

MONTHLY

NEWS LETTER

A two-day National conference was held recently in the last week of May in Hotel Pica Dilly in Janak Puri, New Delhi. It was the 1st edition of the Indian Chapter of the International conference LIGA. The conference was a huge success and was attended by over 400 Homoeopathic Doctors from all corners of the country. The gathering consisted of many stalwarts in the field of Homoeopathic system of medicine. A lot of scientific papers were presented showing the amazing efficacy of Homoeopathy in treating all kinds of difficult, surgical and even so called incurable diseases. Among the glorious speakers and orators, Prof. Dr. A. K. Gupta also presented "A case of Atopic Dermatitis cured with Homoeopathy." Also, Dr. Sanket Gupta presented "A case of Uterine Fibroid cured with Homoeopathy". It was a great privilege for AKGsOVIHAMS as the Father-Son duo were widely appreciated and lauded for showing such remarkable results in these difficult cases.





In this issue we are discussing about *Haemorrhoids*, commonly called Piles. It is a condition seen very commonly these days in people who lead a sedentary lifestyle. It is more important to know about the prevention of Piles and how to manage the lifestyle in order to get rid of this problem with the help of Homoeopathy.

There are times when we all feel nothing is going right in our life, nothing is working out according to our wish and we feel miserable or helpless. But certain individuals become so frustrated with the happenings around them and the turmoil inside their heads that they impulsively try to kill themselves. *Suicide* is a sensitive issue which is being taken up this time in our section "Mind the Mind."



first degree piles

second degree piles

external pile

rectum

anus

anal cushions

third degree piles

fourth degree piles

Dr. Sanket Gupta, MD, PGCPC(Cardiology)

HAEMORRHOIDS (PILES)

WHAT

- A condition where the vascular structure of the anal canal become swollen or inflamed
- Piles may be (a) Internal or (b) External

ETIOLOGY / CAUSES

Exact cause is unknown, though a number of factors are believed to play a role:-

- Irregular bowel habits (constipation or diarrhoea)
- Lack of exercise
- Low fibre diets
- Increased intra-abdominal pressure due to prolonged straining, ascites, an intraabdominal mass or pregnancy
- Genetic absence of valves within the haemorrhoidal veins
- Aging
- Obesity
- Prolonged sitting
- Chronic cough
- Pelvic floor dysfunction

INVESTIGATIONS

- Haemorrhoids are typically diagnosed by visual physical examination. Examination of the rectum and anus on the outside tells us whether it's a haemorrhoid or a polyp or a tumour
- The inside of the anal canal is examined with the help of a device called anoscope or proctoscope, it's a tube with light attached to the end of the tube.

SIGNS & SYMPTOMS

- a) Internal Piles: Usually painless, Bright red rectal bleeding during or following a bowel movement. Blood typically covers the stool or drips into the vessel. Stool is usually normally coloured. Other symptoms may include mucous discharge, perianal mass if they prolapse through the anus, itching and faecal incontinence. Internal haemorrhoids are usually only painful when they become thrombotic or necrotic.
- b) External Piles: When thrombosed, external piles may be very painful. This pain typically resolves within 2-3 days. The swelling however may take few weeks to disappear completely. A skin tag may remain after healing. Itching is also experienced.

WHAT CAN YOU DO

- Avoid straining while defecating
- Eat high fibre diet to avoid constipation
- Drink plenty of water and fluids
- Avoid prolonged sitting and do sufficient physical exercises
- Avoid heavy lifting; avoid reading in toilet





Founder-Director AKGsOVIHAMS, Gold Medallist

PILES are CURABLE WITHOUT SURGERY

Another condition which is rampant these days and falls into the so-called category of "surgical diseases" is Haemorrhoids or Piles, as commonly known. I call it so-called surgical disease, because this is one such condition where surgery must not be done. A haemorrhoid—is a result of dilatation of the rectal plexus veins. When these veins engorge to such an extent that they start intruding the anal passage or anal canal, it becomes a haemorrhoid. Any pressure or strain exerted on these engorged veins injures the plexus and results in excruciating pain and even bleeding in most cases along with stool. Modern medicine has only mechanical ways to treat this problem either by rubber banding, or surgical removal. Moreover, after surgery the rectal plexus becomes so sensitive and vulnerable that with a span of few months itself, the haemorrhoids reappear and this time even more vigorously, thus adding to the agony of the poor patient.

Homoeopathy on the other hand, being a science that roots out the cause to bring cure, has sure short treatment to treat these piles successfully without any surgical intervention. Patients, who develop piles, have usually been seen to have a chronic constipation trouble or a family history of piles in either of the parents. This is where the efficacy of Homoeopathy comes into the picture. Homoeopathy being a medical system with an individualistic approach treats the person as a whole. The patient is treated constitutionally keeping in mind the cause of the pile and thus without any surgical intervention or mechanical aid, it is seen that the swelling recedes to a mere minimum and becomes completely absent in gradual time period.

The important thing to understand is to follow the dos and don'ts. Anything that brings a hindrance to cure, must be avoided, like in case of piles, constipation must be avoided. And that can be done by drinking plenty of water, eating high roughage diet, maintaining a physical activity routine, etc.

Some of the very useful Homoeopathic remedies helpful in case of Haemorrhoids are Aesculus, Arsenic Album, Aloes, Bryonia, Collinsonia, Hammemelis, Lachesis, Millelifoloium, Nux Vomica, Sulphur, etc.

MARVEL OF HOMOEOPATHY

This was one of the most challenging cases of Haemorrhoids (or Piles) which came to Prof Dr. A. K. Gupta in the year 1997. A gentleman named Mr. A.T came with severe pain in his anal region, so much so that it was impossible for him to even sit on the examination stool. The pain was excruciating in nature and the poor fellow had been suffering like this since a month. Dr. Gupta examined him thoroughly. The patient had not passed stool since many days and was becoming weak also. These were non-bleeding piles.

The picture below was taken on his first visit to Dr. A. K. Gupta.



Dr. Gupta took the entire case thoroughly and gave him a few doses of Aloes 200. He was asked to show up again after a week. Within 2-3 days itself the pain started reducing and the patient could begin to sit now. By the 5th day he passed some stool. After a week he went again to see Dr. Gupta for his follow-up. Seeing good speed of improvement Dr. Gupta repeated the same medicine. Considerable and gradual improvements were now being seen in almost all his complaints. The swelling also went down within 1 month and the patient had become pain free. A classical case of Surgical External piles was saved from the surgeon's scalpel and patient was completely cured by the end of 2 months of treatment with Homoeopathy.

This picture was taken on his last follow up after being completely cured.



This is the Marvel of Homoeopathy



MIND the MIND



KAARTIK GUPTA, M.Sc (Cl. Psych)

In the previous edition, we discussed about clinical depression, its symptoms and how we can overcome it. Carrying on from there, we'll talk about suicide which is closely related to depression and needs to be addressed as early as possible. Although people do commit suicide for reasons other than depression, the rate is significantly higher in people with the illness. In this edition, we would help you get a better understanding about suicide, some of the common misconceptions related to it and its warning signs, and in the next edition we would suggest ways of providing help for crisis intervention.

UNDERSTANDING SUICIDE

The World Health Organization estimates that approximately 1 million people die each year from suicide. Suicide is a desperate attempt to escape suffering that has become unbearable. Blinded by feelings of self-loathing, hopelessness, and isolation, a suicidal person can't see any way of finding relief except through death. Most people who commit suicide don't want to die—they just want to stop hurting. They wish there was an alternative to committing suicide, but they just can't see one.

MISCONCEPTIONS ABOUT SUICIDE

FALSE: People who talk about suicide won't really do it.

Almost everyone who commits or attempts suicide has given some clue or warning. Do not ignore suicide threats. Statements like "you'll be sorry when I'm dead," "I can't see any way out," — no matter how casually or jokingly said may indicate serious suicidal feelings.

FALSE: Anyone who tries to kill him/herself must be crazy.

Most suicidal people are not psychotic or insane. They must be upset, grief-stricken, depressed or despairing, but extreme distress and emotional pain are not necessarily signs of mental illness.

FALSE: If a person is determined to kill him/herself, nothing is going to stop them.

Even the most severely depressed person has mixed feelings about death, wavering until the very last moment between wanting to live and wanting to die. Most suicidal people do not want death; they want the pain to stop. The impulse to end it all, however overpowering, does not last forever.

FALSE: People who commit suicide are people who were unwilling to seek help.

Studies of suicide victims have shown that more than half had sought medical help in the six months prior to their deaths.

FALSE: Talking about suicide may give someone the idea.

You don't give a suicidal person morbid ideas by talking about suicide. The opposite is true — bringing up the subject of suicide and discussing it openly is one of the most helpful things you can do.

Source: SAVE - Suicide Awareness Voices of Education

WARNING SIGNS OF SUICIDE

Suicide prevention begins with identifying the warning signs and taking them seriously. Most suicidal individuals give warning signs or signals of their intentions. The best way to prevent suicide is to recognize these warning signs and know how to respond if you spot them. If you believe that a friend or family member is suicidal, you can play a role in suicide prevention by pointing out the alternatives, showing that you care, and getting a doctor or psychologist involved.

Some of the major warning signs for suicide could be:-

- Talking about suicide or harming oneself; reading about ways to commit suicide or writing poems or stories about death.
- > Talking or seeking out lethal weapons like knives, pills, guns, or any other object that could be used in a suicide attempt.
- > Expressing strong feelings of hopelessness either verbally or in terms of one's actions like not engaging in previously exciting and enjoyable activities; having a bleak outlook towards the future; statements like "Everyone would be better off without me"
- > Sudden change in the person's behaviour and personality; withdrawing from people; drawing out a will or setting things in order; a sudden sense of calm and happiness after being extremely depressed could mean that the person has made a decision to commit suicide.

If you spot any of these signs in your dear ones just talk to them and let the person know that you care. The right words are often not important; if you are concerned your voice and manner will show it.



Genes behind food preferences may aid weight loss and disease prevention

Researchers from Italy have begun to identify the genetic mechanisms behind taste perception and food preferences, which they say could open the doors for personalized nutrition plans that could not only be effective for weight loss, but also for disease prevention.

According to the investigators, an understanding of why people prefer tastes of certain foods and the ability to create a personalized eating plan will lead to healthier aging and a better overall quality of life.

The researchers identified 17 genes that were associated with a preference for specific foods, including bacon, artichokes, coffee, dark chocolate, blue cheese, chicory, ice cream, liver, oil or butter on bread, orange juice, plain yogurt, white wine and mushrooms. The team was surprised to find that none of these genes were associated with those related to smell or taste receptors.

Latest at AKGsOVIHAMS

• Dr. A. K. Gupta will be travelling out of country between 9th to 23rd July for an International conference in Paris. He will be presenting his paper on 19th July about "A case of Gullian Berre Syndrome (G.B.Syndrome) cured with Homoeopathy" in that conference.

DID YOU KNOW?

Don't skip breakfast - Studies show that eating a proper breakfast is one of the most positive things you can do if you are trying to lose weight. Breakfast skippers tend to gain weight. A balanced breakfast includes fresh fruit or fruit juice, a high-fibre breakfast cereal, low-fat milk or yoghurt, whole-wheat toast, and a boiled egg.

LAUGHTER IS THE BEST MEDICINE



A man suffered a serious heart attack and consequently had a quadruple heart bypass surgery. He woke up to find that he was in the care of nuns at a catholic hospital. When he had recovered sufficiently a nun began to ask him questions as to how he was going to pay for the treatment he has had.

The nun asked..."Do you have health insurance?"

The patient replied in a raspy voice...."No health insurance..."

The nun asked"Do you have money in the bank?"

The patient replied..."No money in the bank."

Somewhat impatient the nun asked..."Do you have a relative who will be willing to help you settle the account for your treatment?"

The patient replied..."I only have a spinster sister who is a nun."

The nun became agitated and announced loudly... "Nuns are not spinsters! They are married to God."

The patient retorted..." Then send the bill to my brother in law."

ATOPIC DERMATITIS TAENIA EPIDERMOLYSIS BULLOSA

AKGS OVIHAMS HOMOEOPATHIC CLINICS

(Accredited in LIMCA Book of Records; Global Healthcare Excellence Awardee)

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