Is it Possible to Treat Nosocomial Cellulitis Post Placement of Hemodialysis Catheter without the Use of Antibiotics?

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Abstract:
Nosocomial cellulitis is usually treated with broad-spectrum antibiotics, because they are normally caused by multi-resistant bacteria. Patients with chronic renal insufficiency usually have Blood deficiency and Heat retention according to Traditional Chinese Medicine (TCM). To demonstrate that nosocomial cellulitis after placement of hemodialysis catheter can be treated without the use of any antibiotics. One case report, 58-year-old female patient, submitted to hemodialysis for five years (kidney insufficiency). In 2019, her doctor indicated the removal of the hemodialysis catheter (supposed infection), and replaced it with a temporary catheter (superior right arm). On the same day, the patient felt pain, swelling, hyperemia (15x20cm) and localized heat on the skin surrounding the catheter, and the doctor removed it. The patient was already receiving acupuncture treatment and showed the lesion to the acupuncturist doctor. She received Chinese dietary counselling (avoid frying, eggs, honey, chocolate, coconut, alcoholic beverages, cold water and dairy products), more auricular acupuncture sessions and apex ear bloodletting. The patient also received the homeopathy medication (Sulphur 6CH, five globules three times a day). In one week, the lesion normalized, with disappearance of hyperemia, pain, swelling and heat on the skin where the catheter was. It is possible to treat nosocomial-cellulitis post placement of hemodialysis catheter without the use of antibiotics, according to this case report. To achieve this result it is important to correct the energy imbalances presented by each patient, taking out Heat retention and correcting the diet according to the energy point of view. Contaminations are normal complexities among patients on interminable hemodialysis. As indicated by Western medication writing, hemodialysis patients with a catheter have a 2-to 3-overlap expanded danger of hospitalization for contamination and demise contrasted and patients with an arteriovenous fistula or unite.

Keywords: Hemodialysis Catheter, Infection, Energy, Traditional Chinese Medicine, Hippocrates.

Introduction:
Contamination inconveniences are thought to happen in ~15 - 40% of CRBSIs.6 These are generally basic for S aureus diseases, with endocarditis being the most widely recognized. Reports in the writing fluctuate somewhere in the range of 6% and 34% in all instances of CRBSI. Mortality is most elevated with S aureus disease confused by metastatic inconveniences, related with 30% to half of mortality in these patients.

Purpose: To demonstrate that nosocomial cellulitis after placement of hemodialysis catheter can be treated without the use of any antibiotics

Methods: One case report, 58-year-old female patient, submitted to hemodialysis for five years (kidney insufficiency). In 2019, her doctor indicated the removal of the hemodialysis catheter (supposed infection), and replaced it with a temporary catheter (superior right arm). On the same day, the patient felt pain, swelling, hyperemia (15x20cm) and localized heat on the skin surrounding the catheter, and the doctor removed it. The patient was diagnosed with anemia, through laboratorial exam (Hemoglobin 9.2 mg/dl). The patient was already receiving acupuncture treatment and showed the lesion to the acupuncturist doctor. She received Chinese dietary counselling (avoid frying, eggs, honey, chocolate, coconut, alcoholic beverages, cold water and dairy products), more auricular acupuncture sessions and apex ear bloodletting. The patient also received the homeopathy medication (Sulphur 6CH, five globules three times a day). She was also submitted to the procedure of radiesthesia, which shown that she had no energy in six of her seven chakras, which all appeared in the minimum level (1 out of 8).

Results:
In one week, the lesion normalized, with disappearance of hyperemia, pain, swelling and heat on the skin where the catheter was, without the necessity of using any antibiotics to treat the infection.

Discussion:
As indicated by Traditional Chinese Medicine, indications of hyperemia on the skin might be the consequence of the arrangement of interior Heat, brought about by a state of absence of inside vitality, or by an abundance of vitality. Realizing that patients that perform hemodialysis as of now have a vitality inadequacy, basically Blood insufficiency, as on account of the patient examined.

In Traditional Chinese Medicine, the patient may have insufficiency on the vitality, have clinical sign, however nothing show up on the test. On the initial three periods of the movement from wellbeing to illness, this irregular characteristics are just on the vitality level. That doesn't imply that the patient isn't wiped out. He had side effects, yet the tests seem typical, as the modification are on the vitality level. When there is modification on the laboratorial tests, this implies the vitality alterations are available on the patient for quite a while. On the patient considered, regardless of the adjusted tests, she likewise had a hemoglobin modification, recognizable through tests, demonstrating that she has the vitality changes (Blood inadequacy) for over five years.

Blood lack prompts the arrangement of inward Heat, clinically connected with hyperemia, among different manifestations. The treatment of this patient depended on the thinking of Traditional Chinese Medicine, first, taking out Heat maintenance, through
summit ear phlebotomy and reorienting the patient, through Chinese dietary directing, maintaining a strategic distance from all the food that would hurt the inside vitality, uniquely food with hot vitality, that would prompt progressively inner Heat development. The homeopathic prescription Sulfur was likewise used to remove the Heat maintenance. Sulfur is shaped on fountains of liquid magma, from the fire, and as it is a high-diluted medicine, it treats the inner Heat present on the body.

In the wake of taking off the Heat maintenance, the treatment done meant to tonify the insufficient energies of the patient, to maintain a strategic distance from the development of increasingly inward Heat, that was prompting the cellulitis manifestations. If not rewarding the vitality irregular characteristics, progressively inside Heat would be framed, not improving the side effects of hyperemia.

The writer as of now has a few distributed examinations, in regards to the treatment of network and nosocomial contaminations without utilizing anti-infection agents, on the grounds that, as indicated by the utilization of Traditional Chinese Medicine and Hippocrates, the vitality lopsided characteristics of the patient must be dealt with, not simply the illness.

As indicated by Hippocrates "Common powers inside us are the genuine healers of the illness".

The initial step on the treatment of these patients, was to change her eating routine. As per Hippocrates: "Make your food your medication, and your medication your food".

The utilization of anti-toxins, on account of this patient, could more awful the instance of the patient, as the anti-infection agents are high-concentrated prescriptions, as indicated by the Arndt-Schultz law, they could hurt the essential vitality of the patient significantly further, creating more development of inside Heat, and not improving the side effects of hyperemia introduced by the patient. For this situation, while assessing from the perspective of Western medication, her case might be assessed as opposition of the microscopic organisms to the anti-infection, and the treatment would be changed for a more extensive range anti-infection, prompting a declining on her crucial vitality, and more arrangement of inner Heat, that is the vitality unevenness prompting the disease indications.

Conclusions:

It is possible to treat nosocomial-cellulitis post placement of hemodialysis catheter without the use of antibiotics, according to this case report. To achieve this result it is important to correct the energy imbalances presented by each patient, taking out Heat retention and correcting the diet according to the energy point of view.