



Role of homoeopathy in the management of bronchial asthma – A case report

Vanishree L Magadum

Assistant Professor, Department of Materia Medica, Bharatesh Homoeopathic Medical College and Hospital, PG research Centre, Belagavi, Karnataka, India

Abstract

Bronchial asthma is a chronic airway disorder which can affect people of all age groups. Bronchial asthma is defined as a chronic inflammatory disorder of airway which is associated with airway hyper responsiveness. Bronchial asthma is a chronic airway disorder which can affect people of all age groups.

Homeopathy is the choice of treatment especially for the respiratory disease which were left untreated by the other mode of treatments.

Keywords: Bronchial asthma, homoeopathy, ars alb, respiratory disease

Introduction

Bronchial asthma is a condition in which a person's airway becomes inflamed, narrow and swells and produce extra mucus, which makes it difficult to breathe. Nearly 8-10% of the total world population suffers from it.

In India the prevalence of asthma has been found around 2%-7%. Etiological factors of asthma are divided into two groups. Inducing factors – genetic factor, obesity, viral infections in early life & exposure to tobacco smell. Trigger factors-such as allergies, vigorous exercise, diet, occupational sensitiveness and viral infections.

clinical features are episodic breathlessness, wheezing, cough, chest tightness, diurnal variability of worsening during night and early morning.

Important remedies in the management of asthma are

Ars alb: Asthma worse at night. Burning in chest, wheezing respiration. Unable to lie down fears suffocation.

Blatta orient: Patient gets worse in rainy weather, cough with much pus-like mucus.

Bromium: Asthma with dry spasmodic wheezing and rattling cough. Inspiration very difficult. Feels better near rivers, sea, worse in dry climate.

Cuprum met: Cough has a gurgling sound and is relieved by cold water. Suffocative attacks worse at 3AM and cold weather. Vomiting after attacks.

Pothos: Asthmatic complaints worse inhaling the least dust. Asthma relieved by stool.

Case report

Chief Complaint

Difficulty in breathing since 2years, aggravated since 1 week.

Details

Onset – sudden

A 37yrs old female came with the complaint of difficulty in breathing since 2 years, aggravated since 1 week. There is a feeling of constriction in the region of chest, aggravation in the night, smoke smell.

Past History

She took allopathic treatment for the same complaint but not recovered.

Family history

Father – Diabetic

Mother – Diabetic

Rest of the family members are keeping good health.

Personal History

Mixed diet, appetite is lost, craving for sour things, aversion for milk, Disturbed sleep, chilly patient

Menstrual History

Undergone for hysterectomy at the age of 32 due to huge fibroid.

Obstetrical history

P1-FTND-11 YRS BOY

Life space history

She hails from middle class family, born as a first child in the family. All the developmental milestones are normal.

Since her childhood she is very sensitive, cannot tolerate the opposition to her. She cares for everybody lot. During anger she throws all the things and starts crying. She likes company. She doesnot tolerate if things are not in place constantly she arranges and organizes the things neatly.

She has lost her close friend last year, she used to share all the feeling with her. She always thinks about her friend only she is not accepting death of her friend. Suddenly she starts crying, if somebody consoles her then she tells about her friend and cries a lot. Cannot concentrate properly on any topic completely. Because of breathlessness she thinks that she may die.

Mentals

Sensitive

Contradiction opposition

Sympathy for others

Anger – throws the things and cries

Likes company

Melancholic

Consolation aggravation

General physical examination

Moderately built, greyish black hair.
 Pallor, cyanosis, clubbing, oedema- Absent

Vitals

BP – 120/70 mm of Hg
 Pulse – 78bpm
 Resp rate – 9 Breaths per min

Local examination

Respiratory
 Auscultation – Wheezing is present

Investigation

Chest X ray
 Hyperinflation of lung

Totality of symptoms

Difficulty in breathing with a feeling of constriction in chest
 Aggravation – Night and smell of smoke
 Chilly patient
 Lost appetite
 Craving for sour things
 Aversion for milk
 Disturbed sleep
 Contradiction opposition
 Sympathy for others
 Anger – throws all the things and cries
 Consolation aggravation
 Wheezing in chest

Diagnosis – Bronchial asthma

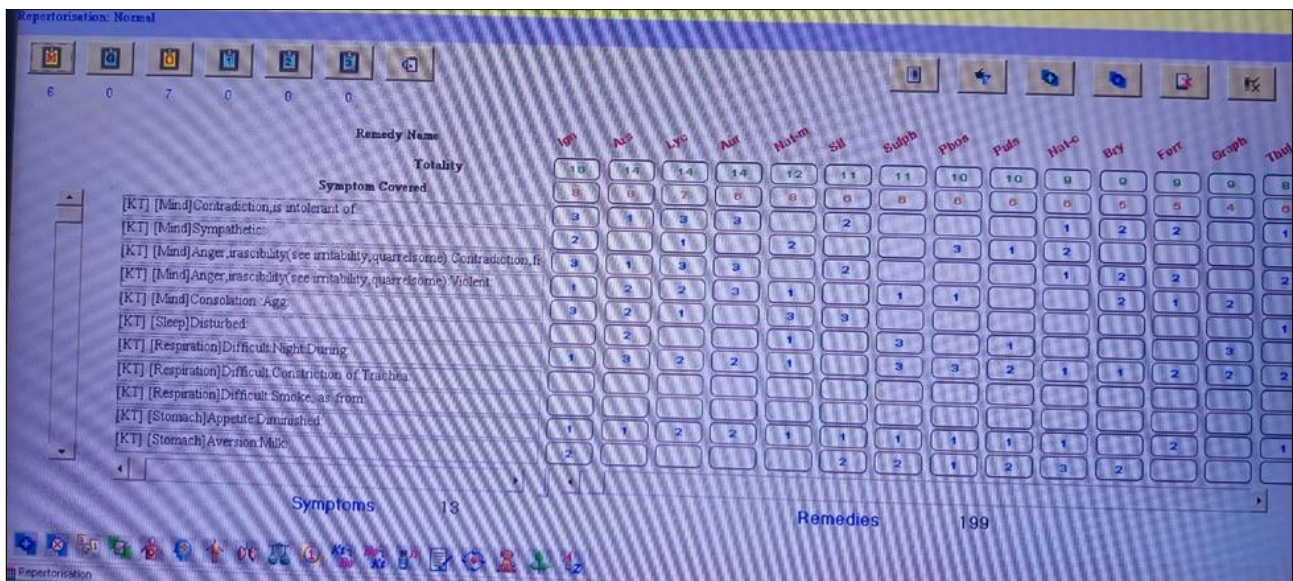


Fig 1

Remedy – Arsenicum alb 200 (2 doses)

Follow ups

Table 1

Date	Symptoms	Prescription
12.6.2023	Difficulty in breathing reduced to 50%, appetite and sleep have improved.	Ars alb 200 (2 doses) PI for 20days 4-0-4
25.6.2023	Difficulty in breathing reduced to 70%, occasional episodes of breathlessness. Generally feeling better.	Ars alb 200 (2doses) PI for 1 month 4-0-4
4.7.2023	Difficulty in breathing reduced again 70%. Episodes of breathlessness are more. Loose stools since 1 day.	Ars alb 1M 1 dose PI for 1month
26.8.2023	Difficulty in breathing reduced to 90%. No loose stools. Generally patient is feeling better.	PI for 2 months
2.11.2023	Difficulty in breathing reduced to 95%. Generally patient is feeling better.	PI for 3 months

References

1. Khaneja HS. Find your remedy an illustrated homoeopathic guide, 3rd ed. B Jain New delhi, 2018. ltd.
2. Munjal YP. API textbook of medicine, 10th ed, Jaypee brothers and medical publishers New Delhi, 2015. ltd.
3. Kent JT. Lectures on Homoeopathic material medica., B Jain New Delhi, 1998. ltd.
4. Boericke W. New manual of Homoeopathic material medica and repertory, 9th ed, B. Jain publishers, New Delhi, 2002.