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Sahaana Srikumar

PG Scholar, Department of Organon of Medicine, Sarada Krishna Homoeopathic Medical College, Affiliated to Dr. M.G.R Medical University, Chennai, Kulasekharam, Kanniyakumari, Tamil Nadu, India

M Murugan

PG, Ph.D. Guide, Department of Organon of Medicine, Sarada Krishna Homoeopathic Medical College, Affiliated to Dr. M.G.R Medical University, Chennai, Kulasekharam, Kanniyakumari, Tamil Nadu, India

Corresponding Author:

Sahaana Srikumar

PG Scholar, Department of Organon of Medicine, Sarada Krishna Homoeopathic Medical College, Affiliated to Dr. M.G.R Medical University, Chennai, Kulasekharam, Kanniyakumari, Tamil Nadu, India

Importance of modalities in the prescription of acute diseases: An observational study

Sahaana Srikumar and M Murugan

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Abstract

Acute diseases are the diseases that have a sudden onset and more or less a fixed duration to run their course. They usually run into death or recovery. In order to use a homoeopathic medicine effectively in treatment the characteristic symptoms must be well-known to the physician. Modalities are most often characteristic to the individual and are of significance in the prescription of acute diseases. This study aims at understanding the importance of modalities in the prescription of acute diseases. This study represents 30 acute cases of patients from OPD, IPD, Rural centers of Sarada Krishna Homoeopathic Medical College and Hospital. Well selected homoeopathic remedy was prescribed considering the modalities. Assessments were done in the follow up and subsequent changes were recorded. Results are presented in tables and charts and statistical analysis with paired 't' test was done. The study showed that nightly aggravation was found in maximum number of patients. Most number of cases were found to be ameliorated by drinking warm water. Maximum number of cases were prescribed Rhus Toxicodendron and most cases were given 200th potency. The study thus showed that there was marked improvement in acute cases prescribed based on the modalities which thus implies that modalities play an important role in acute diseases.

Keywords: Homeopathy, acute diseases, acute prescription, modalities

Introduction

Acute diseases are the diseases that have a sudden onset and more or less a fixed duration to run their course. Acute diseases usually run into death or recovery^[1]. Acute diseases outbreak either in isolation or as an epidemic and controlling them turns out to be challenging^[2]. These diseases can be prevented and managed by having sound knowledge about the symptoms and most importantly the causes^[3]. Modalities are one of the important components of a complete symptom. Modalities are most often characteristic to the individual and are of significance in the prescription of acute diseases. Modalities are usually narrated by the patient himself and are also observed and perceived by the physician^[4].

Acute diseases are classified into eleven types which include- Acute indisposition, acute individual disease, acute sporadic, acute epidemic, acute disease from other school of medicine, acute one sided disease- Internal in origin, acute one sided disease- external in origin, acute mental disease- sudden in origin, acute mental disease- doubtful in origin, acute intermittent fever and acute exacerbation of chronic disease^[5].

Previous studies show that it is necessary for the homeopathic practitioner to direct his attention to the characteristics of the case. Modalities is one of the characteristic symptoms that helps to find the prescribing totality in case of illness. Time-related modalities, regardless of whether general or specific, play a great role in prescribing the similimum. Without the help of the modality, a longer search would have been necessary to find the similimum homeopathically^[6].

Materials and Methods

Method of collection of data: Purposive sampling of 30 cases from the OPD, IPD, Rural centres, School health awareness programmes of Sarada Krishna Homoeopathic Medical College and Hospital, Kulasekharam. Cases were recorded in pre-structured case formats.

Inclusion criteria: Patient of both sexes, all age groups, suffering from acute diseases, acute exacerbation of chronic diseases and patients presenting with characteristic modalities were included in the study.

Exclusion criteria

Patients suffering from other severe systemic diseases, patients with emergency acute conditions and patients requiring surgical intervention were excluded from the study.

Study design

Informal study- with before and after assessment without control group.

Results

A total number of 30 cases were selected from all age groups among which the age groups 0-20 and 41-60 years constituted 10 cases respectively. Among the 30 cases 70% cases (21 cases) were females and 30% cases (9 cases) were

males. Maximum number of cases (9 cases) were diagnosed to be acute bronchitis which is represented in Fig. 1. Fig. 2. shows the distribution of cases based on ailment factors which show that about 50% cases (15 cases) had no ailment factors and drenching in rain was the ailment factor for most number of cases (4 cases). Nightly aggravation was found in 15 cases which is shown in Fig. 3 and amelioration by drinking warm water was found in 4 cases which is shown in Fig. 4. Fig. 5. Shows that maximum percentage of cases were prescribed Rhus Toxicodendron which is about 20% (6 cases). Fig. 6. Shows that 26 cases were prescribed medicines in the 200th potency. In this study all 30 cases showed marked improvement in the score before and after treatment. The intensity of the symptoms were reduced to a great extent.

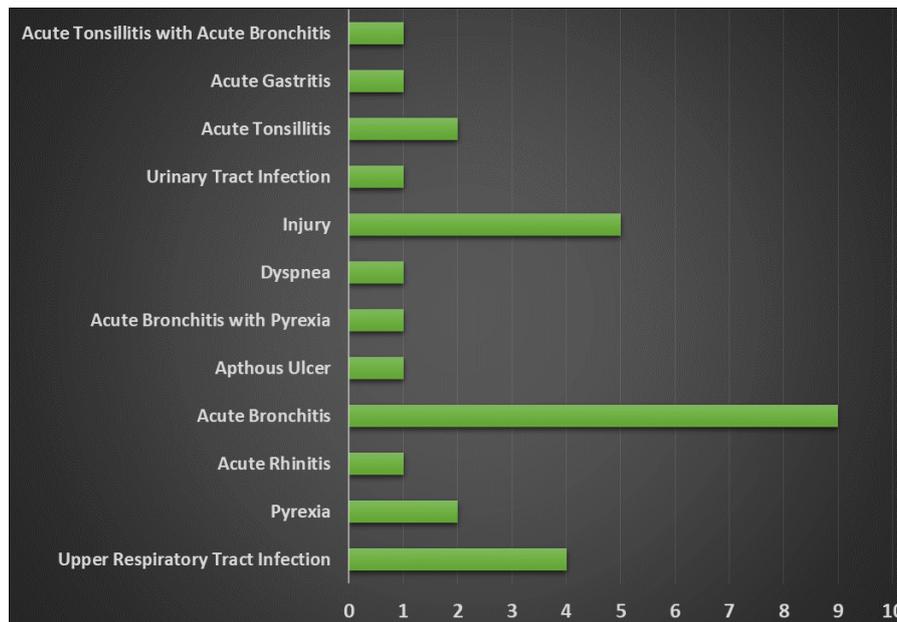


Fig 1: Distribution of Cases Based on Diagnosis

In the study of 30 acute cases, maximum number of cases were diagnosed as Acute Bronchitis which is 9 cases. Injuries 5 cases. Upper Respiratory Tract Infections are 4 cases. Pyrexia are 2 cases. Acute Tonsillitis are 2 cases.

Acute Rhinitis is 1 case. Apthous ulcer is 1 case. Acute Bronchitis with pyrexia is 1 case. Dyspnea is 1 case. Urinary Tract Infection is 1 case. Acute Gastritis is 1 case. Acute tonsillitis with acute bronchitis is 1 case.

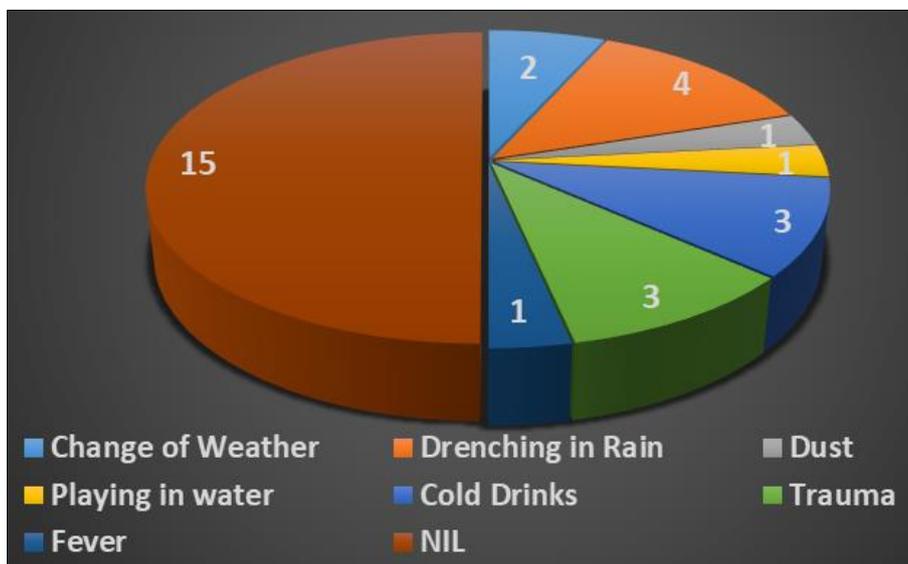


Fig 2: Distribution of cases based on ailment factor

In this study of 30 acute cases, about 15 cases had no ailment factor. Drenching in rain was the cause for 4 cases. Trauma was the ailment factor for 3 cases. Cold Drinks was the ailment factor for 3 cases. Change of weather was the

ailment factor for 2 cases. Dust was the ailment factor for 1 case. Playing in water was the ailment factor for 1 case. Fever was the ailment factor for 1 case.

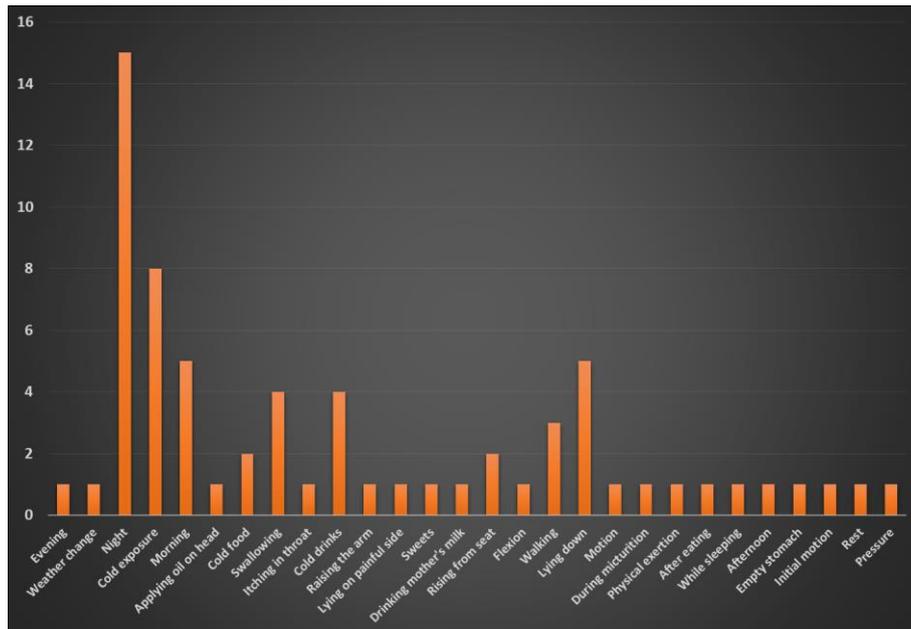


Fig 3: Distribution of Cases Based on Aggravating Factors

In this study of 30 acute cases, nightly aggravation was found in 15 patients. Aggravation of complaints on exposure to cold was found in 8 patients. Aggravation of complaints in morning was found in 5 patients. Aggravation on lying down was found in 5 patients. Aggravation on swallowing was found in 4 patients. Aggravation by taking cold drinks was found in 4 patients. Aggravation on walking was found in 3 patients. Aggravation by eating cold food was found in

2 patients. Aggravation on rising from the seat was found in 2 patients. Aggravation in evening, by change of weather, by applying oil on head, itching in the throat, raising the arm, sweets, drinking mother's milk, flexion, motion, during micturition, after eating, empty stomach, while sleeping, physical exertion, afternoon, initial motion, rest and pressure were found in 1 patient each.

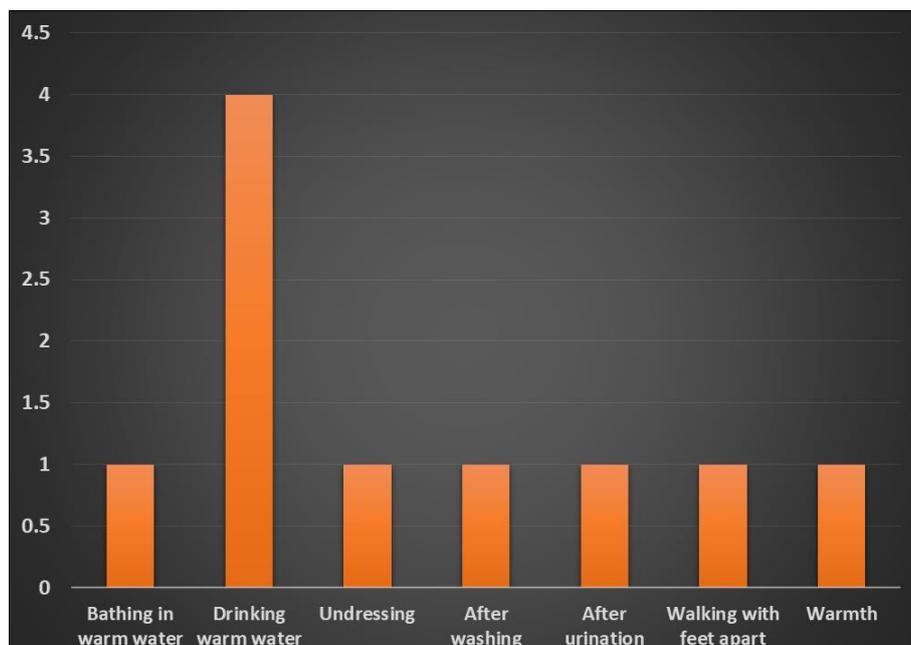


Fig 4: Distribution of Cases Based on Ameliorating Factors

In this study of 30 acute cases, most number of cases were found to be ameliorated by drinking warm water which was about 4 cases. Bathing in warm water ameliorated 1 patient. Undressing ameliorated 1 patient. 1 patient was ameliorated

after washing. 1 patient was ameliorated after urination. Walking with feet apart ameliorated 1 patient. Warmth ameliorated 1 patient.

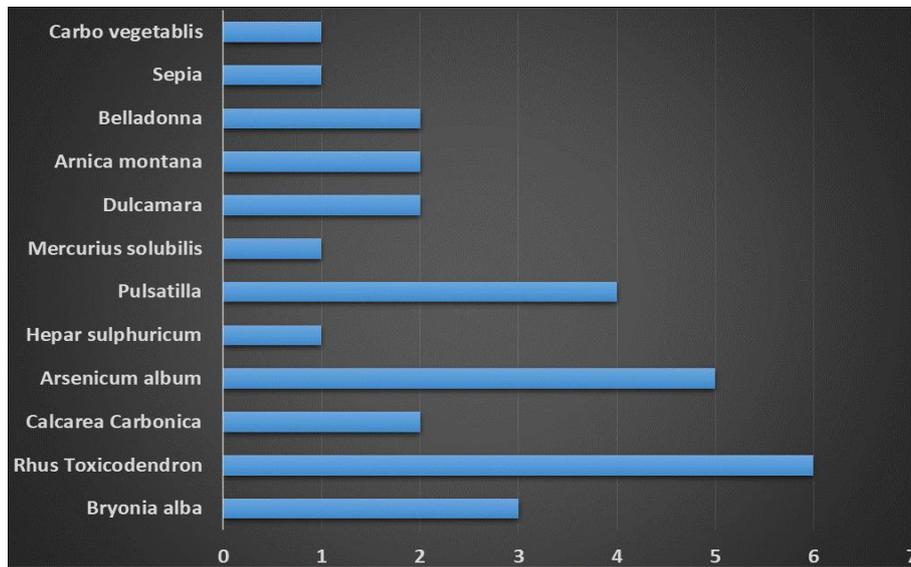


Fig 5: Distribution of Cases Based on Remedy Prescribed

In this study of 30 acute cases, maximum number of cases were prescribed Rhus Toxicodendron 6 cases. Arsenicum Album was prescribed in 5 cases. Pulsatilla was prescribed in 4 cases. Bryonia Alba was prescribed in 3 cases. Calcarea Carbonica was prescribed in 2 cases. Dulcamara was

prescribed in 2 cases. Arnica Montana was prescribed in 2 cases. Belladonna was prescribed in 2 cases. Hepar Sulphuricum was prescribed in 1 case. Mercurius Solubilis was prescribed in 1 case. Sepia Officinalis was prescribed in 1 case. Carbo Vegetabilis was prescribed in 1 case.

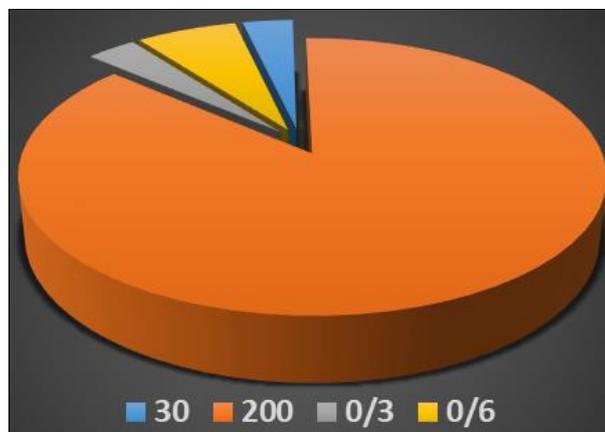


Fig 6: Distribution of Cases Based on Potency

In this study of 30 acute cases, maximum number of cases were given 200th potency which is 26 cases. 0/6 potency was

administered to 2 cases. 0/3 potency was administered to 1 case. 30th potency was administered to 1 case.

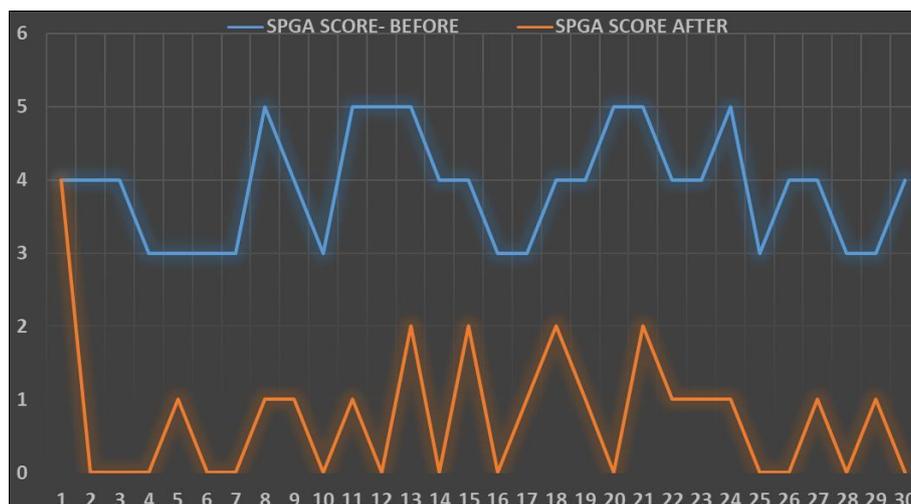


Fig 7: Distribution of cases based on SPGA Score before and after

Discussion

In this study 30 acute cases were taken and were prescribed based on modalities. Modalities being one of the characteristic symptoms and a component of the complete symptom, paves way to the selection of an appropriate similimum. However more evidence based research studies must be done in order to strengthen the evidences for the importance of modalities in homoeopathy and also in the treatment of acute diseases. This study was primarily aimed at identifying the importance of modalities in the treatment of acute diseases. For this study 30 patients were enrolled. Among these 30 cases acute bronchitis was the diagnosis of 30% of cases. The distribution of ailment factors in the 30 cases shows that about 50% cases had no ailment factors. While the most prominent ailment factor was drenching in rain which was found in 4 cases. Among the various aggravating modalities that were found in the 30 acute cases, nightly aggravation was the most prominent occurring in about 15 cases. Among the ameliorating factors that were found in the study among which drinking warm water ameliorated most cases. In this study of 30 acute cases, maximum number of cases were prescribed Rhus Toxicodendron. Other remedies prescribed were Arsenicum Album, Pulsatilla, Bryonia Alba, Calcarea Carbonica, Dulcamara, Arnica Montana, Belladonna, Hepar Sulphuricum, Mercurius Solubilis, Sepia Officinalis and Carbo Vegetabilis. In this study of 30 acute cases, maximum number of cases were given 200th potency. Figure. 7. shows the difference in the pre-treatment and post-treatment scores in this study all 30 cases showed marked improvement in the score before and after treatment. The intensity of the symptoms were reduced to a great extent. On statistical analysis the mean of the scores before treatment is 3.90 and that of the scores after treatment is 0.70. The total variance of both scores combined 0.65. The standard error is 0.147. The two-tailed p value was less than 0.0001 indicating that the study is statistically significant.

Conclusion

This study has helped in identifying and understanding the importance of modalities in acute prescription. An increase in the incidence of acute illness demands resolving them in the most reliable ways and in the shortest time period. From this study, it is evident through the significant outcomes that modalities play an important role. Especially the aggravating factors were found to be more in number in acute diseases among which the most prominent was a time modality, nightly aggravation of symptoms. Characterisation of the modalities in a patient and prescribing on this basis can help in effectively treating acute diseases which has been shown by this study of 30 cases through the results and significant statistical analysis of the pre-treatment and post-treatment assessment score values.

Thus we can conclude that modalities play an important role in acute diseases and there is great effectiveness in selecting medicines based on modalities in the treatment of acute diseases. Further studies with larger group of patients will help in identifying the role of modalities and in strengthening the evidence of the same.

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Declaration of patient consent: The authors obtained written informed consent from the concerned patient to publish case records.

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Conflict of interest: There is no conflict of interest.

References

1. Babu NG, Comprehensive Study of Organon, 10th impression, New Delhi, B. Jain Publishers (P) Ltd; c2018. p. 98-99.
2. El-Gilany A, Abou-ElWafa AS, Acute diseases: An epidemiologic perspective, Journal of Acute Disease, 2023;12(1):1-9.
3. Stein W. Understanding Acute Illness: Its Symptoms, Causes and Treatment Options, Acute and Chronic Disease Reports. 2023;07(01):185.
4. Anpat AV, Kavishwar VN. Importance of Kent Repertory and concept of Modality towards the analysis of case of Diseases, Journal of Drug Delivery and Therapeutics. 2019;9(4-s):832-838.
5. Hahnemann S. Organon of Medicine. 5th & 6th edition, 14th impression, New Delhi: B. Jain Publishers (P) Ltd; c2020. p. 224-264.
6. Patil JD, Mehra P. Homoeopathic concept of modalities: a systematic review. Sustainability, Agri, Food and Environmental Research; c2025. p. 13.

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