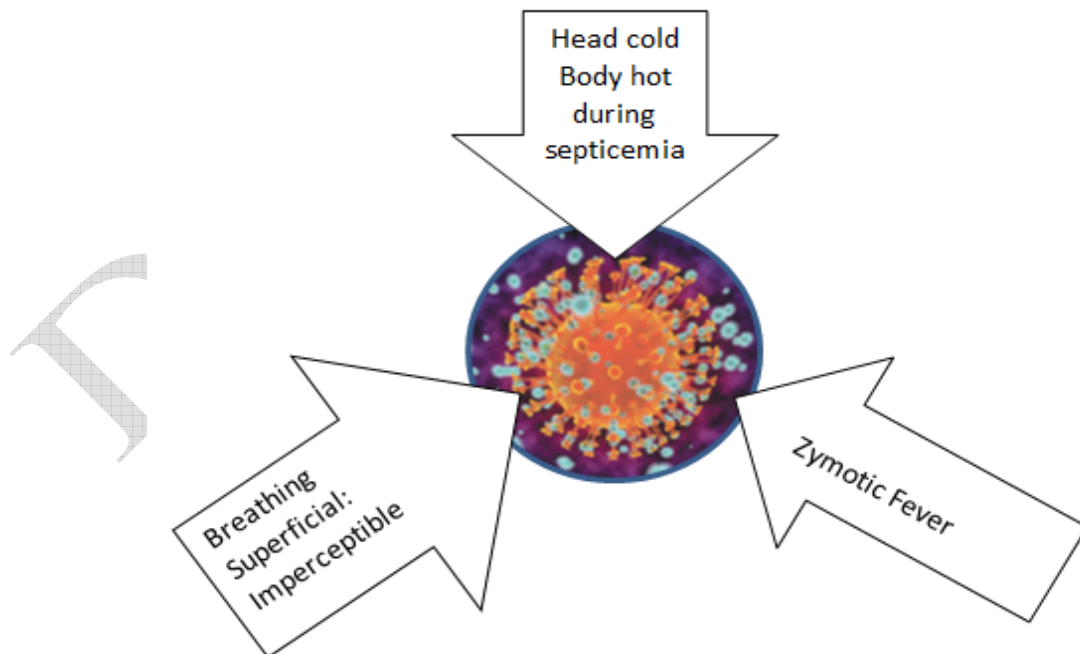




- **Pathology:** Sinusitis, bronchitis
- **Golden check points:** *Barking cough from deep breathing*
- **Posture:** Snoring while lying on back
- **Breathing:**
  - *Slow and superficial breathing due to fear of cough*
  - Panting from cough
- **Symptoms:**
  - *Coryza agg from cold air and better by warm application*
  - Stomatitis with coryza
  - *Difficult respiration agg. urination after*
- **Mentals:** weeping from impatience and headache from laziness.
- **Others:**
  - Pain in vertex and temple during and after coryza (suppressed)
  - Fever doubled every day

## **ECHINACEA PURPUREA**

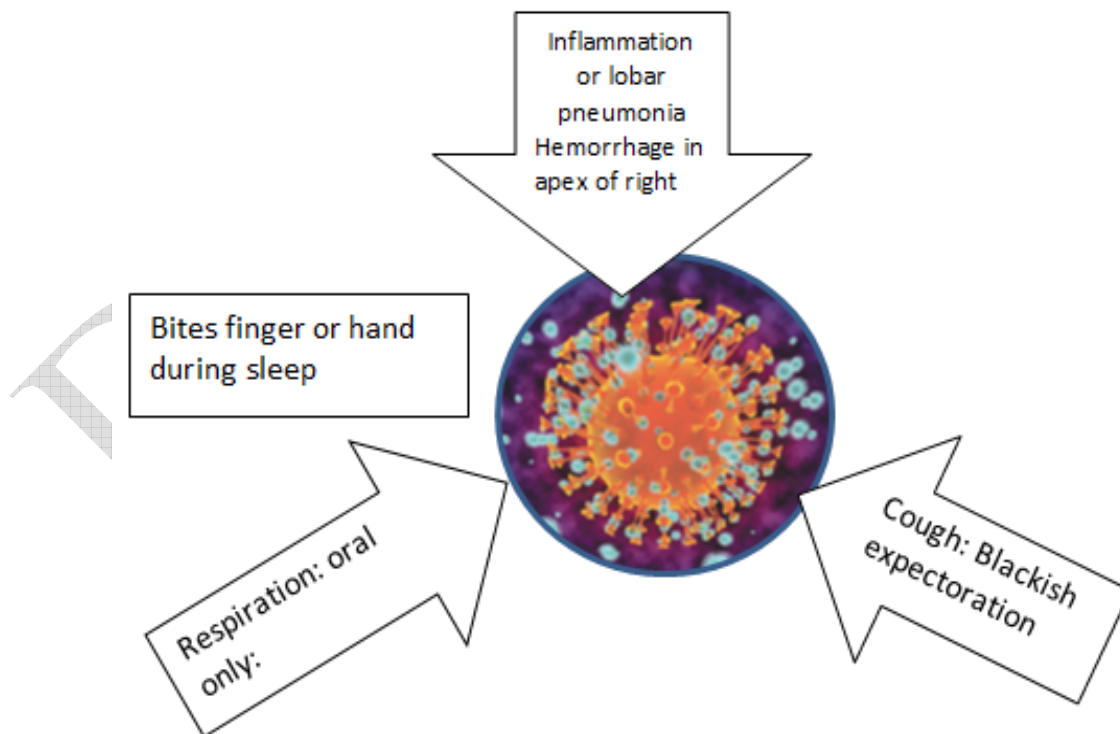
❖ *Medicine of last stage when the septicemia takes place*



- **Pathology:** Right lung pathology
- **Golden check points:**
  - *Inclination to blow nose constantly*
  - *Head is cold and rest of body is hot during septicemia can give direct entry in the case*
- **Posture:** Not particular because patient is near to coma
- **Breathing:** *Superficial imperceptible*
- **Symptoms:** Pain in forehead and above eye when sneezing
- **Mentals:**
  - Slowness of mind with aggravation from mental work
  - Metallic taste of mouth with white coated tongue
- **Others:** Zymotic fever, severe heat with involvement of brain

## **ELAPS CORALLINUS**

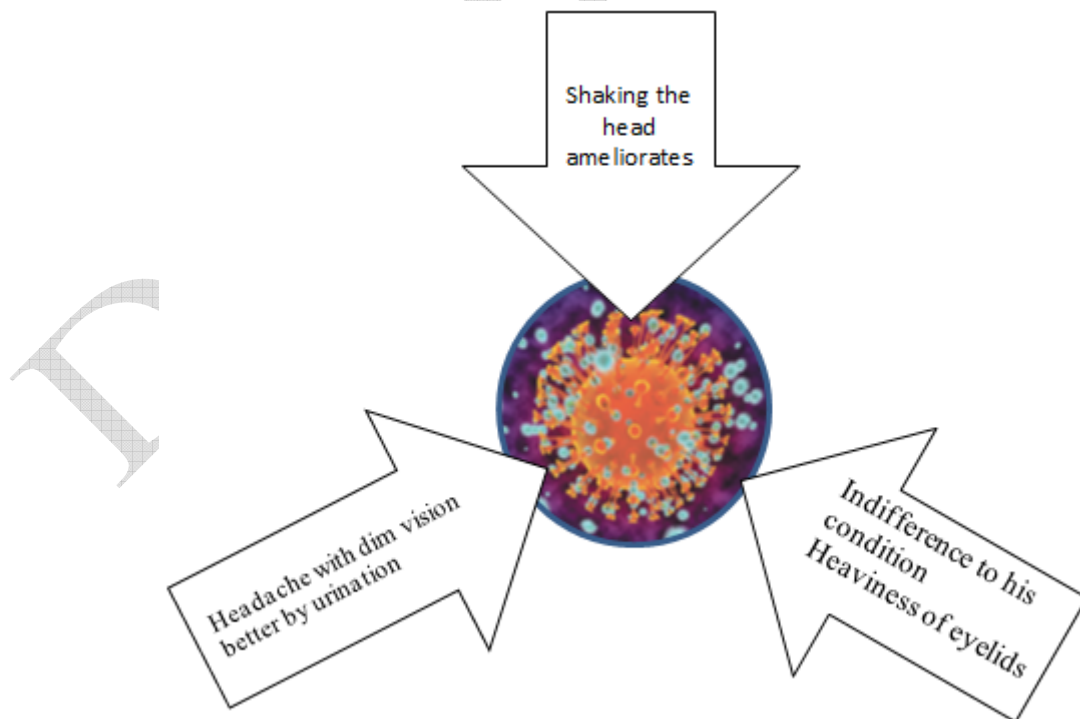
- ❖ *2nd and 3rd stage medicine; chilly + thirsty + right sided*



- **Pathology:**
  - *Inflammation or lobar pneumonia or hemorrhage in apex of right lung*
- **Golden check point:**
  - **Biting finger or hand during sleep**
- **Breathing:** *Oral respiration only*
- **Symptoms:**
  - Nasal discharge offensive like fish brine
  - Pain in nose extends to ear
  - *Cough with blackish expectoration*
- **Mentals:**
  - Desire for company thinks that something horrible is going to take place
  - **Fear with chattering of teeth**
- **Others:** Fever mostly in evening around 8 to 9 pm

## **GELSIMIUM**

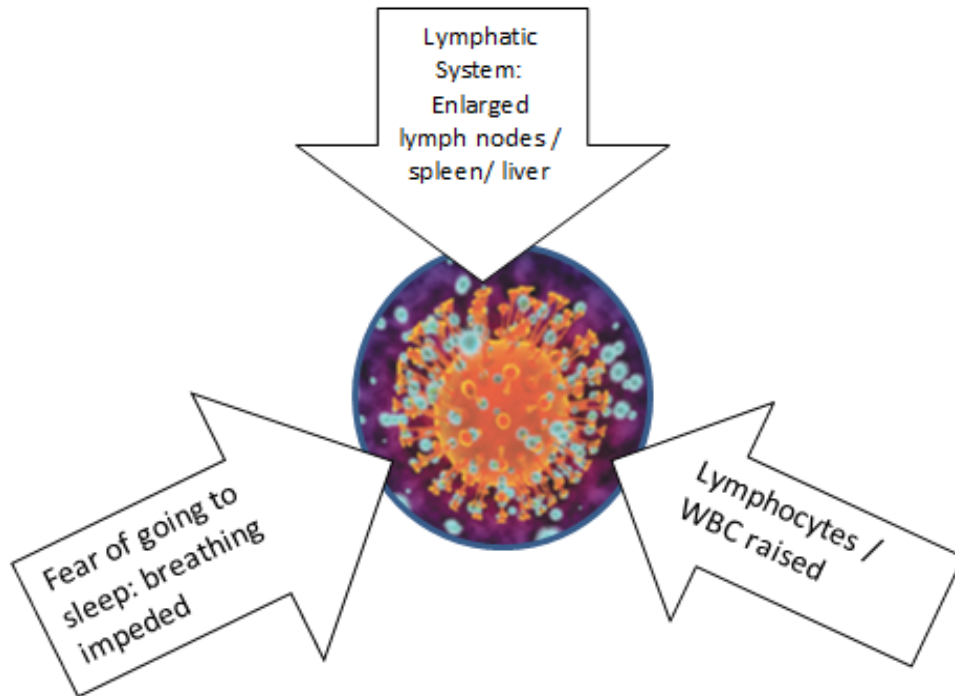
❖ 1<sup>st</sup> and 2<sup>nd</sup> stage remedy; Chilly+ Thirsty + Anxiety



- **Pathology:** Influenza like illness and presence of respiratory murmurs
- **Clinical Symptoms:**
  - Influenza like symptoms, fever, anticipation and anxiety with diarrhea
  - Sensation of palpitation on the Fontanelles
- **Posture:** Head drawn sideways towards the left
- **Breathing pattern:** Rapid and forcible expiration and inspiration
- **Symptoms:**
  - **Headache with dim vision better by urination**
  - Involuntary diarrhea
  - Numbness of one side of tongue
  - Cold perspiration after headache
  - Tongue whitish yellow, during fever
- **Mental Symptoms:**
  - Ailments from criticism or ordeal fright
  - Indifference to his own suffering
  - Nervous aphonia
  - Concern for his heart
  - Severe weakness from mental exertion
  - **Indifference to his condition**
- **Others:**
  - Delirium muttering in sleep
  - Quiet disposition during heat and diarrhea, **heaviness of eyelids.**
  - Does not like sunshine
  - **Shaking the head ameliorates**

## GRINDELIA ROBUSTA

❖ 3rdSTAGE; Hot + thirsty & left sided

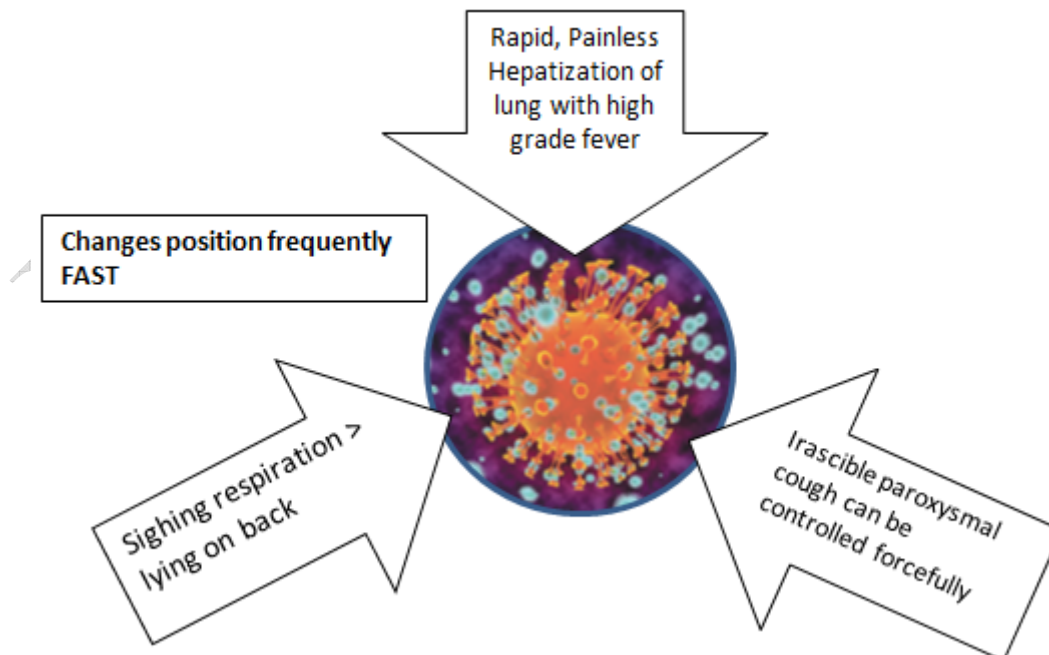


- **Pathology:**
  - *Emphysema along with the involvement of the lymphatic system and spleen* (which makes it sure shot prescription)
  - W.B.C increased especially *lymphocytes*
- **Clinical:**
  - Lobar pneumonia, asthma, bronchitis, emphysema
  - Conjunctivitis
  - Enlarged liver & spleen with pain
  - Contracted pupil
  - Hypertension
  - Mucus in bronchial tubes
- **Posture:** Aggravated while lying or sleeping
- **Breathing pattern:**
  - Irregular respiratory rate: one time slow other times fast.

- Superficial respiration while lying or sleeping
- Cheyne - stroke breathing
- **Symptoms:**
  - Spasmodic bronchial cough, with profuse, tenacious expectoration, which gives relief
  - *The breath stops when the patient goes to sleep and awakes with a start, gasping for breath (due to lack of oxygen in the brain)*
  - Longing for sunlight or society
  - Likes when the torch is placed on the eyes
  - Unable to breathe due to increased cell debris in alveoli.
  - *Lymph gland enlargement due to deficient circulation in the lymphatic vessels*
  - Desire for open-air
- **Mentals:** Fear of suffocation
- **Others:** *Spleen and lymph nodes are enlarged*

## IGNATIA AMARA

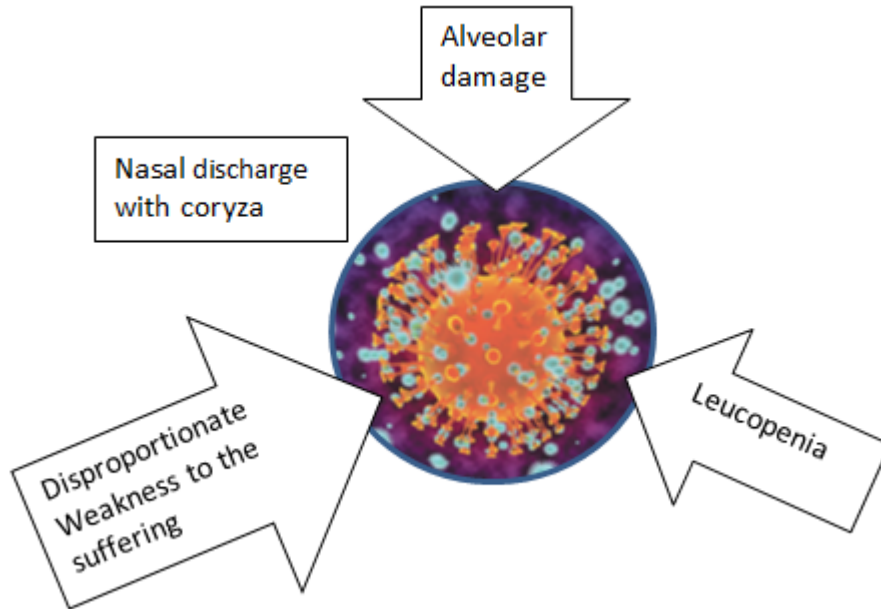
❖ *Hysterical + chilly + thirsty but thirst less during fever*



- **Pathology:**
  - *Rapid and painless hepatization of the lung with fever (iod), pneumonitis*
- **Golden check points:**
  - Cannot hold breath because it agg.
  - Habit of continue swallowing, even empty
- **Posture:**
  - Oppression of the chest during respiratory disorder, *lying on back ameliorates*
  - Cannot lie long in one position so changes side regularly
- **Breathing Pattern:**
  - *Sighing, loud, respiration is slow and short, but deep respiration during sleep*
- **Symptoms:**
  - It has a cough from dust in throat pit
  - Constriction in throat pit and irascible paroxysmal cough but can *control forcefully which amel.*
  -
- **Mentals:**
  - Anxiety amelioration in house, sighing continues long after weeping
  - The patient has delusion that he has lost everything
- **Others:**
  - Visible redness on body due to heat but internally patient does not feel the heat
  - Shaking during pyrexia, throwing head backwards during pain

## INFLUENZINUM

❖ 2nd to 3rd stage medicine, chilly

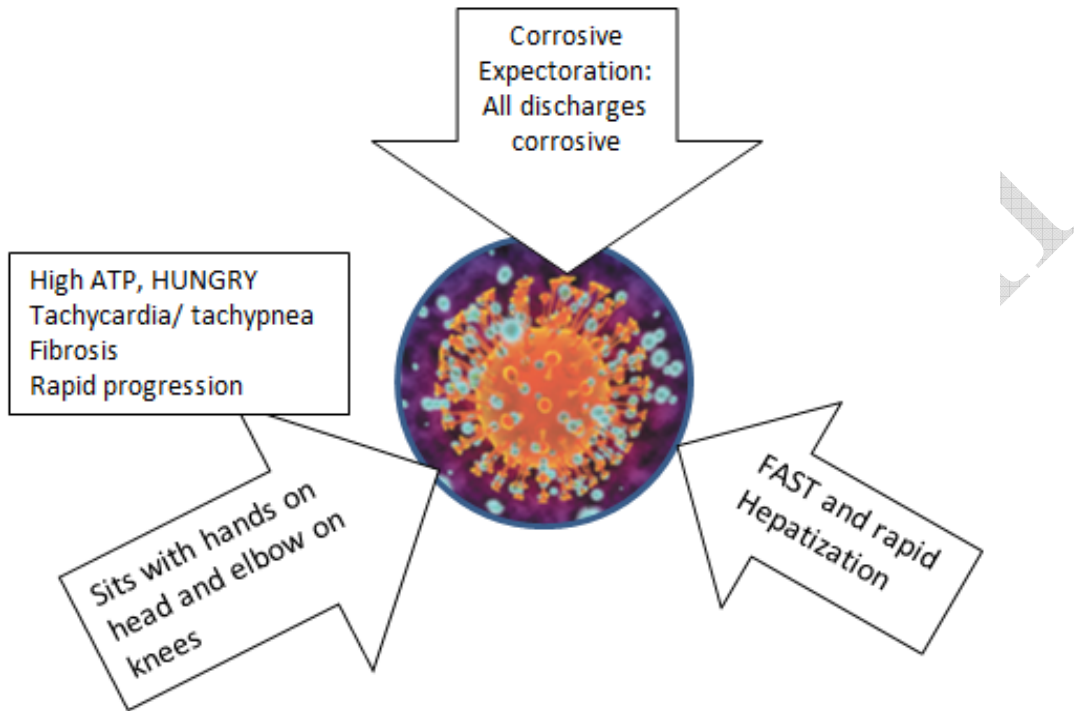


- **Pathology:** *When alveoli are going to collapse*
- **Clinical:** Prophylaxis for Flu.Coughs
- **Breathing:** Partial mouth breather
- **General symptoms:**
  - *Weakness and fatigue marked with chill, disproportionate to the suffering*
  - Diarrhea
  - Headache with *nasal congestion and coryza*
- **Mentals:** Depressive neurosis
- **Others:**
  - *Leucopenia, mononucleosis*, encephalitis, Conjunctivitis, ear discharges



## IODIUM

❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, *rapid progression*; *Hot + Thirsty + Hungry*



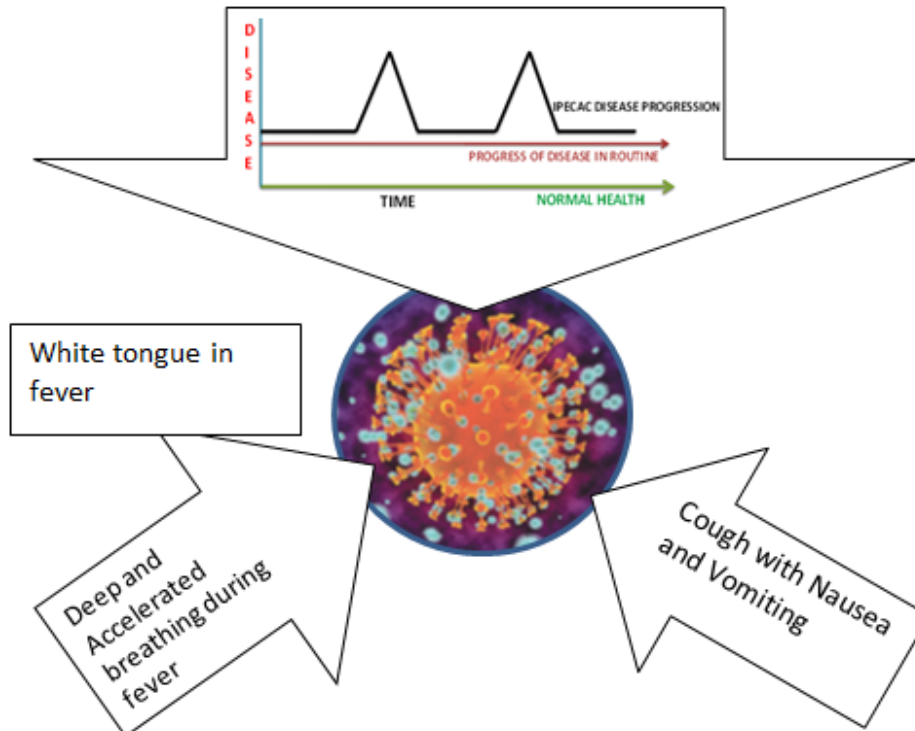
- **Pathology:** *Violent, rapid and painless hepatization of lungs and thickening or fibrosis of the lung*
- **Golden check points:** Dilated nostrils and hard mucus membranes
- **Posture:**
  - *Sits with the hands on head and elbow on knees*
  - Cough while lying down on back and better by sitting or bending forward
- **Breathing:**
  - Inspiration difficult and ascending stairs difficult
  - Tachypnea and tachycardia
- **Symptoms:**
  - Discharges from the nose are clear and glassy in appearance.
  - Burning or irritation from the larynx to trachea especially while coughing
  - Everything is better by eating and drinking
  - ***CORROSIVE EXPECTORATION & discharges***
- **Mental symptoms:**

- Heedless loquacity and answers loudly.
- Impatience, never sits or sleeps at night, moves here and there
- Better by eating and exercise or when busy
- **Others:**
  - Fever followed by continuous diarrhea
  - Sitting and standing ameliorates

## IPECACUANHA

❖ *Medicine of all stages; chilly + Thirst less*

*For the description of Ipecac, the **IPECAC GRAPH** is the key, mentioned in the golden thread of homoeopathic medicine by Dr. DilipSoni*

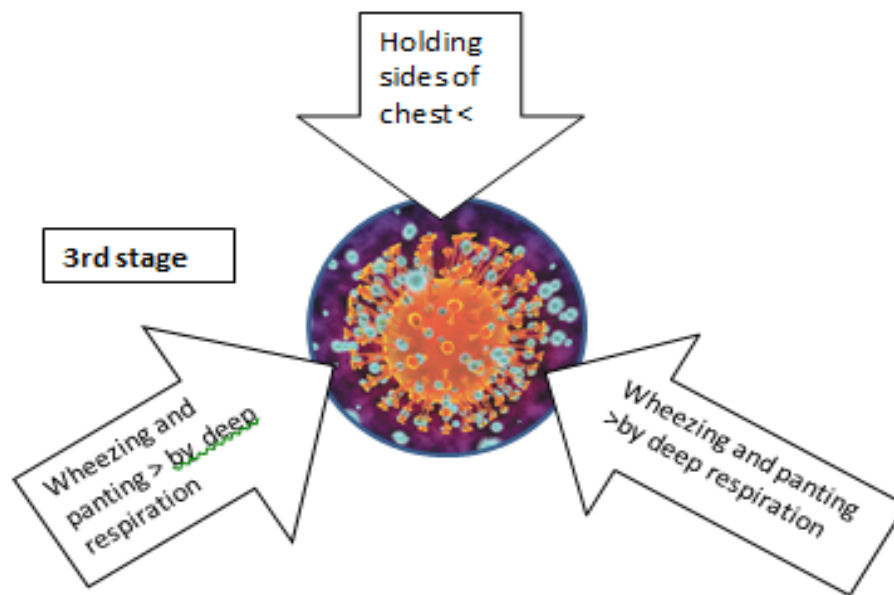
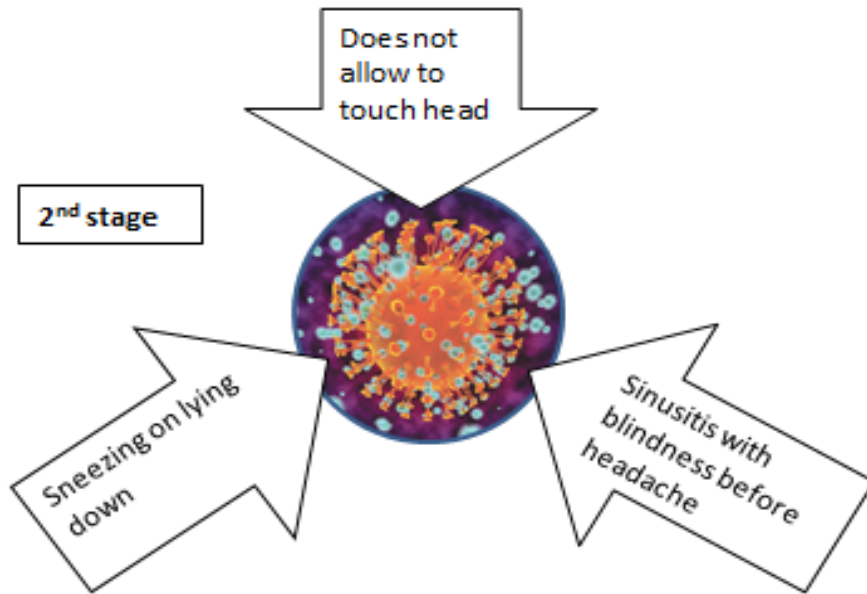


- **Pathology:**
  - Epistaxis with loss of smell, hemorrhage from lungs bright red
  - Bronchiectasis
- **Golden checkpoints:**
  - Sneezing before cough
  - Follow the graph of ipecac in any or every disease
- **Posture:**

- Shaking of body while coughing
- Repose, means to sit or lie without any movement
- **Breathing:**
  - *Deep and accelerated, during chill and fever*
  - Better by sitting upright
- **General symptoms:**
  - Spasmodic cough with nausea or vomiting better by repose or expectoration
- **Mental symptoms:**
  - Impatience for work
  - Anguish from chocking of the nose, from influenza
- **Others:**
  - *Fever:* Irregular and long lasting heat with white discoloration of tongue & thirstlessness; just like the graph of ipecac

## **KALIUM BICHROMICUM**

- ❖ **2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, (Chilly + thirsty) infection is slow but intense**
  - **Pathology:**
    - Bronchitis and pneumonia but the primary site of action is the *bifurcation of trachea(irritation)*
    - Viral sinusitis
  - **Golden checkpoints:**
    - Stringy discharges
    - Constantly snuffle while talking
    - Coldness inside the nose
    - Kali bi doesn't allow touching the head
    - Bag like swelling of the uvula

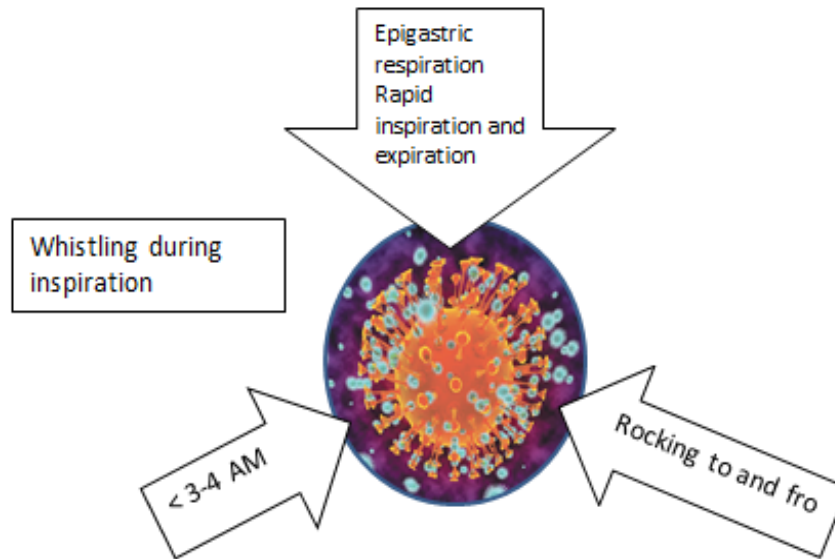


- **Posture:**
  - Bending forward amelioration
  - *Holding sides of chest give relief*
  - *Lying down causes sneezing*
  - Pain turning to the left side
- **Breathing Pattern:**
  - Rattling during sleep

- *Wheezing, panting, better by deep respiration*
- **Symptoms:**
  - *There is blindness before the headache and vision return back when pain is at its top*
  - The headache comes suddenly and goes suddenly
  - Acrid post-nasal dropping causes cough, thick clear stringy discharge if stops cause headache, *sinusitis pain starts from nose to root to the right supra-orbital to lateral canthi*
  - The inflammation extends from nose to larynx with sticky and stringy discharge
  - Expectoant adheres to the throat, gums, teeth and lips
  - Dry cough from smoke, due to irritation at the bifurcation of the trachea
- **Mentals:**
  - Impatience from heat and irritation in larynx or throat
  - Everything seems horrible to him
- **Others:**
  - Zymotic, paroxysmal fever at night
  - Stringy expectoration

## KALIUM CARBONICUM

❖ 2<sup>nd</sup> & 3<sup>rd</sup> STAGE (constriction) medicine; chilly + thirsty

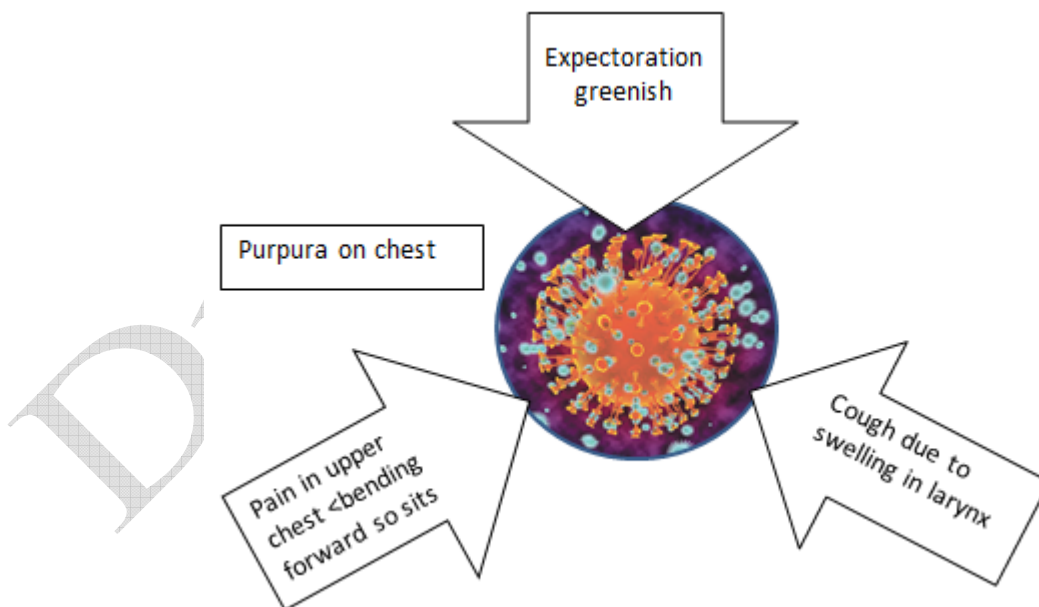


- **Pathology:**
  - *Hepaticization in the lower lobe of right lung*
  - Pleurisy, pneumonia, asthmatic breathing, bronchitis, coughs
- **Clinical:**
  - Painful inspiration, so breaths slowly by closing eyes
  - Pain chest, right lower
- **Posture: BETTER WHILE** sitting and bending forward
- **Breathing pattern:**
  - **Rapid inspiration and expiration**, on ascending stairs
  - Sighing respiration (blowing expiration – med., lyco, lach)
  - Shrieking or whistling during inspiration
- **Symptoms:**
  - *Rocking to & fro in ICU*
  - Chest pain right lower side
  - Painful inspiration , so breaths by closing eyes
  - Too much accumulation of phlegm in chest
  - Wants to sit with head on knees, to expand chest by pressing the abdomen
  - Expectoration, yellow

- Whistling during inspiration
  - Cough aggravates on lying down (due to constriction in the chest)
  - *Almost all complaints agg. at 3-4 am* (cortisol hormone is maximum at 3-4 am)
  - *Better by eructations in respiratory distress*
  - *Pain epigastric region, presses the chest to increase the transverse diameter of the chest*
- **Mentals:**
    - Fear of death, of fatal disease by, feels or says “no one will be spared of death, this disease will go with last breath”
  - **Others:**
    - Kidney + lung + liver involvement
    - Insomnia

## KALIUM IODATUM

❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, Hot + thirsty

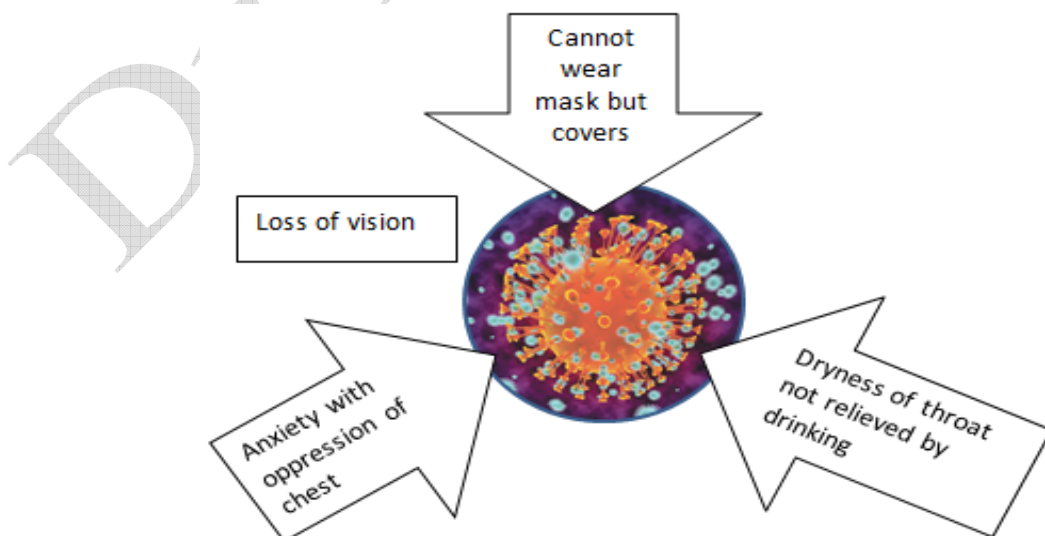


- **Pathology:**
  - Pleuro-pneumonia (right to left)
  - Uncovered during high fever

- **Clinical Symptoms:**
  - Signs of purpura on chest (Phos)
  - Emaciated chest
  - Initially dry hawking cough followed with copious *green expectoration*
- **Posture:**
  - *Sits erectas pain* on left side of upper chest on bending forward while sitting
- **Breathing Pattern:**
  - Respiration accelerated
  - Wheezing with coryza, during sleep
- **Symptoms:**
  - *Cough due to swelling in larynx*
  - Phlegm is salty and like soap suds.
  - Desire to be in warm bed though warmth otherwise aggravates
- **Mental Symptoms:**
  - Abusive and hard hearted towards family members
- **Others:**
  - Sciatica or lumber pain

## **LACHESIS MUTA**

❖ 2<sup>nd</sup> and 3<sup>rd</sup> stage medicine, as well as a preventive, **hot + thirsty**





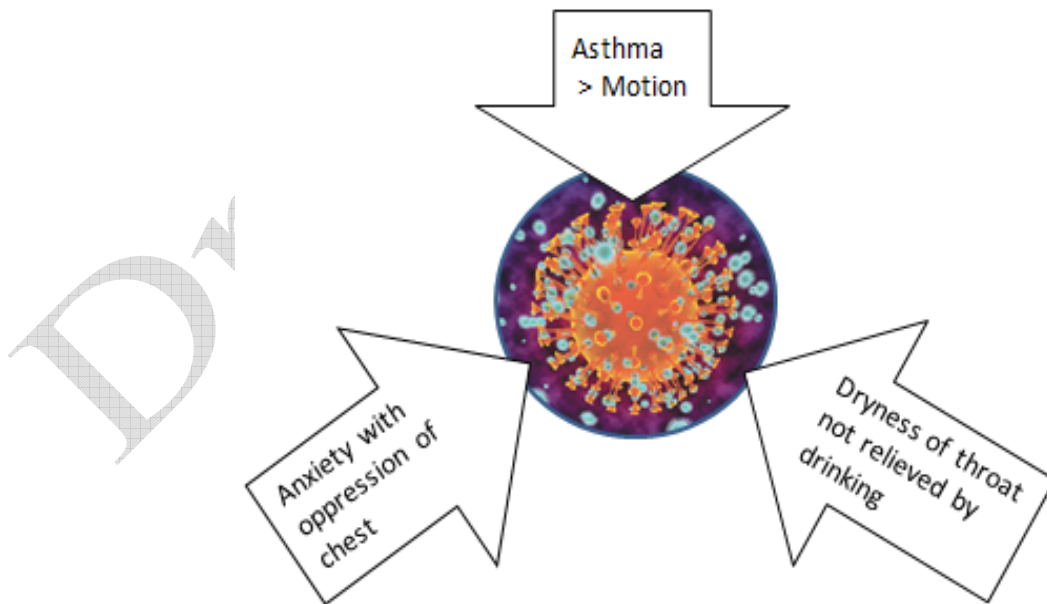
- **Pathology:**
  - Hepatization of left lung in last stage, so cyanosis is there initially at clavicular region (Thuja, cupr. met) and later on the whole chest like ecchymosis
  - Sometime so much so severe that it can cause *loss of vision*
- **Golden checkpoints:**
  - O/E respiration difficult while touching the larynx (Belladonna and Apis-Mel).
  - The most striking sign is - *cannot wear a mask but can cover mouth by hand*(cupr met, argentum nit, ammonium carb)
- **Posture:**
  - Better by sitting erect and bend slightly forward (Spongia)
- **Breathing:**
  - *Crocking respiration*
  - *Blowing type breathing*
  - *Chocking cough as soon as falling sleep, with constriction in the larynx at night* (phosphorus, sulphur)
  - Gasping respiration mostly worse at night and better by lying on the left side, by cold air and fanning from distance
- **Symptoms:**
  - Stitching pain in trachea while coughing with expectoration which tastes like wheat flour
  - Cough spasmodic with sensation as if the some fluid went into the trachea or respiratory tract
- **Mental symptoms:**
  - Suspicious, delusion that he might be send in quarantine
  - Fear of suffocation on going to sleep
  - *Delusion he is going to die by this disease*
- **Others:**
  - Fever aggravated from sour food
  - Chill or heat starts from lower portion of body and spreads upward (from ankles to abdomen or chest)
  - Dreams of one's own funeral

### Second & third stage Symptoms:

- *Bending head backward aggravates*
- *Sensation of lump in throat*
- *Pain in the throat radiates to the tongue*
- *Constriction or crumblike feeling in the trachea*
- *Sleep aggravates the croup*
- *Tongue is oscillating on protruding*
- *Thirsty but cannot drink*
- *Gums are gangrenous or bluish*
- *Bleeding tongue*
- *Fear of death while falling asleep due to suffocation*
- *Excessive irrelevant talking*
- *Talks in English or in a language which is not his native*
- *Boaster*

### LOBELIA INFLATA

- ❖ 1<sup>st</sup> & 2<sup>nd</sup> stage of medicine ; Chilly + thirsty



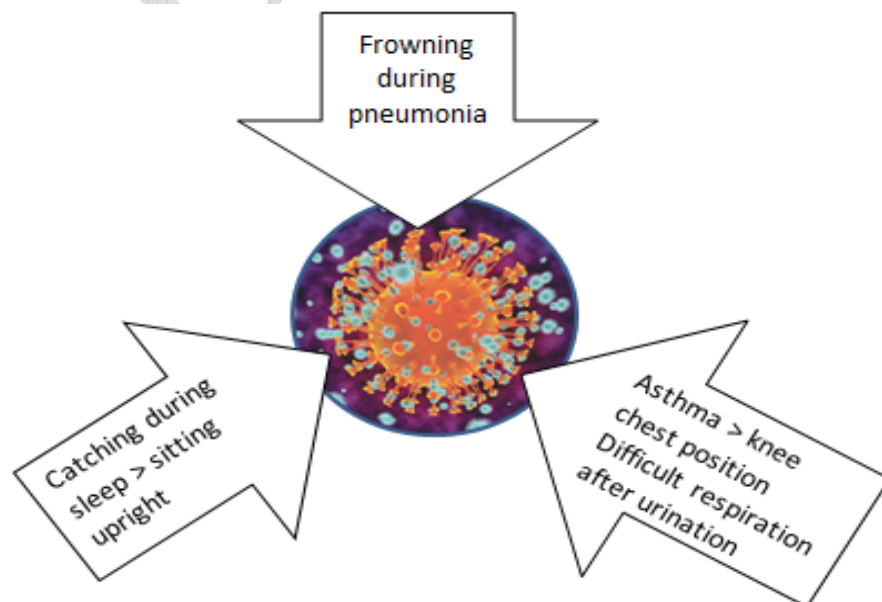
- **Pathology:**

- Emphysema; Hepatization; Paralysis of lung

- **Golden check points:**
  - Sensation of a lump in throat pit, tries to push it upwards by hawking
- **Posture:**
  - Lying aggravates and *motion ameliorates in asthma*
- **Breathing:**
  - Difficulty in breathing after warm food
  - Long respiration (Antim tart and opium)
  - Slow expiration
- **Symptoms:**
  - Right sided sinusitis and pains are better by pressure
  - Yawning with sneezing
  - Stagnation of blood in chest
  - *Dryness of the throat not better by drinking*
- **Mental symptoms:**
  - Fear of death with respiratory disease
  - *Anxiety with the oppression of chest*
- **Others:**
  - Fever cold water amelioration (caust, cupr met)

## LYCOPodium CLAVATUM

❖ *Medicine of All Stages ; Hot + Thirst less*



- **Pathology:**
  - Inflammation starts from the lower lobe of the right lung but hepatization starts from the lower lobe of left lung
  - More suitable for elderly people
  - Hemoptysis
- **Clinical Symptoms:**
  - *1st stage:* Severe catarrh in the right nostril in the first stage with pain in throat, more on the right side and better by warm water. Stitching pain throat while sneezing.
  - *2nd stage:* Fan-like motion of nostrils with respiratory difficulty. Gurgling sound from esophagus while sleeping. Bronchitis and primary state catarrh with obstruction of the nose.
  - *3rd stage:* O/E: Protruded tongue, which turns towards the right side. *Frowning on forehead*
- **Posture:**
  - Lying on back aggravates.
  - Puffing type of expiration.
  - Better by sitting upright in asthma.
- **Breathing Pattern:**
  - Rattling in chest during fever
  - Wheezing on expiration
  - Whistling on coughing
  - *Catching during sleep, better by sitting upright*
- **Symptoms:**
  - *1st stage:* Itching in the nose during sleep which wakes up the patient. Nostrils feel corrosive. Dryness of throat while lying down and on swallowing.
  - *2nd stage:* Pain in trachea from where expectoration detaches.
  - *3rd stage: Difficult respiration after urination* (Thuja - Difficult respiration while urinating).

- **Mental symptoms:**

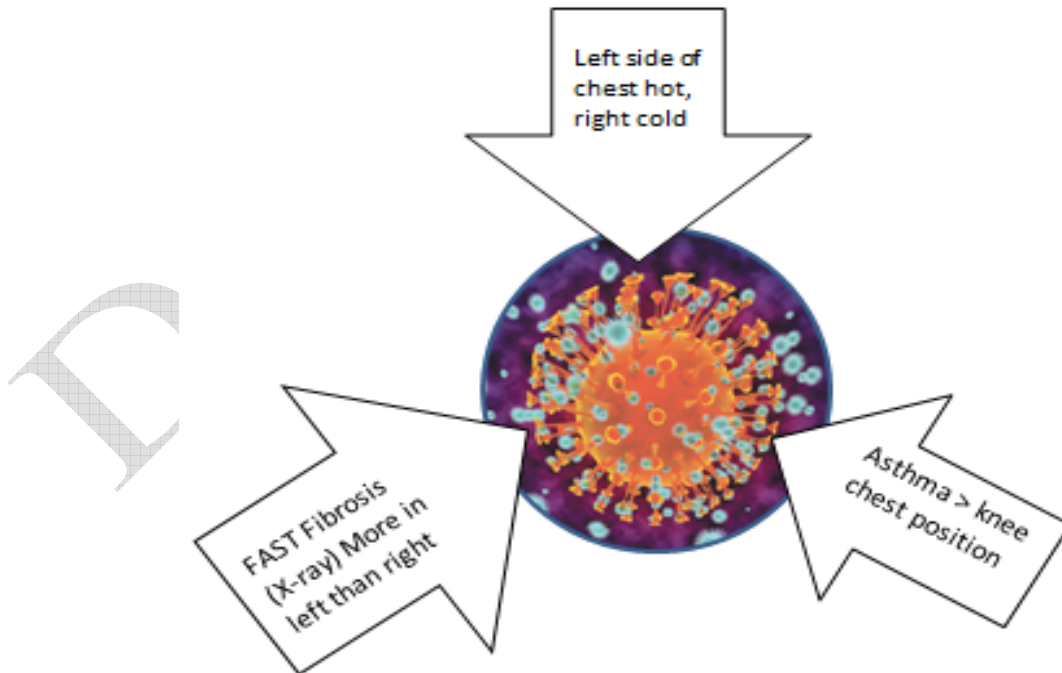
- Anxiety and anticipation but is able to cope up when the time comes (Before getting the lab tests he is very much anxious but after the test done, even if positive, he cope up it very well)
- Frown on the face (wrinkled skin of forehead) during pneumonia.
- Fear of death and makes farewell messages

- **Others:**

- Fever increases between 4 to 8 pm and has a following trend: ***fever - chill (but face is hot) - perspiration (sour)- thirst***
- Headache better by expectoration, unable to raise his head due to congestion
- Other affected areas are liver and kidney

## MEDORRHINUM

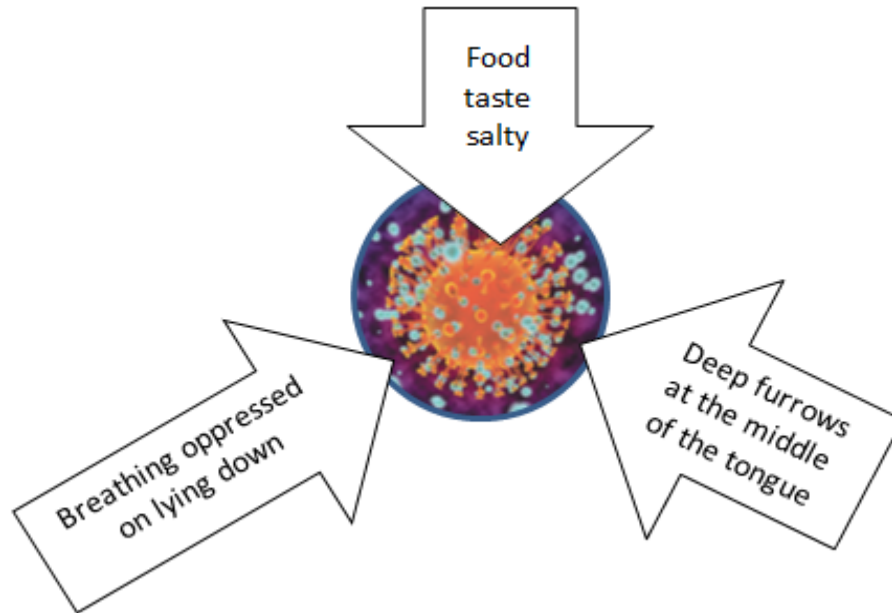
❖ *2<sup>nd</sup> & 3<sup>rd</sup> stage medicine; Hot*



- **Pathology:**
  - *Fibrosis of lungs (left > right)*
  - Bronchiectasis
  - Paralysis of left lung
- **Golden checkpoints:**
  - *Electric hair*
  - Better by lying on abdomen
- **Posture:**
  - Aggravated lying on back
  - *Better in knee-chest position in asthma* or lying on abdomen, four-footed (horse like position)
- **Breathing:**
  - Disposition to hawks
  - Asthmatic
- **General Symptoms:**
  - *Protruding the tongue gives relief*
  - Pain in forehead
- **Mental Symptoms:**
  - Presentiment of death with vomiting
  - Feels difficulty in narrating symptoms
- **Others:**
  - Albuminous urine
  - Fever better after urination
  - Chilliness before urination
  - *Left side of chest feels hot and right side cold in fever* (Opposite of Ignatia)

## NATRUMMURATICUM

❖ 1<sup>st</sup> and 2<sup>nd</sup> stage of Medicine, *Hot + Thirsty*

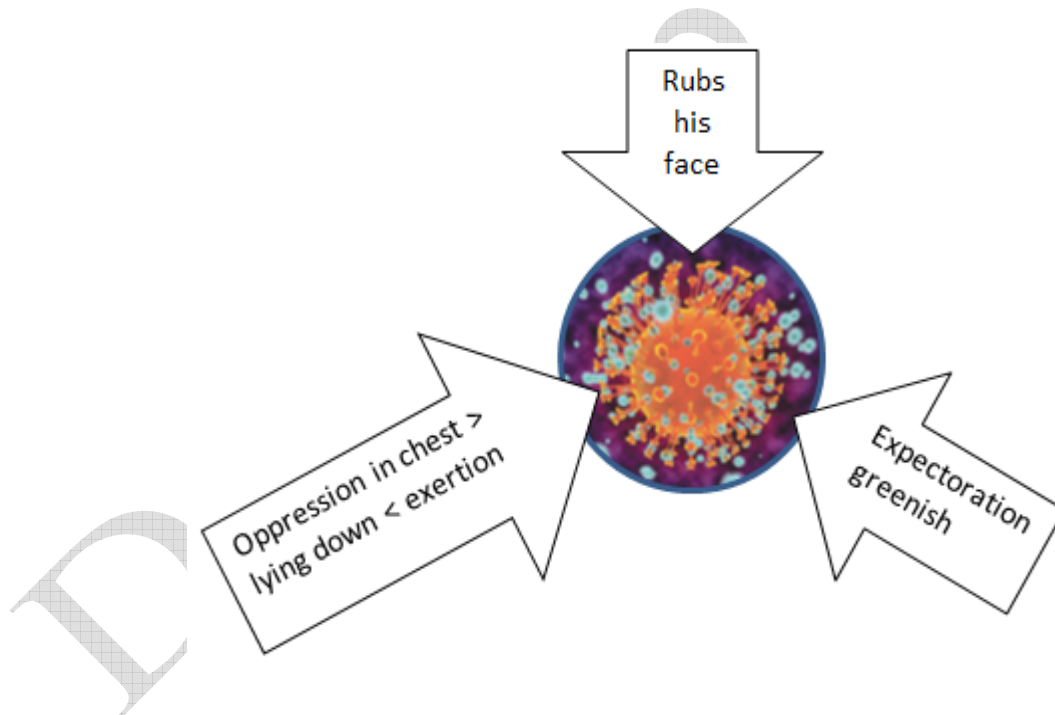


- **Pathology:** bronchitis, catarrhal, pharyngitis
- **Golden check points:**
  - Anxiety from deep inspiration, red discoloration of left side of nose
  - Roughness of lower lip with furrow at middle of tongue
- **Posture:**
  - Lying down on back causes oppression of chest
- **Breathing:**
  - Accelerated while standing and drinking
  - Whistling of expiration
- **Symptoms:**
  - Coryza from uncovering the head, from imaginary order of food
  - Sneezing before coughing (Ipec)
  - Red tongue with insular patches
  - Unilateral numbness of tongue
  - Food and water taste salty
  - Egg white like discharge from throat

- **Mentals:**
  - Ailment from or aggravated after being rejected or abandoned due to disease by family, office or from punishment by government
  - Feels pity on account of his misfortune.
  - *Fear of injuring others and being injured by others*
- **Others:**
  - Complaint of lungs accompanied by eye trouble
  - Hammering headache, pain vertex to forehead
  - Fever beginning from stomach

## **NATRUM SULPHURICUM**

❖ *Medicine of all stages but mainly of 2<sup>nd</sup> Stage , hot + thirsty*



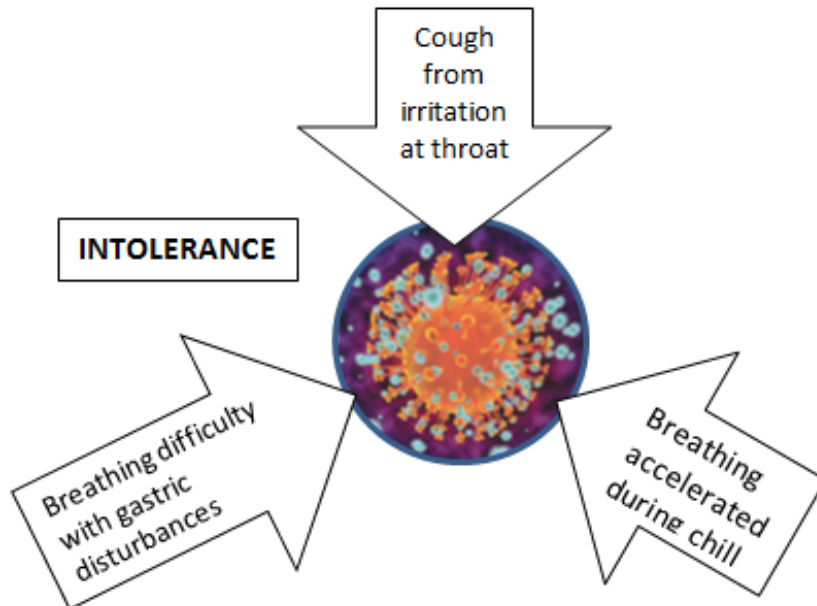
- **Pathology:**
  - Bronchitis or pneumonitis in lower lobe of left lung with a superadded bacterial infection
- **Clinical Symptoms:**
  - Diabetic patients who are affected by viral infections



- **Golden checkpoints:**
  - Jerking of the head towards the right
  - X-ray: opacity in left lower lung
  - The patient rubs his face intermittently
  - The patient has Green discoloration at the back or base of the tongue
- **Posture:**
  - Oppression in chest and asthma better by lying down and aggravation from exertion
  - Cough aggravated by lying and better by sitting. Stooping aggravates
- **Breathing:**
  - Arrested while sitting, deep breathing and increased respiratory rate
  - Routinely inspiration is painful
- **Symptoms:**
  - Viral infection in patients who lives in damp atmosphere or damp cellars and those suffering from diabetes mellitus
  - All discharges are greenish in color, offensive and purulent
  - Postnasal dropping of salty fluid is a marked symptom in the first stage
- **Mental symptoms:**
  - Sadness during respiratory distress, wants to commit suicide but restrain him by force or self-control
- **Others:**
  - Headache with bitter taste in mouth and electric like shocks in vertex
  - Chill in the afternoon: icy chill with Goosebumps

## NUX VOMICA

❖ 1<sup>st</sup> and 2<sup>nd</sup> stage remedy; Chilly+ thirsty+intolerant



- **Pathology:**
  - Hemorrhage in lungs in alcoholics especially after anger
- **Golden check points:**
  - Desire to loosen the clothes
  - Cough from pain in throat pit
- **Posture:**
  - Sitting or rest ameliorate, ascending agg.
- **Breathing:**
  - Accelerated during chill with anxiety
  - Rapid expiration with difficult inspiration,
  - Breathing impeded
  - Wheezing during sleep
- **Symptoms:**
  - Gastric disturbance with breathing difficulty
  - Coryza with fluent discharge in room and better in open air
  - Scratching and roughness of throat during coryza,
  - Dry cough from midnight to day break, better by lying on side

- **Mentals:**

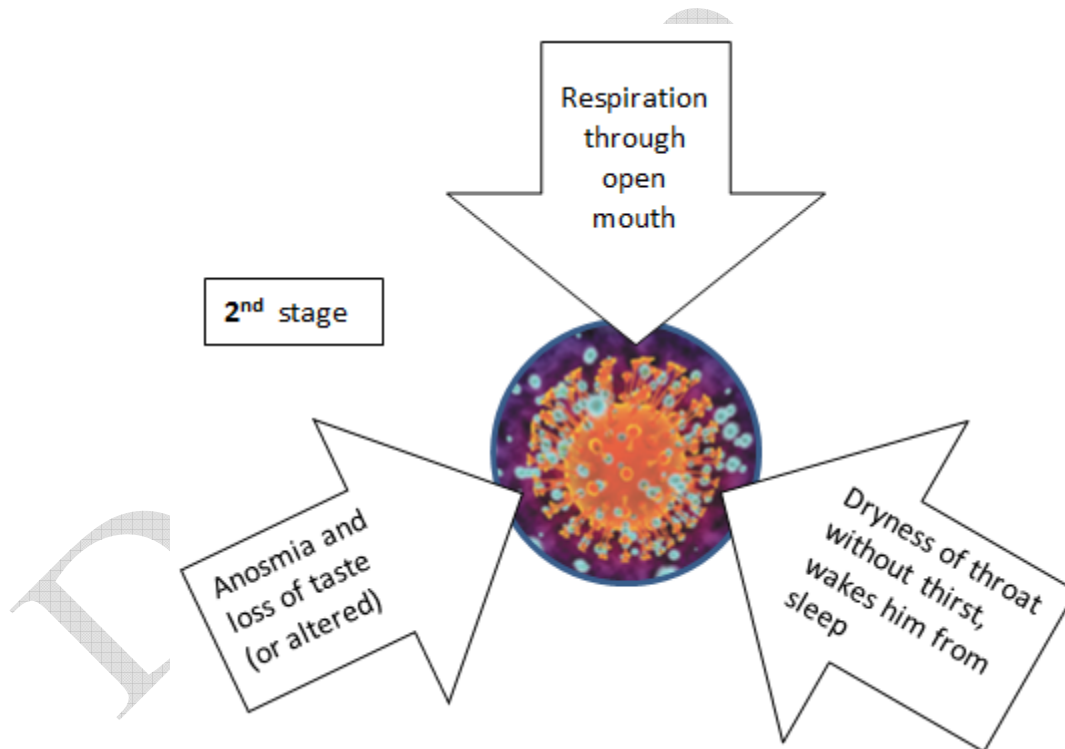
- Nux vomica is mostly selfish, squander to himself, fear of death on going to sleep
- Loquacity, talks about his health

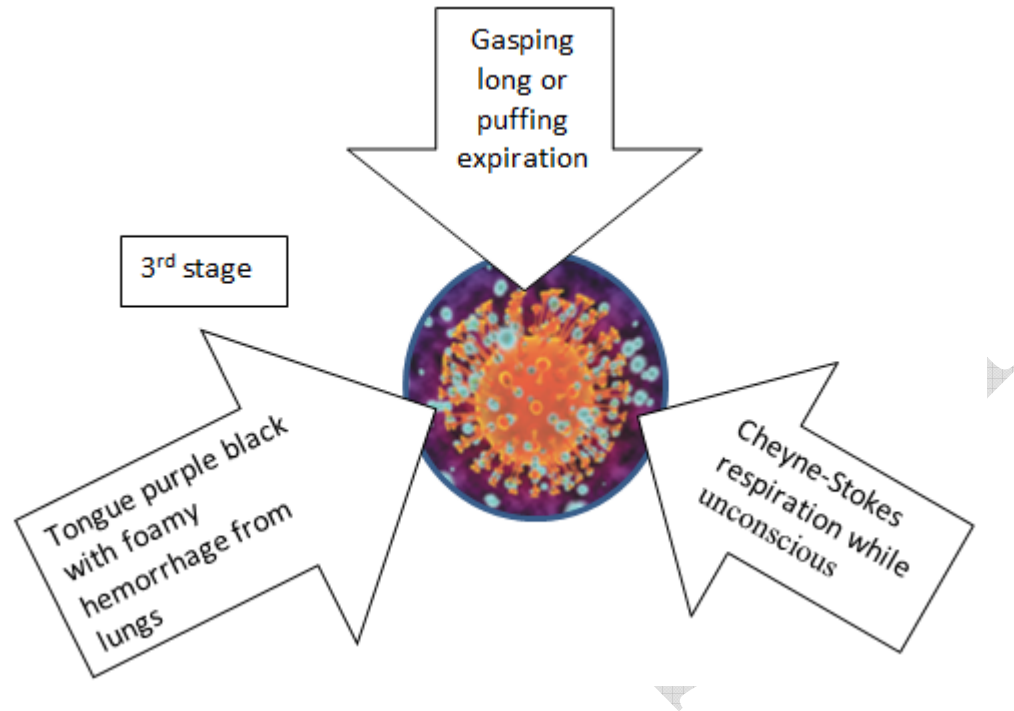
- **Others:**

- Fever returns every two to three days
- Fever with shivering, perspiration with heat
- Shivering better by lying down
- Pain in forehead compels him to close the eyes

## OPIUM

❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, Hot + thirst less



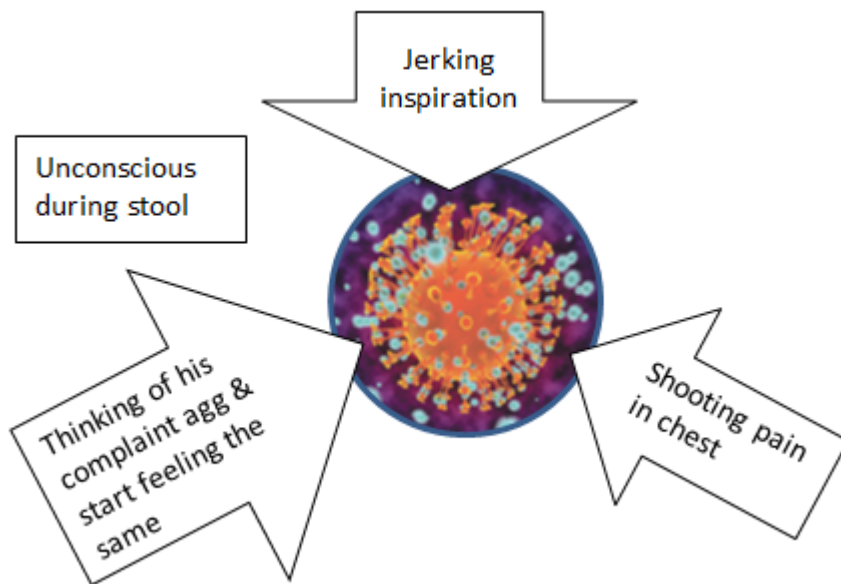


- **Pathology:**
  - Hepatization of lungs, emphysema, congestion of lungs especially after fright
- **Golden checkpoints:**
  - Tongue purple-black, foamy or frothy hemorrhage from lungs<sup>3</sup>
- **Posture:**
  - Respires through an open mouth
  - Dyspnea from sleep
- **Breathing:**
  - Slow respiration and snoring when asleep or unconscious
  - Cheyne-Stokes respiration while unconscious
  - Gasping long or puffing expiration and slow inspiration (Antim tart)
  - Respiration unequal during sleep
- **Symptoms:**
  - Contented and elderly patients
  - Loss of smell (due to paralysis or destruction of nerve endings)
  - Taste either lost or altered
  - Dryness of throat without thirst, awakens from sleep to avoid suffocation

- **Mental symptoms:**
  - Memory active during fever
  - Quiet and contented
- **Others:**
  - Fever with a red-hot face and profuse clammy perspiration
  - Pain in the base of the brain

## OXALIC ACIDUM

❖ Chilly +thirst less

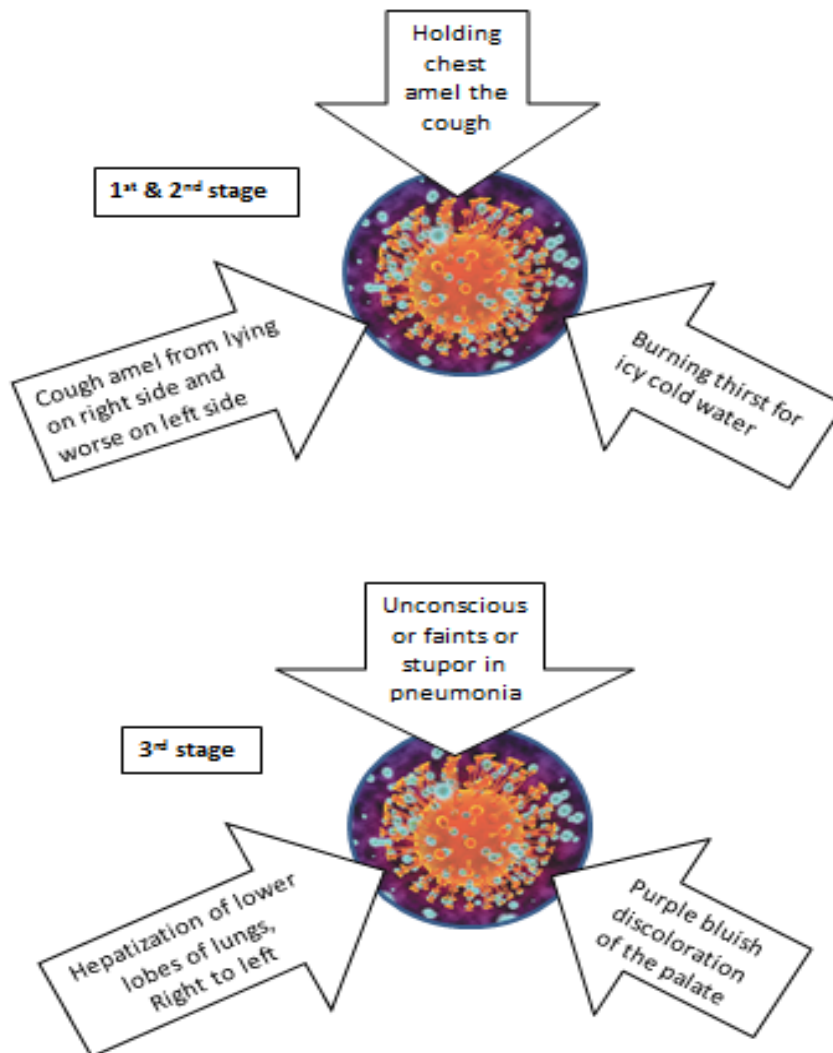


- **Pathology:** left lower lobe of lung is affected
- **Golden check points:**
  - *Tip of the nose is red which extends to whole right side of the nose*
  - *Blackish lump in centre of expectoration*
- **Posture:**
  - Aggravation from lying down because it causes severe palpitation
- **Breathing:**
  - **Jerking inspiration**
  - Respiration impeded with shooting pain in the chest

- **Symptoms:**
  - **Unconscious during stool**
  - Loss of taste with mucus on the tongue
  - Stitching pain in larynx in a spot
- **Mentals:**
  - When thinks of the problem, he starts feeling the same in himself
- **Others:** febrile heat only during the day time.

## PHOSPHORUS

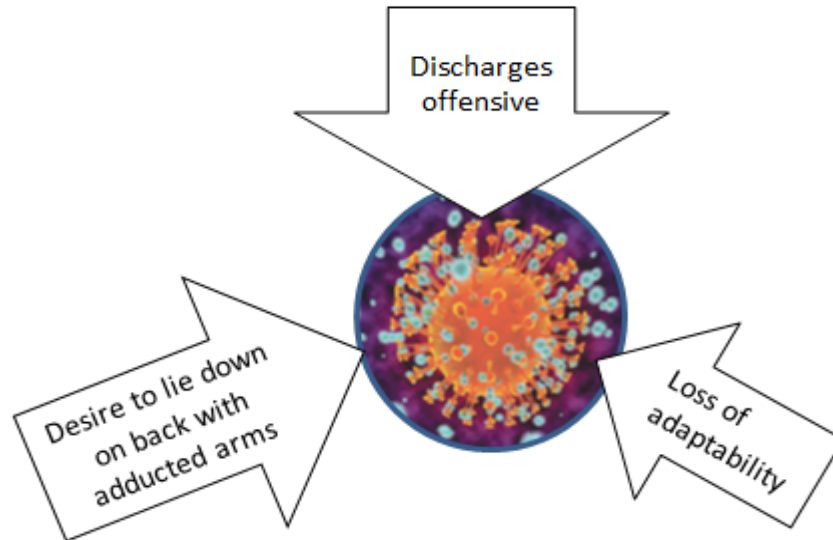
❖ Medicine for all stages; Chilly + Thirsty



- **Pathology:**
  - Gangrene of lung after pneumonia
  - Hepatization of lung, right to left lower lobe of the lung
  - *Aggravated from lying on left and better by lying on the back and right side*
- **Clinical Symptoms:** Chilly, thirst for cold water.
- **Golden checkpoints:**
  - Fan-like motion of nasal wings when the patient is nervous
  - Purple bluish discoloration of the palate with scraping sensation
  - Redness of face with dyspnea
- **Posture:**
  - Cough better by lying on the back and right side but aggravation by lying on the left side
  - Holding chest ameliorates
- **Breathing:**
  - Stridulous respiration in the evening when falling asleep
- **Symptoms:**
  - *First stage:* coryza with nasal discharge flowing to posterior nares to trachea while lying down; sneezing when putting hands in water; washing the face ameliorates.
  - *Second stage:* itching in throat pit with sensation as if the flesh is hanging in the larynx which causes cough. Paroxysmal cough better sitting and nervous cough when a new person enters in the room
- **Mental symptoms:**
  - Anguish when alone, wants therapy for anxiety
  - Unconscious or faints or stupor in pneumonia
  - Fear of suffocation in asthma
- **Others:**
  - Fever aggravates urination (Rhus tox)
  - Thinking aggravates the fever
  - Burning thirst for cold water
  - Internal heat external coldness
  - Headache extends to zygoma

## PSORINUM

❖ *1<sup>st</sup> & 2<sup>nd</sup> stage medicine, chilly + thirsty*



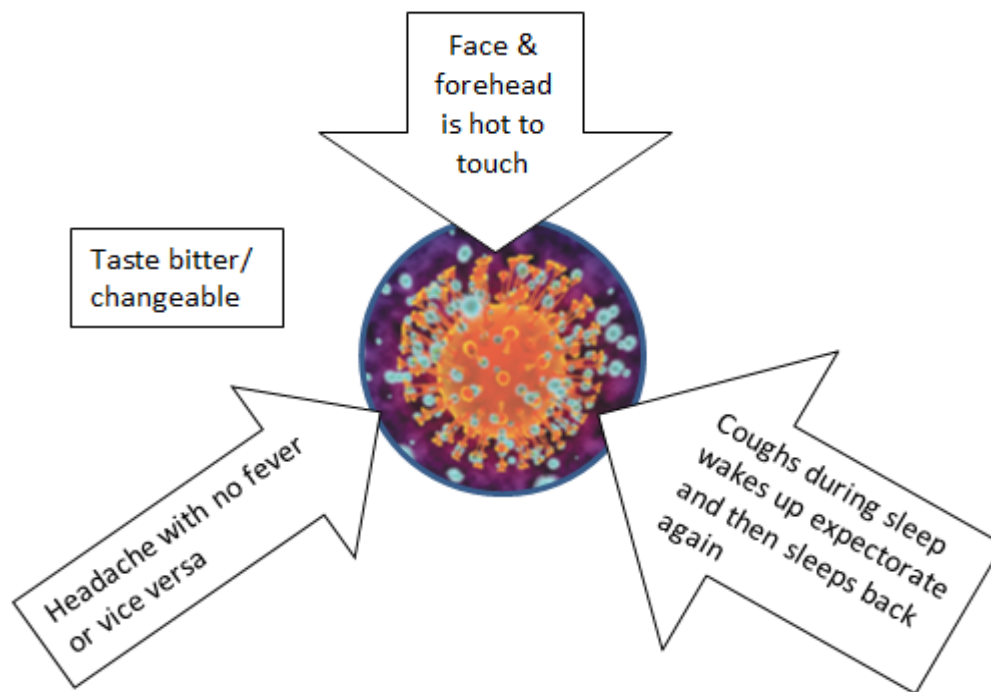
- **Pathology:**
  - Pneumonia - both lungs lower lobes
  - Emphysema,
  - Bronchiectasis with blenorrhoea
- **Clinical:**
  - Hemoptysis, hot blood with burning in lungs,
  - Black spots in throat
  - Any problem on adduction of arms
- **Posture:**
  - Cannot sit either straight or bending backward or forward but patient desires to lie on the back, arms are holding away from the body even during sleep
- **Breathing pattern:**
  - Postural change arrests or impedes the breathing
- **Symptoms:**
  - Offensive discharges +urinous taste in mouth
  - In second stage - cough due to irritation in larynx and trachea; agg on bending head backward, sitting; better by lying on back
  - Desire for covering in fever



- **Mentals:**
  - Fear of death with dyspnea
  - Loss of adaptability
  - Do not leave things until they get decayed
- **Others:**
  - Skin affections especially axillary region

## PULSATILLA

- ❖ 1<sup>st</sup> and 2<sup>nd</sup> stage, Hot + thirst less; a very sensitive and compassionate remedy as the receptors are numerous, also called a medicine without barrier

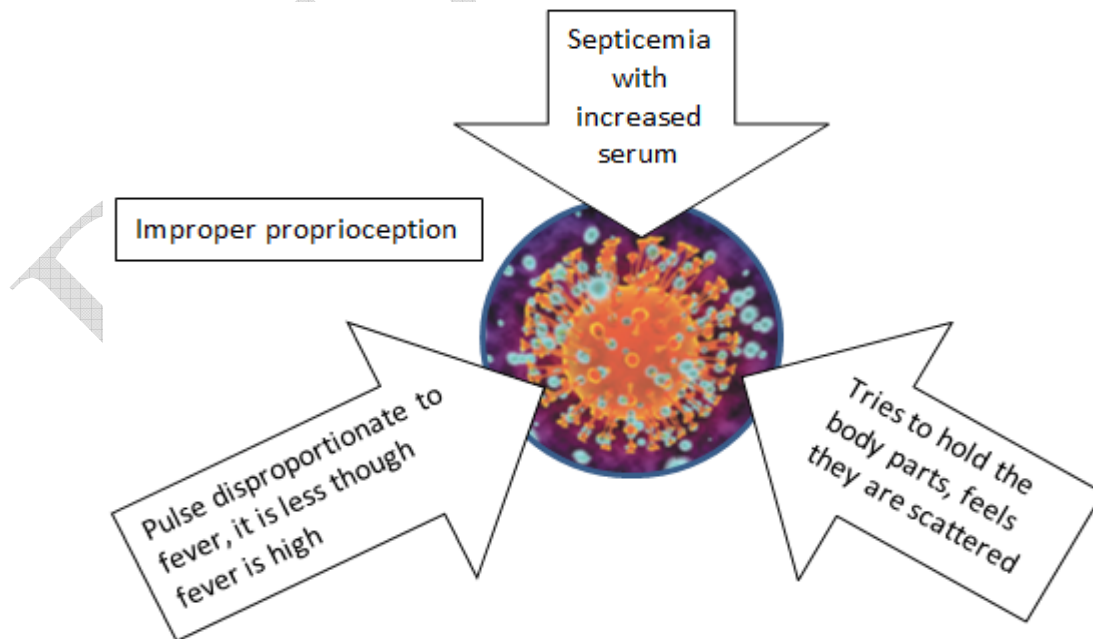


- **Pathology:**
  - **Pneumonia with white discoloration of the tongue**
- **Clinical :**
  - Anosmia, loss of taste or bitter
  - **Face & forehead is hot to touch**
- **Posture:**
  - The patient feels that the respiration is difficult more on left side
  - Difficult respiration sometimes with vertigo
- **Breathing pattern:**

- Increased or irregular respiratory rate
- Gasping while coughing and loud inspiration while sleeping
- **Symptoms:**
  - **1st stage: Irritation/itching/crawling sensation in throat, trachea or bronchioles**
  - **2nd stage: Constriction of throat and trachea.** Coughs during sleep then expectorate and sleeps back again. Pain epigastrium.
  - Headache only when fever is not there (syphilitic rubric +++), when fever is there then no headache.
  - On auscultation crackling sound (like paper is rubbed or scratched against itself.
  - Inspiration with coarse sound
  - Respiration difficult more on left side with vertigo
  - Thirst less in spite of dryness of mouth and throat
  - Vertigo and occasionally tinnitus
- **Mental symptoms:**
  - Highly emotional with involuntary weeping in the diseased state

## PYROGENIUM

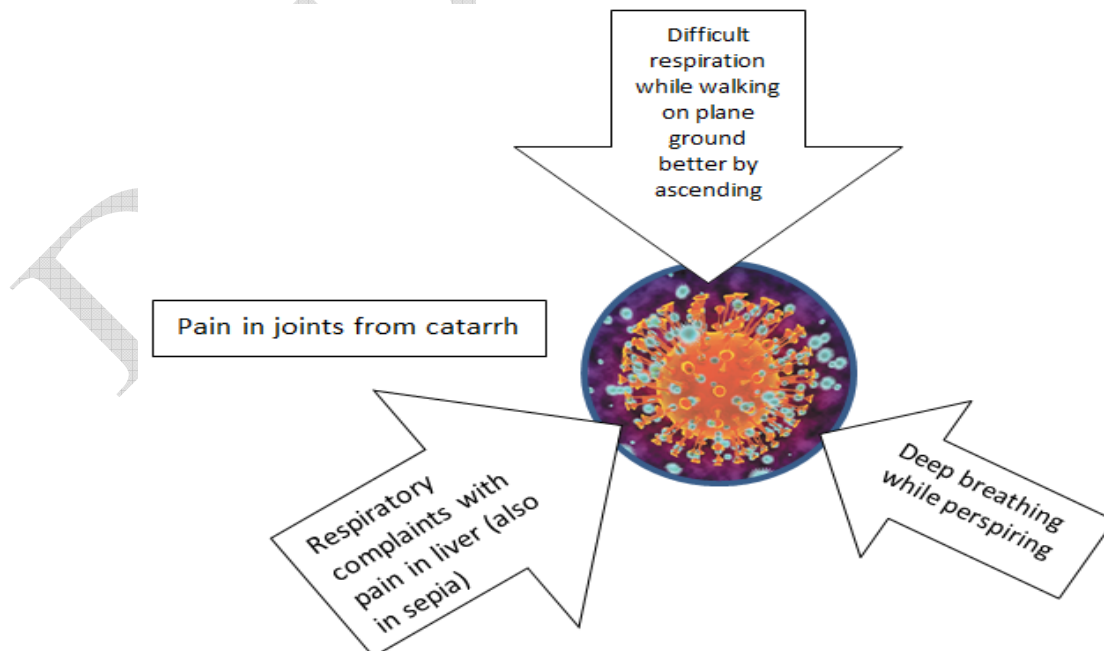
❖ 2<sup>nd</sup> & 3<sup>rd</sup> stage medicine, Chilly (everything is in multiple)



- **Pathology:**
  - **Septicemia, Lung and kidney involvement is an entry point**  
(increased serum albumin)
- **Clinical:**
  - X-ray – cavities in right lung
  - Flu
- **Posture:**
  - Improper , proprioception
  - Gesture – tries to hold the parts, feels his body parts are scattered
- **Breathing pattern:** *Accelerated.*
- **Symptoms:**
  - Septicemia with restlessness and irritation
  - High grade fever though pulse is not fast or high, no co-ordination
- **Mentals:**
  - Confused state of the identity, of the organs or body parts, on asking where are your ears he would hold nose etc.

## **RANUNCULUS BULBOSUS**

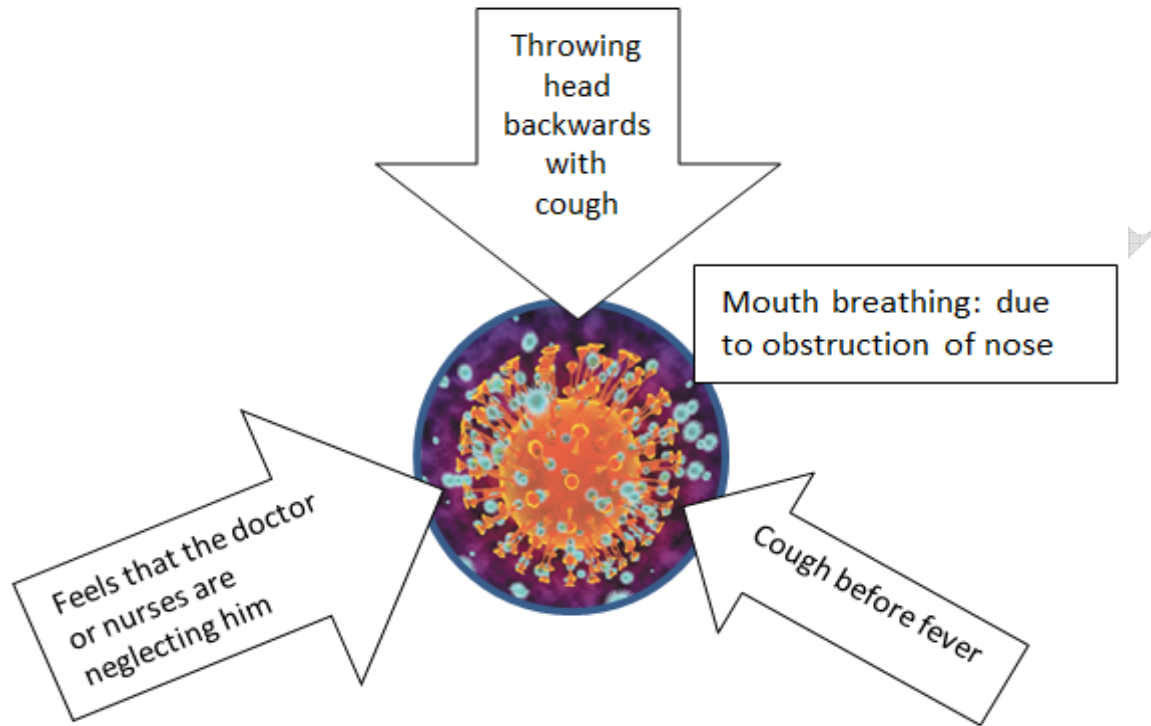
❖ 2<sup>nd</sup> stage medicine , Chilly + thirsty



- **Pathology:**
  - Pneumonitis and pleuritis after exposure to cold air when overheated.
- **Golden check points:**
  - Fever during gangrene,
  - Difficult respiration when walking on plane or level ground but better when ascending
- **Posture:**
  - Lying on right side agg
  - Bending forward ameliorate
- **Breathing:** Deep while perspiring
- **Symptoms:**
  - Obstruction of nose with hay fever
  - Pressing pain at root of the nose
  - Burning at velum or at soft palate
  - Altered taste during diseased condition
  - Respiratory symptoms with pain in liver(sep)
  - Headache from change of temperature from warm to cold
- **Mentals:** Delusion that senses are vanishing
- **Others:** Pain in joints from catarrh

## SAMBUCUS NIGRICANS

❖ 1<sup>st</sup> stage medicine mainly, chilly+ thirsty

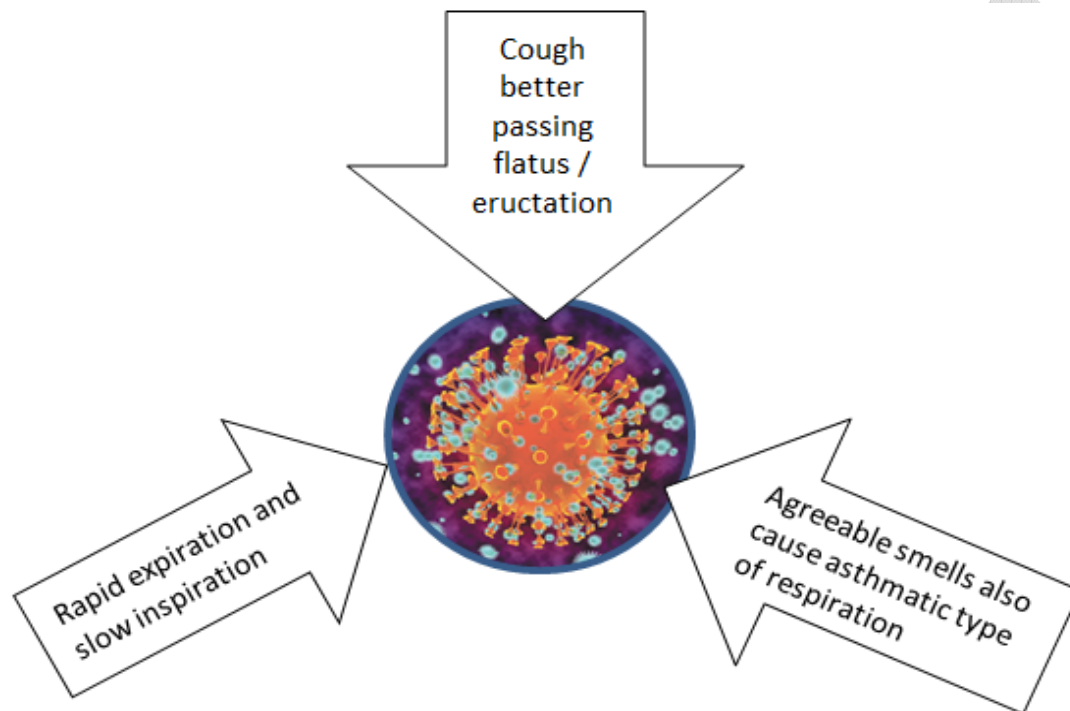


- **Pathology:**
  - Inflammation of nasal mucosa
  - Laryngitis and bronchitis
- **Golden check points:** *open mouth accompanied by cough.*
- **Posture:** *throwing head backward with cough.*
- **Breathing:**
  - Stertorous, impeded while lying or during sleeps
  - Wheezing after midnight
- **Symptoms:**
  - Obstruction of nose
  - Asthma with profuse perspiration
  - Sense of oppression behind sternum
- **Mentals:**
  - Feels doctors and nurses are neglecting her or him
  - Restlessness with cough
  - Weeping with respiratory problems

- **Others:**
  - Cough before fever
  - Fever, burning heat during sleep and perspiration just after waking

## SANGUNARIA CANADENDIS

- ❖ 1<sup>st</sup> stage medicine, chilly+ thirsty

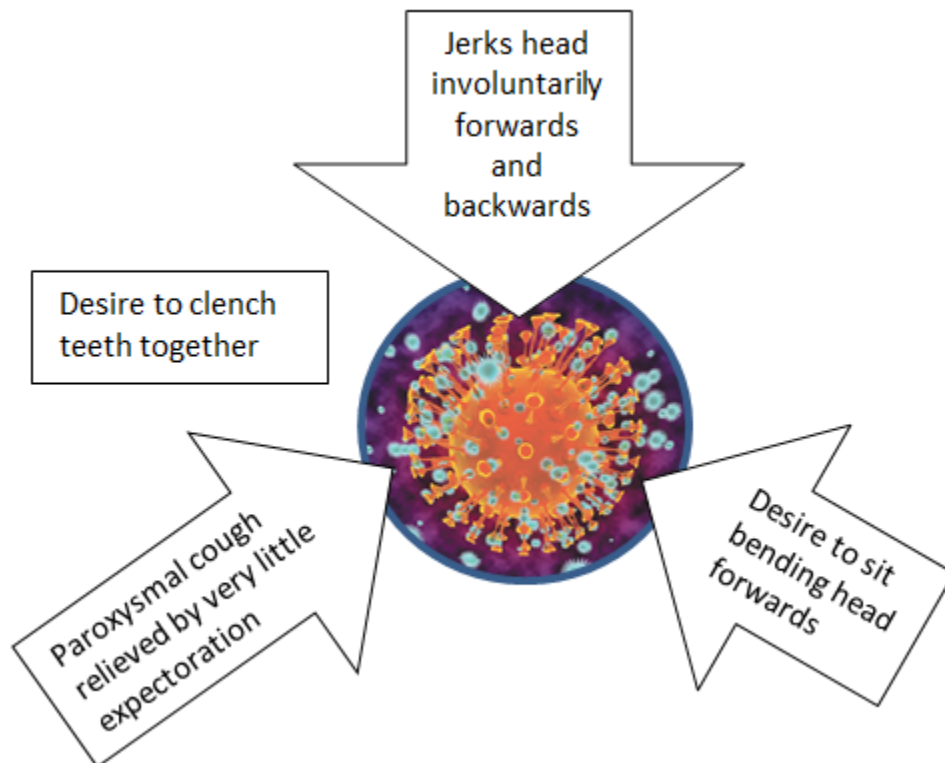


- **Pathology:** pathology in the left upper lobe of the lung,
- **Golden checkpoints:**
  - Cough better passing flatus or eructation
  - The crawling sensation in throat pit
- **Posture:**
  - Lying on side amel
  - Cough better by sitting
- **Breathing:** rapid expiration and slow inspiration
- **General symptoms:**
  - Even agreeable smells like flower etc. causes asthmatic type of respiration
  - Cough during and after influenza

- **Mentals:**
  - Helplessness feeling or feeling of paralysis
  - Anxiety and sighing in the morning.
- **Others:**
  - It has a severe congestive fever
  - Headache right side

## SEPIA OFFICINALLIS

❖ *Medicine of all stages, Chilly + thirst less (running backwards or towards past or origin); chilly + thirst less*



- **Pathology:** Affection of central lobe of the right lung (right to left).
- **Clinical Symptoms:** Retrograde thoughts, behavior or pathology.
- **Golden checkpoints:**
  - Desire to clench teeth together (watch the face)
  - Likes to eat crunchy food only
  - Yellow spots on nose
  - Jerks the head involuntarily, forward and backward while sitting

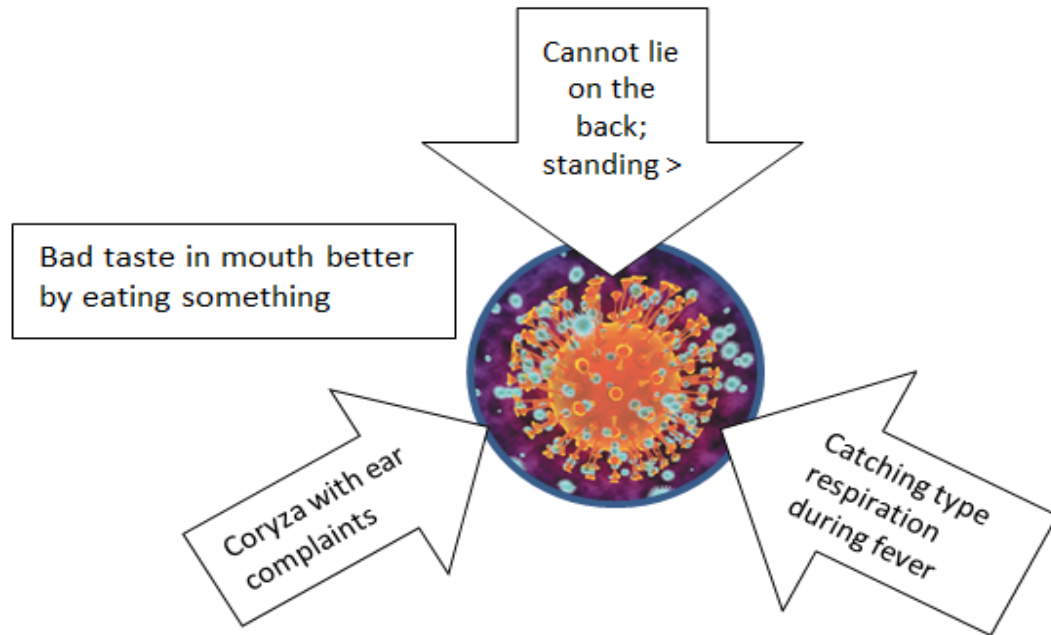
- **Posture:**
  - Desire to sit with bending the head forward
  - Running ameliorates while walking slowly aggravates
- **Breathing:**
  - Respiration deep and slow
  - Wheezing
  - Cough with rattling in trachea before expectoration
- **Symptoms:**
  - Pain in right hypochondrium or liver in respiratory distress
  - Dry cough at night during sleep on inspiration
  - Cough from constriction of chest
  - Symptoms as if one is suffering malaria erratically
  - Yellow and glue like mucus in the throat
  - Sneezing at 6 am
- **Mental symptoms:**
  - Inclination to sit stiff
  - Restlessness from the congestion of chest or lungs
  - Delusion that she is unfit for life so desire to commit suicide
  - Angry with self and others as well
  - Indifference in general
- **Others:**
  - Bitter taste of mouth when ill
  - Expectoration bloody in evening and white at night
  - Fever and chill without thirst
  - Headache, from the forehead to the base of the brain better by eating

***Note: Medicines For Bad Effects of Radiation or Electromagnetic Waves Are - Sepia, Lac delf, Kali-Phos, Nat-Carb, Phosphorus and Sulphur.***



## SILICEA TERRA

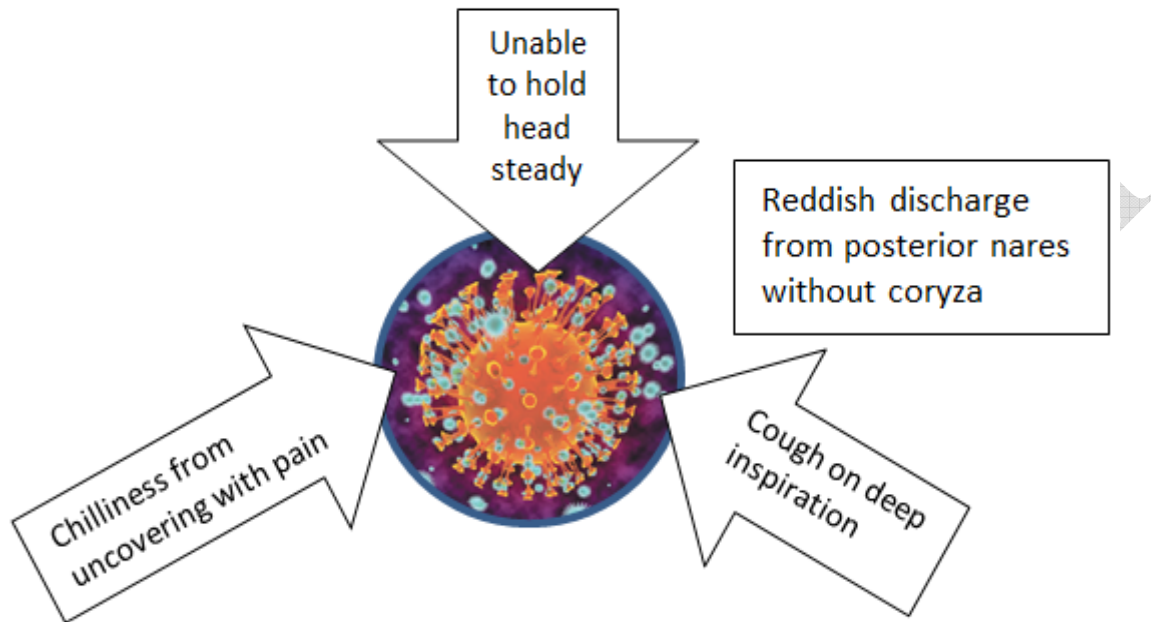
❖ 1<sup>st</sup> & 2<sup>nd</sup> stage medicine, Chilly+ left sided+ thirsty + desire covering



- **Pathology:** sinusitis, catarrhal, emphysema after pleuritis
- **Golden check points:**
  - Coarse and sandy hair
  - Redness of nose during exertion even while eating
- **Posture:** cannot lie on back, standing ameliorate.
- **Breathing:**
  - Difficult breathing from tickling in throat pit
  - Respiration, catching during fever
  - Respiration panting while walking rapidly
- **Symptoms:**
  - Coryza with ear complaint and there is no discharge in morning but fluent during whole day
  - Bad taste of mouth better by eating something
  - Soreness of larynx while breathing
  - Cough from uncovering feet or head
  - Offensive and granular expectoration
- **Mentals:** calm and non-arguing personality and unconscious on reprimands.
- **Others:**
  - Perspiration on the painful part of scalp
  - Fever at 11 am with chill and thirst

## SQUILLA MARITIMA

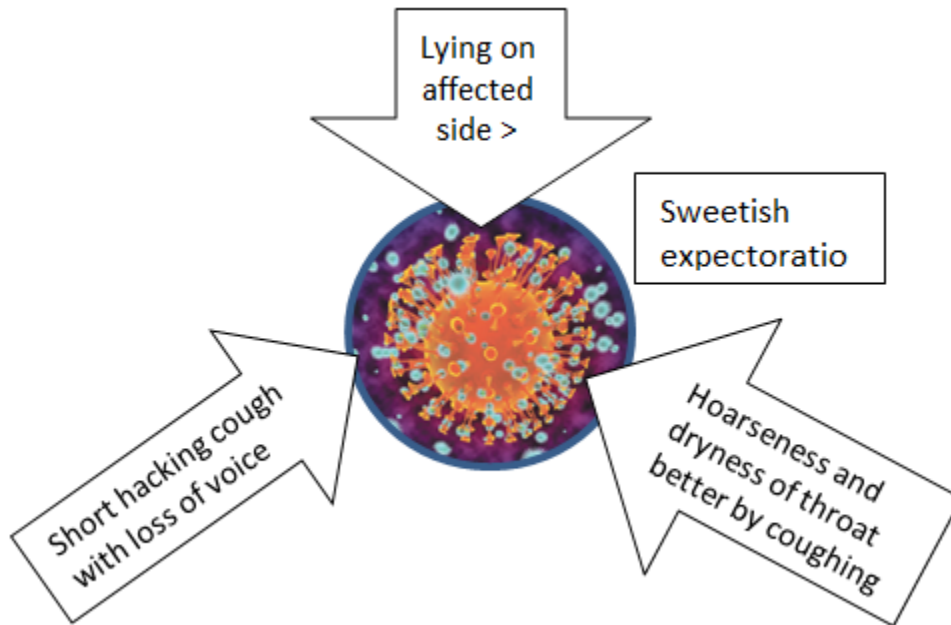
❖ 2<sup>nd</sup> stage medicine; chilly+left sided



- **Pathology:** broncho-pneumonia of old people.
- **Golden check points:**
  - *Unable to hold head steady*
  - *Cough on deep inspiration*
- **Posture:** cannot lie on right side.
- **Breathing:** rattling, loud, difficult, all are better after expectoration.
- **Symptoms:**
  - *Radish discharge from posterior nares without coryza*
  - *Tastelessness*
  - *Dry cough from cold drink and irritation in thyroid gland*
- **Mentals:** dullness and intoxicated.
- **Others:** *chilliness from uncovering and pain.*

## STANNUM METALLICUM

❖ 1<sup>st</sup> & 2<sup>nd</sup> stage medicine, *chilly + thirsty or thirst less*

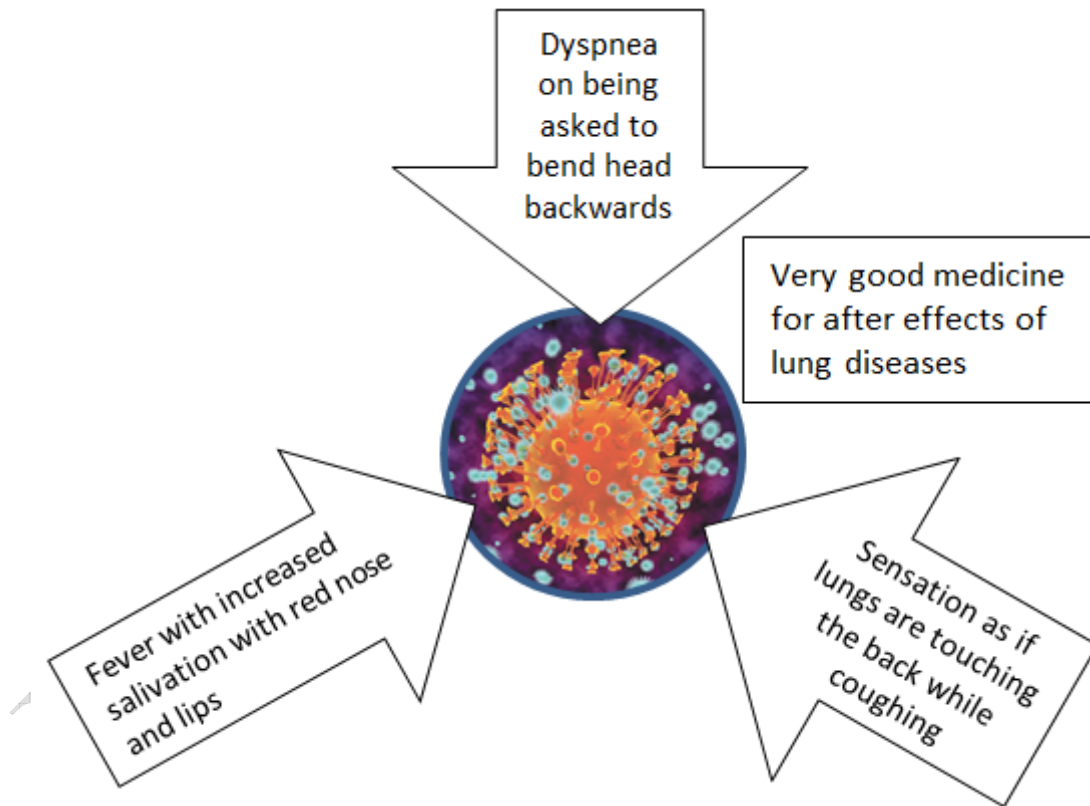


- **Pathology:**
  - Medicine of connective tissue (cartilage)
  - Patients may have a superimposed fungal infection
  - Bronchiectasis
- **Golden checkpoints:** Dyspnea on examination of the abdomen.
- **Posture:** Lying on affected side ameliorates opposite side agg.
- **Breathing:**
  - Deep breathing impeded due to weakness of chest
  - Arrested with stitching insides
  - Paroxysms of difficult in the evening
- **Symptoms:**
  - Desire to undress
  - Sinusitis
  - Hoarseness and dryness of throat (right-sided) or trachea, better by coughing
  - Short hacking cough with loss of voice
  - Cough from eating irritating food
  - Weakness after expectoration
  - Sweetish expectoration

- **Mental symptoms:**
  - Faintness after urination
  - Begging in sleep
- **Others:**
  - Headache in temples increasing and decreasing gradually
  - Fever with chills, perspiration and weakness
  - Better by rapid walking

## SULPHUR

❖ **Medicine of all stages, Hot + thirsty**

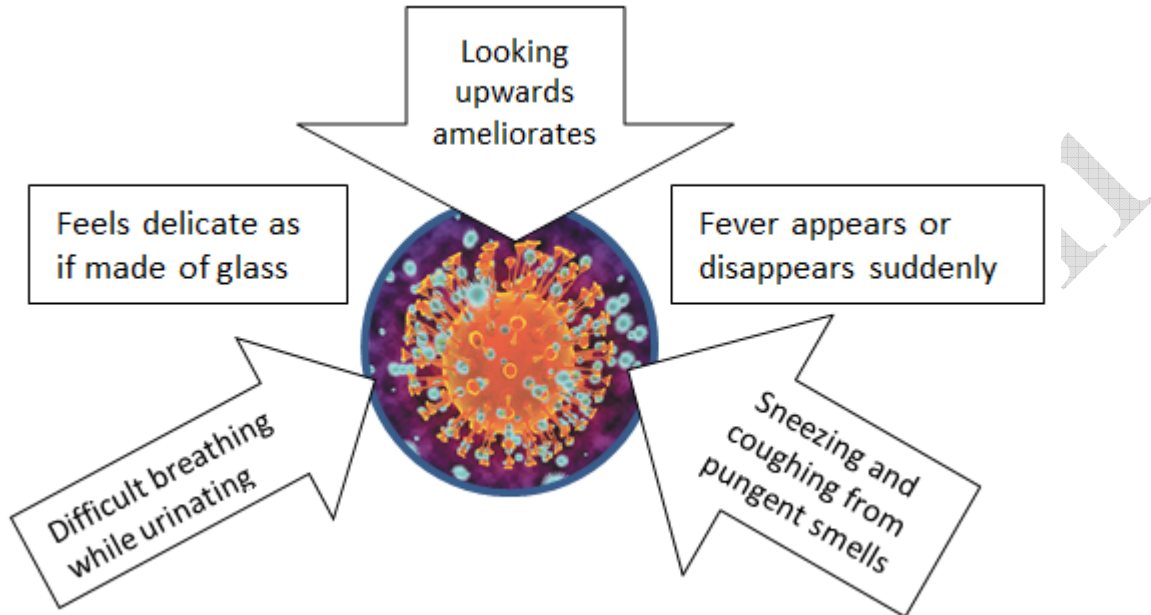


- **Pathology:**
  - Left apex of the lung is a favorable site
  - Pneumonia, hepatization of left lung especially upper lobe

- **Golden checkpoints:**
  - Dyspnea, if one is asked to bend arm backwards
  - Constriction in the chest when both arms are brought forward together
- **Posture:**
  - Lying on the left side and sitting up ameliorates
  - Lying on right side aggravates pain in pneumonitis better when lying on the back
- **Breathing:** Accelerated on first lying down and loud while lying on the right side.
- **Symptoms:**
  - Throat pain with desire for cold water
  - Sensation as if the lungs are touching the back while coughing
  - Constriction of chest better by respiration
  - Coryza, excoriating and bloody discharge from the nose
  - Painful dryness inside the nose
  - Sense of an imaginary odor as if of chalk
  - Rattling cough better by expectoration
  - Cold inspiration and hot expiration
- **Mental symptoms:**
  - After effects of lung diseases
  - Fear of contagion, thinks that an infection is being given by someone to him
  - Ailments from magnetism (earth)
  - Too religious
- **Others:**
  - Fever: with increased salivation and redness of nose and lips
  - Fever, feels heat in the whole body except the head
  - Brown discoloration of the tongue

## THUJA OCCIDENTALIS

❖ 2<sup>nd</sup> stage medicine not of much help in the third stage, Hot

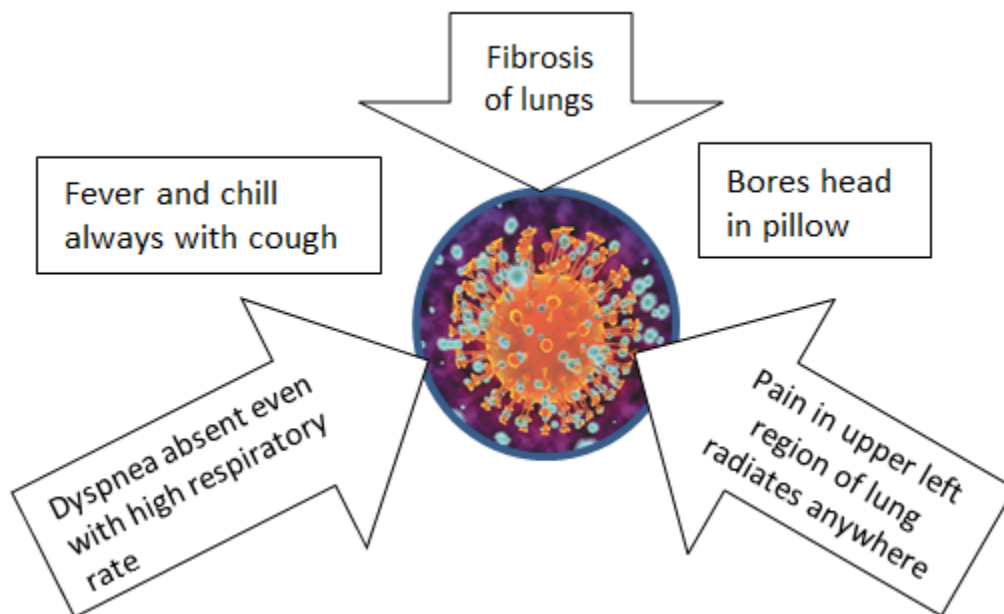


- **Pathology:**
  - Involvement of both lungs
  - Thuja is useful when the inflammation of the lung has been neglected
  - Cough is a prominent pathology
- **Posture:**
  - Looking upward ameliorates
  - Cough aggravated by lying on the left side, better on the right side
  - Oppression of chest while lying down
- **Breathing Pattern:** Impeded due to mucus in trachea, arrested while ascending stairs.
- **Symptoms:**
  - Coryza ameliorates most of the symptoms
  - Swallowing is impossible until mucus is hawked out
  - Cold drinks aggravate cough
  - Cough from spices
  - Sneezing and coughing as if from vapor in the throat
  - Difficulty in breathing while urinating

- Perspiration smells like honey and on uncovered parts
- Cyanosis at the clavicular region, both sides
- Globular expectoration like a lump of curd
- **Mental symptoms:**
  - Delicate, feels as fragile as glass
  - Delusion, one made of wood or glass
- **Others:**
  - Fever appears suddenly and disappears suddenly
  - Fever, rise of temperature, felt more on covered parts

## TUBERCULINUM

- ❖ 3<sup>rd</sup> stage medicine of critical cases, Hot; Psora to syphilis speed is very fast



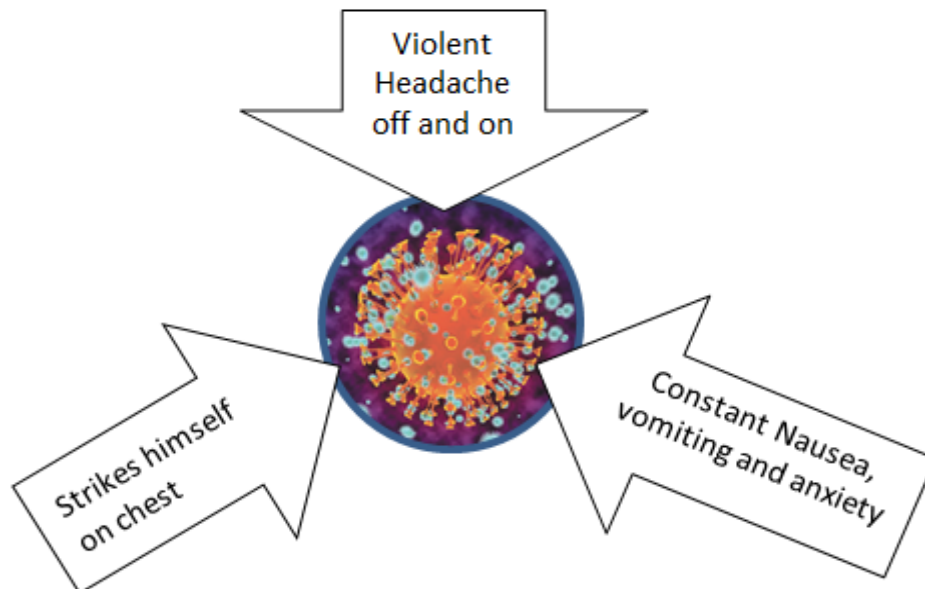
- **Pathology:**
  - When the fibrosis start in lungs, the role of this medicines begins (Medorrhinum - will be used after fibrosis has set in and affect the whole lung)
  - Lobar pneumonia with four stages Inflammation - Red hepatitis, Grey hepatitis, scarring, and resolution; there would be no resolution or scarring if one takes allopathic medicines, upper apical region of lung

- **Clinical:**
  - Pneumonia with delirium
  - Spasms,
  - Spleen affections
  - High fever with flu
  - Pain in the left side of upper chest on lifting left arm
- **Posture:**
  - **Lying ag in respiratory symptoms; bores head in the pillow**
- **Breathing pattern:**
  - *Dysponea is absent even with high respiratory rate.*
- **Symptoms:**
  - *Pain left upper region of the lung, that pain may extend anywhere in the body, may be in hands or stomach or shoulder etc. also the pain can radiate at two places simultaneously*
  - *The pain begins when he breathes*
  - Respiratory rate increased – tachypnea, but when he starts talking to anyone then rate becomes normal (because the control centre is in pons - hence neuronal control comes in play)
  - Headache , pain at the root of the nose, then right eyebrows then temporo-parietal region and then extends backwards to occipital region; in pain the patient bores head in the pillow
  - Fever and chill occurs always with cough or with h/o same
- **Mentals:**
  - *Everything seems too large or big, either disease or physical things that's why the patient has uncontrolled anxiety before visiting to the doctor*



## VERATRUM VIRIDE

❖ 3<sup>rd</sup> stage medicine; hot + thirsty



- **Pathology:**
  - Lung + Liver + Kidney
  - Red hepatization, lung congestion
- **Clinical:**
  - *Striking himself on chest like camphor but here it is in 3<sup>rd</sup> stage*
- **Posture:**
  - *Lying agg, in respiration*
- **Breathing pattern: panting or sighing and slow.**
- **Symptoms:**
  - Ailments from change in temperature (cold to warm or vice versa)
  - **HEADACHE** – On & off violent, headache increases suddenly
  - Wants to loosen the cloths, feels the clothes are tight due to swelling in chest
  - Continues nausea and vomiting
  - Face red
  - Occasional cough and if it is more then with bloody expectoration
- **Mentals:**
  - **Anxiety with pneumonia or anxiety + nausea + vomiting**

## **HOW TO ADMINISTER THE MEDICINE**

1. Oral route: patient of stage one, stage two and stage three can take medicine orally on the tongue.
2. Olfaction route: A patient of any stage having coughs and to avoid any aggravation of stage three patients, medicine should be given via olfaction or inhalation method, especially when there is respiratory distress.
3. External application: Patients who are considered near to the death, medicine should be given by external application method. The medicine can be applied on back of hands or ear pinna or lips or nose.
4. Spray: patients who are in very critical conditions and medicine can't be given by above route, and then medicine can be sprayed on the pillow or bed or clothes.

## **POSOLOGY – POTENCY & REPETITION OF DOSES**

1. In Prevention: use high potencies like 1M or 10M.
2. In First stage: thirty and can be repeated, if needed.
3. The second stage: 200 is the best suitable potency for these cases.
4. Third stage: 30 or 200, by inhalation mode and can be repeated frequently.

### **NOTE:**

This is the gross idea of potency dose selection and repetition but solely at the discretion of physician because it depends on many other points, e.g.

1. Condition of patient: if the condition of the patient is severe, then low potency and frequent repetition required. No repetition after improvement, repeat when improvement stops.
2. No need of repetition, if the selection of remedy is very correct.

3. The action of medicine: long acting medicine, like Lachesis requires less repetition while aconite required more, so it depends on duration of action of medicine.
4. Disease state:
  - If the disease state is quite serious or grave and no vitality has remained, then use mother tincture or low potencies like 3C, 6C with frequent repetition;
  - If the disease is in trivial state then use high potency without repetition

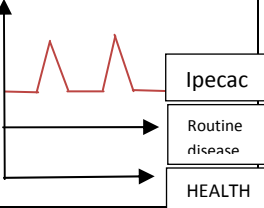
### **DIET AND REGIMEN**

1. Balance diet is required for quick improvement but in corona patients – cool things like cold drink or ice cream should not be allowed, and sour food or acidic food should be avoided to reduce inflammatory reactions.
2. The physician must counsel the patient and talk with him in simple, positive language, giving hope and confidence regarding recovery.

## READY RECKONER GOLDEN CHECK POINTS

S.NO	NAME OF MED	H/C	T/TL	STAGE	TRIO	OTHER IMP POINTS
1.	<b>ACONITE</b>	H	T	1	<ul style="list-style-type: none"> <li>• <b>Respiration Jerky:</b> sleeping (Inspiration in two jerks).</li> <li>• <b>Fever: One cheek Hot &amp; Red Other Cheek Cold &amp; Pale</b></li> <li>• <b>Sitting Upright</b> Bent forward</li> </ul>	<b>Suddenness</b>
2	<b>ALUMINA</b>	C		1,2	<ul style="list-style-type: none"> <li>• <b>Pain: Vertex</b> on coughing</li> <li>• <b>Perspiration</b> on face</li> <li>• Wheezing from <b>nose</b></li> <li>• <b>Oppression</b> in chest &lt; <b>sitting</b> in 2<sup>nd</sup> stage</li> </ul>	Hawking due to dryness, < Lying down
3	<b>ANTIM ARS</b>	C	T	3	<ul style="list-style-type: none"> <li>• <b>Swelling face/left hand</b> (vasodilatation)</li> </ul>	Emphysema Heart involvement
4	<b>ANTIM TART</b>	C	T	3	<ul style="list-style-type: none"> <li>• <b>Sleep</b> overpowering</li> <li>• <b>Rattling</b></li> <li>• <b>Gasping:</b> Neck bent backwards, rubs larynx with hands</li> </ul>	Elderly Patients Fever mild/low Perspiration
5	<b>ARS ALB</b>	C	T	1/2/3	<p><b>1<sup>st</sup> stage</b></p> <ul style="list-style-type: none"> <li>• <b>Anticipatory</b> anxiety</li> <li>• <b>Thirst</b></li> <li>• <b>Acrid</b> discharges</li> </ul> <p><b>2/3 Stage</b></p> <ul style="list-style-type: none"> <li>• <b>Thirstless</b></li> <li>• <b>Exhaustion</b></li> <li>• <b>Sits</b>, pillow, head on hand</li> <li>• <b>Apex right lung</b></li> </ul>	Right sided  Fastidious  Protruding of tongue during suffocation
6	<b>BELLADONA</b>	C	T	1	<ul style="list-style-type: none"> <li>• <b>Protruding tongue:</b> cough</li> <li>• <b>Salty taste:</b> fever</li> <li>• <b>Pressure/palpitation</b> in heart</li> <li>• <b>Speech:</b> Short speech then a long pause</li> </ul>	Redness
7	<b>BROMIUM</b>	H	T	2	<ul style="list-style-type: none"> <li>• <b>Sneezing on</b> inspiration</li> <li>• <b>Lying on side</b>, hand on head</li> <li>• <b>Soft substance</b> 4" below manubrium sternum</li> </ul>	
8	<b>BRYONIA</b>	H	T	2	<ul style="list-style-type: none"> <li>• <b>Posture:</b> Cough &gt; prone position Breathing &gt; supine position</li> <li>• <b>Holds</b> head/ breath/chest: coughing</li> <li>• <b>Lower lobe right lung</b></li> </ul>	Hot weather Hot days cold nights < motion Wants hair loose
9	<b>CALC CARB</b>	C	T	1,2,3	<ul style="list-style-type: none"> <li>• <b>One shot cough</b></li> <li>• <b>Bluish discoloration</b> root of nose</li> <li>• <b>Salty expectoration</b></li> <li>• <b>Tongue</b> white and cold</li> </ul>	<b>Profuse Perspiration</b>
10	<b>CAMPHOR</b>	C/H	T/TL	2	<ul style="list-style-type: none"> <li>• <b>Coldness: Lies on floor</b></li> <li>• <b>Rough</b> inspiration, prolonged expiration</li> <li>• <b>Beats</b> chest; <b>Anosmia:</b> 1<sup>st</sup> stage</li> </ul>	Later stage: Fixed gaze

11	<b>CARBO VEG</b>	H		3	<ul style="list-style-type: none"> <li>• <b>Air hunger</b></li> <li>• <b>Cold Breath/extremities: cyanosis</b></li> <li>• <b>Lying: Head raised</b> with two pillows</li> </ul>	Elderly CCF
12	<b>CAUSTICUM</b>	C	T	1,2	<ul style="list-style-type: none"> <li>• <b>Rawness/Scrapping (Linear):</b> throat/larynx/trachea</li> <li>• <b>Breathing:</b> <b>Sleep:</b> Slow breathing <b>Waking:</b> Impeded</li> <li>• <b>Pain stomach:</b> hawking <b>Pain hips:</b> coughing</li> </ul>	Right sided
13	<b>CHELIDONIUM</b>	C		2/3	<ul style="list-style-type: none"> <li>• <b>Pain chest to back</b></li> <li>• <b>&gt;warm food</b></li> <li>• <b>Fever: Palms</b> to rest of body</li> <li>• <b>Likes open air:</b> Sits near window</li> </ul>	Liver involvement
14	<b>CUPRUM MET</b>	C	T	2/3	<ul style="list-style-type: none"> <li>• <b>Mask:</b> Does not want to wear</li> <li>• <b>Weeping:</b> spasmodic cough</li> <li>• <b>Raising hands: Unable to breathe</b></li> </ul>	Thirst: cold water Feels he is a BOSS Bluish discoloration above left clavicle
15	<b>DIGITALIS</b>	C		3	<ul style="list-style-type: none"> <li>• <b>Glassy sensation in brain</b></li> <li>• <b>Gasping</b> during sleep &gt; deep breathing</li> <li>• <b>Fever better vomiting</b></li> </ul>	Medicine for secondaries
16	<b>DROSERA</b>	H		2/3	<ul style="list-style-type: none"> <li>• <b>Spasmodic cough</b> due to foreign body</li> <li>• <b>Holds epigastrium and left hypochondrium</b> on coughing</li> <li>• <b>Epistaxis, hemoptysis, brain Hemorrhage with cough.</b></li> </ul>	<b>Anosmia</b> in 1 stage <b>Coagulated bleeding</b> Brownish discharge (Bryonia) <b>Holds throat with left hand</b>
17	<b>DULCAMARA</b>	C	T	1/2/3	<ul style="list-style-type: none"> <li>• <b>Coryza</b> &gt;cold air and warm applications</li> <li>• <b>Barking cough</b> &lt; deep breathing</li> <li>• <b>Slow/superficial respiration</b> with fear of cough</li> </ul>	<b>Doubling fever</b>  Difficult respiration >urination
18	<b>ECHINICEA</b>	C		3	<ul style="list-style-type: none"> <li>• <b>Zymotic fever</b></li> <li>• <b>Superficial imperceptible breathing</b></li> <li>• <b>Head cold body hot during septicemia</b></li> </ul>	
19	<b>ELAPS</b>	C	T	2/3	<ul style="list-style-type: none"> <li>• <b>Apex right lung:</b> lobar pneumonia</li> <li>• <b>Blackish expectoration</b></li> <li>• <b>Respiration: oral only</b> (O/E chapped lips)</li> </ul>	Right sided  Bites fingers or hands during sleep
20	<b>GELSIMIUM</b>	C	TL	1/2	<ul style="list-style-type: none"> <li>• Headache with dim vision better by urination.</li> <li>• <b>Indifference</b> to his condition.</li> <li>• <b>Heaviness</b> of eyelids.</li> </ul>	Shaking the head ameliorates.

21	<b>GRINDELLIA</b>	H	T	3	<ul style="list-style-type: none"> <li>• <b>Fear of suffocation</b> on going to sleep</li> <li>• <b>WBC/lymphocyte</b> raised</li> <li>• <b>Spleen/lymph nodes/Liver</b> involved</li> </ul>	
22	<b>IGNATIA</b>	C	T	3	<ul style="list-style-type: none"> <li>• <b>Rapid, painless hepatization</b> of lung with <b>high grade fever</b></li> <li>• <b>Sighing respiration</b> &gt; lying on back</li> <li>• <b>Irascible paroxysmal cough</b>, can be controlled forcefully</li> </ul>	<b>FAST</b> <b>Changes position frequently.</b> <b>Thirstless during fever.</b>
23	<b>INFLUENZINUM</b>	C	T/TL	2/3	<ul style="list-style-type: none"> <li>• <b>Alveolar damage</b></li> <li>• <b>Leucopenia</b></li> <li>• <b>Disproportionate weakness</b> to the suffering</li> </ul>	Nasal discharge with coryza
24	<b>IODUM</b>	H	T	2/3	<ul style="list-style-type: none"> <li>• <b>Corrosive Expectoration:</b> All discharges corrosive</li> <li>• <b>Sits with hands on head and elbows on knees</b></li> <li>• <b>Rapid hepatization</b> of lung</li> </ul>	Hungry <b>FAST</b> <b>Fibrosis</b> Tachypnea/tachycardia <b>High ATP</b>
25	<b>IPECAC</b>	C	TL	1/2/3	<ul style="list-style-type: none"> <li>• <b>Graph of ipecac</b></li> <li>• <b>Deep and Accelerated breathing during fever</b></li> <li>• <b>White tongue during fever</b></li> <li>• <b>Cough with Nausea and Vomiting</b></li> </ul>	<b>Hemorrhage</b> 
26	<b>KALI BICH</b>	C	T	2/3	<b>2<sup>nd</sup> Stage</b> <ul style="list-style-type: none"> <li>▪ <b>Does not allow to touch head</b></li> <li>▪ <b>Sneezing on lying down</b></li> <li>▪ <b>Sinusitis with blindness before headache</b></li> </ul> <b>3<sup>rd</sup> stage</b> <ul style="list-style-type: none"> <li>▪ <b>Holding sides of chest &lt;</b></li> <li>▪ <b>Wheezing and panting &gt;by deep respiration</b></li> <li>▪ <b>Irritation at bifurcation of trachea</b></li> </ul>	
27	<b>KALI CARB</b>	C	T	2/3	<ul style="list-style-type: none"> <li>• <b>Rocking to and fro</b></li> <li>• <b>&lt; 3-4 AM</b></li> <li>• <b>Epigastric respiration</b></li> <li>• <b>Rapid inspiration and expiration</b></li> </ul>	<b>Whistling during inspiration</b>
28	<b>KALI IOD</b>	H	T	2/3	<ul style="list-style-type: none"> <li>• <b>Sits erect</b></li> <li>• <b>Pain in upper chest</b> &lt;bending forward so sits erect</li> <li>• <b>Cough</b> due to swelling in larynx</li> <li>• <b>Greenish expectoration</b></li> </ul>	<b>Purpura on chest</b>

29	<b>LACHESIS</b>	H	T	2/3	<ul style="list-style-type: none"> <li>• <b>Cough</b> due to swelling in larynx</li> <li>• <b>Blowing expectoration</b></li> <li>• Delusion that she is going to die due to this disease</li> </ul>	<b>Loss of Vision</b>
30	<b>LOBELIA</b>	H	T	2/3	<ul style="list-style-type: none"> <li>• <b>Asthma motion</b> &gt;</li> <li>• <b>Anxiety</b> with oppression of chest</li> <li>• <b>Dryness of throat</b> not relieved by drinking</li> </ul>	
31	<b>LYCOPODIUM</b>	H	TL	1/2/3	<ul style="list-style-type: none"> <li>• <b>Frowning</b> during pneumonia</li> <li>• <b>Catching</b> during sleep &gt; sitting upright</li> <li>• <b>Difficult respiration</b> after urination</li> </ul>	
32	<b>MEDORRHINUM</b>	H	T	2/3	<ul style="list-style-type: none"> <li>• <b>Left side of chest hot, right cold</b></li> <li>• <b>Asthma</b> &gt; knee chest position</li> <li>• <b>FAST Fibrosis (X-ray)</b> <b>More in left than right</b></li> </ul>	
33	<b>NATRUM MUR</b>	H	T	1/2	<ul style="list-style-type: none"> <li>• <b>Breathing oppressed on lying down</b></li> <li>• Food tastes salty</li> <li>• <b>Deep furrow in middle of tongue</b></li> </ul>	
34	<b>NATRUM SULPH</b>	H	T	1/2/3	<ul style="list-style-type: none"> <li>• <b>Rubs face intermittently</b></li> <li>• <b>Oppression in chest and asthma</b> &gt;lying down and &lt;exertion</li> <li>• <b>Expectoration green in color</b></li> </ul>	
35	<b>NUX VOMICA</b>	C	T	1/2	<ul style="list-style-type: none"> <li>• <b>Cough</b> from pain in throat pit</li> <li>• <b>Gastric disturbance</b> with breathing difficulty</li> <li>• <b>Breathing accelerated</b> during chill with anxiety</li> </ul>	<b>Intolerant</b>
36	<b>OPIUM</b>	H	TL	2/3	<p><b>Stage 2:</b></p> <ul style="list-style-type: none"> <li>• <b>Respires through open mouth</b></li> <li>• <b>Anosmia/loss of taste</b></li> <li>• <b>Dryness of throat</b> without thirst, wakes him from sleep</li> </ul> <p><b>Stage 3:</b></p> <ul style="list-style-type: none"> <li>• <b>Tongue: Purple/black; foamy hemorrhage</b> from lungs</li> <li>• <b>Cheyne Strokes breathing</b> while unconscious</li> <li>• <b>Gasping</b> along with puffing respiration</li> </ul>	
37	<b>OXALIC ACID</b>	C	TL	2/3	<ul style="list-style-type: none"> <li>• <b>Thinking of compliant aggravates</b> and he starts feeling the same</li> <li>• <b>Jerking respiration;</b> <b>Unconscious during stool</b></li> <li>• <b>Shooting pain in chest</b></li> </ul>	

38	<b>PHOSPHORUS</b>	C	T	1/2/3	<p><b>Stage 2:</b></p> <ul style="list-style-type: none"> <li>• Cough &gt;lying on right side &lt; lying on left side</li> <li>• Holding chest &gt; cough</li> <li>• Burning thirst for icy cold water</li> </ul> <p><b>Stage 3:</b></p> <ul style="list-style-type: none"> <li>• Hepatization right lung to lower lobe of left lung</li> <li>• Purple bluish discoloration of palate</li> <li>• Unconsciousness/fainting/stupor in pneumonia</li> </ul>	
39	<b>PSORINUM</b>	C	T	1/2	<ul style="list-style-type: none"> <li>• Desire to lie on the back with abducted arms; sitting aggravates</li> <li>• Discharges offensive</li> <li>• Loss of adaptability</li> </ul>	
40	<b>PULSATILLA</b>	H	TL	1/2	<ul style="list-style-type: none"> <li>• Face and forehead hot to touch</li> <li>• Headache with no fever and vice versa</li> <li>• Taste bitter (changeable)</li> <li>• Coughs during sleep then expectorates and goes back to sleep again.</li> </ul>	
41	<b>PYROGENUM</b>	C		2/3	<ul style="list-style-type: none"> <li>• Septicemia (increased serum albumin)</li> <li>• Pulse disproportionate to fever</li> <li>• Tries to hold body parts, feels they are scattered</li> </ul>	<p>Everything multiplies</p> <p>Improper proprioception (awareness of body's position specially movements)</p>
42	<b>RANUNCULUS B</b>	C	T	2	<ul style="list-style-type: none"> <li>• Difficult respiration while walking on plane ground better by ascending</li> <li>• Deep breathing while perspiring</li> <li>• Respiratory complaints with pain in liver (also in sepia)</li> </ul>	Pain in joints from Catarrh
43	<b>SAMBUCUS</b>	C	T	1	<ul style="list-style-type: none"> <li>• Throwing head backwards with cough</li> <li>• Cough before fever</li> <li>• Feels that doctor or nurse are neglecting him</li> </ul>	Mouth breathing: due to obstruction of nose
44	<b>SANGUINARIA</b>	C	T	1	<ul style="list-style-type: none"> <li>• Cough better passing flatus/eructation</li> <li>• Rapid expiration slow inspiration</li> <li>• Even agreeable smells cause asthmatic type of respiration</li> </ul>	



45	<b>SEPIA</b>	C	TL	1/2/3	<ul style="list-style-type: none"> <li>• <b>Jerks head involuntarily</b> forwards and backwards while sitting</li> <li>• <b>Paroxysmal cough</b> relieved by very little expectoration</li> <li>• <b>Desire to sit bending head forwards</b></li> </ul>	Desire to clench teeth together
46	<b>SILICEA</b>	C	T	1/2	<ul style="list-style-type: none"> <li>• <b>Cannot lie on the back;</b> standing &gt;</li> <li>• <b>Catching type respiration</b> during fever</li> <li>• <b>Coryza with ear complaints</b></li> </ul>	<b>Left sided</b> Bad taste in mouth better by eating something
47	<b>SQUILLA</b>	C		2	<ul style="list-style-type: none"> <li>• <b>Unable to hold head steady</b></li> <li>• <b>Cough</b> on deep inspiration</li> <li>• <b>Chilliness from uncovering</b> with pain</li> </ul>	<b>Reddish discharge from posterior nares</b> without coryza
48	<b>STANNUM MET</b>	C	T	2/3	<ul style="list-style-type: none"> <li>• <b>Lying on affected side &gt;, opposite side &lt;</b></li> <li>• <b>Hoarseness specially</b> dryness by coughing</li> <li>• <b>Short hacking cough with loss of voice</b> (sweetish expectoration)</li> </ul>	
49	<b>SULPHUR</b>	H	T	1/2/3	<ul style="list-style-type: none"> <li>• <b>Dyspnea when asked to bend arms backwards</b> (also in calc carb)</li> <li>• <b>Sensation as if lungs are touching the back while coughing</b></li> <li>• <b>Fever with increased salivation, redness of nose and lips</b></li> </ul>	<b>Very good medicine for after effects of lung diseases</b>
50	<b>THUJA</b>	H		2	<ul style="list-style-type: none"> <li>• <b>Looking upwards &gt;</b></li> <li>• <b>Sneezing and coughing</b> from pungent smells</li> <li>• <b>Difficult breathing while urinating</b></li> </ul>	<b>Feels delicate as if made of glass</b>  <b>Fever appears and disappears suddenly</b>
51	<b>TUBERCULINUM</b>	H		3	<ul style="list-style-type: none"> <li>• <b>Fibrosis of lungs</b></li> <li>• <b>Pain in upper region of left lung</b> which may radiate anywhere</li> <li>• <b>Dyspnea absent even with high respiratory rate</b></li> </ul>	<b>Critical cases</b>  <b>Speed fast</b>  <b>Bores head in pillow</b>  <b>Fever and chills always with cough</b>
52	<b>VERATRUM VIRDE</b>	H	T	3	<ul style="list-style-type: none"> <li>• <b>Violent headache</b> off and on</li> <li>• <b>Constant nausea, vomiting and anxiety</b></li> <li>• <b>Strikes himself</b> on chest</li> </ul>	

## CASE REPORTS

*Some important cases have been described below to create an understanding in the mind of the reader as how to prescribe in COVID and COVID-like cases taking into consideration different stages of the disease viz- 1, 2 and 3; rest of the cases have been not been mentioned here. This depiction gives a clear-cut plan in the readers mind so that fast and gentle recovery of the patient can be ensured, as suggested in the Aphorism 2 of the Organon of Medicine. In order to make a successful prescription it is worthwhile to take into account the following points;*

- ✓ *Important points to be considered in each case.*
- ✓ *Demarcation between important and non-important symptoms especially in critical cases.*
- ✓ *Importance of non-verbal commands (signs) of the patient specially where subjective symptoms are scare or deceptive.*
- ✓ *Thermal reactions of the patient*
- ✓ *Analysis and basis of prescription*

*I request the reader to refer to the section of Materia Medica section of different medicines in this book for a better understanding of the above points. This work is in no means a replacement Masters and Retriever's work.*

### **List of 5 hospitals where patients were treated, as per ICMR guideline:**

1. TATA AMANTRAN HOSPITAL, KALYAN
2. SHASTRI NAGAR HOSPITAL, KALYAN
3. R.R. HOSPITAL, KALYAN
4. NEON HOSPITAL, KALYAN
5. HOLYCROSS HOSPITAL, KALYAN

Some patients were treated directly with the help of telemedicine, only with Homoeopathy.

## **Case No.1**

Covid-19 positive, stage 3, Mr.A.A. (C-6/S-1) 81 years, male, married, resident of kalyan, Maharashtra; consulted on 22.05.2020 for following details:

Patient of 81 years old, he is suffering from corona since last 15 days, Admitted in Holy cross hospital in ICU, he is on oxygen.

Contact history: His Son is corona positive.

His initial symptom was fever, cough, nausea and severe vomiting since 10 days. When he was admitted to hospital, within 2-3 days his symptoms became severe with breathlessness and were shifted to ICU. There he distended abdomen with loose stools also. In ICU feels much cold and asks to off AC completely.

He is now on oxygen, but having discomfort with oxygen mask, he is constantly removing his mask and after removing his mask O<sup>2</sup> level drops then again he puts his mask on. He need oxygen but not mask. He says that "feel comfortable after loosening/removing his mask".

Now he is suffering from breathlessness aggravated by slight change in position, upside movement of hand aggravates breathlessness.

His orientation was poor, confused but when we took his consent, after signing the consent form RMO of hospital just joked to him by saying that now all your properties are ours. He stressed and said that I have signed only for treatment and asked why you had taken sign? We had to show him consent form, only after that he became calm.

He is completely indifferent with everything; I had done everything in my life. If death comes today, I'm ready to accept it and if it happens you buried me in my land. I never worried about anything in life; I have travelled all over India full filled all my wishes. If we do good things then we also get good things and people in return, says "I know, I had never done any wrong thing with anyone, so I will get always good." But occasionally worries about present status that why I am suffering through this corona?

His son said that, my father is very meticulous, just a dictator, he likes to do thing on his own merits, never compromise in anything. He reads newspaper for

updates. From hospital calls his son for his particular desired food, like dal bhat with ghee, halwa etc. (name of dishes), everyday his desire are specific and has to have. There is difficulty in swallowing food, so son converts food in paste or into liquid form so that he can swallow easily.

**Following points were made:**

- Cough continuous, spasmodic, paroxysmal, least/ slightest movements of arms aggravate cough and dyspnea
- Severe dry cough
- Severe vomiting
- Abdomen distended
- High fever
- Loss of appetite
- Loose motions since 3 days.
- on oxygen but feels discomfort in wearing mask, says, after loosening mask feels comfortable but breathlessness increases SPO<sub>2</sub> decreases, so wears mask again.
- Wants to cover, doesn't want AC at all

**About patient:**

- Confusion while talking with poor orientation
- Indifference to everything
- Satisfied; says He has done everything in his life, if death comes then it won't matter him and wishes to get buried in his own agriculture land in village.
- Death presentiment off.
- Optimistic
- Very fastidious, meticulous.
- Dominating
- Thermals : chilly

**Investigations:**

- His CT Chest shows: - bilateral diffuse ground glass opacity
- D-dimer and creatinine increased

**Analysis& basis of prescription (for stage 3 cases please see book section):**

Following points were considered

- DELUSION GENERAL HE IS
- C/M- ACTIONS ARE CONTRADICTORY TO INTENTION
- Chilly
- Confusion, talking as if in intoxication
- Breathing difficult, covering nose from, movements of arms

**GOLDEN CHECK POINTS:** When a patient is asked to raise his hand above the head that time respiration would stop and may be unable to breathe.

**Prescription:** Cuprum met 200, single dose **via inhalation** on 22.05.2020.

**FOLLOW –UP SHEET**

<b>Date</b>	<b>Symptoms</b>	<b>Prescription</b>
23/5/2020	Much better in breathless, almost 99% Started wearing mask Taking normal food	No medicine
24/5/2020	Shifted to normal ward Appetite improved Breathing normal	No medicine
25/5/2020	No complaints.	
28.05.2020	Discharged from hospital	

## Case No.2

**Covid-19 positive**, stage 3, Mr. S.M. (C-8/ S-2) 40 years, male, married, resident of Dombivillie west, Maharashtra; consulted on 22.05.2020 for mild fever, body ache and mild cough since 8 days, was admitted in ICU as having breathlessness and on CT-scan impression radiologist comments, *“there is patchy sub-pleural ground glass opacities in both lungs with apico-basal gradient, likely of viral etiology.”*

He was striving hard to talk even though when our doctors went in ICU to examine him, was continuously engaged in his mobile with oxygen mask on his face and when asked about his complaints was not taking it seriously but continuously and frivolously peeping into mobile. He was not ready to say anything about his illness but constantly saying that everything is fine so we concluded following

- Mild cough with difficulty in breathing on slight exertion and aggravated by lying. Difficulty in breathing makes him restless & feel that this one would be my last breathe.
- Fever since 8 days, thirsty during fever; otherwise used to be thirstless
- Body ache
- Thermally: hot
- Confusion, poor orientation
- Indifferent; when asked any question, says everything is okay.
- Keeps looking in mobile phone
- No worries of disease.

**Analysis & basis of prescription (for stage 3 cases please see book section):** following points were considered

- Well, says when very sick
- Breathing difficulty, lying agg
- Thermals – Hot
- Thirsty during fever

**Prescription:** Apis Mellifica, 200, single dose by inhalation on 23.05.2020

### Case No. 3

Covid positive, stage 2<sup>nd</sup>, Mrs. S. S. (C-54, S-10) a 57 years old female, married, resident of Kalyan, Maharashtra, was admitted in ICU.

She was known case recurrent coryza, cough and bronchial of asthma and regularly taking allopathic medicines for around one and half year but this time means few days before hospitalization dullness, drowsiness and mild difficulty in breathing persisted even after medicines, which doubted her son and got covid tested which came positive; presented following symptoms:

She has wrapped herself with covering, and having water bottle in her hand and from which taking sips of water (warm) often and looking sleepy, as I asked what your complaints are, she started crying, sobbing and, 'my brother died some days before who was very dear to me; having cough often and difficulty in breathing; then after she was reluctant to answer but wanted to go home.

There was not having fan, said I feel it.

Her relative said about her that she is generally active, very fussy, governs more or less everything at home in the way she wants. Presently she is in grief after death of her brother who died some days before.

So the **presenting** symptoms are

- Cough with breathlessness
- wants to go home
- Did not revealed any symptoms
- Desire warm water or small quantities
- Sleep overpowering
- chilly

**About the patient**

- Fastidious
- Active
- Dominating
- **GRIEF** after death of younger brother

**Analysis& basis of prescription** (*in stage two cases, please refer book section*):

- *Thirst for warm water*
- *Thirst sips often*
- *Dull, chilly*
- *Fastidious*
- *Hide , desire for(complaints)*

**Prescription:** Arsenic alb 200, single oral dose

**Follow up:**

Sleep and breathlessness reduced in two days and disappeared fully in four days.  
She was discharged from hospital on 8<sup>th</sup> day.

Dr Dilip Soni



## Case No.4

Covid 19 positive, stage 2+, Mr. M. K. (C- 53/ S-8), working as supervisor in a private reputed company, was diagnosed as and is in ICU, presented with following symptoms:

He is a known case of diabetes mellitus, hypertension and had angioplasty few years before. The present complaints started with high fever around three weeks before, and started having mild pain in chest and difficult breathing. Went for examination and found to be corona positive and in x-ray both the lungs showed signs of inflammation. He was admitted in hospital. During the stay in hospital his condition worsened with difficulty in breathing, heaviness in chest on deep breathing in lower part of chest.

Also his pulse and blood pressure started fluctuating. Initially had more then followed with low pulse and low blood pressure. Breathing was difficult without open air, so he was provided with oxygen which gave him little relief.

On further investigations Prolactin was normal but Ferritin levels were high.

He is a mild and soft spoken, stays alone and keeps himself busy in something or other. He is not very social. At times enjoys parties where enjoys hard drinks.

### Presenting Symptoms:

- High grade fever
- Then presented with dyspnea, chest congestion and pain in lower part
- K/c/o DM, undergone angioplasty, Hypertension
- X-ray chest – b/l lung involvement being right side of lung involvement more
- Progression of disease became fast after admission in hospital
- Tachycardia followed by bradycardia
- Ferritin levels high
- Prolactin normal

## About Patient

- Mild
- Lives alone
- Keeps himself to himself and his work
- Alcohol, desires
- Thermally Hot
- Desires fan

**Analysis & Basis of prescription**(since this case is of stage 2+, please refers stage three cases of book section):

- *high fever*
- *slow pulse*
- *lung inflammation both with heart issues*
- *desire fan but slow*
- *rapid progression*
- *thermally hot*

**Prescription:** CARBO VEG 30, by inhalation once

### Follow up:

- 2<sup>nd</sup> day dyspnea & chest congestion reduced
- 3<sup>rd</sup> day further reduction in dyspnea, no chest congestion
- 4<sup>th</sup> day no dyspnea, shifted to general ward
- 8<sup>th</sup> day discharged from hospital

## Case No. 5

Covid 19 positive, stage 3, Mr. O.P.K. (C-32/S-5), 58 year married male from kalyan, Maharashtra; was seen on 26<sup>th</sup> may, 2020.

He is working as dhobi in Mumbai did not come in contact with any covid patient. He only went out for some time. He's workaholic, working from 6 mornings to 10 at night.

He was shifted to holy cross hospital on 18th may with complaint of breathless and cough with difficulty in breathing, from shastri nagar hospital where he was admitted on 11th may with complaint of fever, cough and breathless; there was no relief so he was shifted to Holy cross hospital and here he on continuous oxygen in ICU. He presented with:

I am a known case of diabetes mellitus for around 15 years, was well around three weeks before, then had cough which is mostly at midnight between 11pm to 1am, and it reduces when he lies on abdomen but lying on abdomen disturbs his oxygen tubes, which is there because of difficulty in breathing and suffocation, so changes position frequently. Cough with suffocation very often.

Patient had difficulty in speaking as he was speaking slowly with oxygen mask on, he was complaining of breathlessness and cough which increases at night. Patients said that, he developed complained all of sudden 20 days back in Mumbai where he stays, had cough and fever and breathlessness and he took treatment from regular doctor but there was no relief from medicines (allopathic). Her daughter came and brought him to Dombivillie, shastri Nagar hospital, there he was admitted for 8 days and then shifted to holy cross hospital, at present complaining of loss of taste describing as no taste of food and want extra salt; he wants proper food and as cannot tolerate hunger. He asked for food and biscuits, and said that here they give less food, and I did not satisfy with the quantity. On further enquiry it was revealed that he fond of eating, likes to have apples, spicy foods. Thirsty, increased after the cough and breathlessness started.

There is cough and breathlessness more at night, he says that oxygen flow is reduced at night (which in actual was not so), so there is more cough and breathlessness which is better by lying on chest.

He said; do ask my daughter to visit me here before I die.

He had been very hard worker throughout his life. Wants his things to be neat and clean, even complains of poor cleanliness in hospital which was not as bad as he complains.

The **presenting symptoms** are:

- Cough more at night between 11pm -1 am,
- Cough better lying on abdomen
- Breathlessness, suffocation and dyspnea with cough.
- Restlessness when hungry
- Loss of taste
- Delusion that oxygen is reduced by the nurse
- Hungry, increased appetite ++, even in ICU asking doctor for biscuits
- Desires spicy food, apple,
- Thirst increased

**About the patient:**

- Emotional, attached to daughters, weeping when calling them on phone
- Hard working
- Fastidious , want neat and clean things
- Fear of death

**Investigation:** CT scan (18/5/2020)

Diffuse and patchy ground glass opacities in the peripheral parenchyma of both lungs, more marked in lower lobes. Smooth septal thickening in the bilateral lower lobe. These findings are most likely s/o atypical acute infective etiology

**Analysis& Basis of prescription** (*since it is stage 3 case, please refer stage three cases of book section*):

- Cough agglying on back
- Anxiety lying on back
- Hepatization of both lungs lower lobes
- Appetite increased
- Hunger aggravation

**Prescription: Sulphur 200, Oral on 27/5/2020**

<b>Follow - Up Sheet</b>		
<b>Patient's Name:</b>		<b>OPDIPD Reg No:</b>
<b>Date</b>	<b>Symptoms</b>	<b>Prescription</b>
27/5/2020	In ICU Cough <lying on abdomen Food desire for Hunger aggravation Anxiety lying on back Hepaticization of both lungs lower lobes	Sulphur 200 single dose
28/5/2020	Cough mild , once or twice only bouts Breathlessness reduced Feeling good Asking for biscuits	Rubrum
30/5/2020	No cough or suffocation no artificial oxygen required , stable	Rubrum
02.06.2020	Shifted to general ward ,stable , asking for biscuits	
8/6/2020	Asymptomatic & Discharged	Rubrum

### **Case No. 6**

**Stage 2<sup>nd</sup> +, Mrs. P. B.** is a 58-year-old, married female, from Kalyan, Maharashtra.

She was **brought** to clinic of one of the team member, on 19/06/2020. She was referred to by her daughter who had recovered within 4 days from COVID 19 by our Homoeopathic treatment.

She presented with **extreme** drowsiness, unable to walk, had to be supported by her husband and an attendant. On arriving at the clinic, she came and immediately lied down on the bench in the waiting room.

She is breathless, having history of fever, cough and cold for 8 days. She was on the treatment by her local doctor for the last 2 days. Her condition was worsening and now she had developed breathlessness and excessive sleepiness. Her daughter called the doctor and told the whole status.

When she was called in the cabin, she was unable to walk, so her husband and attendant supported her to come in.

On observation: extreme drowsiness, unable to sit and answering very slowly but properly. She was perspiring but did not want the fan above her.

- BP: 80/60 mmHg
- SPO2: 88
- Pulse feeble, soft

**Analysis and basis of prescription:**

- Dull, drowsy
- Breathlessness aggravated by movements
- Perspiration ++
- Chilly
- Pulse soft

**Prescription:** Antim tart 30, one single dose orally.

**Follow up after 10 minutes:**

- BP: 100/70 mmHg
- SPO2- 92

She was then referred to the immediately to a hospital and was put on oxygen.

In the morning she was much comfortable and was able to talk. She is still (24.06.2020) the rewithout any complaint.

### Case No. 7

COVID 19 positive, Stage 3, 45-year old male, Mr. T. M. (C-9/S-3 ), from Kalyan Maharashtra who was admitted in a hospital on 15/03/2020.

#### He presented with:

Cough in paroxysms of 2-3, and minimal expectoration; better lying on left lateral side and breathlessness for 4-5 days.

Complaints started with vomiting, fever and generalized weakness; accompanied by discomfort in the abdomen and left sided headache. Patient was on ventilator.

He has a past history of pneumonia a year ago.

He is a hot patient and his thirst is increased.

**Above the patient:** Mild and very emotional. He gave his phone number to us very easily.

#### Analysis & basis of prescription:

- Left sided
- Mild patient
- Changeability of Symptoms

#### Follow Up:

Date	Symptom	Prescription
23/5/2020	Involvement the left lung Cough in two paroxysms Mildness, Calm Changeability of Symptoms HOT Breathing difficult >lying on left side Headache left side	<b>PULS 200 ORAL DOSE</b>
24/5/2020	Breathing better Cough reduced	<b>PI 30 BID *2 days</b>

<b>26/5/2020</b>	No breathlessness Cough once or twice only No fever Stability in symptoms	<b>PI 30 BID *5 days</b>
<b>1/6/2020</b>	Asymptomatic since 4 days	<b>PI 30 BID *14 days</b>

### Case No.8

Stage 2 COVID 19 Positive, Mrs. M.B. 55years old female, working as a sweeper in the municipal corporation, presented with:

Cough aggravated in the evening with fever, headache and no thirst. Continuous cough, no expectoration, better in open air. This had started after she came in contact with her brother who was COVID 19 positive. She developed anxiety about the illness. She is living alone and her two daughters live in the adjacent lane. She mentioned that she would feel very lonely if the COVID test comes positive as nobody will come to meet her. She desires open air as it ameliorates her cough. She is a hot patient.

She was denied admission in hospital twice due to unavailability of beds she was tested for COVID 19, prescribed medicines and advised to go back home. Her daughter asked for help from our team.

She was prescribed Pulsatilla 200 after which her symptoms i.e. fever and cough reduced. The next morning, she was much comfortable and there was no need of admission.

#### Analysis and Basis of Prescription:

- Cough better open air.
- Hot patient
- Thirst less

**Prescription:** Pulsatilla 200 One single dose orally.



## **Case No. 9**

Covid-19 positive, stage-2, Mr. G T S 39-years old male, resident of Kolsewadi, Maharashtra, works in a company. Consulted on 27/05/2020

### **He presented with:**

Fever with chills on 17/05/2020. Intermittent cough after fever with chills. Breathlessness on exertion e.g. dryness of mouth while jogging. Cough with muddy expectoration. Dryness of mouth has to drink water but is generally thirstless. Generalized weakness.

He took allopathic medicines from local doctors but had no relief; fever would subside only for some time and then recur. He approached one of our team members. He was prescribed homoeopathic medicine and was asked to get tested for COVID 19 test, but refused as he felt that in case the test comes out to be positive; his image in the society might be ruined.

He took medicines thrice and had also become better, but after so many requests he finally got his test done which came positive and was admitted to the TATA AMAMNTRA hospital.

He is an open-minded person, although craves alcohol. During the lockdown the liquor shops were closed so he had to consume local alcohol, and therefore believes that consuming this local alcohol has caused him this disease. He is very cooperative and readily gave the given consent to take the medicines. He is thermally a hot patient. He has a group of friends in his vicinity and is worried about his image in his group of people if they come to know that he has been tested COVID-19 positive. He is careless and irresponsible, wanders here and there and does not work. He does not want to take any responsibility.

### **Case analysis and Basis of Prescription**

- Cough with muddy expectoration
- Respiration difficult < exertion
- Dryness of mouth breathlessness with
- Weakness < walking with cough
- Alcoholism
- Hot patient
- Thirstless

**Prescription:** Lycopodium 200 single dose orally, on 28.05.2020

**Follow up:**

<b>Date</b>	<b>Symptoms</b>	<b>Prescription</b>
30/05/2020	Breathlessness better Dryness of mouth improved Expectoration yellow	Pl 30 , 2 days
02/06/2020	No breathlessness Breathing normal Better in dryness of mouth	Pl 30,7 days
9/6/2020	Breathing normal Weakness improved No dryness in mouth Appetite normal	Pl 30 , 14 days

***Discharged on 14 day i.e. on 10.05.2020***

## Case No.10

COVID-19 positive, stage -2, **Mr T R** (C-5 MO-2) is a 56 years male, resident of Maharashtra, and designated as API Mumbai police, he used to work in a containment area since last 2 months courageously in this pandemic situation of corona infection. He worked very hard .Went for his work almost every-day without failure.

He developed fever on 7<sup>th</sup> may 2020, he assumed it to be probably due to heavy and hard work he did all these two months in this contagious scenario. He went to his village, after reaching there he came to know that one of his colleague has been tested positive for Covid -19 which made him panic. He had been in close contact with this colleague, so out of anticipation he got his Covid test done which came out to be positive.

He started having dry cough which continued for 10 days and also developed mild breathlessness which lasted only for one day. After his admission to the hospital he had severe body ache with profound weakness.

He felt as if some hot air is blasting out of his nose, with mild fever but body was not that hot.

### Presenting symptoms:

- Bitter taste in mouth fever during
- Body ache sever one
- Weakness profound
- Hot air blowing from the nose
- Exertion amel in dyspnoea
- Dry cough
- Hot
- Desire warm drinks

### About the patient

- Sensitive and caring person
- Aggressive if anyone contradicts him
- Wife doubts him, checks his phone ,then he beats her and also abuses
- Responsible in duties

**Prescription:** Lycopodium 200, single dose orally

**FOLLOW UP:**

Date	Symptoms	Prescription
17/5/2020	Bitter taste in mouth Desire warm drinks Body ache Exertion amel	Lyc0 200 single dose
19/5/2020	Warm air coming out of nose Taste of mouth improved Body ache better Fever is there	P1 30
21/5/2020	Normal taste in mouth No body ache No Fever Appetite normal	P1 30
24/5/2020	Asymptomatic	P1 30
25/5/2020	Discharged from the hospital	

Dr L

## Case No. 11

COVID 19 positive, Stage 3, 58-year old male, Mr. DV (C-34/S-6), a known case of diabetes mellitus and hypertension, from Kalyan Maharashtra who works in the Grain Market, consulted on 30.05.2020

### He presented with:

Irritation in throat aggravated on taking oil and ghee. He has mild cough. His SPO2 is fluctuating between 95-98; therefore he is admitted in the ICU.

He blames himself that he counted the money without wearing gloves and hence caught the infection; the next day of this episode he started having fever.

He has a history of Pneumonia, 10 days ago.

His COVID -19 reports is positive.

His desires sweets ++, cold water+++

He is thermally hot.

### About the patient:

He is angry on doctors because he feels that his son cheated him by admitting him in the hospital, he could have been home quarantined also.

He does not like to stay in the hospital. He feels that he has wrongly suffered. Worries towards the family and children. Feels his fate is wrong. He abuses his son for admitting him to the hospital.

He is unable to sit at one place. He talks straight to the point. If he is angry, he reacts immediately. He wants things to be done faster so that he could get discharged from the hospital. He works very hard.

He regularly goes for walk for about 4-5 km/day.

**Investigation:** x-ray chest - *Lower lobe of left lung and middle lobe of right lung* is affected.

### **Analysis and Basis of prescription:**

- Hot patient
- Fluctuating SPO2
- Desire cold water +++
- Delusion, wrongly suffered

**Prescription:** Natrum Sulph 200 one dose orally on 31/05/2020:

Follow up: the patient started improving the very next day.

### **Case no. 12**

**COVID-19 LIKE CASE: Mrs. H. K. 60 years, female, resident of Delhi.**

She consulted one of our team members in Delhi and presented following:

- Rattling cough better lying down with shortness of breath, SPO2 = 83-84, and 89-90 with oxygen support. Better in reclining position.
- Appetite poor.
- Throat pain while coughing. Sensation of dryness in throat.
- Thirst ++ for warm and normal water.
- Cough in few (3-4) paroxysms, lying ameliorates.
- Cough better lying down.
- Craving for fruit juice and sweets.

According to her son she had changeable symptoms since the very beginning.

H/o Fever since 26 may 2020, (peaked at 101-104deg F, would reduce till 99degF, no antipyretics used, consulted a homeopath; pus focus seen on left side of throat with cold, dry cough and fever, with mild congestion). But fever continued, was then advised to go for COVID 19 testing, which came out to be negative.

She started developing rattling cough, fever continued with headache, body ache and weakness, was then admitted at a hospital in Delhi. Was treated there for 3-4 days and was then shifted to another Hospital. There she kept saying that she is going to die. Condition did not improve and wanted to call her relatives to meet

them, and also asked for home food because she was not able to tolerate hospital food.

**Past History:** Diabetic, with poor control.

**Mentals:** Very sensitive, feels lonely, thinks that her son is not caring for her anymore after his marriage 1 ½ year ago. She has insecurities regarding her son that he will get close to the daughter-in-law's family. In spite of this feeling, she worked about Daughter-in-law who is expecting.

**Generalities:**

- Thermal Reaction: Chilly+++ . Cannot tolerate cold/winters. Can sleep comfortably without fan and air conditioner.
- Thirst: Increased for normal or warm water
- Appetite Decreased
- Urine : Normal
- Stool: Normal

**Lab investigation:**

- LFT (06/06/2020)
  - SGOT: 72
  - SGPT: 42
  - Bilirubin: 0.3
  - Total Protein 5.8
  - Albumin 3.0
- ESR: (06/06/2020) 60
- Culture and sensitivity sputum (06/06/2020): No growth after 48 hours
- Culture and sensitivity urine (06/06/2020): No growth after 48 hours
- Chest X-ray (08/06/2020): Hazy bilateral lung fields.

**Repertorization:**

- Changeable Symptoms
- Cough few paroxysms

- Better Lying down
- Chilly

**Prescription:**

1. Kali Bich 200 one dose, Method inhalation on 11/06/2020. Repeated one more dose by inhalation on 12/06/2020
2. Sac lac tds for 3-4days

**Follow up:**

11/06/2020

- Cough slightly better.
- Was eating food.
- Mental condition happy.
- SPO2- 97, on oxygen; No breathlessness

12/06/2020

- Cough reduced.
- Eating well.
- Chest X-ray still shows haziness.

13/06/2020

- Cough quite better.
- Chest X ray shows reduced haziness.
- Off oxygen.

14/06/2020

- Cough occasional.
- May be discharged in a day or two.



### **Case no. 13**

**COVID-19 LIKE CASE:**, of Stage 3, 34-year old married female, Ms. KK, from Kalyan Maharashtra.

**Chronology** of Ms. KK's complaints:

**07/06/2020:** suffered from fever; she took medicine from a local doctor

**08/06/2020:** As per government protocol for fever in the current scenario, she was suggested to visit the fever OPD.

#### **Investigative reports:**

- Widal Test: positive
- SGPT and SGOT slightly high
- Mild thrombocytopenia
- Treatment : She was given IV antibiotics for 3 days

**12.6.2020:** Severe vomiting and was advised hospitalization. But no hospital in their area was ready to admit this patient.

**13 .2.2020:** At night, suddenly started having chest pain.

**14.6.2020:** In the morning she became breathless and very much exhausted and was unable to talk.

**X-ray Chest** was suggested. The Radiologist told, her chest condition visible on the X ray was not favorable, and is 99% suggestive of COVID 19. And she should be shifted to the hospital immediately.

Due to unavailability of beds, oxygen cylinders and ventilators she was refused for admission in four dedicated COVID 19 hospitals. To add to the agony of the patient, Private hospitals also rejected as the COVID 19 RT-PCR test was not done.

Our team doctor was called by Covid Hospital that her SPO2 is 70 and Oxygen cylinder and ventilators are not available. X-ray Chest: Ill-defined opacities in both middle and lower zone, Consolidation?

***Our dedicated doctor immediately reached there and took the case and repertorized*** (This is like a 3<sup>rd</sup> stage case; please refer to the section of treatment of stage-3 cases in the book):

### **Analysis & Basis of prescription**

- Weakness after acute disease.
- Breathlessness
- Severe exhaustion
- Unable to talk.
- Air hunger
- Respiration difficult
- Exhaustion

***...and gave her Carbo veg 200 one dose with no delay.***

Within minutes of giving Carbo veg her SPO2 came up to 79 to 80.

**15/06/2020:** She was hospitalized.

**16/06/2020:** Swab was taken for COVID 19 test, which tested negative. But other

- CRP: 3.26, Impression negative.
- WBC: 12900/cu mm
- INR: 1.35

But clinically she was suspected to be suffering from COVID 19.

According the hospital authorities she recovered very fast.

**23/06/2020:** General condition was much better and the patient has been discharged from hospital.

*“Carbo veg 200 was given on the above indications and also because this was a 3<sup>rd</sup> stage like case for which it has been found to be quite useful.”*

## Mild and asymptomatic cases

### Case no. 1

Dr. Mrs. P S., resident of kalyan, Maharashtra, who was found Covid 19 positive after an emergency cesarean delivery.

#### **Presenting symptoms:**

- Slight giddiness
- Weakness
- Worried if test will not become negative then what will she do
- Manipulative
- Suspicious
- Sleep is not good
- Thinking a lot

**Analysis & Basis of prescription** (for stag 1 case please refer book section):

Above points are showing disposition of Lachesis.

**PRESCRIPTION:** LACHESIS 200, single dose, orally

**FOLLOW-UP:** As there was no complaint, so we waited for the next test which was done after 10 days which came out to be negative

### Case No.2

Mrs. U. P., a female of 60 years, resident of Mumbai, was diagnosed with Covid positive

#### **Presenting symptoms:**

- 7 people positive in the house front of her house
- Fear
- Early seven days had fever with chill and typhoid positive
- Fever with takes 2 blankets but no perspiration
- Breathlessness <walking , talking
- Dry cough <night
- Hot

- Thirsty
- Appetite decreased
- Bitter taste of mouth
- Pricking sensation on the tongue during fever
- k/c/o HTN
- h/o Lumpectomy b/l breast in 2019 , appendicectomy

#### **About the patient**

- fearful
- fear of death
- consolation desires

#### **Analysis and basis of prescription**

- Fever with chill, perspiration absent.
- Breathing difficult, aggravated by talking, walking.
- Hot and Thirsty.
- Mouth taste bitter.
- Tongue pain, pricking, stitching.

**Prescription:** Merc Sol 200, single dose, orally

#### **Case no. 3**

Mr. A J from Bharatpur, Rajasthan, was diagnosed Covid 19 positive and consulted one of our team members for homeopathic treatment.

#### **Presenting symptoms**

- Ailments form drinking cold water
- Perspiration checked
- Better drinking hot water
- Thirstless
- Chilly
- Heaviness in eyes

**Prescription:** Ars alb 200 repetitive dose, orally

**Follow up:** He much better after taking medicines only slight weakness left as on 7/6/2020

**Bibliography:**

1. Organon of medicine – Dr. CFS Hahnemann
2. Theory of chronic disease – Dr. CFS Hahnemann
3. Robbins & Cortan Pathologic Basis of Disease
4. The golden thread of homoeopathy medicine – Dr. Dilip Soni
5. Website – [www. ncbi](http://www.ncbi)
6. Murphy's Repertory
7. Van Zandvoort R., Complete repertory
8. Fredrick Shreyons - Synthesis repertory
9. Boger C. Boenninghausen's Repertory
10. Guyton & Hall - textbook of Physiology
11. Snell's Clinical Anatomy
12. NCERT's text book of Physics 12<sup>th</sup> book
13. Davidson's Principles and Practice of Medicine