

Head and Neck Inflammation. Differential Diagnosis – Homeopathic approach

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INTRODUCTION: Inflammation often initiates within the maxillofacial region, Peritonsillar abscess is a common deep infection of the head and neck that occurs in the population. This infection begins as a superficial infection and progresses into tonsillar cellulitis. Early diagnosis of the abscess allows appropriate treatment to begin before the abscess spreads into the surrounding anatomic structures. Dental infections were the most common cause of deep neck abscesses (49.1%) . The procedure for patients to received systemic antibiotics and in some cases surgical drainage in the operating room is often required. Median and lower quartile of time in hospital was 2 and 3 days, whereas upper quartile was 4 days (range, 1 to 27 days).

The beneficial approach of homeopathy will be introduced through individual cases that have been recorded.

In each case the **Aim** was to set Diagnoses using the data acquired following intra and extra oral dental examination and complete homeopathic interview. The clinical findings and the subjective patients' symptoms were analyzed using RADAR 9 computer software which proposes as a list of remedies that can cure the totality of symptoms.

Repertorisation: allows as a precise **differential diagnosis** of possible **homeopathic** medicines through login of the symptoms, since only one remedy can be prescribed for a reasonable amount of time according to the rules of classical homeopathy.

The **Method** requires:

- I) Dental history
- II) Homeopathic history (birth till present).
- III) Symptoms analysis in their totality with additional literature.

Use of computer software (Radar)

IV) Clinical evaluation of the case& prescription followed with recall after one month.(minimum)

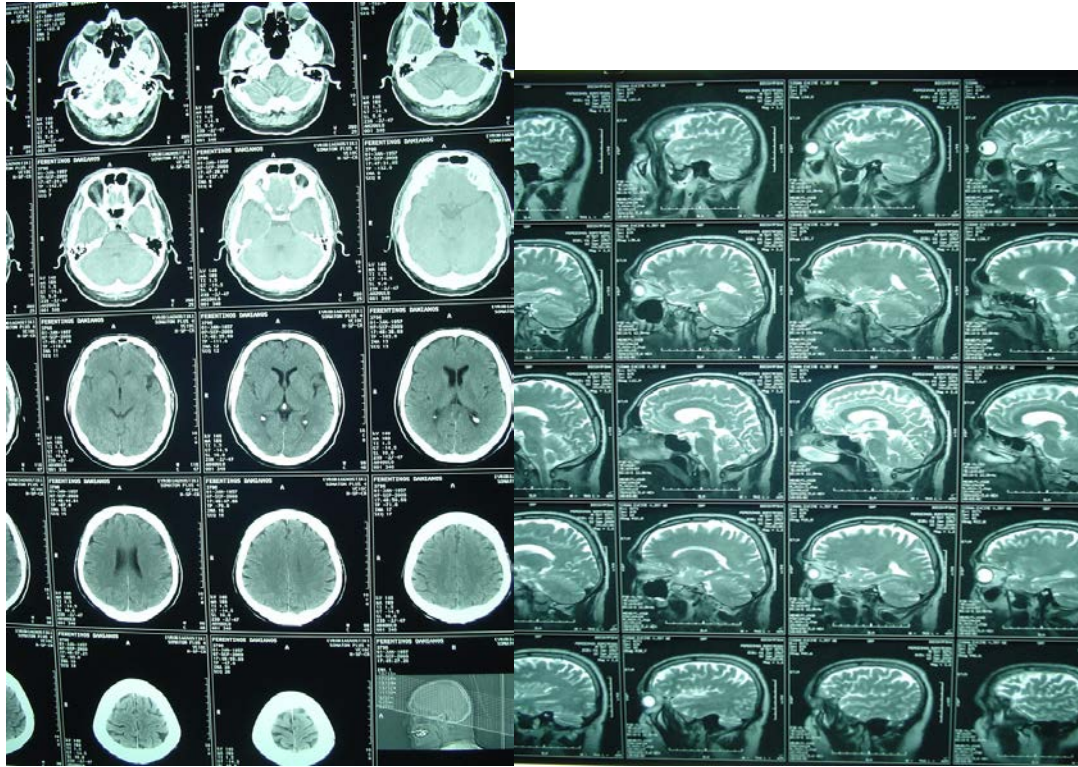
Case 1 At 15-9-09 visited the office with symptoms of facial Palsy left.

Man age 52y. W:103kg/H:174cm, married

Medical history: Hospitalized at 7 till 9 Sep 2009 at Athens medical hospital. Diagnosis set as facial palsy left (peripheral type). Falling mouth corner left, Taste distortion-Inability to lift eyebrows left. **Para clinical examinations:** Blood analysis/ MRI / Rx/ electroencephalograph EEG/ Triplex carotid/ CT scan-brain.

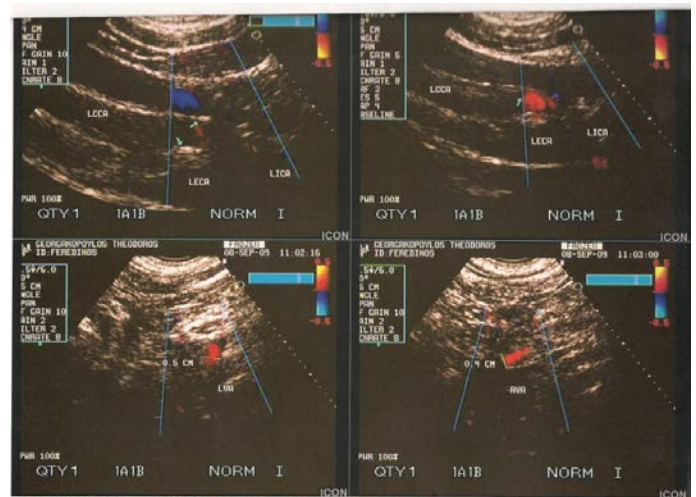
No pathological findings / Prescribed with: O tabl 2x2/day for 3days Medrol, Zantac 5 caps, Tears natural 2drops /2 hours.



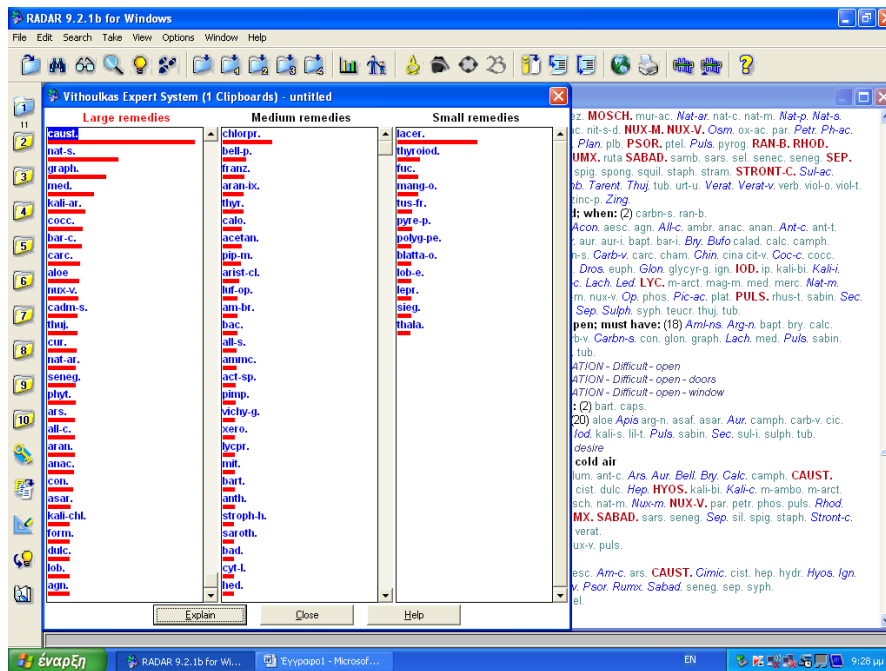
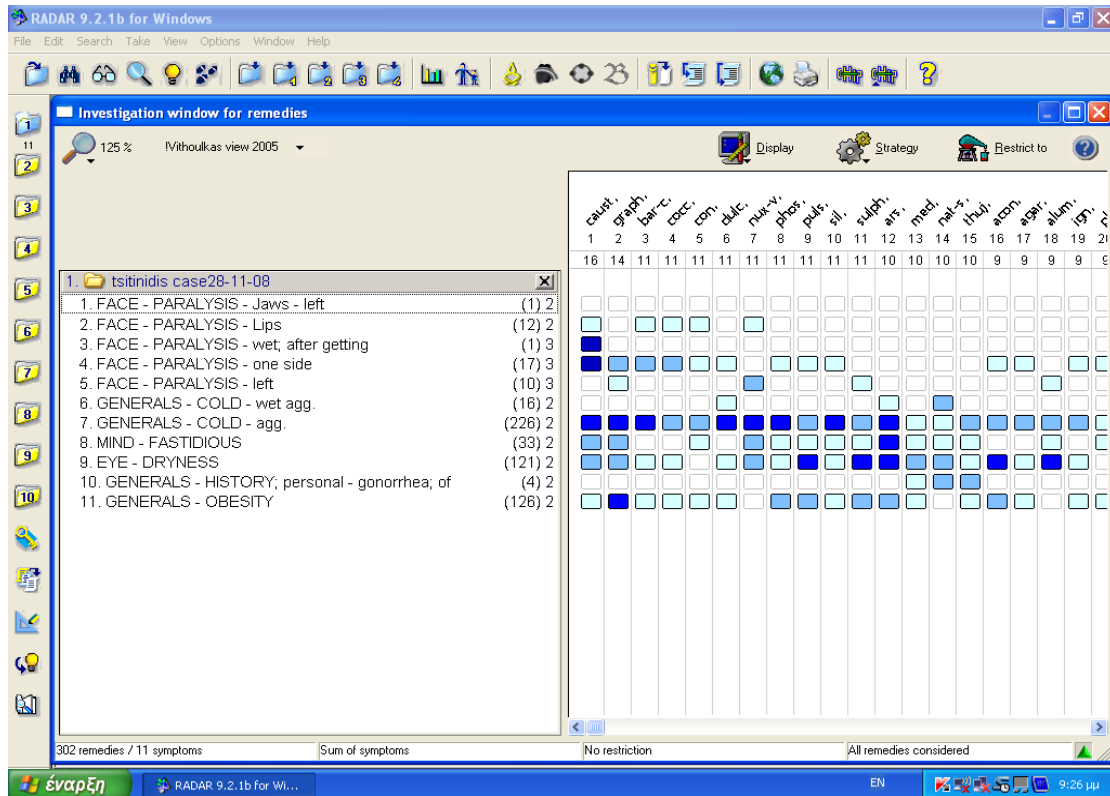


ΠΡΟΝΟΣ ΝΟΣΗΛΕΙΑΣ ΑΠΟ: 17-9-09 ΜΕΧΡΙ: 19-9-09
 ΘΕΡ. ΓΙΑΤΡΟΣ: ΔΙΩΝΗ ΓΙΑΤΡΟΥ ΤΗΛ.
 ΕΛΙΚΗ ΔΙΑΓΝΩΣΗ: Τριφυλοεικό τριπλό κεντρικό υποχονδριώδες κερκονόβιομα
 χωρίς οφθαλμική επέκταση περιφερικά. Ηλεκτρονική βροσκόπηση
 έδειξε ότι MRI επέκταση βρογχικών φραγμάτων χωρίς
 διήθηση βρογχικών τοιχωμάτων.
 Παράδειγμα ενός D. αδενώδους κεντρικού TET τύπου κεντρικού
 βροχίου χωρίς πολλαπλά βρογχίτιδα και αδιαφανή βροχίτιδα.
 Βρογχίτιδα από αμυγδαλές, βρογχίτιδα κεντρική.
 Από αμυγδαλές βροχίτιδα και κεντρική βρογχίτιδα.
 Από κεντρική βρογχίτιδα βροχίτιδα, κεντρική βρογχίτιδα κεντρική
 και (από) αμυγδαλές βροχίτιδα σε κεντρική βροχίτιδα κεντρική.

Ανάλυση αίματος:
 Tot αιμ. RBC: 5,13 x 10⁶/μL, Hb: 14,8 g/dL, Hct: 43, WBC: 12,7
 x 10³/μL, PLT: 344 x 10³/μL, Καρδιόμτ 9,8, γλυκόζη 142,
 σπυρία 35 mg/dL, ουρία 123 mg/dL, κρεατινίνη 3,06, AST 242 U/L,
 ALT 44 U/L, χολερυθρίνη αιμ. 0,19, χολερυθρίνη ούρων 0,69, αλβύμ
 69 U/L, Fe ούρων 96 μg/dL, φώσφορος 47 mg/dL.



Following the logging of the symptoms using Computer software(Radar)-reperitization.



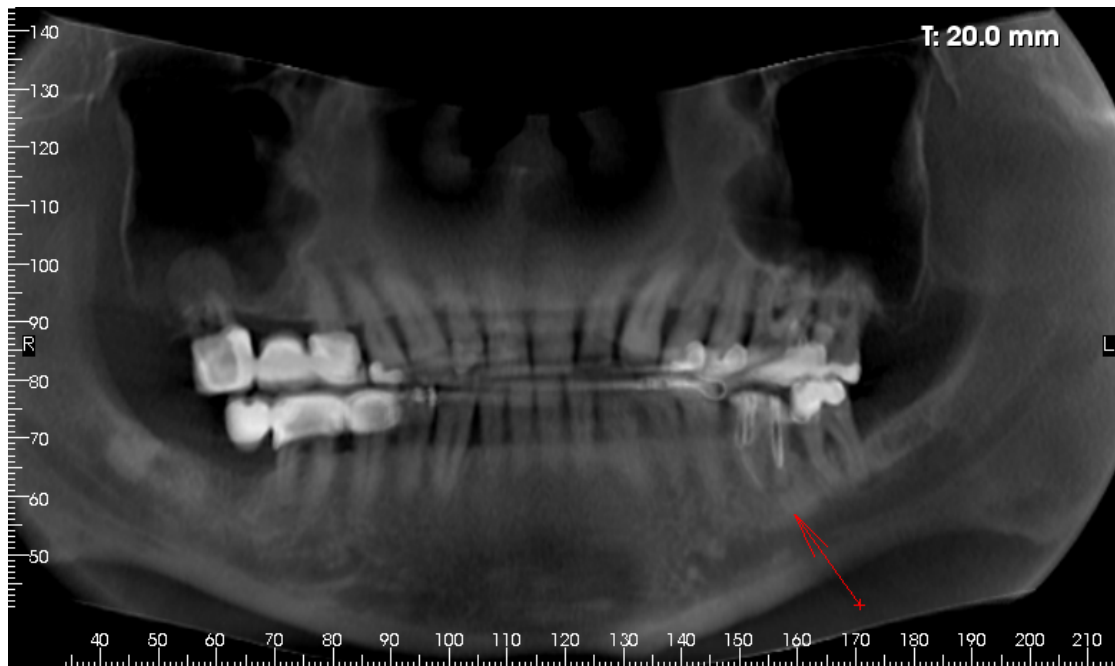
Treated:15-9-09 O. 1/day caps Causticum 30CH x 10,/ Caus.12CH x 10

27-11-09 follow up

27-1-10 O. 1/day caps mercury 30CH x2, 200CH,12CH x10.

Outcome observations: case 1 Facial muscles mobility (left side) recovered hours after receiving 1st dose of Causticum.

Case2 Peritonsillar abscess recurrent. (PTA) Man age 50y, W:88kg /H:185cm past history:
8/2006 PTA left



23-7-09 hospitalized diagnosed with PTA treated with augmentin and surgically drainage twice.

29-7-09 visited the office with PTA recurrent left.



27-9-09 xerostomia

27-1-10 shore throat left tonsil red

1-6-10 follow up

Investigation window for remedies

100% Full Synthesis.mtd copied

Clipboard 1

1. GENERALS - HISTORY; personal - tonsillitis; of recurrent (29) 4
2. THROAT - TONSILS; complaints of - left - chronic (32) 3
3. THROAT - TONSILS; complaints of (28) 3
4. THROAT - SWELLING - Tonsils - left (33) 3
5. MIND - COMMUNICATIVE (4) 3
6. MIND - JEALOUSY - loquacity, with (34) 3
7. GENERALS - FOOD and DRINKS - alcoholic drinks - desire (244) 2

287 remedies / 7 symptoms Sum of symptoms No restriction All remedies considered

Withoutukas Expert System (1 Clipboards) - BogiatzakisNikos

Large remedies Medium remedies Small remedies

lach. lichen-l-c. tritic-vg.

bat-c. ata-maca. spect.

tub. orig. vanil.

phos. hydr.c. chlorin-tr.

merc-i-r. plac. bar-f.

merc-i-f. burcel. gaul.

petr. holo-s. kali-f.

mag-c. lac-del. petr-ra.

sulph. lat-m. heroin.

hep. merc-d. taosc.

car-c. ulm-c. cisplat.

staph. fl-pur. stry-n.

calc. pegan-ha. querc.

arg-n. fer-f. ruth-met.

lac-c. am-f. quas.

alum. lith-f. am-s.

cinic. anis. kith.

ozone lycpr. agavt.

kali-s. maland. polon-met.

alum. cupr-f. astat.

kali-p. helodr-cal. hafn-met.

psor. antip. gal-s.

phyt. mag-f. caes-met.

bar-m. nat-f. thymul.

ign. x-ray

bell. ars-met.

merc. bar-met.

hov. earth-met.

rita titan-s.

Explain Close Help

- **painful:** (2) diph. syph.
- **painless:** (1) BAPT.
- **perspiration; during:** (15) ACON. am-m. apis bar-c. BELL. bry. cham. Con. lach. Merc. Nit-ac. Nuc-v. puls. sep. sulph.
- **phlegmonous:** (1) Acon. Alum. bar-c. Bell. calc. hep. Lach. Merc. Nuc-v. Sulph. thuj.
- **putrid:** (2) arist-cl. caps.
- **recurrent**
(see GENERALS - History - throat)
- **scarlet fever:** (16) acon. Ail. apis ars. Asim. Bar-c. Bell. brom. chinin-ar. kali-perm. lac-c. Lach. merc. mur-ac. Phyt. thus-t.
- **swallowing agg.:** (1) trios.
- **tubercular:** (1) bac.
- **waking on:** (3) kali-bi. Lach. mand.
- **warm bed agg.:** (2) apis coc-c.
- **weather agg.:** cold wet: (1) kali-bi.
- **winter:** (1) kali-bi.
- **extending to**
- Downwards: (1) merc.
- Larynx: (1) kali-bi.
- Nose: (2) kali-bi. Nit-ac.
- Upward: (1) merc.
- **And downward:** (1) Merc.
- **Esophagus (= esophagitis):** (36) acon. agath-a. alum. am-caust. am. ARS. asaf. bell. bufo Carb-v. cocc. euph. Gels. influ. lod. kali-sula. laur. merc. merc-c. mez. naja Nit-ac. oena. Phos. plib. RHUS-T. rob. rumx-act. sabad. Sang. sec. streptoc. sul-ac. verat. Verat-v. vesp.
- **reflux esophagitis:** (3) arg-n. sang. sulph.
- **Fauces:** (11) ail. apis Bell. cist. ferr-p. Kali-bi. mentho. merc. merc-i-f. sal-ac. vario.
- **accompanied by**
Tonsil; mucus patches on right
(see Mucous - tonsils - right - accompanied - fauces)
- **Nasopharynx**
- acute: (12) Acon. camph. cist. gels. influ. kali-bi. kali-chil. mentho. Merc-c. nat-ar. sang. wye.
- chronic: (17) am-br. aur. calc-f. elaps fago. Hydr. influ. Kali-bi. Kali-c. merc-c. nat-i. pen. sep. Spig. Stict. sulph. thuj.
- **Pharynx (= pharyngitis):** (71) acon. aesc. allox. Alum. am-c. ant-t. Apis arg-met. arg-n. ars. ars-i. arum-d. anum-m. bapt. bar-c. bar-m. bell. brom. bry. calc. canth. caps. carb-ac. cinnm. cortico. crot-h. dros. dub. dubo-m. dys. ferr-p. guaj. hed. HEP. hepat. influ. kali-bi. kali-c. kali-i. Lac-c. lach. luf-op. lyss. mangi. med. mentho. Merc. merc-c. morg-p. nat-m. nit-ac. nux-v.

Treated: 29-7-09 O. 1/day caps Lachesis 200 Ch/1M x 1

27-9-09 O 1/day caps medorhinum 200Ch x 1

27-1-10 O. 1/day caps Mercury iodadus ruber 30Ch x 4

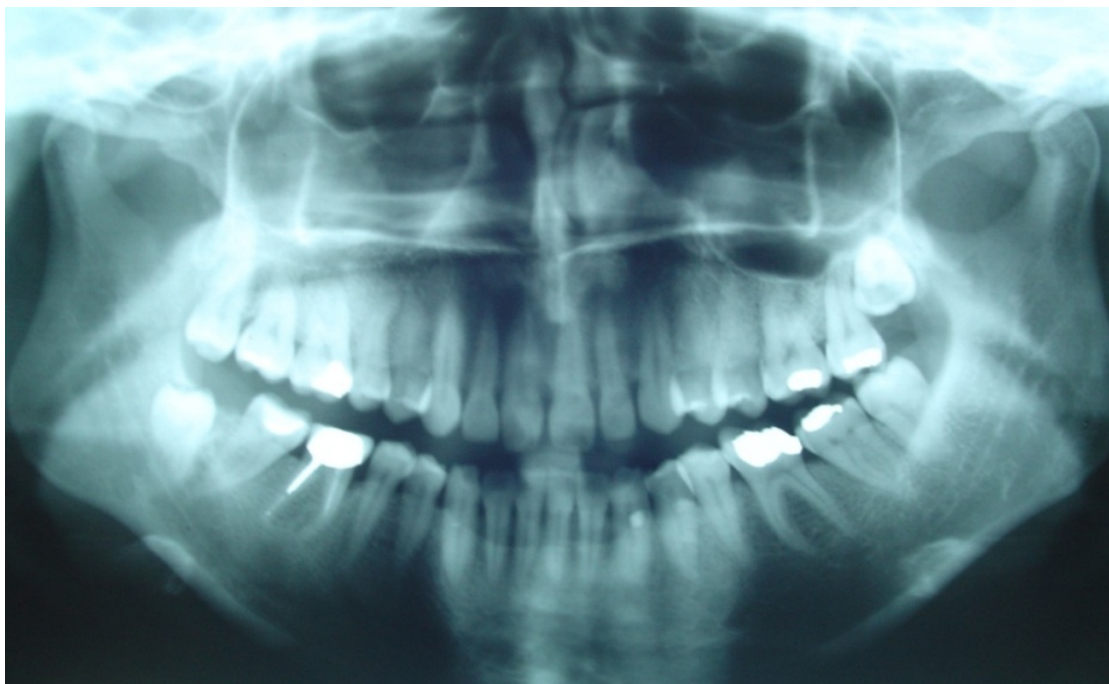
Outcome: inflammation symptoms(PTA) recovered within 48 hours

Present condition 1-6-2010 : (asymptomatic formation Distal to 37)



Clinical notes: restorations at 47,46,27&17 should be reevaluated.

Case 3 19-3-09 woman married 45kg/ H:168cm, 43Y



Conclusion: Homeopathy uses the symptoms in totality as obtained through the medical history to show up the right medicine, it works fine with rules and training standards set by ECH. Radiologists who are among the first to receive medical history, have the opportunity to inhibit the progression of inflammation into more profound structures and relief the patient, using more than 3 thousands recorded remedies in homeopathic literature since Hahnemann has discovered homeopathy back in 1810.



Q (Chairman): **Are the clinical effects of homeopathy placebo effects?**

References: Case report

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