

Effectiveness of Homeopathy in Case of Hysteria through Synthesis Repertory – A Case Study

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About Hysteria:

Hysteria is a state in which a person cannot control their emotions. It is a temporary, emotional state of mind with unmanageable fear or emotional excess. Stress, anxiety, and trauma play the main role in hysteria. The trauma can be caused by emotional, physical, sexual. According to Charcot believed hysteria was hereditary, he also thought that environmental factors such as stress could trigger hysteria in an individual. Hysteria can cause various manifestations involving anxiety, fainting, emotional outbursts, irritability, headaches, dizziness, unstoppable crying or laughing, loss of appetite, nervousness, shortness of breath, insomnia, hallucination, and loss of sensation. No significant diagnosis is available to confirm hysteria. The management of hysteria is practicing meditation, getting physically active, breathing exercises, writing a diary, getting good sleep, high water intake, and healthy diet along with homeopathic medicines.

About Synthesis repertory:

Synthesis repertory is based on the 6th edition of Kent's Repertory. It belongs to the classification of logical utilitarian type because it has a logic behind its construction and has a utilitarian function. It is based on the philosophy of DEDUCTIVE LOGIC i.e., from **general to particular**. Arrangements of the chapters like that of Kent's Repertory. Synthesis Repertory is divided into 38 chapters. The repertory starts with the mind chapter, and the last chapter is on generalities which contains physical generals and physical general modalities. The plan followed throughout is sides, times, modalities, extensions, localizations, and descriptions of pain/ other descriptions. This repertory contains 2373 drugs. He used four varieties of typography to indicate the gradation of remedies: **1. BOLD CAPITAL** -4 marks-1st grade. **2. Bold Small** -represents 3 marks and 2nd grade. **3. Italics** – contains 2 marks and 3rd grade. **4. Roman** - represents 1 mark and 4th grade. Clinical rubrics were renamed according to modern disease nomenclature.

Working out a case follows **Kent's** method of repertorization i.e., from generals to particulars. Any case rich in generals and characteristics particulars can be repertorized by Synthesis Repertory. Almost all types of cases can be repertorized by using this repertory. This will help in the choice of the final similimum remedy to be prescribed.

A Case Report:

Present Complaints:

A 42-year-old female patient attended the outpatient department (OPD) on 24 Feb. 2023 with the following complaints:

- Fainting all of sudden, since 15 days
- Unconscious for 30-40 minutes and 4 to 5 times a day, since 15 days.
- Weeping disposition, since 20 days.

- Severe headache, since one month
- Felling excessive weakness in the body, since one month
- Appetite diminished, since 20 days

History of Present Complaint:

The severe headache started 30 days back, after attending her mother's funeral. Gradually her appetite diminished and she felt excessive weakness in her body. Now faintness started from last 15 days. All her complaints started after the death of her mother.

Past History:

The patient had typhoid fever 2 years ago which was cured by allopathic treatment. No specific history.

Family History:

Father died: - natural death 8 years ago. Her brother died: - unnatural death 12 years ago, after drinking pesticide. It affected the patient the most and still, she remembers him and starts weeping. Her mother died: - a natural death one month ago.

Personal History:

The patient by occupation is a housewife; belongs to the middle-class socio-economics group with a reserved nature, not sharing her problems with anyone. Having a good relationship with IPR (Interpersonal relationship).

Drug History:

She took allopathic medicine for present complaints for 15 days with no relief.

Female Symptoms:

Menses- 4-5 days/28 days, with no associated symptoms. She has 2 unmarried sons and 3 daughters, all married and living happily.

Physical Generals:

Severe headache. Her appetite decreased and she felt excessive weakness in the body. The stool is constipated. Thirst is normal, drink 7-8 glasses of water a day. Desire for cold and undigestible food.

Mental general:

All her complaints started after: - the death of her mother, sad, disappointment, attacks of fainting when she is alone, aversion to company when she is ill, disconcerted, sighing involuntarily, being secretive, cannot to express her opinion confidently in front of others.

Local and systemic examination:

All local and systemic examinations are normal. No abnormality was detected.

Provisional Diagnosis:

Hysteria

Investigations:

Advice – CBC.

All imaging studies were already done by a psychiatrist – and showed normal impressions.

Final Diagnosis:

Hysteria

Analysis of the case:

After analyzing the symptoms of the case the mental general and physical general and particular symptoms were considered for the reportorial totality. There is a predominance of psora and sycotic miasm.

Reportorial totality:

Death of a loved one, fainting and weakness feeling, disconcerted, secretive, cowardice, company aversion, noise aversion headache during, and excessive weakness.

Considering the above symptomatology, Synthesis Repertory was preferred, and using RADAR software repertorization was done.

REPERTORIAL SHEET:

MIND			
1 MIND - AILMENTS FROM - death of			⊗
parents or friends; of			
2 MIND - COMPANY - aversion to - v			⊗
has to; when he			
3 MIND - COWARDICE -			⊗
opinion; without courage to express			
4 MIND - SECRETIVE			⊗
5 MIND - SIGHING - involuntary			⊗
6 MIND - UNCONSCIOUSNESS -			⊗
alone, when			
HEAD			
7 HEAD - PAIN - noise - agg.			⊗
GENERALS			
8 GENERALS - WEAKNESS - exertio			⊗
slight exertion			
Remedies	ΣSym	ΣDeg	Symptoms
ign.	8	16	1, 2, 3, 4, 5, 6, 7, 8
lach.	5	9	1, 4, 6, 7, 8

MIND		
1 MIND - AILMENTS FROM - death of loved ones - parents or friends; of		⊗
2 MIND - COMPANY - aversion to - weep - has to; when he		⊗
3 MIND - COWARDICE - opinion; without courage to express own		⊗
4 MIND - SECRETIVE		⊗
5 MIND - SIGHING - involuntary		⊗
6 MIND - UNCONSCIOUSNESS - alone, when		⊗
HEAD		

Remedies	ΣSym	ΣDeg	Symptoms
ign.	8	16	1, 2, 3, 4, 5, 6, 7, 8
lach.	5	9	1, 4, 6, 7, 8
nat-m.	5	6	1, 2, 4, 7, 8
sep.	4	8	4, 6, 7, 8
ph-ac.	4	7	1, 6, 7, 8
staph.	4	7	1, 3, 4, 8
lyc.	4	6	1, 4, 7, 8
agar.	4	5	4, 6, 7, 8
nux-v.	4	5	1, 4, 7, 8
tritic-vg.	4	4	1, 4, 7, 8
calc.	3	7	1, 7, 8
ars.	3	6	1, 7, 8
bar-c.	3	6	3, 4, 7
bry.	3	6	6, 7, 8
phos.	3	6	4, 7, 8
caust.	3	5	1, 4, 7
nit-ac.	3	5	1, 4, 7
vanil.	3	5	1, 2, 8
anac.	3	3	4, 7, 8
bell	2	2	5, 6, 7

Medicine:

Ignatia amara 200, 3 doses, and placebo/ BD × 7 days were prescribed on the first visit (24 Feb. 2023).

Management:

The patient was advised to practice meditation, get physically active, practice breathing exercises, and get good sleep, high water intake, and a healthy diet along with homeopathic medicines as prescribed by the physician.

FOLLOW-UP:

5 March 2023

The patient's appetite is improved and relief in weakness and constipation symptoms, but not relief in weeping, and fainting.

MEDICINE: Ignatia Amara 1M, 3Doses and placebo BD × 7 days.

13 March 2023

The patient was doing well with all her household work and felt better in weeping symptoms but still fainting attacks were occurring 2-3 times a day.

MEDICINE: Ignatia Amara 10M, 3Doses and placebo BD × 7 days.

26 March 2023

The patient has recovered from the fainting attack. She did not get a single attack of the unconscious. All doing well, no new specific or new symptoms appeared.

MEDICINE: Placebo BD × 30 days. And told the patient to report after one month.

28 April 2023

She was happy, feeling better, and doing all household work efficiently.

MEDICINE: Placebo, OD × 7 days.

Result:

Marked Improved.

