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# A case report-utility of homoeopathy in case of idiopathic juvenile arthritis

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#### **Abstract**

Autoimmune diseases emerging as new medical challenges in present era. Children are nowadays new victim of it. Juvenile idiopathic arthritis, one of the autoimmune diseases is the most common chronic disease of childhood and has a strong adverse effect on bony development in the growing child. Juvenile rheumatic arthritis encompasses a heterogenous group of disease that is classified according to three major presentations: Oligo-arthritis, Polyarthritis and Systemic onset disease. The conclusion drawn from this article is how homoeopathy has the potential to manage Juvenile idiopathic arthritis and give effective results to the affected children.

Keywords: Juvenile rheumatic arthritis, polyarthritis, homoeopathy

#### Introduction

'JIA' means Juvenile- the arthritis begun before the age of 16, when a young person with JIA turn 16, they still have JIA because the condition is different from adult type of arthritis. Idiopathic - means the cause is unknown. Arthritis -means that one or more joints are inflamed, usually for at least 6 weeks. Juvenile idiopathic arthritis is the most common rheumatic childhood disease. Juvenile idiopathic arthritis is the most common rheumatic childhood disease classified according 3 major presentations: Oligo-arthritis, Polyarthritis and Systemic onset disease. Prevalence of JA is reported as 0.07 to 4.01 per 1000 children. Annual incidence is reported as 0.008 to 0.226 per 1000 children in world wide. The estimated prevalence of JIA in India is 48/100000. While the western studies suggest that JRA is more common in girls, in India the ratio appears to be almost equal. The purpose of the investigation is to treat the Juvenile idiopathic arthritis of any type safely, quickly, and permanently and give better results to affected patients.

# **Materials and Methods**

### **Inclusion Criteria of Study**

The Patient with less than 16 years of age. Cases of JIA along with other complaints.

# **Exclusion criteria of Study**

The patient with more than 16 years of age.

# Method of collection of cases

We collected the cases in which we studied the sign and symptoms of patient that must match with sign and symptoms of JRA out of which we have presented one of the cases.

### Method of study

We only studied symptoms and sign of the patient that must match with Juvenile Idiopathic Arthritis. We took all physical generals of patient. We took all mental symptoms of patient. After making totality with the use of physical generals and mentals we reached on.

# **Constitutional Remedy**

Actions of our Constitutional remedy showing in regular follow ups.

# Type of design

Retrospective study.

**CASE** 

Preliminary data

Case no: 1 Define no: 7420 Date: 21/11/2019

Name: MISS S Age: 13 Sex: F

Education: 10<sup>th</sup> std Occupation: student

Status: Single Religion: Muslim Diet: Veg, N.V

Father: S Mother: A

# Chief complain

Table 1: Chief Complains

No	. Location	Sensation & Pathology	Modalities A.f, <, >	Accompaniments
1.	MSS Right knee Left knee Right shoulder Left shoulder Right and left ankle O: 2 months D: continuous F: gradually increase  All complaints started at the age of 2 years that is increased in the last 2 months	15 to 20 minutes	<*2 humid weather <*3 night after 7 pm <*3 walking <*2 sour food <*3 while doing namaz <*3 lying on affected side >*2 massage Himalaya >*2 warm water application > fan and season	Appetite: decreased Thirst: decreased Stool: normal Urine: normal Sleep disturbed by illness Headache+3 due to sleep disturbed Eye pain and ear pain Weakness+2

### Physical characteristics

Appearance: Lean thin fair complexion. Wt. gain/ loss: loss in the last one month.

PERSPIRATION: General- Scanty, Partial- Forehead+2, Both palm+2

Thirst: Decreased Appetite: Decreased Hunger: Can't tolerate+2

Craving: Fried chicken+3, Chinese Rice+3, Pickles+2, Cold drinks+2. Sour food+3

Aversion: Daal+3, Fish+3, Tea+3, Milk+3

STOOL: Normal Urine: normal.

SLEEP: Duration: 10:30pm to 8:30am. Position: Supine. Sleep Disturbed: by joint pain Talking in sleep: occasionally<sup>+2</sup>

DREAMS: Not remembered.

Menstual History: F.M.P: 10<sup>th</sup> standard. L.M.P: 3/11/2019. Menses: Regular. Cycle: 7days. Flow: scanty. Color of menses: dark red. Clots: present. Stains: washable. Odor: offensive+

Leucorhoea: Character- white. Menses before 2days. Pain-Backpain<sup>+2</sup>

Mother's obstetric history: Gravida: 3. Para: 3. Abortions: 0.

Live:3

Diet and daily routine:8 am to 8.30 am: Awaking.9 am: Breakfast.1 pm: Lunch.7.30 pm: Dinner 10 pm: Sleep.

# Investigations

Table 2: Investigations

DATE	14/11/19	30/1/2020	30/7/2020
HB	10.00	10.60	11.20
RBC	3.75	4.10	4.40
WBC	11000	10400	7100
Platelets	348000	423000	458000
ESR	40	33	16
S. Uric Acid	-	-	2.9
S. Creatinine	-	1	-
RA	19	19	10
CRP	69	65	59.90

# Life space

Patient was born and brought up in a town Jambusar,

Gujarat, India. Her family consists of her father, mother, grandmother and three young sisters. Her interpersonal relationship with her mother and siblings were good. Her father gets angry on her quite often and he uses abusive words. Patient left the town and went to Baroda for fashion designing course. She was mentally and physically abused by her father. She can share things and cry only in front of her mother. She was unable to express her feelings in front of her father. She is passionate about paintings and fashion designing.

#### Family history

Paternal Grand Mother: diabetes mellitus, hypertension.

Maternal Grand Mother: diabetes mellitus.

Cousin Brother and Sisters: juvenile idiopathic arthritis.

# Physical examination

TEMP: AF PULSE: 82/min WEIGHT: 38kg CONJUCTIVA: Pink

NAIL: Pink

TONGUE: Pink moist

# **Systemic examination**

Respiratory: NAD, PER ABDOMEN: CVS: S1S2 normal, CNS: NAD Musculo Skeletal Sysytem: Right knee: crepitation++, Left knee: crepitation++, SLRT: Rt++, Lt+, Febar test: positive, Shoulder ROM: 60degree restricted, ROM: Rt Lt ++, painful++, Swelling: RT knee +

### Diagnosis: Juvenile idiopathic arthritis (polyarthritis)

Table 3: Diagnosis

Age	2 years
Joint affected	Polyarthritis
Swelling	Present
stiffness	Present
Pain	Present
ROM of shoulder	restricted
investigation	RA, ESR, CRP

# **Totality**

A/F: Suppressed anger+2 Anxiety: About own future

Forsaken feeling+2 Rebellious+2 Artistic+2

Lamenting- Appreciated, because she is not+2

Fear: Insects+2, Father+3

Sleep: Back on, Sleep Disturbed by headache+2, Talking+2 Occasionally, Starts+2 (When lying on affected side)

Hunger can't tolerate

Nausea: Smell of fish+2, milk+2

Perspiration: Palm+2 Aversion: Tea+2

Craving: Chicken+2, Cold drink+2

Thermal: Chilly patient

Menses: Offensive+2, Scanty+2

Before menses: Abdominal pain+2, Leucorrhea+2

During menses: Abdominal pain+2 Leucorrhea: Pain in back+2 Joints pain >+3 Warmth application

# Repertorial representation

- 1. Mind-A/F-Anger-Suppressed
- 2. Mind-Anxiety-Future about
- 3. Mind- Art-Ability for
- 4. Mind-Fear-Insect of
- 5. Mind-Forsaken feeling
- 6. Mind-Lamenting-appreciated, because she is not
- 7. Mind-Rebellious

- 8. Mind-Talking-sleep, in
- 9. Stomach-Fasting-aggravate
- 10. Stomach-Nausea-food-smell of-fish
- 11. Stomach-Nausea-milk-aggravate
- 12. Abdomen-Pain-menses-before-aggravate
- 13. Abdomen-Pain-menses-during-aggravate
- 14. FGUT-Leukorrhea-menses-before-aggravate
- 15. FGUT-Pain-menses-backache, with
- 16. FGUT-Menses-offensive
- 17. FGUT-Menses-scanty
- 18. Extremities-Heat-hands-palms
- 19. Extremities-Pain-joints-warmth-amel
- $20. \ Extremities-Perspiration-hand-palm$
- 21. Sleep-Disturbed-pain; by-headache
- 22. Sleep-Position-back,
- 23. General-Food and Drinks-Chicken-Desire
- 24. General-Food and Drink-Cold drink, Cold water-desire
- 25. General-Food and Drink-tea-aversion

#### repertorial result

Phosphorus - 35/19 Sulphur - 33/18 Pulsatilla - 31/16 Nat. Mur - 25/16 Nux vomica - 29/15 Calc. Carb - 31/14

Acute remedy: RHUS TOX Remedy differentiation:

Table 4: Remedy Differentiation

PHOS.	NAT. PHOS.
A/F: suppressed anger, anxiety about own future, artistic, fear: insects,	A/F: suppressed anger, anxiety about future, fear: insects, forsaken
forsaken feeling, talking in sleep, BM and DM: abdominal pain,	feeling, talking in sleep, nausea- milk agg., BM and DM: abdominal
leucorrhoea: before menses agg., menses: offensive, scanty, heat on	pain, leucorrhoea: before menses agg., menses: scanty, heat on
palms, joint pain > warmth, perspiration- on palm, sleep disturbed by	palms, perspiration- on palm, sleep disturbed by headache, sleep on
headache, sleep on back, cr- chicken, cold drink, av-tea, chilly patient	back, cr chicken, cold drinks, ambithermal, religious child

# Planning & programing

Table 5: Planning and Programing

	Define with reasons the states	Potency Choice	Repetition
1.	Susceptibility (tissue)	Low - moderate	Infrequent
	Age:13 year Sex: female SOD: structural reversible POD: gradual	0/1-30	
2.	Sensitivity (Mind & Nerves)	Low – moderate	infrequent
	Mind: +++ Nerve: +	0/1-30	
3.	Correspondence (degree & level)	Const. Rx	
	Physical+++ Mental+++	low Nat phos0/1	infrequent
4.	Functional changes		
5.	Structural changes	Low	
	Present reversible	0/1	infrequent
6.	General vitality	High	
	Good	1M	infrequent
7.	Presentation-A. Fundamental miasm	Moderate	
	Sycotic GMo: DM, HTN Cousin Bro, Sis: JIA	200	Infrequent
	B. Dominant miasm	Low - Moderate	
	Sycotic	0/1-30	infrequent

# Entry-first Rx with date 14/11/2019: SL 1P HS/1WEEK.

SL TDS/1WEEK

# Criteria

- 1. [A]Symptoms
- 2. Appetite
- 3. Thirst
- 4. Sleep
- 5. Pain: Knee left/right 6. Pain: Shoulder left/right7. Pain: Ankle left/right

8. Morning stiffness: Knee left/right Morning stiffness: Shoulder left/right 10. Morning stiffness: Ankle left/right

11. Allo. Rx.

12. [B]On Examination

**ROM:** Shoulder

Swelling: Knee left/right Swelling: Ankle left/right

**Follow UPS** 

Table 6: Follow ups

1	D 4				Sympto	ms -changes							Prescription
101110    B	Date		1	2	3	4	5	6	7	8	9	10	•
B	01/11/16	Α	N	N	N	>+	>+	>+	>+	>+	>+	-	RHUS.TOX 200 QDS 3PILLS
101119	21/11/19	В	restricted	+/+	+/+								SL TDS/1 WEEK
B	20/11/10	Α	N	N	N	>+	>+	>+	>+	>+	>+	1	RHUS TOX 200QDS 3PILLS
12/12/19   8	30/11/19	В											SL TDS/2 WEEK
No			N		N	>+	>+	>+	>+	>+	>+	-	
A	12/12/19	В	restricted										SL TDS /1WEEK
28/12/19   B													
28/12/19   3		A	N	N	<+	<+	<+	<+	<+	<+	<+	yes	
16/1/20	28/12/19	В	restricted	++/++	++/++								
161/20						. 1	<u> </u>						SL TDS / 2 WEEKS
A	1.6/1/20			P	atient took predi	nisolone for co	mplair	1S					
B	16/1/20	A	N	N	Disturbed	<+1/<+2	<+2	0	>+	>+	0	yes	THUJA 0/1 1P HS WEEKLY
Before 3 days all complains got aggravated, took Alloyative RX.			Painful										
Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all complains got aggravated, took Alloyathic RX.   Sefore 3 days all got RX.   Sefore 3 days all go		В		0/++	0								SL TDS / 1 WEEK
A				fore 3 days	s all complains o	nt aggravated	took A	llon	athic R	Y			
23/1/20   B   Rt>Lt restricted   0/++   0   0   0   0   0   0   0   0   0		Α					1	_			0	_	THUIA 0/1 1P HS WEEKLY
S   Testricted	23/1/20					7 1	- '		7 12	/ 12			
A		В		0/++	0								
301/20		Α		N	N	>+2	>+2	0	0	0	0	-	
13/2/20	30/1/20	D	NT	0									
13/2/20		В	IN	U	U								SL TDS / 2 WEEKS
B	13/2/20	Α	N	N	N	>+2	>2	0	0	0	0	-	
27/2/20	13/2/20		N	0	0								
27/2/20													
A	25/2/20		N	N	N	>+3	>+3	0	0	0	0	-	
12/3/20	27/2/20	В	N	0	0								
12/3/20		۸	N	N	N	> 12	> 12	0	0	0	0	*****	
12/3/20		Α	IN	IN	IN	>+3	>+3	U	U	U	U	yes	
12/3/20		В	N	0	0								
Dysmenorrhea with early menses on 12/3/20   Pain in whole abdomen not ameliorated by allopathic medicines. can walk slowly now and episodes of pain are infrequent.    19/3/20	12/3/20				LMI	P·27/2/20		<b> </b>					SE 1DS/1 WEEK
Pain in whole abdomen not ameliorated by allopathic medicines. can walk slowly now and episodes of pain are infrequent.   19/3/20	12/0/20			Dvs			on 12/3	3/20					
19/3/20		P	ain in whole ab						walk s	lowly	now	and	
19/3/20													
19/3/20		A	N	N	N	>+/<+2	>+	0	0	0	0	-	
N	19/3/20	R	N	0	0								
A	17/3/20	ם		_									SL TDS / 2 WEEKS
1/4/20   B													
SL TDS / 4 WEEKS   SL TDS / 4 WEEKS   SL TDS / 4 WEEKS     2/5/20	1/4/20	A	N	N	N	>+2	>+2	0	0	0	0	-	
2/5/20	1/4/20	В	N	0	0								
2/5/20   B				NT	NT				0	0	0		SL IDS / 4 WEEKS
9/5/20 A N N N >+2 >+2 0 0 0 0 0 - B N 0 0 0 SL TDS/1 WEEK  16/5/20 A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK  A N N N N S SH TDS/2 WEEK	2/5/20					<+	<+	<+	U	U	U	-	SI TDS/1 WEEV
SL TDS/1 WEEK   SL TDS/2 WEEK   SL TDS/1 WEE		_				×12	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	0	0	0	0		SL IDS/I WEEK
16/5/20	9/5/20					<i>&gt;</i> +∠	<i>&gt;</i> +2	U	U	U	U	-	SL TDS/1 WEEK
16/5/20		_				<±	<±	0	0	0	0	_	SE IDS/I WEEK
A	16/5/20	B				NT.	\T	J	U	J	J	-	SL TDS/2 WEEK
30/5/20 NAT. PHOS 0/1 3P HS WEEKLY					·	<+	<+	0	0	0	0	_	THIJIA 0/1 1P HS WFFKI V
	30/5/20					<u> </u>		J	J	J	-	-	
	2 2. 2. 20	В	N	0	0								SL TDS / 2 WEEKS

		All complaints mainly aggravate in evening. Can walk slowly.										
	A	N	N	N	>+	0	0	0	0	0	-	THUJA 0/1 1P HS WEEKLY
6/6/20	D	N	0	0								NAT. PHOS 0/1 3P HS WEEKLY
	D	IN	U	Ü								SL TDS / 2 WEEKS
	A	N	N	N	<+	<+	<+	+	<+	<+	1	THUJA 0/1 1P HS WEEKLY
20/6/20	D											NAT. PHOS 0/1 3P HS WEEKLY
	D											SL TDS / 6 WEEKS
	A	N	N	N	S	S	S	S	S	S	1	THUJA 0/1 1P HS WEEKLY
30/7/20	D	C	C	C								NAT. PHOS 0/1 6P HS WEEKLY
30/1/20	Б	S	ა	3								SL TDS / 2 WEEKS
	Mother's interview: All her Complains are better last in 4-6 months, Patient can walk much properly now.								walk much properly now.			

# **Results and Discussions**

- 1. Different clinical presentations of autoimmune joint disorders in children.
- 2. Characteristic expressions
- 3. Importance of family history
- 4. Selection of right reportorial approach
- 5. This article proves that homoeopathy has wonderful role in treatment of homoeopathic chronic cases

# Conclusion

In this article we focused on the clinical part of idiopathic juvenile arthritis and its treatment with homoeopathic medicine i.e with constitutional remedy [Natrum Phos] with help of intercurrent during blockage in treatment, starting treatment with acute remedy [Rhus Tox].

After case taking Natrum Phos has given as constitutional remedy from her appearance, her mental state and from her life situation.

The case reflects mainly on Sycotic Miasm so due to this block. Thuja is given as a intercurrent remedy. If constitutional remedy gives no response suggest that there for needs of intercurrent remedy.

Mag Phos given during menstrual complains based on acute totality. Homoeopathic constitutional remedy with proper dose and repetition, will definitely help the patient. The severity of suffering also decreases with action of constitutional remedy.

In homoeopathic treatment constitutional remedy is given to the patient and helps in improvement of patient as a whole.

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