A clinical study in homoeopathic management of acute tonsillitis

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Abstract

Acute tonsillitis is an infection-related disease that causes inflammation in the tonsillar tissues. Acute infections of the palatine tonsils typically affect school-aged children, while they can affect people of any age. The symptoms of acute tonsillitis brought on by bacterial or viral infection include a sore throat that gets worse while swallowing, difficult or painful swallowing, fever, enlarged tender lymph nodes in the neck, body aches, and a general feeling of malaise. Due to its high effectiveness, homoeopathic treatment can help prevent tonsillitis complications and recurrence. The goal of this article is to give a general review of acute tonsillitis and the effectiveness of homoeopathic treatment. Mercurius solubilis was the drug that was prescribed most frequently among the cases, followed by Hepar sulph.

Keywords: Acute tonsillitis, homoeopathy, Mercurius solubilis

Introduction

A bacterial or viral infection can cause acute tonsillitis, which is an inflammation of the tonsils. Tonsils, also known as palatine (or faucial) tonsils, are oval-shaped lymphatic tissue bundles situated in the lateral oropharynx [1]. Along with the adenoids (nasopharyngeal tonsil), tubal tonsil, and lingual tonsil, tonsils are a part of Waldeyer's ring [2]. They serve as the first line of defence, creating the initial immune reaction to pathogens that are inhaled or consumed [3]. ICD-10 assigns it the classification J03 [4]. Tonsillitis symptoms include sore throat, difficult or painful swallowing, fever, enlarged tender lymph nodes in the neck, muffled voice, coughing, body aches and a general feeling of malaise [5].

Nine to seventeen percent of kids between the ages of three and eleven have tonsillitis, which starts in early infancy. Prevalence increases to 70–90% during puberty [5]. Acute tonsillitis affects 1 in 10 children who visit the ENT OPD [5]. If left untreated, this could develop into peritonsilar abscess (quinsy) or acute follicular tonsillitis [7]. Other consequences include Subacute Bacterial Endocarditis, Post Streptococcal Glomerulonephritis, Chronic Tonsillitis, Cervical Abscess, Rheumatic Fever, Acute Otitis Media, and Chronic Tonsillitis [1].

One of the most frequent surgeries carried out on children is the tonsillectomy. Tonsillectomy has been a common treatment since the time of Celsus, although tonsils operate as guardians against dangerous invaders in the oropharynx [9]. Before having a tonsillectomy, adults had an average of 27 episodes of tonsillitis [10]. Tonsillectomy was discovered to be linked to a 2- to 3-fold rise in upper respiratory tract disorders in a Danish study including 1.2 million patients [11]. As per Hahnemannian classification of disease, acute tonsillitis comes under acute individual disease [12].

Materials and Methods

It includes collection of data, methodology, assessment and interpretation of data. Patients were selected randomly on the basis of clinical features, history, examination of the patient and according to the inclusion criteria. Data were obtained from the patients, bystanders and investigator’s examination. Recording of cases were done in the structured case format.

Sources of data

In the study, 30 cases were randomly chosen from among those receiving homoeopathic treatment for acute tonsillitis at Sarada Krishna Homoeopathic Medical College.
Inclusion criteria
Patients with acute tonsillitis in the age range of 3 to 30 years, as well as patients of both sexes, were taken into consideration for the inclusion criteria. The primary clinical presentation is the basis for the diagnostic criteria.

Exclusion criteria
Patients with a history of chronic or recurrent tonsillitis problems and those using other systemic drugs are among the exclusion criteria. Patients older than 30 years and younger than 3 were not included in the study.

Methodology
Thirty individuals with acute tonsillitis who have visited Sarada Krishna Homoeopathic Medical College & Hospital will be chosen. The patients clinical informations will be recorded in a consistent, structured case format. After consideration, review, and analysis, an appropriate simillimum was chosen. FeverPAIN score was used to assess the effectiveness of before and after treatment. The patient’s changes will be noted at subsequent follow-ups. The paired t test was used to analyse the scores in before and after the treatment.

Fig 1: Distribution based on age

Fig 2: Distribution based on triggering factors

Fig 3: Distribution based on Medicines

Results and Discussion
The subjects of the study were selected from patients with acute tonsillitis who attended the Out-patient department of Sarada Krishna Homoeopathic Medical College. Acute tonsillitis was more common (47%) in the age group between 11 and 20 years old. When compared to men, women were found to have a slightly higher prevalence of acute tonsillitis, accounting for 16 cases (53%) of the total. Twenty pupils (or 67% of the sample of 30 instances) were impacted. One student in lower kindergarten, two in lower primary, two in upper primary, four in high school, four in higher secondary, six in undergraduate, and one in post graduate studies.

This study found that 4 instances (10%) were brought on by ice cream and that 5 cases (13%) were brought on by cold drinks. In this investigation, Mercurius Solubilis was specified in seven cases (23%) overall. Following treatment, there was a noticeable improvement as measured by the disease intensity scores.

According to the study, 23% of patients received Mercurius Solubilis, 20% received Hepar Sulphuris Calcareum, and 13% received Arsenicum Album, Belladona and Rhus Toxicodendron. 10% have received Lachesis mutus. Both Lycopodium Clavatum and Kalium Carbonicum were prescribed to one patient (3%) each.

Out of the 30 cases of acute tonsillitis considered in the studies, 90 % have been given 200C potency. The scores before and after the treatment improved noticeably in each of the thirty instances examined. The severity of the symptoms has significantly decreased in each case. According to the analysis of the thirty instances, minor improvement was seen in four cases and moderate improvement was seen in 26 cases.

Conclusion
The sample for the study consisted of thirty patients with a diagnosis of acute tonsillitis. Tonsillitis results in low quality of life, socioeconomic loss, and absences from work or school. The goal of this study was to demonstrate how effectively homoeopathy treats tonsillitis and consequently prevents complications and recurrence. Goals of the study were achieved showing that the homoeopathic system is superior at treating acute tonsillitis, proving that it is not just a placebo but also a beneficial holistic system of treatment method for the suffering people.

Conflict of Interest
Not available
Financial Support
Not available

References