Efficacy of Lesser Known Homeopathic Medicines in the Treatment of Bronchial Asthma

Ashutosh Kumar

Assistant Professor, Department of Anatomy, RBTS Government Homoeopathic Medical College & Hospital, Muzaffarpur, Bihar, India

Correspondence should be addressed to Ashutosh Kumar, drashutosh786@gmail.com

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Abstract With the nature of diseased state life portrait get changed bringing change state. We can make better application of these lesser known medicine when we apply in consideration with the available symptoms in them with rational search for related aspects through the hypothetical understanding created to bring a complete meaning for the prescribed medicine. This study is to search for the lesser known medicines as presented in our Repertory and Materia Medica. There are the wide ranges of Homoeopathic medicines considered as rare remedies on the basis of Paucity of symptoms and Large medicines with rare symptoms representing the uniqueness when selected on the basis of totality inclusion. Homoeopathic clinical approach requires understanding for these of its broad range of medicines belonging to both large and lesser group of medicines. Use of rare medicines is required as management during the acute stages as well as in one sided presentation of symptoms in such cases.

Keywords Bronchial asthma; Lesser remedies; Homoeopathy

1. Introduction

Information coming out from the case taking process brings varied understanding about the disease conditions Bronchial Asthma. With the nature of diseased state life portrait get changed bringing change state. Expression of completeness of change comes when we get symptoms on all the plane of life. When these situations do not occur with tilting of symptoms on one plane of life bringing expression of one-sided disease or only local maladies one gets constrained in getting a totality of symptoms required for constitutional selection of the medicine. Bronchial asthmatic conditions are often expressed as disease limited to respiratory organ only. Also, during acute exacerbation of disease, we observe paucity of symptoms to arrive at the totality of symptoms. During these conditions one has to search for alternative medicine from our Materia Medica. As we observe that in Repertory rubrics contains both polycrest and rare medicine. It becomes inevitable to see for these lesser known medicines. Introduction of medicine in our medicine chest also has to pass through lesser place and later on becomes large polycrest medicine. Introduction of lesser known medicine are based on fragmentary information about their applicability on local condition being specific for that particular situation. It is thus they represent as a medicine for local physiological or organ specific medicine. Totality presentations of these lesser known medicine have limitations to represent for the
presenting conditions. Using these hypotheses lesser known medicines are used to break the
deadline of incomplete pictures. They can help in bringing out the hidden aspects of patients suffering
from the bronchial asthma. These rare medicines are widely practiced among practitioner. We can
make better application of these lesser known medicine when we apply in consideration with the
available symptoms in them with rational search for related aspects through the hypothetical
understanding created to bring a complete meaning for the prescribed medicine.

**Objective for Study**

Different conditions exhibited during bronchial asthma require understanding for both curative and
management of the disease. This study is to search for the lesser known medicines as presented in
our Repertory and Materia Medica. We intend to search for the condition where these medicines find
applicability and helping to arrive at complete removal of the disease.

2. Materials and Methods

Our work is literary searching different Materia Medica and repertory to find out the drug picture and
also to observe through available clinical information.

**Observations**

Potentiality for curative aspects of Bronchial Asthma in Homoeopathy has been observed with great
expectation for those patients who got desperate understood as incurable and seeking solace
through these medicines. Homoeopathy has tremendous efficacy in reversing bronchial asthma as
Dr. Hahnemann’s approach of therapeutics consideration through symptoms similarity and treating
the patient as a whole. Management during both chronic and acute condition needs strategic steps to
apply medicine based on Homoeopathic principle. Hahnemann has presented the variable
applicability for the different condition in any given case.

**Drugs Used in the Homoeopathy**

There are lots of medicines in homoeopathy for asthma and used in accordance with the symptom’s
similarity. The selection of medicine varies from patient to patient. Efficacy of some of the following
lesser remedies are acknowledged prescribed either by using them in consideration with totality of
symptoms or on the partial indication. Paucity of symptoms in these remedies compels to use them
on few indicated symptoms which have the reputation coming from the presentation in Materia
Medica. These rare medicines were introduced in Homoeopathy with their previous reputation of
being effective in such conditions. This initial information was the base for inclusion and uses. With
gradual use some new more symptoms were added in them. It will be useful to gather more
information about these medicines.

**Acalypha Indica** - Cough with bloody expectoration; sometimes violent dry cough precedes the
expectoration.

**Ailantheus Glandulosa** - Deep dry and hacking cough, with asthmatic expansion of lungs; cough
with headache and congestion of face.

**Aletris Farinose** - Short, dry and tickling cough worse on walking and talking; discharge of urine
during cough; cough suddenly relieved by menstruation.
Aralia Racemosa - Cough associated with constriction of chest, worse lying down, after the first sleep, has to sit up and cough violently; asthma, with oppression as from a weight on stomach, worse night on lying down, better by raising a little tough mucus.

Asarum Europaeum - Frequent cough followed by difficult breathing; cough caused by deep inspiration.

Blatta Orientalis - Asthma associated with bronchitis, suitable for fatty people, cough associated with dyspnoea. Blumea odorata: Barking like cough controls hoarseness due to cough.

Boerhavia Diffusa - Indicated for dry cough as well as cough with whitish thick expectoration.

Ephedra Vulgaris - Mother tincture is used to control asthmatic attack; in reduced doses it is also helpful in pulmonary heart disease.

Glycyrrhiza Glabra - Used as expectorant; prevents recurrent respiratory infections.

Grindelia - Tenacious mucous difficult to detach.

Justicia Adhatoda - Violent cough with tough expectoration and tightness of chest; great fear of suffocation; usually cough associated with vomiting.

Pothos Foetidus - A clinically useful drug in Allergic Rhinitis and Bronchial asthma < Dust. Acts better in Q potencies. Asthma worse from any inhalation of dust.

Rumex Crispus - Cough usually with headache; worse eating, in the evening and on lying down.

Spongia Tosta - A hard or “barking” cough during an asthma attack is a strong indication for this remedy. Breathing can be labored, with a sawing sound, and not much mucus is produced. The person may feel best when sitting up and tilting the head back, or when leaning forward. Warm drinks may be helpful. The problems often start while the person is sleep (typically before midnight).

Aspidosperma - An effective remedy in asthma used in Q potencies by many Homoeopaths as a palliative. It improves oxygenation.

Coca - Coca is prescribed where there is want of breath or shortness of breath. Coca is especially useful for aged sports men and alcoholics. There is hoarseness or loss of voice and dyspnea.

Naphthalene - It is prescribed where there is dyspnea and sighing respiration. Naphthalene is useful for emphysema of the aged with asthma. There is long and continued paroxysms of coughing and tenacious expectoration.

Senega - Senega is another effective remedy with increased respiration. There is excessive dyspnea and sharp contractive pains in the muscles of chest. Another feature is persistent cough.

Curare - It is prescribed where there is threatened cessation of respiration on falling asleep. Other symptoms are - short breath, short dry cough, very distressing dyspnea.

Arsenicum Iodatum - Occasional asthmatic attack in tubercular and psoric cases agg. In night, must seat up to breath, general feeble expiration, accompanied by great debility, burning in chest.
Asafotedia - Asthmatic feeling in trachea, dry cough, spasmodic dyspnea, as though lungs could not be expanded,

Asclepias Tuberose - Humid asthma, great dyspnoea agg. Eating, smoking, prickly sensation, contracting pain.

Aranea Diadema - Hydrogenoid constitution, old Asthma, lassitude and constant chilliness.

Benzoic Acidum - Asthma with inflammatory rheumatic complaints, mucous oppression of lungs,

Bismuth - Every asthma preceded by gastric derangement,

Copaiva Officinalis - Oppression of chest and labored breathing, pressure in sternum.

Ecalyptus Globulus - Humid bronchial asthma thick sputa.

Hydrocyanium Acidum - Minute bronchial tubules affected, puffy face and feeble or violent heart action. Involuntary urination.

Mangunum - Cannot lie on soft bed, bruised pain in upper part of chest, amel. Raising head

Mephitis Putorious - Asthma for drunkards,

Ictodes Foetida - Dust aggravate, after bowel movement.

Vulpes Pulmo - Recommended by Grauvogal,

Sticta Pulmonaria - Asthma of consumptiveness, associated with splitting headache.

Eriodictyon Californicum - Asthmatic with accumulation of mucous with considerable emaciation and fever.

Homoeopathic consideration for treatment as observed by the stalwarts finds application of the principles with distinct way for use of medicine.

a. Totality of symptoms in consideration of miasm. Kent in his lecture on Natrum Sulphuricum Kent points out the short comings of prescribing on the simple totality of symptoms without any understanding of the underlying miasms. "Asthma, when it is hereditary, is one of the sycotic diseases of Hahnemann......For years I was puzzled with the management of asthma. When a person came to me and asked: “Doctor Can you cure asthma?” I would say “No.” But now I am beginning to get quite liberal on asthma, since I have learned that asthma is a sycotic disease, and since I have made judicious application of anti-sycotics I have been able to relieve or cure a great number of such cases. You will find in the history of medicine that wherever asthma was cured, it has been by anti-sycotic remedies. That is one of the first things I observed, that outside of sycotics you will seldom find a cure for asthma.”

b. Initial approach with simple totality of symptoms: Kent goes on to speak about the limitations of the use of Homoeopathy only on the symptoms without taking into account the underlying miasmatic causes and their syndromes. "While Ipecac, Spongia, and Arsenicum will correspond just as clearly to the supervening symptoms and to everything that you can find about the case, yet what do they do? They palliate; they repress the symptoms; but your asthma is no better off, your patient is not cured.”
3. Results

There are the wide ranges of Homoeopathic medicines considered as rare remedies on the basis of:

   a. Paucity of symptoms
   b. Large medicines with rare symptoms representing the uniqueness when selected on the basis of totality inclusion.

Use of these rare medicines are proving to be adding on new clinical evidences which increases their likelihood ratio in reportorial presentation.

4. Discussion

Bronchial asthma has been recognized as a disease which results in increased morbidity and mortality. The magnitude of the problem of asthma has not been defined with certainty, despite several epidemiological studies conducted throughout the world. Studies on the prevalence of bronchial asthma lack consistency, possibly because of ill-defined diagnostic criteria, non-standardized study protocols, different methodologies, environmental exposures and the health care infrastructure. A positive association was seen between asthma and increasing age in rural and urban areas.

Homoeopathic clinical approach requires understanding for these of its broad range of medicines belonging to both large and lesser group of medicines. Strategic consideration for application of the homoeopathic principles requires flexibility to the limited extent. Keeping in view for such consideration it becomes useful for developing strategy for applicability as long term treatment with constitutional pattern of diseases and providing relief during the acute exacerbation with rare medicines as per indications.

5. Conclusion

It is absolutely necessary for a homoeopath to understand the nature of the fundamental cause and exciting causes of bronchial asthma, the allergic triggers as well as the underlying fundamental cause of bronchial asthma which is usually due to the chronic miasms. A acquired usually psoric origin and genetic the sycotic base. The acute exacerbations of the chronic state are latent within the constitution and have been brought by exciting factors. Use of rare medicines is required as management during the acute stages as well as in one sided presentation of symptoms in such cases.

References

Anuradha, A., Lakshmi Kalpana, V. and Narsingarao, S. 2011. Epidemiological study on bronchial asthma. [Indian J Allergy Asthma Immunol.], 25(2), pp.85-89.

Kent, J.T. Lecture on Homoeopathic Materia Medica. B. Jain Publishers Ltd., New Delhi.

Lilenthial, S. Homoeopathic Therapeutics. 2nd Edition. B. Jain Publishers Ltd., New Delhi.

Sasi Kala, M., Vijaya Kumar, S. and Gauthaman, K. 2016. Relevance of the use of alternative medicine for bronchial asthma: a review. [J Young Pharm.], 1(2), pp.184-189.

Schroyen, F. Synthesis Repertory. B. Jain Publishers Ltd., New Delhi.

Sharma, B., Narula, R.H. and Manchanda, R.K. 2015. Homoeopathy for the management of Asthma - a review of council's clinical research. [Indian Journal of Research in Homoeopathy], 9(2), pp.69-78.