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Homoeopathic management of gout with Bryonia Alba: A case study

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Abstract

Gout is a common form of arthritis which can affect anyone except children. The cause is believed to be an idiopathic mostly and dietary factors. It is an inflammatory response to the MSUM (Mano Sodium Urate Monohydrate) in such a condition homoeopathy plays an important role instead of using NSAID drugs and or steroids. A study is presented below.

A patient attended OPD (Outdoor patient department) mainly with complaints of severe pain in all metatarsophalangeal joints of left foot with swelling and tenderness since 3 months. Patient came with laboratory serum uric acid report. After medications with modern medicine there is no relief. Therefore patient decide to take homoeopathic medicine in my OPD. After thorough case taking and careful Repertorisation I found Bryonia Alba is most indicated remedy by considering totality of symptoms. Thus, Bryonia Alba was prescribed and we get expected results.

Keywords: Gout, Homoeopathy, hyperuricemia, remedy, Bryonia Alba

Introduction

Gout is an inflammatory response to the MSUM (Mano Sodium Urate Monohydrate) crystals formed secondary to hyperuricemia. Uric acid (URATE) concentrations are age and sex related. Hyperuricemia has been defined as a serum or plasma urate concentration greater than 7.0 mg/dl in males and 6.0 mg/dl in females. The prevalence of hyperuricemia varies among communities from which only 10% of patients shows symptoms of Gout. The incidence of Gout varies in population from 0.2 to 3.5 / 1000 and prevalence is 2.0 to 26/1000 patients. The peak age of onset in males is between 40-50 years. Gout is rarely seen in animals due to their ability to produce uricase which breaks down uric acid.

Causes of Hyperuricaemia Primary Hyperuricaemia

Increased uric acid production Idiopathic (10%) Specific enzyme defects. Decreased uric acid excretion (90%)

Secondary Hyperuricaemia

- Increased uric acid production
- Macroglobulinemia
- Carcinomatosis
- Chronic hemolytic anemia
- Gaucher's disease
- **Explorative Psoriasis**
- Decreased uric acid excretion
- Renal Diseases chronic
- Drugs Diuretics, aspirin, etc.
- Hyperparathyroidism
- Downs syndrome
- Sarcoidosis
- Myxedema

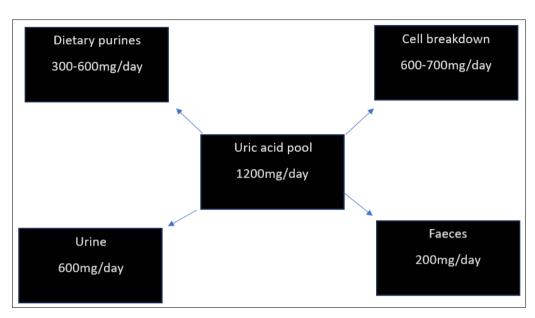
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Diagnostic Criteria

Hyperuricaemia is confirmed if fasting serum uric acid levels are elevated than normal. Radiographs may be normal in early detected cases.

Pathophysiology Body pool of uric acid



Complications of gout

After gouty arthritis renal disease is common complication-Urate nephropathy.

Uric acid and or calcium oxalate stones may be occur frequently. Renal failure is seen in 10-25 % patients if not treated properly.

Case Study

Patient information

A 40 years old male patient came in OPD with severe pain in left ankle joint and pain in all metatarsophalangeal joints of left foot with burning and tenderness. Pains are aggravated by least touch. Ankle joint pains are better by rest. The patient shows a personality with marked irritability and is anxious about his future.

History of Present Complaints

Patient was apparently well 6 months back then he noticed dull, gradual pains starts in left ankle joint and all metatarsophalangeal foot at early morning. Then he took allopathic line of treatment which includes NSAID and steroid which gives temporary relief.

Past History

Root canal treatment (dental) done before two years back.

Family History

Father, Mother, Wife and one Son and one Daughter all are healthy and alive.

Mental Generals

The [patient shows a personality with marked irritability and is very anxious about his future.

Physical Generals

He had desire for coffee He had aversion to milk

Analysis and Evaluation of symptoms

Table 1: Analysis and Evaluation of symptoms a

	Symptoms	Miasmatic analysis
Mental Generals	Patient is irritable in nature	PSORA
	2. Patient is anxious about his future.	PSORA
Physical Generals	1. He has desire for coffee	Syphilis
	2. He has aversion to milk	Psora
Particulars	Pain in left ankle joint	Sycosis
	2. Pain in all joints of left foot	Sycosis
	3. Pains in foot region aggravated by touch	PSORA
	4. There is burning in ankle joint	PSORA
Uncommon	Nothing specific found in patient	
Common	Ankle pains are better by rest	

Repertorial Totality

- Mind-Irritability
- Mind-Anxiety-Future about

- Generals-Food and Drinks-Coffee-Dezire
- Generals-Food and Drinks-Milk-Aversion
- Extremities-Pain-ankle left

- Extremities-Pain-Foot-Joints of
- Extremities pain-foot-touching aggravation
- Extremities-pain-burning-ankle

Repertorisation

As the generals were more in this case was repertorised with the help of synthesis repertory from Radar 7.0 version.

Prescription

Brionia Alba 200, 1 dose/ stat was prescribed with placebo 30 for 15 days on first visit in OPD i.e. on 8th June 2025 on the basis of totality of symptoms.

Justification

On the basis of repertorial totality *Brionia Alba* was prescribed. Although considering the numerological values *Calcaria, China, Conium, Natrum Mur, Pulsatilla* and

Sulphur, Calcaria Carb were closed enough and secured second rank in mental symptom aspect. As under the evaluation process the desire and aversion are given more importance after mental generals therefore considering the same in this case *Brionia Alba* 200 was selected.

During follow up Patient showed amelioration day by day, thus same potency was repeated. (As per Dr. Kents statement-"In such a case when the symptom return when the patient has the same generals and particulars as formerly it means that the first prescription that the good one that the case is curable and the second prescription must be a repetition of the former".

The potency was further increased up to M. (According to Dr. Stuart Close "Different potencies act differently in different cases and individuals at different times under different conditions. All may be needed no one potency high/low will meet the requirement of all the cases at all the times".

Table 2: Follow up of the case

Follow up Date	Indication for prescription	Medicine with dose	
23 rd June 2025		Sac lac 30/1 dose	
	Pains ameliorated partially	Placebo 30/TDS	
		For 15 days	
8 th July 2025	Burning in left ankle joint reduced but pain is still there in joints of left foot.	Brionia Alba 200/2 doses/ weekly	
		Placebo 30 / TDS	
		For 21 days	
7 th August 2025	Pains and burning reduced in all joints of left foot and ankle joint region.	Sac lac 30/1 dose	
		Placebo 30/TDS	
		For 28 days	
5 th September 2025	Episodes of pains in ankle as well as all joints of left foot again.	Brionia Alba 1 M /2 doses/ weekly	
		Placebo 30 / TDS	
		For 28 days	
2 nd October 2025	Pains reduced in all joints of left foot and left ankle. No burning sensations.	Sac lac 30/1 dose	
		Placebo 30/TDS	
	No burning sensations.	For 28 days	
30 th October 2025	Completely pains are vanished in all joints of left foot as well as left ankle joint.	Sac lac 30/1 dose	
		Placebo 30/TDS	
	There is no pain aggravation by touch.	For 05 days	

Discussion and Conclusion

In this case report *Brionia Alba* was selected as similimum / most indicated homoeopathic remedy which is based on mental as well as physical aspects. *Bryonia Alba* with subsequent high potency was prescribed as per need of patients existing conditions. This case was followed up to 5 months. As further follow up could not be done as patient is clinically improved. As well as pathological investigations are also showing markedly reduction in serum uric acid concentration from 9 to 6.3mg / dl.

Homoeopathy treats the person as a whole. It not only treats the affected / diseased body part but also it restores the person mentally, physically as well as spiritually. It has been found that there are so many homoeopathic medicines for Gout and Arthritis like Colchicum, Lithium Carb, Guaiacum, Ledum pal, Benzoic acid......etc. and they are found very effective in the management of Gout and Arthritis. This case shows efficacy of a single, individualized homoeopathic medicine in a case of Gout and also the importance of holistic approach. That means instead of treating the part of the body Homoeopathy believes treating the person as a whole.

Declaration of patient consent

The author certified that they have obtained all appropriate patient consent.

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Nil

Conflicts of interest

There are no conflicts of interest.

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