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HomeoBuzz

CONTINUING MEDICAL INFORMATION

Vol. 15, No. 10, January 2020, Total No. of Pages 16

Dear Readers,

Time passes, whether we want or not, but its impact never parts from us. "Today" is an opportunity each one of us is given everyday, till we are alive. Most of us take this opportunity for granted, and wait for a tomorrow, to act. We keep our "todays" to plan, hoping to get better opportunities to act in "tomorrows". But in reality this is a trance in which we passively live and waste the everyday opportunities of life. Dates keep on changing and so does our energy which fades away until constantly fuelled by a "purpose". This purpose needs to be identified, the sooner the better, for time waits for nobody as we all know.

For all those who have found a purpose in life, may the year 2020 be an outstanding instrument, adding a beautiful note in an all new chapter of life. For those who haven't found their purpose yet... keep exploring within your minds and souls, for your purpose sits in there, unleashed and slumbered. This purpose will lead you on the path of success, where no amount of force can pull you back. Just stay truthful to yourself and never stop trying. Charles Darwin said long back in his theory of evolution, "Survival of the fittest." And to be fittest, try a little everyday.

Let's welcome 2020 with positivity and hopefulness. Keep smiling and take care!

Dear Doctors,

We are the spine of Healthcare system of the world. Our knowledge and expertise are the nutrition for our professions and on a bigger stage, for the healthcare system on the whole. They are our indispensable tools which need to be sharpened through participation in knowledgeable discussions and informative reading.

January is the opening month of the Gregorian calendar and a harbinger of new resolutions, dreams and hopefulness. But the weather of this month often acts too harsh upon the vulnerable population, dampening their optimism. The pains, coughs and allergic discomforts occurring during the cold weather at this time of the year forces the easily affected ones, back to their cosy surroundings. People eat and drink more while indulging in least exercise, which predisposes them to the painful troubles like arthralgias, spondylitis and rheumatism. The days are shorter and exposure to lesser number of sunny days increases Vit. D deficiency in the body. This further aggravates the rheumatic pains. People queue up in the clinics for relief, and this is where our sharpened tool of knowledge helps us in helping these ailing people. A doctor should definitely know what he/she should do to reduce sufferings but more than that, he must surely know what should not be done in any case as instructed by Hippocrates- "Primum non nocere" i.e. "First do no harm."

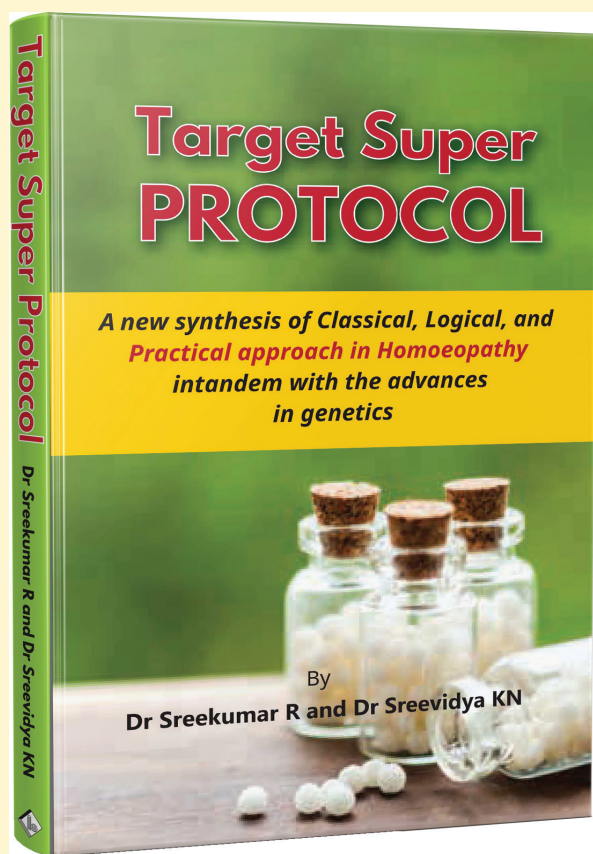
Homeobuzz is an attempt to keep knowledge bank updated and we wish 2020 to be a fruitful year for one and all.

Happy New year!

Kuldeep Jain
Chief Editor

Dr. Vasundhara
Editor

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Dr Sreevidya Narayanan Nair holds a Medical Degree in Homoeopathy from MG University, Kerala. She was the first co-ordinator of Dyuthi, the finishing school of Indian Homoeopathic Association which arranges training programmes for Homoeopaths to enhance therapeutic success rate. She has made a rich contribution towards designing healthy genetic profile in Target Super Protocol. Also, she worked hard for the evolution of Target Super Protocol and invented various provisions in the protocol to overcome the challenges ahead in therapeutics.

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SPONDYLITIS - A REVIEW

The **vertebral column**, also called the *spine, backbone, or spinal column*, makes up about two-fifths of your total height and is composed of a series of bones called **vertebrae**. The vertebral column, the sternum, and the ribs form the skeleton of the trunk of the body. The vertebral column consists of bone and connective tissue; the spinal cord that it surrounds and protects consists of nervous and connective tissues. The vertebral column functions as a strong, flexible rod with elements that can move forward, backward, and sideways, and rotate. In addition to enclosing and protecting the spinal cord, it supports the head and serves as a point of attachment for the ribs, pelvic girdle, and muscles of the back and upper limbs¹. The adult vertebral column typically contains 26 vertebrae customized according to the functional requirements of that area:

- **7 cervical vertebrae** are in the neck region.
- **12 thoracic vertebrae** (thorax _ chest) are posterior to the thoracic cavity.
- **5 lumbar vertebrae** support the lower back.
- **1 sacrum** consists of five fused **sacral vertebrae**.
- **1 coccyx** usually consists of four fused **coccygeal vertebrae**¹

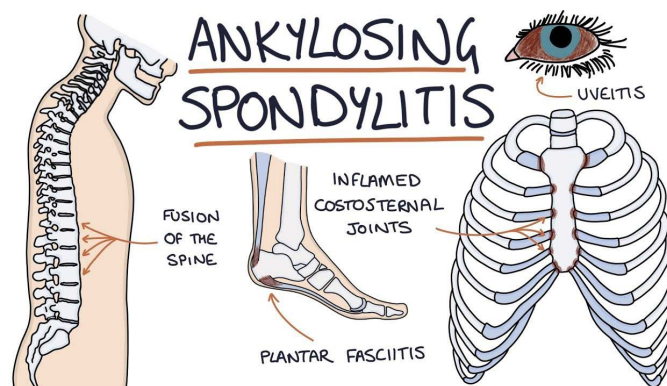
The vertebral column is the central and fundamental support for the musculoskeletal and nervous system. This vertebral column has shown remarkable adaptation through the evolutionary history of man. It is the part of human body that underwent the greatest transformation due to evolution of man from a four legged to two legged animal. Corporal weight that used to get distributed upon the four limbs is now borne majorly by the spine with the acquirement of erect posture. With the advancement of technology and mobile phone revolution, the spine is getting abused at a much greater level, than ever before. Result is development of spinal maladies due to constant postural distress. The most prevalent spinal malady in common people's language is "Spondylitis". Let us look deeper into the causes, course of development and prognosis of Spondylitis.

Spondylitis is a term used in general sense for pain in nape of neck or small of back, the two areas of spine most vulnerable to wear and tear due to postural stress and workplace ergonomics. Basically it is Spondyloarthritis (SpA) i.e. inflammation of vertebral joints and can be grouped in two main ways according to the Spondylitis Association of America.²

1. The Traditional SpA classification system which groups the disorder into six separate pathological presentations.
2. The Newer SpA classification system categorizing the disorder in two broad categories.

Traditional SpA Classification system

Ankylosing Spondylitis : Primarily affects the spine although other joints get involved over the latter course of disease. There is severe chronic pain and discomfort due to inflammation of



SPONDYLITIS - A REVIEW

vertebral joints which leads to “Ankylosis” (new bone formation) in advanced cases. Ankylosis causes fusion and fixity of the vertebrae and consequent loco-motor restriction of the spine reflected as typical symptom of Stiffness which gets pronounced after long periods of rest.

The prime target area in Ankylosing Spondylitis is the sacro-iliac joint, but other areas can also be affected such as the shoulders, hips, ribs, heels, and small joints of the hands and feet. Uveitis, Psoriatic patches and Irritable Bowel syndrome can be seen in few cases. The incidence is found to be greater in men than women and the onset is gradual initiating with morning stiffness for almost half an hour after rising. The onset and course of symptoms vary from person to person, and usually the symptoms start appearing during late adolescence or early adulthood (17 to 45 years of age). Thorough examination along with meticulous case history direct the physician towards the diagnosis, which can be further substantiated with evidence of HLA-B27 in blood and an X-Ray.

2. Enteropathic Arthritis : This type of arthritis is associated with inflammatory bowel disease like Crohn’s disease, ulcerative colitis, undifferentiated colitis etc. Along with inflammatory back pain, inflammatory symptoms of intestines such as chronic diarrhea, abdominal pain, weight loss, and/or blood in the stool are also present.

3. Psoriatic Arthritis : Psoriatic patients may develop pain and swelling in back and small joints of the hands and feet. The hallmark sign of this type of arthritis is presence of “sausage digits”,



which develop due to the inflammation of subcutaneous tissue of the affected finger or toe. The inflammation gives the digit a swollen and stuffed sausage like appearance.

4. Reactive Arthritis : If the arthritis develops in reaction to infection in the intestines or the urinary tract then we term it as reactive arthritis. The course of Reactive arthritis is of a few months and usually does not recur. But some people develop a chronic form of reactive arthritis.

5. Undifferentiated Spondyloarthritis: If the aggregate of symptoms of a case of spondyloarthritis don’t fit in a single diagnostic frame then it is termed as undifferentiated spondyloarthritis.

6. Juvenile spondyloarthritis : As the name suggests, Juvenile spondyloarthritis is a term for a group of childhood rheumatic diseases, developing before the age of 16 and may affect the person through adult life. The symptoms appear sporadically, without the obvious role of any exciting or alleviating factor.

The Newer SpA Classification

Axial Spondylo Arthrites

The axial musculoskeletal structures are involved in this type of arthritis, causing inflammatory back pain. It is a broad term covering SpA with or without typical inflammatory changes of Sacro iliac joints seen on X-Ray. Ankylosing SpA can be detected radiographically whereas enteropathic arthritis, reactive arthritis, undifferentiated arthritis, psoriatic arthritis do not show radiographical changes.

Peripheral Spondyloarthritis

This causes inflammation in joints other than spine or sacroiliac joints such as joints of the wrist, hands, elbows, shoulders, knees ankles and feet.

Causes

Research shows that a patient's genetics, environment and immune system may be the determining factors for this condition. An individual with a family history of spondylitis or its complications, is far more likely to suffer from spondylitis. Factors associated with development of spondylitis are:

- Previous inflammation in joints and tissues
- Lack of exercise
- Obesity
- Smoking or the excessive use of alcohol
- Already established spinal pathologies, such as degenerative disc disease or spinal stenosis.

Symptoms

Spondylitis is commonly confused with mechanical back pain, occurring after an actual spine injury. In fact, spondylitis is the inflammation in the spinal joints and does not result from a single definitive incident. Patients with spondylitis usually experience:

- Pain and stiffness anywhere from the neck through the lower back and buttocks that lasts for more than 3 months
- Discomfort that is worse in the morning or after long periods of inactivity and seems to lessen with movement and exercise
- Progressive loss of spinal flexibility and a sensation of rigidity
- Hunched or stooped posture
- Tendonitis
- Overgrowth of bones, commonly called bony fusion, that may affect daily activities
- Vision problems and eye inflammation, including redness and pain
- Swelling
- Compression fractures

Diagnosis:

1. X-ray which may show the development of spurs (bony outgrowths) on the vertebrae.
2. MRI (Magnetic resonance imaging) can be done to confirm the diagnosis and judge the extent of neural damage if any.
3. EMG (Electromyography)
4. Myelography demonstrates nerve root lesion.

SPONDYLITIS - A REVIEW

Prevention & Relief:

Postural correction with suitable spinal exercises benefit to a great extent in early stages. Efforts to maintain healthy body weight and replenishing body's Vit. D and calcium requirements also help greatly. Sitting, standing, stooping, lifting should be correctly done, along with regular physical exercises like aerobics which are of special benefit.

Advanced cases with degenerative joint damages, need surgical replacements. Corrective spinal surgeries are done where MRI shows fusion of joints in severely bent positions.

Homoeopathy for Spondylitis

The above description makes it clear that the disease can be fairly controlled in initial stages. Homoeopathic medicines like *kalmia latifolia*, *lachnanthes tinctoria*, *cimicifuga racemosa*, *rhus tox*, *ranunculus bulbosus* etc. are great relievers of neck and low back pain.

References:

1. Principles of Anatomy and Physiology; Gerard J. Tortora & Bryan Derrickson; 13th edition
2. Overview of Types of Spondylitis; Spondylitis Association of America; <https://www.spondylitis.org/Types-of-Spondylitis>; accessed on 13-12-19

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SPONDYHEAL Drops

Indications:

The ingredients of the combination relieve the symptoms of spondylitis. Ingredients are known to be helpful for pain and stiffness in neck & back.

COMPOSITION

Each 10 ml contains:

Colocythis Vulgaris	3x	1.0 ml
Ruta Graveolens	3x	1.0 ml
Hypericum Perforatum	5x	1.0 ml
Ledum Palustre	2x	2.0 ml
Cuprum Metallicum	6x	2.0 mg
Dulcamara	3x	2.0 ml
Conium Maculatum	3x	1.0 ml
Alcohol %		65%v/v

Dosage: 10-15 Drops in half cup of water thrice a day or as prescribed by the physician.



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Cough Relief **DR** **PS**

Indications:

Relieves dry as well as productive cough associated with inflammatory or allergic conditions of respiratory tract with gagging, choking and vomiting.

Composition:

Belladonna	3X	10% v/v
Bryonia alba	3X	10% v/v
Rumex crispus	3X	10% v/v
Cuprum aceticum	4X	10% v/v
Drosera rotundifolia	3X	10% v/v
Ipecacuanha	3X	10% v/v
Spongia tosta	3X	10% v/v
Squilla	3X	10% v/v
Thymus serpyllum	ϕ	0.5% v/v
Excipients		q.s.
Alcohol content		61% v/v

Dosage: 10-15 drops in tepid water every 3 hours.

Dose can be repeated every 1-2 hours in acute conditions or as advised by the physician .



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Cough & Breathlessness

Omeo™

Breathefree DR^{PS}

Indications:

Respiratory affections leading to difficulty in breathing.

Composition

Arsenicum album	6x	(10%v/v)
Belladonna	4x	(10%v/v)
Bryonia alba	4x	(10%v/v)
Kali phosphoricum	4x	(10%w/v)
Natrum muriaticum	4x	(10%w/v)
Natrum sulphuricum	4x	(10%w/v)
Veratrum album	4x	(10%v/v)
Eriodictyon glutinosum	4x	(10%v/v)
Excipients		q.s.
Alcohol content		(45%v/v)

Dosage: 10-15 drops should be taken with some water 2-3 times daily for a minimum of 16-20 weeks or as prescribed by the physician. In acute exacerbation, frequent repetition of dose is recommended – every ½ hour to 2 hours in luke warm water, or as prescribed by the physician.



Pack sizes available:
30ml

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ULMUS FULVA



Botanical Name : Ulmus fulva Mischaus.

Family : Ulmaceae

Synonym : Ulmus rubra
Muhlenberg.

Part used : Inner bark.

CLINICAL- Constipation, Haemorrhoids, Herpes, **Pain, Rheumatism,** Deafness.

The Homeopathic pain reliever

Indications-

- ✓ In a case in which the mucous membrane of the rectum was dry and extremely painful, Burnett relieved the sufferings with 20- drop doses of the tincture.²
- ✓ Slippery elm (Ulmus fulva) contain mucilages, which act as emollients on and soothe the skin. Mucilage quickly swells into a gooey mass when exposed to water, thereby ameliorating dry or mildly inflamed skin. Mucilage also dries as a mild adhesive and can be used as an herbal bandage for minor wounds.¹
- ✓ Formication in feet, numb, creeping pain in legs and feet; rheumatic pains above wrists; numbness, tingling, and full soreness where gastrocnemius gives off its tendon.³
- ✓ The bark in trituration gives much relief as a snuff in old vascular deafness with tubal obstruction (Cooper).³

References:

1. <https://www.ncbi.nlm.nih.gov/books/NBK92761/>
2. CLARKE J.H., Dictionary of practical Materia Medica
3. VARMA & INDU V., Encyclopedia of homeopathic pharmacopoeia
4. MURPHY R., Homeopathic Remedy Guide

HOMEOPATHIC RELIEVERS FOR SPONDYLITIS

Therapeutics for Spondylitis

1. Acid phos

- Tension and cramp-like drawing in muscles of neck, esp. on moving head.¹
- Spondylitis of cervical vertebrae.¹
- Burning pain in a spot above small of back.¹
- Lumbar region heavy increases pain in legs.²
- Historical dose: Tincture and all potencies, first potency and higher. Arnica²

2. Hypericum

- Pain in nape of neck.³
- Pressure over sacrum. Spinal concussion.³
- Cervical vertebrae very sensitive to the touch.¹
- Aching pain and sensation of lameness in the small of the back.¹
- Dose - Tincture, to third potency.³

3. Cimicifuga

- Rheumatic pains in muscles of neck and back; feel stiff, lame, contracted; spine sensitive, from using arms in sewing, typewriting, piano playing.⁴
- Stiffness and contraction in neck and back.³
- Pain in lumbar and sacral region, down thighs, and through hips.³
- Dose - First to thirtieth attenuation, third most frequently used.³

4. Cocculus indicus

- Cracking of cervical vertebrae when moving head.³
- Weakness of cervical muscles, can hardly hold the head up.⁵
- Paralytic pain in lower back with weakness of hips, knees and legs.⁶
- Dose - Third to thirtieth potency.³

5. Conium maculatum

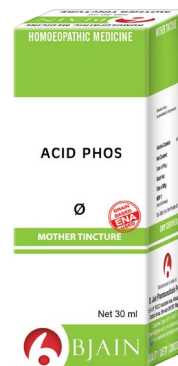
- Tension in the nape of the neck.¹
- Pain as from excoriation in the vertebrae of the neck.¹
- Aching and compression above the hips.¹
- Dose - Best in higher potencies given infrequently, especially for growths, paretic states, etc. - Otherwise sixth to thirtieth.³

6. Lachnanthes tinctoria

- A remedy for torticollis, rheumatic symptoms about neck.³
- Chilliness between the shoulder-blades; pain and stiffness in back.³
- Stiffness and pain in neck, extending over whole head down to the nose.¹
- Sensation of spraining in neck when turning or moving head backward.¹
- Dose - Third potency.³

7. Mezereum

- Pain in neck and back; worse, motion and at night; intolerant of all touch.³
- Painful rigidity of nape of neck, and of neck and external muscles; in right side of neck and throat, agg. on motion.¹
- Contractive and tensive pain in back, extending to sacrum.¹



- Dose - Sixth to thirtieth potency.³

8. *Guajacum officinale*

- Aching in nape. Stiff neck and sore shoulders.³
- Contractive pains between the Scapulae.⁷
- Sciatica and lumbago.³
- Immovable stiffness.³
- Dose - Tincture, to sixth attenuation.³

9. *Kalmia latifolia*

- Pain from neck down arm; in upper three dorsal vertebrae extending to shoulder-blade.³
- Pain down back, as if it would break; in localized regions of spine; through shoulders.³
- Lumbar pains, of nervous origin.³
- Dose - Tincture, to sixth potency.³

10. *Kalium iodatum*

- Spasmodic contraction of the muscles.⁸
- Stitches in the small of the back when sitting.⁸
- Chronic rheumatism of chest and back.⁹
- Dose - Crude drug, in material official dosage, as a rule, the first dilution from 6 to 20 drops a day; if after a week no decided progress is visible, one drop of the tincture of iodine is added to each hundred of the first dilution.³



References:

1. Clarke J.H., Dictionary of practical materia medica
2. MURPHY R., Homeopathic Remedy Guide
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4. ALLEN H. C., Keynotes and Characteristics with Comparisons
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7. BUCK H., The outlines of materia medica
8. LIPPE A.Von., Textbook of Materia Medica
9. ROBERTS H.A., The rheumatic remedies

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Indications:

Vertigo & dizziness with
nausea & vomiting.

Composition:

Argentum nitricum	6x	10%v/v
Cocculus indicus	4x	10%v/v
Gelsemium sempervirens	3x	10%v/v
Conium maculatum	4x	10%v/v
Excipients		q.s.
Alcohol content		36% v/v

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Episodes of lost or altered consciousness are a frequent symptom in primary care and in hospital practice. People experience episodes of blacking out, going dizzy, having a funny turn or other variants of equilibrioceptive (pertaining to sense of balance) disturbances.

As a physician, the primary aim in such cases should be to understand what the patient means by the terms he uses for such weird sensations. Being totally subjective entities at times it becomes difficult to clinically evaluate these symptoms. One has to understand what is meant by black out, dizziness, light headedness in reference and correlation with other physical complaints of the patient. Eg. "Black out" is used to describe an episode of lost consciousness with or without falling down, some people use this term to refer to transient episodes of amnesia or memory loss. Dizziness usually refers to an abnormal perception of movement of environment (vertigo). Hence a careful history of the patient should be taken accompanied with the details given by the witness to make out whether the patient suffered an episode of loss of consciousness, altered consciousness, vertigo, transient amnesia or something else.¹

Vertigo is caused by an alteration in function of the peripheral vestibular organs or the central control mechanism of balance and posture.¹ Normally equilibrioception is a synchronized output of the cumulative information about a person's position in the environment, reaching the brain from the eyes, the limb proprioceptive system and the vestibular system. When there happens to be any mismatch in the information received by the brain through any of these pathways, it results in the abnormal sensation of vertigo, dizziness, light headedness or blackouts. These anomalies often result from labyrinthine disorders like labyrinthitis (vestibular neuronitis), benign paroxysmal positional vertigo, meniere's disease etc. Vertigo can also have central causes such as the affections of the vestibular nucleus in the brain stem or its connections. Central causes can be distinguished from peripheral causes by the persistence of vertigo and its association with other cerebellar signs. Infrequently, a partial seizure in the temporal lobe can also manifest as vertigo.

According to an article "Diagnosis and management of Vertigo" by GM Halmagyi published in Clinical Medicine 2005, "A single attack of acute, isolated spontaneous vertigo lasting a day or more is due either to vestibular neuritis or cerebellar infarction; distinguishing between the two requires mastery of the head impulse test. Recurrent vertigo is mostly due to benign paroxysmal positioning vertigo (BPPV), Menière's disease or migraine. With a good history, a positional test, an audiogram and a caloric test, it is usually possible to distinguish between these."² This article advocates the following guidelines in the diagnosis and management of repeated attacks of isolated vertigo:

- A positional test should be done
- Particle positioning manoeuvre technique to be learnt and applied
- Advise for an audiogram
- Try migraine treatment
- Vestibulobasillar insufficiency to be ruled out lastly

In first ever presentations of acute spontaneous vertigo a head impulse test should be conducted and cerebellar infarction should be ruled out.

In patients who are off balance gentamycin vestibulotoxicity, hydrocephalus, posterior fossa tumour, orthostatic tumour and a pathology of spinal chord or peripheral nerves should be looked out for.²

Homoeopathy can offer help in certain cases of vertigo where the disease is on initial stage or limited to functional disturbances only. Such cases can benefit from a horde of really effective homoeopathic remedies affecting the nervous and labyrinthine system of the body like conium maculatum, bryonia alba, pulsatilla, argentum nitricum, gelsimium etc.

Omeo Vertigone drops are an effective alternate in over the counter remedies available for treating vertigo. These drops are safe and effective and if taken under the guidance of a homoeopathic physician can help in total elimination of the disorder.

Reffrences :

1. Nicki R. Colledge, Brian R. Walker, Stuart H. Ralston, Davidson's Principles and Practice of Medicine. 21st edition
2. GM Halmagyi, Diagnosis and managemeny of vertigo ;doi: 10.7861/clinmedicine.5-2-159 Clin Med March/April 2005 vol. 5 no. 2 159-165; accessed on 3-4-2019

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Convulsion DRAPS

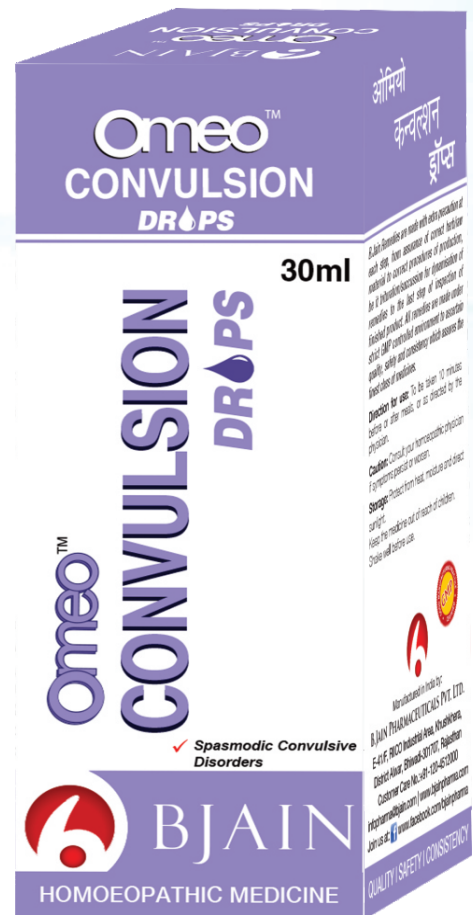
Indication:

For tendency to muscular irritability resulting in twitchings, cramps and convulsions.

Composition :

Buforana	8X	10% v/v
Cuprum metallicum	3X	10% w/v
Pulsatilla nigricans	2X	10% v/v
Silicea	3X	10% w/v
Zincum metallicum	3X	10% w/v
Excipients:		q.s.
Alcohol content		46% v/v

Dosage : 10-15 drops to be diluted with water and taken 2 or 3 times a day or as prescribed by the physician.



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