Ending endocrine woes: An integrated homeopathic approach to PCOS & infertility

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Abstract
As time has advanced we have seen a lot of change in healthcare, particularly the shift from infectious to non-communicable diseases in India and the increase of maintaining causes. Thus it is imperative to explore treatment modalities to combat these obstacles to cure. In that endeavour, we present a varied approach to cases of Infertility due to PCOS, remembering Dr. Hahnemann’s warning against making ‘favourite remedies’ as that puts the smaller and less proved remedies at a disadvantage. In the case discussed, the similimum was prescribed in 3 doses & followed by Folliculinum in low potency in the 1st half of the cycle; to promote ovulation and effect fast cure. The patient was cured as confirmed by pregnancy within 6 months of treatment.

Keywords: PCOS, infertility, folliculinum, anovulation

Introduction
PCOS is emerging as the most common Gynaecological problem encountered in daily practice. About 10 million females suffer from PCOS globally, prevalence in India being 36%. A Times of India article dated 20/09/2018 on PCOS states, around 10 million women suffer from PCOS globally [1]. It is this sheer incidence that has warranted a change from PCOD- Polycystic Ovarian Disease to PCOS- Polycystic Ovarian Syndrome in the nomenclature to thereby emphasize it’s multi-glandular involvement. (E28.2 ICD 10) [2]
The host of symptoms include menstrual & adrogenic features and common complications include Insulin Resistance & Infertility. Treatment in modern medicine comprises of OC pills, oral anti-hyperglycemic agents & ovulation induction drugs. Homeopathy has a holistic approach to such cases which enables us to cure the hormonal imbalance, thus treating the symptoms, anovulation and infertility within minimal medicine.

Materials & Methods
Clinically diagnosed cases with Primary Infertility due to PCOS were taken up for the study. Case anamnesis was done and the constitutional remedy was prescribed in infrequent doses followed by Folliculinum in low potency and frequent repetition in the first half of the menstrual cycle.

Case
Mrs. SS, 30 years, married since 3 years consulted us for the complain of irregular menses since 6 years. She was diagnosed with PCOS 1 year ago. Presently she gets her menses only after taking hormonal pills.

Duration : 3 days
FMP: 14
LMP: 2/2/17
Colour: Bright red
Quantity: Moderate
Mild dysmenorrhea
Past M/H: 4-5days
26-30 days
She also complains of acne on face, hairfall & weight gain
Associated Complaints
Headache since 14-15 years, more on the temples, with a sensation as if something is drilled or hammers were hit on the skull. It is associated with severe nausea but is unable to vomit. Confusion & sensitivity to slightest noise during headache. Head pain is worse by exposure to sun, fasting and in summer. She feels better by rest and vomiting.

Life Situation
Born and brought up in Mumbai. Stays with husband, has had a love marriage. Her childhood was good, she was afraid of her mother as she was strict, always wanted her to get first rank. From a young age she was asked to help in domestic duties and take responsibility of her sibling. She is very loquacious, particularly anxious about health—wants to get cured as early as possible. Anxious about her health because of neighbours telling her disease is incurable. Desires company. Friendly and extroverted.

Past History
Galactorrhoea 6-8 months back

Patient as a Person
Patient has a marked craving for meat & chicken
Perspiration—moderate, nape of neck
Generals—Excessive light causes headache; Bus riding causes nausea and vomiting.

Family history
Mother: Cancer cervix—diagnosed in 2003. Died after 3-4 months due to metastasis.

Evaluation order/Totality

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<th>Symptom</th>
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<td>Anxiety health about own</td>
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<td>Communicative</td>
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<td>Early responsibility</td>
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<td>Desires chicken &amp; meat</td>
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<tr>
<td>Perspiration profuse nape of neck</td>
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<td>Head pain fasting during</td>
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<td>Head pain exposure to sun from F/H of CA</td>
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<td>Menses absent</td>
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<td>Ovarian Cysts</td>
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<td>MIND—Ailments from—domination</td>
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<td>MIND—Communicative</td>
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<td>MIND—Responsibility, early, taking responsibility too</td>
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<td>GENERALS—Food and Drinks—chicken-desire</td>
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<tr>
<td>GENERALS—Food and Drinks—meat-desire</td>
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<td>BACK—perspiration—cervical region—nape of neck</td>
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<td>HEAD—pain—fasting agg</td>
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<td>HEAD—pain—sun, exposure to sun from</td>
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<td>GENERALS—family history of cancer</td>
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<td>FEMALE GENITALIA/SEX—Menses—absent</td>
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<td>FEMALE GENITALIA/SEX—Tumor—Ovarian cyst</td>
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Selection of similimum: Although it doesn’t come up amongst the first few remedies, Carcinosin was selected for the essence as follows—early responsibility, ailments from domination by strict parents, anxiety about health & family history of cancer.

Prescription
16-2-17 Carcinosin 1M, 3 doses were given as a constitutional remedy. She was advised to come for follow up after 15 days.

Follow up
From the first follow up she reported a reduction in the intensity & frequency of her headache. She got a natural cycle in March itself. As she couldn’t find her old reports and infertility was the main concern, a follicular study was advised. It showed MSF (multiple small follicles) and no dominant follicle. Subsequently, she was treated with Carc 1M three doses monthly (pre-menstrual) and Folliculinum 30 bd from day 4 for 15 days.
After 6 months of treatment and regular cycles, the follicular study was repeated which showed a dominant follicle of good growth. Unfortunately, patient was unable to complete the study to confirm ovulation but she conceived in the same cycle.

Discussion

The foundation of the treatment protocol used, (constitutional remedy & folliculinum only from day 1 to day 14) lies in 2 concepts- Burnett’s Sarcode Therapy & specificity of seat.

“The true physician will be careful to avoid making favorites of certain remedies that he has happened to have found indicated rather often and has had the opportunity of employment with good results. Otherwise, less frequently used remedies that might be more homeopathically suitable, consequently more serviceable will often be neglected.” Aphorism no.257, 6th edition of Organon of Medicine [3]. This is apt for some of the smaller & lesser known remedies.

Specificity of seat: The characterizing value of locality is often underrated but the concept is age old from the time of Rademacher & Paracelsus. Boenninghausen in his grand essay, Dr. Drysdale & Dr. Burnett have elaborated the concept thus- “That the organ does indeed possess not only autonomy but hegemony, i.e the organ is an independent state in itself & on the organism exercises an important influence.”

Dr. Burnett, in his book BEST OF BURNETT has stated: “where the organ ailing is primary to the organ use organ remedies in little material doses frequently repeated; where the organ ailing is of piece pathologically with that of the organism, use the homeopathic similimum in high potency infrequently repeated [4].

The reason for selecting Folliculinum is it’s particular action on the ovaries, to promote growth of the dominat follicle & ovulation. It also has ovarian cysts, acne, amenorrhoea in it’s clinical picture [5].

Conclusion

To effect cure in pathological cases, and do so repeatedly, it is imperative to adhere to the cardinal principles of Homeopathy of individualisation, single remedy at a time & minimum dosage but with evolution in disease patterns such as cases of resistant PCOS, a modern approach has been suggested that has been used successfully in treating multiple cases of Infertility due to PCOS. This enables faster results with ovulatory cycles and can be used to hopefully reduce the number of patients needing Assisted Reproductive Technology.

Acknowledgement

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Reference

5. Compton Burnett J. Best of Burnett compiled by H. L.