

MALARIA & DENGUE FEVER TOGETHER CURED BY HOMOEOPATHY - EVIDENCE BASED CASE

Author

Dr. Anita Nanakram Chawla
B.H.M.S., M.D. (Homoeo)
Nashik's 1st M.D. Homoeopath
Nashik, Maharashtra, India

On 28-09-2015 at 12 noon, Mrs. X. aged 49 Years, a school teacher, came along with her son with following complaints.

1. High grade fever with chills since 3 days. Sudden onset, <evening
 - H/O: drenched in rain and was wet for longer period. No H/O of mosquito bite.
 - No H/O dengue fever or malaria among the school teachers
2. Severe Headache since 3 days,
Onset Sudden; <morning, more in evening.
3. Appetite decreased since 3 days
4. Severe throbbing pain behind eyes since 2 days,
5. Body ache and generalised weakness since 2 days
6. Retrosternal burning since 2 days

O/E:

PR: 108/min,
Temp: 103.8⁰F,
Tongue: Dry+, Slight White

Treatment

RHUX TOX 30 was given every 2 hourly as patient got drenched in rain, and was wet for longer period.

Also advised:

- To take nutritious diet.
- ORS

Follow up 30/09/2015 –

All complaints were as it is **PR:** 108/min, **Temp:** 103.6⁰F

Investigations:

CBC – WBC – 3800

M.P. test – Trophozoites of Pl. Vivax positive

Dengue Antibody test – NS1 Ag positive & IgG Positive

Treatment:

RHUX TOX 200 was given every 2 hourly

01/10/2015 –

All complaints were as it is

PR: 113/min, Temp: 103.6°F

As all complaints were as it is, detailed case history was taken to give constitutional medicine

Past history: Chicken pox – 10 years old.

Personal History:

- Desire - Non-veg, sweet, bakery products
- Thirst: - Appro.2 – 2½ lit / day
- Menses - too late, scanty, dark red, Sticky
- Thermal: Hot
- Medium built

About his nature:

- Short tempered
- Lazy patient (indolent),
- Emotional, easily weeping,
- Craving for parental love & care,
- Doesn't like if someone says about her family,
- Company desire
- Loneliness feeling as all are busy watching mobiles

Diagnosis – Malaria & Dengue fever

Miasmatic Diagnosis – Psora

Homoeopathic Treatment

Magnesia Carb 30 – three times in a day

Indication of Magnesia Carb:

Emotional, easily weeping, Short tempered

Craving for parental love & care

Doesn't like if someone says about her family Company desire

Loneliness feeling

Desire – Non-veg, Bakery product Menses too late, scanty, dark red, Sticky Retrosternal burning

Throbbing headache, severe throbbing pain behind eyes Fever < evening

Follow up:

02/10/2015 –

Fever was reduced in morning. But it was again increased in evening 103.4⁰F No retrosternal burning. Headache, bodyache and pain behind eyes reduced. Appetite improved

Investigations:

CBC – WBC – 3100. HB% and Platelet count were good

Treatment: Mag. Carb 30 /3 times was repeated as there was slight improvement seen.

03/10/2015 –

Fever was reduced in morning. But it was again increased in evening to 101.8⁰F No retrosternal burning. Headache, bodyache and Pain behind eyes reduced considerably

Appetite improved.

Treatment: placebo 3 times was given

05/10/2015 -

Fever came in evening 100.4⁰ F. Continuous improvement seen Investigation: CBC – WBC – 6600. HB% and Platelet count were good Treatment: Placebo 3 times was given

06/10/2015 -

No further improvement seen

Treatment: Mag. Carb 30 /3 times was repeated

07/10/2015 –

No complaints. Placebo 3 times was given.

Investigation:

- CBC – WBC – 7800. HB% and Platelet count were good
- M.P. test – Negative
- Dengue Antibody test – NS1 Ag negative and IgG Ab negative. Only IgM Ab positive

Again investigations were not done as Dengue antibody test IgM Ab remains Positive for minimum 90 days (According to the Pan American Health Organization guidelines 93-99% of cases have detectable IgM by day six to ten of illness, which may then remain detectable for over 90 days)

08/10/2015 to 15/10/2015: No complaints. Placebo 3 times was given per day

I. DISCUSSIONS

In Malaria and dengue fever, constitutional medicine is very important. After giving constitutional medicine, this patient started responding from next day onwards. Did not develop rashes and other complications such as internal bleeding, dropping of B. P., Jaundice, Cerebral Malaria (Coma), etc.

II. CONCLUSION

1. Acute diseases like, Dengue fever & Malaria and very urgent cases can be treated very well by homoeopathy.
2. Acute diseases can be treated faster than other conventional system of medicine.
3. Complication of diseases can be avoided
4. Sound knowledge of M.M. & O.P.

III.REPORTS

1. Before Treatment (01 CBC)

Chikitsa
Diagnosics
TRUSTED CARE THROUGH

● Pathology Laboratory
● X - Ray
● ECG
● Stress Test
● Health Check-Up

Near Vidya Vikas Circle, Mohinraj Bus Stop, Gangapur Road, Nashik-13. Mobile : 9373900642, Ph. : 2573968.
Time : 8 am. to 9 pm.

PATIENT'S NAME : M. [REDACTED] SAMPLE ID: II740
REFERRED BY Dr. : DR. CHAWLA ANITA DATE : 30-09-2015

Complete Blood Count

<u>TEST DONE</u>	<u>RESULT</u>	<u>NORMAL RANGE</u>
HAEMOGLOBIN	11.5	11.5 – 14.5 gm/dl
Erythrocyte Count	3.76	3.8 – 5.8 million per c.u. mm.
Leucocyte Count	3800	4000 – 11000 per cu. mm.
<u>R.B.C. Indices</u>		
P.C.V.	35.7	35 – 45 percent
M.C.V.	94.9	76 – 100 femtolitres
M.C.H.	30.6	27 – 33 pico-grams
M.C.H.C.	32.2	30 – 35 percent
<u>W.B.C. differential count</u>		
Neutrophils	76	45 – 70 percent
Lymphocytes	23	20 – 50 percent
Eosinophils	00	0 – 6 percent
Monocytes	01	0 – 10 percent
Basophils	00	0 – 1 percent
<u>Peripheral Smear findings</u>		
Abnormalities of Leucocytes	Neutrophilia	
	Leucopenia	
Abnormalities of Erythrocytes	Absent	
Platelet Count	1.93	1.5 – 4.5 lakhs/cumm
<small>Done on cell counter (Coulter)</small>		

DR. GEETANJALI GONDKAR M.D. PATHOLOGY

2. Dengue Antibody & MP test

Chikitsa
Diagnostics
Near Vidya Vikas Circle, Mohinraj Bus Stop, Gangapur Road, Nashik-13 Mobile : 9373900642, Ph : 2573968.
Time : 8 am to 9 pm

- Pathology Laboratory
- X - Ray
- ECG
- Stress Test
- Health Check-Up

PATIENT'S NAME : ██████████ SAMPLE ID: I1740
REFERRED BY Dr. : DR. CHAWLA ANITA DATE : 30-09-2015

TEST DONE

Dengue Antibody Test
IgG Antibodies : Indicative of secondary infection.
IgM Antibodies : Indicative of primary infection.
Malarial Parasite
Method : Thick Smear. Chances of detection are highest at the time of fever. Inability to see parasite in peripheral smear does not rule out Malaria. Smears on 2-3 times may be required in few cases.

RESULT

Negative For IgM Ab NS1 Ag & IgG positive

Trophozoites of PL Vivax

DR. GEETANJALI GONDKAR M.D., PATHOLOGY

3. During Treatment(03 CBC)

MALARIA & DENGUE FEVER TOGETHER CURED BY HOMOEOPATHY - EVIDENCE BASED CASE

Chikitsa
 Diagnostics
 NEAR VIDYA VIKAS CIRCLE, MAHINIRAJ BUS STOP, GANGAPUR ROAD, NASHIK-13. MOBILE : 9373900642. PH : 2573968.
 Time : 8 am to 9 pm.

- Pathology Laboratory
- X - Ray
- ECG
- Stress Test
- Health Check-Up

PATIENT'S NAME : ██████████ SAMPLE ID: IJ67
 REFERRED BY Dr. : DR. ANITA CHAWLA DATE : 02-10-2015

Complete Blood Count

TEST DONE	RESULT	NORMAL RANGE
HAEMOGLOBIN	12.3	11.5 – 14.5 gm/dl
Erythrocyte Count	4.20	3.8 – 5.8 million per c.u. mm.
Leucocyte Count	3100	4000 – 11000 per cu. mm.
R.B.C. Indices		
P.C.V.	39.0	35 – 45 percent
M.C.V.	92.9	76 – 100 femtolitres
M.C.H.	29.2	27 – 33 pico-grams
M.C.H.C.	31.4	30 – 35 percent
W.B.C. differential count		
Neutrophils	66	45 – 70 percent
Lymphocytes	30	20 – 50 percent
Eosinophils	02	0 – 6 percent
Monocytes	02	0 – 10 percent
Basophils	00	0 – 1 percent
Peripheral Smear findings		
Abnormalities of Leucocytes	Absent	
Abnormalities of Erythrocytes	Absent	
Platelet Count	1.51	1.5 – 4.5 lakhs/cumm
<small>Done on cell counter (Coulter)</small>		

DR. GEETANJALI GONDKAR M.D. PATHOLOGY

4. During Treatment(04 CBC)

Chikitsa
 Diagnostics
 NEAR VIDYA VIKAS CIRCLE, MAHINIRAJ BUS STOP, GANGAPUR ROAD, NASHIK-13. MOBILE : 9373900642. PH : 2573968.
 Time : 8 am to 9 pm.

- Pathology Laboratory
- X - Ray
- ECG
- Stress Test
- Health Check-Up

PATIENT'S NAME : ██████████ SAMPLE ID: IJ144
 REFERRED BY Dr. : DR. CHAWLA ANITA DATE : 05-10-2015

Complete Blood Count

TEST DONE	RESULT	NORMAL RANGE
HAEMOGLOBIN	11.9	11.5 – 14.5 gm/dl
Erythrocyte Count	3.98	3.8 – 5.8 million per c.u. mm.
Leucocyte Count	6600	4000 – 11000 per cu. mm.
R.B.C. Indices		
P.C.V.	37.8	35 – 45 percent
M.C.V.	95.0	76 – 100 femtolitres
M.C.H.	29.9	27 – 33 pico-grams
M.C.H.C.	31.5	30 – 35 percent
W.B.C. differential count		
Neutrophils	47	45 – 70 percent
Lymphocytes	47	20 – 50 percent
Eosinophils	01	0 – 6 percent
Monocytes	05	0 – 10 percent
Basophils	00	0 – 1 percent
Peripheral Smear findings		
Abnormalities of Leucocytes	Absent	
Abnormalities of Erythrocytes	Absent	
Platelet Count	1.82	1.5 – 4.5 lakhs/cumm
<small>Done on cell counter (Coulter)</small>		

DR. GEETANJALI GONDKAR M.D. PATHOLOGY

MALARIA & DENGUE FEVER TOGETHER CURED BY HOMOEOPATHY - EVIDENCE BASED CASE

5. After Treatment(05 CBC)

Chikitsa
 Diagnostics
SHREE PATH LABORATORY

● Pathology Laboratory
 ● X - Ray
 ● ECG
 ● Stress Test
 ● Health Check-Up

Near Vidya Vikas Circle, Mohiniraj Bus Stop, Gangapur Road, Nashik-13 Mobile : 9373900642, Ph : 2573968
 Time : 8 am to 9 pm

PATIENT'S NAME : ██████████ SAMPLE ID: IJ190
 REFERRED BY Dr. : DR. CHAWLA ANITA DATE : 07-10-2015

Complete Blood Count

TEST DONE	RESULT	NORMAL RANGE
HAEMOGLOBIN	11.3	11.5 – 14.5 gm/dl
Erythrocyte Count	3.86	3.8 – 5.8 million per c.u. mm.
Leucocyte Count	7800	4000 – 11000 per cu. mm.
B.C. Indices		
P.C.V.	36.9	35 – 45 percent
M.C.V.	95.6	76 – 100 femtolitres
M.C.H.	29.3	27 – 33 pico-grams
M.C.H.C.	30.6	30 – 35 percent
W.B.C. differential count		
Neutrophils	57	45 – 70 percent
Lymphocytes	39	20 – 50 percent
Eosinophils	02	0 – 6 percent
Monocytes	02	0 – 10 percent
Basophils	00	0 – 1 percent
Peripheral Smear findings		
Abnormalities of Leucocytes	Absent	
Abnormalities of Erythrocytes	Absent	
Platelet Count	3.08	1.5 – 4.5 lakhs/cumm

Done on cell counter (Coulter)

DR. GEETANJALI GONDKAR M.D. PATHOLOGY

6. Dengue Antibody & MP test

Chikitsa
 Diagnostics
SHREE PATH LABORATORY

● Pathology Laboratory
 ● X - Ray
 ● ECG
 ● Stress Test
 ● Health Check-Up

Near Vidya Vikas Circle, Mohiniraj Bus Stop, Gangapur Road, Nashik-13 Mobile : 9373900642, Ph : 2573968
 Time : 8 am to 9 pm

PATIENT'S NAME : ██████████ SAMPLE ID: IJ190
 REFERRED BY Dr. : DR. CHAWLA ANITA DATE : 07-10-2015

TEST DONE	RESULT
Malarial Parasite Method : Thick Smear. Chances of detection are highest at the time of fever. Inability to see parasite in peripheral smear does not rule out Malaria. Smears on 2-3 times may be required in few cases.	Not Seen
Dengue Antibody Test IgG Antibodies : Indicative of secondary infection. IgM Antibodies : Indicative of primary infection.	Negative For IgG Ab & NS1 Ag. IgM Ab positive

DR. GEETANJALI GONDKAR M.D. PATHOLOGY