

# Effectiveness of Homoeopathic Medicines in the Treatment of Diarrhoea: Under-Fives

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**Abstract:** It is well known that in developing countries like India, diarrhoeal diseases constitute a leading cause of morbidity and mortality among children under-five years of age. On an average, 3.3 episodes of diarrhoea are experienced per a child per year but in some areas the average exceeds 9 episodes per year. Diarrhoea is best defined as excessive loss of fluid and electrolyte in the stool. Normally, a young infant has about 5 g/kg of stool output per day; the volume increases to 200g/24hr in an adult<sup>2</sup>. The study Cases were taken from the registered patients of Vrundavan hospital OPD. It is single blind control trial, Prospective Cross-sectional study. **Result:** The use of well selected Homoeopathic Remedy has significant role to improve patient's suffering state as well as general health of the patient. **Conclusion –** We observed faster recovery in cases of diarrhoea under-fives. Here we observed the significant effectiveness of homoeopathic medicines like *Ars. Alb*, *Cham*, *Merc. sol.*, *Nux vom.*, *Podo.*, *Sulph*, *Vert Alb* etc. in 30 C potency, In the cases of diarrhoea under-fives.

**Keywords:** homoeopathy, Homoeopathic medicines, Diarrhoea, Under-fives, Children

## 1. Introduction

Diarrhoea is best defined as excessive loss of fluid and electrolyte in the stool. Normally, a young infant has about 5 g/kg of stool output per day; the volume increases to 200 g /24 hr in an adult<sup>1</sup>.

Diarrhoeal diseases are one of the leading causes of morbidity and mortality in children worldwide, causing 1 billion episodes of illness and 3–5 million deaths annually. The relative importance and epidemiologic characteristics of diarrhoeal pathogens vary by geographic location. In the United States each year, 20–35 million episodes of diarrhea occur among the 16.5 million children younger than 5 yr of age<sup>2</sup>.

It is well known that in developing countries like India diarrhoeal diseases constitute a leading cause of morbidity and mortality among children under-five years of age. On an average, 3.3 episodes of diarrhoea are experienced per a child per year but in some areas the average exceeds 9 episodes per year<sup>1</sup>.

In homoeopathy diarrhea is explained as an individual disease in addition it is also a condition occurring during various periods of childhood disorders like dentition, weaning etc for which the causes may be nutritional deficiency or infection. Individual or combined miasmatic variation leads to the formation disease condition<sup>3</sup>.

### Symptoms of Diarrhea: Under – Fives

Liquid or watery stools more than three times a day along with 2 or more following symptoms of Infantile Diarrhea:-

- 1) Fever
- 2) Tenesmus
- 3) Dry mouth and tongue
- 4) Thirsty
- 5) Stool microscopy-presence of pus cells and mucus in stool.

### Approach to Diarrhea: Under-Fives

- 1) Impact of diarrhea
- 2) How is the infant/child growing?
- 3) How is symptom affecting child's life?
- 4) Mechanism of diarrhea
- 5) Description of stool
- 6) Blood? Oily? Food particles?
- 7) Frequency
- 8) Diet and exposures
- 9) Complete physical exam
- 10) Attention to skin, LN, spleen etc.

### How to Treat Diarrhea: Under-Fives

- 1) Avoid drinks with fructose. Child should not receive more than 4-6 ounces a day.
  - 2) Avoid other sweetened clear liquids. Give your child the recommended amount of milk for age, and water as requested.
  - 3) Fiber supplements can sometimes add bulk to the stool.
  - 4) Increased dietary fat can decrease diarrhoea. For example, switching to whole milk may be the only dietary change necessary
- Along with the homoeopathic medicines.

## 2. Review of Literature

**World Health Organization (WHO)** indicates the fundamental contributors to the massive burden of disease in developing countries. The management of a child presenting with acute diarrhoea must include a thorough history and examination with evaluation of hydration status, nutritional status and comprehensive clinical evaluation for any complications or associated illnesses. The most recent advances in the area of acute diarrhoeal disease include zinc supplementation, reduced osmolarity oral rehydration solution (ORS) and rotavirus vaccination<sup>1</sup>.

Diarrhoea under-fives is known as *Balatisara*, in *Ayurveda*, Atisara is explained as an individual disease in addition it is

also a condition occurring during various periods of childhood disorders like dentition, weaning etc for which the causes may be nutritional deficiency or infection. Individual or combined doshic variation leading to the formation of Aama is the main reason for the condition Atisara. By considering the severity of the problem, line of treatment for Atisara is the administration of Stambhana or Grahi drugs along with Santarpana procedure. For the study as it is one of the simple herbal combination mentioned by chakra datt Sanhita.

#### Can cause this diarrhea?

- 1) **Giardia, cryptosporidium, or clostridium difficile** — These are infections that can cause chronic diarrhea and are treated with antibiotics.
- 2) **Celiac disease**— Sensitivity to gluten, a protein in wheat, rye, and barley. A screening blood test can be drawn.
- 3) **Inflammatory bowel disease**— A disease of chronic inflammation in the large and/or small bowel.
- 4) **Malabsorption** — A group of diseases in which the bowel cannot absorb certain nutrients or calories. The result is poor growth in spite of consuming normal calories.
- 5) **Lactose intolerance**— An inability to digest lactose, which improves after minimizing dairy products<sup>5</sup>.

In *Homoeopathy*, the system works on a basic principle of “*similia similibus curanter*.” The symptoms are the sole weapon to work with.

**Dr. Boericke** in his repertory has placed the rubric ABDOMEN under the section DIARRHOEA, INFANT, IN. The rubric covers several medicines which are prescribed for the diarrhoeal complaints, but the prescriptions are solely based on totality of symptoms<sup>6</sup>.

The “Homoeopathic Medical Repertory” contains rubric ‘DIARRHOEA, CHILDREN, IN under the section ‘Diarrhoea’ (Murphy)<sup>7</sup>.

#### Homoeopathic Management of Diarrhoea: Under-Fives

Homoeopathic medicines will be prescribed to patients based on the totality of symptoms. Medicines will be administered along with dietetic management and oral rehydration if necessary. Patients will be treated with an individually chosen homeopathic medicines.

#### Therapeutics:

**Arsenicum** have stools that are acrid and tend to burn the anus. Most typically, people develop symptoms as the result of eating spoiled or tainted food or eating too much fruit. They usually feel exhausted, yet are restless in bed, unable to find a comfortable position. They are also very anxious. Their worst symptoms are at and after midnight, and they are very thirsty but for sips only of fluids at a time.

**Podophyllum** usually experience gurgling in the abdomen with a very sudden urge to have a stool. The stools are profuse and offensive smelling, and are usually expelled with great force and little pain, followed by great exhaustion

after each stool. Their diarrhea is aggravated by eating, drinking, and moving around and may alternate with a headache. This diarrhea is sometimes experienced in teething infants and in children who have eaten a lot of fruit.

**Chamomilla** is indicated primarily in infants and children, especially when they are extremely irritable, quarrelsome, fitful, and inconsolable. Typically, they ask for something and then reject it once it is offered. Only rocking and being carried provide temporary relief of their discomfort. They are aggravated by heat, worse in the evening until midnight, and better from cold drinks. Teething or colicky infants who experience diarrhea tend to need this remedy. Their diarrhea tends to be offensive, green, and slimy, like chopped grass, and it smells like rotten eggs.

**Mercurius** is known to be most effective in treating people with diarrhea who have the “never completely done” sensation-- that is, no matter how many times they have diarrhea, they still feel that they have more left. Typically, they experience much retching during release of the stool, and the stool may have some blood in it. This retching tends to exhaust them. . In any case, their symptoms are worse at night.

**Sulphur** is a remedy for people who experience a sudden, involuntary expulsion of their diarrhea, including when they think they are passing gas. The diarrhoea is thin, watery, offensive, acrid, and smells of rotten eggs. It tends to be painlessly expelled, and the most frequent problems are at 5am and at night.

**Veratrum album** is indicated when people have diarrhoea and vomiting and are very chilly and weak. Despite being chilly, they tend to crave ice cold drinks. They may also have bloated abdomens and experience stomach cramps<sup>8</sup>.

### 3. Methodology (Materials & Methods):

- 1) **Study Setting:** This study was conducted at our College & Hospital attached to our college. Subjects for the study were selected from the College OPD & IPD Departments.
- 2) **Study Duration:** Each case is followed up to 3 days, 7 or 15 days according to patient’s improvement up to 3 months.
- 3) **Study Design (Type Of Study):** Prospective Cross-sectional study design
- 4) **Sample Size & Selection Of Sample:** 30 cases were selected for study. All 30 cases were selected by Simple Random Sampling Techniques.
- 5) **Inclusion/ Exclusion Criteria:**

#### Inclusion criteria

- a) Children suffering from Diarrhoea in between the age group of 1 to 5 years; irrespective of sex, religion, socioeconomic status and food habits.
- b) Diarrhoea during dentition period, malnutrition and Infective origin.
- c) Diarrhoea with mild to moderate dehydration.

**Exclusion Criteria:**

- a) Children above the age of 5 years below 1 Year.
- b) Child suffering from Diarrhoea with severe dehydration.
- c) Child suffering from immune compromised disorders

**6) Selection of Tools**

The diagnosis was made on the clinical presentation, which later confirmed by laboratory investigations like CBC, urine (R), stool examination, Serum Electrolytes, USG where ever required, etc. Clinical assessment of dehydration as follows:

**Assessment of dehydration:**

Dehydration can be accessed on the basis of signs and symptoms presented as follows:

| Characteristics                 | Grade 1 Mild dehydration | Grade 2 Moderate dehydration |
|---------------------------------|--------------------------|------------------------------|
| % of loss of fluid volume       | 0 to 5 %                 | 5 to 10 %                    |
| Loss in ml/kg.                  | 50 ml/kg                 | 50 to 100 ml/kg              |
| General appearance              | Thirsty                  | Irritable/ Lethargic         |
| Pulse                           | Normal                   | Rapid/Normal                 |
| Blood pressure                  | Normal                   | Decreased                    |
| Respiration                     | Normal                   | Normal/Rapid                 |
| Eyeballs                        | Normal                   | Soft                         |
| Anterior fontanel               | Normal                   | Slightly depressed           |
| skin turgor                     | Normal                   | Normal to decreased          |
| Mucus membranes, tongue & other | Moist                    | Dry                          |
| Tears                           | Present                  | Reduced                      |
| Urine output                    | Normal                   | Decreased                    |

**Informed Written Consent:**

Informed Consent of parents has been obtained prior inclusion of subjects in the study.

**Data Analysis:**

Appropriate test of significance at 5% and 1% test of significance is applied.

For clinical evaluation the improvement or the assessment is grouped into 6 types according to the nature of improvement.

**1) Positive Response:**

- a) Marked improvement:
  - Complete disappearance of objective symptoms.
  - No recurrence for next 3 month even after discontinuation of the medicine.
- b) Moderate improvement:
  - Whenever 75% of the symptoms are subsided and the patient is continuing medicines with a feeling of well-being.
  - The patient is able to play with the continuation of the medicines.
- c) Mild improvement:
  - When only about 50 % of the symptoms of the patients are
  - Subsided but with fluctuation of symptoms of lesser intensity.

**2) Negative Response:**

- a) No improvement:
  - Presence of objective symptoms, no improvement.

- Laboratory investigation reveals no change in TLC, Stool microscopy.
- Patient who discontinued the treatment by not getting any improvement even after 3 visits was considered under no improvement.
- b) Dropped out:
  - Patient did not turn up although advised or discontinued the treatment after one or two visits.
- c) Worse:
  - Aggravation of objective symptoms.

**4. Observation and Analysis**

**1) Age Group Statistics:**

| Age Group | No. of Patients | %      |
|-----------|-----------------|--------|
| 1 – 2     | 13              | 43%    |
| 2 – 3     | 09              | 30%    |
| 3 – 4     | 05              | 17%    |
| 4-5       | 03              | 10%    |
| Total     | 30              | 100.00 |

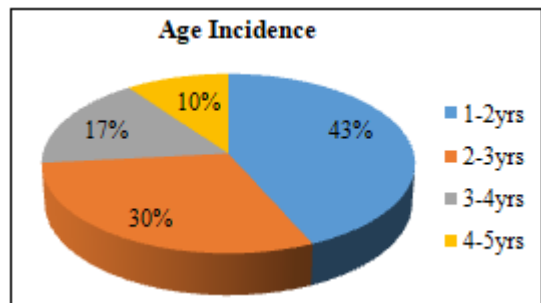


Figure 1

The above observation in figure1 shows; higher incidence of diarrhoea in age group 1-2 years i. e.43 % and about 30% in age group 2-3 years.

**2) Socio economic status wise Statistics:**

| SES          | No. of patients | %    |
|--------------|-----------------|------|
| High class   | 08              | 27%  |
| Middle class | 10              | 33%  |
| Low class    | 12              | 40%  |
| Total        | 30              | 100% |

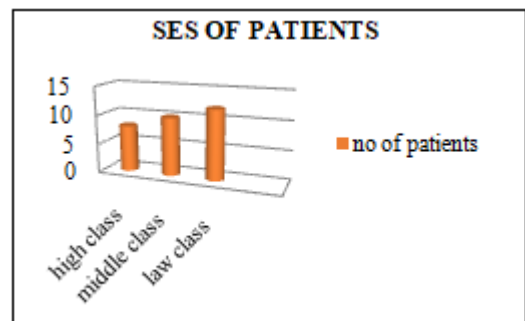


Figure 2

The above observation in figure2 shows that 8 out of 30 patients i.e.27% patients were from high socio-economic class, 10 out of 30 patients i.e. 33% patients were from middle socio-economic class, 12 out of 30 patients i.e. 40% patients were from high socio-economic class

|                 | Marked Improve | Moderate Improve | Mild improve | Drop | Not improved | Worse | Total |
|-----------------|----------------|------------------|--------------|------|--------------|-------|-------|
| No. of patients | 14             | 08               | 06           | 01   | 01           | 00    | 30    |
| %               | 47             | 27               | 20           | 3    | 3            | 00    | 100   |

### 3) Percentage of improvement

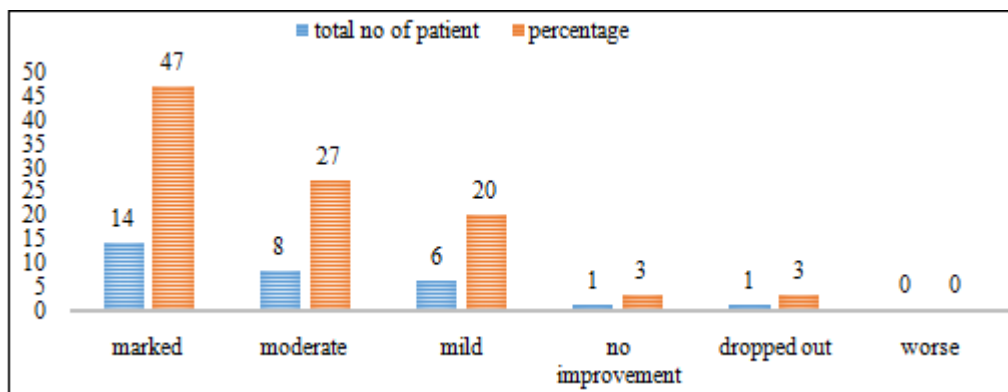


Figure 3

The above observation in figure3 shows that 14 out of 30 patients i.e. 46.7% got marked improvement, 08 out of 30 patients i.e. 26.6% got moderate improvement, 06 out of 30 patients i.e. 19.9 got mild improvement, 01 out of 30 patients i.e. 3.4% dropped out, 01 out of 30 patients No improvement i.e. 3.4%, no one is getting worse during treatment period.

## 5. Discussion

The advent of Homoeopathy and its holistic concept opened new era in the world of medicine. The concept of health, disease and cure in Homoeopathy is totally different from orthodox system of medicine. Spirit is maintaining the body in living condition. This makes the difference between living and dead. This thing according to Dr. Hahnemann termed as vital force. Thus the human organism is triune entity constituting of *body, mind* and *vital force*.

How does Homoeopaths treat diarrhoea under-fives and its consequences? Homoeopath do not treat the disease, they treats the individuals according to,-

- Homoeopathic philosophy
- Management in accordance to Totality & Similimum
- Auxiliary treatment

Homoeopathy is a system of therapeutics based on the administration of minute doses of drugs which are capable of producing symptoms in healthy persons, like those in the disease treated.

#### Illustrations:

The study was confined to a randomly selected inhabitant of both sexes and religion with age group of 1-5 years. Total 30 patients were taken for the study.

An overall study of Homoeopathic system along with the concept of Health, Disease, and Cure is studied. The cases taken for study were taken in detail. The current study has made an attempt to provide statistical data on a small sample of age group 1-5 years in both male and female children belonging to a district in India. Case were analyzed on the

basis of miasms, susceptibility, remedy, Pre and treatment grading assessment.

During case taking, apart from understanding what was characteristic in the Toddler diarrhoea symptoms, a thorough search was made to gather characteristic symptoms, in the chief complaints, in the physical generals and the mental state. Using this information coupled with the family and past history of the patient the portrait of disease was formed understanding the anamnesis of the disease.

For prescribing the Homoeopathic Medicine along with dietary advice was given. Further analyzed based on miasm and susceptibility, repertorized and selection of remedy and potency was done, based on homoeopathic and fundamental laws.

Homoeopathic remedies thus prescribed were covering the symptoms of diarrhoea under-fives, the mental status and the development history (as considered in the field of paediatrics) and also the innate peculiar, queer, rare and strange attributes at physical as well as mental level which differentiated the patient from other individuals suffering from the same disorder.

During follow up along with the presenting complaints, physical generals like appetite, sleep and activity were interrogated to know the general well-being of the patient in the acute cases were considered.

The samples of 30 cases have been studied in acute sufferings. All cases have been taken from College O. P. D. & I. P. D. departments attached to our college. Different physiological as well as pathological factors were considered as different kind of precipitating factors as well as maintaining causes were studied.

From *Statistical Analysis* of data in the said study underlying *Age Group* recorded are 1 to 2 yrs.13 cases (43%), 2-3yrs.09 cases (30.00%), 03-04 yrs.05 cases (17%). Very few Cases are from age group 04 yrs. -05 yrs. i. e.03 cases which constitutes 10% of the whole sample size. This

shows that children's of 1-2 years age group are more in the study.

**Sex Incidence**-Male patients are 17 (456.67%), &Female patients are 13 (43.33%). This also shows that female is more in the study than females.

**Remedy statistics**-The following remedies are prescribed during the study from which *Arsenicum album* was indicated for 7 cases 23% (Case no.6, 7, 13, 16, 20, 25, 27), *Podophyllum* for 6 cases 20% (Case no.1, 5, 9, 12, 28, 30), *Phosphorus* for 4 cases 14% (Case no.3, 8, 24, 29), *Argentum nitricum*. for 2 cases 07% (, Case no.4, 26), *Pulsatilla* for 2 cases 07%, (Case no.19, 22), *Sulphur* for 2 cases 07%, (Case no.10, 21), *Aethusa cynapium* for 1 case 04% (Case no.2), *Calcaria carb* for 1 case 03%, (Case no.14), *Chamomilla* for 1 case 03%, (Case no.23), *Cina* for 1 case 03%, (Case no.18), *Colchucum* for 1 case 03% (Case no.15), *Mercurius solubilis* for 1 case 03%, (Case no.11), *Nux vomica* for 1 case 03% (Case no.17). are used for Prescription in the present study

## 6. Result

In the present study of 30 cases out of which 14 cases were Marked

*Improvement* which accounts 47.00%, 06 cases shows *Mild Improvement* which accounts 20.00% and 8 cases shows *Moderate Improvement* which account 27.00% and 01 case which didn't came for further follow-ups during study so *Dropped out* which accounts for 3.00% & 01 case was shows *No Improvement* i. e.3.00% during 3 months follow ups. of the total sample size of 30 cases.

## 7. Conclusion

The study found that; well selected Homoeopathic medicines (by considering susceptibility, disposition, miasms, physical and mental make-up) had improved the diarrhoea under-fives & general health of a patient. We observed faster recovery in children under age five with diarrhoea. Here we have observed the effectiveness of Homoeopathic remedy in cases of diarrhoea under-fives in children. We observed the significant effectiveness of homoeopathic medicines like Ars. Alb, Cham, Merc. sol., Nux vom., Podo., Sulph, Vert Alb etc. in 30 C potency, In the cases of diarrhoea under-fives.

### Conflict of interest

The author's declared that they have no any conflict of interest

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