

EVALUATION OF HOMOEOPATHIC THERAPY IN BEHAVIOURAL DISORDERS *

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Introduction

The awareness conscious as well as unconscious motives are very important for understanding the basic principles of human behaviour. A mentally sick, emotionally stressed, anxious and tensed patient will manifest several types of physical discomfort and symptoms. Thus one cannot separate the bodily symptoms in small compartments, from patient's emotional life.

It is reported that nearly one third of adult population in India suffers from some kind of psychological problem. Contemporary medicine offers tranquilisers, anti-depressants, sedatives and even electric shock therapy. Homoeopathy on the other hand, has been treating these without any violent means, since the time of Hahnemann.

Homoeopathic therapeutics with an extensive background in both health and pathogenic provings presents a successful technique in case coverage, inclusive of both mental and physical conditions.

The Central Research Institute for Homoeopathy under Central Council for Research in Homoeopathy is actively engaged in Clinical Research on Mental Diseases. This Institute was established in 1974 and from the very beginning evaluation of homoeopathic therapy in Behavioural Disorders has been undertaken as a prime study.

Material and Methods

70 cases have been randomly selected for presentation here (50 males & 20 females). The patients both male and female were between 10 and 50 years of

age (Table-1). The duration of illness ranged from 3 months to 50 years.

Table-1
Age & Sex Distribution

Age Group	Male	Female
Below 10 years	Nil	Nil
Between 10 - 20 years	5	3
Between 20 - 30 years	21	7
Between 30 - 40 years	16	6
Between 40 - 50 years	8	4
Total	50	20

The case history and clinical presentation of each patient was ascertained and recorded. Psycho-social stress factor(s) of each patient which lead to the onset of illness or triggered the acute episode, was also elicited and recorded (Table-2). Details were collected from the patients, relatives and friends. Initially the patients were kept under observation for elicitation of objective symptoms. Miasmatic classification was made to facilitate the selection of constitutional remedy and was made in accordance with the guidelines prescribed in the Organon of Medicine. Subsequent to the classification of cases miasmatically, the relationship between personality features and miasms were evaluated (Table-3).

Table-2
Related Psyc-social Stress Factors

Parental	5
Interpersonal problems	15
Occupational problems	9
Living circumstances	11
Financial	5
Developmental	5
Legal	5
Multiple (more than one of above)	15

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Table-3
Miasm and Personality Relationship

Miasm	Schizoid	Paranoid	Psychopathic	Obsessive	Introvert	Extrovert
Psora	17	7	7	3	5	2
Sycosis	2	7	10	-	-	2
Syphilis	2	4	2	-	3	1

(In some cases combined mixed features were present)

Selected cases comprised of Schizophrenia (39), Affective Disorders (AFD) (25), Anxiety Disorders (2) and Drug/Alcohol associated Behavioural Disorders (4). Initially patients were kept on placebo for a few days and observed. In many cases which presented with acute manifestations, analysis on the basis of acute symptomatology was made and remedy selected and administered. (Table-4). The treatment was started with lower potencies i.e. 6,30 which were followed by higher potencies.

Table-4
Basis of Prescription

Basis of prescription	Schizophrenics		AFD		Anxiety disorders		Alcohol/Drug use	
	TP*	Res#	TP	Res	TP	Res	TP	Res
Mental General	17	8	10	6	-	-	3	2
Physical General	4	3	6	2	-	-	3	2
Presenting Complaints	3	3	5	2	-	-	-	-
Constitutional	16	11	13	8	-	-	2	-
Repertorial	6	3	8	2	-	-	1	-
Causation	-	-	4	2	2	2	-	-

* Total prescribed. # Response

Note: In some cases more than one method was adopted. Hence the difference in number of cases.

Daily assessment of the progress of the cases was made. Rating of improvement in general, biological, and mental functions of the patient was made with emphasis on the verification of symptoms relieved in each patient. Improvement was graded according to a pre-defined criteria.

Results

The results obtained in this series of 70 cases are promising and validate earlier findings regarding usefulness of Homoeopathy in mental disorders. Except one case of Schizophrenia, all the cases responded

favourably to homoeopathic treatment and had relief in varying degrees i.e. 20 were relieved of symptoms, 8 had marked improvement, 7 had moderate improvement and 3 had mild improvement. In the cases of Affective disorder, 14 cases were cured, 6 had total relief, 2 had marked improvement, 2 had moderate improvement and 1 had mild improvement; and 2 cases of Anxiety Disorder were cured (Table-5).

Table-5
Improvement

Rate of Improvement	Schizophrenia	AFD	Anxiety disorders	Alcohol/Drug use
Cured	0*	14	2	3
Relieved (symptom free but under follow-up)	20	6	0	0
Marked improvement > (75% relief)	8	2	0	0
Moderate improvement < (50% relief)	7	2	0	0
Mild improvement < (25% relief)	3	1	0	0
No improvement	1	0	0	0

* Until and unless the cases of Schizophrenia are followed for a minimum period of 10 years we cannot declare them as cured.

Remedies such as Lachesis, Calcarea carbonicum, Narum muriaticum, Phosphorus, Pulsatilla, Stramonium, Sulphur, Sepia were found effective in Schizophrenia. Remedies such as Calcarea carbonicum, Hyoscyamus, Lachesis, Mercurius solubilis, Nux vomica, Pulsatilla, Phosphorus, Stramonium, Tarentula hispanica, Veratrum album were found effective in Affective Disorders. In two cases of Anxiety Disorders, Phosphorus was found effective. In Alcohol/Drug used disorder Nux vomica and Pulsatilla were found very effective (Table-6 & 7).

Table-6
Homoeopathic Medicines Found Effective

Disorder	Remedies
Schizophrenia	Lachesis, Calc. carb., Nat. mur., Phosphorus, Pulsatilla, Stramonium, Sulphur, Sepia
Affective disorders	Calc. carb., Hyoscyamus, Lachesis, Merc. sol., Nux vom., Pulsatilla, Phosphorus, Stramonium, Tarentula h., Verat. a.
Anxiety Disorder	Phosphorus
Alcohol/Drug Use Disorder	Nux vomica, Pulsatilla

Table-7

Remedies	No. of cases found effective [*]
Calcarea carbonicum	9
Ignatia	5
Lachesis	5
Lycopodium	2
Mercurius solubilis	3
Natrum muriaticum	8
Nux vomica	8
Phosphorus	15
Pulsatilla	12
Sepia	4
Stramonium	11
Sulphur	8

^{*} The patients, depending on clinical presentation at a given time, received more than 1 medicine.

Discussion

Individuals with developmental disorders generally have a history of irregular school life. Psoric miasm appears to be the fundamental cause in such cases.

Psoric patients have a premorbid schizoid personality and have psychopathic like constitution. Mental generals is an important basis of prescription in mental disorders.

Out of 70 cases, 17 psorics were grouped under schizophrenic personality, 7 psorics and sycotics were grouped under paranoid-personality and 10 sycotics came under psychopathic personality. All obsessives were from psoric miasm.

In Schizophrenia and Affective Disorders constitutional prescription brought desired results. In Anxiety Disorders prescription based on causative factor was effective. In case of Alcohol/drug use disorder, prescription based on mental and physical generals were found most effective. During the study, no side or after effects of homoeopathic medicines were observed despite prolonged use in some cases.

Conclusion

Unlike Allopathic School of medicine where antidepressants, tranquilisers, sedatives or even electric shock therapy are the treatment, Homoeopathy has a truly therapeutic role in the management of mental disorders which as may be seen requires correction rather than suppression. Evaluation of miasmatic background plays an important role in the proper selection of homoeopathic remedy and lasting relief in individuals with behavioural disorders. Miasmatic treatment should therefore, form an integral part of the therapeutic management of behavioural disorders.

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