



International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493

P-ISSN: 2616-4485

www.homoeopathicjournal.com

IJHS 2020; 4(3): 92-94

Received: 20-05-2020

Accepted: 24-06-2020

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A case on migraine with Kent's repertory

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Abstract

Migraine is a neurological disease, of which the most common symptom is an intense and disabling episodic headache. Migraine headaches are usually characterized by severe pain on one or both sides of the head and are often accompanied by photophobia, hyperacusis and nausea. A case of Migraine Patient treated with Kent's Repertory.

Keywords: Migraine, Kent's repertory, Homoeopathy

Introduction

Migraine is a vascular headache. Migraine headaches are usually characterized by episodic, throbbing hemicranial headache, beginning in childhood, adolescence or early adults' life with a tendency to decrease in intensity and frequency as age advances [3].

There may be a genetic predisposition to migraine headaches because a positive family history for migraine has been reported. Migraine headaches also occur about twice as frequently in women as in men [1].

Types of Migraine & Signs and Symptoms [2].

There are two major types of Migraines:

- Migraine with aura and
- Migraine without aura.

Migraine with aura (classical Migraine) is most often visual, consisting of fortification spectra, which are shimmering, silvery zigzag lines that march across the visual fields for up to 40minutes, sometimes leaving a trail of temporary visual field loss (scotoma). In some there is a sensory aura of tingling followed by numbness, spreading over 20- 30minutes, from one part of the body to another. Dominant hemisphere involvement may also cause transient speech disturbance [2].

Migraine without aura (common migraine) the most common type of Migraine, usually severe and throbbing with photophobia, phonophobia and vomiting lasting from 4 to 72hours. Movement makes the pain worse, and patients prefer to lie in a quiet, dark room [2].

Migraine Triggers [4].

- Hormonal changes in women.
- **Drinks:** Alcohol, especially wine, and highly caffeinated beverages may trigger Migraines.
- **Stress.**
- **Sensory stimuli.** Bright lights and sun glare can induce Migraines, as can loud sounds. Strong smells - including perfume, paint thinner, secondhand smoke and others, can trigger Migraines in some people.
- **Changes in wake-sleep pattern.** Missing sleep or getting too much sleep may trigger Migraines in some people, as can jet lag.
- **Physical factors.** Intense physical exertion, including sexual activity, may provoke Migraines.
- **Changes in the environment.** A change of weather or barometric pressure can prompt a Migraine.
- **Medications.** Oral contraceptives and vasodilators, such as nitroglycerin, can aggravate Migraines.
- **Food.**

Weather. DIAGNOSIS [5].

The International Headache Society, developed its criteria for diagnosing Migraines in 1988, and the most recent guidelines were published in 2013 (ICHD-III). Diagnostic criteria include:

- A. At least five Migraine attacks that fulfill criteria B through D
- B. Each Migraine attack, untreated or unsuccessfully treated, lasts from four to 72 hours
- C. Head pain that has at least two of the following
 - Pain on one side of the head, unilateral pain
 - Pulsating quality
 - Moderate to severe head pain
 - Aggravated by or causing avoidance of routine physical activity, such as walking or climbing stairs.
- D. During head pain, at least one of the following:
 - Nausea and/or vomiting
 - Photophobia, light sensitivity and phonophobia, sound sensitivity.
- E. Not due to any other disorder.

Prevention [4].

- Trigger avoidance
- Symptomatic control to abort attacks
- Create a consistent daily schedule. Establish a daily

- routine with regular sleep patterns and regular meals. In addition, try to control stress.
- Exercise regularly
- Reduce the effects of estrogen.

Homoeopathic Approach

Homoeopathy operates on the law of Similars. Homoeopathy deals with the principle of individualization. It treats the man, rather than the disease. Individualization is the integral part of Homoeopathic treatment. No two persons are alike in health or in disease. Every individual is characterized by some unique features. Migraine can be treated effectively with homoeopathic medicines.

CASE

Ms.X of age 16yrs came with complaint of pain in the head since 6months on & off. A/F the death of her father 6months ago. There is a pain in the forehead and goes around to the occiput like a band. There is bursting type of pain in the head with burning in eyes. Headache is associated with the crampy pain in the abdomen with nausea and vomiting (sometimes). There is a bitter taste in the mouth. Pain worse when sweating (in the head) and better by pressure and sleep.

S.no	Location	Sensation/character	Modality	Concomitant
1.	Head Forehead Occiput	-Bursting type of pain -pain in forehead & goes around to the occiput whole head	<sweating >pressure >sleep	-crampy pain in the abdomen -nausea & vomiting -Bitter taste in mouth.
2.	Eyes	-Burning sensation of eyes		

Past History: Chikungunya at 8yrs of age –Recovered.

Family History: Father – died (Renal failure)

Generalities

Physical Generals

Appetite: Feels hungry but can't eat as she feels full after taking small amount. Sleep : Refreshed.
 Dreams: of her father who has passed away Thirst : 1 – 2 ½ Litres 1day.
 Sweat: profuse, especially on head. no odour no Strain.
 Desires: Spicy
 Aversion: Sweets Thermal : Hot
 Intolerance: Nothing specific
 Menses: Regular 4-5 days of flow, 28days cycle, pain in lower abdomen. Stool : Once / day, Regular.
 Urine: 4-5 /1-2 D/N no complaint with urination.

Life Space Investigation

She is the youngest child of her family and has one elder sister. She use to be attentive and smart at school. However, things changed after her father's death she is not attentive as she used to be and feels so difficult no concentration in her class and studies (She exclaims that ever since her headache she had the concentration problem and cried she said then). Desires company she always feels as though her friends are using her and not true, she cried how much her father loved her and things being difficult without him. She used to be bold but now feels very insecure. She shows everything

with her mother and feels better when she is consoled by her.

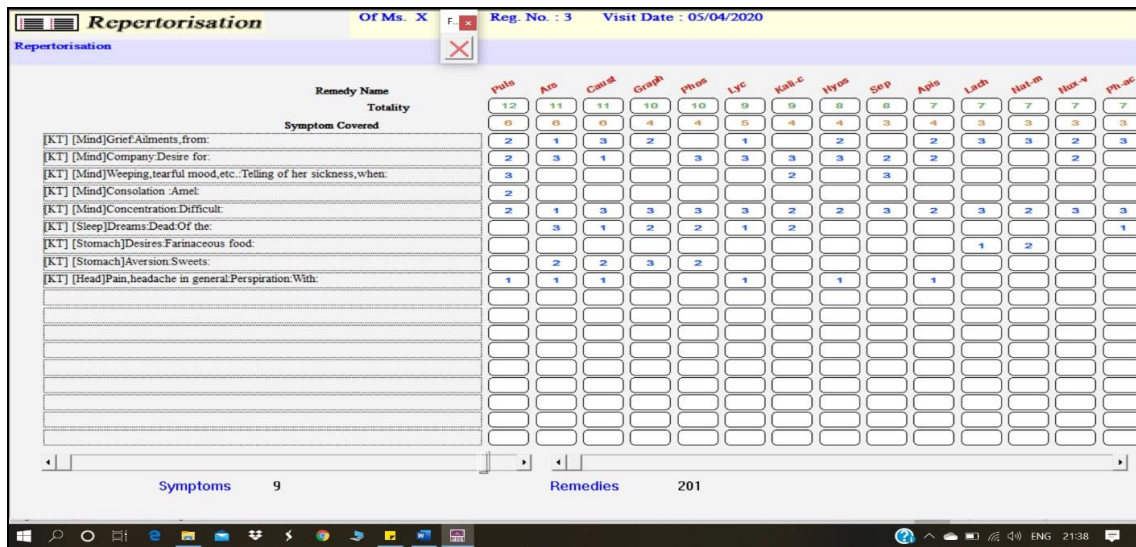
Conceptional Image

- A/F grief
- Desire company
- Weeping when she narrating the complaint
- Consolation amelioration her
- Difficult to concentrate
- Dreams of dead father
- Desire - spicy
- Aversion – sweets
- Sweat more on forehead

Repertory Used: Kent Repertory: (The case as more generals both mentals and physical symptoms so based on that Kent Repertory is chosen.)

Rubrics Selected [6].

Mind – Grief: aliments, from Mind – Company: desire for Mind – Weeping, Tearful Mood, Etc: telling of her sickness, when Mind – Consolation: amel
 Mind – Concentration: difficult SLEEP – DREAMS: dead of the Stomach – Desire: farineous food Stomach – Aversion: sweets
 Head – Pain, Headachein General: perspiration, with



Prescription

- Pulsatilla 200 / 1 dose (1-0-0) BF
- Pills (3-0-3) / 2weeks

Follow UP

17.01.2020	Pain in the head still persist. Bursting sensation of the forehead and occiput present, worse when sweating. Nausea present before headache with burning in the eyes during the headache. PG: Improved Sleep: Disturbed, unrefreshed	R	X Pulsatilla 1M (1-0-0) BF
29.01.2020	Pain in the head is reduced than before. Burning in the eyes is reduced. Nausea absent. Bitter taste in the mouth present. PG: App: good Sleep: 6-7 hours, undisturbed		Rx Pills (3-0-3) BF
12.02.2020	Pain is the reduced. Nausea and bitter taste in the mouth is absent. No new complaints Generals: Good	R	X Pills (3-0-3) BF
26.02.2020	Patients feels better. No new complaints Generals: Good	R	X Pills (3-0-3) BF
11.03.2020	Patients feels better. No recurrent of the complaint. No new complaints Generals: Good	R	X Pills (3-0-3) BF

Conclusion

Homoeopathy treats the patient as a whole not just the disease. Individualization plays a major role in Homoeopathic prescription. Based on Kent’s Repertory giving importance to the Mental generals and Physical generals as treated successfully with most similar constitutional homoeopathic medicines. A Case of migraine has been treated successfully by giving more importance to generals. Initially when pulstilla given, patient complaints were still persisted but generals improved, so potency were increased to 1M. On next visit both complaints and generals were reduced. There is no recurrent of symptoms. The patient gradually improved from the complaints.

Reference

1. Textbook of Medical Physiology - Guyton & Hall, 13th Edition.
2. Davidson’s Principles and Practice of Medicine, 23thEdition.
3. Textbook of Medicine–KV Krishna das, 6thEdition, Volume-2.
4. www.webmd.com
5. <https://ichd-3.org/1-migraine/1-1-migraine-without-aura/>
6. Repertory of The Homoeopathic Materia Medica– J.T.

- Kent.
7. Organon of Medicine–Samuel Hahnemann, 6th Edition.