



GREATER GLASGOW HEALTH BOARD
WESTERN INFIRMARY / GARTNAVEL GENERAL HOSPITAL UNIT

CLINICAL TEACHING CASE STUDY

**CHILDREN'S
HOMEOPATHY
CLINIC**

Study Case No 2.14

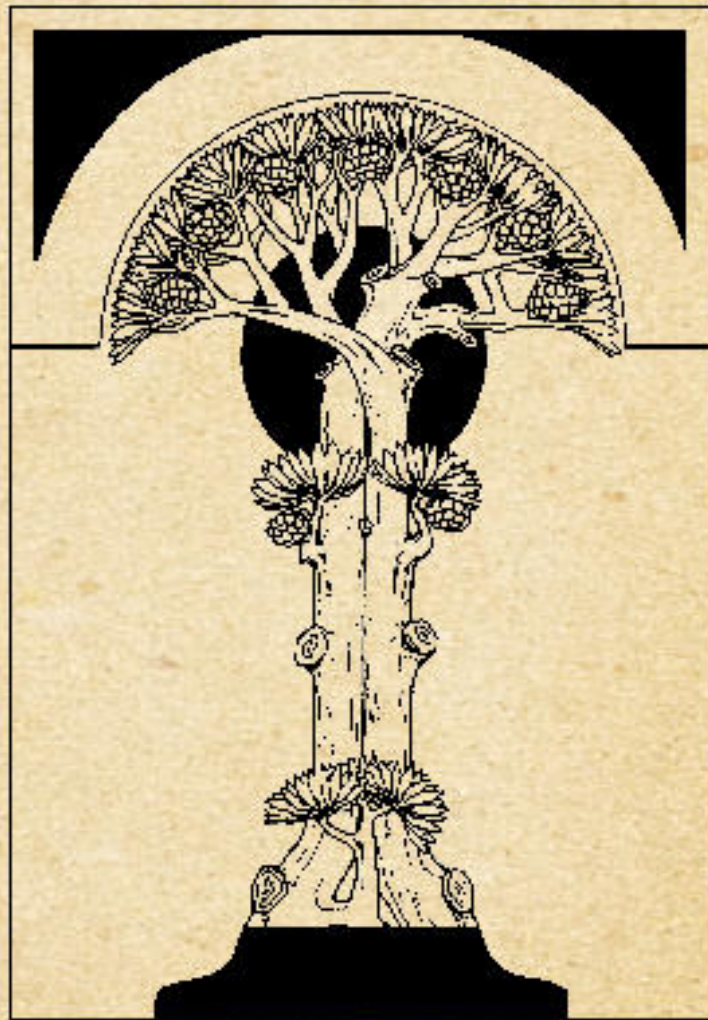
Name: Nicholas M.

CONFIDENTIAL

CLINICAL TEACHING CASE No 2.14

Respect Patient Confidentiality

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



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Name: Nicholas M.

Presenting Complaint / Principal diagnosis:

Age at First Consultation 3 yrs

Eczema

INSTRUCTIONS FOR LEARNERS:

Read the first consultation notes for this case in week 10 and watch the video extracts.

Undertake an analysis of symptoms prior to discussion in week 11. Read through the review consultation notes and consider further treatment in week 11.



CHILDREN'S HOMEOPATHY CLINIC

Homeopathy service for this patient originally provided at:
Glasgow Homeopathic
Hospital (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.

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The correspondence for this case has been interleaved with the consultation notes, in the order events took place.

Use Only Clinic Dr A. MacNeill Day MON an 11 Hospital No. E 817 | P112
 Date 1-7 Time 10:00

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

Appointment Category
 Routine Soon Urgent

Hospital Homeopathic Hosp. Date.....

PARTICULARS OF PATIENT
 IN BLOCK LETTERS PLEASE

Please attend Homeopathic Hospital clinic of Dr/Mr.....
 Patient's John Maiden Surname.....
 First Name..... Single/Married/Widowed/Other.....
 Address..... Date of Birth 25-1-.....
 Patient's Occupation.....

Postal Code..... Contact telephone number.....
 Has the patient attended hospital before YES/NO if "YES" please state:

Name of Hospital N.S.
 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

S. M. WALSH, M.B., Ch.B.
 62 HICHBURGH ROAD
 GLASGOW G12

Please use rubber stamp

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:

Dear Doctor
 This young boy has atopic eczema with a strong family hx of it. His father was previously helped by homeopathic remedies and his mother is keen that he try this also. He is currently on E45 + Metronidazole, occasional Piriton at night. He was a breast-fed infant and is otherwise healthy.

Thank you for seeing him

Dear Dr *Walsh*
 This young boy has atopic eczema with a strong family hx of it. His father was previously helped by homeopathic medicines and his mother is keen that he try this also. He is currently on E45 +sone, occasional Piriton at night.
 He was a breast-fed infant and is otherwise healthy.

Present drug treatment and potential special hazards.....

X-ray (women of childbearing age). Date of first day of L M P.....

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

Signature *S. M. Walsh*

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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/PtjhyWCmSCO>

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

E817

Name Nicholas M
 Address 18A H Cr Glasgow G11
 D.O.B. 28/11 Sex M Occ Child Date 30/8

History of Present Illness

Since worse
 Asthma controlled
 Inhal < 4 / day
 Verbal & bedtime
 Has not wheezed for ever
 < May of warm

Flared up last summer

Attending Dermatologist: Cawerty an

Widely allergic to sun
 MD
 Cats
 Pollens
 Dogs
 Eggs
 Other foods

Previous Illnesses :- No other illness

Personal

Menstrual History

Family History

Examination

MMM = strong
 MFM = ME
 MMM = pneumonia
 MAF = MI

Husband: eczema
 (controlled)

Quite strong about 4th

FCF, albinism disease

No PU/TB

Emuolate
 M.D. sore
 Betnovate diluted

Ichthammol + Zinc

on top of steroid

Banadryl has

helped

Emulogel oint

Prevezan nocte

Sunbathing +

at night

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FIRST CONSULTATION

HOMOEOPATHIC SYMPTOMS

Generals

Heat never cold
Time :- good eve-
Stomach Disordered
Appetite Thirst :- Average Thirst.
Aversions

Desires :

Not esp. sweet, choc. drinks.
Sleep Frostier & am. bread & toast.
Particulars like oranges, cheese.

Head

Eye

Ear

Nose

Throat

Face

Mouth

Respiratory

HDM. controlled

MENTALS

Stares at window with day
Quiet Old friend
A little chingy. Mature. Self contained
Calm. Plays. Intellectual, advanced
Imaginative Constructive Language good.
Dependent on mother
Chingy. Cautious + Conservative. Doesn't try any new job
Doesn't like change of habits

<Summer.

Cold

Weather

Disordered

Thirst :- Average Thirst.

Stomach

Abdomen

Bowels

Genito-urinary

Back

Extremities

Skin

Sweat

Not much sweat

like bananas + grapes.
pasta + potato.
potatoes as chips.

like raw carrot.

No easy burning.
Nosebleeds at night sometimes.

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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FIRST CONSULTATION

Wakes at night
wants to scratch. // Evening perfume oil
Elegance to...? helpful.

Not angry. Placid. Not weepy.
Smiles at any time. No rickets in the
skin. She wants to touch. Sweaty palms
& feet. Quite chatty. Only trusts people he
knows. Good natured. Serious & inquiring.
Dislikes change. Partly thing is one place.
Likes continuity. Not esp. sweet toothed.

Some things make him anxious. Calm in
advance of things. Good with other children.
Disappears with others but aware of bashous
crowds of children. Allergic to animals.

Thirst: - likes milk. some juice

D: - drinks milk. eats. likes choc.

Soaking egg. Can hardly take a bath.

Fastidious. can't bear to get hands dirty.
Nocturnal restless.

Rx	No.	PATIENT REF.	REMEDY REF.
RE	POTENCY: 1/30/2 200/11		FREQ. STAT 3
Gr.	ib.	Exaq	Ung
Lm. Cutl.			BATCH REF:
RESPONSE GRADE			sig 100

FIRST CONSULTATION

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REVIEW



REVIEW



<https://youtu.be/v7ab00JG1bw>



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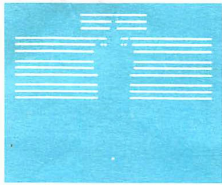
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West Glasgow Hospitals University NHS Trust

Our Ref RM/CER/E817
Your Ref
If phoning
ask for

Glasgow Homoeopathic Hospital
1000 Great Western Road
Glasgow G12 0NR
Tel:- 041-339 0382
Out Patients Department 334 9800

Dr. S M Walsh
62 Highburgh Road
GLASGOW
G12

30 March xxxx

Dear Dr. Walsh

Nicholas Mxxxxxxx, xx Hxxxxxx Crescent, Glasgow, G11 xxx, D.O.B. 28.1.xx.

Thank you for referring this baby to the Homoeopathic Out-patient Clinic. I note his history of eczema since birth, this is fairly generalised but tends mostly to affect the flexures of the limbs. I understand there is a family history of atopy on his fathers side. Skin probelms first manifested shortly postpartum and may have been provoked by bacterial populations encountered during delivery. There is little evidence of allergy although Nicholas's encounter with a cat may have provoked an exacerbation.

On the basis of his prevailing sensitivities I have prescribed homoeopathic in the form of tablets to be taken twice daily. We will review him in two to three months time.

With kind regards.

Yours sincerely

Dr. R Malcolm
Locum Consultant

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