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Role of individualised homoeopathic medicinal intervention in treating severely elevated levels of TSH: A case report

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Abstract

Hypothyroidism is believed to be a common endocrine disorder in India due to its high prevalence and systemic implications. Hypothyroidism is characterized by the insufficient production of thyroid hormones leading to a widespread metabolic dysfunction. Despite effective diagnostic and therapeutic strategies, delayed detection and suboptimal management remain significant challenges in treating severe hypothyroidism. The clinical manifestations of hypothyroidism are varied, including weight gain, cold intolerance, menstrual irregularities, lethargy, fatigue, etc. Hypothyroidism is a significantly prevalent condition. In a recent study, hypothyroidism was found to be more common in females than males. In this article, the efficacy of homoeopathic medicine in treating the severe and uncontrolled levels of TSH is being discussed when given on the basis of individualization.

Keywords: Homoeopathy, natrum carb, constitutional medicine, severe TSH levels

Introduction

Hypothyroidism is a condition characterized by insufficient production of thyroid hormones by the thyroid gland. This deficiency can range from mild, with minimal symptoms, to severe, potentially leading to life-threatening complications like myxedema coma. The condition is often detected initially by an elevated Thyroid Stimulating Hormone (TSH) level, even before significant reductions in free T₄ and T₃ levels are observed. Hypothyroidism, or an underactive thyroid, can manifest with a variety of symptoms that may include fatigue, weight gain, dry skin and hair, and feeling cold ^[1].

Hypothyroidism can be classified as primary (due to thyroid hormone deficiency), secondary (due to TSH deficiency), tertiary (due to thyrotropin-releasing hormone deficiency), and peripheral (extra-thyroidal; panel). Central hypothyroidism (including both secondary and tertiary) and peripheral hypothyroidism are rare and account for less than 1% of cases. In primary hypothyroidism, the thyroid gland cannot produce adequate amounts of thyroid hormone. The less commonly seen secondary or central hypothyroidism occurs when the thyroid gland functions normally; however, hypothyroidism results from the abnormal pituitary gland or hypothalamus function. Central hypothyroidism is rare and affects both sexes equally. It is more often associated with pituitary than hypothalamic disorders but frequently involves both. Biochemically, central hypothyroidism is defined by low or low-to-normal TSH concentrations and a disproportionately low concentration of free thyroxine. Occasionally, TSH concentration is mildly elevated, probably because of decreased bioactivity. Over half of central hypothyroidism cases are caused by pituitary adenomas. Peripheral hypothyroidism

Consumptive hypothyroidism is caused by aberrant expression of the deiodinase 3 enzyme (which inactivates thyroid hormone) in tumour tissues. Although very rare, such overexpression can induce severe hypothyroidism ^[1, 2, 3, 4].

Clinical manifestations of hypothyroidism range from life threatening to no signs or symptoms. They depend on duration and severity of the symptoms. A consequence of prolonged Hypothyroidism is the infiltration of many body tissues by mucopolysaccharides, hyaluronic acid and chondroitin sulphate, resulting in a low-pitched voice, poor hearing, slurred speech due to a large tongue, and compression of the median wrist at the wrist. The most common symptoms in adults are fatigue, lethargy, cold intolerance, weight gain, constipation, change in voice, and dry skin, cold intolerance, puffiness, decreased sweating,

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and skin changes, may not always be present. Libido is decreased in both sexes, and there may be oligomenorrhea or amenorrhea in long standing cases. But menorrhagia is

also common. Fertility rate is reduced and rate of miscarriage is increased. Reduced stroke volume and bradycardia are also common.

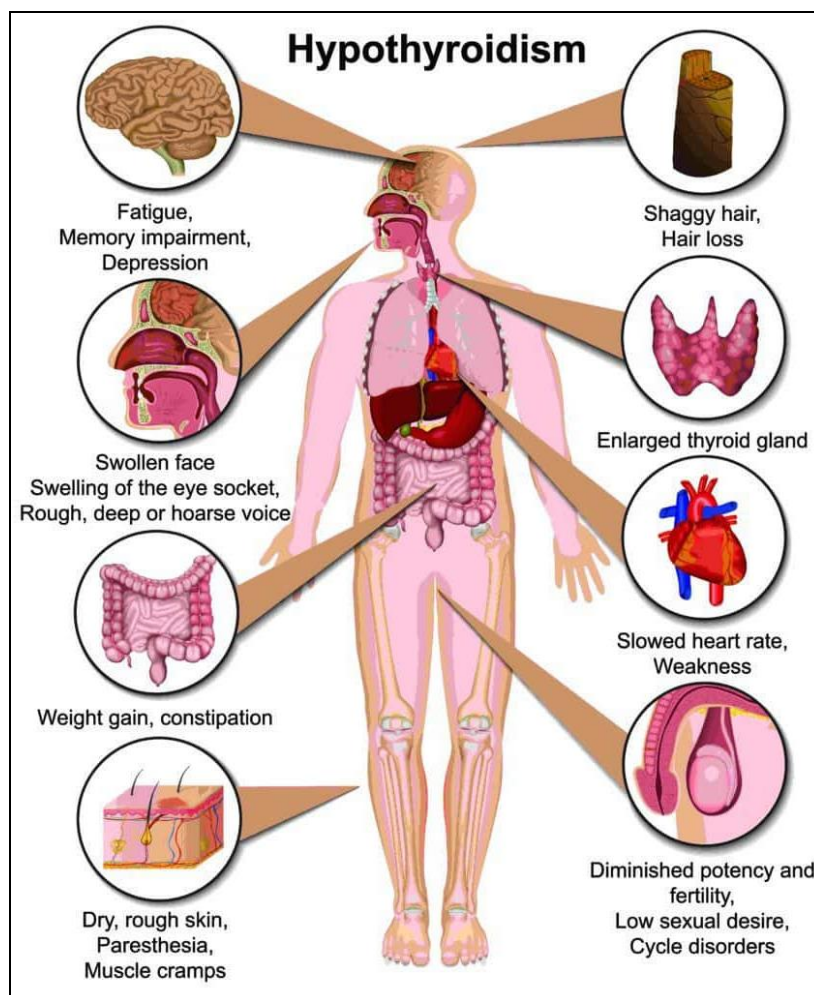


Fig 1: Diagram illustrating the symptoms and effects of hypothyroidism on the human body, including fatigue, hair loss, enlarged thyroid gland, weight gain, slowed heart rate, dry skin, and reproductive or menstrual disorders.

Occasionally, patients with less common symptoms may be encountered. Symptoms of depression, anxiety, psychosis, and cognitive impairments (eg, memory loss) can be present. In rare cases, patients may present with ascites, rhabdomyolysis, and pericardial effusion. Patients can also present with carpal tunnel syndrome, sleep apnea, hyponatremia, hypercholesterolemia, congestive heart failure, and prolonged QT interval. [A serum TSH level is typically used to assess for primary hypothyroidism in most patients initially. Characteristic laboratory findings of hypothyroidism include elevated TSH levels and low free T₄ levels. In subclinical hypothyroidism, TSH levels are elevated, and free T₄ levels are within normal limits. Today, the diagnosis of hypothyroidism is easily made by the use of simple blood tests and can be treated with exogenous thyroid hormone [1, 2, 3, 4].

Diagnosis and Clinical Significance

A TSH level >100 mIU/L indicates severe primary hypothyroidism, which requires immediate treatment. This extreme elevation is associated with:

- Overt hypothyroidism (elevated TSH with low free T₄)
- High risk of cardiovascular complications
- Potential metabolic disturbances

- Impaired cognitive function
- Decreased quality of life

Thyroid function tests (TSH, free T₄) should be monitored every 6-12 months for stable patients, and every 3-6 months for patients with recent dose adjustments, as per the Annals of Oncology guidelines [6, 7].

Case study

A 24-year-old female patient had come to the OPD of Regional Research institute, RRI, Gudivada, with complaints of irregular menses, recurrent cold attacks and severe drawing pain in cervical region which is of drawing type of sensation and aggravated by motion of head on 22nd December 2024. Pain in both heels which is aggravated by prolonged standing. She also had the complaints of headache which is aggravated by exposure to sun, mental exertion and by noise. As per her mother's narration, patient is a very sensitive person, she has fear and anxiety to talk to strangers, and she wishes to stay indoors and doesn't go out side to play with her friends since her childhood. She discontinued her education after 10th class as her father couldn't afford further education and patient was equally disinterested to continue her studies. Her mother also told

that the patient used to get poor marks in mathematics and failed many times in that subject.

Homoeopathy views the patient as a whole person, considering all aspects of their physical, mental and emotion well-being. This approach is called Individualization and it forms the core principle of homeopathic prescribing. Homoeopathy is a holistic, logical and philosophical system of individualistic drug therapeutics, based on well proved scientific principles, especially the Law of Similars. It has the potentiality to cure in all those cases that have not amassed irreversible patho-physiological changes; in the latter condition, it induces a long lasting relief. In this case, the efficacy of homeopathy was demonstrated by prescribing on the basis of individualistic approach and Natrum Carbonicum was given and hence brought back her thyroid dysfunction to a complete normal state with a good metabolism. Patient was not on any conventional system or any other system of medicine as she comes from a very rural background and was not aware of any treatment available for her health problem.

Physical generals

Patient's appetite is good and her thirst is for small quantities at large intervals. Since her childhood has intolerance to milk in any form and she develops diarrhea like symptoms on having it. She has desire for chicken²⁺.

Mental generals

Patient is reserved, sensitive and does not like to talk to strangers, develops anxiety and fear to talk to strangers. She has poor performance in the subject of mathematics.

Particulars

Headache < after mental exertion, sun exposure, noise

Pain in cervical region which is of drawing type of pain < motion of the head

Pain in both heels < standing

Irregular Menses and LMP was 18/10/2024.

Physical examination

Obese individual with sudden increase in weight in the last 6-7 months, weight at the baseline was 69 kgs, height was 158 cms, BMI was 27.6. Ultrasound scanning report of whole abdomen and pelvis was normal.

Systemic examination

PR- 98 bpm, RR- 13 times/min, BP- 110/80 mm of Hg.

After advising the patient to undergo a thyroid profile base on the suspicion of Hypothyroidism, she was diagnosed to have a severe increase in the levels of TSH value of 100 μ IU/ml on 28/12/2024. Hence the case was diagnosed as Hypothyroidism (ICD code: E03)

Repertorisation

The screenshot displays the Synthesis Treasure Edition 2009v (SCHROYENS F.) software interface. The left sidebar shows a list of remedies, including BHATIA V., Repertory of Remedies in Comm...; BOERICKE O., Repertory; BOGER C., Boenninghausen's Repertory; BOGER C., General Analysis; BOGER C., Synoptic key; BÖNNINGHAUSEN, von C., Therapeutic Pock...; CHOUDHURY H., Hints for Treatment of Can...; CLARKE J., Clinical Repertory; DEGROOTE F., Dream repertory; DRAKE O., Repertory of warts and condylor...; FOSTER J., Toothache and its cure; GUERNSEY W., Repertory of Haemorrhoids; KENT J., English Kent; MASTER F., Hair Loss; MURPHY R., Repertory Version 3; PHATAK S., Concise Repertory; PULFORD A., Repertory of Pneumonia; ROBERTS H., Sensations as if; SCHROYENS F., Synthesis Treasure Edition; SHERR J., Mental Qualities (Full version 201...); STÖTELER E., Organopathy, Organ Remedi...; SUDARSHAN S., Repertory of non malarial f...; SUKUMARAN N., Main Symptoms of Heart P...; TRIVEDI N., Repertory of Infertility; WARD J., Sensations as if; DRAGOS D., Mind concepts; LARA I., Latent psora; MATEU RATERA M., Erste Hilfe; PETRUCCI R., Children concepts; SCHROYENS F., Acute Diseases; SCHROYENS F., Radar concepts; SERVAIS P., Themes; VALADARES FONSECA A., Semiological guid... remedies; BENTLEY G., Miasms, Dominance and the 7...; BOYD W., Boyd families; BÖNNINGHAUSEN, von C., Boenninghausen; DORCSI M., Dorcsi families; PATERSON J., Bowel nosodes; ROSENTHAL C., Five elements; ROSENTHAL C., Five elements; (s) loaded (48 volumes).

The main window shows a repertorisation table with 13 symptoms and 387 remedies. The table is organized into columns for various remedies and rows for symptoms. The symptoms listed are:

- 1. MIND - ANXIETY - trifles, about (47) 1
- 2. MIND - MATHEMATICS - inability for (31) 1
- 3. BACK - PAIN - Cervical region - drawing pain (98) 1
- 4. BACK - PAIN - Cervical region - motion - head; of (0) 1
- 5. EXTREMITIES - PAIN - Feet - Heels - standing - agg. (18) 1
- 6. GENERALS - FOOD AND DRINKS - chicken - desire (32) 1
- 7. GENERALS - FOOD AND DRINKS - milk - agg. (160) 1
- 8. MIND - COMPANY - aversion to - alone amel.; when (59) 1
- 9. GENERALS - SUN - exposure to the sun (101) 1
- 10. FEMALE GENITALIA/SEX - MENSES - lasting too sh... (0) 1
- 11. HEAD - PAIN - sun - exposure to sun; from (72) 1
- 12. HEAD - PAIN - mental exertion - agg. (153) 1
- 13. HEAD - PAIN - noise - agg. (113) 1

The table also includes a section for '2. Clipboard 2' with the following items:

- 1. MIND - ANXIETY - trifles, about (47) 1
- 2. MIND - MATHEMATICS - inability for (31) 1
- 3. BACK - PAIN - Cervical region - drawing pain (98) 1
- 4. BACK - PAIN - Cervical region - motion - head; of (0) 1
- 5. EXTREMITIES - PAIN - Feet - Heels - standing - agg. (18) 1
- 6. GENERALS - FOOD AND DRINKS - chicken - desire (32) 1
- 7. GENERALS - FOOD AND DRINKS - milk - agg. (160) 1
- 8. MIND - COMPANY - aversion to - alone amel.; when (59) 1
- 9. GENERALS - SUN - exposure to the sun (101) 1
- 10. FEMALE GENITALIA/SEX - MENSES - lasting too sh... (0) 1
- 11. HEAD - PAIN - sun - exposure to sun; from (72) 1
- 12. HEAD - PAIN - mental exertion - agg. (153) 1
- 13. HEAD - PAIN - noise - agg. (113) 1

The bottom status bar shows: 13 symptom(s) / 387 remedies, Sum of degrees (sorted symptoms), No limitation, All remedies.

Prescription

Based on the totality of symptoms, Natrum Carb 200 one dose was given and Placebo for 2 weeks (BD).

Follow up and dates of prescription

S. No	Date	Symptoms	Prescription
1.	17/01/2025	All complaints better by 30 % and LMP was 10/01/2025	Placebo 2 weeks, BD
2.	10/02/2025	All complaints better by 30-40 %	Placebo 2 weeks, BD
3.	29/02/2025	Episode of headache was severe; all the other complaints were better by 50%	Placebo 2 weeks, BD
4.	15/03/2025	Menses was scanty and had dysmenorrhea during first day and third day. Mental stress regarding financial matters at home disturbed her sleep. Bowel movement was constipated.	Natrum carbonicum 200 one dose and Placebo 4 weeks BD.
5.	16/04/2025	All the complaints were better by 70-8-% and there was a huge improvement in the TSH levels.	Placebo 4 weeks BD
6.	10/05/2025	Patient's condition improved very much by 60-70%. Menses were regular. Patient's anxiety while speaking to strangers improved and she is trying to spend her time outside as per mother's narration. She started searching for jobs	Placebo 4 weeks, BD
7.	12/06/2025	Patient's condition was very much better and she improved in her studies. Joined in a tea shop as a daily wage labourer.	

Thyroid profile report before prescription

JAI SCAN CENTRE & HOSPITAL
Opp. Karur Vysya Bank, Main Road, KANKIPADU.
Ph : 90142 79421, 80082 81665

Dr. P. Gandhi
MBBS, M.D. Gen Medicine
Consultant Physician
Timings : 5 pm to 9 pm

Dr. M. Ajitha
MBBS, DMRD
Consultant Radiologist
Timings : 9 am to 9 pm

Name : _____ Age / Sex : _____ Date : _____

NAME: K. NAGA MANI
Age : 23 Y Sex : F
PI ID : 20242280
REF: BY: DR: C.H.C. KANKIPADU

DATE: 28/12/2024
Time of Sample Collection : 11:20 AM
Time of Sample Reporting : 03:27 PM

LAB REPORT
(METHOD: CLIA)

TEST NAME	RESULT	NORMAL RANGE-UNIT
THYROID STIMULATING HORMONE (TSH)	100.0	0.34-5.60 µIU/ml

LAB TECHNICIAN

Thyroid profile after prescribing Natrum Carbonicum and its clear evident role in reducing the severe TSH levels.

CENTROMED
LABS PVT. LTD. INSPIRING BETTER QUALITY

Name : Mrs. K.NAGA RANI
Age/Gender : 23 Years / Female
Ref.By : SRI GAUTHAM LAB
Req No. : BZA2511879
Sample Type : Serum
Client Name : LAKSHMI MEDICO SERVICE-CMLAPF88

Vial ID : 1009674
Collected On : 16-Apr-2025 12:41 PM
Registered On : 16-Apr-2025 12:33 PM
Reported On : 16-Apr-2025 02:33 PM
Client Code : CMLAPF88

THYROID PANEL-I			
Test Name	Observed Values	Units	Biological Reference Intervals
* TOTAL TRIIODOTHYRONINE (T3) Method:ECLIA	145.7	ng/dL	82 - 200 Pregnancy: 1st Trimester: 81-190 2nd & 3rd Trimester: 100-260
* TOTAL THYROXINE (T4) Method:ECLIA	9.44	ug/dl	5.1 - 14.1
* Thyroid Stimulating Hormone.(TSH) Method:ECLIA	2.03	μIU/mL	Adult : 0.35 – 5.5 pediatric range: Birth – 4 days:1.0-39 2- 20 Weeks: 1.7- 9.1 20 weeks- 20 yrs:0.7-6.4

INTERPRETATION:
The determination of T3 is utilized in the diagnosis of T3hyperthyroidism,the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.
The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism, and the monitoring of TSH-suppression therapy.
The determination of TSH serves as the initial test in thyroid diagnostics.Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly,TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

End Of The Report

Dr Kadiyala Praneeth
MD PATHOLOGIST

Please Correlate With Clinical Findings If Necessary Discuss This is an Electronically Authenticated Report

Page 1 of 1

Discussion

Homeopathy played a great effective role in treating Hypothyroidism in this case. Through the above result it is very clearly understood that homeopathy does not treat the disease but the person who has the disease. The highest form of medicine is the one that understands the patient's mental, emotional and physical states in unity. Individuality is the core concept for selection of medicine in Homoeopathy where it provides a process for identifying an individual to be most similimum with medicine. This process of Individualization is followed in the context of law of similia. Every aspect of understanding about the practice of homeopathy follows the fundamental law of similia. HA Roberts emphasize that the illness is not just a local disturbance but a reflection of the individual's entire being. His approach reinforced the idea that homeopathy seeks to correct the internal imbalance rather than just suppress symptoms. He also said that the constitutional medicines strengthen the inner dynamic force and restore a

harmony in an individual [8].

By prescribing on the basis of individualization, there is a drastic improvement in the patients highly elevated TSH levels which there by restored the harmony in both her mental and physical state of well being.

Conflict of Interest

Not available

Financial Support

Not available

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