

# RENAL CALCULI

# CASE HISTORY

# CASE-I

Name - Ms.S.B

Age - 19

Sex - Female

Ref no - E 50

Address- Chennai-35.

## PRESENTING COMPLAINT:

Pain in both loin since 4 months.

## HISTORY OF PRESENTING COMPLAINT:

- ❖ Pain in both loin extending to both sides of lower abdomen since 4 months. Pain more in right loin. Vomiting during pain. Urging of urine with burning micturition. Scanty urine every time.
- ❖ Irregular menses since 1 ½ month. Flow last for 2 days. Leucorrhoea before menses.
- ❖ White patches in face.
- ❖ Constipation. Stool-hard; passes 2 days once.
- ❖ Sneezing since 4 months, < while morning waking.
- ❖ Nose block since 4 months, < Night.

## **PAST HISTORY:**

- Renal calculi
- Left ovarian cyst
- Had wheezing 2 years back.

## **FAMILY HISTORY:**

Mother- Renal calculi

# HOMOEOPATHIC HISTORY

## MENTAL GENERALS:

- Anger & irritable during loin pain.
- Anxious about loin pain.
- Irritable during menses.

## PHYSICAL GENERALS:

- ✓ Appetite – Good
- ✓ Thirst – Decreased
- ✓ Sweat – Increased in sole
- ✓ Aversion – Water
- ✓ Likes – spicy food, non-veg

## INVESTIGATION:

USG: 16/09/09:

Right renal calculus- 5 mm in LP

6 mm in UP

Left renal calculus - 5 mm in MP

4 mm in LP

Evidence of 6mm calculus in UVJ.

Left ovarian cyst- 2.5 x 2.2 cm.

# I PRESCRIPTION: 3/10/09

Rx

- Nux vom 200 6d TDS
- Sulphur 200 1d  
Morning BF
- Occimum can Q  
10-0-10 AF

FOLLOW UP: 2/11/09

- ☐ Pain decreased.
- ☐ Urine normal.
- ☐ Sneezing decreased.
- ☐ Itching in urethra.

Rx

Repeat as above.



28/12/09:

- ❑ Pain increased in right loin worse before menses.
- ❑ Urine- Normal

Rx

- Lyco 200 3d TDS
- Nux vom 200 3d [aft 3days]

TDS

- Occimum can Q  
10-0-10 AF

[Discontinued for 3 months because of no complaints]

23/04/10:

No complaints.

Rx

Repeat as above.

11/06/10:

No complaints.

Rx

1. Lyco 200 3d TDS

2. Placebo

30/7/10:

No complaints.

Rx

Repeat as above.

RE-SCAN:

USG- 20/09/10

No Renal calculi in right & left kidney.

Ovarian cyst – Normal.

**Impression**-Normal study.

Treatment based

- ❖ Pathological
- ❖ Miasmatic &
- ❖ Organotherapy

\*\*\*\*\***CURED**\*\*\*\*\*

# BEFORE TREATMENT



**SelviScans**  
WHOLE BODY COLOUR DOPPLER & ECHO & USG CENTRE  
SPECIALITY LAB & X-RAY CENTRE

② ① BEFORE

Patient Id	007810	Study Date	16/Sep/2009
Name	<b>MS. BHUVANESWARI</b>	Description	Whole Abdomen
Age/ Sex	17 years/ F	Ref. Doctor	G.R.RAVICHANDRAN

## Real time B-mode ultrasonography of Abdomen done

### Abdomen

Liver normal in size and normal echotexture . No abscess or mass lesion in the liver.  
Gallbladder wall appeared normal. No calculi seen in the gallbladder.  
Common duct appeared normal. No calculi seen in the common duct.  
Pancreas appeared normal  
Spleen appeared normal.

### KUB

**Right Kidney measured 9.6 x 4.0 cms. Evidence of 6 mm calculus noted in lower pole. Evidence of 6 mm calculus noted in upper pole.**

**Left Kidney measured 9.4 x 3.8 cms. Evidence of 5 mm calculus noted in mid pole. Evidence of 4 mm calculus noted in lower pole. Hydro uretero nephrosis. Evidence of 6 mm calculus noted in left vuj.**

Bladder appeared normal.

RIF: Normal.

LIF : Normal.

### Pelvis

Trans abdominal sonography of the pelvis done.

Uterus measured 7.0 x 2.5 cms.

Endometrium measures 8 mm in size.

Myometrium is homogenous.

Right Ovary measured 3.0 x 1.6 cms.

**Left Ovary measured 3.2 x 2.8 cms. Evidence of 2.5 x 2.2 cms cyst noted in left ovary.**

Cervix: Normal.

### IMPRESSION:-

- BILATERAL RENAL CALCULUS.
- LEFT HYDRO URETERO NEPHROSIS.
- LEFT VUJ CALCULUS.
- LEFT OVARIAN CYST.

**Dr. Azaku Tamil Selvi**  
Consultant Radiologist

THIS IS A PROFESSIONAL OPINION, NOT THE FINAL DIAGNOSIS AND SHOULD BE INTERPRETED IN THE LIGHT OF CLINICAL BACKGROUND. THIS REPORT IS NOT FOR MEDICOLEGAL PURPOSES, THIS STUDY MAY BE SUBOPTIMAL IN OBESE INDIVIDUALS. SUGGEST SECOND OPINION IF CLINICALLY INDICATED.



