
Case I Alternate Medicine and Its Pitfalls

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52 yrs old lady came to the medicine OP on 28.02.2018 with complaints of shortness of breath for the past 6 months which had been progressively worsening and now has orthopnoea (sleeps while sitting). Was diagnosed with Rheumatoid Arthritis (?sero negative) at PSG Hospitals 4 yrs ago and was advised of DMARD's including steroids which she took for a couple of months and discontinued after that. She consulted a homoeopathic doctor after that and was under his care for the past 2 – 3 years. Due to the demise of the homoeopathic doctor and worsening symptoms, she came to GKNMH.

Clinically she had features of congestive cardiac failure with ILD and? Mixed connective tissue disease. She had type 2 Respiratory failure, oral candidiasis and proximal muscle weakness. The evaluation revealed ECG RBBB, P Pulmonale. Echo – Adequate LV, RA RV dilated. Severe PAH. Moderate TR. USG abdomen – IVC dilated. Minimal free fluid.

Blood - Haematology biochemistry is essentially normal. RA factor+ ANA profile Ds DNA positive. RO52+, Jo1+. Treated as IP- Diuretics, digoxin, Assurans, steroids Azoran, antifungal & NIV. Improved discharge on home NIV + medicines, home BIPAP 18hrs /day. During follow-up improved. Echo -PAH improved. RA, RV reduced but on NIV. At end of 2020-she again had worsening congestive failure needing admission – improved.

Again March 2021-she had a similar worsening improvement following IP but the need for NIV increased. Ultimately after a couple of months died at home on account of type 2 Respiratory failure, the question remained why an educated lady with a daughter who was a qualified nurse working in the US chose alternative medicine and why a homoeopathic doctor continued to treat an autoimmune disorder and only his demise resulted in her coming to GKNMH for treatment. Are not the practitioners of alternate medicine answerable to the consumer forum?