# Dynamic Revolutionary Egalitarian Assurgent Motivative Society (DREAMS)

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# "DREAMS - e - homoeo"

A weekly 'e' magazine by DREAMS

**DREAMS** is a consortium of dedicated workers aiming for the social upliftment, working at grass root levels in the important areas like **health**, **education**, **national integration**, **pollution free environment** etc.

DREAMS has worked to open free medical camps in various villages, providing free medical care. Also worked during natural calamities like earthquake and epidemics.

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Chief Editor
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# Clinical Tips of Dr. D.P. Rastogi

(Contributed by **Dr. Navneet Bidani**)

#### Quote

Honest disagreement is often a good sign of progress.

- Mohandas K. Gandhi

## **Regular Features**

Homoeopathic Topics
Therapeutics
Material Medica
Organon
Repertory
Stalwarts

General Medical Info Latest Info Investigation Tips Retro

Lighter Moments
Jokes
Quiz
Quotes

## **Health Tips**

Don't have any sort of addiction like alcohol/beer/cannabis/ opium/smoking/tobacco in any form/ drugs etc in your life

By **Dr. S.S. Vithal** www.drvithal.com

# B.H.M.S. (I & II YEAR)

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# **Investigation Tips**

#### **HLA B27**

**Human Leukocyte Antigen** is a class I surface antigen on chromosome 6 and presents antigenic peptides to T-cells.

The HLA-B27 test is primarily ordered to help strengthen or confirm a suspected diagnosis of ankylosing spondylitis, reactive arthritis, Juvenile Rheumatoid Arthritis or sometimes anterior uveitis.

#### You asked.....

Q: Nowadays we find number of Homoeopathic patents in the market. Some of them are really very good as they give fast relief. But are they Homoeopathic? Do they cure the sickness permanently if taken for a long period?

Dr. Shivani Arora, Gorakhpur

I agree that in the recent decade there has taken place a mushroom growth of Homoeopathic specifics prepared for practically every disease. I also agree that some of them give unbelievable results. But they are not Homoeopathic, because the drug or combination of drugs which they contain have neither been selected on the fundamental law of similars nor do they fulfill the principle of individuality in the area of potency, dosage, schedule etc. Hence they never cure, but only palliate or suppress if taken for long. They will also complicate the sickness rendering a simple case into an incurable one. Hence avoid using them.

#### Dr. Navneet Bidani

you can ask your doubts & queries by mailing us at dranupamsmalhotra@rediffmail.com or drbidani@gmail.com. We will try our best to answer your query as accurate as possible.

# Let's get quizzical

- \* Ceraunophobia is fear of ?????
- \* and the medicines are ?????

Answer to last quiz

**Belonephobia** ... Fear of pins and needles.

Medicines ..... sil, spig

Correct answers by

Dr. Nupur Das, Dr. Ruchi Singh, Dr. Mamta

# Dr. K.K. Aggarwal's tips

# Step-by-step bladder-training technique for URINE INCONTINENCE

- 1. Keep track: For a day or two, keep track of the times you urinate or leak urine during the day.
- 2. Calculate: On average, how many hours do you wait between urinations during the day?
- 3. Choose an interval: Based on your typical interval between urinations, select a starting interval for training that is 15 minutes longer. If your typical interval is one hour, make your starting interval one hour and 15 minutes.
- 4. Hold back: When you start training, empty your bladder first thing in the morning and not again until the interval you've set.
- 5. If the time arrives before you feel the urge, go anyway.
- 6. If the urge hits first, remind yourself that your bladder isn't really full, and use whatever techniques you can to delay going.
- 7. Try the pelvic floor exercises sometimes called Kegels, or simply try to wait another five minutes before walking slowly to the bathroom.
- 8. Increase your interval.
- 9. Once you are comfortable with your set interval, increase it by 15 minutes.
- 10. Over several weeks or months, you may find you are able to wait much longer and that you experience far fewer feelings of urgency or episodes of urge incontinence.

### Keeping a bladder diary

- 1. Complete the information for two consecutive 24-hour periods. Record both day and night.
- 2. Begin with first urination upon arising.
- 3. Record intake amount in ounces and type of fluid (for example, coffee, juice, water, etc.).
- 4. Record approximate urine output and time of urination.

Dr KK Aggarwal Padma Shri and Dr B C Roy National Awardee

## Your responses

Hello Dr Anupam Sethi, Thanks for this 'e magazine'. I like contents. In today's life no body is having time to go thru long articles. The idea Short informative articles nice. Keep it up. God bless u all & give courage to update the society in general & fellow homoeopaths particular.

Dr. S. S. Vithal MD www.drvithal.com

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# Points to ponder...

The mechanical use of the repertory never leads to artistic prescribing nor to remarkable results

- Dr. J.T. Kent

Contributed by **Dr. Saurabh Sharma** 

## **Sleep Apnoea**

**Sleep apnoea** is a sleep disorder characterized by abnormal pauses (apnoea) in breathing or instances of abnormally low breathing (hypopnoea), during sleep. An apnea can last from a few seconds to minutes, and may occur 5 to 30 times or more an hour

There are 3 forms of sleep apnoea

**Central sleep apnea** (CSA). This occurs when the brain does not send the signal to the muscles to take a breath, and there is no muscular effort to take a breath. The incidence is less than 1 %. This usually occurs in infants or in adults with heart disease, cerebrovascular disease, or congenital diseases, but it also can be caused by some medications and high altitudes.

**Obstructive sleep apnea** (OSA). This occurs when the brain sends the signal to the muscles and the muscles make an effort to take a breath, but they are unsuccessful because the airway becomes obstructed and prevents an adequate flow of air. Incidence is 84%. Individuals with low muscle tone and soft tissue around the airway (e.g., because of obesity) and structural features that give rise to a narrowed airway are at high risk for obstructive sleep apnea. The risk of OSA rises with increasing body weight, active smoking and age. In addition, patients with diabetes or "borderline" diabetes have up to three times the risk of having OSA.

**Mixed sleep apnea** (both central sleep apnea and obstructive sleep apnea). Mixed sleep apnea, occurs when there is both central sleep apnea & obstructive sleep apnea. Incidence is 15%.

#### **Symptoms**

- Snoring
- Daytime sleepiness
- Fatigue
- Frequent naps
- Headaches
- Irritability
- Insomnia
- Poor memory and attention

.....to be continued



A monthly homoeopathic newsletter.

Dr. D.K. Bhardwaj: 9871020702

# Repertory

#### **DREAMS**

Wild Animals: Nux-v., sulph.

Black Animals: *Puls*.
Black cats: Daph.
Black dogs: *Arn*.:

Beasts: Puls.

Arrested, of being Clem., mag-c.

Banquet, of being at a : Mag-s., ph-ac. Buried alive, being : *Arn.*, chel., ign. Crushed, that he would be : *Sulph*.

Exertion, of making great: Ars., rhus-t.

Lightning: Arn., euphr., phel., spig.

### Aur mur

Burning, yellow, acrid leucorrhœa; heart symptoms, glandular affections; warts on tongue and genitals; sclerotic and exudative degeneration of the nervous system. Multiple sclerosis. Morvan's disease. Second trituration. Aur mur is a sycotic remedy, causing suppressed discharges to reappear. Valuable in climacteric hæmorrhages from the womb. Diseases of frontal sinus. Stitching pain in left side of forehead. Weariness, aversion to all work. Drawing feeling in stomach. Cancer, tongue as hard as leather; induration after glossitis).

**Disclaime**r: The opinions expressed in the articles published in the '**Dreams e homoeo**' belong solely to the authors. The Editorial board may or may not be in agreement with the views expressed in the news-letter by the respective authors.

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