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A study on efficiency of *Lachesis mutus* in improving the symptoms of menopausal syndrome through menopausal rating scale

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Abstract

Menopause is a physiological process, which signifies, the permanent cessation of menstruation. It is the end of reproductive capacity of women. Most of the women experience physical and psychological Symptoms during approach of menopause. It may lead to deterioration in quality of life of women, as it effects the whole body. Homoeopathy is a System which concentrates on a person as a whole, hence it has a great potential in restoring the normal physiology and removes the discomfort. A project is taken up during period of Internship to study the efficiency of homoeopathic medicine, *Lachesis*, in menopausal Syndrome, by treating 20 cases of menopausal Syndrome with the help of *Lachesis*.

Keywords: menopausal syndrome, menopausal women, homoeopathy, *Lachesis*

Introduction

Menopause means permanent cessation of menstruation, occurs usually in age group of 40-55 years. During this period there may be a lot of changes in physical, mental plane and behavioral aspect. Women may have mood swings, may feel depressed. These changes occur as a result of fluctuation in hormonal levels. These fluctuations occur due to changes in Ovaries, Hypothalamo-pituitary axis. Menopause is not related to age of menarche, number of pregnancies, years of Lactation, oral Contraceptive pills intake. Although it has genetic disposition.

Menopausal women commonly experiences symptoms like hot flushes, night sweats, sleep disturbances, vaginal dryness and dyspareunia. In conventional method, hormonal Replacement therapy is given to manage above mentioned symptoms which has a risk of many side effects, hence it is safe to take homoeopathic treatment as it is proved effective.

Lachesis is one of the indicated remedies in women of climatic age. Symptoms include hot flushes, palpitations. Menses dark, too short, feeble, fainting spells with suffocation in warm room. Worse by approaching night, better by open air. Mentally women feel irritable, Jealous, restless, with suspicion, loquacious, religious mania. This study is taken up to assess the efficiency of *Lachesis* in treating menopausal Syndrome.

Materials and Methods

20 Patients who will come for the treatment of menopausal Syndrome to MNRHMC OPD, IPD and in Camps organized by MNRHMC.

Ethical Considerations

Ethical clearance is taken from the institutional ethical committee and informed consent form is obtained from the patient.

Questionnaire is as follows

Patients with clinical history of menopausal syndrome are selected and they are assessed using menopausal range scale Questionnaire. Based on the principles of Organon of Medicine and depending on the susceptibility of patient a proper dose of *Lachesis mutus* remedy is given to the patient. Then the patient is asked for a follow up after 15 days. Every month the prognosis is assessed again using Menopausal range scale questionnaire. The final result is analysed using analytical and statistical tools.

Table 1: Menopausal rating scale: Score is given in 5 points. 0=none, 1= mild, 2= moderate, 3= severe, 4= extremely severe.

Symptoms	0	1	2	3	4
Hot flashes, sweating (episodes of sweating)					
Heart discomfort (unusual awareness of heartbeat heart skipping, heart racing, tightness)					
Sleep problems (difficulty in falling asleep, difficulty in sleeping through the night, waking up)					
Depressive mood (feeling down, sad, on the verge of tears, lack of drive, mood swings)					
Irritability (feeling nervous, inner tension, feeling aggressive)					
Anxiety (inner restlessness, feeling panicky)					
Physical & mental exhaustion (poor performance and concentration, impaired memory/ forgetfulness)					
Sexual problems (change in sexual desire, in sexual activity and satisfaction).					
Bladder problems (difficulty in urinating, increased need to urinate, bladder incontinence)					
Dryness of vagina (sensation of dryness/ burning in the vagina, difficulty with sexual intercourse)					
Joint and muscular discomfort (pain in the joints, rheumatoid complaints)					

Inclusion criteria: Female patients of 40-55 age are taken for study who showing typical menopausal syndrome symptoms & who has given consent for interviewing.

Exclusion criteria

Patients below age 40 and above 55 years age. Patients with history of any terminating illness Patients with other systemic illness. Patients who underwent hysterectomy.

Results

Table 2: Age Incidence

S.no	Age	No. Of patients	% distribution
1.	40-45	6	30
2.	46-50	10	50
3.	51-55	4	20

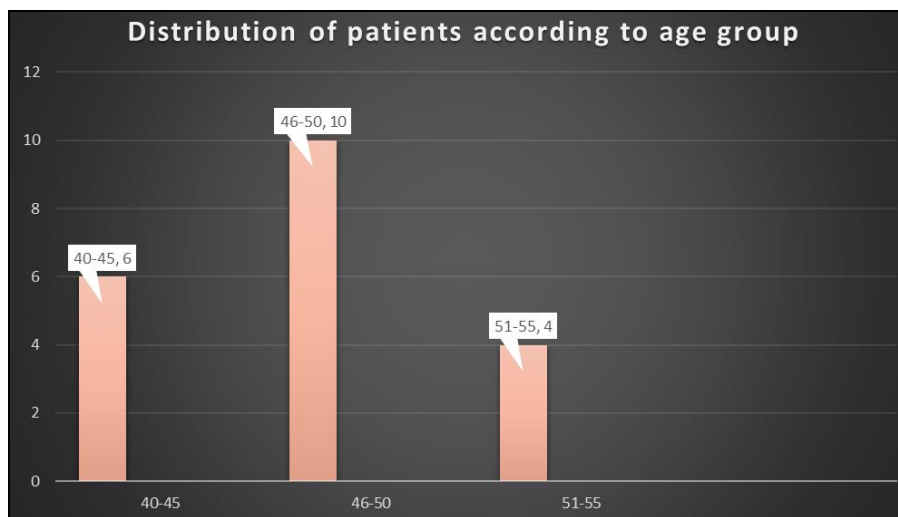


Fig 1: Age Incidence:

Table 3: Potency Given

S.no	Potency given	Total no of patients	%
1.	30C	7	35
2.	200C	11	55
3.	1M	2	10

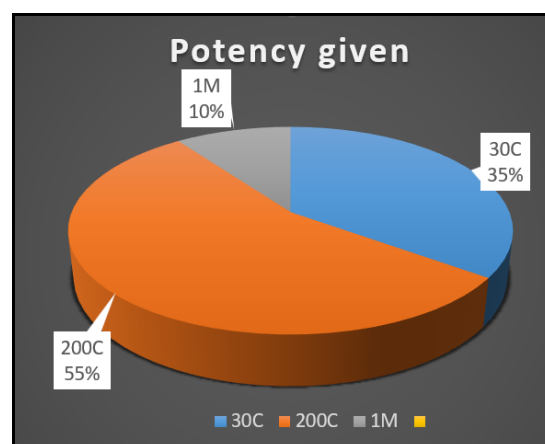


Fig 2: Potency Given

Table 4: Results after the treatment

S. No	Age	Sex	Before score	After score	Difference between the scores
1	50	F	28	7	21
2	44	F	21	10	11
3	46	F	22	11	11
4	48	F	16	8	8
5	43	F	12	7	5
6	53	F	14	8	6
7	43	F	28	8	20
8	54	F	14	6	8
9	48	F	24	13	11
10	46	F	22	13	9
11	42	F	23	10	13
12	49	F	20	8	12
13	44	F	28	10	18
14	52	F	28	16	12
15	48	F	24	11	13
16	54	F	20	12	8
17	47	F	19	8	11
18	48	F	22	16	6
19	46	F	20	12	8
20	42	F	20	8	12

Table 5: Improvement Observed

S. No	Score before treatment	Score after treatment	Difference between scores	%
1	28	7	21	75
2	21	10	11	52.3
3	22	11	11	50
4	16	8	8	50
5	12	7	5	41.6
6	14	8	6	42.8
7	28	8	20	71.4
8	14	6	8	57.1
9	24	13	11	45.8
10	22	13	9	40.9
11	23	10	13	56.5
12	20	8	12	60
13	28	10	18	64.2
14	28	16	12	42.8
15	24	11	13	54
16	20	12	8	40
17	19	8	11	57.8
18	22	16	6	27
19	20	12	8	40
20	20	8	12	60

Table 6: Paired T test results

T-test: paired two sample for means		
	Before Treatment	After treatment
Mean	21.25	10
Variance	22.72368	8.947368
Observations	20	20
Pearson Correlation	0.465082	
Hypothesized Mean Difference	0	
df	19	
t Stat	11.72642	
P(T<=t) one-tail	1.91E-10	
t Critical one-tail	1.729133	
P(T<=t) two-tail	3.82E-10	
t Critical two-tail	2.093024	

Discussion

For the study, female patients aged 40- 55 years are selected. Cases have been selected based on clinical features and diagnostic criteria. After detailed case taking subjects were given Lachesis mutus as the remedy, and potency was

given according to susceptibility. Repetition was done whenever necessary. Frequent follow ups were made. Menopausal rating scale was used to measure the improvement after prescribing Lachesis. MRS scores before and after the treatment were calculated and paired t test was

done to know the efficacy of Lachesis in relieving the symptoms of menopausal syndrome. Common symptoms encountered in patients with menopausal syndrome in this study are, hot flushes, generalised weakness, irregular menses, profuse perspiration, headache, loss of appetite, pain in all joints. In this study, according to table, patients belong to age group 40-45 is 30%, patients belonging to age group 46-50 are 50%, patients belonging to age group 51-55 are 20%. Potencies selected are 30C 35%, 200C 55%, 1M 10%. Average improvement observed after treatment is 51.46% which proves efficacy of Lachesis in improving menopausal syndrome.

Conclusion

This study was done on menopausal syndrome with a sample size of 20. Cases were selected based on clinical features and diagnostic criteria. After the study we can arrive to a conclusion that Lachesis is effective in relieving the symptoms of menopausal syndrome by analysing the results before and after treatment. The mean age of patients involved in the study has been calculated to be 47 years, 50% of cases are found to be between age group of 46-50. After analysing the score of menopausal rating scale before and after treatment, marked relief of symptoms have been observed. There is 51.46% relief of symptoms on an average. There is a significant improvement in quantity of life after treatment with Lachesis mucus in people suffering with menopausal syndrome. Average improvement of 51.46% is observed after treatment with Lachesis. Hence the aim of proving efficacy of Lachesis mutus in improving the symptoms of menopausal syndrome has been achieved.

Conflict of Interest

Not available

Financial Support

Not available

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