

## **Introduction**

Male

11 years old

19-04-2013

## **Case**

A young boy's mother brought him to see me to treat his ADHD.

His brother was involved in a serious car accident in 2011 which the patient had witnessed. His mom seems to think his symptoms developed after this incident.

Since the end of 2012 he cannot sit still and fidgets a lot. His mom has noticed that in the last couple of weeks it has gotten worse. During the consultation he regularly interrupts his mom and gets into trouble for this (impulsive). I also notice that he finds it frustrating to have to be here. His mom reports that he has a short span of attention and struggles to concentrate. He consulted with the school psychologist for anger and concentration issues.

His eldest brother was hit by a taxi in which he fractured his skull and was in a coma for two weeks. My patient asks if he can leave the room while his mom re-tells the story, he doesn't want to hear about it and according to this mom doesn't want to talk about it either or drive past the place where the accident took place.

He gets frustrated and seems to have an inner anger. He throws things if he is angry. He does not like it if someone lies or wrongly accuses him of something. According to his mom he will wake up in a bad mood if he does not get enough sleep. He loves animals and sleeps with his dog in his bed. His mom describes him as strong willed and says he won't do something he doesn't want to.

There was an incidence of bullying last year at school which upset him a lot, the bully was known as a problem child. His brother has gone to high school which has been beneficial for him as he now receives more attention from his parents. His brother and he tend to fight a lot and he says his brother makes him angry.

His mom describes him as lovable and emphasis that he loves animals. She says he is soft natured but don't step on his toes.

He has nightmares about guns, shooting and falling.

Fears: spiders but otherwise fearless

## **Top to toe**

Head: He gets headaches on waking in the morning in the occipital region and he gets a sensation of itching inside his head. The headaches are < shouting and >better for sleep.

Ears: He had grommets as a child. There was a yellow/brown discharge from the ears which was worse on the right side

Eyes: He wears reading glasses. His eyes go red when he is tired. And his eyes are sun sensitive.

Mouth: He wears braces to correct an under bite and asymmetrical teeth.

Throat: He had a tonsillectomy due to repeated tonsillitis and would get fevers of 40degrees with these infections. His mom comments that whenever he gets sick he will get a fever. He also had a fever when he teethed.

Chest: Nighttime asthma <winter. He coughs at about 2am.

Digestive: Complains of flatulence and will sometimes get constipated. He craves yoghurt (loves it), mincemeat and mash potatoes, ice cream, milk. He dislikes the texture of red meat. His mom says he is not a big eater and eats very little. He suffered from reflux as a baby

Skin: He has warts on the shin of his left leg. Gets pimples on his buttocks. Eruption on back of arms.

**Comments**

I find him to be a very sweet young boy. He has an enquiring mind and wanted to know the details about the medication he would be receiving. He likes to keep moving and when told we didn't need him to sit with us anymore he jumped up and went exploring. His mom is very firm with him and he listens to her when she asks him to wait before speaking. His mom's biggest concern is feedback from the school, they are pressurizing her to put him on medication and say he uncontrollable.

*Mac Repertory, Pro-Classic, Version 8.1*

**Rubrics**

MIND; ANGER, irascibility; tendency (306)

MIND; CONCENTRATION; difficult (298)

MIND; OBSTINATE, headstrong (118)

MIND; VIOLENCE, vehemence (124)

RESPIRATION; ASTHMATIC; night (49)

HEAD PAIN; LOCALIZATION; Occiput (348)

FEVER, HEAT; HEAT in general (249)

SKIN; WARTS (129)

EYE; PHOTOPHOBIA (214)

**Facial analysis – dominant Red group (sycosis)**

<b>Yellow – psora 2</b>	<b>Red – sycosis 9</b>	<b>Blue – syphilis 5</b>
Lines, forehead Hairline-shape	Lips full Chin-cleft Hairline-crowded Ears-position Lines, mouth, beside Smile-size Eyes-size Hairline-position Forehead-brow shape	Teeth-under bite Teeth-asymmetry Eyes- lids Ears-size Forehead-shape

**Remedy and dose**

From my repertorisation Sepia was the highest scoring red remedy but because of the strong love for animals I decided to give him a single dose of Medhorrinum 1M.

**Follow up 1, 17-05-2013**

His mom reported that he was better at home but not at school. She says he seems to be communicating better at home. His behaviour seemed to be worse at the end of the day. She says he has been very impulsive. I ask him how he feels and he says he feels no change. He got in to trouble for not completing his homework and argued back with the teacher.

I am not pleased with this response at all. Although there has been some change it is not nearly enough. I look at his facial features again and I am still confident that he is in the red group (dominant sycosis) and decide to leave my repeterisation as is and give him Sepia 30CH daily.

**Follow up 2, 29-05-2013**

I consult with his mom over the phone as I do not see the need to consult with him again as I am satisfied that I have all necessary information. She has noticed no difference on the Sepia 30CH, I then prescribe Rhus tox 30Ch as this is the second highest scoring red remedy. She notices that he is much less restless on the Rhus tox 30CH but she is still getting lots of complaints from school. She is now considering changing schools as she feels the school is victimizing him and are refusing to acknowledge the improvement they have seen at home.

**Follow up 3, 11-06-2013**

I can tell his mom is starting to give up and is feeling very frustrated with the school. I keep reassuring her that we will find the remedy that will work best for him. I change the rubrics used to:

MIND; CONCENTRATION; difficult (298)

MIND; IMPULSIVE (37)

MIND; ANGER, irascibility; tendency (306)

MIND; OBSTINATE, headstrong (118)

GENERALITIES; RESTLESSNESS, physical (128)

EAR; DISCHARGES (170)

GENERALITIES; FOOD and drinks; meat; aversion (136)

FEVER, HEAT; HEAT in general (249)

Highest scoring red remedies: Sepia, Rhus tox and Tarantula Hisp

I prescribe Tarantula H 30CH daily as he did not have the desired response to the first two remedies.

He responds beautifully to Tarantula, a friend at school even commented and told him he seems different. I ask his mom what she has noticed and she responds as follows:

- He has more inner control
- His emotions are more controlled
- He is more at peace with himself and his surroundings
- The outburst have reduced substantially
- He is more focused on his deliverables

- His attitude towards people has started to change
- Him and his brother get along a lot better
- The relationship between child and parent has improved drastically
- He does not need to see the school psychologist anymore
- His mom is receiving less complaints from the school and believes next year will be even better when he has a new teacher

### **November 2013**

Still taking the remedy (daily) and behavior is just as good.

### **February 2014**

Behaviour is still good (80% better than his first consultation). In the late afternoon his mom reports he has not been focusing as well but he is also doing running training of more than 3 kms a day so is tired. Upon hearing his focus is wandering the potency is increased to 200 C once a day – soon after his mother reports she sees improvement again. Physically there has been improvement overall since taking the Tarentula. Still some occasional headaches but not as much as before. Although he has caught a couple of colds he got over them very quickly. He has had no asthma symptoms. His skin is definitely better and smoother even in his face.

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