

Study of Cases of Pica by using Boericke Clinical Repertory

Dr. Neha Panchal

B. H. M. S, Post Graduate Scholar, Department of Repertory, Sri Guru Nanak Dev Homoeopathic Medical College & Hospital, Ludhiana, Affiliated to Guru Ravidas Ayurved University, Punjab, India
 panchalneha124[at]gmail.com

Abstract: Pica disorder is considered to be an inappropriate behavior characterized by an appetite pattern and craving for non-nutritive substances. Pica usually does not exhibit life-threatening situations, but at times it can create severe complications due to this psychogenic behavior of an individual. Clinical presentation of pica is highly variable and can be associated with the specific characteristics of the resulting medical conditions and the ingested substances. Homoeopathic medicine for pica offer a natural solution for cravings and mild to moderate cases of pica. Herein I conducted a study to identify the efficacy of Homoeopathy in treatment of Pica by using Boericke clinical Repertory. For the purpose of this study, I excluded cases which is complicated with other systematic disease. There are total 50 Patients participated in the study. Out of 50 Cases, 12 were very much improved, 20 were much improved, 10 minimally improved, in 6 patients there was no change from baseline and 2 patients was minimally worse. The finding of above study concluded that 84% of the cases responded to the indicated homoeopathic medicine by using Boericke Clinical Repertory.

Keywords: Pica, Non-nutritive substances, Boericke Repertory

1. Introduction

The word 'pica' has originated from the Latin word 'magpie' - a bird- because of its omnivorous habit and craving for unnatural articles of food^[1].

Pica, a common behavioral disorder refers to persistent eating of substances other than food (non-edible/non-nutritive) e.g. clay, earth, dust, sand, flakes of paint, plaster from wall, soap, paper, fabrics, ice, charcoal, stones, pebbles, hair, feces, lead, plastic, pencil erasers, fingernails, needles, string, cigarette, wire & burnt matches etc. for a period of at least 1 month at the age in which this behavior is developmentally inappropriate (e.g. > 18 - 24 months).

The major proposed change for pica in the Diagnostic and Statistical Manual for Mental Disorders, Fifth Edition from the fourth one is their relocation from their current section, titled "Disorders Usually First Diagnosed in Infancy, Childhood, or

Adolescence, "to the newly proposed section, "Feeding and Eating Disorders".

Etiology and Predisposing factor

No exact cause of Pica is known. It is associated with a number of complaints like:

- Psycho-social stress due to maternal deprivation, parental separation, parental neglect, child abuse, poor supervision or poor attention^{[2][3][4]}.
- Ingestion of paint is most common in children from families of low socioeconomic status and is associated with lack of parental supervision. Malnutrition and hunger may also result in pica^[6].
- Low socioeconomic status/Lower strata of society^{[2][3]}.
- Nutritional deficiencies specially iron^{[2][3][5]}
- Culture and Familial Factor.

- Associated malnutrition with worm infestation, iron deficiency and vitamin & mineral deficiencies is common^{[2][3]} (whether these are causes or effect of pica remains unclear)
- Mental retardation^[3], Pregnancy, Epilepsy, Brain damage.

Clinical Features

Clinical presentation is highly variable and is associated with the specific nature of the resulting medical conditions and the ingested substances. GI tract symptoms: ^{[3][5]} - Mechanical bowel, Constipation, Chronic or acute, diffuse or focused abdominal pain, Nausea/vomiting, Abdominal distension, Loss of appetite, Ulcerations and perforations

Intestinal obstructions: (caused by bezoar formation i.e. concretion of foreign material; and due to ingestion of indigestible materials into the intestinal tract)

Dental manifestations: (e.g. severe tooth abrasion and surface tooth loss)^[6]

Physical Findings: -^{[2][3][4][5]}

The physical findings associated with pica are extremely variable and are related to the materials ingested and the subsequent consequences.

- Pallor - Due to Iron deficiency anemia which could be the cause of pica
- Lead toxicity is the most common poisoning associated with pica particularly in patients eating flakes of old paints. Physical manifestations associated with lead poisoning are nonspecific and subtle, and most children with lead poisoning are asymptomatic.^[6]
- Lead poisoning may presents with:
 - Neurological - irritability, lethargy, incoordination, cranial nerve paralysis
 - Ophthalmic - papilledema, encephalopathy, seizures and coma
 - Hematological - anaemia (microcytic hypochromic)

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Abdominal - colic pain

- Infections and parasitic infestations: Toxocariasis and ascariasis are the most common soil - borne parasitic infections associated with pica. [4]

I am choosing the repertory - Pocket manual of Homoeopathic Materia Medica and Repertory by William Boericke for my case study on Pica because this repertory contain Clinical symptoms /condition with their corresponding group of medicines and this repertory facilitate the selection of a remedy on the basis of pathological similarity, causation, modalities and concomitant. This repertory can be used for Repertorization of cases where Clinical Conditions mask the characteristic symptoms of the patient So, I can find the remedies for those cases also where symptoms is one sided and cases with fewer symptoms.

2. Materials & Methods

The study has been conducted on the patients of OPD/IPD and peripheral dispensaries of Sri Guru Nanak Dev Homoeopathic College & Hospital.

Inclusion Criteria

Any case where Pica is present on the basis of symptoms. Patients of all age groups and both sexes were considered for the study.

Exclusion Criteria

Pica complicated with other systemic Disease

Investigation

Routine blood test, Serum calcium, Serum iron, Serum Zinc, Stool examination, Urine test

Research Technique

It was an explorative study. The study was undertaken at OPD, IPD & peripheral dispensaries of Sri Guru Nanak Dev Homoeopathic Medical College and Hospital. Any case where Pica was present on the basis of symptoms was taken for case study. Assessment and reassessment were based on symptomatic improvement. Each case followed up at an interval of 7 - 30 days. Results were compared on through CGI - Scale (Clinical Global Impression - Scale). The CGI has two components—the CGI - Severity, which rates illness severity, and the CGI - Improvement, which rates change from the initiation (baseline) of treatment. . Data of the sample size 50 was statistically analysed to show 95% confidence limit. T - test was done to show the efficacy in post test results.

3. Results

The study was a successful one in terms of fulfilling objectives set for the study. The paired t - test conducted on the CGI - Score of patients before and after administering homeopathy for Pica showed that the t statistic of the sample (9.4478) was greater than the t statistic for 95% confidence level (2.0096). Hence, the p value for the null hypothesis was less than 0.05 and so we could reject it. Thus, we

concluded that homeopathy is effective in treating the patients for Pica by using Boericke Clinical Repertory. The findings of the above study concluded that 84% of the cases responded to the indicated homoeopathy similimum by using Boericke. This study proved the utility of Boericke Clinical Reeptrory in cases of Pica.

- According to the Observation and Result, Incidence was seen high in female patients as compared to males.
- Though Pica is considered irrelevant below 4 years of age, most patients recorded for Pica during the study was 5 - 40 years.
- The disease was seen more common in low and medium in socioeconomic status & rarely in high socioeconomic status because of the unhygienic and unhealthy practiced in lower socioeconomic status families.
- CGI - S Score taken during the first visit was 4 in majority of patients

Table 1: Showing CGI - S Score of first visit

CGI - S Score	Number of Patients	Percentage
1=normal, not at all ill	0	0
2=borderline ill	4	8%
3=mildly ill	10	20%
4=moderately ill	27	54%
5=markedly ill	8	16%
6=severely ill	1	2%
7=among the most extremely ill patients	0	0

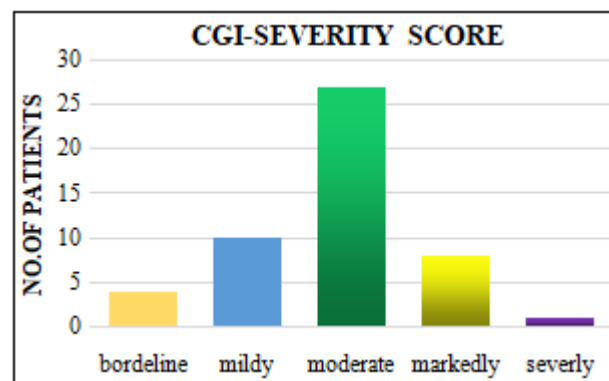


Figure 1: Bar graph showing CGI - S Score of first visit

CGI - Improvement Score used to access the result was found to be 1 and 2 (very much improved and much improved) in most of the patients.

Table 2: Showing CGI - S Score of final visit

CGI - Score	No. of Patient	Percentage
1=very much improved since the initiation of treatment	12	24%
2=much improved	20	40%
3=minimal improved	10	20%
4=no change from baseline (the initiation of tratment)	6	12%
5=minimal worse	2	4%
6=much worse	0	0
7=very much worse since the initiation of treatment	0	0

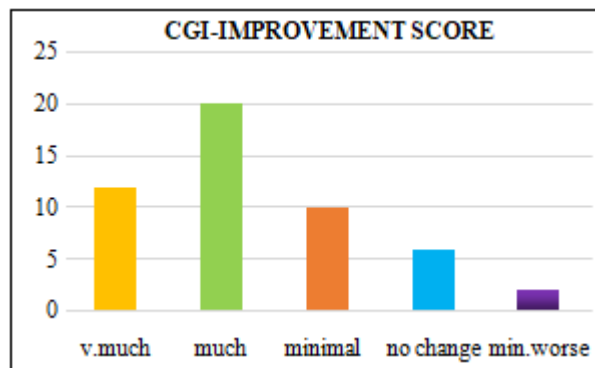


Figure 2: Bar Graph showing CGI - I Score at final visit

Remedies found to be most effective were Calcarea Carb, Alumina, Ignatia&nitric acid.

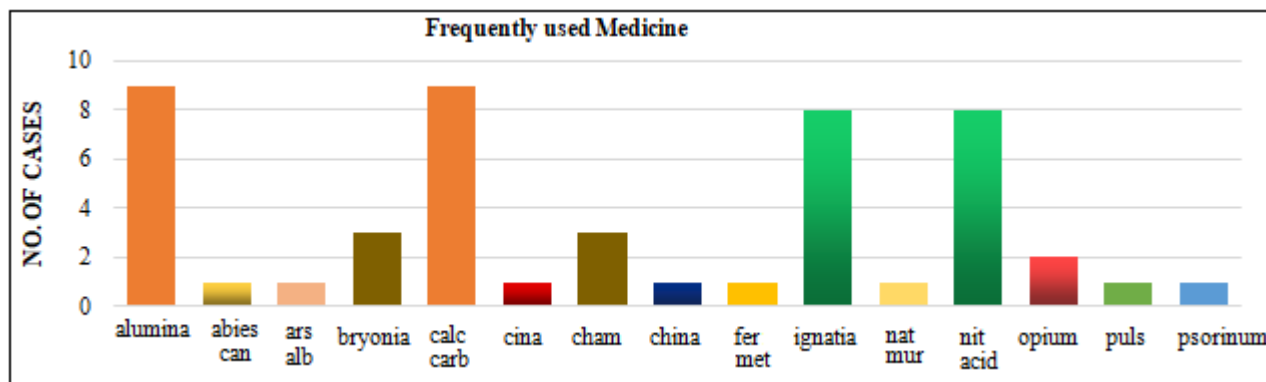


Figure 3: Bar graph showing frequently used medicine

4. Discussion

The study was on the non randomized inhabitants of both sexes and of various religions with the all age group. There are total 50 patients participated in the study, it consists of only one group i.e. experimental group. The incidence of female child participated in the study was greater than male.

At first proper case taking has been done according to the case recording format. There after patient had to be diagnosed clinically, diagnosis is made on the basis of clinical history, examination, observation and investigations.

Potency and dose had been selected according to the case. Only few investigations had been done therefore in every follow up results were evaluated on the basis assessed with enquiry about the present state of health, physical and mental symptoms as well as physical examinations and improvement of the patient as a whole. In follow up patients were called up every 7 - 30 days and were followed up for minimum 2 months. On feed back, the cases were followed up properly and the improvement status was assessed according to CGI - Improvement Score. In the very next follow up on the basis of condition of patient, same medicine, no medicine or other suitable similimum was prescribed according to the analysis in all respect of individual cases.

5. Conclusion

The efficacy of the Homoeopathic treatment in cases of pica was demonstrated by the results of the grading based on the

data collected from the study. In this study it has been observed that the maximum number of patient belongs to the age groups 5 - 40 years. Among the both sexes, it was noted that the female patients were more in number than the male patient. In 50 cases according to the totality of the symptoms, most indicated medicines were selected. Out of the total patient cured with constitutional homoeopathic medicines, some medicine found more frequently in treatment of pica during the study are alumina, calcarea carbonica, Ignatia, nitric acid, chamomilla, bryonia etc.

The therapeutic capabilities are mainly dependent on mental generals, physical general, characteristics particulars, characteristics pathological general symptoms to which constitute the totality of symptoms. There is no other short cut root for homoeopathic prescriptions, which reconfirms the observation of our great masters. The result obtained from the present study was very encouraging especially confirming the already known fact that well selected constitutional homoeopathic medicines are capable of tackling enumerable acute as well as chronic disease Homoeopathy is a natural system of medicine. Its strength lies in its marked effectiveness as it takes a holistic approach towards the sick individual to through promotion of inner balance at mental, emotional, spiritual levels. Homoeopathy recognizes the inseparability of body and mind. Homoeopathy treats the patient as a whole and not just the disease. It believes in a holistic and individualistic approach.

6. Acknowledgment

Dr Muktinder Singh, M. D. (Hom.), Professor, Department of Repertory, Sri Guru Nanak Dev Homoeopathic Medical College & Hospital, Ludhiana.

7. Conflict of Interest

The author has no conflict of interest to declare.

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