

EDITORIAL MARCH 2015

TWO CASES FROM DEPARTMENT OF GYNECOLOGY

CASE 1:

A women 32 years old was in labour for her first pregnancy, she went into labour at around 3 p.m. on a given saturday and till sunday 4 p.m. there was no progress, she already received intravenous oxytocin hormone but without any favourable results.

I was then consulted, the following symptoms were considered on case taking.

- **STOMACH - THIRST - cold - water**

- **RECTUM - CONSTIPATION - insufficient**
- **FEMALE GENITALIA/SEX - ATONY of uterus - delivery; during**
- **FEMALE GENITALIA/SEX - PAIN - labor pains - slow**
- **BACK - PAIN - Lumbar region - left**
- **EXTREMITIES - CRAMPS - Legs**
- **GENERALS - FANNED; being - desire to be**
- **GENERALS - FOOD and DRINKS - cold drink, cold water - desire**
- **GENERALS - HYPERTENSION**
- **GENERALS - MOTION - aversion to**
- **STOMACH - THIRST - cold - water**

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The doctor at the hospital were all prepared to use forceps as the cervical os was fully developed, I requested them to give me few hours before using such procedures.

Based on above symptoms I selected Glonine as a remedy in 30c potency the reason was

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- **GENERALS - HYPERTENSION**

I gave the remedy every 30 minutes to see any progress of labour ,but unfortunately two extra symptoms came after three hours

Severe vertigo worse slightest turning in bed or any motion accompanied by nausea and vomiting ,I again restudied the case and gave Pituitary glandula 200c one dose every 30 minutes, after the first dose itself the women developed vigorous labour pain and within half an hour delivered a normal child.

The remedy is very useful in my practice for following condition

- Recurrent abortion.
- Primary sterility due to bi cornuted uterus.
- H/O Hypertension
- H/O Ingesting excess hormone to become pregnant like Chlomiphen Citrate, which is - used for ovulation.
- Uterine inertia in second stage of labour where os is fully dilated.
- Constipation; stool very scanty as if some stool remained behind.

CASE 2:

I was once called to see a very difficult case of a young woman who was in difficult labour, she had multiple abortions in the past and this pregnancy was very precarious, almost all from the family had gathered outside the labour room to pray for smooth delivery but unfortunately the delivery was very slow and retarded, doctors were seriously thinking of operation but relatives were very reluctant as her haemoglobin was very low 9 grams.

I took the history and examined her she was very tensed and anxious also confused what to do, her main problem was severe painful labour but no progress of labour, instead of dilatation of vaginal passage she was passing flatus from her vagina, she was tired and fatigued because of very painful labour. she was very chilly with coldness of hands and feet.

I took the following symptoms.

- **FEMALE GENITALIA/SEX - ABORTION - tendency to abortion**
- **FEMALE GENITALIA/SEX - CONTRACTIONS - Uterus - Os uteri - labor; spasmodic contraction during**
- **FEMALE GENITALIA/SEX - DELIVERY - during; complaints**
- **FEMALE GENITALIA/SEX - FLATUS from vagina**
- **FEMALE GENITALIA/SEX - PAIN - labor pains - ceasing**
- **FEMALE GENITALIA/SEX - PAIN - labor pains - false**
- **FEMALE GENITALIA/SEX - PAIN - labor pains - painful, too**
- **FEMALE GENITALIA/SEX - PAIN - Uterus - cramping**
- **RESPIRATION - IMPEDED, obstructed**
- **EXTREMITIES - COLDNESS - Feet**
- **EXTREMITIES - COLDNESS - Hands**
- **EXTREMITIES - CONTRACTION of muscles and tendons - Toes**
- **PERSPIRATION - CLAMMY**
- **PERSPIRATION - COLD**
- **GENERALS - AIR; DRAFT OF - agg.**

Based on the above symptoms I prescribed her Secele cor 200c every 30 minutes. But even after 3 doses no relief in any pain, the following symptoms were selected.

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I realised my mistake the main reason was that secele cor did not cover the symptom passing gas from vagina. I restudied the case and gave hyosyamus 30c one dose every 20 minutes within one hour she delivered a healthy pretty girl. This case clearly shows not to make mistake by ignoring a keynote.