

A Review of Homeopathy Therapeutics in Benign Prostatic Hyperplasia

Dr. Mitesh P Jani

Professor/HOD Department of Anatomy, Parul University,
Rajkot Homoeopathic Medical College, Rajkot, Gujarat, India

ABSTRACT

Prostate enlargement, commonly known as benign prostatic hyperplasia (BPH), is a noncancerous increase in the size of the prostate gland. Frequent urination, difficulty starting to urinate, a weak stream, inability to urinate, or lack of bladder control are all possible symptoms. Urinary tract infections, bladder stones, and chronic kidney disease are all possible complications. The reason for this is unknown. Family history, obesity, type 2 diabetes, insufficient exercise, and erectile dysfunction are all risk factors. Globally, some 105 million men are impacted. BPH is most common after the age of 40. Half of all men over the age of 50 are affected. Around 90% of males over the age of 80 are impacted. While prostate specific antigen levels in men with BPH may be higher, the disease does not raise the risk of prostate cancer. Homeopathy, a type of medical therapies. It is not the same as "natural medicine." The concept is that "likes can treat likes." Medicines that can cure symptoms can also cause the same symptoms in healthy people. The goal of a homeopathic cure is to boost the body's immune system so that it can fight off the illness.

KEYWORDS: Benign Prostatic Hyperplasia, Prostate, Homeopathy, Complementary medicine

INTRODUCTION

Prostate enlargement, commonly known as benign prostatic hyperplasia (BPH), is a noncancerous increase in the size of the prostate gland. Frequent urination, difficulty starting to urinate, a weak stream, inability to urinate, or lack of bladder control are all possible symptoms. Urinary tract infections, bladder stones, and chronic kidney disease are all possible complications. The reason for this is unknown. Family history, obesity, type 2 diabetes, insufficient exercise, and erectile dysfunction are all risk factors. Medications such as pseudoephedrine, anticholinergics, and calcium channel blockers have been shown to exacerbate symptoms. The fundamental process is that the prostate presses against the urethra, making it difficult to evacuate urine from the bladder. After ruling out other possible reasons, a diagnosis is usually made based on symptoms and inspection. Globally, some 105 million men are impacted. BPH is most common after the age of 40. Half of all men over the age of 50 are affected. Around 90% of males over the age of 80 are impacted. While prostate specific antigen levels in

men with BPH may be higher, the disease does not raise the risk of prostate cancer.

Lifestyle adjustments, drugs, a variety of treatments, and surgery are all alternatives for treatment. Weight loss, exercise, and lowering coffee intake are indicated for persons with mild symptoms, while the quality of the evidence for exercise is low. Medications for patients with more severe symptoms may include alpha blockers like terazosin or 5-reductase inhibitors like finasteride. Surgical removal of a portion of the prostate is an option for patients who do not respond to other treatments. Phytotherapies that have been investigated, such as saw palmetto, have not been found to be beneficial.

Signs and symptoms

- Need to urinate frequently
- Dysuria
- Waking at night to urinate
- Urgency (compelling need to void that cannot be deferred)

How to cite this paper: Dr. Mitesh P Jani "A Review of Homeopathy Therapeutics in Benign Prostatic Hyperplasia" Published in International Journal of Trend in Scientific Research and Development (ijtsrd), ISSN: 2456-6470, Volume-6 | Issue-1, December 2021, pp.1713-1715, URL:

www.ijtsrd.com/papers/ijtsrd49121.pdf



Copyright © 2021 by author (s) and International Journal of Trend in Scientific Research and Development Journal. This is an Open Access article distributed under the



terms of the Creative Commons Attribution License (CC BY 4.0) (<http://creativecommons.org/licenses/by/4.0>)

- Urinary hesitancy (a delay between trying to urinate and the flow actually beginning), intermittency (not continuous)
- Straining to void
- A sensation of incomplete emptying, and uncontrollable leaking after the end of urination
- Incomplete voiding results in residual urine or urinary stasis, which can lead to an increased risk of urinary tract infection.

Causes:-

Hormones:-

Androgens (testosterone and related hormones) to play a permissive role in the development of BPH. This means that androgens must be present for BPH to occur, but do not necessarily directly cause the condition. The metabolite of testosterone, dihydrotestosterone (DHT), is a key facilitator of prostatic development. The enzyme 5-reductase, type 2 produces DHT in the prostate by converting circulating testosterone to DHT. DHT can operate on stromal cells in an autocrine or paracrine manner by diffusing into adjacent epithelial cells. DHT binds to nuclear androgen receptors in each of these cell types, signaling the transcription of mitogenic growth factors in epithelial and stromal cells. DHT has ten times the potency of testosterone due to its slower dissociation from the androgen receptor. Testosterone increases prostate cell proliferation, while BPH patients have low testosterone levels in their blood. Medical castration lowers serum and prostate hormone levels unevenly, with less effect on testosterone and dihydrotestosterone levels in the prostate, according to a small study.

Diet

Studies suggest that dietary habits may influence the development of BPH, although more research is needed to confirm any significant link. According to Chinese research, a higher protein intake may play a role in the development of BPH. Men over 60 who lived in rural areas had relatively low rates of clinical BPH, but men who lived in cities and ate more animal protein had a greater rate. A study in Japanese-American men in Hawaii, on the other hand, discovered a large negative connection with alcohol consumption, but a slight positive association with beef consumption. Investigators identified minor relationships between BPH (men with strong symptoms of BPH or surgically diagnosed BPH) and total calorie and protein intake, but not fat intake, in a large prospective cohort research in the United States (the Health Professionals Follow-up Study). BPH is also linked to metabolic syndrome (concurrent obesity, poor glucose metabolism and diabetes,

elevated triglyceride levels, etc.) according to epidemiological studies.

Degeneration

Benign prostatic hyperplasia is a disorder that affects men as they become older. According to the misrepair-accumulation aging theory, the development of benign prostatic hyperplasia is caused by fibrosis and weakening of the prostate's muscle tissue. The muscular tissue of the prostate is vital for its function, as it provides the force for excreting the fluid produced by the prostatic glands. Repeated contractions and dilations of myofibers, on the other hand, will invariably result in injuries and damaged myofibers. Because myofibers have a low regeneration ability, collagen fibers must be employed to replace the broken myofibers. Such defects impair muscle tissue's ability to function, and the fluid released by glands is unable to be expelled fully. The increased resistance of muscle tissue during contractions and dilations is caused by the accumulation of fluid in glands, and more and more myofibers are destroyed and replaced by collagen fibers.

Role of Homoeopathy in BPH

Dr. Samuel Hahnemann discovered homoeopathy, a type of medical therapies. It is not the same as "natural medicine." The concept is that "likes can treat likes." Medicines that can cure symptoms can also cause the same symptoms in healthy people. The goal of a homoeopathic cure is to boost the body's immune system so that it can fight off the illness. Homoeopathic treatments can be made from herbs, metals, or toxins, but they are harmless since they are administered in extremely small doses. Homoeopaths treat the complete person rather than just the ailment, and they take a thorough history of the patient's likes, dislikes, and habits before prescribing a treatment.

Indicated Remedies

Chimaphilla umbellata

This remedy is often helpful when the prostate is enlarged, with urine retention and frequent urging. The person may have the feeling that a ball is lodged in the pelvic floor, or experience pressure, swelling, and soreness that are worse when sitting down.

Pulsatilla

Prostate problems with discomfort after urination and pains that extend to the pelvis or into the bladder (often worse when the man is lying on his back) suggest a need for this remedy. There may also be a bland, thick, yellow discharge from the penis. *Pulsatilla* is usually suited to emotional individuals who want a lot of affection and feel best in open air

Apis mellifica

Stinging pain during urination that is worse when the final drops are passing is a strong indication for this remedy. Discomfort may also involve the bladder. The prostate area is swollen and very sensitive to touch. The person may feel worse from heat and from being in warm rooms, with improvement from being out in open air or from cool bathing.

Causticum

Urine loss when the person coughs or sneezes often indicates a need for this remedy. Once urine has started passing, the person may feel pressure or pulsation extending from the prostate to the bladder. *Causticum* is also indicated when sexual pleasure during orgasm is absent or diminished.

Clematis

This remedy is often indicated when swelling of the prostate seems to have narrowed or tightened the urinary passage. Urine usually emerges slowly, in drops instead of a stream, with dribbling afterward.

Lycopodium

This remedy may be helpful if urine is slow to emerge, with pressure felt in the prostate both during and after urination. The prostate is enlarged, and impotence may also be a problem. People who need this remedy often suffer from digestive problems with gas and bloating, and have an energy slump in the late afternoon.

Sabal serrulata

A frequent urge to urinate at night, with difficulty passing urine, and a feeling of coldness in the sexual organs, suggest a need for this remedy. It is sometimes also used in lower potencies for urinary incontinence in older men. This remedy is made from saw palmetto which is also used as an herbal extract for similar prostate problems.

Staphysagria

This remedy may be indicated if a man feels burning pain in his urinary passage even when urine is not flowing, and urine retention is troublesome. Men who are likely to respond to *Staphysagria* are often sentimental and romantic, and may also have problems with impotence (most often caused by shyness).

Thuja

When the prostate is enlarged, and the person has a frequent urge to urinate, with cutting or burning pain felt near the bladder neck, this remedy may bring relief. After urine passes, a dribbling sensation may be felt. A forked or divided urine stream is sometimes seen when this remedy is needed.

References:-

- [1] "Prostate Enlargement (Benign Prostatic Hyperplasia)". NIDDK. September 2014. Archived from the original on 4 October 2017. Retrieved 19 October 2017.
- [2] Kim EH, Larson JA, Andriole GL (2016). "Management of Benign Prostatic Hyperplasia". Annual Review of Medicine (Review). 67: 137–51. doi:10.1146/annurev-med-063014-123902. PMID 26331999.
- [3] Comprehensive study of Organon by Nagendra Babu, B Jain Publisher(P) LTD. 11th Impression 2018,49-57
- [4] API text book of medicine 2nd volume
- [5] Materia Medica by John Henry Clarke <https://www.google.com/search?q=characteristics+of+thyroidinum+medicine&aq=characteristics+of+thyroidinum+medicine&aqchrome.69i57.12882j0j15&sourceid=chrome&ie=UTF-8>
- [6] Allen's keynotes and characteristics by H.C. Allen
- [7] Adolph Lippe, lippe textbook of Materia Medica, B Jain Publisher(P) LTD Reprint Edition 1997.
- [8] William Boericke, Pocket Manual of Homoeopathic Materia Medica & Repertory B Jain Publisher(P) LTD 521 impression 2012,
- [9] S. R. Pathak, Materia Medica of Homoeopathic medicines Second revised Enlarged edition Jan 2017,
- [10] Murphy robin lotus Materia Medica B Jain Publisher (P) LTD, 2nd revised edition, 2002.