Utility of Synthesis Repertory in Cases of Non -Alcoholic Fatty Liver Disease

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Abstract: The burden of liver disease is increasing in India, however, data show that cirrhosis and its complications are one of cause of increase in mortality in India. Hepatitis B and C, alcoholic liver disease, and non-alcoholic liver disease are probably the major contributors of cirrhosis and liver cancer-related mortality. These metabolic dysfunctional activities can be corrected by the help of homoeopathic medicine along with the help of homoeopathic repertories containing clinical rubrics. Considering the need of effective treatment, I intended to investigate the effectiveness of Homoeopathy and utility of Synthesis in non alcoholic fatty liver disease using radar10. <u>Result</u>: Out of 50 random patients taken for my study, 54% showed marked improvement, whereas 28% showed moderate improvement, 18% showed mild improvement after prescribing Homoeopathic medicine. Impact of Homoeopathic medicine on the patients was found to be statistically significant using paired t test. This study has shown the efficacy of Homoeopathy also has scope in managing in the non alcoholic fatty liver cases.

Keywords: non- alcoholic fatty liver, homoeopathy, synthesis repertory, liver

1. Introduction

Non alcoholic fatty liver disease (NAFLD) is caused by accumulation of extra fat in the liver cell & which is not caused by alcohol. If it remains untreated it may further lead to liver inflammation, liver fibrosis and cirrhosis & ultimately to liver cancer.

Stages of Nonalcoholic Fatty Liver Disease (NAFLD). NAFLD progresses in 4 successive stages. Most people will only ever reach the first level, oftentimes without even being aware of it.

The primary NAFLD phases are:

Simple Fatty Liver (Steatosis) - Painless fat deposition in liver cells, detectable through testing for other causes, Steatohepatitis (NASH) - More severe NAFLD with swollen liver, Fibrosis - Scarring around liver and blood vessels due to inflammation, liver still functions normally, Cirrhosis -Most serious stage, permanent damage with shrunken, lumpy, and scarred liver, can lead to liver failure and cancer.

Clinical presentation of most patients with NAFLD are asymptomatic or have mild right upper quadrant discomfort. Hepatomegaly is present in up to 75% patient along with symptoms such as Pain in the upper right side of the abdomen, Fatigue / weakness Weight loss, swelling in the stomach (ascites) and legs (edema), Jaundice or yellowing of the skin and eyes.

Diagnosis -by detecting raised liver enzymes and ultrasonography.

Homoeopathy in Non alcoholic fatty liver

Homoeopathy treats the person as a whole. Homoeopathic medicines focus on the patient as a person as well as his pathological condition. Medicines are selected after a full individualizing and case analysis.

The method of repertorization follows the Kent method of repertorization.

Role of Synthesis Repertory9.0 through Radar10 in the Management of Non- alcoholic fatty liver disease. this repertory has set new standard by adding many information and continuous verification by users. It is the latest among all repertories and authored by Dr. Fredrick Schroyens.

It is the enlarged version of repertory contains all rubrics and remedies. Repertory has been improved qualitatively in structure and language to make it more comprehensible and to facilitate easy reference at the time of need. It is based on philosophy of generals to particulars.

2. Method/Approach

The research was an exploratory clinical study that was carried out in the outpatient department of Sri Guru Nanak Hospital & College, Ludhiana and its peripheral OPDs. Patients of all age groups, both male & female were taken.

Inclusion Criteria: 1. Patient who were suffering from Fatty liver on basis of clinical findings and history.2. Patient complying for the regular Follow up.3. Patient agreeing to the informed Consent.4. Patient opting for only homoeopathic mode of treatment for their mode of treatment.

Exclusive Criteria: 1. Cases with advance pathology 2. Cases requiring surgical interventions.3. Cases diagnosed with unstable mental or psychiatric illness or life – threatening illness.4. Pregnant women and lactating women.5. Any patient who is on any immunosuppressive therapies.6. Anyone who had past history of alcohol intake.7. Diabetic patient.

Detailed case history was taken as per Performa which was used after its validation of the questionnaire by face validity. On the basis of totality of symptoms, most similar medicine was prescribed.

3. Discussion and Conclusion

It is found that there is no proper approved medicine for the treatment of NAFLD, so most of the management of this

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disease depend upon 1. Doing regular exercise 2. Maintaining healthy eating habits 3. Intake of multivitamins as an alternative treatment for this disease, but such treatment can never amount to more than symptomatic control.

Through my study, I have found Homoeopathy offers possibility of genuine cure in majority of cases and in certain circumstances it can be combined with conventional methodology.

During my study, 50 cases were taken up at random for study. where 56% were males whereas females were 44%. After taking case history, medicines were selected on the basis of totality of symptoms.

Homoeopathy recognizes the uniqueness of each individual and traits him accordingly.

The signs and symptoms effectively improved during the treatment. After prescription, the efficacy of Homoeopathic medicine proved as 54% showed marked improvement, whereas 28% showed moderate improvement, 18% showed mild improvement.

Statistical analysis on the sample using the t - test was done to assess the effectiveness of Homoeopathy in general for the population to manage Non alcoholic fatty liver disease.

A paired sample test was done and then it was compared with the t statistic value at 95% confidence and in test, the null hypothesis was rejected by significant margin and hence, it proved that Homoeopathy is effective in managing Non alcoholic fatty liver disease cases.

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