International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493
P-ISSN: 2616-4485
www.homoeopathicjournal.com
IJHS 2025; 9(1): 743-745
Received: 10-12-2024
Accepted: 15-01-2025

Dr. N Kathyayini Reddy
Assistant Professor, Department of Homoeopathic Repertory & Case Taking, Devs Homoeopathic Medical College, Keesara, Hyderabad, Telangana, India

Corresponding Author:
Dr. N Kathyayini Reddy
Assistant Professor, Department of Homoeopathic Repertory & Case Taking, Devs Homoeopathic Medical College, Keesara, Hyderabad, Telangana, India

Insomnia unraveled: A homoeopathic approach to understanding and managing sleeplessness with Phatak repertory insights

N Kathyayini Reddy

DOI: https://www.doi.org/10.33545/26164485.2025.v9.i1.K.1429

Abstract
Insomnia or Sleeplessness is a condition that affects the individuals irrespective of age groups. While occasional sleeplessness is common, chronic insomnia can have significant consequences on mental, emotional and physical wellbeing. Homoeopathy approaches sleeplessness by addressing the underlying causes and the constitution of the individual. The Phatak Repertory, a valuable tool in homoeopathic practice, provides a comprehensive compilation of remedies which are useful in homoeopathic management of sleeplessness, based on specific symptoms and patient characteristic symptoms. The Phatak repertory helps in identifying constitutional remedies which promote natural and satisfying sleep. This article explores the etiology, symptoms and potential management of sleeplessness long with some homoeopathic rubrics from Phatak Repertory.

Keywords: Insomnia, Phatak repertory

Introduction
Insomnia is defined as a sleep disorder characterized by persistent difficulty in falling asleep, staying asleep or waking up too early, despite having the opportunity to sleep, resulting in daytime impairement or distress. It may be categorized by:

- Early insomnia, i.e. difficulty in getting off to sleep (commonly due to anxiety, depression, mania and substance abuse).
- Middle insomnia, i.e. waking up from sleep at mid-night (mostly due to sleep apnoea, polyuria or nocturia, and benign hypertrophy of prostate).
- Late insomnia, i.e. early morning waking (commonly due to depression and malnutrition).

Types of Insomnia
Short-term Insomnia
This type of Insomnia is usually due to the stressful events of life, like loss of loved ones, a pandemic, loss of job, rebounding from cessation of a drug etc. It is also known as Acute Insomnia. This may lasts for less than 3 months and symptoms may fade in their own as time passes. However it may persists and turn into chronic insomnia. Short-term Insomnia can affect both children and adults. It is more common in women than in men, and it can arise during pregnancy as well as in menopause.

Chronic Insomnia
This type of insomnia is a long term difficulty in sleeping i.e if a person has difficulty in falling asleep for at least 3 nights in a week for 3 months or longer. The causes for chronic insomnia may be due to stressful life events or it may be due to irregular sleep schedules, poor sleep hygiene, mental health disorders or neurological issues etc. This type of insomnia occurs in people of all ages and has prevalence in women.

Etiology & Risk Factors: Poor sleep or life style habits that may cause insomnia or make it worse include:

- Severe alcoholics
- Changing the normal routine often including sleep schedule
- Sleep interruptions such as waking up often due to any cause

- Taking long naps during the day
- Using caffeine, nicotine or recreational drugs too often
- Watching TV or any electronic devices close to the bedtime
- Mental health issues such as Depression and anxiety
- Long term illness such as Diabetes and Heart disease.

Symptoms
- Consistent pattern of interrupted or broken sleep that does not refreshes
- Difficulty in falling asleep easily
- The person becomes awake earlier than desired
- One cannot feel energized after waking up
- The patient feels sleepy or tired during the day
- Lack of concentration or does not remember things well

Treatment
Treatment of Insomnia improves quality of life and can promote long-term health. The treatment plan should target all putative contributing factors: maintain good sleep hygiene, treat medical disorders, use behavioral therapies for anxiety and negative conditioning, and use pharmacotherapy or psychotherapy for psychiatric disorders. Behavioral therapies should be the first-line treatment like identifying and changing thoughts and behaviors that contribute sleep, followed by judicious use of sleep-promoting medications if needed.

Healthy Sleep Habits
One should follow or maintain a regime in order to correct the irregular sleep by making it easier to fall asleep and stay asleep such as:
1. Go to sleep and wake up around the same time each day, even on weekends.
2. Caffeine, nicotine and alcohol to be avoided close to the bedtime. Though alcohol makes you sleep easier, but it can cause you to have a sleep that tends to be lighter than normal
3. Regular physical activity during day time for atleast 5-6 hours before bed time
4. Avoid naps especially in the afternoon. This helps you to sleep for a long time in the night
5. Make your bedroom sleep friendly which means, avoid TV or electronic devices into bedroom or any sources which disrupts the sleep cycle etc.

Homoeopathic management
1. Difficulty in falling asleep due to anxiety or fright- Arsenicum album
2. Disturbed mind preventing sleep, often with a feeling of excitement or overheating- Belldona
3. Restlessness and overactive thoughts preventing sleep- Coffea cruda
4. Waking up frequently at night with restlessness- Sulphur
5. Restlessness, anxiety and inability to sleep due to overthinking and exhaustion- Kalium phosphoricum
6. Disturbing dreams, nightmares and fear of dark interfering with sleep- Stramonium
7. Difficulty in falling asleep, especially in children, due to irritability- Chamomilla
8. Sleeplessness with rambling thoughts or horrible dreams- Adonis vernalis
9. Sleeplessness, on account of strong pulsations in different places- Cactus grandiflorus
10. Anxious dreams of fire; sleeplessness- Hepar sulphur

Epidemiology
Studies consistently show that insomnia affects a large portion of the global population. 10-30% of adults approximately experience insomnia at some point in life. Women are more likely to be effected than men, the high prevalence among women may be attributed to hormonal functions, especially during pregnancy, menopause.
The Phatak repertory is a concise, clinical repertory which is easy to refer and guide to the vast Homoeopathic Materia Medica. No drug is mentioned in the repertory unless, the author has used it in his own practice or unless there is strong justification provided for it, by authors like Dr. Boger, Dr. Clarke, Dr. Kent etc. The remedies mentioned opposite to the rubrics in the Phatak repertory are very minimum, so it becomes easy for prescription.

Single Remedy Rubrics under Sleeplesseness in Phatak Repertory

Sleeplessness, aching body, from	Staphysagria
Sleeplessness, aching bones, from	Daphne indica
Sleeplessness, caused by, horrible dreams	Adonis vernalis
Sleeplessness, caused by, nervous excitement	Scutellaria
Sleeplessness, caused by, rambling thoughts	Adonis vernalis
Sleeplessness, conversation after	Ambra grisea
Sleeplessness, drugs and liquor habitues	Secale cornutum
Sleeplessness, eyes wont stay shut	Phosphorus
Sleeplessness, hearing, acute, from	Opium
Sleeplessness, homesickness from	Capsicum
Sleeplessness, lasting, several nights	Anacardium
Sleeplessness, neuritis, multiple, from	Conium maculatum
Sleeplessness, nicotinism, chronic, from	Platinum
Sleeplessness, old age	Baryta carbonicum
Sleeplessness, operation, surgical, after	Sticta pulmonaria
Sleeplessness, persistent	Thuja
Sleeplessness, prodrome, as a	China officinalis
Sleeplessness, retiring, after, but sleepy before	Ambra grisea
Sleeplessness, uterine complaints, from	Senecio
Sleeplessness, weaning of child, from	Belladona
Sleeplessness, yawning, with	Cimicifuga

Conclusion
In conclusion, sleeplessness is a widespread and multifactorial issue which impacts a large population. Homeopathic management plays a vital and effective role in managing sleeplessness. While utilizing Phatak repertory, physician should be knowledgeable and unprejudiced while selecting the rubrics and the remedy. If a case has prominent generals and particulars then one can use the Phatak Repertory which helps in skillful repertorization in order to choose a similimum.

Conflict of Interest
Not available

Financial Support
Not available

References
1. Harrison's Principles of Internal Medicine, 20th Edition, McGraw-Hill Education, 2018
2. American Academy of Sleep Medicine(AASM). International Classification of Sleep Disorders, 3rd

edition, Darien, IL: American Academy of Sleep Medicine, 2014
3. Davidson's Principles and Practice of Medicine, 23rd Edition, Elsevier,2018
4. Phatak SR. Concise Repertory of Homoeopathic Medicines,4th edition, B. Jain Publishers Pvt Ltd, 2005
5. Phatak SR. Practical Homoeopathic Materia Medica, B. J B. Jain Publishers Pvt Ltd, 2004
6. https://www.medparkhospital.com/ja-JP/disease-and-treatment/insomnia#symptoms
7. https://www.nhlbi.nih.gov/health/insomnia/causes
8. ZOMEO - Homoeopathic software by Homeopath, Mind technologies.

How to Cite This Article
Reddy NK. Insomnia unraveled: A homoeopathic approach to understanding and managing sleeplessness with Phatak repertory insights. International Journal of Homoeopathic Sciences. 2025;9(1):743-745.