BELLADONNA IN BRAIN FEVER OR ENCEPHALITIS

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Encephalitis or the brain-fever, is an inflammatory affection involving the meninges of the brain and spinal cord and occurs epidemically, although sporadic cases are not uncommon, especially in places that have been once the seat of an epidemic. This disease does not appear to be contagious, there being no evidence that they are communicated from one individual to another. Children are particularly susceptible to the disease.

The onset is sudden, with either vomiting or convulsion, intense headache and fever, and soon the most characteristic symptoms of the disease namely rigidity of the neck muscles and retraction of the head make its appearance. In the acute form the onset is so sudden and overwhelming that the patient may succumb within a few hours. In infants bulging of the fontanelle is to be noted. Delirium is a common symptom with older children.

The fever does not conform to any regular type. It usually rises rapidly with the onset of the disease reaching to 102° to 103° F but the temperature does not bear a constant relation to the severity of the case.

In 1978 eucephalitis visited Anantapur and other districts in Andhra Pradesh. It was a very transieut wave and did not scare many. But the 1979 epidemic has been au eye-opener to many in more senses than one. It really cleansed 'the doors of perception' of a number of people who found it impossible to believe that a few sweet pills could cure or prevent anything let alone encephalitis.

The fits and delirium that some of us witnessed and experienced are truly in the impetuous style of Belladonna. Its rapid onset and equally rapid departure, the violence surrounding it, the affection of the head, the attack on child, and what is more, the child in us—all these have revealed to us the meaning of Belladonna in more senses than one. There was Bell, all over in the reaction of the medical establishment to this grave emergency in the International Children's Year and in the panic of the public when they found that their dear doctor failed them once again in the course of two years.

By mid-November we were getting regular news about the epidemic in the dailies. It was noticed in Kolar district of Karnataka State, and later its march was closely followed. We remember that on 25th November on a Sunday the whole thing took the shape of a problem to be tackled. By then people were talking of the attitude of the hospitals and the helplessness of the victims. Our friends and public demanded an answer. Don't you have anything at all in Homocopathy to meet this emergency?

In the name of the founder of Homoeopathy, what else can we do but match the symptoms of the malady with the drug pictures which we saw on the face. limbs and the very being of those who came to us for an answer.

We had tough time matching the symptoms of the disease with that of the drug or drugs having therapeutic indications. The theory of genus epidemicus had to be applied. In the case of epidemies our master laid down that the best prophylaetic will be the remedy obtained after examining the typical symptoms from accurate observation of the first five or six cases. Acute epidemic diseases often run to one or two epidemic remedies which vary as the disease shifts geographically.

Most of the cases reported to us were complaining of (1) sudden onset of high fever, (2) bursting headache with flushed face, (3) dilated pupils, (4) convulsion or spasms, (5) tendency to vomit and (6) starting in sleep in terror etc.....

In the second stage, we noticed delirium, weakness of the extremities, semi-paralysis of the neck and limbs especially lower extremities. This is due to the central nervous system getting affected by high fever and onrush of blood to the head.

In the third stage we could see children in stupor and the head falling to a side with bulging of fontanelles.

When we repertorised these rubries we could arrive at Belladonna as the most suitable drug having the totality of symptoms.

Thus Belladonna stood the test as a cure and as a prophylactic in brain fever during this season, in Andhra Pradesh.

Let us now give a few faets and figures before we conclude: In the first stage of our work, 25,000 children had been given preventive doses, within a span of three days. Wide publicity through handouts and through radio alerted everyone on the need to protect themselves against the possible attack of the epidemie. Seven centres were opened for distribution of medicine apart from sending volunteers to schools direct to cover all the children. Starting from the fourth-day our volunteers covered all the villages within a radius of five miles from Anantapur and distributed medicine free of cost to 40,000 children.

In the third stage of the work, a number of voluntary organisations and individuals, officials and non-officials, teachers and headmasters volunteered to distribute the medicine and with their co-operation 30,000 preventive doses of medicine were distributed. All this was done before the official team from Hyderabad came on the scene to study the situation. The date was 11 December 1979.

In the final stage of our work, the Rayalascema Development Trust with its batch of medical officers stepped in on a large scale and covered 26 villages in all of which free medicine was distributed. In all, more than one lakh and seventy-five thousand doses of preventive medicine were made available, providing immunity against encephalitis for young children.

In all this rush and constant activity, we attended on the actual victims (Continued on page 231)

Editorial comment: The observations made by the author are very interesting. But the only snag is the absence of an individualising examination of each case of myopia so that the law of similars, which is the essence of Homoeopathy, could be demonstrated between the drug and the patient. Unfortunately, the specificity of the drug action for the disease became the central point of research planning overlooking the principles of homoeopathic practice.

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(Continued from page 260)

of the attack, pronounced incurable at the general hospital. Not a single case proved fatal in our experience though newspaper reports claimed a toll of 56 in four districts in the hands of other systems of medicine.

Editorial comment: The report is very encouraging and in the interest of the profession at large, the authors of the paper are requested to send for publication the facts and figures in greater details.