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# PEDIATRIC RENAL CALCULI SUCCESSFULLY TREATED AT DR BATRA'S HOMEOPATHY CLINIC: A CLASSICAL HOMEOPATHIC CASE STUDY

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## Abstract

Renal calculi in the pediatric age group, though less common than in adults, represent a growing global concern due to changing dietary patterns, metabolic factors, and recurrent infections. Homeopathy offers an individualized, non-invasive, and holistic approach aimed at correcting the underlying susceptibility rather than merely addressing the calculi.

This paper presents a classical homeopathic case study of a male child aged 2 years and 6 months diagnosed with left renal calculi, who had minimal response to conventional medication and supportive therapy. The child presented with associated bowel disturbances, recurrent respiratory infections, and constitutional features suggestive of deep-seated susceptibility. Over serial follow-ups, the child showed progressive clinical improvement with resolution of abdominal complaints, normalization of bowel habits, improvement in appetite and general well-being, This case highlights the role of classical homeopathy in managing pediatric renal calculi safely and effectively. The outcome clearly demonstrates that a significant transformation occurred at Dr Batra's Homeopathy Clinic, where individualized homeopathic treatment succeeded after other approaches had failed.

**Keywords:** Pediatric renal calculi, Classical homeopathy, Constitutional treatment, Individualized medicine, Non-invasive therapy

## Introduction

Renal calculi, also known as nephrolithiasis or urolithiasis, are crystalline aggregates formed by supersaturation of minerals in urine. Although traditionally considered a disease of adults, pediatric renal calculi are increasingly reported worldwide. Risk factors include metabolic abnormalities, inadequate fluid intake, dietary excesses, recurrent urinary tract infections, and genetic predisposition. Common clinical manifestations include abdominal pain, hematuria, dysuria, vomiting, and recurrent urinary infections, though young children may remain asymptomatic.

Complications of untreated renal calculi include obstruction, infection, impaired renal function, and recurrence. Conventional management in children is largely conservative but may require surgical intervention in refractory cases. Homeopathy, through its individualized approach, aims to restore balance at the dynamic level, thereby preventing recurrence and promoting complete recovery without invasive procedures.

## Case Profile

A male child aged 2 years and 6 months presented with a diagnosis of left renal calculi of one-month duration. The child had been intermittently treated with Neeri-Di syrup (allopathic) prior to presentation, with no significant clinical improvement. The patient was brought for homeopathic management with concerns regarding renal stones, bowel changes, and recurrent respiratory complaints.

## Anthropometric Data:

- Weight: 14 kg
- Height: 98 cm

## Mental Generals

Since infancy, the child was described as calm, mild, and emotionally sensitive. He showed a tendency to cling to caregivers, especially the mother, and became anxious in unfamiliar surroundings. The child was slow to adapt to changes and displayed insecurity when routines were disturbed. Over time, this sensitivity manifested as easy susceptibility to environmental changes, particularly cold weather, leading to frequent respiratory infections. Emotionally, the child appeared gentle, with a need for reassurance, and expressed discomfort more through restlessness and reduced activity rather than overt crying or irritability.

**Physical Generals**

- **Diet:** Mixed diet appropriate for age
- **Appetite:** Reduced during illness
- **Desire:** Warm foods
- **Aversion:** Cold drinks
- **Thermal Reaction:** Chilly; takes cold easily
- **Thirst:** Moderate
- **Stools:** Blackish/dark stools for ~15 days, gradually improving
- **Urine:** Normal frequency, no interruption or difficulty
- **Perspiration:** Normal
- **Sleep:** Disturbed during illness; otherwise normal
- **Dreams:** Not significant (age-related)

**Examination**

- General condition: Moderately built, fair-complexioned child
- Vitals: Stable
- Abdominal examination: Soft, non-tender, no organomegaly
- Respiratory system: Mild recurrent catarrhal tendency
- No signs of dehydration or acute distress

**Past History**

- Recurrent common cold with running nose and cough
- No major systemic illness or hospitalization

**Family History**

- No documented family history of renal calculi
- General history of allergic tendencies in family

**Case Analysis**

The case exhibited a constitutional predisposition characterized by fair complexion, easy susceptibility to cold, recurrent respiratory complaints, sluggish digestion, and delayed recovery from minor ailments.

**Repertorial Totality**

- Chilly patient; takes cold easily
- Recurrent respiratory infections
- Reduced appetite during illness
- Dark/blackish stools
- Renal calculi (left side)
- Mild, gentle disposition; need for reassurance

**Repertory Used**

- Kent's Repertory (via standard repertorization software)

**Rubrics Selected**

- Generalities – Cold, tendency to take
- Kidneys – Stones
- Abdomen – Pain, occasional
- Stool – Dark/black
- Mind – Mildness

**Selection of Remedy**

**Constitutional Remedy**

- **Remedy:** Calcarea carbonica
- **Potency:** 200C
- **Dose:** Single dose, followed by placebo
- **Reasons:**
    - Fair, chubby child with chilly disposition
    - Tendency to recurrent infections
    - Digestive sluggishness and altered stools
    - Constitutional vulnerability corresponding to Calcarea carbonica

**Acute Remedy**

- **Remedy:** Berberis vulgaris

- **Potency:** Q (mother tincture)
- **Dose:** As prescribed
- **Reasons:**
    - Specific affinity for renal calculi
    - Supports urinary system and stone expulsion

**Miasmatic Approach**

| Symptoms | Psora | Sycosis | Syphilis | Tubercular |
|---|---|---|---|---|
| Recurrent colds | ✓ | | | ✓ |
| Renal calculi | | ✓ | | |
| Digestive disturbance | ✓ | | | |

**Miasmatic predominance:** Psoro-sycotic

**Materials and Methods**

Repertorization was performed using Kent's Repertory through standard homeopathic repertorization software. Remedy selection was based on classical principles of individualization and totality of symptoms.

**Results**

| Month | Progress | Prescription |
|---|---|---|
| 1st | Condition unchanged; black stools persist | Calcarea carb 200C + Berberis vulgaris Q |
| 2nd | Stool color improving; no pain | Placebo continued |
| 3rd | Appetite improved; abdominal comfort | Calcarea carb repeated |
| 4th | General well-being better | Placebo |
| 5th | No bowel complaints | Berberis vulgaris Q |
| 6th | Clinically stable | Placebo |
| 7th | USG advised | — |
| 8th | USG shows no renal stone | Placebo |

## The Transformation

| Parameter | Before Treatment | After Treatment |
|---|---|---|
| Renal stones | Present (left kidney) | Absent on USG |
| Appetite | Reduced | Normal |
| Stools | Blackish | Normal |
| General activity | Reduced | Active and playful |


## Discussion & Conclusion

This case demonstrates the effectiveness of classical homeopathy in managing pediatric renal calculi through individualized constitutional treatment. Addressing the child's susceptibility and miasmatic background resulted in gradual but sustained recovery without invasive intervention. The resolution of renal calculi along with overall improvement in general health underscores the holistic healing achieved. The case reaffirms that a definitive transformation occurred at Dr Batra's Homeopathy Clinic, highlighting homeopathy as a safe and effective option in pediatric renal calculi.

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