

# International Journal of

# Homoeopathic Sciences

E-ISSN: 2616-4493 P-ISSN: 2616-4485

www.homoeopathicjournal.com IJHS 2024; 8(1): 12-15

Received: 16-11-2023 Accepted: 19-12-2023

#### Dr. Aditi Gheewala

PG Scholar MD Part-2, Department of Practice of Medicine, Jawaharlal Nehru homoeopathic Medical College & Hospital, Parul University, Waghodia, Vadodara, Gujarat, India

#### Dr. Kirtida Desai

PG Co-ordinator, MD (Homoeopathy), H.O.D Practice of Medicine, Jawaharlal Nehru Homoeopathic Medical, College & Hospital, Parul University, Waghodia, Vadodara, Gujarat, India

#### Dr. Poorav Desai

Principal MD (Homoeopathy), Ph.D., Dean, Faculty of Homoeopathy, H.O.D & Professor, Department of Anatomy, Jawaharlal Nehru homoeopathic Medical College & Hospital, Parul University, Waghodia, Vadodara, Gujarat, India

# A case of chronic spondylolisthesis managed with deep-acting homoeopathic medicine

# Dr. Aditi Gheewala, Dr. Kirtida Desai and Dr. Poorav Desai

**DOI:** https://doi.org/10.33545/26164485.2024.v8.i1a.1043

#### **Abstract**

Pain in the lumbosacral area that can relate to problems with the lumbar spine, the disc between the vertebra, the ligaments around the spine and discs, the spinal cord and nerves and muscles of the low back, internal organ of pelvis and abdomen, or the skin covering the lumbar area.

Low back pain (LBP) is the most common rheumatic disorder accounting for 30% to 50% of rheumatic musculoskeletal complaint is seen by physician.

Few cases of back pain are due to specific causes; most cases are non-specific. Acute back pain is the most common presentation and is usually self-limiting, lasting less than three months regardless of treatment. Chronic back pain is a more difficult problem, which often has strong psychological overlay: Work dissatisfaction, boredom, and a generous compensation system contribute to it.

**Keywords:** Lower back pain, abundance, homoeopathy, deep-acting individualized homoeopathic remedy

#### 1. Introduction

**1.1 Case Report:** A 45 years old lady came in OPD with complaints bach pain involving right hip (Posterolateral) with ankle joint since 6 months. Complaints increased since 1 month, stretching and radiating pain with numbness

# 1.2 Present history

Table 1: Chief complaints

| No. | Location  | Sensation & pathology   | Modalities   | Accompaniments                    |
|-----|---|---|--|-----------------------------------|
| 1.  | M.S.S Back Rt hip (posterolateral)  ankle O: 6 Month D:Continuous | Stretching pain <sup>++</sup> Radiating<br>pain <sup>++</sup> Numbness <sup>++</sup><br>No tingling | < Morning <sup>++</sup> < Cold weather <sup>++</sup> < Sour food <sup>++</sup> > Gentle pressure <sup>++</sup> | App-N Thirst-N Stool-N<br>Urine-N |

#### 1.3 Physical Generals

**Appearance:** Medium built, whitish complexion. **Weight:** Weight gain up to 7-8 kg in 2 months.

Perspiration: General- scanty.

Partial: Scalp ++
Digestion: Normal.
Thirst: Normal.
Appetite: Decreased.

**Cravings:** Cold drinks<sup>++</sup>, Ice cream<sup>++</sup>, Pungent<sup>++</sup>, Sweet<sup>++</sup>, Tea++

Aversions: Stool: Normal. Urine: Normal.

**Sleep:** Disturbed Light++, Noise++ **Duration:** 3-4 hours/night since 1 month

**Position:** Side on, alternate++

Dreams: -.

Thermals: Chilly.

Corresponding Author: Dr. Aditi Gheewala PG Scholar MD Part-2, Department of Practice of

Department of Practice of Medicine, Jawaharlal Nehru homoeopathic Medical College & Hospital, Parul University, Waghodia, Vadodara, Gujarat,

India

#### 1.4 Menstrual history

FMP: 14-15 years of age Cycle - regular, 28-30 days.

LMP: 13/4/2022.

Duration: 3-4 days.

Quantity: 3 pads/day.

Colour: Dark-red.

#### 1.5 Sexual history

Sexual function - Desire diminished, not having intercourse

since 8-10 years

# 1.6 Obstestric history

G1P1A0L1S0D0

#### 1.7 Past history

Dengue 3yr. back.

# 1.8 Family history

Mo-HTN, DM.

# 1.9 Life Space Investigation

#### 1.9.1 Childhood

She was born at Vadodara. Family consists of grandparents, parents, elder brother and sister. Father is cool and calm in nature. He gets angry whenever she does notorious thing. He is retired government teacher. Mother is cool & calm in nature. She is house wife. Siblings are cool & calm by nature. Grandparents are is good in nature. She has good IPR with all family members. Financial condition of family is good.

#### 1.9.2 School Life

She studied up to 12<sup>th</sup> Std. She studied up to 1<sup>st</sup> -5<sup>th</sup> Std at Vadodara and 6<sup>th</sup> -12<sup>th</sup> Std at Lalbahadur shastri school. She is not interested in study. She is very weak in maths. In 10<sup>th</sup> Std she attempts 3 trial and after that she would pass. She clear 12<sup>th</sup> exam in first attempt. She has good IPR with teacher and friends. She has 6-7 friends. She enjoyed her school life and did fun with friends. She never took part in any activity during school but she has hobby of hand working (Bharat-Kam) and cooking. After 12<sup>th</sup> Std, her marriage got fixed so she left study.

# 1.9.3 Married Life

She got married in 1996. In law family consists of MIL, FIL, 2 SIL and husband. FIL is cool and calm in nature. MIL is also good in nature. She has good IPR with them. Husband is cool & calm in nature. Husband is lawyer at Vadodara and to work about land dealing. Husband full fill all her desire and gave all thing before she told. She has good relation with husband. FIL expired due to heart attack after 2 months of her marriage. She takes care of him. But no any effect in mind because he suffers so much so batter to die. Both SIL is good in nature. She is much attach with younger SIL like she is her friend. She talk with her daily on call for 1-2 hrs That SIL was expired due to brain haemorrhage 6yrs. ago. That time she cried so much, BP goes down and remains unconscious for 2 days. She has one son and his nature is good. Both mother-son has not habit to live without each other. Her mother was expired before 1 month ago. She was suffering from DM, HTN and some kidney disease. But no any effects on her mind because she is prepare for that and said it's better to die. She visited maternal house frequently to take care of mother.

#### 1.10 Patient as a person

She is cool and calm by nature. She has no any anxiety and tension during her whole life. She is sympathetic in nature. She started crying by seeing others are crying in TV or in surrounding. She is helpful in nature. She help any people by giving food or money them. Whenever in lunch or dinner time, some bagger arrived she gave food.

She has fear of ghost and strange place. Whenever someone spoke on face in angry mood yet she doesn't reply to any single word and started weeping. She doesn't like quarrel. She has no tension about work. She does work slowly and neat and clean. She has hobby of cooking, to listen music and travelling. She likes to go Ambaji in every 2-2.5 moths. She likes to stay in forest. She has also good relation with neighbour.

#### 1.11 General Examination

Pulse: 85/min.

BP: 120/80 mm hg. SPO2: 99%. RR: 14/min. TEMP.: 97.4°F. Weight: 73.5 kg. Nails: Pink.

Conjuctiva: Pink. Tongue: Pink, Moist.

# 1.12 Systemic Examination

RS: AE = BE CVS: S1s2 - N CNS: NAD

P/A: Soft, non-tender

#### MSS-Back

**Inspection:** Gait-normal **Palpation:** Tenderness-present

Slrt: Right: Negative and left: negative

Sensation: Present Movement: Normal Reflex: Present

# 1.13 Investigations

29/4/2022 HB-11.9 (Female - 12-14gm/dL). RBC-4.21 WBC-7800. Platelet-347000 ESR-28. Uric Acid-4.20. Calcium-9.70. Vitamin D3-16.7.

# 6/5/20222 X-Ray LS Spine

L2-L5 Spondylotic Changes

Grade II Spondylolisthesis OF L5 over S1 with Lysis L5-S1 Disc Space Narrowing

#### 1.14 Final Diagnosis

Chronic Degenerative (L2-L5) Grade 2 Lumbar Spondylolisthesis (L5-S1)

# 1.15 Repertorial Totality

Kent approach - Qualified mental, Physical generals (Synthesis Android app used)

- 1. Mind-sympathetic
- 2. Mind-tranquility
- 3. Mind-sentimental
- 4. Mind-weeping-movies, seeing sad
- 5. Mind-communicative
- 6. Mind-travelling-desire for
- 7. Mind-music-desire
- 3. Mind- fear-ghost of

- 9. Mind-fear-strange places of
- 10. Mind-memory-weakness of memory
- 11. Mind-slow-work in
- 12. Sleep-deep
- 13. Sleep-position-side on-right side
- 14. Sleep-deep
- 15. Sleep-position-side on-right side
- 16. Perspiration-scanty sweat
- 17. Head-perspiration of scalp
- 18. General-food & drink-pungent-desire for
- 19. General-food & drink-cold drink-desire for
- 20. General-food & drink-ice cream-desire for
- 21. General-food & drink-sweet-desire for
- 22. General-food & drink-tea-desire for
- 23. General-food & drink-milk-aversion

## 1.16 Repertorial result

CAR-21/16

SEP-25/15

CAUST- 19/12

NAT M - 21/16

LYC - 23/13

CALC C - 19/11

PHOS - 36/15

PULS - 23/13

CALC P - 19/11

# 1.17 Planning and Programming

Table 2: Selection of potency

| Define with reason the states   | Potency-choice   | Repetition |
|---------------------------------|------------------|------------|
| Susceptibility- Mod.            | Moderate         | Infrequent |
| Age/Sex:- 45/F                  |                  |            |
| Occ:- Housewife                 | 200              |            |
| Pod:- Gradual                   | 200              |            |
| Sod:- Structural Irreversible   |                  |            |
| Sensitivity- Mod.               | Moderate         | Infrequent |
| Mind-++, Nerve-++               | ind-++, Nerve-++ |            |
| Sleep- ++, Dreams-              | 200              |            |
| Suppression-                    |                  |            |
| Correspondence                  | Const. Rx        | Infrequent |
| Mind: ++                        | Calc Phos-200    |            |
| Body: ++                        | Calc Filos-200   |            |
| Correspondence                  | Inter-Current Rx | -          |
| Functional Change               |                  |            |
| Structural Change               | Low              |            |
| Present Irreversible - Slippage | 30               | Infrequent |
| of Vertebra                     | 30               |            |
| General Vitality                | High             |            |
| Good                            | 1m               | Infrequent |
| Fundamental Miasm               | Moderate         |            |
| Syphilis - Sil (Brain H'ge)     | 200              | Infrequent |
| Dominant Miasm                  | Moderate         |            |
| Sycosis-Spondylolisthesis       | 200              | Infrequent |

# 1.18 Final Prescription

- 1. CALC PHOS 200 1P HS
- 2. SL 3 Pills TDS\*7 days\*2 weeks

#### Advice

**Physiotherapy:** Full diet with dry fruits, pumpkin, greenvegetables - spinach particularly.

#### 2 Follow ups

- Criteria
- 1. Low back pain (I/D/F).
- 2. Radiating pain (I/D/F).
- 3. Numbness.
- 4. O/e: Tenderness.
- 5. SLRT.
- Movement.

**Table 3:** Follows Ups

| Date      | 1                               | 2    | 3    | 4             | 5            | 6        | Prescription    |
|-----------|---------------------------------|------|------|---------------|--------------|----------|-----------------|
|           | >+                              | >+   | >+   | <b>&gt;</b> + | >+           | >+       | CALLC PHOS      |
| 6/5/2022  |                                 |      |      |               |              |          | 200 1P HS       |
| 0/3/2022  |                                 |      |      |               |              |          | SL 3 pills TDS* |
|           |                                 |      |      |               |              |          | 2 weeks         |
|           | >++                             | >+   | >++  | <u>&gt;</u> + | >+           | <u> </u> | CALLC PHOS      |
| 20/5/2022 |                                 |      |      |               |              |          | 200 1P HS       |
| 20/3/2022 |                                 |      |      |               |              |          | SL 3 pills TDS* |
|           |                                 |      |      |               |              |          | 2 weeks         |
|           | >++                             | >+++ | >+++ | \<br>\<br>\   | <del>*</del> | >+       | CALC PHOS       |
| 3/6/2022  |                                 |      |      |               |              |          | 200 1P HS       |
| 3/0/2022  |                                 |      |      |               |              |          | SL 3 pills TDS* |
|           |                                 |      |      |               |              |          | 4 weeks         |
|           | >++<br>Occ. Pain<br>< Sour food |      | >+++ | >+++          | >++          | >+       | CALC PHOS       |
| 1/7/2022  |                                 |      |      |               |              |          | 200 1P HS       |
| 1///2022  |                                 |      |      |               |              |          | SL 3 pills TDS* |
|           |                                 |      |      |               |              |          | 4 weeks         |

#### 3. Discussion

The present case provide the result of constitutional remedy on lower back pain. Constitution remedy selected after taking case in Hahnemann method and consider patient as a whole. Constitutional remedy give cure to patient mentally as well as physically and able to cure degenerative changes in spine. Importance of integrating the symptoms and investigation to arrive at final diagnosis and it turn to applying in planning and programming is necessary.

# 4. Conclusion

She came in OPD with diagnosis of Right Sciatica. She is already under allopathic treatment for 1.5 months but condition was not improved. Then she came for our Homoeopathic treatment. Her Constitutional remedy CALC PHOS was decided on the basis of mental and physical with slow progress of disease and few characteristics symptoms. And that's why the susceptibility selected as moderate. Till date she is under our homoeopathic treatment and her disease condition is under control

#### **Conflict of Interest**

Not available

# **Financial Support**

Not available

#### 5. References

- Harrison's Principle of Internal Medicine, 20<sup>th</sup> Edition, Edited by Jameson, Fauci, Kasper, Hauser, Longo, Loscalzo, Vol. I, p. 90.
- Macnab's Backache, 4<sup>th</sup> Edition, Edited by David A Wong, Ensor Transdeldt.
- 3. Essential Orthopaedic Including Clinical Methods, 5<sup>th</sup>

Edition, Edited by J Mahehswari, Vikram a Mhaskar principles and practise of homoeopathy, Dr. ML Dhawle - MD (BOM), Part-1, conception of constitutional remedy, role of constitutional remedy.

- 4. Supplementary to A Treatise on Organon of Medicine, Part-1 factor of constitutional, constitutional medicine, by Prof. Ashok Kumar Das.
- 5. Lectures on homoeopathic Materia Medica together with Kent's "New Remedies" incorporated and arranged in one alphabetical order James Tyler Kent.
- Patil JD. Gems Textbook of Homoeopathic Materia Medica.

#### **How to Cite This Article**

Sabud A, Das A, Debbarma R. Efficacy of Individualized homoeopathic intervention in subclinical hypothyroidism: A case report. International Journal of Homoeopathic Sciences. 2024;8(1):12-15.

#### Creative Commons (CC) License

This is an open-access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.