



HOMOEEO श्री

An effort by Narayan shree Homoeopathic Medical College, Hospital & Research Centre, Bhopal

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Editorial



Dr. Rajee Jain
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My all respected readers,

In an era defined by rapid technological advancement & evolving medical paradigms. As Homoeopathy continues to stand as a gentle yet powerful system & healing-Rooted in the timeless principle of "Similia similibus curentur" As we present this 86th Edition issue of Homoeo- Shree. It is both a moment & reflection & a call to renewed commitment towards holistic health care.

I am truly appreciative to esteemed editorial board honorable Principal Dr. R.S. Agrawal Sir for giving me opportunity to serve as Associate Editor of Homoeo-Shree. I wish to express my sincere appreciation to editorial board Chief Editor Dr. Sandeep Jha Sir for their guidance & valuable contribution in this publication. I am profoundly Thankful to Co-Editor Dr. Sandeep Sharma Sir & all faculty members who illuminate the path to successful release & this edition.

Equally important is the role of education & research as practitioner & students we must strive to deepen our understanding, engage in evidence based practices & contribute to the scientific validation of our system. The future of Homoeopathy depends not only on into rich legacy but also on our dedication to innovation & excellence.

As you explore the articles, case studies & insights on this issue, we hope you find inspiration, knowledge & a renewed sense of purpose. Let us continue to uphold the values and compassion, integrity & scientific curiosity that defines Homoeopathy.

Together let us shape a healthier future naturally & holistically.

Warm regards from,

Editorial Board Homoe-Shree

NSHMC, Bhopal



Dr. Rajee Jain
HOD & Professor
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WEIGHT GAIN IN MENOPAUSE ITS HOMOEOPATHIC MANAGEMENT

Menopause is the permanent cessation of menses due to decline in ovarian function. Which is one of the most common complaints weight gain particularly around the abdomen.

Pre menopause is transition phase before menopause usually occurring between 40-50 years & age. During this period hormonal fluctuations especially decreased oestrogen & progesterone-leads to various physical, mental & emotional symptoms. Homoeopathy offers a holistic & individualized approach to manage these symptoms safely & naturally.

- Common Symptoms & Pre Menopause Age:- Irregular Menstrual Cycle, Scaly or profuse bleeding, Delayed or early menses, Dysmenorrhea
- Vasomotor Symptoms:- Hot Flashes, Night Sweats, Flushing of Face, Palpitation
- Psychological Symptoms:- Mood swings, Anxiety, Depression, Irritability, Weeping Tendency
- General Symptoms:-Headache, Insomnia, Weight gain, Decreased Libido, Vaginal Dryness
- Associate Symptoms:- Water Retention, Mood Swings, Joint Pain, Fatigue, Irritability, Increase Abdominal Fat

- Causes of weight gain in Menopause:-

Hormonal changes - Increase estrogen, slow metabolism

Increase Physical Activity - Due to fatigue/joint pain

Emotional Factors - Stress, anxiety, depression

Sleep Disturbance - Insomniac affects metabolism

Age Related Metabolic - Slow Down

- Indicated Medicine:-
- Sepia Officinalis :-Increase weigh gain, Hot flashes with perspiration, Bearing down sensation in Uterus, Irritability, indifferent to family
- Lachesis :- Increase weight with hot flashes, Talkative suspicious, temperament symptoms worse after sleep, Cannot tolerate tight clothes around neck/waist
- Pulse Nigricans-Irregular, delayed, scanty menses, mild emotional weepy patient better in open air
- Cale Carb :- Profuse menses, Easy fatigue, Anxiety about health obesity & excessive sweating profusely menses before menopause
- Nat. Mur :- Reserved Personality, Suppressed emotions increase weight gain due to emotional stress, Headache with hormonal changes
- Ignatia :-Silent grief, mood swings, emotional disturbance

- Graphitis

Graphitis obesity with constipation, dry skin, tendency for delayed menses.

- Sulphur:- Central Obesity, Heat & burning sensation, Lazy but intellectual type
- Advantage of Homoeopathic Treatment :-Natural & gentle, No hormonal side effect, Individual Treatment, Increase Metabolic balance.



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ROLE OF HOMOEOPATHY IN URINARY TRACT INFECTION (UTI)

Urinary Tract Infection (UTI) is a common bacterial infection, particularly prevalent among females. Although antibiotics are the mainstay of conventional treatment, they often result in antibiotic resistance and frequent recurrence. Homoeopathy offers a holistic, individualized, and

side-effect-free approach that not only alleviates acute symptoms but also prevents recurrence by enhancing the body's natural defense mechanism.

INTRODUCTION

A Urinary Tract Infection (UTI) is an infection of any part of the urinary system - kidneys, ureters, bladder, or urethra. The majority of cases are caused by Escherichia coli and Klebsiella species.

Predisposing factors include poor hygiene practices,

diabetes mellitus, urinary stones, prolonged catheterization, suppression of urinary urge, low immunity and stress.

Clinical features include burning micturition, frequency and urgency of urination, lower abdominal pain, cloudy or offensive urine, and fever with chills in severe cases.

HOMOEOPATHIC PERSPECTIVE

In Homoeopathy, disease is viewed as an expression of internal imbalance. UTI is not only a local infection but a manifestation of the individual's susceptibility. Treatment focuses on totality of symptoms rather than the name of the disease.

The aim of treatment is to relieve acute symptoms, eradicate the tendency for recurrence, improve vitality, and restore balance at both mental and physical levels.

COMMONLY INDICATED REMEDIES IN UTI

- Cantharis vesicatoria - Severe burning before, during,

and after urination; constant urge to urinate; urine passed drop by drop.

- Apis mellifica - Burning and stinging pains; scanty, dark urine; oedema; worse from heat, better from cold applications.
- Sarsaparilla - Intense pain at the end of urination; sandy or gravel-like deposits in urine.
- Nux vomica - Frequent ineffectual urging; burning and spasmodic pain; worse after anger or alcohol.
- Berberis vulgaris - Radiating pain from kidneys to bladder; sensation as if urine remained after voiding.
- Sepia officinalis - Recurrent UTI in women; bearing-down sensation; hormonal association.
- Pulsatilla nigricans - Mild temperament; no thirst; symptoms changeable; worse in warmth, better in open air.

LIVE CASE

A 28-year-old female presented with burning urination, frequency, and pain in the lower abdomen. She had taken multiple antibiotic courses with temporary relief. After case analysis, Cantharis 200C was prescribed thrice daily for two days, followed by Sepia 30C once daily for 10 days. Marked improvement was seen within three days. The patient remained symptom-free for six months without recurrence.

DISCUSSION

Homoeopathic management of UTI focuses on the root cause and susceptibility rather than merely treating the infection. It enhances the patient's resistance and prevents recurrence. Unlike antibiotics, Homoeopathic remedies are non-toxic and safe for all age groups.

Integrative management with hydration, hygiene, and medical supervision can further optimize outcomes.

CONCLUSION

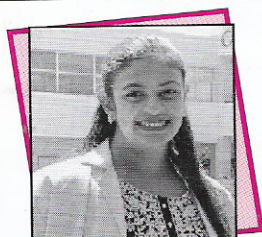
Homoeopathy offers a safe, gentle, and curative approach in the management of UTI. It provides symptomatic relief while addressing the underlying predisposition. Clinical observations suggest its valuable role in both acute and recurrent urinary infections. Further research is required to validate its efficacy through controlled studies.

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ENDOCRINOLOGY AND HOMOEOPATHY

The 2 branches which seem apart, but lies very much aligned with each other are Homoeopathy and Endocrinology. First being first, Endocrinology stands for the system of glands and hormones which regulate the metabolism and growth in body. Whereas, Homoeopathy is the branch of medical science which

stands on 2 broad principles, "Like cures like" and "Law of infinitesimals".

To be a good endocrinologist, it is necessary to have:

1. A thorough knowledge of the anatomical structure and arrangement of the Autonomic Nervous system.
2. Comprehension of the function of endocrine glands.
3. A knowledge that maintenance of functional balance of parasympathetic and sympathetic nervous system is influenced by internal secretions of ductless glands which governs it.

As we very well comprehend, that endocrinology works in a way where the chemical secretions in the most minute form

are secreted from their respective glands and are capable of stimulating the entire Human Organism: and so is Homoeopathy, where the most minimum dose of the remedy holds capability to stimulate the human body or more specifically the Vital force. So, believing that how Homeopathy works wonders, is the same way how hormones create wonders in a human organism.

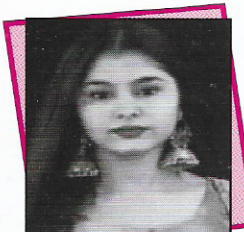
The broadest role of Homoeopathic drugs is widely seen in some of the major Endocrine disorders, where the modern medical science only manages the situation, we the Homoeopaths hold the capability to give permanent cure in majority of the cases. The diseases like PCOS which accounts for more than 30-40% females affected by it severely, have such a brilliant cure in our system. Diabetes - which is just a managing condition for modern science, but it can be very markedly treated with Homeopathy. Thyroid - which accounts so many cases worldwide, has such an amazing cure in Homeopathy.

DISEASE NAME	COMMON CONSTITUTIONAL REMEDIES
1. Thyroid	Calcarea carb, Lycopodium, Nat mur, Sepia
2. PCOS	Pulsatilla, Lachesis, Sepia, Graphitis, Calc carb
3. Diabetes Type 2	Phosphoric acid, Nat mur, Phosphorus, Lyco.

We know the disease, we know the medicines, we know the effect; but still where are we lacking? This is the question every Homeopath should ask themselves. We lack in the APPLICATION. The need is to apply the knowledge, the needs is to trust the Application, and the need is to attempt the application. This will remove the lack and bring glory to us, to the system! Trusting the power of our very own system is what every person connected to Homoeopathy needs. Our resources are far greater than those of Modern science. We have even proved them to be potent in varying range of attenuations.

Our remedies will not upset the balance of endocrine secretions because the similimum will fit the demands of the system, without stimulating too much and maintaining a secure balance. So get up and set yourself. Study as much as you can, Read - Understand - and Apply, apply and apply!

Reference: The Principles and Art and Cure by Homoeopathy - H.A.Roberts.



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SURROGATE REMEDY IN HOMEOPATHY: CONCEPT, APPLICATION AND CLINICAL RELEVANCE

ABSTRACT

The concept of the surrogate remedy occupies a subtle yet significant place in homeopathic practice. In certain clinical situations, the physician may not be able to prescribe the true similimum due to limitations in

case expression, patient sensitivity, pathological dominance, or external constraints. In such circumstances, a surrogate remedy-selected to temporarily support the patient and restore balance-may be judiciously employed. This article explores the meaning, philosophical basis, indications, scope, and limitations of surrogate remedies in homeopathy, with emphasis on their rational and ethical use in clinical practice.

KEYWORDS: Surrogate remedy, Simillimum, Homeopathic philosophy, Clinical prescribing, Therapeutic support.

INTRODUCTION

Homeopathy is founded on the principle of Similia Similibus Curentur, aiming to identify and prescribe the single, most similar remedy-the similimum-based on the totality of symptoms. However, in real-world practice, ideal case-taking and remedy selection may not always be immediately possible. Patients may present with fragmentary symptoms, suppressed disease states, advanced pathology, or acute distress requiring prompt intervention. In such situations, the concept of the surrogate remedy emerges as a pragmatic clinical tool. Rather than replacing the similimum, the surrogate remedy acts as a temporary therapeutic support, helping the organism regain a level of balance until a clearer picture of the case evolves.

CONCEPT OF SURROGATE REMEDY

A surrogate remedy may be defined as a homeopathic medicine prescribed not as the final similimum, but as an interim remedy chosen to:

- Palliate distressing symptoms
- Remove obstacles to cure
- Improve reactivity and vitality
- Clarify the symptom picture for future prescribing

The surrogate remedy is not a substitute for classical homeopathy, but a strategic step within its broader framework.

PHILOSOPHICAL BASIS

From an Organon perspective, Hahnemann emphasized individualization, careful observation, and avoidance of rigid dogmatism. Aphorisms addressing acute disease, accessory circumstances, and obstacles to cure indirectly support the judicious use of interim measures when the similimum is not immediately perceptible.

The surrogate remedy aligns with:

- The physician's duty to relieve suffering
- The principle of minimum intervention
- Respect for the patient's current state of vitality

When used thoughtfully, it remains consistent with homeopathic philosophy rather than contradicting it.

Indications for Use of a Surrogate Remedy

Surrogate remedies may be considered in the following situations:

1. Incomplete Case-Taking - When patients are unable to express symptoms clearly (infants, elderly, unconscious, or emotionally withdrawn patients).
2. Acute Crisis on Chronic Background - When an acute condition dominates and requires immediate attention before chronic prescribing.
3. Advanced Pathology - When structural changes overshadow characteristic symptoms, limiting individualization.
4. Low Vitality or Poor Reactivity - When the patient fails to respond to well-indicated remedies due to exhaustion or suppression.
5. Obstacles to Cure - When maintaining causes such as lifestyle factors or drug suppression interfere with action of the similimum.

Selection of a Surrogate Remedy

The choice of a surrogate remedy should be guided by:

- Presenting symptom totality (especially common or pathological symptoms)
- Organ affinity and sphere of action
- Miasmatic background

● Patient sensitivity and vitality

Common examples include remedies prescribed on pathological generals, organ support, or keynote indications. The selection must remain individualized and cautious, avoiding routine or protocol-based prescribing.

CLINICAL APPLICATION

Case 1: Acute on Chronic

A middle-aged female with chronic migraine experienced a sudden severe headache. A carefully selected surrogate remedy provided rapid relief, allowing the continuation of her constitutional treatment.

Case 2: Low Vitality

An elderly male with chronic respiratory illness showed weak response to indicated remedies. The surrogate remedy improved his vitality and clarified symptoms, enabling accurate prescribing.

Case 3: Pathology-Dominated

A patient with advanced osteoarthritis presented mainly with structural symptoms. Surrogate remedy alleviated pain and enhanced mobility, facilitating subsequent individualized treatment.

Case 4: Use of Nosode

A young adult with recurrent tonsillitis showed persistent symptoms despite constitutional treatment. A nosode prepared from the causative infection was prescribed as a surrogate remedy, resulting in reduced frequency and severity of episodes, while preparing the system for subsequent deeper constitutional management.

Advantages of Surrogate Remedy Use

- Immediate relief of suffering
- Prevention of unnecessary aggravation
- Enhanced patient compliance
- Gradual unfolding of the symptom picture

Limitations and Cautions

Despite its usefulness, surrogate remedy prescribing carries potential risks:

- Delay in identifying the true simillimum
- Tendency toward symptomatic or routine prescribing
- Confusion between palliation and cure

Therefore, the surrogate remedy should always be:

- Used for a limited duration
- Regularly re-evaluated
- Followed by careful case reassessment

Ethical Considerations

The homeopathic physician must balance philosophical purity with clinical responsibility. The surrogate remedy should never be used as a shortcut or replacement for thorough case analysis. Transparency, documentation, and patient-centered decision-making are essential.

Conclusion

The surrogate remedy represents a flexible yet responsible approach within homeopathic practice. When used judiciously, it supports the patient during challenging phases of illness and facilitates the eventual discovery of the simillimum. Its value lies not in routine use, but in thoughtful application guided by sound philosophy, clinical judgment, and continual observation.

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MATERIA PECCANS

ABSTRACT -

It is a Latin term used in the 18th century. It means - Material Cause of disease or offending matter. In early days of medicines believed that disease was caused by some harmful substances inside the body. They thought that removing this so-called bad

material like-Blood, Pus or mucus would cure the disease but homeopathy sees diseases very differently. In homeopathy, disease is not caused by any material substance by a disturbance in the body's life energy, known as the vital force.

Example-

People once believed that having too much blood in the body caused disease. so, they practiced things like blood letting to treat patient. They treated disease as something separate from the person's inner vitality, But homeopathy

MATERIA PECCANS

says this belief is incomplete & even harmful.

Key Words- Harmful Substance, Vital Force, Health and disease.

Homeopathic View -

Aphorism 11-15 - Hahnemann emphasizes that diseases are dynamic disturbances not material.

Aphorism 203- Mentions material Peccans in the context of the danger of treating symptoms without understanding the deeper miasmatic cause.

Hahnemann strongly criticized the materia Peccans theory. He said. "The old school of medicine believed it might cure disease in a direct manner by removing the imaginary material cause of the disease".

According to Homeopathy -

Disease starts with a disturbance in the vital force not any harmful material. True healing comes from restoring balance in the vital force not just removing physical substance.

Example-

Two people are exposed to the same bacteria one falls sick & the other remains healthy. why?

Because the second person has a strong vital force that resists the disease. so, it's not the bacteria alone, but the internal state of the body that really matters.

Modern science also agrees-

A healthy immune system can prevent disease even when exposed to harmful microbes.

Conclusion - The belief in Materia Peccans is outdated. It sees diseases as a lump of matter to be removed.

But homeopathy goes deeper and it focuses on the vital

force, on understanding the whole person & on using dynamic remedies to restore health from the inside out. This shift in thinking is what makes homeopathy unique, gentle & truly holistic.

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Common Summer Ailments in India and Their Management: A Review

Abstract

Summer in India is characterized by extreme temperatures, often exceeding 40°C, which predispose individuals to a variety of heat-related and infectious conditions. These ailments, ranging from dehydration and heat stroke to gastrointestinal infections and dermatological

conditions, contribute significantly to seasonal morbidity. This review outlines the common summer-related health conditions in India, their clinical presentation, management strategies, and preventive measures. Emphasis is placed on epidemiological trends, community awareness, early recognition, and cost-effective interventions to reduce disease burden.

Keywords: Summer illnesses, heat stroke, dehydration, gastroenteritis, food poisoning, prickly heat, India, seasonal diseases

Introduction

India's tropical and subtropical climate exposes its population to intense summer heat, particularly between March and June. Temperatures frequently exceed 40°C in several regions, contributing to increased morbidity and mortality during heatwaves (1). High ambient temperatures, coupled with humidity and challenges in sanitation, create favorable conditions for both non-communicable and communicable diseases. Vulnerable populations-including children, the elderly, outdoor workers, and individuals with chronic illnesses-are at increased risk (2).

Heat-Related Illnesses

Heat Exhaustion and Heat Stroke

Heat-related illnesses exist on a spectrum ranging from mild heat exhaustion to life-threatening heat stroke.

Clinical Features:

Heat exhaustion presents with profuse sweating, weakness, dizziness, nausea, headache, and tachycardia. Heat stroke is characterized by core body temperature >40°C, altered mental status, and possible organ dysfunction (3).

Management:

- Immediate cooling (shade, air conditioning)
- Removal of excess clothing
- Oral or intravenous rehydration

- Cold compresses or evaporative cooling
- Heat stroke requires emergency hospitalization and intensive care monitoring

Prevention:

- Avoid outdoor activity during peak heat hours (12-4 PM)
- Adequate hydration
- Use of protective clothing and headgear

Dehydration

Overview

Dehydration occurs due to excessive fluid loss through sweating and inadequate intake, leading to electrolyte imbalance.

Clinical Features:

Thirst, dry mucous membranes, fatigue, reduced urine output, dizziness, and headache.

Management:

- Oral Rehydration Solution (ORS) as per WHO guidelines
- Increased fluid intake (water, coconut water, buttermilk)
- Intravenous fluids in severe cases

Prevention:

- Regular fluid intake (2-3 liters/day minimum)
- Consumption of water-rich foods (fruits, vegetables)

Gastrointestinal Infections

Gastroenteritis

High temperatures promote microbial growth, increasing the incidence of food- and water-borne diseases. Diarrheal diseases remain a leading cause of morbidity in India, particularly during summer months (4).

Clinical Features:

Diarrhea, vomiting, abdominal cramps, fever, dehydration.

Management:

- ORS and electrolyte replacement
- Zinc supplementation (especially in children)
- Antibiotics only in indicated bacterial infections

Prevention:

- Safe drinking water
- Proper sanitation and hygiene
- Handwashing practices

Food Poisoning

Overview:

Consumption of contaminated or improperly stored food leads to acute gastrointestinal illness.

Clinical Features:

Nausea, vomiting, diarrhea, abdominal pain, fever.

Management:

- Supportive care
- Hydration
- Medical intervention in severe cases

Prevention:

- Consumption of freshly prepared food
- Proper refrigeration and storage

Dermatological Conditions**Prickly Heat (Miliaria)**

Caused by obstruction of sweat ducts, commonly seen in hot and humid environments.

Clinical Features:

Erythematous papules, itching, and prickling sensation.

Management:

- Cooling measures
- Calamine lotion
- Keeping skin dry

Prevention:

- Loose cotton clothing
- Avoid excessive sweating

Sunburn and Fungal Infections**Clinical Features:**

- Sunburn: erythema, pain, peeling
- Fungal infections: itching, rash, scaling

Management:

- Topical soothing agents (e.g., aloe vera)
- Antifungal creams (clotrimazole, terbinafine)

Prevention:

- Sunscreen use (SPF 30)
- Personal hygiene and dryness

Ocular Conditions**Conjunctivitis**

Hot, dusty environments increase susceptibility to eye infections.

Clinical Features:

Redness, irritation, discharge, watering.

Management:

- Topical medications (as prescribed)
- Eye hygiene

Prevention:

- Avoid touching eyes
- Hand hygiene

Public Health Strategies in India

India has implemented several measures to combat summer-related illnesses:

- Heat Action Plans (e.g., Ahmedabad model) to reduce heatwave mortality (5)
- Public awareness campaigns on hydration and heat avoidance
- Role of community health workers (ASHA) in early identification
- Improved access to safe drinking water and sanitation

Summary Table

Condition	Key Symptoms	First-line Management	Prevention
Heat Stroke	High temp, confusion	Cooling, IV fluids	Avoid heat exposure
Dehydration	Thirst, low urine	ORS	Hydration
Gastroenteritis	Diarrhea	ORS, zinc	Hygiene
Prickly Heat	Rash, itching	Calamine	Loose clothing
Conjunctivitis	Red eyes	Eye drops	Hygiene

Clinical Management Flowcharts**1. Heat Stroke Management Flow****Suspected Heat Stroke ?**

- Core temperature >40°C + altered mental status

Immediate Actions ?

- Shift to shaded/cool area
- Remove excess clothing

Rapid Cooling ?

- Cold sponging / ice packs (neck, axilla, groin)
- Evaporative cooling (spray + fan)

Supportive Care ?

- IV fluids (normal saline)
- Monitor vitals, urine output

Severe Cases ?

- ICU admission
- Manage complications (renal failure, DIC)

2. ORS and Dehydration Management Flow**Patient with Dehydration ?**

- Assess severity (mild / moderate / severe)

Mild-Moderate ?

- ORS (WHO formula)
- Continue feeding (especially children)

Severe Dehydration ?

- IV fluids (Ringer lactate / NS)
- Hospital referral

Monitoring ?

- Urine output
- Mental status
- Electrolytes (if available)

3. Acute Gastroenteritis Management Flow**Diarrhea ± Vomiting ?**

- Assess dehydration

No/Mild Dehydration ?

- ORS + zinc
- Light diet

Moderate/Severe ?

- IV fluids
- Stool evaluation (if indicated)

Red Flags ?

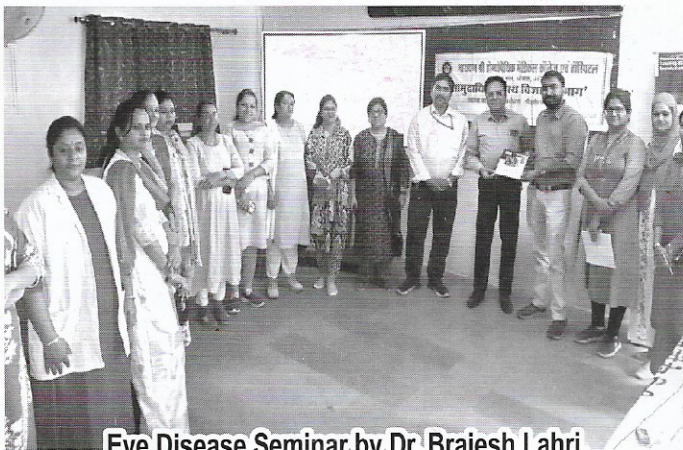
- Blood in stool
 - Persistent vomiting
 - High fever ? Consider antibiotics / hospitalization
- | Heat Stroke | High temp, confusion | Cooling, IV fluids |
 Avoid heat exposure || Dehydration | Thirst, low urine |
 ORS | Hydration || Gastroenteritis | Diarrhea | ORS, zinc |
 Hygiene || Prickly Heat | Rash, itching | Calamine | Loose clothing ||
 Conjunctivitis | Red eyes | Eye drops | Hygiene

Discussion

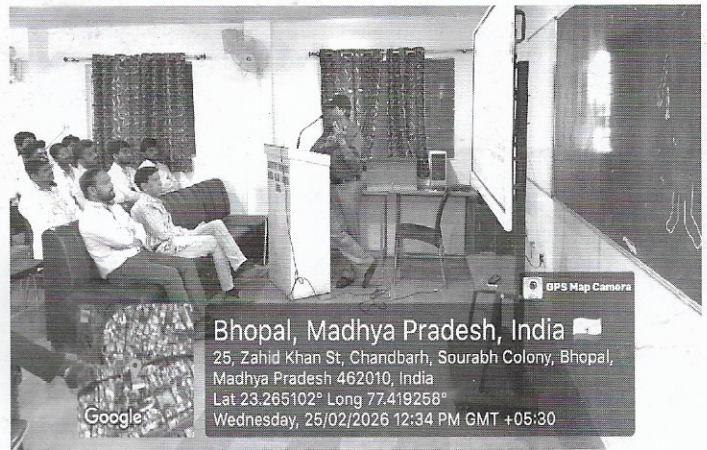
Summer-related illnesses in India are largely preventable. Rising temperatures due to climate change and urban heat island effects are increasing the frequency and severity of heatwaves (1). Strengthening public health systems, improving awareness, and ensuring early intervention are crucial.

Conclusion

The burden of summer-related illnesses in India highlights the need for increased awareness and preventive strategies. Early recognition, appropriate management, and adherence to simple preventive measures can mitigate their impact. Strengthening public health initiatives and promoting behavioral changes remain key to reducing seasonal morbidity.



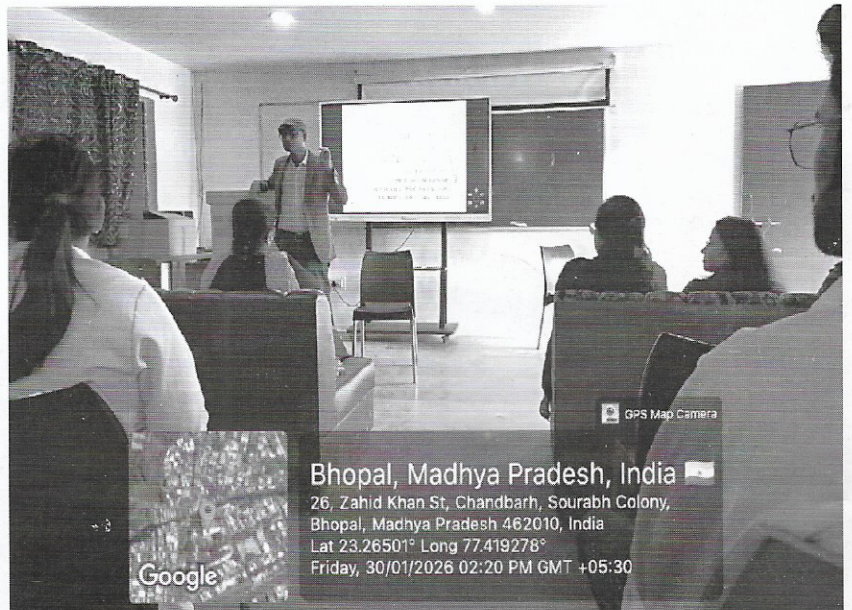
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