

# A Case Report of Thrombocytopenia & Leukocytopenia in Dengue Fever Treated with Carica Papaya Mother Tincture

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## ABSTRACT

As Thrombocytopenia & Leukocytopenia both are having equivalent significance for the presentation of Dengue fever; which causes significant morbidity & complications. Dengue is a viral infection transmitted to humans through the bite of infected mosquitoes, primarily the *Aedes aegypti* mosquito. About half of the world's population is now at risk of dengue with an estimated 100-400 million infections occurring each year. Similarly, with over 100 million cases annually and 20-25,000 deaths, presents a substantial public health challenge, marked by epidemics across different regions globally. Early detection with diagnosis entails identifying virus antigens playing an important role in the symptomatic treatment as well as prevention of such increasing incidence observed; simultaneously with analyzing the complexities of dengue haemorrhagic fever. This case regards the Homeopathic medicine carica papaya in the form of mother tincture using non repertorial approach of the selection of simillimum for the treatment of thrombocytopenia & leukocytopenia in Dengue fever.

**KEYWORDS:** *Thrombocytopenia, leukocytopenia, Dengue fever, Aedes aegypti, Haemorrhagic fever, Homeopathy, Carica Papaya, Mother Tincture*

## INTRODUCTION

Thrombocytopenia is a condition characterized by abnormally low levels of platelets. In such cases it may lead to prolonged or excessive bleeding. "It is considered the most common coagulation disorder among intensive care patients and is seen in a 5th of medical patients and 3rd of surgical patients". Hence Dengue fever is also called "Haemorrhagic fever". On the other hand Leukocytopenia refers to a decrease number of leukocytes i.e. WBC. They are found in the blood as white blood cells, and act as the body's defence mechanism fighting against an infection. Thus, the condition of leukopenia places individuals at increased risk of infection. Dengue fever is caused by a small single-stranded RNA virus belonging to *Flaviviridae*. Dengue virus is transmitted to humans through the bites of infected *Aedes* mosquitoes, principally *Aedes aegypti*. Dengue is characterised by leukocytopenia followed by thrombocytopenia; along with its progression during febrile phase other physical signs & symptoms of body aches, severe headaches, pain behind the eyes, muscle & joint pains, nausea, vomiting, swollen glands and rash.

Therefore, Dengue fever is termed as Breakbone Viral fever as well.

## CASE PRESENTATION:-

**History:-** A male patient 67 years old, a retired Central Govt. Officer reported on 16/08/2024, having complained of headaches, malaise, feverish with mild constipation & anorexia for 4-5 days. Patient had taken PCM for fever spikes once a day & as required.

## Present chief complaint:-

- High grade fever
- Associated with chills
- Headache - intense in nature, < movement > lying down, rest.
- Pressing pain behind the eyes, < closing the eyes, > warm fomentation.
- Generalised bodyache
- Mild upper abdominal pain
- Fatigability
- Anorexia
- All these complaints arise from 3-4 days.

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**No H/o:-** Itching, rash, nausea, vomiting, hematemesis, melena, mucosal bleeds, oliguria, hematuria, polyarthralgia.

**Past History:-** Not contributory, Covid positive in wave 2, no any other medical or surgical condition.

**Personal History:-** No any type of addictions & habits.

**Family History:-** Not contributory.

**O/E:-**

➤ General Examination: Lean thin body built & moderately nourished.

➤ **Physical Examination:**

- Sclera, Conjunctiva: Pale in colour
- Oral cavity: Mouth, Gums: Hygienic, no bleeding gums
- Tongue: moderately coated white,
- Nail beds: mild pale in colour
- Skin: no abnormality, no petechiae, no rash found all over the body

**Vitals:**

- BP: 110/70 mm of Hg

- Pulse: 88/min
- RR: 20/min
- Temp.: 101 F

➤ **Systemic Examination:**

- CNS: conscious, well oriented
- CVS: S1S2 present, no abnormality
- RS: BLAE + clear, no abnormality
- GIT: semi soft abdomen, no tenderness, mild pain right & left hypochondriac region, mild enlargement of Liver & Spleen, BS +
- GUT: No abnormality.

**Differential Diagnosis:-**

- Dengue Fever
- Malaria
- Viral Fever
- Typhoid

**Investigation:-**

- CBC
- MP
- Dengue Serology
- S.Typhi
- CRP

**nit LABORATORY**  
A. D. Jani Road, Balkrushna Market, Behind Lohar - Suthar Vadi, Limbdi - 363 421. Ph.: (02753) 261440. Time: 8-30 a.m. to 7-30 p.m.

Name: [REDACTED] Age/Sex: Yrs./M Date: 16/08/2024 Report ID: 81

**HAEMATOLOGY ANALYSIS**

TEST	RESULT	UNIT	REFERENCE INTERVAL
<b>BLOOD COUNTS &amp; INDICES</b>			
Haemoglobin	12.70	g/dL	13.5 - 17.0 g/dL
Total RBC	4.24	mill/cmm	4.4 - 6.2 mill/cmm
PCV	36.10	%	40 - 54 %
MCV	84.74	fL	80 - 98 fL
MCH	29.81	pg	27 - 31 pg
MCHC	35.18	%	32 - 34 %
RDW	12.90	%	10 - 15 %
Total WBC	2,500	/cmm	4,000 - 11,000/cmm
Platelet Count	1,29,000	/cmm	1.5 - 4.0 lac/cmm.
<b>DIFFERENTIAL LEUCOCYTES COUNT</b>			
Neutrophils	62	%	55 - 70 %
Lymphocytes	25	%	20 - 40 %
Eosinophils	06	%	01 - 06 %
Monocytes	07	%	02 - 08 %
Basophils	00	%	00 - 01 %
Platelet in Smear	0		DIMINISHED
PARASITES			M.P. NOT DETECTED

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**IMMUNOLOGY ANALYSIS**

TEST	RESULT
<b>SERUM WIDAL TEST</b>	
ANTIGEN EMULSION	S.LIDE
S. Typhi 'O'	0 : 1:80
S. Typhi 'H'	0 : 1:40
Result	S. WIDAL TEST IS NEGATIVE
<b>INTERPRETATION :</b>	
1. 'H' and 'O' agglutination appears in the serum after ten days. Increased in to peak in 3rd to 5th repeat for rising titre weeks, then gradually falls for several weeks. 2. 'O' agglutinins appear before 'H' & is usually higher at first. Later on 'H' is higher. 3. Usually criteria for diagnosis is both 'O' and 'H'. 4. Positive reaction could occur on account of typhoid vaccination or previous typhoid inf. Non specific fibrile disease cause this titre to increased (nonimmune reaction) 5. Rising titre may be necessary for proper evaluation. 6. Early treatment with specific drug may cause titre to remain negative. 7. Increased in 'O' titre may reflect infection with any salmonella organisms. 8. Urine or stool culture is preferable when illness is of more than 4 weeks duration. 9. Result of slide technique should always be confirmed by Tube technique.	

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**REPORT OF BLOOD EXAMINATION**

TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
Material	SERUM			
S.CRP (C-Reactive Protein) (Quantitative)	31.8	mg/L	Immunoturbidometry	00 - 06 mg/L

END OF REPORT

**nit LABORATORY**  
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**DENGUE DUO REPORT**

TEST	RESULT	REFERENCE INTERVAL
<b>DENGUE TEST</b>		
IgG Antibody	NEGATIVE	NEGATIVE
IgM Antibody	NEGATIVE	NEGATIVE
NS1 Antigen	POSITIVE	NEGATIVE
Test Kit	RAPID DENGUE DUO CARD TEST	
Principle	IMMUNOCHROMATOGRAPHIC ASSAY	

END OF REPORT

*Before medicine*

**Smit LABORATORY**

**Chaitanya M. Joshi**  
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Balkrushna Market,  
Behind Lohar - Suthar Vadi,  
Limbedi - 363 421.  
Ph.: (02753) 261440  
Time: 8:30 a.m. to 7:30 p.m.

Name: [REDACTED] Age/Sex: Yrs./M  
Ref By: [REDACTED] Date: 20/08/2024  
Report ID: 3

**HAEMATOLOGY ANALYSIS**

TEST	RESULT	UNIT	REFERENCE INTERVAL
<b>BLOOD COUNTS &amp; INDEXES</b>			
Haemoglobin	15.40	g/dL	13.2 - 17.0 g/dL
Haematocrit	44.8	%	38 - 47 %
PCV	37.40	%	34 - 44 %
MCV	94.00	fL	80 - 100 fL
MCH	30.50	pg	27 - 31 pg
MCHC	32.36	g/dL	31 - 34 g/dL
RDW	13.30	%	11 - 14 %
Platelet Count	4,000	/mm <sup>3</sup>	4,000 - 1,20,000/mm <sup>3</sup>
Platelet Count	1,00,000	/mm <sup>3</sup>	1.0 - 4.0 Lakhs/mm <sup>3</sup>
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>			
Neutrophils	87	%	55 - 70 %
Lymphocytes	4	%	20 - 40 %
Eosinophils	3	%	01 - 04 %
Monocytes	14	%	02 - 08 %
Basophils	8	%	00 - 01 %
Platelet in blood	ADKQUANT		

END OF REPORT

*After medicine taken*

**Smit LABORATORY**

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Time: 8:30 a.m. to 7:30 p.m.

Name: [REDACTED] Age/Sex: Yrs./M  
Ref By: [REDACTED] Date: 20/08/2024  
Report ID: 3

**REPORT OF BLOOD EXAMINATION**

TEST	RESULT	UNIT	METHOD	REFERENCE INTERVAL
Material	SERUM			
ESR(CRP-Reactive Protein) (Quantitative)	5.84	mg/L	immunoturbidimetry	00 - 06 mg/L

END OF REPORT

### Final Diagnosis:- Dengue Fever

#### Totality of Symptom:

- High grade fever associated with chills
- Headache- intense pain <movement, > lying down
- Pressing pain behind the eyes < closing the eyes, > warm fomentation
- Generalised bodyache
- Fatigability
- All complaints are from 3-4 days.

#### Treatment:-

- Patient was given Homeopathic medicine Carica Papaya Mother Tincture 10 drops in half glass of water TDS for 5 days.
- Comprehensive regimen advised to bed rest, avoiding physical & mental exertion as decreasing screen time & reading which produce eye strain. Dietary recommendations as soft, light diet along with semi solid food items including fresh homely cooked food & fruits as well. Avoid fried, hard & spicy food items. Moreover avoidance of dairy items including sweets, milk & milk products.

- As Carica Papaya has specific indications in cases of thrombocytopenia & leukocytopenia for Dengue fever. Along with this, other indications also recall this remedy viz. immune booster, in metabolic disorder, increases appetite, organomegaly especially Liver & Spleen. Role of mother tincture

#### Follow up:-

- On the 5th day of treatment, the patient came for follow up.
- As per history, fever spikes with chills have reduced since the last 2-3 days, no fever with chill since the last 1 day.
- Headache & eye pain has reduced intensity since the last 3-4 days. Patient had no headache since the last day.
- Generalised bodyache decreases, no body since last 2 days.
- Fatigability has been reduced since the last 1-2 days, and the patient feels a little energetic.
- Appetite has increased, and patient's feel like eating cooked food.

## DISCUSSION:-

Carica Papaya is highly effective medicine in the treatment of Dengue fever in case of thrombocytopenia & leukocytopenia. Indeed the role of mother tinctures in curing such conditions in homeopathy are very much remarkable. Carica Papaya is very useful in indigestion, enlarged liver & spleen, along with pain. Carica papaya mother tincture is a homeopathic medicinal preparation from the green unripe fruit excluding seeds of Papaya. In general, a mother tincture contains the lowest possible potency of any particular homeopathic preparation. The novelty of Carica papaya is applicable for all aspects of a human physic from minor to major complaints.

## CONCLUSION:-

Summary - Thrombocytopenia & Leukocytopenia in Dengue fever treated successfully with homeopathic medicine carica papaya in the form of mother tincture. Patient was treated with a very minimal dose of single medicine creating a marvellous effect on the physical & mental plane as well. Henceforth the medicinal effect of the carica papaya not only cures the patient completely including all physical symptoms but also prevents from spreading the infection further in the human body without creating

any type of side effect. Carica Papaya mother tincture is highly recommended for clinical practices in such conditions.

## REFERENCES:-

- [1] <https://www.ncbi.nlm.nih.gov>
- [2] Homeopathic Materia Medica of New Drugs; Hahnemannian Provings 1985-2009, By Dr. P.N. Varma & Dr. Ramachandran Valavan, Published by B Jain Publishers (P) Ltd.
- [3] Mother Tinctures Therapeutics & Materia Medica by Dr. Vinay Jain, 6th impression 2015, Published by B Jain Publishers (P) Ltd.
- [4] All in one Homeopathic Materia Medica, Revised & Enlarged Edition, by Prof. (Dr.) Niranjan Mohanty, 11th impression:2012, published by B Jain (P) Ltd.
- [5] <https://www.who.int>. Dengue & severe dengue
- [6] PMC PubMed Central, Author Hari Kishan Jayanthi & Sai Krishna Tulasi, Correlation study between platelet count, leukocyte count, non hemorrhagic complications in dengue fever with thrombocytopenia. PMID: PMC4943117.

