

## KALIS ON THE CARDIAC PLANE

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The cardio-vascular system owes much its debt to Cactus, Convallaria, Crataegus, Digitalis, Iberis, Kalmia, Liliun tigrinum, Lithium carb or Strophanthus in its altered states due to degeneration or dilatation, insufficiency or infarction, stenosis or incompetence of the vessel. But Potassium (Kali) is hitherto a neglected remedy against the diseases on the cardiac plane. The pathogenesis of this salt is marked by its distinctive power of infiltrating the connective tissues, bones and glands, thereby causing systematic defect in the neurotic, haematic and miotic sphere. The variety of potassium in the shape of Potassium bichromate ( $K_2 Cr_2 O_7$ ), Potassium carbonate ( $K_2 CO_3$ ), Potassium iodide (KI) and Potassium chloratum (KCl) reflects more or less a general symptom-complex of toughness, touchiness, sluggishness, stringiness, periodicity, alternation, distension or constriction with wandering pains. But the keynote of each drug supervenes such general character on the strength of individualisation of the subject governed by the axis of P.Q.R.S. (peculiar, queer, rare, striking) and L.M.S.C.<sup>2</sup> (location, modality, sensation, causation, constitution, concomitant) as enjoined by the *Organon* and also represented by the formula  $Q_L + Q_n = T$ , signifying qualitative ( $Q_L$ ) and quantitative ( $Q$ ) symptoms equal to totality (T) of the symptoms of the disease.

### Kali bichromicum

(Potassium bichromate)

In the cardiac zone, Kali bichromicum plays a dominant role in the control of *essential hypertension* due to *polycystic kidney* with striated masses of cysts and parenchyma, causing fibrosis and sclerosis of the renal artery. There is much of shooting pain at the renal angles due to vaso-constriction. Renal ischaemia follows with essential hypertension due to excessive liberation of renin and reaction of hypertensinogen. The blood pressure lies in the vicinity of 250/120 mm. of Hg. The patient is subjected to frequent *carotid dance with loud and forcible apex beat*, predisposing left ventricular hypertrophy. The mitral area is resonant with booming 1st sound and aortic area with accentuated 2nd sound. The urine shows albuminous casts and stringy fibrinous deposits with high specific gravity. There is alternate paroxysm of rheumatism and dysentery with blurred vision preceding the headache. The sufferings run through the later part of night. Kali bichromicum as an exact replica of such disease renders immense service in lowering the hypertension and the associated ailments and saves the patient when nephrectomy is assured.

In type I nephritis and chronic pyelo-nephritis pyelography and reno-

gram shows evidence of disparity in renal function with occlusion of calyces and endarteries and proliferation of endothelial cells; the hypertension and dilatation of heart ensue with oliguria, haematuria and oedema. There is displacement of the apex, and soft apical systolic murmur occurs. Here Kali bichromicum is considered in lowering the hypertension and controlling the dropsical stage in the event of the concurrence of the drug symptoms.

In *hypertensive encephalopathy* where there is evidence of high potassium concentration in C.S.F., and B.P. ranges from 260/120 mm of Hg., and where cerebral vaso-spasm combines with cerebral ischaemic-stupor, headache, blurring of vision, and sensation of coldness in the chest become the resultant features; Kali bichromicum in such case is only unassailable drug vying with Bothrops or Lachesis.

#### **Kali carbonicum**

(Potassium carbonate)

In the cardiac sphere, Kali carb. (vegetable alkali) exercises a great sway over *angina pectoris*, which is caused by inadequate supply of blood to the cardiac musculature and deposition of metabolites stimulating the nerve-endings. Where coronary atheroma, aortic stenosis, syphilitic aortitis or the severe anaemia is the pre-disposing cause of such *angina pectoris*, E.C.G. taken immediately after exercise shows depression of RS-T segments. Skia-gram reflects cardiac enlargement, and examination of blood records cholesterol ranging above 230 mgm %; pain is felt by the subject is of constricting, squeezing and crampy character at the mid or upper sternum, radiating from scapula to the tip of fingers, along the arms; there is much of burning and palpitation in the region of heart particularly in the dusk and during hunger; there is sensation of thread being suspended in the chest, and of being clapped in a vice. Kali carb. with its pathogenesis of creating degeneration in the fibrous tissues and muscles of heart and the intima of arterial vessels with diminution of R.B.C., does away with such *angina* with its characteristic backache, sweat, anaemia, prostration and oedema of upper eyelids. In such cases it is akin to Cactus or Phosphorus.

Kali carb. recognises itself as a prominent drug in controlling myocardial infarction when oxygen supply to the heart muscle due to obstruction of the branches of coronary arteries, or subintimal haemorrhage is evident. Here there is much radiation of stitching pain and gallop rhythm being felt at the mitral area. In such case cardiograph generally shows elevation of S-T segment in the iso-electric line and inversion of T-waves, and abnormal Q-waves. Kali carb. can restore this level to normalcy and bring down the sufferings of the patient when the previous characteristic symptoms correspond.

#### **Kali iodatum**

(Potassium iodide)

In the congenital heart disease where there are atrial and ventricular

Kali-heart in a Synoptic Table

	Kali bichrom.	Kali carb.	Kali iod.	Kali mur.
Therapeutics	Essential hyper- tension; hyper- tensive encephalopathy.	Angina pectoris; myocardial infarction.	Congenital heart disease; Fallot's tetralogy.	Rheumatic carditis.
Pathogenesis	Infiltration.	Stenosis.	Atheroma.	Ankylosis.
P.Q.R.S. (Qualitative symptoms)	Coldness around heart; stitches below sternum extending to back.	Burning in the region of heart; palpitation when hungry; suspension of thread in chest.	Stitches in the chest when sitting bent; fluttering.	Protrusion of eyes with palpitation.
L.M.S.C. <sup>2</sup> (Quantitative symptoms)	Stringy viscid secretions; spot pain migrating quickly; alternation of ailuents; fatty light- haired; early morning; cold-blooded.	Stitches about heart and through to scapula; anaemia; sweat; backache; prostration; palpitation <walking; <2-0 to 4-0 a.m.; cold-blooded.	Stitches when walking; acridity; fetidity; crawling; staggering; ataxia; syphilitic taint; <night; hot-blooded.	Whiteness; toughness of secretions; tongue grey at the base; rheumatism and fever; <morning cold-blooded.
Pulse	Felt in arteries.	Slow intermittent; felt over whole body and tips of fingers.	Rapid; full; hard; tense.	Frequent; weak.
E.C.G.	Left ventricular hypertrophy.	Depression of RS-T segment.	Bi-ventricular enlargement; bundle branch block.	Prolonged P-R interval; elevation of S-T segment.
Analogue	Bothrops.	Cactus.	Ars. iod.	Lithium carb.

septal defects or coarctation of aorta, pulmonary, aortic *stenosis* or dextrocardia is detected through fluoroscopy and x-ray. The bundle branch block is also found out in E.C.G. Kali iod., if selected according to its pathogenesis of creating hyperplasia in tissues, glands, bones and ligaments with sensation of diffuseness, coldness and crawling, and also of producing ataxia, dystrophy and putrefaction with nightly aggravation can control the stenosis pulmonary, aortic or mitral, in the event of any positive test of V.D.R.L.

Kali iod. also stands supreme in the restoration of the defect under *Fallot's tetralogy* when clubbing of fingers, cyanosis, depression, fatigue and fish-bone sensation in the aortic area with the slightest exertion, are detectable. The loud systolic murmur at the 2nd intercostal space attended with rapid irregular tense pulse is the drug's distinct image. Arsenic iod. is, however, its nearest analogue.

**Kali muriaticum**  
(Potassium chloride)

On rheumatic carditis Kali muriaticum exhibits a profound control when cardiac lesion is predisposed by poly-arthritis, and precordial pain is combined with chill, rigour, and fever, ranging from 100°-102°F with restriction of movements in the peri-articular region. There is much of anorexia, adynamia, and diaphoresis. Erythema nodosum or erythema marginatum with tough and white exudate is often noticeable. In such case apex beat is shifted outside and soft systolic murmur is audible in the mitral area. E.C.G. shows prolonged P-R interval, elevation of S-T segment and flattened T-waves, signifying pancarditis. Here Kali muriaticum is second to none in the rapid cure of such carditis with specific disease syndrome as morning aggravation, croupy cough, exoptalmos and tachycardia on account of dilatation of heart. Lithium carb. is the sister drug.

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