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Allergic rhinitis and its homoeopathic approach

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Abstract

Allergic rhinitis is characterized by sneezing, rhinorrheoa, obstruction of nasal passage, conjunctival, nasal and pharyngeal itching, lachrymation, all occurring in temporal relationship to allergen exposure. Although commonly seasonal due to ellicitution by airborne pollens, it can be perennial in an environment of chronic exposure. Allergic rhinitis occur in an atopic individual. The conclusion drawn from this article is how Homoeopathy can manage allergic rhinitis and advisable for permanent and effective result.

Keywords: Allergic rhinitis, homoeopathy, similimum, therapeutics, hay-fever

1. Introduction

There are multiple disease which reappear at certain time of period like allergic rhinitis, atopic dermatitis, ringworm, bronchial asthma and other diseases. But with the help of Homoeopathic management we can lessened the effect of the condition. Usually any disease like allergic rhinitis which occur in a single patient at a time usually not seen epidemic or sporadic. They are either of psoric or sometime complicated with sycotic or syphilis also.

2. Definition

It is an Ig-E mediated immunological response of nasal mucosa to airborne allergens and is characterized by watery nasal discharge, nasal obstruction, sneezing and itching in nose. This may also be associated with symptoms of itching in eyes, palate and pharynx.

3. Common Allergens

Grass Pollen, Dust Mitesnimal Saliva, Animal dander, Mold

4. Pathophisiology

Inhaled allergens produce specific IgE antibody in the genetically predisposed individuals. This antibody becomes fixed to the blood basophils or tissue mast cells. This reaction produces degranulation of the mast cells with release of several chemical mediators. These mediators are responsible for symptomatology of allergic disease. Depending upon the tissues involved, there may be vasodilation, mucosal oedema, infiltration with eosinophils, excessive secretion from nasal glands or smooth muscle contraction.

4.1 Phases of allergic response

4.1.1 Acute or Early phase

Duration- 5- 30 minutes. Symptoms includes- sneezing, pruritus and clear rhinorrhea and nasal blockage and/or bronchospasm. Mediator- Histamine appears to be a major mediator.

4.1.2 Late or delayed phase

Duration- begins in 2 to 8 hours and subsides in 12 to 24 hours.

Symptoms- sneezing, nasal obstruction, lacrimation, etc.

Mediator- chemokines and cytokines play a major role. Eosinophil activates release of leukotrienes which develops nasal congestion.

5. Types

5.1 Seasonal –Symptoms appear in or around a particular season or only for a limited period

of the year. It is also called as intermittent allergic rhinitis. It is caused by sensitivity to airborne mold spores or to pollens from trees, grasses or weeds

5.2 Perennial – It remains throughout the whole year. It is also called as persistent allergic rhinitis. It is generally caused by sensitivity to dust mites, pet dander, mold or cockroaches.

6. Clinical Features

There is no age or sex predilection. It may start in infants as a young as 6 months or older people. Usually the onset is at 12-16 years of age.

Signs of allergy may be seen in the nose, eyes, ears, pharynx or larynx.

6.1 Nasal signs

Include transverse nasal crease- a black line across the middle of dorsum of nose due to constant upward rubbing of stimulating a salute (allergic salute), pale and oedematous nasal mucosa which may appear bluish. Turbinates are swollen. Thin, watery, or mucoid discharge is usually present.

6.2 Ocular signs

Include oedema of lids, congestion and cobblestone appearance of the conjunctiva, and dark circles under the eyes (allergic shiners).

6.3 Otologic signs

Include retracted tympanic membrane or serous otitis media as a result of eustachian tube blockage.

6.4 Pharyngeal signs

Includes granular pharyngitis due to hyperplasia of submucosal lymphoid tissue. A child with perennial allergic rhinitis may show all the features of prolonged mouth breathing as seen in adenoid hyperplasia.

6.5 Laryngeal signs

Include hoarseness and oedema of the vocal cords.

7. Risk Factors

Genetic factors. Environmental factors.

Production of IgE.

8. Factors Triggering

Fumes
Humidity
Sprays
Temperature changes
Cold climate
Humidity
Air pollution

9. Physical Examination

On physical examination, it may show following: Conjunctival swelling.
Nasal polyps or enlarged nasal turbinates.
Swelling of the eyelids.
Middle ear effusion

10. Diagnosis

A detailed history taking along with the following

investigations may help to confirm the diagnosis:

10.1 Skin-prick testing

A small amount of a set of known allergens is injected into the dermis and any "weal and flare" reaction is taken as a positive result to that allergen.

10.2 Blood test

RAST (Radioallergosorbent test) detects specific circulating IgE antibodies.

10.3 Nasal smear

It may reveal large number of eosinophils and presence of neutrophils.

11. Differential Diagnosis

Atrophic rhinitis
Bacterial rhinitis
Viral rhinitis
Vasomotor rhinitis
Hormonal rhinitis
Gustatory rhinitis
Rhinitis medicamentosa

12. Complications

Nasal allergy may cause:

Recurrent sinusitis because of obstruction to the sinus ostia. Formation of nasal polypi in about 2%.

Serous otitis media.

Orthodontic problems and other ill-effects of prolonged mouth breathing especially in children.

13. Management

Exposure to dust or exposure to any allergen as much as possible.

Wearing mask may prevent entering the allergens.

Use of glasses or sunglasses.

14. Homoeopathic Therapeutics

In Homoeopathy any of the remedies can be used for any of the disease conditions if it is similar to the totality (whether acute chronic). Homoeopathy with the person as a whole, not on the nosological name. Hence non of the remedies can be specifically used for allergic rhinitis. Here we are only pointing out remedies which are most often used for this condition and has a prominent action on respiratory symptoms of allergic rhinitis.

14.1 Allium Cepa: Sneezing, especially when entering a warm room. Copious, water and extremely acrid discharge. Feeling of a lump at root of nose. Hay-fever (Sabad; Sil; Psor). Fluent coryza with headache, cough, and hoarseness. Polypus. Ailments from- damp cold winds or colds and odors of *flowers*. Profuse watery, acrid nasal discharges with burning, redness, rawness of the wings of nose and upper lip. It starts on the left side and goes to the right. Sensation of fullness in the nose due to congestion with occasional epistaxis. Bland lachrymation.

14.2 Arsenicum Album: Thin, watery, excoriating discharge. Nose feels stopped up. Sneezing without relief. Hay-fever and coryza; worse in open air; better indoors. Burning and bleeding. Acne of nose. Sneezing. Tingling in the nose. Burning pain in the eyes with burning acrid

lachrymation. Hardness of hearing and buzzing before the ears from nose blows. Mental and physical restlessness. Irritability. Prostration. Dryness of the mouth with thirst for cold water. White or yellowish coated dry tongue. Bitter taste in mouth, <morning. Burning in the chest < lying down, <open air, <wet weather, <change of weather, >closed rooms, >heat. Cannot lie down for fear of suffocation. Exhaustion from least exertion. Periodical hayfever <cold in any form. Old and chronic catarrh with nose bleed and ulceration. Headache. Cannot bear the sight and smell of food." "Sneezing without relief". Kent says, "it is difficult to separate nose symptoms from the throat symptoms. The cold begins in the nose and goes down in the throat."

14.3 Euphrasia Officinalis: Profuse, fluent coryza, with violent cough and abundant expectoration. *Ailments from - windy weather and cold air*. Sneezing and fluent coryza <night while lying down, with cough and expectoration. Obstruction of the nose. Profuse secretion of mucous from both anterior and posterior nares. *Acrid lachrymation with photophobia*. Aching in the eyes with redness and itching. Catarrhal headache. Swelling of nasal mucous membrane. <Warmth, light, <night, <lying down, >coffee (though warmth aggravates).

14.4 Hepar Sulphur: Soreness of nostrils, with catarrhal troubles. Sneezes every time he goes into a cold, dry wind, with running from nose, later, thick, offensive discharge. Stopped up every time he goes out into cold air. Smell like old cheese. Hay-fever (Heparlx will often start secretions and profuse drainage in stuffy colds). Inflammation and swelling of the nose with redness. Pain in the nose "as of a bruise" <touch. Increased power of smell. Coryza mainly on one side along with roughness in the throat. Weariness in all the limbs. Fever may or may not accompany. Sneezing with running nose on slightest (every) exposure to cold or dry wind. Ulcerated soreness of nostrils.

14.5 Pulsatilla Partensis: Coryza; stoppage of right nostril, pressing pain at root of nose. Loss of smell. Large green

fetid scales in nose. Stoppage in evening; abundant in morning. Bad smells, as of old catarrh. Nasal bones sore. Soreness in the nose. Ulceration of nostrils and of the alae nasi. Greenish or yellowish foetid nasal discharge, <morning, <evening. Cannot breathe when in closed rooms, >open air. Obstruction of nose occasionally present. Loss of taste and smell. Constant shivering. Pain in the nasal bones. Thirstlessness. Chill, fever and sweat sometimes may be present. Chronic catarrhs.

14.6 Sabadilla: Spasmodic sneezing, with running nose. Coryza, with severe frontal pains and redness of eyes and lachrymation. Dryness of upper nose. *Sensibility to smell garlic*. Confusion of mind. Lachrymation. White watery profuse mucous discharges from nose. Influenza. Hay-fever. Nose bleed (bright red blood) from posterior nares. Severe frontal pain. Redness of eyes. Burning and obstruction of nose, *<odors of flowers, <odor of dye, >*inhaling air. Prolonged coryza. Periodical attacks (june or august). Itching in the nose.

15. Essential of Case Taking

Preliminary data

Chief complaint – Location, Sensation, Modality, Concomitant (Complete Symptoms).

Past History
Family History
Physical General
Mental Generals
Physical Examinations
Systemic Examination
Totality of Symptoms
Medicine Prescribed

16. A Case Study

16. 1 Preliminary Data: Mrs. PST 21/F, a student comes to the clinic with complaint of allergic rhinitis since7-8 months.

16. 2 Chief complaints

Sr. No	Location	Sensation	Modality	Concomitant
1	Nose	Sneezing (10-15 times/episode)	<dust++< td=""><td></td></dust++<>	
2	Nose	Coryza- watery thin discharge	< cold water++, change of weather+++	Headache especially temporal and frontal.
3	Eves	Acrid Lachrymation		

16.3 Past history

Dengue fever before 1 year.

16.4 Family history:

Mother: Allergic rhinitis, Thyroid.

Father: Asthma

16.5 Physical generals

Appetite: Adequate (3 times/day)

Desire: Spicy+++. Aversion: Not specific Thirst: 1-2 lit/day Urine: 7-8 times/day Stool: once/day

Perspiration: All over body

Sleep: Sound

Dreams: Not remember

Thermal: Chilly

Menstrual history: Regular 4-5 days/28 days

16.6 Mental generals

Extroverted

Hobby: music, travelling.

Fearfull

Anxiety about her health Fastidious to do her work

Hasty speech

16.7 Physical examination

General Examination:

Level of Consciousness: Conscious and oriented

Intelligence level: Good

Nutritional level: well-nourished

Weight: 45 kg

Nails: Pink

Tongue: Moist Pink

Height:4'8' Conjuctiva: Pink

Vitals:

Pulse rate: 80/min

Blood Pressure: 110/70 mm of hg Respiratory rate:18-20/min

SPO2 level: 98% Temperature: 37*F

16.8 Systemic examination:

Respiratory system: Air Entry Bilateral Equal

Gastrointestinal Tract: p/a soft

Central Nervous System: Conscious and oriented

Cardio Vascular System: S1S2 heard

Genito Urinary System: Nothing abnormal detecte Locomotor system: Nothing abnormal detected

16.9 Totality of symptoms

Fearful

Anxiety about her health

Fastidious Desire: spicy

Sneezing < dust, cold air Coryza– discharge thin watery

Coryza <cold water, dust, change of weather, from entering

in cold room.

16.10 Prescription: (Non Repetorial Approach) 15/10/2020

Rx.

- 1. Arsenic Alb 200 1 dose stat
- 2. **Rubrum**

4-0-4-0 for 15 days

16.11 Posology

Susceptibility of the Patient: Moderate (because of age, sex,

functional disturbance). Potency choice: 200

16.12 Follow UP

Date	Symptoms	Prescription
30/10/2020	1. Sneezing 5 times/episode 2. coryza-watery discharge decrease from every day to 3-4 days of interval 3. lachrymation decreases	Rubrum 4-0-4-0 for 15 days
14/11/2020	1. sneezing 7 times/episode 2. watery discharge from nose increases.	1.Arsenic Alb. 200 1 dose Stat 2.Rubrum 4-0-4-0 for 15 days
29/11/2020	Patient feels better 1. Sneezing 3 times/episode 2. Coryza decreases	Rubrum 4-0-4-0 for 15 days
13/12/2020	Sneezing and Coryza decreases as compared to last follow up	Rubrum 4-0-4-0 for 15 days
26/12/2020	Patient Improved 80-90% No Fresh complaint	Rubrum 4-0-4-0 for 7 days and than stopped.

17. Conclusion

Allergic disorder are on the rise and have a significant impact on the quality of life. Allergic rhinitis can lead to other comorbidities such as Asthma and Sinusitis if not treated apropriately. According to organon of Medicine, Disease is nothing but totality of symptoms and removal of this symptoms totality in its entire is cure. So in Homoeopathic Mode of treatment disease like allergic rhinitis can also manage and gives a definite results.

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