

Factors Affecting Recovery in Patients Suffering from Type-2 Diabetes Mellitus with its Homoeopathic Management

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Abstract: *Diabetes Mellitus is the seventh leading cause of death, which is preventable to a great extent. Poor Glycaemic control is a major risk factor for the development of Major Complications. Several Homoeopathic physicians encounter several situations where well-chosen remedies do not elicit. Once affected, most patients are never cured and need lifelong treatment. The Objective of the study was to assess outcomes and document factors affecting recovery in patients suffering from type 2 Diabetes Mellitus after receiving homoeopathic medicine. Result: Out of 50 patients, 27 patients have shown statistically significant improvement in HbA1c, while 23 patients showed no improvement. The reduction in Fasting Blood sugars was not statistically significant, while for PPBS it was significant with 90% Confidence limit. Conclusion: Hypertension, Dyslipidaemia, Stress & taking both allopathic and homoeopathic medicines have a statistically significant impact on the recovery of DM. Patients with normal BMI have a better recovery rate than those who are overweight and obese but this was not statistically significant. This study has shown statistical improvement in the patient's HbA1c level after 6 months proving the efficiency of homoeopathic medicine in Type-2 DM.*

Keywords: Diabetes Mellitus, Obstacles to recovery, Homoeopathy, Glycaemic control, HbA1c

1. Introduction

In 2015, diabetes mellitus was the seventh leading cause of death in the United States. In developed countries, diabetes is the leading cause of cardiovascular disease, blindness, kidney failure, and lower limb amputation. Incidence of DM has been continually rising and up to half of the people with diabetes globally remain undiagnosed. Earlier it was more prevalent in western countries, however, as people in non-Western countries adopt Western lifestyles, where the diet contains more calories and daily caloric expenditure is less, the incidence of Diabetes mellitus got greatly increased. India is one of the top 10 countries in which a high number of people with diabetes is present [1]. The most interesting aspect is that diabetes is preventable to a great extent. Another fact is that once affected, it needs long treatment, at a time even throughout life with the possibility of several complications. Type 2 diabetes mellitus consists of an array of dysfunctions characterized by hyperglycaemia and resulting from the combination of resistance to insulin action, inadequate insulin secretion, and excessive or inappropriate glucagon secretion. Type 2 DM accounts for 90-95% of patients with diabetes. It is a leading cause of blindness, stroke, kidney failure, heart attack, and lower limb amputation. Poor and inadequate glycaemic control constitutes a major risk factor for developing complications. Many Homoeopathic physicians are facing lots of problems in treating DM patients. They encountered several situations where well-chosen remedies did not elicit much of a reaction, or they saw a good initial reaction that did not last. Dr H.A. Roberts has also mentioned about the obstacle to cure in his book in the chapter "DEFLECTED CURRENT" [2]. Many factors like the presence of hypertension, dyslipidaemia, stress, BMI, and duration of DM were taken into consideration and studied according to homoeopathic point of view.

2. Materials & Methods

The study has been conducted on the patients of OPD/IPD and peripheral dispensaries of Sri Guru Nanak Dev Homoeopathic College & Hospital

Inclusion Criteria

Patients included in the study are diagnosed cases of Type 2 DM of both sex between the age group of 20-60yrs and patients complying with regular follow up

Exclusion Criteria

Patients suffering from any other systemic disorder, Pregnant and lactating mother, Patients who are too sick for follow up and diagnosed case of unstable mental/psychic illness

Research Technique

Following screening using inclusion criteria, eligible patients have been recruited into the study. A proper case-taking and individualization of each case has been done. Remedy has been selected upon the symptom totality. The outcome has been assessed at baseline and every month. Overall recovery has been measured by the difference in HbA1c at baseline and after 6 months. If the difference is more than 0.2 then recovery is present and less than or equal to 0.2 then recovery is absent. A specially designed Microsoft Office Excel spreadsheet (master chart) has been used for data extraction and has been subjected to statistical analysis.

3. Results

Many factors that can be associated with Type 2 DM recovery are studied and analysed with the homoeopathic point of view. Factors that are taken into consideration are BMI, HTN, Dyslipidaemia, LFT, KFT, Duration of DM, whether on allopathic medication or not, homoeopathic

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medicine prescription, and stress. Each factor has its role in the recovery of DM.

In this multivariate study association of Hypertension and Dyslipidaemia with the recovery of type2 DM has shown statistically significant results. Increased total cholesterol and TGL is a more important factor than HDL and LDL in the recovery of Type2 DM patients with Dyslipidaemia. This is inconsistent with previous studies[3]. LFT of all the patients is under the normal limit. This finding did not match with previous studies finding which shows more deranged LFT in diabetic patients than in non-diabetic patients[4]. The creatinine level of one patient is remarkably high which shows a pathological cause of obstacle to cure. Association of these factors with the recovery of DM helps us in determining the predominant chronic miasm in each case. The fundamental cause is the most important point in chronic disease as stated in §5 and §80[5].

Obesity and overweight are known factors for the bad prognosis of type2 DM[6]. In this study also patients with normal BMI have shown a better recovery rate than those who are overweight and obese. But the statistical association is not significant. Obesity and overweight can be linked with the homoeopathic concept of accessory circumstances as mentioned in §94 and §5[5].

Many patients were taking allopathic medication along with homoeopathic medication. The group that was only on homoeopathic medicines show better recovery than another group who was taking both. This result reminds us of the artificial chronic disease as mentioned in §74-§76[5]

All the prescription is made strictly after doing proper case taking and finding similitum according to the totality of symptoms. But the result has shown that lycopodium was prescribed to 15 patients. Out of it, only 7 has shown recovery. This is consistent with the homoeopathic concept of "Favourite remedy" as mentioned in §257 [5].

Mental symptoms are given utmost importance by Dr Kent. They often chiefly determine the selection of Homoeopathic remedy as mentioned in §211 and §213. Modern studies and research have also shown a relationship between stress and diseases. In this study also stress is associated as an important factor in the recovery of type2 DM[7]. It has shown statistically significant results as well.

This study has shown statistically significant results in controlling the Blood HbA1c level after 6 months of treatment. But the treatment does not show its efficacy statistically on reducing FBS. This might prove that homoeopathic medicine is more effective in type2 DM if taken over a long period.

4. Discussion

In the homoeopathic world, we used to focus more on case taking and prescription of similitum according to the case. But as Dr Hahnemann said in §3 that "the physician is a true practitioner of the healing art if, finally, he knows obstacles to recovery in each case and how to remove them". This

study is more focused on this part of the obstacles to recovery.

Fifty patients were included in the study and were followed prospectively. Twenty-four of the patients were females, with a mean age of 46.2 years.

In this study, the presence of hypertension increased total cholesterol, and TGL, patients who were taking both allopathic and homoeopathic medicine, and stress have a significant impact on the recovery of DM. This is consistent with the previous studies. Patients with normal BMI have shown a better recovery rate than those who are overweight and obese but statistical association is not significant.

Moreover, this study has shown statistical improvement in the patient's HbA1c level after 6 months. This proves the efficiency of homoeopathic medicine in Type2 DM. However, treatment does not show improvement statistically in reducing FBS and PPBS.

5. Conflict of Interest

The author has no conflict of interest to declare.

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