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Unveiling the impact of homoeopathic treatment on iron deficiency anemia & it's cognitive function: A closer look at adolescent girls through moca scale

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Abstract

This article presents a case study investigating the use of Homoeopathic medicines in improving the cognitive levels among Iron deficient anaemic adolescent girls using MOCA scale before and after treatment. Low haemoglobin levels in adolescent girls plays important roles in determining cognitive function and have important consequences in relation to learning ability and academic achievement. Conventional treatments will provide with iron supplements which have lot of side effects. Limited researches have been done on present topic in Homoeopathy which requires further researches. There are various literatures available in Homoeopathic Materia Medica and repertory but there is no enough evidence to reliably assess the possible role of Homoeopathy in IDA as well as randomized trials, stressing the need for further research and documentation in this area. The present study underlines the potential role of Homoeopathic management of IDA on the cognitive development of adolescent anaemic girls.

Keywords: Homoeopathy, iron deficiency anemia, adolescent girls, cognitive levels, MOCA Scale

Introduction

The potential and dynamic role of Homoeopathic treatment in the management of Iron deficient anemia is crucial for the expansion of integrative medicine. Despite increased national and international awareness and recent governmental intervention programme's, the prevalence of anemia among Indian women has remained higher than 45% since 1990, and anemia trends to remain strongly correlated with iron deficiency. This gap in treatment effectiveness has prompted researchers to explore the alternative therapies like Homoeopathy. This paper aims to evaluate the efficacy of Homoeopathic treatment in the management of cognitive levels of IDA among adolescent girls through a comprehensive review of the literature, including case studies on the use and effectiveness of Homoeopathic remedies.

Literature Review: Anaemia is widely prevalent in India, a developing country where in a family with limited resources, the female child is likely to be neglected. This is precipitated by the burden of menstrual blood loss (normal/abnormal). Poor nutritional status during adolescent period is an important determinant of health outcomes at a later stage of life. Iron deficiency anemia is the most common micronutrient deficiency in the world with highest prevalence in developing countries. Prevalence of anemia is concentrated in sub Saharan Africa, South Asia and part of Latin America. South East Asia has largest number of anemia cases. Among South Asia - INDIA has the highest prevalence of anemia. A recent UNICEF's "State of the World's Children 2011" report says that more than half (56%) of adolescent girls in India are suffering from anaemia. At the national level, the findings of the NFHS-5 reveal that there has been an increase in the prevalence of anaemia among women and children compared to the previous NFHS-4 survey that was conducted in 2015-16, about 4 years ago. The increase in anaemia among pregnant women is by 1.8 percentage points, among all women in the reproductive age is 3.9 percentage points, and among adolescent women by 5 percentage points. 20% of adolescents (10-19 years) in world are from India. Among those 48% of Indian adolescents are GIRLs. Although adolescence is a time of enormous physiological, cognitive and psychological, WHO acknowledges that adolescents remain "a neglected, difficult – to – measure and hard – to – reach population".

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The evidence underscores the significance of iron in cognitive function, particularly among adolescent girls. Iron deficiency anaemia may be linked to poorer academic performance, while iron supplementation has shown to improve specific cognitive aspects like verbal learning and memory. For instance, in a double-blind, placebo-controlled trial by Bruner *et al.* (1996) [1], adolescent girls with mild iron deficiency demonstrated enhanced verbal learning and memory after eight weeks of oral ferrous sulfate supplementation.

The "12 by 12 initiative" launched by the Indian Government in 2007 aimed to ensure that all Indian adolescents achieved a haemoglobin level of 12g/dl by 2012. It identified the primary causes of anaemia in India as including inadequate dietary intake, limited availability of iron, chronic blood loss from hookworm infestations, and malaria. These nutritional imbalances result from various dietary and health-related factors. The fundamental cause, known as the miasm, contributes to these nutritional disruptions. Homeopathy facilitates the enhancement of individual susceptibility, thereby bolstering resistance and assimilation capabilities. Consequently, addressing anaemia can be effectively approached through these means.

Previous researches on **IDA** are Therapeutic recommendations like Ferrum phosphoricum 3x and 6x etc...According to Kent in his Materia Medica: The old school has been giving iron for anaemia in great quantities. Whenever patient became anaemic, pallid, waxy and weak, Iron was the tonic. As per Dewy WA: Iron is the great allopathic remedy for anaemia from almost any cause. It is also a great Homoeopathic remedy, but it will not cure every case of anaemia, careful individualisation is necessary. When the patient has plethora, paleness of face and puffiness of the extremities, the ferrum will benefit, whereas in case of anaemia resulting from loss of fluids Cinchona or Nat mur may be indicated.

As the Repertory broadens the MM knowledge by giving common medicine for uncommon symptoms and uncommon rare medicine for common symptoms, Reportorial approach in the management of IDA will be more effective in arriving at the similimum in these cases. In this view Homoeopathic Medical Repertory by Dr. Robbin Murphy will be more useful as its philosophy is based both on clinical as well as classical approach as the case demands and it facilitates access to rubrics at all levels.

Brief summary of IDA and its cognitive development using MOCA Scale managed through Homoeopathy:

This section introduces a case of IDA treated through homoeopathy and describes the patient's condition. A female patient named XX, aged about 15 years presenting to OPD with dull aching frontal headache < on waking up in the morning and vertigo on & off since last 2 -3 months. She feels weakness whole body with great desire to lie down all the time. Extreme fatigue and weakness. Sweating of hands and feet on exposure to hot weather and on slight exertion. She has difficulty in concentration in class room and though she wants to do her work on time but unable to do due to fatigue and sleepiness all the time. Her menstrual history is regular, profuse with clots, with low back pain extending to pubis. During her childhood she has frequent attacks of cold and throat pain. Appetite less, eats very less food at a time as there is no hunger. Extreme desire for sweets and aversion to fruits. Hot patient. General examination she is

lean and thin with poorly nourished & pallor present. Pulse 80/min, R.R – 18/min; B.P – 120/80 mmof Hg, Hb – 7.6 gm% & Serum ferritin – 6.2 ng/ml, MOCA Scale – 20. Case was repertorised and Sulph 200, weekly 3 doses for 4 weeks was prescribed on 10/12/2022 and case was analyzed at an interval of 4 weeks again Hb% was 8.4% and headache decreased with fatigue still remains so sulph 200 weekly 1 doses for 4 weeks was prescribed and later case was followed for a period of 12 weeks where the patient fatigue decreased and she can able to concentrate her academics, Hb levels increased to 10.2 gm/dl and MOCA Scale has recorded at 27 which showed marked improvement.

Conclusion

In conclusion, delving into the impact of homeopathic treatment on iron deficiency anaemia and its cognitive ramifications among adolescent girls through the MOCA scale provides valuable insights into alternative therapeutic approaches. While traditional medicine often relies on iron supplementation for anaemia management, Homeopathy offers a nuanced perspective, emphasizing careful individualization in treatment selection. Through this lens, homeopathic remedies like Ferrum phosphoricum alongside personalized interventions hold promise in addressing not only the physical manifestations of anaemia but also its cognitive implications. Further exploration into the efficacy and mechanisms of homeopathic treatment in bolstering cognitive function amid iron deficiency anaemia is warranted, offering a holistic approach to adolescent health and well-being.

Conflict of interest: Not available.

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