

## HYDROPHOBIA

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On 28-6-1957, at 5 P.M., I was called to see a patient in the Government General Hospital, Jajahmundry. I refused to go to the Hospital to see the patient, as it was not proper etiquette. He requested me to see the patient as a friend or adviser, and, if I assured that I would take up the case and treat it, he would bring the patient immediately out of the Hospital.

I went into the Hospital and saw the patient in the mortuary shed. The patient was called N. Mukunda Krishna—aged 25, Proprietor, Universal Trading Co., Rajahmundry. Both of his hands were tied, lying on the Hospital iron cot, tied at chest, waist and legs at three places to the cot by ropes. There were short and loud rattling breathing sounds in lungs (phlegm) audible to the ears. He was admitted to the Hospital two days back, i.e., on 26-6-1957, and he was being treated for tetanus, with anti-tetanus serum. On 28th, when the lady-doctor approached to give injection, the patient saw the nurse with a glass of fresh water. Immediately, he slapped the nurse and dashed the glass with water at the wall. Then the lady-doctor correctly understood the disease as hydrophobia and reported the same to the Civil Surgeon. He declared that this disease was hopeless and removed the patient to the mortuary shed (while still alive), wherefrom he could be easily despatched to the grave. His relatives and friends—about 200 in number—were waiting under the trees for the result anxiously and restlessly.

He was pinched by me—found unconscious. I took hydrophobinum 1M. tincture, dipped cotton in it and made him smell. He smelt it three times and opened his eyes, which were blood shot, and tried to bite me. Then I squeezed the wet cotton and poured two drops of the medicine on his tongue. Immediately he closed the mouth. Bystanders said, he could not swallow as the process of swallowing ceased four hours back, due to lock jaw. On hearing that, I closed his two nostrils with my fingers cautiously and did not leave them till he swallowed. At once I left

the nostrils and declared that he would not die, as I was confident that my drug went in which was clearly indicated. I waited there for twenty minutes, observed the stertorous breathing decrease to normal breathing without sound.

I advised them to wait for one hour as the drug had commenced reaction and went away at 6 P.M. to look after my other patients. At 7 P.M., I was informed that the patient was demanding curd to drink. I saw the patient—he opened his eyes twice and closed them, no aggravation even though he saw the electric light, recognised his uncle who had come from Masulipatam on wire. He was demanding curd to drink. I told him that curd could be allowed only after his taking medicine. He opened his mouth, signing to put medicine. I gave three globules without medicine. He chewed well and swallowed without difficulty. He looked at me, said he did not know me and asked for curd.

The question for my consideration was whether to allow him or disallow him his request. When I took up the case, he was running in the third stage, as no salivation, silently paralysing, demand for liquid (the thought of which naturally aggravates).

If drink was allowed, he might drink it easily in entering the fourth or the last stage and death might take place amid convulsion or from asphyxia.

If his demand was disallowed, he might die of dehydration. Hence my thoughts were confused and my mind perplexed—for 20 minutes. As physicians, we are conducting experiments with drugs on patients basing on certain laws. So, I determined that it was well and wise on my part to satisfy his desire as it was an acute disease. So, after praying to the Almighty, I allowed him and he drank 3 glasses of curd—not hard. After ten minutes, he gained his full consciousness and complained that his hands were tied. All the ropes were untied. He desired to sit on an easy chair; it was provided and he got up and sat on it. He was removed to his uncle's house near the hospital after being duly discharged from the hospital. No further medication.

10-7-1957 Coma at 3 P.M. after stool—foam at Hydropho  
mouth before full moon 1M  
One dose

1964]

## HYDROPHOBIA

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15-7-1957	Weakness extraneous	Sulph 200 1
17-7-1957	Headache—right side only—nervous pain, drawing and shooting from cerebrum to cerebellum	Bell 200 1
19-7-1957	After 12-30 P.M., closed his shop and went home in the sun—then foam at mouth, left cerebral headache—nervous feet and soles drawing	Lach 200 1
21-7-1957	Foam at mouth—sudden unconsciousness	Bell 1M 1
27-7-1957	Sudden unconsciousness—new moon—foam at mouth	Hydrop 1M 1
1-8-1957	Occipital and cervical nerves, severe pain—no further drawing—he attended his business from 5-8-57. Cured. No further treatment.	Bell 1M 7

## L. M. POTENCY

*(Continued from page 542)*

I am sorry that some time ago unwittingly I became an instrument in spreading a distorted version of Hahnemann's teachings and am now glad that I have, after all, got the chance of removing the misconception.

Hahnemann says: "But as one of the rules of homœopathy, as also of commonsense, enjoins that we should attain our aim in the simplest and shortest way etc." (M. M. Pura-Mercurius) Dr. Pahud violated this rule.