

Evaluating The Role of Individualized Homoeopathic Treatment in the Management of Urolithiasis: A Case Study

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ABSTRACT

The modern lifestyle and chaotic eating habits is a part of today's life, which has given rise to many diseases among these diseases one is renal stone. Modern medicine relies mostly on surgery for its treatment. It is a common belief in the conventional system in medical science that stones greater than 7 mm usually need to be removed surgically. Renal calculi are hard deposits of minerals and acid salts that stick together in concentrated urine. Surgical intervention is not always mandatory, because there are evidence-based documentations are available where homoeopathy act marvellously in dissolution and expulsion of bigger stones. A patient of urolithiasis reported in a clinical setting. Detailed case taking of the patient was done and individualized homoeopathic medicine was prescribed on the basis of totality of symptoms after repertorization done by Homoeopathic Medical Repertory by Dr. Robin Murphy. Lycopodium was prescribed as the individualized medicine. The clinical status of the patient was analyzed by ultrasonography imaging. constitutional approach of yielded encouraging results. There was symptomatic relief of the patient and post-treatment ultrasonography showed no calculus after homoeopathic interventions.

Introduction

Statistically 5–15% of the population is affected by urolithiasis worldwide.⁽¹⁾ The incidence of renal stones shows wide regional variation with respect to their location. In India, stones in the upper and lower urinary tract are most common.⁽²⁾ Super saturation of urine is supposed to be the fundamental cause for composition of any type of stone. Kidney stones of various compositions such as calcium oxalate stones, cystine stones, struvite stones and uric acid stones may cause morbidity to a great extent. Calcium stones are the most common in adults and children.⁽³⁾

Most cases of renal stones are idiopathic and present with loin or abdominal pain, and macro- or microscopic haematuria. The renal colic is primarily caused by dilation, stretching, and spasm because of acute ureteral obstruction. Stones of size less than 5 mm, i.e. less than the diameter of ureter, usually pass spontaneously.⁽⁴⁾ As per conventional system, stones of size between 5 to 7 mm have 50% chance of removal where as those above 7 mm surpasses the diameter of the ureter and thus are unable to pass out. The stones of size greater than 7 mm diameter almost always require surgical intervention.⁽⁵⁾

Lowering the super saturation of urine using diet and medication is supposed to be the only therapy to prevent stone formation. Homoeopathy is emerging as the preferred mode of

treatment among the patients of urolithiasis.⁽⁶⁾ Effective homoeopathic treatment decreases recurrence of stone formation and need for surgical procedures for stone removal.⁽³⁾

CASE REPORT

A 40-year-old married karmakandi brahman from Rajkot, Gujarat presented to the outpatient department of Sainath Homoeopathic Hospital on 15th March 2024 with following complaints.

History of present illness:

Patient had complained of renal calculi since 2015, before that he was free of complaint. Suddenly he had burning pain (+3) (lasts for 20 -25 minutes) with sensation of incomplete urination < after urination since 2 days. Urine: scanty, orange yellow (+2). Then he had tearing pain (lasts for 15-20 minutes) at right kidney (loin) which was unbearable and makes him to rolls in bed along with nausea and profuse sweating at last evening (at 5 pm). He had taken a painkiller tablets by own self which relieves pain temporary.

Location	Sensation	Modalities	Concomitants
Right kidney (groin)	Tearing (unbearable) pain (last for 15-20 minutes)(+3)	< at last evening (At 5pm)	-

Associated complaints:

He had complained of burning pain (+3) (lasts for 20 -25 minutes) with sensation of incomplete urination (+2) < after urination since 2 days. Urine: scanty, orange yellow (+2).

Physiological functions:

- 1. Appetite:** Adequate, 2 times / day (2 roti, sabji, dal-rice, etc.), hunger can't tolerate.
- 2. Thirst:** Thirsty (approx. 3 liter/day) for small quantity of pot water.
- 3. Urine:** scanty, orange yellow (+2), burning pain < after urination. No any other complaints before /during / after urination.
- 4. Stool:** Once a day in a morning, No any complaints before / during /after stool.
- 5. Cravings / desires (+), aversion (-), agg. & amel:** He desires sweets (+3) and aggravates from potatoes and bread (causes heartburn and sour eructation (+2) < after eating).
- 6. Disagree / allergy:** No.
- 7. Thermic reaction:** Towards Hot (prefers monsoon season, bathing with cold water, wants fanning, no covering).
- 8. Sleep:** He sleeps at night (11 pm to 7 am), position: on back. He gets startles in legs on going to sleep.
- 9. Dreams:** No any troublesome or persistent dreams.
- 10. Perspiration:** Moderate, on back, no staining / offensiveness.
- 11. Addiction:** No.

12. Mile stones: All were at a proper time.

13. Tendencies: No.

14. Vaccination: All vaccination has done without any adverse reactions.

Female history (Menstrual history, Leucorrhoea, Obstetrics history): Not applicable.

Past history:

H/o similar complaints (urolithiasis) with any treatment taken for it / any accidents / injuries / operations / blood-transfusion / other illness: Yes

No.	Disease	Affected system	Age (year)	Duration	Treatment	Result
1.	Right renal calculi - 7-8 mm	Urinary system	36 year	2 months	Allopathic medication	Improved

Family history:

H/o similar complaints of urolithiasis with any treatment taken for it: No

No.	Person	Healthy	Disease	Alive	Dead
1.	Father	Yes	-	Yes	-
2.	Mother	Yes		Yes	

Mental – Emotional status: His nature was cool and calm generally but gets anger when things were not done according to him and from contradiction (+3); become abusive (+3) on his wife and children (at home only). He talks about religious matters (+3). He said that he had fear of undertaking anything(+3) [In a language of patient... કોઈ નવો શ્લોક / મંત્ર બોલવામાં બધાની વચ્ચે ખચકાટ થાય, બોલવામાં સમય લાગે, મારા થી નહીં બોલાય (+3) એવું થાય, મન થી નબળો (+3) છું એમ સમજોને... કોઈ પણ કામ માં નિર્ણય લેવાનો હોય ત્યારે એમ થાય કે મારા થી નહીં થાય... (There is hesitation in speaking a new verse / mantra, it takes time to speak, it feels like I can't speak, the feeling that I am weak in mind... when it comes to making decisions in any work, it happens that I can't do it)]. He had a fear of ghost during childhood. No any major life events in past that affect him.

General examination:

Temperature: 99.6 F	Teeth: Yellow
Pulse: 80/min	Hair: no any complain of it.

Blood pressure: 120/80 mm of Hg	Nails: no any complain of it.
SpO ₂ : 97%	Oedema: no
Weight / height: 70 kg / 160 cm	Lymphadenopathy: no
Eyes: No Icterus	Tongue: Clean
Ear: clear	Skin: dark colour
Nose: Clear	Joints: no any complain of it.
Throat: Clear	Spine: no any complain of it.

Systemic examination:

RS: No physical abnormality of thorax, normal bilateral airway entry.

CVS: Normal S₁, S₂ Sounds. No S₃/ Murmurs

P/A:

Inspection: No any abnormal findings.

Palpation and percussion: Moderate tenderness at renal angle. No any swelling or tender renal lump or any other abdominal abnormalities.

Auscultation: Diminished bowel sounds.

CNS: Well-orientation regarding time, space and person. No abnormality in behavior. No sensory or motor ataxia.

Investigations / Suggested investigations: To advice CBC, Blood urea, S.Creatinine (within normal limits)Urine routine and microscopic examination:

Volume: 45 ml	RBC's: 8-10 cells/hpf
Color: yellow	Epithelial cells: 4-5 cell/hpf
Reaction: acidic	Pus cells: 34-36 cells/hpf

USG-KUB region: - KIDNEYS- Both kidneys appear normal in size & echotexture. No e/o calculus or hydronephrosis on left side. There is presence of 10 mm sized calculus is seen in right upper ureter.

Clinical Diagnosis of disease: Renal colic and UTI due to renal calculi

Diagnosis of phase of disease: Acute episode of chronic disease

Miasmatic diagnosis

- **Dominant:** Sycotic
- **Fundamental:** Psora

Assessment of miasm:

1. System in which the disease is present: Genito-urinary system.

2. Other affected systems: No.
3. Actively involved system: Urinary system.
 - a. Pace of disease development: Rapid.
 - b. Actively involved organ or tissue: Kidney, bladder.
 - c. Pathological changes: Acute inflammation of urinary tract, Extra-deposition of urinary salts in kidney.
 - d. Affected functions: Urination.
 - e. Expression of affected parts: Pain, incomplete and scanty urination.

Case processing:

Enumeration and Analysis of symptoms:

1. Burning pain (+2) with sensation of incomplete urination < after urination. Urine: scanty, orange yellow (+2). (Physical particular symptom & sign / sensation with modality).
2. Tearing pain (+3) at right kidney (loin) which was unbearable and makes him to rolls in bed along with nausea and profuse sweating. (Physical particular symptom / sensation).
3. Thirsty for small quantity of water (Physical general symptom).
4. He desires sweets (+3) (Physical general symptom).
5. Hot patient (Physical general symptom).
6. He gets startles in legs on going to sleep (+3) (Physical general peculiar symptom / sensation).
7. Perspiration on back (Physical general symptom).
8. He gets anger from contradiction (+3) (Mental general symptom, will and emotion). He became abusive (+3) on his wife and children (Mental general symptom, will and emotion).
9. He talks about religious matters (+3) (Mental general symptom, will and emotion).
10. He had fear of undertaking anything (+3) (Mental general symptom, will and emotion).
11. He had lack of self-confidence (+3) (Mental general symptom, will and emotion).
12. He was cowardice (+3) by nature (Mental general symptom, will and emotion).

Evaluation and Totality of symptoms:

1. He gets anger from contradiction (+3).
2. He became abusive (+3) on his wife and children.
3. He talks about religious matters (+3).

4. He had fear of undertaking anything (+3).
5. He had lack of self-confidence (+3).
6. He was cowardice (+3) by nature.
7. He gets startles in legs on going to sleep (+3).
8. He desires sweets (+3).
9. Burning pain (+2) with sensation of incomplete urination < afterurination.
Urine: scanty, orange yellow (+2).
10. Tearing pain (+3) at right kidney (loin).

Repertorial totality⁽⁷⁾⁽⁸⁾:

1. Mind – Anger – contradiction, from (+3)
2. Mind – Abusive (+3)
3. Mind – Religious affections – too occupied with religion (+3)
4. Mind – Fear – undertaking anything; of (+3)
5. Mind – Confidence – want of self-confidence (+3) Mind – Cowardice (+3)
6. Mind – Startling – sleep – going to sleep; on – feet; as if the starting begins in (+3)
7. Generals – Food and drinks – sweets – desire (+3)
8. Bladder – Pain – burning – urination – after (+2)
9. Bladder – Urination – incomplete (+2)
10. Urine – Scanty (+2)
11. Urine – Color – yellow – orange (+2)
12. Kidney – Pain – tearing (+3)

Remedy Name	Lyc	Nux-v
Totally	33	17
Symptoms Covered	13	10
Kingdom		
[Murphy] [Mind]Anger, general, (see Irritability, Rage):Contradiction, from...	3	2
[Murphy] [Mind]Abusive, insulting, (see Critical, Dictatorial): (70)	4	4
[Murphy] [Mind]Religious, affections: (68)	2	1
[Murphy] [Mind]Fears, phobias, general:Undertaking, anything: (10)	3	
[Murphy] [Mind]Confidence, lacking, no self esteem: (105)	4	2
[Murphy] [Mind]Cowardice, general, (see Confidence, Fears): (85)	4	1
[Murphy] [Mind]Startled, starting:Feet, as if coming from the: (1)	1	
[Murphy] [Food]Sweets, general, (see Sugar):Desires: (147)	3	1
[Murphy] [Bladder]Burning, pain, urethra:Urination, during:After: (69)	2	1
[Murphy] [Bladder]Urination, general:Incomplete, urination: (34)	2	1
[Murphy] [Urine]SCANTY, urine: (281)	2	3
[Murphy] [Urine]Yellow, colored urine:Orange: (20)	1	
[Murphy] [Kidneys]Tearing, pain: (16)	2	1

Analysis of Repertorial result:

From looking at patient’s chief complaints, past history, physical and mental generals and particulars, results of repertorisation and with the reference of materia medica Lycopodium is seems to be the most simillimum to our case hence it was selected.

Selection of potency (with reason): 1M

The patient was middle aged and similarity of the remedy with the case is very exact. Thus, higher potency is selected.

Prescription⁽⁹⁾⁽¹⁰⁾⁽¹¹⁾:

Lycopodium 1M in liquid form BD for 2 days and repeat dose SOS at 10-15 minutes of interval; followed by SL 5 pills BD for 15 days

Advice:

To take plenty fluids, maintain regular diet and hygiene in every follow ups.

Follow up & Result (significant / moderate / mild improvement):

Date & Complaints	Symptom score	Prescription & Result
<p>On 02/04/2024 (After 18 days):</p> <p>In last week, he had severe pain at right groin region with constant urging for urination, nausea, profuse perspiration and restlessness at evening. Pain was subsided with passage of stone along with urination after taking 3 doses repeated at 10 minutes interval. Mentally becomes confident, no hesitation in doing anything. No any other complaints.</p>	7	<p>Repeat Lycopodium 1M dose SOS, SL 5 pills BD for 30 days and SL in liquid form BD 3 days</p> <p>Moderate improvement</p>
<p>On 12/05/2024 (After 40 days):</p> <p>Better. No any other complaints. No passage of any stone. Advise: USG - KUB region.</p>	7	<p>Repeat Lycopodium 1M dose SOS and SL 5 pills BD for 30 days</p> <p>Moderate improvement</p>

<p>On 11/06/2024 (After 30 days):</p> <p>Better No any other complaints. No passage of any stone. USG – Abdomen: No any significant abnormality detected Advised him to visit if any complaints occur in future.</p>	<p>0</p>	<p>No medications.</p> <p>Significant improvement</p>
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USS (Urolithiasis symptom score) scale:

1. Pre-treatment: **6**
2. Post-treatment: **0**

Discussion:

The above case report shows that homoeopathic medicines are effective in the treatment of urolithiasis. In this case, Lycopodium was prescribed which covered the totality of symptoms of the patient and it has shown positive results with cure of the patient. The general concept in Homoeopathy towards treatment of the sick is ‘Treat the patient not the disease.’⁽¹²⁾ The followers of Homoeopathy today, widely vary in their approaches for case-taking, analysis and prescribing. Different approaches have been developed which differ from Hahnemann’s classical approach.⁽¹³⁾

Conclusion:

The present case report advocates the potential of Homoeopathy in treating the cases of urolithiasis, where Lycopodium prescribed as constitutional medicine showed positive results. The outcome of this case report will improve the knowledge of the clinicians, which will benefit the patients suffering from urolithiasis, particularly those who want to avoid the risk of surgical interventions.

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Author Contributions:

Hiral T: Concepts, Definition and Introduction of Content, Literature review, Data analysis, Manuscript preparation

Jignesh P: Concept, Data Analysis and Manuscript Review, Project administration

Ethics Approval: The author certify that they have obtained verbal consent for publishing his reports.

Data Availability: Due to Patient privacy consideration the raw data cannot be made publically available however deidentified summary data and analysis code are available from the corresponding author upon reasonable request, we are committed to supporting legitimate ethics-aligned inquiries.

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Dr. S. N. Patel
D.M.R.D. (Radiologist)

Patient Name	KISHANBHAI PATIL	Age	40
Referring Dr.	SAINATH HOSPITAL - DR. HIRAL	Sex	M
		Date	15-Mar-24

U.S.G. Screening of abdomen

- * LIVER: Shows MILD FATTY CHANGES IN LIVER . No focal lesion noted. Intrahepatic biliary radicals appear normal. C.B.D. and portal vein appears normal in calibre.
- * GALL BLADDER : IS COLLAPSE
ADV. FOLLOW UP NBM.
- * PANCREAS & SPLEEN : Appears normal. No focal lesion noted.
- * KIDNEYS : Both kidneys are normal in size, shape and echotexture. No focal lesion noted. No evidence of calculus or hydronephrosis on LEFT side.
RIGHT KIDNEY 10MM SIZE STONE IN MID CLAYK WITHOUT OBSTRUCTION
- * URINARY BLADDER : Appears normal. No evidence of calculus or growth in it.
POST VOID URINE :- 60ML
- * PROSTATE : Normal in size(25GM) and echotexture. No focal lesion.
- * No evidence of ascitis.

Thanks for reference.

CONSULTANT RADIOLOGIST

Note : This above results are subject to variation due to technical limitations, hence correlation with clinical findings and other investigations should be done.

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Patient Name	KISHANBHAI PATIL	Age	40
Referring Dr.	SAINATH HOSPITAL - DR. HIRAL	Sex	M
		Date	11-Jun-24

U.S.G. Screening of abdomen AND PELVIS

- * LIVER: Shows normal size and echotexture. No focal lesion noted. Intrahepatic biliary radicals appear normal. C.B.D. and portal vein appears normal in calibre.
- * GALL BLADDER : Appear normal in size and shape. No evidence of gallstone or cholecystitis changes.
- * PANCREAS & SPLEEN : Appears normal. No focal lesion noted.
- * KIDNEYS : Both kidneys are normal in size, shape and echotexture. No focal lesion noted. No evidence of calculus or hydronephrosis on either side.
- * URINARY BLADDER : Appears normal. No evidence of calculus or growth in it.
- * PROSTATE : Normal in size and echotexture. No focal lesion.
- * No evidence of ascitis.

CONCLUSION : NORMAL APPEARANCE OF LIVER, GALL BLADDER, PANCREAS, SPLEEN, BOTH KIDNEY, URINARY BLADDER AND PROSTATE.

Thanks for reference.

CONSULTANT RADIOLOGIST

Note : This above results are subject to variation due to technical limitations, hence correlation with clinical findings and other investigations should be done.