



GREATER GLASGOW HEALTH BOARD
WESTERN INFIRMARY / GARTNAVEL GENERAL HOSPITAL UNIT

CLINICAL TEACHING CASE STUDY

**ADULT
HOMEOPATHY
CLINIC**

Study Case No 2.10

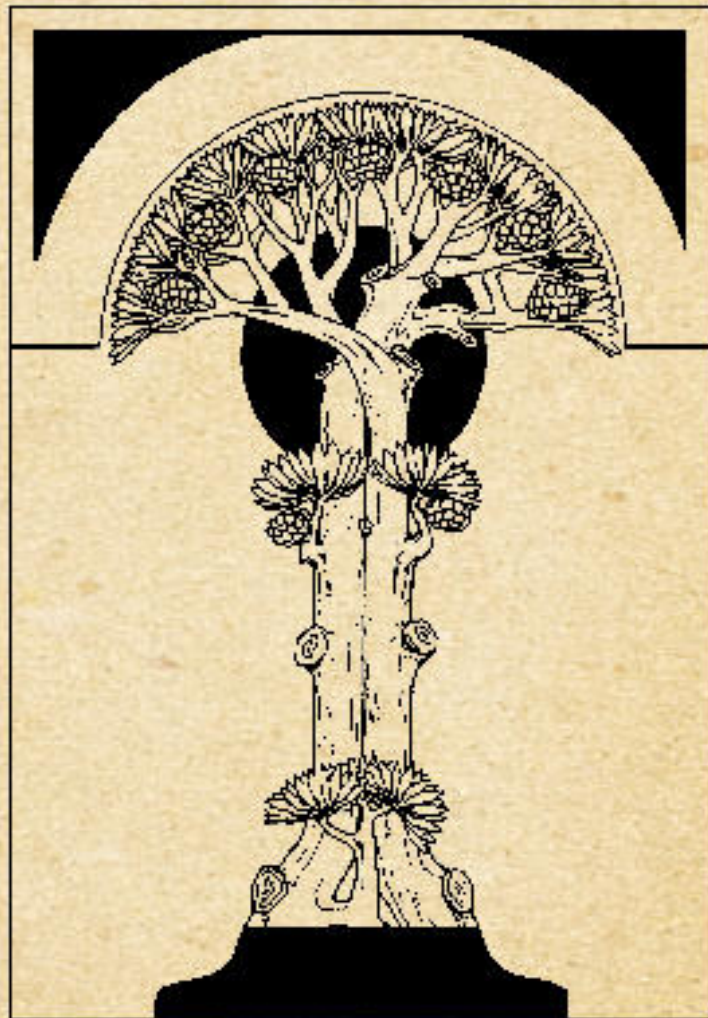
Name: Alison McK.

CONFIDENTIAL

CLINICAL TEACHING CASE No 2.10

Respect Patient Confidentiality

Discussion or disclosure is not permitted, except within your training group.



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Name: ALISON McK. Age
at First Consultation 26 yrs

Presenting Complaint / Principal diagnosis:
Inflammatory Bowel Disease / Pain

INSTRUCTIONS FOR LEARNERS:

Read the first consultation notes for this case in week 8 and watch the video fragment.

Undertake an analysis of symptoms prior to discussion in week 9.
Read through the review consultation notes and consider further treatment in week 9.



ADULT HOMEOPATHY CLINIC

Homeopathy service for this
patient originally provided at:
Baillieston Clinic (MALCOLM)

After you have added your own notes to this interactive pdf file, be sure to save it to your computer. Once the case review for this patient has been concluded, save the final copy to your training portfolio.

INDEX

Referral / Correspondence
GP LETTER
Case Recording Sheets Original Written
Notes (First Consultation)
Investigation Reports
Repertoristions & Searches (empty)
Clinical Audit / Outcome Reports (empty)
Clinical Photographs / Images
Miscellaneous (empty)

Hospital use Only: Clinic DR. MALCOLM Day Date TUES 21-11- Time 10.00 Hospital No. B 7726 GP112

REQUEST FOR OUT-PATIENT CONSULTATION
THE INFORMATION IN THIS SECTION MUST BE COMPLETED

Appointment Category
Routine Soon Urgent

Hospital King Beilbaste Date Homeopathic CHI No. [] [] [] [] [] [] [] [] [] []

..... clinic of Dr/Mr
Maiden Surname

Alison McK

PARTICULARS OF PATIENT
IN BLOCK LETTERS PLEASE

Has the patient attended hospital before? YES/NO If "YES" please state:

Name of Hospital

Year of Attendance Hospital No.

If the patient's name and/or address has/have changed since then please give details:
.....
.....

Can patient attend at short notice? YES/NO

If YES, minimum notice required days

Name, Address and Telephone number of
MEDICAL/DENTAL PRACTITIONER
DR MCGUIKIN
245 TOULACROSS RD
GLASGOW G3 14W
Please use rubber stamp

46131,

I would be grateful for your opinion and advice on the above named patient. A brief outline of history, symptoms and signs is given below:

This girl has attended ~~at~~ the Victoria Infirmary since early 1993 with inflammatory bowel disease. All biopsies etc have been non-specific but she has responded to prolonged courses of Steroids. Obviously Crohn's is thought to be a possibility but no one wants to put this label on her without good solid pathological evidence. Sickness does worsen her condition.

Alison is a rather brittle, exact girl who is elegantly pretty. She is an excellent - & enjoys her work. She attended with vaginismus in

Diagnosis/provisional diagnosis: 1991 & was tried on dilatations. She had

Present drug treatment and potential special hazards: great difficulty with these & did

X-ray (women of childbearing age). Date of first day of L.M.P. not want referral for counselling

Relevant X-rays available from: No. (if known)

Signature

out. 49-95
365-2104

a long term boyfriend but I believe he has congenital urinary outflow problem which led to admission for acute retention in Nov. 94. I do not know how intimate their relationship is.

She is often angry + nasty at reception if kept waiting or things don't go quite as she had planned. However she is usually very pleasant with me.

She has tried some homeopathy recently but was a bit disillusioned by it. She heard that it was available on the NHS + has asked for a referral. I believe she attended Robin Gibson privately + was unhappy with this. No doubt she will explain this further when she is seen.

Alison apparently phoned your clinic this week + found that there were only 2 or 3 appts. left for December. She is very anxious to be seen + to get off Prednisolone if at all possible.

Thank you for seeing her.

Yours sincerely,

Moira Lu Gray.

FIRST CONSULTATION

Name: / Age:

Read through the entire first consultation on this page and the next, using the transcribed notes. Consider the treatment, before reading the reviews. View the third review on video and analyse for a better remedy. Complaint:

History of Present Illness:



<https://youtu.be/a-68JLgTHfc>

Only a short fragment of the first consultation is available on video. Look carefully at the case records on this page and the next. Get an impression of the patient from the video extract, then analyse and prescribe.

Personal:

Menstrual History:

Family History:

Examination:

FIRST CONSULTATION

Name MISS. AILSON MCKAY D.O.B. 30.3.68 Sex F. Occ. B-7726 Date 21/11/95
 Address 44, DONNFORD AVE GLASGOW G32 9NL

Complaint
 History of Present Illness
 3/0 ago had been on holiday in California visiting Aunt + Uncle. Came back in cough. Sometimes she would cough so much it would make her sick. 1/2 in holiday symptoms started has just finished Uni. Had just completed professional exams. Saw gastroenterologist: Be need LIF + follow through. Pain in bowel. In Victoria for repeat investigation Small bowel exam. Inflammatory bowel disease. Was put onto steroids: on these for 2 1/2 yrs on v. gradual reduction required. Pains returned on stopping steroids. Nausea + pain now. Saw radiologist for Be meal + follow through.
 line at work flush cramping griping was on steroids throughout immunosuppressive treatment
 griping
 Personal likes (M+F) well. arthritis
 Previous Illnesses: -
 OTB 'A' 'B' 'C' 'D' 'E' operations
 Menstrual History
 Reg 28h No effect on
 band to put OC - Cycled: Family History: -
 HCGM: - + RTA
 LF: - + May 95 CIA; CIA colon. Emphysema.
 FGM: - old age
 FGF: - + war
 Was on holiday in Canada in Oct Felt better for a short spell after stopping steroids then << pale, eyes deep set. a bit cramped + stopped.
 Examination
 Pale, downcast. Quiet voice. Thin. Arms + legs crossed. Looks a bit like Twiggy

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FIRST CONSULTATION

HOMOEOPATHIC SYMPTOMS

Generals

Heat :-

Time :- 11.

Stomach

Appetite :-

Aversions :- milk.

Desires :- sweet, jelly.

Sleep :- OK : dreams:

Particulars

Head :- 0 headaches.

Eye

Ear

Nose

Throat

Face

Mouth

Respiratory

Used to be v. catarrhal
was given antibiotics.

• C • W • B • P
Dec breathlessness
= faints.

Some anaemia :- wt loss, steroids.
given Iron tablets which made her sicker.

Cold :- always chilly

Weather

milk. Disordered

Thirst
water + decaffeinated → during = periods of
tea prep work | threatened redundancy
Usualty + sickness until Thursday
last :- > since Friday.

? Why have symptoms subsided
< evening. Can keep sweet + jelly +
pasta down. Had been on strict
wheat-free diet. • G + C • W.

Abdomen
Bowels → regular. No tendency to D or C.
• heartburn.

Genito-urinary :- • GU • Discharges.
• Sexual problems. As well

Back → No back pain.

Extremities → Sometimes pain = knee-

Skin → • skin problems. Pain
waking up.

Sweat :-
Not vs.

had bleeding PR
during = periods of
tea prep work | threatened redundancy

Usualty + sickness until Thursday
last :- > since Friday.

? Why have symptoms subsided
< evening. Can keep sweet + jelly +
pasta down. Had been on strict
wheat-free diet. • G + C • W.

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waking up.

MENTALS

Busy person.
When well does too much
Architect. Long hours
Play & orchestra
Involves = running of orch
Sunday school teacher.
Aesthetics since a week.
Exercise helps her usually
likes singing
likes travelling. | Some idealism

Ambition for 1st school
to be an architect.
Natural inclination is to
struggle or at work to
not water bottle!
Her symptoms were worse
when boyfriend was unwell
Doesn't cry often.

Mats v. clean.
Likes to be organized.
Forward thinking
No fears or anxieties
Work is important but
family even more important
31/2001
12/1

FIRST CONSULTATION

HOMOEOPATHIC SYMPTOMS

GENERALS

Heat:

Cold:

Perspiration:

Time:

Weather:

STOMACH

Appetite:

Disordered:

Aversions:

Thirst:

Desires:

SLEEP

PARTICULARS

Head

Stomach

Eye

Abdomen

Ear

Bowel

Nose

Genito-urinary

Throat

Back

Respiratory

Extremities

Skin

MIND

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REVIEW



CASE
N^o B.
7726

REVIEW

Felt sick for the first week after the powders.
Still intolerant of eggs.
Pain and abdominal symptoms have n=been settling.
Feels that she was probably initially worse for the first week after the powders.
Feeling fine today.
Sleeping OK.
Sleeping and daytime energy have both improved.
Happier in her mood without the pains.

22/1/03
Felt sick for 1st week after powders.
Still intolerant of eggs but pain +
abdo symptoms have been settling.
Feels that she was probably worse for 1st
week after powders
Feeling fine today. Sleeping OK.
Sleeping + energy ↑. Happier without pains.
3/2/03
(in event of C)

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Abd CT Alison McK.



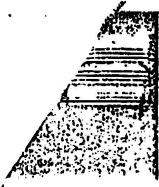
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West Glasgow Hospitals University NHS Trust

Incorporating the Western Infirmary, Gartnavel General Hospital, The Glasgow Homoeopathic Hospital
Drumchapel Hospital, Glasgow Eye Infirmary, Knightswood Hospital & Blawarthill Hospital

B7726

Our ref : RM/MMcL.
Your ref :
Please reply to : Dr. Malcolm

Glasgow Homoeopathic Hospital
62 Buchanan Street
Baillieston
Glasgow G69 6DY
Tel No.: 0141-771 7396

Dr. M. McGuigan,
245 Tollcross Road,
Glasgow. G31 4UW.

21st November,

Dear Dr. McGuigan,

Re: Alison McK,
44 D Avenue, Glasgow.
D.O.B. 30.3.

Thank you for referring this lady to the Homoeopathic Out Patients Clinic. Three years ago she developed a severe hacking cough while on holiday, which tended to culminate in vomiting. This was treated with antibiotics and antiemetics her symptoms progressed and further symptomatic treatments were tried without success. As you know she was afforded relief ultimately with steroid regime. Her progress however was punctuated with periods of severe abdominal pain and nausea.

She presents as an intelligent but rather introverted person. Her relationship with her boyfriend is good. They are both introverted people and it is clear that interpersonal communication is not always ideal. Alison seems to have a strong sense of duty to her family and to her work, and can become quite indignant if those in authority fail to deal with her problems sympathetically. She tends to internalize feelings and her natural inclination is to struggle on at work in spite of illness.

On the basis of her local symptoms and general disposition treatment has been started with homoeopathic 30C and 200C in single doses. There are a number of other materials which have an affinity for this presentation, and these will be considered depending on her initial response.

A review appointment in four weeks has been arranged.

With kind regards.

Yours sincerely,

Dr. R. Malcolm. MB.ChB. BA. MF Hom.

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