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**Evaluation The Efficacy Of Homoeopathy In Fungus Induced Asthmatic Reactions: A Randomized Study**

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***ABSTRACT*:**

**Background**: Asthma is one of the major public health problems for the developed and developing countries. The use of Allopathic system of medicines provides only short term symptom relief to patients. At times, short term or no significant relief from the allopathic medicines is followed by several side effects. **Methods**: This study was carried out at among 30 patients diagnosed with fungus-induced obstructive airway disease who visited the OPD of own private practice at Johnpur UP, for its cure. This study tries to correlate the symptoms observed among the population studied and the effectiveness of homoeopathic medicines. The record of medicines prescribed by doctor was also considered in the study. Thirty patients with written consent for participations were enrolled for follow up of seven days during medication. Twelve predefined homoeopathic medicines were selected for the study **Results**: More than 50% percent of patients following the prescribed medications, reported improvement in health. Only, 13.3% of patients were completely cured and 10% showed marked improvement. **Conclusions**: Homoeopathic medicines are effective in treatment of fungus-induced obstructive airway disease. Proper observation of the symptoms and choosing the proper medicine provides relief to the patient from the disease under study. There is a further need for study with a larger cohort.

**Keywords:** homoeopathy, fungus-induced asthma, allergic asthma, seasonal allergy

**Key words:** Dysuria, Renal stones, USG

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**I**

**NTRODUCTION**

Asthma is an inflammatory disease of the airways characterized by airway hyper responsiveness and airflow limitation with resultant characteristic symptoms such as chest tightness, dyspnea, cough and wheeze**1**. It is a serious public health problem affecting people of all ages, throughout the world. When uncontrolled, asthma can lead to severe limitation on activities of daily life and can even be fatal. Severe asthma generally affects only a small percentage (5 – 10%) of the total asthma population**2**. However, it remains a frustrating disease for both patients and the clinicians treating them. The severity of asthma varies from patient to patient and even in an individual patient, and the reasons for this are not fully understood. However, it is known that two-thirds of asthmatics are atopic to common allergens**3-5** and individuals with severe asthma may have a greater degree of atopy than other asthmatic patients**6**. Numerous extrinsic factors are known to worsen asthma control, and the most common factor is the continuing exposure to a triggering allergen. The most common allergens implicated are house dust mite (HDM), animal dander from pets, and environmental fungi**1, 7**. Worsening asthma control with inhalation of increased fungal spores is intuitive as a foreign particle is being inhaled into the lung. Fungus Aspergillus linked to asthma in a number of ways. Most commonly, patients with bronchial asthma can be sensitized to Aspergillus spp., i.e., Aspergillus hypersensitivity (AH)8. Current (day-to-day) control of asthma includes achievement of symptom improvement in activity, and improvement in lung function9. Homoeopathy is the second most widely used CAM in healthcare systems according to the World Health Organization10. Studies have shown that homoeopathic treatment for respiratory diseases was associated with a significant reduction in the use and costs of conventional drugs11. Homoeopathic medications have been reported to be very effective in respiratory ailments and have shown to differ significantly from placebo. Several studies are available on the debate of placebo effects of homoeopathy and its efficacy 12–14.

In the view of above observations the present study was conducted with the aim is to assess the effectiveness of homoeopathic therapeutics for fungus-induced obstructive airway disease in atopic individuals with uncomplicated asthmatic reactions.

**MATERIALS & METHODS**

**Study Design**

The study was designed in accordance with various guidelines to conduct such study in India. It was in accordance with the World Medical Association Declaration of Helsinki and Good Clinical Practices for Clinical Research in India. It is an open clinical study with the approval of concerned ethics committee. This paper reports the study conducted for duration of three years on patients suffering from fungus-induced obstructive airway disease in atopic individuals with uncomplicated asthmatic reactions who visited the OPD of own private practice at Johnpur UP, for its cure. As per the protocol, if the patient agreed to sign the consent form for their participation in the study, the symptoms of patient were recorded.

Eleven predefined homoeopathic medicines were selected for the study; the selection was made as per doctor’s discretion. Thirty patients with written consent for participations were enrolled. The cases were analysed as per the principles of homoeopathy following the guidelines of case taking as per the Organon of Medicine and the medicine was selected on the basis of totality of symptoms. Beside dietary management was suggested to all patients depending on their need.

**Inclusion Criteria**

1. Both Saxes
2. Age 30 to 35 years
3. All phase of life
4. Who can communicate
5. Who gave consent

**Exclusion Criteria**

Age below 30 and above 35 years and not signed the witten consent

**Investigation**

CBC, X-Ray and other laboratory investigation

**Intervention**

A repertorization chart was prepared for six common symptoms in patients suffering from fungus induced obstructive airway disease in atopic individuals with uncomplicated asthmatic reactions. Severity of each symptom was considered for medication purpose. Final medication was decided according to the need of individual patient and consulting Homoeopathic Materia Medica15 According to the frequency and intensity of symptoms in the patient, medicines were prescribed with dilution 6c (centesimal dilutions) which is (10-12) times dilution in varying doses and administering interval varying from minute to hours as per the case requirement. Any improvement in symptoms was followed by appropriate change in medication or dosage to check the effectiveness of medicines.

**Statistical analysis**

The data was analyzed using SPSS 20 (SPSS Inc. Chicago, IL, USA) Windows software program. Descriptive statistics were used to summarize the demographic information. Confidence level and level of significance were fixed at 95% and 5% respectively.

**RESULTS**

Table 1: depicted the that 53.3% were male, 97% of the study participants are hindus, 63.3% belongs to middle class and 76.7% of them were residing in Pucca houses. Table 2: shows the Miasmatic analysis revealed that 6 (20%) are sycotic, 8 (26.7%) syco-syphilitic cases out of 30 cases. So on the basis of miasm it is found Syco-Syphilitic. Table 3: revealed frequency of prescription of medicine and it was found that three medicine prescribed frequently are Ferr Met, Phos and Sulph (7 times, 6 times and 5 times).Table 4: depicted the improvement status at the end of completion of the treatment 10% shown marked improvement, 56.7% improved and only 13.3% were completely cured.

**Table 1: demographic details of study subjects**

|  |  |
| --- | --- |
| Variables | N (%) |
| Age (years) | |
| 30-32 | 8 (26.6) |
| 33-35 | 22 (73.4) |
| Gender | |
| Male | 16 (53.3) |
| Female | 14 (46.7) |
| Religion | |
| Hindu | 29 (96.6) |
| Muslim | 1 (0.4) |
| Sikh | 0 |
| Christian | 0 |
| Economic status | |
| Lower | 5 (16.7) |
| Lower-middle | 6 (20) |
| Middle | 19 (63.3) |
| Higher | 0 |
| Habitat | |
| Kaccha | 7 (23.3) |
| Pucca | 23 (76.7) |
| Total | **30 (100)** |

**Table 2: distribution of study subjects according to Miasmatic status**

|  |  |
| --- | --- |
| Miasms | N (%) |
| Psora | 3 (10) |
| Sycotic | 6 (20) |
| Syphilitic | 4 (13.3) |
| Psoro-Sycotic | 5 (16.7) |
| Syco-Syphilitic | 8 (26.7) |
| Psoro-Syco-Syphilitic | 4 (13.3) |
| Total | 30 (100) |

**Table 3: distribution of study subjects according to frequency of prescription**

|  |  |
| --- | --- |
| Puls | 1 |
| Ars | 1 |
| Tub | 1 |
| Kali-e | 1 |
| Ferr Met | 07 |
| Phos | 06 |
| Sulph | 05 |
| Vart | 01 |
| Almiumn | 01 |
| Nex vom | 03 |
| Lyc | 03 |

**Table 4: distribution of the study subjects as per treatment status**

|  |  |
| --- | --- |
| Status | N (%) |
| Cured | 4 (13.3) |
| Marked Improvement | 3 (10) |
| Improved | 17(56.7) |
| No improvement | 4 (13.3) |
| Dropped | 2 (6.7) |
| Total | 30 (100) |

**DISCUSSION**

All the cases and the follow up was done following the standard Homoeopathic Proforma following the guidelines of Organon of Medicine. Moreover the concept of pathology was also taken care while approaching the case. Homoeopathy treats every patient on it's individual symptoms and traits. In cases of dietary insufficiency proper diet is advised. Besides the homoeopathic medicine selected on the basis of the presentation of the patients has to be carefully evaluated in order to make a proper selection of medicine. Going through the cases will elaborate the presentation of the problem and how they can be managed effectively using homoeopathic medicines. For example, the first case of Abha, a 35 years old woman, complained of constriction sensation in the lungs especially on deep breathing. The feeling was there since the last 4 months. She was diagnosed as suffering from broncho-pneumonia which was allergic in nature. There was difficulty in breathing when walking. The case was analysed and the reportorial result suggested Pulsatilla. The medicine was prescribed to the patient in 0/1 potency. The patient improved gradually with this medicine. Similarly in the second case of Yogita Devi, a 32 year old female subject, complained of heaviness in the chest region especially in the morning on waking. She was suffering from allerging bronchopneumonia and had difficulty in breathing. The case was analysed and the reportorial result suggested Arsenicum album. The medicine was prescribed to the patient in 0/1 potency and patient gradually improved. Similarly, other patients were considered for the study, complained of allergic bronchopneumonia. The cases were analysed as per the principles of homoeopathy following the guidelines of case taking as per the Organon of Medicine and the medicine was selected on the basis of totality of symptoms. Beside dietary management was suggested to all patients depending on their

**CONCLUSION**

In the study of the cases considered during the work shows the efficacy of Homoeopathic medicines, when carefully selected following the guidelines of repertory and in confirmation with the materia medica in such cases. Totality of symptoms can be the only guide in the final selection of medicine and no specifics can be pointed out for cases of bronchpneumonia as we can see from the results obtained during the study. Also it is found that the miasmatic consideration has a great role in giving relief a patient of Fungus induced BronchoPneumonia. This study opens new vista for further reaserch.

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