

A Case of Chronic Kidney Failure is Successfully Managed by Homeopathic Mode of Treatment

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Abstract— Chronic renal failure (CRF) refers to an irreversible deterioration in renal functions, which develops over a period of years. This initially manifests only as a biochemical abnormality. CRF is considered when glomerular filtration rate (GFR) falls below 30 ml/min. The conventional approach of management includes Hemo-dialysis and at last renal transplantation. In the present scenario cost of Hemo-dialysis can not be affordable by every patient due to some economic reasons and understanding this means of principles explained that Homeopathy is necessary and the disease of the patient at comfortable plate form of his daily routine. Exploration of a safe and alternative therapy is needed, which proves to be helpful in reducing the symptoms and requirement of dialysis and in postponing the renal transplantation. CKD patients treated with Homeopathy may reduce prolong dialysis or reduce its frequency, and it also maintains the stage of patients without further damages. There are various types of medicines in Homeopathy are reported to be effective for CRF Kidney failure and its goal to provide a better life to the patients. In this study, Apis mellifica and Arsenicum Album are found to be useful in the management of chronic renal failure. Here we are presenting a case of CKD of 39 years old female patient who was on Homeopathic mode of treatment.

Keywords— Homeopathy, chronic renal failure, Complementary and Alternative medicines

I. INTRODUCTION

CKD is the presence type of kidney disease, or decreased in the level of kidney function for about a period of 3 months or more. It affects the function of both the kidneys. CKD is a chronic condition which is rarely reversible and leads to progressive decline in the renal function. Reduction in the renal mass leads to the hypertrophic condition of the remaining nephrons with hypertrophy of the remaining nephrons with hyper-filtration and the progressive glomerular sclerosis and interstitial fibrosis. Chronic kidney disease (CKD) always had major criteria of concern for physicians. Incidence of a kidney disease may lead to kidney failure and this disease is increasing day by day. However some people develop irreversible kidney disease known as chronic renal failure or chronic kidney disease.

The treatment of chronic kidney disorders consists of their underlying cause if it is possible, and then other symptoms, patient should control on liquids, salty diet, stop the cessation of smoking and use of various types of pharmaceutical drugs. But with progressive end-stage of this disease, restoration of the kidney functions are only possible with dialysis or kidney transplantation. So the treatment modes of this disease are so costly and may not be affordable by all.

Renal kidney failure is one of the leading problems of the

world due to lack of hygienic environment, use of contaminated drinking water, shortage of purified water supply and unawareness are the causes of this world-wide disease.

Homeopathic Approach – In treating someone with homeopathy in the case of ‘chronic kidney failure’ does not require any different technique but it is quite similar to treat any other illness. In Homeopathy we treat the ‘disease’ not disease, so we look at the patient as a whole because all we have to do is to collect the symptoms, as in this case the chief symptoms are— Pitting edema, loss of appetite, Anemia, weakness, Bilaterally swellings on legs etc. So we have to record for how long the patient has been suffering from the problem along with its evolution?

“Evolution” here means where did the problems begin, extended and reach to the current situation.

II. AIM AND OBJECTIVES

To evaluate a role of homeopathy medicines in chronic renal dysfunction.

Place of work- Clinical study was performed at private homeopathic center under a concern of **DR.NURUL HASAN (B.M.S.)**.

Detailed Case Taking- It's the recording and interpretation of the symptoms that are followed by the repertorisation. The symptoms were classified and evaluated to erect the

totality. The selection of acute medicine was based on acute totality. In the case where Medicine was not working and supposed to be changed then “Gibson – Millier Remedy Relationship” was followed. The potency and Repetition of Medicine were decided by the Individual susceptibility of the Patient.

Case Report- A female patient age of 39 years came in OPD of **NOOR POLY CARE CENTER** presenting their complaint of –

1. Bilaterally swelling on legs.
2. Pitting edema
3. Loss of appetite
4. Anemia
5. Weakness
6. Oliguria

On examination-

General condition was afebrile

Pulse-88/min

Blood pressure-140/87mmhg

CVS-S1, S2 sounds are normal

Present illness- Patient had developed above complaints since 5 months.

Past history- Patient was admitted in a private urology hospital and taken intravenous antibiotics for 5 days and for further management advice to take dialysis which is costly and the patient is not affordable for this. Then this patient came in a OPD of **NOOR POLY CARE CENTER**.

SIGNS-

-Pitting edema on both legs

-Pallor present

INVESTIGATION-

USG- Grade 1 Renal disease

CBC- HB-9.2mg/dl

KFT-Serum creatinine-7.2mg/dl

URINE ANALYSIS- presence of protein

Urine Pus Cells – 20-30/hpf.

DIGNOSIS- Condition was diagnosed chronic kidney dysfunction (CKD) by me under the concern of **DR.NURUL HASAN**.

METHODOLOGY-

MANAGEMENT-

Quantity of Doses- Apis mel 200c twice a week

Arsenic Alba 30c (4 times a day)

-**APIS MELLIFICA 200c** and **ARSENIC ALBA 30c** are found to be useful in treating the case.

III. ASSESSMENT CRITERIA OF PATIENT

On admission			
Serum creatinine	Blood urea	Urine analysis	Pus cells
7.4 mg/dl	90.03 mg/dl	proteins present	20-30/hpf

After 15 days			
Serum creatinine	Blood urea	Urine analysis	Pus cells
3.05 mg/dl	65.23 mg/dl	proteins present	1-15/hpf

After 1 Month			
Serum creatinine	Blood urea	Urine analysis	Pus cells
2.0 mg/dl	58.34 mg/dl	Proteins Absent	5-10/hpf

After 6 Month			
Serum creatinine	Blood urea	Urine analysis	Pus cells
1.5 mg/dl	22 mg/dl	Proteins Absent	1-5/hpf

Assessment of the progress – Consultations were planned at fifteen days of interval or early if needed and recorded with standardized detail with respect to clinical history, current symptoms, mental, emotional states and medication. Individualized Homoeopathic Prescription was given in pills. The potency of the Medicine during subsequent consultations was raised based on the progress of the case or the medicine was changed in cases where no change in the symptoms occurred in the patient are observed by Gibson – Miller Remedy Relationship.

IV. RESULT

In a present trial patient was found positive results. Homeopathic treatment was found useful to Re-create a good kidney function. The patient was consuming Allopathic medicines on a daily basis. After treating with homeopathic medicines patient completely stopped taking Allopathic medicines and managed with in the duration of 6 months.

V. CONCLUSION

Case of (CKD) Chronic kidney failure has been completely managed along with great improvement in quality of life (QoL) of patient.

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