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An analytical and observational clinical study on a polychrest homoeopathic remedy *Lachesis mutus*

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Abstract

Background: Polychrest remedies like *Lachesis muta* are commonly found to be useful in both acute and chronic morbid conditions. These polychrests depict several archetypes, each representing a diverse array of symptoms and psychological features, of which the particular patient only embodies a partial resemblance. This study provides an ample opportunity to clinically verify some of the well-known indications of *Lachesis muta*.

Objective: To clinically verify the indicating symptomatology of *Lachesis* in the study group.

To observe with respect to *Lachesis mutus* -The various clinical conditions in which it was prescribed, Posology, Age distribution, Gender distribution and occupation.

To evaluate the quality of life of patient with *Lachesis* by using WHOQOL –BREF Questionnaire.

Keywords: Homoeopathic remedy, *Lachesis muta*, data analysis, symptomatology, polychrests, portray, exclusion criteria, whoqol-BREF questionnaire

Introduction

Lachesis is a homeopathic remedy belonging to the ophidia group, which is produced from the venom of the snake surukuku. It is mostly known for its prominent effects and is considered to be very useful within this group. Certain medicines may induce a wide range of symptoms across the whole of a healthy individual's body during controlled human pathogenetic trials, also known as homoeopathic drug proving. These symptoms generally align with pathological symptoms usually seen in illness. Consequently, these medicines are frequently used in homoeopathic practice and have shown beneficial effects. Hahnemann used the phrase "polychrest remedies" to describe these remedies, which possess a wide range of applications in both acute and chronic pathological disorders. These polychrests depict several archetypes, each representing a diverse array of symptoms and psychological features, of which the particular patient only embodies a partial resemblance. *Lachesis* is a notable medicine within the homeopathic materia medica, recognized as a polychrest. It was first presented by Constantine Hering, who conducted provings on himself and others. The present study focuses on the examination of *Lachesis*, elucidating its unique attributes and potential use in mitigating feelings of envy and jealousy. *Lachesis*, a substance produced from the venom of the surukuku snake, shows efficacy in addressing heightened emotional states, inclinations towards distrust, and a propensity for seeking retribution. This phenomenon is often seen in contexts where people perceive themselves as having been treated unjustly or deceived within intimate relationships, manifesting their emotions of envy and jealousy via feelings of wrath, possessiveness, and apprehension over being abandoned or replaced.

The central concept is to the phenomenon of overstimulation, characterized by a perpetual quest for a means of alleviation akin to a perpetually boiling pot that needs an outlet, lest it succumb to a state of despair. Snake venom, once entering the bloodstream, first induces stimulation before targeting more particular regions. In the case of *Lachesis*, the initial target of attack is the central nervous system, resulting in the individual collapsing suddenly and losing consciousness. This attack specifically affects the sympathetic and vagus nerves, thereby disrupting the overall functioning of the body and leading to the breakdown of blood composition. Consequently, the manifestation of gangrene occurs as a direct consequence of this diminished vitality. It provided an ample opportunity to clinically verify some of the well-known indications of polychrest remedy *Lachesis mutus*.

Loquacity, intolerance of constriction around neck, fine tremors on tongue were most recognized signs in patients receiving Lachesis.

Aims and objectives

To assess the function of Lachesis in different acute and chronic clinical conditions. An analytical study of Lachesis, specifically examining its clinical characteristics.

Objectives

- To clinically verify the indicating symptomatology of Lachesis in the study group.
- To observe with respect to *Lachesis mutus* -
 - The various clinical conditions in which it was prescribed.
 - Posology.
 - To evaluate the quality of life of patient with lachesis by using WHOQOL –BREF Questionnaire.

Hypothesis and research

Question Research Question How *Lachesis mutus* is effective in acute and chronic diseased condition?

Null hypothesis

There is no significant effect of *Lachesis mutus* in acute and chronic diseased condition

Alternative hypothesis

Lachesis mutus is significantly effective for both acute and chronic diseased condition.

Materials and Methods

Study setting

The study was conducted at OPD, IPD of Pt. Jawaharlal Nehru State Homoeopathic Medical College and Hospital, Kanpur.

Study duration: The study was conducted over a period of 18 months

Study Design: Retrospective, Observational, Data Analysis

Selection of Samples

Sample Size: Minimum 32 patients including both sexes.

Method of sampling: Simple Non randomized Sampling

Data collection

1. Primary data collected from the patients on their first visit as well as on subsequent follow-ups.
2. Interview of the patient during case taking
3. Questionnaire method.
4. Screening Procedure.
5. Secondary data taken from all available standard books, Journals, Articles, and Internet etc.

Inclusion criteria

The following cases were included for data-analysis

- Presented with pre-defined symptomatology of lachesis, as available in the textbooks of homeopathic materia medica i.e. Constantine Hering's The Guiding Symptoms of our Materia Medica vol VI, Timothy Field Allen's The Encyclopedia of Pure Materia Medica vol V and John Henry Clarke's A Dictionary of Practical Materia Medica vol II [4-6].
- Received lachesis as a first prescription at Pt. Jawaharlal Nehru State Homoeopathic medical college Kanpur.

- Lachesis was prescribed as a single homeopathic remedy, in accordance with homeopathic principles.
- Followed up at least three times.

Exclusion criteria

- Patients with a history of alcohol/drug abuse or under narcotic medication were excluded from the study
- Pregnant women.

Intervention

- Participants were given *Lachesis mutus*. Selection of potency, dose and repetition of medicine was as per homeopathic principles.
- Medicine was given from the pharmacy of Pt. Jawaharlal Nehru State Homoeopathic Medical College and Hospital Kanpur, Uttar Pradesh.
- Follow up action: Every patient was followed up at 15 days of interval. Response to the first prescription that is aggravation, amelioration or no change was assessed, and further treatment was continued as per Homoeopathic Principles.

Data Analysis

- The baseline and post-treatment data collected was analysed statistically.
- The patient with minimum three follow up were included in data analysis.
- Patient were called after two weeks for every follow up.
- In this study the level of significance was set at $P < 0.05$ for all analysis.
- Minitab Software and MS Excel was used for Statistical Analysis.

Observation and result

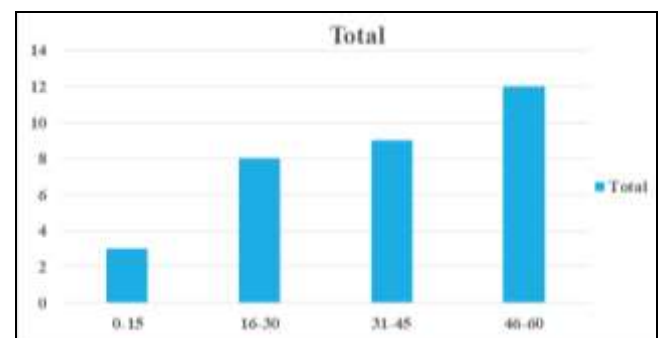


Fig 1: Bar Diagram showing Age group frequency distribution

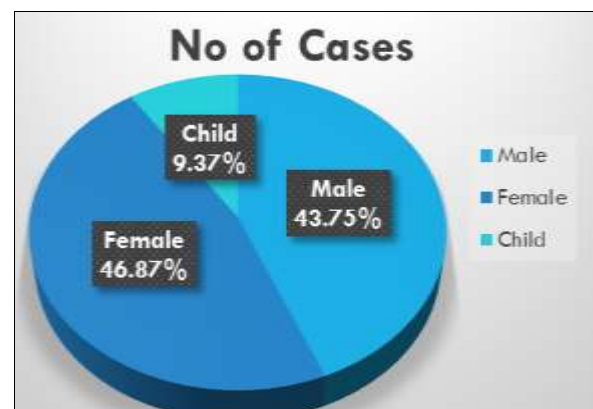


Fig 2: Pie chart showing Gender distribution

Above data clearly indicates that age group of 46-60 years had the highest frequency of 12 patients followed by age group of 31-45 years with frequency of 9 patients. 0-15 years age group had the lowest frequency of 3 patients.

According to the above data out of 32 cases 43.75% patients were males and 46.87% patients were females and 9.37% are child.

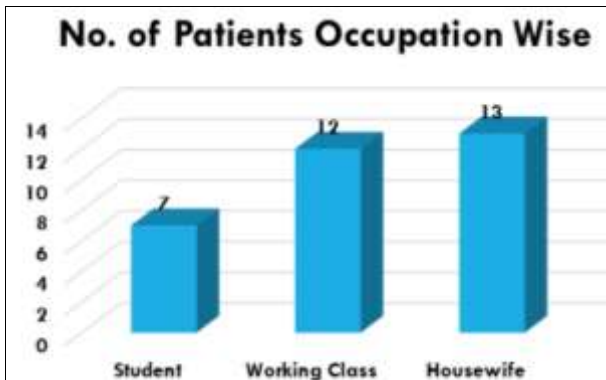


Fig 3: Histogram of Occupation distribution

It is quite evident from the above data that 13 out of 32 were Housewife, 7 were Students and rest was working class.

Disease in which Lachesis prescribed

Table 5: 5.1 Disease in which Lachesis prescribed

S. No.	Disease/Clinical Condition	No. of patient
1	Allergic Rhinitis	4
2	Arthritis	3
3	Backache	2
5	Cervical Spondylosis	1
6	Cough	1
7	Dub	1
8	Dyspepsia	2
9	Fever	1
10	Follicular Cyst	1
11	Hypotension	1
12	Hypothyroidism	1
13	Menorrhagia	1
14	Myasthenia Gravis	1
15	Otorrhoea	1
16	Pcos	2
17	Pruritis	1
18	Psoriasis	1
19	Schizophrenia	1
20	Skin discoloration	1
21	UTI	1
22	Vertigo	2
23	Weak Memory	1
24	Weight gain	1

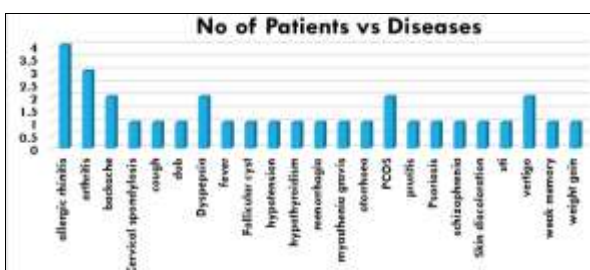


Fig 4: Histogram showing various Clinical Condition

Lachesis was prescribed in 24 diverse clinical conditions both acute and chronic. In allergic rhinitis, Arthritis, Backache, PCOS and Vertigo Lachesis was frequently prescribed

Potency used

Table 6: Potency Used

Potency used	No of cases
30	5
200	15
30,200	6
1 m	2
200,1 m	1
30, 1 m	1
30, 200, 1 m	2

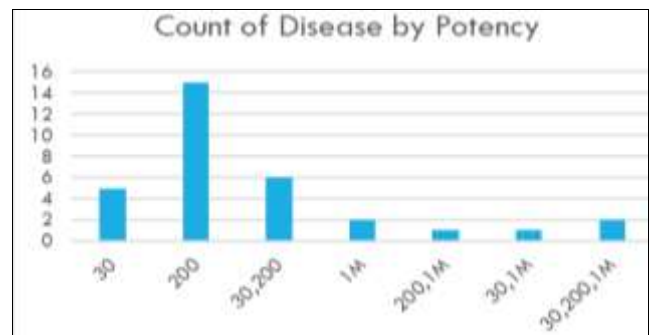


Fig 5: Bar graph showing Potency Used

From above data it is evident that 200 being most used potency followed by 30 and 1 M

Clinical verification

Table 7: Clinical verification of Symptoms of *Lachesis mutus*

S. No.	INDICATIVE SYMPTOMATOLOGY	No. OF PATIEN	PERCENTAGE
1	Insane Jealousy	22	68.75
2	Suspiciousness	15	46.87
3	Loquacity	25	78.13
4	Religious	18	56.25
5	Suffocation	15	46.87
6	Intolerance of constriction around neck	23	71.87
7	Intolerance of tight fitting garments	23	71.87
8	Aggravation of complaints while falling asleep	25	78.12
9	Left sided	20	62.5
10	Left to right	12	37.5
11	Bluish discoloration around mouth	13	40.62
12	Tongue; difficult to protrude	10	37.5
13	Tongue catches in teeth	8	25
14	Tongue; fine tremors	16	50
15	Complaints improve with onset of menstruation	10	37.5
16	Swallowing liquids aggravates	8	25
17	Ailments during spring weather	20	62.5
18	Thermal Reaction: Hot	28	87.5
19	Thermal Reaction: Chilly	8	25
20	Sibling Rivalry	4	12.5
21	Fear of snake	15	46.87
22	Dreams of snake	18	56.25

Improvement in domains of whoqol-BREF—questionnaire

Table 7: Improvement in Domains of WHO-BREF Questionnaire

Domains	Percentage
Physical Domain	90.62%
Psychological domain	78.13%
Social domain	31.25%
Environment domain	78.13%

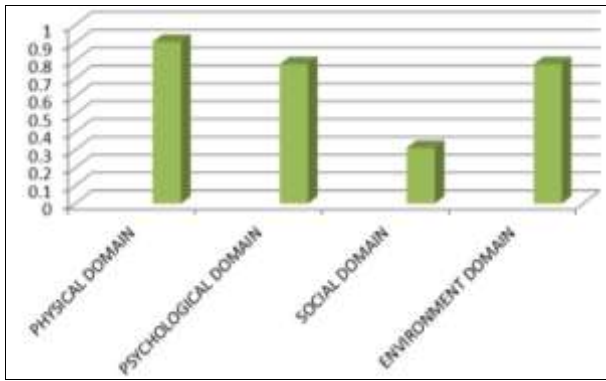


Fig 6: Histogram showing Improvement in Domains of WHO-BREF Questionnaire

From above data it is evident that Physical Domain showed the highest improvement while Social Domain showed the least. The improvement in Psychological and Environment Domain was same.

Statistical analysis of data

Statistical analysis was done with the help of MINITAB Software & Microsoft Excel. Paired t- test was applied on the transformed scores of all the four domain of WHO-BREF Questionnaire with the help of MINITAB Software.

Paired t-test with the help of minitab software

Paired t – test was applied on the 4-20 transformed score of WHO- BREF Questionnaire on all 32 patients.

Table 10: Before & After Treatment values of different domains of WHOQoL BREF Questionnaire

Who bref quality of life questionnaire							
Physical domain		Psychological do.		Social domain		Environment do.	
Before	After	Before	After	Before	After	Before	After
10	15	13	15	15	15	11	14
13	15	13	14	11	12	11	12
9	15	11	15	11	12	8	11
14	17	15	16	16	16	15	16
14	17	12	15	15	15	12	13
11	16	7	15	11	11	6	10
6	15	9	15	5	8	11	14
14	15	15	15	12	12	16	16
9	16	9	14	9	9	6	8
10	13	10	12	12	12	7	9
9	15	10	15	12	12	15	16
11	15	12	14	12	12	16	16
16	17	16	16	15	16	16	16
12	14	15	15	11	12	9	12
11	15	11	15	12	12	14	16
12	15	19	19	15	16	16	17
13	16	11	13	12	12	14	16
10	17	11	15	15	15	13	16
11	16	10	14	12	12	8	9
11	17	12	15	12	13	14	16
11	11	11	11	8	8	7	7
11	13	13	14	11	11	7	8
14	14	11	11	12	12	15	15
11	11	11	11	12	12	7	7
14	15	11	12	12	12	15	16
13	15	13	15	12	12	15	16
11	15	12	15	9	15	13	15
13	16	12	15	12	12	14	15
13	15	11	15	11	11	7	10
11	16	11	15	9	12	13	15
9	15	9	14	9	12	14	16
13	14	13	14	12	12	15	15

Physical domain Descriptive Statistics

Sample	N	Mean	St Dev	SE Mean
C2	32	15.031	1.492	0.264
C1	32	11.563	2.047	0.362

Null hypothesis	H ₀ : μ _{difference} = 0
Alternative hypothesis	H ₁ : μ _{difference} ≠ 0
T-Value	P-Value
8.53	0.000

Estimation for Paired Difference

Mean	St Dev	SE Mean	95% CI for μ _{difference}
3.469	2.300	0.407	(2.640, 4.298)

μ_{difference}: population mean of (C2 - C1)

Test

At 30 degree of freedom, 5% significant limit of ‘t’ is 2.04. The observed value of ‘t’ is 8.53 which shows p<0.05 i.e. significant.

In this domain 90.62% patients were improved while 9.38% patients showed no improvement

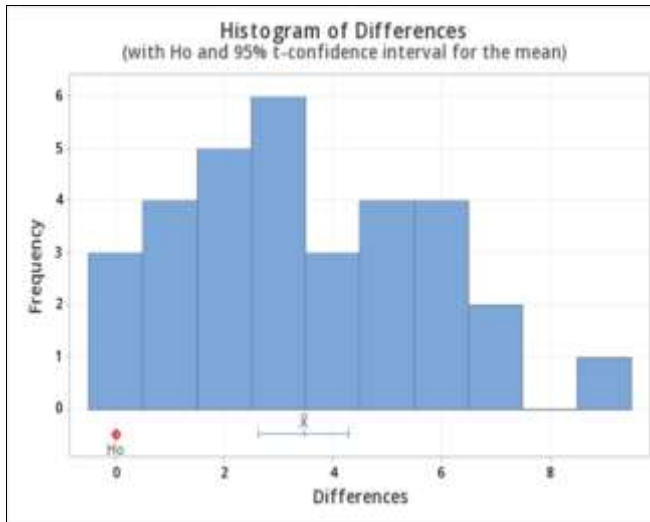


Fig 7: Showing Physical Domain

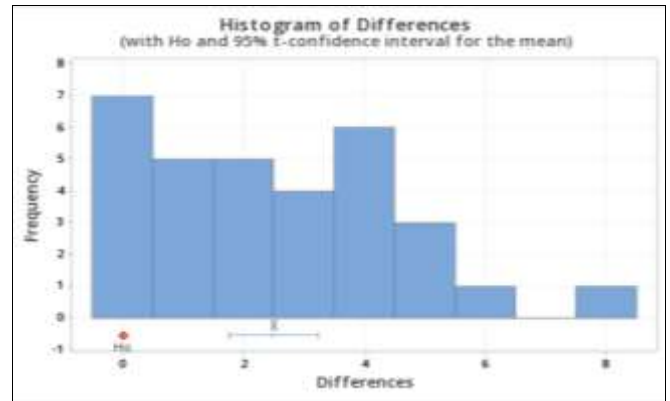


Fig 9: Showing Psychological Domain Distribution

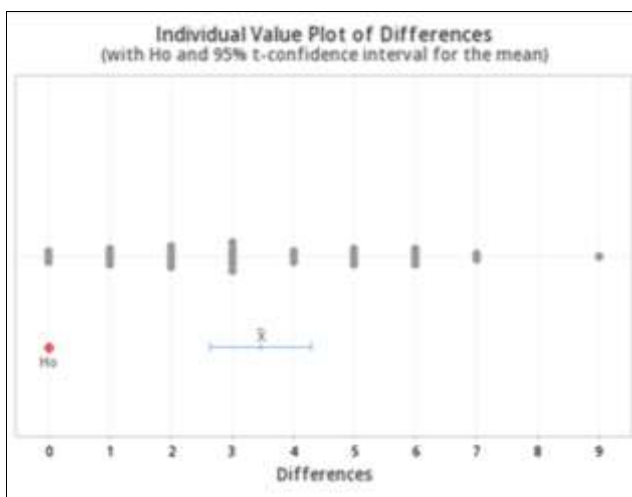


Fig 8: Showing the absence of Outliers in Distribution Physical Domain

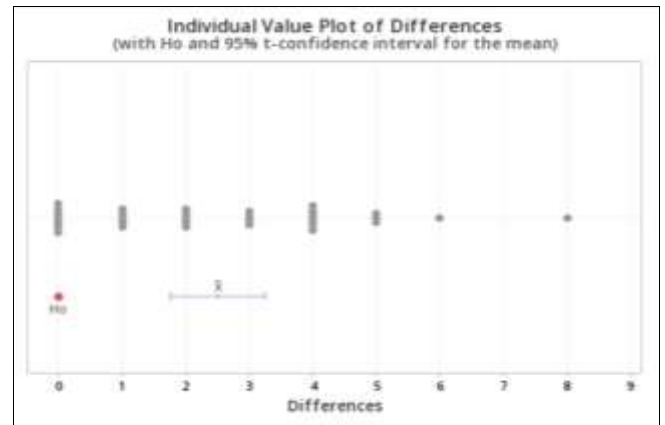


Fig 10: Showing the absence of Outliers in Psychological Domain

**Psychological domain
Descriptive Statistics**

Sample	N	Mean	St Dev	SE Mean
C2	32	14.344	1.619	0.286
C1	32	11.844	2.343	0.414

Estimation for Paired Difference

Mean	St Dev	SE Mean	95% CI for μ difference
2.500	2.064	0.365	(1.756, 3.244)

μ difference: population mean of (C2 - C1)

TEST

Null hypothesis		$H_0: \mu \text{ difference} = 0$
Alternative hypothesis		$H_1: \mu \text{ difference} \neq 0$
T-Value	P-Value	
6.85	0.000	

At 30 degree of freedom, 5% significant limit of 't' is 2.04. The observed value of 't' is 6.85 which shows $p < 0.05$ i.e. significant.

In this domain 78.13% patients were improved while 21.88% patients showed no improvement.

**Social domain
Descriptive Statistics**

Sample	N	Mean	St Dev	SE Mean
C2	32	12.344	2.010	0.355
C1	32	11.688	2.306	0.408

Estimation for Paired Difference

Mean	St Dev	SE Mean	95% CI for μ difference
0.656	1.335	0.236	(0.175, 1.137)

μ difference: population mean of (C2 - C1)

Test

Null hypothesis	$H_0: \mu \text{ difference} = 0$
Alternative hypothesis	$H_1: \mu \text{ difference} \neq 0$

T-Value	P-Value
2.78	0.009

At 30 degree of freedom, 5% significant limit of 't' is 2.04. The observed value of 't' is 2.78 which shows $p < 0.05$ i.e. significant.

In this domain 31.25% patients were improved while 68.75% patients showed no improvement.

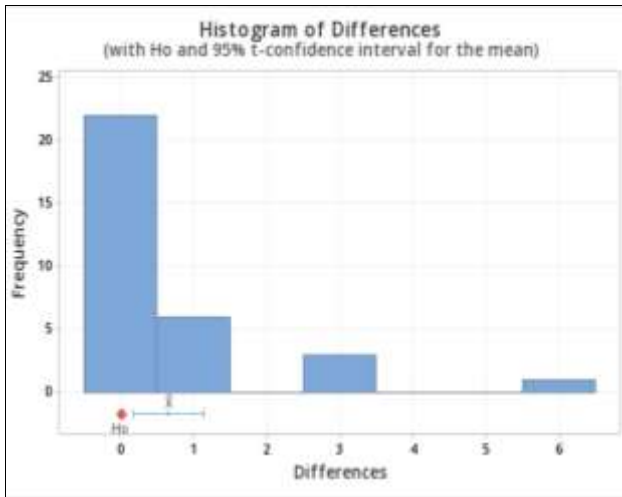


Fig 11: Showing Social Domain

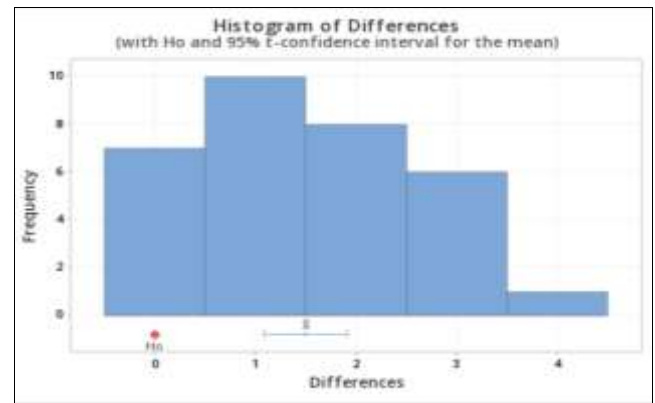


Fig 13: Showing Environment Domain Distribution

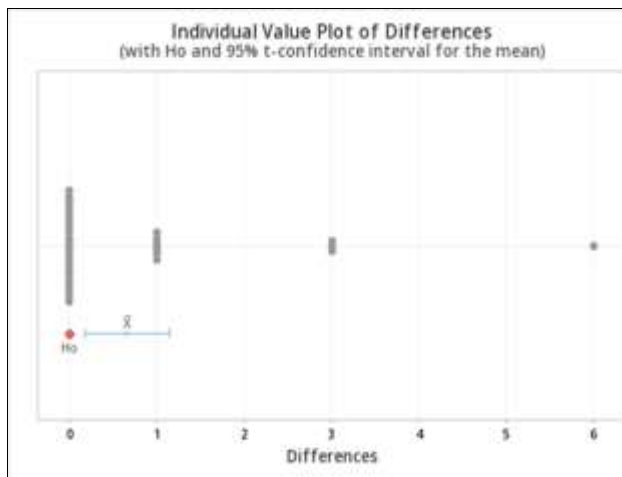


Fig 12: Showing the presence of Outliers in Social Domain

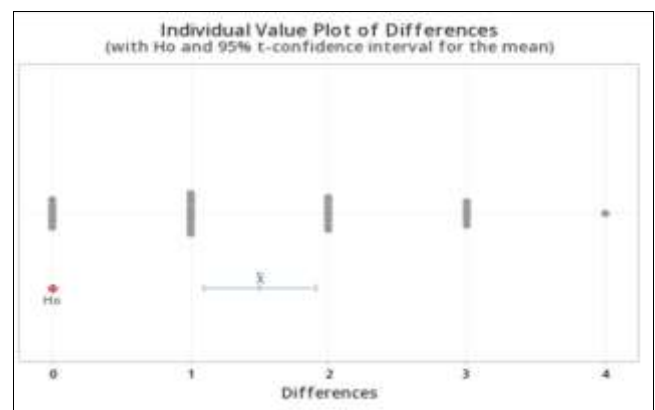


Fig 14: Showing the presence of Outlier in Environment Domain

**Environment domain
Descriptive Statistics**

Sample	N	Mean	St Dev	SE Mean
C2	32	13.375	3.210	0.568
C1	32	11.875	3.508	0.620

Estimation for Paired Difference

Mean	St Dev	SE Mean	95% CI for μ difference
1.500	1.136	0.201	(1.090, 1.910)

μ difference: population mean of (C2 - C1)

Test

Null hypothesis	$H_0: \mu_{\text{difference}} = 0$
Alternative hypothesis	$H_1: \mu_{\text{difference}} \neq 0$
T-Value	P-Value
7.47	0.000

At 30 degree of freedom, 5% significant limit of 't' is 2.04. The observed value of 't' is 7.47 which shows $p < 0.05$ i.e. significant.

In this domain 78.13% patients were improved while 21.88% patients showed no improvement. The identification of polychrest remedies in our materia medica is just another of Hahnemann's contribution to clinical homoeopathic practice. All those practitioners of homeopathy viz. Hering, Stapf, Gross, Hale etc., who strictly adhered to Hahnemann's guidelines while conducting drug provings,

added to the treasury of polychrest remedies, which can be useful in multiple diseased conditions, both acute and chronic.

In Present study It was seen in all the 32 patients, who received *Lachesis muta*, that drug selection was not dependent on common pathological (pathognomonic) symptomatology, rather on non-diagnostic symptomatology. And, wherever, local symptomatology was considered, modalities guided the remedy selection. Common symptoms are therefore usually not of much use in homeopathic drug prescribing and homeopathic case taking should delineate all the characteristic features/ concomitant symptoms or modalities that shall guide the remedy selection. No specifics in homoeopathy Since the remedy selection is solely dependent on the non-pathognomonic symptoms of the case, it rules out the possibility of having absolute specific remedies for any diseased condition in homeopathy. Symptoms of mind and disposition are mostly observable signs Six symptoms of mind and disposition of *Lachesis muta*: intolerance of constriction around neck, insane jealousy, religious disposition, loquacity, sibling rivalry and suspicion, which were clinically verified, were mostly interpreted from close observation of patient's behavior or demeanor It was strongly verified in various acute conditions, that the response to indicated homoeopathic remedy can be judged within a few hours. Clinical verification of symptoms Twenty-two signs and symptoms of *Lachesis muta*, mentioned in the homoeopathic literature could be clinically verified. Out of these, nearly 17 were objective. Paired t test was applied on all the four domains of WHO- BREF Questionnaire namely Physical Domain, Psychological Domain, Social Domain & Environment

Domain. In all the four domain at 30 degree of freedom, 5% significant limit of 't' is 2.04

The observed value of 't' was greater than 2.04 which shows $p < 0.05$ i.e. significant. Physical Domain showed the highest improvement of 90.62% while Social Domain showed the least i.e. 31.25%. The improvement in Psychological and Environment Domain was same i.e. 78.13%.

During this study it was also observed that

- Age group of 46-60 years had the highest frequency of 12 patients followed by age group of 31-45 years with frequency of 9 patients. 0-15 years age group had the lowest frequency of 3 patients.
- Out of 32 cases 43.75% patients were males and 46.87% patients were females and 9.37% were children.
- 13 out of 32 were Housewife, 7 were Students and remaining of them was Working Class.
- 19 clinical conditions were covered by *Lachesis mutus*.
- 200 was the most used potency followed by 30 and 1M.

Conclusion

Polychrest remedies can successfully cure various clinical conditions by a detailed case taking and application of homoeopathic principles of "similia similibus curentur." The concept of polychrest is individual to homoeopathy alone, this study is an attempt to identify the clinical conditions which are amenable to this polychrest remedy *Lachesis mutus*.

The study revealed that the result was statistically significant in case of both Acute & chronic diseased condition as per WHO- BREF Questionnaire; hence, the alternative hypothesis was accepted i.e. *Lachesis mutus* is significantly effective for both acute and chronic diseased conditions. In case of WHO BREF Questionnaire it was found that the quality of life improved. It was also observed that age group of 46-60 years suffered the most. Females percentage was more than males. Housewives were mostly affected. Study also shows that *Lachesis* has significant effect on climacteric age group.

Conflict of Interest

Not available

Financial Support

Not available

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