

A Case Series on the Role of Constitutional Homeopathic Treatment in Sick Cell Disease

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ABSTRACT

Background: Sick cell disease (SCD) poses significant health challenges due to its chronic nature and complications. Homeopathy, with its individualized and holistic approach, offers the potential for symptom management.

Objective: This case series aims to assess the effectiveness of constitutional homeopathic remedies in managing symptoms and improving the quality of life of patients with SCD.

Methods: Five patients with confirmed SCD diagnosis underwent individualized homeopathic treatment based on classical principles. Clinical outcomes were evaluated using the Visual Analog Scale (VAS) and other hematological findings such as Hb level.

Results: All patients reported symptomatic relief with marked improvement in pain intensity, fatigue, and overall well-being. VAS scores reduced significantly, reflecting improved quality of life.

Conclusion: This case series demonstrates the potential role of constitutional homeopathic remedies in managing SCD symptoms. Further studies are needed to establish these findings.

KEYWORDS: Sick cell disease, SCD, Sick cell Anaemia, HbS, Homeopathic medicine, Constitutional Homeopathic Treatment, Sick Hemoglobin, Genetic

INTRODUCTION

Sickle cell disease (SCD) is a hereditary hemoglobinopathy where β globin chain is mutated at sixth codon from glutamic acid to valine amino acid. Which forms abnormal Sick hemoglobin (HbS) that significantly impacts quality of life due to chronic pain, anemia, and organ damage. ^[1]

In 2015 (WHO) study showed data on disease in a year 4.4 million had sickle cell disease 43 million had sickle cell trait and 1,14,800 deaths due to sickle cell. In India, approximately 1 million cases per year suffer from Sick cell Disease. In South India, Assam, Bihar, Orissa. ^[2]

In India, a study carried out in Maharashtra's Vidharbha region revealed the prevalence of sickle cell disease among non-tribal populations at 9.4% to 22.2%. The prevalence of this inherited hematological disorder in Central India can range from 1 to 44.4%

in communities and according to territorial endogamy practices. An alarmingly large number is added each year, averaging 4.3%. Compound heterozygosity is most common in India, primarily distributed in Madhya Pradesh, followed by Maharashtra, Gujarat, Odisha, and Kerala. ^[3]

Conventional treatments often address symptoms but may not always improve long-term outcomes. Folic acid and Hydroxyurea are the only medications on the allopathic side for lifelong management. Homeopathy, based on constitutional treatment, provides an individualistic holistic approach to disease management. This case series explores the potential of constitutional homeopathic remedies in alleviating the symptoms of SCD. ^[4]

Every patient in homeopathic medicine requires individualized care based on a comprehensive case-

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taking procedure that includes a complete description of the patient's condition. According to Organon of Medicine 6th edition §78 Dr. Samuel Hahnemann says - *“The true chronic diseases are those that arise from a chronic miasm, which when left to themselves, and unchecked by the employment of those remedies that are specific for them, always go on increasing and growing worse, notwithstanding the best mental and corporeal regimen, and torment the patient to end of his life with ever aggravated sufferings. These, excepting those produced by medical malpractice.”* [5,6]

While Ayurveda does not have a direct equivalent for SCD, its clinical presentation shares significant similarities with Pandu Roga, an Ayurvedic disease entity primarily associated with Rakta (blood) and Pitta dosha imbalance. Pandu is broadly correlated with various forms of anemia, as it manifests with symptoms such as pallor, fatigue, weakness, and loss of appetite, which are also common in SCD (Sharma, 2014; Tripathi, 2011). However, it is important to note that despite these similarities, SCD remains an Adibala pravritta vyadhi—a genetic disorder that arises due to congenital factors and is considered Asadhya (incurable) in Ayurveda. [7]

While Ayurveda recognizes the genetic basis of diseases such as SCD, it also emphasizes the importance of patient efforts, including lifestyle modifications, dietary adherence to iron-rich foods, easy-to-digest meals, and Pitta-shamana (Pitta-pacifying) formulations play a crucial role in maintaining hemostasis and preventing disease exacerbations, and regular intake of Aushadhi (medications) to improve overall quality of life. The synergy between Ayurvedic interventions and Homeopathic therapeutic approaches, along with conventional approaches may provide supportive care for patients with SCD, reducing disease complications and enhancing long-term well-being. Further clinical research is warranted to establish evidence-based integrative protocols for managing hemoglobinopathies through Ayurveda along with Homeopathy. [8]

Methods

Study Design

This retrospective case series included five patients diagnosed with SCD and treated with individualized homeopathic remedies.

Patient Details

Inclusion criteria: patients diagnosed with SCD confirmed through clinical and laboratory findings. Demographic data, baseline symptoms, and clinical history were documented.

Intervention

Patients received individualized constitutional remedies based on homeopathic principles. Potencies ranged from 200C to 1M, and the frequency of administration varied depending on the case.

Evaluation

Outcomes were evaluated using the Visual Analog Scale (VAS) for pain and hemoglobin level monitoring for the anemia.

Ethical Considerations

Informed consent was obtained from all patients. Confidentiality and privacy were maintained throughout the study.

Results

Five cases are summarized below, with clinical findings, remedies prescribed, follow-up data, and outcomes.

Case 1:

MRS D.V. A 26-year-old female, a known case of Sickle Cell Disease (SCD) for the past 2.5 years, presented with complaints of pain in the knees, ankles, and soles. The burning type of pain aggravated during rest, warmth of the bed, sitting, and night time. The patient was on long-term folic acid supplementation without significant relief. She also reported hot, profuse perspiration, which aggravated her condition.

Past History: She had frequent boils in childhood, treated with home remedies, and needed a blood transfusion for anemia during childbirth three years ago.

Family History: Father had SCD and passed away 5 years ago due to multi-organ damage. Mother and sister both have SCD and are alive. Son has the sickle cell trait and is alive.

Physical Generals: She is feels hungry at 11 AM daily. Drinks 2-2.5 liters of water daily, prefers normal-temperature water. Regular passing stool, once daily in the morning. Strong craving for sweets. Hot constitution, prefers winter, dislikes sun exposure. Sound sleep. Profuse, hot, covering the entire body. Regular menses with 30-day cycle with moderate flow lasting 5 days. Delivered one healthy child. Blood transfusion was required during delivery due to anemia.

Life-Space: The patient is a 26-year-old woman from Bodeli village, married at 18. She has a supportive husband and family. A significant life event was the death of her father due to SCD, which heightened her awareness and concern about her own health and her family members' conditions. She is deeply religious and finds solace in daily prayer rituals.

Physical Examination: Pulse: 75/min; BP: 110/70 mmHg; Respiratory Rate: 20/min; Temperature: 98.6°F, VAS-6

General Examination: Dark complexion, malnourished with pale skin and nails. 38 kg weight with 5 feet height.

Totality of symptoms:

1. Religious affection+++
2. Restlessness mental, Restlessness physical
3. Perspiration hot+++
4. All pain <warmth of bed+++

5. Desire sweet +++
6. Knee, ankle pain < rest
7. Burning type of pain in ankle, knee, soles

Repertorization and remedial analysis: RadarOpus3.0 was use for reportorial analysis and materia medica consultation *Sulphur* 200C was prescribed as stat dose in the morning on the empty stomach, followed by placebo in 40 number globules 4 in morning and 4 in night for 15 days. It was prescribed on October 19, 2023 and advise to take nutritious food.



	sulph.	rhust.	carb-v.	merc.	lyc.	puls.	plb.	bell.	bry.	sep.	als.	lach.	aur.	nat-c.	nit-ac.	mez.	calc.	pf
1. Clipboard 1	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1. MIND - RELIGIOUS AFFECTIONS - too occupied w...	12	11	11	10	10	10	10	10	10	9	9	9	9	9	9	9	9	9
2. MIND - CHEERFUL	25	24	16	22	21	21	20	17	13	19	18	17	16	16	16	15	14	13
3. MIND - RESTLESSNESS	3	2	2	1	3	2	2	2	3	2	3	2	1	2	2	2	2	2
4. GENERALS - FOOD and DRINKS - sweets - desire	2	2	1	1	2	2	1	2	1	1	1	3	2	3	2	1	1	2
5. PERSPIRATION - HOT	3	3	2	3	3	3	3	3	1	3	3	2	2	2	2	2	3	1
6. EXTREMITIES - PAIN - Knees - burning	3	2	2	2	3	2	2	1	2	2	1	1	1	2	2	2	2	2
7. EXTREMITIES - PAIN - Ankles - burning	2	2	2	2	1	1	1	2	1	3	1	1	1	1	1	1	1	1
8. EXTREMITIES - PAIN - Feet - burning	1	2	1	1	1	1	1	1	1	3	1	1	1	1	1	1	1	1
9. EXTREMITIES - PAIN - warm - bed - agg.	1	2	1	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2
10. GENERALS - REST - agg.	3	1	1	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
11. EXTREMITIES - PAIN - night	2	2	2	3	2	3	2	3	2	3	2	2	2	2	2	2	2	2
12. EXTREMITIES - PAIN - Lower limbs - night	1	3	1	2	3	3	1	1	1	3	2	2	3	2	1	1	1	1
	2	2	1	3	1	2	3	1	1	2	2	2	2	2	2	2	1	1
	2	3	1	3	2	2	2	2	2	2	2	2	2	2	3	2	2	2

Follow Up:

Sr no.	Date	Complain	Prescription
1.	8.11.2023	Burning pain decrease in soles Burning pain in bed at night remains same as before Knee pain – remains same Ankle pain- present as previous	Sulph 200 1 dose on every 15 days Sl Bd 4-0-4-0 for 1 month
2.	4.12.23	Burning pain decrease in soles; knee pain -decreased slightly; Ankle pain- absent; Warmth of bed aggravation complains decrease; Pain reduce at night	Sac Lac 1 dose on every 15 days Sl Bd 4-0-4-0 for 1 month
3.	9.1.24	Burning pain decrease in soles Knee pain -decreased; Ankle pain- occurs; Warmth of bed aggravation complains decrease; Pain intensitiy reduce at night markedly; VAS- 5, Hb level 9.1 gm/dl	Sulph 200 1 dose on every 15 days Sl Bd 4-0-4-0 For 1 month
4.	15.2.24	Burning pain absent in soles Knee, ankle pain -decreased Warmth of bed aggravation decrease Pain intensitiy markedly reduce	Sulph 200 1 dose on every 15 days Sl Bd 4-0-4-0 for 1 month
5.	5.3.24	Burning pain absent in soles; Knee, ankle pain - decreased; Warmth of bed does not affects now at night; Pain intensitiy markedly reduce; VAS-3, Hb- 10.8 gm/dl	Sulph 200 1 dose on every 15 days Sl Bd 4-0-4-0 for 1 month

Result: The patient showed marked improvement with a 30% reduction in pain intensity (VAS decreased from 6 to 3). Hemoglobin levels increased from 8.6 g/dl to 10.8 g/dl over 5 months. Overall well-being improved significantly, and daily physical activities were restored.

Case 2:

MRS C.R. 29 year female patient presented with cramping pain in both forearms and arms, which had been present for the last three years. The pain was aggravated by physical work and even by thinking about the complaint. However, the pain improved when she was busy. Along with this, she reported constant fatigue and drowsiness, further affecting her quality of life.

Past History: The patient experienced three episodes of SCD crises, the last occurring one year ago. She was treated with alternative medicine and blood transfusion during these crises.

Family History: Father has SCD trait, alive. Mother had SCD, passed away from multi-organ failure. Brother has SCD, alive.

Physical Generals: Thirstlessness, maximum intake of 1 liter per day, even in summer. Aversion Bitter. Hot person. Sleep disturbed due to pain. Perspiration Moderate. Menstrual History-Experiences back pain during menses, with profuse urination. Regular 30-day cycles, with 5 days of moderate, fluidy, red blood flow. Obstetric History: P₀ A₀.

Life-space: The patient has had a challenging life, living with SCD since childhood and experiencing significant emotional and physical struggles. She has been married for five years but has not conceived despite normal medical reports. The emotional strain from family dynamics and fertility concerns has contributed to her ongoing pain, worsened by stress and mental overthinking.

Physical Examination: Pulse – 75/min, BP – 120/80 mm Hg, RR – 16/min, Temp – 98.6°F, VAS-5. Pale, anaemic, and dull appearance. Dullness. Height: 5'1" with 50 kg weight and poor nutrition. Sclera Yellowish.

Investigations: Sickling Test- Positive, Hemoglobin- 7.2 gm/dL.

Totality of symptoms:

1. Fatigue, drowsy constant
2. Pain < Thinking of complain
3. >Occupational diversion
4. Emotional excitement leads to bodily affection
5. Backpain during menses > profuse urination
6. Sleepless due to pain.
7. Cramping pain in arms and forearms

Repertorization and remedial analysis: RadarOpus3.0 was use for reportorial analysis and materia medica consultation *Gelsemium Sempervirens* 200C was prescribed as stat dose in the morning on the empty stomach, followed by placebo in 40 number globules 4 in morning and 4 in night for 15 days. It was prescribed on October 13, 2023 and advise to take nutritious food and meditation.



		gels.	calc.	sep.	graph.	plb.	spong.	nux-v.	lach.	lyc.	nux-m.	tub.	c
		1	2	3	4	5	6	7	8	9	10	11	12
		6	5	5	5	5	5	4	4	4	4	4	4
		12	9	9	8	7	6	9	8	8	8	8	7
1. Clipboard 1	x												
▶ 1. SLEEP - SLEEPLESSNESS - thoughts	(181) 1	2	3	2	2	1	1	3	2	2	1	2	
▶ 2. GENERALS - WEARINESS	(461) 1	3	2	3	3	1	1	3	3	3	2	3	3
▶ 3. SLEEP - SLEEPINESS - daytime	(129) 1	2	1	2	1	3	1	1	1	2	3	2	1
▶ 4. Mind - STUPEFACTION, mental - urination, profus...	(1) 1	2											
▶ 5. MIND - THINKING - complaints - agg.; thinking o...	(113) 1	2	1	1	1	1	2	2	2		2	1	2
▶ 6. EXTREMITIES - CRAMPS - Forearms	(39) 1	1	2	1	1	1	1			1			1

Follow Up:

Sr no.	Date	Complaints	Prescription
1	14.11.2023	Pain in arms and forearms decrease slightly Mentally patient feels good, she can handle her house hold matters with ease Unable to sleep at night due to pain Back pain in menses reduce slightly; VAS-5	Gels 200 1 dose on 15 days SI Bd 4-0-4-0 For 1 month
2	16.12.2023	Patient feels less pain in arms and forearms Mentally patient feels good as she can do house hold chores by herself; Sleep nicely as pain reduces; Back pain during menses reduce markedly this month, VAS-4	Gels 200 1 dose 15 days SI Bd 4-0-4-0 For 1 month

3	13.1.2024	Patient feels rarely pain in arms and forearms on some days, otherwise no pain; Mentally patient feels happy as she can do house hold chores by herself nicely; Sleep sound, pain reduces markedly; No Back pain during menses this month; VAS-3, Hb- 8.8 gm/dl	SL 1 dose on 15 days Sl Bd 4-0-4-0 For 1 month
4	16.2.2024	Patient feels pain in arms and forearms as she done complete house cleaning this month before holi, Sound sleep No Back pain during menses this month	Gels 200 1 dose on 15 days Sl Bd 4-0-4-0 For 1 month
5	17.3.2024	Patient feels no pain in arms and forearms this month, Sound sleep No Back pain during menses this month VAS-2, Hb- 10.1 gm/dl	SL 1 dose on every 15 days Sl Bd 4-0-4-0 For 1 month

Result: The patient showed significant improvement, with a 50% reduction in pain intensity (VAS decreased from 6 to 3). Hemoglobin levels increased from 7.2 g/dl to 10.1 g/dl over a period of 6 months. Overall well-being improved, and the patient regained the ability to perform daily household activities with ease.

Case 3:

MRS G.R. 30 years, female patient presented with pain in fingers, arms, shoulders, and hands since 7-8 years, which has aggravated in the last 6 months. The pain is located in the right scapula, extending to the fingers, and is described as coldness, like ice, in the painful area. Pain worsens with touch, motion; Pain ameliorated with pressure. Irritability due to pain is the concomitant.

Past History: Hepatitis B 7 years ago, treated with allopathic medicine and supportive care. Hepatomegaly diagnosed 1 year ago, with increasing abdominal pain and discomfort.

Family History: Father: Sick Cell positive (Died due to multi-organ failure); Mother: Sick Cell positive (Died from sickle cell crisis); Brother: Sick Cell positive (Alive); Daughter: Sick Cell positive (Alive).

Physical Generals: appetite decreased, alternate diarrhoea and constipation occurs. Aversion to plain milk. Thermally hot person, likes loose clothes, dislike covering during sleep. Moderate perspiration. Mostly sound sleep, though disturbed sometimes due to pain. Regular menses, with 4 days of profuse, fluid, red flow.

Life-Space: A 30-year-old woman from Kanwat village with Sick Cell Disease (SCD) had a joyful childhood and married at 22. She and her husband, a farmer, had a daughter who was also diagnosed with SCD. After this, they decided not to have more children. Seven years ago, she was diagnosed with hepatitis B, requiring hospitalization and ongoing treatment. Since then, she's been prone to frequent infections. About a year ago, she developed colicky abdominal pain and was diagnosed with hepatomegaly, which has worsened over time, affecting her ability to manage daily tasks. Her husband, noticing her struggle, suggested exploring homeopathic treatment.

Patient's Mental State: Irritable easily due to pain and discomfort. Prefers not to discuss personal matters, as she is introverted.

Physical Examination: Pulse: 80 beats/min; BP: 110/70 mm Hg; RR: 16/min; Temperature: 98.6°F; VAS:6

General Examination: Anaemic, thin appearance, pale nails and skin with dull consciousness. Whitish yellow coating on tongue with imprint of teeth

Investigation: Sickling Test: Positive. Hemoglobin (Hb): 8.0 gm/dl

Totality of Symptoms:

1. Irritable due to pain⁺²
2. Alternate diarrhoea and contipation⁺²
3. Tongue whitish yellow coated with imprint of teeth⁺³
4. Pain in right scapula extending to fingers⁺²
 - <touch⁺³
 - <motion⁺³
 - >pressure⁺³
5. Pain in fingers Coldness of painful with⁺³

Prescription: Chelidonium majus 200C in morning on every 15 days followed by placebo in 40 number globules 4 in morning and 4 in night for 1 month. It was prescribed on October 18, 2023 and advise to take nutritious food and meditation.



1. Clipboard 1

1. MIND - IRRITABILITY (851) 1	1	3	3	2	3	1	2	1	3	3	3	3	3	2	3
2. BACK - DORSAL REGION; complaints of - Scapula... (12) 1	1	1	1					1							
3. BACK - PAIN - Dorsal region - motion - agg. (12) 1	2	1			1										
4. RECTUM - DIARRHEA - alternating with - constip... (161) 1	3	2	2	1	1	2	1	1	2	1	3	2	1	1	2
5. GENERALS - PRESSURE - amel. (178) 1	2	3	1	1	1	2	1	1	3	1	1	1	2	3	2
6. GENERALS - TOUCH - agg. (284) 1	2	3	3	2	2	1	2	2	2	3	3	2	3	3	1
7. EXTREMITIES - COLDNESS - Fingers - Tips - icy c... (12) 1	1			1		1	1								
8. EXTREMITIES - COLDNESS - Upper limbs (121) 1	1	1	1	2	1	1	1	1	3	3	1	3	2	1	2

Follow Up:

Sr no.	Date	Complaints	Prescription
1	19.11.23	Pain in back reduce slightly, able to do little motion, with touch there is now no pain; irritability present as it is; alternate diarrhoea and constipation remains same; pain in fingers remains same, but fingers start to become warmer towards normal; tongue becomes pinkish white	Cheli 200 1 dose on every 15 days; SI Bd 4-0-4-0 for 1 month
2	22.12.23	Pain in back reduce markedly, able to do motion without pain most of times; irritability present as it is; alternate diarrhoea and constipation becomes only 2 times in month for 2 days; pain in fingers reduces same, fingers feels to be at normal temperature; tongue becomes pink; VAS-5, Hb level 8.6 gm/dl	Cheli 200 1 dose on every 15 days SI Bd 4-0-4-0 1 month
3	20.1.24	Pain in back occurs only 2 days in this month, able to do motion without pain on other days; irritability reduces as pain reduces greatly; normal passes of stool; no pain in fingers; tongue becomes pink	Cheli 200 1 dose on every 15 days SI Bd 4-0-4-0 1 month
4	18.2.24	no any Pain in back in this month, able to do motion without pain; no irritability; normal passes of stool no pain in fingers; tongue becomes pink, VAS-4	Cheli 200 1 dose on every 15 days; SI Bd 4-0-4-0 for 1 month
5	23.3.24	Patient feels better there is no Pain in back and upper limbs; no irritability; normal passes of stool, VAS-2, Hb level 10.8 gm/dl	SL 1 dose on very 15 days; SI Bd 4-0-4-0 for 1 month

Result: The patient showed a 40% improvement in VAS, reducing from 6 to 2. Hemoglobin levels increased from 8.0 gm/dl to 10.8 gm/dl. Overall well-being improved, with better pain management, less irritability, and enhanced functioning.

Case 4:

MRS K.R. (25 years, female), a known case of sickle cell disease, presented with complaints of chronic pain in her calves and soles, along with offensive, icy cold foot sweat, which had become more pronounced in the last 3 months. The pain is cramping in nature and aggravated by uncovering, with marked cold sensations in the affected areas. The patient also experiences a strong desire for warmth and a preference for warm clothing, even in summer.

Family history: Father: Alive and have Sickle Cell Trait; Mother: died due to Sickle Cell crisis; Sister: Alive but have Sickle Cell disease positive.

Physical Generals: Appetite: Adequate (2-3 roti, dal, chawal, sabji per meal), Excessive thirst; Regular morning defecation without strain; Desires: Sweet; Aversion: Warm food; Highly chilly person, desires warmth in all seasons, dislikes drafts; Sound sleep; Profuse Perspiration with Cold feet sweat. Regular menses at 30 days, low hemoglobin during pregnancy which treated with blood transfusions.

Life-Space: Mrs. K R, a 25-year-old housewife from Kanwat village, lives with her husband, a teacher, and their son. She has a family history of sickle cell disease, with her mother passing away from a sickle cell crisis.

During her pregnancy, she suffered severe anemia and needed multiple blood transfusions. Chronic calf pain, worsened by her sickle cell condition and household duties, is another ongoing issue. She is sensitive to sensory stimuli, especially sounds, smells, and physical sensations, and prefers warmth over cold. Her strong aversion to cold and sensitivity to various impressions is important in her treatment plan.

Physical Examination: Pulse: 75 bpm, BP: 120/80 mm Hg, RR: 18/min, Temperature: 98.6°F, VAS-4; Pale skin, good nutrition

Investigations: Sickling Test: Positive, Hemoglobin (Hb): 8.3 gm/dl

Totality of symptoms:

1. Obstinate++
2. Sensitive to all impression++
3. Offensive sweat+++
4. Icy cold sweat on feet+++
5. Aversion to Warm food++
6. Cramping type of pain in calves
<uncovering++
>wrapping up+++
7. Pain in soles as if soreness

Prescription: Silicea 200C in morning on every 15 days followed by placebo in 40 number globules 4 in morning and 4 in night for 1 month. It was prescribed on October 6, 2023 and advise to take nutritious food and meditation.



	nux-v.	sil.	lyc.	phos.	ars.	dnin.	sulph.	hep.	nit-ac.	lach.	merc.	rt
	1	2	3	4	5	6	7	8	9	10	11	12
	7	7	7	7	7	7	6	6	6	6	6	6
	16	16	15	14	13	11	14	13	12	11	11	11
1. Clipboard 1	x											
1. MIND - OBSTINATE (214)	1	3	2	2	1	2	2	2	2	1	1	1
2. MIND - SENSITIVE - external impressions, to all (99)	1	2	1	1	3	1	1	1	2	1		
3. PERSPIRATION - ODOR - offensive (178)	1	3	3	3	2	2	1	3	3	2	3	2
4. PERSPIRATION - COLD (255)	1	2	1	3	2	3	3	2	3	1	2	1
5. EXTREMITIES - PAIN - sore (188)	1	3	3	2	2	1	2	3	2	3	2	3
6. EXTREMITIES - COLDNESS - Feet - icy coldness (129)	1	1	3	2	3	1	1	2	2	1	3	2
7. EXTREMITIES - PAIN - warm - applications - amel. (45)	1	2	3	2	1	3	1	2			1	3

Follow Up:

Sr no.	Date	Complaints	Prescription
1	7.11.23	Cramping type of pain calves reduce slightly, Soreness of soles remains same Offensive foot sweat consistently present	Sil 200 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
2	8.12.23	Cramping type of pain calves reduce markedly; Soreness of soles reduces slightly; Offensiveness foot sweat decreases; VAS- 3	Sil 200 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
3	10.1.24	Cramping type of pain calves occurs only when patient walks for long distance; Soreness of soles reduces markedly; Offensiveness of foot sweat decreases greatly, with less perspiration; VAS- 2, Hb level 9.6 gm/dl	Sil 200 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
4	15.2.24	No any type of pain calves; Soreness of soles goes completely; Offensiveness of foot sweat goes away with much less perspiration	SL 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
5	20.3.24	Patient feels better; No any type of pain calves; Soreness of soles goes completely; Offensiveness of foot sweat goes away completely with much less perspiration; VAS- 1, Hb level 10.7 gm/dl	SL 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month

Result: The patient showed significant improvement, with pain levels reducing from a rating of 4 to 1 by the last follow-up, reflecting a 30% improvement in pain relief. Additionally, the patient's hemoglobin level increased from 8.3 gm/dl to 10.7 gm/dl, indicating better overall health.

Case 5:

MR R.V. (31 years, male) patient presented with generalized weakness and trembling of the body for the past 2.5 years, which worsened with physical exertion and change in weather. His symptoms slightly improved when lying on his right side. There were no significant associated complaints.

Family history: Father: died due to multi organo failure with SCD positive; Mother: SCD trait, alive; Brother: SCD positive, alive; Daughter: SCD positive, alive; Wife: SCD positive, alive

Physical general: Lean, thin; Pulse 75/min, BP 120/80 mm Hg, Resp Rate 17/min, Temp 98.6°F; Pale skin & Nails; steady, Mild pain in lower limbs on movement


Mental State: Anxiety and fear when alone, with a dread of downward motion, need for companionship and a fear of death when left alone.

Investigation: Sickling Test: Positive; Hemoglobin Level: 9.60 gm/dl

Totality of symptoms:

1. Fastidious+++
2. Dreas of downward +++
3. Death when alone++
4. Desire for icy cold water++
5. Weakness & trembling of body++
6. Constant feeling of tiredness++
7. Weakness and Pain <exertion physical+++
>lying on right side++
<change of weather++

Prescription: Phosphorus 200C in morning on every 15 days followed by placebo in 40 number globules 4 in morning and 4 in night for 1 month. It was prescribed on October 10, 2023 and advise to take nutritious food and meditation.



	phos.	ars.	sil.	calc.	nat-c.	nat-m.	puls.	sep.	sulph.	kali-c.	lyc.	tub.	st.
1	2	3	4	5	6	7	8	9	10	11	12	13	
7	7	7	7	6	6	6	6	6	6	6	6	6	
17	15	13	12	12	12	12	12	12	11	11	11	10	

1. Clipboard 1

1. MIND - FASTIDIOUS
(180) 1

2. MIND - FEAR - downward motion, of
(15) 1

3. MIND - FEAR - death, of - alone, when
(17) 1

4. GENERALS - FOOD and DRINKS - cold drink, cold...
(335) 1

5. GENERALS - WEARINESS
(461) 1

6. GENERALS - WEATHER - change of weather - agg.
(127) 1

7. GENERALS - LYING - side; on - right - amel.
(48) 1

8. GENERALS - EXERTION; physical - agg.
(247) 1

1	2	3	4	5	6	7	8	9	10	11	12	13
1	3	1	1	1	2	1	1	1	2	1		1
		1	1									
2	3							2			1	
3	3	1	2	2	1	1	2	1		2	1	1
3	1	3	2	2	3	3	3	3	1	3	3	2
3	1	3	2	2	1	2	1	2	2	1	3	1
3	1	2	1	2	2	3	2	2	2	2	1	2
2	3	2	3	3	3	2	3	3	2	2	2	3

Follow Up:

Sr no.	Date	Complaints	Prescription
1.	12.11.2023	Weakness and trembling of body slightly reduce in intensity; Physical work aggravates the pain; Tiredness feeling constantly remain as it is.	Phos 200 1 dose on every 15 days; SL Bd 4-0-4-0; for 1 month
2.	15.12.2023	Weakness reduces, patient feels good mentally; Trembling of body remains same; Physical work aggravates the patient the condition; VAS- 4	Phos 200 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
3.	11.1.2024	Weakness reduces markedly, patient feels good mentally; Trembling of body reduces; Patient can do Physical work as it not aggravates the patient the condition; VAS- 4, Hb- 10.80 gm/dl	Phos 200 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
4.	15.2.2024	Patients feels energetic now, Trembling reduces markedly, patient feels good mentally as well as physically, Patient can do Physical work efficiently; VAS- 3	SL 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month

5.	18.3.2024	Patients feels energetic now, Trembling of body goes, 1-2 time hardly patient feels trembling of body in last 1 month, Patient feels good mentally as well as physically, Patient can do Physical work without any trouble. VAS- 2, Hb- 12.10 gm/dl	SL 1 dose on every 15 days; SL Bd 4-0-4-0 for 1 month
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Result: The patient's condition improved significantly, with VAS pain reducing from 5 to 2, a 30% improvement. Weakness, trembling, and tiredness that lasted 2.5 years were greatly relieved, allowing the patient to resume daily activities without major discomfort.

Discussion

The findings from this case series suggest that constitutional homeopathic remedies may play a role in symptom management for SCD. The reduction in VAS scores indicates an improvement in pain and overall quality of life. These results align with homeopathic principles of individualized treatment.

Conclusion

This case series highlights the potential benefits of constitutional homeopathic treatment in managing symptoms of SCD. Marked improvements in pain and quality of life were observed, supporting the need for further research in this field.

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