



# International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493

P-ISSN: 2616-4485

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

IJHS 2024; 8(2): 313-318

Received: 03-04-2024

Accepted: 05-05-2024

**Dr. B Lokeswari**

Associate Professor, SASA  
Homoeopathic Medical  
College, Guntakal, Andhra  
Pradesh, India

**Dr. G Lakshmi Narasaiah**

1. Associate Professor, SASA  
Homoeopathic Medical  
College, Guntakal, Andhra  
Pradesh, India  
2. Ph.D. Scholar, Lincoln  
University College, Malaysia

**Corresponding Author:**

**Dr. B Lokeswari**

Associate Professor, SASA  
Homoeopathic Medical  
College, Guntakal, Andhra  
Pradesh, India

## Urolithiasis individualised homoeopathic treatment: An evidence based case report

**Dr. B Lokeswari and Dr. G Lakshmi Narasaiah**

DOI: <https://doi.org/10.33545/26164485.2024.v8.i2e.1150>

### Abstract

Urinary tract stones or urolithiasis are common urological problem in India due to multifactorial. Prevalence and recurrence of urinary calculi is increasing rapidly in present condition all over India. If a calculi more than 0.5 cm diameter can cause painful ureteric obstruction and size more than 0.7 cm may always require surgical intervention, as believed in conventional medicine. Recurrences of calculi are very common even after repeated surgical removal. Individualized Homoeopathic medicines can offer holistic approach in treating cases non-invasively. Homoeopathic medicines are natural, safe, cost-effective, and result-oriented and being constitutionally can address these factors also by treating the underlying root cause and preventing the recurrence. Therefore, the present article aims to treat urinary calculi through individualized constitutional Homoeopathic treatment.

**Case Summary:** A 32 years married old male patient presented with intermittent severe pain in the left renal region for 3 days associated with urinary complaints. A 16 mm calculus was found in the urinary bladder, left distal ureter causing left-sided mild hydronephrosis as per USG abdomen report. According to case analysis of symptoms similarity and plant kingdom sensitivity theme, Hamamelidae subclass, Urticales order and Cannabinaceae family with malarial miasm Cannabis Sativa in different potencies was prescribed as per case need. Subsequently, the large bladder stone was expelled within a week another small ureteric stone (7 mm) expelled in urine after Homoeopathic medication. The pain and urinary complaints was completely relieved, and the USG abdomen also shown significant change of calculi size and position and patient still under observation and follow-up. On the basis of the patient's expression, plant kingdom analysis, miasmatic and personal evolution model application in renal and bladder stone suggests that homoeopathic medicine can enable expulsion of a relatively bigger renal stones and check recurrence. However, more conclusive researches are required in future.

**Keywords:** Urolithiasis, personal evolution model, themes, homoeopathy

### Introduction

Urinary tract stones are most prevalent in Asian countries urology practice. In the context of India, kidney stone disease is prevalent, with an expectancy of 12% in a total population reported to be prone to urinary stones. Urinary tract stones can be found in many locations, such as the kidney, ureter, urethra, and bladder. Common clinical presentation of urinary track stones is acute renal colic due to obstruction. With symptoms of intermittent, colicky flank pain that typical radiate to the lower abdomen or groin, often associated with nausea and vomiting. As stone enters the ureter, the lower urinary tract symptoms occur such as dysuria, urgency, and frequency. Despite the best available medical and surgical procedures in conventional medicine for renal stones, the success rate is inadequate, along with recurrence of same condition. Homoeopathic treatment is based on Similia principle with constitutional approach for management of any disease including urolithiasis. The fundamental principle of Homoeopathy is that it treats the patient as a whole. Previous literature on Homoeopathy evident that there is broad scope in the treatment of renal calculi but need for evidence-based study on the safety and efficacy of homoeopathy. A prospective, multicentric observational study on urolithiasis, was conducted by Central Council for Research in Homoeopathy (CCRH) in which 106 cases reported of expulsion of calculi out of 220 cases with benefited individual remedies were Lycopodium, Sulphur, Pulsatilla, Nux Vomica and Cantharis<sup>[1-4]</sup>.

These published research reports show that constitutional homoeopathic treatment based on kingdom themes and personal evolution model (PEM) has plenty of scope for the treatment of renal stone. The present case also reports expulsion of a bladder and ureteric stone more than 0.7 cm diameter size with homoeopathic medicine.

**Materials and Methods**

**Case history:** Mr S.R. aged about 32 years married male working in cloth shop presented with following complaints.

**History of presenting complaints:** pain in left loin radiating to left loin up to bladder, severe burning in along the urethra before urination extending from glans penis to bladder since 3 days, USG abdomen (22-08-23) reveled 16 mm calculi noted at left vesicoureteric junction with gross cystitis, Bilateral renal calculi.

**Personal History**

Nature of the patient: patient is very sensitive to pain, hurried and hasty during pain with restless and wants immediate relief from pain. Heavy feeling in loin before urination and feel light after passing urine, obstructed feeling in urethra with burning pain makes the patient more anxious.

**Physical Generals:** Lean built

**Appetite:** Normal.

**Bowels:** Constipated

**Thirst:** Increased for cold water

**Sweat:** Normal

**Habits:** Chewing pan and raja

**Thermal:** Hot patient

**Past History:** Recurrent urinary tract infections after marriage treated with allopathic medication

**Evaluation of symptoms and rubrics taken**

1. Restless and hurry	5. Sore bruised pain in loin
2. Industrious- activity desire	6. Bladder stones
3. Thirsty during pain	7. Cystitis, burning hot urine
4. Renal pain extend to bladder	8. Pain in urethra before urination

**Reportorial Result:** Complete repertory: Puls -18/8, Canth -17/8, Nuv Vom -16/8, Can Sat 15/8, Apis-15/7, Bell-15/7, Lyc-15/6.

Remedy Name	Puls	Canth	Nux-v	Berb	Cann-s	Apis	Bell	Merc	Sulph	Lyc
<b>Totality</b>	18	17	16	15	15	15	15	15	15	15
<b>Symptom Covered</b>	8	8	8	8	8	7	7	7	7	6
[C] [Mind]Restlessness, nervousness:Tendency:	3	1	2	1	2	2	3	3	3	3
[C] [Mind]Hurry, haste:Tendency:	2	1	2	1	1	1	2	3	3	1
[C] [Mind]Industrious, mania for work:	1		1		2	2	1	1	1	3
[C] [Stomach]Thirst:Pains:With:		1								
[C] [Kidneys]Pain:Sore, bruised:	3	2	2	3	2	2	1	1		
[C] [Kidneys]Pain:Radiating:Extending:Bladder, to:				1						
[C] [Bladder]Calculi:	2	3	2	3	1		2		1	3
[C] [Bladder]Inflammation:	3	3	2	2	1	3	3	2	2	3
[C] [Urethra]Pain:General:Urination:Before:	2	3	2	2	3	2		2	2	
[C] [Urine]Burning, hot:	2	3	3	2	3	3	3	3	3	2

**Analysis of case as per Personal evolution model and themes**

**Kingdom:** Plant due to sensitivity with many modalities

**Sub class as per Dr. Yakir plant chart:** Hamamelidae- Heavy versus light feeling

**Order:** Urticales- sensitive borders- recurrent urinary tract infection

**Family:** Cannabinacea: hurry, activity desire and raja addiction

**Miasm:** Malarial- intermittent pain and struck feeling  
Inner age of patient: Infancy stage- Need immediate relief from pain

**Remedy selection:** Cannabis Sativa

**Treatment and follow up:**

**Table 1:** Follow up details of constitutional prescription

Date	Signs and symptoms	Prescription
23-08-2023	Pain in left side of loin associated with Severe burning pain in urethra before urination. Increased frequency of urine with restless and hurried. USG Abdomen reveled 16 mm calculus at left vesico ureteric junction, gross cystitis.	Cannabis Sativa 30 3 doses Sac lac TID for 3 days.
26-08-2023	Burning pain in urethra decreased and pain in loin no change.	Cannabis Sativa 200 3 doses, Sac lac TID for 3 days.
30-08-2023	Large 16 mm vesicle calculi expelled last night in urine with decrease of urinary frequency and pain.	Placebo 1 dose, Sac lac TID for 3 days.
05-09-2023	Small 7 mm ureteric calculi expelled in urine yesterday morning with burning pain along urethra.	Cannabis Sativa 1M 1 dose, Sac lac TID for 1 week.
11-09-	Patient complaining of pain in right side of loin radiate to groin with nausea. Since 1 day. Mild	Cannabis Sativa 1M 1 dose,

2023	burning in hypogastric area before urination. Advised USG abdomen revealed mild rt hydro uretero nephrosis with vesico ureteric junction calculus and cystitis	Sac lac TID for 1 week.
15-09-2023	No pain in loin and burning urination also decreased.	Placebo 1 dose, Sac lac for 2 weeks.
30-09-2023	Passed small calculi in urine, no pain in loin, no burning urination	Placebo 1 dose, Sac lac for 2 weeks.

**Diagnostic assessment:** USG of abdomen of abdomen dated 22 august 2023 showed 16 mm calculus at the left ureterovesicle junction with gross cystitis, bilateral renal calculus. Urolithiasis symptoms score (USS) was used to

evaluate the symptoms of the patient at the first visit and subsequently at each follow-up. After evaluation on the first visit USS score was 21 which is categorized as severe [Table 2].

**Table 2:** Follow up details of constitutional prescription

Urolithiasis symptoms	Date of follow-up with Urolithiasis symptoms score						
	23-08-23	26-8-23	30-08-23	05-09-23	11-09-23	15-09-23	30-09-23
Pain/Colic	3	2	1	0	0	0	0
Haematuria	2	1	0	0	0	0	0
Dysuria	3	2	1	0	0	0	0
Stone	2	2	2	1	1	1	1
Size of stone	3	3	3	3	3	3	3
Position of stone in kidney	3	3	3	3	3	3	3
Position of stone in ureter	2	1	1	1	1	1	1
Position of stone in bladder	3	3	0	0	0	0	0
Symptoms Score/Total Score (22)	21/22	17/22	11/22	8/22	8/22	8/22	8/22

### Color plates of case result



**Fig 1:** Expelled bladder stone



**Fig 2:** Expelled ureteric stone



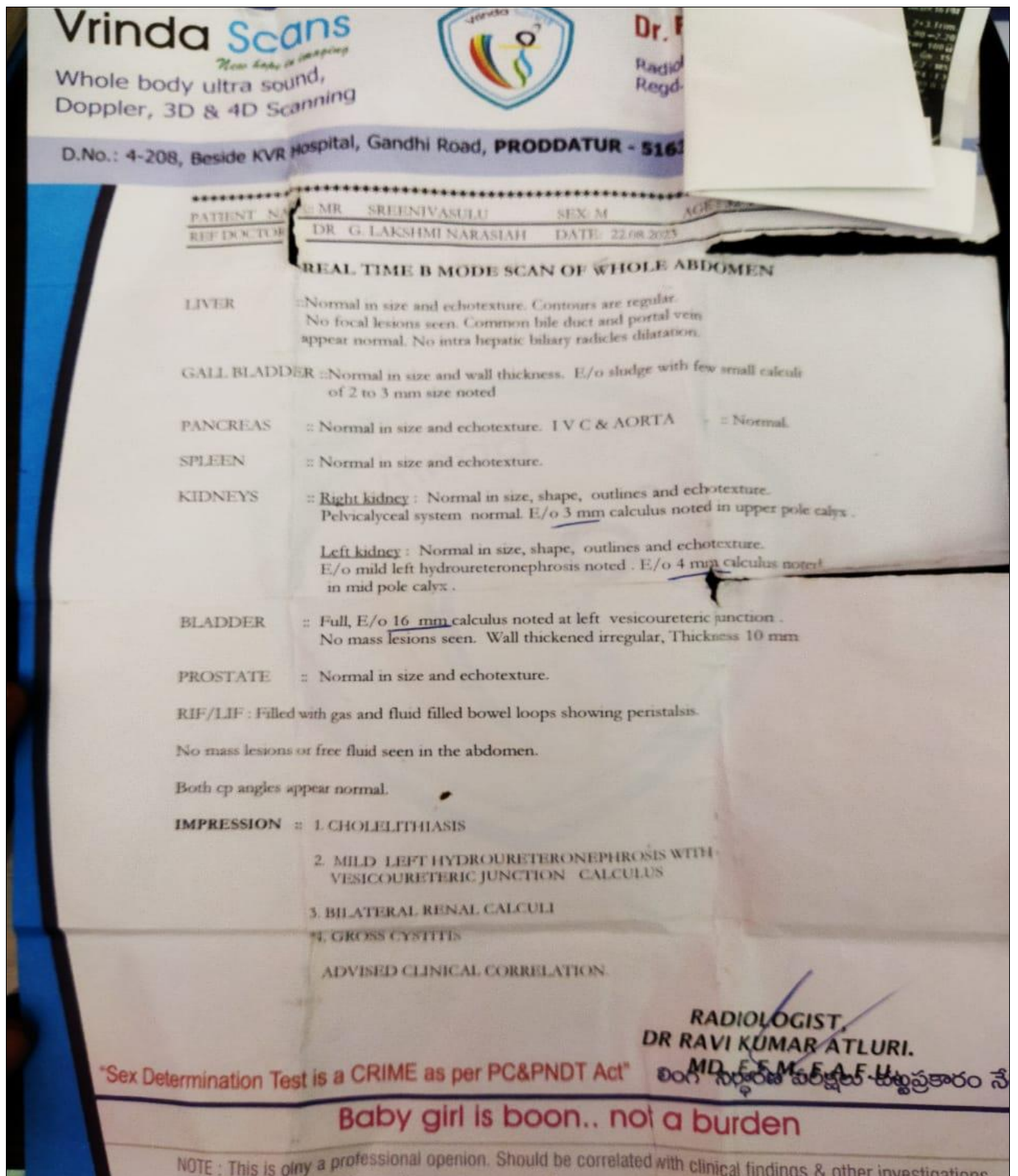


Fig 3: USG abdomen before treatment



### **Conflict of Interest**

Not available

### **Financial Support**

Not available

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#### **How to Cite This Article**

Lokeswari B, Narasaiah GL. Urolithiasis individualised homoeopathic treatment: An evidence based case report. *International Journal of Homoeopathic Sciences*. 2024;8(2):313-318.

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