



# International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493  
P-ISSN: 2616-4485  
Impact Factor (RJIF): 5.96  
[www.homoeopathicjournal.com](http://www.homoeopathicjournal.com)  
IJHS 2025; 9(4): 1-5  
Received: 27-06-2025  
Accepted: 29-07-2025

**Dr. Sumi Sharma**  
Associate Professor,  
Department of  
Community Medicine, Solan  
Homoeopathic Medical College  
and Hospital, Himachal  
Pradesh, India

**Dr. Vinod Kumar Negi**  
Associate Professor,  
Department of Organon of  
Medicine, Solan Homoeopathic  
Medical College and Hospital,  
Himachal Pradesh, India

**Dr. Avnish Kumar**  
Associate Professor,  
Department of Homoeopathic  
Pharmacy, Solan  
Homoeopathic Medical College  
and Hospital, Himachal  
Pradesh, India

**Dr. Virendra Singh Khichiee**  
Associate Professor,  
Department of Surgery, Solan  
Homoeopathic Medical College  
and Hospital, Himachal  
Pradesh, India

**Corresponding Author:**  
**Dr. Sumi Sharma**  
Associate Professor,  
Department of  
Community Medicine, Solan  
Homoeopathic Medical College  
and Hospital, Himachal  
Pradesh, India

## A case of hyperlipidemia - A challenge due to modern lifestyle

**Sumi Sharma, Vinod Kumar Negi, Avnish Kumar and Dr.Virendra Singh Khichiee**

**DOI:** <https://www.doi.org/10.33545/26164485.2025.v9.i4.A.1878>

### Abstract

Since many years the advancements in medical sciences has sufficient data to support relationship that exists between the way a person or a community lives and their risk of acquiring cardio vascular diseases which continues to be an important health problem in the developing nations. To add to it rapid industrialization, environmental stress and urbanization in developing countries pose a major threat for lifestyle disorders. Furthermore, when modest alterations of these lifestyle risk factors along with Homoeopathic Similimum are achievable the health problem can be reversed.

**Keywords:** Hyperlipidemia, hypertension, cholesterol, triglycerides, lifestyle

### Introduction

Hyperlipidemia has been recognized as a risk factor for cardiovascular diseases [2]. The United Nations Sustainable Development Goals have called for enhanced early warning, risk reduction, and management of non-communicable chronic diseases, including hyperlipidemia, at national and global levels by 2030 [3].

Lipids typically include cholesterol levels, lipoproteins, triglycerides, VLDL, LDL, and HDL [4]. Hyperlipidemia is broadly classified as primary and secondary hyperlipidemia. Primary hyperlipidemia develops from a plethora of genetic disorders inherited through birth, while secondary hyperlipidemia originates from an alternate underlying etiology, such as an unhealthy diet, medications or a poor lifestyle regimen.

### Case profile

A patient aged 68 years approached with epistaxis and severe hypertension with BP measuring 210/ 118 mm Hg. Initially to check the nose bleed, medicines prescribed were Arnica 30 and Allium Sativa mother tincture in repetition. On further investigation it was realized that patient suffered from hyperlipidemia with alarmingly high levels of S. Cholesterol, S. Triglycerides and S.VLDL cholesterol. After a thorough case taking and repertorial totality homoeopathic remedy Phosphorus was prescribed. The patient was advised for regular follow ups and lipid profile was examined to analyze the results. After taking homoeopathic medicines for about 5 to 6 months the patient demonstrated gradual improvement in general well-being, along with normalization of lipid levels, supporting the fact that Homoeopathic Medicines are effective in managing cardiovascular risks.

### Presenting complaints

- Epistaxis with Post nasal discharge, colour of blood- bright red
- Deep breathing during epistaxis grasping for longer breaths
- Hypertension 210/118 mm Hg
- Headache over the eyes and perspiration

### Past history

- Hypertensive since 15 years
- Taking allopathic medicines for the same
- Less severe bouts of Epistaxis once or twice in summers

### Mental generals

- Anxiety regarding health
- During Epistaxis wanted to be accompanied by everyone

**Physical generals**

Perspiration - present during epistaxis, Thirst - ++, Appetite- good, Desire - for cold water



**Clinical findings**


**Weight:** 75 kgs,

**BP:** 210/118 mm Hg,

**Pulse:** 92/ min

**Diagnosis:** Hyperlipidemia

Fully Computerised		Mobile: 97363-09001 98570-09001
 <b>KIRAN</b> <b>CLINICAL LABORATORY</b> Near Civil Hospital, Jawalamukhi (H.P.) <i>Equipped with Computerised Auto Analysers &amp; Cell Counter.</i>		<b>All Routine &amp; Special Tests are available here.</b>
<b>Patient Name :</b> Dr V.K. SHARMA <b>Relation :</b> <b>Ref. By :</b> Dr. SELF		<b>Age &amp; Sex :</b> 68 YEAR/M <b>Report No. :</b> 8766 <b>Reporting Date :</b> 07.01.2025
INVESTIGATION	RESULT	NORMAL RANGE
<b>LIPID PROFILE</b>		
S. Cholestrol	241.90 mg/dl	50 - 230mg/dL
S. HDL Cholestrol	45.60 mg/dl	35.5 - 70 mg/dL
S. Triglycerides	455.10 mg/dl	25 - 160 mg/dL
S. VLDL Cholestrol	91.02 mg/dl	0.00 to 40.00 mg/dL
S. LDL Cholestrol	105.28 mg/dl	0.00 - 170.00 mg/dL
Serum Total Lipids	938.90 mg/dl	300 - 700 mg/dL
Total/HDL Cholestrol	5.30	upto 3.5
LDL/HDL Cholestrol	2.31	
<b>RENAL FUNCTION TEST</b>		
Blood Urea	24.14 mg/dl	15-45 mg/dl
Creatinine	0.88 mg/dl	0.5-1.5 mg/dl
S. Uric Acid	5.71 mg/dL	3.4-7.0 mg/dL
<b>FREE HOME SAMPLE COLLECTION</b>		 <b>LAB TECHNICIAN</b>
Not Valid For Medico Legal Purpose <i>Please consult the results clinically. In case of unexpected results, contact lab.</i>		



Fully Computerised

## KIRAN

### CLINICAL LABORATORY

Near Civil Hospital, Jawalamukhi (H.P.)


*Equipped with Computerised Auto Analysers & Cell Counter.*

Mobile: 97363-09001  
98570-09001

All Routine & Special  
Tests are available  
here.

Patient Name : Dr V K SHARMA Relation : Ref. By : Dr.	Age & Sex : 68 Yrs/M Report No. : 10046 Reporting Date : 09.05.2025
---	---

INVESTIGATION	RESULT	NORMAL RANGE
<b>BIOCHEMISTRY</b>		
Creatinine	1.19 mg/dl	0.5-1.5 mg/dl
<b>LIPID PROFILE</b>		
S. Cholesterol	210.90 mg/dl	50 - 230mg/dL.
S. HDL Cholesterol	43.00 mg/dl	35.5 - 70 mg/dL.
S. Triglycerides	153.40 mg/dl	25 - 160 mg/dL.
S. VLDL Cholesterol	30.68 mg/dl	0.00 to 40.00 mg/dL
S. LDL Cholesterol	137.22 mg/dl	0.00 - 170.00 mg/dL.
Serum Total Lipids	575.20 mg/dl	300 - 700 mg/dL.
Total/HDL Cholesterol	4.90	upto 3.5
LDL/HDL Cholesterol	3.19	



Fully Computerised

## KIRAN

### CLINICAL LABORATORY

Near Civil Hospital, Jawalamukhi (H.P.)

*Equipped with Computerised Auto Analysers & Cell Counter.*

Mobile: 97363-09001  
98570-09001

All Routine & Special  
Tests are available  
here.

Patient Name : Dr V.K SHARMA Relation : Ref. By : Dr. DR SUMI SHARMA	Age & Sex : 68 Yrs/M Report No. : 10951 Reporting Date : 28.07.2025
--	---

INVESTIGATION	RESULT	NORMAL RANGE
<b>BIOCHEMISTRY</b>		
Glucose (Fasting)	101.20 mg/dL	70-110 mg/dL
<b>LIPID PROFILE</b>		
S. Cholesterol	199.90 mg/dl	50 - 230mg/dL.
S. HDL Cholesterol	42.40 mg/dl	35.5 - 70 mg/dL.
S. Triglycerides	147.30 mg/dl	25 - 160 mg/dL.
S. VLDL Cholesterol	29.46 mg/dl	0.00 to 40.00 mg/dL
S. LDL Cholesterol	128.04 mg/dl	0.00 - 170.00 mg/dL.
Serum Total Lipids	547.10 mg/dl	300 - 700 mg/dL.
Total/HDL Cholesterol	4.71	upto 3.5
LDL/HDL Cholesterol	3.02	
<b>RENAL FUNCTION TEST</b>		
Blood Urea	23.42 mg/dl	15-45 mg/dl
Creatinine	0.73 mg/dl	0.5-1.5 mg/dl
S. Uric Acid	5.96 mg/dL	3.4-7.0 mg/dL



## Repertorial totality on first visit

## Prescription as on 7.1.25

1. PHOS 30 x TDS x 7 days
2. PLO 30 x TDS x 7 days

## Follow up with dates

S. No.	Date	Symptoms and BP	Prescription
1.	15.1.25	Better, BP -180/100 mmHg	Phos 30 x BD X 15 days PLO 30 x BD x 15 days
2.	1.2.25	No Epistaxis, BP 170/96mmHg	Phos 30 x BD X 1 month PLO 30 x BD x 1 month
3.	3.3.25	Better, BP 164/94 mmHg	Repeat x 2 months
4.	10.5.25	Much improvement, BP 156/90 mmHg	Phos 200 x 1 dose PLO 30 x BD x 2 months
5.	29.7.25	Much improved, BP 140/86 mmHg	PLO 30 x BD x 1 month

## Discussion

Phosphorus was prescribed based on the repertorial totality and generals of patient. Potency selection was according to recommendation of Boricke's Materia Medica.

Hyperlipidemia, being a chronic and progressive disorder, requires timely diagnosis and correct therapeutic

intervention. Along with Homoeopathic medication necessary management includes dietary regulations and lifestyle modifications. This case demonstrated a gradual reduction in cholesterol levels, laying the importance of homoeopathy in addressing lifestyle-related disorders.

## Patient's perspective of treatment

I, V K Sharma, aged 68, had a severe nose bleeding in the month of January, 2025 and had a blood pressure of 210/118 at that time. I contacted Dr. Sumi Sharma who advised me to go for Lipid Profile Test. I was put on Homoeopathic medicines by Dr. Sumi and my condition improved and the parameters, which were earlier exceptionally high, started coming to normal within few months.

*(VK Sharma)*  
Jivalamukhi  
8 Sept. 2025

**Written consent of patient:** Was taken

### Conclusion

This case report highlights the effectiveness of individualized homoeopathic treatment in managing and treating Hyperlipidemia. Unlike conventional therapy, which requires lifelong medication, homoeopathy aims to treat the root cause by considering the patient's physical and mental history. The selected remedy, Phosphorus demonstrates that Homoeopathy, when prescribed according to the principle of similimum, was able to bring down the levels of cholesterol and triglycerides in 4 -5 months time. Along with this modifiable changes were made in the patient's lifestyle which brought about an improvement in this case.

**Conflict of interest:** None

**Source of funding:** None

### References

1. Reddy KS. Global burden of disease study 2015 provides GPS for global health 2030. *Lancet*. 2016;388:1448-1449. DOI:10.1016/S0140-6736(16)31743-3
2. Murphy SL, Xu JQ, Kochanek KD. Deaths: Preliminary data for 2010. *Natl Vital Stat Rep*. 2012;60(4):Table B. Hyattsville (MD): National Center for Health Statistics.
3. United Nations. 17 goals to transform our world. New York (NY): United Nations; 2021.
4. Ballantyne CM, Grundy SM, Oberman A, Kreisberg RA, Havel RJ, Frost PH, *et al*. Hyperlipidemia: diagnostic and therapeutic perspectives. *J Clin Endocrinol Metab*. 2000 Jun;85(6):2089-2112.
5. Schroyens F. Synthesis 9.1 (Repertorium Homoeopathicum Syntheticum). London: Homeopathic Book Publishers.
6. Boericke W. Pocket manual of homoeopathic materia medica & repertory: new manual of homoeopathic materia medica with repertory. 3<sup>rd</sup> ed. New Delhi: B Jain Publishers (P) Ltd.
7. Hahnemann S. Organon of medicine. 6<sup>th</sup> ed. New Delhi: B Jain Publishers (P) Ltd.; year not stated.

#### How to Cite This Article

Sharma S, Negi VK, Kumar A, Khichee VS. A case of hyperlipidemia: A challenge due to modern lifestyle. *International Journal of Homoeopathic Sciences*. 2025;9(4):1-5.

#### Creative Commons (CC) License

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.