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Effectiveness of homoeopathic medicine *Cinchona officinalis* in chronic leucorrhoea: A case report

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Abstract

Introduction: Leucorrhoea is a very common condition of profuse vaginal discharge prevalent worldwide, causing distress in a female's quality of life. It is classified as clear or whitish mucoid discharge from vagina in ICD-10 classification of diseases under section ICD-10-CM-Codes N89.8. There are many causal factors of this discharge due to any irritation of vaginal epithelial wall or pathology of female genito-urinary organs. Leucorrhoea can be physiological, pathological, and inflammatory in origin. Even-though physiological leucorrhoea is only an increased bland mucus discharge, but when it becomes pathological or inflammatory it can cause discomforting symptoms like vaginal itching, burning, severe backache, lower abdominal pain etc. The conservative management of leucorrhoea involves personal hygiene, antibiotics like povidone, metronidazole, energy boosting syrups and vaginal douches respectively depending upon the cause of the discharge. Long and persistent use of these medicines may lead to adverse effects. Individualised Homoeopathic treatment can provide an effective cure for leucorrhoea.

Case summary: This case report presents a 22 years old female, who complained of chronic leucorrhoea since last 1 year, which was very discomforting and lead to severe weakness and back pain. The Individualized treatment of the female patient with Homoeopathic medicine *Cinchona officinalis* treated and restored her health. The leucorrhoea was assessed through Leucorrhoea Assessment Scale (LAS scale), it was reduced from 20 to 10 within a span of 6 months of treatment. The causal attribution for Homoeopathic treatment was done with Modified Noranjo Criteria (MONARCH) score. Thus, this case emphasizes that Homoeopathy can play an important role in treatment of leucorrhoea.

Keywords: Leucorrhoea, reproductive tract infection, *Cinchona officinalis*, homoeopathy

Introduction

Leucorrhoea, a term describing abnormal vaginal discharge devoid of blood, neoplastic growths, or severe organic ailments, is a concern prevalent in both obstetric and medical domains. ^[1] The ICD-10-CM Codes classifies leucorrhoea under N89.8. ^[2] The normal vaginal discharge serves a crucial role in upholding vaginal health by preventing growth of bacteria and other microscopic organisms, thus safeguarding against infections. A typical normal vaginal discharge is clear or pale milky in colour and lacks any noticeable odour. Whenever this condition persists for long periods, it's often attributed to an imbalance in oestrogen levels, vaginal infections affecting the vaginal epithelium, sexually transmitted diseases (STDs), malignancies of the cervix, uterus, or vagina, cervical erosion, and age-related changes during menopause which may contribute to an escalation in discharge. The ebb and flow nature of this condition means it may intermittently subside or reappear over time, posing both diagnostic and management challenges in clinical settings. Understanding the diverse causes and manifestations of leucorrhoea is paramount for healthcare practitioners to provide effective care and address the multifaceted aspects of this common complaint. ^[1] Leucorrhoea exhibits a global prevalence affecting women of all ages. Its incidence varies with age, peaking in reproductive years. Factors such as hormonal changes, sexual activity, and socioeconomic status contribute to its occurrence. Regional and cultural disparities impact its prevalence, highlighting geographic nuances ^[3].

Leucorrhoea, manifests in various types, each associated with distinct underlying causes and characteristics ^[5,6]

Physiological Leucorrhoea: It results from non-pathological hormonal fluctuations during

the menstruation, pregnancy, or puberty, and is transparent or milky, without any offensive odour.

Oestrogen-Related Leucorrhoea: A pale, watery discharge from imbalances in oestrogen levels, common during perimenopausal and menopausal age.

Senile Leucorrhoea: Occurring in postmenopausal women, senile leucorrhoea is attributed to the physiological changes in the vaginal epithelium during postmenopausal period.

Infectious Leucorrhoea: Caused by bacterial, fungal, or protozoal infections of the genital tract, often presenting with altered colour, consistency, and odour. Common pathogens include *Candida*, *Trichomonas vaginalis* etc.

Specific Infection-Induced Leucorrhoea: Certain infections, such as sexually transmitted infections (STIs) like chlamydia or gonorrhoea, can cause thick, offensive leucorrhoea. The discharge may be accompanied by other genito-urinary symptoms indicative of the underlying infection.

Cervical Erosion-Related Leucorrhoea: Erosion or inflammation of the cervical canal can result in inflammatory leucorrhoea.

Homoeopathy is a great alternative mode of treatment for leucorrhoea. In Homoeopathic literature Organon of Medicine footnote of aphorism 94, Dr Hahnemann mentions about how to take case of chronic leucorrhoea as "...especially by what bodily or mental ailments, what sensations and pains, it is preceded, accompanied or followed; if there is leucorrhoea, what is its nature, what sensations attend its flow, in what quantity it is, and what are the conditions and occasions under which it occurs?"^[7] Thus, Homoeopathy focusses on holistic totality of symptoms taking into consideration both physical and psychological causes of leucorrhoea. When considering *Cinchona officinalis* as a therapeutic for chronic leucorrhoea Dr J.H. Clarke's Dictionary of Practical Materia Medica states it is more beneficial in females who are anaemic and have debilitating bloody leucorrhoea.^[8] A recent study by Gaikwad *et al.* in 2022 also mentions its use as a homoeopathic therapeutic in leucorrhoea especially in weakened anaemic females with bloody leucorrhoea^[9]. Rehman *et al.* showed in their study the antioxidant and antibacterial properties of some Homoeopathic mother tinctures where *Cinchona officinalis* tincture exhibited

highest antioxidant and antibacterial properties which further increases its scope in treatment of pathological leucorrhoea. Thus, the following case is an attempt to showcase the effectiveness of Homoeopathic medicine *Cinchona officinalis* in treatment of chronic leucorrhoea^[10].

Case Presentation

A 22-year-old female come to the Out Patient Department of State Lal Bahadur Shastri Homoeopathic Medical College & Hospital, Shantipuram, Prayagraj. She complained of chronic leucorrhoea for the last one year. Character of leucorrhoea was thin, bloody in colour and it stained the linen. There was heaviness in pelvis with weakness and backache accompanied with indigestion, loss of appetite and loud belching.

Mental general

Indisposed to talk (Taciturn). She feels people are troubling her without any reason they are not letting her do what she wants but they pull her back (Delusion, tormented he is). She plans a lot for future but not execute it (Theorizing).

Physical general

The patient was much sensitive to cold exposure (Thermal – Chilly). She had normal thirst and drank 2.5-3 litres of water in a day. She has frequent headache with vertigo due to weakness. Her appetite was low and had troubles in digestion with loud eructation. The eructation did not relieve. There was severe backache and dull pain in pelvis. She was anaemic and leucorrhoea in-turn caused weakness and debility. Her sleep was disturbed with horrible dreams of dead body or funerals.

Female Reproductive symptoms

Menses–Last menstrual period-17/05/2023. Flow was profuse, dark clotted. Duration was for 3-4 days with dull pelvic pain and heaviness. She was anaemic thus, she felt drowsy and vertigo during menses. Leucorrhoea before and after menses which caused severe backache and weakness. Leucorrhoea was profuse, thin watery and often bloody in colour. There was foetid odour in leucorrhoea. The patient suffered from leucorrhoea for the last one year and since then she was gradually getting weaker.

Clinical Findings

On examination patient had conjunctival pallor, with brittle nails. She had seborrhoea (dandruff). She was lean and thin. She was anaemic her haemoglobin level was 9.6gm/dL.

Table 1: Repertorisation

Totality of symptoms	Repertorial totality ^[11]	Intensity
Feels people are troubling	Mind- Delusion Tormented He Is	+++
Plans a lot	Mind- Theorizing	+++
Indisposed to talk	Mind- Taciturn	++
Vertigo with headache	Vertigo - Accompanied By Head – Pain In Head	++
Loss of appetite	Stomach- Appetite Wanting	++
leucorrhoea was thin bloody	Female Genitalia/ Sex- Leucorrhoea - Bloody	++
Leucorrhoea had a foetid smell.	Female Genitalia/ Sex- Leucorrhoea -Offensive - Putrid	++
Weakness during leucorrhoea	Female Genitalia/ Sex- Leucorrhoea- Weakness With	+++
Menstrual flow has dark clots	Female Genitalia/ Sex- Menses - Clotted	+
Menses is profuse	Female Genitalia/ Sex- Menses - Copious	++
Anaemic	Generals- Anemia	++
Sensitive to cold	Generals- Lack Of Vital Heat	++

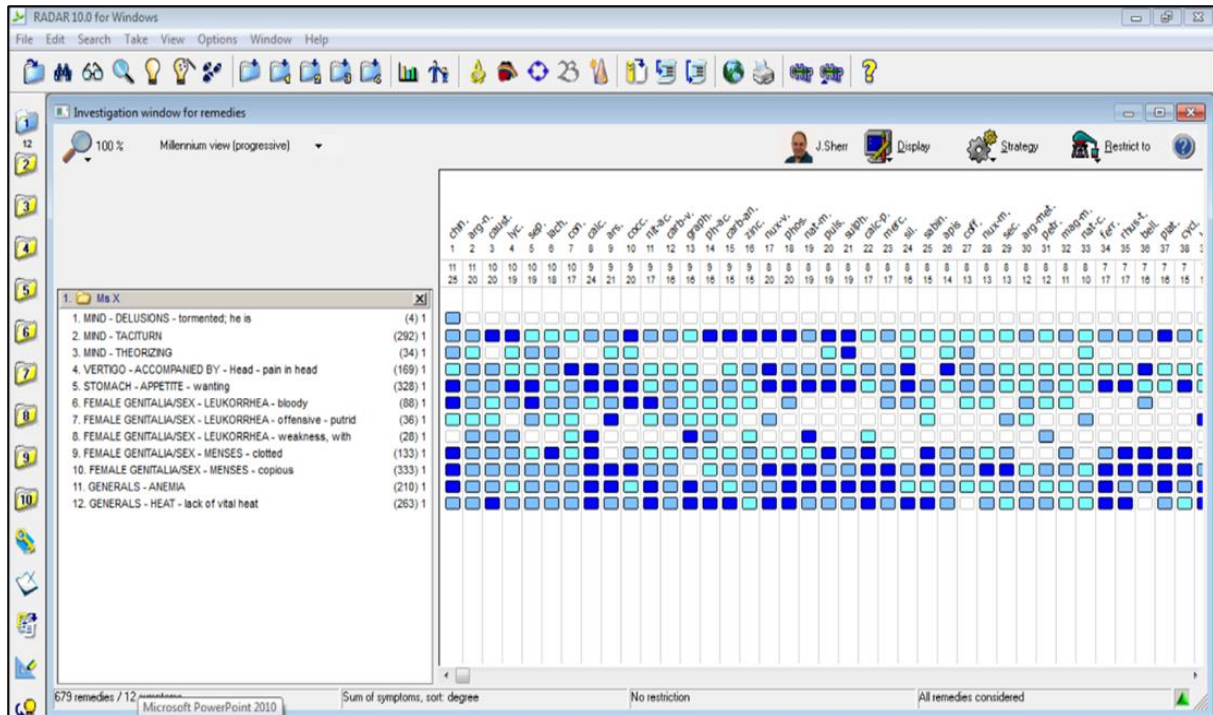


Fig 1: Repertorial result obtained on RADAR software (version 10.0) [11].

Therapeutic Intervention and Follow – up

Based on the repertorial result and a final consultation with Homoeopathic Materia Medica [12] *Cinchona officinalis* 200 potency – one dose was prescribed to the patient to be taken empty stomach in morning. SL 30 (placebo)/ T.I.D. 4

globules were continued for one month. Patient was followed up monthly.

Leucorrhoea Assessment Scale (LAS Scale)

LEUCORRHOEA ASSESSMENT QUESTIONNAIRE

2. Duration of Leucorrhoea (in months)

<6	6-12	13-24	25-60	>60
		<input checked="" type="checkbox"/>		

2 Do you have Leucorrhoea before and after menstruation?

No	Before menses	After menses
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

9 Consistency of leucorrhoea.

Thick	Thin	Watery
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

10 Flow

Scanty	Moderate	Profuse
		<input checked="" type="checkbox"/>

11 Colour of leucorrhoea

White	Yellow	Other: bloody
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12 Nature of discharge

Muco-purulent (Mucoid)	Frothy	Curly white
<input checked="" type="checkbox"/>		

13 Do you have leucorrhoea throughout the day? YES/NO

14 Do you use sanitary napkins for leucorrhoea? YES/NO

Before treatment

S. No.	Symptom	No (1)	Mild (2)	Moderate (3)	Severe (4)
1.	Do you feel itching in vaginal discharge?	<input checked="" type="checkbox"/>			
2.	Do you feel burning sensation in vaginal discharge?	<input checked="" type="checkbox"/>			
3.	Do you feel fowl smelling in vaginal discharge?			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
4.	Do you feel lower back pain?				<input checked="" type="checkbox"/>
5.	Do you feel abdominal pain?		<input checked="" type="checkbox"/>		
6.	Do you have constipation?				<input checked="" type="checkbox"/>
7.	Do you feel fatigue or weakness?				<input checked="" type="checkbox"/>
8.	Do you feel burning during urination?	<input checked="" type="checkbox"/>			

After treatment

S. No.	Symptom	No (1)	Mild (2)	Moderate (3)	Severe (4)
1.	Do you feel itching in vaginal discharge?	<input checked="" type="checkbox"/>			
2.	Do you feel burning sensation in vaginal discharge?	<input checked="" type="checkbox"/>			
3.	Do you feel fowl smelling in vaginal discharge?	<input checked="" type="checkbox"/>			
4.	Do you feel lower back pain?	<input checked="" type="checkbox"/>			
5.	Do you feel abdominal pain?		<input checked="" type="checkbox"/>		
6.	Do you have constipation?		<input checked="" type="checkbox"/>		
7.	Do you feel fatigue or weakness?				
8.	Do you feel burning during urination?	<input checked="" type="checkbox"/>			

Fig 2: Leucorrhoea Assessment Scale results before and after the treatment

The Leucorrhoea Assessment Scale score showed marked reduction in before and after scores. The LAS score before treatment was 20 and after 6 months of treatment with

Homoeopathic medicine *Cinchona officinalis* the score reduced to 10.

Table 2: Follow up

S. No.	Date	Brief Notes	Prescription
1.	24/06/2023	Leucorrhoea was reduced. Pain in pelvic region and backache was reduced. Patient felt better	<i>Cinchona officinalis</i> 200 /3 doses, SL 30 (placebo) / TDS/ 4 globules in each dose. For one month.
2.	22/07/2023	Better in all complaints	SL 30 / TDS / for one month.
3.	26/08/2023	Patient was much better physically and mentally.	SL 30 / TDS / for one month.
4.	02/09/2023	She stated she felt as if now there were no further improvement. Case came to a static position.	<i>Cinchona officinalis</i> 200 /3 doses, SL 30 / TDS / for one month.
5.	28/10/2023	She was much better. Improvement in pelvic region pain and lower backache was markedly improved and now leucorrhoea was for one or two days only before menses.	SL 30 / TDS / for one month.
6.	04/11/2023	All complaints were relieved and patient felt better in general.	SL 30 / TDS / for one month.

Discussions

Beyond physical implications, leucorrhoea's impact on mental health and daily life underscores its multifaceted nature. Comprehensive epidemiological research is vital for targeted interventions, addressing the complex interplay of factors influencing this prevalent reproductive health

concern. Homoeopathic medicine *Cinchona officinalis* can play a vital role not only as an efficient therapeutic for leucorrhoea but also as a nutritional tonic providing a comprehensive treatment fulfilling both vitality and health of a female along-with curing leucorrhoea.

Table 4: Assessment by modified Naranjo criteria score ^[13]

Domains		Yes	No	Not sure
1.	Was there an improvement in the main symptom or condition for which the homeopathic medicine was prescribed?	+1		
2.	Did the clinical improvement occur within a plausible timeframe relative to the drug intake?	+1		
3.	Was there an initial aggravation of symptoms?		0	
4.	Did the effect encompass more than the main symptom or condition (i.e., were other symptoms ultimately improved or changed)?	+1		
5.	Did overall well-being improve? (suggest using validated scale)	+1		0
6A.	<i>Direction of cure:</i> did some symptoms improve in the opposite order of the development of symptoms of the disease?		+1	
6B.	<i>Direction of cure:</i> did at least two of the following aspects apply to the order of improvement of symptoms: –from organs of more importance to those of less importance? –from deeper to more superficial aspects of the individual? –from the top downwards?	+1		
7.	Did “old symptoms” (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?		0	
8.	Are there alternate causes (other than the medicine) that—with a high probability—could have caused the improvement? (Consider known course of disease, other forms of treatment, and other clinically relevant interventions)		+1	
9.	Was the health improvement confirmed by any objective evidence? (e.g., laboratory test, clinical observation, etc.)	+1		
10.	Did repeat dosing, if conducted, create similar clinical improvement?	+1		
		Total Score = 9		

Conclusion

Individualised Homoeopathic medicine *Cinchona officinalis* was effective in treating the case of chronic leucorrhoea. MONARCH criteria score of causal attribution for Homoeopathic treatment effect was 9. Thus, Homoeopathy can play a major role in treatment of leucorrhoea and further studies with *Cinchona officinalis* should be conducted to elaborate its utility in treatment of leucorrhoea.

Consent

The author declares that the patient has given written consent for her clinical information to be reported in the journal on anonymous grounds.

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Nil.

Conflict of interest

None declared.

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