

Individualized Homoeopathic Management of Muscular Dystrophy A Case Report

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Abstract—Muscular Dystrophy is a progressive neuromuscular disorder characterized by gradual muscle weakness and degeneration. The objective of this case report is to evaluate the role of individualized homoeopathic treatment in the management of a patient diagnosed with Muscular Dystrophy. This case report presents a 47-year-old female with long-standing weakness of upper and lower limbs associated with tingling sensation, fatigue, and disturbed sleep. After detailed case taking and repertorial analysis, Causticum 1M was prescribed as the similimum. Supportive remedies including Kali Phosphoricum 6X and Veratrum Album were given during follow-ups. Gradual improvement was observed in sleep, reduction in tingling sensations, and better ability to perform daily activities, indicating improvement in the patient's general condition and quality of life. The assessment of improvement in this case was carried out using the Modified Naranjo Criteria for Homeopathy (MONARCH).

Index Terms—Muscular Dystrophy; Homoeopathy; Individualization; Repertorization; Causticum; Neuromuscular Disorder; Case Report, MONARCH.

I. INTRODUCTION

Muscular dystrophy (MD) constitutes a group of genetic disorders characterized by progressive muscle weakness and wasting. It affects approximately 1 in 5,000 individuals worldwide and can manifest at any age, although it is most frequently diagnosed during childhood. The cause of MD is mutations affecting genes responsible for muscle structure and function, resulting in progressive degeneration and loss of muscle fibres.^[1] MD more commonly affects males than females, as many genetic mutations

responsible for the condition are on the X chromosome.^[2]

There are many types of MD including Duchenne muscular dystrophy, Becker muscular dystrophy, Congenital muscular dystrophy, Myotonic dystrophy, Oculopharyngeal muscular dystrophy, Facioscapulohumeral muscular dystrophy, Limb-Girdle muscular dystrophy, Emery-Dreifuss muscular dystrophy.

Early symptoms can include: a waddling gait, pain and stiffness in the muscles, difficulty running and jumping, walking on the toes, difficulty sitting up or standing, learning disabilities, such as developing speech later than usual, frequent falls.^[3] As the disease progresses, the following symptoms become more likely: inability to walk, a shortening of muscles and tendons, further limiting movement, breathing problems that may require assisted breathing, curvature of the spine if the muscles are not strong enough to support its structure, weakening of the heart muscles, leading to cardiac problems, difficulty swallowing, with a risk of aspiration pneumonia.^[4]

The diagnosis of MD is based on a medical and family history, blood and urine tests, including genetic tests and tests for certain enzymes, muscle biopsies, electromyography and nerve conduction studies, electrocardiogram (EKG), imaging tests (MRI).^[5]

This case report intends to highlight significance of the Homoeopathic management of muscular dystrophy with symptomatic relief there by aiming to improve the quality of life of the patient suffering with MD.

II. PATIENT INFORMATION

A 47-year-old female presented with complaints of progressive weakness in both upper and lower

extremities for the past 25 years, associated with tingling sensation, fatigue, and difficulty performing daily activities. The weakness was gradual in onset and aggravated by physical exertion. The patient also complained of sleeplessness for the past 16 years due to overthinking about her illness. The patient had a history of poliomyelitis during infancy, following which her lower limbs did not develop properly, and she experienced persistent weakness in the legs. Later in life, she gradually developed weakness in the hands, difficulty in writing, and declining physical strength. Over time, the patient also developed swelling and pain in the wrist, elbow, and shoulder joints, along with tingling sensation in the extremities.

Mentally, the patient was anxious about her health, insecure, and prone to overthinking. She also complained of weak memory and emotional instability. Her sleep was disturbed, and she frequently experienced fearful dreams of snakes and death of relatives. She also reported depressive feelings related to her chronic illness. Family history revealed hypertension and diabetes in close relatives, and three similar cases were reported in the family. The patient had adequate appetite, desire for sweets, regular bowel movements, and was thermally hot.

Mental Generals: Anxiety regarding her illness, Excessive overthinking, Feeling of insecurity, Weak memory, Mental instability, Depressed mood due to chronic illness, Insomnia

Physical Generals: General weakness and fatigue, Tingling sensation in extremities, Muscle pain on exertion, Inability to sit for long periods, Difficulty chewing and swallowing food occasionally

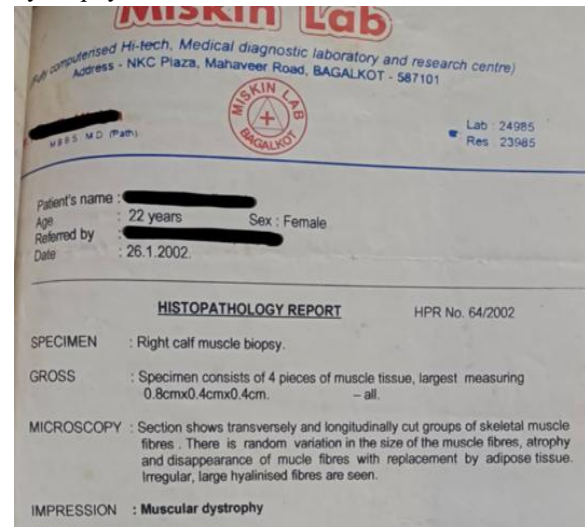
III. CLINICAL FINDINGS

On clinical examination, the patient appeared moderately built and conscious, with complaints of progressive muscle weakness and easy fatigability, proximal muscle weakness involving the upper and lower limbs, difficulty in rising from a sitting position and performing routine physical activities, reduced muscle strength, mild muscle fatigue on exertion, mild tingling sensation in extremities. Reflexes present but slightly diminished in lower limbs. Difficulty in prolonged walking and climbing stairs. Reduced

tolerance to physical exertion. Sleep disturbance associated with fatigue and discomfort.

IV. DIAGNOSTIC ASSESSMENT

The diagnosis of Muscular Dystrophy was confirmed through muscle biopsy, which revealed degenerative changes in muscle fibres consistent with muscular dystrophy.



V. TOTALITY OF SYMPTOMS

- Anxiety about illness
- Overthinking
- Insecurity
- Weak memory
- Mental instability
- Sleeplessness
- Fearful dreams
- Difficulty chewing and swallowing
- Desires for sweets
- Tingling sensation in extremities
- Swelling of upper limbs
- Muscle weakness and fatigue
- Hot patient

Repertorial Analysis

The case was analysed according to the totality of symptoms using the principles of Samuel Hahnemann.^[6] Characteristic mental and physical symptoms were selected for repertorization using Kent's Repertory.^[7]

VI. SELECTED RUBRICS

- 1} Mind – Anxiety - health, about
- 2} Mind – Thoughts – persistent
- 3} Mind – Memory – weakness of
- 4} Throat – Swallowing - difficult
- 5} Stomach – Desires – sweets
- 6} Extremities – Weakness
- 7} Extremities – Tingling
- 8} Extremities – Swelling – Upper limbs
- 9} Sleep – Sleeplessness – thoughts, from
- 10} Sleep – Dreams – frightful
- 11} Generalities – Weakness - exertion, from slight

VII. REPERTORIAL RESULT

Remedy	Total score
Causticum	18/9
Phosphorus	15/8
Sulphur	14/8
Gelsemium	12/7

Among these remedies, Causticum corresponded closely with the characteristic mental symptoms such as anxiety about illness, insecurity, sleeplessness due to persistent thoughts, and progressive muscular weakness with tingling sensations in extremities. Therefore, it was selected as the similimum and prescribed in 1M potency.

Prescription: Causticum 1M – Single dose, followed by placebo for 1 month

VIII. FOLLOW-UP AND OUTCOME

Sl. No	Date	Observation	Prescription
1)	05/11/25	Progressive weakness in upper and lower limbs, tingling sensation in extremities, difficulty performing daily activities, sleeplessness due to overthinking, fatigue on exertion	1) Causticum 1M (0-0-1) x 1 day 2) PL (4-0-4) x 1 month

2)	07/12/25	Slight improvement in sleep, reduction in anxiety and overthinking, tingling sensation slightly reduced, weakness persist, occasional fatigue	1) Causticum 1M (0-0-1) x 1 day 2) Kali Phos 6X (1-0-1) x 1 month
3)	10/01/26	Tingling sensation reduced, Improvement in general weakness, patient able to perform daily activities with less fatigue	1) Kali Phos 6X (1-0-1) x 15 days
4)	25/01/26	General weakness persists but patient feels mentally calmer; occasional giddiness and weakness noted, better sleep	1) Veratrum Alb 200 (1-0-0) x 1 day 2) PL (4-0-4) x 15 days
5)	12/02/26	Muscle weakness slightly improved, patient reports better energy and reduced joint discomfort	1) Kali Phos 6X (1-0-1) x 15 days
6)	27/02/26	Overall condition stable, improvement in sleep, mental state, and daily functioning; weakness progression slowed	1) PL (4-0-4) x 15 days

Outcome

After individualized homoeopathic treatment with Causticum, supported by Kali Phosphoricum 6X and an intercurrent dose of Veratrum Album, the patient showed gradual improvement in sleep, reduction of

tingling sensations, improved energy, and better ability to perform daily activities.

IX. MONARCH SCALE

Sl.No	Questions	Yes	No	Not Sure	Score in our case
1)	Was there improvement in the main symptom after the remedy was given?	+2	-1	0	+2
2)	Did improvement occur within a plausible time frame after the remedy?	+1	-2	0	+1
3)	Was there an initial aggravation of symptoms?	+1	0	0	0
4)	Did improvement occur in other symptoms besides the main complaint?	+1	0	0	+1
5)	Did overall well-being improve?	+1	0	0	+1
6)	Did symptoms improve in the order expected by homoeopathic principles?	+1	0	0	+1
7)	Did old symptoms temporarily reappear during recovery?	-3	+1	0	0

8)	Are alternative explanations for improvement unlikely?	+1	0	0	+1
9)	Was there objective evidence of improvement?	+1	0	0	+1
10)	Did repetition of the remedy produce similar improvement?	+1	0	0	+1
	Total Score				+9

Total MONARCH ^[8] Score = 9 / 13 (Marked improvement)

Interpretation: A score of 9 indicates a moderate to strong causal relationship between the homoeopathic treatment and the observed clinical improvement in the patient with Muscular Dystrophy.

X. DISCUSSION

Muscular Dystrophy is a group of inherited neuromuscular disorders characterized by progressive muscle degeneration, weakness, and loss of functional ability. Conventional management mainly focuses on supportive therapy, physiotherapy, and symptomatic care.

However, the progressive nature of the disease often leads to significant physical disability and psychological distress in patients.

A previously published case report by Sanjib Sahoo (2022) described the homoeopathic management of an 8-year-old boy with Duchenne Muscular Dystrophy (DMD). The patient was treated with individualized homoeopathic medicines, including Radium bromide, Veratrum viride, and Calcarea phosphorica, and showed improvement in gait, muscle strength, reduction in frequent falls, and a marked decrease in serum creatine phosphokinase (CPK) levels over seven months. The authors concluded that although the clinical outcome was encouraging, stronger evidence

from well-designed studies is required before drawing firm conclusions.^[9]

In the present case, the patient presented with long-standing muscular weakness of both upper and lower extremities, tingling sensation in the limbs, difficulty performing daily activities, and disturbed sleep due to excessive thoughts about the illness. Along with these physical symptoms, significant mental characteristics such as anxiety about health, insecurity, and weak memory were observed. These mental and physical generals played an important role in the individualization of the case. Repertorial analysis suggested Causticum as the leading remedy. The symptom similarity between the patient's condition and the characteristic indications of Causticum—such as progressive muscular weakness, nervous system involvement, and emotional sensitivity—supported its selection as the similimum.

Following the administration of Causticum 1M, the patient showed gradual improvement in sleep, reduction in tingling sensation, and better ability to perform daily activities. Supportive medicines such as Kali Phosphoricum 6X were used to address nerve weakness and mental fatigue, while Veratrum Album was prescribed during a phase of general weakness and exhaustion.

Over successive follow-ups, the patient showed improvement in general well-being, energy levels, and mental state. Although muscular dystrophy is a chronic and progressive condition, the individualized homoeopathic approach appeared to improve the patient's quality of life and reduce the severity of symptoms.

XI. CONCLUSION

This case demonstrates the significance of individualized homoeopathic treatment in the management of Muscular Dystrophy. Detailed case taking, evaluation of mental and physical symptoms, and repertorial analysis led to the selection of the similimum. The administration of Causticum 1M, along with supportive remedies such as Kali Phosphoricum 6X and Veratrum Album, resulted in gradual improvement in the patient's general condition, sleep, and ability to perform daily activities. Although muscular dystrophy is a chronic and progressive disorder, this case highlights that an individualized homoeopathic approach may help in

relieving symptoms and improving the patient's overall quality of life.

XII. LIMITATIONS

This case report represents the clinical outcome observed in a single patient and therefore cannot be generalized to all cases of muscular dystrophy. The improvement observed may also be influenced by individual variations in disease progression and supportive care. Further studies with larger sample sizes and long-term follow-up are required to evaluate the effectiveness of individualized homoeopathic treatment in patients with muscular dystrophy.

ACKNOWLEDGEMENT

I would like to express my sincere gratitude to Dr. Shri Raksha Bhat for her valuable guidance, constant encouragement, and support throughout the preparation of this case study and article. I am also deeply thankful to Dr. Prajnya Alva for her clinical expertise in evaluating the case and for prescribing the appropriate homoeopathic medicine. I would also like to thank the patient for her cooperation, trust, and willingness to share her clinical details for academic and research purposes. Her patience and regular follow-ups made this case study possible.

Finally, I extend my appreciation to all those who directly or indirectly contributed to the completion of this article.

Patient Consent Declaration

Written informed consent was obtained from the patient for publication of this case report and any accompanying clinical information. The patient was informed that her clinical details would be used for academic and research purposes. Efforts have been made to maintain confidentiality and anonymity, and no personal identifiers have been disclosed.

Conflicts of Interest

None.

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