

International Journal of

Homoeopathic Sciences

E-ISSN: 2616-4493 P-ISSN: 2616-4485 IJHS 2019; 3(2): 83-85 Received: 13-02-2019 Accepted: 15-03-2019

Dr. Swanand Patil

Associate Professor, Department of Surgery, MNR Homoeopathic Medical College, Sangareddy, Telangana, India

Role of homoeopathy in specific phobia (Nosophobia)

Dr. Swanand Patil

Abstract

Homoeopathy can work superiorly in psychiatric cases. There is no need of any Anxiolytic drugs to cure some specific phobia cases if physician gets exact similimum. How to deal with the cases of psychiatry when you don't get common symptoms of disease? How to select potency which can give better result in case? What are the other ancillary measures useful in treating phobic cases?

Keywords: Phobia, nosophobia, homoeopathy, anxiety

Introduction

The term phobia means an excessive fear of specific object, situation or any circumstance. Specific phobia is related with the strong fear to certain objects, situation and certain diseases in which embarrassment can occur. Fear originates from anxiety rather it is the part of anxiety. In such disorder, person anticipates harm to himself by due to dog biting, walking in narrow places, driving cars etc. this happens due to any past horrible experience perceived by that particular individual. These phobias are result from the pairing of a specific object or situation with the emotions of fear and panic. For example if any person would have seen any accident then this incidence develops impact in his mind and he starts to avoid driving, crossing road due to anticipation.

So person tries to avoid such distressful situations. So it is very difficult to diagnose specific phobia from avoidant personality disorder [1].

DSM-IV-TR diagnostic criteria for specific phobia [2]

- A. Marked and persistent fear that is excessive or unreasonable, anticipation of a specific object (e.g. flying, heights, animals, receiving an injection)
- B. Exposure to the phobic stimulus almost invariably provokes an immediate anxiety response.
- C. The person recognizes that the fear is excessive or unreasonable.
- D. The phobic situation is avoided or else is endured with intense anxiety or distress.
- E. The avoidance, anxious, anticipation or distress in the feared situation interferes significantly with the person's normal routine, occupational functioning or social activities.
- F. If individual under age 18 years, the duration is at least 6 month.

Treatment

- 1. Behavior therapy
- 2. Insight- oriented psychotherapy
- 3. Hypnosis
- 4. Supportive therapy
- 5. Family therapy [1].

Case of Nosophobia

Name: Mr. VD. Age: 35 Date: 19-11-17

Address: K, Maharashtra Marital status: Married

Occupation: secondary teacher (Subject: Science and math)

Chief Complaint

C/o fear about that he will suffer from any unknown disease since 2003 on and off. Complaint started suddenly and violently.

A/F: Anxiety +3/ over thinking

Correspondence Dr. Swanand Patil

Associate Professor, Department of Surgery, MNR Homoeopathic Medical College, Sangareddy, Telangana, India Complaints start with sudden palpitation+3 and perspiration+3.

Oppressed feeling in chest+3

< Anticipation+3

If he goes with anyone to hospital that time he has fear of any disease+3.

Anxious about health+3

Same episode happened in last year due to father's illness i.e. myocardial infarction.

Physical generals

Sleep: good dreams- not specific

Desire: not specific Aversion: not specific.

Urine: normal stool: previously it was hard, semisolid and

difficult to pass out. Now there is no problem. Perspiration: scanty but more during fear attack.

Thermally: chilly

Life space

He belongs to nuclear family, living with wife and daughter 7 yrs. old. His parent lives with his elder brother at their native place which is 50 km away from his city. He is having two elder brothers. There is no any issue related property in between siblings.

He was born and brought up in village area. Father was farmer and mother as a housewife. He completed his education with much struggle. Since childhood, he has stage fear. He can't able to talk in front of mob. He faced more problem when he took admission in D.Ed. (Diploma in

education). But later on this stage fear was reduced but not annihilate. He teaches nowadays very confidently but if he thinks over any disease condition that time he can't able to continue his lecture. Again same symptoms occur and he keeps himself

quiet. He is much active in school activities if such panic episodes not happen. He is favorite teacher of students.

He becomes angry due to contradiction but keep him calm within few minutes. His relation with wife and daughter is very good. He is very much anxious about his health. When he listen any news about disease condition of known person, then he starts thinking on it and suddenly develops the symptoms.

He is having good relations at work area.

O/E

P: 78/min BP: 130/70 mm of Hg T: Afebrile RR: 14/min RS: clear, AEBE CVS: S1S2 normal P/A: soft, NT, ND CNS: Reflexes normal

Diagnosis: specific Phobia (Nosophobia)

Totality of symptoms

A/F Anxiety
<anticipation
Anxiety about health
Fear of stage
Fear of any disease

Repertorization

Remedy Name	Ign	Acon	Calc	Phos	Ars	Puls	Arg-n	Lach	S
Totality	18	17	16	16	15	15	14	14	
Symptoms Covered	5	5	4	4	4	4	4	4	
Kingdom	•		減	Ŕ	減	•	Ŕ	et	et
[Complete] [Mind]Anxiety:Agg., ailments from: (329)	4	4	4	4	4	4	4	3	
[Complete] [Mind]Anticipation:Ailments from, agg.: (237)	4	4	4	4	4	4	4	4	
[Complete] [Mind]Anxiety:Health, about: (302)	4	4	4	4	4	4	3	4	
[Complete] [Mind]Fear:Disease, of: (172)	3	2	4	4	3	3	3	3	
[Complete] [Mind]Fear:Speak, cannot: (9)	3	3							

Fig 1: Repertorization ^[7]

Final remedy: Aconite

Potency: 1 M

Reason for potency selection

- 1. High susceptibility
- 2. High sensitivity
- 3. Functional changes
- 4. Moderate number of mental characteristics symptoms [3]

Discussion

Aconite, Calc carb and Ars alb were coming in repertorization table in first five remedies which covers most symptoms. Patient was so much anxious rather than timid seen in Calc carb. All the complaints would have start very suddenly and violently. The fastidiousness of Ars couldn't see in patient. Also the stage fear ruled out Calc and Ars. So I decided to select Aconite for this case [4, 5, 6].

Prescription: Aconite 1M single dose

Follow up

21-11- 2017	Sleep- good Patient feels better. Fear > 80-90% mild acidity only BP=140/80	
3-12-2017	C/o mild cough only due to change in environment. Sleep- good Acidity mild Patient feels better mentally	Placebo for 2 weeks
18-12-2017	Occasionally oppressed feeling in chest	Aconite 1M single dose

		Placebo for 2 weeks
4-1-2018	One episode of student accident happened. But he could tolerate this incidence. No any fear symptoms	Placebo for 2 weeks
22-01-2018	Feeling better now BP= 140/90 mm of Hg	Placebo for 2 weeks
No new complaints. Totally feeling better BP=120/80 mm of Hg		Placebo for 2 weeks

Conclusion

We should try to find out the intensity of symptoms whenever we get common symptoms in case. So that, we can choose characteristic symptoms from all those common symptoms, then only we can select them for repertorization. Exact similimum is very important in homoeopathy. Along with that potency selection is also important task after selection of remedy.

Reference

- 1. Benjamin Sadock. Kaplan & Sadock's synopsis of psychiatry, tenth edition, published by Wolters Kluwer India Pvt. Ltd, New Delhi. 2009; 10:597-604
- 2. American Psychiatric Association: Diagnostic and statistical manual of mental disorder, 4.
- 3. Dhawale ML. Principles & practice of Homoeopathy, revised enlarged edition; B. Jain publishers (P) Ltd. 2014; 363-364.
- 4. Kent JT. Lectures on Homoeopathic Materia Medica; Indian books & Periodicals Publishers, 2015, 4-5.
- Choudhari NM. A study on Materia Medica enriched with real case studies; B. Jain Publishers (P) Ltd, 2016, 9-10.
- 6. Nash EB. Expanded work of Nash; B. Jain Publishers P Ltd, 2013, 3-5.
- 7. Mind Technologies, zomeo3.0 software, copyright, 2011-2016.