

ONE OF MY CASES

DR. NOEL PUDDPHATT

On February 16th, 1957, a married gentleman, aged sixty-one, wrote to me and said :

In April 1954, I noticed certain bleeding from the rectum, which was very dark in colour. The doctor whom I consulted, sent me to hospital for examination and X-ray, after which an operation was performed for removal of a portion of the lower bowel which was diseased. I was told to report for examination at six-monthly intervals for a period of five years. After two examinations, I was told that once a year would be sufficient. My last examination was in June 1956, when a surgeon said it was perfectly in order. In October 1956, I noticed a swelling on the pubic bone, and again saw my doctor. This was reported to be a bony tumour, and was removed on November 7th, 1956. I was discharged from hospital on November 26th, but on returning home developed a high temperature (103°) and the doctor ordered penicillin injections, and hot fomentations to the wound. This wound has still not completely healed, although the opening is small. It still needs dry dressings about three times a day. The doctor is of the opinion that the failure to heal is caused by a stitch abscess.

For some time after my discharge from hospital, I found it difficult to walk without the aid of sticks. It appears that a certain amount of bone was removed with the tumour, and consequently affected the alignment of the pelvis. I can now walk unaided, but with a slight limp, and still take a stick when out walking. If I walk further than usual or do certain movements of a more strenuous nature, I feel an ache in the centre of the base of the pelvis, which disappears after rest.

The most disturbing factor of this trouble is in the genital organs. After the operation a large amount of swelling appeared in the scrotum and in the foreskin. The doctor told me that it would disappear in time, and the swelling did abate, but the region round the end of the penis is extremely painful

at times. I also experience an ache along the whole length of the organ occasionally.

This matter is giving me far more trouble and pain, than the original wound. When I last saw the surgeon at the hospital, I told him of this difficulty, and he said that I must protect it as much as possible, which advice was, of course, quite unnecessary. I find I am more comfortable sitting on a hard chair, than in one with cushions or other soft material, which tends to support the organs unnecessarily. Apart from all this I feel, and am told look well. Some years ago (six or seven) I was at home for several weeks with nervous trouble. I worried about my work (quite unnecessarily) and was then of the opinion that I was not capable of continuing, and would have to relinquish it. I recovered, however, and resumed my duties but always found great difficulty in expressing myself at a meeting, often using words in the wrong places, and always came away wet with perspiration.

I also had some tummy trouble about the same time, which my doctor considered to be duodenal, although he did not diagnose an ulcer. For this trouble I consulted a homœopathic physician, who prescribed certain treatment and I have had no recurrence thereof.

My mother died of cancer of the duodenum at the age of sixty-one.

All this constitutes the particulars of the case.

As to himself :

Prefers warm weather. Worse stuffy rooms. Worse standing. Vaccinated twice. Several inoculations in the first world war. Prefers fresh air. Has a liking for most sweet foods. Appetite good. Drinks several cups of tea every day, non-smoker. Nausea looking down from a height. Dislikes crowds, room full of people, and parties. Several years ago had numbers of boils, a bad carbuncle on the back of his neck. Numbers of warts on his hands when at school. A slight rash on chest which appears and disappears from time to time. Cannot tolerate constriction. Seldom weeps except on deaths in the family. Says : "I am somewhat absent-minded. For instance, on many occasions I have gone to another room to get a book

or something, and on arrival in the room, have forgotten what I came to get." Concentration somewhat difficult. Says: "I do occasionally use wrong words, especially if a question is fired at me suddenly without my having much time to consider the matter."

Owing to the reason of his mother's death, I thought it would be a good thing to clear the decks as it were.

February 20th, 1957. Sent *Carsinosin* 200. Four weekly doses.

March 17th, 1957. He wrote and said: "The operation wound is still discharging at about the same rate. On two occasions, a small amount of blood was seen with pus. Only pus is appearing today. The pain still persists in the genitals, although not so severe, but the trouble is at the extremity of the urethra, where I get scalding pains occasionally, and the end of the organ which is extremely sensitive and painful at times.

As he stated that he was absent-minded; forgets why he went into another room; vaccinated twice, and numerous inoculations in the past; had numbers of warts as a youngster; principal trouble now is with the genital organs, I felt that behind all his trouble was Sycosis. I sent—

March 19th, 1957. *Medorrhinum m* one dose and *Sac. lac.*

April 17th, 1957. He reported that—"The wound is still discharging, but the pain in the genital region is much less severe, and occurs with less frequency."

April 21st, 1957. Sent *Sac. lac.*

May 15th, 1957. He stated in a letter—"Although the discharge is still continuing, the pain in the genital region is less. On the whole I consider I am improving."

May 17th, 1957. Sent *Medorrhinum 10m* one dose and *Sac. lac.*

July 17th 1957. He wrote a long letter and stated: "On June 7th when my wound was being dressed, a loop of a stitch protruded. My wife who was attending me proceeded to pull on it, and a length of about two inches appeared, but could not be removed. I, therefore, visited my local doctor.

He tried to extract it with forceps, but was unable to do

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so, and suggested I visit the hospital. I later saw the surgeon who performed the operation, and he did remove the stitch, but only after considerable effort. The resulting amount was about six or seven inches in length. The wound dried up after a few days, and remained so far a week, after which time a blister appeared. This was treated with fomentations and discharged some blood, and a small amount of discharge is still coming away from the wound.

The genital discomfort previously reported is now almost non-existent, but I occasionally have some irritation in the anus. This does not occur every day. In other respects I am feeling well.

July 19th, 1957. Sent *Medorrhinum* 50m one dose and *Sac. lac.*

August 14th, 1957. He stated in a letter that—"On August 8th a further piece of stitch (about two inches) was removed. The wound has since ceased discharging, and is now quite dry. I feel sure that your medicine had the effect of inducing the foreign body to come to the surface so that it could be extracted." He went on to say that he had queer sensations in his head, which were worse standing, and better when walking or sitting, but always feels much better on rising in the morning. He said it was not exactly an ache, but a slight dizziness.

August 16th, 1957. Sent *Sac. lac.*

October 12th, 1957. He sent a final letter and said: "I have now finished all the medicine you sent, and have to report that the nasal trouble (which was news to me) has now cleared up, and I am feeling quite well. Please accept my very sincere thanks for all you have done for me, etc., etc.

My deduction that Sycosis was the cause of all his troubles has proved correct.

To try to find a remedy to fit all the particulars as given above would have been impossible.

—*Health & You, Feb., '58*