

A QUARTERLY HOMOEOPATHY NEWS BULLETIN

# HOMOEODINSIGHT

THIS BULLETIN IS BASED ON “SYCOTIC MIASM IN HOMOEOPATHIC PRACTICE”

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## Managing Editor's Message



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I feel immense pleasure to share my views on our 7th, quarterly bulletin “Homoeinsight” which reflects the mirror image of academic potentiality, co-curricular and extracurricular activity of our faculty members, students and hospital team. In this issue the editor of the bulletin Dr.Nidhi Joshi has selected the topic “SycoticMiasm in Homoeopathic Practice” which is one of the basic knowledge require to treat the disease is of venereal origin affect the organs develops from endoderm. All the diseases belong to proliferation and infiltration comes under this miasm (Disease producing power). People who belongs to Hydrogenoid constitutions are more susceptible to get affect by this miasm. Out of three fundamental causes Sycoticmiasm is one, which is removed only by administration of suitable Anti-Sycotic medicine. Dr.Nidhi has collected and collated articles relevant to Sycoticmiasm in a nice manner, also this bulletin includes different academic activities like seminar, symposium and workshop which were conducted in past three month in the institution. I hope this bulletin will help to enrich the knowledge of our homoeopathic fraternity. Wish you all a happy reading

## Editorial Message



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No greater thing is created suddenly, any more than a bunch of grapes or a fig. If you tell me that you desire a fig, I answer you that there must be time. Let it first blossom, then bear fruit, then ripen. – Epictetus. In homoeopathy we treat person with holistic approach and before starting the treatment we have to know a person in all aspects to rule out the cause of the disease. The present bulletin issue is dedicated on SycoticMiasm in Homoeopathic Practice. Miasm is a dynamic energy which cannot be seen. In the Hahnemannianmiasmatic theory there are three miasmspsora, sycosis and syphilis. Sycoticmiasm has gradual progress. This miasm slowly develops in the body and create many disease conditions. Miasm represents the past, the present and the future - the past in terms of the layers of suppression and their removal, the present by the removal of these layers, which leads to a clear assessment of the totality of symptoms, and the future where the patient becomes stronger as a whole and is more able to resist morbidic influences. This topic helps the reader to know sycoticmiasm in practice. I am very much thankful to the management of Parul University, our Principal Sir and all my colleagues for motivating me and contributing in this bulletin. The year 2021 is coming to end and I wish the same ending for the situations created by Covid 19. The festival of Diwali and Charismas brings warmth in snow. Coming New Year 2022 brings the hope of better world with healthy lifestyle, happiness and prosperity for humankind.

# SYCOSIS AND GONORRHEA

Sycosis is the most insidious, dangerous and the main theme is 'Excess'.

[1] Master Kent says, the miasm Sycosis is developed due to the suppression of gonorrhoea and is primarily manifested externally by the cauliflower like growths on the genitals.

But Sycosis is not gonorrhoea. Gonorrhoea is an acute infection caused by gonococci and it takes around five to ten days to develop in to Urethritis. If it is completely cured then sycosis never develops. It is only when gonorrhoea is suppressed, sycosis miasm is established. Not everyone who acquires gonorrhea progresses into sycoticmiasm but once it is established, it will be passed on from one generation to another generation.

At first, it appears on genitals after infection through coition. Thick pus like discharge from urethra which is offensive, sweetish smell, hard swelling of the penis with glandular involvement which results into sensitivity to touch and bleeding. Up till this stage it is only gonorrhea, not sycosis.

At this stage, if we treat with mercury internally and cauterisations, burning, cutting or ligations are done -

It suppresses the gonorrhoea from the surface, and then it gives birth to the miasm called 'Sycosis'. So here we got to know that, the miasm {Sycosis} is established after suppressing the gonorrhoea.

[2] As the acute infection is driven in upon the vital energy by some external methods of suppression, and it then becomes a systematic stigma, and permeating [spreading] every living cell of organism, and transmitting its deadly and dangerous destructive forces to the offspring as well as retaining the full destructiveness of its power in the original individual and impregnating the mother of the child.

The suppressed gonorrheal infection, first express itself in attacking the blood and producing an anaemic condition. This anaemic condition arises from the stigma because sycosis destroys the red blood cells through imperfect oxidization of food. Often times an inflammatory Rheumatism develops, inflammation follows in the soft tissues, and changes in the fibres of

the muscles. In fact, the whole organism becomes involved here.

Hence, the symptoms that are first produced after a suppression, showing that the whole organism is involved and in the grip of this destructive force.

The secondary and tertiary symptoms of sycosis can be entirely eradicated (freed) by our homoeopathic treatment.

[3] As gonorrhoea will be easily passed during sex without a condom, which includes vaginal intercourse and anal intercourse. Although less common,

Gonorrhoea can also be passed on when a person with the infection in their mouth or throat gives oral sex to another person.

So, if Gonorrhoea is completely cured, then Sycosis never develops.

But the time, when we suppress the Gonorrhoea, it leads to the stage of Sycoticmiasm by manifesting the fig-like growths in an individual.

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# DEVELOPMENT OF SYCOTIC MIASM

## ABSTRACT: –

This article deals with understanding of features of sycosis in view of organon of medicine.

## KEYWORD: –

Sycoticmiasm development, Primary manifestation, Secondary manifestation, Anti-sycotic remedies, Conclusion.

## INTRODUCTION: -

### (1) Development of sycoticmiasm: -

State of sycoticmiasm may enter and developed into the organism as sexually transmitted disease by impure coition,

When the acquired gonorrhoea has not been treated homoeopathically then sycotic state may develop.

Other source of sycosis is suppressed gonorrhoea, bad effects of vaccination, from animal poisoning, of animal bite, from bad effects of dissecting wound, from prolonged sufferings from acute miasm like Smallpox, Chickenpox, Typhoid etc. and in any stage, it may infect the wife from husband or vice-versa and the children through the parents by the way of inherent sycosis.

As internal development once an entry is gain into the organism, the miasm spreads for several days 8 to 12days. From the day of contact, nothing is visible. Once they develop fully in the organism the local symptom breaks out as PRIMARY SYMPTOMS OF SYCOSIS.

### (2) Primary manifestation: -

Gleet yellowish urethral discharge

Fig-wart-spongy, dry, soft warts

### DISTRIBUTION: -

MALE- on the glans and on below prepuce

FEMALE- on the parts surrounding like pudenda and around the pudenda themselves

### (3) Secondary manifestation: -

When these excrescences are treated by allopathic physicians always in the most violent external way by cauterizing, burning and cutting by ligatures, they will usually come forth again, usually subjected again, in a similar, painful cruel treatment.

The fig-wart disease is having deprived of the local symptoms continues to develop initially and appear in other and much worse way in secondary aliment.

### Few symptoms of secondary sycosis: -

#### MIND: -

Suspicious, jealous, quarrelsome, harmful, cruel, cunning, deceitful, mischievous, secretive, anxious, suicidal, tendency, mania of performing criminal acts.

#### HEAD: -

Pain in vertex, dry dandruff, circular bald spots on scalp/bearded and falling of hairs.

NOSE: -loss of sense of smell

FEMALE: Cyst formation in ovaries, inflammation



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/blockage of fallopian tubes producing infertility.

SKIN: - Immense inflammation/growth of any tissues i.e., tumor, warts, cysts, etc.

Local/generalized oedema, Barber's itch

## (4) List of anti-sycotic remedies: -

Argentum nitricum, Argentum metallicum, Ars. alb., Arsiod., Benzoic acid, Berberis vulgaris, Cal carb., Custicum, clematis, colchicum, Dulcamara, Fluoric acid, Iodum, Kali bich, Kali carb, Kali iod, Lycopodium, Mag. carb., Mag mur, Mag phos, Medorrhinum, Mezerium, Muratic acid, Nat. ars., Nat. carb, Nat. mur., Nat. sulph., Nitric acid, Phos, Phosphoric acid, Psorinum, Pyrogenium, Sarsaparilla, Sepiilicea, Staphysagria, Tuberculinum, Thuja.

## CONCLUSION: -

Sycoticmiasm is a chronic venereal miasm also known as FIG-WART DISEASE developed as result of suppressed gonorrhoea treated by medicines which cures nature of sycosis or case of sycosis complicated with other miasmatic states.

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# EMOTIONAL & MENTAL ASPECT OF SYCOTICS

The sycotic lover is reluctant to convey emotion. Passion is not among his characteristics. Sycosis is secret. The sycotic person tends to keep everything secret, out of sight. This may happen either consciously or unconsciously. Keep his aims secret, acts deviously, does not reveal much about himself and hides his real intentions & his real feelings. When sad, does not look as sad as the circumstances require. That's why he seems to be strong in other people's eyes.

He may dislike someone and still smile at him and be very friendly with him. When the sycotic person gives, he certainly means to receive something in exchange later on. Avarice is an expression of the need to keep things to oneself. Collecting objects is a sycotic manifestation too. The sycotic person wants to have control over other people and over himself as well. He keeps every expression, every emotion of his under control. He cannot stand the spontaneity of emotions and acts.

Pedantry is another feature of sycoticmiasm. The housewife who gets annoyed at finding a speck of dust on the furniture, who sweeps and mops the floor three times a day, who forbids her husband to enter the house with his shoes on, is an example of sycotic pedantry.

Sycotic person is straight-laced prim and proper, orderly, he concerns himself too much with schedule, so much that he lays more weight on the schedule than on the essence of things. He wants all the objects on his desk to be in alignment, he wants his car to be perfectly clean, he sees that its colour does not fade;

he protects it against the rain and the wind. He worries about small details.

Religiosity is another example of sycotic pedantry. A religionist focuses his attention not on philosophy and the deeper meaning of religion but on the ritual. Fasting is observed for exactly forty days, he is very strict on the observance of the schedule. Religiosity, along with the other features of sycoticmiasm, were typical of the Scribes and Pharisees, who always abided by the letter of the law but could not understand what purpose the existence of the law served in the first place.

Sycotic person is dogmatic. To him it is all black or white. He is inflexible. He is not receptive to new ideas. He rejects a new idea without even examining it. Reclassifications in the system of knowledge and values fill him with anxiety. He wants knowledge and ideas to be well classified inside his head. He wants everything to be arranged and fixed.

That causes him a need for control. As far as the love life of a sycotic person is concerned, he has many fantasies related to the love partner. For example, as soon as a sycotic man sees a woman, he has fantasies about erotic positions. But although he has strong fantasies, he usually does not express himself during love making, does use love talk, is cold and always in control. As for emotions he keeps them inside him as well.

Although he himself wants to be the focus of everyone's attention, he does not open his heart to his partner when he is in trouble. It is the case of a mother

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who gives her child the cold shoulder. There is no emotion in her caress, which is rather straight-laced.

## **Sycotic person has an inclination to show off.**

A sycotic woman walks in the street and cuts a dash. Heads turn around when she walks by and that is what she seeks, consciously or even unconsciously. A sycotic man walks with a swagger and puffs himself up to show his muscles. Expensive clothes bought at “trendy” shops also have to do with sycosis. Buying an expensive car (though it is not necessary for professional use).

Medicine and “trendy” professions, such as journalist, lawyer, politician, have much appeal for sycotic persons. The shiny shingle on the door, the glamorous surface, the worldwide recognition appeal to the young student.

A sycotic scientist thinks of himself to be an exceptional case in his field, even though he is mediocre. He calls himself an expert or an adept in his field. He likes to put many titles on his shingle. As a patient he prefers distinguished and highly qualified doctors, who sound omniscient to him. He has a mistrust of doctors who are simple and straight. This inclination to show off marks every sycotic behaviour and most times it is unconscious. When he is sad, for instance, the way he cries, the way he sighs draws everybody's attention and sympathy towards him. The way a sycotic person gets angry is also flamboyant. The person screams, shouts, and makes a great fuss. It is some kind of “puffing up” that draws other people's attention. When the sycotic person is

happy, he roars with laughter and also makes a great fuss.

Sycotic person's tendency to keep things to oneself. In general, the notion of keeping overweights that of giving. Therefore, the sycotic person is not keen on giving. The sycotic teacher is rather unwilling to give his knowledge; he is not the kind of person to communicate knowledge. He will try and keep it to himself. He may even try to mislead other people so long and he does not give it. Most times there is ambivalence about giving-keeping.

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# HYPERLIPIDAEMIA AS LIFE STYLE DISORDER & ITS SYCOTIC PRESENTATION IN MODERN ERA WITH MANAGEMENT

**Abstract:** Hyperlipidemia and its prevalence worldwide is biggest health issue in 21st century. This is the metabolic disorder which is more due to genetic, lifestyle and stress in current era. There is high prevalence of hyperlipidaemia in urban slum population in North India. According to prodigy guidance for hyperlipidaemia in UK shows there is high chance of hyperlipidaemia in diabetics and prevalence ratio is 10.3%. Hyperlipidaemia is the disorder which is developed by single miasm or more miasms combine and forms the complex miasmatic disease. It is necessary to eradicate inborn tendency to disease homoeopathically bysimilimum.

**Key words:** Hyperlipidaemia, sycoticMiasm, Management

**History:** Virchow in 19th century first identified cholesterol crystals in atherosclerotic plaque.

## LIPIDS:

Lipid is any of heterogeneous group of fats and fat like substances, including fatty acids, neutral fats, waxes and steroids which are water insoluble and soluble in non-polar solvents like chloroform, ether, benzene and carbon tetrachloride. Lipids, which are easily stored in the body, serve as a source of fuel, are an important constituent of cell structure and serve other biological functions.

**Dictionary Meaning of Hyperlipidaemia:** An abnormally high level of lipids, especially cholesterol, in the blood, predisposing to atherosclerosis and other arterial diseases.

**Review:** Early detection and early control of high cholesterol in a person is an important step in reducing the development and progression of coronary heart disease and atherosclerosis.

Lowering plasma cholesterol by diet and drugs slows

and may even reverse the progression of atherosclerotic lesions and the complications. The demonstration that lipid-lowering therapy significantly reduces the clinical complications of ASCVD has brought the diagnosis and treatment of these disorders into the domain of the general internist. The metabolic consequences associated with changes in diet and lifestyle has increased the number of hyperlipidemic individuals who could benefit from lipid-lowering therapy. Most patients with hyperlipidaemia are asymptomatic and have no clinical signs. Many are discovered during the screening of high-risk individuals.

Guidelines for the screening and management of lipid disorders have been provided by an expert Adult Treatment Panel (ATP) convened by the National Cholesterol Education Program (NCEP) of the National Heart Lung and Blood Institute. The NCEP ATP III guidelines published in 2013 recommend that all adults over age 20 have plasma levels of cholesterol, TG, LDL-C, and HDL-C measured after a 12-hr overnight fast.

Selective screening of people at high risk of cardiovascular disease should be undertaken, to include those with:

A family history of coronary heart disease (especially below 50 years of age)

A family history of lipid disorders

The presence of a xanthoma

The presence of xanthelasma or corneal arcus before the age of 40 years

Obesity

Diabetes mellitus

Hypertension





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Acute pancreatitis

Those undergoing renal replacement therapy

Serum cholesterol concentration does not change significantly after a meal and as a screening test, a random blood sample is sufficient. If the total cholesterol concentration is raised, HDL cholesterol, TG, and LDL cholesterol concentrations should be quantitated on a fasting sample. If a test for hypertriglyceridaemia is needed, a fasting blood sample is mandatory.

Multiple epidemiologic studies have demonstrated a strong relationship between serum cholesterol and CAD. Randomized controlled clinical trials have unequivocally documented that lowering plasma cholesterol reduces the risk of clinical events due to atherosclerosis. Since both hypertriglyceridemia and low plasma levels of HDL-C confer higher ASCVD risk, the NCEP ATP III recommends more aggressive therapy to lower the plasma LDL-C in patients with these dyslipidemias.

Hyperlipidaemia results from genetic predisposition interacting with an individual's diet. Studies show the role of the environment rather than the genetic makeup of a population.

Data from The Multiple Risk Factor Intervention Trial (MRFIT) have shown that although cardiovascular risk rises progressively as total cholesterol concentration increases the risk increase is modest for individuals with no other cardiovascular risk factors.

## Management:

Management of case is through Anti-miasmatic Homoeopathic Similimum & non pharmacological

treatment in terms of lifestyle modification & diet.

## Presentation of Sycotic Miasmin Case of Hyperlipidaemia:

Features	Sycosis/constructive/incoordination in hyperlipidaemia
Family History	F/H of hyperlipidemia, atherosclerosis, CAD etc.
Aetiology	Mutation in gene, Hepatic Cholestasis. Enzyme disorders Secondary to autoimmune diseases like SLE, endocrine disorders like DM, hyperthyroidism, Cushing's Syndrome.
Pathology	Defect in receptors, enzyme activity. Deposition of cholesterol and lipoprotein in the wall of blood vessels.
Clinical Manifestation	Lipemiaretinalis, Hepatomegaly, Hepatic fibrosis, splenomegaly, hypertension, Xanthoma, Xanthelasma, Atherosclerosis, Enlarged tonsils.

## Nonpharmacologic treatment:

Therapeutic lifestyle changes (TLC) include a cholesterol-lowering diet, physical activity, and weight management for anyone whose LDL is above goal.

Dietary and life-style intervention: Modification of life-style, which includes food habits, cessation of smoking, cutting down alcoholic beverages, weight control and regular exercises, is not only necessary to attain eulipaemia but is the first step in the management of hyperlipidaemias.

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Frequent snacks and canned or commercially available precooked food (junk food) should be abandoned as they are rich in fats and cream as well as refined carbohydrates. Alcohol supplies empty calories; its intake should be restricted to social purposes in a patient with dyslipidaemia and in others should not exceed 30 gm/day.

Dietary protein should be such that its fat content is low, dried beans, peas and pulses, chicken-breast, lean meat, low-fat dairy products and animals. The diet should contain adequate amount of natural soluble fibres derived from oats and barley, certain fruits such as oranges apples, and pears and vegetables such as Brussels sprouts and carrot.

Substitution of saturated fat with monounsaturates and polyunsaturate:

Most of saturated fat comes from meat and dairy products. Monounsaturated oils, particularly olive oil, and polyunsaturated oils such as sunflower, safflower, corn and soya oil, should be used instead of saturated fat-rich alternatives. Turkey breast and chicken breast are literally free of cholesterol as soon as the skin is removed.

## Reduce the Dietary Cholesterol Intake:

Liver, offal and fish roes should be avoided. Although eggs and prawns are rich in cholesterol their total contribution to the body's cholesterol pool is small and they can still be part of a balanced lipid-lowering diet.

## Weight Loss and Exercise:

The treatment of obesity, if present, can have a favourable impact on plasma lipid levels. Plasma TG and LDL levels tend to fall and HDL levels tend to increase in obese persons who lose weight. Aerobic exercise has a very modest elevating effect on plasma levels of HDL-C. A reduced fat diet, which is more realistic, only affects those levels if accompanied by weight loss. Cutting fat without losing weight actually

increase TG levels and decrease HDL. Eating more calories than body needs, whether from fat or carbohydrates, will be stored as fat. Hence the aim should be to lower total calorie intake than total fat intake. Eating small amounts of fat can keep from overindulging on total calories.

Dietary fat causes our bodies to produce a hormone that tells intestines to slow down the emptying process so that fullness is felt and are less likely to overeat.

Moreover, without some fat in the diets, body could not make nerve cells and hormones or absorb fat soluble vitamins.

Natural sources reducing hyperlipidaemia<sup>4, 5</sup>:

Carrots, apples and the white layer inside of citrus rinds containing pectin are advantageous to lowering cholesterol levels.

Avocado, which is very high in fat, has unexpectedly become a cholesterol reducer.



Beans are high in fiber and low in cholesterol. Garlic and onions in daily diet lower cholesterol and is also credited with lowering blood pressure.

Cayenne pepper (*Capsicum minimum*) and other plants that contain the phenolic compound capsaicin

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have a well demonstrated effect in lowering blood cholesterol levels, as does the widely used spice Fenugreek.

Caraway is another aromatic spice with demonstrable cholesterol lowering properties.

Strawberry reduces oxidative damage to LDL while maintaining reduction in blood lipids.

Soya protein decreases total cholesterol, LDL and Triglycerides

Green leafy vegetables, pulses, legumes, root vegetables, and unprocessed cereals, help reduce circulating lipid concentrations.

Olive oil contains polyunsaturated fats that help to lower LDL levels while increasing levels of HDL, or "good" cholesterol.

Nuts such as walnuts, almonds, hazelnuts and pistachios have polyunsaturated fatty acids prominently, which can reduce blood cholesterol levels.

Chinese red yeast rice (which contains lovastatin) can have modest cholesterol-lowering effects.

Polyphenolic substance derived from cocoa powder contribute to reduction in LDL and elevation in HDL and suppression of oxidized LDL and thereby reduces atherogenesis

Peanut and peanut butter lowers cholesterol and reduces CHD risk

Flavonoid rich dark chocolate has beneficial effect on endothelial function

Cinnamon has blood-thinning properties that can help lower cholesterol levels

Marine fish oils containing long chain omega – 3 FA eicosapentaenoic acid (EPA) and docosahexaenoic acid (DHA) have potential role in reducing plasma levels of cholesterol and TG and thereby reducing incidence of CAD.

Fatty fish, such as salmon, tuna and mackerel, is an

excellent source of omega-3 FA, and the American Heart Association recommends getting at least two servings of fatty fish each week for cholesterol management and general heart health.

Flaxseed and canola oil also contain some omega-3 fatty acid.

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# ROLE OF SYCOTIC MIASM IN HYPOTHYROIDISM

## Abstract:

Hypothyroidism is a condition which disturbs a person's harmonious life with weight gain, menstrual irregularities and mood swings. Many patients bear with them, the burden of taking hormonal treatment throughout their lifetime. The carefully selected homoeopathic constitutional medicines can bring about a cure in these sufferers within a short period of time.

**Keywords:** Hypothyroidism, epidemiology, homoeopathy, constitutional treatment, symptomatic improvement, normal hormone level, no recurrence

## Introduction:

Inadequate synthesis of thyroid hormones resulting in its insufficient release for bodily needs is called hypothyroidism<sup>1</sup>.

In places where there is no iodine deficiency, autoimmune thyroid disease called Hashimoto thyroiditis is the most common cause of hypothyroidism whereas Worldwide, iodine deficiency is in the forefront<sup>2</sup> the other causes of hypothyroidism include thyroidectomy or radiation therapy in the treatment of overactive thyroid or cancer of thyroid, some medications used in cancer and depression and overmedication in hyperthyroidism or hypothyroidism can also result from disorder of pituitary or hypothalamus, which is called central hypothyroidism<sup>3</sup>

Primary hypothyroidism can be classified into chronic autoimmune thyroiditis, postpartum thyroiditis, subacute granulomatous thyroiditis, drug induced hypothyroidism and iatrogenic hypothyroidism.

## The clinical features of hypothyroidism

It include unexplained fatigue, bradycardia, excessive gain in weight, slowness in movement and speech, lack of appetite, cold intolerance, dryness of skin, excessive loss of hair, sleepiness, locomotor pain and weakness, pitting oedema of lower limbs, hyporeflexia, depression, mental impairment, memory and concentration problems, constipation, disturbances in menstrual cycles, Infertility, paraesthesia, decreased vision and hearing and fullness in throat and hoarseness due to the enlarged gland<sup>2</sup>.

Complications of untreated or maltreated hypothyroidism include risk for cardiovascular disease due to the increased levels of cholesterol, goitre, and pregnancy complications like preeclampsia, fluid retention, anaemia, postpartum haemorrhage, premature birth, and miscarriage, myxoedema coma leading to confusion, hypothermia and drowsiness.<sup>4</sup>

It is a major risk factor in fertility and pregnancy. Hypothyroidism accounts for 53.7% of infertility cases<sup>5</sup> Maltreated hypothyroidism often leads to impaired intellectual, cognitive and neural functions in the new born. Attention deficit and hyperactive



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disorders are also not uncommon in children born to hypothyroid mothers.<sup>6</sup>

TSH assays are used as the most sensitive tool for screening primary hypothyroidism. If the TSH level is high, the free thyroxine (T4) or the free thyroxine index level should be evaluated, which is a surrogate of the free hormone level.

Routine measurement of triiodothyronine (T3) is not indicated. In hypothyroid patients, there will be elevated TSH with decreased T4 or FTI or elevated TSH with normal free T4 or FTI is considered as mild or subclinical hypothyroidism.<sup>2</sup>

Individualised Homoeopathic constitutional approach in a case of hypothyroidism is seen to be very effective for its cure that is disappearance of the symptoms as well as reestablishment of the normal hormonal levels, limiting the chances of recurrence of the issue and aids in synthesis of thyroid hormones resulting in its insufficient release for bodily needs. Importance of constitution while treating chronic diseases is mentioned in Aph: 5 of Organon of Medicine: "Useful to the physician in assisting him to cure are the particulars of the most probable exciting cause of the acute disease, as also the most significant points in the whole history of the chronic disease, to enable him to discover its fundamental cause, which is generally due to a chronic miasm. In these investigations, the ascertainable physical constitution of the

patient (especially when the disease is chronic), his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, etc. are to be taken into consideration."<sup>7</sup>

The concept of constitutional treatment was also advocated by Hippocrates and Paracelsus<sup>8</sup> and was also used in Chinese medicine. It is not infrequent that many have to depend on thyroidectomy for an enlarged gland with complications. According to the pioneer of Homoeopathy Dr. H A Roberts, "In removing the tonsils, the teeth or other organs by surgical operation we are dealing with the end product and not with the vital energy. We are cutting off the manifestation of the disease and are doing nothing to set in order the vital energy or to prevent further disease manifestations. These diseased conditions have developed as an expression of the inward turmoil and distress under which the whole individual suffers."<sup>9</sup>

## Hypothyroidism and Miasm

In homoeopathy the cause of chronic diseases is due to miasms. The miasms are responsible for the functional and structural manifestation of the disease in an individual. Accordingly, to Hahnemannian classification of chronic diseases there namely three miasms that are fundamental cause for chronic diseases namely psora, sycotic and syphilitic miasm. Hypothyroidism results in

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reduced amount thyroid hormone secretion. There are various etiological factors for causing hypothyroidism, however the most common factors for hypothyroidism are autoimmunity. In autoimmune disorder the body produces excessive immunological reaction to its on antigen. That indicates it belongs to the sycoticmiasm.

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# DIAGNOSIS OF SYCOTIC MIASM IN GYNAECOLOGICAL DISORDER

A gynaecological disorder is a condition which affects the female reproduction organs, namely the breasts and organs in the abdominal and pelvic area including the uterus, ovaries, fallopian tubes, vagina and vulva. Virtually every woman will suffer a gynaecological condition at some point in her life. These includes

Cervical disorder  
Menstrual disorder  
Ovarian disorder  
Uterine disorder  
Vulval and vaginal disorder

Miasm are states or conditions which pollutes the human organism with unhealthy tendencies which when taken into the organism, may setup a specific disease. They are dynamic disease producing powers or an invisible polluting substance which once it gains entrance, over powers the Vital force and pollute the whole system producing true natural chronic diseases. Each Miasm creates a weakness or a tendency to a particular group of disease.<sup>1</sup>

Dr Hahnemann clearly points out the essentials of considering the miasms while treating complex chronic maladies in his book "Organon of medicine" in aphorism 5, 78 to 82, 94 and 206 to 208. Miasmatic analysis is integral part of homeopathic evaluation of every individual case of it chronic disease.<sup>2</sup>

Sycosis is Greek word "syco" means fig. Hahnemann used this word sycotic because person tends to make warts that look like fig. Alternatively, the word Sycosis means "verrucose".

Sycosis is caused by suppressed (commonly

sexually transmitted infection) and passed to following generations. It can be caused by a primary infection (not inherited) suppressed by antibiotics. Some common diseases attributed to sycoticmiasm include abortion, anaemia, appendicitis, pelvic disease, haemorrhoids, prostatitis, kidney swelling, gout, arthritis, asthma, eczema, rheumatism, warts, and other urinary diseases. It is denoted by over functioning ailments (hyper).<sup>1</sup>

## **Location Tissue affection and types of changes**

- Diseases associated with proliferation and infiltration of tissues.
- One that meets with sudden death.<sup>3</sup>
- **Pathology**
- Over growth, Infiltration, Proliferation.<sup>3</sup>
- **Pattern of response**
- Sycosis is a stage later to psoric changes, there is slow and sluggish development of ailments. Slow onset, gradual progress and decline Irreversible. Sluggishness and fixed negativity.<sup>4</sup>
- **Discharge**
- The sycotic discharge is thin, watery, greenish/yellow or dark, like dirty water, and usually acrid and excoriating, corroding the parts producing pruritus of the parts passed over. 3
- **Menses**
- Menstrual flow acrid, excoriating, biting, clotted and stringy.
- Stain difficult to wash off. Menstrual disturbances from hormonal imbalances particularly around puberty and menopause.<sup>3</sup>
- **Quantity/duration**
- Profuse flow which causes severe weakness.<sup>3</sup>
- **Odor**
- All genital discharges of fish brine odor.
- Odor is pungent, musty, like fish brine or stale fish. 3
- **Pain**
- Menses painful. Very often pains are

# DIAGNOSIS OF SYCOTIC MIASM IN GYNAECOLOGICAL DISORDER

spasmodic, colicky, and paroxysmal. Flow comes with pain. 3

- **White discharge**
- Thin, greenish yellow, acrid itching and burning of parts. Mental weakness from it >from leucorrhoea. 3
- **Menses associated with**
- Hyper excitation and frequent sexual arousal, mental weakness, purities vulvae as result of imbalance in the pH of the vaginal fluid. 3
- **Past history**
- Past history of Mastitis, polyp/cysts, Uterine fibroid, Ovarian tumor, Pelvic inflammatory disease, Polycystic ovarian disease, Endometriosis, Genital warts. Retroversion and mal position of uterus.
- Ectopic pregnancy and complication during labor. 3
- **Sterility**
- Sterility results from incapability to conceive due to factor like PCOD and hormonal imbalances.3
- **Sexual desire**
- Increased desire resulting in various sexual fantasies, voluptuous desire and nymphomaniac. 3
- **Modality**
- < Rest, rainy humid weather, Changes in the weather, damp wet weather, daytime and night, complaints < by abnormal discharge (e.g. leucorrhoea, coryza etc.)
- >Return of unnatural and suppressed normal discharge, slow motion, lying on abdomen and dry weather. 3
- **Mental symptom**
- Sycosis are always inclined to show off, keep thing for self, secretive Pedantry (overly concerned with details),
- Narrow minded (lacking tolerance or flexibility).
- Suspicious, deceitful, jealous, cruel and vindictive.
- Dissatisfied - it leads to mental restlessness.
- Forgetful - He forgets recent activities, names and dates but remembers old incidents well, cannot find the right words, etc.
- Lack of sense of rectitude and just (anti- social

a form of behaviour develops).

- Selfishness.
- Highly irritable and fits of anger.
- Fixed ideas.
- Lack of confidence on social front
- Quarrelsomeness.
- Broods over every slightest upsets.
- Feeling of unworthiness which leads to suicidal tendency.
- Feeling so guilt.
- Extremely practical individuals.
- Workaholics.
- Mania- repeats the same sentence.
- Superstitious
- Restlessness<sup>4</sup>

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# CASE OF OLIGOSPERMIA WITH UNDERSTANDING OF MIASM

A 34yrs male came with his wife for treatment of primary infertility with all reports. Reports of his wife is absolutely normal; fault lies in male partner his semen analysis was as below

Semen analysis

Sperm count: 3.10 million/ml

Active motile: 50%

Sluggishly motile: 10%

Non motile: 40%

Fructose test positive

This was the report; patient has already taken so many treatments without fruitful result since last few yrs.

**HISTORY:** no significant complain, except semen report, his wife report regarding infertility is normal.

**PAST HISTORY:** bilateral renal calculi (3mm, 4mm),

H/o Lipoma on hand,

Recurrent aphthous in mouth,

**FAMILY HISTORY:** Father –Diabetic, Mother – diabetic

**PERSONAL HISTORY:** Appetite – normal

Thirst; normal

Stool; constipated

Urine: normal

Perspiration: profuse++

Skin: dark skin, warts on face, armpits, and on scrotum

Sleep: disturbed

Desire: Sweet+++,

Thermal: chilly patient

Appearance: obese, dark skinned,

**PATIENT AS A PERSON:**

How is your nature?

Patient's answer: I am a very good by nature, I never spoiled relation, I lose my temper at home (ghare gusso thay baki bahar kai thodu bolay),

How is your confidence?

Answer: not that much.

Sensitivity: I am very sensitive even I weep when I see emotional seen in picture or serials.

Fear; about future

Dream; not specific

Little bit anxiety regarding this complains, but no one know what going on in my mind

This was the history...

**PRESCRIBING TOTALITY:**

Cowardice++

Secretive++

Desire sweet+++

Desire warm food++

Chilly patient

Weeps emotionally ++

Anxiety

Warts on genital

Warts on face

Miasmatic: strong sycotic ++++

Considering is complain, past complain, and nature patient is sycotic. So, considering all

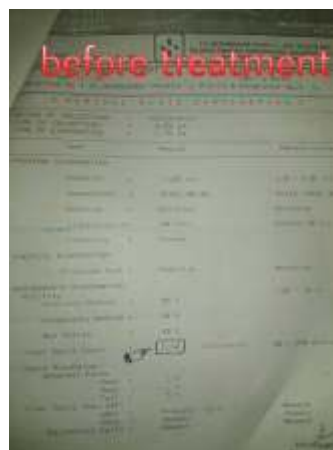
Prescription; was

Thuja 1M two doses,

Sac lac 30 for month,

After 7–8-month treatment with above prescription with the same repetitions his sperm count is absolutely normal. His sperm count was 32 million/ml with 70% motile sperm.

So, in chronic case a miasmatic evolution is must.



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# CASE OF RENAL CALCULUS WITH SYCOTIC MIASM

Patient information: A 59 year- old married man of Indian ethnicity.

## Particulars of patients:

Name: Girish Bhai bhoi,

Age: 59 years

Address: Aardi, Waghodiya

Date of first visit: 13/09/2021

## Present complaints:

The Patient having complaints of radiating abdominal pain and hardness in left side of lumbar region since 6 months this complaint worse at empty stomach and better by eating and drinking . Patient generally suffered from burning micturition since last 7-8 months. Accompanied by dyspnoea on exertion.

History of present complaints:

Duration: 7-8 months

Mode of onset: sudden

Probable cause: Diet? Medication?

Past History:

Since 2-3 year having suffering from diabetes

Family History:

Father: asthma –death

Mother: diabetes-death

Personal History:

Addiction: tobacco

Occupation: Farmer

Diet: vegetarian

Marital status: married

History of vaccination: done all

General examination:

Physical generals:

Appearance: dark complexion &medium built

Appetite: decreased

Thirst: moderate

Desire salty food

Aversion: pickles

Taste: not specific

Perspiration: profuse all over the body

Thermal: hot patient

General modality: Aggravation on walking

Amelioration: by rest

Mental general:

Mentally patient was a mild disposition.

Physical examination:

Pulse: 74/min

Blood pressure: 130/90 mm of hg

Respiration: 20/min

## Laboratory investigations:

USG on abdomen and pelvis: The bladder is full with infection.

1) Prostate size I (34\*52\*49) =46gm enlarged .cystitis. Mild prostetomegaly. Right inter-renal 24mm midpoint and 20mm right renal calculus.

2) Prostate size is 41 gm enlarged. Cystitis. Mild prostetomegaly.

Right inter renal 25 mm lower pole and 14 mm mid pole calculus.

Differential diagnosis: renal calculus Hernia

Urinary tract infection

Provisional diagnosis: Renal calculus

Clinical diagnosis: Renal calculus

Miasm:

Dominant miasm: sycoticmiasm

Fundamental miasm: sycoticmiasm

## Analysis of the case:

Physical symptoms: desire –salty food, aversion–pickles

Particular symptoms: Pain in left side of

# CASE OF RENAL CALCULUS WITH SYCOTIC MIASM

lumbar region Radiating type of pain  
Aggravation from empty stomach  
& amelioration for eating or drinking

Evaluation and totality of symptoms:

Desire for salty food  
Aversion for pickles  
Pain in left side of lumbar region with hardness  
Radiating pain  
Aggravation for empty stomach  
Amelioration for eating or drinking

Approach: non- reportorial

Non reportorial totality:

-Desire for salty  
-Aversion for pickles  
-Pain in left side of lumbar region  
-Radiating type of pain  
-Aggravation for empty stomach  
-Amelioration for eating or drinking

## Prescription:

The conventional medicine for the complaints. He was prescribed berberis vulgaris for Q (5-5-5-5) and hydran. Q (10-10-10-10) without much relief in his complaints.

Axillary measures: take plenty of water and avoid pulses.

## Follow up and outcome:

- 1) 13/09/2021-No improvement, all - berberis vulgaris 200 OD
- 2) 28/09/2020- Slight improvement –pain slight reduced –no medicine, only sac lac given
- 3) 13/10/2021-slight improvement –radiating pain reduced but back pain

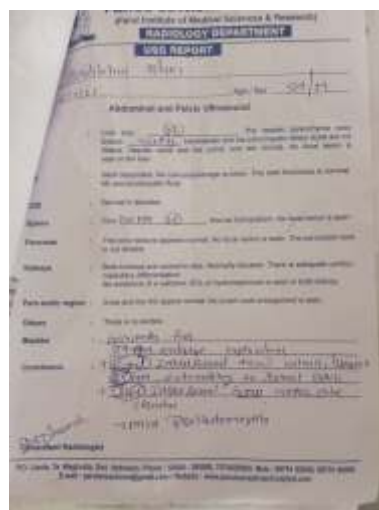
present –no medicine, only sac lac given

- 4) 28/10/2021-much better –hardness reduced –no medicine, only sac lac given
- 5) 15/11/2021-improved –patient relief much better –sac lac given for month.

Remarks:

Patient had renal calculus due to defective eating habits which were predisposing factor for the complaint. Here miasm play the role and sustain the disease condition in the patient. so, here along with the homoeopathic medicine and dietary changes given to the patient and after that we got result.

## REPORTS:



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# COCURRICULAR ACTIVITIES



**Visit of Mental Hospital** organized by Department of community medicine on 2.8.2021



**Visit of Infectious Diseases Hospital** organized by Department of community medicine on 5.8.2021



Department of Practice of Medicine organised a **quiz competition** on 11.8.2021



**Symposium** organised by Department of practice of medicine on 2.9.2021



**Workshop** organized by the Department of Organon of Medicine on 7.9.2021



**Workshop** organized by the Department of Repertory and case taking on 16.9.2021



**Symposium** presented by 4th BHMS students organized by Department of HMM on 21.9.2021



**Workshop** organized by the department of community medicine on 7.10.2021



**Workshop** organized by Department of HMM on 13.10.2021



## CO-CURRICULAR ACTIVITIES



NSS unit of PIHR celebrated the **Swachh Bharat Week** on 7.8.2021



**Nutritional awareness** at Santosh, Tandalja on 13.8.2021



**Inaugural ceremony of Dr. J. K. Patel Memorial Seminar Hall** on 25.8.2021



Department of AYUSH under the program **"Azadi ka Amrit Mahotsav"** interactive lecture at Narayana School on 1.9.2021



Department of AYUSH under the program **"Azadi ka Amrit Mahotsav"** awareness program at Dr. N. G. Shah Sarvajanic High School on 4.9.2021



celebration of **Teachers Day** at Dr. Jayesh Patel Memorial Seminar Hall on 6.9.2021



**Ganpati Celebration** on 10.9.2021



**Aude Sapere - Homoeopathy A Rational Art and Science of Healing competition** on 14.9.2021



**Yuva Sankalp-Shreshtha Bharat ke Paanch Prakalp Program** on 22.10.2021

# HOSPITAL ACTIVITIES



**Breast feeding awareness campaign along with free medical camp organized on 7.8.2021**



**Preventive medicine distribution camp against Dengue, Swine flu and Chikunguniya on 25.8.2021**



**Health survey at Ankhhol village on 25.8.2021**



**Blood sugar detection camp at PIHRH organized On 25.8.2021**



**Distribution of supplementary medicine at Tandalja along with free Homoeopathic medicine distribution camp on 25.8.2021**



**Distribution of iron and multivitamin tablets at Ankhhol village as part of World Nutritional Week on 4.9.2021**



**celebration of World Heart Day on 29.9.2021**



**"World Psoriasis Day" celebrated on 29.10.2021**



**Awareness program for water conservation, in Primary School on 29.10.2021**



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