

## **Memory loss, Schizophrenia**

Case by Ellen V. Kire

### **Female, Age 55**

#### **February 2009**

She is bothered by allergies and sinusitis that are worse in the winter because she is indoors. She notices improvement in the summer when she can keep the windows open or be outside in fresh air. She does a lot of throat clearing probably due to smoking cigars and has some chest congestion. Coughs up white thick mucus in morning after rising. She thinks smoking cigars help her arthritis and her sinus congestion by heating up the air which helps clear them. She has stiffness and numbness at night in her neck and back that is worse from rising after sleep, from sitting long, and from the cold. She has back pain in her shoulder blades and cervical region that she describes as 'scalding' and 'aching' pain in her hips. Her face is puffy under her eyes. Her teeth are very bad- many are missing, and others are black or discolored gray. Her baby teeth did not come in well and they decayed quickly. She has receding gums and bone disease in her lower jaw and can't chew her food well. Dentists have attributed these ailments to her diet, smoking and alcohol addiction but she refuses to accept this and says the dentist ruined her teeth when the metal fillings were removed and replaced with 'gum'. She dislikes dentists and doctors- does not trust them. She believes in prevention and takes herbs to relax herself. She prefers to use herbal supplements and vitamins to boost her health and help with nausea, indigestion, diarrhea and arthritis

She is 5' 3" in height. Her weight fluctuates though she says she does not diet- she simply eats less when she wants to lose. In 1991, after she had a nervous breakdown, it reached a high of 200 pounds. In 1996 her weight dropped to its lowest at 99 pounds but by 2005 she was up to 145 pounds. Currently she is 116 pounds and says her appetite is constant and does not fluctuate. She would like to get down to 106 which she thinks is her ideal weight and less stress to her joints. She likes to snack and drinks a lot of liquids during the daytime. Eating and drinking are a great source of pleasure for her and eating makes her feel better. Prefers cold drinks which ameliorate. Capricious appetite- cravings change often. Aversion to coffee and fish. Worse from fat, greasy and spicy foods which give her heartburn and diarrhea. Loves sour, spicy, chocolate, cheese, liquid beverages-water, soda, beer, fruit juices.

She has used alcohol and tobacco since her late teens and early twenties, but denies she has an addiction problem. She thinks tobacco and alcohol help with her arthritis and allergies. She smokes 8-10 cigars daily. She used to drink 3-5 alcoholic drinks everyday but due to her low income only has 1-3 beers each week. She has no desire to overcome her alcohol and tobacco addiction and doesn't see either as a health issue that is self limiting.

She is overly sensitive to noise and sound. TV sounds too loud and she will put it on close-captioned. She tends to perspire a lot on hands, feet which is worse from meat and dairy. As a child she had nightmares and sometimes has dreams of insects and beetles. She has many dreams of quarrels with others. She needs to move in her sleep to relieve stiffness and pain. Her sleep was good in past and she liked to sleep 12 hours. She says 'twilight brings a sense of relief'. She experiences vertigo as a spinning sensation and has fainted on several occasions, but now recognizes the sensation and sits down before she falls. It happens in evening, after climbing a flight of stairs, and when going from a dark, shadowy place to a brightly lit one. Her menses stopped around age 40. Before her period she'd become weepy, loquacious, tense, lethargic, had sore breasts, bloated abdomen, and increased sexuality. No sexual desire- she says it is 'sublimated'.

As a child she became anxious if separated from her parents and worried about them and what would happen to her if they died. Her parents divorced when she was young and she lived with her mother after her father left. She was angry with him for leaving them, took her mother's side

and had little contact with him after the divorce. She and her mother were often estranged from their relatives that lived in same area with a long history of feuds and quarreling. She and her mother cared for and supported each other. They were best friends and got along well together. They went everywhere together in her teens and rode around in their convertible with the radio going full blast, singing to rock n' roll music. They were interested in yoga, tarot, astrology and 'psychic stuff '. As a child she said all she ever wanted was to grow up- 'I wanted the respect of an adult'. She used to be an avid writer and worked for many years on a novel but lost interest at some point. She moved in with her brother and sister-in-law in 2008 after her mother died. She lived with her mother for most of her life.

In 1985 at age 31 she had an unwanted pregnancy while on the birth control pill which she ended by having an abortion. She did not experience any feelings of guilt or regret with this decision, just physical pain and discomfort after the procedure. In 1990 at age 36 she had a severe mental and physical breakdown when she could no longer get out of bed to go to work in a legal office in debt collection. Prior to the collapse her mind was slow and she was making mistakes in accounting doing the books. Stress due to financial problems with fear of becoming homeless and destitute, trying to file bankruptcy, worries about her mother's health and overwork were the causes. She could not get dressed, couldn't sleep, heard angry voices, and had severe memory loss after the collapse that led to a diagnosis of bi-polar disorder and schizophrenia. She refused allopathic meds and counseling. Since she was not violent or suicidal she said they could not lock her up. She had a long recovery at home with her mother caring for her. She'd get angry and act out to neighbors that she thought were hypocrites. She'd slam doors, bang on walls, break dishes and say cruel things to people. She has little recollection of events prior this time and can not concentrate or focus well. She was diagnosed with False Memory Syndrome because she began to experience thoughts of being abused as a child which she and her mother both claim never happened. She blames it on living near a shelter for abused women and children during her recovery period and thinks she was absorbing the negative vibes from it. She says she is clairvoyant and can 'alter the weather, has presentiment of future and the behavior of others, and can bring joy or suffering to others'. She has social security disability income and is happy to have the disability income but questions the mental illness diagnosis.

When her mother's health deteriorated in 2008, her mom was sent by court order to a nursing home. She did not support this but was afraid to contest it, fearing she would be locked up and put away like her mom. She blamed the court and social service system for her mother's death several months later and had thoughts of anger, injustice, and revenge. She believes God is her protector, friend and comforter' and he will take revenge on the parties involved in her mother's demise. She is paranoid in her outlook with anxiety about going out in public and having social interactions because she is afraid of being institutionalized. She spends most of her time watching television, caring for her kitten, eating and sleeping. She rarely goes out except to buy groceries if her brother won't shop for her. The walk to the grocery store fatigues her very much.

#### MEDICAL HISTORY

Self: She has been diagnosed with schizophrenia after a collapse at age 36 in 1990. She currently has numbness, arthritis in knees and hips, back pain in shoulder blades, indigestion, flatulence, allergies, double vision, tooth decay, tremors in neck (internal), vertigo, fainting, diarrhea, insomnia, and nausea. In the past she had fainting spells, earaches, torticollis, nightmares, anxiety, weakness, skin ailments, and numbness in extremities. Last complete check-up was 1992 for social security reasons. In 1991, EEG, MRI, EKG, blood test for copper were all normal.

Family: Mother died at age 79 with history of high blood pressure, heart trouble, diabetes, kidney disease, alcoholism, jaundice, hepatitis, ETOC, suicidal attempt, and mental illness. Mom had left leg amputated from complications with diabetes. Father had heart trouble, alcoholism and died at age 59 from a heart attack. Her two older brothers have high blood pressure, heart trouble, mental illness with a history of suicide attempts, drug abuse, and alcoholism.

## RUBRICS CHOSEN

She is very loquacious and cheerful in demeanor while talking about herself. Her memory loss and inability to focus her mind has been an issue since her collapse with 'lapses and holes' about events that occurred before this, though she can recall some of her childhood. She has an attitude of superiority and disdain for the world and easily expresses her opinions and political views while criticizing others. She is quite paranoid and expresses her anger and distrust towards authority figures regarding her mother and her own health issues with a sense of injustice about their life, that they were misunderstood and ill-used by others. Her anger is expressed in her dreams by quarrels with others. I decided to focus mainly on her mental state and chose five mind rubrics in this repertorisation.

Mind; loquacity (256)

Mind; alcoholism, dipsomania (171)

Mind; memory; weakness, loss of (491)

Mind; suspiciousness, mistrustfulness (169)

Mind; dreams; quarrels, strife (131)

Generalities; collapse (153)

Generalities; eating; amel. (305)

Generalities; faintness, fainting (520)

Generalities; food and drinks; cold; drinks, water; desires (282)

## FACIAL ANALYSIS

YELLOW (psora) 6	RED (sycosis) 3	BLUE (syphilis) 7
<ul style="list-style-type: none"><li>• Thin lips</li><li>• Lines forehead</li><li>• 3 lines</li><li>• Chin recessed</li><li>• Smile compact</li><li>• Nose bump</li></ul>	<ul style="list-style-type: none"><li>• Brow</li><li>• Bridge</li><li>• Arc</li></ul>	<ul style="list-style-type: none"><li>• Forehead curved</li><li>• Chin defined</li><li>• Lines nose to mouth</li><li>• Teeth decay</li><li>• High hairline</li><li>• Asymmetry</li><li>• Front teeth crossed</li></ul>

Her facial analysis shows she needs a tubercular remedy because she has equal amounts (within 1 point difference) of both psoric (yellow) and syphilitic (blue) features.

Remedies from repertorisation (Complete Dynamics Software): **phos**, verat, **calc**, nux-v, ars, lyc, arn, bell, apis, op, zinc, merc, phos-ac, kola

## REMEDY AND DOSE

Two tubercular remedies appear in this repertorisation: phos, calc. Phosphorous is selected.

RX: **Phosphorous 6c**, daily dose of 1 drop.

A low potency is selected to start this case because I am not sure if I have the face color and remedy correct. She seems to be overly sensitive and I want to minimize any potential negative reaction.

## **FOLLOW UPS**

She is open to trying homeopathy though she has knows nothing about it and cheerfully provides me with a detailed, explicit log of her daily symptoms at every follow up. She is very much aware of her ailments and offers her opinions freely regarding her prognosis and recovery. She is enjoying this 'journey', relishes the daily changes in her health regarding this as an interesting experiment though she does not believe a homeopathic remedy can help with her memory loss.

### **March 2009**

Her neck and shoulders are better- less stiff, hips the same- still ache. Thinks she had an inner ear infection for 2 days but it passed. She has cut down to 5 cigars a day, lost 3 pounds and bought a case of diet Pepsi soda. She wants to prove that she craves the taste of beer- and not the alcohol, so she decides to purchase non-alcoholic beer.

Rx: Continue on **Phos 6c**, 1 drop each day.

### **April - May 2009**

She says she feels fantastic and her short and long term memory is returning, as is her sense of smell, but says food has no taste and she has no appetite or desire for carbohydrates which is unusual. The paranoia is better. Numbness in joints is gone, more mobility in hips, with better endurance and less fatigue and has been out walking. She can concentrate and focus better. and has balanced her checkbook for the first time since 1988. She thinks she has more oxygen going to her brain and sometimes feels like she's in a 'trance-like state'. She has had some vertigo and mild flu-like symptoms. She says are old symptoms are coming and going quickly. Sleep is better-less insomnia. Back pain is better. He allergies were worse in early April but are better now.

Rx: Continue on **Phos 6c**, 1 drop each day.

### **June- July 2009**

She can walk 6 blocks home from grocery store carrying 20 pounds. Feels more positive and says little things don't bother her as much. Still has some back pain and her sense of smell and taste is more acute. She falls asleep easier now and is not sleepy in the daytime anymore. Still has some vertigo but says it is minor- when she goes from a dark to a light environment- and only lasts a few seconds. Her eyes are less sensitive to light. She is still thirsty which is normal for her, but craving soda and beer less. She still craves cigars. Appetite is changeable which is normal for her with occasional nausea and acid stomach from greasy foods.

Rx: **Phos 30c**, 1 drop each day. I think it is time to try a higher potency to see if her stomach and back will improve more and she has not had any new symptoms or worsening of her ailments.

### **August - September 2009**

She has suffered 2 big shocks. Her aunt died suddenly of a stroke and her cat died of leukemia. It is also the 1 year mark since her mother died and she is depressed. She is devastated and doesn't want to talk. She doesn't want anymore pets for awhile and just wants to rest. She can not provide me with any feedback on Phos 30c.

I am thinking she may need a new remedy to help with the depression and grief and am questioning whether Phosphorous is still working. I decide to try another green remedy because she has done well on Phosphorous up to this point.

Rx: **Calc carb 30c**, 1 drop each day. October 5, 2009

#### **November 2009**

She took Calc 30c for three weeks and feels awful. She says all the pain has returned. Her memory is worse, back pain is worse and says Calc is 'poison to her body'. She wants to go back on Phosphorous and says she knows it was working.

Rx: **Phos 30c**, 1 drop each day. In hind sight, I think perhaps a higher potency of Phosphorous (200c) would have been a better choice than switching to Calc carb.

#### **Decemember 2009**

She starts Phosphorous 30c on November 10 and says all the pain was gone within one hour. She is very relieved and is convinced this is the right remedy for her. Her mood is good, and everything is improving again- back, arthritis, vertigo, and stomach. She is walking to stores to shop and do errands. She stops to have a beer at a nearby bar again. The grief and depression have lifted and she is improving again.

Rx: Continue on **Phosphorous 30c**, 1 drop daily.

#### **January - December 2010**

I do not hear from her until December of 2010, one year later. She says she is doing fine and feels like her old self. She has improved physically, mentally and emotionally with no paranoia, back or joint pain. She has a new kitten and is happy. She no longer takes any supplements or aspirin for her arthritis. She still continues to smoke cigars and drink beer but thinks she will probably quit completely someday. She can't believe how much better she is and never thought she would regain her memory. She expresses her gratitude, tells me she loves homeopathy and Phosphorous and that she will keep me posted on any changes. She is still taking Phosphorous 30c on a daily basis. I suggest stopping the remedy at some point for a week or so, to see if she still needs it, but I leave it up to her to decide when she thinks she is ready.

#### **COMMENTS**

This is one of my first cases where I attempted to apply the HFA system of analysis on my own, before taking the HFA online course and seminar in Philadelphia in 2010 with Grant Bentley. This case was presented as part of my clinical studies in 2009 when I had little experience in case analysis and management. Using the face to determine the dominant miasm was key to finding the remedy and gave me the courage to stick with remedies from the green color group. In spite of my lack experience, the outcome was a success!

**Ellen V. Kire** has completed the 2010 HFA course and seminar and is currently in the 2011 HFA course. She is pursuing post graduate studies with the Victorian College of Classical Homeopathy and the Caduceus Institute of Classical Homeopathy. She graduated from the Caduceus Institute of Classical Homeopathy in April 2011 and is working towards certification as a classical homeopath in the USA as an HFA practitioner.