



HOMOEOPATHIC REMEDIAL EFFECTS IN A CASE OF CHRONIC SUPPURATIVE OTITIS MEDIA

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ABSTRACT:

Chronic suppurative otitis media (CSOM) is an infection to middle ear cleft. Incidences are higher in lower social economic groups, poor nutrition and lack of health education. There are mainly 2 types of CSOM: Tubetympanic and Atticoantral. Patient presents with complaints of ear discharge with partial hearing loss, perforation and bleeding occasionally. Homoeopathic approach involves in the overall well-being of the individual. Treatment plan includes a detailed case taking, analysis and evaluation of case with repertorial approach which includes the rubrics selection and repertorial analysis and then based on the mental, physical and particulars of the individual and remedy have been selected and administered.

KEY WORDS:

Chronic suppurative otitis media.

Tubetympanic

Atticoantral

Homoeopathic approach. Repertorial approach

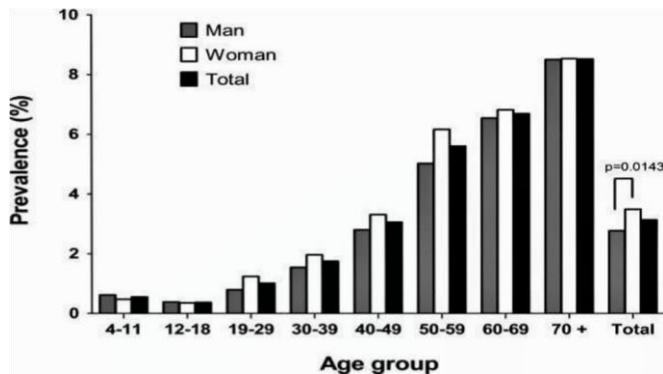
Repertorial analysis.

INTRODUCTION:

¹ Chronic suppurative otitis media (CSOM) is a long-standing infection of a part or whole of the middle ear cleft characterized by ear discharge and a permanent perforation.

¹ A perforation becomes permanent when its edges are covered by squamous epithelium and it does not heal spontaneously. A permanent perforation can be likened to an epithelium-lined fistulous.

PREVALENCE



EPIDEMIOLOGY:

² Incidence of CSOM is higher in developing countries because of poor socioeconomic standards, poor nutrition and lack of health education. It affects both sexes and all age groups. In India, the overall prevalence rate is 46 and 16 persons per thousand in rural and urban populations, respectively. It is also the single most important cause of hearing impairment in rural population.

TYPES OF CHRONIC SUPPURATIVE OTITIS MEDIA

¹ There are two types of chronic suppurative otitis media.

1. Tube tympanic type:

¹ The tubotympanic disease remains localized to the mucosa and, that too, mostly to anteroinferior part of the middle ear cleft. The pathological changes seen in this type of CSOM are:

Perforation of pars tensa.

Middle ear mucosa inflammation.

Polyp formation.

2. Atticoantral type:

¹ It involves posterosuperior part of middle ear cleft (attic, antrum, posterior tympanum and mastoid) and is associated with cholesteatoma, which, because of its bone eroding properties, causes risk of serious complications. For this reason, the disease is also called unsafe or dangerous type.

1 DIFFERENCE BETWEEN TUBOTYMPANIC AND ATTICOANTRAL:

	Tubotympanic or safe type	Atticoantral or unsafe type
Discharge	Profuse, mucoid, odourless	Scanty, purulent, foul smelling
Perforation	Central	Attic or marginal
Granulations	Uncommon	Common
Polyp	Pale	Red and fleshy
Cholesteatoma	Absent	Present
Complications	Rare	Common
Audiogram	Mild to moderate conductive deafness	Conductive or mixed deafness

PATHOPHYSIOLOGY:

2 Chronic suppurative otitis media, bacterial pathogens invade the mucosa of the middle ear through the external canal. An inflammatory reaction occurs in the middle ear accompanied by edema and fibrosis with spontaneous perforation of the tympanic membrane and ongoing infection. Also, chronic suppurative otitis media can occur as a complication of tympanostomy tubes inserted to treat otitis media with effusion.

1 ETIOLOGY AND CAUSES OF CHRONIC SUPPURATIVE OTITIS MEDIA

1. It is the sequel of acute otitis media usually following exanthematous fever and leaving behind a large central perforation. The perforation becomes permanent and permits repeated infection from the external ear. Also, the middle ear mucosa is exposed to the environment and gets sensitized to dust, pollen and other aeroallergens causing persistent otorrhea.
2. Ascending infections via the eustachian tube. Infection from tonsils, adenoids and infected sinuses.
3. Persistent mucoid otorrhea is sometimes the result of allergy to infectants such as milk, eggs, fish, etc.

1 CLINICAL FEATURES:

1. Ear discharge. It is offensive or non-offensive mucoid or mucopurulent, constant or intermittent.
2. Hearing loss can be permanent or intermittent.
3. Perforation
4. Bleeding

HOMOEOPATHIC APPROACH:

TREATMENT PLAN:

After case taking, analysis and Evaluation of case selecting peculiar rare and characteristic symptoms and forming the totality of symptoms to make a repertorial analysis.

REPERTORIAL INDEX:

Considering Rubrics from clinical repertories which helps in selection of similimum

RUBRICS, MEDICINE, REPERTORY

- ⁶ Ear- deafness- hardness of hearing Boericke
- ⁶ Ear-pain (otalgia) Boericke
- ⁶ Ears – pain tympanum (middle ear) inflammation- suppurative - chronic Boericke
- ⁶ Ears – tympanum aurium (noises in Ear) – buzzing Boericke
- ⁸ Ear – discharge- purulent accompanied by hearing difficult (Synthesis)
- ⁸ Ear – discharge- bloody (calc s, merc, sil, psor) synthesis
- ⁸ Ear – pain – otitis media with (Synthesis)
- ⁸ Ear – perforation -tympanum- threatened in otitis media–merc (Synthesis)
- ⁵ Ears – PAIN, ears – behind ear – moving head (am-c. Kali-p.) –Murphy
- ⁵ Ears – PAIN, ears – extending to – right to left (Arn.) – Murphy
- ⁵ Ears – SHARP, pain – extending to – temples (Nux-m) --Murphy
- ⁵ Ears – SHARP, pain – talking, while (Mang.) Murphy
- ⁵ Hearing – DEAFNESS, general – delirium, with, almost complete (BAPT)—Murphy ⁷ Hearing – DEAFNESS, general – eating, after (SULPH.)—Murphy EARS – Earwax – spoiled (con. LACH)—BBCR.
- ⁷ EARS – Fungus in (MERC.)—BBCR.
- ⁷ EARS – Pains – outward (BELL. MERC. PULS.)— BBCR.
- ⁷ EARS – Hearing – illusions of bellowing – cracking – on swallowing (MANG.)— BBCR.
- ⁷ EARS – Aggravation – head – uncovering (NUX-V.) —BBCR.

PROBABLE HOMEOPATHIC REMEDIES USED IN A CASE OF CHRONIC SUPPURATIVE OTITIS MEDIA

1.MERCURIUS SOLUBILIS: ³ Thick, yellow discharge comes out from the ear; fetid and bloody. Ootalgia, worse warmth of bed; at night sticking pains. ⁴Pains extend to the ear; from teeth, throat etc. Otorrhea. Deafness on becoming heated; amel. on swallowing and blowing nose. Boils in external canal. As if cold water was running from the ear. Sensation of coldness in ears.

Inflammation of internal and external ear, with stinging, tearing pains, bloody offensive discharge.

2.BELLADONNA: ³ Tearing pain in middle and external ear. Humming noises. Membrane tympani bulges and injected. Hearing very acute. Otitis media. ⁴ Pain causes delirium. Child cries out in sleep; throbbing and beating pain deep in ear, synchronous with heart beat. Acute and sub-acute conditions of Eustachian tube.

3.CINCHONA OFFICINALIS: ³ Ringing in ears. External ear sensitive to touch. Hearing sensitive to noise. Lobules red and swollen. ⁴ Red, hot. Ringing in ears; with headache. Tinnitus; then vertigo. Stitches in ears. Hardness of hearing. Foul purulent bloody discharge.

4.LYCOPODIUM CLAVATUM: ³ Thick, yellow, offensive discharge. Otorrhea and deafness with or without tinnitus. ⁴ Humming and roaring with hardness of hearing; every noise causes peculiar echo in ear. ⁹ Ootalgia in open air. Congestion in the ears. Discharge from the ears. Hearing excessively sensitive to least noises. Tinkling, buzzing, Roaring, humming, and whizzing in ears. Sensation as if hot blood rushed into ears.

5.KALIUM BICHROMICUM: ³ Swollen, with tearing pains. Thick, yellow, stringy, fetid discharge. Violent stitches in ear. Discharge of fetid, thick, yellow pus from both ears. Itching of lobe of right ear. Redness, heat and itching of external ears. Violent tickling and itching in ears.

6.PULSATILLA: ³ Sensation as if something were being forced outward. Hearing difficult, as if the ear were stuffed. Otorrhea. Thick, bland discharge; offensive odor. External ear swollen and red. Catarrhal otitis. Otagia, worse at night. Diminishes acuteness of hearing. ⁴ Pain agg. night.

Deafness as if ears were stopped up; can hear better in car; and in a warm room. Otorrhea; discharge of pus, of blood; thick yellow humor, offensive; after exanthemata. External ear red and swollen and feels as if something pushed out from the ear. Mumps, esp. metastatic to the breast or testes. Lobes or ear swollen.

7.CALCAREA SULPHURICA: ³ Deafness, with discharge of matter from the middle ear, sometimes mixed with blood. Pimples around ear. ⁴ Flow dark wax. Pimples around the ear. Otitis after a slap.

8.HEPAR SULPHUR: ³ Scurf's on and behind the ears. Discharge of fetid pus from the ears. Whizzing and throbbing in the ears, with hardness of hearing. Deafness after scarlet fever.

Pustules in auditory canal and auricle. Mastoiditis. ⁴ Darting pain in the ears. Wax increased. Perforation of the drum. Fetid otorrhea. Mastoiditis. Scurf on and behind the ears.

9.SILICEA: ³ Fetid discharge. Caries of mastoid. Loud pistol-like report. Sensitive to noise. ⁴ Roaring in ears. Stoppage of ears, which open at times with a loud report; difficult hearing of human voice.

10.NUX VOMICA: ³ Itching in ear through Eustachian tube. Auditory canal dry and sensitive.

Otagia; worse in bed. Hyperesthesia of auditory nerves; loud sounds are painful, and anger him. ⁴ Itching in ear through Eustachian tubes. External meatus dry and sensitive. Pain; stitching when swallowing. Loud sounds are painful.

11.PSORINUM: ^{4,3} Raw, red, oozing scabs around ears. Sore pain behind ears. Herpes from temples over ears to cheeks. Offensive discharge from eczema around ears. Intolerable itching.

Chronic otorrhea. Most fetid pus from ears, brownish, offensive. Humid sores; behind the ears. Putrid otorrhea. Red wax. Intolerable itching. Otorrhea, with headache; with offensive watery diarrhea. Illusory noises; as if he heard with ears not his own.

12.SULPHUR: ³ Whizzing in ears. Bad effects from the suppression of an otorrhea. Oversensitive to odors. Deafness, preceded by exceedingly sensitive hearing; catarrhal deafness.⁴ Deafness preceded by over sensitiveness to hearing, agg. after eating and blowing nose. Swashing as of water. Purulent offensive otorrhea; catarrhal discharge every eighth day. Ears very red; in children. As if sounds do not come through the ear but through forehead.

13.BARYTA CARBONICA: ³ Hardness of hearing. Crackling noise. Glands around ears painful and swollen. Reverberation on blowing nose.⁴ Crackling noises; agg. swallowing, walking. Glands around ear painful and swollen. Eruptions on lobes of ears. Hardness of hearing. Sound on sneezing.

14.CONIUM MACULATUM: ³ Defective hearing; discharge from ear blood colored. ⁴ Accumulation of ear wax like pulp of paper; or blood red hard wax, causing hardness of hearing. Oversensitive to noise. Parotid gland swollen and hard. Ears feel stopped on blowing nose.

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