

Parul Institute of Homoeopathy and Research

A QUARTERLY HOMOEOPATHY NEWS BULLETIN

HOMOEOINSIGHT

THIS BULLETIN IS BASED ON

ROLE OF HOMOEOPATHY IN AUTOIMMUNE DISORDERS

VOLUME XII | ISSUE XIII

OCTOBER 2023



THE OBJECTIVE OF THIS INSTITUTIONAL BULLETIN IS:

- To provide all the updates and disseminate information on the achievements of all the faculty and students.
- To share valuable information about the outstanding services rendered by respective departments.
- To make everyone in this institution engaged and informed to boost morale and to keep motivated.

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Managing Editor's Message



DR. B. P. PANDA Principal& Professor-Dept. Of Organon of Medicine, PIHR, Parul University

I hope that 2024 brings happiness, health, and prosperity to every one of the readers. With pleasure, I present the thirteenth edition of "Homoeo Insight," our institutional bulletin. Given the spectrum of homoeopathy, our issue editor, Dr. Kirti Baria, chose the topic "Role of Homoeopath in Autoimmune disorders" for this issue.

Autoimmune disorders include psoriasis, inflammatory bowel disease, rheumatoid arthritis, type 1 diabetes, lupus, and Pernicious Anaemia etc. According to Khilji, "The signs and symptoms of autoimmune diseases vary from mild to severe depending on the individual and the type." These symptoms are very subjective. Over time, there has been progress in controlling many infectious diseases; yet, the prevalence of autoimmune diseases has been steadily rising.

In homoeopathy we treat the patient not the disease. So, irrespective of name given nosologically by the conventional medicine, homoeopathic physician considers the person as a whole and select medicine in individualistic approach following the law of similar. So, we have a great scope for treatment of autoimmune, so called Psychoneuroimmunology disorders and Apart from different role of homoeopath this bulletin also reflects different curricular, co-curricular and extracurricular activities that we stake holders have completed in the previous quarter of the year.

EDITORIAL MESSAGE



Dr. Kirtikumari Baria Associate Professor & HOD Department of Forensic Medicine & Toxicology PIHR, Parul University

Homoeopathy offers a promising avenue in the management of autoimmune disorders by embracing a holistic, individual-centric approach that seeks to stimulate the body's natural healing abilities. Its gentle yet profound impact on overall health makes it a valuable adjunct to conventional treatments, providing a ray of hope for those navigating the complexities of autoimmune conditions.

As we strive for a more integrative and patient-centric healthcare approach, acknowledging the potential of homoeopathy in autoimmune disorders invites us to explore diverse paths toward healing and well-being.

Hence, we decided the title- "Role of Homoeopathy in Autoimmune Disorder". I am grateful to principal sir Dr. B. P. Panda, for giving me this opportunity to be the editor of this issue. I feel blessed to have my faculty members and students by my side and I thank them for their active participation in submitting the articles. Lastly, I hope the content of this bulletin will enlighten the readers & give a clear picture of scope of Homoeopathy in Autoimmune disorders.



TYPES OF AUTOIMMUNE DISEASES

ABOUT AUTHOR:

Dr. Nayana D. Patel Assistant Professor of Department of Homoeopathy Pharmacy, PIHR



INTRODUCTION: (1)

Autoimmune disease is a condition arising from an abnormal immune response to a functional body part, immune system disorders cause abnormally low activity or over activity of the immune system, In case of system over activity the body attacks and damages its own tissues (**autoimmune diseases**) and immune deficiency disease decreases the body's ability to fight invaders causing vulnerability to infections, in response to an unknown trigger the immune system may begin producing antibodies that instead of fighting infections attacks the body own tissues.

KEY WORDS: Type 1 diabetes, Rheumatoid arthritis (RA), Psoriasis/psoriatic arthritis, Multiple sclerosis, Systemic lupus erythematosus, inflammatory bowel disease, Addison's disease, Graves' disease, Sjögren's disease, Hashimoto's thyroiditis, Myasthenia gravis, Celiac disease, Autoimmune vasculitis, Pernicious anemia.

WHAT ARE THE MOST COMMON AUTOIMMUNE DISEASES? (2)

Researchers have identified more than 100 autoimmune diseases. Here are 14 more common ones.

- 1. Type 1 diabetes: Your pancreas produces the hormone insulin, which helps regulate blood sugar levels. In type 1 diabetes, the immune system destroys insulin-producing cells in your pancreas. High blood sugar from type 1 diabetes can damage the blood vessels and organs. This can include you're:
 - Heart
 - Kidneys

- Eyes
- Nerves
- 2. Rheumatoid arthritis (RA): In RA, your immune system attacks the joints. This causes symptoms affecting the joints such as:
 - Swelling

Soreness

Warmth

stiffness

While RA more commonly Trusted Source affects people as they get older, it can also start as early as your 30s. A related condition, juvenile idiopathic arthritis, can start in childhood.

- 3. Psoriasis/psoriatic arthritis: Skin cells grow and then shed when they're no longer needed. Psoriasis causes skin cells to multiply too quickly. The extra cells build up and form inflamed patches. On lighter skin tones, patches may appear red with silver-white scales of plaque. On darker skin tones, psoriasis may appear purplish or dark brown with gray scales. Up to 30% Trusted Source of people with psoriasis also develop psoriatic arthritis. This can cause joint symptoms that include:
 - swelling

pain

stiffness

- 4. Multiple sclerosis: Multiple sclerosis (MS) damages the protective coating surrounding nerve cells (myelin sheath) in your central nervous system. Damage to the myelin sheath slows the transmission speed of messages between your brain and spinal cord to and from the rest of your body. This damage can lead to:
 - numbness

weakness

balance issues

· trouble walking

Different forms of MS progress at different rates. Difficulties with walking are one of the most common mobility issues with MS.

5. Systemic lupus erythematosus (SLE): Although doctors in the 1800s first described lupus as a skin disease because of the rash it commonly produces, the systemic form, which is most common, actually affects many organs. This can include you're:

joints

brain

kidneys

- heart
- 6. Inflammatory bowel disease: IBD describes conditions that cause inflammation in the lining of the intestinal wall. Each type of IBD affects a different part of your gastrointestinal (GI) tract.
 - Crohn's disease can inflame any part of your GI tract, from the mouth to the anus.
 - Ulcerative colitis affects the lining of the large intestine (colon) and rectum.

Common symptoms of IBD can include:

diarrhoea

- abdominal pain
- bleeding ulcers
- 7. Addison's disease: Addison's disease affects the adrenal glands, which produce the hormones cortisol and aldosterone as well as androgen hormones. Too little cortisol can affect how your body uses and stores carbohydrates and sugar (glucose). Too little aldosterone can lead to sodium loss and excess potassium in your bloodstream.

Common symptoms of Addison's disease can include:

weakness

weight loss

• fatigue

- low blood sugar
- 8. Graves' disease: Graves' disease attacks the thyroid gland in your neck, causing it to produce too much of its hormones. Thyroid hormones control the body's energy usage, known as metabolism. Having too much of these hormones revs up your body's activities, causing symptoms that may include:
 - rapid heart rate (tachycardia)

• swelling of the thyroid gland

(goitre)

- heat intolerance
- unintentional weight loss
- 9. Sjögren's disease: This condition attacks the glands that provide lubrication to your eyes and mouth. The hallmark symptoms of Sjögren's disease are dry eyes and dry mouth, but it may also affect your joints or skin.
- 10. Hashimoto's thyroiditis: In Hashimoto's thyroiditis, thyroid hormone production slows to a deficiency. Common symptoms of Hashimoto's thyroiditis can include:
 - weight gain
 - sensitivity to cold
 - fatigue

- hair loss
- swelling of the thyroid (goiter)



- 11. Myasthenia gravis: Myasthenia gravis affects nerve impulses that help the brain control muscles. When the communication from nerves to muscles is impaired, signals can't direct the muscles to contract. The most common symptom is muscle weakness. It may worsen with activity and improve with rest. Muscle weakness can also affect:
 - eye movements
 - opening and closing eyes

- swallowing
- facial movements
- 12. Celiac disease: People with celiac disease can't eat foods containing gluten, a protein found in wheat, rye, and other grain products. When gluten is in the small intestine, the immune system attacks this part of the GI tract and causes inflammation. People with celiac disease may experience digestive issues after consuming gluten. Symptoms can include:
 - vomiting
 - diarrhoea

- constipation
- abdominal bleeding
- 13. Autoimmune vasculitis: Autoimmune vasculitis happens when your immune system attacks blood vessels. The inflammation that results narrows your arteries and veins, allowing less blood to flow through them.
- 14. Pernicious Anaemia: Pernicious anaemia may happen when an autoimmune disorder causes your body to not produce enough of a substance called intrinsic factor. Having a deficiency in this substance reduces the amount of vitamin B12 your small intestine absorbs from food. It can cause a low red blood cell count. Without enough of this vitamin, you'll develop anemia, and your body's ability for proper DNA synthesis will be altered.

It can cause symptoms that include:

- fatigue
- weakness
- headaches

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STERALLIA MEDIA - MIRACLE REMEDY FOR RHEUMATOID ARTHRITIS

ABOUT AUTHOR:

Dr. Kosmika Makwana HOD & Associate Professor, Department of Homoeopathic Pharmacy,



ABSTRACT:

Rheumatoid arthritis is a chronic, inflammatory, autoimmune disease that primarily affects the joints. The RA patient may experience severe disability, joint deterioration, the onset of co-morbidities, decreased quality of life, and premature mortality when it is left uncontrolled. Sterallia Media is useful remedy acting very promptly is cases of rheumatism.

KEYWORDS: Homoeopathy, Sterallia media, Rheumatoid arthritis. Autoimmune **INTRODUCTION:**

Rheumatoid arthritis is an autoimmune condition wherein the immune system attacks the body's own healthy body tissue. In this disease, the immune system sends antibodies to the lining of joints and triggers the tissue surrounding the joint. Due to this, the soft tissues covering the joints become sore and inflamed. If the illness goes untreated, then it may damage the shape and alignment of the joint. [1]

Rheumatoid arthritis is a persistent inflammatory systemic autoimmune disorder causing symmetrical polyarthritis of small and large joints, typically presenting between the ages of 30-50 years, commonly seen in females. It affects the lining of the joints, causing painful swelling that can eventually result in bone erosion and deformity. ^[1]

Conventional management of rheumatoid arthritis (RA) includes administration of non-steroidal anti- inflammatory drugs (NSAIDs), hip replacement surgery, and disease modifying ant rheumatic drugs (DMARDs) which have their own adverse effects on excessive consumption. Gastric ulcers, bleeding and perforation are the most common adverse reactions associated with excessive consumption of NSAIDs. [3]

HOMOEOPATHIC CONCEPT:

The Homoeopathic remedies, on the other hand improves the general well-being, improves the quality of life in patients along with reducing pain and disability and limits the need of analgesics and DMARDs in RA. Homoeopathic remedies improve the quality of life of patients with RA by reducing intensity of pain, limiting disability and reducing disease activity, thus causing improvement in general and disease condition in particular. Homoeopathic remedy is effective in managing all the symptoms of RA and also plays an important role in preventing relapse of the condition and improving the general health of the patients. Many of the drugs are present in the Homoeopathic Materia Medica for RA, which are well proved and commonly called polychrest.

Sterallia Media is popularly known as Chickweed. Stellaria Media is a perennial plant in the family Caryophyllaceae. Other common names include chickenwort, Shipra, craches, maruns, and winterweed. It is a native to Europe and naturalized throughout the world. The plant is

widely dispersed all over the world and has been used as therapeutic substance since time immemorial for traditional herbal medicine. Plant is widely dispersed in cold and temperate regions. Each part of the tree having amazing therapeutic properties including mainly leaves, root barks, roots, etc. Different parts of the plant have been used to treat various gastrointestinal disorders, asthma, diarrhoea, measles, jaundice, renal, digestive, reproductive and respiratory tracts inflammations. They also lessen swelling and used as plasters for broken bones.





The taxonomy hierarchy of *S. media* Linn, is as follows ^[4]

Kingdom: Plantae

Subkingdom: Viridiplantae **Division:** Tracheophyta

Subdivision: Spermatophytina

Class: Magnoliopsida

Superorder: Caryophyllanae

Order: Caryophyllales **Family**: Caryophyllaceae

Genus:Stellaria L.

Species:Stellaria media (L.)

Traditional medicinal uses:

Since ancient times, people have utilized chickweed and used it in folk medicines for curing illnesses like inflammation, rheumatism, and viral infections in China. In North America and Europe, leaves are used for the treatment of itching, burns, and cuts on external skin. The whole plant of chickweed has been used as a plaster for broken bones and acts as a cooling agent. It is used to reduce pain, heal wounds, stop bleeding, and also for the treatment of cancer, kidney diseases, neurological disorders, and inflammation. Chickweed leaves and juice have various medicinal benefits, especially in liver diseases, lung infections, thyrotoxicosis, hemorrhoids and joint pain. Fresh leaves and shoots salad are used for kidney, liver, lung, and heart diseases. It is also used as demulcent, expectorant, carminative, astringent, depurative, emmenagogue, and galactagogue. The leaves, flowers, stems, and roots of the chickweed have the renowned potential for psychological disorders, inflammation in the respiratory and reproductive system. [4]



Nutritional profile

Chickweed leaves are rich in protein, fat, fiber, carbohydrates, and various dietary minerals. Chickweed is one of the nutrient-dense plants that contain 16 essential amino acids of the total free amino acids (27.27%) and total bound amino acids (48.05%) in their aerial parts. The protein requirement from the chickweed is complete as compared to other green leafy vegetables. The leaves are also appraised to contain minerals such as calcium, iron, copper, zinc, magnesium, potassium, phosphorus, and sodium. The leaves are rich in vitamins A, B1, B2, B3, C, E, and rutin. Chickweed leaves also contain chlorophylls and carotenoids in fresh, frozen, and dried forms. [4]

Anti-inflammatory activity

Few studies appraised the anti-inflammatory potential of S. media in animals. Till date, only the in vitro appraisal of crude or purified fractions was reported. The inflammatory effect of methanolic leaf extract (MLE) was investigated on test rats of different body weights (100 mg/kg, 300 mg/kg and 500 mg/kg). Pronounced reduction in inflammation was exhibited on formalin-induced paw lick and albumen induced paw oedema after oral administration of MLE, indomethacin (5 mg/kg b.w) and distilled water (10 mg/kg b.w). Also, MLE considerably inhibited egg albumen-induced paw oedema at p < 0.05. [5]

WHAT DIFFERENT HOMOEOPATHIC MATERIA MEDICA SAY ABOUT STERALLIA MEDIA...

THE RHEUMATIC REMEDIES: ROBERT H. A.

Stellaria Media is useful remedy acting very promptly is cases of rheumatism. The excruciating pain comes on very rapidly with soreness of the part to touch, stiffness of the joints, and aggravation of the pain by motion. ^[9]

NEW MANUAL OF HOMOEOPATHIC MATERIA MEDICA WITH REPERTORY:

Induces a condition of stasis, congestion, and sluggishness of all functions. Morning aggravation. Sharp, shifting, rheumatic pains in all parts very pronounced. Rheumatism; darting pains in almost every part; stiffness of joints; parts sore to touch; worse, motion. Chronic rheumatism. Shifting pains (Puls; Kali sulph). Psoriasis. Enlarged and inflamed gouty finger joints. Rheumatoid pains in different parts of the body. Sharp pain in small of back, over kidneys, in gluteal region, extending down thigh. Pain in shoulders and arms. Synovitis. Bruised feeling. Rheumatic pains in calves of legs. Worse, mornings, warmth, tobacco. Better, evenings, cold air, motion. [6]

MATERIA MEDICA BY JOHN HENRY CLARKE

Tincture of whole fresh plant in bloom. Clinical.-Gout. Liver, inflammation of., Rheumatism. Psoriasis, Rheumatic pains over r. side of head, esp. at back; sore to touch. -Rheumatic pains; darting through whole head < r. side; through l. half of forehead, over eye; sore to touch. Rheumatic pains across small of back, < bending. -Loins stiff and sore. -Dull pain under r. scapula. Limbs. -Joints stiff. Upper Limbs: Darting, rheumatic pain: down r. arm and in middle of index finger of l. hand Lower Limbs.-Rheumatic pains: in r. hip; l. foot; ankle; l. knee, gradually extending along thigh; below r. knee-cap; in calves which are sensitive. Generalities -Pains < on motion; parts sore to touch.-Symptoms come on rapidly after taking the drug; next morning on rising bruised feeling all over thighs as from over-exertion.^[7]

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EXPLORING HOMOEOPATHIC APPROACHES FOR PSORIASIS MANAGEMENT

ABOUT AUTHOR:

1.Santoshkumar Jashvantbhai Pandya Student of 3rd Year BHMS, PIHR



2.Ketulkumar Dilipbhai Parmar, Student of 3rd Year BHMS, PIHR



ABSTRACT:

Psoriasis is one of the common skin diseases. Genetic factors play role in the aetiology of the Psoriasis. Homoeopathic medicines have a tremendous effect on skin diseases. So, the Psoriasis needs to be treated by homoeopathic medicines rather than other methods of treatment.

KEY WORDS:

Autoimmune Skin Disease, Psoriasis, Homoeopathic approach, Homoeopathic indication.

INTRODUCTION:

The psoriasis is the one of the common skin diseases characterised by scaly papules and plaques. The prevalence of psoriasis varies in World from 0.1% to 3%. The onset of this disease is common in second and fourth decade of life. Psoriasis occurs equally in male sand females.

ETIOLOGY:

- 1. Genetic factors
- 2. Chronic infections (e.g., bacterial, HIV etc.)
- 3. Immunological cause
- 4. Trauma
- 5. Seasonal variations (worse in winter)
- 6. Psychological stress
- 7. Prolonged use of medications

CLINICAL FEATURES:

- Erythematous, well defined, dry, scaly papules and plaques on the skin
- Scales are loose, dry and silvery white.
- Multiple bleeding points are seen on scraping the skin.
- Itching and burning on the skin.

CLINICAL TYPES:





1. Guttate psoriasis:

Mostly seen in children following streptococcal infections. Eruption of pin head size to pea sized erythematous papules which are distributed bilaterally and symmetrically in the body.

2. Chronic plaque psoriasis:

This type is manifested as coin sized to large palm sized well defined erythematosquamous plaques. Distributed bilaterally on extensors of the body. Most commonly elbow and knee involved.

3. Palmoplantar psoriasis:

Usually affects palms or soles which may extend to the dorsum of hands and feet.

4. Nail psoriasis:

Nails are commonly affected in psoriasis. Thickening of the nail plate occurs.

5. Exfoliative psoriasis:

Generalized erythema and scaling of more than 90% of body surface area.

6. Pustular psoriasis:

The tiny, superficial, sterile pustules top a plaque of psoriasis it's called pustular psoriasis.

7. Psoriatic arthritis:

Its inflammatory arthritis associated with psoriasis.

MANAGMENT:

- Use of emollients like white soft paraffin and liquid paraffin
- Topical corticosteroids
- Vitamin D analogues
- Salicylic acid

DIFFERENTIAL DIAGNOSIS:

- Eczema
- Dermatitis
- Lichen planus

HOMOEOPATHIC MEDICINES:

1. Arsenicum album:

The evidence suggests that arsenicum benefits people with dry, scaly skin made worse by itching and better by applying heat. There's no scientific evidence that it helps with psoriasis. Patient is having restlessness along with burning in the skin.

2. Graphites:

It is used in homoeopathy for people with long-term skin disorders and leathery, cracked skin. There's only anecdotal evidence that it can help psoriasis symptoms.

3. Sulphur:

There's anecdotal evidence that sulphur reduces skin lesions and itching. Although using sulphur alone as a homeopathic treatment is unproven, it may be mixed with proven psoriasis treatments, such as coal tar or salicylic acid.



4. Petroleum:

Anecdotally, petroleum helps people whose physical problems are made worse by stress. Ingesting petroleum, even in small amounts, can be very dangerous. But petroleum jelly, such as Vaseline, can help seal moisture into your skin and reduce itching, flaking, and irritation.

5. Sepia:

Sepia is useful remedy for psoriasis on the face. Red roughness of the skin. Falling off the hair, during pregnancy and nursing. Dark complexioned individuals

6. Silicea:

Silicea is the medicine for Elevated scurfy spots near the coccyx. Small white scales on the face and neck. White spots on the cheeks. Brittleness of nails.

7. Phosphorous:

Phosphorus is wonderful remedy for psoriasis of the arms and hands, and on the knees at night in bed. Falling out of the hair in large bunches. Dry cough with soreness in the chest.

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SCOPE OF HOMOEOPATHY IN INFLAMMATORY BOWEL DISEASE

ABOUT AUTHOR:

ANKIT VAJA Student 3rd BHMS, PIHR



PRITESH MANGUKIYA, Student 3rd BHMS, PIHR



ABSTRCT:-

In this article authors has tried to explain the commonly encounter inflammatory bowel disease and scope of homeopathy medicine in IBD.

INTRODUCTION:- (1)

These are disease involving small and large bowel of unknown aetiology characterised by multiple ulceration in bowel, clinically manifesting as blood and mucus in stool.

Ulcerative colitis and crohn's disease are included under this heading. Ulceration colitis is a mucosal disease and crohn's disease is transmural disease.

EPIDERMOLOGY:-

IBD prevalence was 321.2 per 100,000 population in 2021 and compared with 2006 (200 per 1, 00, 000population) the prevalence increased at rate of 46%. Similarly the average incidence has increased from the period 2016-2021 (18 per 1,00,000 population in 1 year)

ETIOPATHOGENESIS (1):-

The exact etiology of IBD remains unknown but multiple factors implicated can be consider

1) Genetic factors

- 3 to 20 time higher incidence of occurrence of IBD this is due to genetic defect causing diminished epithelial barrier function.
- Overall there is approximately 50% chance of development of IBD (crohn's disease 60% concordance, ulcerative colitis about 6% concordance) in monozygotic twins.
- The CARD is gene has been associated with IBD, but because of it polymorphic features. The role of gene in ulcerative colitis is not as strong as in crohn's disease.

2) Immunological

- Defective regulation of immune suppression in a normal individual there is lack of immune responsiveness to dietary antigen and commensal flora in the intestinal lumen.
- 3) Microbial factor
- 4) Environmental factor
 - Long term administration of NSAIDS
 - Psychosocial factor



- **Smoking**
- ❖ CROHN'S DISEASE (3):-Chronic inflammatory bowel disease resulting in granulomatous inflammation of small intestine and characterized by recurrent attack of abdominal pain, bloody diarrhoea, low grade fever, loss of weight and anemia.

ETIOLOGY

- Exact cause is not known
- Evidence points towards auto immune etiology
- Genetic predisposition common
- Low fiber diet
- **Smoking**
- Excessive intake of refine sugar
- Mostly occurs in 20-40 year
- Common in male
- Reiter's syndrome

CLINICAL FEATURE(3)

SYMTOMS:-

- Onset sub-acute and insidious
- Abdominal pain around umbilicus or over right iliac fossa
- Colicky pain Worse after meal and better after defecation, passing flatus
- Diarrhoea frequent, watery with blood and mucus
- Tenesmus if rectum involved
- Appetite is good though weakness and weight loss

SIGN:-

- Finger clubbing
- Pedal oedema / bilateral
- Tenderness over right iliac fossa
- Palpable mass
- Sausage shaped abdomen

COMPLICATION

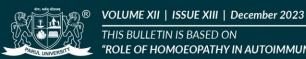
- Intestinal obstruction
- Perforation
- Fistula formation
- **Uveitis**
- **Episcleritis**

INVESTIGATION FINDINGS

- Blood:-HB-low, ESR-Increase
- Stool:-blood and mucus
- Sigmoidoscopy:-mucosa bright red, swollen

■ MANAGEMENT:-(4)

- Mental and physical rest
- Surgical treatment if necessary or for complication
- Vitamin B12 and vitamin D supplementation.



ULCERATIVE COLITIS:-(3)

Chronic inflammatory bowel disease resulting in diffuse ulceration of colon and characterized by recurrent attack of bloody diarrhoea with varying amount of pus and mucus, prostration, loss of weight and anemia.

ETIOLOGY

- Genetic 15% of patient have first degree relative with ulcerative colitis.
- Dietary factor:-allergy to milk protein is responsible for few patient
- Psychosomatic factor
- Dysfunctional immunogranulation in intestinal wall
- Autoimmune
- Mostly occur in female
- Common in 20-40 year of age
- Rare in Japan and Africa
- Constitution: sensitive, shy, over conscious, emotionally immature subject.

CLINICAL FEATURE

SYMTOMS:-

- Onset sub-acute and insidious
- Diarrhoea -frequent and watery, 2 to 20 stool in 24 hour, amount small during day -with blood and mucus
- Lower abdominal pain
- Character of pain- discomfort may be severe worse immediately before stool, better after defecation and passing flatus.
- Fever in acute onset
- Weight loss

SIGN:-

- Dry coated tongue
- Pedal oedema/bilateral
- Pulse fast
- Pressure over colon cause discomfort

COMPLICATION

- Toxic mega colon
- Perianal fistula
- Carcinoma develops in long standing case of ulcerative colitis of more than 10 year.
- Stricture formation

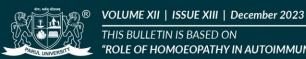
INVESTIGATION FINDINGS

- Blood-Low HB, ESR raised
- Stool examination
- Sigmoidoscopy

Grade-1- Mucosa bright red

Grade-2- Mucosa granular

Grade-3- Mucosa ulcerated and wall thick



Grade-4 - Deep ragged ulcers and wall rigid.

■ MANAGMENT⁽⁴⁾

- Diet should contain high protein, carbohydrate, vitamin and fats, of 3000 calories per day.
- Plasma transfusion or blood transfusion whenever necessary.
- Anemia should be correct.

❖ HOMOEOPATHIC MANAGEMENT⁽⁴⁾⁽⁶⁾

- 1. **ARGENTUM NITRICUM:-**diarrhoea, worse at night, watery, slimy, always after drinking or eating soup, immediate discharge from the bowels, as though the fluid were rolling through without stopping. Soreness and burning in the region of the sigmoid flexure; emaciation, desire for sugar.
- 2. **ARSENIC ALBUM:**-Worse about midnight, burning pain in the abdomen, discharge burning, cadaverously smelling, excoriating the anus, thin lumpy, great thirst, restlessness, exhaustion and emaciation, old look on the face, very cross and despondent.
- 3. BAPTISIA TINCTORIA:-Stools dark, offensive, exhausting, pain in the liver and region of gall bladder, sweat and urine extremely fetid, little or no thirst, gone feeling at pit of stomach, frequent fainting.
- 4. BRYONIA ALBA:-Pain in the bowels after eating or drinking, slightest motion brings on a discharge which looks like dirty water, showing on standing a whitish, finely, and granulated sediment of undigested food at the bottom of the vessel.
- 5. LACHESIS:-Ileocecal region very sensitive to touch, after great straining discharge of a mass of exudations, stools very offensive, heat of abdomen, almost always with typical Lachesis personality.
- 6. **SULPHUR**:-Diarrhea, worse in the night or early in the morning stools yellow brownish or greenish, mixed with blood, slime or pus; faeces pass off while the patient tends to relieve himself of flatus; the abdomen is sore to touch during stool; pain in the small of the back. Palpitation of the heart; congest of the head, prolapsus ani. Itching, burning, smarting; smarting in the anus a rectum.
- 7. **ALLIUM DULCIS:**-Scanty, bloody mucus, covered with bile; soreness of anus with constant desire for stools and slight Tenesmus.
- 8. ALOES SOCROTINA:-Plenty of mucus with pain in rectum after stool. Sense of insecurity of rectum, when passing flatus; lumpy, watery or jelly like stools.
- 9. **PETROLIUM:**-Slimy discharge, also brown fluid or pappy evacuations, pain in the bowels before dusk, a sensation of unpleasant motion and grasping in the bowels, disgust for meat, especially fat, bitter sour taste in the mouth, cold feeling in the abdomen.
- 10. MERCURIUS CORROSIVUS:-Diseases of men, syphilitic; ulcers, with corroding, acrid pus; Bright's disease. Dysentery and summer complaints of intestinal canal, occurring from May to November. Tenesmus: of rectum, not



> by stool (< by stool, Nux); incessant, persistent; stool hot, scanty, bloody, slimy, offensive; shreds of mucous membrane and terrible cutting, colicky pains.

***** CONCLUSION

Inflammatory bowel disease is a term for two conditions (crohn's disease and ulcerative colitis) that are characterised by chronic inflammation of the gastrointestinal tract. Which should be treated with multiple approach like medication, surgery and homoeopathy also have great role to treat inflammatory bowel disease.

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SCOPE OF HOMOEOPATHY IN TREATMENT OF RHEUMATOID ARTHRITIS

ABOUT AUTHOR:

1. Varun Dhanvantbhai Patel Student 3rd BHMS, PIHR



2. Salauddin Ganiagariya Student 3rd BHMS, PIHR



ABSTRACT:

In this article the author has tried to explain the commonly encountered autoimmune knee joint disease that is rheumatoid arthritis and the scope of homoeopathic medicine in the management of rheumatoid arthritis.

KEYWORDS:

Autoimmune disease, Rheumatoid arthritis, Homoeopathic Indication

INTODUCTION:

Rheumatoid arthritis is chronic inflammatory systemic autoimmune disease affecting the joint with unknown etiology characterize by a systemic polyarthritis which is most common form of chronic inflammatory arthritis. (3, 4)

Rheumatoid arthritis often results in articular cartilage and bonedysfunctionandfunctiondisability. It is vital to diagnose and treat this disease early aggressively before damage ensure.

Rheumatoid arthritis is a systemic disease may also lead to a variety of extra articular manifestation including lung, pericarditis, etc. (3, 4)

TRIGGER EVENTS:

Though, the above hypothesis of a possible role of autoimmunity in the etiology and pathogenesis of RA is the event which initiates the destruction of the articular cartilage.

- 1. The existence of an infectious agent such as mycoplasma, Epstein Barr virus, cytomegalovirus, rubella virus.
- 2. The possible role of HLA-DR4 & HLA-DR1. (4)

CLINICAL FEATURES:

- Signs and symptoms may vary in severity, there may be period of flare up alternating with the period of remission. The diagnosis of RA is primarily Clinical. (9)
- Typically presents with polyarticular symmetrical joint pain with stiffness, swelling mostly involving the small joints in the beginning. Some patients may present with oligoarticular asymmetric joint involvement. (9)



- The onset is usually insidious, with joint symptoms emerging over weeksmonths and often accompanied by anorexia, weakness or fatigue. (9)
- Patients usually complains of early morning stiffness which last for more than one hour.⁽⁹⁾
- Commonly involved joints are the wrists , proximal interphalangeal joints metacarpo phalangeal , distal interphalangeal joints.⁽⁹⁾
- On examination: there may be tenderness, swelling and atrophy of the neighboring muscles seen. (9)

INVESTIGATION:

- Elevated markers of inflammation like ESR, C:reactive protein
- Positive –RA factor.
- X ray may bad one to look for the joint damage.

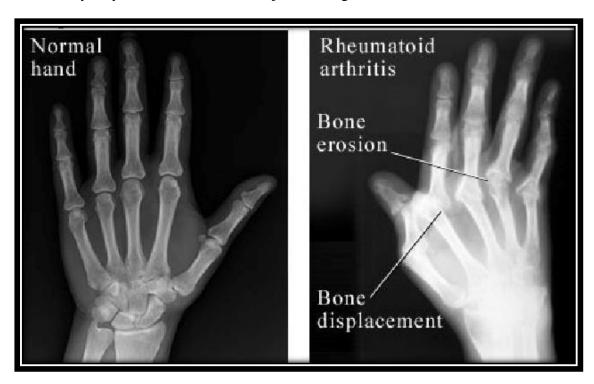


Fig 1.2X-Raychanges seen in hand with RA⁽¹⁰⁾

DIET MANAGEMENT:

According to Organon of medicine sixth edition mentioned in aphorism 259-263 that, the diet and regiments also important in acute and chronic diseases. (5)

1. Anti-inflammatory food:

- Fruits and Vegetables: Rich in antioxidants and antiinflammatory compounds.
- Fatty Fish: Salmon, mackerel, and sardines are high in omega-3fatty acids, which is having anti-inflammatory properties.
- Nuts and Seeds: Especially walnuts and flaxseeds, which are high



inomega-3s.

- Whole Grains: Brown rice, quinoa, and whole wheat provide fiber and nutrients.
- Herbs and Spices: Turmeric, ginger, garlic, and green tea have antiinflammatory properties.

2. Avoid Processed Foods:

 Processed foods, especially those high in refined sugars and saturated fats, can promote inflammation.

3. Maintain a Healthy Weight:

• Excess weight puts additional stress on joints. A balanced diet and regular exercise can help maintain a healthy weight.

4. Moderate Alcohol and Caffeine:

 Excessive alcohol and caffeine intake can interfere with sleep and overall health. Moderation is the key.

5. Limit Dairy and Red Meat:

 Some people with RA find symptom relief by reducing their intake of dairy and red meat. These foods might trigger inflammation in some individuals.

HOMOEOPATHIC MANAGEMENT:

Conventional treatment includes NSAID and anti-rheumatic drugs which has its own adverse effects on excessive consumption. Homoeopathic medicines on the other hand improve the Quality of Life in patients along with reducing pain and disability.

The treatment for Rheumatoid Arthritis may vary from case to case. It also depends upon the duration and severity of the disease. There are various factors which can trigger RA such as Genetic, Emotional and Physical, Environmental factors, so it is important for a homoeopathic physician to consider all this before we begin with the treatment. It should be given based on the law of similar. The remedies in homeopathy moderate the overactive immune system and thus help in reducing inflammation in the bones.

HOMOEOPATHIC MEDICINES:-

Arnica Montana: It used in chronic arthritis when patient complaints of soreness and bruised sensation in joints. Pain worse from touch, everything on which they
lay feels very hard. Rheumatism begins from lower limbs and then extends upwards.
Apis Mellifica : Indicated in acute inflammatory swelling of the joints. Joint looks shiny, swollen with stinging pain.
Belladonna: Indicated in the acute stage of arthritis. When there is sudden redness, swelling with severe throbbing pain in joints. Joints very hot to touch, looks red. Worse in cold, better by warmth.
Bryonia Alba: One of the common remedy prescribed in RA. Patient's complaints of severe stitching type of pain in small joints, swollen, hot, red joints. Every spot is painful on pressure. Relieved by complete rest. Aggravates by least movements.



	Benzoic acid: Indicated for patients with uric acid diathesis. Rheumatic pain.
	Painful nodosities of joints with strong smelling urine is the characteristic of this
	remedy.
	Calcarea carbonica: Arthritis with Nodosities in the affected joints. Pain and
	stiffness of joints aggravated by damp weather. Patient is easily fatigued from
	slightest exertion along with chilliness and laziness is an indication for the remedy.
	Calcarea flourica: Indicated in swollen joint, with hard Nodosities with the
	history of injury to joints. Pain is better by warmth and motion.
	Colchicum: Arthritis worse in warm wet weather. Worse from change of climate,
	commonly affects the small joints of hands and fingers slightest motion aggravates
	the pain.
	Caulophyllum: Arthritis commonly in females. Affecting the small joints
	especially the hands, fingers, toes, ankles. Pain and stiffness alternates from one
	joint to another.
	Causticum: Rheumatic pains better by warmth especially heat of bed, restless
	legs at night. Patient has an unsteady gait.
	Dulcamara : Pain and stiffness in joint worse from damp weather. Rheumatic affections after acute skin affection.
	Formica Rufa: Arthritic remedy indicated in gout and articular rheumatism right
	sided joints mostly affected. Pain better by pressure and worse from motion. Sudden
	rheumatism with restlessness. Muscle feels strained and torn from their attachments.
	Relieved by rubbing the part and from pressure.
	Guaiacum : Rheumatism of small joints especially the wrist and fingers worse
	from warmth better from cold application.
	Kalmia Latiflora: Indicated in severe acute pains in joints. Pain and
	inflammation begin in upper limbs and ten spreads downwards. Pain worse at
	night. Pain usually affects the large joint.
	Kali Iodatum: Indicated in chronic inflammation of the knee. Pains usually
	aggravate at night, severe bone pain with sensitiveness to touch. Rheumatism of
	knee with effusion. Aggravates at night, cannot remain in bed.
	Ledum Palustre: Indicated in ascending type of rheumatism, swollen, hot, pale,
	small joints. Pain in right shoulder aggravated from motion, painful soles, easy
	spraining of ankles.
	Lithium Carb: Indicated in rheumatism when affected with heart
	affections. People with rheumatic nodes and uric acid diathesis.
	Rheumatism mainly affecting shoulder, finger joint with nodular
	swellings. Better by hot. Pain in ankle while walking.
	Rhus Toxicodendron: It useful for rheumatoid arthritis when there is severe pain
	and stiffness which is worse in the morning, cold, first movement makes the pain
	unbearable, patient feels better by continuously moving around, warmth relieves the
	pain. Patient becomes restless with the pain. Tearing type of pain in tendons and
	ligaments.
П	Salicylicum Acidum: Indicated in acute rheumatism, knees painful and swollen with

- shifting pains aggravated at night. continued treatment with moderated doses prevents new attacks in chronic arthritis
- □ **Silicea Terra**: Chronic inflammation of the knee joint with great swelling with icy cold feet sweat.

REPORTORIALAPPROACH:

1.MURPHY'SHOMOEOPATHICMEDICALREPERTORY

Chapter: JOINTS:

- Rubric: Arthritic Nodosities
- Some important 3 marks remedies include :APIS, BEN ACID,CALC,CALF,LITHCARB,GRAPH,LYCO,CAUL
- Some important 2 marks remedies include: ant c, aur, bry, form, guaic, urt. urens

Chapter: JOINTS:

- Rubric: Arthritis Joints
- 3 marks remedies are :ACON, APIS, BELL, BRY, KALI C,LED,RHUS TOX
- 2 marks remedies are:aur, arn, kalmia, puls, psor, Ruta, rhod, etc.

Chapter: JOINTS

- Rheumatism in general
- 3 marks remedies include :ARN , ARS, AUR , BEN ACID ,BRY , CAUST , CHAM , CHEL , COLCH ,KALMIA, PULS ,SAL ACID,MERC etc.
- 2 marks remedies include: abr, acon, Apis, caul, guaic, nit acid, etc.

2. BOERICKES REPERTORY

Chapter: (ARTHRITIS)

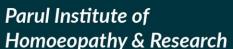
Acute: Abrot.; Acon.; Arbut.; Benz. ac.; Berb. v.; Bry.; Caust.; Cim.; Cinch.; Colch.; Gnaph.; Guaine.; Iod.; Kali bich.; Kali iod.; Kal.; Led.; Lil. t.; Lith. c.; Mang. ac.; Merc.; Nat. sil.; Nit. ac.; Phyt.; Puls.; Radium; Rhod.; Rhus t.; Sab.; Sai. ac.; Solid.; Stellar.; Sul.tereb.; Viola tr. See Rheumatism.

Inflammation chronic (arthritis deformans):

Am. phos.; Ant. c.; Arbut.; Arn.; Ars.; Benz. ac.; Calc. c.; Calc.ren.; Caul.; Caust.; Cim.; Cinch.; Colch.: Colchicine; Ferr. iod.; Ferr. pier.; Guaiac.; Iod.; Kali br.; Kali iod.; Lact. ac.; Led.; Lye; Merc. c.; Nat. br.; Nat. p, Piperaz.; Puls.; Radium; Sab.; Sal. ac.; Sep.; Sul.; Sul.tereb.; Thyr.

3. KENT'SREPERTORY:





Chapter- arthritis:

- Finger joints: Esc., agn., ant-c., Apis, Benz-ac., Calc., calc-f., calc-p., Caust., clem., colch., dig., Graph., hep., Led., Lith., Lyc., ox-ac., ran-s., rhod., sil., staph., sulph., urt-u. with stiffness: Carb-an., graph., Lyc.
- Knee: Bufo, calc., led., nux-v.
- Foot: Bufo, kali-i., Led., nat-s.
- Toes: Asaf., caust., graph., ran-s., sabin., sulph., thuj.

CONCLUSION:

Rheumatoid Arthritis is a very common disease condition in population. There is wide role of Homeopathy to treat Rheumatoid Arthritis. Homoeopathy has vital role in autoimmune disorders. Homoeopathy medicines selection is based on Individualization. There are many homoeopathic medicines which has efficacy to treat Rheumatoid arthritis.

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SCOPE OF HOMOEOPATHY IN TREATMENT OF TYPE 1 DIABETES **MELLITUS**

ABOUT AUTHORS:

1. Vanshika Rameshbhai Nathvani Student 3rd BHMS, PIHR



2.Shreya Mukeshbhai Vaishnani Student 3rd BHMS, PIHR



ABSTRACT:

Type 1 diabetes (Insulin dependent diabetes mellitus) is the most severe form of the disease. Its onset is typically abrupt and is usually seen in individuals. Type 1 Diabetes mellitus is an autoimmune disease that leads to the destruction of Insulin- producing pancreatic beta cells. [1]

KEY WORDS:

Insulin dependent Diabetes mellitus; Immune dependent Diabetes mellitus (IDDM); Type-1 or Insulinogenic or Juvenile onset Diabetes (JOD)

INTRODUCTION:

Type-1 DM is an Auto-immune disease. It constitutes about 10% cases of DM.

Type-1 diabetes is usually associated with ketosis in its untreated state. It occurs mostly in children, the incidence is highest among 10-14 years old group, but occasionally occur in adults.

It was previously termed as juvenile onset diabetes (JOD) due to its occurrence in younger age, and was called insulin-dependent Diabetes mellitus (IDDM) because it was known that these patients have absolute requirement for insulin replacement as treatment. However in the new classification, neither age nor insulin-dependent are considered as absolute criteria.

Instead based on underlying etiology, Type-1 DM is further divided into 2 sub types.

Subtype-1 A DM (immune mediated): - Characterised by autoimmune destruction of B-cells which usually leads to insulin deficiency.

Subtype-1 B DM (idiopathic): - Characterised by insulin deficiency with tendency to develop ketosis but these patients are negative for autoimmune markers. [5]

CAUSES OF DM TYPE-1

The body produces insufficient insulin or the insulin is ineffective.

Causes include: - predetermined genetic susceptibility, and environmental factors other causes are particular viruses and toxins.

RISK FACTORS:

Family history of a parents or sibling with T1D slightly increase the risk 1)



- 2) Certain human leucocytes antigen (HLA) subtypes, particularly specific alleles at the DFB, DQA, and DQB loci is strongly associated with TID.
- 3) Age -wise: the highest incidence is in children of 10-14 years of age.
- 4) Other risk factors include exposure to certain viruses, such as Epstein-Barr virus, mumps virus, cytomegalo virus.^[2]

CLINICAL FEATURES: -

Onset is usually gradual but rarely there may be acute onset.

- POLYURIA:
 - Increased frequency of urination.
 - Amount of urine may be several liters in 24 hrs.
 - This is due to excessive sugar in urine which acts as diuretic.
- POLYDIPSIA:
 - Excessive thirst
 - Patient may consume several liters of water in 24 hrs.
 - With dryness of mouth, throat
- POLYPHAGIA:
 - Excessive hunger
 - Always feels hungry
 - May have craving for carbohydrate food, sweets, Sugar
 - This symptom is due to non-utilization of sugar for energy expenditure.
- INSPITE OF GOOD APPETITE:
 - Lack of energy
 - Weakness
 - Tiredness
 - Weight loss- There may be rapid emaciation due to
 - Tissue starvation
 - Neoglucogenesis
 - Mobilization of fat from fat depot
- CONSTIPATION:
 - Bowel movement may occur after every 2-3 days
 - Stools become hard.
- PRURITUS:
 - Intense itching
 - Usually in anus or external genitalia
 - This is due to
 - o Irritant action of sugar on tissue
 - o Superimposed fungal or bacterial infection.
- OTHER FEATURES:
 - Burning in feet
 - Impotency in males^[4]
 - Tendency to infection



Delayed wound healings

DIAGNOSTIC CRITERIA: -

Whenever diabetes suspected the diagnosis should be confirmed by glucose tolerance test (GIT) or more easily by fasting and postprandial blood sugar estimation. The diagnostic criteria as enunciated by the American diabetic association and duly agreed by the WHO. [2]

- Plasma glucose levels (mg/dl) diagnosis: -
 - Diabetes Mellitus- Fasting ≥ 126 , or 2 hours postprandial (pp) ≥ 200
 - Impaired Glucose Tolerance (IGT)- Fasting <126- and 2-hours pp ≥ 140 but < 200
 - Impaired Fasting Glucose (IFG)- Fasting ≥ 110 , but < 126, and 2 hours pp, $140^{[2]}$

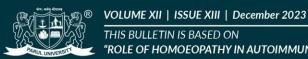
COMPLICATION: -

- Macrovascular disease
 - Coronary artery disease
 - Cerebrovascular disease
 - Peripheral vascular disease
- Microvascular disease
 - Diabetic retinopathy
 - Diabetic nephropathy
- Neuropathy
 - Somatic neuropathy
 - Autonomic neuropathy
- Other complication
 - Diabetic foot
 - Pre-senile cataract
 - Diabetic ketoacidosis
 - Variety of skin lesions^[4]

DIET PLAN: -

FOODS TO BE INCLUDED:

- Whole grains, wheat, millet
- Nuts and seeds, walnuts, almonds, flax seeds, Pumpkin seeds.
- Pulses and legumes, chickpeas, moong dal, red Lentil.
- Vegetables gourd vegetables, brinjal.
- Green leafy vegetables spinach, drumstick, mint Leaves.
- Egg white, fish, lean meat.
- **FOODS TO BE AVOIDED:**
 - Refined flours, refined sugars



- Instant cereals
- cooked roots and lubbers
- High glycaemic index Fruits mango, banana, grapes.
- Sodium rich foods: salt, pickle, papad, fried snacks.
- Carbonated beverages, red meat

HOMOEOPATHIC MANAGEMENT: -

***** ACETIC ACID: -

Abundant sugar in urine increased and light colored, great thirst, but cold drink lies heavy on stomach, ascites and hydrothorax, gangrenous ulcer, pale, extreme prostration.^[8]

* ARGENTUM METALICUM: -

Profuse, turbid, sweetish urine; <at night, sometimes like whey, it distresses him at night, has to rise so often, emaciation and great weakness, face pale and swallow, fetid taste in mouth.^[8]

PHOSPHROUS: -

Glycosuria with phthisis, urine profuse, pale, watery, turbid, whitish, like curdled milk, with brick dust sediment, gouty disease, cerebral disease. [8]

URANIUM NITRATE: -

Defects of digestion and assimilation, causes sugar to be deposited in the urine, debility, cold feeling, vertigo, copious salivation, vomiting with great thirst, urgent desire to evacuate bladder and rectum, frequent micturition, cough, stiffness in joints, languor on rising from bed with fishy smell of urine, restless at night^[8]

> MOTHER TINCTURE: -

❖ ABROMA AUGUSTA: -

Ravenous hunger, insatiable thirst, frequent and profuse micturition, obstinate constipation, indignant and forgetful disposition with rapidly growing extreme debility and pronounced emaciation.^[7]

SYZYGIUM JAMBOLANUM: -

It is the most important remedy of universal fame in curing diabetes mellitus. It promptly diminishes the quantity of sugar and frequency of micturition. It also cures ulcers and carbuncles dependent on diabetes with high specific gravity in urine, with intense thirst, it also cures intense heat in upper parts of body, small and red blisters with itching, intense thirst with or without fever.^[6]

❖ CEPHALANDRA INDICA: -

It treats the blood urea and manages the blood sugar levels. Diabetes patients who are suffering from the adverse effects of diabetes symptoms can take this medication for relief. It acts as a detoxifier and relieves kidney aliments as well. Cephalandra Indica was manifested with reduced levels of fructose amines, protein carbonyls and bound glucose. [6]



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ANKOLYSING MANAGEMENT

SPONDILITIS

&ITS

HOMOEOPATHIC

ABOUT AUTHORS:

Dr. Priyanka K. Kharve, M.D. (HOM) Assistant Professor, OBGY Department, PIHR



***** ABSTRACT:

Ankylosing spondylitis (AS) is a chronic inflammatory disease which, as a result of an autoimmune response it causes inflammation in the sacroiliac joints, vertebrae and adjacent joints, inflammation tendon or ligament into the bone, the peripheral joints and the eye; the lungs, heart valves and kidneys are only rarely affected. Major causative factor of AS are genetic, with gene HLA-B27 being the most important genetic factor.

***** KEYWORD:

Autoimmune disease, Ankylosing spondylitis, Homoeopathy Indication

***** INTRODUCTION:

The name is derived from Greek Word 'Ankylos' means fusion and 'Spondylos' means vertebra. 'Itis' means inflammation hence describe as inflammation of vertebral column. Ankylosing spondylitis is a form of arthritis that causes chronic (long-term) spine inflammation. Ankylosing spondylitis (AS) inflames the sacroiliac joints located between the base of the spine and pelvis. This inflammation, called sacroilitis, is one of the first signs of AS. Inflammation often spreads to joints between the vertebrae, the bones that make up the spinal column. This condition is known as spondylitis.

***** ETIOLOGY:

Etiology are unknown but probable etiological factors are- A gene that makes a protein called HLA-B2, immune system attack some common bacteria in your body and sets off AS symptoms.

Along with age, gender, and race, having another autoimmune disease could raise your chances of having AS. These conditions include:

- Crohn's disease
- Psoriasis
- Ulcerative colitis

***** TYPES OF ANKYLOSING SPONDILITIS:

- 1. **Axial spondylarthritis-**diseases that mostly affect your spine.
- 2. **Peripheral spondylarthritis-**conditions that mostly involve joints in your limbs, heels, fingers, and toes.

***** CLINICAL MANIFESTATION:



Symptoms typically appear between the ages of 17 and 45 but may develop in younger children or older adults. Some people have persistent pain, while others experience milder symptoms Includes

- 1. Lower back pain and stiffness,
- 2. Hip pain,
- 3. Joint pain,
- 4. Neck pain,
- 5. Difficulty breathing,
- 6. Fatigue,
- 7. Loss of appetite and unexplained weight loss,
- 8. Abdominal pain and diarrhea,
- 9. Skin rash,
- 10. Vision problems.

***** COMPLICATION:

- 1. Fused vertebrae (ankylosis),
- 2. Kyphosis (forward curvature of the spine),
- 3. Osteoporosis,
- 4. Painful eye inflammation (iritis or uveitis) and sensitivity to light (photophobia),
- 5. Heart disease, including aortitis, arrhythmia and cardiomyopathy,
- 6. Chest pain that affects breathing,
- 7. Jaw inflammation,
- 8. Cauda equina syndrome (nerve scarring and inflammation).

*** DIAGNOSIS AND TESTS:**

There's no single test to confirm AS.

- Blood test- can check for the presence of the HLA-B27 gene.
- An imaging test-
 - ✓ Spine X-rays to check for arthritis or rule out other problems.
 - ✓ Magnetic resonance imaging (MRI) scan. This scan will be detect spine problems earlier than traditional X-rays.

***** MANAGEMENT AND TREATMENT:

Ankylosing spondylitis is a lifelong condition. While there's no cure, treatments can prevent long-term complications, reduce joint damage and ease pain. Treatments include:

- Exercise
- Nonsteroidal anti- inflammatory Drugs (NSAIDs)
- Disease modifying anti-rheumatic drug(DMARDs)
- Corticosteroids
- Surgery

In addition to standard AS treatments, these steps may also help ease inflammation and pain:

Eat a nutritious diet: Fried foods, processed meats and foods high in fat and sugar can have an inflammatory effect. Anti-inflammatory diets, such as the Mediterranean diet, may help fight inflammation.





Maintain a healthy weight: Obesity and excess weight puts pressure on joints and bones.

Limit alcohol consumption: Drinking too much alcohol can weaken bones and increase the risk of osteoporosis.

Stop smoking: Tobacco use accelerates spinal damage and intensifies pain

***** HOMOEOPATHIC MANAGEMENT:

Homeopathy plays a vital role in preventing progression, controlling the immune responses and ameliorating pain and stiffness. While treating the patient we strictly follow homoeopathic law and methodology but here I mentioned some medicine which may come as pathological or specific medicine for ankylosing spondylitis

- 1. AESCULUS HIPPOCASTANUM:- Aesculus Hippocastanum is an excellent remedy for Ankylosing spondylitis with backache of sacrum and hips, worse while walking or stooping. Pains are sticking or flying all over, hot like lighting. Lameness in neck, aching between shoulder blades. Aching in lumbar and sacral region with stiffness in the back, almost impossible to walk. Back region of spine feels weak, back and legs give out. Pain as if back will break. Back is rigid, stiff, weak and painful. Has to make repeated efforts at rising, worse walking and stooping. Sensation of lameness and heaviness in back.
- 2. KALMIA LATIFOLIA:- Kalmia is prescribed for ankylosing spondylitis, where lumbar pain is accompanied by heat and burning in the affected part. Pain from neck down to arms. Pain down back, as if it would break in localized region of spine through shoulders. Numbness and pain in the affected area. Pain, stiffness and lameness in the affected part. Neck is tender to touch. Pain from the neck radiates to the arm or scapula. Tingling and numbness of the left arm.
- **3. BRYONIA ALBA:** When Backache is worse from Motion, Bryonia Alba is another well-indicated medicine for treating ankylosing spondylitis. A backache that is worse from motion or walking is the guiding Feature to use Bryonia Alba. In a few cases, stooping, standing and sitting also worsen the backache. The relief in back pain is afforded only with absolute complete rest. Stiffness is also present along with a backache.
- **4. MEDORRHINUM:** Lumbago: "lame-back:" lumbo-sacral pain which often extends to the lower extremities. Drawing in nape and back. Pain across the back. Intercurrent remedy.
- **5. KALI CARBONICUM:** Kali carb is indicated for Ankylosing spondylitis with severe backache. Severe backache, lower back feels weak. Lumbago with given up feeling, must lie down, as if broken. Backache with sudden sharp pains extending up and down, back and down the thighs. Pain in buttocks and thighs and hip joint. Stiffness and paralytic feeling in the back. Burning along the spine.
- **6. SILICEA :-** Silicea is for Ankylosing spondylitis with stiffness of neck with headache. Stitches between hips. Painful coccyx. Weakness and paralytic stiffness in lumbar region and nape. Burning in back when walking in open air and becoming warm. Aching, shooting, burning and throbbing in lumbo-sacral region. Lameness in region of sacrum.



- **7. CIMICIFUGA RACEMOSA**:- Cimicifuga racemosa is prescribed for Ankylosing spondylitis, where the patient feels pain, stiffness and contraction in neck and back. Stiff neck, pain worse sensitive worse pressure, which causes nausea and retching. Spine very sensitive. Pain in lumbar and sacral region, down thighs and through hips.
- **8. GUAIACUM :-** Guaiacum is best for Ankylosing spondylitis with aching pain in neck. Stiff neck and sore shoulders. One sided stiffness of back from neck to sacrum. Contractive pain between scapulae.

***** CONCLUSION:

So I think we need more awareness regarding this Disease with improvement in our lifestyle, healthy food habit, avoid addiction. In spite of that we can treat the patient safely, effectively and economically with the help of homoeopathic medicines. Homoeopathy treatment not only gives curative effect but also the preventive one.

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SCOPE OF HOMOEOPATHY IN TREATMENT OF **GRAVE'S** DISEASE

ABOUT AUTHOR:

1.Dhara Kakkad Student 3rd BHMS, PIHR



2.Leena Jumani Student 3rd BHMS, PIHR



ABSTRACT:-

Graves' disease, also known as toxic diffuse goitre, is an autoimmune disease that affects the thyroid gland. It frequently results in and is the most common cause of Hyperthyroidism. It also often results in enlarged thyroid. Signs and symptoms of hyperthyroidism may include irritability, weakness, and disturbed sleep, a tachycardia, poor tolerance of heat, diarrhoea and unintentional weight loss. Other symptoms may include thickening of the skin on the shins, known as preorbital myxoedema and eye bulging a condition caused by grave's Ophthalmopathy. About 25 to 30% of people with the condition develop eye problems. The treatment is depended upon the Thyroid hormones' levels and severity of the symptomatology. Homoeopathy based on nature law of cure with their principal of law of similia similibus curentur having scope in grave disease when the homoeopathic medicine will be selected on the basis of totality of symptom, constitution, with the principal of homoeopathic posology.

INTRODUCTION:-

Grave's disease also known as base Dow's disease.10 hyperplasia, exophthalmic, goiter and diffused toxic goiter is characterized by triad of features-

- 1. Hyperthyroidism (Thyrotoxicosis)
- 2. Diffused thyroid enlargement
- 3. Ophthalmopathy

This disease is frequent between 30 to 40 years of age and has five fold increases prevalence among females.

ETIOPATHOGENESIS:-

- 1. GENETIC FACTOR ASSOCIATION⁽¹⁾
 - It is also a genetic predisposition. Susceptibility to develop Grave's disease has been found associate with HLA-DR₃, CTLA₄ and PTPN₂₂.
- 2. AUTOIMMUNE DISEASE ASSOCIATION⁽¹⁾

It may be found in association with other organ specific autoimmune disease. Hashimoto's thyroiditis and Grave's disease are frequently present in same families and the two diseases may co-exists in same patients.



3. OTHER FACTOR: (1)

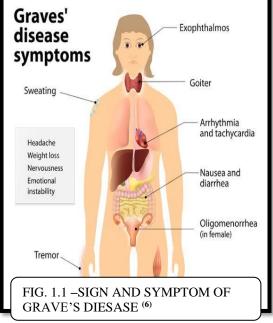
Beside these two factors Grave's disease has higher prevalence in women and associate with emotional stress and smoking.

4. AUTOANTIBODIES⁽¹⁾

Autoantibodies against thyroid antigens are detectable in serum of these patients too but their sites of action are different from that of Hashimoto's thyroiditis. In grave's disease TSH-receptor autoantigen is the main antigen against which autoantibodies are directed.

SIGN AND SYMPTOMS (3, 5)

- ➤ GOITER: present in majority although thyroid enlargement may be difficult to detect. Systolic bruit may be heard over the gland due to increase vascularity.
- ➤ GENERAL: fear, anxiety, restlessness, tremor, fine tremors on extending the hands. It may be unknown to the patient.
- ➤ CARDIOVASCULAR: tachycardia which persist during sleep. Large pulse pressure with raised systolic pressure. Capillary pulsation may be seen. Cardiac arrythmia.
- ➤ OCCULAR: exophthalmos, widened eye-slits causing a star, upper lid retraction ophthalmoplegia, chemosis and conjunctival irritation.
- ➤ METABOLISM: loss of weight in spite of increased appetite. Liver is depleted of glycogen and transient or persistent glycosuria appears. Fat depots tend to disappear. Increased ability to stand cold and intolerance of heat. Fever not infrequent especially with slight infection.
- GASTRO-INTESTINAL: weight loss despite normal or increased appetite. Uncontrolled diarrhea, abdominal discomfort after meals, nausea, epigastric pain like peptic ulcer, achlorhydria, voracious appetite.
- ➤ BEHAVIOR AND EMOTIONS: irritability, restless and anxious.
- ➤ CONNECTIVE TISSUE AND BONES: subacromial bursitis or tendinitis or bursitis of shoulder joint.
- > REPRODUCTIVE SYSTEM: oligomenorrhea and amenorrhea, infertility, loss of libido
- > SKIN: pruritis, palmer erythema and spider naevi, pre-tibial myxedema, thickened, bluish red infiltration of skin.
- ➤ OTHER FEATURES: Pigmentation usually confined to orbital region, rarely diffused. Profuse perspiration, premature whitening of hair.



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INVESTIGATION (2, 3, 5)

- Plasma TSH (normal range 0.3-5 mu/lit) is undetectable
- Serum T3, T4 elevated.
- Thyroid scan.
- TSH receptor antibody titer high, ESR may be raised.
- Radioactive iodine uptake.
- MRI, CT scan of orbit.

DIFFERANTIAL DIAGNOSIS (3, 5)

- Anxiety states.
- Nutritional deficiency.
- Cardiac disease.
- Chronic alcoholism.
- Emphysema and asthma.
- Diabetes mellitus.

COMPLICATION (2, 3, 5)

- Thyrotoxic crisis.
- Peripheral neuritis.
- Ischemic heart disease.
- Hypertension
- Osteoporosis
- Congestive cardiac failure.

HOMOEOPATHIC MANAGEMENT:-(4,5)

- ❖ **BELLADONNA:** Violent throbbing headache, palpitation. Eyes feel swollen, protruding, brilliant exophthalmos. Difficulty in swallowing; throat feels constricted with tickling short dry cough, violent palpitation.
- **BROMIUM:** Goiter hard with inelastic swelling.
- ❖ CACTUS: Headache with sensation of weight on vertex, congestive headache, pulsation felt in ear. Right side prosoplasia, suffocation, constriction in throat and chest with sensation as if in a vice.
- ❖ CALCAREA FLUORICA: Glandular enlargement, where the hardness is pronounced.
- ❖ FUCHSINUM: A remedy for non-toxic and exophthalmic goiter in obese subject.
- ❖ GLONONIUM: Headache with vertigo in standing, pulsation of each heartbeat in ear. Neck pulsation full with chocking sensation. Drawing pain in limbs.
- ❖ IODIUM: Thyroid enlargement. Goiter with sensation of constriction. Loss of flesh with great appetite, great debility; the slightest effort induces perspiration. It is especially useful in goiter when there is an obstruction in breathing.
- ❖ **IODOTHYRINE**: this remedy affect metabolism and reduce the weight to be used cautiously in obese patients.



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- ❖ LYCOPUS VERGINICUS: exophthalmic goiter, tumultuous action of heart with constriction, tenderness in the precoidum. Pulse with, rapid and irregular. Palpitation from nervous irritation.
- ❖ SPONGIA TOSTA: Goiter hard and large with suffocating attack, swelling with tension and painful to touch.

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HOMOEOPATHIC APPROACH TOWARDS MYASTHENIA GRAVIS

ABOUT AUTHOR:

Darash Panchal Student 2nd BHMS, PIHR



Abstract: -This is the most common cause of acutely evolving, fatigable weakness and preferentially affects ocular, facial and bulbar muscles. It is caused by false immune response to acetylcholine receptors which are found in junctions between muscles and the nervous system. Homoeopathy has potential for treating myasthenia gravis by improving muscular weakness and enhances the better life ahead. Alumina, Causticum, Cocculus indicus, Gelsemium, Conium mac, Curare, Plumbum metallicum and Zinc metallicum are the possible remedies for treating myasthenia gravis.

Keywords: -Auto immune disease-Myasthenia gravis, homoeopathic approach

Abbreviation: - MG – Myasthenia gravis

Introduction:-

Myasthenia gravis is a chronic autoimmune disorder in which antibodies destroy the communication between nerves and muscles resulting in weakness of the skeletal muscles. It affects the voluntary muscles of the body especially those that control the eyes, mouth, throat and limbs. The disease can strike anyone at any age but is more frequently seen in young women aged 20 and 30, men aged 50 and older.

Causes:-

Myasthenia gravis is an autoimmune disease, most commonly (80% cases) caused by antibodies to acetylcholine receptors in the post-junctional membrane of the neuromuscular junction. Myasthenia gravis is not inherited and it is not contagious. It generally develops later in life when antibodies in the body attack normal receptors on muscle. These blocks a chemical needed to stimulate muscle contraction.

Classification: - Myasthenia gravis is classified as

- 1. Acquired autoimmune
- 2. Neonatal myasthenia gravis
- 3. Drug induced myasthenia gravis
- 4. Congenital Myasthenia gravis

Clinical Features:-

- Extra ocular muscle weakness or ptosis is present initially in 50% of patients and occurs during the course of illness in 90%
- The disease remains exclusively ocular in only 16% of patients
- About 87% of patients have generalized disease within 13 months after onset
- Fatigable muscle weakness
- Weakness of oculomotor muscles may mimic a central eye movement disorder



- Intermittent ptosis or diplopia
- Weakness of chewing, swallowing
- Impaired speech
- Facial Expressions are affected
- Weakness in arms and legs but this usually happens in conjunction with muscle weakness in other parts of the body
- Symptoms are usually intermittent
- Symptoms may disappear for weeks may appear again later
- Weakness is typically least severe in the morning and worsens as the day progresses

Complication:-

- Myasthenia crisis is a medical emergency that develops when muscles that control breathing become severely weakened.
- This condition may lead to acute respiratory failure and patients often require a respirator to assist breathing during the crisis.
- Other complications that may develop include choking, food aspiration, and pneumonia.

Diagnosis:-

- It is not diagnosed easily. Since weakness can happen in any other disease, mild myasthenia gravis is often not diagnosed.
- Blood tests: -These tests look for antibodies that may be present in people with myasthenia gravis.
- Genetic tests: -These tests are done to check for conditions that run-in families.
- Nerve conduction studies: -A test called repetitive nerve stimulation is used to diagnose myasthenia gravis.
- Electromyogram (EMG):- A test that measures the electrical activity of a muscle. An EMG can detect abnormal electrical muscle activity due to diseases and neuromuscular conditions.

Homoeopathic Approach:-

Homoeopathy with its holistic approach proves to be one of the most valuable systems of medicine while dealing with the cases of Myasthenia gravis (MG).MG is a constitutional disorder, where the whole constitution. Need to be addressed. MG is a progressively deteriorating condition, calling for some measures to arrest or control the disease process. Homeopathic treatment being constitutional in nature treats the disease at a deeper level, to achieve the Control of the disease process and symptomatic relief.

Homeopathy has shown its efficacy in reducing the frequency of relapses and improving the power and tone of muscles. The totality includes subjective and objective understanding about the disease state where the underlying cause and the individual's susceptibility are being addresses.

The indicated homoeopathic medicines are:-

1. Alumina:-

Heaviness, staggering and sluggishness with very bad constipation are the characteristics of the remedy. Extremities feel paralyzed; leg feels asleep especially when sitting with legs crossed. Heels feel numb, tenderness in soles, feel soft and



swollen. Inability to walk especially when eyes are open or in daytime. Pain in arm and fingers, as if hot iron penetrated.

2. Causticum:-

Causticum is a natural medicine for muscle weakness that has great action on muscles and nerves. It works particularly well for muscle weakness in the arms. There is a progressive loss of muscular strength in the arms, which feel weak and lame. Weakness in arms usually is seen to get worse in the night time. A tearing, dull pain in the arms may be present.

3. Cocculus Indicus:-

Paralytic weakness in muscle. Weakness of cervical muscles cannot support head. Painful stiffness in neck when moving it. Hands feel numb and asleep. Numbness of sloes go to sleep while sitting. Hands and feet become cold after change of position.

4. Gelsemium:-

Gelsemium act upon the muscles and motor nerves, weakness of throat, chest, larynx, sphincter, extremities, etc. Muscular weakness. Complete relaxation and prostration. Lack of muscular co-ordination. General prostration. Dizziness, drowsiness, dullness, and trembling. Loss of power of muscular control. Excessive trembling and weakness of all limbs.

5. Conium Maculatum:-

Conium is a suitable medicine for muscle weakness in the legs attended with their trembling. Loss of muscle power in legs and extreme weakness from walking short distance is present. The person is unable to walk and has a staggering gait. Shooting pain in the legs may arise. Legs feel heavy and weary. Knees also feel weak. Conium Maculatum is also an indicated medicine for paralytic weakness in lower limbs that ascends upwards.

6. Curare:-

Weakness of respiratory muscles. Reflex action diminished. Tired pain up and down spine. Arms weak, heavy. Cannot lift the fingers. Weakness of hands and fingers in pianists. Legs tremble; give way in walking.

7. Plumbum Met:-

Plumbum Met is a natural cure for severe muscle weakness that progresses rapidly. There appears marked debility, weakness, and lameness of the arms. Muscles of the arm lack the power to move. Muscle weakness is severe and progressive. Cramping in the calf muscles may also be present. Plumbum Met is also a prominently indicated medicine for paralysis of limbs along with atrophy (wasting) of the muscles.

8. Zincum Metallicum:-

Lameness, weakness, trembling and twitching of various muscles. Feet in continued motion; cannot keep still. Transverse pains, especially in upper extremity. Soles of feet sensitive. Steps with entire sole of foot on floor.

Conclusion:

Homeopathic treatment of myasthenia gravis (MG) is based on immune correction. With the help of homeopathic medicines, the faulty immune system can be made to work properly. Homoeopathy with its holistic approach proves to be one of the most valuable systems of



medicine while treating the cases of Myasthenia gravis. Homoeopathy has immense potential for dealing Myasthenia gravis by improving muscular weakness and boosts the quality of patient's life.

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A CASE REPORT-EFFECTIVENESS OF HOMOEOPAHTHIC MEDICINE IN MYASTHENIA GRAVIS

ABOUT AUTHOR:

Dr. Vinit TapasAsst. Professor in Department of Physiology & Biochemistry, PIHR



Abstract:

Myasthenia gravis affects both males and females and occurs across all racial and ethnic groups. It most commonly impacts young adult females (under 40) and older males (over 60), but it can occur at any age, including childhood. Myasthenia gravis is not inherited nor is it contagious. Occasionally, the disease Antibodies—Myasthenia gravis is caused by an error in how nerve signals are transmitted to muscles. It occurs when communication between the nerve and muscle is interrupted at the neuromuscular junction—the place where nerve cells connect with the muscles they control.

Case Summary:

A 65 years old female patient came from neurologist on dated 30/3/2023 and diagnosed as Generalised Myasthenia Gravis. She follows the treatment of allopathic medicines like IV Rituximab, IV Antacids, IV steroids, IV fluids and other supportive medications for one week but not feeling well. She was the symptoms such as H/o difficulty in breathing since 10 days and Generalised Weakness with increase in severity. According to homoeopathic point of view proper case taking was done and on therapeutic basis with totality of symptoms, similimum- CAUSTICUM 200 /6 doses BD FOR 3 DAYS, given to the patient.

This article provides a comprehensive review of current research on Myasthenia Gravis, including its aetiology, clinical presentation, and homoeopathic management strategies by using various therapeutic books. The review aims to enhance understanding of clinical presentation of Myasthenia Gravis and homoeopathic aid among healthcare professionals and researchers, facilitating the development of more effective interventions and support for affected individuals.

Key Words: Autoimmune disease, Myasthenia gravis, Homoeopathic medicine.

Introduction:

Myasthenia gravis is a chronic autoimmune, neuromuscular disease that causes weakness in the skeletal muscles (the muscles that connect to your bones and contract to allow body movement in the arms and legs, and allow for breathing).

The onset of the disorder may be sudden, and symptoms may not be immediately recognized as myasthenia gravis. The degree of muscle weakness involved in varies greatly among individuals.



Thymus gland—The thymus gland controls immune function and may be associated with myasthenia gravis. It grows gradually until puberty and then gets smaller until it is replaced by fat. Throughout childhood, the thymus plays an important role in the development of the immune system because it is responsible for producing T-lymphocytes or T cells, a specific type of white blood cell that protects the body from viruses and infections.

In many adults with myasthenia gravis, the thymus gland remains large. People with the disease typically have clusters of immune cells in their thymus gland and may develop thymomas (tumors of the thymus gland). Thymomas are most often harmless, but they can become cancerous. Scientists believe the thymus gland may give incorrect instructions to developing immune cells, ultimately causing the immune system to attack its own cells and tissues and produce acetylcholine receptor antibodies—setting the stage for the attack on neuromuscular transmission.

The hallmark of myasthenia gravis is muscle weakness that worsens after periods of activity and improves after periods of rest.

Certain muscles are often (but not always) involved in the disorder such as those that control:

- Eye and eyelid movement
- Facial expressions
- Chewing
- Talking
- Swallowing

Treating myasthenia gravis:-

Currently, there is no known cure. Available treatments can control symptoms and often allow you to have a relatively high quality of life. Most people with myasthenia gravis have an average life expectancy.

Homeopathy can be considered a complementary treatment option for patients with a severe form of myasthenia gravis whose symptoms are not controlled with conventional medication. Individualized therapy is administered based on the levels of health theory.

CASE REPORT

Patient Information

Presenting Complaints: -A 65-year-old female patient comes in Medicine OPD with symptoms such H/O DIFFICULY IN BREATHING SINCE 10 DAYS, GENERALISED WEAKNESS with increase in severity. With complaint of difficulty in swallowing with total loss of taste since 2 days. Complaints of loss of appetite since 2 days, one episode of breathlessness today morning, due to this complaint she has facing difficulty in day to day activities.

There was feeling of restlessness with numbness of hands, feet and coldness of whole body after each episode of breathing.

Past History: -Known case of Hypertension since 10 years, chronic kidney Disease since 8 years.

Menstrual History: -

Menopause at 48 years of age

Physical Symptoms: -



Appetite: Diminished Desire: Not any particular

Aversion: sweets

Thirst: short quantity advised due to CKD

Perspiration: Profuse

Bowel: Regular but now disturb due to complaints

Urine: 10-12times/day with burning

Sleep: Disturbed, the patient did not feel refreshed in morning.

Thermal relation: Towards chilly

Mental Symptoms: -

She is intensely sympathetic. Ailments from long lasting grief

Clinical Findings: -

She has 5ft.in height and weight 65kg.On examination there was Pallor present with edema on the dorsum of feet, her blood pressure was recorded 130/90 mm Hg which is under control by allopathic medicine.

TOTALITY OF SYMPTOMS: -

Selection of medicine was done on basis of totality of symptoms in which there found marked generalised weakness with loss of strength in skeletal muscles all over the body.

- Difficulty in swallowing
- Shortness of breath
- Cannot lie on bed at night
- Stiffness of right knee with inability to walk
- Extremely sympathetic
- Aversion to Sweets
- Burning micturition

DISCUSSION: -

After considering the above totality of symptoms, on the basis of therapeutic aspect CAUSTICUM 200 x 6 doses BD for 3 days was selected and followed by placebo for 1 month.

Monthly follow up for 6 months was taken.

RESULT: -After 6 month follow up there is relief of difficulty in swallowing, improvement of breathing status, betterment of knee stiffness and patient able to breathe on lying down also. Evidence based on the report before and after treatment as shown below-



Report before treatment:-





PATIENT NAME : MM

CODE/NAME & ADDRESS :

APOLLO HEALTH AND LIFESTYLE LIMITED FIRST FLOOR APOLLO SPECTRA HOS SANAS SPORTS GROUND, SARAS BAUG, SADASHIV PUNE 411030.

REF. DOCTOR : SELF

ACCESSION NO: IMO5194741 PATIENT ID : DNWKOPV3856

DRAWN

AGE/SEX :65 Years

RECEIVED: 23/03/2023 17:56:50 REPORTED: 24/03/2023 16:50:15

Test Report Status

Final

Results

CLIENT PATIENT ID:

Biological Reference Interval Units

ABHA NO

Female

EIA - AUTO IMMUNE

ACHR-ACETYL CHOLINE RECEPTOR ANTIBODIES, SERUM

ACHR- ACETYL CHOLINE RECEPTOR **ANTIBODIES**

5.68nmol/L High

Negative: < 0.40

nmol/L

Borderline: 0.40-0.50

Positive: > 0.50

METHOD: ENZYME IMMUNOASSAY

Interpretation(s)
AOIR-ACETYL OHOLINE RECEPTOR ANTIBODIES, SERUM-Myasthenia gravis is an autoimmune disease is characterized by muscle weakness and fatiguability that worsens with muscle use and improves with rest. The majority of patients have antibodies against the muscle acetycholine receptor. These can be detected in 70% of all patients with Myasthenia gravis. Other autoantibodies that can be found in these patients are anti- muscle specific kinase (MuSK) antibodies and anti-low-density lipoprotein receptor-related protein 4 (LRP4) antibodies.

The prevalence and incidence of Myasthenia gravis increase with age. Myasthenia gravis patients have an increased risk for complicating autoimmune diseases, most commonly autoimmune thyroid disease, systemic lupus erythematosus and rheumatoid arthritis. Common complains are diplopla, ptosis, without pupillary abnormalities, bulbar and generalized weakness and fatigability. There can also be respiratory weakness.

Demonstration of muscle acetylcholine receptor autoantibodies in a patient"""""""" serum supports the diagnosis of acquired (autoimmune) Myasthenia gravis, and quantitation provides a baseline for future comparisons, however the titer of antibodies does not correlate with disease severity.

Negative antibody levels do not rule out Myasthenia gravis, and other tests, like single fibre electromyography or repetitive muscle stimulation, may be performed to confirm the diagnosis.

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End Of Report

*This test is performed at our Referral laboratory. Please refer to conditions of reporting. This report is not valid for medico legal purposes.

Dr.Sanjay Ingle M.B.S.MD(Pathology) Consultant Pathologist

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

Report after treatment: -





PATIENT NAME : MM

CODE/NAME & ADDRESS:

APOLLO HEALTH AND LIFESTYLE LIMITED FIRST FLOOR APOLLO SPECTRA HOS SANAS SPORTS GROUND, SARAS BAUG, SADASHIV PUNE 411030.

REF. DOCTOR: SELF ACCESSION NO: IM05194741

PATIENT ID : DNWKOPV3856

CLIENT PATIENT ID: ABHA NO

AGE/SEX :65 Years DRAWN

RECEIVED : 25/8/2023 17:56:50 REPORTED :: 26/8/2023 16:50:15

Test Report Status <u>Final</u> Results Biological Reference Interval Units

EIA - AUTO IMMUNE

ACHR-ACETYL CHOLINE RECEPTOR ANTIBODIES, SERUM

ACHR- ACETYL CHOLINE RECEPTOR **ANTIBODIES**

0.54nmol/L Borderline Negative: < 0.40

Borderline: 0.40-0.50 Positive: > 0.50

METHOD: ENZYME IMMUNOASSAY

Interpretation(s)
ACHR-ACETYL CHOLINE RECEPTOR ANTIBODIES, SERUM-Myasthenia gravis is an autoimmune disease is characterized by muscle weakness and fatiguability that worsens with muscle use and improves with rest. The majority of patients have antibodies against the muscle acetycholine receptor. These can be detected in 70% of all patients with Myasthenia gravis. Other autoantibodies that can be found in these patients are anti- muscle specific kinase (MuSK) antibodies and anti-low-density lipoprotein receptor-related protein 4 (LRP4) antibodies.

The prevalence and incidence of Myasthenia gravis increase with age. Myasthenia gravis patients have an increased risk for complicating autoimmune diseases, most commonly autoimmune thyroid disease, systemic lupus erythematosus and rheumatoid arthritis. Common complains are diplopla, ptosis, without pupillary abnormalities, bulbar and generalized weakness and fatigability. There can also be respiratory weakness.

emonstration of muscle acetylcholine receptor autoantibodies in a patient""""""""""""" serum supports the diagnosis of acquired (autoimmune) Myasthenia gravis, and uantitation provides a baseline for future comparisons, however the titer of antibodies does not correlate with disease severity.

Negative antibody levels do not rule out Myasthenia gravis, and other tests, like single fibre electromyography or repetitive muscle stimulation, may be performed to confirm the diagnosis.

References:

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2. Lazaridis K and Tzartos SJ (2020) Autoantibody Specificities in Myasthenia Gravis Implications for Improved Diagnostics and Therapeutics. Front. Immunol. 11:212

End Of Report

*This test is performed at our Referral laboratory. Please refer to conditions of reporting. This report is not valid for medico legal purposes.

Dr.Sanjay Ingle M.B.B.S, MD(Pathology) Consultant Pathologist

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

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CONCLUSION: -

The case of a 65year old female diagnosed with severe myasthenia gravis initially control only with conventional therapy. After an individualized series of homeopathic remedies, she presented a good clinical outcome, with diminished clinical signs of the disease. Homeopathy is a useful complementary approach to be considered among patients with myasthenia gravis.

Declaration of patient's consent: -

An inform consent was obtained from the patient and after developing good insight consented voluntarily to published the case report. The patient identity is not disclosed in any form based on ethical guidelines.

References: -

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A GENTLE APPROACH: HOMOEOPATHIC SOLUTION FOR PERNICIOUS ANAEMIA

ABOUT AUTHOR:-

Parth Mitulbhai Valand, Student 3rd BHMS, PIHR



Nidhi Bhagvandas Bariya, Student 3rd BHMS, PIHR



Abstract:

Anaemia is a condition in which the body does not have enough healthy red blood cells. Red blood cells provide oxygen to body tissues. There are many types of anaemia. Pernicious anaemia is a decrease in red blood cells that occurs when the intestines cannot properly absorb vitamin B12.

Key words:

Macrocyticachylic anaemia, Vitamin B12 Deficiency (Malabsorption) anaemia, Intrinsic Factor anaemia, Biermer anaemia, Adisson anaemia, Juvenile Pernicious anaemia

Introduction:

Pernicious anaemia is a relatively rare autoimmune disorder that causes diminishment in dietary vitamin B12 absorption, resulting in B12 deficiency and subsequent megaloblastic anaemia.

It affects people of all ages worldwide, particularly those over 60.

Once diagnosed, prompt treatment with B12 supplementation commonly reverses the patient's anaemia; however, they will require lifelong supplementation and monitoring.

Epidemiology:

Pernicious anaemia is a relatively rare condition, with a prevalence of less than 1% in populations of European ancestry. Worldwide, pernicious anaemia is a common cause of megaloblastic anaemia; it affects people of all ages, particularly those over 60-70.

It affects both sexes with a varying geographical female-to-male ratio; and the prevalence is lower in those of Asian descent compared to other studied populations.

Aetiology:

- Age 40 to 60 are more prone
- Sex More in Females
- Family History -The disease is about more common in close relatives (Sibs, Parents, Childs)
- Cause It is an auto- immune disease in which antibodies to gastric parietal cells produces gastric atrophy and achlorhydria and anti-bodies to intrinsic factor interfere with its role in vitamin B12 absorption.



• Patients with pernicious anaemia also have a higher incidence of co-occurring autoimmune disorders, including diabetes mellitus type 1, autoimmune thyroid disease, and vitiligo.

WHAT IS PERNICIOUS?

The first clear description was given by Thomas Addison in 1849.

The term "pernicious" mean "<u>**DEADLY**</u>", and this term came into use because, before the availability of treatment, the disease was often fatal.

Pernicious anaemia is a decrease in red blood cells that occurs when the intestines cannot properly absorb vitamin B12 and Intrinsic Factor.

The intrinsic factor (IF) is a glycoprotein produced by the parietal cells located at the gastric body and fundus. Intrinsic factor plays a crucial role in the transportation and absorption.

Evaluation:

Making a definitive diagnosis of pernicious anaemia can be "problematic" due to the Schilling test and the absence of a currently approved B12 absorption test. Furthermore, there are multiple diagnostic algorithms and varying diagnostic criteria.

Evaluation will likely include a combination of the following:

- Initial serology: complete blood count (CBC), cobalamin level, folate level, iron panel (serum iron, total iron-binding capacity, ferritin), reticulocyte count Peripheral blood smear
- Follow-up serology: anti-IF antibodies, antiparietal cell antibodies
- Additional serology: MMA, fasting homocysteine
- Bone marrow biopsy
- Endoscopy with biopsies

Clinical Features:

Easily Fatigue

Difficulty in breathing

Rapid heart rate

Icterus (Jaundice)

Anorexia (loss of Appetite)

Diarrhœa

May present with bleeding Gums

Management:

Lifelong treatment for patients with confirmed pernicious anaemia starts with an intramuscular (IM) injection of 1000 micrograms of B12.

Administered daily or every other day for 1 to 2 weeks, followed by weekly injections for 1 to 2 months. Then administer a monthly injection (cyanocobalamin) or every 2 to 3 months. Following the initial intensive treatment phase, patients can continue IM injections, or they can be offered high-dose oral B12 supplementation for the lifelong maintenance phase.

Prognosis:

Before the discovery of treatment, pernicious anaemia could be fatal. The prognosis since has been excellent with appropriate management, except for patients diagnosed with SCD.



Although B12 supplementation stops progression and improves neurologic deficits in most patients with SCD, evidence shows complete resolution only occurs in a small percentage of them.

Typically, neurological symptom improvement is slower than haematological improvement, and the degree of neurological recovery is inversely proportional to the severity and duration of symptoms before treatment.

Psychiatric symptoms such as emotional liability and psychosis may rapidly improve.

Complication:

People with pernicious anaemia are more likely to havefractures of the back, upper leg, and upper forearm.

Brain and nervous system problems may continue or be permanent if treatment is delayed.

Homoeopathic Management:

- 1. **Ferrum Metallicum:** Best Homeopathic medicine for Anaemia. The persons needing Ferrum Met are weak with paleness, and have frequent false flushing appearing at the slightest excitement. Vertigo, pulsating headaches and ringing in ears. Difficulty in breathing, shortness of breath with palpitations in heart are dominantly present in such patients, as is coldness of body.
- 2. <u>Aletris Farinosa</u>: Homeopathic medicine for Anaemia in women with extreme fatigue. There is a marked weariness and tiredness all day in such patients. The energy level seems to be markedly reduced and the body feels powerless. Frequent episodes of faintness and vertigo are common and even the face appears very pale. Anaemia in women due to repeated abortions is best treated with Homeopathic remedy Aletris Farinosa. Vaginal discharge due to Anemia can also be corrected with this Homeopathic medicine. Aletris Farinosa is also the ideal Homeopathic mode of treatment for women with Anaemia due to abundant bleeding during periods.
- 3. <u>China</u>: one of the Best Homeopathic medicines for Anaemia following excessive bleeding. Anaemia due to extreme blood loss is best treated with natural Homeopathic medicine China. The bleeding can be the result of a traumatic injury, excessive bleeding in periods or bleeding from any part of body like throat, bowels, nose, etc. Episodes of vertigo with marked weakness are also experienced. The body feels cold and pallor is marked. The face especially appears pale with sunken features. Homeopathic medicine China acts both as a haemorrhage controller as well as enhances the amount of blood after the bleeding episodes.
- 4. Natrum Mur: One of the best Homeopathic medicines for Anaemia with weight loss. Natural Homeopathic medicine Natrum Mur acts very efficiently to control weight loss as a result of Anaemia. The person appears very lean and emaciated with loss of flesh. The headache due to Anaemia is also best treated with Natrum Mur. The headache is mainly bursting in character. Nausea and vomiting may accompany the pain in head. Natrum Mur is also the Homeopathic cure when anaemic patients experience palpitations. Natrum Mur has a great ability to control palpitations due to decreased blood. Anaemia due to



- longstanding grief is also best treated with Homeopathic remedy Natrum Mur. There is also a marked desire for extra salt in persons needing Natrum Mur to cure Anaemia.
- 5. **Ferrum Phos :** A haemoglobin enhancer. It can be safely used among people of all age groups. Even during Anaemia in pregnancy, Ferrum Phos is a safe Homeopathic remedy though the dosage is to be properly handled by the physician during pregnancy. The skin appears pale in persons needing Ferrum Phos and they also experience palpitation of heart and weakness. The pulse rate is quickened. Vertigo and headache also appear as symptoms.
- 6. **Phosphorus:** Phosphorus is another effective remedy for pernicious anaemia. Phosphorus is of great help when there is a numbness of hands and arms. Longstanding diarrhoea with weakness is also experienced. An increased desire for cold drinks and ice creams is often noticed in Phosphorus patients. Phosphorus is also prescribed for anaemia due to kidney diseases.
- 7. **Arsenic Album:** Arsenic alb is another effective remedy for anaemia following malaria. Arsenic Album is prescribed when there is a marked weakness that gets worse at night. The person seems exhausted with much weakness. Even a slight exertion seems to worsen the weakness. Other important symptoms include anxiety and restlessness.

References:

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- Golwalla's Medicine For Student by Aspi F Golwalla, Sharukh A Golwalla
- Textbook of pathology by Harsh Mohan
- A Dictionary of practical Materia Medica by Dr. J. H. Clarke
- Materia Medica of homoeopathic medicine by Dr. S. R. Phathak



CURRICULAR ACTIVITIES



Expert lecture organized by Dept. of Practice of Medicine for the students of 2nd, 3rd and 4th BHMS on 14-12-2023



Workshop organised by the Department of Forensic medicine and toxicology for 2nd BHMS on 08-12-2023



Department of Homoeopathic Materia Medica organized Symposium for 2nd BHMS students on 30-09-2023



The Department of Organon of Medicine conducted the Seminar for 2nd BHMS on 13-12-2023



Workshop by Department of Anatomy on 12-12-2023



Educational Visit -Pharmacy Tour- B 1st BHMS Students Organized By Department of H. Pharmacy on 30-11-23 to 3-12-23



Workshop organized by Department Of Surgery for 3rd BHMS, on 24-11-2023





Visit of 4th BHMS students at sewage treatment plant by Dept. of Community Medicine on 03-11-2023



Workshop by Department of H.M.M. for 4th BHMS students on 02-11-2023



Symposium by Department of FMT for students of 2nd BHMS on 01-11-2023



Visit of 4th BHMS Students At water purification plant, Nimeta by Dept. Of Community Medicine on 01-11-2023



Visit of FSL, Gandhinagar organized by department of FMT for the students of 2nd BHMS on 25-10-2023



WORKSHOP was organized by Dept. of Pathology and Microbiology for 2nd BHMS on 20-10-2023.



Department of Case taking and Repertory organised Workshop on the date 6/10/2023 at PIHR.



Workshop organised by the Department of Community Medicine for the students of 4th BHMS on 11-10-2023.



An Expert Lecture organized by Dept. of Case taking and Repertory for the students of 4th and 3rd BHMS on 27-10-2023



Department of Homoeopathic Materia Medica had organized the Symposium for 2nd BHMS students on 30-09-2023



2 days Medisurgical skill Training session conducted for the students of 3rd &4th year BHMS at Pragya - Clinical Skill & Simulation Centre.



Workshop organized by the department of Obstetrics and gynaecology for 3rd BHMS



Department of Homoeopathic Pharmacy has conducted symposium on 25-09-2023

CO-CURRICULAR ACTIVITIES





The PIHR library had organized one day Book Exhibition cum Sale on 14/10/2023 for BHMS Students and Faculties Poster making competition for AIDS awareness by Dep. of community medicine on the WORLD AIDS DAY-01-12-2023



Awareness program organized on occasion of WORLD AIDS DAY by the Social Responsive Cell of PIHR on 1/12/2023



Celebrating Constitution Day on 27-11-2023 organized by Department of Forensic Medicine and Toxicology



Women Development Cell had organized program on Menstrual Hygiene on 03/11/2023



An Orientation Programme 'Agaman' 2023, for the 1stBHMS batch 2023–24 organised by the Faculty of Homoeopathy at Parul University auditorium on 01-11-2023



"Homoeofest" event organized by Faculty of Homoeopathy of Parul University on 16-17-18 October 2023



Elocution competition by Event cell on theme "Role of Gandhian concept in Homoeopathy" on Occasion of Gandhi Jayanti on 03-10-2023



PIHR Hospital and NSS unit had organized a rally from Parul Sevashram Hospital and a cleanliness drive at shopping complex beside PSH, Limda, Waghodia, Vadodara on 20-09-2023



Workshop organized by Institution's Innovation Council, PIHR on the topic-Entrepreneurship and Innovation as a carrier opportunity on 07-10-2023, *Speaker* - Anup Chaudhari, Incubation manager, PIERC



'World Mental Health Day' awareness session organised by Dept of Community Medicine in association with the Event on 10-10-2023

AWARDS & ACHIEVEMENTS- FACULTIES



Dr. Suraj Singh, Assistant professor in Department of Hom. Pharmacy (PG), PIHR, Parul University, For ACHIEVING 1st Position in PRE PhD examination



Dr. Kosmika Makwana, Asso. Prof. and HOD in the Dep. of Hom. Pharmacy, PIHR for achieving winning prize in 5th national level post- graduate homoeopathic research conclave 2023



Faculty felicitation programme organised by CHRD, Parul University to felicitation and appreciate the staff members who have completed Faculty Development programme

AWARDS & ACHIEVEMENTS- STUDENTS



PIHR Students Dhruv Rana-4th BHMS and Suhel Vohra-3rd BHMS emerged as the champions of the esteemed Poster making Competition hosted by DHMA on National Conference at New Delhi



PIHR student Dhruvin Gadiya- 3rd BHMS for achieving the credit of winner of all India B Jain Book Quiz Marathon







All India B Jain Books Quiz Marathon at National level November month, organised by B Jain pharmaceuticals in their respective National level Competition and our 3 students are winner of this marathon





Article publication of 1st BHMS students in Peer reviewed journal-international journal of Pharmaceutical research.



HOSPITAL ACTIVITIES



Parul Institute of Homoeopathy and Research Hospital association with Lions Club of Baroda Sunshine organized a Medical Health Check-up Camp on 04-11- 2023 at Santram Mandir, Padra



Parul Institute of Homoeopathy and Research Hospital attached with PIHR, Parul University in association Lions Club of Baroda- Sunshine Unit organized a Medical Health Check-up Camp on 06-12-2023 at Gayatri Krupa Mandir Gayatri Krupa Society Vadsar, Makarpura Vadodara



Parul Institute of Homoeopathy and Research Hospital attached with PIHR, Parul University organized a Medical Health Check-up Camp on the occasion of Birthday of Dr Komal Patel, Medical and Paramedical Director of Parul University on 31-10- 2023 at Primary School Kotna

Managing Editor : Dr. B. P. Panda (Prof./Principal) Issue Editor : Dr. Kirtikumari Baria





Parul Institute of Homoeopathy & Research Parul University