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## Homoeopathic management of cerebral palsy

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### Abstract

Cerebral palsy is a congenital disorder which leads to childhood disability affecting function and development. Due to this disability movement, muscle tone or posture gets affected. Homoeopathy medicine plays important role in cases of cerebral palsy and associated comorbidities caused by disease. Homoeopathy medicine prescribe on the basis of individualization or constitutional and therapeutic approach for rehabilitation on muscle tone, constipation associated with cerebral palsy, spasticity management, spastic diplegia, rehabilitation on speech and social development of children and rehabilitation on abnormal reflexes.

**Keywords:** Cerebral palsy, spasticity, rehabilitation, homoeopath

### Introduction

Cerebral palsy (CP) Define as a heterogenous group of disorders affecting the tonicity of muscle, event of movement and posture. This condition is a result of non-progressive damage to the brain in utero or during infantile development up to the age of three years. motor disorders of cerebral palsy mostly accompanied by disturbed sensation, cognition, communication, perception, behavior and seizure disorder. It is a one of the leading cause for child disability. Approximately 30-50% patients of cerebral palsy affected with mental retardation and 15-60% have epilepsy. On the basis of affected brain area it can be spastic, ataxic, or dyskinetic origin.

**Table 1:** Pathophysiology

Major events of human brain development	Peak time of occurrence
Primary neurulation	3-4 week of gestation
Proencephalic development	2-3 month gestation
Neuronal proliferation	3-4 month gestation
Neuronal migration	3-5 <sup>th</sup> month of gestation
Organization	5 <sup>th</sup> month of gestation – years postnatal
Myelination	Birth to years postnatal

### Etiology: Idiopathic (most cases)

#### Risk factors

- Preterm birth and low birth weight of newborns are most important risk factors.
- TORCH infection
- Perinatal complications due to birth trauma, intra-cerebral hemorrhage and chorioamnionitis.
- Perinatal asphyxia
- Intracranial hemorrhage
- Structural abnormality of the brain
- Neonatal seizures
- Kernicterus
- Postnatal infection (e.g., meningitis, encephalitis)

### Classification

It classified on the basis of resting tone and what limbs are involved

- Spastic cerebral palsy:
  - Spastic paresis of one or more than one limbs (75% of cases)
- Non-spastic cerebral palsy:

- Dyskinetic: (10-15%) abnormal involuntary movements (choreoathetoid, dystonic)
- Ataxic: (5%) intention tremor, lack of coordination and balance

**Table 2:** Clinical features

Mixed type (spastic and athetoid CP)	Spastic CP	Non-spastic CP
Patients don't reach certain milestones Intellectual disability (50%) Seizure disorder (35%–50%) Joint contractures Attention deficit hyperactivity disorder	Increase muscle tone in one or additional limbs Increase DTRs Persistence of primitive reflexes (positive babinski sign) equinus deformity Muscle weakness and/or atrophy Scissor gait (due to spastic paraplegia of the hip adductors) Hip dislocation Scoliosis Hearing or vision impairment	Abnormal involuntary movements that worsen due to stress and disappear with sleep Chorea Athetosis Dystonia Ataxia Dysarthria Dysphagia

Seizure disorders and intellectual disability are related to all kinds.

### Diagnosis

Laboratory studies: although diagnosis of cerebral palsy made based on the clinical picture. Laboratory studies only for rule out other symptom causes. It includes:

- Thyroid function test
- Lactate and pyruvate levels
- Ammonia levels
- Organic and amino acids
- Chromosomal analysis

Imagine studies:

- Cranial ultrasonography: performed in the early neonate only.
- Computed tomography scanning of brain
- Magnetic resonance imaging of the brain

### Homeopathic management

#### Calcarea phosphorica

One altogether the foremost very important tissue remedies, and whereas its many symptoms in common with Calcarea carb, there are some variations and characteristic choices of its own. Its notably indicated in behindhand dentition and troubles incident thereto period, bone illness non-union of broken bones, and so the anemia once acute diseases and chronic wasting diseases. Anemic kids who are peevish, flabby, have cold extremities and feeble digestion. it's a special affinity where bones sort sutures or symphyses, and everyone its symptoms are worse from any modification of weather. Symptom and travel are characteristic sensations, and tendency to perspiration and organ enlargement are symptoms it shares with the carbonate. Scrofulosis, iron deficiency anemia and white plague

#### Arsenicum album

Trembling, twitching, spasms, weakness, heaviness, uneasiness. Cramps in calves. Swelling of feet. Sciatica. Burning pains. Peripheral neuritis. Diabetic gangrene. Ulcers on heel (Cepa; Lamium). Paralysis of lower limbs

with atrophy.

#### Baryta carbonica

This remedy brings aid to scrofulous children, especially if they are backward mentally and physically, are dwarfish, do not grow and develop, have scrofulous ophthalmia, swollen abdomen, take cold easily, and then always have swollen tonsils. Persons subject to quinsy which is prone to suppurate; gums bleed easily. Affects glandular structures, and useful in general degenerative changes, especially in coats of arteries, aneurism, and senility. Baryta is a cardiovascular poison acting on the muscular coats of heart and vessels. Arterial fibrosis. Blood-vessels soften and degenerate, become distended, and aneurisms, ruptures, and apoplexies result.

#### Agaricus muscarius

Stiff all over. Pain over hips. Rheumatism better motion. Weakness in loins. Uncertain gait. Trembling. Itching of toes and feet as if frozen. Cramp in soles of feet. Pain in shin-bone. Neuralgia in locomotor ataxia. Paralysis of lower limbs, with spasmodic condition of arms. Numbness of legs on crossing them. Paralytic pain in left arm followed by palpitation. Tearing painful contractions in the calves.

#### Tuberculinum

Adapted to the light-complexioned, narrow-chested subjects. Lax fiber, low recuperative powers, and really vulnerable to changes within the weather. Patient always tired; motion causes intense fatigue; aversion to work; wants constant changes. Rapid emaciation. Of great value in epilepsy, neurasthenia and in nervous children. Diarrhoea in children running for weeks, extreme wasting, bluish pallor, exhaustion. Mentally deficient children. Enlarged tonsils. Skin affections, acute articular rheumatism. Very sensitive, mentally and physically. General exhaustion. Nervous weakness. Trembling. Epilepsy. Arthritis.

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