



March 2020

HOMOEOPGLEANINGS

QUARTERLY MEDICAL BULLETIN



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EDITORIAL

Hi Everyone.....

Usually we begin with greeting everyone for the season but unfortunately this is not been a season with greetings. It has been a season of gloom and doom. It has been a season in which humankind has realised the supremacy of the nature. We humans had been taking our nature for granted for too long. This has been a season for its payback. A minute microscopic part of nature has brought whole human race to its knees. This has been the story of the past quarter.

The future too is uncertain , the magnitude of the problem caused by the corona virus & the consequences of it, are still beyond the realms of any kind of prognosis. In these unforeseen circumstances the only thing that needs to be done is act responsibly. Every person , every family, every community, every state & every nation has to act responsibly & adequately. If that does not happen , only God can save us... stay safe , act responsibly.



Dr Gaurav Sharma
Associate Professor
Department of Hom. Materia Medica

Abdominal Disorders and Homoeopathy

Tired of painful bloating, cramping and constipation? Homeopathy may be able to help.

IBS, Gastritis and digestive tract issues are increasing where fast-food & takeaways are gaining in popularity. Up to one-fifth of the population in Britain have sought medical attention for the painful symptoms of bloating, cramps, constipation and/ or diarrhoea. According to the NHS website, the cause is unknown and there is no cure.

Homeopathy has a proven track record in helping alleviate chronic symptoms. In 2005, a study at Bristol Homoeopathic Hospital showed over 70% of patients with chronic diseases, including irritable bowel syndrome, reported positive health changes following treatment. More than 6,500 patients took part in the six-year study with problems such as arthritis, eczema, asthma, migraine, irritable bowel syndrome, depression and chronic fatigue.

Lycopodium clavatum

This remedy is well-suited to people with IBS & food intolerances, especially onions, oysters, cabbage and beans. The pains are worse in the evening, typically from 4- 8pm and are relieved by passing wind. The inflamed digestive tract struggles to get enough nutrition from food, so there can be loss of weight with fullness and bloating in the abdomen. The appetite is very changeable and can go from being ravenous to very full after a few mouthfuls.

Colocynthis

This remedy has terrible stomach cramps that are better for doubling up and may be worse from anger or indignation. The pains are short, sharp & pinching and aggravated after eating, especially fruit. Heat & pressure give some relief to the pains which can extend to the lower back or into the buttocks. It is also a very useful remedy for sciatica and neuralgic pain in general.

Nux Vomica

This remedy suits people who burn the candle at both ends, working hard and playing harder. Eventually, this stressful lifestyle takes its toll and the digestive system suffers. There are severe stomach cramps and acid reflux that are aggravated by mental exertion. Hiccough, belching, fullness and indigestion are worse after coffee, spicy foods and smoking. There can also be a lot of nausea and feelings of being sea-sick. The remedy is also very useful to treat a hangover.

Arsenicum album

Stomach cramps that are worse after taking cold. This remedy suits people who always feel chilly; so much so that even eating cold food such as ice cream aggravates. There is a great deal of diarrhoea that can come on after drinking whilst moving around makes everything worse. Taking regular sips of a warm drink and lying down to rest bring relief.

Argentum nitricum

In this remedy there is a lot of wind, with very loud and forceful belching or flatulence. There is nausea and indigestion associated with nerves or anxiety, especially when anticipating a stressful event like a job interview or exam.

Sulphur

Stomach cramps aggravated by touch, with burning pains worse in the morning and at night. Appetite is usually increased, especially around 11am with an 'all-gone' sensation. The stomach feels very heavy straight after eating.

Bryonia alba

A useful remedy in IBS that is aggravated after eating bread and where the thirst is increased. The stomach may feel so heavy that it is like a stone is sitting there. Belching relieves the pain and tastes of undigested food. Tight clothing and walking about also worsen the condition.

Carbo veg

The remedy is well-suited to older people or those suffering from general fatigue with stomach pains that are burning, sore or pressing. There are cramps which feel like the stomach is being contracted with a lot of bloating after eating. Butter, fats & rich foods can cause belching, heartburn and indigestion with weakness or faintness.

China officinalis

Stomach acidity with a great deal of bloating & bitter or sour belching. The appetite swings from being ravenous to being completely off food, with a feeling of fullness after eating a small amount. Fruit and milk aggravate and the pains are pressing or sore. Digestion in general is very slow.

Natrum muriaticum

Indigestion after too much starchy food with sour belching & terrible hiccough. There are painful stomach cramps, aggravated by touch. Strong emotions such as grief, or stewing on the past can aggravate the condition.



DR. JIGISHA PANCHAL
ASSISTANT PROFESSOR
DEPARTMENT OF PRACTICE OF MEDICINE

WHAT TO SEE AND WHAT TO GIVE? (Dehydration and Oral rehydration therapy)

“INTESTINAL DISORDERS” PARTICULARLY- DIARRHEAL ILLNESS CASES INCREASES IN SUMMER. PROMPT AND ACCURATE “ASSESSMENT OF HYDRATION”, BEING MOST VITAL ASPECT IN DEALING WITH ACUTE DIARRHEAL ILLNESS AS WELL AS THAT CAUSED BY SUMMER HEAT. USE OF “ORT” ON TIME FORMS THE BASIC ASPECT OF MANAGEMENT OF DEHYDRATION AND “SAVES 9”.

DEHYDRATION:

COMMON CAUSES OF DEHYDRATION:

Vomiting and Diarrhea
Diuretics
Excessive sweating with prolonged exertion
Heat
Decreased fluid intake
Burns

ASSESSMENT OF DEHYDRATION:

Classification of dehydration severity by WHO :

No dehydration: No enough signs to classify as some or severe dehydration

Some dehydration: Two or more of the following signs:

Restlessness, irritability
Shrunken eyes
Drinks eagerly, thirsty
Skin pinch goes back slowly

Severe dehydration: Two or more of the following signs:

Lethargy/unconsciousness
Shrunken eyes
Unable to drink or drinks poorly
Skin pinch goes back very slowly ≥ 2 seconds

Mild dehydration – 1 to 5 % loss of body weight, *mild to moderate dehydration* -6 to 10% loss of body weight and *severe dehydration*-n over 10% loss of body weight

In children:

<i>Signs and symptoms:</i>	<i>Mild dehydration</i>	<i>Moderate dehydration</i>	<i>Severe dehydration</i>
Weight loss (%)	5	10	15
Fluid deficit (ml/kg)	50	100	150
Vital signs:			
Pulse	Normal	↑ weak	gradually↑, feeble
BP	Normal	Normal to low	↓ orthostatic
Respiration	Normal	Deep	Deep and rapid

In young infants:

Clinical assessment of dehydration can be difficult, especially in young infants, and rarely predicts the exact degree of dehydration accurately. The most useful individual signs for predicting 5% dehydration in children are an abnormal capillary refill time, abnormal skin turgor and abnormal respiratory pattern.

ORAL REHYDRATION THERAPY (ORT):

ORT is a type of fluid replacement used to prevent and treat dehydration, especially that due to diarrhea. It involves drinking water with modest amount of sugar and salts- specifically sodium and potassium.

EFFICACY:

Use of ORT has been estimated to decrease the risk of death from diarrhea by upto 93%. ORT has a vast use in children with diarrhea. This use has played an important role in reducing number of deaths in children under < 5 years. Mild to moderate dehydration is best treated with ORT.

USES:

Dehydration

Rehydration (including in cases of burns)

SIDE EFFECTS:

Side effects may include vomiting, high blood sodium or high blood potassium. (Normal conventional values- Na+: 136-146 mEq/L and K+: 3.5-5 mEq/L). If vomiting occurs, it is recommended that use be paused for 10 mins and then gradually restarted.

PREPARATIONS:

The recommended formulation includes sodium chloride, sodium citrate, potassium chloride and glucose. Glucose may be replaced by sucrose and sodium citrate may be replaced by sodium bicarbonate if not available. IT WORS AS GLUCOSE INCREASE THE UPTAKE OF SODIUM AND THUS WATER BY INTESTINES.

Number of other formulations are also available including versions that can be made at home. However, the use of homemade solutions has not been well studied. WHO and UNICEF jointly have developed official guidelines for the manufacturing of ORS.

Composition of ORS:

Contents:	Standard ORS (mEq/L):	Reduced osmolarity (mEq/L):
Glucose	111	75
Sodium	90	75
Chloride	80	65
Potassium	20	20
Citrate	10	10
Osmolarity	311	245

ORT packets are easily available in primary health centres, subcentres, and hospitals. The contents of the packet are to be dissolved in 1 liter of drinking water. The solution should be made fresh daily and used within 24 hours. It should not be boiled or otherwise sterilised.

Home- made ORS: 1 liter water+ 1 teaspoon salt (3 grams)+ 2 tablespoons sugar (18 grams). WHO and UNICEF both agree that drinks with too much sugar or salt can make dehydration worse.

The amount of ORS solution required for rehydration during the 1st 4 hours may be calculated by setting the deficit at approx. 75 ml/kg. The actual amount given will depend on the patients desire to drink and by surveillance of signs of dehydration, keeping in mind the fact that greater amounts should be given to heavier patients, those with greater signs of dehydration and those who still have watery diarrhea during rehydration. 4-6 hours of satisfactory treatment- all signs of dehydration should have disappeared. Sometimes if too much rehydration fluid is given eyelids become puffy, if this occurs it should be stopped.



Dr Keval Soni
Professor
Department of Repertory & Case Taking

UTILITY OF KENT REPERTORY IN ABDOMINAL DISORDERS- CASE DEMONSTRATION

XYZ. aged 52/F.

Is a heavy tea drinker for twenty three years

Has much pain and uneasiness in stomach and abdomen .

Flatus passed immediately after eating.

Pain gradually gets better till next meal.

Much rumbling and gurgling in abdomen.

Appetite is weak

Stool and Peristalsis is fairly regular.

Desires - Salt, sweets.

Averse - Fats, acids.

Flushes of heat with sweating which relieved her.

She is very thin ; excitable person - a bundle of nerves.

On further enquiry she was found to be very chilly.

GENERALS

Very Chilly. < Spring. < Before and during thunder-storm.

Irritable in morning.

Anxiety for others.

Fears, Burglars ; something going to happen ; crowds ; being suffocated, and therefore in tunnel.

Impatient.

Suspicious.

Very sensitive ; readily offended ; startled easily with least noise.

CHILLY PATIENT - Used as Eliminating Symptom : only chilly remedies are given in the following lists.

Fears : Something will happen (Kent's Repertory : p. 45). - Alum., Ars., Calc., Carb-v., CAUST., Graph., *Kali-ars.*, Kali-p., Mag-c., Mang., Nat-a., PHOS.

Fears : suffocation (p. 47) - Carb-an., *Phos.*, *Stram.*.

Fears : crowd (p. 43) - Aloe, Ars., Bar-c., Calc., Carb-an., Caust., Con., Ferr., Graph., Hep., *Kali-ar.*, K-bi., Kali-c., Kali-p., Nat-a., Nat-c., *Nux-v.*, Phos., Plb., Rhus-t., Stann.

Anxiety for others (p. 7) - Ars., Bar-c., Cocc., Phos.

Suspicious (p. 85) - ARS., *Aur.*, BAR-C., *Bar-m.*, *Bell.*, *Bor.*, *Calc-p.*, *Carb-s.*, Canth., CAUST., Cham., Chin., *Cimic.*, *Cocc.*, Con., Graph., *Hyos.*, KALI-ARS., *Kali-p.*, Mur-ac., *Nat-a.*, *Nat-c.*, *Nit-ac.*, *Nux-v.*, *Phos.*, *Plb.*, RHUS-T., *Ruta*, *Sep.*, Sil., Stann., Staph., STRAM., *Sul-ac.*, Viol-t.

Offended readily (p. 69) - *Agar.*, *Alum.*, *Ars.*, *Aur.*, *Bor.*, *Calc.*, *Camph.*, *Caps.*, *Carb-s.*, *Carb-v.*, *Caust.*, Cham., Chel., Chin., Chin-a., *Cocc.*, *Cycl.*, *Graph.*, NUX-V., *Petr.*, *Phos.*, *Ran-b.*, *Sars.*, *Sep.*, *Spig.*, *Stram.*, *Zinc.*

< Approach storm (p. 1403) - *Agar.*, *Aur.*, *Caust.*, *Hyper.*, *Kali-bi.*, *Nat-c.*, *Nit-ac.*, *Petr.*, *Phos.*, PSOR., RHOD., *Rhus-t.*, *Sep.*, Sil.

< Spring (p. 1403) - *Aur.*, *Bar-m.*, *Bell.*, *Calc.*, *Carb-v.*, *Chel.*, *Colch.*, *Dulc.*, *Hep.*, *Kali-bi.*, *Nux-v.*, *Rhus-t.*, *Sars.*, *Sep.*, Sil.

Averse fats (p. 480) - *Ars.*, *Bell.*, *Calc.*, *Carb-an.*, *Carb-v.*, CHIN., Chin-a., *Colch.*, *Cycl.*, *Bell.*, *Hep.*, *Nat-c.*, PETR., *Phos.*, *Rheum*, *Rhus-t.*, *Sep.*

Averse acids (p. 480) - *Bell.*, *Cocc.*, *Ferr.*, *Ign.*, *Nux-v.*, *Ph-ac.*, SABAD.

Desire salt (p. 486) - *Calc.*, *Calc-p.*, CARB-V., *Caust.*, *Cocc.*, *Con.*, *Nit-ac.*, PHOS., *Plb.*

Desire sweets (p. 486) - *Am-c.*, *Arg-m.*, *Ars.*, *Bar-c.*, *Calc.*, *Carb-v.*, CHIN., Chin-a., *Kali-ars.*, *Kali-c.*, *Kali-p.*, *Nat-c.*, *Nux-v.*, *Petr.*, *Plb.*, *Rheum.*, *Rhus-t.*, *Sabad.*, *Sep.*

Remarks. The chief remedies running through the case are *Ars.*, *Calc.*, *Caust.*, *Nat-c.*, *Nux-v.*, *Phos.*, *Rhus.*, *Sep.* Giving the different types their values ; (Capitals = 3 ; Italics = 2 ; Ordinary = 1) ; we find that *Ars.* appears 8 times to value of 16 = *Ars.* 8¹⁶, *Calc.* 8¹⁴, *Caust.* 7¹³, *Nat-c.* 6⁹, *Nux-v.* 6⁹, *Phos.* 10¹⁸, *Rhus-t.* 7¹², *Sep.* 6¹¹.

The constitution of the patient suggested either *Ars.* or *Phos.*

We have thus come to these two remedies by only considering the general symptom of the patient.

The pain in stomach was > hot drinks ; even wine which suits her generally had to be given up owing to its coldness, and as *Phos.* patients crave cold drinks (even ices) in gastric troubles, we are left with *Ars.*

Ars-alb. 30 - 3 doses at 6-hourly intervals.

Pain > (which had been present for years) in a few days, and in a few weeks she was almost well, being much less excitable.

This case shows the importance of Generals in their order - mental, climatic, desires and aversions in food ; all of which must be markedly present to be of any value.



Dr Rahul Gangapure
Prof & H.O.D
Department of Community Medicine

General Measures for Prevention of GI Tract related problems

The prevalence of gastrointestinal diseases markedly differs between developed and developing countries because of the poor sanitation, hygiene, impure water and food ingestion, widespread illiteracy and poverty in the developing world. The incidence of gastrointestinal diseases such as diarrhoea, cholera, typhoid, dysentery, viral hepatitis (A and E virus) can be substantially reduced by providing clean water and food to the population. Restricting consumption of tobacco and nonsteroidal anti-inflammatory drugs will reduce diseases and/or complications of the upper gastrointestinal tract. Diminishing alcohol intake and overuse of blood transfusion and improving blood banks would prevent many acute and chronic liver diseases. Costly passive and active immunoprophylaxis will become unnecessary if these measures are undertaken.

The digestive system is essential to helping your body break down food so that it can adequately retrieve nutrients and vitamins while also getting rid of waste. It's composed of the following organs:

mouth

esophagus

liver

stomach

gallbladder

small and large intestines

pancreas

anus and rectum

When something is disturbed within the digestive system, you may experience uncomfortable symptoms. There are certain measures that you can take to prevent GI Tract related problems. Some of them are:-

Eat more frequent meals

Many weight loss proponents advocate eating smaller, more frequent meals to help boost metabolism and keep you from overeating. This rule of thumb can also help prevent digestion problems.

When you eat a big meal, your digestive system is overloaded and it may not be able to handle food as well as it should. This can cause heartburn from acids going back from the stomach into the esophagus. Such stomach overload may even induce gas, nausea, or vomiting.

Aiming to consume five to six mini-meals a day can help promote overall good digestive health. Make sure you eat a mix of carbs, protein, and heart-healthy fat at each meal. Examples include peanut butter on whole-wheat crackers, a tuna sandwich, or yogurt with fruit. You should also avoid lying down after eating. This increases the risk of heartburn and nausea.

Find the diet that's right for you

Eat more fiber

You may have heard a lot about fiber for weight loss and heart health. When it comes to digestive health, fiber is also a key component.

Fiber is the bulk in plant foods that can't be digested. Soluble fiber creates a gel in the digestive tract to keep you full, while insoluble fiber adds bulk to stools.

The Mayo Clinic recommends a total daily fiber intake of 38 grams for men under 50, and 25 grams for women in

the same age group. Adults over 50 need slightly less fiber, with 30 grams a day for men and 21 grams for women.

Getting enough fiber helps prevent digestion problems by regulating the system. If you're not sure if you get enough fiber, all you have to do is look in your kitchen. Fiber is naturally available in:

fruits

vegetables

beans

beans

legumes

whole grains

Drink plenty of water

Water aids your digestive health by helping to cleanse the entire system. It's particularly helpful in preventing constipation because water helps soften your stools. Furthermore, water may help your digestive system absorb

nutrients more effectively by assisting the body to break down food.

Aim to drink eight glasses of water a day and skip the sugary drinks. Added sugars can make digestion problems worse.

Digestion problems are often an embarrassment, and many people understandably try to hide their issues. It's important to know, however, that you are certainly not alone.

In fact, the Centers for Disease Control and Prevention Trusted Source estimate that digestive disease complaints comprise about 51 million emergency room visits annually.

Changing your diet and exercise habits

are often the first recommended steps to better digestive health. If you still continue to experience digestion problems, it's time to see a doctor.



Dr Rita Mandal
Professor Dept of Materia Medica

Salivary enzymes in peptic ulcer disease

Gastric and duodenal ulcers are two kinds of **peptic ulcers**. A **peptic ulcer** is a sore that's on the inside of the **stomach** lining — a **gastric ulcer** — or the upper part of the small intestine — a **duodenal ulcer**. A person can have one or both types of **ulcers** at the same time. Having both types is known as **gastroduodenal ulcer**.

According to the results obtained from study, the flow rate of saliva is decreased significantly in patients suffering from peptic ulcers compared to healthy individual. It is known that the average daily flow of whole saliva varies in health between 1.0 and 1.5. A considerable volume of this salivary fluid is swallowed with food or on its own. The salivary mucus swallowed with food is protective because it decreases the flow rate of bile. It has been suggested that bile, and not hydrochloric acid, plays the causative role in pathogenesis of peptic ulceration. If bile is held in the gall bladder longer, it loses its alkalinity and will not be able to damage the mucous cells. Therefore, saliva can play an important role in the prevention of peptic ulcer and reduction in its flow rate may worsen the conditions of peptic ulcer. It has been reported that hormonal fluctuations could affect the flow rate of saliva, during events like puberty, menstruation, pregnancy and menopause. Although our study group was smaller than making a certain conclusion, however, a slight decrease in flow rate was observed in older volunteers that may be due to hormonal changes.

According to the results, a significant shift ($p < 0.05$) to lower pH was observed in saliva of peptic ulcer patients compared to the control group. It can be suggested that when the flow rate is decreased less bicarbonate is released, leading to a decrease in value of pH. Variation in salivary pH observed in this study is supported by other research works which showed salivary flow rates vary widely between subjects.

The decrease of salivary pH could be due to a decrease in the salivary flow rate. The reduction of pH could also be the result of decrease in buffering capacity of saliva in patients with peptic ulcer. On the other hand, as one of the major causes of peptic ulcer disease is the presence of *H. pylori*, the increase in acidity may be the result of bacterial growth. It has been suggested that alterations in saliva composition or flow rate may reflect secondary systemic changes related to diseases, medications or treatments. For example, it has been found that diabetes is associated with both salivary flow rate and pH.

It was also noted that all three tested enzymes were significantly more active ($p < 0.05$) in patients when compared to controls. Production of various antioxidants and increase in activity of antioxidant enzymes is the nature's response to the attack of free radicals. The mean activity of peroxidase (U/L) obtained in this research was 611.1 ± 25 . Each test was repeated three times and the results were taken as the mean value of the tests. However, triplicate tests indicated that there was no significant ($p < 0.05$) differences between the three repeated samples. It can be seen that peroxidase activity is considerably higher in the peptic ulcer patients compared to healthy controls ($p < 0.05$). One possible explanation is that an increase in activity of peroxidase is due to a rise in oxidative status of oral cavity in ulcerative cases. Fluctuations in salivary peroxidase have been

drawing increased attention during the last two decades as it plays an important role in the oral defence mechanism and attack of free radicals. It has been reported that peroxidase in saliva can significantly inhibit the initiation and progression of oral cancer. It has also been found that patients with oral lichen planus (a premalignant lesion) have a lower salivary antioxidant capability. In addition, peroxidase in saliva can be activated in response to various internal and external factors. In a previous research we found that high intensity exercise can activate major salivary glands, leading to higher activity of peroxidase. The partial antioxidant effect of saliva can block oxidative damage of biological molecules at normal salivary pH (6.8–7.5). However, in stomach medium (pH 2–3) this type of antioxidant effect is not expected due to structural changes of effective molecules mostly antioxidant enzymes. Therefore, although a number of salivary components have partially antioxidant effects, saliva cannot provide adequate protection against the deleterious processes in the stomach.

The activity of LDH obtained in this study was considerably higher ($p < 0.05$) in patients suffering from peptic ulcers. The centrifuged saliva samples were stored at 4 °C until use since a gradual degradation of LDH may occur when stored at –20 °C. It has been shown that LDH activity in saliva of adults is almost similar to that of young volunteers. We also observed that there was no change in LDH activity when various ages were compared, but due to small size of subjects it cannot be conclusive. In a study on aiming to find relationship between oral health and LDH activity in salivary fluid, it was found that the enzyme could be used as a possible biochemical marker of periodontal status.

Activity of salivary amylase was considerably higher ($p < 0.05$) in patients as compared to similar healthy cases. Amylase activity in biological fluids is sometimes used as a marker of oxidative stress due to external factors. It has been reported that salivary α -amylase could be an indicator of alternations in body status due to any type of oxidative stress. According to the results of present research, variation in the activity of amylase is much higher compared to other salivary factors studied here. This explains that the increase in amylase activity is the result of oxidative stress caused by the disease. In support of this reasoning, it has been reported that salivary amylase activity could be used as a powerful marker of catecholamines during the evaluation of patients in different stressful situations. The researchers have even gone further purposing the possibility of using saliva to evaluate the general health of an individual.

Conclusions

Based on the results obtained it could be suggested that saliva could be thought of as a potential specimen for diagnosis and detection of peptic ulcer in early stages. One of the special advantages of using saliva as a diagnostic media is that its sampling is easy and noninvasive, thus eliminating any discomfort and pain associated with blood collection while also avoiding privacy issues associated with urine collection. The biochemical composition of saliva is not as complex or varying as serum, and should more accurately reflect the current condition of the body. However, as our subjects were limited to about 50 in each patient and control groups, more studies are recommended with more patients and normal subjects in order to make more conclusive remarks.



Dr Archana Gadiya
Assistant Professor
Department of Materia Medica

IRRITABLE BOWEL SYNDROM AND HOMEOPATHY

Irritable bowel syndrome (IBS) is a common chronic disorder where a person experiences the following symptoms: abdominal pain, discomfort, bloating, constipation or diarrhea or both. It is difficult to treat because different people experience different symptoms.

Some people experience constipation as the main symptom, this form of IBS is known as IBS-C, while others experience diarrhea as the main symptom. This form of IBS is known as IBS-D. Others experience both constipation and diarrhea, this form of IBS is known as IBS-M where the M stands for mixed.

Diagnosis

IBS is diagnosed by recurrent abdominal pain for at least 6 months, combined with weekly pain for 3 months as well as some combination of pain relieved by bowel movements and changes in frequency or form of bowel movements.

Treatment

Lifestyle changes, such as a low-FODMAPs diet, stress relief, exercise, drinking plenty of water and over-the-counter laxatives can also help. Interestingly, a low-FODMAPs diet is one of the most promising lifestyle changes for alleviating symptoms.

Identifying other trigger foods can be difficult, as these are different for each person. Keeping a diary of meals and ingredients can help identify triggers

Probiotic supple additionally, avoiding digestive stimulants, such as caffeine, alcohol and sugary beverages, can reduce symptoms in some people

If your symptoms don't respond to lifestyle changes or over-the-counter treatments, there are several HOMEOPATHIC medications proven to help in difficult cases.

1. Lycopodium clavatum

This remedy is well-suited to people with IBS & food intolerances, especially onions, oysters, cabbage and beans. The pains are worse in the evening, typically from 4- 8pm and are relieved by passing wind. The inflamed digestive tract struggles to get enough nutrition from food, so there can be loss of weight with fullness and bloating in the abdomen. The appetite is very changeable and can go from being ravenous to very full after a few mouthfuls.

2. Colocynthis

This remedy has terrible stomach cramps that are better for doubling up and may be worse from anger or indignation. The pains are short, sharp & pinching and aggravated after eating, especially fruit. Heat & pressure give some relief to the pains which can extend to the lower back or into the buttocks. It is also a very useful remedy for sciatica and neuralgic pain in general.

3. Nux Vomica

This remedy suits people who burn the candle at both ends, working hard and playing harder. Eventually, this stressful lifestyle takes its toll and the digestive system suffers. There are severe stomach cramps and acid reflux that are aggravated by mental exertion. Hiccough, belching, fullness and indigestion are worse after coffee, spicy foods and smoking. There can also be a lot of nausea and feelings of being sea-sick. The remedy is also very useful to treat a hangover.

4. Arsenicum album

Stomach cramps that are worse after taking cold. This remedy suits people who always feel chilly; so much so that even eating cold food such as ice cream aggravates. There is a great deal of diarrhea that can come on after drinking whilst moving around makes everything worse. Taking regular sips of a warm drink and lying down to rest bring relief.

5. Argentum nitricum

In this remedy there is a lot of wind, with very loud and forceful belching or flatulence. There is nausea and indigestion associated with nerves or anxiety, especially when anticipating a stressful event like a job interview or exam.

6. Carbo veg

The remedy is well-suited to older people or those suffering from general fatigue with stomach pains that are burning, sore or pressing. There are cramps which feel like the stomach is being contracted with a lot of bloating after eating. Butter, fats & rich foods can cause belching, heartburn and indigestion with weakness or faintness.

7. China officinalis

Stomach acidity with a great deal of bloating & bitter or sour belching. The appetite swings from being ravenous to being completely off food, with a feeling of fullness after eating a small amount. Fruit and milk aggravate and the pains are pressing or sore. Digestion in general is very slow.

05.12.2019

APPRECIATION CERTIFICATES BEING AWARDED TO THE MEMBERS OF THE TEACHING STAFF, NON TEACHING STAFF AND HOSPITAL STAFF, WHO WON THE "EMPLOYEE OF THE MONTH" AWARD IN THEIR RESPECTIVE CATEGORIES, AND TO STUDENTS OF 1ST, 2ND, 3RD AND 4TH BHMS WHO WON THE "STUDENT OF THE MONTH" AWARD FOR THE MONTH OF NOVEMBER 2019 BY THE MANAGEMENT



09.12.2019

A SELF DEFENCE DEMONSTRATION WORKSHOP WAS ORGANISED FOR THE STUDENTS IN SMMHMC ON MONDAY 9TH DECEMBER 2019 . THIS DEMONSTRATION CUM WORKSHOP SESSION WAS CONDUCTED BY SURAKSHA-SETU SOCIETY MISSION SAHASI



11.12.2019

STUDENTS OF 4TH BHMS ALONG WITH THE STAFF OF DEPT OF COMMUNITY MEDICINE OF SMMHMC , VISITED BARODA DAIRY TO OBSERVE THE METHOD OF PASTEURIZATION OF MILK AS A PART OF THEIR CURRICULUM.



12.12.2019

STAFF AND STUDENTS OF SMMHMC ATTENDED "NATIONAL SEMINAR ON HOMOEOPATHY " AT JNHMC , ON 12TH DECEMBER 2019 . DR YOGESH SEHGAL WAS THE SPEAKER ON THIS OCCASION.



19.12.2019

1)STUDENTS OF 4TH BHMS, ALONG WITH THE STAFF OF DEPARTMENT OF COMMUNITY MEDICINE , OF SMMHMC, VISITED WATER PURIFICATION PLANT AT KHANPUR ON THURSDAY 19TH DECEMBER TO UNDERSTAND AND EXPERIENCE THE PROCESS OF WATER PURIFICATION AS WELL AS THE PROCESS OF BACK-WASHING



2) HOSPITAL STAFF AND INTERNS OF SMMHMC IN COLLABORATION WITH VYROC HOSPITAL ORGANIZED A BONE DENSITY CHECK UP@ SAHYOG SOCIETY, GORWA,VADODARA ON19 DECEMBER 2019



23.12.2019

A PICTURE PRESENTATION OF DIFFERENT TYPES OF ANAEMIA WAS DONE BY THE STUDENTS OF 2ND YEAR UNDER THE ABLE GUIDANCE OF DR AMOLA CHADDHA WITH A MOTIVE TO GET CLEAR N BETTER UNDERSTANDING WITH CLINICAL PRESENTATION.



26.12.2019

4TH YR(SR) BHMS STUDENTS OF SMMHMC CELEBRATED "SIGNATURE DAY" .



17.01.2020

APPRECIATION CERTIFICATES BEING AWARDED TO THE MEMBERS OF THE TEACHING STAFF, NON TEACHING STAFF AND HOSPITAL STAFF, WHO WON THE "EMPLOYEE OF THE MONTH" AWARD IN THEIR RESPECTIVE CATEGORIES, AND TO STUDENTS OF 1ST, 2ND, 3RD AND 4TH BHMS WHO WON THE "STUDENT OF THE MONTH" AWARD FOR THE MONTH OF DECEMBER 2019 BY THE MANAGEMENT



20TH JANUARY 2020

3RD YR BHMS STUDENTS CELEBRATED "FLORAL DAY"



21ST JANUARY 2020

3RD YR BHMS STUDENTS CELEBRATED "INJURED DAY" ON 21ST JANUARY 2020



22ND JANUARY 2020

3RD YR BHMS STUDENTS CELEBRATED "SAREE DAY" ON 22ND JANUARY 2020



23RD JANUARY 2020

A PROMOTIONAL EVENT OF UPCOMING GUJARATI MOVIE "LOVE NI LOVE STORIES" WAS CONDUCTED IN SMMHMC CAMPUS ON 23RD JANUARY 2020. GUJARATI SUPERSTARS PRATIK GANDHI, DEEKSHA JOSHI AND VYOMA NANDI WERE PRESENT DURING THIS EVENT.





3RD BHMS STUDENTS CELEBRATED "CHARACTER DAY" ON 23RD JANUARY 2020



24.01.2020

3RD BHMS CELEBRATED "RETRO DAY" ON 24TH JANUARY 2020



26.01.2020

THE 71ST REPUBLIC DAY WAS CELEBRATED IN SMMHMC ON 26TH JANUARY 2020 IN PRESENCE OF PRESIDENT, DR KEVAL SONI, STAFF AND STUDENTS, WITH A LOT OF PATRIOTIC FERVOUR.



27.01.2020

3RD YR BHMS STUDENTS CELEBRATED " GROUP DAY "ON 27TH JANUARY 2020



11.02.2020

THE STUDENTS OF 2ND BHMS , ALONG WITH THE STAFF OF FORENSIC MEDICINE AND TOXICOLOGY ,VISITED THE FORENSIC SCIENCE LABORATORY, AHMEDABAD, TO STUDY THE VARIOUS ASPECTS OF MEDICAL JURISPRUDENCE ON 11TH FEBRUARY 2020.



19.02.2020

APPRECIATION CERTIFICATES BEING AWARDED TO THE MEMBERS OF THE TEACHING STAFF, NON TEACHING STAFF AND HOSPITAL STAFF, WHO WON THE "EMPLOYEE OF THE MONTH" AWARD IN THEIR RESPECTIVE CATEGORIES, AND TO STUDENTS OF 1ST, 2ND, 3RD AND 4TH BHMS WHO WON THE "STUDENT OF THE MONTH" AWARD FOR THE MONTH OF JANUARY 2020 BY THE MANAGEMENT.



21.02.2020

ON OCCASION DAY OF "MAHASHIVRATRI" SMMHMC ORGANIZED "FREE HOMOEOPATHIC CHECK UP CAMP" @ SHREE STAMBHESHWAR MAHADEV TEMPLE, KAVI KAMBOI, TA JAMBUSAR ON 21ST FEBRUARY 2020



05.03.2020

A BLOOD DONATION CAMP WAS ORGANISED IN SMMHMC BY SMT KHURSHEEDBEN AND FARAMROZ BHARUCHA BLOOD BANK UNDER THE BLESSINGS OF CHAIRMAN OF SHREE MANAV KALYAN KENDRA TRUST , SHREE PARAMPUJYA 108 VRAJRAJ KUMAR MAHODYA , ON THURSDAY 5TH MARCH 2020 AS A PART OF INTERNATIONAL WOMEN'S DAY CELEBRATIONS. THE STUDENTS AND STAFF PARTICIPATED IN THE CAMP WITH A LOT OF ENTHUSIASM.



14.03.2020

CONGRATULATIONS TO OUR TOPPERS OF 4TH BHMS EXAM FEB2020

DEDHAROTIYA
BASHARATFATEMA
ABBASBHAI -
UNIVERSITY
SECOND & COLLEGE
FIRST

**4th YR BHMS
NEW COURSE
AY 2015-16**

DANGIWALA SAYBANA
MOHAMMEDSHAHID -
UNIVERSITY FOURTH &
COLLEGE THIRD



PATEL POOJABEN
ASHVINBHAI -
UNIVERSITY THIRD
& COLLEGE SECOND



CONGRATULATIONS
FOR MKBU
UNIVERSITY 2nd,3rd
& 4th RANK

FROM
DR KEVAL SONI
PRESIDENT
REENA SONI
TRUSTEE
SMMHMC VADODARA

TO



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