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Homoeopathic management of ankylosing spondylitis

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Abstract

Ankylosing spondylitis (AS) is a chronic inflammatory rheumatic disorder mainly affecting the axial skeleton. It has symptoms ranging from low back pain to joint stiffness & immobility which hamper the quality of life of a patient. Conventional mode of treatment has its own limitations in the management of this disease. Here is an attempt to focus on the role of homoeopathy in the management of ankylosing spondylitis.

Keywords: Ankylosing spondylitis, homoeopathy, joint stiffness

Introduction

Ankylosing spondylitis (ankylos meaning to unite, spondylos meaning vertebra) is the chronic inflammatory disease. It was previously known as Bechterew's disease and Marie-Strümpell disease. The prevalence of this diseases is 0.1% to 0.8% worldwide. The exact cause behind the autoimmune mechanism of this disease is not known but a strong association has been found with the gene HLA-B27. Male preponderance is marked (10:1) in AS. Onset is commonly observed between the age of 20 to 30 years.

Ankylosing spondylitis (AS), is termed as an axial spondyloarthropathy, because of the involvement of the axial joints of the body such as vertebral joints, sacroiliac joints (SIJs) and their adjacent soft tissues, such as tendons and ligaments. The disease generally has an ascending course i.e. from sacroiliac joint to lumbar vertebrae. Pathology in this disease starts with inflammation which further leads to fibrosis and calcification, resulting in the loss of flexibility mobility. The fusion of the spine resembles bamboo and hence the name "bamboo spine". The main clinical manifestations include back pain and progressive spinal rigidity. The disease also has extraarticular multisystemic manifestations such as uveitis, amyloidosis, anemia etc.

Patients suffering from AS lose productivity due to disabilities which they develop over the period of time. This further leads to problems like dependencies, loss of employment and poor quality of life. Timely diagnosis and management of this disease can certainly help to prevent further deterioration of health of the patients and reduce direct or indirect burden on the healthcare system.

Pathophysiology-

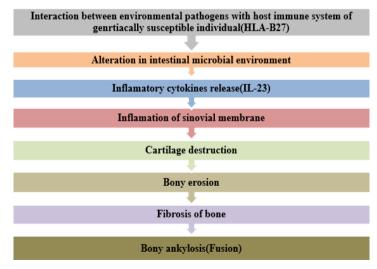


Fig 1: Pathophysiology chart

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Clinical features

In the initial stage of the disease, patient presents with low back pain & decreased mobility of spine. Stiffness & pain generally occurs after rest & relieved by movements. Pain radiates from lower back to buttocks & back of thighs.

In the later stage, deformities of spine & hips are developed. Involvement of cervical spine leads to difficulty in respiration & pleural pain. Secondary osteoporosis leads to brittle spine, vulnerable to fractures or dislocations on trivial trauma. Peripheral asymmetrical arthritis is also present involving bigger joints like hips, knees & shoulder.

In addition to articular manifestations, patient might have following extra –articular manifestations.

- Eye-Recurrent Iritis, Uveitis, Conjunctivitis
- Heart-Aortic incompetence, Cardiomegaly, Pericarditis
- Prostatitis
- Symptoms of spinal cord compression
- Pulmonary (apical lobe) fibrosis
- Osteoporosis
- Amyloidosis
- Anaemia
- Weight loss

Diagnosis

- Clinical tests like Gaenslen's test, Straight leg raising test, Pump handle test, Fle'che test are performed in the OPD setting which will provide physician a clear cut clue on presence of inflammatory disease of joints
- Radiological Examination- X-ray of pelvis & dorsolumbar spine will show changes like haziness, subchondral erosions, sclerosis & bony fusion of affected joint. Calcification of surrounding ligaments & tendons is also noticed. Affected spine takes a characteristic "Bamboo Spine" appearance.
- Erythrocyte sedimentation rate- elevated
- C reactive proteins- elevated
- Mild anaemia
- Presence of HLA- B27
- Autoantibodies for Rheumatoid factor- negative

Homoeopathic approach-

The conventional mode of treatment can offer only pain management with the help of pain killers & NSAIDs that to at the cost of various side effects like nausea, vomiting, weight loss, peptic ulcers etc. Hence a lot of patients prefer alternative therapies like homoeopathy for a substantial relief.

Homoeopathy is based on its time tested principle of Individualisation. Every person reacts differently & in unique manner to any stress. Homoeopath identifies this unique reaction & bases his prescription upon it.

Why homoeopathy for ankylosing spondilitis?

Homoeopathy has very good scope in ankylosing spodilitis especially when pathology has not advanced. Homoeopathic medicines alter the immune response & hence treat the root cause of the disease. The inflammatory process of the joints can completely be reversed at this stage. Whereas in the advanced stage where deformities are developed, homoeopathic medicines can effectively tackle pain & reduce the pace of disease process. These medicines also take care of the other clinical manifestations like anaemia, weight loss etc. & help in maintaining the general well being of the patient. In addition to this-

- Theses medicines are cost effective.
- They reduce the dependency of patient on harmful chemical based medicines.
- Theses medicines are with no side effects even if taken for long duration.

Here are some of the commonly used homoeopathic remedies for ankylosing spondylitis-

1. Rhus Toxicodendron

Patient is having pain between the shoulders especially on swallowing. Small of back is very painful which is better on motion, lying on something hard, worse on sitting. There is a marked stiffness of nape of neck. Lumbago is generally associated with sciatica.

2. Kali Carbonicum

This medicine has a characteristic action on small of back. The small of back feels very weak. Patient feels stiffness & paralytic type of pain in back. Patient complains of lumbago with sudden & sharp pains extending up & down the back & to thighs. Back & legs are so weak that the person feels that it would give out anytime. Pains radiate from hips to knee.

3. Calcarea Fluorica

It is great remedy for osseous tumors & bony overgrowths. Patient will complain of chronic lumbago worse on beginning to move& ameliorated on continued motion. Burning type of pain is felt in lower part of back.

4. Nux Vomica-

This remedy is used for backache especially in the lumbar region. Burning type of pain is present in the spine which is worse at 3 to 4 am. There is characteristic cervico- brachial neuralgic pain which is worse on touch. Patient has to sit up in order to turn in bed. He complains of bruised pain below scapula, sitting is painful.

5. Aesculus-

It is indicated for pain in the lower back especially affecting sacrum & hips. The pain radiates from back to thighs. It is sore & tearing type of pain which is worse on walking & stooping. Patient complains of extreme rigidity of back especially in morning. There is lameness in neck & back, patient feels legs would give out. Backache unfits patient for work. Backache is often associated with haemorrhoids.

6. Natrum muriaticum-

It is one of most commonly prescribed polycrest remedies having a special affinity for back. There is great sensitiveness between vertebrae, relived by lying on back & upon something hard. Patient complains of paralysis from the weakness of spine. Backache is generally worse in morning. Restlessness & debility are marked.

7. Zincum metalicum

It is the remedy for irritability of spine. Patient complains of aching especially at last dorsal vertebra. The pain is worse from sitting rather than from walking. It is the burning type of pain felt along the spine with trembling of the limbs.

Conclusion

Homoeopathy has a wide scope in the treatment of autoimmune diseases like ankylosing spondilitis due to its

efficacy in alteration of immune response of an individual. The stage at which homoeopathic medicines are administered will decide the prognosis of the disease. Commencement of treatment at an early stage would give complete relief whereas at a later stage where deformities have already developed, homoeopathic treatment can give symptomatic relief.

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