Homoeopathic approach to pernicious anaemia: A Review

Dr. Sneha B Bevinamarad

Abstract
In the recent years considerable increase in the number of cases of pernicious anaemia has been recorded. Its prevalence increases with the age especially over the age of 60 years. It is one of the autoimmune conditions causing destruction of parietal cells, which is treated by administration of vitamin B12 intramuscularly or through oral supplementation. But this is not the curative treatment as the patients will have to continue with similar treatment throughout the life. As homoeopathic medicines treat the individual and not the condition or diseases, they help body in establishing the normal secretion of intrinsic factor and hence correct the deficiency. Skilful selection of the rubrics from various Repertories, suitable for such conditions play an important role in prescribing medicines to get the best result. Few of such repertories are discussed in this review.

Keywords: Pernicious anaemia (PA), Vitamin B12, Homoeopathic approach, Homoeopathic Medicines, Repertory, Rubrics, Biermer’s disease

Introduction
Pernicious anaemia is an organ specific autoimmune disorder resulting from impaired uptake of vitamin B12 due to deficiency of intrinsic factor. This deficiency of intrinsic factor is a result of loss of parietal cells in gastric mucosa. Most commentators believe that in the modern world around 10% of the population is deficient in this essential vitamin, however, it is impossible to say in how many people deficiency will be caused by Pernicious Anaemia.[1-6]

The aim of studying this topic is to review the literature of the condition from Homoeopathic point of view.

2. Pathogenesis: It is the result of an autoimmune reaction against the gastric parietal cells for which exact cause is unknown. Abnormal auto antibodies such as anti-parietal antibody and anti-intrinsic factor antibodies are formed which leads to low absorption of Vitamin B12.

Fig 1: Diagrammatic representation of metabolism of Vitamin B12 [23]
Vitamin B<sub>12</sub> helps in the production of RBCs and keep neurons healthy. If goes untreated for long period, deficiency leads to permanent damage to nerve cells or degeneration of spinal cord and other organs. The incidence of pernicious anaemia is high in patients with other autoimmune diseases like Graves’s disease, vitiligo, myxoedema, thyroiditis or family history of these or of pernicious anaemia.

3. Clinical features: [1, 3, 4]
- Anaemia
- Glossitis
- Neurological abnormality–neuropathy, subacute combined degeneration of the spinal cord,
- Cerebrum: dementia, optic atrophy
- Peripheral nerves: glove and stocking parasthesia, loss of ankle reflex
- Gastrointestinal manifestations–anorexia, diarrhoea, weight loss, dyspepsia etc.

4. Diagnosis; [1, 2, 3, 6]
The condition is diagnosed usually based on:

4.1 History
- Medical
- Family

4.2 Physical Examination

4.3 Investigations

Haematology
- Complete Blood Count: Macrocytic anaemia with leucopenia and thrombocytopenia if seen.
- Blood film: shows oval macrocytes with variation in RBC size.
- Bone marrow aspirate: hypercellular with erythroid hyperplasia and increased early erythroid precursors seen.

Biochemistry
- Low levels of Serum Vitamin B<sub>12</sub>
- High levels of homocysteine and methylmalonic acid (MMA) is a sign of Pernicious anemia

Immunology [2]
- Parital cell and intrinsic factor antibodies are confirmatory findings in Pernicious anaemia.

5. Treatment [21]
In severe anaemia, intramuscular administration of vitamin B<sub>12</sub> is given as initial doses of hydroxocobalamin is 1000µg once a month or 1000µg of cyanocobalamine once in 3 months indefinitely.
In less severe cases Vitamin B<sub>12</sub> is given orally at 1000-2000µg of orally, daily for 1 month.
Supplementation of Vitamin B<sub>12</sub> has to be continued throughout the life in case of pernicious anaemia
Supportive therapy includes blood transfusion, treatment of infection and physiotherapy when nervous system is involved as per presentation.

6. Homoeopathic Approach
As stated by Dr. Hahnemann in aphorism177 where he has guided regarding the treatment of such one-sided diseases he writes, “In order to meet most successfully such a case as this which is of very rare occurrence, we are in the first place to select, guided by these few symptoms the medicine which is our judgement in the most homoeopathically indicated”. [7]
Thus he meant to say that it is not possible to prescribe constitutional medicine in each and every case especially in one sided diseases or in advanced pathological conditions, where we can’t get the clear picture of the patient, and we have to prescribe the medicines based on the few presenting symptoms. In such cases it is inevitable to take the help of clinical repertoires to get the group of medicines. In order to arrive to the group of medicines with the help of clinical repertoires, symptoms are converted into rubrics. Group of medicines are further narrowed down based on the modalities and concomitants, with reference to Materia medica.

6.1 Repertoire approach
Very few repertoires have given this condition as a direct rubric
1. Boericke’s Repertory [8]: Section–Generalities (page 1336)
Anemia- Pernicious - Ars, Phos, Picr.acid, Thyr

2. Murphy’s Repertory [9]: Section–Clinical (373page)
Murphy’s concept of totality is based on clinical as well as classical approach hence pathological conditions or rubrics are directly given in this repertory.
Anemia, pernicious, anemia: Ars, Calc, Carc, Cort. H, Mang, Nat. M, Phos, Pic Acid, Thyr, Trinit hereditity, family, in-Carc

Anemia – pernicious – Ars, Calc, Carc, Crot-H, Ferr-Pic,
Mang, Med, Nat-M, Phos,
Pic-Ac, Rad-Br, Thyr
family in – car

Anemia – production of red cells impaired: Pernicious –Ars, Alpi, Cadm-s, Calc, Calc-p,Carc, Cean, Chloram, Chorpr,
Crot-h, Ion-rad, Lyc, Mag, Menth-pu, Med, Nat-m, Phos,
Pic-ac, Pitu-a, Stann, Thyr, Trinity, X-ray
Pernicious: Hereditary - carc

5. Clarke’s Clinical Repertoryto the Dictionary of Materia Medica[13](page 36)
Anemia, Acute pernicious – phos, pi.x, thyr

Anæmia - pernicious - Ars, phos, Pic-ac, thyr

Blood – Anaemia –progressive Pernicious – pic-ac
Blood – Anaemia – pernicious, in constitutions broken down by gonorrhoea, syphilis, alcohol, etc, tendency to haemorrhage from gums, mucous membranes and skin,
blood non-coagulable- crot-h

6.2 Therapeutics
Arsenicum album: This being a direct poison to the red blood corpuscles takes first rank in cases of pernicious. It produces the destructive inflammation of every part of body where mucous membrane is found. The changes produced in
the blood are most marked. Arsenic disintegrates the blood corpuscles. According to Schmitt, it retards the waste of RBC.


[4, 17, 18, 20]

**Picric acid:** Progressive pernicious anaemia. The extreme prostration of pernicious anaemia, with a heavy tired feeling all over the body, burning pains along the spine and aggravation from excitement indicate this remedy. Anemia, Anaesthesia of legs as if one has on elastic stockings. Muscular debility. Aversion to food. Great weakness especially in legs. Feet cold. [8, 16, 17, 20]


**Crotalus horridus:** This venom causes disorganisation of blood leading to haemorrhages and jaundice. Blood decomposition. Tongue fiery red, dry in centre, smooth and polished. Vertigo with weakness and trembling. Face yellow with death like pallor. Ulcerations of stomach with constant nausea and vomiting. Palpitation with trembling feeling of heart. Feeble Pulse. Patient is irritable with deranged state of vitality. Tendency to syncope. Easily tired by slight exertion. Old age nutritional troubles. Purpura heamorrhagica. Skin is cold and dry. [8, 16, 17, 18]


**Carcinocinum:** It is more useful in cases where family history of pernicious anaemia is found. Palpitation even a short walk exhaust, can feel the heart and hear it on lying down. [19]

7. Conclusion
From the observations made during this review it is very clear that we have good number of remedies which can create wonders in treating the patients of pernicious anaemia. Holistic approach of homoeopathy is very useful in treatment of such conditions as it not only removes the symptoms of the diseases but cures the disease completely. The above study indicates the usefulness and application of remedies like arsenicum, picric acid, phosphorus, crotalus and thyroidinum in the treatment of pernicious anaemia whereas carcinocinum is more useful when there is family history of pernicious anaemia.

There are very few repertories which have considered this condition and given in the direct rubric form which include not many medicines under them. Also, the therapeutics about the medicines like thyroidinum and carcinocinum is not found in detail and there is need for evidence-based study about the effectiveness of these medicines in pernicious anemia.

Hence there is need for the clinical verification of more medicine which can be useful in pernicious anaemia so that our repertories are updated with clinical conditions which is the need of the day.

References
4. Dr. Balan MS. Treat Vitamin B12 deficiency through Homoeopathy. Homoeopath the friend of Health; Dr. N.V. Sugathan, Tamil Nadu, Sept 2018; (69):25-27.
12. Software: RADAR opus Program and Databases Version 1.38 (DVD ROM)