

Utility of Homoeopathic Medical Repertory by Robin Murphy in Cases of PCOS Induced Infertility

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Abstract: *This article focusses on PCOD induced Infertility as Infertility places a great emotional burden on infertile couples. The quest for having a child becomes the driving force of the couple's relationship. The mental anguish that arises from infertility is nearly as incapacitating as the pain of other diseases. The modern-day lifestyle influences point out more towards health issues. An individual compromises between professional and personal life, between stress and peace. The more competition in society, the more the need for fighting and surviving; and proving one's identity in the respective field.*

Keywords: PCOD, PCOS induced Infertility, Individualised Homoeopathic Treatment, Murphy's Homoeopathic Medical Repertory

1. Introduction

The utility of Homoeopathic Medical Repertory, third edition by Robin Murphy published in the year 2010; in cases of PCOS induced infertility and to avoid the unnecessary side effects of antibiotics, hormonal therapy and complicated surgeries. It is a unique repertory which was designed to be a modern, practical and easy-to-use clinical guide to vast Homoeopathic Materia Medica.

2. Review of Literature

Infertility is defined as a failure to conceive within one or more years of regular unprotected coitus. PRIMARY INFERTILITY denotes those patients who have never conceived. SECONDARY INFERTILITY indicates previous pregnancy but failure to conceive subsequently.²

INCIDENCE: 80% of the couples achieve conception within one year of having regular intercourse with adequate frequency (4-5 times a week) and 10% will achieve by the end of the second year. As such, 10% remain infertile by the second year.³

FACTORS ESSENTIAL FOR CONCEPTION: Successful fertilization requires proper sperm deposition, capacitation, and transport to the fallopian tube, followed by embryo transfer to the uterus and implantation in a hormonally receptive endometrium supported by the corpus luteum.³

CAUSES FOR FEMALE INFERTILITY: Female infertility may result from ovulatory dysfunction, tubal blockage, uterine abnormalities, cervical factors, or hormonal imbalance, often influenced by conditions such as PCOS, endometriosis, and lifestyle factors.²

MANAGEMENT: Homeopathy approaches such cases with a holistic viewpoint. The Homoeopathic approach towards the management of PCOS is constitutional, considering the patient's physical symptoms along with the mental and genetic makeup that individualizes the person.⁷

3. Case

24-year-old married Hindu homemaker presents with 3-year history of infertility

- Symptoms at presentation:** Patient complained of an inability to conceive for the last three years associated with long-standing irregular scanty menses since 5 to 6 years, premenstrual watery vaginal discharge, postmenstrual itching, and headache > during menses.
- ODP:** History of irregular menses for 5-6 years with cycle interval of 45-60 days; previously regular cycles (3-4 days) before marriage, now reduced to 1-2 days flow over the past 2-3 years. Temporary cycle regularization noted after 3 months of hormonal therapy, with recurrence of irregularity after discontinuation.
- Associated complaints:** Patient has complained of occipital headache since 7 to 8 years, < in the sun and > by cold water bathing.
- Patient as a person:**
 - Physical generals:**
 - Built: Average
 - Appetite: 3 - 4 times, Adequate
 - Thirst: 2 - 3 Liters/ day
 - Desire: Salty+++ and sour food++
 - Aversion: Oily food
 - Urine: 5 - 7 times/ day
 - Stool: once / day, satisfactory in morning
 - Thermal: HOT
 - Perspiration: Quantity-Profuse, Locations-Whole body, Staining- Non staining, Odour-No odour, Modality-< Exertion, Type/ Character-Bland
 - Sleep: Sound sleep, Position: Left lateral
 - Gynaecological History:**
 - AML: 3 years
 - Menstrual History:
 - FMP: At the age of 13 years
 - LMP: 17/05/2024
 - M/ H: 1 to 2 days/ 40 to 50 days, Character of menses: Pale, watery and mild painful menstruation
 - Concomitant: Vaginal discharge white, thin, watery before menses, Vaginal itching after menses++, Headache during menses
 - Sexual History: 4 to 5 times / week, Pain in vagina during coital act++

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Obstetric History: No issue.

Past history: Malaria fever when she was 12 years old.

Family history:

father died due to myocardial infarction, paternal grandfather with hypertension and diabetes (deceased), paternal grandmother with asthma, and maternal grandmother with osteoarthritis

Physical examination:

Weight: 48 kg, Height: 5' 3", Face: Oily, pimples on face and forehead, Skin: No extra hair growth, no discoloured skin

Vital data: Temp: 98.6 °F, Pulse: 80/ min, B.P: 110/ 78 mm of Hg, R.R: 18/ min

Lifespaces and mental sphere:

Patient is a 24-year-old female from a middle-class family with a shy, introverted personality and limited social interaction. History of significant emotional stress following father's death at age 17, with persistent grief, aversion to consolation, and irritability. Menstrual irregularity began around age 18 after this event. Married at 21, with supportive family. Temporary improvement in cycles noted after hormonal therapy, followed by recurrence. Patient now seeks homeopathic treatment, influenced by positive family experience.

Investigations: 10/9/2024 - USG: The right and left ovaries are abnormal. Dominant follicle seen in right ovary measuring 30 x 16 mm.

Diagnosis of miasm:

Fundamental: Sycotic

Dominant: Sycotic

Analysis and rubric selection:

- 1) Mind; DEATH, general - ailments, from the death of other – parents, or friends, of
- 2) Mind; COMPANY, general - aversion, to
- 3) Mind; CRYING, weeping - alone, when
- 4) Mind; CONSOLATION, general - agg, from kind words
- 5) Mind; IRRITABILITY, general
- 6) Food; SOUR, food – desires – salt, and sour
- 7) Female; MENSES, general - late, too – scanty, and
- 8) Female; MENSES, general - pale, watery
- 9) Female; VAGINAL, discharge, leucorrhoea - itching, menses, after
- 10) Female; VAGINAL, discharge, leucorrhoea - thin, watery - menses, afterbefore
- 11) Female; SEX, female - painful – vagina, pain in, during
- 12) Headache; OCCIPUT, headaches, pain general – sun, heat of
- 13) Headache; OCCIPUT, headaches, pain general – cold, air, amel. -application, amel.
- 14) Face; ERUPTIONS, face - pimple
- 15) Female; INFERTILITY
- 16) Female; CYSTS, genitalia – ovarian

Repertorial result:

- 1) Natrum Muriaticum – 13/38
- 2) Calcarea Carbonica – 10/18
- 3) Sepia Officinalis – 9/21
- 4) Sulphur – 9/19

Remedy and potency selection:

According to the case, patients is introverted, ailments from grief, consolation aggravates, crying alone, irritability and also patient has complained of late, scanty menses and inability to conceive. Natrum Muriaticum covers maximum marks and confirmation with Materia Medica Natrum Muriaticum is choice of remedy. So, Natrum Muriaticum medicine is selected.

Prescription: Natrum Muriaticum 200 one dose stat followed by SL BD for 15 days.

Advice:

Diet: Take high fiber foods and green vegetables, Avoid spicy and junk food, Active exercise in the open air and walk daily for 20-30 minutes.

Follow up:

Date	Symptoms	Treatment
21/05/2024	LMP – 17/05/2024	Natrum Mur 200C one dose SL BD for 15 days
05/06/2024	Patient is better in c/o vaginal itching and headache Reduced vaginal pain during coital act	SL 1 dose SL BD for 15 days
28/06/2024	24/06/2024: Menses appear. No c/o vaginal itching C/o headache++ in the last 2 days	Natrum Mur 200C one dose SL BD for 15 days
15/07/2024	Patient feels better No complaints	SL BD for 15 days
31/07/2024	Menses appear. No single attack of headache No pain in vagina during coital act	Natrum Mur 200C one dose SL BD for 15 days
16/08/2024	Menses appear. No c/o headache	SL BD for 15 days
30/09/2024	Menses do not appear. Feeling weakness in morning for two days UPT +ve	SL BD for 15 days

- [6] Murphy R. Homoeopathic Medical Repertory: A Modern Alphabetical and Practical Repertory. 3rd revised ed. New Delhi, India: B. Jain Publishers Pvt Ltd; 2021. p. iv-ix
- [7] Sarkar BK. Organon of Medicine: An Introduction and Commentary on the text. 5th ed. Calcutta, India: M. Bhattacharya & Co. Pvt. Ltd; 1987. p. 173, 247, 248

4. Result and Discussion

After administration of Natrum Muriaticum 200C, the patient showed significant clinical improvement. Menstrual cycles gradually became regular with improved flow, and associated complaints such as vaginal itching, headache, and dyspareunia reduced markedly. General well-being and emotional state also improved. Eventually, the patient successfully conceived.

5. Conclusion

Individualized homeopathic treatment based on totality of symptoms and miasmatic analysis proved effective in managing infertility associated with menstrual irregularity (PCOS-like condition). General improvement in the health of the patients on mental as well as on the physical level was seen after taking individualized homeopathic remedies on the basis of Homoeopathic Medical Repertory by Robin Murphy which shows, "Utility of Homoeopathic Medical Repertory in cases of PCOS induced infertility".

References

- [1] Banerjea SK. Miasmatic prescribing 2nd extended edition. B. Jain Publishers Pvt. Ltd. New Delhi. 2010. p. 67 – 143
- [2] Dawn CS. Textbook of Gynecology: Contraception & Demography. 14th ed. Kolkata, India: Dawn Books; 2013. p. 83
- [3] Konar H. DC Dutta's Textbook of Gynecology. 8th ed. New Delhi, India: Jaypee Brothers Medical Publisher Pvt Ltd; 2020. p. 4, 5, 227, 235, 384 – 388
- [4] Khanaj VR. Reperire - Repertory Simplified. 4th ed. New Delhi, India: Indian Books & Periodicals Publishers; 2018. p. 121, 485 - 486
- [5] Mohanty N, Evolution / Unfolding of Homoeopathic Repertories, 1st ed. New Delhi, India: Indian Books and Periodicals Publishers; 2005. p. 418