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Successful Treatment Of Haemorrhoids With Homoeopathy: A Case Study

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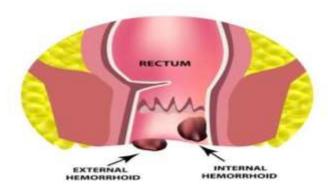
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Abstract:

Now a days there are many misconceptions about homoeopathy like homoeopathy removes symptoms but disease remains. All this is not true at all. Homeopathic treatment is highly individualized. "The most important duty of the physician is to determine the nature of the disease and the specific remedy." For recurrent diseases, this involves understanding why the disease is recurring and finding a remedy that fits the totality of the patient's symptoms and underlying predispositions according to aphorism 6^{th} .

Key words: Hemorrhoid, Sycosis, Homoeopathy, Medicine

Introduction: Hemorrhoid



Hemorrhoids (or haemorrhoids), also known as piles. Hemorrhoids arise from congestion of the internal and/or external venous plexuses around the anal canal. They are very common in adults. There are three types of hemorrhoids. Internal, External and Interoexternal.

Pathogenesis:

Hemorrhoids develop due to increased pressure in the veins of the rectal and anal area. This pressure can cause the veins to swell and become inflamed. Factors contributing to this pressure include:

- 1. Straining During Bowel Movements: Often from constipation or diarrhoea.
- 2. Pregnancy: Increased blood volume and pressure from the growing uterus.
- 3. Prolonged Sitting: Especially on the toilet.
- 4. Chronic Diarrhoea: Irritation and inflammation from frequent bowel movements.
- 5. Obesity: Increased abdominal pressure.
- 6. Heavy Lifting: Repeatedly lifting heavy objects can increase intra-abdominal pressure.

Pathophysiology of symptoms of internal hemorrhoids:

Internal hemorrhoids cannot cause cutaneous pain, because they are above the dentate line and are not innervated by cutaneous nerves. However, they can bleed, prolapse, and, as a result of the deposition of an irritant onto the sensitive perianal skin, cause perianal itching and irritation. Internal hemorrhoids can produce perianal pain by prolapsing and causing spasm of the sphincter complex around the hemorrhoids. This spasm results in discomfort while the prolapsed hemorrhoids are exposed. This muscle discomfort is relieved with reduction.

Internal hemorrhoids can also cause acute pain when incarcerated and strangulated. Again, the pain is related to the sphincter complex spasm. Strangulation with necrosis may cause more deep discomfort. When these catastrophic events occur, the sphincter spasm often causes concomitant external thrombosis. External thrombosis causes acute cutaneous pain. This constellation of symptoms is referred to as acute hemorrhoidal crisis and usually requires emergent treatment.

Internal hemorrhoids most commonly cause painless bleeding with bowel movements. The covering epithelium is damaged by the hard bowel movement, and the underlying veins bleed. With spasm of the sphincter complex elevating pressure, the internal hemorrhoidal veins can spurt.

Internal hemorrhoids can deposit mucus onto the perianal tissue with prolapse. This mucus with microscopic stool contents can cause a localized dermatitis, which is called pruritus ani. Generally, hemorrhoids are merely the vehicle by which the offending elements reach the perianal tissue. Hemorrhoids are not the primary offenders.

Pathophysiology of symptoms of external hemorrhoids :

External hemorrhoids cause symptoms in two ways. First, acute thrombosis of the underlying external hemorrhoidal vein can occur. Acute thrombosis is usually related to a specific event, such as physical exertion, straining with constipation, a bout of diarrhea, or a change in diet. These are acute, painful events.

Pain results from rapid distention of innervated skin by the clot and surrounding edema. The pain lasts 7-14 days and resolves with resolution of the thrombosis. With this resolution, the stretched anoderm persists as excess skin or skin tags. External thromboses occasionally erode the overlying skin and cause bleeding. Recurrence occurs approximately 40-50% of the time, at the same site (because the underlying damaged vein remains there). Simply removing the blood clot and leaving the weakened vein in place, rather than excising the offending vein with the clot, will predispose the patient to recurrence.

External hemorrhoids can also cause hygiene difficulties, with the excess, redundant skin left after an acute thrombosis (skin tags) being accountable for these problems. External hemorrhoidal veins found under the perianal skin obviously cannot cause hygiene problems; however, excess skin in the perianal area can mechanically interfere with cleansing.

Chinical features:
Internal Hemorrhoids:
☐ Painless Bleeding: Bright red blood on toilet paper or in the stool.
☐ Prolapse: May protrude through the anus during bowel movements, sometimes requiring manual reduction.
☐ Mucous Discharge: Often accompanied by a mucus discharge, leading to itching or irritation.
External Hemorrhoids:
☐ Pain: Can be quite painful, especially during and after bowel movements.
☐ Itching or Irritation: Around the anal area.
☐ Swelling: A lump or swelling near the anus that may be sensitive or tender.
☐ Bleeding: Similar to internal hemorrhoids, but usually less common.
Investigations:
1) Inspection
2) Digital examination
3) Proctoscopy
4) Sigmoidoscopy

Case study: On 20th August 2024

A 45 yrs hindu married male has complaint of constipation since 6 -7yrs. Has to strain a lot for passing the stool, large, dry painful stool. Stool passes better while standing position. Known case of hemorrhoid. Has operated for internal hemorrhoid 1 year back but again having the same complaint. Patient is very much stubborn, anger easily. Anxious, quarrels easily. Likes cloudy weather.

ASSOCIATED COMPLAINTS: Respiratory complaints on and off because of smoking.

PAST HISTORY: Dengue – at the age of 10 – taken allopathic medicine Operated for hemorrhoid just 1 yr back.

FAMILY HISTORY : Mother -Dead – Natural death

Father – Dead – Cardiac failure

PERSONAL HISTORY:

Addiction: Smoking 10-12 cigaratte/day

Habits and hobbies: NS

Medicine being taken regularly (if any): NS History of vaccination: As per the schedule

PHYSICAL GENERAL:

Appetite: NS

Thirst: small quantity for cold water

Desires: NS Aversion: NS Intolerance: NS Taste: Bitter taste

Bowel movement: Consipated, dry hrd stool, passes with difficulty, painful.

Urine : 5 - 6/day, 1/night Perspiration : mild

Sleep: Disturbed due to heaviness of abdomen

Dream: NS

THERMAL REACTION:-

Bath cold cold cold
Fan / AC - ++ +

Coverings - --Clothings cotton cotton regular

MENTAL GENERALS:

Anxious, stubborn, quarrelsome person.

PHYSICAL EXAMINATION:

GENERALEXAMINATION:

Appearance: Cachectic look with firm muscle fibers.

Built & Nutrition:

Anaemia: NS

Skin: Dark, wrinkled.

Tongue: light pink, large Obesity & Emaciation: NS

Pulse: 78/min.

Blood pressure: 130/76 mmhg.

Temperature: 97.4° F Respiration: 17/min

SYSTEMIC EXAMINATION:

GIT:- P/A hard, non tender

P/R examination – painful, small growth at 7 o'clock position. Spasm of sphincter.

ANALYSIS AND EVALUATION OF SYMPTOMS:

Mental generals:

Anxious +3

Stubborn +3

Querrlesome +3

Physical generals:

Stool dry, hard passes+3

Hot patient +2

Physical particular

Internal haemorrhoid +3

Chronic constipation +3

Stool passes better while standing +3

Heaviness of abdomen +2

TOTALITY OF SYMPTOMS:

Anxious

Obstinate

Ouarrelsome

Hemorrhoids with constipation

Stool hard

Stool passes better while standing

Cloudy weather amel.

REPERTORIAL TOTALITY:

MIND - Cautious - anxious

MIND - Stubborn - obstinate

MIND - Quarrelsome

RECTUM - HEMORRHOID - Constipation with

STOOL - Standing amel.

STOOL - Hard

GENERALITIES – Weather – cloudy – amel.

REPERTORIAL APPROACH (FROM SYNTHESIS REPRTORY):

This analysis contains 445 remedies and 7 symptoms. Intensity is considered			cal	er Mc	- sul	ph. sil.	nai	cu. bn	S. arr	oc. par
			1	2	3	4	5	6	7	8
Sum of symptoms (sort deg)			6 9	4 10	4 9	4 8	4 7	4 7	6	4 5
01. MIND - CAUTIOUS - anxious 02. MIND - OBSTINATE 03. MIND - QUARRELSOME 04. RECTUM - CONSTIPATION - accompanied by hemorrhoids	1 1 1 1	9 152 218 3	-		-	-			- 000	. 000
05. STOOL - STANDING - amel. 06. STOOL - HARD 07. GENERALS - WEATHER - cloudy weather - amel.	1 1 1	2 338 1		•	ė	ė	•	ė	•	•

BRIEF ABOUT CAUSTICUM:

Causticum is one of the great polychrest medicine of the chronic diseases. Acts on muscular and fibrous tissues. Voluntary and involuntary muscles. Broken down seniles. Mental state is timid, nervous and anxious. Obstinate constipation, piles unbearable by walking, by thinking of them, by touch. Hard tough stool passes with much straining. Expelled with too much strain or only on standing position is a characteristic of causticum. < with cloudy weather.

PRESCRIPTION: CAUSTICUM 1 M single dose Sac lac30 TDS for 7 days

AUXILLARY MEASURES:

Avoid smoking as much as possible Take plenty of fluid Do mild exercise

FOLLOW-UP SHEET:

RESPONSE CHANGE IN SYMPTOMS PRESCRIPTION

27/8/2024 Soft stool passes with much Sac lac30 TDS For 15 days

strain in compare to earlier Increases fluid intake Anxiety level decreases

11/9/2024 Soft stool passes without strain Sac lac30 TDS For 7 days

Stool passes everyday

No anxiety

Nothing interferes passage of

stool

Conclusion:

As we all know that according to Dr. Hahnemann surgical diseases are those whose cause is from outside the body. In this case of hemorrhoid we know the patient was already operated once then disease re –appear. If surgery is the solution of such disease then why it reappears?

Can find answer in homoeopathy. Dr B.K. Sarkar in Organon of medicine wrote that "What comes from within must be treated from within and what comes from without must be treated from without." "Homoeopathy is not against surgery, but anti- unnecessary surgery." After understanding etiology behind the hemorrhoid we can say that it is caused by rise in intra abdominal pressure but until our body is not susceptible to it symptoms will not appear of that particular suffering. Here the cause is internal so the disease must be treated eith internal medicine as it is produced by weakened vital force (Aph. – 186).

Apart from this after giving only single dose of similimum in very small period of time chief complain relieved which justified the 2nd aph. of organon of medicine i.e. rapid, gentle and permanent cure. So if small pills can do miracle, why go for surgery.

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