



GREATER GLASGOW HEALTH BOARD
WESTERN INFIRMARY / GARTNAVEL GENERAL HOSPITAL UNIT

CLINICAL TEACHING CASE STUDY

**ADULT
HOMEOPATHY
CLINIC**

Study Case No 7.

Name: Kate W.

CONFIDENTIAL

Pre-membership Course in Medical Homeopathy

Clinical Case Study

Case Ref:			For Study in Week:	
Patient:			Age:	
Domain:			Please respect patient confidentiality. Case studies are provided for personal study within this course only.	
Therapeutic Area / Presentation:	1.			
	2.			
	3.			
Life stage:				
Homeopathic Category:				
Notes / Learner Instructions				
				

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041 - 810 3151

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Lochwinnoch Road
Kilmacollm
Renfrewshire PA13 4D2
0505 - 87 4474

Our ref: LJC/MJD

15th January.

TO WHOM IT MAY CONCERN

Kate W , 01.07.
11 venue, Giffnock

This lady was first seen by me on 6th April, 1993. She had a longstanding history of frequency and dysuria and an associated yellow offensive discharge. There was also one year's history of deep dyspareunia. She had previously had positive urinary infections, but the urine was now clear. Her problems all dated to the onset for sexual relations 3 months earlier. A cystoscopy in Raigmore 14 months earlier had been negative.

On examination there was a bulky infected cervical ectopy. The patient was using no medication. MSU was negative. Cervical smear was also reported as negative. She was given a course of Flagyl 200 mg t.i.d. for a week and Acijel.

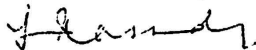
The symptoms really did not improve in a major way. The cervix was still markedly tender and I therefore carried out coagulation to the cervix on 12th June, 1993. She was thereafter given Sultrin Cream, but really since then her symptoms have hardly improve at all. She has continued to have an itch and a fishy smell from the vagina. An ultrasound scan was perfectly normal, although there had been the clinical impression of a small fibroid. A further high vaginal swab showed a heavy growth of yeasts, but no other organisms and was negative for Chlamydia. She was given Diflucan capsules to take on a regular basis. A further course of Flagyl 400 mg twice daily for 5 days. Her symptoms did not improve.

I saw her on 23rd November, 1993. She still had a marked cervicitis. I suggested the use of Erimax or Vibromycin followed by Sporanox orally and suggested she avoided the use of tampons. At that stage I felt it might be appropriate for her to be seen at a Genito-urinary Medicine Clinic and she intends to make this appointment herself.

I hope you can be of help to her extremely troublesome symptoms.

Kind regards.

Yours sincerely,



LAURA J. CASSIDY.

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FIRST CONSULTATION

Name: / Age:

You can annotate this recording sheet while you view the video case. You may find it more convenient, however, to download and print the recording sheet from supplemental materials and patch in the history by hand.
Complaint:



History of Present Illness:



<https://youtu.be/iNWmg2iXCy4>

Use the link above to access the Consultation Video. Size the video player window on your computer desktop so that you can simultaneously make entries into this case recording sheet.

Personal:

Menstrual History:

Family History:

Examination:

FIRST CONSULTATION

HOMEOPATHIC 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

FIRST CONSULTATION

Name: KATE W
 D.O.B.:
 Sex: F
 Occ: works in advertising
 Date: 14/3/11
 Address: 11 B Avenue Giffnock G46
 Complaint: Dermatitis
 History of Present Illness: Dermatitis, flush, other pathology excluded. & antibiotics penicillin, etc.

Quite a lot of swelling in MR abdominal area. pain day 1 > flushes 1/2 prior. MR tiredness 1/2 prior > flow. Discharge no change in cycle. MR reasonably healthy & bright red in clots. Uterine cancer. & vertebrae become (6/12 ago) before (8/12).

Previous Illnesses: - TB (A) = 3 = DM
 Thrombocytopenia
 methanol stroke after aphitis.

Personal: - lives in boyfriend :- divorce. No intercourse since 12/12 changed to hypo-allergenic. Dysmenorrhoea: reg. : time off work low abdo pain: variable: nausea.

Family History: - always suffered hayfever / allergies horses dogs cats lived in dog 18/1. M: - colitis / colostomy F: - bowel carcinoma GF - emphysema. GM -

Examination: 1 brother: well indigestion cheery
 1 brother: well indigestion
 1 brother: well indigestion

FIRST CONSULTATION

Personality: generally am tolerant. some physical heat. day person. > sea. sleeps in windows closed cervical glands become enlarged in colds.

HOMOEOPATHIC SYMPTOMS

Generals
 Heat: - Cold: - probably dirty
 Time: - bad in mornings. Weather
 Stomach
 Appetite: - Disordered
 Aversions: - Thirst
 Desires: - choc in MR. - sweet, fruit +, salt + cheese +
 Sleep: - heavy sleeper :- dreams sometimes being pursued sometimes stressful. No night sweats.
 Particulars
 Head: - barely.
 Eye
 Ear: - Not catarrhal.
 Nose: - No nosebleeds.
 Throat
 Face
 Mouth: - No exercise / Anxieties - 1 breeze
 Respiratory: - No coming for company. Homesick.
 Stomach: - indigestion in irregular meals strong food: onion.
 Abdomen: - slight constipation
 Bowels: -
 Genito-urinary: - vagin dryness stale odour. itching, jeans irritation in bod.
 Back
 Extremities: -
 Skin: - Romanus back rings under eyes. eczema. stress < No easy burning circles patches. itching @ low

MENTALS

Very tired: -
 Needs a lot of sleep
 Uteral illness 3/1 ago
 Monospot negative
 Hobbies: - parties, entertaining
 Not exp - to clubs
 Enjoys exercise.
 Decent work centre of attention. Hobbies rather than father. Some lack of self confidence high. puts on a different hat at work. Motivated at work: usually fatigued after work. Mood: variable.
 12/3/2007
 6 c BD (3/12)

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FIRST REVIEW

Continuation sheet

Patient Name / id.:

Time since first seen:



<https://youtu.be/jvmvrnn14v8>

SECOND REVIEW

Continuation sheet

Patient Name / id.:

Time Since Last Review

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FIRST REVIEW

24/4/

No retention or aggregation
Has stopped off coffee
No itching now.

Feels back to normal.

Still feels tired at times

Still has joints pain.

Has dark rings under eyes permanently.

Premenstrual irritability

Lacks energy PRIOR to ap. No nausea prior
to menses.

Using Provera which works quite well.

Endo has dropped. As a complication of

thrush. Uses lower contraception

Both partners are working v. hard.

No dyspareunia. No thrush now

Fatigue: mainly mental. No form of exercise.
Used to be very active.

Chills easily

Not a morning person Best between 10am - 12am.

Eczema on arms: circular patches. < summer.

3/30

6 x BD

sent 27/4 CA