

Effectiveness of Homoeopathy in Urinary Tract Infection: A Case Report

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ABSTRACT

Uncomplicated urinary tract infections (UTIs) are among the most common bacterial infections encountered in clinical practice. They primarily affect the lower urinary tract, involving the bladder and associated structures. Unlike complicated UTIs, uncomplicated cases occur in otherwise healthy individuals with no structural abnormalities of the urinary tract or significant comorbidities.

Women are usually more susceptible to this infection and has a higher prevalence compared to the men. Poor personal hygiene, pregnancy, menopause, and the close anatomical relationship of the female urethra and the anus are some of the risk factors responsible for high prevalence of UTI. It has a substantial impact on quality of life of females. The incidence of UTI is 0.5 to 0.7 episodes per person per year in females of whom 25% of them have recurrences

Worldwide estimated prevalence is 0.7%. The regional burden of these conditions is estimated to be highest in Asia. (19.7-24.4%). The prevalence of UTI varies from 21.8 to 31.3% in various parts of India. Out of this, Female 66.78%, Male 33.22% Female: Male ratio- 1:2. Female of child bearing age are more prone Common allopathic treatment antibiotics are recommended for all cases with 3 days treatment norm. trimethoprim or nitrofurantoin are first choice of drug.

High recurrence and antibiotic resistance of bacteria's causing UTI is also creating burden on economy worldwide.

Most often this infection is usually neglected but it can involve kidney which can be more dangerous. Despite advancements in conventional medical treatments, some patients may experience limitations, adverse effects, or inadequate responses. The study aims to identify whether homeopathic intervention can offer a viable approach to address the limitations of conventional treatments.

Homeopathy is known for its holistic approach to patient care, considering individual symptoms, lifestyle, and emotional well-being. Examining the

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holistic aspects of homeopathic treatments may contribute to a more comprehensive understanding of managing uncomplicated lower urinary tract infection.

PRELIMINARY DATA

- Date: 16-08-2024
- Name of patient: Mrs. DVP
- Age/sex: 35/female
- Religion/caste :hindu
- Family size:4
- Education: B. COM
- Occupation: Housewife
- Diet: vegetarian
- Address- Rajkot

PRESENTING COMPLAINT:

Location	Sensation	Modalities	Concomitant
Abdomen	➤ Continuous pain in lower abdomen	> Bending forward	Constant low grade fever (99.2°F)
Lower abdomen	➤ Bearing down sensation	> Constant light pressure	
O- sudden	➤ Nausea and vomiting after eating	< Eating	Burning in urination sometimes
D – 2 days	➤ Decrease appetite due to nausea.	<Walking	<Morning
P- fast		<Squatting while urination	< Holding urine for some time

PHYSICAL GENERALS:

Appetite-decreased due to nausea

Desire- sour food

Thirst-3 lit/day. In little intervals

Perspiration –profuse, more on face, back.

Stool-dark brown, constipated occasionally

Urine-7 -8 times /day

Menstrual function- regular, dark red in colour, offensive, vomiting before menses

Thermal- chilly patient

Sleep- disturbed,4 hours, left sided more

MENTAL GENERALS

She is very irritable person. Doesn't answer much to question.

Gets angry when asked again and again

Fear that she has some big disease due to abdomen pain.

Doesn't like going out much. Likes solitude.

Loves to read philosophical books and listen music(romantic songs)

Hates when someone meddles in her work. Fights with mother in law due to it, but is sad as husband doesn't side with her, so now she keeps quiet.

Fastidious cannot delay her work.

Past history:

typhoid at age of 11 years

Family history:

Mother- DM

Physical examination

Weight- 55 kgs

Height- 5'4"

BMI – 20.8

Skin-oily,greasy

BP-112/74 mm-Hg

Pulse- 82/min

Differential diagnosis

Urinary tract Infection, renal stone, gastritis

INVESTIGATION

Urine routine test

Pus cells 10-12 cells

Urine light cloudy

No RBC seen.

DIAGNOSIS- Urinary tract Infection

TOTALITY OF SYMPTOMS

1. MIND – ANGER – reproaches; from
2. MIND – ANSWERING aversion to answer
3. MIND – COMPANY – aversion to
4. MIND – FASTIDIOUS
5. MIND – FEAR – disease, of impending
6. MIND – IRRITABILITY – questioned, when
7. MIND – QUARRELSOME – family, with her
8. STOMACH – NAUSEA – eating – afte agg.
9. ABDOMEN – PAINdragging, bearing down
10. ABDOMEN – PAIN Lower abdomen
11. URINE – BURNING
12. GENERALS – FOOD and DRINKS – sour food – desire

REPERTORISATION

MIND	ABDOMEN																																				
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SELECTION OF MEDICINE

IGNATIA – 10/15

NUX VOMICA – 9/24

PULSATILLA – 9/17

As IGNATIA covered most symptoms, IGNATIA was selected

SELECTION OF POTENCY AMD REPETITION

Based on susceptibility and individualism of the patient.

As both mental and physical symptoms were covered by IGNATIA a medium potency(200C) was selected.

SELECTION OF REPETITION

4 pills 6 hourly FOR 3 Days

PRESCRIPTION

IGNATIA 200 4 pills 6 hourly FOR 3 Days

AUXILIARY TREATMENT

Drink plenty of fluid.

Maintain proper hygiene.

FOLLOW UP

DATE	SYMPTOMS	PRESCRIPTION
20-08-24	Pain in abdomen slightly better. Nausea as it is. Burning as it is. Fever not present temp. 97.6°F	Rx, IGNATIA 200 4 pills 6 hourly For 2 days
23-08-24	Increased appetite Nausea not present. Burning relieved 50% Pain better than before	Rx SL TDS FOR 3 DAYS
26-08-2024	All complaints relieved. Can eat better Nausea absent. Pain relieved Urine routine shows 1 – 2 pus cells	Rx SL TDS FOR 2 days
29-08-2024	Better in all complaints	No medicine was administered