Case Report: - Effectiveness of similar medicine in case of bronchial asthma Management

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ABSTRACT:-

Homeopathy is a system based on the principle that "like cures like" (simillia simillibus curantur). In homeopathy, patients are prescribed medicines and auxiliary treatments that would produce in healthy individual symptoms similar to those diseases being treated with Minimal Doses. Individualized approach which considers both the mental and physical symptoms during case taking. Homoeopathy considers the patient as a whole. Many medicines in homeopathy help not only in the management of acute attacks but reducing the frequency and intensity of chronic asthma. This case report shows how the patient's core and sickness changed over time. A patient 34/M had the major complaint of coughing with expectoration, offensive and salty sputum, dyspnoea on exertion and suffocative feeling. The patient responded effectively to the homeopathic drug lycopodium, and his quality of life improved significantly.

KEYWORDS: - Asthma, Asthma control scale, Similar Medicine, Case report, Lycopodium.

INTRODUCTION:-

Asthma is a chronic respiratory condition characterized by inflammation and constriction of the airways, making breathing difficult due to hyper-responsiveness of the bronchial wall and airflow obstruction. Symptoms like Dyspnoea, Wheezing, Chest tightness, and Persistent coughing are seen. Long-standing uncontrolled asthma can lead to respiratory failure, characterized by hyperinflation of the lungs, loss of consciousness, and cyanosis. Chronic airway inflammation and increasing airway hyper responsiveness are the hallmarks of asthma. Symptoms may appear sporadically or continuously and they may be minor to severe. Although the precise aetiology of asthma is still unknown, a mix of environmental and genetic factors is thought to be involved. Allergens (including pollen, dust mites and animal dander), respiratory illnesses, air pollution, cold air, exercise and certain drugs or chemicals are common causes of asthma symptoms. [1]

The global prevalence of asthma varies significantly across different countries. In the (Global Asthma Network) GAN Phase I study, the prevalence of current asthma symptoms was as follows: Children: 9.1%, Adolescents: 11.0%, Adults: 6.6%. Among India's vast population of 1.36 billion people, approximately 35 million suffer from asthma. In a combined analysis of data from the ISAAC (International Study of Asthma and Allergies in Childhood) study (collected between 1992 and 1996) and the European Community Respiratory Health Survey (ECRHS) (collected in 1988-1994), asthma prevalence ranged from a low of 0.7% in Macau to a high of 18.4% in Scotland. [1, 2]

CASE REPORT:-

Patient detail & narration:-

On 22/04/2024, Patient Mr. M, 32/Yrs./M, Married, B.com, doing the job, from Bharuch presented with a complaint of dyspnoea on exertion for three years for which he had used inhalers and all different medicines, but it would only provide temporary relief. Before one year, the patient was brought to the hospital owing to serious respiratory difficulties, but everything was controlled with medication. The patient was feeling better and the issue was under control. Complaints have been more intense and frequent during last six months. Complaints included coughing with expectoration that was irritating and salty. Even with modest

exertion, he felt exhausted and suffocated. He felt as if his throat was choked. It felt better in an upright position. The complaint was most intensified after 4 p.m. and during cold weather. The patient has an afraid of being alone. Patients do not recall the things and he must be reminded repeatedly.

The chief complaints (Table - 1) are written in the location-sensation-modality-concomitant format for better understanding

Table 1:- Chief Complaints

LOCATION	SENSATION	MODALITY	CONCOMITANT
Respiratory System since 3 years In 2022	Coughing with expectoration. +++ Offensive & salty sputum. Dyspnoea on exertion. +++ Suffocative feeling. +++ Diagnosed as asthma Admitted to hospital. Spirometry done which s/o reduced ratio of FEV1 to FVC.	Complain < Lying on back +++ >Sitting upright < 4 to 8 pm, cold weather+++	Abdomen bloating. Pain in the lower abdomen. Weakness+++
In 2023	Same complain	Bronchodilators taken	Weakness+++
In 2024 January	Same complain. Has to keep in oxygen support	Bronchodilators taken	

FEV1 – Forced expiratory volume in 1 second, FVC – Forced vital capacity

Physical characteristics

Medium built, bloated abdomen, thin, fair complexion.

Past History: - Ringworm on right thighs before 3 years and taken modern medicine for that and it disappeared, thereafter no repeated episodes in 3 years

Family history: - Father: - hypertension- on medication

Perspiration: - Scanty

Thermal: - Chilly+

Craving: - Sweet +++

Aversion: - Bread ++

Hunger: - Excessive ++

Thirst: - 1-2 Lit/day

Stool: - Hard, difficult to pass.

Addictions: - 3-4 cigarettes every day.

Understanding the patient as a person

Childhood

As a child patient grew up in a joint family in Bharuch. Father was doing a job in a company. Having a dominating father+++, he is not able to share anything with his family. Mother was a housewife and was described as calm. The patient is close to his mother. The patient does not like his father's dominating nature, so he does not talk with his father. He has a good relationship with his sister. He is shy, anxious, irritable, and lack of self-confidence. He also exhibit a fear of failure or criticism, stubborn nature, and is prone to throw tantrums when things don't go as planned as he wished.

Qualification

The patient graduated with B.com and performed well in his studies. He liked variety of sports, the most prominent of which being cricket. He now laments being unable to participate in sports because of his present illness.

Adult life

From a young age, the patient had exhibited signs of low self-esteem and a constant need for reassurance. Despite his academic prowess and sharp intellect, he harboured deep-seated self-doubts. Each day, as he tended to his duties in the school, he wrestled with a persistent fear of failure, dreading the judgment of others. His anxieties manifested in various ways. He was meticulous to a fault, spending hours analysing every decision and contemplating every possible outcome. His mind buzzed with a constant stream of worries and what-ifs, leaving him paralyzed by indecision. In social settings, He struggled to mask his insecurities behind a facade of confidence. He was prone to bouts of irritability and frustration, particularly when his carefully laid plans were disrupted. Despite his best efforts to maintain control, He often found himself overwhelmed by waves of anxiety, unable to shake off the gnawing sense of dread that plagued him. Despite his inner turmoil, He managed to carve out a comfortable existence for himself. He married a kind and understanding woman, who provided a steady source of support and encouragement. Together, they raised a loving family, finding solace in the simple joys of domestic life.

The patient is intelligent ambitious and pursuing a successful career. He is detail-oriented and capable of handling complex tasks, likes professions that require analytical thinking and problem-solving skills. He is an engineer by profession. Due to his shy nature, he finds it challenging to assert himself in social situations. However, he can be engaging and charismatic once he feels comfortable in a particular environment. Having a fear of rejection, which can impact his relationships. He is hesitant to express his emotions openly and struggles with intimacy. However, once he establishes trust with a partner, they can be loyal and committed.

The patient has a fear of being alone. The mere thought of solitude sent shivers down his spine, filling him with a sense of dread and unease. To escape the suffocating grip of loneliness, He surrounded himself with a constant whirlwind of activity, seeking solace in the company of others. Despite his best efforts to mask his fears, He found himself irrationally irritated by the smallest of matters, from the incessant tapping of a pen to the faint hum of a fluorescent light. These minor annoyances served as constant reminders of his underlying unease, exacerbating his sense of discomfort and agitation. His aversion to solitude also manifested in his reluctance to undertake new challenges or ventures. He shied away from unfamiliar situations, fearing the unknown and clinging to the safety of the familiar.

The patient's fear of death had its roots in a tragedy. When he was in a company, he witnessed the sudden passing of his close friend due to a fatal accident. The experience had left an indelible mark on his psyche, instilling in him a deep-seated terror of mortality. From that day forward, he became obsessed with the fleeting nature of life, constantly haunted by the spectre of death. As he grew older, his fear of death only intensified. He became acutely aware of the fragility of life, obsessively monitoring his health and fixating on any minor ailment or discomfort.

Every cough or ache filled him with dread, leading him to spiral into anxious thoughts about his mortality. He avoided travel and adventure, preferring the safety and familiarity of his own home. He shied away from forming deep connections with others, fearing the pain of loss that inevitably accompanied attachment.

Totality of symptoms

Lack of confidence

Fear of failure

Indecisive

Insecure

Fear of being alone

Desire Company

Fear of death

Weakness+++

Craving - Sweet +++

Aversion - Bread ++

Hunger - Excessive ++

Stool - Hard, difficult to pass.

Complain < Lying on back +++, < 4 to 8 pm, cold weather+++

Complain >Sitting upright

Offensive & salty sputum.

Coughing with expectoration. +++

Dyspnoea on exertion. +++

Suffocative feeling. +++

Abdomen bloating.

Pain in the lower abdomen.

Repertory sheet

Figure 1:- Repertory Sheet 1 (RADAR software)

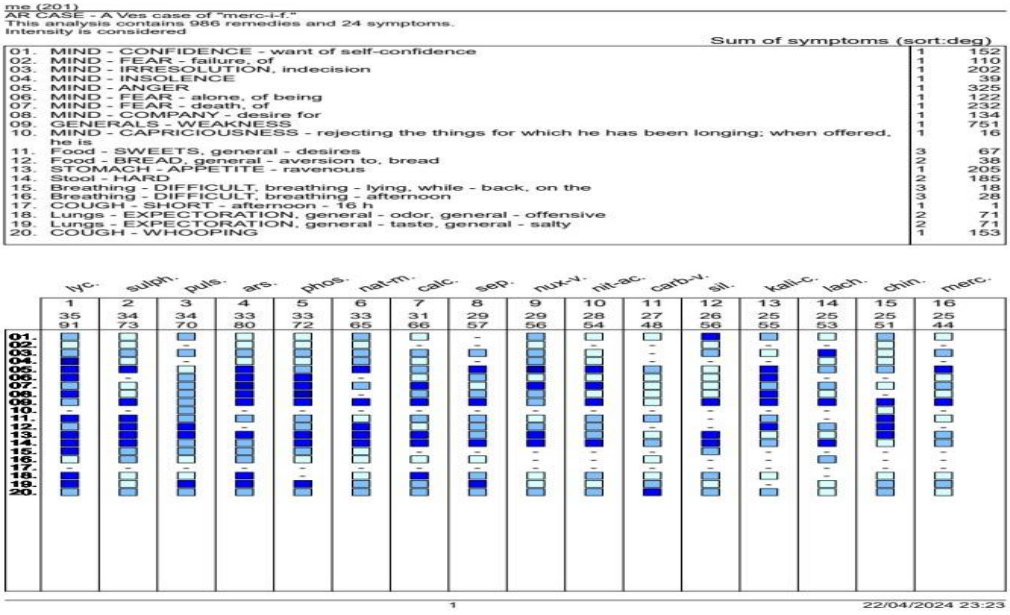
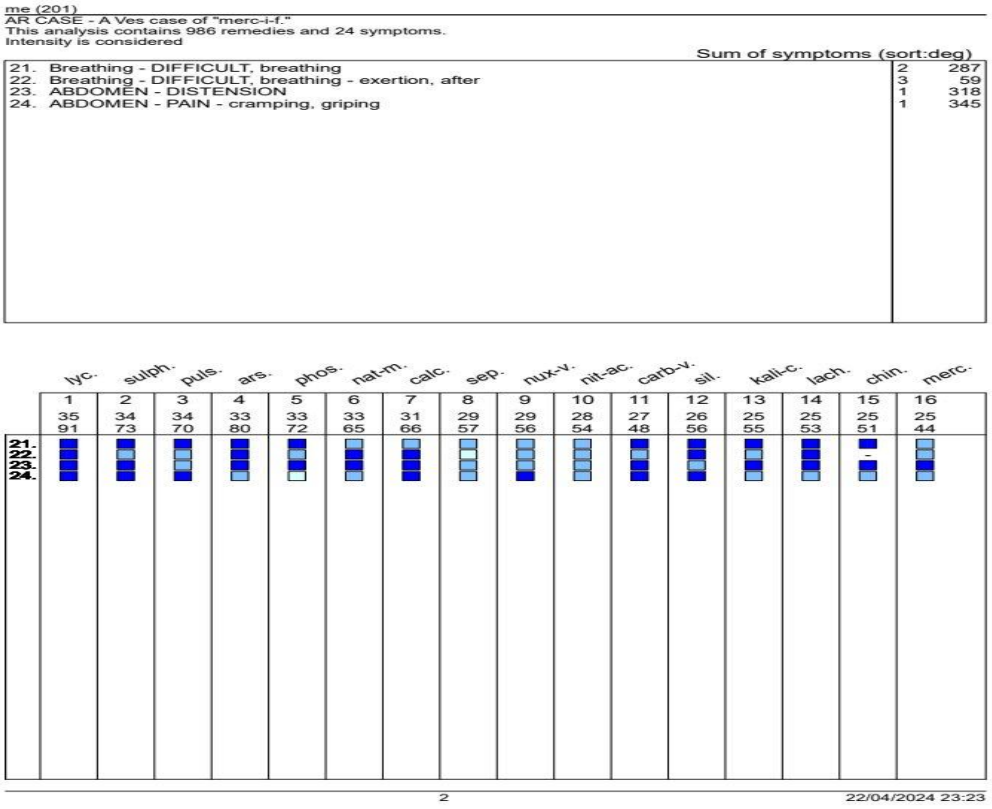


Figure 2:- Repertory Sheet 2 (RADAR software)



Understanding of case

The patient's behaviour since childhood demonstrates anxiety, lack of confidence, and difficulty making decisions. The symptoms recorded during case-taking point to Lycopodium, Sulphur, Pulsatilla, Arsenic Album, and Phosphorus as potential candidates for differentiation. Lycopodium can lead to feelings of anxiety, insecurity, and fondness for the respiratory affections and gastrointestinal tract. Lycopodium was selected as the final drug.

- Final selection of medicine: - Lycopodium
- Final prescription – **Lycopodium 200** 1 dose stat
- Follow-up criteria

1. Weakness
2. Sleep
3. Appetite
4. Coughing
5. Expectoration
6. Suffocative feeling
7. Abdominal pain
8. Abdominal bloating
9. Requirement of inhalers

- Follow-up summary

Table: - 2 follow up summary

DATE	CHANGES IN SYMPTOMATOLOGY	PRESCRIPTION
7/05/2024	Feeling better Sleep disturbed Appetite reduced Coughing is reduced but wheezing present with offensive and salty sputum++ Dyspnoea on exertion ++ Suffocative feeling reduced+ Abdominal pain reduced Requirements of inhalers twice a week Requirements of (SOS) dose – 2 doses	Lycopodium 200 2 doses weekly orally Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month.
23/05/2024	Feeling good Sleep disturbed occasionally Coughing is reduced but wheezing present with offensive and salty sputum+ Dyspnoea on exertion ++ Suffocative feeling reduced+	Lycopodium 200 1 dose stat orally Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month.

	Abdominal pain reduced Requirements of inhalers twice a week Requirements of (SOS) doses – 2 doses	
9/06/2024	Good energy Sleep improved Appetite good Coughing is reduced, expectoration reduced Dyspnoea on exertion reduced Suffocative feeling reduced Abdominal pain reduced Requirements of inhalers once a week Requirements of (SOS) doses – 1 dose	Lycopodium 200 1 stat orally Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month.
25/06/2024	Good energy Sleep improved Coughing is reduced, expectoration reduced Dyspnoea on exertion reduced Suffocative feeling reduced Abdominal pain reduced Requirements of inhalers occasionally Requirements of (SOS) doses – 1 dose	Lycopodium 200 1 stat orally Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month
10/7/2024	Good energy Sleep improved Coughing is reduced, expectoration reduced Dyspnoea on exertion reduced Suffocative feeling reduced Abdominal pain reduced No requirements for inhalers Requirements of (SOS) dose – 0	Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month
25/07/2024	Good energy Sleep improved Appetite good Coughing is reduced, expectoration reduced Dyspnoea on exertion reduced Suffocative feeling reduced Abdominal pain reduced No requirements for inhalers Requirements of (SOS) dose – 0	Lycopodium 200 2 doses (sos if required) Sac Lac 30 T.D.S For 1 month
10/08/2024	Relief in complaints	Sac Lac 30 T.D.S For 1 month

SOS – if required, T.D.S – Thrice a day,

DISCUSSION

Samuel Hahnemann, the founder of homeopathy, had specific views on chronic diseases that are fundamental to the principles of homeopathic treatment. Hahnemann believed that diseases arise from a disruption in the body's vital force, which he described as a dynamic life force or energy that maintains health and balance. According to Hahnemann, chronic diseases result from a suppression of acute diseases, environmental factors, inherited tendencies, or emotional disturbances. [3]

Hahnemann advocated for a holistic approach to healing, considering the totality of symptoms and the individual's constitutional makeup. He believed that diseases required individualized treatment tailored to the patient's specific symptoms and susceptibility. Based on his principles, Hahnemann developed homeopathic remedies, which are highly diluted substances derived from plants, minerals, or animals. He believed that these remedies, when carefully selected based on the principle of "like cures like" (simillia simillibus curantur), could stimulate the body's self-healing mechanisms and restore balance to the vital force. Hahnemann has described in this book that the development of chronic asthma is due to the suppression of skin diseases from alternative medicine. [4]

According to Hahnemann, "the monstrous internal chronic miasm – the Psora, the real fundamental cause and producer of all other numerous diseases including asthma and ulceration of the lungs, etc." is the 80th aphorism in the book Organon of Medicine. [4]

It implies that the patient as a person and his pathological state is the main focus of homeopathic treatment. Following a thorough individualizing examination and case analysis that takes into account the patient's medical history, physical and mental health, constitution, family history, underlying sickness, potential causative factors, etc., the homeopathic drugs are chosen. Particularly when treating chronic diseases, a Miasmatic tendency, or predisposition/susceptibility, is sometimes taken into consideration. Homeopathic Practitioners Strive to Treat More Than Just Outward Symptoms. [4]

Homeopathic medicine lycopodium it's another name for vegetable sulphur. This plant cure is categorized under Psoric Miasm. Lycopodium clavatum was once a massive tree that eventually withered away to become club moss, a tiny fern. Thus, the emotion of lycopodium is that the individual stays little, faces hardships in surviving, feels humiliated, and vanishes from sight. [5]

The primary cause of Lycopodium's ambition is its drive to expand, which leads to a great deal of work focused on reaching the top of the ladder and completely growing larger and more powerful. A person who feels powerless is likely the one from whom a lycopodium condition may have developed. He will therefore feel better about everything having to do with gaining power, but he will become agitated about anything involving the loss of power. Lycopodium rules dominates and enlists the aid of everybody he can. Being extremely afraid of taking on new tasks and stepping into unfamiliar circumstances. Being the antidote to the plant kingdom, this individual is highly emotional, sensitive, creative, and intelligent, and they can hypothesize and create abstractions with ease. The following physical symptoms are associated with lycopodium: - they exhibit early senility symptoms, such as hair greying, baldness, enlarged prostate, etc. - they need warm foods and beverages and avoid sweets. Haste when consuming food and beverages. [5, 6]

Detailed Symptom Analysis: Homeopaths pay close attention to the specific characteristics of asthma symptoms. For example, the type of cough (dry or loose), the timing and frequency of attacks, and accompanying symptoms like anxiety or restlessness are considered. The potency and dosage of the selected remedy are tailored to the individual's response and sensitivity. Regular follow-up appointments are essential in homeopathic case management. The homeopath evaluates the patient's response to the remedy and makes any necessary adjustments to the treatment plan.

In this case, after forming a totality, an analysis of this case was done. Based on the patient symptom similarity Homoeopathic medicine Lycopodium was selected because it covers the patient's symptoms. After a thorough analysis of the case, Lycopodium 200C 12 doses were prescribed. After three months of prescription, complaints of coughing dyspnoea and breathing difficulty were better, which indicates the medicine that was prescribed to the patient based on the symptom similarity of mental and physical complaints, considering the patient as an individual, helped the patient in improvement. On follow-ups, the patient's health gradually improved so doses were also reduced. The improvement of the patient was analysed by the asthma control scale score after Six months of treatment. After that patient was better and his quality of life was improved. Lycopodium was selected as it cover most of the symptoms and the modality of the patient and their mental were all indicated to lycopodium. From this case, we are all able to understand the improvement of individualized homeopathic medicine.

CONCLUSION

This case of bronchial asthma treated with Lycopodium and evaluated by using an asthma control scale showed that individualized homeopathic medicine will help to recover the patient and improve their quality of life. When a patient comes first time their Asthma Control Scale score is 13 and after Six months of treatment Asthma Control Scale score is 21. Murphy repertory (RADAR Software) was used in this case for the Repertorial totality of the case. This shows the significant improvement in the quality of life of the patient after homeopathic individualized medicine. This case shows that homeopathy helps to improve symptoms of asthma, reduce the episodes of breathing difficulty and improve the general health of the patient, and helps in weaning anti-allergic medicines

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