

To Study the Role of Constitutional Medicines in The Management Of Upper Respiratory Disorders

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Abstract— *Upper respiratory tract infection (URTI) is one of the leading causes of morbidity worldwide, especially in the paediatric age group. Conventional medications have a minimal role in treating and preventing those diseases and an alternative for this is warranted. In this regard, homoeopathy can be a proper consideration, but the comparative effect and safety need critical evaluation.*

I. INTRODUCTION

Upper respiratory tract infection (URTI) is one of the leading causes of morbidity worldwide, especially in the paediatric age group. Conventional medications have a minimal role in treating and preventing those diseases and an alternative for this is warranted. In this regard, homoeopathy can be a proper consideration, but the comparative effect and safety need critical evaluation.

Upper respiratory tract infections can be defined as self-limited irritation and swelling of the upper airways, cause a variety of patient diseases including acute bronchitis, the common cold, influenza, and respiratory distress syndromes. Defining most of these patient diseases is difficult because the presentations connected with upper respiratory tract infections (URIs) commonly overlap and their causes are similar. Upper respiratory tract infections involve the nose, sinuses, pharynx, larynx, and the large airways.

Common Causes of Upper respiratory tract infection is common cold continues to be a large burden on society, economically and socially. The most common virus is rhinovirus. Other viruses include the influenza virus, adenovirus, enterovirus, and respiratory syncytial virus. Bacteria may cause roughly 15% of sudden onset pharyngitis presentations. The most common is *S. pyogenes*, a Group A streptococcus.

Upper respiratory tract infections (URTI) occurs

commonly in both children and adults and is a major cause of mild morbidity. It has a high cost to society, being responsible for absenteeism from school and work and unnecessary medical care, and is occasionally associated with serious sequelae. Common infections and include pharyngitis, sinusitis, epiglottitis, laryngotracheitis, and the common cold. In children it more often includes the paranasal sinuses and also the middle ear and nasopharynx. URTIs are usually caused by several families of Virus these are rhinovirus, coronavirus, respiratory syncytial virus (RSV) adenovirus, etc. play significant role in the pathogenesis of many of these infections. Bacteria and other organisms also are responsible. Constitution prescription is one of the most important aspects of the homoeopathic therapeutic process. The choice of remedy in homoeopathy is based on the entirety of an individual's symptoms and circumstances, including personality, behaviour, mindset, bodily and mental responses to the environment, food preferences, and so on. During Homoeopathic Treatment there are many remedies available for one disease and the best suited medicine is prescribed over person's CONSTITUTION based on the Principle of Homoeopathy "SIMILIA SIMILIBUS CURANTUR" to establish the cure of disease.

The English word, constitution, comes from the Latin root, *constituere*, which means constitutes i.e. to establish or to set up or make up or to form, to assign to give being to.

As per Paracelsus says that "there is no knowledge is perfect unless it consists of an understanding of the beginning. So he says that all the diseases are originated from the constitution. It is necessary that the constitution should be known if we wish to know the diseases.

II. AIMS AND OBJECTIVES

AIM:

To study the role of Constitutional Homoeopathic medicine in the management of Upper Respiratory Disorders

OBJECTIVES:

1. To study the clinical presentation of upper respiratory Disorders.
2. To Explore the action of Constitutional Homoeopathic medicines in the management of upper respiratory disorders. .
3. To study control and prevention of upper respiratory disorders.

RESEARCH QUESTION:

Whether Constitutional Homoeopathic Medicines having significant Role in the management of upper respiratory disorder?

Constitutional Homoeopathic Medicines having significant role in the management of Upper Respiratory disorder.

Null hypothesis

Constitutional Homoeopathic Medicines having no significant role in the management of Upper respiratory disorder.

Background and Justification of the study :

Constitutional Homoeopathic medicines play a significant role in preventing the incidence of recurrence of Upper Respiratory Tract Infection by improving the immune response of the individual. Significant improvement is seen without side effects attendant on the use of routinely prescribed antibiotics and in whom such therapies have failed to provide adequate benefit. The correct prescription relieves the suffering, reduces the incidence of complications, and leaves the patient healthy in a general way. Two great advantages of Homoeopathic treatment are seen- Firstly the nature of infection is of no importance, Viral diseases yield as readily as bacterial. There is no problem of natural or acquired insensitivity to chemotherapeutic agents..

In chronic illness, the patient's mental and physical

makeup are studied and considered, besides the Hereditary tendencies and the personal history of illnesses. The constitutional prescription will raise the general level of health

Our literature reviewed has shown the effectiveness of constitutional Homoeopathic medicines in treating upper respiratory tract infection. The homoeopathic line of treatment has shown that, treatment followed by the medicines provides the base to develop the immunity as well as the nutritional status. This study was undertaken to study the efficacy of Homoeopathic medicines (gently, rapidly and permanently restoring the sick to health.) in the treatment of upper respiratory tract infection .

III. REVIEW OF LITERATURE

Upper respiratory infections are common infections and include pharyngitis, sinusitis, epiglottitis, laryngotracheitis, and the common cold. In children it more often includes the paranasal sinuses and also the middle ear and nasopharynx. Viruses play a significant role in the pathogenesis of many of these infections. Bacteria and other organisms also are responsible.

Pharyngitis is an inflammatory process of the pharynx, hypopharynx, uvula, and tonsils that can be caused by viral or bacterial infection and, occasionally, both.

Sinusitis is an inflammatory process involving the paranasal sinuses (maxillary, frontal, ethmoid, and sphenoid). It usually is a bacterial complication of a viral upper respiratory infection.

Epiglottitis is a life-threatening disease observed most frequently in children aged 1-6 years, often during the fall and winter. Although less common, it also can affect adults.

Laryngotracheitis usually is the result of viral infection. The subglottic area and trachea are involved, whereas the area above the true vocal cords is spared. When children younger than 5 years have the infection, it is called croup.

The common cold is a mild, self-limited, catarrhal syndrome caused, for the most part, by members of 5 families of viruses. A small proportion of colds are

complicated by bacterial infections of the paranasal sinuses and the middle ear.

A child has about 3-6 episodes of upper respiratory infection per year, but some have greater number during 2nd and 3rd year of life. Most of these infections include pharyngitis and/or laryngitis. Viral upper respiratory infections frequently occur in mini epidemics. They are more common in the winter, except for those caused by enteroviruses, which are more common in the summer.

Mortality/Morbidity:

Cases of untreated GAS pharyngitis can result in acute rheumatic fever, acute glomerulonephritis, peritonsillar abscess, and toxic shock syndrome. Mortality from pharyngitis is rare but may result from one of its complications. Sinusitis rarely is life threatening but can lead to serious complications, such as orbital cellulitis, subperiosteal abscess, orbital abscess, frontal and maxillary osteomyelitis, subdural abscess, meningitis, and brain abscess.

The science of Homoeo-therapeutics is a very specialised branch of Medical science which was introduced to the world by Dr. S. F. C. Hahnemann (1755 to 1843) in Germany. This science deals with human disease on specific principles, following the "Law of Similars".

The Law of Similars is very well explained in a simple way as, while peeling an onion, one develops running of nose, redness of eyes and watery eyes, with burning in eyes and nose. Similar are the sign and symptoms of allergic rhinitis and hay fever. This could be either seasonal called hay fever or due to the patient's susceptibility to very minute doses of some substance usually protein to which normal people are immune. The liquid present in between the numerous layers of the onion, is compressed under high pressure, it releases while peeling the skin, comes in contact with the air, and affects the eyes and the nose of the person peeling the onion and those around. The symptoms thus produced are very similar to allergic rhinitis and sinusitis. So onion or *Allium cepa* becomes one of the remedies for the disease. This is how the symptoms of the patient are artistically matched with the symptoms of drug.

The prescribed remedy helps the body and its biochemical activities to fight out the disease that is foreign to the body. In the process the immunity and the body defense mechanism is improved. It has been observed that those who are on homoeopathic medicine do develop immunity and hence resistance to the infection and seasonal disorders. Also the approach is holistic dealing with human mind and body as a whole, the sense of general well-being is observed by the individual, that is, not only the disease is annihilated, but general health is restored. There is a widespread feeling among the general public that homoeopathic medicines take a long time to relieve or cure. This is not true. It is our personal experience that when the medicine is well selected and matched with the disease condition and causative factor, the effect is immediate and patient recovers in the shortest possible time. In acute conditions it has been observed that the quickest possible Result has been obtained in fever, upper respiratory infections, viral infection etc. Upper respiratory tract infection (URI) represents the most common acute illness evaluated in the outpatient setting. URIs range from the common cold—typically a mild, self-limited, catarrhal syndrome of the nasopharynx—to life-threatening illnesses such as epiglottitis,

Homoeopathy

Homoeopathy sees health as freedom on the physical level. Where each part of the body from the cells to the organ systems operates with ease, grace and energy in an integrated harmonious way for optimum efficiency, allowing us to respond quickly and appropriately to situations with little pain or limitations.

Homoeopathy sees health as freedom on the emotional level. Where we experience the widest array of emotions possible. We have satisfying relationships with family, friends, society and ourselves. We do not repress our grief or have uncontrolled anger.

Homoeopathy sees health as freedom on the mental level. When the various functions of the mind operate with clarity and efficiency. We experience self-expression using our thoughts, our short and long-term memory work, or our mind is able to shut down from the days' events and anxieties at night to allow us to recuperate.

Lectures of Homoeopathic Therapeutics: Dr. K. P. Muzumdar, pp. 17 – 18, First Edition

Diseases of the Upper Respiratory Tract are amongst the most common form of human illnesses. In most instances they are not life threatening, generally they do not lead to serious disability. In Psoric individuals, the catarrh starts with sneezing, redness, heat, sensitiveness to touch, sometimes the discharge is thin, acrid, watery. In sycosis, the nose is red with enlarged capillaries, snuffles in children scanty but purulent nasal discharge of fish brine odour, yellowish green, strong alteration of symptoms of clear and obstructed nose. In Tubercular individuals, there is much sneezing, discharge is thick, purulent, blood stained, yellow with odour of old cheese. In the syphilitic phase children develop snuffles and/or with ulceration thick crusts (clinkers) which are dark greenish, tick brown, blocks nasal cavity, may or not be offensive. Sore throat is the most common symptom of Upper Respiratory Tract Infection with varying degree of discomfort. Symptoms range from mild redness, congestion of blood vessels (Psoric), intense red purple colour, patchy yellow exudates. Hypertrophy of all lymphoid tissue (Tubercular) scratchy throat, difficulty in swallowing of saliva, constant desire to clear throat, with viscid scanty mucus are the usual symptoms. Severe inflammation of Tonsils and Pharynx are Pseudo Psoric expressions. Fever may be present in Psoric or Pseudo Psoric only to show the reaction of the body of the adverse stimuli.

Advantages of Homoeopathic Treatment

Homoeopaths' consultations for chronic conditions include an extremely detailed case history. Patients are asked to describe their medical history and current symptoms. Particular attention is paid to the “modalities” of presenting symptoms—that is, whether they change according to the weather, time of day, season, and so on. Information is also gathered about mood and behaviour, likes and dislikes, responses to stress, personality, and reactions to food. The overall aim of the history taking is to build up a “symptom picture” of the patient. This is matched with a “drug picture” described in the homoeopathic Materia medica. On this basis, one or more homoeopathic medicines are prescribed, usually in pill form. Sometimes treatment consists of only one or two doses. In other cases a regular daily dose is used. Two

to six weeks after the start of treatment, progress is reviewed and alterations made to remedy or dilution. A patient's initial symptom picture commonly matches more than one homoeopathic remedy, and follow up allows the practitioner to make an empirical judgment on whether a particular remedy was the correct one to prescribe. If the patient is doing well the practitioner may stop treatment and monitor progress. If symptoms recur the treatment may be repeated at the same or a higher potency. If the symptom picture has changed at follow up a different homoeopathic prescription may be given even though the conventional diagnosis remains unchanged. Homoeopathic consultations in private practice may last over an hour. Many homoeopaths also recommend.

IV. CLASSIFICATION

A URTI may be classified by the area inflamed. Rhinitis affects the nasal mucosa, while rhinosinusitis or sinusitis affects the nose and paranasal sinuses, including frontal, ethmoid, maxillary, and sphenoid sinuses. Nasopharyngitis (rhinopharyngitis or the common cold) affects the nares, pharynx, hypopharynx, uvula, and tonsils generally. Without involving the nose, pharyngitis inflames the pharynx, hypopharynx, uvula, and tonsils. Similarly, epiglottitis (supraglottitis) inflames the superior portion of the larynx and supraglottic area; laryngitis is in the larynx; laryngotracheitis is in the larynx, trachea, and subglottic area; and tracheitis is in the trachea and subglottic area.

V. PREVENTION

Low- or very-low quality evidence indicates probiotics may be better than placebo in preventing acute URTIs. Vaccination against influenza viruses, adenoviruses, measles, rubella, Streptococcus pneumoniae, Haemophilus influenzae, diphtheria, Bacillus anthracis, and Bordetella pertussis may prevent them from infecting the URT or reduce the severity of the infection.

VI. TREATMENT

Upper respiratory infections deaths per million persons in 2012 The Centers for Disease Control describe a protocol for treating sinusitis while at the

same time discouraging overuse of antibiotics:

- Target likely organisms with first-line drugs: amoxicillin, amoxicillin/clavulanate
- Use the shortest effective course; should see improvement in 2–3 days. Continue treatment for 7 days after symptoms improve or resolve (usually a 10–14-day course).
- Consider imaging studies in recurrent or unclear cases; some sinus involvement is frequent early in the course of uncomplicated viral URI^[4]

Treatment comprises symptomatic support usually via analgesics for headache, sore throat, and muscle aches. Moderate exercise in sedentary subjects with a naturally acquired URTI probably does not alter the overall severity and duration of the illness.

HOMOEOPATHIC THERAPY: -

- 1- Arsenicum alb., Natrum mur, Ars. Iode., Calcarea carb., Hepar sulph etc.

V. RESEARCH METHODOLOGY

MATERIAL & METHODS:

STUDY SETTINGS

The study will be conducted at Institute. Patients will be collected from the Hospital OPD, IPD and various medical camps.

SELECTION OF SAMPLE: 30 cases will be collected by simple randomized sampling method for data analysis.

STUDY DESIGN

Prospective study

Inclusion Criteria:

1. All age group patients.
2. Patients of Both sexes.

Exclusion Criteria:

Exclusion criteria includes-

1. The patient with gross pathological changes/ illness.
2. Patients with systemic disorders.
3. Cases on immuno suppressive drugs

Intervention:

- The homoeopathic medicines will be selected according to constitutional similarities.
- Auxiliary management will be advised as per need of the case.
- Placebo will be prescribed when the given medicine is left to act. Follow-up after 7-15 days or as required for the individual case.

SELECTION OF TOOLS:

1. Case taking.
2. Clinical examination.
3. Investigations if needed.
4. Homoeopathic software.

BRIEF OF PROCEDURES:

1. Case-taking as per standard format.
2. Clinical diagnosis.
3. Investigation as per requirement.
4. Case analysis.
5. Evaluation & Analysis of symptoms.
6. Repertorisation with homoeopathic software.
7. Final Selection of similimum.
8. Proper follow-up method will be adapted as per severity of case symptom.
9. Auxiliary treatment as per need of the patient.

SAMPLE SIZE :

30 cases will be collected by simple randomized sampling method.

Outcome assessment criteria:

Parameters used:

Assessment was based on general improvement of the patient at mental, as well as physical level. New sign & symptom developed after the medicine were also assessed the follow-up. Whenever, necessary help of investigation was taken for assessment after the

medicine was given & Streatment will be considered under following 3 headings-

RECOVERED: relief of signs and symptoms but under follow up.

IMPROVED: Relief of Signs and Symptoms up to the end of my study period will be considered improved.

NOT IMPROVED: No change in signs and symptoms.

DATA COLLECTION:

1. Primary method and questionnaire.
2. Detail of treatment given.
3. Potency & repetition schedule.
4. Details of follow-up till the end of treatment.

Theoretical study:

The topic will be explored from different textbooks, websites, different relative works.

Selection and Administration of Medicine:

Totality of symptoms and the selection of medicine will be obtained through the repertorization of the case.

Case Repertorization:

All the cases will be repertorized properly with the help of RADAR SOFTWARE through Appropriate Repertory.

Selection of Potency: Selection of the potency will be according to individuality or susceptibility of patient.

Follow-Up and Monitoring: Repetition of medicine will be based on individual response of the patient. All the patients will be advised to report at regular intervals according to the severity of symptoms presented by the patients. Follow up charts will be maintained.

STASTICAL TECHNIQUES:

The descriptive statistics as mean, mode, median, or whatever required.

VI. DATA ANALYSIS

The data will be analysis by applying standard

statistical method.

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