

Is it Possible to treat Nosocomial Cellulitis Post & Placement of Hemodialysis Catheter without the use of Antibiotics?

Huang Wei Ling

Medical Acupuncture and Pain Management Clinic, Brazil

Abstract

Introduction: Infections are common complications among patients on chronic hemodialysis. According to Western medicine literature, hemodialysis patients with a catheter have a 2- to 3-fold increased risk of hospitalization for infection and death compared with patients with an arteriovenous fistula or graft. Infection complications are thought to occur in ~15 - 40% of CRBSIs.⁶ These are most common for *S aureus* infections, with endocarditis being the most common. Reports in the literature vary between 6% and 34% in all cases of CRBSI. Mortality is highest with *S aureus* infection complicated by metastatic complications, associated with 30% to 50% 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 acupuncture 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: According to Traditional Chinese Medicine, signs of hyperemia on the skin may be the result of the formation of internal Heat, caused by a condition of lack of internal energy, or by an excess of energy. Knowing that patients that perform hemodialysis already have an energy deficiency, mainly Blood deficiency, as in the case of the patient studied.

In Traditional Chinese Medicine, the patient may have deficiency on the energy, have clinical manifestation, but nothing appear on the exam. On the first three phases of the progression from health to disease, this imbalances are only on the energy level. That does not mean that the patient is not sick. He had symptoms, but the exams appear normal, as the alteration are on the energy level. When there is alteration on the laboratorial exams, this means that the energy alterations are present on the patient for several years. On the patient studied, despite the altered

exams, she also had an hemoglobin alteration, detectable through exams, indicating that she has the energy alterations (Blood deficiency) for more than five years.

Blood deficiency leads to the formation of internal Heat, clinically associated with hyperemia, among other symptoms. The treatment of this patient was based on the reasoning of Traditional Chinese Medicine, first, taking out Heat retention, through apex ear bloodletting and reorienting the patient, through Chinese dietary counseling, avoiding all the food that would harm the internal energy, specially food with hot energy, that would lead to more internal Heat formation. The homeopathic medication Sulphur was also used to take off the Heat retention. Sulphur is formed on volcanos, from the fire, and as it is a high-diluted medication, it treats the internal Heat present on the body.

After taking off the Heat retention, the treatment done aimed to tonify the deficient energies of the patient, to avoid the formation of more internal Heat, that was leading to the cellulitis symptoms. If not treating the energy imbalances, more internal Heat would be formed, not improving the symptoms of hyperemia.

The author already has several published studies, regarding the treatment of community and nosocomial infections without using antibiotics, because, according to the use of Traditional Chinese Medicine and Hippocrates, the energy imbalances of the patient have to be treated, not the disease in itself.

According to Hippocrates "Natural forces within us are the true healers of the disease".

The first step on the treatment of these patients, was to change her diet. According to Hippocrates: "Make your food your medicine, and your medicine your food".

The use of antibiotics, in the case of this patient, could worsen the case of the patient, as the antibiotics are high-concentrated medications, according to the Arndt-Schultz law, they could harm the vital energy of the patient even further, generating more formation of internal Heat, and not improving the symptoms of hyperemia presented by the patient. In this case, when evaluating from the point of view of Western medicine, her case may be evaluated as resistance of the bacteria to the antibiotic, and the treatment would be changed for a broader spectrum antibiotic, leading to a worsening on her vital energy, and more formation of internal Heat, that is the energy imbalance leading to the infection symptoms.

Conclusion: 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.

Biography: Huang Wei Ling, born in Taiwan, raised and graduated in medicine in Brazil, specialist in infectious and parasitic diseases, a General Practitioner and Parenteral and Enteral Medical Nutrition Therapist. Once in charge of the Hospital Infection Control Service of the City of Franca's General Hospital, she was responsible for the control of

all prescribed antimicrobial medication and received an award for the best paper presented at the Brazilian Hospital Infection Control Congress in 1998. Since 1997, she works with the approach and treatment of all chronic diseases in a holistic way, with treatment guided through the teachings of Traditional Chinese Medicine and Hippocrates.