

MULLERIAN

The Quarterly Bulletin of Fr. Muller's Homoeopathic Medical College & Hospital

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Editorial



Greetings and good wishes for the new year 2001.

The first year and first day of new millennium has already began with the dawn of 1st January. We also remember 1st January as the Birthday of our great master Constatine Hering whose contributions to this system of medicine are incredible. He is an example of hard work and a continuous as well as enthusiastic learner. His life should teach us about the learning and learning process to strengthen our system of medicine.

We have been talking of strengthening and standardizing Homoeopathic practice and education which needs our attention towards two foremost things i.e. standard definition of various terms and continuing medical education.

We use various terminologies which are not well understood and do not have standard definitions. Obviously it can create confusion among the students and practitioners. Therefore, there is an urgent need that we, Homoeopaths must finalize common meanings to the common terms for example various constitutions, temperaments, diathesis, etc.

The second step towards strengthening this system would be the emphasis on continuing medical education. Traditionally CME has been available through assiduous reading of professional journals and through periodic attendance at medical meets and recently through participation in P.G. courses. These means have not been very effective so far as it does not provide an opportunity for the physician to identify for himself any gaps in his knowledge so that he could then take steps to educate himself in those areas in which he has found himself deficient. Therefore, a different and far more realistic approach should be initiated in order to obtain the desired result from CME.

A continuous self assessment and learning should take place through the feed back from the out come of each case. Perhaps, the programme developed by college of physician of philadelphia would be suitable for each physician who aims at self development. The design of programme includes four major steps. 1) an easily completed practice profile to identify the major components of the physician's daily practice, 2) self-assessment in one or more major areas of the individual's practice, thus identifying in a very personal and detailed way specific learning needs, 3) self - selection of learning materials from the library resources of the College and other sources and 4) a postlearning self-assessment for evaluation of gain and determination of need for further continuing education.

The close relationship between the educational features and the practice of the individual physician gave the programme its name and its acronym - Practice - Related Educational Programme (PREP).

A continuous learning with right educational spirit is a must for the development of this 210 years old rational system of healing art.

Dr. Shashi Kant Tiwari
Editor

MESSAGES

On the occasion of the release of the fourth issue of the "Mullerian" to our esteemed readers, may they be our former students or admirers, well-wishers and benefactors of Father Muller's, I offer to all of you my best wishes on the occasion of the beautiful Feast of Christmas and for a successful and joyous New Year 2001.

May this link "Mullerian" bind us together to "Heal and Comfort" the suffering humanity through the Homoeopathic System of medical care and education.

Rev. Dr. Baptist Menezes
Director

Dear Friends,

Let me wish you a very Happy New Year and pray God's choicest Blessings on you and on all that you do.

When Mullerian reaches your hand, I think, you are reminded of Fr. Muller's Homoeopathic Medical College and Fr. Muller's Homoeopathic Pharmaceutical Division*(H.P.D.). I am happy to communicate to you that we have come out with new labels and packing system to our Patent Products with lot of emphasis on Quality Assurance. The Extra Neutral Alcohol which is used for Homoeopathic dilutions and tinctures frees them from all impurities. We are laying lot of emphasis on Quality products so that the Homoeopathic practitioners are supported in their practice. A good Homoeopathic Physician would always look for good Homoeopathic Medicines. We at Fr. Muller's College train good doctors and produce good Homoeopathic Medicines.

With regards,

Rev. Fr. Stany Tauro
Administrator, FMHMCH

CASE REPORT

ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD) is a cluster of symptoms characterised by a short attention span resulting in poor concentration, impulsivity and hyperactivity in children.

In order to make the diagnosis, the behavioural disturbance must be present for at least six months and must have first appeared before the age of seven years.

Diagnostic criteria for Attention Deficit Hyperactivity Disorder

- 1) Often fidgets with hands or feet or squirms in seat (in adolescents, may be limited to subjective feelings of restlessness)
- 2) Has difficulty remaining seated when required to do so;
- 3) Is easily distracted by extraneous stimuli;
- 4) Has difficulty awaiting turn in games or group situations;
- 5) Often blurts out answers to questions before they have been completed;
- 6) Has difficulty sustaining attention in task or play activities;
- 7) Often shifts from one uncompleted activity to another;
- 8) Has difficulty following through instructions from others;
- 9) Has difficulty playing quietly;
- 10) Often talks excessively;
- 11) Often interrupts or intrudes on others;
- 12) Often does not seem to listen to what is being said to him or her;
- 13) Often loses things necessary for task; and
- 14) Often engages in physically dangerous activities without considering possible consequences - runs into street without looking.

At least eight of these criteria should be present for at least 6 months. Various terms have been used to describe children affected by this disorder; disruptive behaviour disorder, hyperkinetic reaction of childhood; hyperkinetic syndrome; hyperactive child syndrome; minimal brain dysfunction; minimal cerebral dysfunction; minimal brain damage; minor cerebral dysfunction and more recently by DSM-III attention deficit disorder with or without hyperactivity.

Clinical Features

ADHD children might manifest it in the crib itself; they sleep little and cry excessively. Such infants are unduly sensitive to stimuli and are easily upset by noise, light, temperature or other environmental changes. At times, though uncommon, the reverse might occur and the children are placid and limp, sleep much of the time and appear to develop slowly in the first months.

These children are often explosively irritable. This irritability may be set off by relatively minor stimuli. They are emotionally unstable, easily set off to laughter to tears and moods, and performances are unpredictable. They are impulsive and are prone to accidents.

Approximately 75% of children diagnosed, as having this condition fairly consistently, show behavioural symptoms of aggression and defiance. School difficulties, both learning and behavioural, are common.

Diagnosis

The principal sign of hyperactivity should alert clinicians to the possibility of ADHD. A detailed prenatal history of child's early developmental patterns and direct observation will usually reveal excessive motor activity. It should be an isolated, brief and transient behavioural manifestation under stress but should have been present over a long time. Other distinguishing features of this condition are short attention span and easy distractibility. In school, these children cannot follow instructions and often demand extra attention from their teachers. At home, they often do not follow through on their parents requests. They are prone to act impulsively, show emotional instability and are explosive and irritable.

Objectives of diagnosis and treatment :

- 1) Early detection of these problem children not only helps us to arrest the further damage of the child, but also helps in the treatment. It is found that the children at lesser age respond well to the treatment. Constitutional treatment with co-operation of parents helps to nib in the bud.

- 2) In our case studies, it was confirmed that majority of the parents of these children do not understand that child is going through a crisis, and they unknowingly precipitate and aggravate the problems of the child. It is only when the reports come from the school and when they themselves notice that child is increasingly becoming unmanageable, an opinion from expert is sought for. By this time a sizable damage is already done which requires a considerable effort of a psychotherapist or a treating physician. In majority of cases the children do not listen to the instruction given by parents unless harsh word/scolding/punishment is used. Even in many cases parents have told that unless they beat the child, he would not listen to any instruction. Thus education to the parents becomes an integral part of the treatment. Parents should be as soft and tender as possible. Knowing the nature of the problem a child should be kept away from any kind of punishment or physical/mental torture. Parents should be explained the seriousness of the condition and its course and prognosis. They should be made aware of their role in the treatment.
- 3) A timely intervention in such cases would save a lot of damage to the child. As the time passes the case becomes more and more complicated if the appropriate care and treatment is not given. We should not wait for the child to become unmanageable. We have found that almost all the time of the parents goes to attend the child in advance cases. It is also found that parents keep themselves busy in running after the child to save him from accidents. Therefore a timely intervention not only helps in treatment but also saves the child from unmanageable complications.
- 4) From the study conducted by psychologist in other countries it was concluded that the ADHD children become a problem-adult in their life, though the course and result is highly variable. It would be a moral duty of a physician and a social obligation too, that he should identify such cases and treat them at the earliest.

CASE STUDY

Name : JSN

AGE : 5 yrs

Sex : M

Presenting Complaints :

Spitting over others, throwing things, stones, beats, urinating on others, does not follow the instruction of parents, teachers, disobedient. Restless, hyperactive. Grabs thing. < contradiction, advice. Uses abusive language, not friendly, no care about personal hygiene-bath, toilet, brush, etc. Goes round here and there, never sits. In the clinic-takes telephone, pulls the tie of the doctor, snatches stethoscopes etc. Goes to other units-suddenly runs out of OPD and goes down through staircase. Noticed since the age of 3½ yrs.

Life Situation :

The only child of parents. Father is working in telephone dept. He is the only son who was born after long waiting. There were recurrent fights in the family which the child has witnessed with fear and started showing the obstinacy from early age. Father was treated for insomnia, less memory and for anxiety since the of 14 years. Father had enuresis till 15 years back. Gets up in dreams. Enuresis. Vomited at examination table.

Totality :

Irritable-throws things. Disobedient, obstinate. Troubles others with his behaviour-spits etc. Greenish Motion-dentition during, sleep restless-dreams+ +.

Prescription:

Chamomilla, Mag-carb. (Constitutional)

Follow-up:

The medicine started with Cham but showed very little improvement in the behaviour. It's complementary as well the medicine which covers the totality was selected as a second prescription, ie, Mag carb. Mag carb started with IM potency was changed to Mag carb-10M on 31.10.96. Again it was changed to Mag carb 50m. and then to cm. Single dose/CM was last given on 17.07.97. For acute cold, motion problem Ars alb, Cham and Ipeca was given at different times.

Result :

The behaviour is improved. Now does not spit on any one. Does not pull tie and does not pick up telephone but goes round. Restlessness is decreased. The school report is better. On the CARS he gets rating of 13. This is 12% lower than the previous rating of 25. He has improved on all points - A report by Psychotherapist.

Conclusion :

We have treated successfully 76 cases of ADHD and it was found that constitutional treatment along with parents co-operation help in most of the cases.

NEWS



HOMOEOPATHIC CONFERENCE

Faculty members of Fr. Muller's Homoeopathic Medical College organised an International Homoeopathic Conference which was held on 11th and 12th of November 2000. The delegates from all over India mainly from Orissa, Maharashtra, U.P., Tamil Nadu, Andhra Pradesh, Kerala as well as Karnataka participated actively in the conference. It was attended by delegates from Malasia and Canada in a sizeable number.

The conference was inaugurated by Sri. Maalakaraddy, Hon'ble Health Minister, Govt. of Karnataka. Sri. Guruswamy, Director, ISM & H and Sri. Kapil Mohan, I.A.S. Deputy Commissioner, Dakshina Kannada were the guests of honour. It was presided over by Rev. Dr. Baptist Menezes, Director, FMCI. Dr. S.K. Tiwari, Chairman welcomed the gathering, Rev. Fr. Stany Tauro gave his message and Dr. (Sr.) Vida, Organising Secretary proposed a vote of thanks during inaugural function.

The two days conference witnessed several deliberations on the themes-Infertility, Degenerative Joint Disorders and Kali Group of Medicines. Apart from other speakers and moderators the Principal and Head of the Institutions; Dr. Ismail Seth, Dr. K.B.Ramesh, Govt. Homoeopathic College, Calicut, Dr. B.N. Prakash, Principal, Govt. Homoeopathic College, Bangalore, Dr. R.Y. Nadaf, Principal, A.M. Sheik Homoeopathic Medical College, Belgaum, Dr. Raveendra Nadhan, Principal, Bharatesh Homoeopathic Medical College, Dr. L. Neilsen, Dr. Neilsen's Homoeopathic Medical Education and Research Institute, Winnipeg, Canada Participated in the Conference. Dr. Girish Navada presented the report of the Conference during valedictory function.

EXTENDED TRAINING PROGRAMME for Canadian students from Nielsen's Homoeopathic Medical Education and Research Inc. Winnipeg, Canada commenced on 16.09.2000 for a period of 2 months. It came to an end on 17.11.2000. There was an evaluation session followed by valedictory function on the last day of the training programme. Rev. Dr. Lawrence D'Souza, Director Incharge gave away the certificates to the students of Extended Training Programme. The students and Dr. Leelamma Nielsen, Director of the Institution, Winnipeg have expressed their satisfaction over the two months regerous training programme. Dr. S.K. Tiwari welcomed the gathering & Rev. Fr. Stany Tauro delivered the message on this occasion.

VISITING PROFESSORS :

Dr. D.P. Rastogi, Dr. S.M. Singh, Dr. K.M. Dhawale and Dr. Abdul Rahman conducted workshops & delivered the lectures for P.G. Students on various topics. The lectures and the workshops were very useful and quite effective.

UNIVERSITY RESULTS :

A) Rajiv Gandhi University of Health Sciences has declared result of *M.D. (Hom) Part I* examination held in October 2000. All 10 students have been declared pass in the major subjects. Three students failed in the subject of Practice of Medicine. Two of the P.G. Students secured I class.

B) The result of *BHMS* examination held in October 2000 has been declared. It is quite satisfactory as mentioned below-

	Pass	Ist Class
I BHMS	100%	-
II BHMS	100%	58.33%
III BHMS	100%	45%

Congratulations to all of them.

STUDY TOUR :

Study tour of II BHMS was conducted by Dept. of Social & Preventive Medicine from 24.10.2000 to 03.11.2000. The students & faculty members went to Hyderabad and visited Textile mill, National Institute of Nutrition, Leather factory and Govt. Homoeopathic Medical College.

PATIENT CARE :

a) Homoeopathic OPD - It has the following 8 Units

Medical	-	Medicine
		Materia Medica
		Organon
		Repertory
Surgical	-	Paediatrics - A & B
		General Surgery - A & B
		E.N.T & Ophthalmology - A & B
		Obstetrics & Gynaecology - A & B

A total of 7,476 new cases & 46,136 follow-ups reported for the treatment in the year 2000.

b) Village Clinics :

There are 10 Village clinics which render free Homoeopathic care & treatment to the needy ones. A total of 14,807 patients were treated in the Village clinics.

c) In-Patient Department :

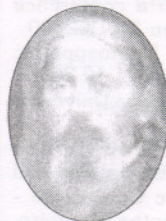
The college has 75 bedded Hospital in the campus as well as 21 beds at St. Antony Ashram and 20 beds at Prashanth Nivas. A total of 599 patients were treated as in-patient in the year 2000.

MEDICAL CAMPS :

Dharmasthala - A Medical camp cum exhibition was organised by Homoeopathic Medical College from 22nd to 26th November 2000. A total of 412 patient were examined. They were given free consultation and medicine.

MAGAZINE RELEASE :

'Pioneer - 2000' the college annual Magazine was released on 02.11.00 on the auspicious occasion of 90th Death Anniversary of the founder Rev. Fr. Augustus Muller. The Chief Guest of the function was Mr. J.R. Lobo, Commissioner, Mangalore City Corporation.



Dr. Constantine Hering, M.D. (1800-1880)

Hering was born at Oschath in Saxony on January 1, 1800. At the age of 17, he became interested in medicine and joined the University of Leipzig.

Hering took up the challenge of writing a book against Homoeopathy in 1822. But going through Hahnemann's works for the sake of making quotations, Hering began to see the truth in Homoeopathy. Further study of homoeopathic '*Materia Medica*' and his experiments made him more convinced about Hahnemann's conclusions. The book against Homoeopathy thus never saw the light of day, but the whole process made him a true Homoeopath.

He proved 72 drugs. He wrote the 'Domestic Physician' and the 'Guiding Symptoms', a monumental work of 10 volumes. He enunciated the "Law of Directions of Cure" known popularly as Hering's Law.

POINTS TO PONDER

A physician should never prescribe for an acute and chronic trouble together. He should select the worse one and let the other one alone, entirely ignoring it for the time being.

J.T. Kent

Nat Mur may be needed to cure the most terrible headaches, but do not give it during a severe attack, at risk of a fearful aggravation. Give its 'acute'. *Bryonia*, for the immediate pain, and to palliate; and the curative drug later on, when the attack is over.

M. L. Tyler

HOMOEOPATHIC FUNDAMENTALS

The extensive experiments of Dr. August Bier of Berlin University proved the three cardinal requisites of a homoeopathic prescription.

1. The single remedy (given alone).
2. The similar remedy (Similia Similibus Curentur).
3. The minimum dose (the smallest amount necessary to produce curative action).

Dr. Bier explains the above by saying that

- a) all of the cells of the body are not sick;
- b) the finely subdivided remedy goes past the healthy cells because they have no attraction for it;
- c) the sick cells have less resistance and are more responsive to stimuli. The minimum dose affects these hypersensitive sick cells and stimulates them to reaction. The similar remedy induces normal reaction. If the remedy is dissimilar its action is not curative.
- d) Only single remedies produce guiding indications for the similar remedy.

CONGRATULATIONS

Dr. Suma V. was awarded first rank in the final BHMS examination conducted by Mangalore University in December 1999.

Five of the following students from our college have got merit seats in M.D. (Hom) entrance examination 2000 conducted by Govt. of Andhra Pradesh.

1. Dr. Bamapathy
2. Dr. Laxmi Prabha
3. Dr. Chandra Shekar
4. Dr. Velankanni
5. Dr. Suresh Babu

FACULTY MEMBERS IN LIGHT

- Dr. Shrinath Rao, Dr. Shiva Prasad & Dr. Roshan Pinto along with P.G., Interns and Senior students participated in a conference organised by Padiyar College Alumni Association on 26.12.2000.
- Dr. Roshan Pinto & Dr. Joseph Thomas attended Homoeopathic Seminar - 2000 organised by KHMGA at Kannur on 31.12.2000.
- Dr. Madona Joseph was appointed as the examiner by Goa University to conduct Under Graduate examination.
- Dr. Vilma D'Souza, Dr. Shivaprasad K. and Dr. Shrinath Rao presented papers on Infertility, Degenerative joint Disorder and Kali Group of Remedies respectively in Homoeopathic Conference - 2000 at Mangalore. Dr. D.M.I. Kerewgoda, Dr. Jacintha Monteiro, Dr. Deena Monteiro, Dr. Amitha Baliga, Dr. Melita Lobo, Dr. Dolphin J. Karat, Dr. Roopa Nayak, Dr. Anita Lobo, Dr. Jyoshna S. and Dr. Sheena presented short papers.
- Dr. Shrinath Rao presented a paper on 'Scope & approach of Homoeopathy in ENT disorders during the monthly meeting of KQHDA, at Bangalore in December 2000.
- Dr. P. Chakraborty was appointed as Squad / observer by Rajiv Gandhi University of Health Science at S.D.M. College of Naturopathy and Yogic Sciences, Ujire from 18th to 25th October 2000.
- Dr. S.K. Tiwari and Dr. Shivaprasad participated in the Silver Jubilee function of Karnataka Board of Homoeopathic System of Medicine held on 19.11.2000 at Bangalore.

ALUMNI NEWS

The Annual General body meeting of Alumni association was held on 11.11.2000 on the eve of Homoeopathic Conference. The following members were elected as office bearers for the year 2000 - 2001.

President	- Dr. Shivaprasad
Vice President	- Dr. Vilma D'Souza
Secretary	- Dr. Roshan Pinto
Joint Secretary	- Dr. Melita Lobo
Treasurer	- Dr. Girish Navada

Communication,
CME & Bulletin : - Dr. Guruprasad

Executive Committee Members-
Dr. Vinod
Dr. Vinayan Uttaman
Dr. Dinesh Samuel
Dr. Prince Vijayarajan
Dr. Sunder Alagappan
Dr. Velankanni
Dr. Guruprasad

HOMOEOPATHIC CONFERENCE 2001

The faculty of Fr. Muller's Homoeopathic Medical College has decided to organise the **Homoeopathic Conference - 2001** scheduled to be held on **25th and 26th November 2001**.

It may be noted that Homoeopathic Conference is an annual feature and a part of academic activities of this college. This activity has been taken up by the faculty members with an objective of highlighting the scientific aspects of Homoeopathy among the learners and practitioners of this system of rational healing art. To achieve this objective we need help, co-operation and guidance of all concerned.

Undoubtedly, it needs a good team work and tremendous effort on the part of each one involved in clinical practice as well as in academics to make such programme a success. Such successful team work, I am sure, would certainly make Homoeopathy as the first line of treatment of this Millennium.

We, at Fr. Muller's, are working in this direction and we would like to share our experience and to learn from others experiences too. Hence we arrange a common platform for all, to have a dialogue and fruitful discussion on various themes so that the **learning through experience** becomes a reality at the end of two days of scientific sessions.

The details about the conference are as follows.

Themes

- I CANCER
- II INFLAMMATORY
BOWEL DISORDERS

Please register your name as delegate

Registration Fee Till 30th October After 30th October

Delegates	Rs. 400/-	Rs. 500/-
Students/Interns	Rs. 300/-	Rs. 400/-
Accompanying Person	Rs. 350/-	Rs. 450/-

For further information contact :

Dr. M. K. Kamath

Organising Secretary,

Homoeopathic Conference - 2001

Fr. Muller's Homoeopathic Medical College, Kankanady,
Mangalore - 575 002
08252-24621 (R)

DR. SHASHI KANT TIWARI

Chairman

HOMOEOPATHIC CONFERENCE - 2001

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