

Exploring the Impact of Homoeopathy on Developmental Problems in Children

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Abstract: Children often experience developmental, emotional, and behavioral disorders in childhood and adolescence, which can lead to stress for families, schools, and communities. Psychiatric disorders can be influenced by biological factors such as genetic predisposition, fragile - X, brain damage, Down syndrome, intelligence, temperament, illness, physical handicap, fatigue, and malnutrition, as well as family psychological factors like attitudes, rejection, child abuse, discipline, anxiety, role models, expectations, time spent with the child, conflict, alcoholism, school psychological factors, stress, self - esteem, achievement, peer group, discipline and social skills, and anti - social behavior. It is essential to create care and interventions that are effective for school - age children. Early administration of constitutional homoeopathic medicine can significantly reduce the risk of disease and preserve both physical and mental health. This article is providing comprehensive details on the developmental disorders of children and teenagers.

Keywords: Developmental disorders, Pica, Homoeopathy, Mental retardation

1. Introduction

Wood Worth defines behavior as motor or cognitive actions, cognitive processes, and affective behaviors. The adage "Today's children are tomorrow's citizens" emphasizes the importance of children's emotional and mental health. Children often experience developmental, emotional, and behavioral disorders in childhood and adolescence, which can lead to stress for families, schools, and communities.

These issues can include inattention, forgetfulness, impulsivity, trouble managing emotions, aggression, somatic issues like headaches, stomach aches, anorexia, and insomnia, and difficulty making friends and interacting with others. These signs indicate a child's distress and need for care. However, most parents, educators, and adults lack the sensitivity to identify these subtle behavioral issues. Addressing these issues is crucial for a child's future success [2].

Epidemiology:

Half of all lifetime mental disorders begin before the age of 14, with worldwide prevalence rates ranging from 10% - 20%. 15% of children experience severe emotional problems. A recent study by ICMR found a 12.5% prevalence of mental and behavioral disorders in children. About one - third of the world's population is under 15, with 5 - 15% suffering from behavioral disorders that impair their social abilities. In India, mental health issues in school - age children range from 6.33% to 43.1% [3].

The criteria for identifying that the child or adolescence maybe having a problem are as follows:

Behaviors in children vary in age, frequency, severity, and impact on their development. Normal behaviors are common in children under two years old, but should be considered if they occur frequently. Severe behaviors, such as violent behavior or silentness, require professional assistance.

Persistent behaviors can negatively affect a child's growth and development, such as poor academic performance due to hyperactivity or poor concentration. Social structures and culture also play a role in a child's development, with certain behaviors considered abnormal in all cultures and social classes. Professional assistance is necessary for even a single, intense or severe episode.

Causes of Childhood And Adolescent Psychiatric Disorders can be influenced by biological factors such as genetic predisposition, fragile - X, brain damage, Down syndrome, intelligence, temperament, illness, physical handicap, fatigue, and malnutrition, as well as family psychological factors like attitudes, rejection, child abuse, discipline, anxiety, role models, expectations, time spent with the child, conflict, alcoholism, school psychological factors like stress, self - esteem, achievement, peer group, discipline, social skills, and anti - social behavior [5].

Common Developmental disorders of childhood and adolescence as classified by ICD - 10 and DSM - IV TR.

1.1 Developmental

- Mental retardation
- Specific learning disorders (SLD)
- Autism
- Enuresis
- Encopresis
- Pica
- Rumination • Sleep

1.2 Mental Retardation

Mental retardation is a condition characterized by below - average intellectual functioning during developmental stages, with IQ scores below 70 and lack of adaptive skills. It is a significant issue in the US, with an incidence rate of 4

- 5 per 1000 people. There are four categories of mental retardation: mild (50 - 60), moderate (35 - 49), severe (21 - 34), and profound (0 - 20). These individuals can perform self - help, basic reading and writing, and skilled work. Mental retardation can be caused by factors such as prenatal trauma, birth trauma, inherited disorders, severe malnutrition, early childhood illnesses, and severe brain damage. Training mentally retarded children in repetitive, skilled, and unskilled tasks can help them manage daily tasks [6].

Clinical features: Early motor milestones, such as controlling the head, sitting, standing, walking, and speaking, may indicate mental retardation in children. However, mildly retarded children often show normal motor development and language delay. Symptoms include slower walking, difficulty speaking, memory issues, and difficulty understanding consequences. Mental retardation can lead to irrational behavior, lack of impulse control, passivity, self - injury, stubbornness, low self - esteem, psychotic disorders, attention - seeking behavior, aggression, dependency, withdrawal from social activities, and attention - seeking behavior. Mental sub normality depends on severity, physical and psychiatric conditions, and care and education quality.

Management should explain the diagnosis, its causes, and the child's potential outcomes to parents. Children with mental retardation take longer to learn and often forget previously learned information, requiring systemic help from parents, teachers, and caregivers. They need structured teaching and should not be taught skills too early. Parents play a crucial role in training these children, and female therapists and counselors play a key role in helping parents stimulate their child's development during the preschool period [2].

Homeopathic Medicine for Mental retardation - Abrotanum, Baryta Carbonicum, Calcarea Carbonicum, Bufo, Carcininum, Iodum, Lycopodium, Phosphorus, Silicea, Sulphur, Zincum metallicum, Tuberculinum [14].

1.3 Dyslexia

Dyslexia is a learning disorder affecting 3 to 15% of school - age children, causing difficulty in reading due to difficulties in identifying speech sounds and decoding them. It does not cover children with learning issues due to visual hearing, motor disabilities, mental retardation, emotional disturbance, or economic disadvantage. Specific learning disabilities are primarily caused by genetics, perinatal or neonatal trauma, low birth weight, maternal smoking, alcohol consumption during pregnancy, and elevated lead levels.

Learning disorders are classified into three categories:

1.3.1 Academic skill disorders, which include developmental reading disorders, which involve significant impairments in reading skills like word recognition and comprehension,

1.3.2 Developmental arithmetic disorders, which involve marked difficulties in arithmetic skills, and

1.3.3 Developmental expressive writing disorders, which involve severe impairments in spelling, grammar, punctuation, and poor paragraph organization, leading to untidy and unrecognisable handwriting [3].

Homeopathic medicines for dyslexia: Agaricus, Anacardium, Arsenicum album, Baryta carb, Calcarea carb, Carcininum, Germanium metallicum, Lycopodium, Phosphorus, Silicea [14].

1.4 Language Disorders

Are categorized into four subcategories:

- 1) Phonological disorder, involve errors in sound production
- 2) Stuttering or Stammering,
- 3) Developmental expressive language disorder includes limited vocabulary, delayed speech development, and idiosyncratic word ordering, and
- 4) Developmental receptive disorder lacks language comprehension.

Clinical features describe a student's difficulties in recognizing rhymes, learning new words, and recognizing letters. They struggle with blending sounds, recognizing common sight words, and spelling. They struggle in middle school, making spelling errors, and reading at a lower academic level than speaking or in conversation. In high school, they often skip over small words, don't read at the expected grade level, and prefer multiple - choice questions over fill - in - the - blank or short answer questions.

1.4.1 Motor skill disorders, such as developmental coordination disorder, cause children to have impaired coordination, affecting their daily activities like tying shoe laces or knots.

Management: Mild learning disorders can be easily managed through education, treatment plans, and behavioral principles. Parents should avoid punishment for mistakes and follow a structured program of tasks graded on difficulty. Behavioral principles of operant conditioning are used to shape behavior. Parents can improve their child's reading comprehension, connect letters to sounds, and use software, apps, and Chrome tools. Free audio books can be found, and self - advocacy skills can be learned in grade school and middle school. Parents should also discover their child's strengths [1] [2].

Homeopathic medicines for Language disorders: - Baryta carb, Lycopodium, Merc Cor., Oleander, Rhus tox, Sulph, Syphilinum [11] [14].

Homeopathic disorders for Stammering: - Bell, Bovista, Bufo rana, Cuprum met, Causticum, Hyoscymus nig., Merc Sol., Stramonium [11].

1.5 Pervasive Developmental Disorders

Includes Autism Spectrum Disorders, include impairments in social interaction, language, communication, and play, including

- 1) Autism,
- 2) Asperger's disorder, and
- 3) Rett's disorders.

1.5.1 Autism/Autistic disorder: is a behavior disorder characterized by deficient social interaction, language, communication, and play. Children with Autism experience speech and language delays, comprehension issues, and poor eye contact. They lack imagination, hyperactivity, and interest in TV commercials. Symptoms include repetitive play activities, hand flapping, twirling, and excessive stereotyped play. Autism is a common disability in children, with seizures more common than in the general population. Management requires a multidisciplinary approach, including family therapy, pharmacotherapy for seizures and hyperactivity control, and behavior modification. Family counseling is crucial for managing autism [2].

Homeopathic medicines for Autism: Cann indicus, Carc, Helleborus, Lyco, Nat - m, Opium, Thuja, Tub [12]

1.5.2 Asperger's syndrome is a developmental disorder characterized by difficulties in social interaction, non-verbal communication, and restricted behavior. It is a milder form of autism spectrum disorder (ASD) with normal language and intelligence. Children with Asperger's have less social interaction impairment and develop adequate attachment with parents. They also exhibit imaginative play, unlike autism. The disorder is lifelong, with a prevalence of 1 in 10, 000 and a male - to - female ratio of 9: 1.

1.5.3 Rett's disorder, first described in 1966, is a progressive encephalopathy characterized by deceleration of head growth, microcephaly, gait abnormalities, and loss of language and social skills. It affects 1 in 10, 000 males and 1 in 15, 000 females and is a genetic brain disorder. Symptoms include language, coordination, and repetitive movements, with slower growth, walking problems, and smaller head size. Complications can include seizures, scoliosis, and sleeping problems. The cause is unknown, and there is no specific treatment. The disorder is also known as Cerebroatrophic hyperammonemia [2].

Homeopathic medicines for developmental disorders: -

Walk general late learning to - Bar - C., Calc., Calc - F., Calc - P., Caust. Nat - M.

Slow learning to talk – Agraphis nutans, Bell, Calc, Calc - p, Nat - m, Phos, Silicea, Thuja, Tub [11].

1.6 Specific Developmental Disorders

It includes:

1.6.1 Elimination disorder: in this we have two major disorders I). Enuresis II). Encopresis

1.6.1 (a) Enuresis, also known as bed wetting, is a common issue in both boys and girls during their developmental period. It is an involuntary voiding of urine not caused by a physical condition and is classified into persistent (primary) and progressive (secondary) types.

Primary enuresis occurs when a child is never dry at night, with 75% of cases being due to inadequate toilet training. Regressive enuresis is often triggered by stressful environmental events, such as the birth of a sibling, marital conflict, or death of a family member. Management depends on understanding the causative factors and appropriate measures to address stressors. Behavioral techniques, such as 'bell and pad' instruments, can be used to control enuresis. Control methods include rewarding dry nights, washing clothes and bed sheets, not giving fluids after dinner, waking the child one to two hours after sleep, and discouraging punishment and humiliation by parents or siblings [2].

Homeopathic medicines for Enuresis in children: -

Aesculus, Bell, Benz - ac, Caust, Chin, Cina, Equis - H, Kreos, Lyc, Med, Nat - m, Phos, Puls, Sep, Sil, Thuja [12].

1.6.1 (b) Encopresis is a serious emotional disturbance in school - age children, causing them to pass feces into inappropriate places when bowel control should have been established. It is less common but is increasing due to early morning school timings.

1.6.2 Management primarily involves behavioral techniques [5].

Homeopathic medicines for Encopresis in children:

Bry, Calc carb, Caust, Nux vom, Opium, Sepia, Silicea, Sulph [11].

1.6.3 Eating disorders: there are two major eating disorders of childhood stage. I) Pica II) Rumination disorder

1.6.3 (a) Pica is a disorder involving chronic ingestion of non-nutrient substances, typically onset in 1 - 2 years. It can cause mental retardation, high maternal and paternal deprivation, family disorganization, poor supervision, and low socioeconomic status. Children with Pica are at increased risk for lead poisoning and parasitic infestations. Treatment includes education, family counseling, and behavior modification [5].

Homeopathic medicines for Pica: - Alum, Calc, Calc - p, Chel, Cic, Con, Hyos, Ign, Nat - m, Nit - ac, Nux - V, Tarent [12].

1.6.3 (b) Rumination disorder is a rare condition characterized by weight loss due to repeated food regurgitation without nausea or gastrointestinal illness. It is more common in males and can be fatal in up to one - fourth of affected children. Treatment focuses on correct eating behavior and often requires parent counseling and family therapy [6].

Homeopathic medicines for Rumination Disorder: - Carbo veg, Lyco, Nat mur, Nux vom, Puls, Bryonia [11].

1.6.4 Sleep Disorder: Many children struggle with bedtime due to difficulty falling asleep, often displaying temperamental traits like fussiness and irritability. Households with busy nighttimes may also cause sleep

issues. Sleep difficulties may be a result of parental strife or anxiety disorders like separation anxiety disorder.

1.6.5 (a) Nightmares are common phenomenon occurring in rapid eye movement (REM) phase of sleep. These occurs more often in girls with affective or anxiety disorders [6].

Homoeopathic medicines for nightmares: - Can, Bap, Borax, Bry, Calc, Cann - i Carc., Cham, Con, Ferr met, Nat - c, Nai - ac, Nux - v, Opium, Phos, Sil, Sulph, Tub [11].

1.6.5 (b) Night terrors

occur in the stage 4 of non REM sleep. The child usually wakes with the scream, is confused, show signs of intense autonomic activity that is laboured breathing, dilated pupils, sweating, tachypnea or tachycardia and appears frightened. The patient often does not recall the incident on waking up the next morning. They may be related to a specific developmental conflict or to a precipitating event [6].

Homoeopathic medicines for night terrors: - Calc, Aur - br, Carb - v, Cina, Kali - br, Kali - p, Stram, Tub [11] [12].

1.6.5 (c) Sleep walking or somnaambulism

Occurs in state 3 or 4 non REM sleep. There may be an associated history of enuresis or family history of sleep walking. It is usually benign the temporal lobe epilepsy should be ruled out [7].

Homoeopathic medicines for somnambulism: - Acon, Nat - m, Opium, Phos, Sil [12].

1.6.5 (d) Narcolepsy

Is characterized by frequent daytime naps, cataplexy, sleep paralysis and/or hypno hallucinations. Polysomnographic studies, showing early onset of REM sleep following sleep onset are required for definite diagnosis.

Some children talk in sleep of the activities of the day. This is considered normal if it occurs occasionally and does not have an impact on child's functional ability during the daytime [6].

Homeopathic medicines for Narcolepsy: - Antimonium tarticum, Nux moschata, Opium [11].

2. Discussion

One foundational principle of the homoeopathic medical system is a holistic approach to healing. It encompasses not only the physical, mental, and emotional growth of the child but also the mother's emotional state during the pregnancy and the environment in which the child is raised. Every human being is a unique individual who has developed to be significantly different from every other human since the moment of creation, according to homoeopathic philosophy. Depending on how well a patient's symptoms match those of the medication, prescriptions are written.

3. Conclusion

Interventions in schools have been found to be effective in treating mental health issues. Considering this, it is essential to create care and interventions that are effective for school - age children. Children with developmental and behavioral issues also require immediate attention because, when left untreated, developmental and behavioral issues can lead to serious psychological issues for the individual, the family, and the community. This is the reason early intervention is crucial. Early administration of constitutional homoeopathic medicine can significantly reduce the risk of disease and preserve both physical and mental health. With homoeopathic treatment, your child can learn more effective ways to manage their emotions and communicate with you, their teachers, their siblings, and other adults in authority.

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