

Retired Male – 68 years

### **1<sup>st</sup> Consultation (29/01/11)**

Patient presents with a two year history of sudden abdominal pain and vomiting. The episodes occur only at night and commence with a sense of fullness and loss of appetite followed by acute pain of a cramping and spasmodic nature and projectile vomiting of food and bile. These attacks have occurred every 2 weeks for the past two years. He has been prescribed prednisolone which manages the pain but does not control the vomiting. He is also currently being monitored six monthly with blood tests for non-Hodgkin's lymphoma which was diagnosed two years ago following a routine blood test.

Desires sweets, cheese, dairy and is averse to meat and green leafy vegetables. Prefers salads to hot vegetables. History of glandular fever 13 years ago which took 2 years to recover from. Liver function is impaired so does not tolerate fatty foods. Was a smoker for 20 years and has a history of 2 bouts of pneumonia and contracting malaria whilst travelling.

Enjoys travel and has travelled frequently throughout his life. In the ten years prior to retirement worked in a situation under an alcoholic boss. Spent most of his time covering for this person and was never sure on a day to day basis as to whether or not this person was sober or not. He enjoys flower gardening, fishing, camping and hiking.

### **Repertorisation (MacRep for Windows)**

#### **Rubrics**

GENERALITIES: cancerous affections (223)

GENERALITIES: night, nine pm – five am agg. (262)

GENERALITIES: Food and Drinks, cold, food, desires (57)

GENERALITIES: Periodicity. (147)

STOMACH, pain, cramping, griping, constricting. (239)

STOMACH, vomiting, general, sudden (63)

MIND: ALCOHOLISM, dipsomania (137)

Yellow (Psora)

Red (Sycosis)

Blue (Syphilis)

MacRepertory for Windows - [Graph: Clipboard A]

File Edit Graph Analyze Limit Search Rubrics Windows Help



	Ars.	Sil.	Phos.	Bry.	Rhus-t.	Ant-t.	Bell.	Zinc.	Sec.	Lyc.	Sulph.	Con.	Lach.	Nat-m.	NUX-v.	Puls.	Sep.	Verat.	Arg-n.	Cuor.
Total	17	17	16	11	11	10	10	10	9	14	13	12	12	12	12	12	12	12	10	10
Rubrics	7	7	7	7	7	7	7	7	7	6	6	6	6	6	6	6	6	6	6	6
Family																				
CANCEROUS affections (223)	3	3	3	2	1	1	1	1	2	3	2	3	2	1	1	1	1		1	1
NIGHT, nine pm. - five am.; agg. (262)	3	3	3	2	3	2	2	3	2	2	3	3	3	2	2	3	3	1	3	2
GENERALITIES; PERIODICITY (147)	3	3	2	1	2	1	1	1	1	2	2	1	2	3	2	2	3	2	2	1
FOOD and drinks; cold; food; desires (51)	2	2	3	2	1	2	1	1	1	2			1	1	2	3		2	1	1
PAIN; cramping, griping, constricting (239)	3	3	2	2	1	1	2	1	1	3	2	3	2	3	3	2	2	3	2	3
STOMACH; VOMITING; General; sudden (63)	2	1	1	1	1	1	1	1	1		2	1					1	1		2
MIND; ALCOHOLISM, dipsomania (137)	1	2	2	1	2	2	2	2	1	2	2	1	2	2	2	1	2	3	1	

Lines between eyes Forehead lines Lines under eyes Hairline Smile Ears slope Forehead shape Down turned eyes (?)	Ears Nose Chin	Eyes – lids Asymmetry – 2 points Hairline height Teeth shape Ears size Bridge shape Forehead shape (?)
7-8	3	7-8

This patient belongs to the green group (tubercular)

From the repertorisation just one remedy that covers all selected rubrics belongs to the green or tubercular group. Phosphorus.

Prescription: Phosphorus 30C 1 dose daily.

Further questioning revealed that if the episodes of vomiting were to continue on pattern then the next episode was due in 2 days. Informed the person that I felt that there was too little time for the remedy to impact this and therefore there was unlikely to be any change this time round. However, if the remedy was right then we should see changes from that time forward.

**2<sup>nd</sup> Consultation (12/2/11 two weeks later):**

Client experienced another episode of vomiting 2 days after the initial appointment. Was again due for the next episode. Client had noticed a remarkable increase in energy levels 2-3 days after commencing remedy. He commented that he was able to work longer and harder and to stay awake longer at night. Was told to enjoy the extra energy but not to use it all in over working – some of it was needed for healing.

Prescription: Continue Phosphorus 30C daily

**3<sup>rd</sup> Consultation (12/3/11 – one month later):**

Client had experienced another bout of vomiting but this one was not in the usual pattern. It occurred after 2 nights of poor sleep. It was different and occurred during the day rather than at night. It was shorter and recovery much quicker and this time he was actually better after eating. Liver function test results were in good parameters. Energy levels remained good.

Prescription: Continue Phosphorus 30C daily

**4<sup>th</sup> Consultation (9/4/11 – one month later):**

No recurrent vomiting events. Energy levels good. Sleeping well.

Prescription: Continue Phosphorus 30C daily

**5<sup>th</sup> Consultation (21/5/11 – six weeks later):**

Has continued in good health. Energy levels are good and he is being realistic and not working to exhaustion. Has cut down on his intake of sweet foods and planning another overseas trip.

Prescription: Continue Phosphorus 30C daily

Next follow up to be following the 6 monthly blood test for lymphoma.

**Phone Call (12/08/11 – three weeks later):**

Client cancelled follow up appointment because he is in very good health. Recent blood tests for lymphoma were normal. No more bouts of abdominal pain and vomiting. Will be travelling overseas in the next 2 weeks. Advised him to stay on the remedy for a while longer.

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Robyn graduated from the Victorian College of Classical Homoeopathy in 1994.

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