EFFICACY OF HOMOEOPATHIC MOTHER TINCTURES IN TREATMENT OF NEPHROLITHIASIS

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Abstract.
Renal stones are very common problem in patients now-a-days. Progress is seen in establishing the diagnostic separation, causes and formulation of medical preventive measures for recurrent kidney stones. These stones develop because of various metabolic and nutritional factors including hypercalciuria, hypocitraturia, hyperoxaluria, hyperuricosuria, undue urinary acidity, cystinuria, and low urine volume. Homoeopathic mother tinctures have a significant role in treating the cases of renal or nephrolithiasis. Here we have discussed the aetiology, pathogenesis, types, common sign and symptoms and the investigations which are required to diagnose a case of nephrolithiasis. The various homoeopathic tinctures which proves to be effective in case of nephrolithiasis are also discussed in this study.

Keywords: Renal stones, Ureteric calculus, Homoeopathy, Pain, Pyuria, Gravel, Genito urinary system

Introduction
Kidney stones are defined as rigid accumulation of the particles of substances that are formed unilaterally or bilaterally in the kidneys due to increased levels of minerals in the composition of urine. Permanent damage is not seen when a healthcare professional treats a kidney stone.

Renal Calculi Formation (Etiopathogenesis)
There are various pathogenetic factors which are responsible for the formation of kidney stones. Some of the key factors are:

- Excessive saturation of the urine and presence of conditions which favours the process of crystallization.
- Lack of the substances which hinder the process of crystallization.

The initial stage of kidney stone formation is represented by formation of tiny particle of the stone and then these tiny particles accumulate and will grow for stone formation. For the formation of urinary stones, the interlinkage between renal epithelial cells and calcium oxalate crystals or oxalate ions is very important. Formation of crystals starts in the tubular lumen and then they get incorporated by the interaction between crystal and cells and then they get attached to the outer basement membrane of the epithelial cells. In
Causes
1. Dietary – Due to decreased levels of vitamin A peeling of epithelium occurs and the centre is formed around which all the stones get accumulated.
2. Deranged level of solutes and colloids in urine – Due to dehydration the concentration of solutes that are present in urine gets increased and they precipitate in urine.
3. Decreased level of Citrate in urine - The presence of citrate in the urine (300-900 mg/24 hours) as citric acid, tends to keep otherwise relatively insoluble calcium phosphate and citrate in solution. The urinary excretion of citrate is under normal control and decreases during menstruation.
4. Infection of the urinary system – Infection leads to the formation of the kidney stones. When the urea splitting streptococci, staphylococci and proteus species will infect the urine then both clinical and experimental stone formation occurs. Staphylococci and E-coli are the main bacteria which are present in the nuclei of urinary stones.
5. Prolonged immobilization – For the formation of calcium phosphate calculi, increase amount of urinary calcium and skeletal decalcification is needed which are a result of various causes e.g paraplegia.
6. Inadequate drainage of urine and stasis of urine – There is a possibility of stone formation when urine is unable to pass freely.
7. Hyperparathyroidism – It leads to hypercalciuria and hypercalcemia is found to be the chief cause in patients who are detected with a radio – opaque calculi. By doing appropriate investigations we can eliminate this cause especially in cases of recurrent or multiple stones.
8. Randall’s plaque / Microliths – according to Randall the lesion of kidney stones in the initial stages is depicted by the erosion of the tip of renal papilla.
9. Consuming food and drinks which have oxalate in their composition – Patients who are suffering from recurrent stones formation may avoid eating the food containing calcium oxalates in them.
10. Medically induced renal stones – because of consumption of some specific medicines which induces the formation of stones in the kidney, it may be a chief cause for the formation of renal stones.

TYPES OF RENAL CALCULI:
Following are the various types of Kidney stones:
1. Calcium Oxalate stones – Oxalate stones have an ill-defined shape and have sharp edges which may cause bleeding. Different pigments of altered blood deposit on the surface of the calculus. Calcium oxalate monohydrate stones are radio opaque in nature.
2. Phosphate stones – They are also known as struvite stones. They form due to the presence of infection caused by urea splitting bacteria.
3. Uric acid and urate calculi – They are of yellowish to reddish brown colour in nature. Uric acid crystals are also radiolucent in nature.
4. Cysteine Calculi – The shape of cysteine crystals is hexagon, they spear translucent white and they appear acidic in nature. The cast of renal pelvis and calyces is formed by cysteine calculi.
5. Xanthine stones – They are rarely found in kidney. They are of brick red colour and they are smooth and round in nature. Lamellation is present when a cross section of xanthine calculi is done.
6. Calcium carbonate – Solely, Calcium carbonate calculi are rarely present in kidneys but some amount of calcium carbonate will be present in a number of calculi. Calcium carbonate stones are hard in nature.
7. Fibrin calculi – Blood clots is the main reason for the formation of fibrin calculi. They may be found as a component of other stones.
8. Urostealith calculi – Most commonly found in bladder. They are fatty in nature and have soft consistency. They are very rare type of kidney stones.
9. Foreign bodies – Most of the times, in the bladder they are various objects which are found as a component of the calculus. Most commonly pieces of catheter may be found in the bladder.

SIGNS AND SYMPTOMS OF RENAL CALCULI:
(A) RENAL STONES
1. Silent Stones – In some type of stones in which there is progressive destruction of the renal parenchyma, they does not depict any symptom for example – stag horn calculus does not show any symptom for a long period of time.
2. Pain – excruciating pain in the epigastric region of the abdomen radiating towards the back is the chief complaint seen in patients with kidney stones. Patients often tell to doctor that “this is the worst pain I have ever experienced.”

3. Haematuria – Presence of blood in urine in some cases is the chief symptom present in some patients suffering from kidney stones. And sometimes this single symptom is enough to diagnose a case of kidney stones.

4. Pyuria – Infection in the urinary system due to the presence of kidney stones in urinary tract is called as pyuria. This sign is most obvious when the kidney is obstructed.

5. Urinary Tract infection – infections of the urinary tract which infects kidneys, ureters and urinary bladder is called as urinary tract infection. No. of pus cells are increased in urine in this case.

6. Hydro nephrosis – When the kidney dilates due to partial or complete obstruction to the flow of urine is called as hydro nephrosis.

(B) URETERIC CALCULUS

1. Ureteric Colic – an attack of colic is present, when a stone moves in the ureter. This colic may be present until the stone is ejected into the bladder or the stone is impacted in the ureter.

2. Strangury – the flow of urine is very slow and painful due to the presence of stone in the intramural part of the ureter.

3. Impacted stone – Dull aching kind of pain is present when the stone is impacted. Exertion increases the intensity of pain and rest relieve the intensity of pain associated with backache due to distension of renal pelvis.

INVESTIGATIONS ADVISED IN THE CASES OF NEPHROLITHIASIS

A complete history and physical examination of the patient is mandatory before investigation of any condition.

1. Urine examination - Both Routine and Microscopic examination is done.


3. Imaging Studies- Ultrasonography.

HOMEO PATHIC MOTHER TINCTURES USED IN NEPHROLITHIASIS

1. EPIGEA REPENS
   Epigea repens is indicated in cases of chronic cystitis accompanied by dysuria and in cases of excruciating pain after micturation. Purulent deposits and pus with uric acid deposits and renal calculi are present in urine. When urinating there is burning in the neck of the bladder. Disturbed flow of urine. Grumbling noise is there in the bowels.

2. BERBERIS VULGARIS
   This medicine is indicated in cases of rapid change of symptoms, rapid shifting of pains from one part of body to another. Thirst alternates with thirstlessness, hunger and loss of appetite are also chief symptoms of this medicine. Action of this medicine is mainly on the venous system resulting in engorgement of pelvis and haemorrhoids. Liver are common with rheumatic and urinary affections.

3. OCIMUM CANUM
   Have a prominent action in the diseases related to kidneys, bladder and urethra. Patients are mostly of uric acid diathesis. The characteristic symptom of this medicine is presence of red sand in urine and it is frequently verified on patients. Inguinal and mammary glands are swollen in patients. Indicated for right sided renal colic. Symptoms of renal calculus are prominent.

4. PAREIRA BRAVA
   Urinary symptoms are the chief symptoms of this remedy. Have a remarkable action in cases of renal colic, prostatic affections and catarrh of urinary bladder. Distention of urinary bladder with pain is an indicating symptom. Pain radiates down the thighs.

5. HYDRANGEA ARBORESCENS
   Indicated in cases of gravel, profuse deposit of white amorphous salts in urine. Renal colic and haematuria are chief complaints. Have profound action on ureter. Pain in lumbar region of spine. Patient feels dizziness and congestion of chest.
6. CHIMAPHILA UMBELLATA

Chief action of this remedy is on kidneys and genito–urinary system, it also affects the lymphatic and mesenteric glands and breast in female. Indicated in young women with pain during micturition.

7. SARSAPARILLA OFFICINALIS

Renal colic with marasmus and periosteal pain due to venereal disease are marked symptoms of this particular remedy. Eruptions on the body after hot weather and vaccinations accompanied by boils and eczema. Urinary symptoms are very marked.

Conclusion

From the above discussion this is proven that homoeopathic mother tinctures have a marvellous effect when given with right indications in the cases of Nephrolithiasis. Along with tinctures constitutionally selected homoeopathic medicine and selection of potency and repetition according to the principles of homoeopathy will help in providing cure to the patient. Along with medicine healthy and nutritious diet, increased intake of fluids in the body and avoidance of products that will accelerate the formation of stone is also important for getting a permanent cure from renal stones.

REFERENCES