

# Krishna Kumar Peddibhotla

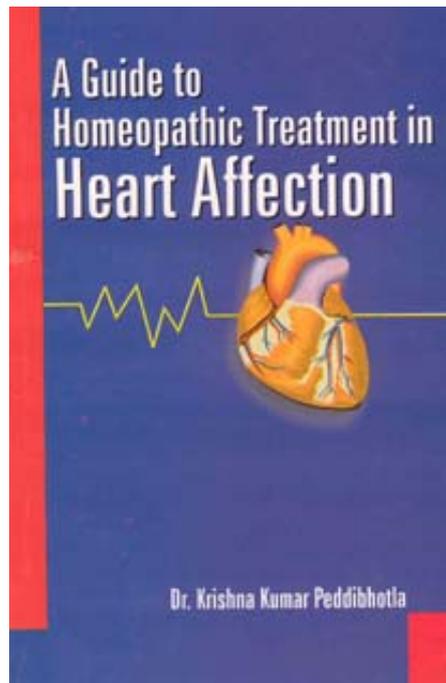
## A Guide to Homeopathic Treatment in Heart Affection

Reading excerpt

[A Guide to Homeopathic Treatment in Heart Affection](#)

of [Krishna Kumar Peddibhotla](#)

Publisher: IBPP



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# **A GUIDE TO HOMOEOPATHY TREATMENT IN HEART AFFECTIONS**

## **PART I**

### **PATHOGENESIS : OF HEART AFFECTIONS:**

#### **GENERAL SYMPTOMS:**

##### **1 . PALPITATION :**

PALPITATION shows that a patient is conscious about his heartbeats. Sometimes it is described as bumping or thumping, again pounding, or fluttering in chest. This can be felt in peripheral vessels also.

WHAT are the causes behind these symptoms viz., increased rate, force, and irregular beats of the heart?

This takes place when the nervous system is excited. The causes for the excitement are: hyperthyroidism or anxiety.

If palpitation is the result of an attack, a complete case of the patient has to be taken.

In simple Sinus tachycardias straining emotions or vigorous exercise may cause the heart to beat fast.

One need not bother about these extraneous conditions, because when the precipating causes are reduced or removed the heart rate and palpitation will come under control.

In abnormal conditions, such as auricular flutter or paroxysmal tachycardia, the patient will be conscious of heart missing a beat. This is also referred as: "turning over of the heart". In those conditions you will find Palpitation in full swing.

How do we make a differentiation between these two kinds of palpitations?

Short attacks suggest paroxysmal tachycardia. The attacks that have a longer duration will have a bearing with auricular flutter. Extra systole is considered as an irregularity.

## **2. DYSPNOEA**

This is the most common symptom seen in heart affections. It does not point out to any structural defects. But shows only cardiac failure. One should not also assume that it is an evidence of heart failure.

Severe or unaccustomed effort is also one of the causes attributed to rapid and deeper breathing. The examiner has to satisfy himself that the patient is genuinely more breathless than he should be under normal conditions.

There are certain states like:

1. aortic regurgitation;
2. hypertension;
3. and other lesions in which dyspnoea can be seen at a later stage.

Whereas in conditions like mitral stenosis it may appear at an early stage.

The intensity or otherwise of dyspnoea will guide us to the capacity of heart at a given period.

If a person finds that his breathing has become troublesome on climbing a slope you can understand that the cardiac reserves are at an ebb.

And if the same person finds himself breathless even while walking on a level ground you should begin to give serious thought to it.

If dyspnoea is seen on lying down - medically called Orthopnoea - on slightest exertion, understand that it is due to left ventricular failure. Such patients would prefer to take a semi sitting posture during sleep.

Dyspnoea at rest - called paroxysmal dyspnoea - occurs during sleep, making the patient wake up. It is found when

hypertension of heart exists. It can also be seen in coronary artery disease or aortic valvular disease. In these conditions left ventricular failure will be the cause for the attacks.

The common symptoms are:

1. Suffocating ;
2. Sits up in bed;
3. Asks for fresh air;
4. Breathing will be laboured;
5. Sweat will be profuse;
6. May be there will be final collapse.

These attacks are known as:

### **3. CARDIAC ASTHMA**

In cardiac asthma one commonly observes this feature known as "periodic breathing". This is a special variety of breathing. It is also known as "Cheyne - Stokes respiration". In this condition there will be a temporary cessation of breathing called 'apnoea'. This will be followed by increased breathing. This is a serious omen.

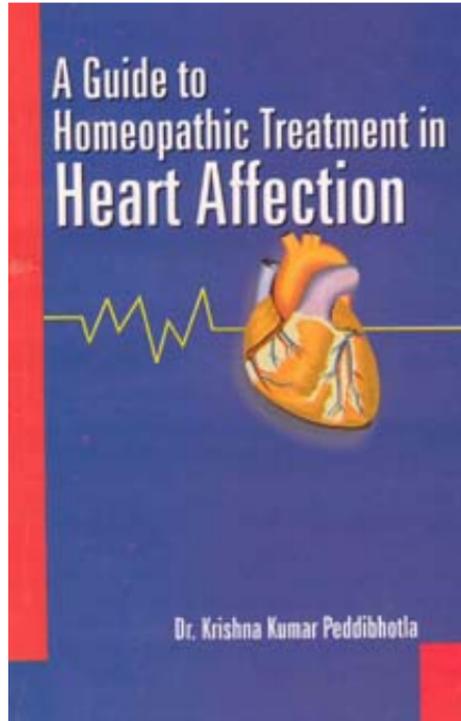
## **CARDIO VASCULAR DISEASES**

### **I. ACUTE MYOCARDITIS**

Myocarditis can be suspected in acute infectious diseases like: a) diphtheria, b) pneumonia, c) typhoid, d) septicaemia etc.

The symptoms we have to take notice of are:

- a) pericardial oppression
- b) rapid and feeble pulse
- c) low blood pressure
- d) cardiac dilatation



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156 pages, pb  
publication 2003



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