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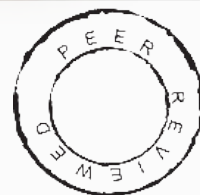
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Managing Fears and Anxiety with Homoeopathy

- Adjustment disorder and its homoeopathic approach
- Difference between anxiety and fear with medicines and glimpses of recent researches



BJAIN

ACCURACY
of
10 Ws in
HOMEOPATHIC
CASE
TAKING

An Extension to the
7 Ws of Boenninghausen

DR SUNIL ANAND

Author:-

Dr. Sunil Anand

ACCURACY OF 10 Ws IN HOMEOPATHIC CASE TAKING

An Extension to the
7 Ws of Boenninghausen

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ISBN - 9788131926062

- The author carries the reader on a journey of understanding how their earliest life experiences result in patterned behaviours that form the lens from which they experience life - both in health and disease.
- For a practicing homeopath or an eager student, this book will really help in learning the finer nuances of remedies and the art of case taking.
- The author provides the reader glimpses of his role as a practitioner and teacher through case examples from his practice.
- The author has introduced a unique understanding and approach of case taking and analysis based on the concept of Dr Boenninghausen's 7 Ws; and named it as "10 Ws"

About 10 W's Book

By Dr Sunil Anand

Every person's healthcare could be described as a journey. A healthy person becomes a trendsetter and sets a benchmark for others they come in contact with. From one person, to several, to a community, to a nation and finally to global frontiers.

In that sense, every nation's healthcare could be depicted as a journey too. Happiness quotient and healthy living are intertwined. Concerning about the very environment that sustains is an idea that was triggered by a few people which has become the need of the hour today.

It's about creating a ripple effect. This book carries the same intent. Even though it is primarily based on the tenets of the science of homeopathy, it is not aimed to be a document limited to health, disease and their remedial solutions only. It refers to a healthy attitude in all walks of life. A medically fit individual may not necessarily be considered well in a holistic sense of the word. One needs to change the paradigm of 'health'.

This applies to parenting, relationships, lifestyles and even corporations. Such applications will also be touched about in latter chapters of this book. But let's set the grounding principles that precede such amalgamations.

In the words of French-born American microbiologist, Rene Dubos, (February 20, 1901–February

20, 1982): "Whatever its

precipitating cause and its manifestations, almost every disease involves both body and mind, and these two aspects are so interrelated that they cannot be separated from the other".

This forms the basis of a deep homoeopathic understanding of mind and body and the reasons behind needing to note the correlation between the two. Every patient has to be understood as a unique human being, and the emphasis from illness-centred medicinal approach needs to be shifted to one that is more holistic and patient centered instead. A mind that is in conflict is more easily susceptible to diseases. The mind comprises two components: the objective and the subjective. For the mind to be harmonious, both components need to be in sync with one another.

Homoeopathy involves both mind and body correlation, it is but natural for such a physician to be empathetic to one's suffering. At the end of the session, every patient feels heard and cared for. Hence, such a method of dealing with patients should be made a mandatory part of medical instruction in all disciplines and not just in homeopathy. Modern medicine may be able to avert a crisis, but for long-term wellness, it is time that consumers seek out modalities that help boost their innate immune system.

There are some basic parameters or methods that are invariably used very often while working on

cases and coming to a reasonable solution/simillimum. This book is a compilation of some of these methods along with appropriate cases to support the same.

Group study is a very helpful method to understand the lesser-known remedies represented through one or two remedies that one may be more familiar with. For instance, if a case presents with an obsession to perform and be the best in his profession while she has to meet heavy responsibility that is expected from him, one gets the feeling of a heavy precious metal from the sixth line in the periodic table also known as the gold series, and the most familiar remedy in that line is *Aurum metallicum* or gold itself. But what is also striking besides these aspects in this same patient is the foul temperament, which makes him overtly critical and offensive toward others. To make it more precise, he even had offensive secretion and a feeling of not being appreciated enough by those around him. All these indicate to the remedy *Osmium*, an offensive-smelling heavy metal from the gold series.

In the subsequent article, an in-more depth is being shared that how this innovative journey was initiated in my learning process as a homoeopath and a teacher.

Until next time!

Aude sapere

Dr Sunil Anand

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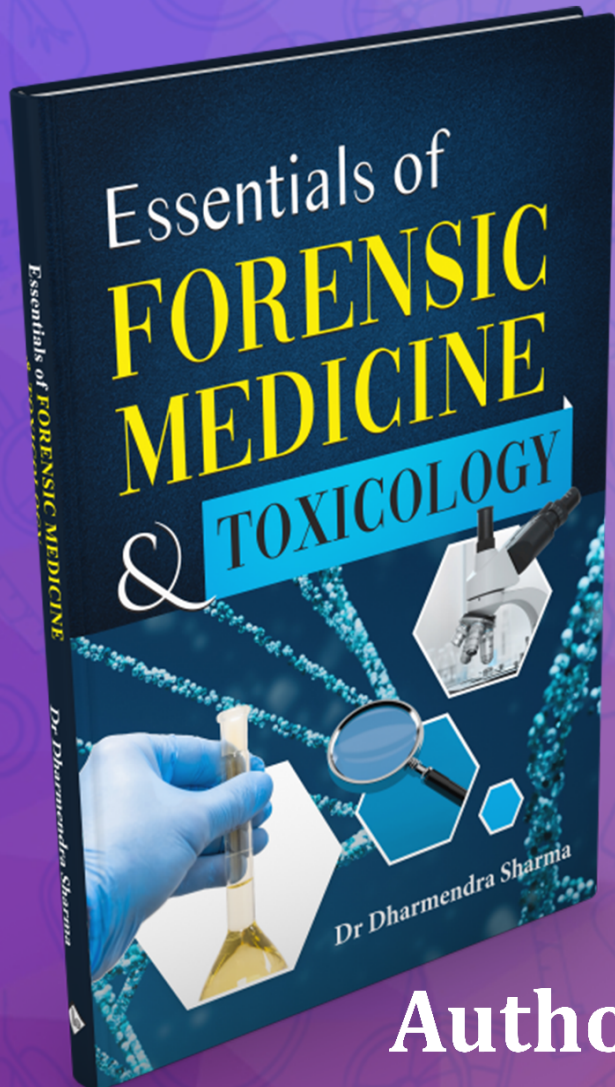
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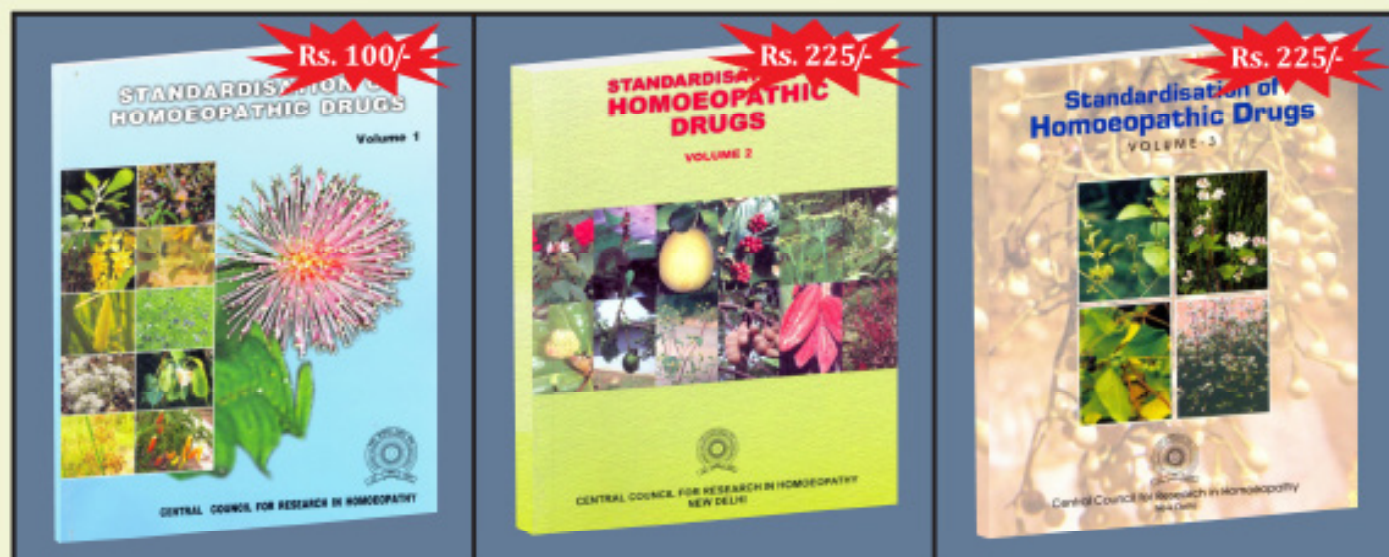
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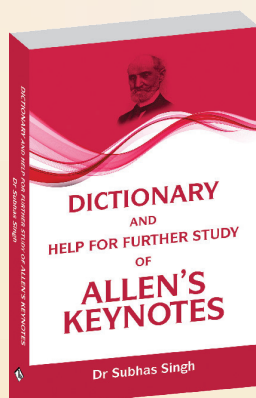
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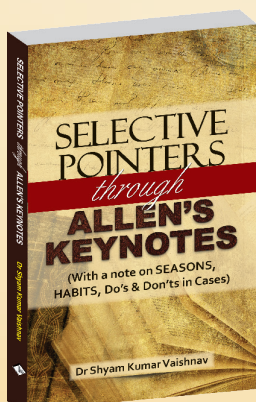
DICTIONARY and Help for Further Study of ALLEN's KEYNOTES Dr Subhas Singh



- Keeping into consideration, the difficulties faced by readers in reading and understanding the vocabulary used in Allen's Keynotes, the author has come up with this dictionary of Allen's Keynotes.
- The author has done his best to provide the word meanings to all the difficult terminologies and nomenclature used in Allen's Keynotes.
- the related symptoms of all medicines have been placed together. The Keynote symptoms have been placed under different chapters and sub-chapters.
- word meanings to some of the selected words, terms, and nomenclatures used in Allen's Key Notes are given.
- the symptoms (Keynotes) are segregated according to the various chapters and sub-chapters.
- the unrelated but similar-sounding symptoms are clubbed at one place, to make comprehension and learning of Allen's keynote easier.
- Arrangement of relationship in different headings.

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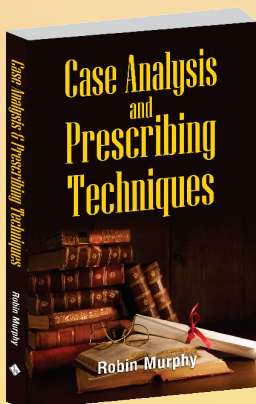
Selective Pointers through Allen's Keynotes Dr Shyam Kumar Vaishnav



- This book is to provide an answer to the vexed question "How shall I get a remedy quickly in a particular group of population & without much effort?"
- The book is divided into 2 sections in which, the most important symptoms are arranged under 11 subsections, based on different phases of life, addictions, seasons along with the Do's and Don'ts.
- Its easy for comprehension and also quick for reference and prescription.
- The THUMB RULE section gives a different perspective of learning making the reader ponder and go to the depth of Allen's Keynotes.
- Emphasis had been on dividing age groups, gender groups& even on pediatric remedies, a list of drugs has been incorporated for the convenience of students, PG scholars, and the physicians.

ISBN: 978-81-319-1805-0 | ₹ 145 | 120pp

Case Analysis & Prescribing Techniques By Robin Murphy



- The author has taken a point-by-point approach to case-taking, punctuated by general discussions of the related topics.
- He has given invaluable tips, making it somewhat revolutionary compared to accepted concepts disclosed and applied in the earlier case-taking guidelines.
- several cases are analyzed throughout the book with discussions and follow-up. This book contains the transcripts of seven, 95 minute audiotapes. There is student-teacher dialogue clearing queries.
- The book also guides about potency selection.

ISBN: 978-81-319-0249-3 | ₹ 299 | 296pp

Dear Readers,

Each person experiences stress differently. Some may become anxious and fearful, while others become angry or agitated. Some may retreat from the world, while others have a combination of all the reactions above. Anxiety is short-lived and temporary, but becomes a problem when the reaction of the person is intense and disproportionate to what one usually expects. Such episodes again and again tend to interfere with daily life of a person and has an adverse impact on relationships.

One may fear not meeting a deadline, failing an exam, being unable to pay your bills, or being rejected by someone you want to please. The focus of anxiety is more internal than external; it seems to be a response to a vague, distant, or even unrecognised danger. Anxiety affects your whole being at physiological, behavioural, and psychological levels. At physiological level, anxiety may include bodily reactions such as rapid heartbeat, muscle tension, queasiness, dry mouth, or sweating. At behavioural level, it can sabotage the ability to act, express yourself, or deal with certain everyday situation. Psychologically, anxiety is a subjective stage of apprehension and uneasiness.

Homoeopathic remedies strike at the root cause of anxiety, eradicating the recurring tendency of an anxiety attack and offering a holistic cure as it treats the source of the ailment. A homoeopathic physician tries to know the psychology of the person as fear is an emotion arising from a threat, which may be real or imaginary. It is a body's uncontrollable reaction to a particular situation or an event. A person tends to avoid and run

away from a given circumstance, which in turn becomes fear. Anxiety and restlessness mostly accompany fear, and if not treated well, it can further develop into panic attacks. High-quality research supporting homoeopathy in cases of fear and anxiety is a few and far between. A 2012 homoeopathy journal study found homoeopathic medicine, *Pulsatilla nigricans*, had anti-anxiety effects on mice. Homoeopathy helps decrease the severity of symptoms associated with fear as well as helps prevent further progression of the condition into panic attacks.

A Quick Word on Issue Content:

This issue of "*The Homoeopathic Heritage*" is an attempt to discuss the management of fears and anxiety with homoeopathy through different evidence-based case studies and research papers.

The peer reviewed articles of this issue include adjustment disorder and its homoeopathic approach by Dr Nitesh Kumar, difference between anxiety and fear with medicines and glimpses of recent researches by Dr Babita R. Kondle, Dr Renu Mittal, Dr Divya Taneja. The clinical case studies include articles on ailments from fright: a case report on tinea by Dr Manish R. Thakkar, Dr Tulika Jain, homoeopathic approach in secondary amenorrhoea – a case report by Dr Manisha Kumari, Dr Nitesh Kumar, understanding dream for better prescribing: enlightening through a case by Dr Azizul Islam Khadim, a "mom to be" under anxiety disorder by Dr Shweta Singh, a case of osteoarthritis treated by homoeopathic medicine by Dr Indira Singh, anguish of a cheated wife by Dr Vaishali P. Joshi, the role of *Berberis vulgaris* in the management of arthralgia by Dr Rajeev Khanna, Dr Neelima Singh,

Dr Nupur Kumari, *verruca vulgaris* and effectiveness of homoeopathic simillimum: a case report by Dr Arti. The materia medica section explains some lesser-known homoeopathic remedies in cardiac rheumatism by Dr Vanija Sharma, Dr Ankita Srivastava, Dr Yasha, Dr Somendra. Subjective articles include a holistic way to manage fears and anxiety by Dr Rohit Kumar Priya, effective way of overcoming fear and anxiety by Dr Srabani Pal and Dr Shweta Patel, enlightening homoeopathic pathway in fear and anxiety by Dr Archana nagar, homoeopathic approach in management of parkinson's disease by Dr Pragya Sharma, managing fear and anxiety with fearless homoeopathy by Dr Krupa Patel, post-traumatic stress disorder and its homoeopathic aspect by Dr Mahakas Mandal, Dr Debanjan Chowdhury, managing anxiety disorders with homoeopathy by Dr Surbhi Sud, managing fear and anxiety with homoeopathy by Dr Shalini Ankushe, relevance of Jungian psychology in homoeopathy by Dr Rajat Dwivedi, control, cure and cease anxiety with homoeopathy by Dr Prastuti Jaiswal, Dr Yasha Soni, Dr Sakshi Bhadana, Dr Surbhi, Dr Satya Prakash Singh, homoeopathy in anxiety neurosis by Dr Ankita Priya. Repertory section includes articles on effectiveness of homoeopathy in the psychological condition with the aid of interesting single remedial rubric repertorial approach by Priyanka Naraniya, Chauhan Dipeshbhai and a comparative study of fear and anxiety with repertorial aspect by Dr Kanan Bhatt. The research review papers on overview of autism spectrum disorder and scope of homoeopathy by Dr Sivaramyapragathi R.S, Mahadevi A.L and a review on homoeopathic perspective in anxiety disorders by

Dr Bajrangi Kumar are wonderful papers presented as per the theme of the issue. The special COVID-19 section including article on management of anxiety and fear after COVID-19 using homoeopathic medicine by Dr Abhishek Kumar is a feather in the cap for this issue. It can be said that homoeopathic remedies for anxiety work in a mild, gentle, and effective manner to gradually reduce

the physical and mental stress associated with anxiety. Being natural and not habit-forming, there is no risk of drug dependency.

We hope this issue will help the fellow homoeopaths to understand anxiety and its relation with homoeopathy in a better way. We are also obliged to all our authors and readers for their contribution to the journal. Also, I

look forward to hearing opinions and recommendations. You may also login to our website, www.homoeopathy360.com for more information and opportunities related to homoeopathy.

Lastly, we will like to invite research papers, articles and case studies of our readers.

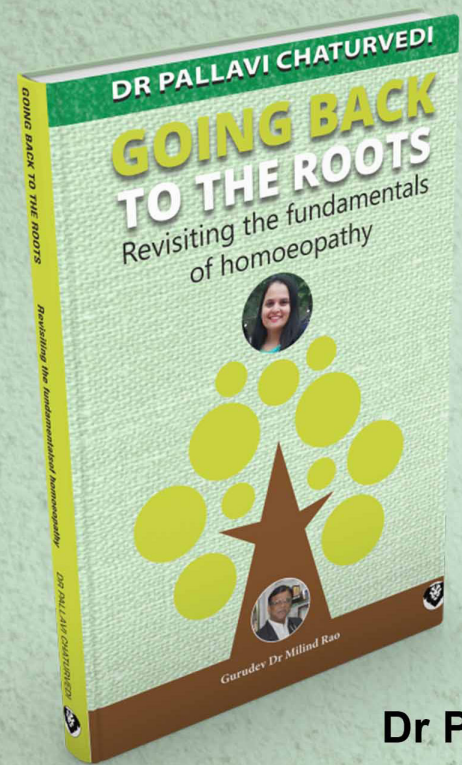
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Perceiving fear and anxiety in clinical practise

Dr Yogesh Dhondiraj Niturkar

ABSTRACT: The september issue of The Homoeopathic Heritage is having theme of managing fear and anxiety with homoeopathy. All of us have experienced fear and anxiety in one or the other situation but how these common primary and secondary emotions can cause loss of homoeostasis need to be investigated through individual examination of a case of disease. The broad learning objective of this theme is to perceive evolving patterns of fear and anxiety in different individual's, their adaptation patterns, the genesis of one sided or psychosomatic diseases and the management strategies in homoeopathy.

Keywords: Anxiety, fear, homoeopathy, mental health.

Introduction

Good health and well-being is the third sustainable development goal (SDG) for social, economic and environmental sustainability. Under this third SDG, one of the objective is promotion of mental health and well-being. [1] Mental health is a lot more than the absence of mental illness; it is an intrinsic part of our individual and collective health and well-being. Mental health conditions are very common in all countries. But most of the health and social systems neglect mental health and do not provide the care and support that people need for dealing with emotional or behavioural problems. The result is that millions of people around the World suffer in silence and their quality of life is negatively affected. [2] Psychiatrist Dr Brock Chisholm, the first Director-General of the World Health Organization (WHO) quoted that "without mental health there can be no true physical health". [3] In 1999, David Satcher, the surgeon general also stated that "No health without mental health." In a true sense, both of the above statements are highlighting the significance of mental health.

Homoeopathic perspective:

Hahnemann had emphasised upon the need of understanding the mind of patient for the sake of individualisation. Aphorism 5 states, "there is need to investigate the ascertainable physical constitution of the patient (especially when the disease is chronic), his moral and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function, etc., has to be taken into consideration". Whereas aphorism no. 210-230 specifically deals with the nature of mental diseases. In aphorism no 225, it is mentioned that, "there are, however, as has just been stated, certainly a few emotional diseases which have not merely been developed into that form out of corporeal diseases, but which, in an inverse manner, the body being but slightly indisposed, originate and are kept up by emotional causes, such as continued anxiety, worry, vexation, wrongs and the frequent occurrence of great fear and fright. This kind of emotional diseases in time destroys the corporeal health, often to a great degree." [5] The above Hahnemannian thought highlights upon the need of understanding the mind and its interrelationship with the environment. It also allows us to understand the nature of emotional

diseases that are due to slight indisposition or corporeal diseases that are due to some emotional causes that leads to somatic or psychosomatic affections.

Perceiving fear and anxiety as emotional expressions:

Emotions are reactions that human beings experience in response to events or situations. [6] It is a complex psychological state that involves three distinct components: a subjective experience, a physiological response, and a behavioural or expressive response. [7] Darwin emphasised that human expressions of emotions are adaptive because they prompt action responses that are beneficial to the organism. Positive emotions promote social-engagement behaviours, whereas negative emotions, many of which are activated by threat and invoke defence responses. [8] The responses, coping mechanisms and the evolution of disease is highly individualistic phenomenon.

Every individual is having basic emotions that can be understood as primary and secondary emotions. There are different theories as to what primary emotions are, but they often include happiness, sadness,

fear, disgust, anger and surprise. These are the emotions that humans experience universally.^[9] Secondary emotions arise from and are variations of primary emotions as a response. It may include anxiety, frustration, pride, envy and jealousy. Certainly, from clinical perspective, fear and anxiety are the two common emotions being associated with a variety of mental and physical diseases. Recently, the impact of fear and anxiety was predominantly witnessed during the COVID-19 pandemic. On the contrary, it was also observed that the effective management of fear and anxiety had positive outcome in the management of pandemic.

Fear is the feeling that you have when something dangerous, painful or frightening might happen. According to research on psychology, it involves a universal biochemical response and a high individual emotional response. Fear alerts us to the presence of danger or the threat of harm, irrespective of whether that danger is physical or psychological. Sometimes fear stems from real threats, but it can also originate from imagined dangers. It is a natural response and a survival mechanism to some situations but it can also lead to distress and disruption when extreme or out of proportion response is observed than the actual threat. Physical reactions to fear include sweating, increased heart rate, and high adrenaline levels that make us extremely alert. This physical response is also known as the “fight or flight or freeze” response with which our body prepares itself to either enter combat or run away. This biochemical reaction is likely an evolutionary development. It’s an automatic response that is crucial to our survival. The emotional response to fear, on the other hand, is

highly personalised.^[10]

Anxiety is an uneasy, fearful feeling and one of the common secondary emotion. It can be thus called as secondary fear. It is the hallmark of many psychological disorders. It is often concealed and reduced by defensive behaviours. In many of the anxiety disorders, intense observable anxiety or fears are the principle signs. In general population, anxiety disorders are more common than other psychological disorders.

^[11] Fear and anxiety often occur together, but these terms are not interchangeable. Even though symptoms commonly overlap, a person’s experience with these emotions differs based on their context. Fear relates to a known or understood threat, whereas anxiety follows from an unknown, expected, or poorly defined threat.^[12] Fear and anxiety both produce a similar stress response. But many experts believe that there are important differences between the two. These differences can account for how we react to various stressors in our environment. Muscle tension, increased heart rate, and shortness of breath mark the most significant physiological symptoms associated with a response to danger.^[13] Anxiety can be so powerful and irrational that it alters the person’s life in a major way. The conceptual understanding and the applied part of fear and anxiety is demonstrated in the below mentioned caselet. This case will allow us to understand the causation, evolution and expression of fear and anxiety in the form of psychosomatic disturbances as a defense cascade.

Caselet:

Mrs. SW had come for her regular follow up. Patient was accompanying with her mother; a 65 year old lady, a known case of hypertension

and diabetes mellitus type 2. During follow up with Mrs. SW, Pt’s mother suddenly complained about giddiness. Her blood pressure was checked and it was 200/100 mm of Hg. Her random blood sugar was 120 mg/dl. She had taken her medicines regularly. She was made comfortable and asked about what is bothering her? She said “recently my 2 years old grandson (Pt’s son) was hospitalised for dengue encephalitis and LRTI. During hospital stay, the news of fever episodes would disturb her as much as it affected her sleep and appetite. She had fear of something might would have happened if he would have not been hospitalised due to 103° fever and other symptoms. Why such kind of bad luck had come during Ganapati festival (misfortune). She was having continuous unpleasant thoughts that would disturb her daily routine. She had tried to distract herself from the thoughts, but it was not possible for her. She did not disclose her feeling state with anybody.”

Case Analysis:

After this interaction, the case analysis was done. The cause effect relationship and the way in which emotional expressions were triggered out of the fear of something dangerous might have happened was evident in this case. This feeling of fear led to the genesis of anxiety about the well-being of grandson, further resulting in to psychosomatic presentation in an acute form as increased blood pressure, diminished appetite and disturbed sleep. Here we can understand the role of exciting cause in the acute exacerbation of chronic diseases with due significance to the role of fundamental miasm (Aph. 5) in the genesis of acute stress reaction.

Repertorization (Table 1) was done as per the following totality of symptoms: A/f emotional shock, fear of

misfortune might be there, anxiety in general along with fear, thoughts about unpleasant things, frightened

easily, appetite diminished, sleep disturbed and hypertension.

Table 1: Repertorisation sheet [14]

Remedy	Acon	Nux v	Ars	Calc	Nat m
Totality	19	16	16	15	14
Symptoms covered	6	7	6	6	8
[Murphy] [Mind] Shock, emotional, mental, ailments from: (32)	4	2	0	0	1
[Murphy] [Mind] Fears, phobias, general: Misfortune, of: (96)	3	3	4	3	1
[Murphy] [Mind] Anxiety, general fear with (104)	4	1	3	2	2
[Murphy] [Mind] Thoughts, generals: Persistent: Unpleasant subjects, haunted by: (10)	0	0	0	0	3
[Murphy] [Mind] Frightened, easily: (145)	4	3	3	4	2
[Murphy] [Food] Appetite, general: diminished, appetite: (164)	0	1	3	1	1
[Murphy] [Sleep] Disturbed, sleep: (284)	3	3	2	3	1
[Murphy] [Clinical] Hypertension, high blood pressure: (106)	1	3	1	2	3

Table 2: Eliminating symptom

Remedy	Nat m	Ambr	Cocc	Arg n	Asr
[Murphy] [Mind] Thoughts, generals: Persistent: Unpleasant subjects, haunted by:	3	2	2	1	1

The rubric thoughts, general: persistent: unpleasant subjects, haunted by: was taken as an eliminating symptom. 10 remedies (Table 2) cover this symptom and out of that Nat Mur was selected as it covers the rest of the totality.

Prescription: Natrum muriaticum 200 3 pills stat and afterwards it was advised to take it four times in a day (qds) for three days. After 1 hour, her blood pressure was 160/80 mm of Hg. Cognitive and behavioural psychotherapy was done.

Follow up: As she was staying near the clinic, pt was advised to check her BP twice in a day for three days. Her systolic BP remained between 140-160 mm of Hg and diastolic remained between 80-90 mm of Hg. BP was checked in supine and standing position. She was advised to do complete blood count (CBC), fasting and post lunch blood sugar (FBS & PPBS), lipid profile, serum creatinine, blood urea nitrogen (BUN), electrocardiogram (ECG), 2 D Echo, and treadmill test (TMT) for evaluation of her health status.

After 3 days her case was defined and Calc carb 200 single dose was administered as constitutional medicine. All of the investigations were normal except 2 D echo showed related diastolic dysfunction.

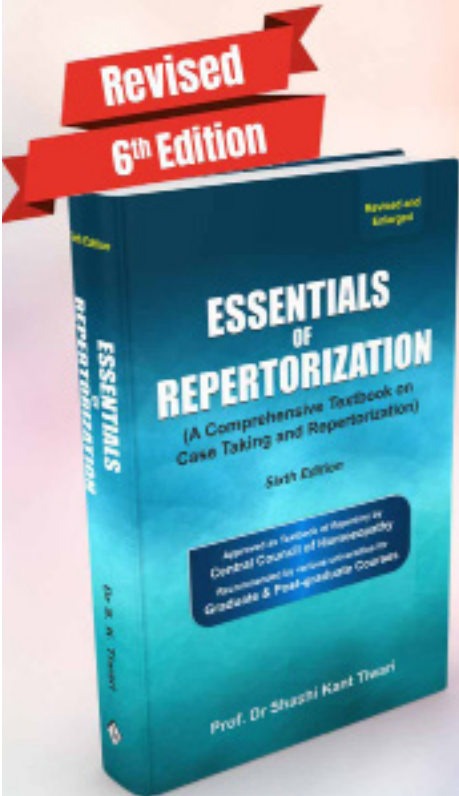
Conclusion:


The above case demonstrates the evolving pattern of fear and anxiety, individual's, adaptation patterns, the genesis of psychosomatic disease, its homoeopathic management and psychotherapy as adjuvant

therapy.

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A holistic way to manage fears and anxiety

By Dr Rohit Kumar Priya

ABSTRACT: Anxiety and fear both are alerting signals and act as a warning of an internal and external threat. Anxiety can be conceptualised as a normal and adaptive response that has life-saving qualities and warns of threats of bodily damage, pain, helplessness, possible punishment, or the frustration of social or bodily needs; of separation from loved ones; of a menace to one's success or status; and ultimately of threats to unity or wholeness. This study is aimed to throw light on the management of different fears, phobias, anxieties with the help of homoeopathy.

Keywords: anxiety disorder, fears, PTSD, OCD, homoeopathy

Abbreviations: GAD - generalised anxiety disorder, PTSD - post-traumatic stress disorder, OCD - obsessive compulsive disorder, v/s - versus, fig - figure, DSM - diagnostic and statistical manual of mental disorders

Introduction

Everyone experiences anxiety. It is characterised most commonly as a diffuse, unpleasant, vague sense of apprehension, often accompanied by autonomic symptoms such as headache, perspiration, palpitations, tightness in the chest, mild stomach discomfort, and restlessness, indicated by an inability to sit or stand still for long. The particular constellation of symptoms present during anxiety tends to vary among persons.

Fear v/s anxiety

Anxiety is an alerting signal; it warns of impending danger and enables a person to take measures to deal with a threat. Fear is a similar alerting signal, but it should be differentiated from anxiety. Fear is a response to a known, external, definite, or non-conflictual threat; anxiety is a response to a threat that is unknown, internal, vague, or conflictual

Clinical features

The experience of anxiety has two components: the awareness of the physiological sensations (e.g., palpitation and sweating) and the awareness of being nervous or frightened. A feeling of shame may increase anxiety—"others will recognise that I am frightened." Many persons are astonished to

find out that others are not aware of their anxiety or, if they are, do not appreciate its intensity. In addition to motor and visceral effects, anxiety affects thinking, perception, and learning. It tends to produce confusion and distortions of perception, not only of time and space but also of persons and the meanings of events. These distortions can interfere with learning by lowering concentration, reducing recall, and impairing the ability to relate one item to another, i.e., to make associations

Classification of anxiety disorders

1. Generalised anxiety disorder
2. Panic disorder
3. Phobic disorder
4. Post traumatic stress disorder (PTSD)
5. Obsessive compulsive disorder (OCD)

GENERALISED ANXIETY DISORDER

Patients with generalised anxiety disorder (GAD) have persistent, excessive, and/or unrealistic worry associated with muscle tension, impaired concentration, autonomic arousal, feeling "on edge" or restless, and insomnia. Onset is usually before age 20 years, and a history of

childhood fears and social inhibition may be present. It's diagnosis is based on the DSM V diagnostic criteria (Fig.) The anxiety, worry, or physical symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning. The disturbance is not due to the direct physiologic effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hyperthyroidism) and does not occur exclusively during a mood disorder, a psychotic disorder, or a pervasive developmental disorder. [2]

PANIC DISORDER

Presence of recurrent and unpredictable panic attacks, which are distinct episodes of intense fear and discomfort associated with a variety of physical symptoms, including palpitations, sweating, trembling, shortness of breath, chest pain, dizziness, and a fear of impending doom or death. Panic attacks have a sudden onset, developing within 10 minutes and usually resolving over the course of an hour, and they occur in an unexpected fashion. The aetiology of panic disorder is unknown but appears to involve a genetic predisposition, altered autonomic responsivity, and social learning. The differential diagnosis of panic attack includes

thyrotoxicosis, hypoglycaemia and pheochromocytoma. (The diagnostic criteria for panic attacks is shown in the figure.)[2]

PHOBIC DISORDER

The cardinal feature of phobic disorders is a marked and persistent fear of objects or situations, exposure to which results in an immediate anxiety reaction. The patient avoids the phobic stimulus, and this avoidance usually impairs occupational or social functioning. Common phobias include fear of closed spaces (claustrophobia), fear of blood, and fear of flying. Agoraphobia is the fear of places that are difficult or embarrassing to escape from.[2]

POST TRAUMATIC STRESS DISORDER

Patients may develop anxiety after exposure to extreme traumatic events such as the threat of personal death or injury or the death of a loved one. The reaction may occur shortly after the trauma (acute stress disorder) or be delayed and subject to recurrence (PTSD). For example, natural disasters, terrorist activity, serious accidents, witnessing violent deaths, etc. It is hypothesised that in PTSD there is excessive release of norepinephrine from the locus coeruleus in response to stress and increased noradrenergic activity at projection sites in the hippocampus and amygdala. These changes theoretically facilitate the encoding of fear-based memories. Recurrent intrusive memories (flashbacks) of the trauma, sleep disturbance, especially nightmares. Symptoms of autonomic arousal like anxiety, palpitations, enhanced startle, emotional blunting and avoidance of situations evoking traumatic memories.[2]

OBSESSIVE COMPULSIVE DISORDER

Obsessive-compulsive disorder (OCD) is characterised by

obsessive thoughts and compulsive behaviours that impair everyday functioning. Fears of contamination and germs are common, as are handwashing, counting behaviours, and having to check and recheck such actions as whether a door is locked. Co-morbid conditions are common, the most frequent being depression, other anxiety disorders, eating disorders, and tics.[2]

Role of homoeopathy

Homoeopathic health professionals should record every individual case as per the case taking guidelines mentioned in aphorisms 83 to 104 and also giving due emphasis on aphorisms 210 to 230. After case recording, individualisation of disease and the patient as a person is of prime importance. For individualisation of disease in context to psychiatric disease diagnosis made as per the DSM-5 because it provides a common language for clinicians to communicate about their patients and establishes consistent and reliable diagnosis that can be used in the research of mental disorders.

Repertorial approach

Kent's Repertory[3]

MIND, ANXIETY, sudden : cocc., tab.

MIND, ANXIETY, BAD news, ailments from : CALC., GELS.

MIND, FASTIDIOUS : Ars., nux-v.

MIND, FEAR, misfortune, of : CHIN-S., PSOR.

MIND, FEAR, Narrow place, in-Arg. Nit

DELUSIONS, imaginations, hallucinations, illusions: ARG-N., BELL., CANN-I., COCC., HYOS., IGN., LACH., PETR., PH-AC., SABAD., STRAM., SULPH.

Boger's Repertory[4]

MIND, Escape, impulse to – Bell., Bry., Cupr., Hyos., Mez., Nux v., Op.

MIND, Fastidious – Ars., Graph., Nux v.

MIND, Fearsome, anxious, fright, etc. – ACON., ARS., PHOS.,

MIND, Frightened or startled easily – IGN.

MIND, Future, death, misfortune, evil forebodings, presentiments, etc., dread of- ACON., ARS., CALC., PSOR., PULS.

MIND, Ideas, compelling- Nit. Ac.

MIND, SUICIDAL IMPULSES, weary of life, etc.: ARS., AUR., Chin., Dros., Lach., Merc., Nat-s., Nit-ac., Nux-v., Psor., Puls., Thuj., Tub.

Phatak's Repertory[5]

Future, misfortune, evil forebodings: ACO; ARS; CALC; PSOR; PUL

IDEAS, compelling- Lach., Nit.ac

IDEAS, Fixed: Anac; Ars+; Chin; Hell; Nat-m; Saba; Stan; Sul; Thu

IDEAS, Persistent – Med.

FEAR, Fright, of, remains- Op.

O.E. Boericke's Repertory[6]

MIND, Fright, fear- Acon., Apis, Aur., Bell., Gels., Hyos., Hyper., Ign., Nat. m., Morph., Op., Puls., Samb., Ver. a.

MIND, Fear, dread, Crossing streets, crowds, excitement -- Acon., Hydroc. ac., Plat.

MIND, Fear, Space (agoraphobia)- Acon., Arg. n., Arn., Calc. c., Hydroc. ac., Nux

MIND, Fear, Water (hydrophobia)- Agave, Anag., Ant. c., Bell., Canth., Coccinel., Fagus, Hyos., Lach., Laur., Lyssin, Spirea, Stram., Sul.,

Tanac., Ver. a., Xanth. Sp.

MIND, Anxiety- Acon., Æth., Agn., Amyl, Anac., Ant. c., Arg. n., Ars., Asaf., Aur., Bell., Bism., Bor., Cact., Calc. c., Camph., Can. ind., Cham., Cim., Cinch., Coff., Con., Cupr. m., Dig., Hep., Ign., Kali c., Lach., Lil. t., Med., Nat. e., Nat. m., Nit. ac., Nux. v., Op., Phos., Plat., Psor., Puls., Rhus t., Sec., Sep., Sil., Staph., Stram., Sul., Tab., Ver. a.

MIND, NIGHT-TERRORS- Acon., Aur. br., Calc. c., Cham., Cic., Cina, Chloral., Cypris., Kali br., Kali p., Scutel., Solan. n., Stram., Tub., Zinc. m.

Therapeutics approach[6,7]

Aconitum napellus

Great fear and anxiety of mind, with great nervous excitability; afraid to go out, to go into a crowd where there is any excitement or many people; to cross the street. The countenance is expressive of fear; the life is rendered miserable by fear; is sure his disease will prove fatal; predicts the day he will die; fear of death during pregnancy. Restless, anxious, does everything in great haste; must change position often; everything startles him.

Arsenicum album

The greater the suffering, the greater the anguish, restlessness and fear of death. Mentally restless, but physically too weak to move; cannot rest in any place: changing places continually; wants to be moved from one bed to another, and lies now here now there. Anxious fear of death; thinks it useless to take medicine, is incurable, is surely going to die; dread of death, when alone, or, going to bed. Attacks of anxiety at night driving out of bed, < after midnight.

Argentum nitricum

Acute or chronic diseases from unusual or long-continued mental

exertion. Apprehension when ready for church or opera, diarrhoea sets in. Time passes slowly; impulsive, wants to do things in a hurry; must walk fast; is always hurried; anxious, irritable, nervous.

Aurum metallicum

Lively, restless, anxious about the future. Constantly dwelling on suicide. Profound melancholy: feels hateful and quarrelsome; desire to commit suicide; life is a constant burden; after abuse of mercury; with nearly all complaints. Uneasy, hurried, great desire for mental and physical activity; cannot do things fast enough.

Calcarea carbonicum

Apprehensive; fears loss of reason, misfortune, contagious diseases. Forgetful, confused, low-spirited. Anxiety with palpitation. Ideas crowding in her mind prevent sleep. Starts at every noise; fears that she will go crazy. Drowsy in early part of evening. Same disagreeable idea always arouses from light slumber. Night terrors. Dreams of the dead.

Natrum muriaticum

Awkward, hasty, drops things from nervous weakness. Marked disposition to weep; sad weeping mood without cause, but consolation from others < her troubles. For the bad effects: of anger (caused by offence); to grief, fright, vexation, mortification or reserved displeasure.

Staphysagria

Very sensitive to slight mental impressions; least action or harmless words offend. Apathetic, indifferent, low-spirited, weak memory from sexual abuses. Was insulted; being too dignified to fight, subdued his wrath and went home sick, trembling and exhausted.

Conclusion

A fascinating aspect of anxiety disorders is the exquisite interplay of genetic and experiential factors. Little doubt exists that abnormal genes predispose to pathological anxiety states; however, evidence clearly indicates that traumatic life events and stress are also etiologically important. Thus, the study of anxiety disorders presents a unique opportunity to understand the relation between nature and nurture in the aetiology of mental disorders. The distinction between anxiety and fear may be difficult to make because fear can also be caused by an unconscious, repressed, internal object displaced to another object in the external world. Nevertheless, according to post-freudian psychoanalytic formulations, the separation of fear and anxiety is psychologically justifiable. A double blind, randomised, placebo-controlled, pilot trial[8] was conducted on 62 patients of generalised anxiety disorder at National Institute of Homoeopathy, Kolkata indicating small but positive direction of anxiolytic effect favouring homoeopathy. Hence, more study needs to be conducted to show the efficacy of homoeopathy in cases of anxiety disorders and managing different fears and phobias.

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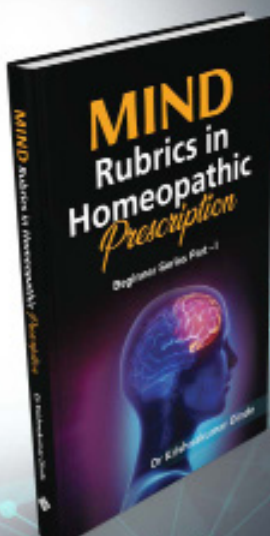
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Adjustment disorder and its homoeopathic approach

By Dr Nitesh Kumar

ABSTRACT: Adjustment disorder is common psychological disorder in general hospital. The predominant symptom is acute onset of depression or anxiety. Master Hahnemann classified the psychological disorder in one sided disease category, which have a very few symptoms and difficult to cure. Here is a case of adjustment disorder which could be effectively managed using individualised homoeopathic medicine.

Keywords: adjustment disorder, *Nux vomica*

Abbreviations: O.P.D. – out patient department, PHQ-4 – patient health questionnaire – 4, OD – once a day, BDS – twice a day

Introduction

Acute stress reaction may be followed by an adjustment disorder. In general hospitals, it is prevalent. 1. The percentage of individuals in outpatient mental health treatment with a principal diagnosis of an adjustment disorder ranges from approximately 5% to 20%. In a hospital psychiatric consultation setting, it is often the most common diagnosis, frequently reaching 50%.

Depression and/or anxiety are typically the main symptoms, but they are rarely severe enough to qualify as depressive or anxiety disorders. Additionally, there could be aggressive behaviour, hostility, and excessive alcohol consumption. Within a month of the stress's onset, symptoms appear, and the course of the underlying stressor is reflected in both the symptoms' duration and severity.

Diagnostic criteria

- A). the onset of identified stressor(s) within three months before the commencement of emotional or behavioural symptoms as a result of the stressor (s).
- B). According to one or both of the following, these symptoms or behaviours are clinically significant:
 1. Marked distress that is out of

proportion to the severity or intensity of the stressor, taking into account the external context and the cultural factors that might influence symptom severity and presentation.

2. Significant impairment in social, occupational, or other important areas of functioning.
 - C). A mental disorder other than a worsening of one that already exists does not fit the requirements for the stress-related disturbance.
 - D). The symptoms do not represent normal bereavement.
- Classification of anxiety disorders
- E. The symptoms do not last more than an additional six months after the stressor or its effects have subsided. The key component of adjustment disorders is the appearance of emotional or behavioural symptoms in response to a recognisable stressor (criterion A). The stressor could be a single event, like the end of a romantic relationship, or it could be several (e.g., marked business difficulties and marital problems). Stressors might be ongoing or periodic (e.g., linked to seasonal corporate issues or unsatisfying romantic relationships) (e.g., a persistent painful illness with increasing disability, living in a crime-ridden neighbourhood). Stressors can have an impact on a single person, an entire family,

or a broader community (e.g., a natural disaster)

Case report

A 29-year-old, hindu, unmarried boy from lower-middle socio-economic status presented at OPD of R.B.T.S. Govt. Homoeopathic Medical College and Hospital, Muzaffarpur, Bihar, on 4th march 2022 with complaint of frontal headache with anger after contradiction for 3 months. During anger, he used abusive language. Complaint started after termination of a romantic relationship.

Past history

His childhood history was uneventful. He was pursuing some kind of training for job.

Family history

His father was farmer of lower-middle socio-economic status. Grandmother was hypertensive.

Physical generals

He had desire for spicy things. He was constipated, stool two or three times/daily, urine normal.

His sleep was disturbed.

Thermal reaction - he was a chilly patient.

CASE STUDY

Mental generals:

Anxiety about business

Weak memory

disorder

Provisional diagnosis – adjustment

Justification of diagnosis – symptomatic²

Analysis and evaluation of symptom with miasmatic analysis⁴

S.No.	Symptom	Analysis	Evaluation	Miasmatic analysis
	Anger after contradiction	Mental general	+++	Psora
	Used abusive language	Mental general	+++	Syco-syphilitic
	Love, disappointment	Mental general	+++	Psoro-syphilitic
	Anxiety about business	Mental general	+++	Psora
	Memory weak	Mental general	++	Psora
	Desire – spicy	Physical general	++	Psora
	Sleep disturbed	Physical general	++	Syphilis
	Frontal headache	Particular	+++	Sycosis
	Constipation	Particular	++	Psora

Repertorisation: The repertorisation was done using *Homopath software (Complete Repertory)*⁵.

Remedy	Nux-v	Aur	Sulph	Verat	Ign	Nat-m	Sep	Lyc	Caut	Hep	Bell	Staph	Ph-ac	Thu-j	Cham	Phos
Totality	31	27	27	27	27	26	26	25	24	24	24	23	23	23	23	23
Symptoms Covered	9	9	8	8	7	9	9	7	8	8	7	8	7	7	6	6
Kingdom	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱	🌱
[Complete] [Mind]ANGER:Contradiction, from: (84)	3	4	3	3	4	1	4	4		1	2	3		3	4	
[Complete] [Mind]ABUSIVE, INSULTING: (116)	4	3	3	3	3	1	3	4	3	3	3	2		3	4	
[Complete] [Mind]LOVE:Disappointment, unhappy, ailments from, agg.Mental and emotional conse...	1	3		3	4	4	1		3		3	3	4			3
[Complete] [Mind]ANXIETY:Business, about: (52)	4	1	1			1	1		1	1			1	1		
[Complete] [Mind]FORGETFULNESS: (630)	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	4
[Complete] [Generalities]FOOD AND DRINKS:Spices, condiments, piquant, highly seasoned food:Des...	3	1	4	3		3	1	1	1	3		1	3			4
[Complete] [Sleep]DISTURBED: (589)	4	4	4	3	4	4	4	4	4	4	4	2	4	4	4	4
[Complete] [Head]PAIN, HEADACHE:Forehead: (917)	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Rectum]CONSTIPATION: (893)	4	3	4	4	4	4	4	4	4	4	4	4	3	4	4	4

Figure 1: Repertorisation from *Complete repertory* using *zomeo software*⁵

Prescription: After case taking, repertorisation and book references,⁶ first prescription was *Nux vomica* 200/1 dose/OD prescribed on date 04/03/2022.

Management: Provide emotional support by the family.

Selection of remedy with justification⁵: In reportorial analysis *Nux vomica* cover all rubrics and higher score then after consulting materia medica⁶, *Nux vomica* is found to be most appropriate for this case covering general, physical as well as mental picture and, also thermal reaction.

Selection of potency with justification^{7,8}: It was based on susceptibility of the patient. Higher the susceptibility higher the potency was selected.

PHQ-4: THE FOUR-ITEM PATIENT HEALTH QUESTIONNAIRE FOR ANXIETY AND DEPRESSION

S.No.	Over the last two weeks, how often have you been bothered by the following problems?	Not at all (=0 times)	Several days (<7 times)	More than half the days (8-10 times)	Nearly everyday (≥ 11 times)
1	Feeling nervous, anxious or on edge	0	1	2	3
2	Not being able to stop or control worrying	0	1	2	3
3	Feeling down, depressed or hopeless	0	1	2	3
4	Little interest or pleasure in doing things	0	1	2	3
Total					

Total score is determined by adding together the scores of each of the 4 items.

Scores are rated as normal (0-2), mild (3-5), moderate (6-8), and severe (9-12).

Total score ≥ 3 for first 2 questions suggests anxiety.

Total score ≥ 3 for last 2 questions suggests depression.

PHQ - 4 SCORE BEFORE TREATMENT

PHQ-4: THE FOUR-ITEM PATIENT HEALTH QUESTIONNAIRE FOR ANXIETY AND DEPRESSION

S.No.	Over the last two weeks, how often have you been bothered by the following problems?	Not at all (=0 times)	Several days (<7 times)	More than half the days (8-10 times)	Nearly everyday (≥ 11 times)
1	Feeling nervous, anxious or on edge	0	1	2	3
2	Not being able to stop or control worrying	0	1	2	3
3	Feeling down, depressed or hopeless	0	1	2	3
4	Little interest or pleasure in doing things	0	1	2	3
Total					

Total score is determined by adding together the scores of each of the 4 items.

Scores are rated as normal (0-2), mild (3-5), moderate (6-8), and severe (9-12).

Total score ≥ 3 for first 2 questions suggests anxiety.

Total score ≥ 3 for last 2 questions suggests depression.

PHQ - 4 SCORE AFTER TREATMENT

FOLLOW-UP

Date of visit	Change in symptoms	Prescribed medicine/potency/dose
19/03/2022	Frontal Headache as it is. Bowel clear	Placebo/BDS/15 day
05/04/2022	Marked improvement in headache and have a sound sleep.	Placebo/BDS/15 days
21/04/2022	Marked improvement in headache, no use abusive word.	Placebo/BDS/15 days
07/05 /2022	No headache, slight anger during contradiction, Feeling calm.	Placebo/BDS/15 days

Discussion and conclusion

Adjustment disorder common in general hospital. Here with the help of Nux vomica marked improvement occurs without any side effects. On 1st visit, patient PHQ-4 Score was 7 and after treatment, it was reduced to 3 within 2 months, and symptoms disappeared. In this case, one can see usefulness of individualised homoeopathic medicine on treatment of psychological disorder.

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An overview of autism spectrum disorder and scope of homoeopathy

By Dr Sivaramyapragathi R.S, Dr Mahadevi A.L

ABSTRACT:

BACKGROUND: Autism is a neurodevelopmental disorder (ASD) of abnormalities in language, social skills, communication and behaviour of an infant and child. The prevalence rate of autism is increasing in recent years. The reasons behind the autism are uncertain, but defective placenta, premature birth, encephalitis and toxic environment may be the possible reasons. For treating autism, specific behavioural and therapeutic interventions are needed. Homoeopathy can help to reduce the symptom severity of autism by its holistic approach. This study illuminates on how homoeopathy can prove to be the advantageous mode of treatment for autism.

AIMS AND OBJECTIVES: To know the effectiveness of homoeopathic mode of management in autism spectrum disorders. To understand the aetiopathogenesis and clinical features of autism spectrum disorders.

CONCLUSION: As the children are future pillars of our nation, one should warrant that every pillar is strong. Rate of prevalence of autism increases currently. This work will help to understand the causes behind the autism and the importance of homoeopathic management and additional therapies.

Keywords: autism spectrum disorder, behaviour, communication, encephalitis, homoeopathy, social skills.

Abbreviations: autism spectrum disorder – ASD, diagnostic and statistical manual of mental disorders – DSM, International classification of diseases – ICD, low birth weight - LBW, central nervous system - CNS, electroencephalogram – EEG, intelligence quotient - IQ, mitral regurgitation – MR, Indian scale for assessment of autism – ISAA, autism treatment evaluation checklist - ATEC, childhood autism rating scale – CARS, gamma-aminobutyric acid - GABA.

Introduction

Autism spectrum disorder (ASD) is a pervasive, developmental disorder diagnosed in 1 of every 68 children all over the world. In recent times, the incidence of autism is 1 per 110 in the United States, and 1 per 64 in the United Kingdom. [1,2,3,4,5] There is a frightening increase of ASD in India and it is appraised that more than 60 lakhs children in India are affected by ASD. 1 out of 500 Indian infants are mildly symptomatic and almost 20,000 new cases of ASD among which 3 to 5 cases are getting enrolled every year. Generally, it is more common in boys than in girls, i.e. 3 to 4 times higher in males. It usually appears during the first 3 years of age.[6] Autism comprises of wide range of symptoms such as hyperactivity, self-mutilation, aggression, repetitive activities, temper tantrums, poor focusing,

poor eye contact, speech, language and communication issues. [1,3,5] The pathology behind the autism is affections in the areas inferior to fronto-occipital fasciculus and fusiform hippocampus, rather than this numerous theories of genetics, immunological, biological, and psychosocial factors have been proposed. [1,3,6] Homoeopathic mode of treatment renders good improvement in ASD cases. Every child will require specific homoeopathic drugs based on their individualised symptoms. The antenatal history and mind symptoms of the mother during pregnancy plays major role in selection of medicine. Homoeopathy believes more in treating the individual rather than the labelled disease and shows enhanced retrieval of health in children with ASD.[5]

AIMS AND OBJECTIVES:

- To know the effectiveness of homoeopathic mode of treatment in ASD.
- To understand the aetiopathogenesis and clinical features of ASD.

AUTISM SPECTRUM DISORDER:

The diagnostic and statistical manual of mental disorders (DSM)-5 criteria for autism are: (i) qualitative impairment in social interaction (ii) in communication and (iii) restricted repetitive and stereotyped patterns of behaviour, interests, and activities have been reconstructed two domains; (a) persistent deficits in social communication and social interaction (b) restricted, repetitive patterns of behaviour, interests, or activities. [6] In ICD-11, ASD was mentioned in 6A02. [7]

TYPES OF AUTISM:

ASD manifested after 1 year of age are called as childhood onset autism or childhood onset pervasive developmental disorder.[2] The infantile autism occurs in 1 to 12 months of age.[8] Around 10% of the autistic population has special skills called 'savant' skills. In spite of the pervasive impairment of functions, certain islets of precocity or splinter functions may remain (called as idiot savant syndrome). [2] Autistic disorder - impairment in interactive, cognitive, communication and language skills, self-injurious and unusual behaviour. 20% of the population are affected with this type. Asperger's syndrome- Normal language and cognitive ability, unusual behaviour, social impairment. Majority of the population are affected with this type. Pervasive developmental disorder- Challenges in social interaction and communication. Below 5% – 7% of the population are affected. Regressive autistic spectrum disorder- child is normal until 18–24 months and then regresses to autistic symptoms. Childhood disintegrative disorder- rare disorder affecting social, motor, and language skills and Rett syndrome: mutations are linked to the X-chromosome and are generally seen in girls. [9]

PATHOPHYSIOLOGY:

Recently, the reason for the infantile autism is mainly biological, including perinatal CNS insult, EEG abnormalities, epilepsy, ventricular dilatation, raised serotonin levels in brain and neurophysiological irregularities.[2] Predisposing factors includes fragile X syndrome, maternal rubella, phenylketonuria, meningitis, encephalitis, tuberous sclerosis, hydrocephalus, neurofibromatosis, LBW babies and it is associated with down syndrome, asperger's syndrome, rett syndrome, attention-deficit/hyperactivity disorder, cerebral palsy, anxiety disorder, epilepsy,

specific learning disorders and childhood disintegrative disorder.[8] Some people believe that childhood vaccines are the reason for the older children to develop autism, but it is not confirmed.[10] Few cases of autism are due to *de novo* mutation which is responsible for neuron motility, axon guidance, and synaptic development. [9]

CLINICAL FEATURES:

The symptoms start to appear from 18 to 24 months of age except in infantile form.

- Absent social smile.
- Doesn't have interest in making friends.
- Absence of eye-to-eye-contact.
- Fails to comprehend about others' feelings; treats people as non-living things.
- Lack of fear in case of danger.
- Loss of personal attachment to parents and lack of separation anxiety.
- Absence of imitative behaviour.
- Uncharacteristic social play; prefers solitary games.
- Absence of verbal and facial response to sounds and voices; misunderstand as deaf earlier.
- Abstract thinking is reduced.
- Delaying in speech. Atypical speech forms such as echolalia, perseveration, poor articulation and pronominal reversal. In infancy, absence of sounds such as babbling.
- Mental retardation: 25% of children have an IQ of more than 70. Majority of the children have moderate to profound MR.
- Stereotyped behaviours include head-banging, body-spinning, hand-flicking, lining-up objects, rocking, clapping, twirling, etc.

- Hyperkinesia.
- Ritualistic and compulsive behaviour.
- Emotionally attached to the inanimate things.
- Resistance to the least alteration in the surrounding atmosphere.
- Autistic child loves music.
- Epilepsy is common in children with an IQ lower than 50. The course of infantile autism is chronic and 1-2% become normal in marital, social and occupational functioning. [2]

ASSESSMENT FOR AUTISM:

Indian Scale for Assessment of Autism (ISAA) CHART [11]

M-CHART (23 yes/no questions) [11]

Autism Treatment Evaluation Checklist (ATEC) [5]

Childhood Autism Rating Scale (CARS) [8]

HOMOEOPATHY AND AUTISM:

More the features that distinguish one child from others, the simpler is to find out the perfect simillimum. Gestational history and mental state of pregnant mother are also taken into consideration. Symptoms should call for the perfect simillimum.[12] These cases are few examples for the success stories of homoeopathy. Dr Rajalakshmi (2008) published that the post treatment ATEC scores have been decreased from the baseline to after 9 months of homoeopathic treatment. Homoeopathic medicinal treatment of autism (2010) by Neeraj Gupta et al found that homoeopathic treatment does improve autism. Psychological assessment evaluation observed significant improvement of social, cognitive skills, reduction of hyperactivity functions and sleep disorders in autistic children. [8] Effectiveness of homoeopathic therapeutics in the management of childhood autism disorder (2014)

by Praful M. et al concluded that after a year post-treatment, a mild (16), moderate (21), and marked (16) improvement was observed in most of the children with autism. [13] Constitutional treatment is the perfect way to approach an autistic child.

GENERAL MANAGEMENT:

Behaviour therapy and occupational therapy: well-designed class room training, directed towards the learning of new material and preservation of learnt skills. Speech therapy and sign language teaching helps to create interpersonal interactions. Parental counselling and psychotherapy will be helpful in allaying parental anxiety and guilt. Pharmacotherapy will be helpful for the treatment of autism and especially for the co-morbidities like epilepsy.[2] Physiotherapy helps for muscle relaxation. Play therapy - for recreation. Diet: the gluten free/casein-free diet (affects neural development) and the specific carbohydrate diet and the Feingold program (eliminates additives, preservatives, colouring agents, salicylates) are useful. Vitamin B6 is necessary to the functions of neurotransmitter pathways, including those for serotonin, dopamine, GABA, epinephrine and norepinephrine. Some studies shown that children with ASD showed improvement when the vitamin B6 was given as a supplement. [12]

DISCUSSION:

Autism is a disorder of early or late childhood with wide range of symptoms. But it is not easily treatable, and needs special care. Numerous scientific studies are coming out in order to find out the reasons behind the disease than the treatment outcome articles. Scientific community concerns more about the aetiology. Homoeopathic system of medicine has demonstrated significant reduction

of hyperactivity, behavioural dysfunction, sensory impairment as well as communication difficulty. [13] All other system can show only a milder level changes but homoeopathy renders much improvement in all variety of ASD. Occupational therapy, physiotherapy, music therapy and special schools also play major role in the improvement. But majority of the researches are concerned about finding the causes behind the ASD and trying to add new causative factors.[14] In this context, the words of our master Dr Samuel Hahnemann are must to mention, "but only that he should ascertain its morbid actions, in order that he may thereby be enabled to cure the disease. What else will the old school search for in the hidden interior of the organism". [15] Even after 200 years, certain things never change. It's time to make a step forward and focus on enhancing the welfare of the child. Homoeopathy, in specific, have good opportunity in the autistic cases.

CONCLUSION:

After brief analysis about the ASD, the incidence and prevalence rate increase progressively all over the world. A multisystem involved treatment and therapy are needed for the betterment of the child. "Children of today are the citizens of tomorrow", hence we give them grouped approach to treat effectively. Homoeopathic holistic approach has already proven to be successful in the treatment of ASD. This article will help the homoeopaths to gain courage in treating the ASD.

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A “mom to be” under anxiety disorder

Dr Shweta Singh

ABSTRACT: Pregnancy itself is an emotion where every stage from conception till delivery brings different issues and concerns and anxiety is one of the feelings that a pregnant women experience commonly. While a certain level of stress, worry or anxiety is natural during pregnancy but if there is excessive worrying, frequent sense of panic, fear or restlessness on most of the days which is affecting a women's life, mood or daily activities, it may be an anxiety disorder which is often underdiagnosed. Modern medicine for such psychological disorder are generally unsafe and has adverse effects, also cause dependency. However, homoeopathy is one of the most popular complementary and alternative medicine therapies and has strong focus on mental health disorders and has a role to play in managing anxieties and fear without any adverse effects on mother and baby.

Keywords: pregnancy, anxiety, fear, homoeopathy, *Arsenicum album*, *Calcarea carbonicum*

Abbreviations: C (centesimal scale), OPD (outpatient department), TDS (thrice in a day)

Introduction

"Homeopathy helped her to calm down and enjoy the antenatal period with ease".

Prenatal anxiety is the term used for anxiety during pregnancy. The rates of generalised anxiety disorder appear to be highest in the first trimester, likely due to hormonal changes. Psychologists termed it as 'a state of emotional crisis' which if not managed timely can results into disastrous consequences on the mother as well as the offspring.(1)

Tocophobia, also known as 'fear of pregnancy' and 'fear of child birth' is a pathological fear of pregnancy; which can lead to avoidance of childbirth.(2)

Risk factors

- Primigravidae
- Hormonal disorders
- High risk pregnancy
- History of miscarriage
- History of previous episodes of anxiety and/ or depression
- Lack of support from partner/ family
- Unplanned or unwanted pregnancy

- History of abuse/domestic violence

Anxiety in a pregnant woman may manifest as: (2)

- Changes in emotion and behaviour
- Physical symptoms like restlessness, sleeplessness, nervousness, crying episodes or even tachycardia, change in eating habits or physical activity. Some women feel paranoid and unable to enjoy their pregnancy period, while others may wish to have a caesarean section due to fear of vaginal delivery.

An anxious women may have:

- Feeling of being unwell
- Loss of appetite
- Poor concentration
- Mood swings- laughing or crying over trivial matters
- Feeling of dread
- Lack of ability to speak or think clearly
- Forgetfulness
- Panic attacks
- Shortness of breath or rapid breathing
- Irritability/ anger outbursts

- Palpitation
- Nausea/ vomiting
- Excessive sweating
- Suicidal thoughts/ self harm

Adverse effect of anxiety in mothers on the baby

Anxiety during pregnancy may result in loss of foetus, decrease in birth weight and long term effects on the unborn baby. It can cause increase in activity of the hypothalamus – hypophysis–adrenal axis, endocrine disorders, hyperglycemia, shortness of breath, rash, asthma, destruction in social behaviour and fertility rate in adulthood. It can also lead to emotional problems, hyperactivity disorder, decentralization and disturbance in cognitive development of children. Abnormalities like cleft lip, cleft palate can also be seen increasingly in babies of overanxious mothers.

Homeopathic point of view (3)

Dr Hahnemann states in aphorism 210 of his Organon of Medicine; regarding mental diseases, "they do not, however, constitute a class of disease sharply separated from all others, since in all other so-called corporeal diseases the condition of the disposition and mind is always

altered; and in all cases of disease we are called on to cure the state of the patient's disposition is to be particularly noted, along with the totality of the symptoms, if we would trace an accurate picture of the disease, in order to be able there from to treat it homoeopathically with success.

In aphorism 225, he states, "there are, however, as has just been stated, certainly a few emotional diseases which have not merely been developed into that form out of corporeal diseases, but which, in an inverse manner, the body being slightly indisposed, originate and are kept up by emotional causes, such as continued anxiety, worry, vexation, wrongs and the frequent occurrence of great fear and fright. These kind of emotional diseases in time destroys the corporeal health, often to a great degree- psychosomatic diseases.

When an individual becomes normalised by the homoeopathic cure, the deeper side of his being, the will and the understanding, or the rational mind are balanced. With the change in the mental and moral sphere, the physical health improves with a high degree of resistance to maladies of all kinds. Such is the transition from constitutional weakness and suffering to homoeopathic health and comfort.

Case study

A young beautiful lady, Mrs abc, 4 months pregnant, aged 23 years, came to OPD with her mother in February 2021. While entering the chamber, she was looking so dull and weak, walking so slowly towards the chair and finally sat down.

Before any questions, she leaned down on the table. Then her mother started explaining about her mentally disturbed state and

behavioural disorder.

She had a few episodes of vomiting as soon as she used to eat or drink anything.

Physical generals

Appetite was decreased, she was having aversion to food. Vomit out everything she used to eat or drink. Thirst was also not much, little quantities of water at small intervals.

Mental generals

She was full of fear as something wrong will happen to her or her baby. Desired for company. She had become suspicious in nature for the last 3-4 months. Whenever she was irritated or angry, she tried to kill herself by throttling.

Family history

Her brother was also taking homeopathic treatment for his anxiety / panic disorder. It runs in

Analysis and evaluation of the symptoms according to Kentian method

Physical generals	Mentals generals	Particular symptoms
Thirst for small quantity at frequent intervals+	Suspicious+	Excessive vomiting during pregnancy++
Weakness+++	Fear of being injured++	
Chilly patient+	Mentally restless+++	
	Suicidal tendencies+	

Following symptoms were considered for repertorisation using Homopath:

1. Stomach; vomiting, pregnancy during

- Mind; suspicious
- Mind; fear, injured, of being
- Generalities; weakness
- Mind; restlessness

- Sleep; sleeplessness
 - Stomach; thirst, small quantities for
 - Mind; suicidal disposition
- Repertorial result(4)

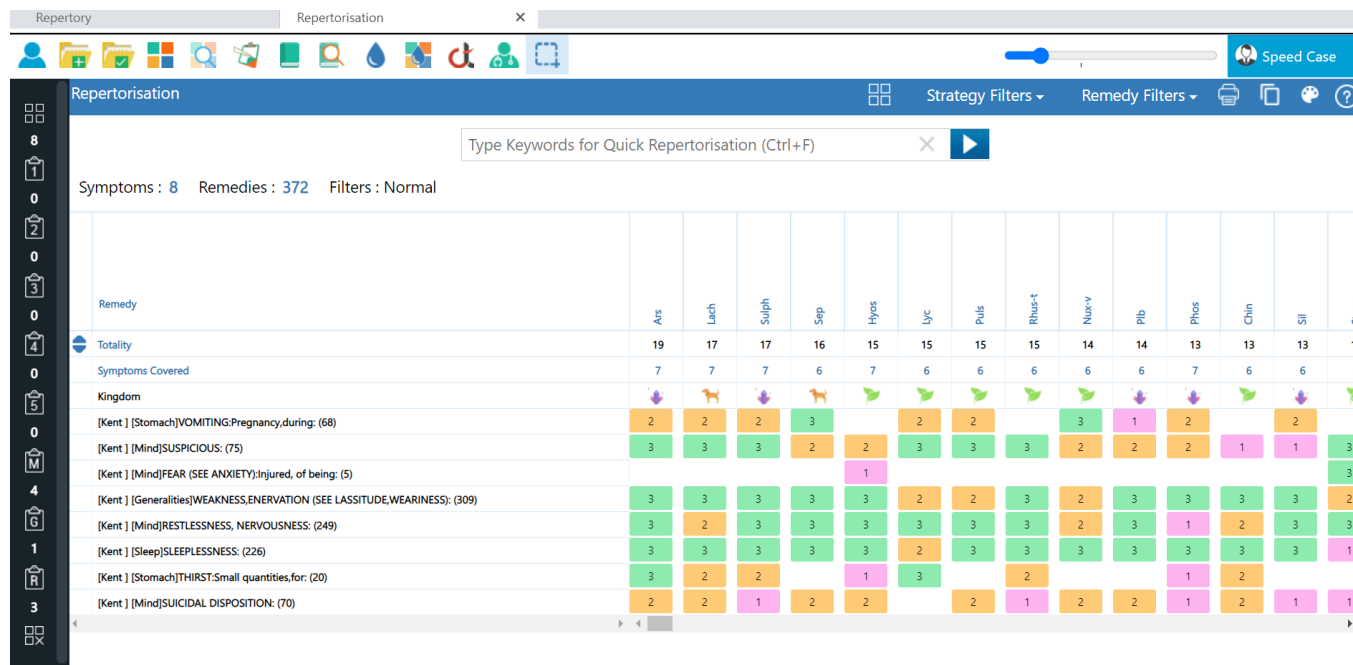


Fig. 1. Repertorial analysis using Homopath

Prescription

Arsenicum album 200/ water dose⁽⁵⁾

Followed by *Rubrum metallicum* 30, TDS for 3 days

Justification for the selection of the prescribed remedy

On repertorial analysis, *Arsenicum album* came to be the highest ranked remedy, covering maximum number of symptoms of the patient. Considering the materia medica, *Arsenicum album* is a well-known remedy for the state of fear and

anxiety of any kind. The remedy '*Arsenicum album*' has characteristic mental restlessness with rapid disproportionate prostration along with the thirst for small quantities of water. Suicidal tendencies which lack courage⁽⁶⁾, frequently matches the patient. The prescription was based more on well-marked mental symptoms, so medium potency of *Arsenicum album*, i.e. 200C was chosen, considering the susceptibility of the patient.

General management

She was reassured. Counselling played a vital role along with the homoeopathic treatment and helps your patient to cope up with the negative emotions. Encouraging her to discuss the fears and anxieties with spouse, family or friends. Advised to attend regular antenatal classes and group discussions. It is important to advise the family members, especially the spouse to provide emotional support to her.

Follow up:

Date	Status of the patient	Prescription with justification
On 3 rd day	<p>The patient's physical and emotional state was improved</p> <p>There were no vomiting episodes, weakness was much better.</p> <p>Sleep is better</p> <p>No attempt of suicide, she looked relax than before.</p>	<i>Rubrum metallicum</i> 30 was repeated as before for a week.

March 2021	<p>The patient came with her mother for her, a few complaints which are still persisting like she had difficulty in sleep; she wanted to sleep but she couldn't. She couldn't stay alone; always wanted someone beside. If no one was present, she started crying. She had fear of darkness.</p> <p>She said- "Doctor, I want to recover, please help me. I do regular path, I listen to gurbani, I pray regularly for my baby. God will help me to recover, right!"</p> <p>Her mother reported about her suicidal thoughts which were present in starting too.</p>	<p><i>Calcarea carbonicum</i> 200/ water dose</p> <p>Followed by <i>Rubrum metallicum</i> 30, TDS for a week</p> <p>Justification for the follow up remedy selection: On repertorisation using Hompath (<i>Repertorial analysis given in Fig.2</i>), the remedies came with highest ranks were <i>Calcarea carbonicum</i> and <i>Stramonium</i>. Both the remedies are chilly. In order to differentiate and to find out the correct <i>simillimum</i> for the patient, further enquiry was made and it was found that she was afraid of her mother-in-law, her husband was not supportive so she was living with her parents only. She desired to be protected and supported by her mother and brother. All these pointed out towards <i>Calcarea</i> personality who needs security and stability in life, and had a feeling of being weak to face the cruelty and roughness of the world.(7)</p>
After a week	The patient was quite better, looked happy. She slept better in the past week. No suicidal attempt. She talked to her mother-in-law comfortably. Fears and anxiety which she had before were much better.	<i>Rubrum metallicum</i> 30, TDS for 15 days.
April 2021 (Telephonic follow up)	She was doing well. She shifted to her in laws, Sleep is good, no suicidal thoughts were there.	<p>Nothing was prescribed</p> <p><i>In November 2021, she came to my OPD with a cute baby girl in her hands. The happiness is quite visible on her face.</i></p>

Repertorisation														
Type Keywords for Quick Repertorisation (Ctrl+F)														
Symptoms : 6 Remedies : 252 Filters : Normal														
Remedy	Calc	Stram	Puls	Hyos	Bell	Ars	Arg-n	Lyc	Phos	Sep	Carb-v	Gels	Nux-v	Lach
Totally	13	12	11	11	10	10	9	9	9	9	8	8	8	8
Symptoms Covered	6	6	5	4	5	4	4	4	4	4	5	4	4	3
Kingdom	6	6	5	4	5	4	4	4	4	4	5	4	4	3
[Kent] [Mind]LIGHT/Desire for (see Dark): (10)	2	3			3							3		
[Kent] [Mind]COMPANY/Desire for: (58)	2	2	2	3	1	3	3	3	3	2	1	2	2	
[Kent] [Sleep]SLEEPLESSNESS: (226)	3	1	3	3	3	3	3	2	3	3	2	2	3	3
[Kent] [Mind]RELIGIOUS AFFECTIONS (SEE ANXIETY, DESPAIR, FEAR): (53)	2	2	2	3	2	2	2	2	2	2	2		1	3
[Kent] [Mind]FEAR (SEE ANXIETY):Dark: (22)	2	3	2					2	2		2			
[Kent] [Mind]SUICIDAL DISPOSITION: (70)	2	1	2	2	1	2	1		1	2	1	1	2	2

Fig. 2. Follow up- Repertorial analysis using Hompath

Conclusion:

Homoeopathy is the unique system of medicine, which works on the principle of 'individualisation'. It treats the patient as a whole considering the physical, mental and social sphere of the patient which constitutes the totality of the symptoms because it is the only guiding tool to the patient's simillimum. Unlike modern medicines, homoeopathic remedy never cause dependency and are free from any adverse effects and can be used safely during pregnancy for any complaints. There are no specifics, constitutional treatment based on individual symptoms gives permanent and safer results.

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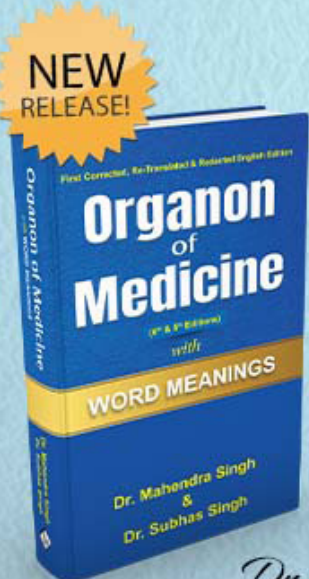
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Organon of Medicine

With Word Meanings

- 1) The errors in facts and editing of Organon of Medicine have been corrected.
- 2) Errors of translation, information and editing (of Dudgeon); errors of translations, editing, commission, omission and anomalies in Boericke's edition by American, German and Indian publishers have been corrected.
- 3) The paragraphs of Preface and Introduction along with it's Footnotes by Hahnemann and Dudgeon have been serially numbered.

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Difference between anxiety and fear with medicines and glimpses of recent researches

Dr Babita R. Kondle, Dr Renu Mittal, Dr Divya Taneja

ABSTRACT: In today's world, anxiety and fear are growing psychological disorders. The maximum population is getting affected by anxiety and fear at some point during their lifetime. Although the two terms, anxiety and fear, overlap but they also differ, fear is short-lived, present-focussed, emotional response to a real or perceived imminent threat, whereas anxiety is a long-acting, future-focussed and broadly focussed towards a diffuse threat. In the same manner, the prescribing indications of the medicines also differ. Experiences of previous research studies demonstrate a positive role of homoeopathy in treating anxieties and fear.

Keywords: anxiety, DSM-5, fear, researches, Aconitum ferox.

Abbreviations: DSM-Diagnostic statistical manual, APA-American psychiatric association, e.g. - example

Introduction

Anxiety refers to the brain response to danger stimuli that an organism will actively attempt to avoid. Anxiety has become a regular part of every individual's life in this busy world. But for some people, it becomes a bigger issue interfering with their daily routine. Anxiety and fear are the most prevalent psychological disorder around the world.¹

The term "anxiety" is derived from the Latin word "angere" meaning to press tightly, to choke, to oppress, to strangle; a state of being anxious, uneasy regarding something doubtful, solicitous concern; troubled in mind about some uncertain event, distressed, worried. Fear is related to the word fare in its oldest sense, which is to pass

through, to go through.^{2,3}

Differentiating point:

Fear is the emotional response to real or perceived imminent threat, whereas anxiety is anticipation of future threat. Obviously, these two states overlap, but they also differ, with fear more often associated with surges of autonomic arousal necessary for fight or flight, thoughts of immediate danger, and escape behaviours, and anxiety more often associated with muscle tension and vigilance in preparation for future danger and cautious or avoidant behaviours. Panic attacks feature prominently within the anxiety disorders as a particular type of fear response.^{3, 4}

Fear is defined as short-lived, present-focused, geared towards

a specific threat, and facilitating escape from threat while anxiety is defined as long-acting, future-focused, broadly focused towards a diffuse threat, and promoting caution while approaching a potential threat.

Different type of fear and anxiety includes: Generalised anxiety disorder, separation anxiety disorder, social anxiety disorder, illness anxiety disorder, post-traumatic stress disorder selective mutism, specific phobia, panic disorder, agoraphobia, etc.^{3,4}

Clinical presentation:^{5,6}

Fear and anxiety present itself in behavioural, emotional, physical and social planes while signs and symptoms can pertain to:

Domain	Anxiety	Fear
1. Somatic	Twitching, muscular tension, backache, headache, feeling of constriction of chest, fatigue, aches over the body.	Trembling, rapid heartbeat shortness of breath sweating, chills pupils dilate and hearing becomes more acute.

2. Psychological	Mood changes, apprehension, restlessness, difficulty in concentrating, irritability, suicidal thoughts, weeping tendency, Insomnia.	Fear of any impending danger, marked persistent fear about a specific object or situation, e.g. animal phobia, situational phobia, etc. Shrieking, aggression. Anger.
Autonomic:		
3. Cardiovascular	Palpitations, sensation of missed beats, tachycardia.	Tachycardia, sweating, chest pain/discomfort.
4. Gastrointestinal	Dry mouth, dysphagia, epigastric sensations, flatulence, diarrhoea.	Dry mouth, nausea. stomach cramps, unnatural hunger.
5. Respiratory	Shortness of breath, tachypnoea or rapid breathing.	Dyspnoea or sensation of smothering.
6. Genitourinary	Increased urinary frequency, loss of erection, menstrual disturbances.	Instant urination, Urinary incontinence.
7. Skin	Flushing, sweating, cold extremities.	Blood flow away from the skin and makes a frightened person appear pale. Pins and needle sensations.
8. Others	Anxiety increases preparedness “U-shaped” curve: absence of anxiety interferes with performance moderate levels of anxiety improve performance and high levels of anxiety are detrimental to performance.	Fear triggers “fight or flight” may save life.

Insight into recent researches:

-Studies (observational and

controlled trial) have been conducted regarding anxiety disorders and fear and have demonstrated positive role

of homoeopathy. Some studies in past 10 years are as follows:⁷⁻¹⁸

Author name	Study title	Results
Coppola L (2013)	<i>Effect of a homeopathic-complex medicine on state and trait anxiety and sleep disorders: a retrospective observational study.</i>	This retrospective observational study suggests that treatment of anxiety and sleep disorders with Datif-PC® (<i>Abrus precatorius</i> 6CH, <i>Aconitum napellus</i> 6cH, <i>Belladonna</i> 6cH, <i>Calendula officinalis</i> 6cH, <i>Chelidonium majus</i> 6cH, <i>Viburnum opulus</i> 6cH) can produce notable improvements even in a short period of time.
Azhari A (2014)	<i>The efficacy of homeopathic remedies as an adjuvant therapy in patients with social phobia</i>	Several clinical trials have shown the effectiveness of homoeopathy as an adjuvant therapy in anxiety disorders such as social phobia, especially in patients with mildly to severely symptomatic conditions.
Bagherian M (2014)	<i>The effects of homeopathic medicines on reducing the symptoms of anxiety and depression: randomized, double blind and placebo controlled.</i>	These findings suggest that homeopathic therapy can be used as an effective method to treat anxiety and depression disorders.

Bonne O. (2014)	<i>A randomized, double-blind, placebo-controlled study of classical homoeopathy in generalized anxiety disorder.</i>	The effect of homeopathic treatment on mental symptoms of patients with generalized anxiety disorder did not differ from that of placebo. The improvement in both conditions was substantial. Improvement of such magnitude may account for the current belief in the efficacy of homoeopathy and the current increase in the use of this practice.
Grimaldi-Bensouda L (2016)	<i>Homeopathic medical practice for anxiety and depression in primary care: the EPI3 cohort study</i>	Patients with anxiety and depressive disorders, who chose to consult general practitioners prescribing homoeopathy reported less use of psychotropic drugs, and were marginally more likely to experience clinical improvement, than patients managed with conventional care. Results may reflect differences in physicians' management and patients' preferences as well as statistical regression to the mean.
Thomas MV. (2016)	<i>Reducing symptoms of anxiety with homoeopathic medicines: a study using small 'n' design</i>	Individualized homoeopathic medicines were very useful in reducing the symptoms of anxiety.
Vineetha S. (2019)	<i>A clinical study on the role of homoeopathy in managing anxiety disorders in school going children of Kanyakumari district</i>	Homoeopathy is effective in managing anxiety disorders of Kanyakumari district in school going children of Kanyakumari district based on the comparison of before and after treatment in the scores of anxiety disorders.
Shah A. (2021)	<i>Effectiveness of homoeopathic medicine in cases of generalized anxiety disorders</i>	Study has concluded utility of Homoeopathic Medicine in finding the indicated medicines for cases of anxiety disorder.
Gilla D. (2021)	<i>A review on anxiety disorders during COVID-19 pandemic: homoeopathic perspective.</i>	Mental health is a critical concern in the pandemic's scenario and homoeopathy can be a safe and effective alternative or adjunctive to the conventional system in the management of anxiety disorders during this chaotic situation.
Villet S. (2021)	<i>Open-label observational study of the homeopathic medicine Passiflora compose for anxiety and sleep disorders</i>	Anxiety and sleep disorders improved significantly in patients included on this study. Passiflora compose could be an alternative to the use of psychotropic drugs for first intention treatment of anxiety and sleep disorders.
Gilla D, Mohan ND. (2021)	<i>Individualized homoeopathic treatment of phobic anxiety disorders—A case series.</i>	This case series advocates utilization of homoeopathy in managing phobic disorders. Cases which were assessed for severity using American Psychiatric Association (APA) severity measures for phobia adult at baseline and with a 1-year follow-up at periodic monthly interval are reported. The mean APA phobia severity measure value of cases i.e., 35 at baseline reduced to 0 (asymptomatic) in an average duration of 8 months. The improvement continued steadily up to 12 months.

Ponnam, Hima Bindu (2020)	<i>Psychometric assessment of morbid fear of COVID-19 and its homoeopathic management— a treatment perspective through case reports</i>	The morbid fear of an infectious agent/germ and anxiety and fear of death arising from the pandemics are the characteristic symptoms of the homoeopathic medicine— <i>Arsenicum album</i> along with other indicated features. Cases showed significant improvement, thus affirming the principles of individualisation of homoeopathic system of medicine with precision, and the causality of the outcome could be assessed by the modified Naranjo criteria scientifically.
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Homoeopathic management:

Fear and anxiety often occur together, but these terms are not interchangeable. Even though symptoms commonly overlap, a person's experience with these emotions differs based on their context. Some differentiation of medicines:^{19,20,21}

Medicine	Anxiety	Fear
• <i>Aconitum napellus</i>	Great, inconsolable anxiety.	Complaining fear of approaching death; predicts the day he will die. Fear of ghosts.
• <i>Aconitum ferox</i>	Anxiety increased to a high degree. Anxiety with suffocation.	Fear of suffocation from paralysis of respiratory muscles.
• <i>Aloe socotrina</i>	Anxiety and ebullition. Giddiness, with anxiety when moving; he feels m if he were sitting too high (after dinner.)	Restlessness and fear, fear of man.
• <i>Alumina</i>	Anxious and full of fears.	Fears loss of reason often leads to insomnia, of not recovering, of impending evils; anguish and vague uneasiness, as if he had committed a crime.
• <i>Antipyrinum</i>	Nervous anxiety.	Fear of becoming insane.
• <i>Argentum nitricum</i>	Anxieties and hidden irrational motives for actions.	Fearful and nervous; impulse to jump out of window. Fear when looking up at tall buildings. fears to go upon a high bridge or lofty place lest he throw himself down.
• <i>Arnica montana</i>	Great sensitiveness of the mind, with anxiety and restlessness.	fear especially of persons coming towards him, as if they would strike him;
• <i>Arsenicum album</i>	Anger with anxiety, restlessness and sensation of coldness.	Great fear of death, and of being left alone.
• <i>Borax veneta</i>	Anxiety, with sleepiness, increased towards evening. The child feels an anguish when rocked in a cradle, has an anxious countenance during the downward motion.	Excessive fear of thunder. Infant at the breast starts when anyone clears his throat or sneezes; dread of any downward motion; fright, he starts in all his limbs on hearing an anxious cry.
• <i>Calcarea carbonicum</i>	Apprehensive anxiety about his health, or of some future misfortune	Fears she will lose her understanding, or that people will observe her confusion of mind. Despairing mood, with fear of disease and misery; concerns herself about imaginary things, apprehension about present and future worse as evening comes on.

• <i>Cocculus indicus</i>	He sits as if wrapped in deep, sad thoughts, and does not take notice of anything; anxiety.	Vivid dreams, exciting fear.
• <i>Cannabis indica</i>	Anxious depression.	Constant fear of becoming insane.
• <i>Graphites</i>	Melancholy with inclination to grief, anxiety about the future, and nightly restlessness driving one out of bed.	Anxious fear of an approaching misfortune.
• <i>Kalium carbonicum</i>	Angry and irritable. Anxiety with fear.	Anxiety with fear. Easily frightened, especially on touching the body lightly, Fearful and anxious about her disease, that she cannot recover.
• <i>Laurocerasus</i>	Weakness of mind and loss of memory; fear and anxiety about imaginary evils.	Fear and anxiety about imaginary evils.
• <i>Magnesium carbonicum</i>	Anxious, with perspiration all day. Anxious and warm through the whole body, especially: in the head, while eating warm food.	Trembling, anguish and fear as if some accident would happen, all day, going a off after going to bed.
• <i>Mercurius solubilis</i>	Anxiety, apprehension and restlessness, especially in the evening and at night.	with fear of losing one's mind and understanding.
• <i>Nitricum acidum</i>	Anxiety about his disease, with fear of death. anxiety and restlessness in the evening. Anxiety with irritability and inclination to commit suicide; but is afraid to die.	Fear of death. Very easily startled and frightened.
• <i>Platinum metallicum</i>	Anxiety horrified by the thought that he would die soon.	After anger alternate laughing and weeping, with great anguish and fear of death. Delirium, with fear of men, often changing, with over-estimation of oneself.
• <i>Psorinum</i>	Anxiety about the future. Great anxiety, full of fears.	Full of fears, always thinking of dying.
• <i>Rhus toxicodendron</i>	Anxiety and apprehensiveness (at twilight).	Fear; that he will die; of being poisoned.
• <i>Ruta graveolens</i>	Anxious and low-spirited, with mental dejection; tottering as if thighs were weak.	Fear of being captured and imprisoned
• <i>Squilla maritima</i>	Great anxiety of the mind.	Fear of death.
• <i>Valeriana officinalis</i>	Very changeable disposition; hypochondriacal anxiety, trembling excitability.	Fear, especially in the evening in the dark.
• <i>Veratrum album</i>	Great despair and hopelessness of life, mental anxiety and pangs of conscience, as if he had done something, twitching with anxiety.	After fright fear remaining; diarrhoea with icy coldness of the body; cold sweat on forehead.

Conclusion:

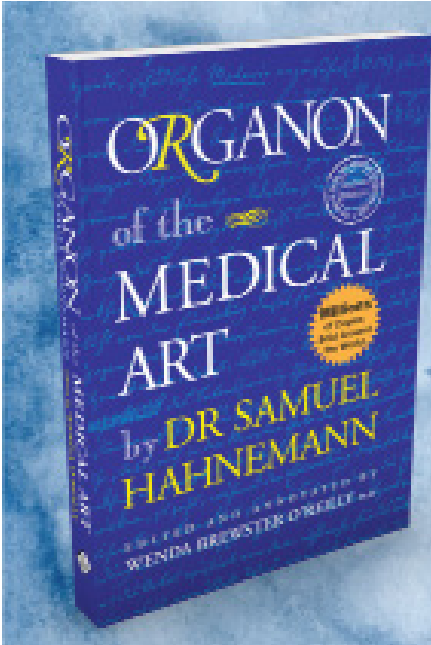
Homoeopathy considers the mental make-up of the patient then one can imagine its imperative role when treating the mind symptoms. Homoeopathic medicines can formulate a positive change in people suffering from these distressing states of mind and behaviour. Homoeopathy can help patients by reducing their anxiety levels and fear and thus make patients capable of dealing with fearful situations.

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Lesser-known homoeopathic remedies in cardiac rheumatism

By Dr Vanija Sharma, Dr Ankita Srivastava, Dr Yasha, Dr Somendra

ABSTRACT: At least half of patients who suffer from rheumatic fever with carditis have chronic valvular heart disease. Women account for two-thirds of all the instances. Approximately half of all patients with chronic rheumatic heart disease have a history of rheumatic fever or chorea, and some episodes of rheumatic fever go unnoticed. Homoeopathy has the potential to play a significant role in the treatment of this ailment, which affects a large number of people around the world.

Keywords: rheumatic heart disease, rheumatic fever, valvular disease, mitral regurgitation, mitral stenosis, homoeopathy.

Abbreviations: ASD – atrial septal defect, ECG – electrocardiography, VSD – ventricular septal defect

Introduction

Rheumatic heart disease is more effected in middle-aged woman, it is less commonly in man, with a history of childhood rheumatic fever (frequently misdiagnosed or treated as a little feverish illness). The mitral valve is virtually always impacted, and the aortic valve is frequently involved as well. Valves on the right side are less usually impacted. Exertional dyspnoea is the most common symptom, followed by unexplained atrial fibrillation or an unnoticed stroke.¹

Atrial fibrillation and pulmonary oedema appear suddenly in a pregnant lady.¹

The mitral valve is afflicted in more than 90% of instances, followed by the aortic valve, tricuspid valve, and finally the pulmonary valve. About a quarter of all cases have isolated mitral stenosis, and another quarter have combined mitral stenosis and regurgitation.²

Pathogenesis-

Progressive fibrosis is the predominant pathogenic phase in chronic rheumatic heart disease. The heart valves are the most commonly damaged, although the pericardium and myocardium are also impacted, which can lead to heart failure and conduction abnormalities. Mitral stenosis with or without regurgitation can result from the fusion of the mitral valve commissures and the shortening of the chordae tendineae. Similar alterations in the aortic and tricuspid valves cause the cusps to deform and become rigid, resulting in stenosis and regurgitation. Even in the absence of an ongoing rheumatic disease, once a valve is injured, the changed haemodynamic stresses perpetuate and expand the damage.²

Mitral stenosis-

Mitral stenosis is generally always caused by rheumatic disease, though it can also be caused by severe calcification of the mitral valve in older people. Congenital mitral stenosis is also a rare condition.

Clinical features of mitral stenosis-2

Clinical feature	Cause
Symptoms	
Breathlessness	Pulmonary congestion, low cardiac output.
Fatigue	Low cardiac output.
Oedema, ascites	Right heart failure.
Palpitation	Atrial fibrillation.
Haemoptysis	Pulmonary congestion, pulmonary embolism.
Cough	Pulmonary congestion.
Chest pain	Pulmonary hypertension.
Thromboembolism	Atrial stasis and atrial fibrillation.
Signs	
Atrial fibrillation	Atrial dilatation.
Mitral facies	Low cardiac output.
Auscultation:	

Loud first heart sound, Pressure gradient across the
opening snap valve.

Mid-diastolic

murmur

Crepitations

Left heart failure.

Pulmonary oedema

Pleural effusions

Right ventricular heave,

Pulmonary hypertension.

loud P₂

Differential diagnosis-3

- Functional mitral mid-diastolic.
- Austin- flint's murmur.
- Conducted murmur of aortic incompetence.
- ASD.
- Left atrial myxoma.
- Cor -triatrarium.

Complication-3

Atrial fibrillation.

Congestive cardiac failure.

Haemoptysis.

Cerebral embolism.

Recurrent bronchitis- so called "winter bronchitis".

Infective endocarditis.

Pressure symptoms by the giant left atrium giving rise to:

- Dysphagia as a result of pressure over the oesophagus.
- Dyspnoea as a result of collapse of lung due to pressure over the left bronchus.
- Hoarseness of voice due to pressure over the recurrent laryngeal nerve (Oartner's syndrome).
- Deep boring pain over the thoracic vertebrae due to erosion.

Investigation in mitral stenosis- 2

ECG-

- Right ventricular hypertrophy: tall R waves in V₁V₂
- P mitrale or atrial fibrillation

Chest X-ray-

- Enlarged left atrium and appendage
- Signs of pulmonary venous congestion

Echocardiography-

- Thickened immobile cusps
- Reduced valve area
- Enlarged left atrium
- Reduced rate of diastolic filling of left ventricle

Doppler-

- Pressure gradient across mitral valve
- Pulmonary artery pressure
- Left ventricular function

Cardiac catheterisation-

- Coronary artery disease
- Pulmonary artery pressure
- Mitral stenosis and regurgitation

Mitral regurgitation-2

In nations where rheumatic fever is frequent, rheumatic disease is the leading cause, while other factors play a larger role elsewhere, especially in the United Kingdom. Mitral regurgitation can also occur after valvuloplasty or mitral valvotomy.

Causes of mitral regurgitation-2

- Prolapse of the mitral valve
- The left ventricle is dilated, and the mitral valve ring is dilated (e.g. coronary artery disease, cardiomyopathy)
- Valve cusps and chordae damage (e.g. rheumatic heart disease, endocarditis)
- Myocardial infarction is caused by ischemia or infarction of the papillary muscle.

Clinical features of mitral regurgitation-2

Clinical feature	Cause
Symptoms	
Breathlessness	Pulmonary congestion
Fatigue	Low cardiac output
Oedema, ascites	Right heart failure
Palpitation	Atrial fibrillation
Signs	
Atrial fibrillation	Atrial dilatation
Displaced apex beat	Cardiomegaly
Auscultation:	
Apical pansystolic murmur	Regurgitation of blood From left ventricle to left Atrium.
Soft S1	Valve does not closed properly
Apical S3	Rapid flow of blood into left ventricle
Crepitations	Left heart failure
Pulmonary oedema	Left heart failure
Pleural effusions	Left heart failure
Right ventricular heave	Pulmonary hypertension
Raised jugular venous pressure	Right heart failure
Oedema	Right heart failure

Differential diagnosis-3

- Benign systolic murmurs
- Aortic systolic murmur
- Pansystolic murmur of VSD
- Tricuspid pansystolic murmur

Complications-3

- Left ventricular failure.
- Right ventricular failure.

- Infective endocarditis.
- Angina pectoris.
- Haemoptysis.
- Atrial fibrillation.
- Embolic phenomena.

Investigations in mitral regurgitation-2
ECG-

- Left atrial hypertrophy
- Atrial fibrillation

Chest X-ray-

- Enlarged left atrium
- Enlarged left ventricle
- Pulmonary venous congestion
- Pulmonary oedema (if acute)

Echocardiography-

- Dilated left atrium, left ventricle
- Dynamic left ventricle (unless myocardial dysfunction predominates)
- Structure abnormalities of mitral valve.

Doppler-

- Detects and quantifies regurgitation

Cardiac catheterization-

- Dilated left atrium, dilated left ventricle, mitral regurgitation
- Pulmonary hypertension
- Coexisting coronary artery disease

Homoeopathic management- Whatever the disease's name, homoeopathic medication is based only on the totality of symptoms.

These are, however, some of the medications that are usually prescribed while treating a patient with cardiac rheumatism.

Adonis vernalis- mitral and aortic regurgitation. Chronic aortitis. Fatty heart pericarditis. Rheumatic Endocarditis. Praecordial pain, palpitation, and dyspnea, Marked venous engorgement. Cardiac asthma. Fatty heart. Myocarditis, irregular cardiac action, constriction and vertigo. Pulse rapid, irregular.⁴

Avena sativa-- Avena is beneficial for cardiac rheumatism and is an excellent tonic for debility caused by tiring conditions. palpitation of the heart. Insomnia. Lowering cholesterol, assisting with weight loss, and boosting heart health were among the benefits.⁴

Cactus grandiflorus- Endocarditis accompanied with mitral insufficiency and a severe and quick response. Acts well in the early stages of heart insufficiency. Arteriosclerosis causes heart weakening. The centre of the tobacco plant. Palpitations that are more violent when lying on the left side, especially when menses are approaching. Suffocation, chilly sweat, and an iron-band sensation are all symptoms of angina pectoris. Pain radiates down the left arm from the apex. Palpitation, vertigo, dyspnoea, and flatulence are all symptoms of palpitation. Heart constriction: sharp pains and stitches in the chest; weak, erratic, fast pulse without strength. Endocardial murmurs, excessive impulse, increased precordial dullness, and an enlarged ventricle are all symptoms of an enlarged ventricle. Blood pressure is low.⁴

Kalmia latifolia- fluttering of heart. Palpitation with anxiety. Suppressed breathing with faint feeling, dyspnea, pain in limbs, stitches in lower chest, right side prosopalgia. terrible ache in the chest, slow, weak pulse (hypertrophy, dilatation, aortic obstruction). Rheumatic endocarditis with subsequent hypertrophy and valve illness; paroxysms of anguish concerning the heart, dyspnea, febrile excitation; rheumatic endocarditis with subsequent hypertrophy and valvular disease. Pressure like a marble from epigastrium towards heart, with strong, quick heart-beats; every beat has a strumming as if it would burst, along sternum to throat; third or fourth beat louder followed by an intermission. Rheumatic pain in the area of the heart that extends down the left arm. The heart is stabbed from the heart to the left scapula, causing the heart to beat violently. The pulse has accelerated, although it is still faint. Pulse is slow and feeble, and the arm is also weak.⁴

Lithium carbonicum- rheumatic pain in the area of the heart Morning on rising, she felt a sharp pain in the area of her heart as she knelt over her bed. The heart receives a sudden shock. Throbbing in the area of the heart, like a dull stitch. Heat aches follow bladder pains. Heart pains prior to and at the start of menses. Heart trembling and fluttering (after mental agitation of a vexatious character). Heart pains both before and after urinating.

When rising to urinate, the pressure in the area of the heart decreases and then disappears after urination.⁵

Propylaminum - Fever and pain dissipated in a day or two in acute rheumatism. Prosopalgia rheumatica and rheumatic metastases, particularly heart lesions.⁴

Spigelia anthelmia - Violent palpitation. Movement causes significant exacerbation of precordial pain. Palpitations on a regular basis, especially when there is a bad stench coming from the mouth. Pulse is sluggish and erratic. Sticking pains, palpitation, and dyspnea are all symptoms of pericarditis. Neuralgia that affects one or both arms. Angina pectoris. Craving for hot water which relieves. Rheumatic carditis, trembling pulse; whole left side sore. Dyspnea; must lie on right side with head high.⁴

Valeriana officinalis- Obstructed breathing and anguish in chest. Oppressed breathing with pressure on lower part of chest, frequent jerks and stitches in chest with the feeling as if something were passed out, sometime on the left side in the region of heart when drawing breath. Sudden stitches in chest and liver from within out. Eruption of small, hard nodosities on chest.⁵

Ustilago maydis- At 3 a.m., when standing or reading, spasmodic ripping at top of left side, passing to 6th-7th rib, increased by breathing. Burning pain in the cardiac region, with a sudden soaring pain from the heart to the stomach. Along the median line, there is oppression. Constriction accompanied by pain, heat, and pressure.⁵

Scilla maritima- Heart palpitations. Small, sluggish, and slightly hard pulses. Rapid walking causes a contracting stitch on the left side, immediately beneath the last ribs.⁵

Stillingia sylvatica- Boring pain in the area of the heart. Irregular pulse, pulse weak and very irregular.⁵

Sticta pulmonaria- In the heart region, there is a dull, oppressive discomfort. Attacks of concern about the heart, awakening with weird sensations about the heart and feeling as though floating in mid-air for a few moments. The pulse is irregular and decreases every third or fourth beat. Hand veins, as well as superficial arm and leg veins, feel swollen.⁵

Oleum jecoris aselli-- Heart palpitation, cough, and shortness of breath. Rush of blood of heart with a creeping sensation all over the body. Sudden stitch in heart. Pulse accelerated, soft, and small.⁵

Apocynum cannabinum- pulse small and irregular almost pulseless. She has a tendency to pass out whenever she lifts her head from the pillow. The pulse is little and feeble. Pericarditis is a pericardial dropsy.

Palpitation very troublesome.⁶

Benzoicum acidum- The heart is the most usually affected organ in these rheumatic problems. Urine with a strong odour causes heart pain. Pain shifts from one location to another on a regular basis. Heart palpitation is a condition in which the heart beats rapidly. After midnight, the heart begins to pound violently. Palpitations are more severe at night.⁷

Conclusion

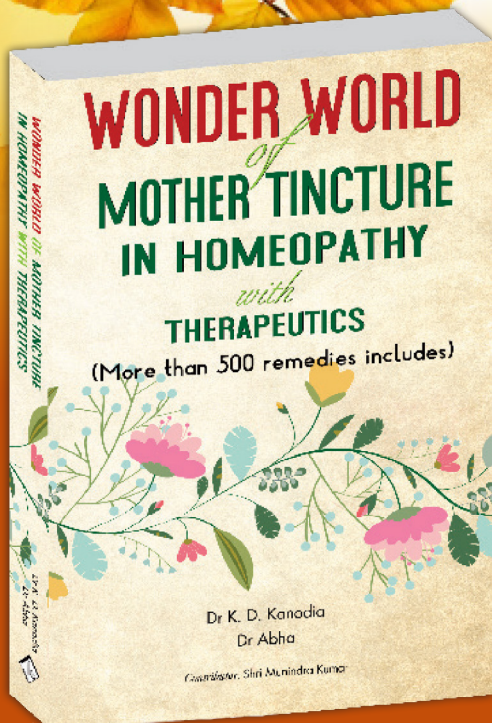
Homoeopathy has the potential to play a significant role in the treatment of cardiac rheumatism, which affects a large number of people around the world.

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READ IT AND REAP IT

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Ailments from fright: a case report on tinea

By Dr Manish R. Thakkar, Dr Tulika Jain

ABSTRACT: Tinea is most common superficial fungal infection; this infection isn't easy to get cured as it is associated with multiple predisposing factors. The current case report focuses on the causative factor (ailment from fright; fear with) leading to the simillimum (*Opium*) which has cured the case of long-lasting fungal infection.

Keywords: tinea, tinea corporis, tinea cruris, ringworm, fungal infection, tinea and homoeopathy, *Opium*.

Abbreviations: BD – twice a day, SL – *Saccharum lactis*

Introduction

Tinea versicolor is a common, benign, superficial cutaneous fungal infection usually characterized by hypopigmented or hyperpigmented macules and patches on the chest and the back¹. It is also said to be dermatophytic infection². Dermatophytes are keratinophilic fungi, living only on the superficial dead keratin. These fungi cause inflammation due to permeation of the metabolic products of the fungus into the skin or due to induction of delayed hypersensitivity³. This inflammation or hypersensitivity is reversed by homoeopathic medicine,

these medications help to destruct the negative effect of fungus by neutralizing their environment there by destroying their harbour site by improving the immune response of the host. The mechanism behind the cure of the disease starts when the selected remedy is administered to the patient and the deviated vital force of the patient get into its alignment so the deranged (vital force) gets arranged⁴ and patient's health is restored⁴.

Aetiological factors:

This dermatophytic infections can be broadly divided into three genera which infects the

skin and appendages are: trichophyton, microsporum and epidermophyton³.

Morphological features:

A typical lesion of tinea presents an annular/arcuate plaque which spreads centrifugally. The edge is active showing papulovesiculation, pustulation and scaling while the center is usually relatively clear though in chronic lesions there may be nodules, hyperpigmentation and even lichenification in the center³. Tinea can be classified under various heads but most accepted classification is Martin et. Al. as given in Table 1:

Table 1: Clinical classification of cutaneous dermatophyte infections according to body area involved⁵:

Body Area Involved	Classification	Common presentation
Scalp hair	Tinea capitis	Alopecia, broken hairs at the scalp, painful inflammation of the scalp with boggy tender nodules that drain pus
Facial hair (beard) and neck	Tinea barbae	Erythema, scaling, pustules, broken hair
Face	Tinea faciei	Annular, scaly plaques with raised edges, pustules and vesicles

Trunk and rxtremities	Tinea corporis	Annular scaly plaques with raised edges, pustules and vesicles
Palms	Tinea manus	Scaling, erythema, usually one hand only, commonly in association with tinea pedis
Sole and interdigital spaces	Tinea pedis	Interdigital: dry scaling or maceration and fissuring of toe web spaces Moccasin: well demarcated erythema with fine white scaling and hyperkeratosis involving soles of one or both feet Bullous: vesicles or bullae filled with clear fluid on the sole, instep, or web spaces; after rupturing, erosions with ragged ring like border
Groin	Tinea cruris	Erythematous plaques with central clearing and raised borders
Nails	Tinea unguium	Onycholysis, thickened, discoloured, dystrophic nails

pidemiology: Dermatophytes grow in certain conditions such as excessive heat, relatively high humidity and tight clothing.⁶ Predilection of tinea corporis is typically on trunk and limbs.

In the OPD at Baroda Homoeopathic Medical College, Sevasi, Vadodara, Gujarat, a case of tinea corporis and tinea cruris was managed using homoeopathy as described below.:

Case study

A 45-year old male patient, having a business of production of galvanised tins came with the complaint of itching on entire body with multiple eruptions since last 3.5 years. The affected areas were chest, abdomen, back, hands, groin, and legs. Itching aggravated on intake of sour food/beverages and symptoms increase in the night.

Patient started the case by saying, "I have been taking all kinds of medications from more than 3 years and now I am tired of it and it is better to die rather than suffering from such disease."

Life sketch (patient's nature):

Life sketch of the patient was perceived as per the instruction in section 84-997.

"Simple by nature, I usually don't get angry, in case someone taunts me I feel better not to reply back rather I would forgive and move on. I always make sure to be nice to all and never spoil relation with anyone. I don't wish to live a life where people criticise me. I always wish everyone should praise me and that's the life I want to be in. I am always keen to go for good cause and always take out time to help others. If there is need to provide any

financial help for medical reasons I would always help. If someone tells me that I am wrong I immediately surrender and ask forgiveness. I am very down to earth and not egoistic. I am kind at heart, I feel happy if everyone around me are happy. I am happy with the way I am."

Fear: If someone was fighting, he used to avoid going and always have thought that he should not get involved. Fear of ghosts.

Religious view: A completely religious person.

Weeping: He cried and missed his relatives, and near and dear ones.

Childhood

"I was mischievous, very naughty, I used to hit everyone around me you can say that I had no fear but when I was doing my job as a worker in

workshop, one fine day there was a quarrel at my work place and I got involved in the same and was warned by the person whom I was fighting with that I would be killed. This made me bit anxious after this incidence my co worker gave me a piece of advice that we are outsiders (Rajasthani). So, we should not involve ourselves in such fights rather we should keep quiet and stay calm because they might even kill us and no one will get to know about our death. That was the point where I started developing fear and since then I am having that fear in me, and now I don't get involved in any fights."

Skin problems started after 3 months of this incidence.

Married at 14 years of age.

Father: Died before 10 years.

Father's nature: Very strict,

social.

Mother: 65 years, housewife.

Mother's nature: Simple, do not spend money that easily.

Wife: 40 years, housewife.

Wife's nature: stubborn but co operative.

Brother: 38years, we are not on same page; it has been 13-14 years that we are not living together.

Physical generals:

Appetite- Good; **Desire-** Sweets; **Aversion-** Bitter gourd; **Bowel-** 1 time / Day, unsatisfactory stools; **Thirst-** 5-6 Glass/ Day, Normal water; **Urine-** Normal; **Perspiration-** Profuse on whole body, staining clothes white; **Sleep-** Good, Position- Sideways; **Habits-** Tobacco- Masala 4 / Day and Miraj 2 /Day.

Past history:

Dysentery- 5 years of age- was hospitalised for the same in childhood.

Family history:

Cancer- Father

Asthma- Paternal grandfather (PGF)

Osteo arthritis- Paternal uncle

Table 2: Analysis and evaluation of the case8:

Cause (efficient cause)	Physical generals and particulars	Mental generals and particulars
Fear	Desire for sweets	Patient was tired of itching and tinea, he felt that it was better to die than suffering from such disease.
Fright (past incidence of fight with a person at his work place)	Perspiration- Profuse, white stains on cloth	Fear: of fights; of ghosts
	Bowel- unsatisfactory, constipation	Used to weep when he missed his relatives, near and dear ones
	Sleep- good and posture- sideways	Simple, usually didn't get angry. In case if someone taunts him, he felt it's better not to reply and stayed calm.
	Itching on whole body.	He did not like any criticism and always tried that everyone should praise him.
	Eruptions on chest, abdomen, groins, back, hands and legs.	He was always ready to go for good cause and helping others in need.
	Itching aggravation from sour food/ drinks.	Religious person.
	Itching aggravation at night	He was very down to earth and not egoistic.

Miasmatic Evaluation⁹-

1. Itching on chest, abdomen, groin, extremities- Psora
2. Eruptions- psora
3. Constipation- psora
4. Weeping when missing near and dear once - Psora
5. Sensitive to criticism- Psora
6. Helping Others- Psora
7. Fear: of fight; ghost and past incidence- Latent psora
8. Fungal infection (tinea)- Sycotic
- 9.- Long standing complaint of skin and slow recovery- Sycotic

In this case, psora-sycotic was the predominant miasm in this case.

After thorough analysis and evaluation, the following rubrics were selected on the basis of totality as

“totality of symptoms¹⁰ are the only indication and the only guide to selection of the remedy”:

- 1- Mind- ailments from- fright, fear: with

- 2- Mind- benevolence
- 3- Mind- content
- 4- Mind- death- desires
- 5- Mind- fear- ghosts, of
- 6- Mind- mildness
- 7- Mind- sensitive- criticism; to
- 8- Mind- theorizing
- 9- Skin- eruptions- ringworm
- 10- Skin- itching- night
- 11- Generals- food and drinks- sweets; desire

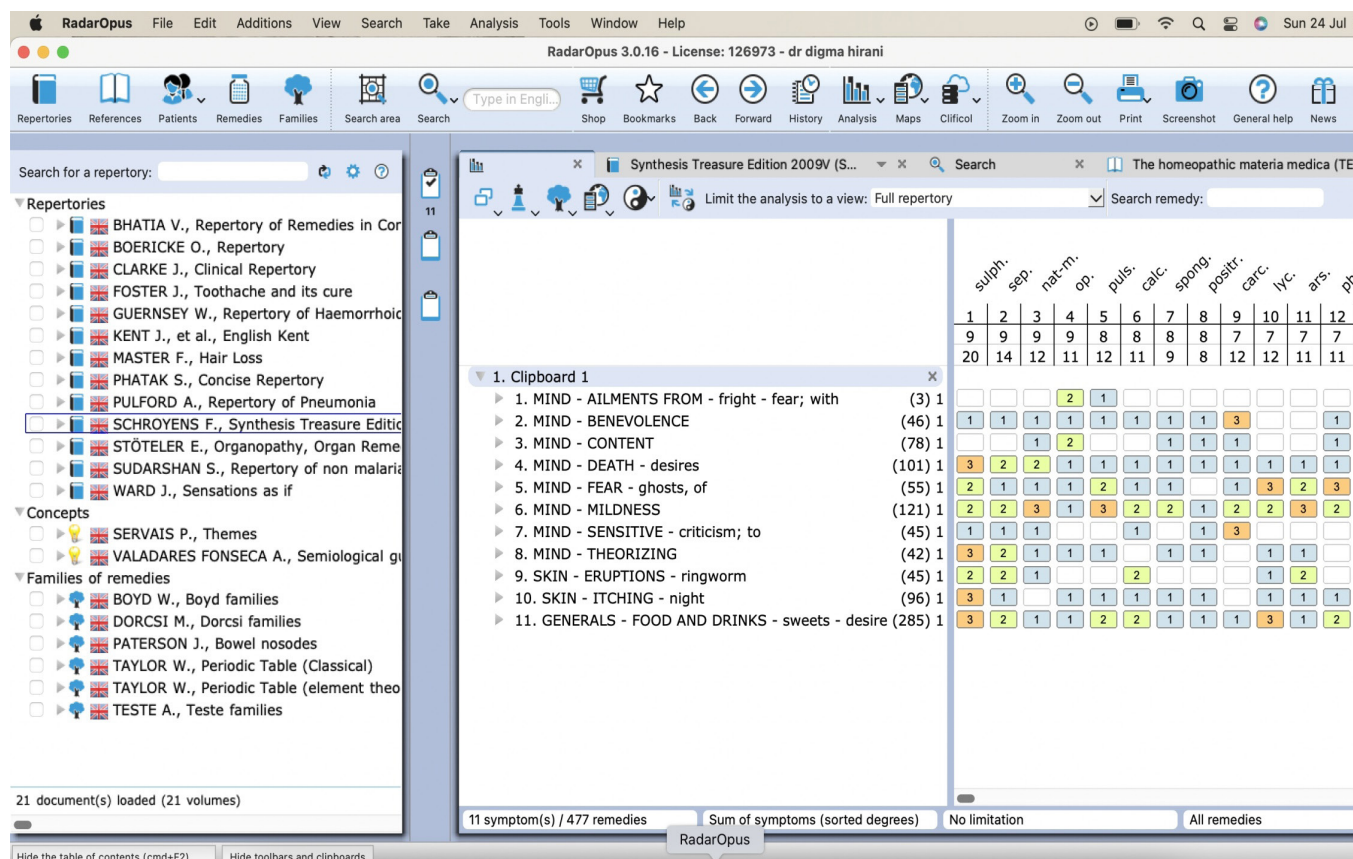


Fig.1 The reportorial chart [repertory selected- (Synthesis Trea

Table 3: Treatment Plan - After repertorisation, the simillimum selected was OPIUM

<u>DATE</u>	<u>FOLLOW UP</u>	<u>REMEDY</u>	<u>REASONING BEHIND REPETITION</u>
	1 st day of consultation	Opium 1M : single dose SL – BD* 15days	
	Lesion turned dry. Itching increased	SL –BD *15days	
	Eruptions were as it is, itching decreased Had sneezing and coryza a week back. Patient did not take any medication for acute problem as instructed	SL – BD* 15days	
	<u>Itching+++</u> , lesion was as it is <u>Complained of having constipation and pain while passing stools</u>	Opium 1M: single dose SL- BD* 15days	<u>As mentioned in Organon of medicine,¹¹ patient's complaint of itching increased (+++) and the physical general (constipation) reappeared</u>
	Itching decreased Eruptions improved	SL- BD* 30days	
	Itching was very less Eruptions were reduced to 50%	SL- BD*30days	
	Bowel movement got regular, no complaints were observed		
	<u>No itching</u> <u>Eruption reduced to 70%, complained of having constipation and painful knee joints</u>	Opium 1M: single dose SL- BD*30days	<u>Amelioration came to standstill along with this patient's complaint of constipation and knee joint pain indicated for repetition¹¹</u>
	No itching No lesion or eruption were seen Bowel movement regular Did not observe pain in knee joints	SL- BD * 30days	
	No itching No lesion or eruption was seen Bowel movement regular Did not observed pain in knee joints	SL BD* 30 days	

	No complaints	SL BD* 30 days	
	Loose motions after having outside food	Opium 1M (water dose) SL BD* 30 days	<u>The water dose was given because he had complaint of acute problem, i.e. loose motions¹².</u>
	No complaints	SL BD* 30 days	
	No complaints	SL BD* 30 days	
	No complaints	SL BD* 30days	

The last follow up was done in June 2022 and no relapse was observed till then. Thus, the medications were discontinued.



Figure 2A



Figure 2B

Fig 2Aand 2B: Presents the image of the patient before and after treatment respectively.



Figure 3A



Figure 3B

Fig 3Aand 3B: Presents the image of the patient before and after treatment respectively.

Discussion:

11 rubrics which were selected lead us to 4 remedies which covered the highest symptoms. The remedies are: *Sulphur*, *Sepia*, *Natrum muriaticum* and *Opium*.

As per Hahnemann's §7, the cause that manifestly produces and maintains (causa occasionalis)¹³ the disease should be removed considering this statement the highest importance was given to the causative factor of the disease, and due to the characteristic, "ailments from fright fear with", *Opium* was selected. The another phenomenon supporting the causality of disease teaches that for an effect, there may be two-fold causes, viz. material cause and efficient cause¹⁴.

The supporting phenomenon from materia medica by Dr Kent clearly explains that these complaints are from fear when the fear remains, or the idea of the fear remains, or the cause of it comes before the eyes¹⁵.

Hereby, it can be concluded that the specific medication for ringworm does not include *Opium* but as per Hahnemann's concept of totality of symptoms¹³, the simillimum, i.e. *Opium* was chosen that covered

maximum mental symptoms and causation of the patient. Here, *Opium* worked wonderfully in a chronic case of tinea corporis and tinea cruris, and thus one may conclude that causation and mental picture of patient is more important than the physical or any other symptoms.

Declaration of patient consent:

Patient's consent was taken for images and clinical information to be reported for this article.

Financial support and sponsorship: NIL

Conflicts of interest:

None Declared

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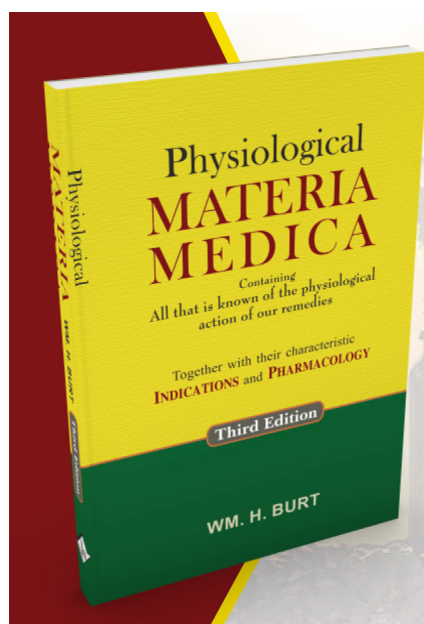
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Management of anxiety and fear after COVID-19 using homoeopathic medicine

By Dr Abhishek Kumar

ABSTRACT: Anxiety and fear are the most common disorders in this modern era occurring due to complications in other diseases. In this article, a brief summary of anxiety disorder is being discussed along with a case report which showed the effectiveness of individualised homoeopathic medicine in management of anxiety disorder.

Keywords: anxiety disorder, homoeopathy, individualisation, *Medorrhinum*

Abbreviations: OPD – outpatient department, BD – twice a day.

Introduction

Anxiety disorders are the most common psychiatric conditions found in the general population with a lifetime prevalence of 16.6 % and seen in 15 % to 20 %.⁽¹⁾ Anxiety disorder are cluster of mental disorder characterised by significant and uncontrollable feeling of anxiety and fear such that a person social occupational and personal function are significantly impaired. Anxiety may cause physical and cognitive symptoms such as restlessness, irritability, easy fatigability, difficulty concentrating, increasing heart rate, chest pain, abdominal pain and variety of other symptoms.⁽²⁾

Case study

Chief complaints:

A 38-year old female having com-

plaints of palpitation for 6 months after suffering from COVID-19. She felt a continued fear of mishapening with herself and her family members. She also complaint of disturbed sleep for 6 months. The complaints mainly aggravated in the morning, ameliorated in the open air.

History of present complaints
Palpitation and fear continued for 6 months and she took steroidal drug but relief for short period and complain reappeared. After taking allopathic medicine, he developed gastric troubles. From the last 2 weeks, her complaints aggravated and she consulted in college OPD.

Past history

COVID-19 infection one year ago.

Family history

Mother suffered from asthma for

10 years and took homoeopathic medicine.

Personal history

No addiction

Occupation – Housewife

Mental general and physical general

She was continually thinking about something would happen in her family and always thought regarding her family. She was always anticipated that some bad things would happen with her. She had a habit of biting nails, stress, weakness of memory after COVID infection. Desire for company, negative thoughts continually come in mind.

While enquiring her physical general aspect, she had much thirst, stools were satisfactory, her tongue was red, clean and moist. She had a desire for cold food but aversion to meat.

Analysis and evaluation of symptoms

S.no	Symptom type	Symptoms	Intensity	Miasmatic analysis(3)
1.	Mental general	Complaint due to anticipation; overthinking	+++	Psora, sycosis
2.	Mental general	Biting nails in stress	++	Psora
3.	Mental general	Fear about the fate of disease	++	Psora, sycosis

4.	<u>Mental general</u>	<u>Weakness of memory</u>	++	<u>Syphilis</u>
5.	<u>Physical general</u>	<u>Complaints aggravated after eating meat</u>	++	<u>Sycosis</u>
6.	<u>Physical general</u>	<u>Palpitation</u>	+++	<u>Psora</u>
7.	<u>Physical general</u>	<u>Thirst</u>	+++	<u>Sycosis</u>

Repertorial totality(4)

Symptoms	Rubric
Complaint due to anticipation;overthinking	<u>Mind ,ailments , from , anticipation , foreboding</u>
Biting nail in stress	<u>Mind , biting ,nails</u>
Fear about the fate of disease	<u>Mind , fear , misfortune of</u>
<u>Weakness of memory</u>	<u>Mind ,memory ,weakness of</u>
<u>Palpitation in chest</u>	<u>Chest , palpitation heart</u>

Repertorial sheet

6 symptom(s)	1	2	3
Name of remedy	<i>Ars</i>	<i>Med</i>	<i>Calc</i>
Symp. covered	6	6	5
Totality	17	15	14
1. CHEST, PALPITATIO..	III	II	III
2. GENERALITIES, FOO..	II	I	II
3. MIND, AILMENTS, fro..	III	III	III
4. MIND, BITING, nails	III	III	
5. MIND, FEAR (appreh..	III	III	III
6. MIND, MEMORY, wea..	III	III	III

Prescription

After repertorisation, *Medorrhinum* possessed highest grade and highest matching of the symptoms. Here, *Medorrhinum* was selected on the basis of mental as well as physical symptoms of the patients. The patient was very nervous in nature and constitution of the patient suggested this remedy, after consultation with materia medica⁽⁵⁾⁽⁶⁾ & repertorial result. Hence, *Medorrhinum*

was prescribed for this case.

Prescribed on 13.04.2022

Medorrhinum 1M/1 dose ,early morning mixing with ½ cup of water for two days along with placebo every day ,two times after eating for 15 days.

The patient was also advised for dietary management like intake of plenty of water , avoid any kind of

spicy or fatty food and don't take much stress.⁽¹⁾

Selection of dose and potency

As per Organon of *Medicine*⁽⁷⁾ 5th edition, aphorism number 247 and according to the susceptibility of the patient, the potency was selected . Here, the patient susceptibility was high and intensity of symptoms was also high⁽⁸⁾. She was suffering from a long time with that affection , so the case was started with high potency.

Date of visit	Response	Medicine prescribed
28.04.22	Palpitation slightly improved; fear persisted	Rubrum 30/1 drachm BD × 15 Days
10.05.22	Gastric troubles relieved	Rubrum 30/1 drachm BD × 15 Days
25.05.22	Palpitation better	Rubrum 200/1 drachm BD × 15 Days
05.06.22	Complaint came to a stand still ⁽⁹⁾ .	<i>Medorrhinum</i> 1M/1dose
20.06.22	Complaints better	Rubrum 200/1 drachm BD × 15 Days

Justification for Repetition of medicine

Medorrhinum 1m/1dose was repeated because the symptom of the patient came to a stand still position.⁽⁹⁾

Conclusion

In the above case presentation, it was observed that how a homoeopathic individualised medicine helped to manage a case of anxiety disorder. Dr Hahnemann has already mentioned in *Organon of Medicine* that homoeopathy is the best mode

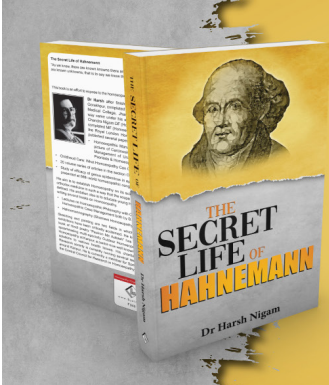
of treatment for mental disorders.

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Effective way of overcoming fear and anxiety

Dr Srabani Pal , Dr Shweta Patel

ABSTRACT: When one feels anxious before an examination or interview, it is normal and it can be beneficial in some circumstances as it warns the person, and allows him to handle dangerous situations, but letting that fear and anxiety take over one's life is not normal. If they interfere with day-to-day life, the individual may be diagnosed with anxiety disorder. Anxiety and fear is nothing but anticipation of a future concern and is generally associated with nervousness and avoidance behaviour. Homoeopathy is highly potent and recommended for treating it. During case taking, the patient's basic nature, his mental state, symptoms of anxiety and fear, his stress dealing mechanism, childhood incidences, family history and background, past medical history, and patient's social, personal and professional relationship are taken into consideration and detailed investigation is done before selecting the medicine.

Keywords: anxiety, fear, homoeopathy, maliciousness, delirium, disposition, hypochondriac, melancholic, despair, anguish

Introduction

Fear is one of the most powerful emotions. It has a very strong effect on one's mind and body. Fear can create strong signals of response during emergencies – for instance, if someone gets caught in a fire or is being attacked. It can also take effect when someone comes across non-dangerous events, like exams, public speaking, a new job, a date, or even a party. It's a natural response to a threat that can be either perceived or real.

Anxiety is a word used for some types of fear that are usually to do with the thought of a threat or something going wrong in the future, rather than right now.

Fear and anxiety can last for a short time and then pass, but they can also last much longer and one can get stuck with them. In some cases, they can take over your life, affecting one's ability to eat, sleep, concentrate, travel, enjoy life, or even leave the house or go to work or school. This can hold the individual back from doing things you want or need to do, and it also affects your health.

Some people become overwhelmed with fear and want to avoid situations that might make them frightened or anxious. It can be hard to break this cycle, but there are lots of ways to do it. One can learn to feel less fearful and cope up with fear so

that it doesn't stop him from living.

What makes an individual afraid?

A lot of things may make one feel afraid. Being afraid of some things – like fire – can keep the individual safe. Fearing failure can make him try to do well so that he won't fail, but it can also stop him doing well if the feeling is too strong. What he is afraid and how he reacts when he is afraid of something can vary from person to person. Just knowing what makes him afraid and why can be the first step to sorting out problems with fear.

What makes an individual anxious?

Because anxiety is a type of fear, the things described about fear above are also true for anxiety. The word 'anxiety' tends to be used to describe worry, or when fear is nagging and persists over time. It is used when the fear is about something in the future rather than what is happening right now. Anxiety is a word often used by health professionals when they're describing persistent fear. The ways that one feels when he is frightened and anxious are very similar, as the basic emotion is same.

What do fear and anxiety feel like?

When one feels frightened or seri-

ously anxious, the mind and body work very quickly.

These are some of the things that might happen:

- Heart beats very fast – maybe it feels irregular
- Breathe very fast
- Muscles feel weak
- Sweats a lot
- Stomach churns or your bowels feel loose
- Finds it hard to concentrate on anything else
- Feels dizzy
- Feels frozen to the spot
- Couldn't eat
- Hot and cold sweats
- Dry mouth
- Very tense muscles

These things occur because the body, sensing fear, is preparing the individual for an emergency, so it makes the blood flow to the muscles, increases blood sugar, and provides the mental ability to focus on the thing that the body perceives as a threat. With anxiety, in the longer term, one may have some of the above symptoms as well as a more nagging sense of fear, he may get ir-

ritable, trouble in sleeping, develop headaches, or have trouble getting on with work and planning for the future; or problems having sex, and might lose self-confidence.

Treatment:-

Talking therapies, like counselling or cognitive behavioural therapy, are very effective for people with anxiety problems, including computerised cognitive behavioural therapy, which takes the individual through a series of self-help exercises on screen. Medication drug treatments are used to provide short-term help, rather than looking at the root of the anxiety problems. Drugs may be most useful when they are combined with other treatments or support.¹

HOMOEOPATHIC MEDICAL REPERTORY, Robin Murphy

Mind Anxiety, General, fear, with-

ACON., *alum.*, *alum-p.*, *am-c.*, *am-m.*, *amor-r.*, **ANAC.**, **ANDROC.**, *ant.c.*, *ant-t.*, **ARG-N.**, **ARS.**, *ars-s-f.*, *aur.*, *bar-c.*, *bar-s.*, *bell.*, *berb.*, *bry.*, *calad.*, *calc.*, *calc-ar.*, *calc-s.*, *canth.*, **CARB-V.**, *carbn-s.*, **CARC.**, **CAUST.**, *chel.*, *chin.*, *chin-ar.*, *chin-s.*, *cic.*, *cina.*, *clem.*, *cocc.*, *coff.*, *con.*, *cupr.*, *dig.*, *dros.*, *dulc.*, *ferr.*, *ferr-ar.*, *ferr-p.*, *graph.*, *hell.*, *hep.*, *hydrog.*, *hyos.*, *ign.*, *kali-ar.*, *kali-c.*, *kali-i.*, *kali-n.*, *kali-p.*, *kali-s.*, *kali-sil.*, *kreos.*, *lach.*, *lyc.*, *m-arct.*, *mag-c.*, *manc.*, *mang.*, *meny.*, *merc.*, *mez.*, *mosch.*, *murx.*, *nat-ar.*, *nat-c.*, *nat-m.*, *nat-p.*, *nicc.*, *nit-ac.*, *nux-m.*, *nux-v.*, *onos.*, *phel.*, **PHOS.**, *plat.*, **PSOR.**, *puls.*, *rat.*, *rhus-t.*, *ruta.*, *sabin.*, *samb.*, *sang.*, **SEC.**, *sep.*, *sil.*, *spig.*, *spong.*, *staph.*, *stront-c.*, *sulph.*, *tab.*, *thuj.*, *til.*, *vario.*, *verat.*, *vesp.*

Agg. Till 5 a.m., with sleeplessness

– ign.

Menopause, during – androc.

Stands, when he, forehead becomes covered with cold sweat, sick to vomiting – *verat.*²

HOMOEOPATHIC MEDICINES

Aconitum napellus

Mind. Great agitation and tossing of the body with anguish, inconsolable irritability, cries, tears, groans, complaints, and reproaches. Sensitive irritability. Fearful anticipations of approaching death; predicts the day he is to die. Sadness. Presentiments, as if in a state of clairvoyance. Anthropophobia and misanthropy; has no affection for anybody. Maliciousness. A strong disposition to be angry, to be frightened, and to quarrel. The least noise, even music. Vexed at trifles; takes every joke in bad part. Dislike to talk; answers laconically. Alternate paroxysms of laughter and tears. Great, inconsolable anxiety. Anxiety respecting one's malady, and despair of a cure. Fear of spectres. Fear of the dark. Disposition to run away from one's bed. Mind, as it were, paralysed, with incapability of reflection, and a sensation as if all the intellectual functions were performed in the region of the stomach. Paroxysms of folly and madness. Unsteadiness of ideas. In the delirium is unhappiness, worry, despair and raving, with expression of fear upon the countenance; but there is rarely unconsciousness. Delirium, chiefly at night; Ailments from fear, fright, vexation.³

Anacardium orientale

Mind. Hypochondriacal sadness, and melancholy ideas. Anthropophobia. Anxiety, apprehension, and

fear of approaching death. Fear and mistrust of the future, with discouragement and despair. Disposition to take everything amiss, to contradict, and to fly into a rage. Frequently screams loudly, as if to call someone; so furious has to be restrained. Manners awkward. State as if there were two wills, one of which rejects what the other requires. Fixed ideas.³

Androctonus - Androctonus amoreuxi herbraeus (Androc.)

- **The** *Androctonus amoreuxi herbraeus* personality has intense anger, violence, emotional detachment, abusive, destructiveness.
- Dominating, competitive and aggressive.
- They respond to danger with immediate fight or flight. High tension, fear, and fright in which the instinct for self-survival overpowers them.
- Can become cruel, compassionless, lose interest in usual occupations, and lose clarity of expression to communicate their emotions and feelings clearly.
- They can feel apathetic, despondent and detached about most things.
- They can feel anxiety about their health as well as generalised anxiety.
- Because they have an inner understanding that this is not their true state of being, they can feel anxiety of conscience in not being able to be compassionate about their families, school, jobs and other things.⁴

Argentum nitricum

Mind.

Mental anxiety. Very impulsive; always in a hurry but accomplishes nothing; in continual motion; he walks fast. Hurries restlessly to fulfil engagements, fears to be late when there is plenty of time. Melancholic; does not undertake anything lest he should not succeed. Impulse to throw herself from the window. Frequent errors of perception; mistakes distances; fears house-corners. Time seems to pass very slowly. Apprehension when ready to go to church or opera, bringing on diarrhoea. Easily angered or excited, anger brings on symptoms, cough, pain, etc. Profound melancholy; imagines if left alone will die; apprehends incurable disease of brain. Nightly nervousness, with heat and fulness in the head. Nervous, faintish, and tremulous sensation. Awful faces appear on shutting eyes. Apathy. Mental operations sluggish; thought requires effort.³

Arsenicum album

Mind. Melancholy, sometimes of a religious character, sadness, care, chagrin, cries and complaints. Anguish, driving one out of bed at night, and from one place to another in the daytime. Restlessness. Great fear of being left alone. Anger, with anxiety, restlessness and sensation of coldness. Anxiety, restlessness, and excessive anguish which allows no rest, principally in the evening in bed, or in the morning on waking, and often with trembling, cold sweat, oppression of the chest, difficulty of breathing, and fainting fits. Anxiety of conscience, as if a crime had been committed. Inconsolable anguish, with complaints and lamentation. Hypochondriacal humour, with restlessness and anxiety. Fear of solitude, of spectres, and of robbers, with desire to hide oneself. Despair;

he finds no rest, esp. at night, with anguish. Despondency, despair, weariness of life, inclination to suicide, or excessive fear of death, which is sometimes believed to be very near. Ill-humour, impatience, vexation, inclination to be angry, repugnance to conversation, inclination to criticise, and great susceptibility. Caustic and jesting spirit. Extreme sensibility of all the organs; all noise, conversation, and clear lights are insupportable. Great apathy and indifference.³

Carbo vegetabilis

Mind. Inquietude and anxiety, esp. in the evening (4-6 p.m.). Fear of spectres, esp. at night. Timidity, irresolution, and embarrassment in society. Despair with lachrymose humour, and discouragement, with desire for death, and tendency to suicide. Disposition to be frightened. Irrascibility and passion. Sudden, and periodical weakness of memory. Slowness of apprehension. Fixed ideas. Aversion to labour.³

Carcinosinum

It is useful in mental cases with a background of fright, prolonged fear, or unhappiness. Fear can come into the picture a great deal, and anticipation. This is an important aspect of *Carcinosinum*.

“*Carcinosinum* appearance” does not always show the kind of family history one almost expects to find. In many instances, there may be a strong family history of cancer, but in others, there may be a strong family history of tuberculosis, of diabetes and pernicious anaemia, or a combination of all these more strongly represented than in the average family; only occasionally there will be no such history.⁵

Causticum

Mind. Mirthfulness sometimes, and soon after, ill-humour. Melancholy and vexatious thoughts, day and night, with tears. Hypochondriacal sadness. Restlessness, apprehension, and great anguish. Anxiety of heart. Fearfulness, especially at night. Afraid at night (in the dark room; the child does not want to go to bed alone). Mistrust of the future. Discouragement. Irrascibility and passion, with great sensitiveness of disposition. Quarrelsome and wrangling spirit. Indisposition to labour. Disposition to be frightened. Weakness of memory. Absence of mind. Tendency to make mistakes when speaking.³

Phosphorus

Mind. Affections of the mind in general; amateness; Anguish and uneasiness, especially when alone, or in stormy weather, principally in evening, with timorousness and fright. Anguish respecting the future; or respecting the issue of the disease. Susceptibility to fright. Fear: in evening; of darkness; of spectres; of things creeping out of corners. Hypochondriacal sadness. Disgust to life. Apathy alternating with angry words and acts. Becomes easily vexed and angry, which makes him exceedingly vehement, from which he suffers afterwards. Any lively impression heat, as if dipped in hot water. Great irascibility, anger, passion, and violence. Involuntary and spasmodic weeping and laughter. Misanthropy. Repugnance to labour. Shamelessness, approaching insanity. Great indifference to everything, and even to patient's own family.³

Psorinum

Mind. Fear. Anxiety: when riding in a carriage; with trembling of hands and restlessness. Melancholy: religious; she could commit suicide, and then is full of phantasms, peevishness, and lachrymation; alternating suddenly with liveliness. Despair: fear of failing in business; wishes to die in spite of the best hopes. Driven to despair by excessive itching. Ill-humour: in morning; and constant thoughts of dying; could weep about everything. Quarrelsome. Every moral emotion trembling.³

Secale cornutum

Mind. Discouragement and timidity. Great anxiety. Sadness and melancholy. Great anguish. Furor, with desire to jump into the water. Madness and inclination to bite. Fear of death. Mania. Weakness of the intellectual faculties (stupid,

half-sleepy condition; moaning). Mental alienation. Delirium. Loss of consciousness. Consciousness seems to continue to the last breath; and just before death it seems as though the patient would improve.³

CONCLUSION

Thus, homoeopathy proves to be highly potent and can be recommended for overcoming fear and anxiety.

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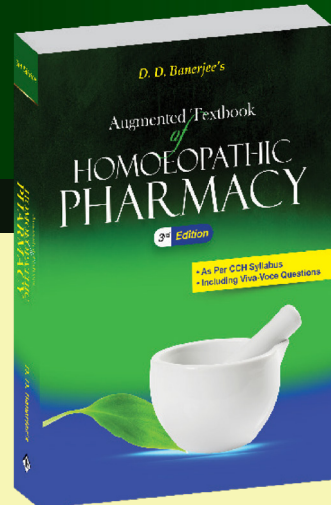
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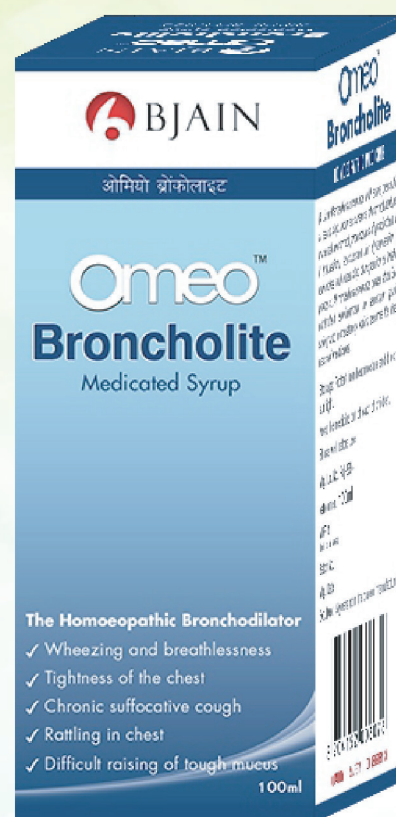
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Senega	Ø	1.6% v/v
Lobelia inflata	Ø	1.6% v/v
Ipecacuanha	Ø	1.6% v/v
Grindelia robusta	Ø	1.6% v/v
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Enlightening homoeopathic pathway in fear and anxiety

By Dr Archana nagar

Abstract: Human mind is rich in imagination, what he imagines, he creates. It is a boon for him in many aspects, but it is a curse on him when it creates fear. He imagines fear, contemplates fear and then fears the fear. This makes his mind more complicated. Fear is a response to a known, external, definite threat, for example, fear of dogs. Anxiety is a response to an unknown, internal, vague threat. For example, anxiety about future. These are one of the main possible causes and agents that makes mankind prone to sickness. This can stop us from experiencing wonderful things coming across our life. The mind is therefore, the beginning of disease and cure. Homoeopathy has unfolded a truth about medicines that they have all the aspects of mind when prepared in potency. So, this is the only system of healing which can affect the whole of man, i.e. physical, mental-intellectual and emotional parts of life.

Keywords: homoeopathy, fear, anxiety disorders, mental symptoms, psora, individualised homoeopathic medicine, constitutional medicine, homoeopathic management

Introduction

Century after century, generation after generation, nature and impact of fear and anxiety are deepening and affecting day to day life. The fear and anxiety responses are nearly entirely autonomic, i.e. not initiated consciously. All attributes of mind are greatly affected by fear, anxiety, worries, etc. so, perversions can be seen all around. When an individual is in danger, he will feel fear, but it normally subsides as he reaches in safe zone. It is a necessary response to physical and mental risk; without it, one would be unable to defend ourselves against valid threats. Fear is a basic human emotion usually defined as a normal response to objects or situations that pose a threat to personal and physical safety, characterised by an outer behavioural expression, an inner subjective distress and associated physiological changes. Anxiety is an alerting agent, characterised by fear and apprehension. It warns the persons about threat and initiates the response to prevent it. This is normal anxiety. Pathological anxiety is inappropriate response in given situation, either by intensity or by duration like it is severe and persisting with extensive degree of

avoidance, subjective distress and impairment. Fear is linked to the behaviours of escape and avoidance, whereas anxiety is related to events that are thought to be out of control or unavoidable. Anxiety disorders cause significant impairment in academic and social functioning of children. Parental anxiety and unhealthy parenting styles can be important predisposing factors. Aetiology is multifactorial with nature and nurture contributing to it.[1]

Fear is an emotion arising from a threat, which may be real or imaginary, can be triggered by things in the outside world and also by mental events like thoughts and images. Even if the things that you are afraid of seem unusual to other people, still there is no reason to believe your fears are abnormal.[2] Children have a number of irrational fears which are common and do not usually handicap the child's ordinary life. Some of these persist into adulthood. If they are so severe that the child's ability to lead an ordinary life is affected, that they feel , exhausted, as a result, the normal growth is stunted, then person might need treatment.[4] In many respects fear and anxiety are

defining features of contemporary society and the tenacity of its clinical manifestations, represents one of the greatest challenges facing mental health research and treatment. Transient fear and anxiety occur in all typically developing children. Children may not recognise fear or anxiety as unreasonable, they may present school refusal, somatic complaints, dissociative (conversion) symptoms, poor academic performance, poor social interaction or tantrums, etc. Symptoms can be cognitive, such as nervousness, fearfulness, self-defeating thoughts or difficulty concentrating or behavioural which includes excessive shyness, avoidance; reluctance or restlessness; and/or autonomic disturbance most commonly sweating, tremulousness, hyperventilation, palpitation, etc.[2]

The pioneers of homoeopathy have always laid stress on the consideration of mental symptoms on priority. Dr Samuel Hahnemann said that the psora is the real cause of all diseases. As psora is the source of seven-eighth of the diseases, fear is the main pivot around which majority of mental

symptoms revolve. Psoric fear is manifested by anxiety whereas sycotic fear is manifested by out word expression and syphilitic fear by anguish. Man was susceptible to many things, which made him sick, which made him diseased. Physical sickness was next in sequence to mental evils. As a protective factor, primary prevention should focus on enhancing child's coping skills. Best eliminator of fear is faith, confidence that engenders calm, but in as much as the physiological systems of the body are deeply involved suitable medication is frequently called for. The disorder of thinking makes a physical reflection that was a primary appearance of psora.^[3-5] In this form the disorder first came in the mind and then reflects in the body and man acquires the susceptibility to disease. The disease and cure first comes in the interior, in the centre of his being, in the mind, in his thought, feeling and will, and then it gradually spreads to external body. Today, the new aspect of medicine called psychosomatic explains about how frustration and fears, anger and hatred form the aetiological background for most of the chronic diseases, because people are afraid of so many things, it may appear that each one requires a unique treatment. Internal homoeopathic medicine often proves to be the best natural option to help treat such conditions. These medicines work by treating the whole patient, and not just the symptoms since the human body functions as one unit.^[6]

Different repertories contain large variety of fears and anxiety rubrics, and all are of great value in the search for the simillimum. For example, in synthesis repertory, anxiety rubric contains 266 medicines, whereas fear contains 529 medicines.^[7] Some remedies which frequently came in repertory charts are *Aconitum*

napellus, *Arsenicum album*, *Argentum nitricum*, *Carcinosinum*, *Calcarea carbonicum*, *Gelsemium sempervirens*, *Phosphorus*, *Stramonium*, etc. A few bach flower remedy can also be used for fear and anxiety such as- *Mimulus*, *Aspen*, *Cherry plum*, *Rock rose*, *Sweet chestnut*, *White chestnut*, *Walnut*.^[8]

Indications of some common medicines are:^[9,10]

Aconitum napellus- For intense, sudden anxiety with fear of death, panic connected to past trauma or fear. With symptoms- dry skin, dry mouth, and fast heartbeat. The person may fear death and believe that he or she may die soon, going so far as to predict the day of demise.

Agaricus muscaris- **For** fear of disease, especially cancer. The affected person may be pre-occupied with thoughts of death, dying and graveyards.

Argentum nitricum- For anxiety due to uncertainty could be accompanied with digestive disturbance, like diarrhoea, and sweets cravings; fear of heights, or fear of everyday things.

Arsenicum album- For anxiety due to fear of loneliness, darkness or being imperfect; may relieve anxiety through control or criticism of others; For fear of death with restlessness.

Aurum metallicum- **For** fear of failure with marked hopelessness. The person experiences acute mental depression, the future looks black, and a feeling of being unfit or undeserving may prevail.

Calcarea carbonica- For fear of breaking out of any safe routine. Anxiety worsens when plans are changed, and they show difficulty in "going with the flow". Patients are

similar to arsenic.

Gelsemium sempervirens- Anxiety due to feelings of inadequacy. People are often timid and shaky; have Stage Fright, so avoid crowds or public speaking, and be vulnerable to fainting.

Hyoscyamus niger- **For** fear of eating or drinking coupled with delirium; anxiety on hearing the sound of running water.

Ignatia amara- For anxiety from grief or loss. It is also recommended for depression.

Kalium arsenicosum- Health-based anxiety; **for** fear of contracting a life-threatening disease like of having a stroke, heart disease or high blood pressure. Conditions include hypochondria, excessive grooming, fear of heart attacks. Also, for fear of death or dying especially on going to bed. They can be prone to feeling cold and vulnerable to panic attacks.

Kalium phosphoricum- Their anxiety stems from having too much to do or ambitions that are daunting. Their anxiety tends to take a physical toll on them as well.

Kreosotum- For fear of sex and intimacy in women.

Lycopodium clavatum- Similar to *Gelsemium sempervirens* (who lack self-confidence). Though they fear speaking in public and have stage fright, they hide it well. For fear of failure with weak memory.

Lyssinum- **For** fear of water coupled with anxiety, where a person wants to drink water but is unable to do so.

Phosphorus- For social people with anxiety. When anxious or vexed, their thoughts get scattered and they have a difficult time focusing or getting things done. Their

anxiety may be tied to a need for approval in social circles or from romantic partner. For fear of open places wherein the person fears of mishappening.

Pulsatilla nigricans- For people with childlike anxiety. They may need lots of reassurance and support from others to feel better. **It is** used to treat fear of closed spaces coupled with the desire to seek open air.

Silicea terra- *Silicea terra* is much like *Gelsemium sempervirens* and *Lycopodium clavatum*. People who fear experiencing new things, talking in front of people, and getting a lot of attention. They tend to become workaholics to soothe their fears.

Staphysagria- For fear of sex with suppressed sexual desire. The tendency to fear sex may sprout from a feeling of being out of control, or with a history of rape or sexual abuse.

Stramonium- For anxiety that also includes night terrors, nightmares, or dark thoughts while awake. Often scared of darkness or being alone, by thoughts of monsters or mysterious figures. Their imaginations tend to worsen their anxiety. Fear with desire to escape.

CONCLUSION

Homoeopathy counsels a thorough study of a patient and individualises him, elicit the miasmatic phase of his sickness, mental state, constitution and the full consideration of each of innumerable aspect detrimental of his diseased condition. In today's time, where there is fast life, hurried-worried people find it difficult to cope with stressful situations. These events trigger the disease in a predisposed individual. When selecting a homoeopathic medicine for fear and anxiety, one always needs to choose the remedy which most closely resembles our emotional state. Homoeopathic constitutional treatment help in eliminating fear and anxiety, prevent relapses as well as rebuild self-esteem and self-confidence. It offers safe, gentle, non- toxic remedies, administered with holistic principles working for individuality. As human body functions as one unit, and a disorder in one part can affect another. As homoeopathic medicines work by treating the whole patient, it brings harmony with synchronising of all aspects of human body.

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A comparative study of fear and anxiety with repertorial aspect

Dr Kanan Bhatt

Abstract: Fear and anxiety are most frequently used by each and every one of us. These two words have become part and parcel of medical practise as well as laymen people, especially because of the COVID period faced recently by each one of us. Sometimes, it is difficult to demarkate the line between fear and anxiety. Repertory is subject which is there in existence after materia medica and organon. For comparative and differentiating study, repertory can help us to study different medicines indicated for both fear and anxiety as well as to compare the medicines given in each rubric.

Keywords: fear, anxiety, rubric, repertory, comparison.

Introduction

Anxiety and fear are words often used interchangeably, but they are not the same.

The biological and evolutionary purpose of core emotions, like fear, is to help to survive. Fear specifically makes an individual flee from danger.

Anxiety, an inhibitory emotion on the change triangle, results from avoiding core emotions and needs. More specifically, anxiety results from the physical effort to push down emotions. If it is known that there is no physical danger at the moment, yet the individual is experiencing something akin to fear, he can assume that he is experiencing anxiety.

In general, the amount of anxiety one experiences is linked to his early experiences with emotions. It's important to understand the difference between fear and anxiety because the way one works through these two emotions is different⁽¹⁾.

anxiety

According to research from the University of California, we can experience 27 distinct emotions. Many of these are so similar that they're hard to identify when we experience them.

Fear and anxiety are another example of emotions that can be easily confused. They produce similar physiological effects, and are unpleasant to experience. So how does one tell them apart? What's the difference between fear and anxiety?

Every emotion produces physiological and psychological effects that we can identify if we pay attention. Fear is an emotion that evolved to keep the individual safe, and is the reason that our species survived. A million years ago, if a human living on the Chinese continent saw a flash of black and orange, their heart would start pounding, their body would become doused with sweat, and they might struggle to breathe, which alerts them to the fact that they'd better get ready to fight the approaching tiger, or fly from it.

as a way to protect us from future danger—about the possibility of us being ravaged by a tiger, rather than the reality. Our human who encountered the tiger may develop a sense of anxiety when returning to the same spot, because there's a chance he's entered the tiger's territory, which may be watching him and licking its lips. As a result, he may decide to avoid the spot next time, which increases his chance of survival.

Fear produces some of the most obvious effects because it's critical for us to pay attention to it (with the exception of someone suffering from a mental health condition such as a panic disorder, or post-traumatic stress disorder). Anxiety also produces strong effects, but many of them are the same as fear, which can make it difficult to distinguish. But there are some clear differences between the two, particularly for how we behave. In the table below, the physiological, psychological, and behavioural effects of anxiety vs fear are mentioned, to help to identify one's feeling.

Difference between fear and

Anxiety is thought to have evolved

Effects of fear v/s anxiety

	Fear	Anxiety (<i>differences italicised</i>)
Physiological (body)	<ul style="list-style-type: none"> • Sweating • Rapid heartbeat • Quick breathing • Shortness of breath • Trembling • Nausea • Goosebumps • Tight chest • Hot flushes or chills • Dry mouth • Upset stomach 	<ul style="list-style-type: none"> • Sweating • Rapid heartbeat • Quick breathing • Shortness of breath • Trembling • Nausea • Tight chest • Hot flushes or chills • Upset stomach • <i>Dizziness</i> • <i>Headaches</i> • <i>Muscle pain</i>
Psychological (mind)	<ul style="list-style-type: none"> • A sense of doom • Feeling overwhelmed • Feeling out of control • Feeling detached from your body • Unable to think clearly 	<ul style="list-style-type: none"> • A sense of doom • Feeling overwhelmed • Unable to think clearly • <i>Excessive worry</i> • <i>Catastrophizing</i> • <i>Obsessive thinking</i> • <i>Restlessness</i> • <i>Racing thoughts</i> • <i>Irritability</i> • <i>Fatigue</i>
Behavioural	<ul style="list-style-type: none"> • Running away or hiding (flight response) • Freezing (freeze response) • Clenched fists • Violent behaviour 	<ul style="list-style-type: none"> • Unable to sit still • Social withdrawal • Easily startled • Difficulty performing everyday tasks • Alcohol and drug usage

Fight or flight—anxiety or fear?

The fight or flight response is how the body reacts to extreme fear, triggering a choice between fighting the threat before us, or running away from it. This response is extreme, easily identifiable, and is in the realm of fear rather than anxiety⁽²⁾.

Repertory

The following table presents the terms and related understanding of rubric and and its importance. If one observes in

repertory, both the words are given as a separate rubric and cross reference is given as well.

A rubric is a 'symptom' in the reportorial language. Hence, like a symptom, a rubric has many dimensions, facets, aspects, levels, stages and transitions. And being a language, one must know the meaning of the words used in the language.

The table summarises the very

basic,important and fundamental repertory – *Kent Repertory* rubrics of both fear and anxiety both. And further if one considers the sub rubric and remedies under each sub rubric, there are many similarities in both type of sub-rubrics and remedies under each sub rubric⁽³⁾.

Fear ⁽⁴⁾	Anxiety ⁽⁴⁾
daytime, only : Lac-c., mur-ac., sul-ac	daytime : Ambr., ant-c., <i>bell.</i> , caust., chin-a., laur., mag-c., mang., merc., nat-c., nit-ac., phyt., plat., psor., puls., ruta., sul-ac., zinc.
rising, on : Arg-n. waking, on : Puls. forenoon : Am-c. afternoon : Aeth., am-c., ant-t., berb., carb-an., carb-v., cast., dig., mag-c., nat-c., nicc., <i>nux-v.</i> , stront., <i>sulph.</i> , <i>tab.</i> 4 p.m. : Tab. air, in open : Anac., <i>hep.</i> , nux-v. amel. : Plat., <i>valer.</i>	

<p>evening : Alum., <i>am-c.</i>, anac., ant-t., <i>ars.</i>, bar-c., brom., calad., Calc., carb-an., <i>carb-v.</i>, Caust., coc-c., <i>cupr.</i>, dig., <i>dros.</i>, form., hep., hipp., <i>kali-ar.</i>, <i>kali-c.</i>, kali-i., kali-p., lach., <i>lyc.</i>, <i>mag-c.</i>, mag-m., merc., nat-a., nat-c., nat-m., nit-ac., nux-v., paeon., petr., <i>phos.</i>, plat., Puls., ran-b., <i>rhus-t.</i>, stront., tab., valer., <i>zinc.</i></p> <p>amel. : Mag-c.</p> <p>twilight : Berb., <i>calc.</i>, <i>caust.</i>, kali-i., <i>phos.</i>, Puls., rhus-t.</p> <p>night : Am-c., arn., <i>ars.</i>, <i>bell.</i>, <i>calc-s.</i>, <i>calc.</i>, Camph., carb-an., <i>carb-s.</i>, <i>carb-v.</i>, <i>caust.</i>, cham., chin-a., <i>chin.</i>, cocc., colch., con., <i>crot-c.</i>, dros., dulc., eup-per., graph., hep., ign., ip., <i>kali-ar.</i>, kali-c., <i>lach.</i>, <i>lyc.</i>, <i>mag-c.</i>, manc., <i>merc.</i>, nat-c., <i>nat-m.</i>, <i>nat-p.</i>, nit-ac., ph-ac., phos., <i>puls.</i>, Rhus-t., rob., sil., spong., stann., stram., <i>sulph.</i>, tab., thea., zinc.</p> <p>chill, during : Calc., carb-an.</p>	<p>rising, on : Arg-n., mag-c., rhus-t.</p> <p>waking, on : <i>Alum.</i>, anac., carb-an., <i>carb-v.</i>, <i>caust.</i>, chel., <i>chin.</i>, cocc., Graph., ign., ip., Lach., <i>lyc.</i>, mag-c., mag-m., mag-s., nat-m., nit-ac., <i>nux-v.</i>, <i>phos.</i>, plat., puls., rhus-t., sep., squil.</p> <p>forenoon : Acon., alum., alumn., am-c., bar-c., calc., canth., clem., <i>lyc.</i>, <i>nat-m.</i>, paeon., plat., ran-b., sars., sulph.</p> <p>afternoon : Aeth., am-c., arg-n., bell., bov., cact., calc., carb-an., carb-v., crot-t., cupr., gamb., kali-n., mag-c., mag-m., nat-c., nit-ac., nux-v., ph-ac., phel., phos., puls., rhus-t., ruta., stront., tab., zinc.</p> <p>4 p.m. : <i>Lyc.</i>, tab.</p> <p>air, in open : Acon., anac., ant-c., arg-m., bar-c., bell., cina., hep., ign., lach., plat., spig., tab.</p> <p>amel. : Alum., arund., <i>bry.</i>, <i>calc-s.</i>, <i>calc.</i>, Cann-i., carl., grat., Kali-s., laur., <i>lyc.</i>, <i>mag-m.</i>, <i>puls.</i>, <i>rhus-t.</i>, spong., <i>til.</i>, valer., verat.</p> <p>evening : Acon., agar., <i>alum.</i>, am-c., <i>ambr.</i>, anac., ant-t., Ars., bar-c., <i>bar-m.</i>, bell., <i>bor.</i>, bov., bry., cact., calad., Calc-s., Calc., carb-an., <i>carb-s.</i>, Carb-v., <i>caust.</i>, chel., <i>chin-a.</i>, chin., <i>cina.</i>, cocc., coff., colch., Dig., <i>dros.</i>, <i>fl-ac.</i>, graph., <i>hep.</i>, hipp., hura., kali-ar., kali-c., kali-i., kali-n., kali-p., kali-s., lact., <i>laur.</i>, <i>lyc.</i>, mag-c., mag-m., <i>merc.</i>, mez., mur-ac., nat-a., nat-c., <i>nat-m.</i>, nat-p., <i>nit-ac.</i>, nux-m., <i>nux-v.</i>, paeon., petr., <i>phos.</i>, plat., <i>puls.</i>, ran-b., <i>rhus-t.</i>, ruta., sa-bin., Sep., sil., spig., <i>stann.</i>, stront., Sulph., tab., verat.</p> <p>amel. : Am-c., chel., mag-c., sul-ac., verb., zinc.</p> <p>twilight, in the : Ambr., <i>ars.</i>, <i>calc.</i>, <i>carb-v.</i>, <i>caust.</i>, dig., laur., nux-v., <i>phos.</i>, <i>rhus-t.</i>, sep.</p>
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Conclusion

Thus, fear and anxiety being very similar if one considers the medicines mentioned in each rubric. But if one notices sub-rubric of each rubric - fear and anxiety, one can get better view in terms of basic difference of these two terms which are also given as cross reference to one another.

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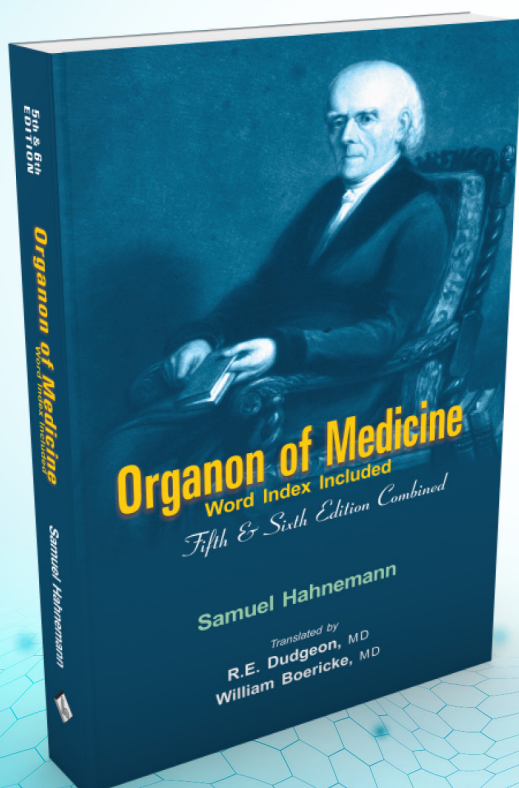
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Anguish of a cheated wife

Dr Vaishali P. Joshi

ABSTRACT: The case highlights the role of sensitivity, reactivity and adaptability in a situation of a lady cheated by her husband. Her perception of her husband's action followed by her reaction to the situation affected her at mind and body level. A proper differentiation of the emotional states, viz. anxiety and fear are understood through the case. The journey of the selection of simillimum is based on the core feelings of the patient represented by selection of appropriate rubrics. The simillimum is thoroughly differentiated with the help of repertorisation and contribution of materia medica references.

Keywords: fear, trembling, Staphysagria, indignation.

Abbreviations: IBS – irritable bowel syndrome

A/F – ailments from

< - aggravation

>- ameliorated, better

K/c/o – Known case of

w/n/l – within normal limits

BP – blood pressure

ICD –

Const. – constitutional

Rx - treatment

Introduction

Fear and anxiety are very close coming states and need to be differentiated in the patient ^(1-a). fear is an emotional disturbance caused due to presence of a known ,specific source of threat/danger and in it's absence, patient feels normal. the source is external here. Whereas in anxiety, the source of emotional disturbance is general, non specific(1-b). The patient feels

the disturbance irrespective of the presence or absence of any source/ stimuli. it is an internal source. this case is selected to highlight the presentation of fear . the inclusion of the causative factor along with the reactions produced, help to individualise the patient and reach the simillimum which is in capacity to annihilate the cause of ill health and restore the health.

Case synopsis

Patient had come to me in the year 2013 for the treatment of IBS then. She was better after taking my homoeopathic treatment regularly for 9-10 months. After that, she would approach me occasionally for any acute complaints randomly. Last year, she had come for treatment of amoebiasis.

Case study

Dated – 28/01/2022

Preliminary information

Name : Mrs. B.S

Age: 55 years

Sex: female

1. Chief Complaints

Location	Sensation	Modalities	Concomitance
Mind Since 15 days	Fear with anger, Fear of husband, Continuous dwelling on it, Unable to do any work Uneasy feeling, Unable to speak though want to, Tension+3	A/f threatened to throttle A/f anger suppressed, <+3 husband's presence <+3 thinking about threat <+3 nagging of husband >+3 husband's absence	Shivering+3, palpitations+3, Sensation of heat throughout the body, Appetite – 0, Sleep in fear

3.Past illnesses – ` K/c/o IBS >
homoeopathic treatment

4.Family history – nothing specific

5. Patient as a person

1. **Appetite:** no appetite
2. **Craving :** non.vegetarian+3
3. **Aversion :** milk and milk products, green vegetables
4. **Perspiration :** general
5. **Sleep :** slept in fear.
6. **Dreams :** not remembered

Personal history

She was a medium height, moderately-built lady who carried herself properly.

Patient was very particular about everything, very creative. Liked to do gardening . She ws an introvert lady and talked less. Most of the times, she preferred her own company.

6. Life space : [rubrics derived ⁽³⁾ are written in italics in bracket]

It so happened that 15 days back, patient had a heated argument with the husband. Husband was very angry and threatened to throttle the patient. Patient was frightened after this and kept quiet [*(A/F FRIGHT) (fear, murdered of being)*], but, inside she was very angry with husband. She felt like telling him everything that she had in her mind but was unable to speak anything. She was always in the fearful state since then and harboured a lot of anger against husband which she had to suppress inside out of fear of husband's temper (*Anger, suppressed controlled*). She dwelled on it continuously and the thought of it also frightened her [*(Dwells, events on past disagreeable)(brooding)*]. She would feel uneasy and uncomfortable in the body (*Excitement, excitable:alf,aggravates*). The whole body shivered (*anger,trembling with*) and became warm as if having fever though there was no fever. She felt that her body was not normal

[*(ANGUISH)(Anger; alf,aggravates: suppressed)*]. she was unable to do anything, even the household work (*work, impossible; indignation aggravates*). Therefore, sought help

from physician to become normal the earliest. Patient used to feel relieved when the husband was not at home and fearful in his presence. Patient shared that her husband had an extramarital affair in past. After knowing this, she felt her husband disrespected her by cheating on her. Since then, patient was always angry out of the thought of being cheated and deceived by husband but suppressed this anger everytime (*Ailments from, deceived from being*). Patient was very conscious about their honour in the society and hence hid the husband's extramarital affair fact from everyone including the family members.

Physical examination : temperature/pulse/BP – within normal limits

ANALYSIS -

the prominent features are ailments from fear with suppressed anger to keep honour intact. While controlling anger, she comes down with physical symptoms like shivering, palpitations and warmth in the body making her uneasy, uncomfortable. Also, she feels relaxed when husband has gone out and fear comes up in his presence. As per the understanding of fear and anxiety from the introduction

of this article, this is the case of specific fear and the husband is the reason of fear. We can differentiate this from anxiety in which the source of emotional disturbance is general, not specific. The underlying suppressed anger with continuous dwelling over it Fearful from husband's threat, giving her a sense of danger.

Provisional clinical diagnosis : ICD 10 CODE specific phobia F 40.24 ^(1-c)

Totality – ⁽³⁾

1. A/F FRIGHT
2. Fear, murdered of being
3. Anger, suppressed controlled
4. Dwells, events on past disagreeable
5. Brooding
6. Excitement, excitable: A/f, aggravates
7. Anger, trembling with
8. Anguish
9. Anger; A/f, aggravates: suppressed
10. Work, impossible; indignation aggravates
11. Ailments from, deceived from being
12. Excitement, excitable; palpitations: with

Repertorization

Keywords for Quick Repertorisation	Record	Clear	Symptoms:	16	Remedies:	1257	Prescribe						
Remedy Name	Staph	Nat-m	Plat	Ign	Aur	Cham	Lyc	Sep	Hep	Kali-br	Chin	Ambr	
itality	33	25	23	22	19	19	17	17	16	16	16	15	
Symptoms Covered	16	8	8	7	8	8	8	8	7	7	6	6	
Indom													
complete] [Mind]Anxiety:Health, about:Insults, offenses, after: (1)	3												
complete] [Mind]Restlessness, nervousness:Indignation agg.: (1)	1												
complete] [Mind]Work:Impossible:Indignation agg.: (1)	1												
complete] [Mind]Anger:Ailments from, agg.:Suppressed: (37)	4	3		3	3	3	4	1	1	1			
complete] [Mind]Anger:Trembling, with: (36)	3		3		3	1	1	3				3	
complete] [Mind]Anger:Suppressed, controlled: (39)	1	2		1	1	1	1				1		
complete] [Mind]Brooding: (194)	3	4	3	4	3	3	1	3	3	3	3	3	
complete] [Mind]Delusions, imaginations:Disgraced:She is: (8)	1		1										
complete] [Mind]Delusions, imaginations:Persecuted, that he is...	1	1		3	1		1			3	4		
complete] [Mind]Dwells:Events, on past disagreeable: (121)	3	4	3	3	1	3	1	3	3	3	3	3	
complete] [Mind]Embittered, exasperated:Agg., ailments from: (9)	1	3						1	3				
complete] [Mind]Excitement, excitable:Ailments from, agg.: (1247)	4	4	4	4	4	4	4	4	4	4	4	4	
complete] [Mind]Excitement, excitable:Palpitation:With: (26)	1		3			1			1			1	
complete] [Mind]Excitement, excitable:Ailments from, agg.:Supp...	4	4	3	4	3	3	4	1	1	1	1	1	
complete] [Mind]Fear:Murdered, of being: (34)	1		3							1			
complete] [Mind]Fear:Social position, of: (7)	1							1					

Differential remedies

Natrum muriaticum, *Platina*, *Aurum metallicum*, *Chamomilla*, *Sepia*, *Staphysagria*. ⁽³⁾

Natrum muriaticum – Ailments from suppressed anger but no palpitation, trembling, etc.

Platina – Doesn't control the anger. *Platina* expresses the anger. Hence, does not have symptoms which are due to suppressed anger.

Aurum metallicum - suppressed anger leaves more of remorse than embittered feeling. *Aurum* always feels that he is responsible for everything untoward that happens.

Chamomilla – it has the embittered feeling due to suppressed anger. It

is uncivilized in behaviour when excited/angry.

Sepia – it does not cover the palpitation, trembling due to suppressed anger. it also does not have indignation. it shows more of indifference.

Staphysagria – it covered the whole totality. Ailments from suppressed anger and feeling of disgrace and disrespect being at the core of it with the presenting complaints of palpitation, trembling, etc. was covered by *Staphysagria*. 'Nervous affections with trembling is a marked feature of this remedy' says Dr S.R. Phatak.^(2-b) It has the tendency to get excited and disturbed easily but will never manifest it as he would not want to fall on respect by behaving uncivilised. His behaviour will always safeguard his honour in

the society. For this, he will control his anger and become speechless due to this pent up anger leading to indignation and other complaints.^(2-a) All the major source books include the symptoms in the totality.

Posology⁽⁴⁾ :

Complete psyche and soma correspondence of remedy with patient. Very high sensitivity marked. Characteristic symptoms available. Reactivity and vitality were very high. No history of any other serious pathologies available at mental/physical level. Signs and symptoms available at physical level. Therefore, high potency to be given infrequently.

Final prescription : *Staphysagria* 200/ one dose at night. Report follow-up after 5 days.

Follow-up – Patient was sent the medicine which she received on 1/2/22. The immediate followup was after 5 days and the patient reported

complete relief of all the physical complaints. Appetite improved. The fear was no more and more relaxation experienced by patient.

Complained of loose stools for 2 days which was better then. Details of the follow-ups are stated below.

Date	Description	Action
5/2/22	Felt feverish today and family members came down with fever since 3-4 days. No episode of fear after taking medicine from 1/2/22 till now.	Saccharum lactis/ 3 times a day
15/2/22	Loose motions after eating stale food. Watery, offensive +3 stool. Weakness+3	Saccharum lactis/ 3 times a day
4/3/22	Loose motions >3, 3-4 episodes of fearful feeling occasionally in between with less intensity and lasted few minutes only	Saccharum lactis/ 3 times a day
30/6/22	Phone call for an acute episode of loose motions. no fear episodes after 4/3/22.	Saccharum lactis/ 3 times a day

CONCLUSION :

Though superficially, the presentation of patient is found in many remedies, the basic core of the patient differentiates the remedy and we can reach the simillimum.

Causative factor and the reaction pattern belongs to the core and helps in individualisation.

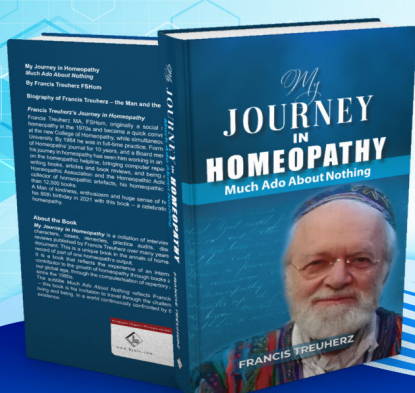
Finer aspects of patient's core feelings helped in remedy differentiation and proving the efficacy of homeopathy in cases of anxiety and fear.

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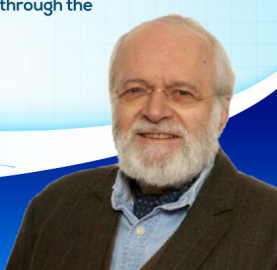
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- FRANCIS TREUHERZ -



Homoeopathic approach in management of parkinson's disease

By Dr Pragya Sharma

ABSTRACT: Parkinsonism or parkinson's disease is a degenerative disorder of the nervous system results from neurochemical imbalance in the basal ganglia resulting in motor function disturbances. The following article aims at explaining various homoeopathic medicines which can be useful in treating parkinson's disease.

Keywords: parkinson's disease, parkinsonism, parkinsonian syndrome, homoeopathy

Abbreviations: AIDS – acquired immunodeficiency syndrome, CT – computed tomography, MRI – magnetic resonance imaging

Introduction

Parkinsonism is a slowly progressive degenerative condition of extrapyramidal system, occurring due to deficiency of the neurotransmitter dopamine, resulting in disturbance of motor functions characterised by tremors, muscular rigidity, bradykinesia and postural disturbances.^(1,2)

The clinical manifestations of this syndrome was first described by James Parkinson, in a paper entitled 'Essay on shaking palsy', in 1817.⁽³⁾

AETIOLOGY

The cause of disease is unknown. It commonly affects people of more than 60 years age group and Male sex preponderance.

Secondary causes may be:

- (i) Infection- AIDS, encephalitis, cysticercosis, etc.
- (ii) Vascular- atherosclerosis and hypertension
- (iii) Drugs- reserpine, metoclopramide, etc.
- (iv) Head injury
- (v) Degenerative- alzheimer's disease, pick's disease, etc.
- (vi) Genetic conditions – Huntington's disease.^(1,2)

PATHOGENESIS

Loss of pigmented cells and deposition of lewy bodies in locus coeruleus, followed by substantia nigra

This results in degeneration of nigro striatal pathway

(These cells normally synthesise dopamine)

Dopamine level in striatum gets depleted

(Dopamine: major chemical pathology in parkinson's disease)

Degeneration of non-dopaminergic neurons occurs

(Later in the course of disease----contributes to non-motor features).^(2,4)

CLINICAL FEATURES

Onset is insidious and presentation is usually asymmetrical.

Typical features of parkinson's disease include:

TREMOR –

- Present at rest (at a rate of 4-6 per second) but absent during sleep.
- Diminished on action

- Starts in fingers/thumb and may affect arm, leg, feet, jaw and tongue.
- In late cases: tremor of jaw, tremor of tongue, generalized tremor (paralysis agitans).^(1,2)

RIGIDITY-

- Stiffness of muscles with increased tone.
- Starts in hand and wrist muscles and later involves neck, trunk, limbs.
- Cog wheel rigidity-movement of joint interrupted by short jerks. Elicited at wrist and elbow when tremor is present.
- Lead pipe rigidity (Late feature)- Increased muscle tone throughout range of movement.⁽²⁾

BRADYKINESIA-

- Slowness of movements (slow walking, slow speech).
- Difficulty in initiating movement (difficulty in writing, speaking).
- Impaired fine movements (needle work, fastening buttons, tying shoe laces).
- Micrographia- causing small hand-writing.^(1,2,4)

POSTURAL DIATURBANCES-

- Stooped forward as if about to fall and squatting leads to backward fall.
- Flexion of neck, trunk and limbs.
- Difficulty in getting up; turning from side to side; turning head

to one side.

- Shuffling gait: Walk with quick, slow, short steps
- Festinant gait: Progressive steps become faster.^(1,2,4)

FACE- expressionless, fixed staring look, infrequent blinking.^(1,4)

NON-MOTOR SYMPTOMS-

depression, anxiety, cognitive impairment, constipation, insomnia and excessive sweating.^(1,2,4)

STAGING: HOEHN AND YAHR SCALE

This scale can help in assessment of severity of disease and deciding the line of management.⁽²⁾

STAGE I	Unilateral involvement
STAGE II	Bilateral involvement but no postural abnormalities.
STAGE III	Bilateral involvement with mild postural imbalance; patient leads an independent life.
STAGE IV	Bilateral involvement with postural instability; the patient requires substantial help.
STAGE V	Severe, fully developed disease; the patient is restricted to bed and chair

INVESTIGATIONS

Diagnosis is based on clinical symptoms and there is no definitive test to confirm parkinson's disease. CT scan or MRI to exclude other diseases.⁽¹⁾

MANAGEMENT**GENERAL MANAGEMENT:**

- Encourage patient to continue his work and maintain mobility.
- Maintain good general health.
- Physiotherapy and regular exercises to prevent rigidity and abnormal posture.
- Speech therapy may help dysarthria and dysphonia.
- Avoid mental stress and exertion.
- When patient is bed-ridden:- good nursing care; good hygiene; adequate bowel and bladder care should be provided.^(1,4)

ALLOPATHIC DRUG THERAPY:

The main treatment is levodopa which is effective at improving bradykinesia and rigidity.⁽¹⁾

HOMOEOPATHIC MANAGEMENT:

According to *Organon of Medicine* aphorism 44, parkinson's disease can be a complex disease and managed successfully with Hahnemannian principles mentioned in *Organon of medicine*.

Here are some useful homoeopathic medicines which may be helpful in management of parkinson's disease:

AGARICUS MUSCARIUS:

It is indicated when Involuntary movements are present while awake but cease during sleep. Chorea from simple motions and jerks of single muscles to dancing of whole body. Gait is uncertain and patient stumbles over everything in the way. Twitching of eyelids and muscles around ear.^(5,6)

ARGENTUM NITRICUM:

It can be useful for ataxia (loss of muscle co-ordination), trembling and awkwardness. Patient walks and stands unsteadily especially when he thinks himself unobserved. Patient feels great weakness of lower

extremities and trembling with general debility and cannot walk with eyes closed.^(5,6)

AVENA SATIVA: Useful remedy for nervous tremors in aged, paralysis agitans, chorea and reduced strength of hands.^(5,6)

CAUSTICUM:

It is useful for restless legs at night, patient must move them constantly but motion does not relieve.^(5,6)

CUPRUM METALLICUM: This medicine can be useful in spasmodic affections and cramps which begin in the fingers and toes and spreading over entire body. Also useful for chorea brought on by fright.^(5,6)

GELSEMIUM:

Main theme of this medicine is dullness, dizziness, drowsiness and trembling. Patient feels weakness and trembling of tongue, hands, legs and of entire body. Patient is confused and there is lack of muscular co-ordination and muscles refuse to obey the will. Also useful for writer's cramp, cramp in muscles of forearm.^(5,6)

MANGANUM ACETICUM:

Indications of this medicine are muscular twitching, cramps in calves and Stiffness in muscles of legs. Peculiar slapping gait, walks on the metatarso-phalangeal joint. Walks stooping forward and tendency to fall forward. Paralysis agitans.^(5,6)

MERCURIUS SOLUBILIS:

The patient feels great weakness and trembling of extremities especially hands, from great exertion. Perspiration is profuse, but does not relieve, may even increase the suffering. Paralysis agitans. Aggravation at night.^(5,6)

MYGALE LASIODORA:

This medicine can be useful where symptoms like twitching of muscles of face and constant motion of whole body are present. Gait is unsteady. Limbs drag while walking. Better during sleep. Aggravation in the morning.⁽⁶⁾

PLUMBUM METALLICUM:

It is useful remedy for progressive muscular atrophy. Paralysis of single muscle. Patient cannot raise or lift anything with the hand. Extension

is difficult and paralysis from overexertion of the extensor muscles in piano players. Also useful for cramps, twitching, tremor, pain or numbness in limbs. Aggravation at night, motion. Better from rubbing and hard pressure.^(5,6)

ZINCUM METALLICUM:

It is indicated for restlessness and depression. Lameness, weakness, Trembling and twitching of various muscles (chorea); of hands while writing is present. Continuous motion of feet, he cannot keep still. Automatic motion of hands and head or one hand and head. Chorea from fright or suppressed eruptions. Great relief from discharges.^(5,6)

CONCLUSION

There are many more remedies for parkinson's disease in homoeopathy. With selection of similar remedy based on totality of symptoms we can successfully manage such cases. Patients having early and moderate stages can be well managed with homoeopathic medicines. Homoeopathic medicines may not cure the incurable parkinson's disease but can lessen the complications. So proper case taking according to homoeopathic

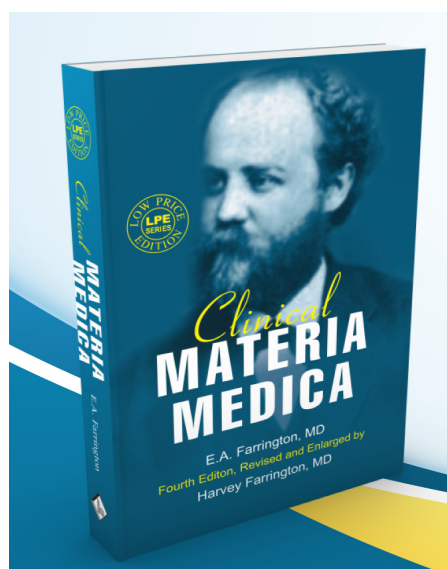
principles is required for treating the patient as a whole. Counselling and rehabilitation also play a major role in management of this disease.

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Managing fear and anxiety with fearless homoeopathy

By Dr Krupa Patel

ABSTRACT: Emotions are true expression of human beings without them living man is incomplete and absolutely abnormal. Among these emotions fear and anxiety are commonly experienced expression of internal environment of human body. Homoeopathic medicines are capable of producing emotional changes in mind and thus they can easily cure such fears and anxieties of patients in the most harmless way.

Keywords: Parkinson's disease, parkinsonism, parkinsonian syndrome, homoeopathy

Abbreviations: AIDS – acquired immunodeficiency syndrome, CT – computed tomography, MRI – magnetic resonance imaging

Introduction

When emotions are experienced in form of reaction towards any successful stimulus in adequate degree it is not terrible at all. Some times emotions such as fear and anxiety are experienced without any kind of stimulus and are of exaggerated manner which hampers healthy routine of person is abnormal and it needs homoeopathic attention for cure.

Brain and emotions :

Number of structures in the core of the brain are directly involved in regulating and coordinating the activity patterns characteristic of the stronger emotions such as fear, anxiety, anger, pleasure, etc. These core parts include hypothalamus and limbic system. Damage to these parts can develop major emotional disturbances [1]. Instead of that there are number of causes for development of fear and anxiety most likely to be bad experiences in past, drugs and alcohol consumption, environmental stress and somewhere genetic factors as well. **Miasmatic correlation of fear and anxiety:**

Fear and anxiety are mostly belonging from psoric miasm. Peculiarity of the mental state is anxiety. They are anxious to the point of worry and fear, fear that they will not be able to accomplish

what they attempt: that they will not be able to carry through their plans: fear that their health will fail in doing what they set out to do. If they get sick, they fear death, or that they will be incurable, and they become depressed with the fear that they will be dependent. There is sudden anxiety, and anxiety about the heart, particularly when stomach conditions are present. fear of the dark, fear of strangers, fear of imaginary things; fear that they will not get on in school, timid about going to school, fearful that they will be late at school, etc. [2]

Sycosis also covers anxiety and fears but are of due to different causes and characters. Sycosis has a brooding over things. tendency for thinking like If he is ill, he is ever of it. If he has done anything, he is ever of it. This will induce anxiety and fears.

Homoeopathic medicines for fear and anxiety:

LYCOPodium CLAVATUM: Dreads lest something will happen, lest he will forget something. A continually increasing dread of appearing in public comes on, yet a horror, at times, of solitude. Often in professional men, like lawyers and ministers, who have to appear in public, there is a feeling of incompetence, a feeling of inability to undertake his task, although he has been accustomed

to it for many years. A lawyer cannot think of appearing in court; he procrastinates, he delays until he is obliged to appear, because he has a fear that he will stumble, that he will make mistakes, that he will forget, and yet when he undertakes it, he goes through with ease and comfort. [3]

NATRUM MURIATICUM :

The principal fear of the *Natrum* individual is the fear of emotional pain, but this fear is often barely conscious, though it may control a great deal of the person's life, by forcing him to avoid threatening situations. *Natrum* individuals use a variety of strategies to avoid reactivating their sleeping sense of hurt. Some avoid intimate relationships altogether. If they don't open up their heart, they can get hurt. Adult *Natrum*s have similar fears to this. Some still dread the death of their parent, to whom they are unhealthily attached, both by guilt, and by emotional dependence. Many *Natrum* people unconsciously feel that if their parent should die, they will have lost all chance of gaining their love. [3]

ARSENICUM ALBUM :

principal anxious remedy of materia medica. Fear drives him out of bed, he hides in a closet." These are instances of insanity that take on first a state of anxiety, restlessness,

and fear. Fear is a strong element in the mental state, fear to be alone; fears something is going to injure him when he is alone; full of horror; he dreads solitude and wants company, because in company he can talk and put off the fear. [4]

Arsenicum person is his restlessness. He becomes extremely agitated, and cannot keep still for a moment. Thinks that he is suffering from incurable disease and surely going to die.[3]

Great anguish and restlessness. Changes place continually. Fears, of death, of being left alone. Great fear, with cold sweat. Thinks it useless to take medicine. Suicidal. Hallucinations of smell and sight. [5]

ACONITUM NAPELLUS :

intense fear, this awful anxiety great restlessness, the violence and the suddenness of these attacks are characters of aconite napellus.[4] Fear of death, person can predict hour of his death. Most indicated remedy in acute condition of emotional stress, fear and anxiety, etc.[3]Fears the future, a crowd, crossing the street. Restlessness, tossing about. Great fear, anxiety, and worry accompany every ailment, however trivial. Delirium is characterised by unhappiness worry, fear, raving, rarely unconsciousness. [5]

CAUSTICUM :

Causticum's nervous system thus becomes tense and hypersensitive as he gets older, particularly if he has had stress in his personal life, or with his health, and this deterioration may result in a downward spiral of ever increasing anxiety, leading eventually to despair. Very often the elderly *Causticum* becomes more anxious after the death of his or her spouse. The have a steady influence, and after losing them

Causticum falls prey to foolish spouse was anxiety and ever-increasing confusion. He may feel afraid when alone at night and may develop completely unrealistic fears, such as that he is going to be evicted, or that he has cancer when he does not. These fears are merely a reflection of the gradual disintegration of his faculties after years of tension.[3] Full of timorous fancies. "Timorous anxiety," overwhelmed with fearful fancies. At every turn, there is fear that something is going to happen. Fear of death, fear that something will happen to his family. Always anticipating some dreadful event. That is a striking feature of the *Causticum* mental state.[4]

SYPHILINUM :

Psychic and hallucinatory tendencies tend to make the mind less stable, and this results in a fear for their sanity in some Syphilinum people. It also can produce a general fearfulness that appears as free-floating anxiety, or as agoraphobia. [3]

Feels as if going insane or being paralyzed. Fears the night, and the suffering from exhaustion on awakening. Hopeless; despairs of recovery.[5]

CALCAREA CARBONICA :

Calcarea carbonica is one of those types that worries without cause about the future. As usual it is the females who tend to worry more, but *Calcarea carbonica* men also have a tendency to fear the worst, especially when embarking upon something new. Similarly, the *Calcarea carbonica* parent will worry about the children having an accident, and will get agitated if they are a little late coming home.[3] It is very useful in complaints from prolonged worry. [4]

ARGENTUM NITRICUM :

Thinks his understanding will and must fail. Fearful and nervous. Peculiar mental impulses. Fears and anxieties and hidden irrational motives for actions. [5] Looking forward to times he is anxious. When looking forward to some thing that he is about to do, or in the expectation of things, he is anxious When about to meet an engagement he is anxious until the time comes. The nervous state continues until there is disorder of all the organs of the body. The stomach refuses to digest, everything taken, seems to go into gas, and he becomes distended and suffers with pain. [3] Nervous diarrhoea, watery, noisy, flatulent; green, like chopped spinach, with shreddy mucus and enormous distention of abdomen; very offensive. Diarrhoea immediately after eating or drinking. [5]

These are some homoeopathic medicines indicated for fear and anxiety instead of that there are number of other medicines which can be most similar for different individuals at different time. With the help of homoeopathic repertory, one can find similar group of medicines by repertorisation.

POTENCY SELECTION AND DOSE :

Whenever symptoms of patient are more characteristic, with high susceptibility and are uncommon which can be individualise easily the potency should be higher and amount of crude dose reduced. More common symptoms require low potency. Along with nature of symptoms, age and susceptibility also matters for selection of dose and potency.

Conclusion:

Emotional imbalance can give it's imprints on daily functioning of body thus it is unneglectable. As man always affected internally followed by external sufferings.

All causes must be investigated first by physician followed by individualisation of each patient most similar homoeopathic, dynamic medicine should be prescribed to achieve complete cure. Miasms play an important role in way of cure thus antimiasmatic medicine should be given to remove miasmatic block.

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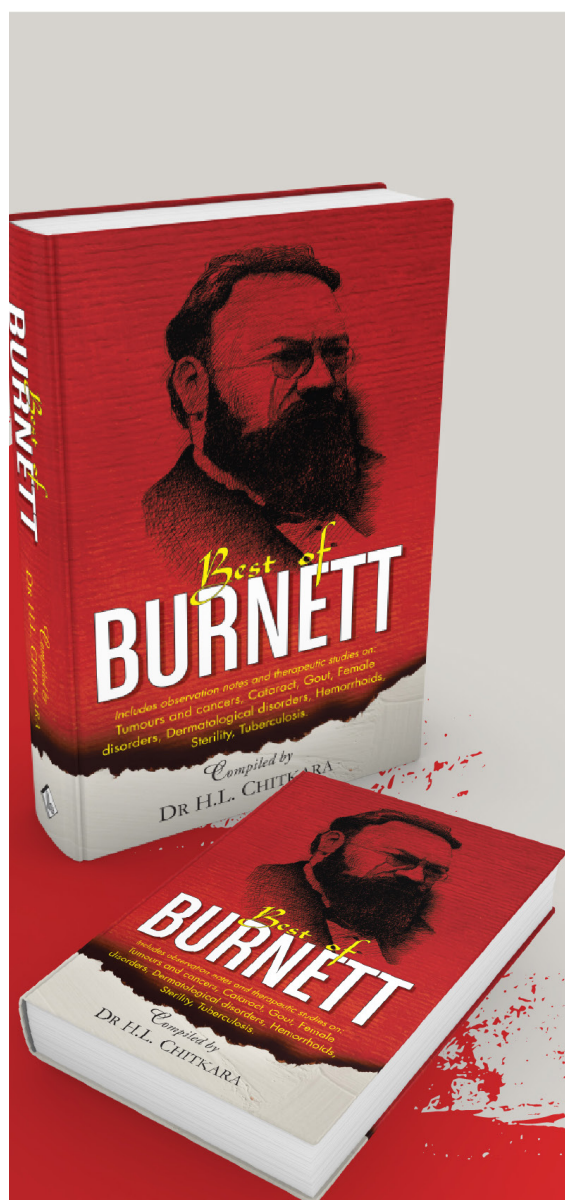
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Post-traumatic stress disorder and its homoeopathic aspect

Dr Mahakas Mandal, Dr Debanjan Chowdhury

ABSTRACT: Post traumatic stress disorder (PTSD) is a delayed and/or protracted response to a stressful event of life threatening or catastrophic nature. It is a syndrome characterised by 'reexperiencing' a traumatic event (e.g. sexual abuse, severe burns, military combat, etc.) and decreased responsiveness and avoidance of current events associated with trauma. After the COVID-19 pandemic there is significant rise of PTSD in health care workers and among the exposed and non-exposed persons. Individualised and holistic homoeopathic treatment for PTSD remains an untouched field and having huge opportunities.

Keywords: Post traumatic stress disorder (PTSD), homoeopathy, anxiety, depression, panic attack.

Abbreviations: PTSD: Post traumatic stress disorder. DMT2: Diabetes mellitus type two, e.g. – example, COVID 19 – coronavirus disease 2019, DSM - diagnostic and statistical manual, ICD - International classification of diseases, WHO – World Health Organization, HPA axis - hypothalamo-pituitary-adrenal axis, CDC – centre for disease control and prevention.

Introduction

Post traumatic stress disorder (PTSD) is a delayed and / or protracted response to a stressful event of life threatening or catastrophic nature. It is a syndrome characterised by 'reexperiencing' a traumatic event (e.g. sexual abuse, severe burns, military combat, etc.) and decreased responsiveness and avoidance of current events associated with trauma¹. According to the diagnostic and statistical manual (DSM-5) and the International classification of diseases (ICD 10), a traumatic experience is an event that can pierce into the integrity of an individual or a group causing distress, feeling of helplessness, horror, or intense fear reaction^{2,3}.

The lifetime prevalence of PTSD among adult Americans has been estimated to be 6.8% with a point prevalence of 3.6 % and with women having rates twice as high as men⁴. Many individuals with PTSD (20-40%) have experiences other associated problems including depression or panic disorders and there is considerable overlap in the symptom complexes of all three conditions. Acute stress disorder

has many of the same symptoms persist for only three days to a month after trauma. The other major co-morbidity is alcohol and substance abuse. Patients with PTSD are at increased risk of experiencing poor physical health, including somatoform cardio respiratory, musculoskeletal, gastrointestinal and immunological disorders. PTSD has been reclassified from an anxiety disorder to a trauma and stressor related disorder in DSM-5⁵. Studies using cross sectional surveys have indicated a higher risk for PTSD amongst frontline workers during the Covid pandemic. According to the WHO's review, the estimated prevalence of mental disorders among conflict-affected populations at any specific point in time (point prevalence) is 13% for mild form depression, anxiety and post-traumatic stress disorder and 4% for moderate forms of these disorder. The estimated point prevalence for severe disorders (i.e. schizophrenia, bipolar disorder, severe depression, severe anxiety, and severe post-traumatic stress disorder) is 5%⁶.

Risk factors for PTSD include a past psychiatric history and personality characteristics of high neuroticism and extroversion. Studies show substantial genetic

evidences for environmental effects. In PTSD, there is excessive release of norepinephrine from locus coeruleus in response to stress and increased noradrenergic activity at projection sites in the hippocampus and amygdale. The encoding of fear-based memories, thus, changed. Although pituitary adrenal response blunted, greater sympathetic responses associated with traumatic event. More than 80% patients exposed to trauma does not show the symptoms of PTSD, but differential susceptibility to traumatic event may be related to context dependent functional and transcriptional 'epigenetic' alterations in distinct neuronal circuits involving the hippocampus and the amygdale, as well as in brain-body interactions including the hypothalamo-pituitary-adrenal axis (HPA axis) and the immune system. Fear learning, threat detection (insula overactivity), executive function, and emotional regulation, contextual learning all thus changed. Predictive bio markers include increased heart rate, serum lactate, decreased coagulation, insulin resistance, alteration in glycolysis and fatty acid uptake⁷.

Mental disorders have a high

economic burden and are known to impact one's productivity and quality of life. The symptoms of PTSD prevent the individual from leading a healthy lifestyle and are debilitating on a personal, societal as well as professional level. The medical burden of a disease can be measured by indicators such as morbidity, mortality and cost. The medical burden includes health care burden, co morbidity and substance abuse. 68% of adults with mental disorders have physical medical conditions. For PTSD till now, no medical tools are available to prevent or minimize the impact of traumatic stress on mental health. PTSD remains one of the most common mental disorders worldwide and suddenly fueling the perfect "storm" for mental health after the covid-19 pandemic. Research articles at Pubmed, embase, etc. increases significantly about the PTSD after 2019. Previously PTSD was more common among veterans returning from war that experiences extreme distress but after the pandemic of recent time 10-13% of frontline healthcare worker became the victim of PTSD⁸

Risk factors:

PTSD caused by exposure to trauma. However, it is not clear why more people develop PTSD after traumatic events while others do not. Risk factors such as genetics may play a role. It is more common in women than men. Other risk factors include a lack of social support following the event, an experience of past trauma, history of mental diseases, history of substance abuse etc⁹.

Clinical feature and criteria to diagnose the PTSD:

Symptoms of PTSD develop from a few days to several months after the traumatic event. Recurrent intrusive memories (flashback) of the trauma; sleep disturbances, especially nightmares (usually the traumatic event) from which the

patient awakes in a state of anxiety; symptoms of autonomic arousals (anxiety, palpitation, enhanced startle); emotional numbing; and avoidance of situations that evoke memories of the trauma. After many weeks or months after the traumatic event patient experiences some symptoms of the following:

- Repeatedly relive their event, perhaps in nightmares or upsetting dreams, perhaps in intrusive mental images or dissociative flashbacks. Some people respond to reminders of the event with physiological sensations (racing heart, shortness of breath) or emotional distress.
- Takes step to avoid the horrors: Refusing to watch films or television or to read accounts of the event, or pushing thoughts or memories out of the consciousness.
- Turn downbeat in their thinking: With persistently negative moods, they express gloomy thoughts. They lose interest in important activities and feel detached from other people. Some experience amnesia for aspects of trauma; others become numb, feeling unable to love or experience joy.
- Experience symptoms of hyper arousal: irritability, excessive vigilance, trouble concentrating, insomnias, or an intensified startle response.

DSM-5 criteria for diagnosis of PTSD:

- Exposure to actual or threatened death, serious injury, or sexual violence in one (or more).
- One (or more) intrusion symptom(s)
- One (or more) symptom(s) of avoidance
- Two (or more) symptoms of negative changes in feelings and mood
- Two (or more) symptoms of

changes in arousal or reactivity

These symptoms also must: Last for longer than one month, bring about considerable distress and/or interfere greatly with a number of different areas of life and not to a medical condition or substance use².

The DSM-5 divides PTSD symptom into four categories: intrusion, avoidance of thoughts and behavior, negative changes in thoughts and mood, changes in arousal and reactivity.

Intrusion: These symptoms are related to intrusive thoughts and memories of the event. Reoccurring, involuntarily and intrusive upsetting memories of the event. Repeated upsetting dreams related to the event. Flashbacks, feeling as though the event is happening again. Strong and persistent distress to cues connected to the event that are either inside or outside of the body. Strong bodily reactions such as increased heart rate, when reminded of the event.

Avoidance: People with PTSD may avoid people. Places, conversations, activities, objects, or situations that bring up memories of the event. They may also avoid thoughts, feelings, or physical sensations that recall the event.

Negative changes in thoughts and mood: Passive negative emotional state like shame, anger, fear may associate with inability to remember an important aspect of the event. Persistent and elevated negative evaluations about oneself, others, or the world. Loss of interest in previously enjoyable activities. Feeling detached from others. Inability to experience positive emotions like happiness, love, joy, etc.

Changes in arousal and reactivity: Difficulty in concentration. Heightened startle response. Impulsive self destructive behavior.

Irritability or aggressive behavior. Problems in sleeping²

Prognosis: Prognosis is good in those with good pre morbid psychiatric functioning. The sooner the therapy is initiated after the trauma, the better the prognosis. However it is not beneficial to begin the therapy immediately after the trauma since it does not decrease the rate of progression to PTSD. Approximately half of the patients with PTSD experience chronic symptoms. Most patient recover within 2-3 years. In a small portion, the symptoms become chronic. In some individuals, the symptoms fade over months or years, and in others they may persist for a lifetime. Those with co-morbid chronic pain tend to have heightened PTSD symptoms compared with those without chronic pain⁵.

Differential diagnosis: Depression, panic attack and acute stress disorder often associated with PTSD. The Primary Care-PTSD screen and the PTSD Checklist are two useful screening tools for individuals at risk of trauma exposure for differential diagnosis. Substance abuse, anxiety disorder, phobic disorder to be excluded.

Treatment:

Psychotherapy: psychotherapy should be initiated after the diagnosis of PTSD. Video telepsychiatry for psychotherapy is now a good option.

Pharmacotherapy: Antidepressants are empirically used by modern medicine with varying results. Individualistic Holistic approach better to adopt¹⁰.

Scenario after the pandemic: The recent Covid-19 pandemic has changed the psychological and social effects on the population. Psychological well-being of the most exposed group including health care worker, students, children, elderly persons are highlighted in most recent studies worldwide.

US centre for Disease Control and Prevention (CDC) researchers found the amount of adults with recent symptoms of anxiety or depressive disorder increased from 36.4 to 41.5 %, while percentage of individuals reporting unmet mental health care needs increased from 9.2 to 11.7% between August 2020 and February 2021 due to the COVID-19 pandemic¹¹. Research article related to PTSD in Pubmed shows total 325 in 2019 and 377 in 2020 and 425 in 2021¹². The global prevalence of anxiety and depression increased by a massive 25% according to the WHO¹³. Loneliness, fear of infection, suffering and death of dear ones, grief, financial worries have cited as stressors leading to anxiety and depression. Among the health care workers, exhaustion has been a major trigger for PTSD. Study among the hospitalised patients with COVID-19, indicated that almost 20% of the participants develop significant PTSD¹⁴. Another study reported 13.2 % prevalence of PTSD among the hospitalised patients who were affected by reports of negative news¹⁵. Another cross sectional study conducted in 309 participants of medical students using impacts of event scale revised questionnaire, shows 18.4 % having PTSD symptoms¹⁶. Study from China shows, the prevalence of mild PTSD symptoms accounted for 24.9% and severe PTSD symptoms was 28.3 % during the outbreak of Covid-19 pandemic¹⁷.

Not only in psychological aspect but the scenario of psychosomatic aspect of the diseases has also been changed. As the biochemical activities of the nervous system are affected after PTSD, and the following pattern of disorders can be easily seen.

Arrhythmia: New onset of arrhythmia and palpitation are the physical aspect of PTSD. Shortness of breath and chest pain is frequently encountered.

Coagulation defect: many forms of coagulation defect and various manifestations have been seen.

Insulin resistance and new onset diabetes mellitus: Now a day's DM T2 no longer remains the diseases of pancreas but a result of insulin resistance at the capillary level. Studies support the 40% increases the chances of DMT2 after the stressful event of pandemic affected people.

Dyslipidaemia: Stress, anxiety fuel to the dyslipidaemia. And in presence of PTSD, it results in fatty degeneration, fatty liver, arteriosclerosis etc.

New onset hypertension: Multifactorial risk factors including insomnia increases risk of new onset hypertension in PTSD patients.

Prone to infection: Well known fact that immunity lowered in all forms of mental stress. After the pandemic people become more prone to severe infections. According to WHO, more people died from tuberculosis for the first time in over a decade, in 2020¹⁸.

Homoeopathic aspects of PTSD:

Homoeopathy is the individualistic and holistic approach of treatment. In homoeopathic philosophy mental diseases described as diseases where the mental symptoms are prominent than physical ailments¹⁹. These are not totally different types of diseases because in every disease mental and physical changes occur. In the view of PTSD, there are somatoform symptoms along with mental symptoms. In the modern medicine, as in PTSD no prominent biochemical changes detected, they till now trying the empirical modes with varying results.

Case taking: A big advantage of our system is the case taking. Case taking is a mode of psychotherapy. The exact causation of the disease

can be found out.

Miasmatic analysis: Predominant miasm of the patient can lead to prepare prognosis oriented strategy. Like a predominately psoric patient may exhibit PTSD as in the form of panic attack, non-cardiac cause of chest pain, palpitation, insomnia, etc. Where simple management is sufficient. Predominantly syphilitic PTSD patient may attempt suicide. Where one can aware the patient party to be cautious. Predominantly sycotic PTSD patient can easily develop dyslipidaemia, hypertension, DMT2, etc.

Totality of the symptoms: The totality of the symptom not only include the most prominent mental symptoms but all the suffering of the patient to be included. And the patient experiences a holistic well-being.

As seen from above, the patient with PTSD having a specific cause for their illness, no other system of medicine has the clue. But our Materia medica and more specifically repertories have lots of sources and the exact causation of the diseases. From the Augmented clinical synthesis examples of such²⁰:

Ailments from- after being sexually abused: Acon, Arn, Carc, Ign, Nat-m, Op, Sep, Staph etc.

Ailments from- bad news: Apis, Arn, Bry, Calc, Coloc, Gels, Ign, Med, Nat-m, Nux-v, Pall, Sil, Staph, Sulph etc.

Ailments from- business failure: Ambr, Aur, Cimic, Hyos, etc.

Ailments from- death of loved ones: Acon, Ars, Ign, Lach, Nic-ac, Op, Ph-ac, Staph etc.

Ailments from-fear: Acon, Act-sp, Arg-n, Bell, Caust, Gels, Ign, Op etc.

Ailments from- fright: Acon, Gels, Lyc, Op, Ac-phos, Puls, Sil etc.

Ailments from-mental shock: Arn, Ign, Op, Pic-ac etc.

After the proper case taking, the totality of the symptom guides us for the selection of the remedies. From the different Materia Medica the following medicines, one can think of in PTSD.

Aconitum napellus: A state of fear, anxiety; anguish of mind and body. Physical and mental restlessness, fright, is the most characteristic manifestation. Fears death, believes that he will soon die; predicts the day. Fears the future, a crowd, crossing the street.

Argentum nitricum: He is tormented by the inflowing of the troublesome thoughts, which torment him till he is in hurry and fidget, and he goes out and walks and walks, and faster he walks, the faster he thinks he must walk, and he walks till fatigued. There is fear of death- the over anxious state.

Arsenicum album: Finds rest in no place, continually changes his position in bed, will get out of one bed into another, and lie now here now there. Fears when alone. Fear of death.

Aurum metallicum: Imagines he has lost the affection of friends. Dissatisfied with everything, imagines obstacles everywhere. Longs for death, though of suicide.

Calcarea carbonicum: Fears someone follows him. Fear of everything. Dread of diseases and sufferings. Starts out of sleep screaming with terror, trembling with fear.

Calcarea arsenicosum: Slightest emotion causes palpitations.

Constriction and pain in the region of heart, suffocative feeling, palpitation, oppression, throbbing and pain in the back extending to the arms.

Conium maculatum: Mind gives out; tired like the muscles of the body. Passive forms of insanity. Complete indifference. Superstitious and full of fear.

Lachesis mutus: Ailments from fear, bad news, jealousy. Fixed ideas. Constriction sensation and palpitation. Sleep aggravates all the symptoms.

Nitricum acidum: Ailments from death of dear ones. Fixed ideas. Depressed. Indifference, intolerant to sympathy. Anxiety about his illness. Fear of infectious diseases.

Naja tripudians: Broods constantly over imaginary troubles. Suicidal insanity. Depressed. Aversion to talking. Dread of being left alone.

Palladium metallicum: Feels neglected. Desire company. Feels as if something terrible would happen.

Psorinum: Hates draughts. Mentally hopeless and sad. Fears failure. No joy in the family. Anxiety to suicide.

Thuja occidentalis: Thoughtfulness about the merest trifles. Fixed ideas. Sleepy uneasy. Insomnia with dreams. Nervous.

Other medicines according to the symptom similarity frequently indicated as *Sulphur*, *Lycopodium clavatum*, *Silicea terra*, *Calcarea phosphoricum*, *Veratrum album*, *Cannabis indica*, *Ignatia amara*, *Hyoscyamus niger*, *Belladonna*, *Stramonium*, *Syphillinum*, *Medorrhinum*, etc²¹⁻²³.

Conclusion:

Mental and emotional disorder still remains one of the unexplored and neglected domains in both end, i.e.

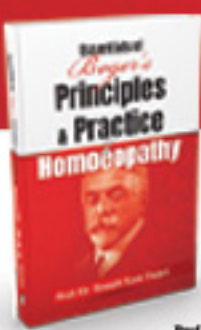
medical fraternity and patients. Recent updates in mental health focuses on the questionnaire-based treatment follow-up. Which aims at the documented progress of the patient-oriented treatment. Post-traumatic stress disorder not only increases the medical burden but the society impact also hampered. From the onset of the Covid-19 pandemic, increase number study focuses to find out the causes, but management of the patients remains unsatisfactory. From the point of view of homoeopathy, huge opportunity awaits. As the individualistic holistic approach is the only way to manage such emerging idiopathic disorders.

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Homoeopathy360

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A compilation of 66 write ups also could be referred to as a 'piece of gems' on homoeopathy which are being placed as an assembled jewel in a book form made out of very precious pearls found lying at different places. It is expected that these pearls will certainly add to the wealth of Homoeopathy.

A glance through the topics - Law of Cure, The philosophy of Similia, Finding the Similimum with the help of the Family Anamnesis, What Divides Us?, Choosing The Remedy, Choosing The Remedy, Gymnasladi and many more.

Author
Prof Dr B.K. Tiwari

ISBN: 9788196102119

Managing anxiety disorders with homoeopathy

Dr Surbhi Sud

ABSTRACT: Anxiety disorders have become a common entity for about a few decades. Majority of the patients, either do not recognise the disease or do not pay much heed to the symptoms, leaving the condition undiagnosed. Often the symptoms of anxiety are considered as a part of the personality, especially in cases of chronic anxiety. As the awareness about mental health disorders is increasing, more people are approaching the physicians for diagnosis and treatment. While there are a lot of medications available in allopathy for anxiety disorders, homoeopathy has proven its efficiency overtime in the treatment of this mental condition. The intention of this article is to understand the meaning of anxiety in a simplified manner and explore the management of the same with an emphasis on homoeopathic management.

Keywords: Post traumatic stress disorder (PTSD), homoeopathy, anxiety, depression, panic attack.

Abbreviations: PTSD: Post traumatic stress disorder. DMT2: Diabetes mellitus type two, e.g. – example, COVID 19 – coronavirus disease 2019, DSM - diagnostic and statistical manual, ICD - International classification of diseases, WHO – World Health Organization, HPA axis - hypothalamo-pituitary-adrenal axis, CDC – centre for disease control and prevention.

Introduction

Anxiety is a reaction of excess worry, nervousness, fear, and uneasiness to a situation or concern. Anxiety can be short lived when it occurs in response to a specific situation such as stage fright before an examination or an interview. In fact, an anxious reaction is considered useful in such situations as it helps a person to make an extra effort to perform well. But when the anxiety becomes a constant symptom and is present even in absence of a trigger, it is termed as an anxiety disorder ⁽¹⁾.

Types of anxiety disorders

1. Generalised anxiety disorder (GAD): A person with GAD may have anxiety related to a wide range of issues such as work, school performance, health, and so on. Due to this constant state of anxiety, such individuals may also experience certain physical symptoms such as constant fatigue, nervousness, insomnia, irritability, restlessness, palpitations, and difficulty in concentration ⁽²⁾.
2. Agoraphobia: Patients with agoraphobia live in a state of fear from going in crowded places, using public transport, or claustrophobic places such as elevators, shops, or crowded places. These individuals avoid these places as they do not wish to be embarrassed or find themselves without help in case of a panic attack.
3. Panic disorder: A person is said to have a panic disorder when they suffer from panic attacks without any specific reason, and they are constantly worried about having another panic attack. They are often seen avoiding the situations which they imagine to be causing the panic attacks. Symptoms such as tremors, dyspnoea, abdominal discomfort, chest pain, palpitations, and sweating are some of the physical manifestations of a panic attack.
4. Social anxiety disorder (SAD): Social anxiety disorder makes the person anxious and fearful in social situations where they anticipate being embarrassed, humiliated, scrutinised, or offending others. Such individuals often have anxiety about negative evaluation of their own personality.
5. Specific phobia: Specific phobias include fear and anxiety related to singular circumstances or objects such as animals or insects (tiger, spiders, lizards) or even natural phenomena such as deep water, height, darkness etc.
6. Selective mutism: It is more common in adolescents and children wherein they are unable to speak in certain social situations such as in school while otherwise they can communicate effectively ⁽³⁾.
7. Separation anxiety disorder: This is a disorder specific to children where they have anxiety or fear of separation from an attachment figure. The level of anxiety is disproportionate to their age and may even be expressed throughout adulthood as well.
8. Substance/medication-induced anxiety disorder: This may occur either due to a medical treatment or due to intake or withdrawal from substance abuse.

9. Anxiety disorder due to other medical conditions: Anxiety may be associated with certain diseased conditions such as hypothyroidism, hypoglycaemia, congestive heart failure, pulmonary embolism, asthma, pneumonia, neoplasms, encephalitis, or seizure disorder.

Physiological mechanism of anxiety

Anxiety disorders have been linked to the emotional centres of the brain that primarily includes the limbic system ⁽⁴⁾. The limbic system comprises structures that include the amygdala, hippocampus, thalamus, and hypothalamus. Amygdala is the key structure to anxiety and may be larger in size those with persistent anxiety. Individuals with anxiety disorders have an increased activity in the various structures of the limbic system.

When the decision-making area of our brain identifies a threat or a trigger, the amygdala is stimulated which further sends a signal to the hypothalamus to initiate a fight or flight response. As a result, symptoms such as tense muscle, rapid heart rate, rapid breathing, or flushing of the skin might occur ⁽⁵⁾.

The neurotransmitters such as serotonin, norepinephrine, and gamma-aminobutyric acid (GABA) also play a role in causing anxiety by transmitting the signals. On a broader scale, serotonin is responsible for mood, sleep, appetite whereas norepinephrine is linked to alertness and attention.

Diagnosis of anxiety The diagnosis of anxiety can be concluded only after a thorough evaluation of the physical and mental state of a patient. Anxiety may be present as

a sole entity or may be associated with certain mental illnesses such as obsessive-compulsive disorder and post-traumatic stress disorder. Anxiety may also be associated with the presence of certain physical disorders involving thyroid, pulmonary, cardiovascular, or neurological disease.

Initially, the physician is required to run the basic investigations such as complete blood count, thyroid function tests, and urinalysis. Further tests can be advised after the evaluation of the results of these investigations. A simultaneous review of the medical history, family history along with a psychiatric evaluation may also prove helpful in arriving at a diagnosis.

General management

The treatment of mild symptoms of anxiety disorders are not considered for treatment. It is only when the symptoms interfere with the social or occupational function, when the treatment is considered. The patients with anxiety disorders shall be eligible for treatment if their personal or professional life is getting affected due to the symptoms or their anxiety has complicated further to cause secondary depression, suicidal ideation, or alcohol abuse.

Selective serotonin reuptake inhibitors (SSRIs) and serotonin and norepinephrine reuptake inhibitors (SNRIs) may be the first choice of pharmacologic drugs to be prescribed to the patients with anxiety disorders. Beta blockers, benzodiazepines, and anticonvulsants are also indicated in some cases. Other than medication, psychotherapy, behavioural therapy, exercise including aerobics, meditation may be advised.

Homoeopathic management

Homoeopathy is a gentle harmless treatment that treats the patient from within without any side effects. The aim of a homoeopathic

physician is to prescribe a remedy that addresses the causative factor of anxiety rather than treating the symptoms of anxiety. Although in the initial phase of treatment, these symptoms may act as the guiding factors to drive the physician to the remedy.

Here are certain homoeopathic remedies that might prove helpful in various types of anxiety:

- I. *Aconitum napellus*: Physical and mental restlessness, anxiety are the cardinal features of this remedy and accompany almost all the symptoms. This remedy is indicative of individuals who constantly worry about the future, are afraid to go to crowded places, and even predict their time of death ⁽⁶⁾.
- II. *Phosphorus*: These are highly sensitive individuals with great sensitivity to external impressions. They have extreme fear of being alone accompanied with great lowness of spirits. They are in a constant state of fear from death or something creeping out from the corner ⁽⁷⁾.
- III. *Opium*: These individuals live in a constant state of fear and anxiety. In most cases, there is a history of a dreadful peculiar incidence of the past that keeps on haunting the patient. The patient remains in a constant state of fright in anticipation of the reoccurrence of the dreadful event. Nervousness, uneasiness, and irritability may be present ⁽⁸⁾.
- IV. *Argentum nitricum*: These are overall fearful and nervous personalities. They have a constant apprehension that they might have a serious illness. As a result of their anxiety, they behave impulsively and in a hurried manner. Most often they behave inappropriately

as a result of the ingrained fear and anxiety⁽⁹⁾.

V. *Arsenicum album*: This is a polychrest remedy that acts on almost every system and organ of the body. When an *Arsenicum album* patient is sick, he does not want to go to the doctor. These individuals have profound fear of being alone and fear of death. They are extremely restless and are highly sensitive⁽¹⁰⁾.

VI. *Calcarea carbonica*: These patients have anxiety accompanied with palpitation. These individuals have a fear of misfortune or loss of reason. The anxiety tends to worsen in the night and may be associated with symptoms such as trembling, nausea, sweating, and restlessness⁽¹¹⁾.

VII. *Lycopodium clavatum*: These individuals are afraid to be alone. Due to their apprehensive nature, they suffer from weak memory. Their hasty behaviour is also a result of their constant fear of breaking down under stress. They suffer from low confidence, melancholy, and failing brain power⁽¹²⁾.

Conclusion

Anxiety disorders can be managed efficiently with homoeopathy.

Homoeopathy can prove to be an effective treatment even in cases where the symptoms are mild. The individualised approach followed in the homoeopathic system of medicine helps in holistic treatment of the patient wherein physical and mental symptoms other than anxiety can also be resolved. Mental disorders are often considered a stigma in society. It is high time that we understand the fact that mental disorders also need timely care and treatment, like the physical ailments. Homoeopathy is a well-rounded science backed by philosophy and practicality, that helps a physician to not only diagnose but treat a patient without any side effects.

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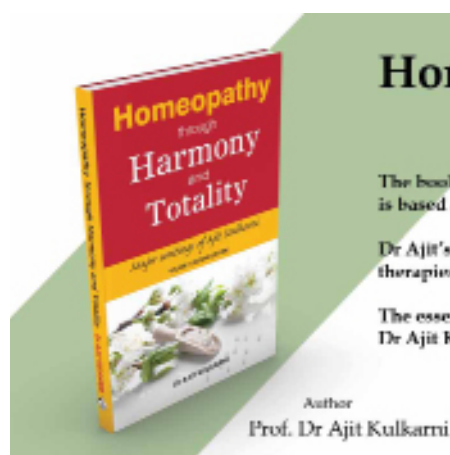
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Homeopathy Through Harmony And Totality

The book clearly sheds light on the connection between the laws of nature on which homoeopathy is based and underscores the importance of indivisibility of human beings.

Dr Ajit's assertion that the Law of Similars stands as a connecting thread between all medical therapies is a worthy note.

The essential 'Study of dispositions and personality types' is thoroughly covered in articles by Dr Ajit Kulkarni who works as an experienced clinical counsellor.

Author
Prof. Dr. Ajit Kulkarni

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Managing fear and anxiety with homoeopathy

Dr Shalini Ankushe

ABSTRACT: Anxiety is a feeling which includes an unpleasant state of experience within an individual and can be often be accompanied by nervous behaviours such as anticipating events, pacing back and forth, panic attacks, imbalance, etc. If left untreated, often results in psychiatric and physiological symptoms and complications can occur like depression or behavioural disorder. Homoeopathy is very effective in managing anxiety as well as all disorders related to anxiety, it also plays an important role in preventing any major mental disorder.

Keywords: Anxiety, depression, behavioural disorder, homoeopathy.

Abbreviations: CNS – central nervous system, GABA - gamma-aminobutyric acid, DSM – diagnostic and statistical manual of diseases, US – United States

Introduction

Anxiety is a feeling of uneasiness and worry usually generalised and unfocused as an observation to situation that only subjectively seen, though anxiety is normal human response when excessive or persisting beyond develop mentally appropriate period it may be diagnosed as an anxiety disorder. ⁽¹⁾

PATHOPHYSIOLOGY: -

Anxiety disorder appear to be genetically inherited neurochemical dysfunction that may involve imbalance. decreased GABA – tone, allelic polymorphism of catechol, increased cortisol.

In CNS, major mediator of the symptom of anxiety disorder appear to be serotonin, dopamine and gamma – acid GABA. other neurotransmitter and peptides such as corticotropin, releasing factor.

The amygdala is central to processing of fear and anxiety and function may be disrespected in anxiety disorder. Anxiety processing in the basolateral amygdala has been implicated with expansion of dendritic arborisation of amygdala neurons. ⁽²⁾

CLASSIFICATION /TYPES OF ANXIETY: -

Types

There are various types of anxiety. Existential anxiety can occur when a person faces angst, an existential crisis, or nihilistic feelings. People can also face mathematical anxiety, somatic anxiety, stage fright, or test anxiety. Social anxiety refers to a fear of rejection and negative evaluation (being judged) by other people. ⁽²⁾

Existential

The philosopher, Søren Kierkegaard, in *The Concept of Anxiety* (1844), described anxiety or dread associated with the «dizziness of freedom» and suggested the possibility for positive resolution of anxiety through the self-conscious exercise of responsibility and choosing. In *Art and Artist* (1932), the psychologist Otto Rank wrote that the psychological trauma of birth was the pre-eminent human symbol of existential anxiety and encompasses the creative person's simultaneous fear of – and desire for – separation, individuation, and differentiation.

The theologian, Paul Tillich, characterised existential anxiety¹ as «the state in which a being is aware of its possible non-being» and he listed three categories for the nonbeing and resulting anxiety: ontic (fate and death), moral (guilt and

condemnation), and spiritual (emptiness and meaninglessness). According to Tillich, the last of these three types of existential anxiety, i.e. spiritual anxiety, is predominant in modern times while the others were predominant in earlier periods. Tillich argues that this anxiety can be accepted as part of the human condition or it can be resisted but with negative consequences. In its pathological form, spiritual anxiety may tend to “drive the person toward the creation of certitude in systems of meaning which are supported by tradition and authority” even though such “undoubted certitude is not built on the rock of reality”. ⁽¹⁾

According to Viktor Frankl, the author of *Man's Search for Meaning*, when a person is faced with extreme mortal dangers, the most basic of all human wishes is to find a meaning of life to combat the “trauma of nonbeing” as death is near. ⁽¹⁾

Depending on the source of the threat, psychoanalytic theory distinguishes the following types of anxiety:

- Realistic
- Neurotic
- Moral

Test and performance

According to Yerkes-Dodson law, an optimal level of arousal is necessary to best complete a task such as an exam, performance, or competitive event. However, when the anxiety or level of arousal exceeds that optimum, the result is a decline in performance.

Test anxiety is the uneasiness, apprehension, or nervousness felt by students who have a fear of failing an exam. Students who have test anxiety may experience any of the following: the association of grades with personal worth; fear of embarrassment by a teacher; fear of alienation from parents or friends; time pressures; or feeling a loss of control. Sweating, dizziness, headaches, racing heartbeats, nausea, fidgeting, uncontrollable crying or laughing and drumming on a desk are all common. Because test anxiety hinges on fear of negative evaluation, debate exists as to whether test anxiety is itself a unique anxiety disorder or whether it is a specific type of social phobia. The DSM-IV classifies test anxiety as a type of social phobia.

While the term “test anxiety” refers specifically to students, many workers share the same experience with regard to their career or profession. The fear of failing at a task and being negatively evaluated for failure can have a similarly negative effect on the adult. Management of test anxiety focusses on achieving relaxation and developing mechanisms to manage anxiety.⁽¹⁾

Stranger, social, and intergroup anxiety

Humans generally require social acceptance and thus sometimes dread the disapproval of others. Apprehension of being judged by others may cause anxiety in social environment.

Anxiety during social interactions, particularly between strangers, is common among young people. It

may persist into adulthood and become social anxiety or social phobia. “Stranger anxiety” in small children is not considered a phobia. In adults, an excessive fear of other people is not a developmentally common stage; it is called social anxiety. According to Cutting, social phobics do not fear the crowd but the fact that they may be judged negatively.

Social anxiety varies in degree and severity. For some people, it is characterised by experiencing discomfort or awkwardness during physical social contact (e.g. embracing, shaking hands, etc.), while in other cases it can lead to a fear of interacting with unfamiliar people altogether. Those with this condition may restrict their lifestyles to accommodate the anxiety, minimising social interaction whenever possible. Social anxiety also forms a core aspect of certain personality disorders, including avoidant personality disorder.

To the extent that a person is fearful of social encounters with unfamiliar others, some people may experience anxiety particularly during interactions with outgroup members, or people who share different group memberships (i.e., by race, ethnicity, class, gender, etc.). Depending on the nature of the antecedent relations, cognitions, and situational factors, intergroup contact may be stressful and lead to feelings of anxiety. This apprehension or fear of contact with outgroup members is often called interracial or intergroup anxiety.

As is the case with the more generalised forms of social anxiety, intergroup anxiety has behavioural, cognitive, and affective effects. For instance, increases in schematic processing and simplified information processing can occur when anxiety is high. Indeed, such is consistent with related work on attentional bias

in implicit memory. Additionally recent research has found that implicit racial evaluations (i.e. automatic prejudiced attitudes) can be amplified during intergroup interaction. Negative experiences have been illustrated in producing not only negative expectations, but also avoidant, or antagonistic, behaviour such as hostility. Furthermore, when compared to anxiety levels and cognitive effort (e.g., impression management and self-presentation) in intragroup contexts, levels and depletion of resources may be exacerbated in the intergroup situation.

Personality can also be a trait leading to anxiety and depression. Through experience, many find it difficult to collect themselves due to their own personal nature.

Choice or decision

Anxiety induced by the need to choose between similar options is increasingly being recognized as a problem for individuals and for organizations. In 2004, Capgemini wrote: “Today we’re all faced with greater choice, more competition and less time to consider our options or seek out the right advice.”

In a decision context, unpredictability or uncertainty may trigger emotional responses in anxious individuals that systematically alter decision-making. There are primarily two forms of this anxiety type. The first form refers to a choice in which there are multiple potential outcomes with known or calculable probabilities. The second form refers to the uncertainty and ambiguity related to a decision context in which there are multiple possible outcomes with unknown probabilities.⁽¹⁾

Panic disorder

Panic disorder may share symptoms of stress and anxiety, but it is actually very different. Panic disorder is an anxiety disorder

that occurs without any triggers. According to the U.S. department of health and human services, this disorder can be distinguished by unexpected and repeated episodes of intense fear. Someone with panic disorder will eventually develop constant fear of another attack and as this progresses it will begin to affect daily functioning and an individual's general quality of life. It is reported by the Cleveland clinic that panic disorder affects 2 to 3 percent of adult Americans and can begin around the time of the teenage and early adult years. Some symptoms include: difficulty breathing, chest pain, dizziness, trembling or shaking, feeling faint, nausea, fear that you are losing control or are about to die. Even though they have these symptoms during an attack, the main symptom is the persistent fear of having future panic attacks. ⁽¹⁾

Anxiety disorders

Anxiety disorders are a group of mental disorders characterised by exaggerated feelings of anxiety and fear responses. Anxiety is a worry about future events and fear is a reaction to current events. These feelings may cause physical symptoms, such as a fast heart rate and shakiness. There are a number of anxiety disorders: including generalized anxiety disorder, specific phobia, social anxiety disorder, separation anxiety disorder, agoraphobia, panic disorder, and selective mutism. The disorder differs by what results in the symptoms. People often have more than one anxiety disorder. ⁽¹⁾

Anxiety disorders are caused by a complex combination of genetic and environmental factors. To be diagnosed, symptoms typically need to be present for at least six months, be more than would be expected for the situation, and decrease a person's ability to function in their daily lives. Other problems that may result in similar symptoms include hyperthyroidism, heart

disease, caffeine, alcohol, or cannabis use, and withdrawal from certain drugs, among others.

Without treatment, anxiety disorders tend to remain. Treatment may include lifestyle changes, counselling, and medications. Counselling is typically with a type of cognitive behavioural therapy. Medications, such as antidepressants or beta blockers, may improve symptoms. About 12% of people are affected by an anxiety disorder in a given year and between 5–30% are affected at some point in their life. They occur about twice as often in women than they do in men, and generally begin before the age of 25. The most common are specific phobia which affects nearly 12% and social anxiety disorder which affects 10% at some point in their life. They affect those between the ages of 15 and 35 the most and become less common after the age of 55. Rates appear to be higher in the United States and Europe.

Short- and long-term anxiety

Anxiety can be either a short-term "state" or a long-term "trait." Whereas trait anxiety represents worrying about future events, anxiety disorders are a group of mental disorders characterized by feelings of anxiety and fears.

Four ways to be anxious

In the presence of an existing or imminent external threat, you worry about the event and its implications for your physical and/or psychological well-being. When a threat signal occurs, it signifies either that danger is present or near in space and time or that it might be coming in the future. Non-conscious threats processing by the brain activates defensive survival circuits, resulting in changes in information processing in the brain, controlled in part by increases in arousal and behavioural and physiological responses in the body

that then produce signals that feed back to the brain and complement the physiological changes there, intensifying them and extending their duration. ⁽¹⁾

When you notice body sensations, you worry about what they might mean for your physical and/or psychological well-being. The trigger stimulus does not have to be an external stimulus but can be an internal one, as some people are particularly sensitive to body signals.

Thoughts and memories may lead to you to worry about your physical and/or psychological well-being. We do not need to be presence of an external or internal stimulus to be anxious. An episodic memory of a past trauma or of a panic attack in the past is sufficient to activate the defence circuits.

Thoughts and memories may result in existential dread, such as worry about leading a meaningful life or the eventuality of death. Examples are contemplations of whether one's life has been meaningful, the inevitability of death, or the difficulty of making decisions that have a moral value. These do not necessarily activate defensive systems; they are more or less pure forms of cognitive anxiety.

HOMOEOPATHIC APPROACH: ⁽³⁾

ACONITUM NAPELLUS – aconite for intense, sudden anxiety, panic or for panic could be connected to past trauma, dry skin, dry mouth and fast heartbeat.

ARGENTUM NITRICUM – this is sometime recommended for people with anxiety due to uncertainty. this includes claustrophobia, hypochondria, fear of heights, fear of everyday things, like diarrhoea.

ARSENICUM ALBUM -this is purported to be anxiety due to fear of loneliness, darkness or being imperfect, people with this type

of anxiety, fear of being alone. *CALCAREA CARBONICA* – those who need calcarean may be similar to those who could benefit from arsenic. they developed fear of breaking out any safe routine.

GELSEMIUM SEMPERVIRENS– this is for people facing anxiety due to feelings of inadequacy. people with this type of anxiety are often timid and dry. they often also desire solitude and avoid pressure from other people.

IGNATIA AMARA– recommend for those experiencing anxiety from grief, or loss. people who fit this description, are often very sensitive and prone to mood swings.

KALIUM PHOSPHORICA –for those who are vulnerable, excessive grooming and fear of heart attack, fear of death or dying.

KALIUM ARSENICOSUM- include hypochondria, anxiety conditions vulnerable to stress or becoming overwhelmed. their anxiety having too much to do ambitions.

LYCOPODIUM CLAVATUM- similar to *Gelsemium sempervirens*, *Lycopodium clavatum* suggested for people who lack confidence. they might come up with talking loudly or too frequently.

PHOSPHORUS – thought to be good for special people anxiety, their thoughts get scattered and they have a difficulty focusing or getting things done.

PULSATILLA NIGRICANS– for people with anxiety, who need a lot recurrence and support from others to feel better.

SILICEA TERRA – *Silicea terra* is much like *Gelsemium sempervirens* and *Lycopodium clavatum*. for people who are afraid of workaholics to soothe their fears.

STRAMONIUM – for fear of anxiety that also includes night terror, nightmares or dark thoughts while awake.

CONCLUSION –

Homoeopathy has a holistic approach for anxiety and fear related to CNS, and plays an important role in managing it. It also helps to reduce phobia and make mind stable and relax.

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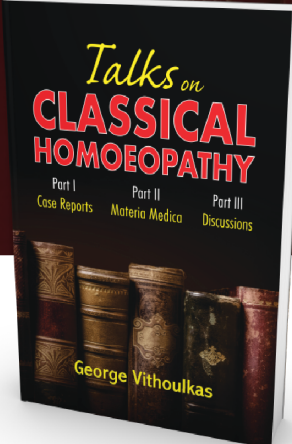
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Effectiveness of homoeopathy in the psychological condition with the aid of interesting single remedial rubric repertorial approach

Dr Priyanka Naraniya, Dr Chauhan Dipeshbhai

ABSTRACT: Psychiatric disorders refer to a wide range of mental health conditions that affect mood, thinking and behaviour. People often have mental health concerns but a mental health concern becomes a psychiatric disorders when ongoing signs and symptoms causes anxiety and fear easily and affect your ability to function in daily life, such as at school or work or in relationships. Metals are often of overruling importance in determining the remedy which represent total symptoms complex similar to the patient's conditions. Homoeopathy offers an approach that could play a significant effectiveness in enhancing the psychotherapeutic process. Homoeopathy offers safe, gentle, nontoxic remedies, administered with holistic principal. Homoeopathy aims at a reintegration of the total self with the reduction of unhealthy psychological regression, blockage and isolation. According to the J.T. Kent, mind is the centre of the whole functioning of the organism and that it is also the focal point from which the disease process starts. Through the following article, it is being tried to explore the effectiveness of homoeopathy in management of psychological disorders (anxiety and fear). These two are the most prevailing psychological conditions in our society and these numbers are gradually increases since last few decades in the world. Homoeopathy is a boon for prevailing psychological condition because when the condition becomes very hazy to treat the person, homoeopathy works wonderful with the single remedy rubrics repertorial approach. It is a well-known fact that classical approach is always the best in homoeopathy but there are certain occasions and situations where one has to adopt the mode of key note prescribing, in this aspect the study of single rubrics of a medicine gives an important aid. One can say that repertory makes the study of materia medica more interesting, comprehensive, affordable and easy. A patient can be successfully treated by prescribing a particular drug on the bases of a single peculiarity reveled by them. So, homoeopathy plays a wonderful role in managing psycho-somatic type of clinical conditions.

Keywords: psychiatric condition , psycho-therapy , psycho- somatic disorders, DSM – V, homoeopathy , repertorial approach , single remedy -rubric.

Abbreviations: DSM – diagnostic and statistical manual of diseases.

Introduction

A psychological disorder, is broadly, a condition characterised by distressing, impairing, and /or atypical thought (anxiety and fear), feeling and behaviour. This acknowledgement of the interconnectedness of body and mind is not simply a vague, impractical concept. The homoeopathic understanding of health is intimately connected to its understanding of the mind in general¹. Homoeopathy is a holistic approach to disease, based on Gestalt theory; and asserts that *no disease is local without affecting the whole body*. It

addresses the cause of the disease and strengthens the entire body to eradicate the disease by itself¹. Homoeopathy strongly believes that all diseases' symptoms are natural body-healing signs, where vital force struggles to re-establish the homoeostasis, the health state, in the body. Homoeopathy is playing an important role in managing psycho- somatic type of clinical conditions since last 2-3 decades². The two very common prevailing psychological condition which are usually seen in our practice as well as routine life, i.e.1) Anxiety, 2) Fear. Anxiety is the condition in which anticipation of

future threat. Fear is the condition in which emotional response to real or perceived imminent threat.¹Homoeopathic single remedial rubrics repertorial approach for psychiatric Condition: (anxiety and fear)^{3,4,5,6,7}

Anxiety rubrics - italics

1. Anxiety evening until 11p.m.:- *Bor*.
2. Anxiety evening bed in ameliorate: - *Mag-c*.
3. Anxiety evening bed in closing eye on: - *Mag-m*.
4. Anxiety evening 6p.m.:- *Dig*.
5. Anxiety ascending steps, on: - *Nit-ac*.

6. Anxiety church bells, from hearing: - *Lyss*.
7. Anxiety coition thought of (in a woman):- *Kreos*.
8. Anxiety continence prolonged, from: - *Con*.
9. Anxiety cruelties, after hearing of: - *Calc*.
10. Anxiety drinking after: - *Cimx*.
11. Anxiety exertion of eye: - *Sep*.
12. Anxiety expected of him, when anything is: - *Ars*.
13. Anxiety looking steadily:-*Sep*.
14. Anxiety playing piano, while: - *Nat-c*.
15. Anxiety pursued when walking, as if: - *Anac*.
16. Anxiety stool while straining at: - *Caust*.

Fear rubrics - italics

17. Fear evening walking while: - *Nux-v*.
18. Fear alternating with mania:-*Bell*.
19. Fear death, that she will die: - *Agn*.
20. Fear death vomiting: - *Ars*.
21. Fear death walking while: - *Dig*.
22. Fear failure of, in business: - *Psor*.
23. Fear gallows of the: - *Bell*.
24. Fear jump out of bed from: - *Ars*.
25. Fear mischief, he might do, night on waking: - *Phys*.
26. Fear piano when at: - *Phos*.
27. Fear day something wrong l, lest he should: - *Lil-t*.
28. Fear sleep he will never sleep again: - *Ign*.
29. Fear sold, of being: - *Hyos*.
30. Fear surprises, from pleasant: - *Coff*.
31. Fear syphilis of: - *Hyos*.
32. Fear walking in the dark:-*carb-s*.
33. Fear throat, from sensation of swelling of: - *Glon*.
34. Fear wind of: - *Cham*.

Anxiety rubrics - bold

35. Anxiety hot air as if in: - **Puls**.
36. Anxiety ineffectual desire for stool from: - **Ambr**.
37. Anxiety pressure on chest: - **Sulph**.
38. Anxiety walking which make him walk faster: - **Arg-n**.
39. Anxiety warm bed yet limbs cold if uncovered: - **Mag-c**.

Fear rubrics - bold

40. Fear approaching him lest he be touched: - **Arn**.
41. Fear death pain from: - **Coff**.
43. Fear death pregnancy during: - **Acon**.

43. Fear imaginary things animal: - **Bell**.
Commonest clinical psychological conditions associated with anxiety and fear are:⁸

1. Restlessness or feeling keyed up or on edge.
2. Being easily fatigue.
3. Difficulty in concentration or mind and going blank.
4. Irritability.
5. Nervousness.
6. Discomfort and distress.

DISCUSSION AND CONCLUSION:

Homoeopathy has vast scope in psycho-somatic disorders where the mental symptoms are considered as the base of selection of remedy. Repertory is the tool which cut short the physician time, by using repertory one can easily get a narrow range of similar remedy and similimum can be prescribed after confirming with the materia medica. Peculiar mental symptoms and special sensations are given primary importance in homoeopathic therapeutic applications. It is particularly insisted by our Masters that selection of medicine should be done only after especially

considering the peculiar mental symptoms and special sensations exhibited by the patient. Homoeopathy plays the vital role on the management of psychological disorders. The basic need of the person is to makes life healthy and happy. Mental health is the superior in all aspects if mind goes well than person runs well and lives a healthy life. Thus, it can be said that the homoeopathy is a good choice in upcoming era for managing Psycho-somatic type of psyche conditions.

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Relevance of Jungian psychology in homoeopathy

Dr Rajat Dwivedi

ABSTRACT: There is a substantial resonance between Jungian psychology and homoeopathic medicine. In the latter, we seek to understand the patient in his or her totality by virtue of individualising features, which guide us to the similar medicine. Likewise in Jungian psychology, the symbolic language of the unconscious such as is revealed to us in dreams, active imagination and synchronicity is a reflection of the aspects of the individual still to be discovered. The objective of both seems alike. This article reviews the relation between the philosophy of Carl Jung and Hahnemann.

Keywords: *Carl Jung, psychology, homoeopathy*

Introduction

The transformation from the “slime” of prima materia into gold is the stuff of alchemy with alchemy being viewed as a common wellspring for the disciplines of depth psychology and homoeopathy.

C.G. Jung (1875-1961), and colleague Marie-Louise von Franz (1915-1998) found alchemy to be an extremely useful metaphor for the psychoanalytic process. Homoeopaths are also well versed in this metaphor.^[1]

The process of turning poison into medicine is nothing if not an alchemical transformation. Both disciplines originated Europe in the late nineteenth and late eighteenth centuries respectively. Alchemy originated in ancient China, before the first millennium BCE. Its path can be traced through India, the Middle East, Egypt and Medieval Europe. It has recently been suggested that alchemy is finding new expression in quantum physics and neuroscience.^[2]

In homoeopathy, we can refer to each medicine as representing an archetype in its physical and emotional characteristics. In doing so, we must realize that the domain of an individual remedy is unknown and unknowable in its entirety, but that we experience it in part (more so with well-proven and clinically tested remedies) and cannot corral it into limited, “pat” descriptions, such as “mental essences”. Of course, one looks for the “fingerprint” of the remedy in

the symptoms of the patient, if we are considering the prescription of a polychrest. The fingerprint is that core cluster of symptoms: mentals, generals and modalities, without which prescription of the polychrest is less likely to be successful. Beyond that, there is tremendous variety in the presentations of the homoeopathic archetypes. For example, archetypes such as those of *Sepia* and *Phosphorus* are known to us in larger part because of extensive provings, clinically cured symptoms and reconfirmation with experience, but the totality of the archetype is still not known by us, nor does the totality of the known constellation of aspects appear in any one patient. Similarly, like waxing moons, the archetypes of countless lesser-known remedies such as *Grindelia robusta* or *Juglans regia* are partly in the shadow of still-to-be-conducted provings and clinical experiences.^[3]

Transference and counter-transference described in the interaction of patient and professional in homoeopathy and depth psychology: The relationship is an intimate one, and both patient and caregiver may be affected deeply as a result of the interaction. In Jungian psychology, the relationship is a long one, and these issues are of more intense importance. The longer and more difficult the relationship in the homoeopathic system, the more likely it will be that these issues will need to be addressed on an ongoing basis. Suffering, then, is commonly thought to occur only in the patient, but it can frequently occur in both, especially if progress is not occurring or if there

exists an unacknowledged transference-countertransference situation which affects not only the patient but also the caregiver. By now, it's pretty apparent that we're all in this together. Whether we're patient or caregiver, we can't escape the necessity of doing our inner work⁽⁴⁾.

In the Jungian model, the suffering of conflicting opposites (usually involving ego desires opposing the impetus of the self) can generally go one of two ways: the individual can become identified with the position of the ego or with an emotion in relation to the conflict, or he/she can persist in “holding the tension” between the opposite inclinations, not becoming identified with either, until the situation transforms. Crucifixion is an apt metaphor, with the cross representing the crossing of the opposites, and the crucifixion as bearing the tension that results. The metaphor extends to the Christ figure as exemplifying suffering in the service of conscious redemption (refer back to the earlier discussion of unconscious wholeness, “original sin”, etc.)⁽⁴⁾

It's like a tilting pool table: the pockets representing identification with a particular position or emotion and the cue ball being the ego. If the table is not allowed to tilt too far in any one direction, the ego doesn't disappear into identification with one emotion or position, while the Self works out a transformation. This is not a passive process, but an actual “cooking” of the emotions, as if in the alchemical retort. The cooking is the voluntary experience

of feeling the feelings. This can be, as many have experienced, an extremely intense process. As this is done, and attention is paid to the symbols which emerge from the unconscious (the self), the archetypal world cooperates in the process of transformation. The point is that suffering may be done consciously or unconsciously. The more consciousness we can have as we all undergo our inevitable sufferings, the more the meaning can become clear, making the suffering more bearable. It's akin to facing the adversary (and potential transformative agent) as opposed to having it invisible and behind us⁽⁴⁾.

Hegel described the opposites as thesis and antithesis, which when borne in somewhat of a balance, results in a synthesis, which transcends and is different from both. (The synthesis then becomes the thesis of a new round and the process continues). The synthesis was referred to by Jung as the transcendent function, the factor which transforms the impasse. Suffering the tension of the opposites can happen on a small scale many times in each day, and can also be in effect for months in more global conflicts within individuals.^[5]

In the Jungian model, the transcendent function results from holding the tension of the opposites and attending to the symbols brought forward by the archetypal psyche/self. In the homoeopathic model, the transcendent function is supplied by/catalysed by the similar remedy. Therein lies the beauty of this wonderful art with which we are blessed. Once again we see the parallel between symptoms and symbols as leading to the healing process⁽⁶⁾.

Again, the disciplines of homoeopathy, Jungian psychology and alchemy are brought together in a quote in Jung, by Gerhard Dorn, an alchemist: "In the human body is concealed a certain metaphysical substance known to very few, which needeth no medicament, being itself an incorrupt medicament...the

Philosophers (alchemists), through a kind of divine inspiration, knew that this virtue and heavenly vigour can be freed from its fetters; not by its contrary...but by its like. Since therefore some such thing is found, whether within man or outside him, which is conformable to this substance, the wise concluded that like things are to be fortified by like, by peace rather than by war."⁽⁴⁾

Contributions of Edward C Whitmont

Edward Whitmont (1912-1998), the American MD, analyst and homoeopath who wrote *Psyche and Substance: Essays on Homoeopathy in the Light of Jungian Psychology*, is one such modern alchemist.

According to both Jung, and subsequently to Whitmont, there existed an older bridge between psyche and soma, art and science, known as alchemy. In *The Alchemy of Healing: Psyche and Soma*, Whitmont has asked, "to consider the possibility that illness and healing are psychosomatic aspects of that same individuation, a process that may be both human and cosmic." He states that the alchemical transmutation of base metal into gold functions for Jung as a metaphor for the individuation process. Furthermore, Whitmont suggested that for homoeopaths, the alchemical process functions as a metaphor for the healing journey, and by implication, that individuation and healing are similar processes.^[3]

In his chapter on Sulphur, Whitmont has mentioned: "C. G. Jung has conclusively demonstrated that the alchemists were the psychologists of their day, searching for a synthesis of human knowledge. Their truest practitioners were seeking the 'philosopher's stone,' the mysterious 'lapis' that symbolised the total man. Analytical psychology describes this total man as the 'self' whose phenomenology coincides exactly with the rich and varied symbolism to be found in the alchemical literature and in the affiliated pagan, gnostic and Christian writings. In working

with their materials, the alchemists' unconscious psyche reacted in calling forth concepts, images and visions which the alchemist projected upon his substance — namely, ascribed it to the substance as its quality. Whereas, to the modern chemist these phantasies are absurd and meaningless, for the analytical psychologist they refer to definite formative elements of the unconscious psyche: since these are to be found not only in the alchemist's phantasies, but also in the average dream material of people of our own time, they are meaningful and practically applicable for the diagnosis, interpretation and treatment of contemporary psychological problems."^[7]

Physical problems can be added to the psychological problems mentioned by Whitmont above. In homoeopathy, dream material is used to confirm the prescription of remedies for physical, mental, and emotional problems. As Whitmont has mentioned, there is no separation between psyche and soma, or between psychological and physical problems. "In the light of the new physics, the mind/matter dichotomy is thus an illusory separation brought about by experiencing reality through our five senses. Functionally, mind and matter are not separate. Homoeopathic remedy pictures can be regarded as healing images, or "mythologems," to use a word of Whitmont's from *The Alchemy of Healing: Psyche and Soma*. These images, or remedy pictures are described by Whitmont as "non-material forcefields — 'souls' as it were — of practically any and every existing substance." As homoeopaths know, these remedies are able to aid in psychosomatic transformation and effectively to influence health and counter disease."^[8]

CONCLUSION

The mind is an epiphenomenon of the body, and the body is an epiphenomenon of the mind. Humans are operated as body-minds. The body is the visibility of the soul, and the soul is the life of the body. One cannot deal with everything by sheer

will power or mental approaches. We are embodied in a physical cosmos, and we have our bill to pay to physical existence. And that includes our relationship to the physical aspect of the earth . . . to plants, stones, and animals.

Having woven together some common threads to create a complex tapestry of homoeopathic and depth psychological approaches to healing, I would like to conclude by revisiting an important area of common interest: dreams. One of the shared interests of both homoeopaths and depth psychologists is in the area of dreams, which Jung also connects to alchemy in volume 12 of his collected works, entitled "*Psychology and Alchemy*." Jung asserts that there is only one aspect of human experience that re-lates equally to both the inner and the outer human being; this is religion. According to Jung, the problem with religion however, is that for most people, it provides an external object of worship, instead of "a transforming influence

in the depth of the soul."^[7]

This approach which brings together Homoeopathy and depth psychology may help us make a few first stumbling steps towards clarifying some of our bewildering problems, such as the relationship of life and personality problems to illness, of illness and symptoms to the similar remedy, etc.

Perhaps in future, both homoeopaths and depth psychologists can work together to weave an even more holistic way of healing employing dreams, symbols, images and the metaphor of alchemy. This healing matrix can be envisaged as being woven from the many colours and textures of psyche and soma, including a thread or two of various metals and, of course, the alchemist's gold.^[2]

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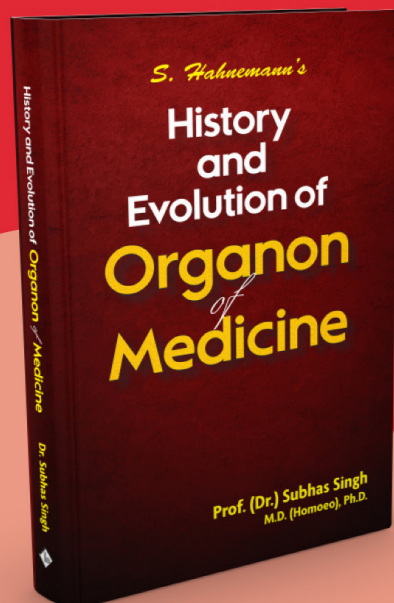
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Homoeopathic approach in secondary amenorrhoea – a case report

By Dr Manisha Kumari, Dr Nitesh Kumar

ABSTRACT: In this hectic life, women often suffer from different kind of menstrual problems. Among these one of the most common problems which gynaecologist encounter is secondary amenorrhoea in different age groups. According to homoeopathy, menses can be suppressed in an individual due to any mental or physical reasons. There are lots of homoeopathic medicines mentioned in homoeopathic materia medica which proved to be very effective in cases of secondary amenorrhoea.

Keywords: Secondary amenorrhoea, homoeopathy, *Pulsatilla nigricans*

Abbreviations: Polycystic ovarian syndrome (PCOS), dilation and curettage (D and C), last menstrual period (LMP), outpatient department (OPD), once a day (OD), twice a day (BD)

Introduction

Amenorrhoea is the absence of menstruation. Secondary amenorrhoea occurs when one had at least one menstrual period and stop menstruating for six months or longer¹. Secondary amenorrhoea is different from primary amenorrhoea. It usually occurs if one hasn't had her first menstrual period by age 16.

A variety of factors can contribute to this condition, including:

- most common cause of secondary amenorrhoea is pregnancy.
- birth control pills
- certain medications that treat cancer, psychosis, or schizophrenia
- hormone shots
- medical conditions such as hypothyroidism
- being overweight or underweight

Causes of secondary amenorrhoea

During a normal menstrual cycle, oestrogen levels rise. Oestrogen is a hormone responsible for sexual and reproductive development in women. High oestrogen levels cause the lining of the uterus to grow and

thicken. As the lining of the womb thickens, our body releases an egg into one of the ovaries. The egg will break apart if a man's sperm doesn't fertilise it. This causes oestrogen levels to drop².

During the menstrual period, uterus shed the thickened uterine lining and extra blood through the vagina. But this process can be disrupted by certain factors.

1.Hormonal imbalance

A hormonal imbalance is the most common cause of secondary amenorrhoea³. A hormonal imbalance can occur as a result of:

Tumours of the pituitary gland

An overactive thyroid gland

Low oestrogen level

High testosterone level.

Hormonal birth control can also contribute to secondary amenorrhoea. Hormonal birth control pills, may cause one to miss menstrual periods. Certain medical treatments and medications, such as chemotherapy and antipsychotic drugs, can also trigger amenorrhoea.

2.Structural issue

Conditions such as polycystic ovarian syndrome (PCOS) can cause hormonal imbalances that lead to the growth of ovarian cysts. Ovarian cysts are benign, or noncancerous, masses that develop in the ovaries. PCOS can also cause amenorrhoea.

Scar tissue that forms due to pelvic infections or multiple dilation and curettage (D and C) procedures can also prevent menstruation.

D and C involves dilating the cervix and scraping the uterine lining with a spoon-shaped instrument called a curette. This surgical procedure is often used to remove excess tissue from the uterus. It's also used to diagnose and treat abnormal uterine bleeding.

3.Lifestyle factors
Body weight can affect menstruation. Women who are overweight or who have less than 15 percent body fat may stop getting menstrual periods. This is especially true for athletes who train extensively or excessively.

Emotional stress is another possible cause of secondary amenorrhoea. Your body may respond to extreme stress by disrupting your normal menstrual cycle. Your menstrual periods will most likely resume once you work through your tension and anxiety¹.

CASE STUDY

Symptoms of secondary amenorrhoea

The primary symptom of secondary amenorrhoea is missing several menstrual periods in a row. Women may also experience:

1. Acne
2. Vaginal dryness
3. Deepening of the voice
4. Excessive or unwanted hair growth
5. Headache
6. Changes in the vision

Case study

A lean-thin lady aged 24yrs presented in OPD of RBTS Govt. Homoeopathic Medical College & Hospital, Muzaffarpur with complaint of absence of her menstrual cycle for 7 months, i.e.- LMP of the lady was 5th January 2021. The condition appeared for the first time since her menarche. Together with this major/chief complain lady had other problems like- headache which aggravate from overwork or over ex-

haustion and also in evening since 3months. Distension of stomach with excessive flatulence worse after eating fatty food.

Past history- Patient had typhoid 2years back

Family history- Father diabetic and hypertensive

Personal history-

Occupation - Housewife

Marital status- Married (2years of marriage)

No. of issues- Nil

Relation with family members- Good

Sterilization /contraceptives use- No

Any medicine taken regularly- No

Mental generals:

Patient was highly emotional, timid and used to weep easily

Physical generals:

Patient was chilly, thirstless. Her appetite was good, desire for salty and fatty food. Stool changeable (sometimes dry and hard sometime loose stool) in character, urine clear and 1st sleep had disturbed.

General modalities- worse from heat, after eating (especially fatty food), better in open air, by motion.

Menstrual history- absence of menses for 7 months, menarche at age of 13years with mild dysmenorrhoea

Investigations advised

Complete blood count

Pregnancy test

Thyroid test (thyroid stimulating hormone)

Diagnosis - Secondary amenorrhoea

Justification of diagnosis - Pathological investigation &and symptomatic¹

Analysis and evaluation of symptoms:

S.No.	Symptom	Analysis	Evaluation	Miasmatic Analysis ⁴
1.	Highly emotional	mental general	+++	Psora
2.	Timid	mental general	+++	Psora - sycotic
3.	Weeps easily	mental general	++	Psora
4.	Thirst less	physical general	+++	Psora
5.	menses, absent	particular	+++	Psora
6.	Desire for salty things	physical general	++	Sycosis
7.	Aversion to fatty food	physical general	++	Psora
8.	Sleep disturbed, especially 1st sleep	physical general	++	Syphilis
9.	Headache from overwork or over exhaustion which aggravated in evening	particular	++	Syphilis
10.	Shooting like pain in nape of neck and back which is better in open air	particular	++	Psoro-syphilitic

11.	Distension of stomach with excessive flatulence which aggravated after taking fatty food	particular	+++	Psoro-syphilitic
12.	Stool changeable in nature	particular	++	Sycosis
13.	Thermally chilly	physical general	++	Psora

Repertorisation5

Repertorisation

Type Keywords for Quick Repertorisation (Ctrl+F)

Symptoms : 13 Remedies : 1244 Filters : Normal

Remedy	Puls	Sulph	Nat-m	Sil	Phos	Sep	Lyc	Bell	Merc	Ars	Calc	Carb-v	Nat-c	Chin	Nux-y	Nit-ac
Totally	42	38	36	33	33	33	32	32	31	31	31	31	31	31	31	31
Symptoms Covered	12	11	12	11	10	10	10	9	11	10	10	10	10	9	9	9
Kingdom																
[Complete] [Mind] EXCITEMENT, EXCITABLE: (982)	4	4	4	3	4	4	4	4	4	4	4	3	4	4	4	4
[Complete] [Mind] TIMIDITY: (250)	4	4	3	4	4	4	4	4	3	4	4	4	4	3	3	4
[Complete] [Mind] WEEPING, TEARFUL MOOD: (618)	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Stomach] THIRSTLESSNESS: (390)	4	4	3	3	4	4	4	4	3	4	2	3	3	4	4	4
[Complete] [Female Genitalia] MENSES: Absent, amenorrhea: (293)	4	4	3	4	3	4	4	3	3	3	3	1	3	3	3	3
[Complete] [Generalities] FOOD AND DRINKS: Salt or salty food: Desires: (159)	2	3	4	1	4	3	2	1	1	3	4	3	3	3	3	3
[Complete] [Generalities] FOOD AND DRINKS: Fat and rich food: Desires: (116)	2	3	1	3	1	1	1	1	4	3	2	1	1	3	3	3
[Complete] [Sleep] DISTURBED: Midnight: Before: (5)	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
[Complete] [Generalities] COLDNESS, LACK OF VITAL HEAT: (755)	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4

Prescription: -

After case taking, repertorisation and book references^{6,7,8} first prescription was Pulsatilla nigricans 200 prescribed OD for two consecutive days on date 21/08/2021.

Rx

1. Pulsatilla nigricans 200/2dose/OD

2. Rubrum 30/BD/ for 15 days

Selection of remedy with justification: In repertorial analysis, Pulsatilla nigricans covered most of the symptoms and scored the highest.

Selection of potency with justification: It based on susceptibility of the patient. Higher the susceptibility; higher the potency was selected.^{9,10}

Patient Name: MR. SURESH K. RAJ					
Lab No.	39572813	Age	34 Years	Gender	Male
Ref By	Dr. MANISHA KUMAR	Report Status	Reported	Printed	20/08/2021 3:48:00PM
Test Name					
COMPLETE BLOOD COUNT (CBC) (Expected Reference Range)					
Hemoglobin	13.10	g/dL	12.00 - 15.00		
Packed Cell Volume (PCV)	36.00	%	36.00 - 48.00		
HRC Count	4.42	mill/cmm	3.80 - 4.80		
MCV	80.00	fL	82.00 - 101.00		
MCH	29.00	pg	27.00 - 32.00		
MCHC	33.33	g/dL	31.00 - 34.00		
Red Cell Distribution Width (RDW)	14.00	%	11.60 - 14.00		
Total Leucocyte Count (TLC)	16.41	Reactive	4.00 - 10.00		
Differential Leucocyte Count (DLG)					
Segmented Neutrophils	59.40	%	40.00 - 60.00		
Lymphocytes	39.80	%	20.00 - 40.00		
Monocytes	2.00	%	2.00 - 10.00		
Eosinophils	7.80	%	1.00 - 6.00		
Basophils	0.00	%	0.00 - 2.00		
Absolute Leucocyte Count					
Neutrophils	6.14	Reactive	2.00 - 7.00		
Lymphocytes	6.53	Reactive	1.00 - 4.00		
Monocytes	0.34	Reactive	0.00 - 1.00		
Eosinophils	0.79	Reactive	0.00 - 0.50		
Basophils	0.00	Reactive	0.00 - 0.10		
Platelet Count	199.0	Reactive	1.00 - 400.00		

CASE STUDY

TEST REPORT, BETA HCG

Name: Mrs. SUPRIYA RAJ
Lab No.: 388722513 Age: 24 Years Gender: Female
Ref By: Dr. MANISHA KUMARI Report Status: Final

Test Name: Results Units Bio. Ref. Interval

HCG (BETA) TOTAL, PREGNANCY, SERUM (ECLIA)
Result: ~0.10 Units: mIU/mL

Interpretation

PREGNANCY WEEKS POST LMP	HCG LEVELS IN mIU/mL
3	5.80-71.20
4	5.50-750
5	217-7138
6	158-31795
7	1097-163563
8	12983-149575
9	63803-151610
10	46109-186977
12	77442-210612
14	13950-62190
15	12038-70871
16	2040-26411
17	8170-53868
18	8099-58176
Non Pregnant Female	<5
Trophoblastic disease	>100,000

TEST REPORT, BETA HCG

Name: Mrs. SUPRIYA RAJ
Lab No.: 388722513 Age: 24 Years Gender: Female
Ref By: Dr. MANISHA KUMARI Report Status: Final

Test Name: Results Units Bio. Ref. Interval

HCG (BETA) TOTAL, PREGNANCY, SERUM (ECLIA)
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8	12983-149575
9	63803-151610
10	46109-186977
12	77442-210612
14	13950-62190
15	12038-70871
16	2040-26411
17	8170-53868
18	8099-58176
Non Pregnant Female	<5
Trophoblastic disease	>100,000

Follow ups

Date of visit	Change in symptoms	Prescribed medicine/potency/dose
04/09/2021	Headache better, other complaints as it is.	Rubrum metallicum 30/for 15days/BD
21/09/2021	Headache much better, other complaints as it is.	Rubrum metallicum 30/for 15days/BD
06/10/2021	Distension of stomach on taking fatty food better, no headache.	Rubrum metallicum 30/for 15 days/BD
25/10/2021	Menses appeared on october with mild dysmenorrhoea and normal blood flow	Rubrum metallicum 30/for 7 days/BD
01/11/2021	Menses disappeared on 29 th october, distension of stomach much better.	Rubrum metallicum 30/for 15days/BD

Conclusion

Diseases of female reproductive system are one of the greatest challenges for modern medicine. Menstrual irregularities as one of the most frequent gynaecological complaints can affect the several aspects of women's health including their physical, mental, and social health. This case shows homeopathy is effective in case Secondary amenorrhoea, if we prescribe the medicine on the basis of totality of symptoms. Although study of a single case does not constitute a strong opinion the outcome is encouraging.

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The role of *Berberis vulgaris* in the management of arthralgia

Dr Rajeev Khanna, Dr Neelima Singh, Dr Nupur Kumari

ABSTRACT: Arthralgia is very common in both sexes mainly in women then male. The literature shows that *Berberis vulgaris* has good action in rheumatic pains apart from renal calculi expellant or renal colic due to calculi. It's mainly indicated in old, gouty constitution, and belongs to rheumatic diathesis and is helpful in treating the joints pain. The main alkaloid is berberine which helps in treating various disease like renal calculi, fever, leucorrhoea, vitiligo, jaundice, etc.

Keywords: *Berberis vulgaris*, arthralgia, joints pain, rheumatism, gout, homoeopathic medicine, berberine, acute, chronic.

Abbreviations: *Berberis vulgaris*- Berb vul, caesarean section -CS, thrice in a day -TDS

Introduction

Berberis vulgaris was proved and introduced by Dr Hesse in 1835 and published in first volume of *Journal fur Arzneimittellehre*. Commonly known as barberry and belongs to Berberidaceae family found mainly in Europe, New England. It is prepared from fresh bark of roots, under class IV preparation of mother tincture.¹

Chemical constituents of *Berberis vulgaris* is berberine, carotenoids, alpha and beta carotenes, lutein, zeaxanthin, chrysanthemoxanthin, flavoxanthin, auroxanthin, capsanthin, oxyancanthin, resin, tannin, essential oil, citric and malic acid.^{2,3} It's having rheumatic and gouty diathesis.^{4,5}

Many famous author's literature show that it help in managing the pain of rheumatic origins.

1. Expanded work of Nash⁶

There is bruised pain with numbness, stiffness and lameness in region of kidney or in the small of back < in bed in the morning. Rheumatism or pains like gouty pain in the joints, pain radiates from a centre. Rise from a seat with difficulty.

Sensation of numbness, stiffness and lameness with painful pressure in lumbar region. It is especially to be thought of in arthritic and rheumatic affection when there back symptoms connected with urinary alterations.

2. Lotus *Materia Medica*¹

Berberis vulgaris has pains which are radiating from one point, shooting outward or all over, sticking, burning, smarting, and soreness. Pain rapidly change their locality and character. Pains may be felt all over the body, emanating from small of back. Spinal irritation. Movement aggravates it's complaints. Stitches are frequent and a bubbling sensation are characteristic. Tearing, burning pain or bubbling sensation in joints. Rapid change of symptoms. Thirst alternates with Thirstless, hunger and loss of appetite.

Limbs-rheumatic paralysis pain in shoulders, arms, hands and fingers, leg and feet. Neuralgia under finger nails with swelling of finger joints. Sensation of cold on outside of thighs. Heels pain as if ulcerative. Pain in balls of feet on stepping. Intense weariness and lameness of legs after walking a short distance.

3. Lectures on Homoeopathic

*Materia Medica*⁷

Like *Benzoicum acidum* it fits into the gouty and rheumatic sphere. Wandering pains in the nerves, a nerve sheath. The wandering, stitching tearing, twinging pain that runs through *Berberis vulgaris* are found in old gouty constitution, and i.e., where one gets the greatest benefits from *Berberis vulgaris*, of course, in all of the gouty states we must look to the liver and kidney for pains and various distresses. They are centres of observation because there organs are more or less disturbed. Burning, stinging, tearing, stitching, and wandering pains are the grand features of *Berberis vulgaris*. The joints sometimes swell- enlargement of the joints. But the swelling is not so common as the pains without swelling soreness and lameness in joints with the radiating pains. There will be burning, stitching, tearing and the pains will radiate and appear in one part of the body then in another.

4. *Materia Medica of Homoeopathic medicine*⁸

Pains rapidly change their locality and character. Symptoms rapidly alternates. Thirst alternates with Thirstless, hunger alternates with loss of appetite, etc. Pains are radiating from one point shooting outward or all over sticking, burning, smarting,

soreness, numbness insensible to extreme heat and cold. Gurgling or bubbling sensation. < Morning, rising from sitting, standing, fatigue. Stitches in neck and back < respiration. Backache with severe prostration < sitting or lying. Crushing, stitching, paralysing pain in lumbar region. Pain from iliac crests down front of thighs when urinating. Post operative

pain in lumbar region. Neuralgia under finger nails with swelling of fingers joints.

1. A Study on *Materia Medica*⁹

Every feature of the patient spe-

cially of constant pain and suffering. Wandering and radiating pain. Bubbling feeling as if water were coming out through the skin, joints and other parts of the body. Lumbago pains extends from the back, round the body and down the thighs. < aggravated by movement and fatigue.

Practical approach via cases

Acute case:

Case history-

A young female of 24 years of age came with the severe pain in left feet and toes with swelling in feet since one day, unable to stand and walk. < standing, walking. There was no

other complaints. No history of injury.

Physical generals-

She was thirstless during that time. Appetite was normal. Desire for sweets. Stool, satisfactory and once daily. Good sound sleep for 7 hours in night.

Diagnosis- Arthralgia¹⁰

Case analysis-

Pain in feet and toe with swelling, < standing and walking. She was thirstless during pain.

Treatment -

On the basis of literature and to know the action of *Berberis vulgaris* in management of joints pain, first

Follow up-

Date	Symptoms:new/old	Treatment
12/02/2021	No pain, no swelling, while standing and was comfortably walk all around.	<i>Saccharum lactis</i> 30/ TDS for 5 days
16/02/2021	No new symptoms. Condition better, no pain and no swelling noticed	<i>Saccharum lactis</i> 30/TDS for 7 days
22/02/2021	Thirst back to normal. No pain and swelling.	<i>Saccharum lactis</i> 30/TDS for 7 days
03/03/2021	Condition of the patient better without any pain and swelling in past two weeks	<i>Saccharum lactis</i> 30/TDS for 7 days

After 03/03/2021, patient didn't visit the clinic. After inquiring over call, she informed about no recurrence of the pain.

Chronic case but acute paroxysm

A 35 years old female came with the complaints of multiple joints pain with swelling around ankles since more than 6 months, and had no relief after taking multiple medicines of other system. Pain worsened since 2 days.

She mentioned to that she developed this pain after her second delivery which was CS

Past history: recurrent urinary tract

infection after her second delivery which was CS

Physical generals:

Appetite was normal. She drank two to two and half litres of water per day, and had desire for sour things. Stools were satisfactory, once a day in morning. She was having burning during micturition every time. Perspiration was scanty. Good, sound sleep about 7-8 hours in night.

Mental generals:

Anxious about health

Fear of children

Menstrual history:

LMP 15/01/22 regular but scanty; backache before and during cycle. White discharge per vagina present with burning over the part, especially during micturition

Case analysis:

Mental generals- anxious about health and fear of children

Physical generals- burning during micturition

Particulars- Multiple joint pain, with swelling around ankles.

Diagnosis- Arthralgia¹⁰

Repertorisation 11-

Rubrics taken were:

Extremities; pain

Extremities; swelling: ankle

Urine; burning (including hot)

Repertorisation						
Symptoms: 3 Remedies: 243 Applied Filter						
Remedy Name	Bar-c	Bar-m	Bell	Benz-ac	Berb	Bol
Totality / Symptom Covered	2 / 2	1 / 1	6 / 2	3 / 2	3 / 2	2 / 1
[Kent] [Extremities pain]Pain: (168)	1		3		1	2
[Kent] [Extremities]Swelling:Ankle: (56)				1		
[Kent] [Urine]Burning (includes hot): (156)	1	1	3	2	2	

Treatment:

After repertorising, Apis mellifica was coming as the grade I medicine while Berberis vulgaris covered 3/2 symptoms. Berberis vulgaris to enquire it's effectiveness in rheumatic diathesis and management of pain of joints.

Berberis vulgaris 30 given on 23rd January 2022, four globules, TDS for 2 days

Follow up:

Date	Symptoms: new/old	Treatment
25/01/22	pains and swelling – slightly better	<i>Berberis vulgaris</i> 30/ 4 globules TDS for 7days ¹¹
31/01/22	She felt better and noticed no burning during urination. Pain better, swelling reduced	Saccharum lactis 30/TDS for 7 days
07/02/22	Better in pain , no swelling around ankles	Saccharum lactis 30/TDS for 15 days
21/02/22	No new symptoms seen. Pain better and no swelling	Saccharum lactis 30/ TDS for 15 days
05/03/22	No pain and swelling. No sign of white discharge per vagina and burning during micturition	Saccharum lactis 30/TDS for 15 days

Conclusion

After reading many literatures and applying them on patients to verify it's effectiveness, it was found that Berberis vulgaris works well in therapeutic management of the pain in joints. As the main action of its in gout or rheumatism, it also helps

to clear or eliminate the crystals of uric acid renal calculi. The berberine which is the main constituents of this remedy greatly works in managing various conditions like jaundice, fever, renal calculi, rheumatism, etc. For arthralgia, commonly used medicines are Rhus toxicoden-

dron, Bryonia alba, Sulphur, Chelidonium majus, Guaiacum, etc. but Berberis vulgaris is never thought of. As mentioned for old gouty constitution, it's has a wide action on rheumatic and gout-type of pain.

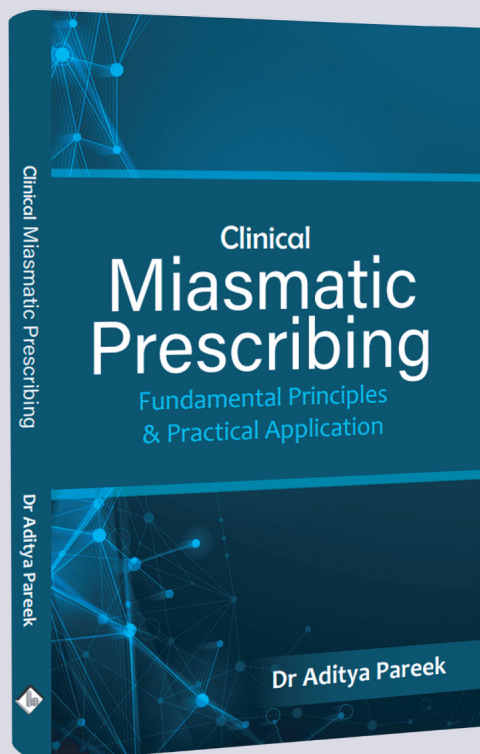
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Clinical Miasmatic Prescribing Dr Aditya Pareek



- The author has shared his practical experience on miasms and how to clinically apply the different miasms in practise.
- The book is divided into 3 sections. The first section aims to put across the fundamentals of theory, its utility and brief history. It also deals with the applied aspects, i.e. anti-miasmatic prescribing.
- In the 2nd considering the importance of clear clinical differentiation, comparative tabulations have been provided. Remedy discussion has been made for most of the symptoms mentioned.
- The 3rd aims to show the applicability and practical utility of miasms through various case discussions.

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Understanding dream for better prescribing: enlightening through a case

Dr Azizul Islam Khadim

ABSTRACT: Human body needs sleep to function, just as it needs food and water to survive. It is mostly said that purpose of sleep is to dream. In this article, the different concepts of dream are being discussed, and explained how dream helps in homoeopathic prescription, miasmatic aspect and a case of primary amenorrhoea treated with the help of homoeopathic remedy and special emphasise on dream rubric.

Keywords: dream, homoeopathy, miasm, primary amenorrhoea, *Pulsatilla nigricans*

Abbreviations: BD – twice a day

Introduction

The word “**dream**” traditionally traced back to thirteen century word “**dreme**” means- “**joy, gladness, mirth**”. In *Oxford English Dictionary*, it has been described as “dream is a series of images and feelings occurring in a person’s mind during sleep. The scientific study of dream is called “oneirology”⁽¹⁾.

Not all dreams of the subject are required in detail, but one should consider any uncommon dream as a symptom and to evaluate it, especially those dreams that are recurrent, persistent over a time, or dreams that are vivid, elaborate and set on the memory, or dreams that leave a powerful emotional impact on the person. Homoeopathy deals with dream as a subjective symptom, as one cannot interpret it but can be used for prescribing point of view⁽²⁾.

Sigmund Freud concept(3):

“Dreams are the conscious expression of the unconscious fantasies, thoughts or impulses during sleep, which not accessible to the individual in wakeful state”. Dream is the royal road to the unconscious.

Dream is a system that-

- Organises individual’s self-conception
- Defines his views to other person
- Contains his views of the world, his values, ideals, his relation to environment
- Conception of his own impulses, driving forces, frustration
- Flare up his inner desire, fear, anger, etc.

Carl Gustav Jung concept:

One may come across many difficulties while trying to fulfill the wishes but fail often. This leads to fulfill the same wishes in his dreams in a fantastic manner.

Dreams offers a different point of view, resulting into a psychological adjustment, a “compensation” which is very necessary for a proper balance between conscious and unconscious action.⁽²⁾

HOMOEOPATHIC PERSPECTIVE(2):

Dreams reflect the unconscious, sub-conscious mind. They reflect the hidden desire, aversion and inner turmoil, so they assume great importance. When we going on detailed case record of an individual, a homoeopath is in a good position to analysis dream of an individual,

because dream is a subjective symptom. With the help of case taking, a homoeopath gets to know the physical generals as well as the mental aspects of patient. Unforgettable dreams are very important in homoeopathic point of view because they show the impact of dream on an individual.

Why to study dream as a homoeopath?

According to Dr N M Choudhuri,

“They give us a far better insight into the deeper nature of our patient than many of the so-called symptoms that crop up and float on the surface to meet our superficial gaze.”

MIASMATIC ASPECT(4)(5):

Every individual shows some unique feature on the basis of his dominating miasm. Dreams are the reflection of sub-conscious mind. Thus, different dreams of individual have different miasm.

- Psoric dream:** Anticipatory dream with hyperactivity of mind. Dreams of love, sadness, jealousy, fear of fright, dreams of urinating, passing stools.
- Sycotic dream:** Dreams of failure, lack of confidence,

insecurity, dream of death person, flying or falling down.

3. **Syphilitic dream:** Dreams of suicidal, homicidal and destructive, accident, wild animals.

4. **Tubercular dream:** Changeability and varying mood which gives rise to changeable dreams, dreams of travelling.

cality and character. Symptoms rapidly alternates. Thirst alternates with Thirstless, hunger alternates with loss of appetite, etc. Pains are radiating from one point shooting outward or all over sticking, burning, smarting, soreness, numbness insensible to extreme heat and cold. Gurgling or bubbling sensation. < Morning, rising from sitting, standing, fatigue. Stitches in neck and back

PRESCRIBING TECHNIQUE(2):

One can't interpret the dream. Dream is a subjective symptom like other symptoms chosen to select the medicine. Dream interlinks between the procedure of life and sensible personality. Homoeopathy usually employs dreams as:

a) Either just like any other homoeopathic symptom, or As pointers to the true mental state of the patient

As per Organon of Medicine(6):

Section-89 footnote (question during case-taking, special importance on sleep)

- How is it with his day and night sleep?
- How does he behave during sleep?
- Does he whine, moan, talk or cry out in his sleep?

- Does he start during sleep?
- Does he easily awake, or does he sleep too soundly?
- How does he feel, immediately after waking from sleep?
- When he sleeps and awakes?

Before one proceeds to analyse the dream, he should remember to;

- Avoid the fixed interpretation for symbols
- Avoid interpretation where dreams are incompletely remembered

Dreams play a two-fold part in homoeopathic prescription, one is to reveal the suppressed desire and emotion, and the other is to provide relevant rubrics for repertorization(2)

Significance of dream in homoeopathy(2):

Dreams can be incorporated into the diagnosis simply as subjective symptoms along with other symptoms of the patients. Dreams is important as a prescribing symptom, if it appears repeatedly. Dream helps to know the individual's life situation and the normal reaction to different stimulus.

- Eliminate the medicine: narrow down the field of possibilities and concentrate on a smaller set of potential remedy
- To find out the most reliable symptom
- Dreams affects the mental sphere as well as physical activity. By dealing such type cases, one gets to know the inner aspect of the person
- Dreams is the reflection of suppress desire, emotion, which forms psycho-somatic disorder(to know the cause of disease)
- Homoeopathic repertory and materia-medica contains huge

number of rubric with medicines for dreams.

A CASE OF PRIMARY AMENORRHOEA:

A 17 years girl, complaining of absence of menstruation with undeveloped breast since long times. Associated with pain the right knee for last 2 years, aggravated from hot, ameliorated from cold.

History of present complaints:

She had a complaints of primary amenorrhoea and undeveloped breast. Every month, she had crampy pain in abdomen, but no menstruation sets in. She consulted the gynaecologist, and got ultrasonography done. But everything was normal in the reports, her genitalia was also normal. She took iron tablets and other conventional medicine, but no improvement was seen.

In the past, she suffered from hepatitis, and recovered after taking conventional medicine

In her family, her elder sister suffered from same complaints, now she was alright.

Physical and mental generals:

Mentally, the patient was not paying any attention to anything, had dreams of men. She had a fear of being alone. Dreams of naked men.

While enquiring her physical general aspects, it was found that she had decreased appetite, lost her weight. She easily caught cold and could not tolerate it. Aversion to meat. She was thirstless. Her stools were satisfactory, with no complaints in urine.

Diagnosis:

Diagnosis was based on clinical symptoms and physical examination of the patient.(7)

Analysis and evaluation of symptoms:

Sl. No.	Symptom type	Symptom	Intensity	Miasmatic analysis ⁽⁵⁾	Totality of symptoms
1.	Mental general	She could not concentrate properly	++	Psora, Syphilis	a)Concentration was difficult
2.	Mental general	She had a fear of being alone	+++	Psora, Syphilis	b) She had fear of being alone
3.	Physical general	She had dreams of naked men	++	Syphilis	c) Dreams of naked men
4.	Physical general	She was thirstless	+++	Psora	d)Thirstless
5.	Physical general	Aversion to meat	+++	Sycosis	e)Aversion to meat
6.	Particular symptom	Pain in the right knee > cold	+++	Tubercular	f)Pain in the right knee > cold
7.	Particular symptom	No menstruation	+++	Psora, syphilis	g)Amenorrhoea

Repertorisation:

Symptoms		Remedy No.
[Kent] [Mind]Concentration:Difficult:		162
[Kent] [Mind]Fear (see anxiety):Alone,of being (see ...		43
[Kent] [Stomach]Thirstless:		87
[Kent] [Stomach]Aversion:Meat:		88
[Kent] [Sleep]Dreams:Men:Naked:		2
[Kent] [Genitalia female]Menses:Absent,amenorrhoea:		103

Symptoms Covered		Puls	Lyc	Sep	Kali-c	Phos	Ars	Nux-v	Apis	Chin	Con	Hell	Sulph
[KT] [Mind]Concentration:Difficult:		17	13	13	12	11	10	10	9	9	9	9	9
[KT] [Mind]Fear (see anxiety):Alone,of being (see company):		7	5	5	5	5	5	5	4	4	4	4	4
[KT] [Stomach]Thirstless:		2	3	3	2	3	1	3	2	1	2	3	2
[KT] [Stomach]Aversion:Meat:		3	2	2	2	1	2	1	3	3	2	3	1
[KT] [Sleep]Dreams:Men:Naked:		3	2	3	2	2	2	3		3		1	3
[KT] [Genitalia female]Menses:Absent,amenorrhoea:		2											
[KT] [Genitalia female]Menses:Absent,amenorrhoea:		3	3	3	3	2	2	2	2	2	3	2	3
[KT] [Extremities pain]Pain:Knee:Cold:Amel:		2											

Prescription:

After repertorisation, *Pulsatilla nigricans* possessed highest grade and highest matching of the symptoms.

Here, *Pulsatilla nigricans* was selected on the basis of mental as well as physical symptoms of the patient. The patient was changeable in nature, the symptom of dream was so

prominent to her as consulted with materia medica⁽⁹⁾⁽¹⁰⁾. Also, after repertorisation, *Pulsatilla nigricans* was the indicated remedy. So, *Pulsatilla nigricans* was selected for this case.

Prescribed on 03/02/2020

Pulsatilla nigricans 200/ 1 dose, early morning mixing with ½ cup of water for 2 days along with *Saccharum lactis* every day, two times after eating for 7 days

Selection of dose and potency:

As per *Organon of Medicine* aphorism 247, 5th edition⁽⁶⁾ and according to the susceptibility of the patient, the potency was selected. Here, the patient was highly susceptible and intensity of the symptoms was also increased. She suffered from a long time with the affection, the case was

started with higher potency.

Repetition of remedy:

Every well chosen medicine should be repeated at suitable interval aphorism 246 5th edition⁽⁶⁾ of *Organon of Medicine*. After initial improvement, if same symptoms reappeared, then the same medicine was started. ⁽¹¹⁾

Follow up:

Date of Visit	Response	Medicine prescribed
22/02/2020	No changes took place. Pain in the right knee still persisted, no menstruation occurred	<i>Rubrum</i> -200/ 1 drop BD x 15 days
11/03/2020	Patient felt better; dream did not come frequently; knee pain was slightly reduced; appetite was good	<i>Rubrum</i> -200/ 1 drop BD x 15 days
27/03/2020	No dreams came; appetite improved; sleep better; knee pain again occurred	<i>Rubrum</i> -200/ 1 drop BD x 15 days
17/04/2020	Sleep disturbed due to knee pain; again last 2 days, same dreams came	<i>Pulsatilla nigricans</i> 200/ 1 dose
01/05/2020	Sleep better, crampy pain abdomen occurred with spotting in bleeding; knee pain reduced	<i>Rubrum</i> -200/ 1 drop BD x 15 days
15/05/2020	Menstruation sets in; knee pain better; sleep better; no dream came	<i>Rubrum</i> -200/ 1 drop BD x 15 days
29/05/2020	She felt better, no complaints at all	

CONCLUSION:

Homoeopathy is the field in which we unlock different locked cases through our prescribing technique. Dream, used as a subjective symptom, should be emphasised. Here, with the help of dream, primary amenorrhoea was cured completely. One must follow the basic principles of homoeopathy to treat any case.

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Verruca vulgaris and effectiveness of homoeopathic simillimum: a case report

Dr Arti

ABSTRACT: Wart is a small, fleshy bump on the skin which is caused by human papillomavirus. Warts are commonly known as verruca vulgaris and can grow anywhere on the body. A case report of wart in 52 years old female patient who was treated successfully with individualistic homoeopathic approach. Thuja occidentalis was prescribed as a simillimum on the basis of individualization and totality of symptoms. Homoeopathy and its individualistic approach of finding a constitutional remedy provides a way for the cure of such case gently and permanently.

Keywords: wart, homoeopathy, individualistic approach, *Thuja occidentalis*

Abbreviations: HPV – Human papillomavirus

Introduction

Common warts, also known as verruca vulgaris are benign lesions caused by human papillomavirus (HPV) that usually occur in the skin and mucosa.⁽¹⁾ Warts may be transmitted by direct or indirect contact. Any events that disrupt the normal epithelial barrier may increase the likelihood of developing warts. HPV usually infects the epithelial layers of skin. There are over 100 types of HPV virus but only few can cause skin warts at selective anatomical sites. Common warts are usually associated with HPV virus 2 and 4, followed by types 1, 3, 27, 29 and 57.⁽¹⁾ People with autoimmune disease and weak immune system, including elderly, are more susceptible to the virus that causes warts.⁽²⁾ Warts commonly appear on hands, but can also affect face, feet, genitals and knees.⁽²⁾ Types of wart on the basis of site affected such as common wart (verruca vulgaris) can grow anywhere on the body, flat wart (verruca plana) affect face, neck, hands, wrists and knees, filiform wart or digitate wart appear near eyelids and lips, genital wart (venereal wart) occurs on genitalia, periungual

wart occurs around nails, plantar wart (verruca plantaris) found on soles of the feet.⁽³⁾ In homoeopathy, wart is included under Hahnemann's sycotic miasm and treatment is possible by its different types and location.

CASE:

A patient, 52 years female, a housewife with her daughter came on 11/01/2022 with the complaints of wart on her forehead since a year with no itching, burning or discharge. The wart appeared on forehead at once but was noticed by her because of its colour, i.e. dark black and the complexion of patient was fair. Along with this, she also suffered from acidity after cholecystectomy and the patient was hypertensive. She felt restless and awkward due to wart and wanted to get rid of it.

Past history

Hypertensive since 10 years and under allopathic medicines for it.

Family history

Father was diabetic. Mother died due to heart disease.

Personal history

She was non-vegetarian and likes meat, cold drinks and food.

Life space investigation

She was from upper middle class. She was patient and calm. Her education and morals were good. She was a married woman.

Mental symptoms

She was constantly living in anxiety about future. She strongly disliked quarrels. She was unable to take sleep after midnight or especially after 3 pm.

Physical generals

She had good appetite and thirst was moderate. She had a desire for spicy food. Patient was chilly. Perspiration during sleep. Also, there was burning over the foot sometimes.

Particular symptoms

Single black coloured wart on forehead, continuously increasing in size, tenderness was present. Pain in head which drove the patient to leave the bed at night. Caries of teeth at edge of gums. Pain in right hip when ascending the stairs. Pain in both legs at night. Stools watery, 2-3 times in a day.

Diagnosis

Diagnosis was made by examining

the wart clinically. A cardinal sign of warts is the absence of skin lines crossing their surface and the presence of pinpoint black dots (thrombosed capillaries) or bleeding when wart was shaved.⁽⁴⁾

Analysis and evaluation of symptoms (Table 1)

Sl. No.	Classification of symptoms	Symptoms	Intensity	Miasm ⁽⁵⁾
1.	Mental generals	Ailments from quarrels	++	Psoric
		Anxiety about the future	+++	Psoric
2.	Physical generals	Perspiration during sleep	+++	Syphilitic
		Desire for cold drinks and food	++	Syco-syphilitic
		Stool watery	++	Sycotic
		Pain in right hip when ascending the stairs.	+++	Psoro- sycotic
		Pain in both legs at night.	+++	Psoric-syphilitic
3.	Particular symptoms	Pain in head which drove the patient to leave the bed at night.	+++	Syco-syphilitic
		Caries of teeth at edge of gums.	++	Syphilitic
		Single black coloured wart on forehead.	+++	Sycotic

Totality of symptoms

After analysis and evaluation, the symptoms were used in constructing the totality of symptoms were: Ailments from quarrels.

- Anxiety about the future
- Single black colored wart on forehead.
- Pain in head which drives the patient to leave the bed at night.
- Caries of teeth at edge of gums.
- Desire for cold drinks and food.
- Stool watery, 2-3 times in a day.
- Pain in both legs at night.
- Pain in right hip when ascending the stairs.
- Perspiration during sleep.
- Patient was sleepless especially after 3 am.

Conversion of symptoms into rubrics (Table 2)

Sl. No.	Symptoms	Rubrics with chapter
1.	Ailments from quarrels.	Mind, Ailments, from, quarrels
2.	Anxiety about the future.	Mind, Anxiety, future, about
3.	Single, black coloured wart on forehead.	Face, Wart,
4.	Pain in head which drives the patient to leave the bed at night.	Head, Pain, bed, must leave the
5.	Caries of teeth at edge of gums.	Teeth, Caries, Decayed, Hollow, gums, at edge of
6.	Desire for cold drinks.	Stomach, Desires, cold drinks
7.	Desire for cold food.	Stomach, Desires, cold food,
8.	Stools - watery.	Stool, watery
9.	Sleeplessness after 3 am.	Sleep, Sleeplessness, midnight, after, after 3 am
10.	Perspiration during sleep	Perspiration, Sleep, during
11.	Pain in right hip when ascending the stairs.	Extremities, Pain, hip, ascending steps
12.	Pain in both legs at night.	Extremities, Pain, leg, night

Repertorisation(6):

Repertorial sheet (Figure 1);

Result of repert...					
12 symptom(s)	1	2	3	4	5
Name of remedy	Thuja	Phos	Calc	Sulph	Rhus
Symp. covered	12	6	7	7	1
Totality	22	16	14	13	1
1. EXTREMITIES, PAIN,...	I				
2. EXTREMITIES, PAIN,...	I	II		II	
3. FACE, WARTS, ...	II		II	I	
4. HEAD, PAIN, bed, mu...	II				
5. MIND, AILMENTS, fro...	I				
6. MIND, ANXIETY, futur...	I	III	III	I	
7. PERSPIRATION, SLE...	III	II	I	II	
8. SLEEP, SLEEPLESSN...	II		II	III	
9. STOMACH, DESIRES,...	II	III	II	I	
10. STOMACH, DESIRE...	II	III			
11. STOOL, WATERY, ...	III	III	III	III	
12. TEETH, CARIES, DE...	II		I		

Repertorial analysis:

Thuja occidentalis – 12/22*Phosphorus* – 6/16*Calcarea carbonica* – 7/14*Sulphur* – 7/13*Rhus toxicodendron* – 7/12

Repertorial selection:

On the basis of repertorisation and totality of symptoms, *Thuja occidentalis* scored highest marks as per the totality of symptoms. The mental symptoms with other symptoms clearly indicated the remedy. The other remedies came out on repertorisation were *Phosphorus*, *Calcarea carbonica*, *Sulphur*, *Rhus toxicodendron*.

After consulting the *Materia Medica*⁽⁶⁾ which is the final court of appeal medicine, *Thuja occidentalis* was chosen.

Prescription

Thuja occidentalis 1M/2 dose was given on the first visit 11/01/2022 in empty stomach early morning for two days.

Follow up (Table 3):

Date	Response	Prescription
26/01/2022	Felt 35% better, wart remained	<i>Rubrum</i> 30 was given for next 15 days.
11/02/2022	Wart remained but other symptoms were getting better.	<i>Rubrum</i> 200 was given for next 15 days.
27/02/2022	Wart still on its seat.	<i>Rubrum</i> 200 was given for next 15 days.
13/03/2022	Wart started to shed off with general improvement.	<i>Rubrum</i> 200 was given for the next 15 days.
21/03/2022	Improvement went on. No new symptom appeared.	<i>Rubrum</i> 200 was given for the next 15 days.
05/04/2022	Wart shed off from its seat.	No medicine was given.

Justification for selection of remedy and potency

According to aphorism 272 and 275 of *Organon of Medicine*(7), single remedy was prescribed at a time and suitability of remedy not only depends on accurate selection of remedy but also on the smallness of doses(7), because of that reason, only one dose of *Thuja occidentalis* was prescribed. For the selection of potency, susceptibility is the only guiding factor. The axiom used for this purpose is "more the susceptibility – higher the potency, less the susceptibility – lower the potency". (8) As the susceptibility of the patient was high, potency was chosen higher.

Discussion

As per aphorism 201 of *Organon of medicine*, it can be stated that when man's vital force encumbered with chronic diseases and unable to overcome by its powers, so it adopts the plan to transfer the internal disease to the external part or those part of body which is not indispensable to human life.(7) After administering *Thuja occidentalis*, wart on forehead was removed along with the general morbid state. Aphorism 200 explains

that once internal homoeopathic remedy have been discovered, after its employment, local affection if disappeared on its seat, this would be convincing proof that the disease was completely cured.(7)



Figure 2: Before treatment



Figure 3: After treatment

Conclusion

Homoeopathy, with its abundance of medicines, not only cure external lesions but also to treat the patient on general plane. Homoeopathy is a medical science where individualistic approach of selecting constitutional remedy cure any kind of

disease even warts. Here, *Thuja occidentalis* plays a vital role on removing wart as well as general morbid states of patient. The annihilation of external lesions is the evidence that she was cured completely.

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A review on homoeopathic perspective in anxiety disorders

Dr Bajrangi Kumar

ABSTRACT: Anxiety disorder is one of the most common mental health illnesses as well as most frequently occurring diagnoses worldwide in all age group. Homoeopathy treating the patient on the holistic plan so it not only reduces the anxiety but also makes the individual to feel better in other areas of functioning. This is an article about anxiety disorders focussing on classification, aetiology, general treatment, view of Organon of medicine, miasmatic analysis, repertorial approach and their homoeopathic management.

Keywords: anxiety disorder, homoeopathy, holistic plan, repertory, miasm.

Abbreviations: HPV – Human papillomavirus

Introduction

Anxiety disorders include disorders that share features of excessive fear and anxiety related behavioural disturbances. [1] fear is the emotional response to real or perceived imminent threat, whereas anxiety is anticipation of future threat. [1] Anxiety has been defined as a 'persistent feeling of dread, apprehension and impending disaster or tension and uneasiness' often associated with headache, perspiration, palpitations, tightness in the chest, mild stomach discomfort and restlessness indicated by an inability to sit or stand still for long. [2] Sometimes anxiety becomes pathological when it causes significant subjective distress or impairment in functioning of an individual. Anxiety disorders have the potential to interfere with a person's work, family, and social life.[1,2]

CLASSIFICATION:[1,3]

The major subtypes of anxiety disorder include:

[1] Panic disorder: Recurrent and unexpected panic attack

that begins abruptly. A panic attack is an abrupt surge of intense fear or intense discomfort that reaches a peak within minutes, with the symptoms of cardiorespiratory, gastrointestinal, otoneurologic or cognitive symptoms. Attack had been followed by at least for one month.

[2] Agoraphobia: Marked anxiety and fear about two or more of the following situations:- using public transportation, being in open spaces, being in enclosed places, standing in line or being in crowd, being outside of the home alone.

[3] Separation anxiety disorder: Developmentally inappropriate and excessive fear and anxiety concerning separation from loved ones. There is constant anxiety and fear about harm coming to attachment figures and reluctance to go away from attachment figures as well as nightmares and physical symptoms of distress.

The fear, anxiety or avoidance is persistent, lasting at least 4 weeks in children and

adolescents and minimum 6 months in adults.

[4] Specific phobia : Fear and anxiety about a specific object or of situation that leads to avoiding of the fear inducing triggers. There are various types of phobias such as flying, heights, animal, natural environment, blood-injection-injury, situational and other situations.

[5] Generalised anxiety disorder: Excessive uncontrolled and irrational worry about everything like work, health, finance, etc. persist at least for 6 months. The worry is associated with somatic symptoms including restlessness, fatigue, irritability, poor concentration and sleep disturbance which are difficult to control.

[6] Selective mutism: It is a consistent failure of children to speak in certain situations, such as school, even when they can speak in other situations, such as at home with close family members. This can interfere with school, work and social functioning.

AETIOLOGY: [4]

Anxiety disorders are usually caused by combination of biological, psychological and social factors. Some causes of anxiety disorders are:

- **Genetics-** Anxiety disorders can run in families.
- **Brain chemistry-** Some research suggests anxiety disorders may be linked to faulty circuits in the brain that control fear and emotions.
- **Environmental stress-** This refers to stressful events you have seen or lived through. Life events often linked to anxiety disorders include childhood abuse and neglect, a death of a loved one, or being attacked or seeing violence.

MIASMATIC ANALYSIS:[6]

- **Drug withdrawal or misuse-** Certain drugs may be used to hide or decrease certain anxiety symptoms. Anxiety disorder often goes hand in hand with alcohol and substance use.
- **Medical conditions-** Some heart, lung, and thyroid conditions can cause symptoms similar to anxiety disorders or make anxiety symptoms worse. It's important to get a full physical exam to rule out other medical conditions when talking to your doctor about anxiety.

GENERAL TREATMENT FOR ANXIETY DISORDERS [3,4]

- a.) **Assessment-**Make a diagnosis; detect any co-morbid disorder.
- b.) **General measures-** Agree a clean plan, psychotherapy, problem solving techniques and relaxations.

- c.) **Psychological treatment-** cognitive behavioural therapy

HOMOEOPATHIC PERSPECTIVE:

Homoeopathy may provide a viable alternative. Homoeopathy has an impressive history of success in treating people for a wide variety of ailments, including mental health complaints.

Dr Hahnemann many years ago in organon of medicine under aphorism 225, described that mental diseases like anxiety and worry can produce physical manifestations and also acts as maintaining cause for existing problems. But modern medicine has now come to an understanding that a disturbed mental health can produce many physical manifestations. [5]

Dr Menninger was such an advocate of homoeopathy, he once said, "homoeopathy is wholly capable of satisfying the therapeutic demands of this age better than any other system of medicine."

	Psora	Sycosis	Syphilis
1	Anxious and fearful.	Suspicious and jealous.	Destructive and melancholic.
2	Irritability with anxiety	Irritability explodes into anger the patient may throw things and restlessness results.	Irritability with cruelty.
3	Sadness	Moaning	Lamenting
4	Nervous	Chaos	Madness
5	Thoughtful but no practical sense	Thoughtfulness focused for their own personal benefits	Vanishing of thoughts
6	Wariness of life	Tendency to exploit everything from life	Loathing of life
7	Sadness and depression	Irascibility, rudeness and ill manners	Sentimental and closed-mouthed

REPERTORY SECTION: [7] [8] [9] [10]

HIGHEST GRADED MEDICINES FOR ANXIETY IN DIFFERENT REPERTORIES :

SYNTHESIS REPERTORY

MIND, Anxiety - Acon., Arg-n., ARS., Ars-i., Ars-s-f., Aur., Aur-s., Bar-s., Bell., Bism., Bov., Bry., Cact., Calc., CALC-ARS., Calc-p., Calc-s., Camph., Cann-i., Carb-v., Carbn-s., Caust., Chin., Con., Dig., Iod., KALI-AR., Kali-c., Kali-p., Kali-s., Lyco., Mez., Nat-ar., Nat-c., Nit-ac., Phos., PSOR., Puls., Rhus-t., Sec., Spect., Sulph., Verat.

KENT REPERTORY

MIND-ANXIETY: ACON. ARG-N. ARS. ARS-I. AUR. BELL., BISM. BRY. CACT. CALC. CALC-P. CALC-S. CAMPH. CANN-I. CARB-S. CARB-V. CAUST. CHIN. CON. DIG. IOD. KALI-AR. KALI-C. KALI-P. KALI-S. LYCO. MEZ. NAT-AR. NAT-C. NIT-AC. PHOS., PSOR. PULS. RHUS-T. SEC. SULPH. VERAT.

PHATAK REPERTORY

Fear, anxiety, fright – ACON. Arg-n. ARS. Bell. Calc. Carb-v. Dig. IGN. Lyc. Nux-v. Op. PHOS. Puls. Sec. Verat.

MURPHY REPERTORY:

MIND- ANXIETY, general: CON. DIG. IOD. KALI- AR. KALI- C. KALI-P. KALI-S. LYC. LYSS. MERC-C. MEZ. NAT-ACT. NAT-C. NIT-AC. PHOS. PSOR. PULS. RHUS-T. SEC. SULPH. VERAT.

SYNTHETIC REPERTORY:

ANXIETY: - ACON. ARG-N. ARS. ARS-I. ARS-S-F. AUR. AUR-S. BELL., BISM. BRY., CACT., CALC., CALC-ARS., CALC-P., CALC-S., CAMPH., CANN-I., CARB-V., CARBN-S., CAUST. CHIN., CON., DIG., IOD., KALI-AR., KALI-C., KALI-P., KALI-S., LYCO., MERC-C.

MEZ. NAT-AR., NAT-C. NIT-AC. PHOS., PSOR., PULS., RHUS-T., SEC., SULPH. VERAT.

REPERTORY OF HERING'S GUIDING SYMPTOMS:

MIND AND DISPOSITION-ANXIETY:- ACON. ARG-N. ARS. AUR. MET. BRY. CACT., CALC. CALC-ARS. CAMPH. CARB-V. CHAM. CHEL. CIC. CINA COCC. CUP-MET. DIG., FERR. IOD. NUX-V. PHOS., PSOR. SPIG.

BOERICKE'S REPERTORY**HOMOEOPATHY THERAPEUTICS: [10] [11] [12]**

The role of mental symptoms is very important in prescribing homoeopathic medicines. Following medicines are use as therapeutics:

I. ACONITUM NAPELLUS:

- This medicine can help those who have anxiety, great fear and worry.
- Great fear, anxiety, and worry accompany every ailment, however trivial. Anxiety always on beginning to urinate.
- A frequent desire to discharge urine, accompanied by anxiety and pain. Palpitation, with anxiety, fainting, and tingling in fingers.
- Anxiety respecting one's malady, and despair of a cure.

II. ARGENTUM NITRICUM: It can help those who have anxiety about small spaces, heights, bridges, and personal health.

- Mental anxiety.
- Hurries restlessly to fulfill engagements, fears to be late when there is plenty of time.
- Apprehension when ready to go to church or opera, bringing on diarrhoea. Nightly

nervousness, with heat and fullness in the head.

III. ARSENICUM ALBUM: This remedy can help with chronic anxiety, depression, and gastrointestinal symptoms.

- Fears of death.
- Fear of being left alone.
- Fear of solitude, of specters and of robbers, with a desire to hide oneself.
- Great fear, with cold sweat.

IV. IGNATIA AMARA:

- This medicine may help in depression or anxiety after sudden trauma or shock.
- Sadness and concentrated sorrow, with sighing.
- Irresolution; anxious to do now this, now that.
- Love of solitude. Anguish, especially in the morning on waking, or at night, sometimes with palpitation of the heart.
- Fearfulness, timidity.

V. KALIUM PHOSPHORICUM:

- Overwork or illness and feels a deep anxiety and inability to cope.
- Jumpy and oversensitive, and may be startled by ordinary sounds.
- Unpleasant news or thinking of world events can aggravate the problems.
- Insomnia and an inability to concentrate
- increasing the sense of nervous dread.

VI. LYCOPodium CLAVATUM:

- This can help those who have concerns due to responsibilities, which can become a fear of failure.
- Silent, melancholy, and peevish

humour; despair of eternal salvation.

- Sad to hear distant music. Awe of men; the desire to be alone, or else aversion of solitude. Irritability and susceptibility, with tears.
- Irascibility (Irritability).

VII. NATRUM MURIATICUM:

- This can help with chronic stress and mild depression.
- Melancholy, which prompts frequent repetitions for unpleasant memories, and is crying a lot; consolation <.
- Concern respecting the future.
- Anguish, sometimes during storms, but especially at night.

VIII. SEPIA OFFICINALIS:

- This can help those who feel drained and unaffected.
- Grief and dejection with tears.
- Melancholy and moroseness.
- Fear of being alone. Extreme nervousness; sensitive to least noise.
- Apathy towards relationships.

IX. SILICEA TERRA:

- Sadness, and the disposition to weep and cry.
- Inquietude and ill humour at the least provocations

arising from excessive nervous debility.

- The tendency to mispronounce words.
 - Fixed idea; The patient thinks only of the pins, is afraid of them, searched for them, and counts them carefully.
- ## X. STRAMONIUM:
- The principal range of this remedy is found in the mental affections.
 - Night terrors are arising due to anxiety.
 - Fear: losing own senses; that his lips would grow together; He will suffocate; of falling; everything is falling on him.

CONCLUSION:

Homoeopathy offers excellent and a safe option for anxiety disorders as the selected medicine that matches the totality of the person's physical and psychological symptoms, irrespective of "which came first." The above therapeutics medicines are used frequently in anxiety disorder with good results. Homoeopathy treats the patient as whole not only disease. Other individualised homoeopathic medicines (simillimum) can also be offer significant relief to the patients with anxiety disorder.

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Control, cure and cease anxiety with homoeopathy

Dr Prastuti Jaiswal, Dr Yasha Soni, Dr Sakshi Bhadana, Dr Surbhi, Dr Satya Prakash Singh

ABSTRACT: Anxiety is one of the most common psychiatric disorders in our community. It results from various conditions and is manifested as palpitation, sweating, breathlessness, etc. It can be managed with counselling and homoeopathic medicines which treat the patient as a whole and bring about rapid improvement in the health of the patient.

Keywords: anxiety, homoeopathy, miasm

Abbreviations: hypothalamo- pituitary - adrenal (HPA) axis, gamma aminobutyric acid (GABA), generalised anxiety disorder (GAD), cognitive behaviour therapy (CBT)

Introduction

Anxiety disorder is the most prevalent psychiatric illness in the general community.¹ Anxiety may develop after an unpleasant event which may result in phobic or stress related anxiety.² Anxiety has a prevalence of 16.6% and in patients visiting medical clinic it is seen in 15-20% patients.

Physiology of anxiety-

Anxiety is where there is no overt danger, but when the individual considers danger as a possibility. Activation of hypothalamo-pituitary - adrenal (HPA) axis and sympathetic hyperactivity manifest in physical symptoms such as palpitation, sweating, tremors, dryness of mouth, breathlessness and abdominal discomfort. Under the circumstances, a diagnosis of anxiety disorder.⁴

Aetiology-

Genetic factor, serotonin system, HPA axis and neurotrophins implicated.

Implicated dysregulation in the serotonin, GABA, norepinephrine, glutamatergic and peptide.

Traumatic life events in childhood.

Behavioral inhibition (shy and timid)

Obsessive - compulsive personality

Some future misfortunes - Health of oneself or family members, financial problems, occupational/academic performance.⁵

Clinical features-

The feature of GAD (Generalised anxiety disorder) is continuous anxiety and unmanageable worry along with physical symptoms of anxiety.

- Difficulty in concentration, irritability, feeling on the edge, restlessness, tremors, palpitation, sweating, dryness of mouth, frequent headache. The symptom should be present continuously for 3-6 months to diagnose GAD.⁶

- Being easily fatigued, muscle tension, mind going blank, sleep disturbance, gaining weight.⁷

Differential diagnosis-

1. PHOBIC ANXIETY DISORDER
An abnormal or excessive fear of a specific object or situation, which leads to avoidance.

Example - a generalised phobia of going out alone in a crowded place is called agoraphobia.

2. PANIC DISORDER - Panic disorder is repeated attacks of a severe anxiety, which are not restricted to any particular situation. Such as chest pain, palpitation and altered sensation in lips and fingers are common patient suffering from a serious illness, heart attack or stroke.
3. GENERALISED ANXIETY DISORDER - This is a chronic anxiety state associated with uncontrolled worry. Associated symptoms include muscle tension and bowel disturbance.⁸

Management-

Counselling and reassurance can help a patient with an anxiety disorder, especially when the patient is in fear they have a serious medical condition.

Treatment includes relaxation, graded exposure to feared situation for phobic disorder.⁹

Early psychotherapeutic intervention and education to symptoms control enhance the effectiveness of drug treatment.¹⁰

Cognitive behaviour therapy (CBT) -are also used to treat anxiety disorder. It typically includes psychoeducation, self monitoring, relaxation, problem solving and restructuring of worry related distorted beliefs.¹¹

Miasmatic background-

Miasms are the basis of any disease or disorder. Miasms were first illustrated by Dr Hahnemann after years of careful observation and study. Symptoms related by anxiety and fear represent psoric miasm.¹²

Some homoeopathic medicines for anxiety-

Arsenicum album- Restlessness. Great fear of being left alone. Anger, with anxiety, restlessness and sensation of coldness. Anxiety, restlessness, and excessive anguish which allows no rest, principally in the evening in bed, or in the morning on waking, and often with trembling, cold sweat, oppression of the chest, difficulty of breathing, and fainting fits. Anxiety of conscience, as if a crime had been committed. Inconsolable anguish, with complaints and lamentation. Hypochondriacal humour, with restlessness and anxiety. Fear of solitude and of robbers, with desire to hide oneself.¹³

Aconitum napellus- Great, inconsolable anxiety. Anxiety respecting one's malady, and despair of a cure.¹⁴ Great fear and anxiety of mind with nervousness and excitability, afraid to go out, to go into a crowd where there is any excitement or many people; to cross the street. Restless, anxious does everything in great haste; must change position often; everything startles him. Predicts the day he will die, he is sure that his disease is fatal.¹⁵

Argentum nitricum-Mental anxiety. Very impulsive; always in a hurry but accomplishes nothing; in continual motion; he walks fast. Hurries restlessly to fulfill engage-

ments, fears to be late when there is plenty of time. Melancholic; does not undertake anything lest he should not succeed.¹⁶

Calcarea carbonicum- Anxiety and anguish, excited by fancies, or frightful stories, also with shuddering and dread during the twilight, or at night. Anxious agitation, forbidding rest. Disposition to take alarm. Apprehensions. Easily frightened or offended. Despair in consequence of the impaired condition of the health; or hypochondriacal humour, with fear of being ill or unfortunate, of experiencing sad accidents, of losing the reason, of being infected by contagious diseases.¹⁷

Kalium phosphoricum- anxiety, nervous dread, lethargy. Indisposition to meet people. Extreme lassitude and depression. Very nervous, startled easily. Irritable. Anxiety about business.¹⁸

Gelsemium sempervirens- the anticipation of any unusual ordeal preparing for church, theatre, or to meet an engagement, brings on diarrhea; stage fright, nervous dread of appearing in public.¹⁹

Silicea terra- anxious, yielding, faint hearted. Restless, fidgety from least noise. Mental labour difficult.²⁰ Sensitive to all impression.²¹

Ignitia amara-Irresolution; anxious to do now this, now that. Impatience. Strong disposition to be frightened. Morose and discontented humour, and involuntary reflections on painful and disagreeable things. Intolerance of noise.²²

Lilium tigrinum- Anxious about the disease, fears the symptoms indicate some organic disease, marked in both sexes. Fear of being alone, insanity, heart disease; fears she is incurable; some impending calamity or disease.²³

Psorinum- anxious, full of fear; evil forebodings. Fear he will die, that

he will fail in business, during climaxis.; making his own life and that of those about him intolerable.²⁴

Kalium carbonicum- full of fears and imagination. Anxiety felt in stomach. Feels as if the bed is sinking. Never wants to be left alone. Despondent. Alternating moods.²⁵

Some common rubrics in repertory-

REPERTORY OF THE HOMOEOPATHIC MATERIA MEDICA BY DR. J. T. KENT

1. MIND, anxiety-
 - Morning: ail., alum., **Ars.**, carb-s., carb-v., caust., chin., con., **Graph.**, **Lach.**, lyc., mag-c., nat-m., nit-ac., nux-v., **Phos.**, sep., sulph., zinc.
 - Evening: alum., ambr., **Ars.**, bor., Calc., **Calc-s.**, **Carbo-v.**, caust., cina., **Dig.**, dros., hep., kali-carb., lyc., merc., nat-m., nit-ac., nux-v., phos., puls., rhus-t., **Sep.**, sil., Sulph., verat.
 - Night: Acon., alum., **Ars.**, bar-c., bell., bry., calc., carbo-veg., ferr., graph., hep., hyos., mag-c., merc., nat-m., nit-ac., **Puls.**, rhus-t., samb., sulph., tab., verat., zinc.
 - Air in open, amel: bry., **Cann-i.**, **Kali-s.**, lyc., mag-m., puls., rhus-t., til., verat
 - Alone, when: **Ars.**, dros., mez., **Phos.**, tab., zinc.
 - Anger, during: Sep.
 - Chill, before: **Ars.**, ars-h., **Chin.**
 - During: **Acon.**, **Ars.**, **Calc.**, **Camp.**, cocc., ign., nat-m., **Puls.**, rhus-t.
 - Future, about: anac., ant-c., bar-c., Bry., **Calc.**, cal-ars., caust., chin., **Chin-s.**, Cic., Dig., Dros., gels., Graph., Iod., Lach., mur-ac., nat-c., nat-mur., nux-v., **Phos.**, Rhus-t., Sabin., spong., staph.

- Health, about: *arg-m., calc., Kali-ar., nit-ac., phos., sep., sil., sulph.*
- Hungry, when: *iod., kali-c.*
- Menses, before: *cocc., graph., ign., merc., nat-m., nit-ac., nux-v., stann., sulph., zinc.*
- During: *bell., cina., coff., merc., nat-m., nit-ac., plat., Sil., zinc.*
- After: *agar., phos., sec.*
- Music, from: *Dig., nat-c.*
- Pressure on the chest : **Sulph**
- Weeping , followed by: *Acon., am-m., carb-v.*
- Amel.: *Dig., graph., Tab²⁶*

ANALYTICAL REPERTORY OF THE SYMPTOMS OF THE MIND BY C. HERING

Anxiety apparently originating in the head : *Apis, Cicuta, Lauroc., Magn. carb., Nat. carb., Phosphor., Psorin., Sarsap., Thuja.*

In chest, heart and precordia : *Acon., Arsen., (also abdominal) Calc., ostr., Lycop., Pulsat., Verater.;* from chest to head : *Acon.*

Rising up in throat: *Arum mac;* with heat: *hyper.;* in chest : *Arum mac.;* From the stomach: *Calc. ac.;* from the hypochondria : *Drosera;* from region of heart : *Arsen., Belladonna, Crocus., Cuprum.*

As if in the blood: *Mercur., Sepia.*

Followed by weeping: *Acon., Amm. mur., Carb. veg.*

Trembling: *Arsen., Aurum, Carb. veg., Chamom., Coffea, Graphit., Laches., Lam. alb., Lycop., Magn. carb., Natr. carb., Phosphor., Platin., Pulsat., Rhus. tox., Sepia;* most in feet : *Sarsap.²⁷*

A CONCISE REPERTORY OF HOMOEOPATHIC MEDICINES BY S. R. PHATAK

FEAR, anxiety, fright: *Abro+; ACO; Arg-n; ARS; Bell; Bor; Brt; CALC; Carb-v; cof+; Dig; Gel; Grap; IGN; Lyc; Med; Murx; Nat-c; Nat-m; nit-ac; Nux-v; Op; PHO; Pul; Rat; Samb; Sec; Stram; Sul; Tub; Ver-a.*

Alone of being+: *Ani- t; Con; Naj.*

- Lest, he injure himself: *Ars; Merc; Nat-s.*
- Darkness, in: *Kali-br; Radm; Val.²⁸*

AUGMENTED CLINICAL SYNTHESIS BY FREDERIK SCHROY-ENS

ANXIETY, Abortion after : *Cimic., Op., Sabin.*

-Alternating with:

- Cheerfulness: *agar., ant-t., castm., Ruta., spig., spong., staph.*
- Contenment: *arizon., dream., zinc.,*
- Exhilaration : *spig*
- Fainting: *Vip.*
- Heat; flushes of: *Calc., Dros., Plat.*
- Indifference: *Ant-t., nat-m.*
- Irritability: *chin., ran-b.*
- Joy; *Spig., Spong.*
- Mania: *bell.*
- Joints ; Pain in gouty: *asaf.*

-CHILL:

- After: *Ars., chel., kali-c., Puls.*
- Before: *ars., ars-h., Chin.*
- During: *Acon., am-c., apis., arg-n., arn., Ars., bov., Calc., Calc-ar., Camph., carb-v., chin., coff., gel., hep., ign., merc., nat-m., nux-v., phos., plat., Puls., rheum., Rhus-t.,*

sulph., Verat.

-MEAOPAUSE; during: *acon., Aml-n., ars., cimic., glon., Kali-br., puls., sep., tril-p.*

MENSES:

- After: *Agar., Pall., phos., sec.*
- Before: *acon., am-c., aur-m., calc., carb-an., carb-v., cocc., Graph., Ign., kali-b., m-arct., mag-m., manc., merc., Nat-m., Nit-ac., Nux-v., puls., Stann., Sulph., zinc.*

During: *acon., Bell., calc., calc-sil., canth., caul., cimic., cina., cocc., coff., con., hyos., ign., kali-chr., kreos., lac-e., lach., mag-m., merc., Nat-m., nux-v., Sil., staph., verat., zinc-p.²⁹*

BOGER BOENNINGHAUSEN'S CHARACTERISTICS & REPERTORY BY C. M. BOGER

Anxiety, agony: *ACO., aeth., amm-m., anac., Arn., ARS., BELL., berb, calc-c., CAM., Can., canth., carv-v., caus., Cham., chin., COCL., cof., Colo., Cyc., DIG., Dro., Graph., hell., Hyo., Ign., iod., Ip., lau., Lyc., Mag-c., Merc., Nat-c., NUX-V., Plb., Pul., Rhus-t., Samb., SEC-C., Spo., staph., Stra., sulph., VER-A., zinc.*

Head, in: *Caus., cic., lau., nat-c., sars.*

Epigastric: *Ars., cham., lyc., nux-v., pul., stra., ver-a.*

Abdominal : *Ars., carb-a., mos., sul., sul-ac.*

Chest, in: *Aco., am-c., arn., Ars., aur., BRY., calc-c., calc-p., Chin., Coccl., Colch., kali-bi., Lach., lau., merc., Nit-ac., Nux-v., PHO., pso., Pul., Samb., Sec-c., spi., spo., staph., ver-a.*

Heart, precordial: *Aco., ARS., Calc-c., CHAM., Coccl., Cyc., fer., hell.,*

led., **Lyc., Merc., nat-m., Nux-v.,**
old., plb., PUL., **Rhus-t., sep., spo.,**
Stra., ver-a.³⁰

Discussion and conclusion-

Anxiety is a common psychiatric condition which affects the mind and body in uncountable ways which is reflected in disruption of daily life and depression. Homoeopathy is mild, rapid and gentle form of treatment which has shown its efficacy in various mental disorders including anxiety.

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Homoeopathy in anxiety neurosis

By Dr Ankita Priya

ABSTRACT: In the following article, a literature review has been done on different aspects of anxiety neurosis and the homoeopathic approach to be considered in cases of anxiety neurosis.

Keywords: anxiety neurosis, homoeopathy

Abbreviations: OCD – obsessive-compulsive disorder, PTSD- post traumatic stress disorder, M.U.S.- medically unexplained symptoms.

Introduction

Anxiety is a normal reaction to stress which can be described as a feeling of alarm or worry. A certain amount of anxiety is normal, it can be beneficial in some situations as it alerts us, prepares us, and allows us to avoid dangerous situations(1) . Anxiety disorders involve more than temporary worry or fear and if left untreated it can get worse over time and interfere with daily activities also. Generally, Anxiety disorder develop before age of 30 and are more common in women, individual with social issue, and those with a family history of anxiety and depression.

Aetiology(2)

Anxiety disorders appear to be caused by an interaction of bio-psycho-social factors. Genetic vulnerability interacts with situations that are stressful or traumatic to produce clinically significant syndromes.

- Anxiety can be caused by the following conditions:

- Medications
- Substance abuse
- Trauma
- Childhood experiences
- Panic disorders

TYPES OF ANXIETY(3)

1. Generalised anxiety disorder
2. Obsessive compulsive disorder (OCD)
3. Panic disorder
4. Post-traumatic stress disorder(PTSD)
5. Social phobia

Clinical signs and symptoms(4)

- Persistent worrying or anxiety about little things that are out of proportion to the impact of events.
- Overthinking, overly concerned with what he said or did to somebody.
- Perceiving any situation or event as threatening, even when they are not.

- Indecisiveness and fear of making the wrong decision.
- Feeling restless, inability to relax.
- Difficulty in concentrating, or the feeling that mind “goes blank”.

Physical symptoms(2,4)

- Fatigue
- Trouble sleeping
- Muscle tension or muscle aches
- Trembling, twitching
- Nervousness or being easily startled
- Sweating
- Nausea, diarrhoea or irritable bowel syndrome

Symptoms in children(4)

- Feel over anxious.
- Become perfectionist
- Lack of self confidence
- Have frequent stomachaches or other physical complaints
- Avoid going to school or avoid social situations

Miasmatic expression of anxiety neurosis(5,6)

Clinical Features	Psora	Sycosis	Syphilis	Tubercular
Anxiety	<ul style="list-style-type: none"> Anxious to the point of worry and fear. Anxiety on awakening in the morning which lead to restlessness 	Anxiety aggravates from changes in the weather and from humidity.	Anxiety symptoms generally aggravate at night.	<p>Mental changeability and dissatisfaction of tubercular patient ends in depression.</p> <p>Even in depression there will be total lack of disappointment, hopelessness, anxiety and apprehension which is striking.</p>
Fear	<p>Almost all fears have a psoric base and these fear manifest as anxiety.</p> <p>Psoric patients are easily frightened, often by trivial things, further lead to trembling, perspiration, and great weakness.</p>	There will be fear of making mistakes, so the sycotic patient repeatedly check what they have done.	Syphilitic patient fear people and conversation due to their own dullness and idiocy.	<p>Tubercular patient shows less fear in general.</p> <p>There will be innate fear of dogs.</p>
Restlessness	<p>Anxiety and fear lead to mental restlessness in psoric patient.</p> <p>Mental restlessness causes them to complain they want something but they don't know what they want to do.</p>	<p>Physical restlessness is marked.</p> <p>Sycotic patients frequently change their posture and cannot keep quiet or still.</p>	Mental restlessness will be marked and it will further lead to suicidal tendency.	<p>Both physical and mental restlessness will be marked.</p> <p>Dissatisfaction is the innate dyscrasia of tubercular miasm, which results in changeableness and a restlessness.</p>

Concentration	Lack of concentration and weakness of memory.	Incoordination in concentration and absent-mindedness.	Total destruction of concentration with Forgetfulness.	Tubercular patient has marked changibility
Thoughts and flow of words	Thoughts and word overflow in mind and accordingly words are multiplied in psoric patient.	Sycotic patient cannot find right word and if he does, he is not sure whether they are right. He doubt about his spelling and experiences difficulty in narrating his symptoms.	Syphilitic patient are generally closed mouthed and may answer in monosyllables. They lack ideas, expression and thoughts due to destruction of the intellectual capabilities.	A lack of concentration and thoughtlessness regarding appearance is representative of tubercular miasm.
Memory	Psora in general is 'hypo' in its manifestation so it has weak memory.	Absent-mindedness and abstraction of thought is marked in Sycosis. Weak memory, can losing thread of conversation, forget recent events but remember distant past events.	Forgetfulness is syphilitic. Patient has impaired memory. Lack of self confidence and self awareness may lead to suicidal tendency.	Memory problems esp. seen in children. Further lead to difficulty in comprehension and retaining facts in children.

Sweating	Scanty, sour smelling sweat. Sweat much on forehead and during sleep.	Much perspiration with oily appearance of skin.	Sweat is much offensive. Sweating aggravate all symptoms.	Sweat is very offensive especially from foot and axilla. Suppressed sweat induce lung trouble or some other severe disease.
Disturbed sleep	Somnambulism occurs in psora. Sleeplessness during the day.	Sycotic patient sleeps for a short time wakes then again sleep. Restless sleep is characteristics of sycosis.	Sleep is unfreshing and accompanied by depression and melancholia.	Unrefreshing sleep with great exhaustion is tubercular nature of sleep. Patient screams during sleep.

Anxiety neurosis in repertory

The rubric especially related to anxiety neurosis seen in Synthesis Repertory are:

Synthesis 9.1(7)

Mind - Anxiety – -trifles about –

abes-can, acer-circ, acon. , Aloe, anac. , ang. , Ars. , aur. bar-act. bar-c. borx. bung-fa. calc. calc-i. caust. Chin. , coca-c. cocc. colch. Con. , dream-p. dys. Ferr. , granit-m. graph. Hydrog. Ign. , kali-ch. kali-m. kali-sil. lac-h. lat-h. laur. limest-b. mang. mur-ac. nat-m. nux-v. phos. plut-n. sacch-a.

sep. Sil. staph. sulph. thuj. vert.

-causeless-

Arge-pal. Bry. cassia-s. chir-fl. Fil. Kali-ar. Oscilloc. Oxal-a. phos. positr. sabad. sal-fr. spong. tab. tarent. thal. thala. tritic-vg.

Mind-Confusion of mind-interruption, from-logical thinking impossible

Colch.

Mind-Concentration difficult, cannot fix

Aesc. aeth. agar. Agn. Ail. Aloe. alum. Anac. apis. arag. Arg-n. arge-pl. arizon-I. atp. Bapt. bar-c. bov. cann-i. caust. con. Dream-p. fago. Falco-pe.

Fic-m. gard-j. Gels. Glon. glyc. hell. hipp. Hyos. icht. ign. indol. Irid-met. Kali-p. lac-c. lat-h. lil-t. lyc. nat-c. Nux-m. Nux-v. ol-eur. olib-sac. Op. Ph-ac. Phos. Pic-ac. Pitu. positr. sal-fr. sep. SIL. Sin-a. staph. sulph. symph. Syph. tritic-veg. Vanil. Xero. Zinc.

Mind-Fear-wrong, of something

bell-p-sp. Kali-br. Merc.

Rectum-Diarrhoea-Anxiety, after

Arg-n. Ars. camph. Phos. Puls. raph. sil. tab. vert.

Generals-trembling-externally-anxiety – from

Abrot. Acon. Aeth. Ambr.

androc. Ant-c. **Ars.** Aur. Aur-m-n. bell. Borx. *Calc.* canth. carb-v. caust. *Cham.* chel. *Cina Coff.* Con. croc. cupr. dioxi. euph. ferr. gels. graph. hydrog. Iber. Ignis-alc. *Lach.* lyc. mag-c. mez. mosch. nat-c. nit-ac. Nux-m. phos. *Plat.* psor. *Puls.* *Rhus-t.* samb. Sars. Sep. sulph. *Ther.* valer. verat.

Sleep-Disturbed-anxiety,from

Acon. alum. am-c. ambr. ant-c. aq-mar. arg-met. *Ars.* bar-c. *Bell.* bov. *Bry.* calc. calc-f. cann-s. carb-an. *Carb-v.* carc. *Castm.* *Caust.* cham. *Chin.* *Cocc.* coff. con. cycl. dig. dulc. *Ferr.* *Graph.* *Hep.* heroin. *Hyos.* *Ign.* *Kali-c.* kreos. lach. lact. lyc. *Mag-c.* mag-m. mang. *Merc.* merc-c. nat-c. *Nat-m.*

nat-sil.nicc. *Nit-ac.* nux-v. petr. Ph-ac. phel. *Phos.* plat. positr. puls. ran-s. rat. sabin. *Sep.* *Sil.* spong. squil. stront-c. *Sulph.* tab. vert. zinc.

Homoeopathic medicines for anxiety neurosis

Mental symptoms play major role while making a homoeopathic prescription. They represent man as a whole and help in selection of simillimum.

Following medicines are commonly used :

Aconitum napellus :

Physical and mental restlessness and fright is characteristics of *Aconitum napellus*⁽⁸⁾.

An attack that comes on suddenly with very strong fear (even fear of death) is main indication of this remedy⁽⁹⁾.

Argentum nitricum:

Neurotic effects are very marked of this remedy, it present many brain and spinal symptoms⁽⁸⁾.

Apprehension or stage fright along with gastrointestinal disorder like diarrhoea is characteristics⁽⁹⁾.

Arsenicum album:

Attack of anxiety often occur around midnight or very early hour of morning.

Feeling of being exhausted along with restlessness- fidgeting, pacing and anxiously moving from one place to another is marked feature of *Arsenicum album*⁽⁹⁾.

Obsessive about small details and perfectionist by nature.

Kalium phosphoricum :

It helps the calm people when overwhelmed with anxiety attacks.

Want of nerve power, neurasthenia, mental and physical depression, are wonderfully improved by this remedy⁽⁸⁾.

Night terrors in childrens along with somnambulism will be present⁽⁹⁾.

Gelsimium sempervirens:

Dullness, languor, listless, are characteristic of this remedy⁽⁸⁾.

Indicated in case of social anxiety disorder feels extremely anxious while making public appearance.

Desire to be quiet, to be left alone.

Calcarea carbonica :

Calcarea carbonica is well suited for people who are

scared of change and over controlling.

Fear with loss of reason, misfortune, contagious disease is marked in *Calcarea carbonica*⁽⁹⁾.

Conclusion

Homoeopathy is highly effective and recommended for treating different types of anxiety disorders. Homoeopathic prescription is based on principle of individualisation

which is done after detailed case taking. Dr Hahnemann discussed about mental disease in organon of medicine from app.210-230. He also discussed about 'psychosomatic disease', which is discovered by modern medical science in recent years, they termed this under medically unexplained symptoms (M.U.S.) or somatic disorder associated with anxiety or depression⁽¹⁰⁾. Homoeopathy act at a deeper level and hence, help to treat the disease from its root origin.

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A case of osteoarthritis treated by homoeopathic medicine

Dr Indira Singh

ABSTRACT: Osteoarthritis is now a burden disease in the whole world, as it affects a person's daily activity causing impairments. It is the major public health challenge to the population. Homoeopathy although widely used in Osteoarthritis, is assumed to have nothing significant but placebo effects and its specific clinical effects are frequently ascribed as implausible. In this article, osteoarthritis is briefly discussed and a case study is described, which was treated by homoeopathic medicine, *Causticum*.

Keywords: osteoarthritis, homoeopathy, *Causticum*

Abbreviations: Osteoarthritis (OA), American College of Rheumatology (ACR) criteria, twice a day (BD)

Introduction

Osteoarthritis (OA) is a chronic degenerative disorder of multifactorial aetiology characterised by the loss of articular cartilage, hypertrophy of bone at the margins, sub-chondral sclerosis, and range of biochemical and morphological alterations of the synovial membrane and joint capsule.^[1]

Pathological changes in the late stage of OA include softening, ulceration, and focal disintegration of the articular cartilage. Synovial inflammation also may occur. Typical clinical symptoms are pain, particularly after prolonged activity and weight-bearing; whereas stiffness is experienced after inactivity. It is probably not a single disease but represents the final end result of various disorders leading to joint failure. It is also known as degenerative arthritis, which commonly affects the hands, feet, spine, and large weight-bearing joints, such as the hips and knees.^[1] Clinical symptoms of osteoarthritis is much significant for diagnosis. Clinical diagnosis is made with the help of *American College Rheumatology* guidelines. Different investigation which is not helpful for diagnosis, its only help to evaluate the cause of disease.

Most cases of OA have no known

cause and are referred to as primary OA. Primary osteoarthritis is mostly related to aging. It can present as localized, generalized, or as erosive OA. Secondary osteoarthritis is caused by another disease or condition.^[1]

Osteoarthritis is the second most common rheumatologic problem and it is the most frequent joint disease with a prevalence of 22% to 39% in India. OA is more common in women than men, but the prevalence increases dramatically with age. Nearly, 45% of women over the age of 65 years have symptoms while radiological evidence is found in 70% of those over 65 years. OA of the knee is a major cause of mobility impairment, particularly among females. OA was estimated to be the 10th leading cause of nonfatal burden.^{[2][3]}

On the basis of pathogenesis OA occurs two clinical forms: Primary OA: Occurs elderly, more common in female, another Secondary OA: Occurs any age due to any previous wear, injury.^[4]

Commonly affected joints include the cervical and lumbo-sacral spine, hip, knee and the first metatarsal joint. In the hands, the distal and proximal interphalangeal joints and the base of thumb are often affect-

ed. Osteoarthritis can be diagnosed based on structural abnormalities or on the symptoms, these abnormalities evoke. Many persons with x ray evidence of OA have no joint symptoms and, while the prevalence of structural abnormalities is of interest in understanding disease pathogenesis, what matter more from a clinical and public health perspective is the prevalence of symptomatic OA. The knee and hip are the principle large joints affected and principle sites of significant disability. Knee OA is more prevalent than hip OA.^[2]^[4]

With the help of conventional medical treatment pain of osteoarthritis will be relieved temporary, but it produces adverse effects in gastrointestinal and cardiovascular problem. So, many patients use alternative therapy for this. The rheumatological problem is the most common problem encountered by alternative medicine practitioner. However, scientific research has so far not provided evidences solid enough to support the effectiveness of alternative medicine for managing of rheumatological problem.^{[1][2]}

CASE PRESENTATION:

Chief complaints:

A woman with 52 years of age com-

plained of pain in the right knee joint for last 1 year. The pain was so severe, that she couldn't properly with contraction of knee. Complaints were aggravated in the open air, cold, while ascending and ameliorated by uncovering the affected part. The patient was suffering from hoarseness of voice since 8 months, when the knee pain started.

History of present complaints:

The pain in the right knee was started 1 year ago, for which she took conventional medicine. The medicine gave her temporary relief, but after discontinuing the medicine, again pain reappeared. Now, for last 2 weeks, the severity of the pain was increased with cracking sound on motion and stiffness, with contraction of the joints. She couldn't do any household activity.

Past history:

She suffered from typhoid 5 years ago, treated with conventional medicine.

Family History:

Father suffered from respiratory disease for last 5 years and taking conventional medicine. Mother suffered from diabetes, arthritis for last 2 years and taking conventional medicine.

Personal history:

Her diet was irregular. She had no addiction. She had 2 children, family background was normal, no problem on her developmental milestone.

Mental generals and physical generals:

She always tried to suppress her

grief, anger. She had intense sympathy to others. She always tried to maintain her family.

While enquiring her physical general aspects, it was found that she had good appetite. She was slightly obese, phlegmatic constitution. She easily used to catch cold and could not tolerate it. She had desire for smoked meat, aversion to sweets. Thirst was normal. Her stools were satisfactory, and during coughing, urine passed involuntarily. Menopause attained. All the complaints aggravated on cold, change of weather. Generally, she feels better in change in position

Diagnosis:

Diagnosis was based on clinical symptoms, physical examination of the patient and according to American College of Rheumatology (ACR) criteria of knee OA.⁽⁵⁾

Analysis and evaluation of symptoms:

Sl. No.	Symptom type	Symptom	Intensity	Miasmatic analysis ⁽⁶⁾	Totality of symptoms
1.	Mental general	She had intense sympathy to others	+++	Psora,	a) She had intense sympathy to other
2.	Physical general	She had desire for smoked meat	++	P s o r a , syphilis	b) She had desire for smoked meat
3.	Mental general	Generally, she felt worse in change of weather	+++	Psora, sycosis	c) Generally, she felt worse in change of weather
4.	Physical general	She had aversion to sweet	+++	Syphilis	d) She had aversion to sweet
5.	Physical general	Generally, she felt worse in cold	+++	Psora	e) Complaints aggravated in cold
6.	Physical general	Generally, she felt better in change of position	+++	Sycosis	f) Complaints ameliorated in change of position
7.	Particular symptom	Pain in the knee aggravated by open air	+++	Sycosis	g) Pain in the knee aggravated by open air

Repertorial totality(7):

Symptoms	Rubric
1. She had intense sympathy to other	MIND-SYMPATHY, compassion
2. She had desire for smoked meat	STOMACH-DESIRES, meat, smoked
3. Generally she felt worse in change of weather	GENERALITIES- CHANGE, weather, agg.
4. She had aversion to sweet	STOMACH-AVERSION, sweet
5. Generally she felt worse in cold	GENERALITIES-COLD, agg.
6. Generally she felt better in change of position	GENERALITIES-CHANGE, position, desire for change position
7. Pain in the knee aggravated by open air	EXTREMITIES-PAIN, knee, air, open

REPERTORISATION(7):

See repertorial sheet

7 symptom(s)	1	2	3	4	5
Name of remedy	<i>Caust</i>	<i>Phos</i>	<i>Calc-p</i>	<i>Ars</i>	<i>Granh</i>
Symp. covered	7	4	4	4	4
Totality	16	11	9	8	8
1. EXTREMITIES, PAI..					
2. GENERALITIES, CH..					
3. GENERALITIES, CH..					
4. GENERALITIES, CO..					
5. MIND, SYMPATHY,..					
6. STOMACH, AVERSI..					
7. STOMACH, DESIRE..					

Prescription:

After repertorisation, *Causticum* possessed highest grade and highest matching of the symptoms. Here, *Causticum* was selected on the basis of mental as well as physical symptoms of the patient. The patient was greedy in nature and constitution of the patient suggested the remedy

and also consultation with materia medica⁽⁸⁾⁽⁹⁾ and repertorial result, *Causticum* was prescribed in this case.

Prescribed on 06/08/2021

Causticum-200/ 1 dose, early morning mixing with ½ cup of water for 2 days along with Placebo every day,

two times after eating for 7 days.

The patient was also advised for dietary management like intake of plenty of water, lime juice, avoid any kind of spicy or fatty food, avoid heavy work,

Selection of dose and potency:

As per *Organon of Medicine aphorism 247 5th edition*⁽¹⁰⁾ and according to the susceptibility of the patient, potency was selected. Here the patient's susceptibility was high and intensity of the symptoms was also increased and she suffered from long time due to that affection, so started the case with higher potency.

Repetition of remedy:

Every well-chosen medicine should be repeated at suitable interval aphorism 246 5th edition⁽¹⁰⁾ of *Organon of Medicine*. After initial improvement, if same symptoms is reappear, then repeat the same medicine.⁽¹¹⁾

Follow up:

Date of Visit	Response	Medicine prescribed
27/08/2021	No changes took place. constricting pain in the knee joint still persist	<i>Rubrum-200/ 1 drop BD x 15 days</i>
14/09/2021	Pain in the kneeslightly ameliorated.	<i>Rubrum -200/ 1 drop BD x 15 days</i>
30/09/2021	Severe pain in the knee without amelioration. Symptoms reappeared.	<i>Causticum-200/ 1 dose</i>
18/10/2021	Pain reduced, patient f better, her sleep was good, appetite normal	<i>Phytum-200/ 1 drop BD x 15 days</i>
02/11/2021	Slight swelling in the right knee, but no pain, patient better	<i>Phytum-200/ 1 dose</i>
16/11/2020	No swelling with no pain present	<i>Phytum-200/ 1 drop BD x 15 days</i>
01/12/2021	Patient was totally normal, no discomfort on walking or pain and swelling reduced	

CONCLUSION:

In case of any kind of joint disorder, homoeopathy has a vast scope. Homoeopathy treats the patient according to its symptomatology and our dynamic medicines do not produce any kind of side-effects like conventional steroid medicine. Homoeopaths believe on individualistic approach and our science have scope to get rid of such joint diseases.

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A comparative study of fear and anxiety with repertorial aspect

Dr Kanan Bhatt

ABSTRACT: Fear and anxiety are most frequently used by each and every one of us. These two words have become part and parcel of medical practise as well as laymen people, especially because of the COVID period faced recently by each one of us. Sometimes, it is difficult to demarkate the line between fear and anxiety. Repertory is subject which is there in exhistance after materia medica and organon. For comparative and differentiating study, repertory can help us to study diffrent medicines indicated for both fear and anxiety as well as to compare the medicines given in each rubric.

Keywords: fear, anxiety, rubric, repertory, comparision.

Introduction

Anxiety and fear are words often used interchangeably, but they are not the same.

The biological and evolutionary purpose of core emotions, like fear, is to help to survive. Fear specifically makes an individual flee from danger.

Anxiety, an inhibitory emotion on the change triangle, results from avoiding core emotions and needs. More specifically, anxiety results from the physical effort to push down emotions. If it is known that there is no physical danger at the moment, yet the individual is experiencing something akin to fear, he can assume that he is experiencing anxiety.

In general, the amount of anxiety one experiences is linked to his early experiences with emotions. It's important to understand the difference between fear and anxiety because the way one works through these two emotions is different⁽¹⁾.

Difference between fear and anxiety

According to research from the University of California, we can experience 27 distinct emotions. Many of these are so similar that they're hard to identify when we experience them.

Fear and anxiety are another example of emotions that can be easily confused. They produce similar physiological effects, and are unpleasant to experience. So how does one tell them apart? What's the difference between fear and anxiety?

Every emotion produces physiological and psychological effects that we can identify if we pay attention. Fear is an emotion that evolved to keep the individual safe, and is the reason that our species survived. A million years ago, if a human living on the Chinese continent saw a flash of black and orange, their heart would start pounding, their body would become doused with sweat, and they might struggle to breathe, which alerts them to the fact that they'd better get ready to fight the approaching tiger, or fly from it.

Anxiety is thought to have evolved

as a way to protect us from future danger—about the *possibility* of us being ravaged by a tiger, rather than the reality. Our human who encountered the tiger may develop a sense of anxiety when returning to the same spot, because there's a chance he's entered the tiger's territory, which may be watching him and licking its lips. As a result, he may decide to avoid the spot next time, which increases his chance of survival.

Fear produces some of the most obvious effects because it's critical for us to pay attention to it (with the exception of someone suffering from a mental health condition such as a panic disorder, or post-traumatic stress disorder). Anxiety also produces strong effects, but many of them are the same as fear, which can make it difficult to distinguish. But there are some clear differences between the two, particularly for how we behave. In the table below, the physiological, psychological, and behavioural effects of anxiety vs fear are mentioned, to help to identify one's feeling.

Effects of fear v/s anxiety

	Fear	Anxiety (<i>differences italicised</i>)
Physiological (body)	<ul style="list-style-type: none"> Sweating Rapid heartbeat Quick breathing Shortness of breath Trembling Nausea Goosebumps Tight chest Hot flushes or chills Dry mouth Upset stomach 	<ul style="list-style-type: none"> Sweating Rapid heartbeat Quick breathing Shortness of breath Trembling Nausea Tight chest Hot flushes or chills Upset stomach <i>Dizziness</i> <i>Headaches</i> <i>Muscle pain</i>
Psychological (mind)	<ul style="list-style-type: none"> A sense of doom Feeling overwhelmed Feeling out of control Feeling detached from your body Unable to think clearly 	<ul style="list-style-type: none"> A sense of doom Feeling overwhelmed Unable to think clearly <i>Excessive worry</i> <i>Catastrophizing</i> <i>Obsessive thinking</i> <i>Restlessness</i> <i>Racing thoughts</i> <i>Irritability</i> <i>Fatigue</i>

Behavioural	<ul style="list-style-type: none"> • Running away or hiding (flight response) • Freezing (freeze response) • Clenched fists • Violent behaviour 	<ul style="list-style-type: none"> • Unable to sit still • Social withdrawal • Easily startled • Difficulty performing everyday tasks • Alcohol and drug usage
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Fight or flight—anxiety or fear?

The fight or flight response is how the body reacts to extreme fear, triggering a choice between fighting the threat before us, or running away from it. This response is extreme, easily identifiable, and is in the realm of fear rather than anxiety⁽²⁾.

Repertory

The following table presents the

terms and related understanding of rubric and its importance. If one observes in repertory, both the words are given as a separate rubric and cross reference is given as well.

A rubric is a 'symptom' in the repertorial language. Hence, like a symptom, a rubric has many dimensions, facets, aspects, levels, stages and transitions. And being a language, one must know the

meaning of the words used in the language.

The table summarises the very basic, important and fundamental repertory – *Kent Repertory* rubrics of both fear and anxiety both. And further if one considers the sub rubric and remedies under each sub rubric, there are many similarities in both type of sub-rubrics and remedies under each sub rubric⁽³⁾.

Fear⁽⁴⁾	Anxiety⁽⁴⁾
daytime, only : Lac-c., mur-ac., sul-ac	daytime : Ambr., ant-c., <i>bell.</i> , caust., chin-a., laur., mag-c., mang., merc., nat-c., nit-ac., phyt., plat., psor., puls., ruta., sul-ac., zinc.
rising, on : Arg-n. waking, on : Puls. forenoon : Am-c. afternoon : Aeth., am-c., ant-t., berb., carb-an., carb-v., cast., dig., mag-c., nat-c., nicc., <i>nux-v.</i> , stront., <i>sulph.</i> , <i>tab.</i> 4 p.m. : Tab. air, in open : Anac., <i>hep.</i> , <i>nux-v</i>	rising, on : Arg-n., mag-c., rhus-t. waking, on : <i>Alum.</i> , anac., carb-an., <i>carb-v.</i> , <i>caust.</i> , chel., <i>chin.</i> , cocc., Graph., ign., ip., Lach., <i>lyc.</i> , mag-c., mag-m., mag-s., nat-m., nit-ac., <i>nux-v.</i> , <i>phos.</i> , plat., puls., rhus-t., sep., squil. forenoon : Acon., alum., alumn., am-c., bar-c., calc., canth., clem., <i>lyc.</i> , <i>nat-m.</i> , paeon., plat., ran-b., sars., sulph. afternoon : Aeth., am-c., arg-n., bell., bov., cact., calc., carb-an., carb-v., crot-t., cupr., gamb., kali-n., mag-c., mag-m., nat-c., nit-ac., <i>nux-v.</i> , ph-ac., phel., phos., puls., rhus-t., ruta., stront., tab., zinc. 4 p.m. : <i>Lyc.</i> , tab.

<p>amel. : Plat., <i>valer.</i></p> <p>evening : Alum., <i>am-c.</i>, anac., ant-t., <i>ars.</i>, bar-c., brom., calad., Calc., carb-an., <i>carb-v.</i>, Caust., coc-c., <i>cupr.</i>, dig., <i>dros.</i>, form., hep., hipp., <i>kali-ar.</i>, <i>kali-c.</i>, kali-i., kali-p., lach., <i>lyc.</i>, <i>mag-c.</i>, mag-m., merc., nat-a., nat-c., nat-m., nit-ac., nux-v., paeon., petr., <i>phos.</i>, plat., Puls., ran-b., <i>rhus-t.</i>, stront., tab., valer., verat., <i>zinc.</i></p> <p>amel. : Mag-c.</p> <p>twilight : Berb., <i>calc.</i>, <i>caust.</i>, kali-i., <i>phos.</i>, Puls., <i>rhus-t.</i></p> <p>night : Am-c., arn., <i>ars.</i>, <i>bell.</i>, <i>calc-s.</i>, <i>calc.</i>, Camph., carb-an., <i>carb-s.</i>, <i>carb-v.</i>, <i>caust.</i>, cham., chin-a., <i>chin.</i>, cocc., colch., con., <i>crot-c.</i>, <i>dros.</i>, dulc., eup-per., graph., hep., ign., ip., <i>kali-ar.</i>, kali-c., <i>lach.</i>, <i>lyc.</i>, mag-c., manc., <i>merc.</i>, nat-c., <i>nat-m.</i>, <i>nat-p.</i>, nit-ac., ph-ac., <i>phos.</i>, <i>puls.</i>, <i>Rhus-t.</i>, rob., sil., spong., stann., stram., <i>sulph.</i>, tab., thea., <i>zinc.</i></p>	<p>air, in open : Acon., anac., ant-c., arg-m., bar-c., bell., cina., hep., ign., lach., plat., spig., tab.</p> <p>amel. : Alum., arund., <i>bry.</i>, <i>calc-s.</i>, <i>calc.</i>, Cann-i., carl., grat., Kali-s., laur., <i>lyc.</i>, <i>mag-m.</i>, <i>puls.</i>, <i>rhus-t.</i>, spong., <i>til.</i>, valer., verat.</p> <p>evening : Acon., agar., <i>alum.</i>, am-c., <i>ambr.</i>, anac., ant-t., Ars., bar-c., <i>bar-m.</i>, bell., <i>bor.</i>, bov., bry., cact., calad., Calc-s., Calc., carb-an., <i>carb-s.</i>, Carb-v., <i>caust.</i>, chel., <i>chin-a.</i>, chin., <i>cina.</i>, cocc., coff., colch., Dig., <i>dros.</i>, <i>fl-ac.</i>, graph., <i>hep.</i>, hipp., hura., kali-ar., kali-c., kali-i., kali-n., kali-p., kali-s., lact., <i>laur.</i>, <i>lyc.</i>, mag-c., mag-m., <i>merc.</i>, mez., mur-ac., nat-a., nat-c., <i>nat-m.</i>, nat-p., <i>nit-ac.</i>, nux-m., <i>nux-v.</i>, paeon., petr., <i>phos.</i>, plat., <i>puls.</i>, ran-b., <i>rhus-t.</i>, ruta., sabin., Sep., sil., spig., <i>stann.</i>, stront., Sulph., tab., verat.</p> <p>amel. : Am-c., chel., mag-c., sul-ac., verb., <i>zinc.</i></p> <p>twilight, in the : Ambr., <i>ars.</i>, <i>calc.</i>, <i>carb-v.</i>, <i>caust.</i>, dig., laur., nux-v., <i>phos.</i>, <i>rhus-t.</i>, sep.</p> <p>night : Acon., agar., <i>alum.</i>, <i>alumn.</i>, am-c., am-m., ambr., ant-c., arg-m., arg-n., arn., Ars., <i>aster.</i>, <i>bar-c.</i>, <i>bell.</i>, bor., bov., bry., cact., <i>calc-s.</i>, <i>calc.</i>, camph., cann-s., canth., <i>carb-an.</i>, <i>carb-s.</i>, <i>carb-v.</i>, cast., <i>caust.</i>, <i>cham.</i>, chin-a., chin-s., <i>chin.</i>, cina., clem., cocc., coff., con., cycl., dig., <i>dros.</i>, dulc., ferr-ar., ferr-p., <i>ferr.</i>, <i>graph.</i>, <i>haem.</i>, <i>hep.</i>, <i>hyos.</i>, <i>ign.</i>, jatr., kali-ar., kali-bi., kali-c., kali-p., kali-s., <i>lach.</i>, lact-ac., lact., lil-t., lith., <i>lyc.</i>, <i>mag-c.</i>, mag-m., mang., merc-c., <i>merc.</i>, nat-a., nat-c., <i>nat-m.</i>, nat-p., <i>nit-ac.</i>, nux-v., petr., <i>phos.</i>, plan., plat., plb., Puls., ran-</p>
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Conclusion

Thus, fear and anxiety being very similar if one considers the medicines mentioned in each rubric. But if one notices sub-rubric of each rubric - fear and anxiety, one can get better view in terms of basic difference of these two terms which are also given as cross reference to one another.

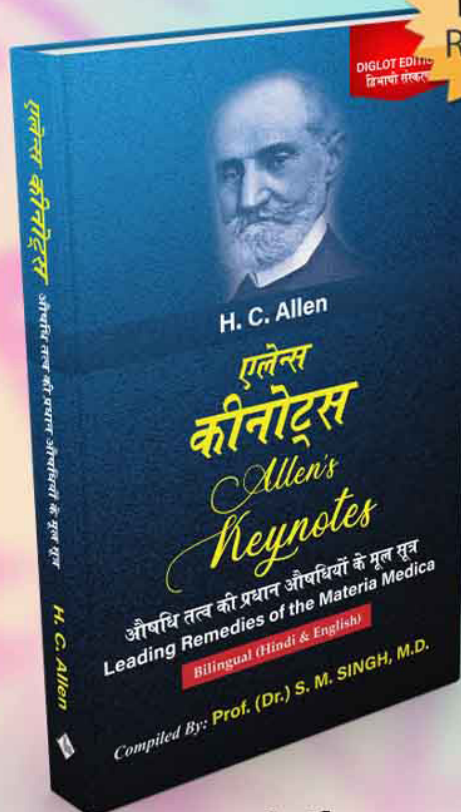
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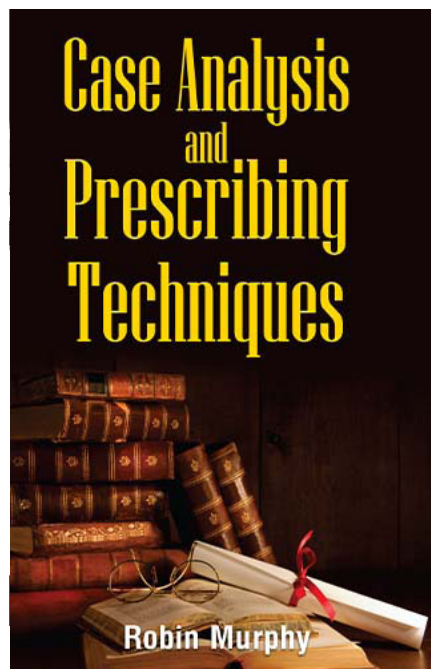
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Case Analysis and Prescribing Techniques

Dr Robin Murphy

Reviewed by:

Dr Pratibha Pathak



As the title suggests, this book is all about clinical utility; and the author gives a wonderful insight of how a physician can enhance prescribing skills as a homoeopath. This book covers clinical part from every subject, starting from organon, materia medica, and repertory. Explanation of vital force with respect to conscious/ unconscious and central and autonomic nervous system is a brilliant work. "Ontology recapitulates phylogeny": a nice scientific description is worth reading. The concept of entropy is an intelligent way to explain disease mechanism perfectly. The author has raised his concern over fixed ideas in practising homoeopathy. He has guided about interpretation of materia medica and approach to the patient, and how vitality defines improvement in patients. He has also given nice description of certain worth mentioning books with high-

lights, plus and minus of books, so that anyone can get inspiration to read those books as well.

One of the chapters of this book is "Etiologies", which is explained under several categories like emotional shock, physical trauma, deprivation, infectious diseases, environment, our perceptions of the world, genetic factors, etc. each category is further explained with certain rubrics helping in case analysis and putting forth his philosophy. In his words, case analysis is that one is analysing case before he could find remedy, and case evaluation is when he is evaluating what the remedy has done. Further, a few case discussions to explain layer by layer prescription makes the whole thing more interesting. He has asserted to analyse case by perceiving a state in case and sort out by uncovering layers of suppression. Simillimum prescription layer wise is what he promoted in this book. This book becomes more interesting as one reads the other relevant topics. Further, he has discussed about a few remedies for AIDS and how to handle AIDS cases with utmost sensibility. Also, he also has guided about treating and managing drug addicts. The author has also discussed about reaction of treatments, which is an integral part of practise as well as very useful. The book can be said as extended practical explanation of Kent's twelve observations. Every homoeopathic physician is well aware of individualised remedy but a few must be knowing about the individualised potency, which is so nicely described here in this book. Dr Murphy has explained suppression in the light of symptoms and signs changing various levels.

Author has laid significant stress on betterment of patients and the same being the main goal of a doctor, even

if, the Hering's law is not somehow in sync with the kind of betterment patient is appreciating. In his words, "you have no reason getting complicated with philosophy and intellectualizing a case and what it means, even if it's Hering's law- it doesn't matter. They (patients) are better. That's all that matter". He has further added that he may not be able to explain it, but they (patients) don't care. It went in opposite direction and they got better. That's our only goal. Dr Murphy was one of the veterans and intellectual, his comprehension of homoeopathic principles has been amazing; but somehow the above lines seemed like weakness of this book, with no offence to followers and immense respect for the stalwart. He has also stated, "don't change what you're doing if they are getting better." So, at places, he has also guided to follow homoeopathic principles.

Author has given good insight about intercurrent prescribing, which is very important as far as hurdles or obstacles are concerned while treating any case. Further, he has mentioned about isopathic prescribing citing certain very interesting examples. He mentions about Dolisos pharmacy which is the only pharmacy perhaps having sarcodes for every organ and part. Sarcodes, interestingly, can prove to be very good intercurrent remedies if there is organ specific problem or complaints. Then tautopathic prescribing is also briefly described and he recommends as it is one of the aetiology. Prophylactic prescribing is ignored as he felt in our homoeopathic literature. According to Dr Murphy, the best preventive against all diseases is to take the general homoeopathic remedy. Potency selection is something which still puts physician in confusion while prescribing. He has discussed most popular way of high

potency single dose and repetition as per need. And another being the low potency and frequent repetition, he has referred to this approach as Hahnemannian. LM potency is being stated as superior, gentle and deeper and he has explained it good including preparation. He suggests to use even simple potencies as well diluted in water as it enhances the action of medicine. And even a number of pellets being given at a time, matters as it is quantity of energy.

The author, in this book, has pointed out common mistakes that a student and a practitioner may make during the course of case taking and prescription. This book is highly recommended to all the learners.

And learners are not only students but every homoeopath as one understands that learning is an endless process.

About the author-

Dr Robin Murphy was born on August 15, 1950 in Grand rapids, Michigan. He carried out his studies in Michigan State University. His two repertories, and Lotus Materia Medica have been a big success and extensive work that enhanced homoeopathy. He was one of the shining gems in the crown of homoeopathy, his works will always guide and inspire to heal mankind.

About the reviewer-

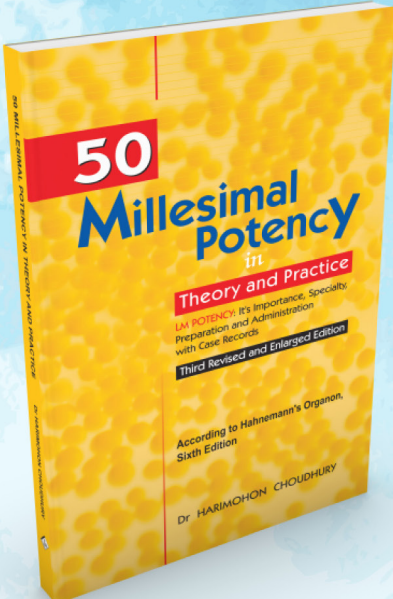
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HOD (Department of Surgery); in Bakson Homoeopathic Medical College and Hospital, Greater Noida. Clinical experience of around 18 years; privileged to work with reputed St. Joseph Hospital as Homoeopathic Consultant. Also, a part of The Homoeopathic Academy, THA; which is online learning portal of B Jain, for BHMS and MD students. Video lecture modules available in subjects like Materia Medica and OBGYN on THA. Associated with Kaizen, which is a preparatory institute for entrance exams such as AIAPGET, UPSC, State PSC, and several other competitions.

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MILLESIMAL POTENCY

THEORY & PRACTICE

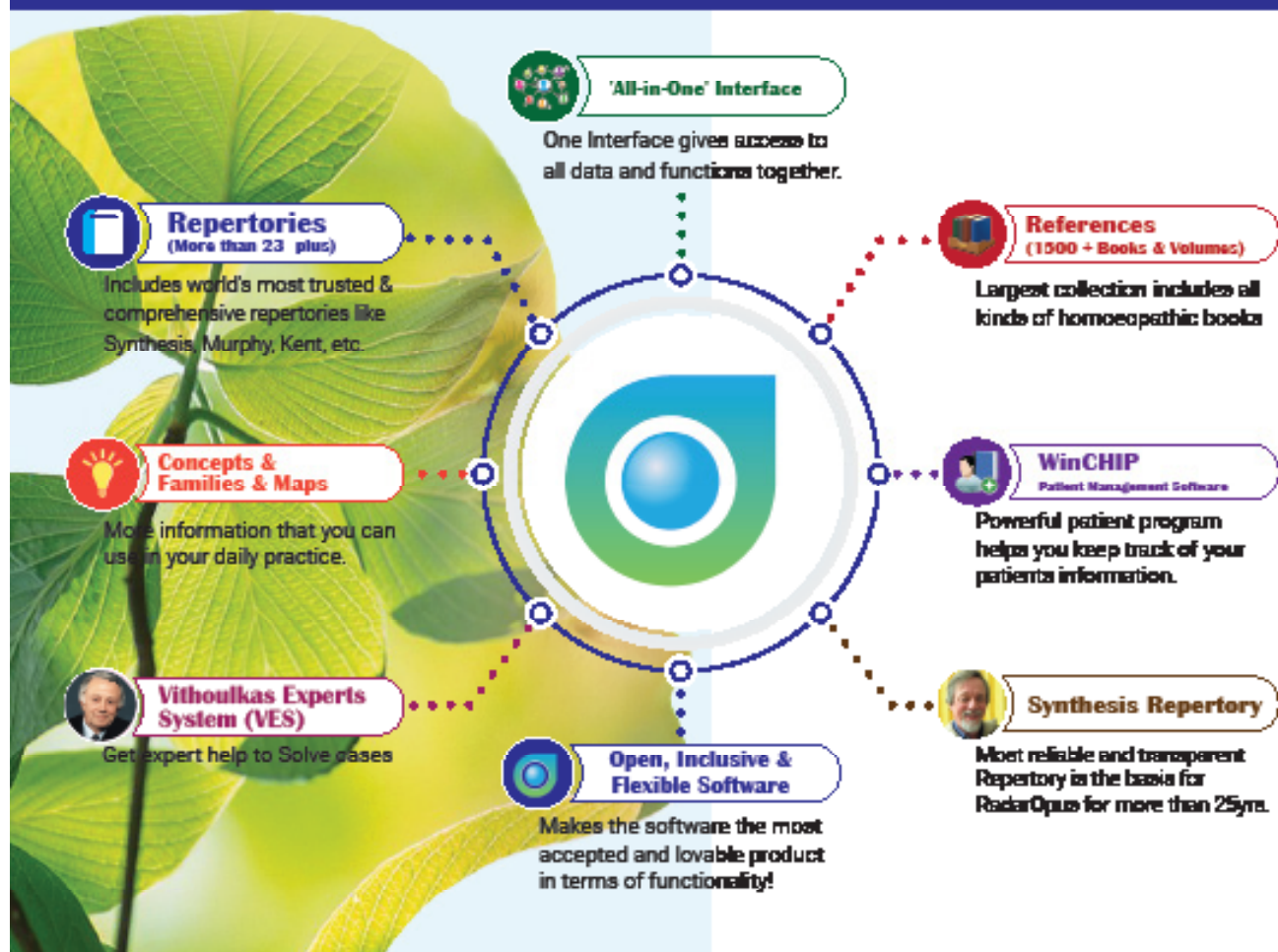


- This book presents the whole history of LM scale, its necessity, mode of preparation and administration etcetera, in a very simple and lucid manner.
- At each step, guidelines by Dr Hahnemann have been quoted to show the authenticity of the authors views. The author also touches upon various general topics on homeopathic philosophy such as the need for single medicine, the selection of potency, and repetition of the medicine etc.
- At the end the author has given two cases of Dr Hahnemann treated with LM potencies and also presents many of his own cases.

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