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A clinical study to assess the utility of fever chapter of boger boenninghausen's characteristics and repertory in the management of fever cases

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Abstract
A fever is a typical symptom that can result from several underlying conditions such as inflammatory diseases or infections. Homeopathy provides an alternative to conventional medicine, which frequently uses antipyretics to treat fever. This case series aims to assess the utility of fever chapter of BBCR repertory in management of fever cases by using fever totality. The study utilized data of OPD & IPD from Vinayaka Mission's Homoeoepathic Medical College and Hospital, Salem. Temperature before and after treatment is recorded and Paired sample test is done. From this study the values got from paired t test show that significant importance of homoeopathic medicines in treating febrile cases.

Keywords: Fever, BBCR repertory, fever totality, management, prophylactics in homoeopathy

Introduction
When your body temperature is greater than normal, it is said to be fever. Most medical practitioners define it as either 100.0 F (37.8 °C) or 100.4 F (38 °C). Fever is merely an outside indicator of an inside infection or body inflammation it is not a sickness in and of itself. Common causes of fever include skin conditions, medication reactions, immunizations, cancer, autoimmune illnesses, gastrointestinal (GI) infections, urinary tract infections, viral infections such as COVID-19 or influenza, and bacterial infections. In newborns and early childhood, body temperature is frequently slightly higher than in older children and adults. In newborns and younger children, the fever temperature is therefore marginally higher.

Classification or Pattern of fever
1. Continuous fever
2. Remittent fever
3. Intermittent fever (quotidian, tertian, quartan)
4. Relapsing fever or Pel Ebstein type
5. Hectic or septic fever
6. Low grade fever

1. Continuous Fever
→ The temperature remains above normal throughout the day, does not fluctuate more than 1 °C in 24 hours.
e.g.: Lobar pneumonia, infective endocarditis, UTI, brucellosis, typhoid etc.

2. Remittent Fever
→ The temperature remains above normal throughout the day and fluctuates more than 1 °C in 24 hours. Most common type of fever in practice.
e.g.: upper respiratory tract infections, typhoid, infective endocarditis.

3. Intermittent Fever
→ Temperature elevation for a certain period in a day and remits to normal for the remaining time.
e.g.: Seen in malaria, pyemia, septicemia, kala azar etc.

Quotidian Fever: Everyday spike or 24 hours periodicity.
- Tertian Fever: Every alternate day or 48 hours periodicity.
- Quartan Fever: Every third day or 72 hours periodicity.

4. Relapsing fever or Pel Ebstein type
→ Temperature takes 3 days to rise, remains high for 3 days and remits in 3 days and followed by apyrexia for 9 days.
e.g. Hodgkin lymphoma.

5. Hectic or Septic Fever
→ The temperature variation between peaks and very large which exceeds 5 °C
e.g. septicemia.

6. **Low grade fever**
→ Temperature is present daily especially in the evening for several days but does not exceed 37.8 °C at any time.
e.g. commonly present with tuberculosis.

Signs and symptoms
- Flushed face
- Anorexia
- Headache
- Body ache
- Nausea and sometimes vomiting
- Constipation and sometimes diarrhea
- Chills and Shivering
- Increased heart and respiratory rate
- General weakness
- Night sweat

Red flags in fever
- Altered mental status.
- Headache, stiffness, or both.
- Petechial rash.
- Significant tachycardia or tachypnea.
- Hypotension.

Literature related to management of fever with homoeopathy
Homoeopathic medicines, despite controversies and slower action, have been found useful in acute conditions like febrile illness. There is no specific medicine in homoeopathy to bring down the temperature, indicated homoeopathic remedy will cure the acute disease without complications. Proper dose, potency and repetition of the remedy must be similar to the nature of the sickness of the patient. Remember that every acute episode is due to flare up of latent dyscrasia to eradicate it many follow up is essential to ensure proper recovery and achieve an ideal cure. As per organon of medicine aphorism 245-251, 5th Edition in case of acute disease the medicine can be repeated in every 4,8,12,16,24 hours' or even more frequently as per requirement of case.
Prafull Vijayakar in "Theory of Acutes" simplifies acute prescribing by teaching the necessity of observing the activity level, thermals, thirst and mental state, type of acute illness of the patient. If it comes to fevers, when there is aggravation on the first day and amelioration on the next day indicates proper medication; when there is improvement on the first day but worsening on the second day indicates incorrect medication. Improvement of generals should also be accompanied. The appropriate similimum is determined by patient activity level, thermals, thirst, mental state, acute illness type, single dose, remedy, minimum dose, and results.
As said by Stuart, close Fever and inflammation are indicators of a healthy response to irritants or poisons; they are not adversaries to be faced down with or allies to work with. Increased vital activity, quick circulation, breathing, oxygenation, waste removal, and the production of natural antitoxins and antibodies are all benefits of inflammation and fever that speed up healing. Seeing pain, inflammation, and fever as the actual illness or its cure only results in the symptom's suppression or palliation.
As per chronic disease by Hahnemann, Epidemic intermediate diseases typically manifest as fevers, varying in type and frequency. These fevers require varying different medicine annually, requiring a unique cure for each year. one year they require arsenicum, another belladonna, another antimonium crudum, or spigeila, aconite, with ipecacuanha, alternating with nux vomica, natrum mur,opium, calcarea carb, pulsatilla etc with these they were cured in a few days. Except Cinchona suppresses type in concentrated doses, transforming it into quinine-resistant cachexy. China is suitable for endemic intermittent fever in marshy regions. An attenuated dose of sulphur or hepar sulphuris is important at the beginning of every treatment of epidemic intermittent fever since psora is fundamentally involved in every epidemy with intermittent fever patients. This makes the patient's recovery more certain and easier.
Repertories like Kent repertory, therapeutic pocket book by boenninghausen, Boger Boenninghausen, characteristics & repertory by Boger, therapeutics of fever by H.C Allen, repertory of the symptoms of intermittent fever by William A. Allen, Knerr's repertory etc. including are useful in treating fever cases, among them from the practical point of view BBCR is one of the best repertories in approaching of fever cases.

Name of the book: Boger boenninghausen characteristics & repertory.

Author name: Dr. Cyrus Maxwell Boger.

About Fever chapter
From a practical standpoint, this chapter is quite helpful. It also includes numerous Sub rubrics. Concomitants related to chill, heat, sweat under different headings useful in bedside practice. Time, Aggravation, Amelioration, and Concomitants follow each stage of fever. Hence, they help to repertorize any simple as well as complicated cases.

About Fever totality
This is the unique contribution of Boger. The Fever chapter is organized in a way that is easily understood. After every stage of fever, it is followed by time, aggravation, amelioration, and concomitant. Following analysis and evaluation of the symptoms, in accordance with Boger concept of totality of the patient with primary symptoms of fever should be as follows:

Totality includes the following
Chill
- Type /partial chill/coldness -partial /shivering

- Time
- Aggravation
- Amelioration
- Concomitant

Heat
- Type /partial
- Time
- Aggravation
- Amelioration
- Concomitant

Sweat
- Type/partial
- Time
- Aggravation
- Amelioration
- Concomitant

The pathological fever types listed in the repertory can be utilized as a guide when choosing the right medication, but the reportorial outcome that is achieved by following the above procedure should be given greater weight. Use Blood & circulation section symptoms are noticeable at any stage of the fever. It is, therefore, the special chapter in the Boger repertory. There is no substitute repertory for it.

Homoeopathic medicines
1. **Aconitum napellus:** Fever: Skin dry and hot; face red, or pale and red alternately; burning thirst for large quantities of cold water; intense nervous restlessness, tossing about in agony; become intolerable towards evening and ongoing to sleep.
2. **Anthracinum:** Septic fever: Rapid loss of strength, sinking pulse, delirium and fainting (Pyrog.).
3. **Eupatorium perfoliatum-Fever:** Chill to 9 AM one day, noon the next day; bitter vomiting at close of chill; drinking hastens chill and causes vomiting; bone pains, before and during chill. Frequent attacks of bilious or intermittent fevers. Bruised feeling, as if broken all over body (Arn., Bellis, Pyrog.). The more general and severe, the better adopted.
4. **Ignatia-Fever:** Red face during chill (Ferr.); chill, with thirst during chill only; by external heat; heat without thirst, < by covering.
5. **Lachesis:** Fever annually returning: paroxysm every spring (Carb.v., Sulph.), after suppression by quinine the previous autumn.
6. **Nux vomica-Fever:** Great heat, whole body burning hot (Acon.), face red and hot (Bell.), yet patient cannot move or uncover without being chilly. Must be covered in every stage of fever-chill, heat or sweat.
7. **Allium cepa:** Hay fever: In August every year; violent sneezing on rising from bed; from handling peaches. Natrum muriaticum-Hay fever squirming sensation in the nostril, as of a small worm; brought on by exposure to hot sun or intense summer heat.
8. **Psorinum:** Hay fever: Appearing regularly every year on the same day of the month, with an asthmatic, psoric or eczematous history.
9. **Acetic acid:** Hectic fever: Skin dry and hot red spot-on left cheek and drenching night sweats.
10. **Apis mellifica:** Intermittent fever: Chill 3 P.M., with thirst always (Ign.); < warm room and from external heat.
11. **Cinchona:** Intermittent fever: Paroxysm anticipates from two or three hours each attack (Chin. s.).
12. **Camphora:** Pernicious intermittent (Ver. a.), pulse weak, externally small, scarcely perceptible.
13. **Arsenicum album:** High temperature Septic fever. Intermittent. Paroxysms with marked prostration with rapid sinking of vital forces; faint. Mentally restless but physically too weak to move; cannot rest in any place; changing place continually. Symptoms generally worse After midnight (1-2 PM.,12-2PM)
14. **Rhus Toxicodendron:** Great restlessness. When acute diseases assume a typhoid form. For catarrhal fever, it commences with weakness of the whole body with desire to lie, soreness and bruised sensation in the limbs. < Cold, wet rainy weather and after rains, drenching
15. **Pulsatilla nigricans:** Chilliness, even in a warm room, without thirst. Chill about 4PM. During apyrexia, headache, diarrhea, loss of appetite, nausea. < From heat, towards evening > open air.

Prophylactic medicines in homoeopathy

The intermittent type of fever may be prevented according to the listing of "Dr. Boercike materia medica" Arsenicum Album (third to the 30th recommended) and Chininum sulphuricum (first to third potencies; 30thor higher recommended) have this prophylactic feature. Camphoricum Acidum is a prophylactic against catheter fever; cystitis 15 grains three times a day; also, for prevention of night sweats. Thuja records that Variolinum aborts the pustule and prevents the suppurating fever.

Dr. John H Clarke in his book "The Prescriber" written about prophylactic treatment of intermittent fever," persons going into malarious districts should take for a short time before Chininum sulphuricum (1X) GR.V. night and morning, continue the same at increasing intervals during the stay. If quinine is not tolerated, Arsenicum Album (3X) should be given the same way.

Eric Powell "The Group Remedy Prescriber" the remedies which were listed in this book should be given simultaneously. The author recognizes that this method of prescribing is different from the technique of prescribing one remedy. Anarcardium Orientale 6X, Cinnamomum Ceylanicum 6X, Baptisia tinctoria6X, Cadmium Sulphuricum6X, Sulphur 6X, Belladonna 6X, Rosmarinus Officinalis 6X, Elaps Coralinus 12X, Crotalus Horridus 6X useful in the first stages of all types of fevers.

Aim of the study: To assess the utility of fever chapter of Boger boenninghausen's characteristics & repertory in the management of fever cases by using fever totality.

Objectives of the study
1. To know the application of BBCR repertory in solving fever cases.
2. To study the approach and management of fever cases.
3. The main objective of this study was to find out the effectiveness of the homoeopathic medicines which were prescribed with the help of BBCR repertory.

Materials and Methods
- **Study Setting:** Patients from OPD and IPD of

"Vinayaka missions Homoeopathic Medical College and hospital" were included in the study.

- **Posology:** Based on the susceptibility of the patient and case. Most commonly 200 C is selected.
- **Methods of Collecting Data:** Inclusion and exclusion criteria were fixed.
- **Inclusion Criteria:** A sample size of 10 cases between 1-50 years age group of both sexes irrespective of their economic status are included in the study.
- **Exclusion Criteria:** Patients who are not willing to participate, cases of pregnant women, Patients taking other system of medicine along with homoeopathy are excluded from study.
- **Treatment Plan:** The remedy is prescribed based on the fever totality from BBCR repertory and final selection of similimum with further reference to Materia Medica.

Results

The p-value is 0.009, the result is significant because $p<0.01$.

Paired sample test

Table 1: Paired Sample Test Results

	Paired difference					T	DF	Significance
	95% CI							
	Mean	Std.	Std. Error mean	Lower	Upper			Two sided-P
Temperature before and after treatment	1.3200	2.0115	0.6361	-.1190	2.7590	2.075	9	.068

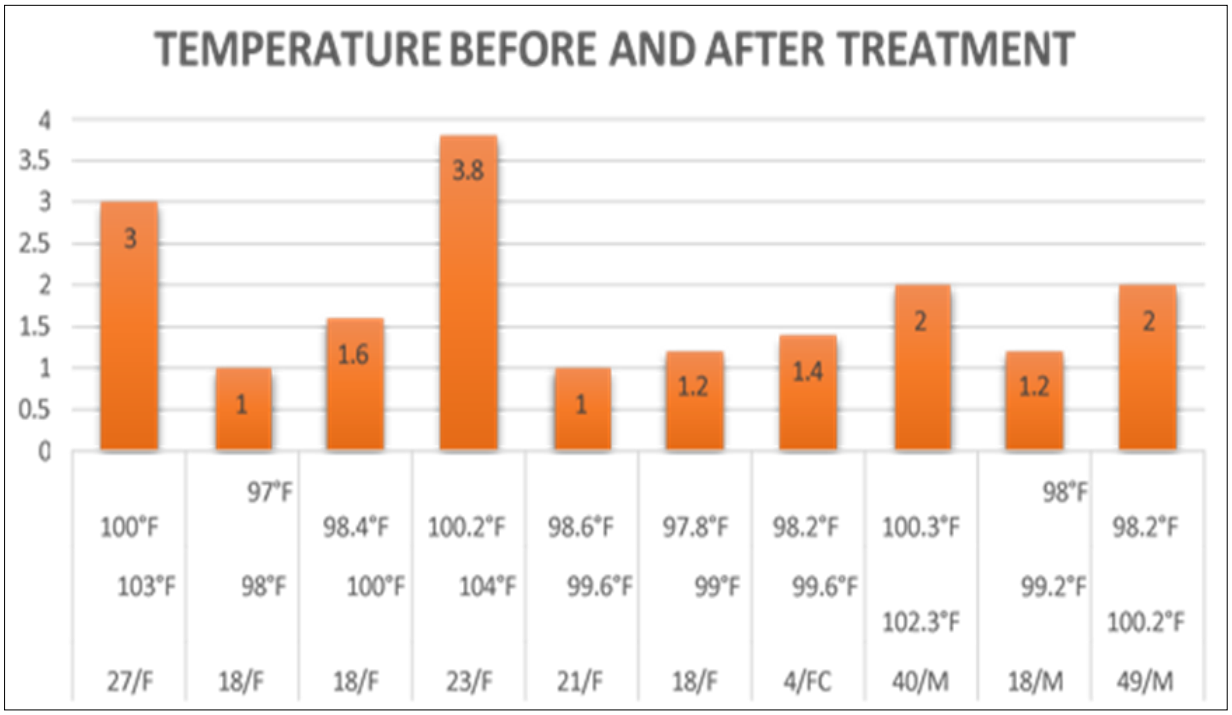

Fig 1: Temperature trends before and after treatment

Discussion

Though many cases showed similar type of presenting complaints, individualization was on done by using Boger concept of fever totality, samples cases from OPD and IPD arranged totality according to each stage of fever which is followed by time, aggravation, amelioration, concomitants and other relevant details also collected. The prescription was done after repertorization with further reference to Materia Medica.

In the study, the maximum incidence was found in the age group of 10-20 years. The prevalence of fever is common in females; The incidence was like 3 males and 7 females. Considering the occupation in the study, the highest prevalence of fever was among students. The prescription was done after repertorization with further reference to Materia Medica.

According to the analysis Arsenicum album given in 3% cases, Rhus Toxicodendron given in 3% cases, Bryonia alba given in 2% cases, Nux vomica in 1% and Pulsatilla in 1% of case. Out of 10 cases 200 C potency was prescribed for 8 cases, 30 C potency was prescribed for 1 case, 0/12 potency prescribed for 1 case. All the cases showed Improvement after treatment.

Conclusion

Individualized care is emphasized in homeopathy. Depending on their distinct symptom profiles, two feverish patients may receive different treatments. When a person has a high fever and a flushed face, for instance, Belladonna may help, but Aconite may be needed if the fever occurs after a stressful incident.

This study shows the importance of repertorization with fever totality in case of fever and theory of individualization is very important for the effective homeopathic treatment. p value is 0.009 which is highly effective, thus the overall study result prompted us to conclude that homeopathy treatment is effective in management of fever cases.

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Conflict of Interest
There are no conflicts of interest.

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