

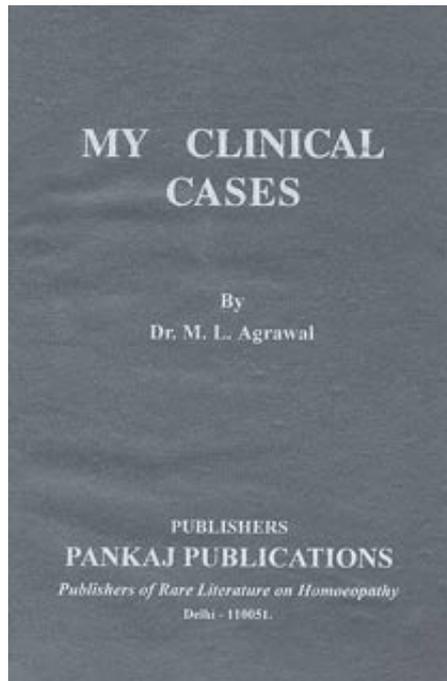
Y.R. Agrawal My Clinical Cases

Reading excerpt

[My Clinical Cases](#)

of [Y.R. Agrawal](#)

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1. A CASE OF COLIC WITH BURNING IN URINATION

Mr. R. aged 55, was suffering from the following complaints.

Symptoms:

1. Pain in abdomen in the navel region
2. Burning during urination. Urine was red in color.
2. Nausea and vomiting.
2. The stool was unsatisfactory.
3. He was aggravated by taking warm food and sweets.
4. He was ameliorated by taking cold drinks.
5. He desired salt.
6. His tongue had a yellow coating.

Rubrics taken for repertorisation from Kent's Repertory were:

1. Warm food aggravate.
2. Sweets, aggravate.
3. Cold drinks, ameliorates..
4. Desires salt.
5. Yellow discoloration of tongue,

Medicines found after analysis from Kent's Repertory were Thuja, Phosphorus

Prescription:

Three doses of Phosphorus 200 were given with placebo

for two weeks.

Follow up:

Patient reported after two weeks with some relief in the abdominal pain. In these two weeks, he had occasionally suffered from diarrhoea and flatulence. There was a mild burning present during urination. 3 doses of Phosphorus I M were given this time with placebo for two weeks.

On his next visit, he reported that there was no pain in abdomen after the last prescription. The color of urine had become normal and the redness had disappeared. He could now take sweets and warm food without any discomfort.

Comments:

Of the two remedies, Phosphorus and Thuja, Phosphorus was selected because the patient was more of a hot nature and was ameliorated by cold things. The remedy was given in the 200 potency because the illness was more on a junctional level and as such no underlying pathology was determinable.

2 . A CASE OF BLEEDING FROM RECTUM

Mrs. P, aged 32 years came with the following symptoms.

Symptoms:

1. Bleeding per rectum since 6 months. She was passing bright red blood after passing stool. She had suffered from the same complaint during her last confinement some years back, which had become well after delivery.
2. Difficulty in breathing with cough and expectoration
3. Aggravation at 3:00 a.m..
4. Aggravation by cold drinks.
5. Aggravation by change of weather.
6. Menses were scanty.
7. Excessive sweating.
8. Weakness.

Following Rubrics were taken for repertorisation from the Kent's Repertory:

1. Respiration, difficult.
2. Aggravation at 3 a.m.
3. Aggravation by change of weather.
4. Aggravation by cold drinks.
5. Menses scanty.

The medicines found after analysis from Kent's Repertory were AMM. carb. and Kali carb.

3. A CASE OF GASTRITIS

Case No. 5422.

A man of 32 years of age came to me with the following complaints.

Symptoms:

1. Pain in the epigastrium for one month, persisting constantly, generally of mild nature but occasionally became very severe with heaviness of upper abdomen.
2. Aggravation after 7 P.M.
3. Aggravation after eating food.
4. Severe pain caused vomiting. Vomiting was yellow in colour and ameliorated the pain for sometime.
5. Burning sensation in the abdomen.
6. Stool sometimes loose, and of changing colour.
7. His thirst was very less even in summer.
8. He used to weep with the pains.

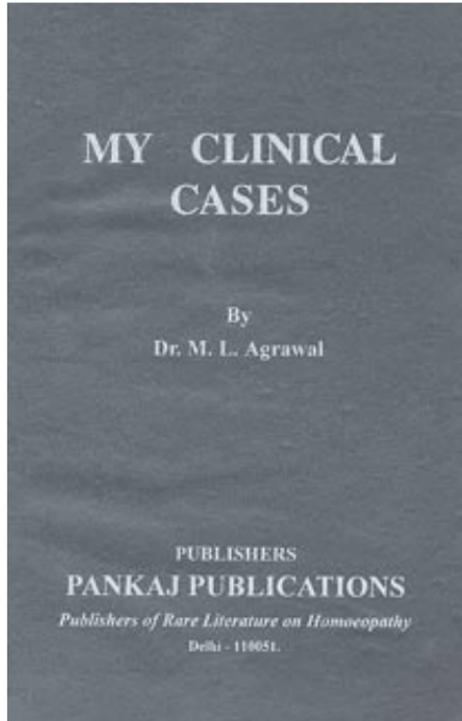
On further enquiry, it was revealed that he used to chew tobacco, even in empty stomach. So, it was considered to be a case of acute gastritis caused by tobacco chewing.

Prescription:

He was given Pulsatilla 0/I, three hourly for one week.

Follow up:

Next week, he reported that he was much better. There was no vomiting, pain was much less and appetite better. Prescription was repeated.



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