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A clinical study of utility of kents repertory in the management of tonsillitis in children

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Abstract

Tonsillitis is the most common presenting complaint. Usually seen at the age of 5 years-15 years age group. Sore throat annual incidence of 100 in 1000 with tonsillitis. Tonsillitis is viral in majority of cases and bacterial in 10-30 percent cases.

Keywords: Tonsillitis, kents repertory, tonsillitis in children

Introduction

Tonsillitis is the major burning problem in children now in these days. Maximum children are prone to tonsillitis at least once in their childhood. In few cases there is recurrence due to which recurrence usage of antibiotics, antipyretics, analgesics, anti-inflammatory and majority steroids are being used to suppress the infection. This reduces the immunity of children.

Common causative bacteria include haemolytic streptococcus, staphylococcus, haemophilus influenza and pneumococcus. The present study is done therefore for understanding the nature of acute and recurrent Tonsillitis. Homoeopathic remedy is selected on the Totality of Symptom and in accordance with the Law of Similar for the treatment of acute and recurrent Tonsillitis and it has a great role of Homoeopathy in prevention of its recurrence. In getting affected by any disease, individual susceptibility and general immunity play important roles; if we can boost the general health status, immunity and susceptibility of an individual through homoeopathic treatment we can offer the individual a long lasting protection from recurrent similar infections as tonsillitis. Hence an attempt was made to understand clinical manifestations in totality of children suffering from acute and recurrent tonsillitis and treatment given following homoeopathic principles to evaluate the efficacy of the constitutional homoeopathic medicines for acute and recurrent tonsillitis.

Objectives

1. To study the clinical presentation of tonsillitis in children.
2. To study the efficacy of Kent's Repertory in the management of Tonsillitis in Children.

Methodology

Patients are considered on the basis of clinical presentations, laboratory investigation like CBP, TLC. This study consists of 30 patients of Tonsillitis, who attended OPD at MNR Homoeopathic Medical College and Hospital
30 cases were selected on the basis of inclusion and exclusion criteria.

Inclusion criteria

1. Patients belonging to 5-15 age group children and both sexes.
2. Patients irrespective of ethnic group, socio-economic status will be considered.

Exclusion criteria

1. Septic tonsillitis.
2. Cases with systemic diseases with tonsillitis.
3. Cases with complication of tonsillitis such as Rheumatic fever.

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Diet and Regimen measures

All the patients are advised to follow the normal diet. They asked to have plenty of liquids, proper quantity of food rich in calories. They are advised to avoid the food which provokes the complaints. They also advised not to have any other medicines apart from the treatment provided.

All the cases were recorded according to the individualistic and holistic approach of Homoeopathy. Case taking was done according to the scheme of model case proforma (Vide Annexure-I), with special emphasis to ascertain the following points.

Sample size of estimation

Sample size, $N = 4PQ / E^2$

P = Prevalence's rate

Q = 100 - P

E = Permissible error

Prevalence rate of Tonsillitis in children is 1.8%.

$Q = 100 - 1.8 = 98.2$

$N = 4 * 1.8 * 98.2 / 25 = 28.28$

Sample size calculation was done by applying the above formula by considering inclusion and exclusion criteria. The sample size was 28.28 children and was rounded up to 30 in the final study. So I have kept 30 samples by permissible error of 5%.

Results

In this study, a total number of 30 cases of Tonsillitis in children were taken u of age 5-15 yrs, both sexes, ethnic group socio-economic status.

Table 1: Distribution of cases according to the age incidence

S. No	Age group	No. of children	Percentage
1	05-8yrs	20	67%
2	9-12yrs	9	30%
3	13-15yrs	1	3%

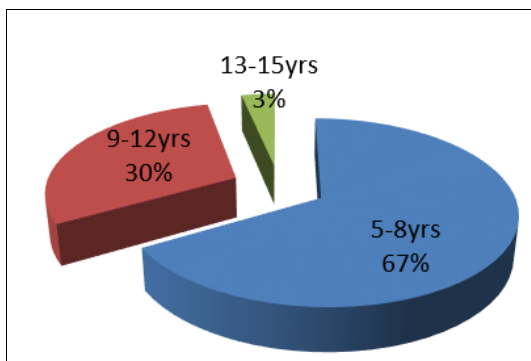


Fig 1: Age incidence

Table 1 as shown in the above table, Out of 30 cases, 20 cases (67%) was found in age group between 5-8 years. And 9 cases (30%) in the age group between 9-12yrs. 1 case (3%) was found in age group 13-15years.

Table 2: Distribution of cases according to the sex incidence status

S. No.	Sex	No. of cases	Percentage (%)
1.	Male	20	67%
2.	Female	10	34%

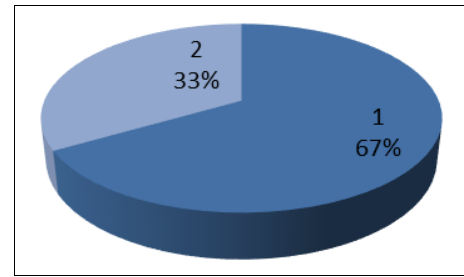


Fig 2: Sex incidence

Table 2 the above chart shows sex incidence 20 cases (67%) Male, 10 cases (34%) of Female children.

Table 3: Distribution of cases according to triggering factors

S. No	Triggering factors	No. of cases	Percentage
1	Cold drinks and Ice creams	16	53%
2	Oily food	3	10%
3	Damp weather	6	20%
4	Dry cold weather	5	17%

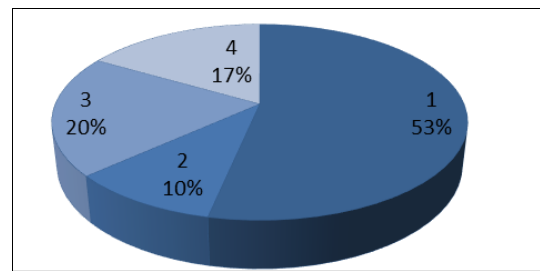


Fig 3: Triggering factors

Table 3 In this study it has been observed that 16 cases had triggering factors by cold drinks and ice creams (53%), 3 cases by oily food (10%), 6cases by damp weather (20%), 5 cases by dry cold weather (17%)

Table 4: Distribution of cases according to presenting complaints

Sl. No.	Presenting Complaints	No. of cases	Percentage
1	Pain in throat with Difficulty in swallowing	26	86%
2	Fever	13	43%
3	Earache	1	3%
4	Hoarseness of Voice	19	63%
5	Cough	21	70%
6	Tenderness in Cervical region	20	66%
7	Redness and swelling Extre	30	100%
8	Cold	10	33%
9	Generalised weakness	9	30%
10	Headache	2	6%

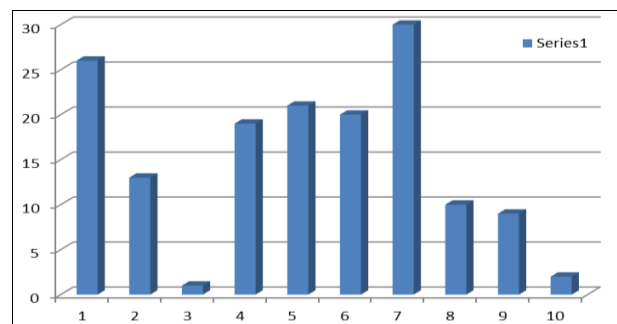


Fig 4: Presenting Complaints

Presenting Complaints

In the study it was observed that 26 subjects had Pain in throat (86%), the next symptom was fever which is observed in 13 subjects (43%) and earache which is observed in 1 subject (3%), Hoarseness of voice 19 subjects (63%), Cough is observed in 21 subjects (70%), Tenderness in cervical region observed in 20 subjects (66%), Redness and swelling observed in 30 subjects (100%), Cold observed in 10 subjects (33%), Generalised weakness observed in 9 subjects in (30%), Headache observed in 2 subjects (6%).

Table 5: Distribution of cases according to past history

S. No	Past history	No. of cases	Percentage (%)
1	Chicken Pox	2	6.6%
2	Malaria	2	6.6%
3	Typhoid	4	13.3%
4	Viral Fever	5	16.6%
5	Worms	2	6.6%
6	Enuresis	2	6.6%
7	Boils	4	13.3%

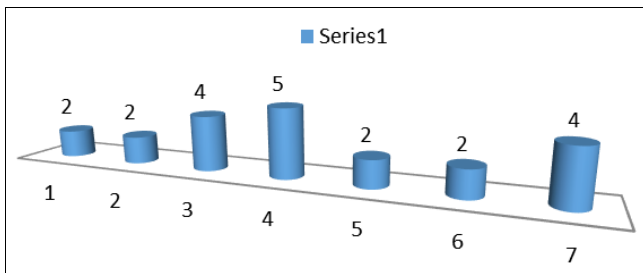


Fig 5: Past history

Past history shows that 2 subjects (6.6%) had chicken pox, 2 subjects (6.6%) had malaria, 4 subjects (13.3%) had typhoid, 5 subjects (16.6%) each had viral fever and worms 2 subject (6.6%) 2 had enuresis (6.6%), 4 subjects boils (13.3%).

Table 6: Distribution of cases according to family history

S. No	Family history	No. of cases	Percentage (%)
1	Sinusitis	2	6.6%
2	Tonsillitis	2	6.6%
3	Allergic Rhinitis	3	10%
4	Nasal polyp	1	3.3%
5	Asthma	1	3.3%
6	Bronchitis	1	3.3%

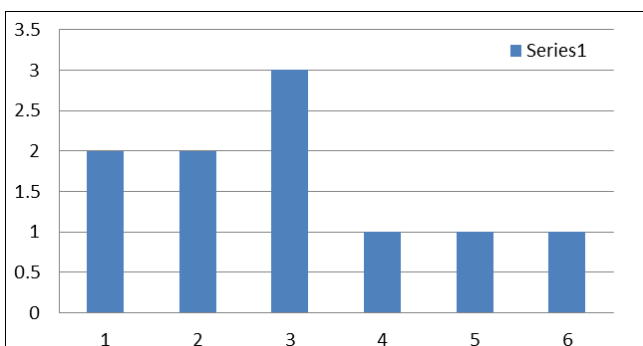


Fig 6: Family history

In this study family history Sinusitis shows 2 subjects of (6.6%), 2 subjects of Tonsillitis (6.6%), 3 subjects of Allergic Rhinitis (10%), 1 subject of Nasal polyp of (3.3%),

1 subject of Asthma (3.3%), 1 subject of Bronchitis (3.3%).

Table 7: Distribution of cases to acute tonsillitis and chronic tonsillitis

S. No	Type of case	No. of cases	Percentage
1	Acute case	16	53%
2	Chronic case	14	47%

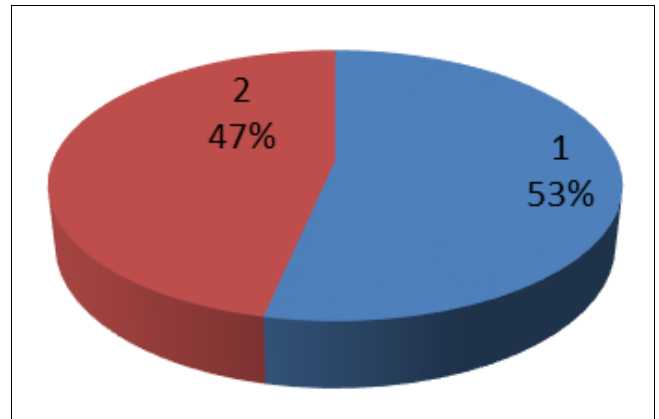


Fig 7: Type of cases

In this study 16 subjects were of acute cases (53%) and 14 subjects were of Chronic cases (14%).

Table 8: Distribution of Cases According to Remedies Administered

S. No.	Remedies	No. of case	Percentage (%)
1.	Ant tart	4	13.3%
2.	Dulc	1	3.3%
3.	N.Vom	2	6.6%
4.	Bell	1	3.3%
5.	Allium cepa	1	3.3%
6.	A.Alb	2	6.6%
7.	M.Sol	1	3.3%
8.	B.Carb	2	6.6%
9.	Puls	2	6.6%
10.	Hep.sulph	6	22%
11.	K.Carb	2	6.6%
12.	B.Alb	1	3.3%
13.	C.Phos	1	3.3%
14.	Drosera	1	3.3%
15.	Medorr	1	3.3%
16.	N.Sulph	1	3.3%
17.	Medorr	1	3.3%
18.	Phyto	1	3.3%
19.	Tubercu	1	3.3%

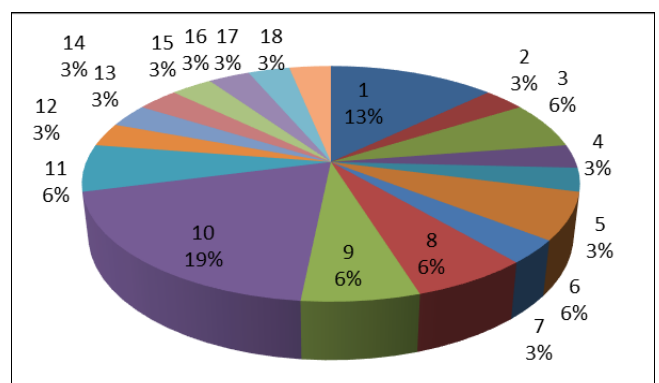


Fig 8: Remedies administered

In this study 4subjects were given Ant tart (13.3%), 1 subject was given Dulc(3.3%), 2subjects were given N.Vom (6.6%), 1subject was given Bell (6.6%),1 subject was given *Allium cepa* (6.6%), 2subjects were given A.Alb (6.6%), 1 subjects was given M.Sol (3.3%) 2subjects were given B.Carb (6.6%), 1 subject was given Puls (6.6%), 6subjects were given Hep sulph 53%, 2subjects were given K.carb 6.6%,1 Subject was given B.alb 3.3%, 1 subject was given C.Phos 3.3%, 1subject was given Drosera 3.3%, 1subject was given Medorr 3.3%,1subject was given Phyto 3.3%,1subject was given Tuber 3.3%.

Table 9: Distribution of cases according to parameters

S. No	Parameters	No. of cases	Percentage
1	Recovered	19	64%
2	Improved	7	23%
3	Not Improved	4	13%

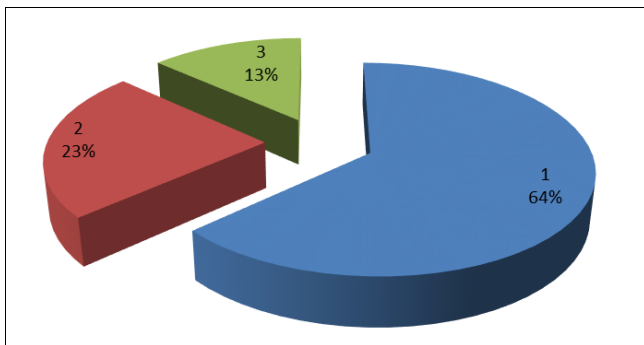


Fig 9: Parameters

In this thesis there were 19cases recovered (64%), 7cases improved (23%), 4cases Not Improved (13%).

Discussion

Homoeopathic system of medicine is a system which is having a holistic approach, Individualisation and totality of symptoms in the disease. Totality of symptoms is an

expression of individuality which is in turn an expression of disease as a whole. Homoeopathic science rest on natural fundamental principles i.e. Law of Similia, thereby able to cure the disease as a whole.

This study was conducted in OPD and IPD of MNR Homoeopaathic Medical College and Hospital, Sangareddy. Data is also statistically analysed by paired T test to find the significance of study. It was found the T value is 11.6 which is highly significant at P, 0.01, level. In the study of 30 cases of Tonsillitis in children, acute remedies were prescribed on the basis of acute totality. Chronic remedies were prescribed on basis of chronic complaints.20 cases are of male children while 10cases are of female children.

Following remedies were mostly indicated:

Ant Tart was given in 4 cases i.e (13%), Dulcam in 1 case (3%), N.Vom in 2 cases (6.7%), Bell in 1case (3%), *Allium cepa* in 1case (3%), A.Alb in 2cases (6.7%), M.Sol in 1case (3%), B.carb in 2 cases (6.7%), Puls in 2cases (6.7%), Hep sulph in 6 cases (20%), K.Carb in 2 cases (6.7%), B.Alb in 1 case (3%), C.Phos in 1 case (3%), Drosera in 1case (3%),Medorr in 1case (3%),N.Sulph in 1 case (3%), Phyto in 1case (3%), Tubercul in 1case (3%).

Therefore, the final outcome after the treatment was 19cases were recovered, 7cases were Improved and 4cases were Not Improved.

From the analysis of above results obtained its obvious that the constitutional homoeopathic drugs are very effective in treatment of tonsillitis.

Statistical Analysis

Paired t test is used.

Paired t test was used because our sample size is 30, then dependent observation from one sample that is Diagnostic criteria (Msclaac score) before treatment and Diagnostic criteria (Msclaac score) after treatment when the each individual given a pair of observation. So paired t test is done.

S. No.	Name of the patient	Pre-test data	Post-test data	d: pre-test data- post test data	d ²
1.	Baby.S.K	4	1	3	9
2.	Baby N.S	4	2	2	4
3.	Md.u	4	2	2	4
4.	M.S	3	1	2	4
5.	A.S	3	1	2	4
6.	S.S.P	4	2	2	4
7.	A.K	2	1	1	1
8.	H.V	3	1	2	4
9.	S.D	3	1	2	4
10.	G.R	4	1	3	9
11.	M.Z	3	1	2	4
12.	S.O	3	1	2	4
13.	A.K	5	2	3	9
14.	S.L	2	1	1	1
15.	U.T	2	1	1	1
16.	A.K	4	1	3	9
17.	S.M	2	1	1	1
18.	A.C	5	2	3	9
19.	D.V	4	1	3	9
20.	V.V	4	2	2	4
21.	A.L	4	2	2	4
22.	S.R	2	1	1	1
23.	Baby.P	3	3	0	0
24.	K.S	4	3	1	1
25.	V.U	2	1	1	1

26.	M.B.U	5	2	3	9
27.	H.N	3	2	1	1
28.	Baby.A	3	1	2	4
29.	S.G	4	1	3	9
30.	N.P	4	4	0	0
				56	128
				$56/30=1.866^2=3.48$	$128/30=4.266$

$$4.26-3.48= 0.78$$

$$\sqrt{0.78}=0.88$$

$$d/sd/\sqrt{n-1}$$

$$1.86/0.88/\sqrt{29}=11.6$$

t-table value at 29⁰ freedom=2.46 at 0.01p

Calculation t value is 11.6

Calculation $t > t$ table value i.e 11.6 at 0.01 p. So, my study is highly statistically significant. So, null hypothesis is rejected.

Conclusion

Prevalence of tonsillitis is found more in the age group of 5-8years about 20 cases i.e. 67%. Prevalence of tonsillitis is more common in male children than female children about 20 cases in male(67%) and about 10cases in female (33%). Following remedies were mostly indicated: Ant Tart was given in 4 cases i.e (13%), Dulcam in 1 case (3%), N.Vom in 2 cases (6.7%), Bell in 1 case (3%), *Allium cepa* in 1case (3%), A.Alb in 2cases (6.7%), M.Sol in 1case (3%),B.carb in 2cases (6.7%),Puls in 2cases (6.7%),Hep sulph in 6cases (20%), K.Carb in 2cases (6.7%),B.Alb in 1 case(3%),C.Phos in 1case(3%), Drosera in 1case (3%),Medorr in 1case (3%),N.Sulph in 1case(3%),Phyto in 1case (3%), Tubercul in 1case (3%).After the treatment 19 cases (63%) were Recovered, 7 cases(23%) were Improved and 4 cases(13%) were Not Improved.

Results

Therefore, the final outcome after the treatment was 19 cases were Recovered, 7 cases were Improved and 4cases were Not Improved. Thus proving efficiency of Homoeopathic medicines in the treatment of acute and recurrent tonsillitis in this study.

Conflict of Interest

Not available

Financial Support

Not available

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