



Homoeopathic Management of Primary Hypothyroidism, Auto Immune Thyroiditis and Hyperthyroidism

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1. Introduction

The core objective of this research work is catering to specific clinical conditions is to encourage Homoeopathic clinicians to fill the gap between professional knowledge and application of professional skill and attitude in the practical field.

2. Thyroid Disorders and The Homoeopath

Current era is of a globalization. This has lead to tremendous increases in cases of thyroid disorders because of stresses and faulty leaving styles etc.

Thyroid is the most vital endocrinal gland which plays a vital role in maintenance of the internal environment. Its dysfunction has all pervasive impact on the human economy leading to deeper disturbances at various levels and planes.

The thyroid is one of the largest endocrine glands in the body and through thyroid hormones (t3 & t4) regulated the rate of metabolism, affects the growth and rate of the function of many other systems in the body. It also controls how quickly we consume energy, helps generate proteins and kind of decides how the body should react to other hormones. The thyroid also produce the hormone calcitonin, which plays a role in calcium homeostasis, hyperthyroidism (overactive thyroid) and hypothyroid(under active thyroid) are the most common problems of thyroid gland.

For harmonious functioning of our system and for experience of health, PSYCO-NEURO-ENDOCRINE axis plays a pivotal role. Stress sends ripples thro central system and we fail to appreciate meaning of ripples, stress localizes in endocrine gland. The impact is not local; all pervasive.. Hahnemannian homoeopaths screamed centuries back the disorder is actually not the disease of the gland but disease of NEURO-ENDOCRINE mechanism. Two stalwarts DR CAWADIAS and DR TEMPLETON focused on it.

Modern advancement in the study of the endocrinology has substantiated this concept but modern medicine has miserably failed to integrate spirit of the concept in their therapeutics. As a result what they can offer is simply replacement in deficiency disorder like hypothyroidism and suppression or ablation in auto immune endocrine disorder. In the absence of concrete measures to deal with susceptibility, replacement has limited scope and only ensures lifelong presence of disease and its manifestations.

One of the central features of the immune system is the capacity to mount an inflammatory response of self tissues. While recognition of self plays important role in shaping the repertoires of immune receptors, and in the clearance of apoptotic debris from tissue throughout the body, the development of potentially harmful immune responses to self antigenis, in general precluded. The essential feature of an autoimmune disease is the tissue injury is caused by the immunological reaction of the organism against its own tissues.

“Confusion worse confounded” is the state of pathogenesis of auto immune disorders. It is obvious that autoimmunity results from the loss of “ self tolerance” .self tolerance refers to lack of responsiveness to an individual’s own antigens, and it underlies our ability to live in harmony with our cells and tissues. The misunderstanding of “self v/s non self” is one of the important key factor in this disorders.

Suppression of Auto immune endocrinological disorders either by medications or surgery has led to deleterious consequences. Our experience in thyroid clinic has proved this beyond doubt.

Modern medicine has also given us lot of investigations which help us to get good insight to intrinsic nature of pathology and also allow us to monitor progress of disease. What is required is integration of ancient holistic wisdom and modern techniques.

What are the implications of the physician? He has to be holistic in his approach. By utilizing all his knowledge’s, he has to perceive totality of mind and body; since it’s only the constitutional approach, which can satisfy the susceptibility and bring about a cure.

3. Introduction & Need of the Study

“Role of Constitutional Remedy in The Cases of Hyperthyroidism” is interesting topic for research because in Modern medicines lifelong medicines are required .

I learn about how to select constitutional remedy. I understood that constitutional remedy is more effective than other therapeutic remedies in the cases of multisystem involve disorder.

AIM: - To understand the role of constitutional remedy in cases of hyperthyroidism.

Objective: (1) To understand how to act deep acting force in multisystem involved disorder. (2)To know role of constitutional remedy in hyperthyroid case.

4. Review of Literature

As we know that homeopathy rest upon theories or opinion but upon facts. Hypothesis and reasoning have no place in treatise upon which human life depends. It requires study with scientific base. We know that organon and materia medica are our never failing truths! They are our weapons and way to fight with disease force.

According to homeopathic perspective and way of understanding, the person as a whole, I have strongly a motive to understand the issues of major suffering hyperthyroidism and treat them successfully at low cost. Here I strongly in favours of understanding the role of constitutional as mental health of people.

®Selection of constitutional remedy by individuality of person in the chronic diseaseSum-total of the individual characteristics in the three planes-emotional, intellectual & physical-depicts the constitution. By these three planes sum total selection of constitutional remedy selected.

Dr Hahnemann gives a fair idea on the importance of the constitutional in Aphorism 5 of organon of medicine wherein he sates “useful to the physician in assisting him to cure are the particulars of most probable exiting cause of the acute disease, as also the most significant points in the whole history of chronic disease, to enable him to discover its fundamental cause, which is generally due to a chronic miasma. In these investigations, the ascertainable physical constitution of patient (and intellectual character ,his mode of living and habits, occupation, his social and domestic relations, his age ,sexual function ,etc are to be taken in consideration, thereafter, at least at 20 places he mentions about the constitution in different context. He mainly refers constitution to the inherent in natural frame, or inherent nature of individual.

5. Concept of constitution

The concept of four humours was based on erroneous ideas about the composition and physiology of the human body. This division in to four basic temperaments was correlated with clinical observations that suggested a predisposition of each type to the development of certain disease. We likewise find the same fundamental idea developed idea in the Theory of Tridosa as elaborated in ayurvedic medicine. We know today that the basic concepts of ayurvedic physicians about the nature of matter and universe, the composition and physiology of human body and the nature of matter and universe, the composition and physiology of the human body and the alterations produced by disease do not fit in with facts. The Theory of Tridosa has been evolved from these basic concepts which are erroneous. Yet we find it serving a useful function in clinical practice. This we owe to the sagacity of the ayurvedic physician who was past masters in art of clinical observation. Not only did they record in minute details the attributes of the three different types of constitutions to their environment and their propensity to the development certain diseases and the factors which promoted them. They likewise classified the remedial agents according to their suitability or otherwise to each type. Finally, they knit this mass of data into a theory of the development of disease and its management. The practice of ayurvedic medicine, therefore, could be considered as a practice of constitutional drug-therapeutics.

6. Hyperthyroidism is multisystem disorder. In hyperthyroidism it affects the whole organism of the body symptoms of hyperthyroidism

- Ⓜ Sudden weight loss, even when your appetite is good.
- Ⓜ Rapid heartbeat (tachycardia)
 - irregular heartbeat (arrhythmia)
 - pounding of your heart (palpitations)
- Ⓜ Increased appetite
- Ⓜ Nervousness, anxiety and irritability
- Ⓜ Tremor – usually a fine trembling in your hands and fingers
- Ⓜ Sweating
- Ⓜ Changes in bowel patterns, especially more frequent bowel movements
- Ⓜ An enlarged thyroid gland (goitre), which may appear as swelling at the base of your neck
- Ⓜ Fatigue, muscle weakness/
- Ⓜ Difficulty sleeping
- Ⓜ skin thinning, brittle nail

So that all symptom of the body is involved endocrine system metabolic system, reproductive system, muscle weakness, CNS, CVS, git multisystem of the body involved so that homeopathic management of hyperthyroidism by improving the symptomatically but person as whole so that require for deep acting constitutional remedy which acted upon whole organism of the body.

Also therapeutic indicated remedy is available like thyroidinum, indinum, cal phos, cal carb, labis Alba, spongia, lycopus, and cal iod. All these remedy are therapeutic acute remedy when it is given symptomatically it is not cover whole body and complete cure is not obtain. Unless it is a constitutional remedy. But when constitutional remedy is given it affects the whole body and it leads to cure so cr is given in hyperthyroidism cases constitutional remedy acted properly and treated person as a whole.

7. Normal Value

T3	0.84-2.02
T4	5.10-14.6
TSH	0.27-7.20

8. Design of Study

8.1 inclusion and exclusion of study

8.1.1 Inclusion criteria of study

- I will take the cases of patients with the diagnosis of hyperthyroidism.
- I will take the cases in which patient whose case is defined thus; I can get both physical and mental symptoms of patient.
- I will take those cases in which result is better after giving remedy. Both in physical symptoms and in report of thyroid profile.
- Exclusion criteria of study:
- I will exclude the cases in which there is no follows after first dose of medicine, in which I cannot get the action of our medicine.
- I will exclude the cases in which patient have not better in thyroid report.

8.2 Method of collection of cases

- I collect the cases from endocrine opd treated by me

9. Case no: 1 PHYSICIAN: - DR Purohit D.NO 9890 D.O.C.: 17/08/17

Name: J.G.L **AGE:** 46 **SEX:** female **Education:** 9th
FA: 1 (labour work) **MO:** j (H.W) **SIS:** 1 younger **BR:** 3-younger
Address: p

9.1 Chief Complain

Location	Sensation	Modality	Concomitants'
1)Thyroid gland ↓ K/C/O- Hyperthyroidism Since 7 year	Weakness++ Tremor++ ↓ Can't stand Swelling on neck Weight loss	A/F- anxiety of children <+10-12days before menses >+ After menses >+ Motion	Appetite-↑es Thirst-↓es Stool-normal Urine-normal
2)FGUT ↓ Leucorrhoea O-7 year D-continuous	Hair falling++ Body ache++ Leg pain++ Thin, white Weakness++ Stain- white Stain-delible No odour		

9.2 Physical Examination

Weight: 46 kg **Temp:** 98.6F **Pulse:** 88/mint **BP:** 110/70mmhg **Tongue:** pink
Conjunctiva: pink **RS:** NAD **CVS:** NAD
INVESTIGATION

Date	T3	T4	TSH
3/5/17	-	2.72	<0.001
21/6/17	-	2.87	0.004
21/9/17	-	2.04	0.005

9.3 Physical General

APPEARANCE: Thin, tall, wheatish complexion

APPETITE: ↑es
THIRST: ↓es
CRAVINGS: curd++, sour++, pungent++
AVERSION: sweet++
STOOL: normal URINE: burning after
urination
SLEEP: good
THERMAL: chilly
PAST HISTORY: nil
FAMILY HISTORY: MIL- DM

9.4 Life Space

A 31 year old female come in opd with complain of K/C/O hyperthyroidism she is tall with lean, thin, wheatish complexion.

1. Child Hood

Pt was born in vahiyal village. In childhood she was living with father, mother/ 3 brothers, 1 sister. Pt is eldest child in sibilings. Pt's father was doing labour work because farm was under her grandfather's property. After grandfather' death father was doing farming. Father's nature was angry. He got angry when someone is obstinate or do a thing which was not liked by him. In anger, he scold pt but not beat pt had fear of his father anger. In anger father beat her mother. At that time pt had fear of it & go away from there & cry. Mother is house wife & she is good by nature.

2. School Life

Pt has studied till 9th std. but she has not given exam of it. They had financial problem. She has studied in village school. Pt was good in study. Pt left study, because she was continuous absent because she has to go farm & have to care her brother & sister. So teacher scolds her for absent. So that patient left study. Pt had 8-9 friends in school. Pt has no regret of it in school pt participate in sports like kabaddi, garba. She was doing work in farm after left study.

3. Marriage life

Pt got married at the age of 18 years. Pt didn't want to marriage but she couldn't talk to her parents because she has fear of father anger & she thought that her age is little for marriage. In her in-law's family she was living with MIL, FIL & Co-sister, husband, FIL was expired.3 SIL married before her marriage. MIL tont pt if it had done some mistake in work. When she told pt, pt cried alone, but never outspoken against MIL when pt talk about it to husband, he said "mummy kahevay altar sambhali levanu" after that pt never talk about it to husband & suppressed her emotions but now MIL's nature is improved.BIL & co-sister nature is good. When pt told her co-sister about MIL, she said "hu parni ne avi tyare Mari sathe pan avu j Karta hata" during that time pt's appetite was decreased. Pt's husband is doing farming his nature is angry when pt doing which is not like by him. He got angry on pt & scold pt. pt has 2 sons & 1 daughter. Daughter is suffering from cp when she was 6 month old. She had episode of convulsion & then it was diagnosed.

During pregnancy, pt's IPR was not good with MIL, she didn't Let her rest "kam kare to bachchu saru rahe" pt has thought about it at night. Pt was not like pregnancy period & continue thought about it at night"chutavana vichar avta" when pt had fight with husband, she don't talk with him. After few hours, he talks first to pt.

Pt's nature is cool & calm. She never gets angry when someone scolds her, she CY in alone. She is anxious by nature. She has anxiety of daughters' future. She is sympathetic by nature.

9.5 Second interview

Pt was diagnosed for thyroid during pregnancy. Pt had problems with MIL during pregnancy. Pt had no sexual desire because coition was very painful & leucorrhoea was < by coition. She denied many times for sex because pain & trembling of body. Sometimes husband understand but sometimes not even husband want it during pregnancy. Pt felt that "jaldi thi 6uti jav to saru".

9.6 Totality

Suppression of emotion
 Anxious+3 about daughter’s future life
 Anger suppressed
 Fastidious++
 Desire for company
 Weeping alone
 Fright –of father’s anger
 Sympathetic
 Sleep-disturbed by noise, thought, rt side
 Perspiration- face++, palm++, sole++
 Cr: spicy++, sour++, curd+
 Av: sweet++
 Fasting <headache
 Sun < headache
 Thirst: cold water
 Chilly pt

Face: perspiration
 Extremities: perspiration-hand palm
 Extremities: perspiration-feet-sole
 General food & drinks, sour food, acids-desire
 General food & drinks, pungent thing-desire
 General food & drinks, yogurt-desire
 General food & drinks, sweet-desire

9.7 Repertorisation

Mind: emotions-suppressed
 Mind: aliment from-anger-suppressed
 Mind: weeping-alone, when
 Mind: anxiety-future, about
 Mind: company-desire for
 Mind: fastidious
 Mind: sympathetic
 Sleep: position-side on, RT side on
 Sleep: disturb-noise, by the slightest

9.8 Repertorial result

Phos 25/16
 Sep 25/125
 Puls 22/15
 Nat Mur 22/25
 Cal c 20/14
 Kali carb 19/13
 Sill 17/12
 Cal phos 12/12
 Chilly pt

9.9 Criteria

Weakness
 Tremor
 Hair falling
 Body ache
 Leg pain
 Neck swelling
 O/E – BP/P/WT

10. Follow Ups

DATE	1	2	3	4	5	6	7	8	PRESCRIPTION
24/8/17	>++	SQ	SQ	SQ	SQ	SQ	BP:100/70 P:78/min WT:- 46kg		Sepia 200 ip hs Sl 3 pills tds Pt 1-1-1
31/8/17	>++	>++	>++	>++	>++	>++	BP:-96/60 P:-76/min WT:-46kg		Sepia 200 1p hs Sl 3 pillstds Pt 1-1-1
14/9/17	SQ	>++	>++	>++	>++	>++	BP:-96/74 P:-70/min Wt:-46kg	Advice Report repeat	Sepia 200 1p hs Sl 3 pills tds Pt 1-1-1
21/9/17	<+	0	SQ	<++	>++	>++	BP:-90/70 P:-70/min Wt:-46kg	T4-2.04 TSH- <0,005	Sepia200 1p hs Sl 3pills tds Pt 1-1-1
.5/10/17	SQ	>++	SQ	SQ	SQ	>++	BP:-100/80 P:-68/min WT:-47kg		Sepia 200 1p hs SL 3 pills tds Pt 1-1-1
19/10/17	>+	>++	SQ	SQ	SQ	>++	BP:-100/70 P:-78/min WT:-47kg		Sepia 200 1p hs Sl 3 pills tds/2wks
1/12/17	>+	>++	SQ	SQ	>+	>++	BP:-110/80 P:-76/min		Sepia 200 3p hs Thuja 1m 1p hs

							WT:-47kg		TAB 1-1-1/7 day
22/12/17	>++	0	>++	>++	>+	>++	BP:-100/70 P:-76/min WT:-47kg		Sepia 200 3p hs Tab 1-1-1/7 days
9/2/18	>++	0	>++	>++	>+	>++	Bp:-100/70 P:-80/min WT:-47kg		Sepia 200 3p hs SL 3 pills tds/7 days

11. Conclusion

After giving a constitutional remedy sepia 200 potency at infrequent repetition patient much better in all her complaint. Also in report before taking medicine TSH level is <0.001 and after medicine given TSH level is 0.005. And weight is also improved.

Susceptibility moderate. Miasm Sycotic Intercurent remedy is thuja.