

#### E-ISSN: 2616-4493 P-ISSN: 2616-4485 www.homoeopathicjournal.com IJHS 2023; 7(4): 329-332 Received: 15-08-2023

Accepted: 24-09-2023

#### Thankam Ravi

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

#### M Murugan

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

Corresponding Author: Thankam Ravi

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

# International Journal of Homoeopathic Sciences

## A retrospective analysis of the suitability of homoeopathic medicine Kreosotum in management of physiological leucorrhoea

### Thankam Ravi and M Murugan

#### DOI: https://doi.org/10.33545/26164485.2023.v7.i4e.993

#### Abstract

Leucorrhoea is one of the major problem encountered in gynaecological practice. The most common cause of leucorrhoea is physiological, followed by vaginal infections due to bacteria, virus, fungi and parasites. Other causes includes foreign bodies, cervicitis and atrophic vaginitis. The prevailing examine carried out retrospectively with 30 cases. This have a look at aimed at to deal with women with physiological leucorrhoea based on Homoeopathic medication Kreosotum. Kreosotum is a indispensable remedy in the material medica, is a product of distillation of Wood Tar. Leucorrhea of Kreosotum stains the linen yellow and stiffens it like starch. Heat and puffiness in the vagina are infallible indication in Kreosotum. The prescribed remedy inside the have a look at is Kreosotum and maximum frequently used efficiency is 200<sup>th</sup> potency. The Paired t take a look at changed into used to assess the symptomatic improvement, done by way of the use of Static physician's worldwide assessment score (sPGAs) with earlier than and after score. The look at shows an effective end result with improvement in fine of existence of patient.

Keywords: physiological leucorrhoea, Kreosotum, scoring chart, homoeopathy retrospective study

#### Introduction

Vaginal discharge is a silent problem since most women are unaware of the transition from normal to pathological. Health seeking patterns for vaginal discharge and disclosure of vaginal health concerns are poor in women from the lay population, where health literacy is low and sociocultural background is poor. Another significant element of this demographic is their risk behaviors, which render them more susceptible to sexually transmitted illnesses and other reproductive tract infections. Vaginal discharge impacts not only women's everyday physical and social activities, but also their mental health and all aspects of their lives. It limits her household and occupational work, causing social and economic challenges. After menstruation problems, leucorrhoea is the most prevalent condition. In a year, one out of every ten women will experience vaginal discharge. Vaginal discharge is reported by nearly every fourth lady in the gynaecological out-patient clinic. One of the most common problems encountered in gynaecological practice is leucorrhoea. Physiological causes of leucorrhoea are the most prevalent, followed by vaginal infections caused by bacteria, viruses, fungi, and parasites. Foreign bodies, cervicitis, and atrophic vaginitis are some of the other causes. 6 It affects 1-14% of all women of reproductive age and is responsible for 5-10 million OPD visits worldwide each year. In India, the prevalence of vaginal discharge is reported to be 30%. 7 It predisposes to pelvic inflammatory disorders, infertility, urethral syndrome, endometritis, pregnancy loss, premature labor, PROM, and chorioamnionitis if left untreated <sup>[1]</sup>.

#### **Materials and Methods**

A Retrospective study consists of sample of 30 cases taken from the patients with physiological leucorrhea visiting the OPD, IPD, Rural centers, School health awareness programmes of Sarada Krishna Homoeopathic Medical College and Hospital, Kulasekharam.

#### **Selection of Samples**

Purposive sampling of 30 case of patients with physiological leucorrhea from OPD, IPD, Rural centers, School health awareness programmes of Sarada Krishna Homoeopathic Medical College and Hospital, Kulasekharam.

The case details had been recorded in standardized prestructured case format of SKHMCH. Well selected remedy Kreosotum prescribed based on totality of symptoms. Assessments done in the follow up and subsequent changes are recorded. Results will be presented in tables and charts and the statistical analysis with chi-square test will be done.

#### Inclusion criteria

In the current study age group between 10 and 50 years are taken and the patients having symptomatology of physiological leucorrhea along with other symptoms with the informed consent to treatment.

#### **Exclusion criteria**

In the current study patients suffering from other severe systemic diseases, patients not suffer from any diagnosed gynecological pathology, pregnant women, patient is on oral contraceptives, having menstrual irregularities were excluded, leucorrhea associated with any chronic and systemic disease on active treatment.

#### **Diagnostic Criteria**

The patients with excessive vaginal discharge, pain in the back and loin, which is always worse from active exercise such as walking or riding, offensive odour from the genital area may be present, itching and irritation of the genital tract, nature of discharge may be creamy.

#### **Selection of Tools**

A Retrospective study carried out in OPD, IPD and rural centers of Sarada Krishna Homoeopathic Medical College Hospital. The data collected through case taking. Cases recorded and analyzed and the totality erected based on the miasmatic criteria of patient. Thereby the homoeopathic remedy selected based on totality of patient. Repertorization assistance sought whenever needed. Various potencies, repetition of doses prescribed depending upon the severity of complaints in each case. Prescription were based on homoeopathic philosophy in all the cases. The effectiveness of medicine Kreosotum will be assessed with Static Physician Global Assessment score.

#### Intervention

Intervention of the study is based on disappearance in symptoms in patient before and after Homoeopathic medicine Kreosotum and Duration of intervention: 1 to 2months.

#### **Outcome assessment**

Prevalence of socio-demographic factors that influence physiological leucorrhea assessed by collecting the sociodemographic data. After intervention, disappearance of the symptoms of patient along with their improvement assessed.

#### Statistical techniques and data analysis

Data are represented in pie charts, bar diagrams and tables.

#### Results

The result of the current study formed by the sociodemographic factors, such as age, education, residence, marital status, occupation and on analyzing the patients, the most commonly used potency was 200 which was prescribed for 16 cases, followed by 30 potency for 10 cases, 1M potency 4 cases respectively. This is represented in Figure 1. The improvement of all the 30 cases were analyzed using Scoring Chart before and after the administration of homoeopathic medicines. The improvement of all the 30 cases were analyzed using Scoring Chart before and after the administration of homoeopathic medicines.

#### Distribution of cases based on age

According to socio-demographic factors, related to age 16.6% from 10 to 20 years of age, 33.3% from 20 to 30 years of age, 23.3% from 30 to 40 years of age, 26.6% from 50 to 60 years of age, 6.6% from 60 to 70 years of age.

#### Distribution according to education

On analyzing of the patients, out of the 30 cases based on the education level on patients with illiterate, read and write, secondary education and high education level, Shows that high educated patients are affected more. Based on the education level on patients with illiterate, read and write, secondary education and high education level, 1 case of illiterate (3.3%), 2 case of read and write (6.6%), 12 case of secondary education (40%)and 15 case of high education (50%).

#### Distribution according to residence

Based on the residence, 7 patients (23.3%) were residing in urban area and 23 patients (76.6%) were residing in rural area. The study shows that patients residing in rural area are more affected.

#### Distribution according to marital status

Based on the marital status, 16 cases (53.3%) reported to have physiological leucorrhoea are married women, and14 cases (46.6%) with physiological leucorrhoea are the unmarried women.

#### Distribution according to occupation

Based on occupation 13 cases (43.3%) reported to have physiological leucorrhoea are the housewife, 10 cases (33.3%) reported are the students and 7 cases (23.3%) reported are the working women.

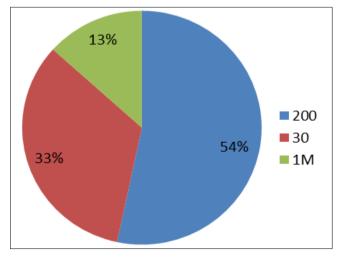


Fig 1: Distribution according to potencies

On analyzing the patients, the most commonly used potency was 200 which was prescribed for 16 cases, followed by 30 potency for 10 cases, 1M potency 4 cases respectively. This is represented in Figure 1.

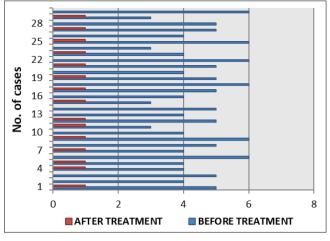


Fig 2: Distribution related to improvement assessment

The improvement of all the 30 cases were analyzed using Scoring Chart before and after the administration of homoeopathic medicines. As it was a retrospective study the duration of treatment varies from one case to another. Out of the 30 cases, 18cases recovered after the treatment, and the remaining 12 cases showed improvement in scoring chart represented in the figure 2.

Table 1: Paired	t test results
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	X	Y
Mean	4.60	0.50
Variance	0.97	0.51
Observations	30	30
Standard Error	0.18	0.09
df	29	
t	19.4396	
P two-tail	1.5574E-14	

The two-tailed P value is less than 0.0001. By conventional criteria this difference is considered to be extremely statistically significant and hence the null hypothesis is rejected.

#### Discussion

In a previous study the with the current study, shows that out of 60 students, according to age the majorities 58.3% were in the age group of 19-20 and least 6.7% in the age group of  $\geq 21$ . <sup>[2]</sup> In this current study, common age group affected with physiological leucorrhea 16.6% from 10 to 20 years of age, 33.3% from 20 to 30 years of age, 23.3% from 30 to 40 years of age, 26.6% from 50 to 60 years of age, 6.6% from 60 to 70 years of age <sup>[1]</sup>. In the previous study it shows education wise distribution of study subjects. Majority of the subjects had completed their primary school (24.5%) and SSLC (23.5%) followed by PUC (20.5%), 15.5% illiterate, 7% were completed Secondary school, 9% completed their graduation<sup>[1]</sup>. In the current study it shows that, 2 cases can read and write, 12 case of secondary education and 15 case of high education. 3.3% patients are illiterate, 6.6% can read and write, 40% have secondary education and 50% have high education. In the previous study it shows distribution of subjects according to place.

Majority (72%) were from rural, remaining (28%) from urban areas. In the current study 7 patients were residing in urban area that is the 23.3% and 23 patients were residing in rural area that is the 76.6%. In the previous study it shows

marital status distribution among subjects. 86% were married, 10% were unmarried, 2% were separate and widow <sup>[1]</sup>. In the current study 16 cases reported to have physiological leucorrhoea are married women that is the 53.3%, and 14 cases with physiological leucorrhoea are the unmarried women that is the 46.6%. It shows occupation wise distribution of study subjects in the previous study 64% of the subjects were home maker, 16% were agriculture, 8% were student, 4% were coolie, 3.5% were teacher, 1.5% were garment workers, 1% were working in private company, 0.5% were Asha worker, 0.5% were school catering, 0.5% were tailor.<sup>(1)</sup> In the current study shows that the most commonly affecting the physiological leucorrhoea are the housewife that is the 43.3% and 13 cases reported to have physiological leucorrhoea and the 10 cases reported are the students forms 33.3% and 7 cases reported are the working women they are of 23.3%. The improvement of all the 30 cases were analyzed using Scoring Chart before and after the administration of homoeopathic medicines. As it was a retrospective study the duration of treatment varies from one case to another. Out of the 30 cases, 18cases recovered after the treatment, and the remaining 12 cases.

#### Conclusion

The retrospective study conducted on 30 patients, has shown that married females were more affected and the most common age group affected was 20 to 30 years and most of them with high education. The most commonly patients are from rural areas and are housewife. 200 potency was the commonly prescribed. The improvement was assessed using Scoring Chart and 18 cases recovered and 12 cases showed improvement. These samples were collected from the In-Patient Department, Out-Patient Department and Rural Health Centres of Sarada Krishna Homoeopathic Medical College and Hospital. The following are the conclusions obtained after statistical analysis. This study has helped in identifying and understanding the importance of VA. An increase in the incidence of physiological leucorrhoea demands resolving them in the most reliable ways and in the shortest time period. In order to use a homoeopathic medicine effectively in treatment the characteristic symptoms must be well-known to the physician. From this study, it is evident through the significant outcomes that Kreosotum is very effective in management of physiological leucorrhoea. Thus we can conclude that Kreosotum is very effective in physiological leucorrhoea and there is great effectiveness in selecting potencies in the treatment.

#### Acknowledgement

We are pleased to express my sincere gratitude and appreciation to the management and staff of Sarada Krishna Homoeopathic Medical College and Hospital for their invaluable support and cooperation during the course of my research. We extended our heartfelt thanks to the management for providing the necessary infrastructure and resources required to carry out this study. We would also like to acknowledge the staff members who provided their valuable input and guidance throughout the research process. Their assistance and encouragement have been instrumental in the successful completion of our study

#### **Author's Contribution**

Not available

## **Conflict of Interest**

Not available

#### **Financial Support**

Not available

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#### How to Cite This Article

Ravi T, Murugan M. A retrospective analysis of the suitability of homoeopathic medicine Kreosotum in management of physiological leucorrhoea. International Journal of Homoeopathic Sciences. 2023;7(4):329-332.

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