

# Scope of Homoeopathy in Case of Hypothyroidism- A Case Report

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**Abstract:** *Hypothyroidism happens when the thyroid gland doesn't make enough of thyroid hormones. This condition is called underactive thyroid. Hypothyroidism may not cause noticeable symptoms in its early stages. But with the progress of the disease, it can hamper the whole system of the body.*

**Keywords:** Homeopathy Hypothyroidism

## 1. Background

Hypothyroidism is a hypo metabolic state resulting from inadequate secretion of thyroid hormones characterized by a general reduction in metabolic function that manifest as slowing of physical and mental activity. The main line of conventional system of medicine is to provide thyroid hormone for the rest of life of patient. Besides some adverse effects, the treatment cost of the therapy impels the patients to seek alternative therapy. Endocrine disorders are common among Indian population out of which thyroid disorders represents an important subset of these endocrine disorders. (1) Hypothyroidism is one of the most common endocrinopathy worldwide, and its incidence is increasing rapidly. (2) Hypothyroidism is a condition in which the thyroid gland is unable to make adequate amounts of thyroid hormone to meet the requirement of peripheral tissues. Primary hypothyroidism is characterized by failure of the thyroid gland itself; a fall in serum concentration of thyroid hormones causes an increased secretion and elevation of TSH concentrations. (3) The prevalence of hypothyroidism in India is 11%, compared with only 2% in the UK and 4 - 6 % in the USA. Among the adult population in India, the prevalence is 3.9%. in women; the prevalence is even higher, at 11.4%, when compared with men, in whom the prevalence is 6.2%. (2) Prevalence of hypothyroidism in the reproductive age group is 2 - 4% (5). Primary thyroid gland failure can occur as result of chronic autoimmune thyroiditis, radioactive iodine treatment, or any thyroid surgery. Other causes include drug adverse effects like amiodarone and lithium. (6)

Hypothyroidism may result in a myriad of clinical signs and symptoms. Symptoms commonly associated with hypothyroidism are often nonspecific. These include weight gain, fatigue, poor concentrations, depression, diffuse muscle pain, and menstrual irregularities. Symptoms with high specificity for hypothyroidism include constipation, cold intolerance, dry skin, proximal muscle weakness, and a hair loss. Hypothyroidism can be easily detected by assessing TSH levels in the blood. A slight increase in TSH levels with normal T3 and T4 indicates subclinical hypothyroidism, whereas high TSH levels accompanied by low T3 and T4 levels indicates clinical hypothyroidism. (5) Untreated hypothyroidism may lead to serious

cardiovascular and neurological complications. (9) It may also leads to complications such as mentals problems, peripheral neuropathy, myxoedema and infertility. (3) The gold - standard treatment for primary hypothyroidism is thyroid hormones replacement therapy with Levothyroxine. (10) The treatment dosage of thyroid hormone is gradually titrated upwards until an individual displays normal physiological concentrations of free thyroxine (FT4) and TSH in the serum. (11) Differential diagnosis of primary hypothyroidism on the basis of clinical presentation due to the subtle signs and symptoms includes Euthyroid sick syndrome, Goitre, myxoedema coma, anaemia subacute thyroiditis, iodine deficiency, Addison disease, chronic fatigue syndrome, depression, erectile dysfunction, infertility. (12)

### A Case Report with history of presenting illness

Patient named as Mrs IDJ 45 years female came to the opd, gradually developed irregular menses in the last 1 year 6 months. This complaint developed after her conflict with her husband at times there is absence of menses since two three months and there is profuse and prolonged menses. Character of bleeding is dark red with many large clots passed p/v, profuse for many days. It's accompanied with weakness pain in lower abdomen and legs cramps.

Life space - Patient was apparently well 2 years back when she developed conflict with her husband over some property matter. She purchased some property from the money she received from money from her parents without telling to her husband. He got to know about all this from some relative in modified form which leads to dispute between the two. She had to leave her house and leads to divorce. When asked about why she didn't want told to her husband regarding this she said that she do not want to share property with anyone as her husband always gives all to their brother. She has one son she wants to secure him and herself. As a result, she developed grief, extreme anger. She feels alone and cries alone. She is very secretive jealous and greedy.

**Past history - PROM - caesarean section done – 14 years back - fallopian tube burst**

### Family history

Nothing specific found

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**Clinical Finding**

Blood Pressure maintained at 110/90 mmHg Pulse Rate – 74/min

Respiratory Rate – 18/min Fair

Lean thin (51 kg)

**Homoeopathic Generals**

**Mental generals - already explained in HOPC with life space**

**Physical generals**

The physical generalities where thirst was intense, desire salty things. Stool was regular, semisolid twice daily. All other physical generals were within normal limits.

**Analysis of a case**

On detailed case taking, after analysis and evaluation, the characteristic symptoms were considered for framing the totality and were converted to relevant rubrics for

repertorization. Characteristic totality includes

- Secretive, reserved
- Fear of darkness
- Jealousy
- Fear of snake
- Can't wear anything around neck; feels suffocated
- Desire to be alone
- Sadness
- Bright red profuse bleeding p/v
- Desire - salty
- Hypothyroidism.

Selection of remedy was based on repertorization of the case giving more importance on the mental as well as physical general symptoms than particular symptoms using Synthesis Repertory, version 9.0 of RADAR software. The repertorization chart is shown in [Figure1].

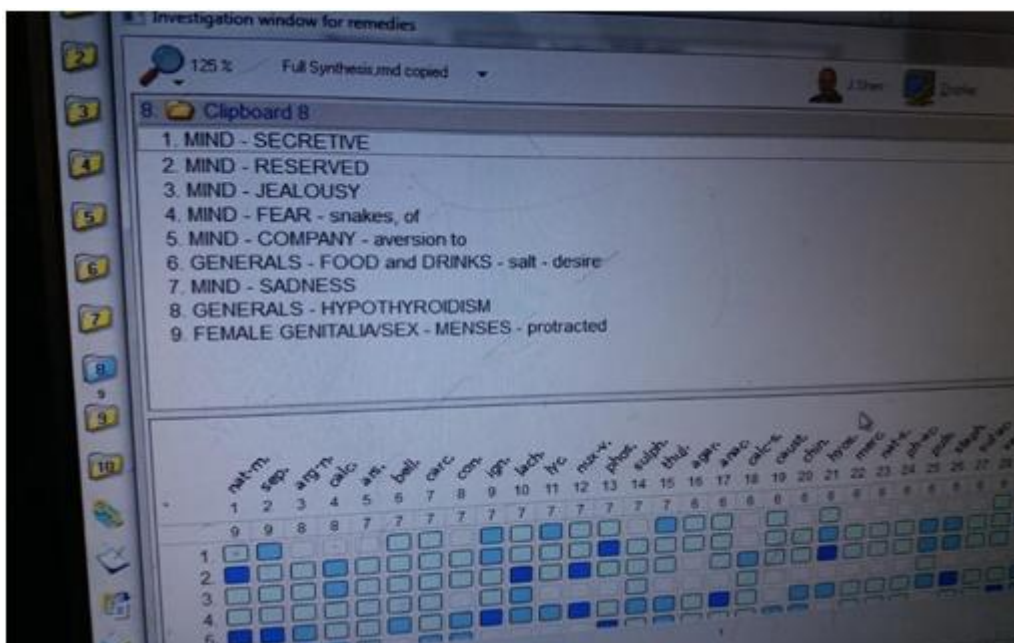


Figure 1: Investigation

**Thyroid Profile Test (TFT)**

- 1) Before T/t (15.9.2021) - FT3 - 1.89 ng/dl, FT4 - 8.90 ug/dl, TSH - 9.239uIU/ml (Fig 2)
- 2) After T/t (15.2.2022) - FT3 - 1.23ng/dl, FT4 - 11.23ug/dl, TSH - 5.0 uIU/ml (Fig 3)



Figure 2



Figure 3

**Zulewski Clinical Score for Hypothyroidism follow up chart**

S. No	Symptoms		Baseline	After 6 months
1.	Diminished sweating	Sweating in the warm room or a hot summer day	1	1
2.	Hoarseness	Speaking voice, singing voice	1	1
3.	Paraesthesia	Subjective sensation, sensation of tingling, pricking noticed by patient	1	1
4.	Dry skin	Dryness of skin noticed spontaneously, requiring treatment	1	0
5.	Constipation	Bowel habit, use of laxative	0	0
6.	Impairment of hearing	Progressive impairment of hearing	0	0
7.	Weight increase	Recorded weight increase, tightness of clothes	1	1
<b>Physical signs</b>				
1.	Slow movements	Observe patient removing his clothes, working speed	0	0
2.	Delayed ankle relaxation time	Observe the relaxation of the reflex	1	1
3.	Coarse skin	Examine hands, forearm, elbows for roughness and thickness of skin	1	0
4.	Per orbital puffiness	This should obscure the curve of the malar bone	0	0
5.	Cold skin	Compare temperature of hands with examiner	1	0
<b>Sum of all symptoms and signs present</b>			<b>8</b>	<b>5</b>

**Follow - up and Outcome****Table 1:** Timeline including follow - up of the case

Date	Signs and symptoms	Prescription
15.09.2021	Irregular menses, hypothyroidism, profuse bleeding p/v bright red with clots, pad used 7 - 8 pad in a day, hypothyroidism TSH level - desire - salty, mentals state already discussed	Natrum mur 0/1 BD for 15 days
10.10.2021	Menses not yet appeared. Pain in body in the last 2 days, stitching type of pain, aggravation in morning, better by lying down	Natrum mur 0/2 BD for 15 days
24.11.2021	Irregular menses improved. Mentally she is little bit relaxed and wants to move in life with her kids. She is ignoring what others ones are saying. LMP - 25.10.2021, Bleeding p/v as it is, no improvement	Natrum mur 0/3 BD for 15 days
29.01.2021	LMP - 19.12.2021, Bleeding decreased, pad used 3 in a day, days. decreased from 10 days to 6 days	Natrum mur 0/4 BD for 15 days
23.01.2021	Mentally she is feeling well, she is in talking terms with her husband. Advice for thyroid profile	Natrum mur 0/5 BD for 15 days
15.02.2022	Menses not yet appeared, pain in lower abdomen and legs appeared, loss of appetite	Natrum mur 0/6 BD for 15 days
03.03.2022	Menses appeared on 17.2.2022, pad used 3 - 4 pad in a day	Natrum mur 0/7 OD for 15 days.

**2. Discussion**

Hypothyroidism can be accompanied by a range of clinical manifestations, negatively impacting health status. The mainstay of conventional system of medicine is based on lifelong treatment with thyroid hormones artificially on a lifelong basis which is not only costly but cumbersome too.

Not too many people of our country can afford such an expensive treatment where use of homoeopathic remedies comes as an optional treatment but it's truly based upon the effectivity rate.

In this case report Lachesis was selected as a similimum on the totality of characteristics symptoms. Treatment started with 0/1 was prescribed on September 15 2021 and it was increased as per the requirement of case and according to principles of homoeopathy upto 0/6 OC/1 dose to During the follow - up period up to October she was initially showing no improvement in irregular menses as menses did not appear. After two months of treatment when Lachesis 0/3 was given then menses appear but the bleeding was profuse as previously. Then as we raised the potency to 0/4 to 0/6. After starting with the higher potency there was visible improvement in profuse bleeding p/v and weight is standstill. (76 kg) Then we advised her to go for her thyroid profile along with review Of Zulewsky's score. At the

staring of treatment Zulewsky's score 8 reduced to 5 in 6 months of treatment. Her TSH values were decreased this time from previous levels and comes within normal limit.

**3. Conclusion**

This case report has shown the utility of homoeopathic medicines in cases of hypothyroidism in millesimal scale of potency. With homoeopathic medications we can improve the quality of life of patient with ease and comfort.

**Consent**

Patients consent was taken to publish without revealing her identity.

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#### Conflict of Interest of Each Author/Contributor

The authors declare that they have no competing interest.

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