

QUINSY

AN OVERVIEW

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Introduction

Quinsy is a common name given to Peritonsillar abscess formation in which pus forms in the space between the tonsil and the wall of the pharynx. It affects people in their late teens and adulthood and usually affects one tonsil more than the other. The individual has severe pain with difficulty in opening the mouth (trismus) and with swallowing.

Symptoms

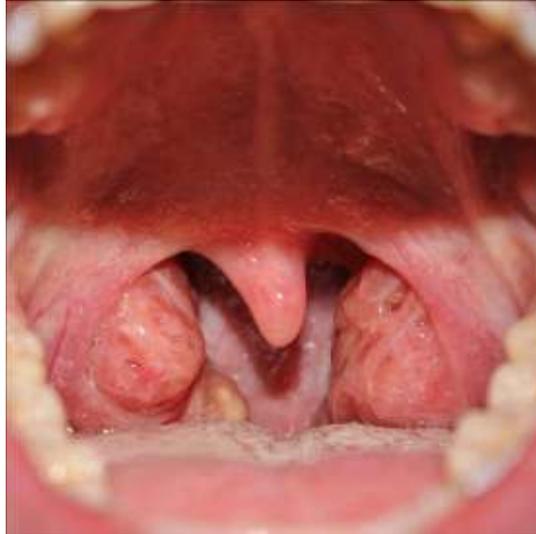
Peritonsillar abscesses start as a sore throat and inflammation of the tonsils. It develops into pus filled abscesses on the tonsil area making swallowing very difficult and extremely painful, sometimes nearly impossible.

Along with this, there is often a high temperature and a general feeling of being unwell. There is often a foul smelling breath odour and a visible swelling to the neck area. It is also likely that you will suffer from referred pain in the ears and neck area in general and a distinct change in your vocal ability and normal sound.

With quinsy, comes a lot of swelling of the area and surrounding tissues. This is what makes it so difficult to swallow and causes the pain.

Complications

Quinsy can have some complications, with the worst case scenario being that the individual may have a large, pus filled cavity to their tonsil, which has the potential of rupturing at any time. If this happens, the individual may inhale the contained pus as they breathe, in which case the poison can enter their lungs; this is known as aspiration. It is exacerbated by the fact that the fluid they are inhaling is "infected", which adds further pressure to a body that is already struggling to fight off bacteria.



Picture Above - Quinsy (Peritonsillar abscess formation)

Allopathic Treatment

The initial allopathic treatment for quinsy is by prescribing antibiotics; however, in acute cases typical treatment is by surgical incision under local, or general anaesthetic; and, depending upon the severity, it may be necessary to remove the abscess and the tonsils. Usually, the surgeon will prefer to wait until any infection has abated to make the procedure easier and safer.

Tissue Salt Treatment

Treat with **Mag Phos (8)** - additional Tissue Salts to consider:

- Tonsillitis, in early stages, with fever - **Ferr Phos (4)**
- For chronic enlargement of tonsils, glands swollen and painful - **Calc Phos (2)**
- For constant flow of clear saliva, swollen uvula - **Nat Mur (9)**
- Discharging pus - **Calc Sulph (3)**
- For suppurating tonsils or quinsy - **Silica (12)**

Dosage

Four tabs hourly, in the early stages of acute attack; then four tabs two hourly. (Schuessler - *Biochemic Handbook*)

End

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