

Severe Ulcerative Gastritis in a 53-year-old Woman

A Homeopathic Case report

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Abstract

A 53-year-old woman presented with the rapid onset of severe epigastric pain, nausea, vomiting and weight loss which appeared to be due to a gastric malignancy on abdominal CT. While **seeking** a second opinion, she was treated with homeopathic *Conium maculatum* and the stomach pain quickly resolved. Ultimately she was diagnosed with gastric ulcers and H. pylori.

Keywords: Ulcerative gastritis, linitis plastica, gastric cancer, *Conium maculatum*

The following case has been formatted according to CARE guidelines.(1)

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Introduction

This is the case of a 53-year-old white female who presented initially with severe gastric distress and pain. After an emergency room visit and abdominal CT, she was given the tentative diagnosis of linitis plastica and was told that her condition was likely terminal. Linitis plastica, also known as leather bottle stomach, is a type of diffuse, infiltrating stomach cancer which is characterized by a thick, rigid stomach wall (2) and a uniformly poor prognosis.(3) Most patients live three to six months after the diagnosis and a few make it a year. It is usually diagnosed at an advanced stage when curative surgery is not an option for most patients. Presenting symptoms in order of frequency can include dyspepsia, dysphagia, postprandial vomiting, weight loss, easy satiety, and epigastric pain. A CT scan of the abdomen typically reveals stomach wall thickening and endoscopic biopsies of the stomach may have to be repeated multiple times to get a positive result for cancer. An endoscopic ultrasound can be useful to help establish the diagnosis.(3) In this case, the patient's symptoms resolved quickly after the prescription of a homeopathic medicine and a second opinion a few days later revealed gastric ulcers and H. pylori.

Timeline goes here

Patient information

I initially got a call from this patient for an urgent visit on a Monday. She was on her way to Mayo clinic for a second opinion. Luckily, we were able to see her two days later on 3/1/17 for an initial appointment. She was a 53-year-old woman who

had been given a tentative diagnosis of linitis plastica four days previously. Her young adult son had died suddenly in a car accident two years prior in January, 2015 and **she was still grieving. (One never “gets over” the death of a child.)**(She had tears while speaking of this). One year later she was divorced, ending a 22-year marriage. At the time of the appointment she was in a good relationship with a boyfriend and had an amicable relationship with her ex-husband. She was at the appointment with her sister who would drive her to Rochester, Minnesota (about a five hour drive) right after the appointment.

She had grief and resentment about how things worked out in her life. She had self prescribed *Ignatia amara* and *Natrum muriaticum* for the last two years to deal with depression and grief. On February 26, 2017 she went to the emergency room due to nausea and severe stomach pain. She couldn't eat or drink, and even water caused abdominal cramping. A CT scan revealed "a concentric area of gastric wall thickening involving the gastric body, measuring approximately 6 cm in length. This finding is concerning for intramural malignancy, and may represent linitis plastica." No EGD (**esophagogastroduodenoscopy**) was done. She was told it was cancer and she had about six weeks to live and they sent in the chaplin. This understandably increased her anxiety and depression.

She had not been sleeping for the two nights before her appointment. Her vomitus consisted of sputum and some bile. The pain was excruciating, at times a ten out of ten (0 is no pain and 10 is extreme pain). The stools had been normal but lately had become sluggish. The appetite was decreased **and as a result**, she lost five pounds in the previous week. Nausea and stomach pain increased after taking water or food. An advil the night before her visit led to an increase in vomiting and pain. She had worked a full week until February 26, 2017 but was not able to work after that.

The abdominal pain was in the left upper quadrant (LUQ) and epigastric regions; it was cramping, gnawing, and, at times, sharp pain. It was accompanied by lower back pain and nausea and vomiting. The pain was worse two to three hours after eating or drinking, at night, lying down (especially on the right side), and worse with pressure on the abdomen though holding the abdomen with her hands was fine. The pain was better on all fours when there was no pressure on the stomach. (During the history, the patient at times got down on her hands and knees on the floor as this was her most comfortable position.) The pain was worse with cold drinks and she preferred water to be hot or warm. She had had abdominal pain with exercise for the previous month. She was belching a lot **for the past month** as well as during her initial appointment; it was ineffectual at times, but belching helped

the pain momentarily. Her pain was worse when upset or hysterical. The gurgling in the **stomach was worse from** emotions. The stomach and back pain were worse from jarring in the car.

She is a naturopath and had an all organic diet, with no sugar or processed foods, minimal coffee and alcohol and ate only grass fed meat. She also took digestive enzymes.

She had been in a negative state of mind for last two years since her oldest son died. Her surviving 17 year old son had been difficult, angry and hard on her. He spoke to her with contempt. She cried daily over how her son mistreated her and how both of her sons did not turn out right. Her remaining son refused counseling, and smoked marijuana in her house. She felt suicidal but wouldn't attempt it because of her son. She thought of putting a gun to her throat. She felt suicidal last week after fighting with her son while on vacation in Costa Rica with him. Her son was planning to move away to Arizona for college in July where he would be two hours from his dad. This hurt her deeply and she felt resentment. After her older son died in a car accident in January 2015, she had a nervous breakdown. One month later she still couldn't think or speak. Her business tanked and she was stressed over that. She was the only one making money in the practice at that time. In January 2016, she pulled it together, still grieving but began working full time.

Physical Generals

She was freezing cold the last four days and worse in a cold room and with cold weather. She felt better with a hot bath at night. She perspired in the axilla with no odor. She was worse in the sun, which caused headaches. Otherwise she loved the sun and was depressed without it. But she could stay in the sun for only five minutes without sunglasses. **She felt better in nature, especially in the sun and at the beach.** Cloudy and dark weather made her feel 'down.' She felt best in the summer and often visited her parents who lived in Naples, Florida. She was worse in cold and damp weather and liked hot and dry weather. **She preferred** fresh air before this pain but not the wind. She was worse with a draft (2).

Her energy was a one out of ten yesterday before her IV. The day before the visit she received a vitamin B and C **infusion** which increased her energy to a five out of ten (0 is worse and 10 is best). She could think and focus for two hours and only slept for two hours because of her pain. Her appetite was poor. At the time of the visit she felt sluggish, her energy was three out of ten due to her **poor sleep and appetite.**

Her sleep was **restless and uncomfortable** due to pain (2). Sleep was better when leaning to the side in the hot tub the night before the visit which allowed her to sleep for one hour. She slept covered with layers, did not sweat, and kept the windows closed. She didn't recall any dreams.

She craved sweets, red meat (2), eggs were a favorite. **She preferred sour** but not sweet and sour. **She was aggravated and averse** to dairy.

Coffee **made** her anxious, so she **had** a few sips of coffee for alertness. She **drank** hot water (1).

She would have a hangover from **two drinks** and 'a buzz' with one drink.

Her bowel movements were soft, formed and sluggish but not difficult.

Her menarche was at 16 years old; her last menstrual period was at age 53 in January 2017 and intermittently before that. She had had no PMS, cramping or breast tenderness. She had severe hot flashes throughout 2016, but rarely since then. The menses **had been** irregular, heavy or light, lasting up to **ten days** (usually three to four days long) from August 2016 on and had occurred only three times since then. Menses were regular but became irregular with menopause.

Gravida 2 Para 2. NSVD x 2. After her first born, a hospital birth, she had post partum depression for two weeks.

Her second child was a water birth without complications.

During menopause, she had felt hysterical, emotional and crazy.

She was normally sexually active with her boyfriend and had hot flashes during sex.

Past History

She had an umbilical hernia repair six years ago and an eyelid lift and forehead lift two years ago for a droopy left upper eyelid after her first born. She stated that she had low estrogen throughout her life.

Family history was unremarkable.

Social history

In childhood, she had a 'negative' father. Her father, who is an engineer, was very harsh and when she told him about her possible stomach cancer, he replied "Shit happens." He said horrible things to her when her first born died as well. Patient's sister was a lawyer and accompanied her at the visit.

Mental/Emotional

She said that she was generally calm but impatient. She **preferred** things done right and was a perfectionist who liked efficiency. She couldn't stand to waste her time such as when her staff had to redo things. She ran a green office and recycled. She was on time at work and **found it unacceptable** if a client had to wait more than ten minutes. She struggled with managing employees but not patients. She felt her staff was lazy. But she had a hard time firing people; she placed people ahead of business. She drove a hybrid car and was conservative with money **but paid her bills on time.**

Since coming out of the depression, she wanted to have more fun and had a night life **though limited herself to one** drink. She had a social life for the first time in two years. Her marriage **had been** more of a business relationship, **but her relationship with her current boyfriend was more intimate.**

She worked six days per week and **described herself as a workaholic.** She had **carried resentment towards** her ex-husband but **recently** things were more amicable and she missed him. **She liked to dress well and look sophisticated and professional.** Overall, she tried to be positive and happy and used affirmations. She lived with gratitude. She used to be negative **with suicidal thoughts** until a year ago when she turned a corner and **decided** to live for herself. The news made her feel depressed. Her son had been nice to her the past week and even gave her a hug. **She was previously a massage therapist and she felt emotions in her stomach.**

Fears

She complained of claustrophobia, crowds caused nausea and pain, **and she feared** bugs and being alone especially after the divorce.

She was sensitive to medication and contempt from her son.

Temper/Affection

She got **angry** from lack of efficiency. Ten years ago she used to be confrontational but now was more diplomatic. She no longer made **on-the-spot** decisions, **but rather** slept on it. **She could** swear but was non-violent. She liked to be touched, kissed and held hands.

Pathobiography

She said that the death of her first born from a car crash in January 2015 ruined her life forever. She divorced after 22 years of marriage one year later.

The homeopathic medicines that had helped her in the past were *Arnica montana* 30c up to 1M,; *Arsenicum album* 1M two years ago possibly helped her anxiety;

Ignatia amara 30c for depression after her son's death **as well as** *Natrum muriaticum* 30C which also helped; **she had used** *Thuja occidentalis* for growths on the face.

She was on vitamin D and had good serum levels.

Physical Exam:

Patient was a well developed white female in moderate to severe distress who at times got down on her hands and knees on the floor which helped ameliorate the stomach pain.

Pulse: 70bpm

BP: 126/84 LAS, medium cuff

SaO₂: 97%

Abdomen: Epigastrium and LUQ were moderately tender to touch, no rebound tenderness.

HEENT: many white fillings; blue eyes with cataract; tongue slightly coated.

Neck: supple, no nodes, no supraclavicular nodes

Lungs: clear to auscultation

Heart: Regular rate and rhythm without murmurs

Extremities: nails healthy, no edema.

Weight: recent weight loss of 5lbs. Present weight 105 lbs.

Diagnostic Assessment:

On February 26, 2017 in the ER a CT scan of the abdomen and pelvis with IV contrast showed:

"A concentric area of gastric wall thickening involving the gastric body, measuring approximately 6 cm in length. The mucosa appears normal. This finding is concerning for intramural malignancy. These findings may represent linitis plastica.

Mild intra and extra hepatic biliary dilatation.

Non-obstructing 6 mm left renal stone.

Bilateral ovarian cysts measuring 1.3 cm on the right and 4 cm on the left. Dilated left pelvic veins."

A CBC, CMP and UA were unremarkable and a troponin was <0.01.

Homeopathic Assessment:

This patient was in moderate to severe distress with upper abdominal pain. Due to the CT scan results, **she** had just been given a probable diagnosis of a rapidly fatal form of stomach cancer. Luckily she was a good historian and provided many characteristic symptoms which would help in the selection of the simillimum. The

initial repertorization with MacRepertory (4) with the most characteristic symptoms at the top appears below.

| | Con. | Lach. | Lyc. | Phos. | Sep. | Calc-p. | Carc. | Tarent. | Tub. | Petr. |
|--|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Total | 45 | 36 | 39 | 26 | 31 | 19 | 13 | 13 | 10 | 8 |
| Rubrics | 25 | 18 | 21 | 17 | 17 | 12 | 10 | 9 | 8 | 7 |
| Kingdoms | Green | Red | Green | Blue | Red | Blue | Red | Red | Brown | Blue |
| <u>Lying amel knee elbow chest hand knee (16)</u> | Blue | Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| <u>MIND; AILMENTS from; grief, sorrow, care (99)</u> | Purple | Purple | Light Blue | Purple | Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| STOMACH; PAIN; General; eating; agg.; after; two hours to three hours later (18) | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| STOMACH; PAIN; cramping, griping, constricting; eating; agg.; after (36) | Light Blue |
| STOMACH; PAIN; cramping, griping, constricting; drinking, after (4) | Light Blue |
| STOMACH; PAIN; General; lying, while; agg. (29) | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| STOMACH; ERUCTATIONS; General; ineffectual and incomplete (72) | Light Blue | Blue | Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| Stomach pain, Gen, Eructations amel (107) | Light Blue | Blue | Purple | Blue | Blue | Blue | Light Blue | Blue | Light Blue | Light Blue |
| Stomach pain, gen <jarring (128) | Purple | Purple | Blue | Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| MIND; RESTLESSNESS, nervousness; tendency; pain; from (62) | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| MIND; RESTLESSNESS, nervousness; tendency; pain; from; stomach (4) | Light Blue |
| stomach pain, gen warm drinks amel (38) | Light Blue | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| stomach pain, gen cold drinks agg (126) | Blue | Light Blue | Blue | Purple | Blue | Light Blue | Light Blue | Blue | Light Blue | Light Blue |
| suicidal, desire death (167) | Light Blue | Blue | Light Blue | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| indignation (44) | Blue | Light Blue | Light Blue | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| AF financial loss bus failure fear pov (38) | Blue | Light Blue | Light Blue | Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| GENERALITIES; AIR; draft; agg. (126) | Blue | Blue | Purple | Blue | Purple | Light Blue | Light Blue | Light Blue | Light Blue | Blue |
| MIND; IMPATIENCE (156) | Blue | Blue | Blue | Purple | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| fastid (105) | Blue | Blue | Blue | Light Blue | Purple | Light Blue |
| MIND; INTENSE (20) | Light Blue | Purple | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| MIND; INDUSTRIOUS, mania for work (124) | Blue | Blue | Purple | Light Blue | Light Blue | Light Blue | Purple | Purple | Light Blue | Light Blue |
| MIND; FEAR; narrow place, in, claustrophobia (49) | Light Blue | Light Blue | Purple | Light Blue |
| STOMACH; EMOTIONS are felt in (45) | Light Blue | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| GENERALITIES; MEDICAMENTS, allopathic medicine; oversensitive to (20) | Light Blue | Blue | Light Blue | Light Blue | Light Blue |
| GENERALITIES; FOOD and drinks; alcohol, alcoholic drinks; agg.; intoxicated easily (8) | Purple | Light Blue |
| GENERALITIES; FOOD and drinks; meat; desires (58) | Light Blue | Light Blue | Light Blue | Light Blue | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |
| headache, gen <sun (130) | Blue | Black | Light Blue |
| STOMACH; CANCER (74) | Purple | Blue | Purple | Purple | Blue | Light Blue | Light Blue | Light Blue | Light Blue | Light Blue |

If an elimination is done looking at the most characteristic symptoms, namely the amelioration on all fours and ailments from grief, then several remedies stand out as possibilities, namely, *Conium maculatum*, *Lycopodium*, *Phosphorus*, and *Carcinosin*. But *Phosphorus* is typically better with cold drinks though **she is ameliorated** with warm drinks. So Phosphorus can be taken off the list. This leaves *Conium maculatum*, *Lycopodium* and *Carcinosin*. *Carcinosin* is not well proven and it doesn't cover many of the characteristic symptoms of the case. So we are left

with *Conium maculatum* and *Lycopodium* to review in materia medica for confirmation. (*Sepia* was not considered at first for the acute as it did not cover several of her characteristic symptoms, however it did prove very useful for her chronic case later.) When I did a Reference works search for 'Stomach' in the same sentence as 'knee-elbow,' **the following passage immediately appeared from Hering's Guiding Symptomss under *Conium maculatum*:**

"Violent pains in stomach, always two or three hours after eating, but also at night, somewhat better in knee-elbow position."

Conium maculatum covered the overall case nicely except for the improvement from warm drinks since it is worse from cold drinks. However, the patient's chilliness, headaches from the sun and tendency to intoxication easily with alcohol are all keynotes for *Conium maculatum*. (See the *Conium maculatum* monograph in the MMPP (Materia Medica Pura Project) preview in the latest version of the Referenceworks library). Also, *Conium maculatum* is a well known remedy for cancer in general, and stomach cancer in particular. One of the reasons *Conium maculatum* comes up so high in the repertorization is because the Materia Medica Pura Project (MMPP) repertory that I'm using (the Complete 4.5 with MMPP additions) has the MMPP additions from Dr. Andre Saine's 640 page MMPP monograph on Conium (see Referenceworks (6)).

The choice of *Conium maculatum* was obvious, although the circumstances were dire for this patient and therefore the outcome was uncertain.

Diagnosis

Severe epigastric pain, rule out stomach cancer – linitis plastica

Homeopathic Treatment

Conium maculatum 30c (Hahnemann pharmacy) 2 pellets were given by mouth while still in the office. Her pain was an 8-9/10 before the remedy, and decreased to 7/10 within a few minutes after the remedy. She left the office for the Mayo Clinic in Rochester MN with a tube of *Conium maculatum* 30C with instructions to repeat it whenever the pain plateaued or started to increase and to hold it while improving. I also gave her a tube of *Conium maculatum* 200C in case she needed to increase the potency.

Follow-up five days later, 3/6/2017

3/1/17 on the way to Mayo clinic, she took four sips of the *Conium maculatum* 30C in water and the pain **improved** and was not **aggravated by the jarring of the car ride**. On 3/2/17 she increased to the *Conium maculatum* 200C four pellets by mouth daily for the pain until 3/5. **The symptom of amelioration of the stomach pain while on all fours was** relieved after the first dose of *Conium maculatum* and never returned. She received another fluid IV on 3/1 in the Mayo ER, and was able to begin eating again on 3/2/17. (She had not eaten from 2/25 until 3/2.) On 3/3/17 an EGD (Esophagogastroduodenoscopy) with ultrasound was done which revealed no cancer, only 3 gastric ulcers (largest was 10 mm in diameter) and the endosonography showed patchy slight wall thickening in the body of the stomach, but much less notable than seen on CT. In fact, the Mayo doctors were quite puzzled that their findings were so minimal while the CT (which they had reviewed) had been so abnormal and suggestive of gastric cancer. The pain increased on 3/3/17 after the procedures and oxycontin and zofran were taken once only on that day to help with sleep. By 3/6 the stomach pain was still **intermittent** but only got up to a 2/10 and she didn't need to repeat the *Conium maculatum*. She had constipation from not eating but then had a bowel movement on 3/6 with the help of an enema. She refused the proton pump inhibitor they gave her, only took one tylenol while at Mayo and at the visit was no longer on allopathic medications. On 3/3 they told her she didn't have cancer and her depression lifted. Her grief over her son's death has gone from a 10/10 for the last two years to a 5-6/10. Her nausea and low back pain were gone on 3/2, and her energy had increased to a 7/10 on 3/6 and she was able to work and see three patients. She was less chilly. The belching was less frequent. The sleep was much better and last night she was up **twice** with pain but it **disappeared** quickly with motion and belching.

Gastric biopsies showed mild to moderate active chronic gastritis and duodenal biopsies showed patchy increased intraepithelial lymphocytes and patchy acute inflammation. The H. pylori immunostain was positive.

On physical exam she looked much better and was no longer in distress. The abdomen revealed only slight epigastric tenderness.

Plan

Continue *Conium maculatum* 200C 2-4 pellets by mouth as needed for the stomach pain.

Three week follow up, 3/24/17

She was doing so much better. She never took the H. pylori drugs that were prescribed by the Mayo gastroenterologist. Occasionally she would have a twinge

of pain from eating something bad. She had been taking the *Conium maculatum* 200c once daily.

Energy was up to a 7/10, steady since the last visit. She had been working full time again for the last two weeks until 7:30 pm. She felt worse from 4pm to 5pm. She still had an underlying depression (6/10) **and cried daily**. "My younger son is abusive to me again and curses at me." Her last menses was last week and lasted five days. This was the first menses in two months. She has had a low grade hormonal headache since the menses which was better with sleep. **She started taking supplements again.**

She could only eat about half of what she used to eat and still liked warm drinks. Her bowels were normal and her belching had stopped.

On exam she had no abdominal or epigastric tenderness.

Plan: *Conium maculatum* 10M, 2 pellets by mouth, and may sip in water as needed for the headache.

4 ½ month follow up, 7/21/17

She was doing well. **She had only one episode of stomach pain triggered by an encounter** with her son. She didn't sleep one night and the next day **she had some nausea and vomiting but then felt fine**. On 7/2/17 her son moved to Arizona near his dad for college and she felt despair. She had a going away party for him and he talked to everyone but her. **She was working** six days a week again. With her son gone, **she was having more fun**. She used one tube of *Conium maculatum* 10M, taking it every few days and finishing it in May 2017. She still had despair at times and once, she felt like she didn't want to live, but it passed. Her grief was still at a 4/10. She only got a headache now with extreme fatigue and **some bloating after lunch and dinner**. She craved salty foods and had daily bowel movements. Energy was up to 8/10. She liked company in the house, but not in the same room. She had a fear of robbers, of being hurt or attacked.

Plan

The *Conium* had relieved the acute stomach pain **and her energy was better** but the grief remained and she was craving salt, still needed sunglasses and had a fear of robbers. So I **prescribed *Natrum muriaticum* 200C, 2 pellets, to repeat as needed.**

Follow up through March 2018

She had only one slight recurrence of her stomach pain in August after a fight with her parents and *Conium maculatum* 10M, 3 pellets once, relieved it. **Since then she has had no stomach symptoms**. Her craving for salt was gone and she had less need for sunglasses. Her depression **continued to lift**. Stress with her family

and son **could still depress her** but she was becoming more resilient. She had no more suicidal thoughts after July 2017. The *Natrum muriaticum* helped the depression and her energy and she had no more headaches.

On 9/8/17 we switched her to *Aurum metallicum* 200C due to her continued grief, feeling sadness in her chest, history of suicidal thoughts (she wasn't actively suicidal), a forsaken feeling from her family, ex-husband and son, fear of robbers, menopausal hot flashes with perspiration; she was very responsible, felt better in the sun and worse with cloudy weather. With the *Aurum metallicum* 200C her hot flashes were 50% less intense and less frequent but her depression didn't change.

She was crying more since November 2017 and into the holidays (as January was the anniversary of her son's death), craved chocolate and warm water or tea and was worse at 4 pm; her depression was worse in the morning on waking. On 11/10/17, she received *Lycopodium clavatum* 200C as needed.

On 12/22/17 she was still not feeling well. She was very emotional and had a headache which had lasted two weeks. The left frontal headache was better with vigorous exertion, worse with artificial light and noise but ok with the sun; better with sleep but she was not sleeping well due to an increase in the hot flashes which woke her up. She was irritable with her son, and had vaginal dryness and pain with sex. She was craving chocolate and she felt exhausted. She received a dose of *Sepia* 200D (Dunham) by mouth in the office and 200C to take home and within a few minutes the headache was better and she felt good.

I called her on 3/23/18 and she reported that the *Sepia* had changed her life for the better. The two week headache **reported** on 12/22/17 disappeared as she drove home from the office and did not return. It was shocking to her that it could work so quickly. She felt much better and said "I love that remedy!" She had not repeated the *Conium*. When she occasionally got mild stomach issues from emotional issues with her son or family, she got through it easily. Two weeks prior she took the *Sepia* for stomach symptoms and they cleared up. She was sleeping better, had more energy and she was working more. She had opened a third office for her practice and was working six to seven days a week. The hot flashes were 75% better with the *Sepia*. The grief was much better and she wanted to live again; she was excited about new adventures. Before **homeopathic treatment**, she was 'winding down her life,' but now she **felt like** starting a new practice. "I'm in a good place. I never thought I could be here." She was told to continue the *Sepia* 200C **as needed** and follow up **with me** as needed.

Discussion

This case seemed dire at the start and the symptoms were severe, but the patient was an excellent historian who was able to describe many characteristic symptoms that helped us to find the simillimum for her acute case. Her most characteristic symptom- the stomach pain that was ameliorated on her hands and knees- was not easily found in the repertory, but was found in Hering's *Guiding Symptoms* under *Conium maculatum*. When prescribed, the *Conium maculatum* acted quickly and led to a relief of her abdominal pain and an improvement in appetite, mood and energy. One can only speculate as to whether the *Conium maculatum* affected the highly malignant condition that was suspected by the CT, however, the patient was convinced that it did. In any case the patient had a dramatic healing of her gastric distress with the *Conium maculatum*.

After the patient responded to the *Conium maculatum* for her acute condition, the chronic underlying dissimilar disease began to express itself in the picture of *Natrum muriaticum*. Hahnemann discusses this in paragraph 38 of the Organon ⁽⁷⁾ where he states, "If the later dissimilar disease is the stronger, it temporarily suppresses and suspends the former milder one, until the new disease has run its course or been cured; then the old affection reappears, uncured." So when the acute gastric disease resolved, the underlying chronic disease reappeared. She responded well to the *Natrum muriaticum* for the chronic disease and then we moved on to other remedies for her chronic disease. Of those remedies, *Sepia* had the most profound effect and brought her back to a level of well being that she did not think she could revisit. Hahnemann recognized the need for a succession of remedies in chronic disease, as in paragraph 171 of the Organon ⁽⁷⁾ he states, "In nonvenereal chronic diseases . . . one often needs to use several antipsoric remedies in succession to bring about a cure."

Patient Perspective

"I don't think it was a misdiagnosis of stomach cancer. I think there was a true change with the homeopathic remedy. Ten MDs looked at the CT scan, including the doctors at Mayo, and all of them were concerned about stomach cancer. I am very appreciative with how much the *Conium maculatum* helped me. I really feel like I had stomach cancer and something happened with the remedy and it changed fast from Monday to Friday."

Informed Consent

The patient gave her verbal consent to have her case history published.

Timothy Fior, M.D, DHt., has been practicing homeopathic medicine in the Chicago area for 30 years. For over ten years he has been a lecturer in the ND program at National University of Health Sciences in Lombard, Illinois. He is a cofounder of the Center for Integral Health in Lombard, Illinois and is a cofounder, past and current president of the Illinois Homeopathic Medical Association. He has lectured on homeopathy at various medical schools in Illinois.

Nikita Patel, ND is a recent graduate of the ND program at National University of Health Sciences in Lombard, Illinois.

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