IJCRT.ORG ISSN : 2320-2882

INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

ALLERGIC RHINITIS& ITS HOMOEOPATHIC APPROACH

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INTRODUCTION

Rhinitis refers to inflammation of the nasal passages. This inflammation can cause a variety of annoying symptoms, including sneezing, itching, nasal congestion, runny nose, and postnasal drip (the sensation that mucus is draining from the sinuses down the back of the throat). Allergies are abnormal reactions of the immune system to substances that are otherwise harmless. When an allergen comes in contact with the body, it causes the immune system to react. Eyes, nose, lungs, skin and stomach are most prone to react to allergies. Allergens are foreign substances that can cause an allergic reaction. Pollen, dust, mite, food are common allergens.

ALLERGIC RHINITIS is two types :-

1. Seasonal type

2. Perennial type.

In seasonal allergic rhinitis: pollens of importance include tree pollen in spring and grass pollens during summer, weed, pollens and moulds.

In perennial allergic rhinitis: occur in response to allergen that are present throughout year including house dust mite (Dermatophagoidespteronyssinus, Dermatophagoidesfarenae) are the commonest cause of allergic symptoms. These are found in every house and accumulate in carpets, bedding, fabric and furniture. Domestic pets, e.g. cats, dogs and even cockroaches cause rhinitis.

Clinical features:-

Nose – Watery nasal discharge, blocked nasal passages, sneezing, nasal itching, and postnasal drip, loss of taste, facial pressure or pain.

Eyes – Itchy, red eyes, feeling of grittiness in the eyes, swelling and blueness of the skin below the eyes.

Throat and ears – Sore throat, hoarse voice, congestion or popping of the ears, itching of the throat or ears.

Sleep – Mouth breathing, frequent awakening, daytime fatigue, difficulty performing work. .

On examination allergic rhinitis is associated with nasal mucosa as pale, bluish, boggy appearance, conjunctiva congested and oedematous during active symptoms.

SIGNS

Nasal signs include transverse nasal crease-a black line across the middle of dorsum of nose due to constant upward rubbing of nose simulating a salute (**allergic salute**), pale and oedematous nasal mucosa which may appear bluish. Turbinate's are swollen. Thin, watery or mucoid discharge is usually present.

Ocular signs include **oedema** of lids, congestion and **cobble-stone appearance** of the conjunctiva, dark circles under the eyes (**allergic shiners**).

Otologic signs include retracted tympanic membrane or serous otitis media as a result of Eustachian tube blockage.

Pharyngeal signs include granular pharyngitis due to hyperplasia of sub mucosal lymphoid tissue. A child with perennial allergic rhinitis may show all the features of prolonged **mouth breathing** as seen in adenoid hyperplasia.

Laryngeal signs include **hoarseness** of voice and oedema of the vocal cords.

AIM & OBJECTIVE

To identify a group of most useful homoeopathic medicines in the management of Allergic Rhinitis.

EPIDEMIOLOGY

Allergic rhinitis (AR) is increasing at an alarming rate throughout the world. **India** has an estimated number of 15-20 million patients with allergic bronchial asthma and 30-80% of these suffer from AR. So, AR is considered as a major chronic respiratory disease due to its prevalence, impact on quality of life (QoL), work/school performance and productivity. According to the estimates of WHO, approximately150 million people worldwide are affected by asthma and more than 1, 80,000 deaths are due to asthma each year.

As per **recurrence**, AR may be classified into

Intermittent (IAR; symptoms <4 days/week or < 4consecutive weeks)

Persistent (symptoms >4days/week and >4 consecutive weeks).

Again, according to **severity**, AR may be

Mild (normal sleep, no impairment of daily activities, sports, leisure, no impairment of work or school.

Moderate to **severe** (sleep disturbance and impairment of daily activities).

Clinically, allergic response occurs in 2 phases:

Acute or early phase It occurs immediately within 5–30 min, after exposure to the specific allergen and consists of sneezing, rhinorrhoea nasal blockage and/or bronchospasm. It is due to release of vasoactive amines like histamine.

Late or delayed phase it occurs 2–8 hours after exposure to allergen without additional exposure. It is due to infiltration of inflammatory cells-eosinophils, neutrophils, basophil, monocytes and CD4 + T cells at the site of antigen deposition causing swelling, congestion, thick secretion.

ETIOLOGY:

Inhalant allergens are often the cause. Pollen from the trees and grasses, mould spores, house dust, debris from insects or house mite are common offenders.

Genetic predisposition plays an important part. Chances of children developing allergy are 20% and 47% respectively, if one or both parents suffer from allergic diathesis.

DIAGNOSIS:
A detailed history and physical examination is helpful, and also gives clues to the possible allergen. Other causes of nasal stuffiness should be excluded.

INVESTIGATIONS:

- Total and differential count. Peripheral eosinophilia may be seen. Normal value of eosinophils is 150-450/cu mm. [3]
- Nasal smear shows large number of eosinophils in allergic rhinitis. Nasal smear should be taken at the time of clinically active disease.
- Nasal eosinophilia is also seen in certain non-allergic rhinitis, e.g. NARES (non-allergic rhinitis with eosinophilia syndrome).
- Skin tests help to identify specific allergen. They are prick, scratch and intradermal tests.
- Radioallergosorbent test (RAST) is an in vitro test and measures specific IgE antibody concentration in the patient's serum.
- Nasal provocation test. A crude method is to challenge the nasal mucosa with a small amount of allergen placed at the end of a toothpick and asking the patient to sniff into each nostril and to observe if allergic symptoms are reproduced. More sophisticated techniques are available now.

DIFFERENTIAL DIAGNOSIS:

- Non allergic rhinitis
- Chronic simple rhinitis
- Atrophic rhinitis

i. Primary

ii. Secondary

COMPLICATIONS:
Nasal allergy may cause:

- Recurrent sinusitis.
- Nasal polyp.
- Serous otitis media.
- Orthodontic problems and other ill-effects of prolonged mouth breathing especially in children.
- Bronchial asthma. Patients of nasal allergy have four times more risk of developing bronchial asthma.

Prognosis

The belief is that the prevalence of allergic rhinitis peaks in adolescence and gradually decreases with advancing age. In a longitudinal study, at the time of the 23-year follow-up, 54.9% of patients showed improvement in symptoms, with 41.6% of those being symptom-free. Patients who had an onset of symptoms at a younger age were more likely to show improvement. The severity of AR can vary over time and depends on various factors such as location and season. Approximately 50% of patients receiving grass allergy immunotherapy noted improvement in symptoms that continued 3 years after discontinuation of therapy.

HOMOEOPATHIC THERAPEUTICS

Arsenicum Album
Thin, watery, excoriating discharge. Nose feel *stopped up*. Sneezing *without* relief. Hay fever &coryza, <open air, >indoors. Burning & bleeding. **Burning** in eyes, with *acrid lacrymation*. *Worse* wet weather, after midnight, cold drinks, or food. *Better* heat, from head elevated, warm drinks.

Bryonia
Nose-Frequent bleeding of nose when menses should appear. Also in the morning, relieving the headache. Coryza with shooting and aching in the forehead. Swelling of tip of nose, feels as if it would ulcerate when touched.
Eyes.-Pressing, crushing, aching pain. Glaucoma. Sore to touch and when moving them.
Worse, warmth, any motion, morning, eating, hot weather, exertion, touch. Cannot sit up; gets faint and sick. *Better*, lying on painful side, pressure, rest, cold things.

Calcarea carb
Dry nose, *nostrils sore, ulcerated*. Stoppage of nose, also with foetid, yellow discharge. Offensive odour in nose. *Polyp*, swelling at root of nose. Epistaxis. *Takes cold at every change of weather*. Catarrhal symptoms with hunger, coryza alternate with colic. *Worse* cold, moist air, wet weather. *Better* dry climate.

Lycopodium
Sense of smell very acute. Feeling of dryness posteriorly.Scanty excoriating, discharge anteriorly. Ulcerated nostrils. *Nose stopped up*. Snuffles. *Worse*, warm room, hot air, warm application. *Better* warm food & drinks.

Mercurius sol
Nose.-Much sneezing. Sneezing in sunshine. Nostrils raw, ulcerated;

Nasal bones swollen. Yellow-green, fetid, pus like discharge. Coryza; acrid discharge, but too thick to rundown the lip; worse, warm room. Pain and swelling of nasal bones, and caries, with greenish fetid ulceration.

Nosebleed at night. Copious discharge of corroding mucus. Coryza, with
Sneezing; sore, raw, smarting sensation; worse, damp weather; profuse, fluent.
Eyes.-Lids red, thick, swollen. Profuse, burning, acrid discharge. Floating black spots. After exposure to glare of fire; foundrymen. Parenchymatous keratitis of syphilitic origin with burning pain .Iritis, with hypopyon.
Worse, at night, wet, damp weather, lying on right side, perspiring; warm room and warm bed.

Natrummuraticum
Violent, fluent coryza, lasting from one to three days, and then changing into stoppage of nose, making breathing difficult. Discharge thin & watery, *like raw white of egg*. Violent sneezing. *Loss of smell & taste*. Lacrimation, burning & acrid. Lids swollen. Eyes appear wet with tears. *Tears stream down face on coughing*. *Worse* warm room, heat. *Better* open air, cold bathing.

Nux vomica
Stuffed nose, at night especially. *Stuffy colds, snuffles*, after exposure to dry, cold atmosphere. Coryza fluent in daytime, *stuffed up at night and outdoors, or* alternates between nostrils. Bleeding in morning. Acrid discharge, but with stuffed up feeling. *Worse* morning, mental exertion, dry weather, cold. *Better* in evening.

Phosphorous
Fan like motion of nostrils. Bleeding, oversensitive to smell. Foul imaginary odours. Chronic catarrh, *with small haemorrhages*, handkerchief is always bloody. *Polyp, bleeding easily*. *Worse* warm food or drinks change of weather. *Better* cold food, open air, washing with cold water.

Pulsatila

Nose: Coryza, stoppage of right nostril, pressing pain at root of nose. Loss of smell. Large green fetid scales in nose. Stoppage in evening. Yellow mucus, abundant in morning. Bad smells, as of old catarrh. Nasal bones sore

Eyes: *Thick, Profuse, Yellow, Bland Discharges*. Itching & burning in eyes. Profuse lacrimation and secretion of mucus. Subacute conjunctivitis, with dyspepsia, worse in warm room
Worse, from heat, evening, warm room. *Better* open air, cold application, cold food & drinks.
Silicea terra

Itching at point of nose. Dry, hard crusts form, *bleeding when loosened*. Nasal bones sensitive. Sneezing in morning. Obstructed and loss of smell. *Worse* cold, in morning. *Better* warmth.

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