



A CLINICAL STUDY ON THE EFFICACY OF HOMOEOPATHIC MANAGEMENT IN ALLERGIC RHINITIS USING BOENNINGHAUSEN'S PHILOSOPHY

Helen Maria Jose¹ and M.Murugan²

¹PG Scholar, 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.

²PG and Ph.D Guide, Department of Organon of Medicine, Sarada Krishna Homoeopathic Medical College, Kulasekharam, Kanniyakumari District, Tamil Nadu, India.

Abstract : Allergic Rhinitis has become increasing, affecting 10-40% of the global population. The conventional treatments provide only temporary relief. The aim of this study to know the efficacy of Homoeopathic medicines in the treatment of Allergic Rhinitis using Boenninghausen's philosophy. A purposive selection of thirty cases who had allergic rhinitis, analysis, totality and prescription of remedies were based on Boenninghausen's philosophy and treatment assessment using RCAT score. The result of study obtained shows marked improvement on 2 cases and moderate improvement in remaining cases. Lean and fair complexioned individuals (40%-12 cases), sanguine temperament (50%-15 cases) were more affected, dust was frequent causative factor (64%-19 cases), aggravation factors was washing with cold water (26%-8 cases), enlarged turbinates were present in 26 cases. Calcarea carbonicum was given in a maximum of (20%-6 cases) found to be effective.

Index Terms- Allergic rhinitis, Boenninghausen, Calcarea carbonicum, RCAT score

INTRODUCTION

In the current scenario, there is marked raise in the cases of Allergic Rhinitis and Asthma, 22% of Indian Adolescents and 9.8% of Indian Adults are affected.¹ According to the International Classification of Diseases, it defines under CA 08.0 code.² There is an increased prevalence in women from the age group of 18-35 years.³ In India, 22% of teenagers suffer from AR presently.⁴ In India, house dust mite *Dermatophagoides farinae* is the most commonly found allergen.⁵ The presence of Allergen is confirmed by Serum Ig E and Skin prick test.⁶ A rational approach for Allergic Rhinitis is important since allergens and their reactions in individuals affected are increasing and has burden in quality of life.

OBJECTIVES OF THIS RESEARCH:

To know about the common causative factors of Allergic Rhinitis and reduce the intensity of symptoms by Homoeopathic medicines selected using Boenninghausen's Philosophy assessing using Rhinitis Control Assessment Scale (RCAT).

MATERIALS & METHODS:

Source of data:

A cohort of 30 cases was selected from patients diagnosed with Allergic Rhinitis who visited the Outpatient Department, Inpatient Department, and Rural Health Centres affiliated with Sarada Krishna Homoeopathic Medical College and Hospital, Kulasekharam.

Selection of samples: 30 participants were selected using purposive sampling

Data collection method:

A purposive sampling approach was employed to select 30 patients diagnosed with Allergic Rhinitis from the Outpatient Department, Inpatient Department and Rural Centres affiliated with Sarada Krishna Homoeopathic Medical College. The details of the case was collected using standardized and pre-structured formats provided by Sarada Krishna Homoeopathic Medical College. The symptoms were evaluated and totality framed according to Boenninghausen's philosophy was erected and then repertorised using Boenninghausen's therapeutic pocket book. The changes before and after treatment was assessed using Rhinitis Control Assessment Test (RCAT)

Inclusion Criteria:

Patients with symptomatology of Allergic Rhinitis between the age group of 18-70 years of both sexes were included

Exclusion Criteria:

Allergic rhinitis associated with any chronic and systemic disease on active treatment, pregnant women, severe uncontrolled Diabetes Mellitus, cases in which surgical intervention becomes necessary.

Statistical techniques and data analysis:

In order to analyse the statistical test before and after treatment, paired-t test was used. The data collected was represented in bar chart, table and columns.

OBSERVATIONS & RESULTS:**Distribution of cases by age:**

In this study the incidence of Allergic Rhinitis, maximum of 9 patients (30%) between age group of 11-20 years, 6 patients (20%) between 21-30 years, 4 patients (13%) between age of 41-50 years, 3 patients (10%) between 31-40 years, 51-60 years, 61-70 years, 1 patient (3%) between 1-10 years and 71-80 years.

Distribution of cases by gender:

Out of 30 cases, a maximum of 16 patients (53%) were males, and 14 patients (46%) were females.

Distribution of cases by family history:

While understanding the family history, 37% and 23% had Asthma and Allergic Rhinitis in the family respectively, 40% did not have any allergic history in family.

Distribution of cases by Quis:

In this study, Quis includes personality of the individual which was affected. The bodily constitution and temperament which markedly affected include lean and fair complexioned individuals. And mostly sanguine temperament were affected.

Distribution of Cases by Quid:

The nature of the Allergic Rhinitis is usually Chronic in nature. The repetition of doses was given in weekly doses in maximum of 19 patients (63%). Among 30 cases, 11 cases improved within a duration of 6-10 weeks.

Distribution of Cases by Ubi:

The main seat of affection was in the upper respiratory tract, especially in nasal mucosa and conjunctiva.

Distribution of Cases by Cur:

The common causative factors which affected maximum of 19 patients (64%) from dust, 6 patients (20%) were affected by dust and cold exposure, 2 patients (7%) were affected by cold air, 1 patient (3%) each due to using air-conditioner, cooking, dust and smoke exposure.

Distribution of Cases based on Quomodo and Quondo:

A maximum of 8 cases were aggravated from washing in cold water, 7 cases from fanning. The amelioration factors were less, and the symptoms resolved with time. In about 4 cases, amelioration was by steam inhalation. Based on the time modalities, the complaints were most aggravated in the early morning and night. About 14 cases were aggravated in early morning and night, 28 cases had no amelioration relation to time.

Distribution of Cases based on Quibus Auxilis:

In about 26 cases enlarged turbinates were the accompanying symptom.

Distribution of Cases based on Medicine:

Out of 30 cases, maximum of 6 patients (20%) were prescribed Calcarea carbonicum, 4 patients (13%) prescribed Natrum muriaticum, 3 patient (10%) was given Silicea, Phosphorus, Lycopodium and 2 patients (6%) with Dulcamara and Pulsatilla.

Distribution of Cases based on Boenninghausen's philosophy:

Based on seven hexameters, in thirty cases, 1 case of Phosphorus 200 and Calcarea carbonicum 200 showed marked improvement, 3 cases of Calcarea carbonicum 0/3 and Natrium muriaticum 200 showed moderate improvement, 2 cases of Calcarea carbonicum 200, Lycopodium 200 and Silicea 200, Dulcamara 200 showed moderate improvement. 1 case of Phosphorus 0/6, Phosphorus 200, Sulphur 200, Silicea 30, Pulsatilla 200, Arsenicum album 0/3, Nux vomica 200, Sabadilla 30, Sepia officinalis 200, Calcarea carbonicum 0/1, Natrium muriaticum 0/3, Ammonium carbonicum 200, Lycopodium 0/3 and Sulphur 0/1 showed moderate improvement.

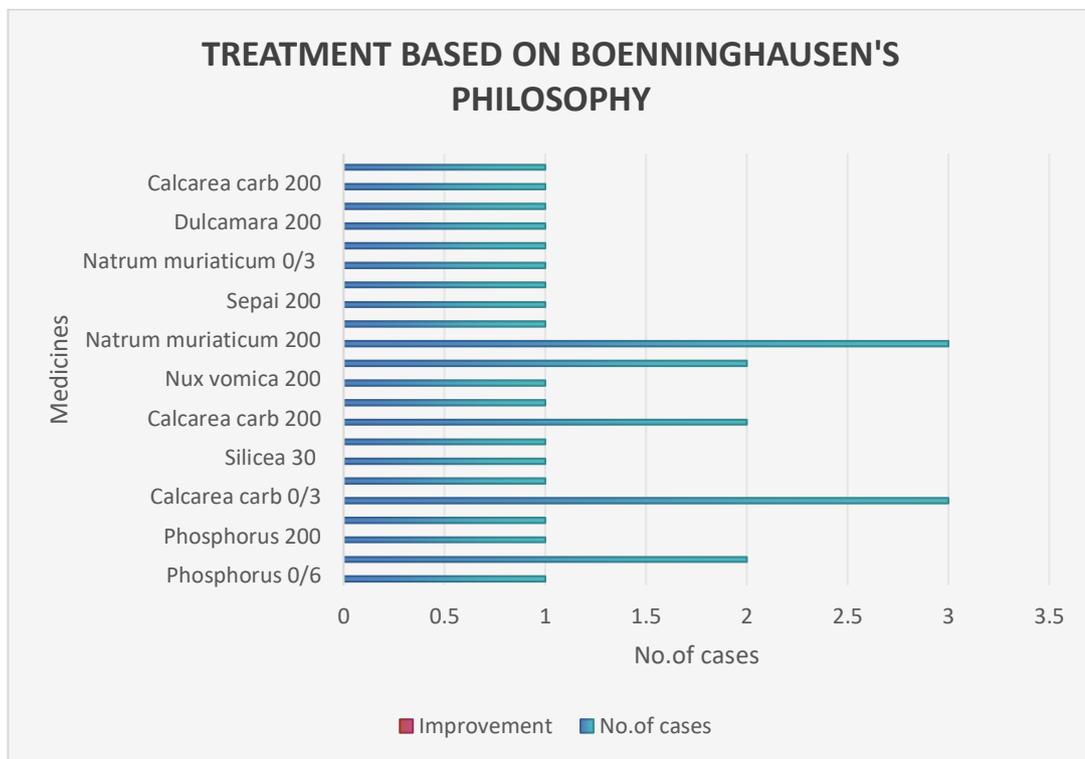


Figure 1 : Distribution According to Boenninghausen’s Philosophy

All the 30 cases were assessed using Rhinitis Control Assessment Test, two cases which showed marked improvement and twenty-eight cases showed mild improvement. The highest score obtained was 21 and the lowest was 13.

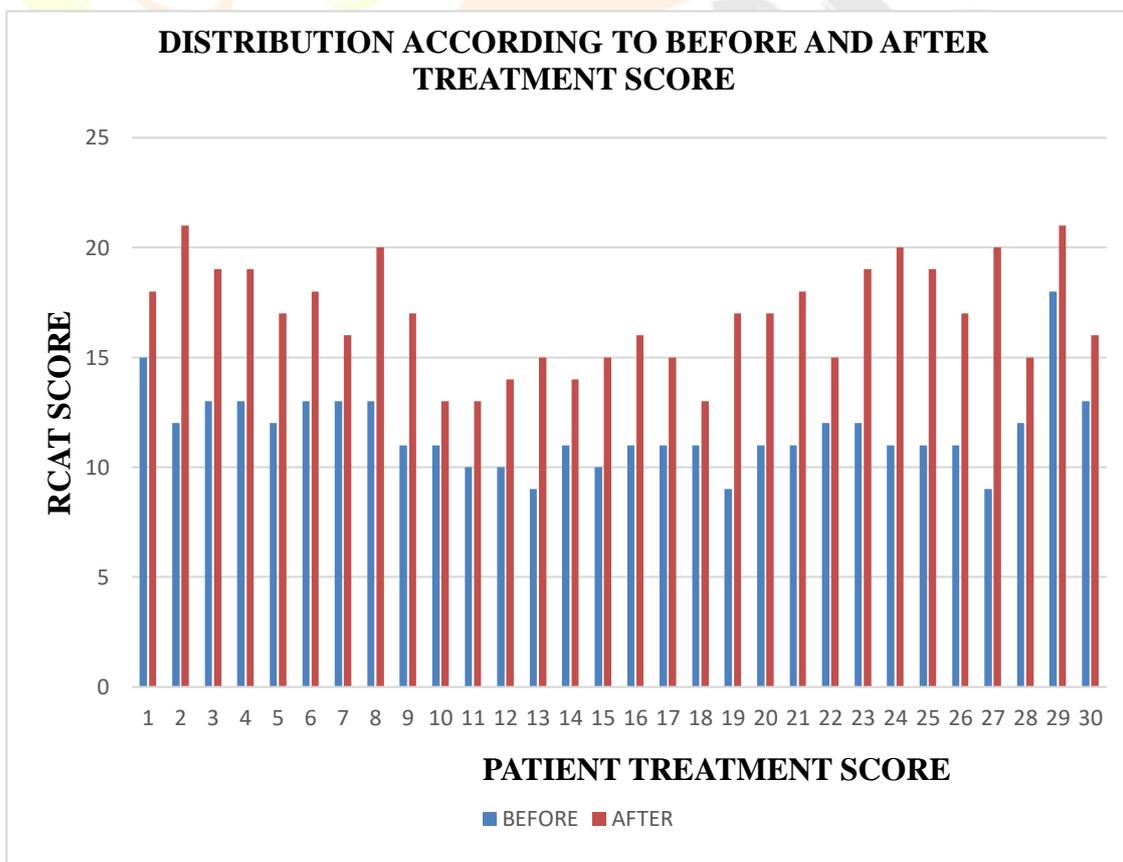


Figure 2 : Distribution According to Before and After Treatment Score

DISCUSSION:

This study finds that more patients belonging to the age group of 11-20 years (30%) which correlates with another study carried out by Thirugnanasambantham titled Efficacy of Anti miasmatic treatment for patients with perennial Allergic Rhinitis , individuals more affected by perennial allergic rhinitis fall between the age group of 21-40 years (43.33%) in 13 cases.⁷

Males (53%) were affected. In another study titled Miasmatic decoding in Allergic Disease of Children, where males are predominantly affected.⁸

Lean and fair complexioned individuals (40%) and sanguine temperament (50%) were predominantly affected. In a similar study, allergic rhinitis was present in Carbo nitrogenoid constitution (87%) 26 cases.⁹

Dust was the main causative factor affecting (64%). The most common aggravating factor was washing in cold water (8 cases) and no amelioration factor (18 cases) corresponds to Ghosh study in which 11 cases were allergic to house dust, followed by smoke, weather change, cooking oil and pollen 4 cases each, followed by damp and smog, cockroach and cats.¹⁰

The aggravation time was mostly in early morning and night (47%) similar study by Nicholas also emphasis on the circadian rhythm of sneezing peak in early morning compared to other times of the day¹¹ and there was no specific amelioration time (93%).

The predominant accompanying symptom was Enlarged turbinates in 26 cases. In a similar study estimating Serum Ig E before and after homoeopathic medicines, throat irritation was the major accompanying symptom.¹²

Calcarea carbonicum was prescribed in a maximum of 6 patients (20%). In a study conducted in 40 patients, complaints of nasal polyp, Calcarea carbonicum was indicated for 16 patients, and was found to be effective.¹³

Among 30 cases, 11 cases improved within a duration of 6-10 weeks. In this study, moderate improvement was present according to Rhinitis Control Assessment Test (RCAT) score chart. Two of the 30 patients which was prescribed Phosphorus 200 and Calcarea carbonicum 200 improved markedly, while remaining demonstrated modest progress in the RCAT score. In a previous study treating Acute Rhinitis using causative factor, Rhinitis Control Assessment Test was used effectively.¹⁴

CONCLUSION:

The study shows the efficacy of homoeopathic medicines selected using Boenninghausen's philosophy in the management of Allergic Rhinitis. The role of concomitants in Allergic Rhinitis will be beneficial for further study. The removal of causative factors helps to reduce the prevalence of disease and its comorbidities and improve the quality of life in patients suffering from Allergic Rhinitis.

Conflict of interest: Nil

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