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HomeoBuzz

CONTINUING MEDICAL INFORMATION

Vol. 14, No. 10, January 2019, Total No. of Pages 16

Dear Readers,

Warm greetings to all. With January coming to end, we are stepping up into the shortest yet the sweetest month of the new year. The adjectives tagged to it actually define its uniqueness... being shortest makes it stand out of its horde and its sweetness lies in "Spring" the season of colour and fragrance that it brings. Further being one of the harvesting seasons in India makes it all the more joyful. From January till April, we are busy reaping the benefits of our hard work done in the year passed by- students gearing up for final exams, farmers harvesting their crops and entrepreneurs penning down their profit and loss statements. In a nutshell, this is the time for analysis and introspection of decisions taken in the past and drawing new strategies for future.

Being in the business of homoeopathic health-care, there is fundamental need of constant research and improvisations as our field is critically squared by healthcare sector throughout the world, ever since its inception. Our achievements have to be surfaced up with iron hands, and we are questioned on minutest details of our procedures. So we can't just sit back, and enjoy fruits of the saplings sown centuries back by our masters. We have to proactively hunt out precious stones of our field, the map of which our masters have already laid out to us. With this motive, we at Bjain, continuously strive to present, the gems of homoeopathy to the world. It's our continuous endeavour to understand the needs of clinicians as well as of patients and the changing nature of health issues that arise time and again in our society. We leave no stone unturned to maintain the quality of our services which is the basic key to win the trust and love of our ultimate consumers- the suffering humanity.

Holding strong to our motto – Quality/ Safety/ Consistency, Bjain wishes all good health

Kuldeep Jain
Chief Editor

Dear Doctors,

Welcome to a new chapter of Homeobuzz. The topics covered in this issue are allergy, flu and anaemia, major health issues rising in changing environmental and weather conditions of present day.

As intellectually advanced living beings, we sit on top of the food chain, but disappointingly instead of following the rules of our ecosystem judiciously, we tend to control it and land up in a self-created chaos "Pollution". And as an old saying goes, what you give away always comes back to you, the chaos that we instill in our ecosystem comes back to us in form of various disturbances of bodily functions. Imbalance in our environment, hits at the core foundation of our nutritional and defence system resulting in disorders like anaemia, allergy, hormonal imbalance etc.

For any good change to be initiated, understanding of the problem and action in right direction is must. Imbalance is the main cause behind the disorders like allergy and anaemia. Establishing sound balance in our systems is the solution to it. And the best way to do this naturally is eat good, fresh and nutritious food, drink plenty of water, exercise regularly and stay happy as our bodies are wonderfully designed to function healthily in extreme conditions, provided their basic economies are tuned rightly.

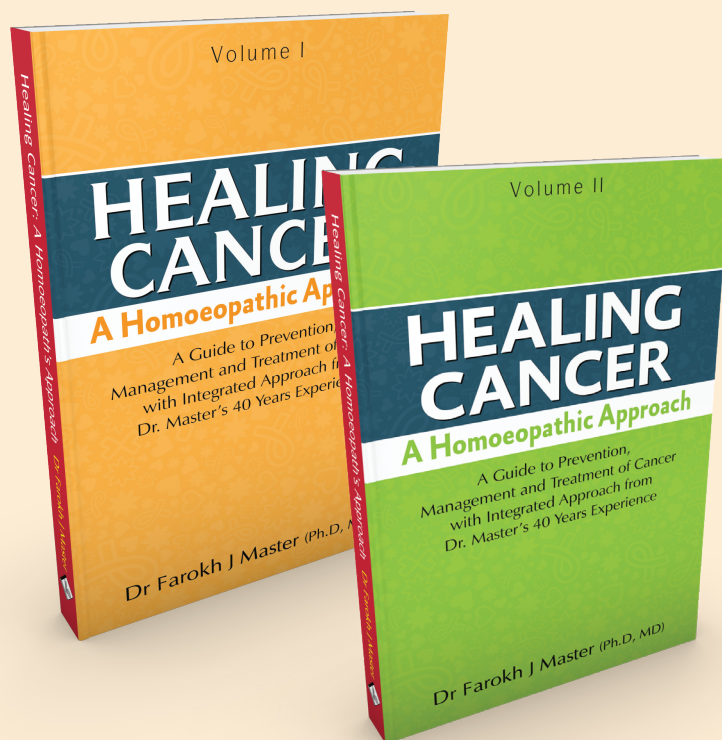
Talking about flu, it has become a major cause of hospitalization and mortality in our country, where people are advised to inject flu shots to boost their immunity seasonally every year. Its time we should enrich our innate defence mechanism as artificial immunity ultimately works to compromise it further.

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Dr. Vasundhara
Editor

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Anaemia is one of the creepiest form of public health problem, the world is suffering from ages. It is analogous to a huge iceberg, the tip of which can only be seen while the major portion of it remains hidden under the ocean.

Anaemia is the most prevalent nutritional deficiency disorder in the world. It affects all age groups but the most vulnerable are preschool-age children, pregnant women, and non-pregnant women of childbearing age. Globally, anaemia affects 1.62 billion people, which corresponds to 24.8% of the population. The highest prevalence of anemia exists in the developing world where its causes are multi-factorial. National Family Health Survey statistics reveal that every second Indian woman is anaemic and one in every five maternal deaths is directly due to anaemia.¹

According to the World Health Organization (WHO), anemia is defined as hemoglobin (Hb) levels <12.0 g/dL in women and <13.0 g/dL in men. However, normal Hb distribution varies not only with sex but also with ethnicity and physiological status. Anemia is often multifactorial and is not an independent phenomenon. For the classification and diagnosis the hematologic parameters, the underlying pathological mechanism and patient history should be taken into account. The aging of population, especially in Western countries, causes an increase of anemia in elderly people. In this population, anemia, recently defined by levels of Hb <12 g/dL in both sexes, is mostly of mild degree (10-12 g/dL). In one third of the patients, anemia is due to nutritional deficiency, including iron, folate, or vitamin B12 deficiency; moreover, anemia of chronic disease accounts for about another third of the cases. However, in one third of patients anemia cannot be explained by an underlying disease or by a specific pathological process, and for this reason it is defined "unexplained anemia".²

Clinical Features of Anaemia³

The haemoglobin level at which symptoms and signs of anaemia develop depends upon :

1. The speed of onset of anaemia: Rapidly progressive anaemia causes more symptoms than anaemia of slow-onset as there is less time for physiologic adaptation.
2. The severity of anaemia: Mild anaemia produces no symptoms or signs but a rapidly developing severe anaemia (haemoglobin below 6.0 g/dl) may produce significant clinical features.
3. The age of the patient: The young patients due to good cardiovascular compensation tolerate anaemia quite well as compared to the elderly patients who are prone to develop cardiac and cerebral symptoms more prominently.

SYMPTOMS - In symptomatic cases of anaemia, the presenting features are : tiredness, easy fatiguability, generalised muscular weakness, lethargy and headache. In older patients, there may be symptoms of cardiac failure, angina pectoris, intermittent claudication, confusion and visual disturbances.

SIGNS - A few general signs common to all types of anaemia are as under :

1. Pallor - Pallor is the most common and characteristic sign which may be seen in the mucous membranes, conjunctivae and skin.
2. Cardiovascular system - A hyperdynamic circulation may be present with tachycardia, collapsing pulse, cardiomegaly, midsystolic flow murmur, dyspnoea on exertion, and

ANAEMIA

in the case of elderly, congestive heart failure.

3. Central nervous system - The older patients may develop symptoms referable to the CNS such as attacks of faintness, giddiness, headache, tinnitus, drowsiness, numbness and tingling sensations of the hands and feet.
4. Ocular manifestations - Retinal haemorrhages may occur if there is associated vascular disease or bleeding diathesis.
5. Reproductive system - Menstrual disturbances such as amenorrhoea and menorrhagia and loss of libido are seen in anaemic subjects.
6. Renal system - Mild proteinuria and impaired concentrating capacity of the kidney may occur in severe anaemia.
7. Gastrointestinal system - Anorexia, flatulence, nausea, constipation and weight loss may occur.

Investigations of the Anaemic Subject

After obtaining the full medical history pertaining to different general and specific signs and symptoms, the patient is examined for evidence of anaemia. Special emphasis is placed on colour of the skin, conjunctivae, sclerae and nails. Changes in the retina, atrophy of the papillae of the tongue, rectal examination for evidence of bleeding, and presence of hepatomegaly, splenomegaly, lymphadenopathy and bony tenderness are looked for. In order to confirm or deny the presence of anaemia, its type and its cause, the following plan of investigations is generally followed, of which complete blood counts (CBC) with reticulocyte count is the basic test.

A. HAEMOGLOBIN ESTIMATION - The first and foremost investigation in any suspected case of anaemia is to carry out a haemoglobin estimation. If the haemoglobin value is below the lower limit of the normal range for particular age and sex, the patient is said to be anaemic. In pregnancy, there is haemodilution and, therefore, the lower limit in normal pregnant women is less (10.5 g/dl) than in the non-pregnant state.

B. PERIPHERAL BLOOD FILM EXAMINATION - The following abnormalities in erythroid series of cells are looked for in a blood smear :

1. Variation in size (Anisocytosis). Anisocytosis may be due to the presence of cells larger than normal (macrocytosis) or cells smaller than normal (microcytosis). Sometimes both microcytosis and macrocytosis are present (dimorphic).
2. Variation in shape (Poikilocytosis). Increased variation in shape of the red cells is termed poikilocytosis.
3. Inadequate haemoglobin formation (Hypochromasia). Increased central pallor is referred to as hypochromasia. It may develop either from lowered haemoglobin content (e.g. in iron deficiency anaemia, chronic infections), or due to thinness of the red cells (e.g. in thalassaemia, sideroblastic anaemia). Increased haemoglobin concentration is termed hyperchromasia and may be found in megaloblastic anaemia, spherocytosis and in neonatal blood.
4. Compensatory erythropoiesis. A number of changes are associated with compensatory increase in erythropoietic activity.

These are as under:

- Polychromasia is defined as the red cells having more than one type of colour.
- Erythroblastaemia is the presence of nucleated red cells in the peripheral blood film.
- Punctate basophilia is seen in aplastic anaemia, thalassaemia, myelodysplasia, infections and lead poisoning.
- Howell-Jolly bodies are purple nuclear remnants, present in megaloblastic anaemia and after splenectomy.

5. Miscellaneous changes. In addition to the morphologic changes of red cells described above, several other abnormal red cells may be found in different haematological disorders such as spherocytosis(spheroidal red cells), schistocytocytosis(fragmentation of erythrocytes),leptocytosis (unusually thin red cells), drepanocytes (sickle cells),crenated red cells, acanthocytes (coarsely crenated red cells), burr cells(having one or more spines),stomatocytes (slit like appearance in centre),ovalocytes(oval/epileptical shaped red cells) etc.

C. RED CELL INDICES - An alternative method to diagnose and detect the severity of anaemia is by measuring the red cell indices:

In iron deficiency and thalassaemia, MCV, MCH and MCHC are reduced.

In anaemia due to acute blood loss and haemolytic anaemias, MCV, MCH and MCHC are all within normal limits.

In megaloblastic anaemias, MCV is raised above the normal range.

D. LEUCOCYTE AND PLATELET COUNT - Measurement of leucocyte and platelet count helps to distinguish pure anaemia from pancytopenia in which red cells, granulocytes and platelets are all reduced. In anaemias due to haemolysis or haemorrhage, the neutrophil count and platelet counts are often elevated. In infections and leukaemias, the leucocyte counts are high and immature leucocytes appear in the blood.

E. RETICULOCYTE COUNT - Reticulocyte count (normal 0.5-2.5%) is done in each case of anaemia to assess the marrow erythropoietic activity.

F. ERYTHROCYTE SEDIMENTATION RATE - The ESR is a non-specific test used as a screening test for anaemia. It usually gives a clue to the underlying organic disease but anaemia itself may also cause rise in the ESR.

G. BONE MARROW EXAMINATION - Bone marrow aspiration is done in cases where the cause for anaemia is not obvious.

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Ginseng	Ø	0.5%v/v
Hydrastis canadensis	Ø	0.5%v/v
Alfalfa	Ø	5.0%v/v
Acidum formicum	4x	0.5%v/v
Lecithin	2x	1.0%v/v
Janosia ashoka	2x	0.5%v/v
Manganum aceticum	2x	0.5%w/v
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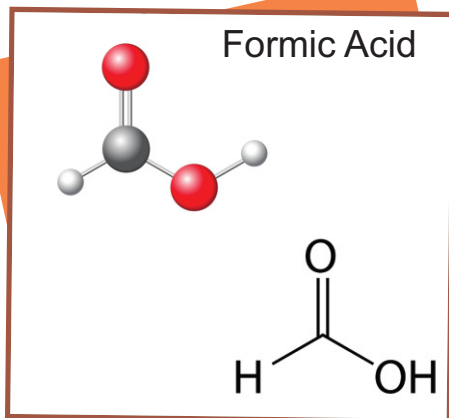
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FORMICUM ACIDUM



Present Name : Formic Acid

Formula : CH_2O_2

Mol. Weight : 46

Origin : The name "formic acid" is derived from that of the red ant (*Formica rufa*), from which the acid was first obtained.¹

Indications:

- ✦ Chronic muscle pain, Tremors.³
- ✦ Gout and joint rheumatism, which appear suddenly.³
- ✦ Chronic arthritis following an attack of acute rheumatic fever.³
- ✦ Myositis, periostitic processes of the bones in the form of doughy swellings, changes of the fasciae such as Dupuytren's contraction.⁴
- ✦ Skin troubles such as chronic eczema, psoriasis and loss of hair.⁴
- ✦ Kidney disturbances such as subacute and chronic nephritis⁴. Marked diuretic effect, greater elimination of products of disassimilation, particularly urea.³
- ✦ Failing vision.³

• **CASE:** (From homoeopathic source book) A middle-aged women, cook in a large establishment, had been under treatment for some time for a severe pain in the lumber region, which extended into the right side at times.

- ✦ This was so severe that it almost interfered with work sometimes, at critical moments.
- ✦ She had been operated for ovarian trouble several years before and believed that the pain was connected, some way, with the old trouble.
- ✦ I was puzzled as to what to do for her finally for the list of remedies for muscular pain had been pretty well exhausted.
- ✦ As a final resort I put her on Formic acid.
- ✦ When she returned, about four weeks later, she came to pay me and was genuinely delighted with the fact that she had been entirely relieved of the severe pain that had troubled her so long.⁵

Prescribed dose : 3x and higher

References:

1. O'CONNOR J., The American Homoeopathic Pharmacopoeia
2. VARMA P.N. & INDU V., Encyclopedia of Homeopathic Pharmacopoeia
3. MURPHY R., Homeopathic Remedy Guide
4. VERMEULEN F., Concordant Materia Medica
5. ANSHUTZ E. P., New, Old and forgotten remedies

Stop feeling Dull and Low,



ANAEMIA

Medicated Syrup

Indication: Anaemia

Composition

Each 5ml contains

Ferrum lacticum	1X	0.0625 gms
Ammonium aceticum	1X	0.025 gm
Natrum phosphoricum	1X	0.01 gm
Kali phosphoricum	1X	0.0025 gm
Acidum citricum	1X	0.01 ml
Acidum phosphoricum	1X	0.01 ml
Glycerinum	Ø	0.25 gm
Syrup		0.50ml
Alcohol content		5.4%v/v



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3 times a day,

Children < 12 years old - 1 teaspoon,
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Homeopathic Therapeutics for Anaemia**1. Alumina**

- Anaemia and chlorosis in young girls at puberty; menses pale and scanty, with abnormal cravings for indigestible things; profuse albuminous leucorrhoea.
- Dose-Sixth to thirtieth and higher⁶ - Action slow in developing.

2. Cinchona Officinalis

- Anaemia from exhausting diseases, discharges or haemorrhages.¹
- Heaviness of the head, loss of sight, fainting and ringing in the ears, pale sallow complexion, sour belching, poor digestion and bloated abdomen.²
- Dose-tincture to 30th potency⁵

3. Ferrum metallicum

- Pure anaemia; face ashy pale or greenish, becomes bright red in flushes; great paleness of mucous membranes³; Always feels better by walking slowly about⁷.
- Vertigo : on seeing flowing water; when walking over water, as when crossing a bridge; on descending⁷
- Vomiting : immediately after midnight; of ingesta, as soon as food is eaten; Diarrhoea : undigested stools at night, or while eating or drinking⁷.
- Dose- States of debility where the blood is poor in hematin require material doses; plethoric, haemorrhagic conditions call for small doses, from the second to the sixth potency⁶.

4. Helonias Dioica

- This anaemia is associated with disturbances in the urinary and sexual organs. Tired, anaemic, back achy females need Helonias.²
- Chlorosis (green sickness), with mental depression, irritability, debility, and increase of phosphates in urine.¹
- Dose - Tincture, to sixth attenuation⁶.

5. Hydrastis canadensis

- Atony, weakness, faintness and prostration from dyscrasic disorders injuring normal blood-formation; carcinoma, etc.³
- Marasmus; expression dull; skin sallow, yellowish-white³
- Dose - Tincture, to thirtieth attenuation.⁶

6. Iridium

- For the aged & persons exhausted by disease and also for puny, weak limbed children and those who grow too fast.⁴

HOMOEOPATHIC APPROACH

- Dose- sixth and higher potencies.⁶

7. **Picricum Acidum**

- The extreme prostration of pernicious anaemia, with a heavy tired feeling all over the body, burning pains along the spine and aggravation from excitement indicate this remedy.²
- Dose- Sixth potency.⁵

8. **Pulsatilla**

- Anaemia, resulting from accidental stoppage of the menses.
- In patients who have been heavily dosed with tonics.¹
- Feels better in the open air. Dizziness on rising, absence of thirst, and the peculiar disposition will lead to the remedy.
- Dose -Third to thirtieth potency⁵.

9. **Rubia Tinctorium**

- It has been found to be an excellent remedy in anaemia and under nourished conditions, specially in splenic anaemia.⁴
- Dose- 1x and higher.⁵

10. **Secale Cornutum**

- Progressive general anaemia; peculiar cachexia of anaemia, pale, bloodless, jaundiced color.²
- Effect on the blood corpuscles; produces a general anaemia, threatening not only the life of a part, but vitiating the whole life of the bodily economy. It is a sort of a mechanical anaemia.²
- Dose- First to thirtieth potency.⁶

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Allergy

Our innate defence system is naturally equipped to identify foreign substances harmful to our bodies and generate immune response accordingly. When this process of identification gets imbalanced, body starts throwing hyper reactions against substances, which normally are harmless. This tendency of hypersensitivity of the body to otherwise harmless substances is termed as "Allergy" and the substances which act as trigger are called "Allergens"

According to Dr. Allison Ramsay, the risk of developing allergies is genetic. It is related to ones family history of allergy. If neither parent is allergic, the chance for allergies is about 15%. If one parent is allergic, the risk increases to 30% and if both are allergic, the risk is greater than 60%¹.

In Allergy the body gets abnormally sensitized towards harmless things that act as allergens. These allergens induce increased production of immunoglobulin E(IgE), an antibody that all of us have in small amounts. During sensitization IgE is overproduced and it coats certain potentially explosive cells that contain chemicals including histamine. These chemicals, in turn, cause inflammation and the typical allergic symptoms.

Hay fever (allergic rhinitis) is the most common of the allergic diseases. Year round or perennial allergic rhinitis is usually due to indoor allergens, such as dust mite, molds or animal dander. Seasonal variety depends largely on pollens migrating aerially in changing seasons specifically spring. Symptoms result from the inflammation of the mucosal lining of primarily the nose, affecting eyes and throat as well.

The most common symptoms include¹:

- Runny nose
- Stuffy nose
- Sneezing
- Nasal itching (rubbing)
- Itchy ears and throat
- Post nasal drip (throat clearing)
- Watery, itchy eyes

Conventional treatment immediately relieves the violent paroxysms of allergy but are unsuccessful in providing long term solution of this health menace. In quest of better solutions, people head towards alternative therapies, majorly landing up in homoeopathic opds.

Treatment of allergy in homoeopathy is quite promising as we have entire cavalry of drugs proved to have wonderful results clinically in relieving acute episodes as well as in reducing the frequency of allergic attacks.

General measures

For any disease internal disorder has to be treated with appropriate medication, but certain general manoeuvres definitely help in reducing frequency and intensity of violent episodes.

- Firstly identification and seclusion of allergens should be done to avoid acute paroxysms.
- Strengthening mucosal lining of upper respiratory tract and eyes by increasing vitamin C in diet. Citrus fruits like oranges, Indian gooseberry(amlā), lemon etc should be regularly taken.
- Honey and apple cider vinegar also help in toning up body's defense mechanism.
- Besides taking care of diet, one should also stay hydrated, to optimize body's excretory

mechanism and get rid of toxins.

- Essential oils of peppermint, eucalyptus, lemon etc. help in relieving allergic symptoms.

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INFLUENZA

2018 marked the 100th anniversary of one of the largest public health crises in modern history, the 1918 influenza pandemic known colloquially as “Spanish flu.” The intensity and speed with which it struck were almost unimaginable – infecting one-third of the Earth’s population, which at the time was about 500 million people. By the time it subsided in 1920, tens of millions people are thought to have died. The cost in human life eclipsed that of World War I: more American troops, for instance, died from flu than they did in the battlefield.¹

Such can be the extent of havoc created by this disease...More commonly known as “flu”, influenza is a viral attack ,which targets the mucosal lining of upper respiratory tract.

Common signs and symptoms of the flu include:²

- Fever over 100.4 F (38 C)
- Aching muscles, Fatigue and weakness
- Chills and sweats
- Nasal congestion , Headache
- Sore throat , Dry, persistent cough

It is highly contagious droplet infection that easily spread s through sneezing and coughing from infected person 1-2 days before the onset of symptoms to 7 days after the appearance of symptoms.

For Controlling the spread of infection:²

- **Wash your hands thoroughly and frequently.**
- **Contain your coughs and sneezes** - Cover your mouth and nose when you sneeze or cough.
- **Avoid crowds** - By avoiding crowds during peak flu season, you reduce your chances of infection.

Nowadays flu vaccines are highly advocated and administered as preventive measure. But they have their set of limitations and side effects as well.

Homoeopathy offers preventive as well as curative remedies for flu ,easily available, safe and effective.

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Compiled by
Dr. Vasundhara
Editor

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- Loss of smell
- Itching and burning in the eyes
- Associated headache

Composition

Each tablet contains equal proportions of:

Ferrum phosphoricum	3X
Natrum muriaticum	6X
Kali sulphuricum	3X
Kali muriaticum	3X
Baptisia tinctoria	4X
Bryonia alba	4X
Causticum	6X
Eucalyptus globulus	3X
Gelsemium sempervirens	6X
Sabadilla	6X
Eupatorium perfoliatum	3X
Excipients	q.s.

Dosage : Adults >12years old - 2 tablets, 4 times a day
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Discharge



Burning
Eyes



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- Bodyache, Headache
- Nose blockage
- Watery discharge from the nose & eyes

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Aconitum napellus	3X	25mg
Bryonia alba	3X	25mg
Eupatorium perfoliatum	1X	25mg
Gelsemium sempervirens	3X	25mg
Ipecacuanha	3X	25mg
Phosphorus	6X	25mg
Eucalyptus globulus	2X	10mg
Excipients		q.s.

Dosage : Adults & > 12 years old - 2 tablets, 4times a day.
Children < 12 years old - 2 tablets, 2 times a day or as prescribed by the physician



Pack sizes available:
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