# **HOMOEOPATHY IN PEDIATRICS\***

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"The Lord is long suffering, and of great mercy, forgiving iniquity (sins) and transgression and by no means clearing the guilty, visiting the iniquity of the fathers upon the children unto the third and fourth generation."—Old Testament, Numbers Chapter 14: Verse 18.

Homoeopathic remedies contribute to a large extent in the treatment and cure of many diseases of infants and children in a gentle and permanent manner. The child is saved from the shock of the crude treatment and parents from torture of observing their dear children subjected to the same. Children under homoeopathic treatment are relaxed, friendly and do not have fear and terror of visiting the doctor.

This subject is a vast one so I shall limit myself to a few selected diseases which are seen in my practice.

## BIRTH INJURIES

The commonest condition is where the labour is prolonged and due to that the child's cranium is pressed hard and as a result thereof some symptoms are observed like persistent crying. I have always used Arnica mont in potency with good results. Where forceps are used which leave marks on the head the same remedy in 30th or 200th potency is found very useful in removing its ill-effects.

A case of birth injury: An infant a few days old, son of a pathologist was brought to me with a swelling of the right sterno-cleido mastoid muscle. He was seen at the hospital and was finally advised surgery. The swelling according to the team of doctors was a haematoma as a result of the forceps delivery. I started the treatment with Arnica 30 and 200 followed by Hypericum 200. After a week's treatment the child was sleeping better, crying less and would gradually turn the head on the right if a powerful beam of light was shown. The lump reduced in size but as it was persisting Bellis p. 30 was given in repeated doses for a week with amazing results. The lump completely disappeared. The child is 12 years old now and in perfect health.

A case of hydrocephalus due to injury: Master T. M. 13 months old was brought with a history of fall from a sofa in December 1975 and again from a bed 3 ft. high in March 1976. A lump had appeared in the head and he developed continuous vomiting with a squint in the right eye. As usual the child was admitted to a hospital where the skiagram showed parting of the skull bones due to intra-cranial tension. Lots of medicines were given

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to no improvement as such the sub-dural tap was done. Diagnosis: acute hydrocephalus with bilateral 6th nerve palsy and bilateral papilloedema. There was past bistory of forceps delivery, treatment was started with Arnica 200, 3 doses followed by Nat. sulph. 30 which was gradually stepped upto 10M. The child was better, intra-cranial tension was reduced with improvement in the diameter of the head. As the squint persisted Causticum 30 was given which was gradually stepped up to 10M with excellent results. The child was examined by an eminent ophthalmic surgeon who found the child absolutely normal. There was no papilloedema and no squint.

## CONGENITAL DEFORMITIES

Meningocele: One could mention many but I will mention a case of hydrocephalus which was as a result of congenital meningocele which was operated and where the wounds did not heal and a lot of pus was coming out in spite of the latest external and internal medicines and injections. The size of the head was increasing gradually and the eyes were popping out. Another operation was advised. There was past history of suspected hydrocephalus, measles fever and diarrhoea. There was a family history of a sister having cleft palate, father suppressed eczema, paternal aunt T.B., maternal grandfather bronchitis and maternal grandmother T.B. The wound was dressed with Calendula lotion. The wound started healing and the internal sutures started coming out. As the child was not vaccinated so far as a result of constant illness, the child was vaccinated now as he was improving. There was a good reaction, the arm was swollen as such Thuja 200, 3 doses were given followed by Sil. 30 and 200 later on which reduced the suppuration considerably. In spite of the treatment, the wound did not heal perfectly, so Bacillinum was thought of due to family history of Koch's. This was given in 200, 1M and 10M potencies. The wound healed up completely. The diameter of the head started steadily reducing. The child was seen after 2 years on 10.1.77 in perfectly good health.

Undescended testicle: A child, Master R. about 5 months old was brought by an anxious mother when she was suggested an operation for undescended testicle on the right side. This child was given Aurum mur. nat. in 30th and 200th potencies and the mother was overjoyed to find that the testicle had descended.

Congenital hydrocele: Master N. C. aged 3 was brought to me by his doctor father for repeated attacks of fever, colds, cough and tonsillitis. This child was treated with Thuja 200, 1M and 10M as there was history of repeated vaccination and inoculation. Family history of father and uncle bronchitis, allergic rhinitis and psoriasis. On these bases Bacill. 200, 1M and 10M were given at intervals, tonsillitis, cough, cold improved but to the father's pleasant surprise, he found that the congenital hydrocele was gradually diminishing and finally disappeared completely. As this was very intriguing to him, he referred his nephew aged 4 for a right sided congenital

hydrocele. The child in addition had adenitis in the neck and groins and had more or less the same family history. So Bacillinum was given from 200 onwards up to CM which completely cleared the case.

## ACHALASIA OF THE CARDIA

Very often parents bring their infants who are vomiting since birth and are finally advised surgery. I clearly remember a baby girl in my early years of practice who is now 25 years old, and a mother of 2 children. She was vomiting emaciating and with difficulty retained cold milk which too was vomited later. Phosphorus helped her to recover completely.

The other remedy for this condition is the bowel nosode Dysentery co. It has got a selective action on the pylorus, causing a spasm and retention of the digested contents which is finally vomited.

An infant Master G., 2 months old son of a lady doctor was brought to me for constant vomiting of milk. The doctor's cousins are also modern medicine practitioners who tried everything possible. The child was given Dysentery co. 30, 3 doses with partial improvement. This was repeated in 200th potency with complete relief. The child is now more than a year old.

#### SKIN DISEASES

Just as some are born great and in some people greatness is thrust upon them, in the same way, some are born with psora and on some psora is thrust upon at the least excuse. For example, an infant a few days old is often brought with infantile eczema on the cheeks with a flushed face and pink appearance of the skin. Here the child is born with psora. In these cases, one will always obtain a history of suppressed skin disease in one of the parents or both. As such, a careful family history should always be obtained in these cases.

In the second category, the infant is born normal and the eruptions appear after vaccination or after some injections are given for a minor ailment, like diarrhoea or fever. Here the latent psora has flared up. When the cruptions are as a result of vaccination or inoculation. Thuja in 30th potency repeated or a dose or two of 200 followed by Silicea will antidote the vaccine and the skin will start improving. If external applications in the form of corticosteroids are applied, it may take a longer time. Now the child's constitution should be studied and objective symptoms obtained. Graphites and Calc. carb. are found very effective in fat children.

A graphites child is constipated, eruptions are moist in the bends and behind the ears. The discharge is sticky and the skin is rough, dry and at times cracked. The Calc. carb. bahy is also stout but the skin is soft, cold and clammy with flabby muscles. There is aggravation from milk and eggs and has desire for chalk, pencil and indigestible things.

When Graphites fails and the child is a hot patient, lips, anus and vulva are red, washing aggravates, child prefers to remain dirty, a dose of Sulphur

30 or 200 helps me considerably. Many remedies can be mentioned including a bowel nosode Morgan Bach. It is very helpful when Graphites, Sulphur and Psorinum have not succeeded.

I will mention one case of eczema since birth. Bahy F.O. 4 years old, a fair child, was seen by me covered with eczema from head to foot. This child was born cyanosed and developed skin eruptions in the maternity hospital which was treated with external and internal remedies. The infant improved but again developed skin rash at the 3rd month after primary vaccination which was again suppressed by external applications. The child was better till the 3rd year when she was again vaccinated which did not take well and she developed eczema all over which continued till I saw her. In between she had a few spells of bronchial asthma. She is a hot and irritable patient. There is a family history of weeping eczema in father, grandfather and grandmother. My favourite remedy Thuja was given from 1M to CM.

In about 6 weeks' time eruptions dried up, the patient improved in health but a few patches remained here and there. As there was no further improvement a single dose of Sulphur 200 was given with placebo in plenty. Child was better for some time but again after 2 months some more eruptions appeared. Sulphur was stepped up gradually to CM over a period of 6 months. The child improved completely for the first time in her life with no eczema or asthma. She is now about 19 years old and in very good health.

Another skin disease which I see in my practice is molluscum contagiosum. Most of the cases come with a ready diagnosis from the dermatologist who had advised application of different ointments, or some eruptions are cut or cauterised but they have recurred again. The lesions are pearly, hard, shiny globular papules. The size varies from a sago grain to a pea. Here too, we often get a history of cruptions since last vaccination or inoculation. In elderly children, we obtain history of nightmares, dreams of falling and someone chasing and startling in sleep. Here too Thuja works very well. The remedy works from within outwards. The cruptions become big and they burst open and then subside.

Warts are very common in children. The parents first consult the family physician and then the dermatologist who either cuts them or uses electrocautery. Experience has shown that they recur very often with a vengeance. Many homoeopaths use Thuja externally and internally; here too the results are not uniform. Thuja type of warts are soft, cauliflower type, pedunculated which bleed on washing or rubbing. The patient has hair on unwanted parts. The sweat is on uncovered parts and there is always a history of repeated vaccinations. There are dreams and nightmares as mentioned above. Nitric acid warts also bleed on washing. There may be condylomatas in addition, but the children are very irritable, chilly and fond of travelling. Caust., Antim. crud. and Sulphur can be found very useful depending upon the symptoms of the patient. Boils in the tropics are extremely common and I

have found Gunpowder. 3X very useful as per the direction of Dr. Clarke unless some other remedy is strongly indicated.

#### BRONCHIAL ASTHMA

This disease is found throughout the world and in spite of the modern advances in medicine, it remains unconquered. It is easier to treat this condition in children than in adults as there is not much of a pathology and the suppressions are less. Modern medicine has now recognised some cases as psychosomatic conditions and that is the reason why our remedies work well, because they work on the body as well as the mind. Bronehial asthma is a clear manifestation of psora which may alternate or co-exist with cutaneous eruptions and is worst when the cutaneous eruptions are suppressed. Psora as shown by Dr. Nebel, Dr. Clarke and Dr. Bernoville is nothing but hereditary tuberculinism that follows successive generations. Occasionally, we find a sycotic miasm superimposed on psora. I have repeatedly seen the same type of history in hundreds of patients of suppression of skin eruptions, may it be infantile eczema, severe rash of measles or after vaccination which had no reaction. It is also as a result of suppressed frequent colds. coughs or attacks of bronchitis or asthma. Out of 200 cases treated by me the figures are as follows: ---

Total No. of cases	Patients with past history of skin eruptions	Patients with past history of res- piratory disease		Patients with family history of respiratory disease
200	129 (645)	58 (29%)	47 (24%)	151 (75%)

The disease is to be treated on symptoms and on constitutional lines. When there is suppression of skin disease and Sulphur is indicated which if given very high, the eruptions will flare up considerably and the parents will be very worried about the same. As such, the potency must be at par with the disease or it is advisable to give a drainage remedy or a short-acting remedy for some time and Sulphur later on when the vital force is adjusted.

When there is history of respiratory disease in the patient or in the parents Bacillinum as suggested by Dr. Burnett or Tuberculinum should be given. I generally start with a single dose of 30th or at times 2 doses and gradually go up which reduces the risk of severe reaction and the patient feels better and better. During acute attack short-acting remedies with auxiliary treatment works better. When the patient improves, deep acting constitutional remedy is required. Breathing exercises is a must and I prefer in the form of yoga exercise which help the patients to get well at the earliest. Thuja has often helped me when there is history of repeated vaccination or the patient is worse every time the vaccine is given. Nat. sulph.

is invaluable in asthmatic children and one always gets a history of asthmatic every monsoon or when there is moisture in the atmosphere. Moon phase (full and new moon) play an important part in many asthmatics. I have kept a careful record of the phases and I give these remedies in anticipations to the patient. Dr. C. M. Boger in his very valuable book Times of The Remedies And Moon Phases has mentioned many remedies, having maximum number of marks but I find Phosphorus and Silicea top the list. Sulphur is running neck to neck. Other remedies found useful are Ars. alb., Calc. carb., Lyco. and Puls.

Asthma patients though physically weak are found very intelligent and bright in their studies.

# TONSILLITIS, ADENOID, NASAL POLYPUS, FREQUENT COLD & CERVICAL ADENITIS

These children do not come to us early in life, but are extensively treated with modern medicines, injections, auto-vaccines and finally when the parents are told surgery is the only way out, they then consult a homoeopath, Here too the treatment should be on constitutional lines. A detailed history of the patient and their parents will give an indication for prescribing. Short acting remedies should be given for acute condition, viz. Bell., Hepar sulph., Ars. alb., Merc. i.f. or Merc. i.r. etc. Later on Baryta carb. is found to be the remedy of choice. According to Dr. Burnett and Dr. Borland these children having tonsillitis and adenoids are physically, mentally and socially backward. They have frequent colds, enlarged tonsils, breathe through the mouth with marked salivation and have enlarged cervical glands. Aurum met. is another remedy worth using. Here too the child is physically and mentally backward and does not grow in height and weight according to age. Along with frequent tonsillitis there are frequent attacks of colds and offensive discharge from nose, tonsillar crypts and ears. They have bypertrophied adenoids and may be having undescended testicles as a concomitant symptom. The remedy that will finally cure the repeated attacks of tonsillitis and cervical adenitis is Bacillinum or Tub. bov., as per suggestions of Dr. Burnett which is verified again and again. This remedy will also cure adenoid, nasal polypus, frequent cold and chronic sinusitis. This remedy still works better when there is a family history of parents or grand-parents having respiratory disease.

# PSYCHOGENIC PROBLEMS IN CHILDREN

There are various conditions which one comes across in practice and parents specifically ask for homoeopathic treatment. Generally one comes

- (1) Habit problems like thumb sucking, nail biting, enuresis, fecal incontinence, and sex problems like masturbation.
  - (2) Personality problems like irritability, timidity, obstinacy, fears, pho-

bias, jealousy, temper tantrums and committing small thefts.

(3) Psychosomatic problems like vomiting, headaches, abdominal pain, diarrhoea, examination funk, asthma and disturbance in sleep.

Many parents bring their children who are old enough but they persist in sucking the thumb in school as well as at night. The thumb bears a scar impression, the palate is arched and the teeth protruding very often. On careful inquiry we find that there is some frustration or maladjustment in daily life. The child should not be rebuked but should be given more attention or his mind should be diverted from it hy interesting him in toys and also should be encouraged to play with other children. The home atmosphere should be of happiness, ease and friendliness. The common remedies are Nat. mur., Calc. phos., Sil., Ipec., and Calc. carh.

Nail biting is a sign of tenseness. Hence the child should not be punished or scolded for the same. It will make matters worse. Here the cause for tenseness should be treated first. I have found Nat. mur. very useful in this condition. Other remedies found useful are Aco., Ars., Arum t., Calc., Cina, Stram. Dr. Boger adds two more remedies Sanicula and Hyoscyamus; also Amo. br. is found useful.

Enuresis is another very common condition. At times parents bring their children in a rather late stage when the child is about 10-12 years old. The causes of enuresis are many like dominating parents who scold and punish the child or jealousy of younger brother or sister, who may be getting a little more attention. Or the child may start wetting the bed after a dry period as a result of attention being shared on the arrival of the new baby. Timid children who have neither the courage nor the words to express their resentment against parents also develop this conditions. The disturbed bladder control is the expression for the internal tension. Dr. Foubister recommends Bacillinum testinum for enuresis in children.

Master J. aged 11 years was brought to me for bedwetting every night by his mother. After a careful history taking, he was given Caust. in increasing potencies with an intercurrent remedy Sycotic co. which I have found very useful in many of these cases. But to my surprise, the boy showed very little improvement. The mother in the subsequent consultation said that he was very disobedient and indisciplined in all respects. She had to scold him for everything he did. On the basis of suppressed anger, I gave him Staphysagria 200 and raised it to CM. After Staph, was started, enuresis decreased. The dry interval has increased and the boy has got over it completely.

Fecal incontinence may be found in some cases instead of enuresis.

In our case histories, we often find and parents frequently complain that children are very irritable, obstinate and go into temper tantrums when not given the liberty to do what they like. These children are to be tackled very carefully. They must be treated with love and affection along with firmness. Most of the homoeopathic drugs show different types of temperaments. Cina, Staph., Chamomilla etc. often cool down a very irritable child.

Some children develop different types of fear, phobias such as fear of darkness, of being alone, of thunder, of ghosts etc. They have nightmares, dreams of falling and also startle in sleep. I usually find these are after repeated vaccinations and hence Thuja is the drug of choice. Other remedies for fears are Nat mur., Phos., Caust., Arg. nit.

Master K. aged 10 was brought by his parents for the habit of picking small amount of money at home. He had aversion to bathing, even will not wash himself after a stool. He was lazy, indolent to go to school, irritable, obstinate, beats other children and sleeps late at night. Sulph. 1M, 2 doses were given and he was kept under observation. The habit of stealing improved but he developed boils (a past suppression) and styes. Irritability and destructive habits were on the increase. Staphysagria 200, 1M, 10M and 50M were given at intervals, after which he improved generally on the whole. He is more or less normal and attends his school regularly and has clean habits.

Staphysagria was selected on the basis that his school teacher was rather harsh and was punishing him which he could not retaliate as he was doing in the house (suppressed anger).

Another interesting case is as follows:

Master G. D. A. aged 1½ years was brought to me for frequent cough and cold since birth. The appearance of child was dirty. On further questioning, the mother said that the child was very irritable, hits and bites other children, breaks toys and throws things around. His appetite was good but in addition was eating all dirty things including his own stool. His perspiration was foul and his head was perspiring profusely. Family history revealed eczema of father.

The treatment was started with Sulphur 30, 3 doses followed by Sulphur 200 and 1M one week apart. After one month the irritability was much less but still the child continued having his dirty habits. Calc. carb. 200 and 1M were given at an interval of 15 days. The child was better now, the cough and cold was less, irritability decreased considerably but had still not left the habit of eating his own feces. On referring to Kent's Repertory on page 48, only one remedy appears under the rubric 'swallows his own feces' and that was Verat. alb. It was given in the 30th potency and when the child was brought again after a month, the child was behaving perfectly and had left all the dirty habits.

Vomiting, headaches, abdominal pains, incontinence of stool and urine etc. are the common psychosomatic conditions in children. These are produced as a result of mental stress and strain which the child is not able to balance. The cause may be at home or at school. These attacks may be periodical or daily. This is an expression of the repressed hostility, towards the family members or the teacher. In these cases of maladjustment, Ignatia, Nat. mur., Sycotic co. are very helpful along with Staph. when there is a history of repressed hostility.

Miss. R. G. aged 5 was brought to me for passing a small amount of feces in her underwear just before going to school or in the school. She was free from the same on Sundays and holidays. She had a habit of eating talcum powder, chalk, soap, toothpaste and pencils. She would chew her handkerchief and frock. She had chronic tonsillitis with cervical adenitis. frequent cold and perspiration on the head. She is backward in school, very slow in reading and writing. She has fear of darkness, crackers and dogs. She is very obstinate, likes to play and travel. The school teacher was strict which she resented. Being the only daughter, the parents did not enforce discipline. As she did not like to go to school or study, this was a trick to dirty her underwear either before going to school or at school. She was given Calc. carb. 200, 3 doses which was stepped up to 10M after which there was a good deal of improvement, but still she was very backward in the school. Baryta carb. 200 and 1M were interposed which partially helped her in her school work. She was more confident and had stopped soiling her underwear. Still the fear and anxiety persisted and also her obstinacy. Single dose of Tub. 200, 1M and 10M have helped her considerably. She is a normal child now.

# INFECTIOUS DISEASES

I want to mention three acute infectious diseases which cause a lot of trouble and over which a good deal of antibiotics is wasted. These three diseases can easily be treated by simple homoeopathic remedies.

Chicken Pox: No sooner the vesicles appear Variolinum 200, 2 doses are given in every case followed by Rhus tox 30 in repeated doses which is found very useful when there is a successive crops of eruptions. Very rarely, Sulphur is required to finish the case.

Measles: Here the child looks flushed with temperature and coryza. Belladonna is the first remedy to be given in 30 or 200 potencies in repeated doses followed by Bryonia. In spite of this, if eruptions are retarded, I find that a single dose of Sulphur 30 or 200 brings the eruptions and the temperature comes down. In complications like cough and cold and the patient's parents tell us that the child is worst since measles, Puls. will be found very useful.

Mumps: Mumps either starts on right or left side of the face with fever, uneasiness, salivations, etc. Hereto if the symptoms are very acute and the fever is high Belladonna is given. If not, I start the treatment with Parotidinum 200, 2 doses followed by Merc. i.r., or Merc. i.f. depending whether it is left sided or right sided and the results have been very satisfactory. For the complication of mumps particularly orchitis, Pulsatilla is found very very helpful.

For conjunctivitis after measles or without it Bell., Merc. and Rhus tox. in 30th potency are found very helpful. Euphrasia  $\phi$ , 5 drops to an ounce of distilled water as eye drop is quite helpful. When there is lot of pus forma-

tion, Puls. or Arg. n. according to symptoms will clear the case.

For Dentition, C.P. 6x or Chamomilla depending whether child is mild or irritable will help it. When there is early decay of teeth, Kreosote in 30th potencies will be very helpful.

Child is the father of man. So if children are brought up on homoeopathic remedies from birth and miasmatic remedies are given, the discases will not be transmitted as the Biblical statement mentioned above. The future generation will be healthy as the sins of the parents will be washed away by the homoeopathic treatment.

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Editorial comment: The author has simplified homoeopathic practicby listing a set of homoeopathic medicines for different diseases although homoeopathic philosophy demands the choice of remedies for patients suffering from diseases based on strict individualization. It is unfortunate, that all through the write-up, it projects a dichotomy in the mind of the writer between philosophy and practice. Results are claimed of remedies for diseases selected not strictly on the miasmatic background and without erecting a convincing symptomatic totality leaving the readers in suspense over the how and why of the choice. Case reporting can be of educative value only when the reporter establishes a correlation between the results obtained and the philosophy of his action.