



Assessing The Effect Of Calcarea Carbonica In Chronic Constipation In Children Using CSS Scale: A Two Armed Randomized Control Trial.

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ABSTRACT

Study design: A two arm randomized controlled trial (RCT) which is a clinical study design that compares the effects of one treatment (or intervention) to another treatment, often a control group or standard of care, by randomly assigning participants to either group.

It includes an experimental group & a control group.

Experimental Group: Who receive Homoeopathic Medicine- Calcarea carbonica in Chronic constipation.

Control Group: The control group helps establish a baseline for comparison. It receives a standard treatment (allopathic mode of treatment).

In this study we are comparing the effects of Standard treatment or Allopathic medications in cases of Chronic Constipation with an Experimental group which is receiving Homoeopathic medicine- Calcarea carbonica in cases of Chronic Constipation.

Here, we have used the Constipation Scoring System (CSS) Scale for determining the severity of our cases.

We took 30 cases of chronic constipation in children, which were divided into two groups: 15 for homeopathic treatment and 15 for allopathic treatment.

Result: We took 30 cases of chronic constipation in children, which were divided into two groups: 15 for homeopathic treatment and 15 for allopathic treatment. In most of the cases, constipation was associated with passing stool only twice a week, along with straining to pass stool. Other symptoms found were abdominal pain, bloating, diminished appetite, fissures, hemorrhoids, and acne or pimples on the face. After the entire observation period, the outcome for the homeopathic treatment was 80%, i.e., 13 out of 15 patients were cured. The outcome for the allopathic treatment was 70%, i.e., 12 out of 15 patients were recovered.

Conclusion: Cases in which homeopathic medicine is prescribed, the results are quick and faster in relief of complaints.

Keywords: Chronic constipation, Pediatric age group, Randomized controlled trial.

INTRODUCTION

Background: Constipation is a major problem in children since many years but the problem is raising day by day due to bad eating habits, loss of exercise, sedentary habits. Functional constipation is the most common cause of constipation in children. History of delayed passage of meconium, presence of abdominal distension, and absence of fecal impaction point to an organic pathology. Clinically, it may present as hard stool consistency, straining, sense of incomplete evacuation, bowel movement infrequency⁴, sense of fullness in lower abdomen.

LITERATURE REVIEW

Chronic constipation is a common condition that's characterized by infrequent, difficult, or incomplete bowel movements. Constipation can result from several factors, some of which are related to the person's lifestyle such as a diet poor in fiber, insufficient fluid intake, irregular and inadequate time in the toilet, lack of exercise, prolonged bed rest and chronic consumption of drugs that can cause constipation. Constipation is broadly defined as an unsatisfactory defecation characterized by infrequent stools, difficult stool passage or both¹.

Prevalence of childhood constipation has been estimated at 0.7% to 29.6% in the general population worldwide; most children have no obvious aetiological factors. One third of children with chronic constipation continue to have problems beyond puberty². The prevalence of functional constipation was estimated to be 14.29% with higher prevalence in females as compared to males i.e. 16.19% vs. 13.42%.

In approximately 95 % of children with constipation, no organic cause can be identified.

The pathophysiology of Functional Constipation is still incompletely understood but is likely to be multifactorial. Constipation can be due to various pathological conditions like poor habits and emotional problems, children affected with an inability to adjust in a group and failure to keep pace in school entities, Children born with imperforate anus³.

Pathophysiologically, constipation may result from slow colonic transit, fecal evacuation disorders and a combination of slow colonic transit and fecal evacuation disorder¹.

Pathogenesis is multifactorial with focusing on genetic predisposition, socioeconomic status, low fiber consumption, lack of adequate fluid intake, lack of mobility, disturbance in the hormone balance, side effects of medications, or anatomy of the body, etc³.

Clinically, it may present as hard stool consistency, straining, sense of incomplete evacuation, bowel movement infrequency⁴, sense of fullness in lower abdomen. Other symptoms include- abdominal pain, nausea, loss of appetite, bloating, anemia⁵, weight loss⁵.

A detailed clinical evaluation and rectal examination are the two most important steps when diagnosing chronic constipation⁶

METHODOLOGY

Method: Assessing the effects of homeopathic medicine Calcarea carbonica with a randomized controlled trial among pediatric population by prescribing homeopathic medicine Calcarea carbonica to 15 patients and allopathic medication to a control group of 15 patients, thus checking the effects of Calcarea carbonica.

Study Design: A two armed randomized control trial

Study Setting: College OPD and peripheral OPD, Nashik

Sample Size: 30 cases

Sampling Technique: Total 30 samples with complaints of Chronic Constipation selected by Simple Random Sampling Technique.

Method of Selection of Study Subjects:

A case series study was conducted on 30 patients diagnosed with Chronic Constipation, selected using a simple random technique from college OPD and peripheral OPD in Nashik. Calcarea carbonica was prescribed based on a detailed case analysis, considering the totality of symptoms. The patients were followed up over a specified period to assess symptomatic improvement.

Inclusion Criteria:

1. Patients of age group between 4-14 years of age.
2. Patients of both sexes.
3. Patients complaining of unsatisfactory defecation characterized by infrequent stool, difficult stool passage or both at least for previous 3 months.

Exclusion Criteria:

1. Immunocompromised patients
2. Patients with serious incurable and pathological conditions like colonic cancer, rectal cancer.

Withdrawal Criteria:

1. Patients not giving consent.
2. Patients loss to follow up.

Operational definition:

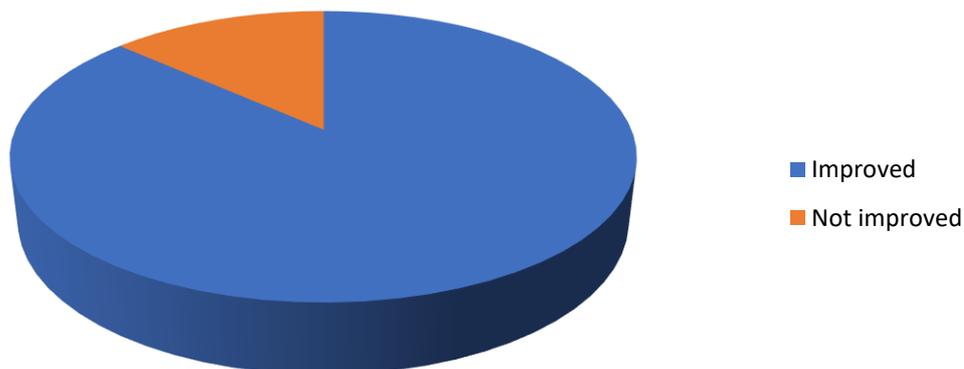
The definition of constipation has different meanings for different people. For some, it means that stools are too hard or too small.

For others, stools are too difficult to expel or occur too infrequently.

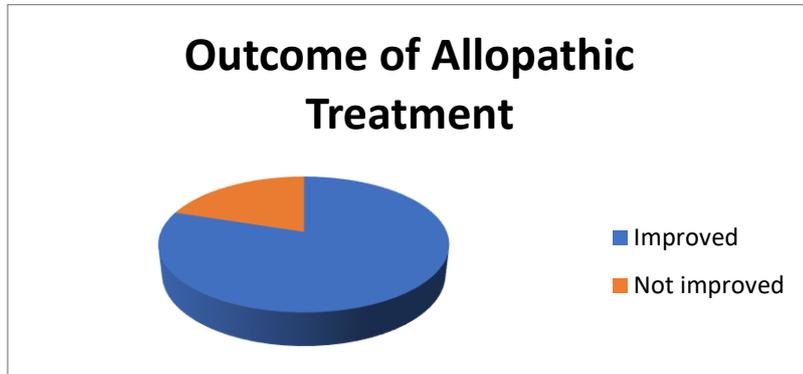
Many physicians define constipation as a stool frequency consistently less than three per week.

RESULT/FINDING

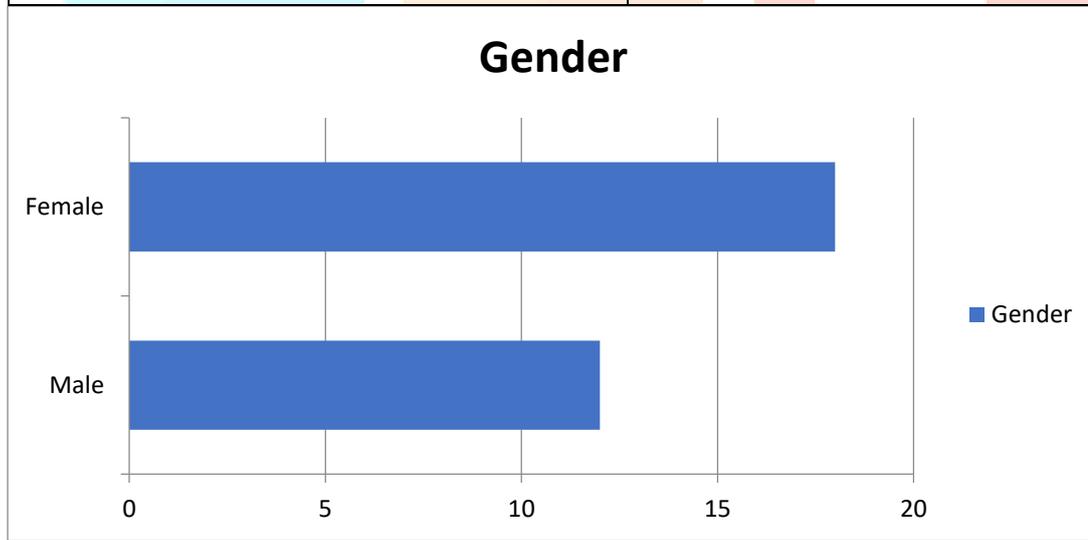
OUTCOME OF HOMOEOPATHIC TREATMENT	
IMPROVED	13
NOT IMPROVED	2

Outcome of Homoeopathic treatment

OUTCOME OF ALLOPATHIC TREATMENT	
IMPROVED	12
NOT IMPROVED	3



GENDER DISTRIBUTION	
MALE	12
FEMALE	18



DISCUSSION

Out of 30 cases, 25 (75%) showed improvement, while 5 (25%) had no improvement. The cases with no improvement were prescribed standard allopathic management.

This study suggests that Calcarea carbonica may have a potential role in controlling chronic constipation. Based on the severity and frequency of stool, the dose, repetition, and choice of medication were determined. It was observed that a higher number of females suffered from chronic constipation compared to males, with 75% of female patients and 25% of male patients affected. Of the cases, 13 were diagnosed with constipation with straining, 1 with fissure, and 1 with Hemorrhoid.

CONCLUSION

Out of 30 cases 25 cases that is 75% showed improvement and 5 cases that is 25% had no improvement. Keeping in mind the severity of chronic constipation cases with no improvement were either prescribed individualized homeopathic medicine or standard management. This study shows that Calcarea carbonica has potential role in controlling constipation. Yet further study with large sample size is needed to explore more properties of Calcarea carbonica in chronic constipation.

CONFLICT OF INTEREST - None

ACKNOWLEDGEMENTS:

Inspiration is the only thing which makes you as successful person. Unless and until you are inspired a new task you cannot start and complete, for the same it given us immense pleasure to express our deep sense of gratitude towards our guide DR. MEMON MOHAMED NAQEEB ADAM for accepting us as student, giving his valuable guidance helping and constantly encouraging us in every aspect of our study from selection of topic till submission of our work, his insight and suggestion have been invaluable.

We also want to express our deep sense of gratitude to Principal in-charge DR. UMESH.B. NAGARKAR & Senior Medical Officer DR. SANGEETA JADHAV for their kind permission to carry out the study in this institute.

We deeply value and acknowledge the guidance, great help and support time to time professor for their final suggestions and constant help during the course of time and at a time of need.

We would like to thanks other teaching and non-teaching staff of our college and hospital for their guidance and constant support and encouragement throughout our study period.

We feel a deep sense of gratitude for our family members. Our work is the result of immense encouragement, blessing, and unconditional support given by our parents, without their support it was not possible to complete this study, they have enlightened the path of our career.

Above all thanks to God, Almighty for his blessing for giving us this life to serve.

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