



JALA HOMOEEO VISION



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Female Disorder

Krushik Sheladiya

(Final Year BHMS)

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Homoeopathy can offer good health to women in all stage of their lives from infancy through old age. It is beneficial for the full range of emotional, mental and physical problems that a woman is likely to experience, and can help her through the transitional and developmental milestones of her life.

During the teen years homoeopathy can help with the hormonal changes of puberty and the acne that often appears at this time, but primarily it can assist with the emotional upheavals, which frequently occur as little girls make the transition to womanhood.

Later in life when a woman gets pregnant, or has a hard time conceiving (homoeopathy can help with problems of infertility), it can assist with difficulties frequently encountered, such as morning sickness and depression. By treating the mother during pregnancy and making her as healthy as she can be, we can ensure that the baby will be born healthy and free of inherited diseases. By treating throughout pregnancy, we also assist the mother to go through childbirth safely and joyfully.

The homoeopathy healing art is beneficial in helping women overcome the effects of hormonal shock to the system, can occur after a difficult birth, abortion, hysterectomy, and the use of birth control pills.

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HOMOEOPATHY FOR WOMEN HEALTH

Homoeopathy can be used to treat many common physical and emotional symptoms associated with menstrual cycles, hormone imbalances, and pre-menstrual syndrome. Because of its emphasis on treating the whole patient on a physical, mental and emotional level, it is ideally suited for homoeopathic remedies by stimulating the body's healing system to regain a sense of balance, problems involving hormonal imbalances respond well to homoeopathic treatmentHomoeopathy

BENEFIT

Homoeopathic remedies are completely non-toxic and without side-effects. Hence, they can safely be ingested during pregnancy when other types of medicines cannot be freely prescribed. Further, when the mother is homeopathically treated during pregnancy, the foetus is also being treated. Since treatment is constitutional and not symptomatic, both mother and child will be healthier, ensuring an Easier pregnancy and Benifit Ideally, both parents should be treated before the baby is conceived as remedies act very deeply, right down to the genetic level. For example, a woman who has two children with cleft lips will be able to have a third normal child if given the correct homoeopathic treatment before conceiving the child.

Regarding post-partum depression, much misery can be alleviated by homoeopathic treatment; remedies work quickly and effectively in cases.

Homoeopathy offers a safe and effective solution to the uncomfortable symptoms of menopause compared to HRT which has been found to cause many side effects ranging from nausea and varicose veins to strokes and cancer.

PULSATILLA – A different approach of learning it through reviewing literature

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ABSTRACT

The aim of this article is to arouse research aptitude among students of Homoeopathy so that scientific & documental backbone of Homoeopathic science can be upgraded in view of present time. Dr. Hahnemann introduced this in Homoeopathic practice in 1805, the genus *Pulsatilla* (Ranunculaceae, Buttercup family) comprises about 70 species, an exhaustive survey of literature revealed that sporadic information is available only on 15 species, only 11 species of *Pulsatilla* have been partially investigated for their phytoconstituents. Various species of *Pulsatilla* has traditional as well as alternative & complimentary medicinal uses. In Homoeopathic literature many claims are present for its utilisation to help human being but where is that documentation which creates confidence in budding Homoeopaths for its use in clinical practice?

KEY WORDS

Wind flower, *Pulsatilla*, Phytoconstituents, *Pulsatilla nigricans*, Ethnopharmacology, Homoeopathic indications, scope of research both at student level & at well organised level.

INTRODUCTION

Botanical name – *Pulsatilla nigricans* Linn.

Member of family Ranunculaceae,

Synonyms – *Anemone pratensis* L., *Pulsatilla pratensis* Mill., *P. vulgaris* Mill.,

common name – English- wind flower; French- Pulsatille; German- Kuchenschelle.

Hahnemann introduced this in Homoeopathic practice in 1805. Allen's Encyclop Mat. Med. Vol. VIII,20. Whole plant is used to prepare mother tincture under old method class III.

MAIN PART

Hahnemann introduced *Pulsatilla* in Homoeopathic practice in 1805. It is well known as predominantly a female medicine with its usage in children & males too in our day to day practice. Lot of information is available in our materia medica for use of this medicine, some important indications for its use can be quoted as follows :

1. Loving & lovable personality. Looks beautiful, charming & attractive. Highly emotional, gentle, soft, friendly, affectionate, talkative, kind hearted, obedient, adjust to any surrounding or situation like a river. Five main characteristics are sweetness, dependence, friendliness, flexibility & gentle emotionalism.
2. Extreme of both pleasure & pain. Weeps & tears come easily for happiness as well as sadness. Sensitive to reprimands & rudeness. Has to share all her/his feelings or problems with all close people (family members, friends, relatives, colleagues etc.) & after sharing feels happy or relieved of her/his sufferings.
3. Changeable & contradictory in thoughts, becomes highly irritable & angry. Changeability of moods & symptoms.

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3. Changeable & contradictory in thoughts, becomes highly irritable & angry. Changeability of moods & symptoms.
4. Timid, shy, indecisive, submissive, dependence on others, easily discouraged. Forsaken feeling. When she is unable to get what she wants, she develops deep feeling of being neglected by loved one. Always needs the care, affection, appreciation, sympathy & consolation by the loved one & this relieve all their suffering/discomfort. Aversion to opposite sex & marriage, feels it is sin to think of or indulge in sex but it doesn't mean that she does not have desire for sex – it is out of various fears about the life after marriage.
She will be an excellent wife in all aspect if her husband is caring & loving.
5. Strong belief of God, follows religious rituals, prayers, pooja, fasting etc. & some may develop religious fanaticism.
6. Fear of strangers, opposite sex, being alone, darkness, high places, narrow places, closed rooms. Needs company of close or known people.
7. Thirstlessness.
8. Warm blooded, cannot tolerate heat, feels suffocation in closed rooms. Likes fresh & cool open air, comfortable by moving around slowly in cool fresh air.
9. Feels better by keeping head high with 2 or 3 pillows. Lies with hands on or under the head.
10. Thirstlessness, can remain without water for hours together. Crack in middle of lower lip. Toothache better by holding cold water in mouth. Better by cold application, cold food & drinks though not thirsty.
11. Aversion to fat food, warm food & drink. Dyspepsia with great tightness after meal; must loosen clothing. Pain in stomach an hour after eating. No two stools alike. Diarrhoea rumbling, watery; worse at night. Dysentery; mucus & blood with chilliness. Two or three normal stools daily.
12. Dry cough in evening & at night; must sit up in bed to get relief & loose cough in the morning with copious mucous expectoration. Expectoration bland, thick, bitter, greenish.
13. Urine – increased desire; worse when lying down. Involuntary micturition at night, while coughing or passing flatus.
14. Urticaria, after rich food, with diarrhoea, from delayed menses, worse undressing. Acne at puberty. Varicose veins.
15. Shifting/wandering pains hands, legs, hip joint or anywhere in the body. Numbness in legs when standing long time.
16. Preventive & curative for chickenpox & measles. Mumps with infection shifting to breast or testicles.
17. In female: amenorrhoea, suppressed menses from wet feet, nervous debility or chlorosis. Menses too late, scanty, thick, dark, clotted, changeable, intermittent. Leucorrhoea acrid, burning, creamy. Diarrhoea during or after menses.
18. In male: orchitis; pain from abdomen to testicles. Thick, yellow discharge from urethra, late stage of gonorrhoea. Stricture, urine passed only in drops & stream interrupted. Acute prostatitis.

Anti-anxiety activity studies of various extracts of Pulsatilla Nigricans Stoerck carried out by Sandeep Goyal, Suresh kumar, S.D. College of Pharmacy, Barnala, Punjab, India & published in international journal of pharmaceutical sciences & drug research 2010; 2(4); 291-293 states that phytochemical screening of methanolic extract showed presence of flavonoids, tannins & carbohydrates. Flavonoids have shown anti-anxiety activity in various studies. Further, the anxiolytic effect of flavonoids has been attributed to its effect on central nervous system & benzodiazepine receptors. Therefore, flavonoids of methanolic extract of P. nigricans may be responsible for the anti-anxiety activity.

A study carried out by Tayyeba Rehman, Saeed Ahmad from Department of BHMS, University college of Conventional Medicine, Faculty of Pharmacy & Alternative Medicine, The Islamia University of Bahawalpur, Department of Pharmacy, The Islamia University of Bahawalpur, Bahawalpur, Punjab, Pakistan on evaluation of antibacterial & antioxidant potential of some homoeopathic mother tinctures` published in Indian journal of Research in Homoeopathy, published by Wolters Kluwer – Medknow states that Pulsatilla contains flavonoids, tannins, carbohydrates, glucoside pulsatoside, triterpene saponins & steroids. Flavonoids & triterpenoids have marked antimicrobial activity. Antibacterial activity of Pulsatilla nigricans may be due to presence of flavonoids & triterpenoids. Moreover, a previous study showed that protoanemonin from Pulsatilla nigricans is the main constituent responsible for its antibacterial activity. It contains high content of flavonoids that might be responsible for its antioxidant activity.

A study carried out by Z.S.SAIFY, FOZIA NOOR, NOUSHEEN MUSHTAQ AND AHSANA DAR Department of Pharmaceutical chemistry, faculty of pharmacy, University of Karachi, HEJ Research Institute of Chemistry, University of Karachi, Pakistan on Assessment of Anemone Pulsatilla for some biological activities & published in Pakistan Journal of Pharmaceutical sciences, Vol. II(1), January 1998, pp 47-53 states that The drug Pulsatilla, a highly valuable modern curative is obtained from the whole herb of Anemone pulsatilla. Pulsatilla contains a glycoside ranunculin (Martindale). The fresh plant yields an acrid oily substance called, Oil of Anemone which has a burning peppery taste. This oily substance decomposes into Anemonin and Anemonic acid. Anemonin is a crystalline substance, tasteless and odourless when pure. Anemone pulsatilla virtually owns its biological actions to Anemonin. It is a powerful irritant and in overdoses cause violent gastroenteritis. The oil acts as a vesicant when applied to the skin. Anemonic acid seems to be inert. Anemonin may cause local inflammation and gangrene when subcutaneously injected, vomiting and purging when given internally.

The Anemone pulsatilla (ethanolic extract) is spasmolytic in action. The extract exhibited complete inhibition of the spontaneous activity of isolated rabbit jejunum in a dose of 600 µl. This inhibition is dose dependent and reversible. Anemone pulsatilla has long been used in traditional medicine as an antispasmodic. The present study lends credence to its use in diarrhoea. The traditional use of Anemone pulsatilla as a nervine and in the treatment of insomnia, tension and neuralgia calls for studies to determine its exact mode of action by estimating the changes in brain biogenic amines. Since this is a preliminary study, involving the determination of presence or absence of biological activity on scientific basis, the positive results have paved way for further studies and investigation of this herb as an effective phytochemical agent.

The Genus Pulsatilla : A Review by Suresh Kumar, Reecha Madaan, Asim Farooq, Anupam Sharma, S. D. College of Pharmacy, Barnala, Punjab, India, Panacea Biotec Limited, New Delhi, India, University Institute of Pharmaceutical Sciences, Panjab University, Chandigarh, India published in Pharmacognosy Reviews, Vol. 2, issue 3, Jan-Jun, 2008 states that The review includes 84 references on the genus Pulsatilla, and comprises ethnopharmacology, morphology, phytoconstituents, pharmacological reports, clinical study and adverse effects of

the prominent species of *Pulsatilla*. Triterpenoid saponins and flavonoids constitute major classes of phytoconstituents of the genus. A few species of this genus have medicinal value, among these, *P. nigricans* Stoeck. (family Ranunculaceae) has been traditionally used in the treatment of nervous disorders, and as a remedy for ovaritis, ovariangia and sexual debility. Despite a long tradition of use of some species, the genus has not been explored properly. In the concluding part, the future scope of *Pulsatilla* species, especially *P. nigricans*, has been emphasized with a view to isolate bioactive moieties which could be used for multifarious biological activities.

CONCLUSION

To carry out scientific and documented study of any of our Homoeopathic medicine is multifactorial work. We should take help of modern technology for analysing phytochemicals/ active biomolecules quantitatively as well as qualitatively present in the sample/ crude substance. Its biological action on living being i.e. on lower animals as well as healthy human being (probably widening drug proving), clinical application can be published & retested in unbiased way. This is huge task requiring financial assistance, trained research faculties & workable infrastructure with legal assistance & guidance. This does not mean we cannot do anything, as a student of the system we should not forget quote given by our master Dr Hahnemann "test everything, keep truth". The inclusion of Essentials of Pharmacology in syllabus by NCH may help us further in such study. From above information we may conclude that *Pulsatilla nigricans* has active biomolecules having anxiolytic action and can be compared with mental picture described in our literature, spasmolytic action can be compared with GIT & Respiratory disorders, antibacterial, anti-inflammatory & antioxidant action can be compared with leukorrhoeal discharge, respiratory infections, ear infections, ovaritis, vaginitis, prostatitis etc. but if will not BE A STUDENT, POSITIVE THINKER, A HARD WORKER, it would be simple escapism. It's time to contribute the system which gives honour to us. Who am I to explain utility of *Pulsatilla*? Starworts of Homoeopathy has described so nicely but if we will not dare to use it, will not carry out experiments & will not have experience of its use, it will remain on paper. I given idea to medical officers and some students of our college for such experiments, let hope for the better. Be positive with limitation of space we will continue in next issue. Your valuable inputs will help to grow together. Thanks to all known, unknown references. Here intension is to encourage new generation for a better education, training and research aptitude.

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ROLE AND BENEFITS OF YOGA IN PREMENSTRUAL SYNDROME\

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ABSTRACT : Yoga can be beneficial for managing premenstrual syndrome symptoms. It can help reduce physical discomfort, relieve stress, improve mood, and promote overall well-being.

KEYWORDS : Yoga, PMS, Psychoneuroendocrine factors, Hormonal imbalances.

ABBREVIATION : PMS- Premenstrual syndrome, CNS- Central nervous system

INTRODUCTION : Premenstrual syndrome (PMS) is a Psychoneuroendocrine disorder of unknown aetiology, often noticed just prior to menstruation. There is cyclic appearance of a large number of symptoms during the last 7-10 days of the menstrual cycle.

The exact cause is not known but the following hypotheses are postulated

(A) Alteration in the level of oestrogen and progesterone starting from the midluteal phase either there is altered oestrogen : progesterone ratio or diminished progesterone level

(B) Neuroendocrine factors :

- Serotonin: is an important neurotransmitter in the CNS. During the luteal phase decreased synthesis of serotonin is observed in women suffering from PMS
- Endorphins: the symptoms complex of PMS is thought to be due to the withdrawal of endorphins (neurotransmitter) from CNS during the luteal phase

(C) Psychological and psychosocial factors may be involved to produce behavioural changes

Sign and symptoms of PMS may be related to water retention such as abdominal bloating, Breast tenderness, swelling of the extremities, Weight gain. Or may related to neuropsychiatric symptoms like irritability, depression, mood swing forgetfulness, restlessness, increased appetite, tearfulness, anxiety, tension, confusion, and headache. Sometimes fatigue, dyspareunia, tiredness or other behavioural symptoms may also appear.

YOGA, ITS ROLE AND BENEFITS :

Yoga is a holistic Practice that originated in ancient India and has been practiced for thousands of years. It encompasses physical postures (Asana), breathing exercises (Pranayama), Meditation, and Relaxation techniques. The word "yoga" comes from the Sanskrit word "yuj," which means to unite or join, representing the Harmonious integration of the body, mind and spirit, and promotes normal hormonal secretion which results in several positive effects on various aspects of women's health, including the management and improvement of PMS. Here are some common benefits of practicing yoga for PMS

- Physical relaxation: Yoga incorporates gentle stretching, deep breathing, and relaxation techniques that help release physical tension and reduce muscle cramps, aches, and bloating associated with PMS.
- Hormonal balance: Certain yoga postures, such as inversions and forward bends, can help regulate hormone levels by stimulating the endocrine system. This can potentially alleviate mood swings, irritability, and other emotional symptoms of PMS.
- Stress reduction: PMS symptoms can be exacerbated by stress. Yoga promotes relaxation and allowing to manage stress more effectively and reduce its impact on your physical and emotional well-being during this time.

- Improved circulation: Yoga practices that incorporate gentle twists and inversions can enhance blood circulation in the pelvic region, reducing discomfort and relieving symptoms such as breast tenderness and cramping.
- Enhanced mood and emotional well-being: Yoga helps release endorphins, the "feel-good" hormones, which can improve mood and alleviate depression or anxiety associated with PMS.
- Better sleep: PMS symptoms often disrupt sleep patterns. Regular yoga practice can promote better sleep quality and help combat insomnia, ensuring that you rest adequately during this time.

SOME YOGA POSES AND TECHNIQUES THAT CAN BE HELPFUL FOR ALLEVIATING PMS SYMPTOMS

- Child's Pose (Balasana): Start on your hands and knees, then lower your hips back toward your heels, stretching your arms forward and resting your forehead on the mat. This pose helps relax the body and calm the mind.
- Cat-Cow Pose (Marjaryasana/Bitilasana): Begin on your hands and knees, and alternate between arching your back upward (cow pose) and rounding your back (cat pose). This movement can help relieve lower back pain and menstrual cramps.
- Supine Twist (Supta Matsyendrasana): Lie on your back and hug your knees to your chest. Extend your arms out to the sides and lower both knees to one side, while keeping your shoulders grounded. This pose helps release tension in the lower back and abdomen.
- Bridge Pose (Setu Bandhasana): Lie on your back with your knees bent and feet flat on the floor. Lift your hips off the ground while pressing your arms and shoulders into the mat. Bridge pose can help alleviate fatigue, improve circulation, and relieve menstrual discomfort.
- Legs up the Wall Pose (Viparita Karani): Sit sideways against a wall with your hips touching the wall. Swing your legs up the wall as you lie down on your back. Your body should form an L-shape with your legs resting against the wall. Relax your arms by your sides, close your eyes, and focus on your breath. This pose helps improve circulation, reduces swelling in the legs, and promotes relaxation

CONCLUSION :

By engaging in regular yoga practice, individuals with PMS may experience reduced pain and discomfort associated with menstrual cramps, decreased severity of mood swings, improved emotional well-being, reduced anxiety and stress levels, enhanced relaxation and better sleep patterns, and increased overall quality of life during the menstrual cycle..

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FIBROID CONFLICT.....

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If female has fibroid in uterus, then conflict with –

Ovary /Uterus related pathologies indicates prolong worry about her children.

Uterine fibroid – Related to Emotional aspect.

Pathology conflict –

1. Anterior wall – Related to daughter

2. Posterior wall – Related to son

3. Fundus – Mixed

4. Cervix – Related to Husband

Bulky uterus - uterine fibroids occurs only when there is problem with children and husband.

Posterior wall uterine fibroids occur when there is problem with son – as it is nearer to spine son is support for mother so when there is problem with son posterior wall fibroids get developed.

Anterior wall fibroids occur when there is problem with daughter as it is away from spine.

When there is problem with husband ovarian and cervix problem occur. So reproductive organ problem in both male and female only related with children /husband /wife with its emotional aspects not related to any others.

When there is a nun or spinster due to suppression of feeling of not husband or child. There is chance of getting these related problems, even emotional pathologies of mammary glands related anxiety with husband and children not with others.

ROLE OF HOMOEOPATHY IN MANAGEMENT OF LEIOMYOMA

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ABSTRACT

Leiomyoma is the benign tumor of smooth muscles of uterus. Its etiology is unknown but it has few risk factors. It mostly presents with menstrual disturbance, pain, infertility, abortion or one of the complication. Many homoeopathic medicines can be given for the treatment of the said disease with their different indications.

INTRODUCTION

Leiomyoma is a benign neoplasm of the muscular wall of the uterus composed primarily of smooth muscle. They are the most common pelvic tumors. Leiomyomas, or fibroids, are the most common benign tumors of the uterus. The incidence of fibroid in literature ranges between 25% and 50%. In autopsy studies, leiomyomas of the uterus have been found in up to 77% of women. Exact etiology of the disease is not known, but the probable risk factors are nulliparity, obesity, oral contraceptive pills positive family history. Fibroids can be classified into Intramural (60-70%), fibroid (20%) and submucosal (10-15%). [1]

SIGNS AND SYMPTOMS

Leiomyoma of uterine fibroid may present with different symptoms depending upon the type of fibroid. Most common presentation is with menstrual disturbances like menorrhagia, dysmenorrhoea: pressure symptoms especially nervous pressure symptoms like backache: frequency/retention/difficulty in micturition: constipation/ tenesmus/difficulty in defecation: varicosity/edema: severe spasmodic agonizing pain or fibroids with malignant changes. It may lead to infertility or spontaneous abortions.[1]

HOMOEOPATHIC MANAGEMENT

According to Synthesis repertory under the Rubric "Female Genitalia. Tumors- Uterus-myoma" many medicines can be given for fibroid of uterus among which top medicines are Calcarea carbonica, Calcarea fluorica, Phosphorus and Silicea. Other important medicines which are important as regard to fibroid of uterus are Apis Mellifica, Arnica Montana, Aurum Iodatum, Aurum Muriaticum Natronatum, Calcarea Iodatum, Calcarea Sulphuricus, Calcarea Phosphorica, Calendula Officinalis, Conium Maculatum, Hydrocotyl Asiatica, Hydrastininum Muriaticum, Iodum, Kali Bichromicum, Kalium Carbonicum, Kalium Iodatum, Lachesis Mutus, Ledum Palustre, Mercurius Corrosivus, Secale Cornutum. [2]

Few of these medicines which are commonly used clinically are described below :

1. Aurum Muriaticum Natronatum -Indurated cervix. Coldness in abdomen. metritis, uterus fills up the whole pelvis. leucorrhoea with spasmodic contraction of vagina, ovariandropsy. [3]
2. Fraxinus Americana -Enlargement of uterus. Fibrous growth and prolapse uterine tumors with bearing down sensations. cramps in feet watery non-irritating leucorrhoea. dysmenorrhoea. Worse afternoon and night.[3]
3. Trillium Pendulum-Haemorrhages from fibroid with prolapse. Sensation as through the hips and back were falling to pieces, better tight bandages, bearing down sensation. Leucorrhoea copious yellow, Stringy. [3]

4. Medorrhinum-Sycotic warts in the genitals, offensive, profuse, dark, clotted. stains difficult to wash out, sensitive spot near os uteri. Leucorrhoea thin acrid. Excoriating, fishy odor. sterility, metrorrhagia, complaint worse from daylight to sunset. [3]
5. Ustilago Maydis -Flabby condition of uterus, vicarious menstruation, uterus hypertrophied, cervix bleeds easily, profuse menses after miscarriage Bright red bleeding, partlyclotted. Oozing of dark blood, clotted."[3]
6. Calcarea carbonica Fibroids in menopause with heavy bleeding. Menses milky too early, too profuse, too long with vertigo. Increased sweat around the external genitals. Uterine polypi. Complaints aggravate during full moon. [3]
7. Phosphorus-Fibroid with red fresh heavy uterine bleeding. Slight hemorrhage from uterus between period. Menses too early and scanty. Notprofuse, but last too long. Weeps before menses, suppuration of mammae burning, watery offensive discharge. [3]

CONCLUSION

Uterine fibroid is increasingly becoming common nowadays as its treatment is surgical, patients prefer to try other alternative or complementary therapies for its cure. Homoeopathy is the second most common mode of treatment in India and many homoeopathic medicines are available for its treatment of leiomyoma. Few common medicines are mentioned above with their therapeutic indications which can be utilised for quick selection of similimum.

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How Low Hb affects Woman's Health

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A Healthy Woman make a Healthy family and health of family is wealth of society. Woman's health is an important social determinant of health. Prioritizing women's health helps achievement of the 4th and 5th goals of Millennium Development Program.

Health of women is also affect the economic status of country. Health deterioration is start with low Hb in women.

Anaemia is associated with poor cognitive and motor development in children, and work capacity in adults especially in women, influencing country economic development.

Among pregnant women, iron deficiency anaemia is also associated with adverse reproductive outcomes such as preterm delivery, low-birth-weight infants, and decreased iron stores for the baby, which may lead to impaired development.

Failure to reduce anaemia may result in millions of women experiencing impaired health and quality of life, and may impair children's development and learning. Anaemia is an indicator of both poor nutrition and poor health.

Iron-deficiency anaemia is the most common type of anaemia across the world. It is caused by the lack of red blood cells or haemoglobin. Women are especially susceptible to iron-deficiency anaemia for the simple reason that they lose blood every month during their menstrual cycle.

Low Hb is also indicates Malnutrition which is seriously affect growth of body. In this compromised condition health is deteriorate with low immunity. This may cause many kind of health problems.

Who are in the higher-risk group?

While all women are at risk of being anaemic during pregnancy, certain groups are at an increased risk. Let's take a look at them:

- Women who are pregnant with more than one baby.
- Women who have back-to-back pregnancies.
- Those who experience a severe form of morning sickness and vomit a lot.
- Pregnant teenagers.
- Those who didn't take sufficient amount of foods which are rich in iron.
- Those who already have anaemia.

Above this condition is favourable for low Hb, and other than this many female faces Iron deficiency anaemia which is 40% contribute in all types of anaemia. Once anaemia is developed and not correct as soon as possible that may cause low immunity and this result in health deviation.

Following symptoms may appear as alarming signs of health deterioration.

- Fatigue (extreme tiredness; can be mild to severe)
- Difficulty breathing; being short of breath
- Rapid heart rate (fast heartbeat, even if you are sitting still)
- Pale (lighter than normal coloured) skin
- Lips, gums, lining of the eyelids, nail beds, and palms are less pink than usual
- Feeling cold
- Confusion or loss of concentration
- Dizziness or fainting.

Women and Anaemia

The most common type of anaemia worldwide is iron deficiency anaemia, which is caused by a shortage of iron. Women are especially likely to develop this type of anaemia for several reasons. First, women aged 12 to 49 lose blood approximately once a month during their periods. Iron is needed to make the new blood that replaces the blood lost with each menstrual period. The risk of anaemia is higher among women with periods that are especially long or include very heavy bleeding. Some women also lose iron from uterine fibroids (non-cancerous growths in the womb) that bleed slowly, or from bleeding caused by using certain intrauterine devices (IUDs) for birth control.

Second, women need extra iron during pregnancy for the proper development of their babies. In fact, pregnant women need 50 percent more iron than usual (27 mg per day instead of the usual 18 mg per day). Women also lose blood during childbirth. It is important for women who are pregnant or plan to become pregnant to have their iron levels checked and to tell their health care providers about any symptoms of anemia. Prenatal vitamins contain iron and can help prevent low iron levels and pregnancy-related anemia.

Low Hb affects the cellular growth and may cause functional and physiological impairment of the body. Because of Hb is principle component who carry oxygen in body, and oxygen is very necessary for cellular metabolism. Low Hb cause low Oxygen concentration that may cause metabolism defect which is lead in cellular defect results in health deterioration.

Overall as a medico our prime duty to awake for low Hb alarming signs and symptoms. Don't take lightly and give appropriate treatment and nourishment with remove the maintaining cause of anaemia.

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Let's know how stress causes PCOS

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ABSTRACT

Stress is not itself considered as a direct cause of PCOS, but it can be the major cause of PCOS. Majorly any kind of stress, can easily disturb PNEI (psycho neuro endocrine immunology axis) which can lead to PCOS.

KEYWORD

PCOS, hormonal imbalance, depression, insulin resistance, amenorrhea, polycystic ovaries, hirsutism, infertility.

INTRODUCTION

Ovaries are small, oval-shaped, paired female sex glands, located on either side of uterus. It is covered by single layer of germinal epithelium. Cortex part of ovary consists of numerous follicular structures in various phases of their development, these are- Primordial follicles, maturing follicles, Graafian follicle and corpus luteum. They produce and store egg (ovum) and release hormones that control menstrual cycle and pregnancy. Ovaries continue to release egg each menstrual cycle until menopause. Ovulation takes place on 14th day of 28-day menstrual cycle, when LH surge takes place. Egg begins its travel through fallopian tube, in its way if sperm comes in its contact then it gets fertilized and converts to zygote, this will further divide and implant into uterus. And if no fertilization takes place then ovum will get released out of body and around 28th day (in 28-day cycle) menstruation will take place.

Biological function of ovary : maturation of follicles, ovulation, secretion of reproductive hormones.

PCOS : Polycystic ovary syndrome

PCOS as it is termed- syndrome, includes many symptoms. It is a common hormonal condition that occurs when ovaries produce higher level of androgen, which will cause imbalance between reproductive hormones. It affects 1 in 5 women in their child bearing age. Female with PCOS often have irregular menstrual cycle, unpredictable ovulation or anovulation and infertility.

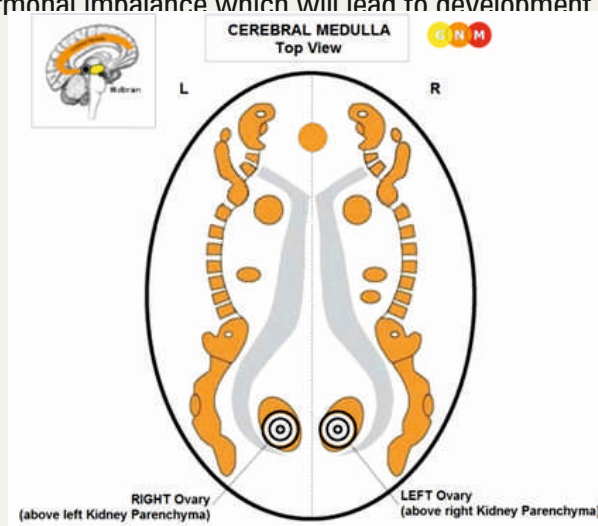
- Loss of conflict is a biological conflict related to ovaries. So if any woman feels betrayed or unloved, she will get depressed and that will cause stress to her mind and body which will cause hormonal imbalance which will lead to development of one or more small fluid-filled cysts in ovaries.

(Loss of Conflict—fear of losing beloved person, Pet, After Miscarriage or Coerced Abortions, after an argument, Betrayal or unfaithfulness of a partner or friend, constant self-blaming following breakup, etc. It only concerns with person or pet, not the loss of home*).

MAIN PART

Being diagnosed with PCOS can be a challenging journey and for some women, the diagnosis can cause a vast range of emotions that can have adverse effects on their condition and lifestyle worsening PCOS. As we know each and every organ is controlled by its particular center in brain.

A woman after loss of conflict (like unfaithfulness of partner) undergoes depression condition and symptoms like Acne, weight gain, irregularity in her menses, infertility, growth of facial hair has started to develop. These all symptoms have developed due to abnormal secretion of stress hormone, cortisol and androgen or may be due to Insulin Resistance (chronic stress leads to increased insulin resistance which can lead to higher insulin production that will contribute to hormone imbalance and the production of excess androgen hormone from ovaries).



Psychology of PCOS :

PCOS is a psychosomatic disorder, it starts to develop since women get affected by loss conflict (like unfaithfulness of partner), the area of brain which controls ovary started to get affected by it and changes in ovary started to begin and it gets worse according to duration and intensity of conflict. As long the conflict affects her, hormonal imbalance will also continue and causes different kind of sign and symptoms.

Biological Conflict :

Loss conflict- (unfaithfulness of partner) leads women to a stressed condition which will disturb her hormone secretion, there will be increased pulse frequency of GnRH leads to increased pulse frequency of LH.

Conflict active phase :

Necrosis of ovarian cell will take place. During this there is increased pulse frequency and amplitude of LH will result in chronic elevated level of LH, which will act on the cell to produce more androgen and there will be less aromatization. FSH level is not increased, so comparatively less secretion of oestrogen, which will affect follicle development and will not lead to ovulation. Immature follicles get accumulated in ovary. According to duration and intensity of conflict symptoms develop, if there is prolonged conflict then there will be irregular periods, a delayed menarche, amenorrhea, or infertility and this will remain up to the conflict is resolved.

There might be unilateral or bilateral affection of ovary, it depends upon the handedness of women (right handed or left handed) and whether the conflict is related to mother/child or partner.

Right side ovary affection—loss conflict related with partner.

Left side ovary affection—loss conflict related with mother/child

So according to the conflict and its relation, that side of ovary is affected but many times more than one conflict affects females so bilateral affection of ovary is there and so multiple cysts get formed. Healing phase: When conflict resolves, necrosed tissue is replenished with new cells. Healing is done by inflammatory reaction and edema, which will cause pain. During this phase - fluid filled cyst will be formed at the site of necrosis (It will mainly take 9 months to complete). Due to much water retention (at the site of healing) larger cyst will be formed, which will cause pain, particularly during menstruation and menstrual heavy bleeding. Due to multiple conflict - many cysts are formed "polycystic ovaries".

SYMPTOMS

- Irregular menstruation or Amenorrhea: the lack of ovulation will prevent the lining of uterus from shedding every month. Sometimes less than 8 periods/year or no menstruation at all.
- Weight gain
- Hormonal acne: Excessive androgen will lead to more secretion of oil.
- Infertility : Due to lack of ovulation. (Anovulation is due to constant elevation of LH level but lack of LH surge).
- Hirsutism: Because of increased level of androgen.
- Depression and anxiety
- Darkening of skin : patches of dark skin, especially in the folds of neck, armpits, groin and under breasts - Acanthosis nigricans.

CONCLUSION

Due to chronic stress (Loss Conflict), there is imbalance between reproductive hormone level and increased androgen level. In conflict active phase, there is increase in FSH and LH ratio (LH is higher than FSH) which will lead to less development of ovarian follicles, accumulation of immature follicles and anovulation. Ovary gets enlarged twice than its normal size. During healing phase, the immature follicle will fuse together water will get lodged in it and form cyst. Due to multiple conflict, multiple cysts may get formed and there may be involvement of bilateral ovaries. This will produce adverse kind of sign and symptoms mentioned above.

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DYSMENORRHEA & HOMOEOPATHY

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ABSTRACT

Menstruation or period is a natural process & some discomfort may occur during this process is normal but when it becomes more pain full at that level a girl or woman unable to do daily activities or household works or job during menstruation, we call it as dysmenorrhea. In that cases our homoeopathic remedies give wonderful results and improve woman health.

KEYWORDS

Dysmenorrhea, types, causes, menstrual leaves, homoeopathy remedies, general measures.

INTRODUCTION

Dysmenorrhea means painful menstruation of sufficient magnitude so as to incapacitate day to day activities. There are two types of dysmenorrhea: 1) primary (i.e., spasmodic) 2) secondary (i.e.,congestive).

In primary dysmenorrhea, causes are mostly confined to adolescents, ovulatory cycles. Psychological factors of tension (stress) and anxiety during adolescence, lower pain threshold, and hormonal imbalance are another causes. In this type of dysmenorrheal pain begins few hours before or just with onset of menstruation. Usually lasts for few hours may extend to 24 hours but may persists beyond 48 hours. Pain is usually cured following pregnancy and vaginal delivery.

In secondary dysmenorrhea menstrual pain is associated in presence of pelvic pathology, common causes are endometriosis, adenomyosis, IUCD in utero, cervical stenosis, uterine fibroid, pelvic congestion, endometrial polyp, chronic pelvic infection, pelvic adhesion etc. pain usually appears 3-5 days prior to period and relieves with onset of bleeding.

MAIN PART

Dysmenorrhea affects women's daily activities. some girls absent in school because of pain and women faces so many difficulties in her work.

Worldwide, menstrual leave is currently offered only in small number of countries including Japan, Taiwan, Indonesia, South Korea, and Zambia. In India, Bihar and Kerala are the only Indian states that have introduced menstrual leave policies for women. but what about other countries?

So here our role starts, we have so many homoeopathic remedies in our material medica which acts as blessings for women who works in painful periods. Some systemic discomforts like nausea, vomiting, fatigue, diarrhea, headache and tachycardia or other gynecological symptoms like dyspareunia, dysuria, abnormal uterine bleeding and infertility are helps in selection of homoeopathic remedy because we are believing in the concept of individualization.\

Following few homoeopathic remedies are indicated in cases of dysmenorrhea :

Belladonna : Indicated in cases of congestive form of dysmenorrhea. Pains come suddenly and cease suddenly flow is offensive and clotted. There is pain preceding the flow and a sensation of heaviness as if everything would protrude from vulva and relieved by sitting up straight.

Cimicifuga : The characteristics indication for this remedy in dysmenorrhea is pain flying across the pelvic region from one side to other side. Headache preceding menses, during menses sharp pain across abdomen has to double up the patient.

Ignatia : Useful in dysmenorrhea with menstrual colic or bearing down in the hypogastric region, hysterical labour like pains relieved by pressure.

Viburnum opulus : - Sudden pain in uterine region before menstruation and much backache during menses. Spasmodic dysuria in hysterical subjects also call for remedy. Pain going around pelvis and also empty gone feeling in stomach but bearing down is more violent.

Magnesium phosphorica : Indicated in neuralgic and crampy pain preceding the flow. Pain is relieved by warmth and aggravation from motion. Uterine engorgement with characteristic crampy pain will indicate the remedy.

Colocynth : Severe left-sided ovarian pain causing patient to double up. Pain extend from umbilicus to genitals.

Xanthoxylum : Useful where the pain is agonizing, burning, extending down thighs with a feeling as if limbs were paralyzed. Headache over left eye the day before menses and it seems to correspond to women of delicate and nervous temperament is characteristic of remedy.

Coculus : Indicated remedy in uterine cramps with suppressed irregular menses and sero-purulent discharge. Severe headache accompanied by nausea and seasickness is characteristic symptom.

Caulophyllum : Hysterical convulsion with dysmenorrheal, pain shoot to various parts of body pain are spasmodic and labor like with passages of large quantities of pale urine.

Pulsatilla : Dysmenorrheal calls for remedy when menses are dark in colour and delayed, more severe the pain are the more chilly the patient Will getting feet wet. Useful remedy in congestive type of dysmenorrhea. Patient has craving for open air is characteristic symptom.

CONCLUSION

Dysmenorrhea is a symptom rather than disease but not just a symptom. So, we have to rule out the cause and select homoeopathic remedy which improve women health.

Along with homoeopathic medicine Apply heat to the abdomen. Placing a hot water bottle or heating pad against the abdomen can relax the muscles and relieve cramps.

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HOMOEOPATHY IN PREGNANCY, BIRTH & BEYOND

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"To be pregnant is to be vitally alive, thoroughly woman, and distressingly inhabited. Soul and spirit are stretched – along with body – making pregnancy a time of transition, growth and profound beginnings."

- Anne Christian Buchanan.

ABSTRACT

Homoeopathy is very effective and safe to use during pregnancy, childbirth, the postnatal period and for breastfeeding mums and their babies. It is one of the natural therapies that can enhance your body's own healing ability, bringing balance and well-being and in most cases the elimination of symptoms and overall improvement in health. It is non-addictive and have no side-effects.

KEY-WORDS

Pregnancy, Role of Homoeopathy, morning sickness, miscarriage, labour pain, anaemia, puerperium, depression, obesity.

INTRODUCTION

Pregnancy is the most wonderful, significantly life altering event and giving birth is an ecstatic jubilant adventure of women's life. It includes substantial physiological, morphological and psychological changes which play vital roles in growth and development not just of baby but of the mother also.

MAIN PART

The gestational period is divided into three trimesters. During the first trimester (0-12 weeks), the patient may complaints of morning sickness (i.e. nausea and vomiting in the morning), frequency of micturition, breast discomfort and fatigue.

Homoeopathic approach

Antim. Tart. – When nausea and vomiting soon after eating due to indigestion followed by prostration. Vomitus is green, watery, frothy. **Arg. Nit.** – When the stomach is full of flatulence as if it would burst. Flatulent dyspepsia. Desire for sweets. < from heat, > from cold, open air. **Ipecac.** – All the complaints are attended with continuous and persistent nausea which is not relieved by vomiting. Vomiting of white glairy mucus in large quantities. Patient is thirstless, irritable and short tempered. **Nux Vomica** – There is flatulence, pyrosis, tightness, sour or bitter eructation, constant nausea after eating especially in the morning. Feels better after vomiting. Constipation with frequent ineffectual desire for stool and urine with pressure in rectum and anus.

Petroleum – Gastralgia of pregnancy with heartburn and sour eructation. Feeling of emptiness in stomach, relieved by eating. **Pulsatilla** – Nausea and vomiting of bilious matter caused due to eating rich fatty food, indigestion. Pain at the pit of stomach after eating accompanied by chilliness. Patient is thirstless. **Sepia** – Nausea and vomiting at the sight and smell of food. All gone sensation at pit of stomach relieved by eating. Nausea in the morning before eating. Aversion to bread, milk and fatty food. **Sulphur** – All gone or faint feeling in abdomen at about 11 a.m. with burning sensation. Sour and offensive vomiting immediately after eating. Itching, burning and rawness on skin.

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Sulphur – All gone or faint feeling in abdomen at about 11 a.m. with burning sensation. Sour and offensive vomiting immediately after eating. Itching, burning and rawness on skin.

Apis Mel. – Incontinence of urine with irritation of parts. Frequent, painful, consarcely retain urine for a moment and pass drop by drop. **Berberis Vulg.** – Constant urging to urinate, greenish with mucus and jelly like sediment. It may be dark, turbid.

Sensation as if some urine remained after urinating with burning pain in bladder. **Cantharis** – Constant urging before, during and after micturition. Burning and oversensitiveness of parts. Sometimes haematuria present. **Sarsaparilla** – Severe, unbearable pain at conclusion of urination as urine ceases to flow. Quite frequently, passage of gravel or small calculi and white sand in urine. **Lycopodium** – Frequency of micturition at night, terrible drawing pain. Urine is dark, albuminous, scanty in day. Red sand in urine. **Equisetum Hyem.** – Frequent and intolerable urging to urinate with severe pain at close of urination. Large quantity of clear watery urine without relief. Sharp, cutting, burning pain in urethra. Retention and dysuria during pregnancy and after delivery.

Equisetum Hyem. – Frequent and intolerable urging to urinate with severe pain at close of urination. Large quantity of clear watery urine without relief. Sharp, cutting, burning pain in urethra. Retention and dysuria during pregnancy and after delivery.

During second trimester (13-28 weeks) there is quickening (i.e. perception of active fetal movements). The nausea and vomiting will subside. If it continues, consider it as Hyperemesis gravidarum. Treat it with Homoeopathic medicines like according to cause.

During the last trimester (29-40 weeks), The patient may complaint of backache, frequency of micturition, burning in epigastric region, etc.

Homoeopathic approach

Aesculus Hip. – Back 'gives out' during pregnancy. Severe, dull constant backache in lumbosacral articulation with heaviness and lameness in back. **Helonias Dioica** – Generally for women worn out with hard work, mental or physical or weakened by luxury and indolence. Tired feeling in back and limbs. A consciousness of a womb. Feels it moves when she moves, it is so sore and tender. Sensation of heaviness and soreness in pelvis. Great lowness of spirit. **Kali carb.** – Severe backache during pregnancy. Lumbago with sudden sharp pain extending up and down the back. < 2 to 4 a.m. Great debility and perspiration is marked. Aversion to being alone. **Sepia** – Weakness and bearing down sensation. Pain extends from other parts to the back. Indifferent to everything. Patient is anxious, fearful. Weeping disposition.

MISCARRIAGE

Spontaneous abortion or miscarriage refers to the loss of a foetus before 20 weeks of pregnancy. It may occur due to fetal or maternal complaints. The symptoms are severe pain, cramps, heaviness in the abdomen, and vaginal spotting or bleeding. Homoeopathy provides highly individualized treatment for recurrent abortions. It goes beyond treating complications in conception and aims to restore uterus health and hormonal balance again. Homoeopathic remedies also deal with psychological symptoms after abortion like mood swings, irritability, anger, depression, fear which are associated with it.

Homoeopathic approach

Sabina – it is useful to prevent impending abortion occurring about third month. There is dragging pain from sacrum to pubes. **Arnica** – Threatened abortion from traumatism. **Secale cor.** – For miscarriage in the early months of pregnancy. Frequent labour like pains with copious haemorrhage of black fluid blood. **Viburnum Opu.** – Threatened abortion when spasmodic pain come from back around to lower part of abdomen go into thighs. Also useful in frequent and early miscarriages. **Sepia** – It is one of the most important remedies as a preventive of miscarriage. It is useful for abortion occurring at 5th to 7th month of pregnancy. **Cimicifuga** – One of the most powerful strainers of abortion. The pain fly across the abdomen from side to side doubling the patient up. **Pulsatilla** – Threatened abortion, the flow ceases and starts again with double force and ceases again. It also promotes expulsion of moles. **Caulophyllum** – Useful as preventive of abortion. **Belladonna** – Threatened miscarriage with profuse hot haemorrhage, backache, headache and uterine tenesmus with violent pain.

ANAEMIA (MAINLY IRON DEFICIENCY ANAEMIA)

There are some best Homoeopathic medicines to increase the haemoglobin level. It can be safely used during pregnancy. Such medicines are **Ferrum Phos.**, **Ferrum Met.**, **China**, **Aletris Far.**, **Natrum Mur.**, etc.

FALSE LABOUR PAIN

It usually appears prior to the onset of true labour pain by 1 or 2 weeks. It can be relieved by Homoeopathic treatment.

Cimicifuga – False labour pain, which is sharp, lancinating, electric like from uterine irritation across the abdomen from hip to hip. **Pulsatilla** – Difficult, irregular, sluggish labour pain. Patient feels suffocated, wants doors and windows open. **Caulophyllum** – 'Weakness, exhaustion, want of tone' are keynotes. Needle like pricking pain in cervix. False labour pain short, irregular, spasmodic, erratic pain, changing place every few minutes. There is spasmodic rigid os. It is excellent remedy for all ailments during PREGNANCY, PARTURITION & LACTATION. **Secale cor.** – Irregular pain which is too weak, feeble and ceasing occasionally. Everything seems to be loose and open, but no expulsive action. There may be fainting attacks during labour.

PUERPERIUM

The period following child-birth during which the mother's reproductive organs return to their original non-pregnant state.

After pains After childbirth the woman may complaints of severe pain which is unbearable. It can be successfully managed by Homoeopathic treatment. **Aconite** – Sharp, shooting pain in the womb, with fear and restlessness. **Arnica Mon.** - Soreness and

bruised parts after labour with retention and incontinence of urine. Violent after-pains. It prevents PPH and puerperal complications. **Cimicifuga** – After-pains with great sensitiveness and intolerance to pain. **Pulsatilla** – In case of abnormal presentation, useful in retained placenta, PPH etc. **Sabina** – Retained placenta, intense after-pains. Pain from sacrum to pubis and from below upwards, shooting up the vagina. Atony of uterus. **Secale Cor.** – After-pains too long, too painful, hour-glass contraction.

PUERPERAL DEPRESSION

It is observed in 10-20 % of mothers. Gradual in onset over the first 4-6 months following delivery or abortion. Manifested by loss of energy and appetite, insomnia, social withdrawal, irritability, anxiety, even suicidal attitude. Homoeopathy is very effective for such conditions.

Aconite – Great fear, fright and anxiety. Fear of death but believes she will soon die, predicts the day. Imagination acute, clairvoyance. Acute, sudden, violent invasion with fever. **Aurum. Met.** – It is topmost medicine for depressive insanity. Profound melancholy. Sad, repentant and despondent. A great desire to commit suicide. Feeling of self-condemnation & utter worthlessness. Great fear of death. **Hyoscyamus** – Fear, suspicion and jealousy prevails. Hysteria, delirium state. Intense sleeplessness with mental irritability. **Ignatia** – Ailments due to bad news, fright, anger, vexation, suppression of grief. Taciturn, sad, melancholic & indifferent. Howls and cries in spasmodic way. Very short tempered. Long continued and concentrated grief. Great anxiety as if some unpardonable crime has been committed by her. Consolation aggravated all troubles. **Pulsatilla** – Changeability of moods. There may be indifference and irritability hence the expression 'Gay like April day' with mood swings. Weeping disposition. Hypochondriacal moroseness. Highly emotional, afraid in evening. Fear to be alone. Consolation gives immense relief. **Natrum Mur.** – Excessive irritable. Cry for slightest cause. A state of fret and irritation. Hypochondriacal mood. Weeping alternates laughing. Bad effects of anger, grief, vexation, fright. Consolation aggravates. **Sepia** – A depressed, anxious, and fearful state of mind with a sense of helplessness. Frequent attacks of weeping and despair of life. Indifference to everything. Flushes of heat over the face and head. **Stramonium** – With depression there is a state of delirium. Great loquacity. Always desires for company. She cannot bear solitude. Very furious. Desire to escape. Religious mania. Devout, earnest, beseeching & ceaseless talking. Insomnia with restlessness.

OBESITY FOLLOWING CHILDBIRTH

Child bearing years are an important life stage for women that may result in substantial weight gain leading to development of obesity. Homoeopathic treatment is useful to improve metabolism and to prevent weight gain along with proper diet and exercise. Some Homoeopathic medicines which are effective includes **Calc. Carb., Pulsatilla, Sepia, Natrum Mur., Phytolacca Berry, Sulphur, NuxVomica, Lycopodium**, etc. It should be given according to cause and symptoms of the patient.

CONCLUSION

Here we conclude the statement that beside being safe, Homoeopathy is a very gentle and effective field of medicine which help to strengthen the women both physically and psychologically and in treating various common problems of pregnancy as it is in highly diluted form and having no any toxic or side effects.

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ENDOMETRIOSIS AND HOMOEOPATHY

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ABSTRACT

Endometriosis is the presence of endometrial tissues outside the uterine cavity. It can occur due to various causes. It is a disorder of women of child bearing age group.

KEY WORDS

Endometriosis, hormonal dependent, pelvic, ovarian, rectovaginal, chocolate cyst, haemosiderin, dysmenorrhoea, abdominal pain, dyspareunia, infertility, dysuria, hematuria, hemoptysis, laparoscopy, USG, MRI.

INTRODUCTION

Endometriosis is one of the most mysterious and fascinating benign gynecological disorders. In this type of condition there is presence of endometrial- like tissue outside the cavity of the uterus. Most commonly affected organs are pelvic organs and peritoneum. It may vary from few lesions to solid infiltrating mass and ovarian endometriotic cyst. It is most commonly seen in women with dysmenorrhea, dyspareunia and chronic pelvic pain. The prevalence is about 8-10 % females of reproductive age. It is extremely rare before menarche and disappears after menopause.

MAIN PART

Endometriosis is a proliferative hormonal dependent disease of the childbearing period. The incidence is partly due to improved diagnostic technic and partly due to social disturbances like late marriages and limited family size. Genetic susceptibility and familial tendency is seen in 15% cases. Oestrogen plays an important role. Cyclical hormones stimulate its growth. Impaired T cell and NK cell activity and altered immunology in a woman may increase the susceptibility to proliferation and growth. Other factors are genetic, multifactorial, vaginal or cervical atresia. the more frequent the cycles, and the more the bleeding, greater is the risk of endometriosis. Common site is lower pelvis below umbilicus, ovary, pouch of Douglas, including the uterosacral ligaments, peritoneum overlying the bladder, sigmoid colon, back of the uterus, ovarian fossa, intestinal coils and appendix. They are mainly of three types, namely, pelvic endometriosis, ovarian endometriosis, rectovaginal endometriosis. Pelvic endometriosis: Includes the uterosacral ligaments, peritoneum overlying the bladder, sigmoid colon, back of the uterus, ovarian fossa, intestinal coils and appendix.

- Chocolate cyst: Chocolate cysts of the ovaries represent the most important manifestation of endometriosis. To the naked eye, the chocolate cyst shows obvious thickening of the tunica albuginea, and vascular red adhesions on the undersurface of the ovary. Their brown coloration due to ingested blood pigments such as haemosiderin.

The clinical sign and symptoms includes dysmenorrhea, dyspareunia, menorrhagia and infertility. Overlapping of symptoms are common. The following are the common symptoms.

- Dysmenorrhoea: It is most common symptom. The pain begins before the onset of menstruation, continues till the flow begins and then declines. Pain of endometriosis is chiefly related to the location and not the extent of the lesion. Deeper lesions cause more pain than superficial ones.
- Abdominal pain: Lower abdominal pain comes around menstruation. Occasionally, the pain suddenly becomes very severe, presenting as an acute abdomen necessitating immediate surgery

- Dyspareunia : It may be caused due to adhesions and fixation of the uterus and nodular thickening of the uterosacral ligaments.
- Infertility : Endometriosis possibly interferes with tubal motility and function. It may inhibit ovulation, ovum pick-up by the fimbria and because of dyspareunia there is reduced frequency of sexual intercourse.

Other symptoms are menorrhagia, chronic pelvic pain, Urinary-frequency, dysuria, back pain or even hematuria. Sigmoid colon and rectum-painful defecation, diarrhea, constipation, rectal bleeding or even melena. Chronic fatigue, perimenstrual symptoms. Hemoptysis (rarely), catamenial chest pain. Surgical scars-cyclical pain and bleeding. Pelvic examination may reveal pelvic tenderness, nodules in the pouch of Douglas, nodular feel of the uterosacral ligaments, fixed retroverted uterus or unilateral or bilateral adnexal mass of varying sizes. Clinical diagnosis may be done by symptoms of progressively increasing secondary dysmenorrhea, dyspareunia and infertility.

INVESTIGATION

It can be detected by certain laboratory tests. They are laparoscopy-for diagnostic and therapeutic purpose, USG-for any mass, MRI, cystoscopy- for urinary cause, sigmoidoscopy- for rectal cause.

HOMOEOPATHIC REMEDIES

In homoeopathy there are wonderful remedies regarding this disease. The peculiar remedies are Sepia, Lachesis, Cimicifuga, Ammonium Mur.

- 1) Xantoxylum - menses too early and profuse, ovarian neuralgia, pain in loins and lower abdomen, neuralgic dysmenorrhoea, diarrhoea.
- 2) Sepia - the flow is too profuse, bearing down sensation as if everything would come out, difficulty in passing urine, bleeding in stool and fullness of rectum, cannot strain due to pain which shoots upwards.
- 3) Lachesis-menses too short, pain relieved by the flow, left ovary very painful and swollen, constipated,
- 4) Cimicifuga- Amenorrhea, delayed, profuse menses, severe pain all through the period of flow, pain in ovarian and uterine region, false labour like pain, intolerance to pain,
- 5) Ammonium mur- menses too profuse and early, pain in left abdomen and small of back, constipation, great straining to pass stool, diarrhoea during menses.
- 6) Platina - menses too early too profuse, bearing down pain, ovaritis with sterility, pain in umbilical region extending to pelvis.
- 7) Pulsatilla- Amenorrhea, menses too late and scanty, diarrhoea during or after menses, involuntary urine at night,

CONCLUSION

Endometriosis is the presence of endometrial cells outside the uterine cavity. They are mainly of three types pelvic, ovarian and rectovaginal. The main symptoms are dysmenorrhoea, abdominal pain menorrhagia, dyspareunia and infertility. It can be diagnosed by investigations like laparoscopy, USG, MRI.

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"Premenstrual Tension Syndrome: A clinical entity & role of Homoeopathic therapeutics"

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ABSTRACT

Approximately 80- 90% of women experience some symptoms in the premenstrual period at some point in their reproductive years. Teenagers often present with moderate to severe symptoms, while women in fourth decade of life appear to have worse symptoms with severity of disease worsening with increasing age up until menopause. Management of this disorder requires a multi- disciplinary approach involving the general practitioner, the gynecologist, a mental health professional (psychiatrist, clinical psychologist or counselor), physiotherapist and dietician. This article gives an idea about what PMS is, its clinical presentation and what has Homoeopathy to offer in this disorder; alongwith a brief of Premenstrual Dysphoric Disorder (PMDD).

KEYWORDS

Premenstrual tension syndrome, Premenstrual dysphoric disorder, Homoeopathic management.

INTRODUCTION



PMS is a package of symptoms that develop for a week before each menses and pass off at onset of menses. Minimum three cycles symptoms fulfill the definition.(1) Symptoms could be physical, psychological, emotional, environmental and/or behavioral and affect the ability to perform normal daily activities

as well as adversely affect interpersonal relationship.

PMS is included as a diagnostic category in the 10th edition of the International Statistical Classification of Diseases and Related Health Problems (ICD) with its more severe form, Premenstrual Dysphoric Disorder (PMDD), included in the 5th edition of the diagnostic and Statistical Manual for Mental disorder (DSM- V).(2) PMS became a recognized medical disorder over the last century. It was initially thought to be an 'imagined' disease all in heads of 'crazy' women .(3) Later it was presumed that the female reproductive organs had complete control over the woman energies treatments than those who exercised their brains.(4)

MAIN PART

- Clinical Presentation: -

Symptoms could be physical, psychological/emotional, environmental and/or behavioral.(5)

Physical symptoms	Psychological/emotional symptoms	Behavioural symptoms
Headaches	Anxiety symptoms include:	Depressive symptoms include:
Acne	Tense feeling	Depressed mood and affect
Breast tenderness	Irritability	Angry feelings for no reasons
Abdominal bloating	Clumsiness	Feelings that are easy upset
Constipation or diarrhea	Mood swings	Poor concentration
Joint and muscle pains	Panic attacks	Memory loss
Weight gain (from fluid retention)	paranoia	Feelings of low self- worth
Swelling of extremities		Violent feelings and/or actions
Dysmenorrhoea		Crying spells
Change in bowel habits		Changes in appetite and libido
Frequent urination		
Hot flashes and cold sweats		
General aches and pains		
Unusual food cravings		
Low tolerance for noise, odors or light		

- Pathophysiology of PMS : - The exact cause is not known but the following hypotheses are postulated (5)

1. Alteration in level of estrogen and progesterone starting from mid-luteal phase.
2. Neuro-endocrine factors like reduced serotonin levels, endorphin withdrawal and GABA.
3. Psychological and psychosocial factors leading to behavioral symptoms.
4. Others: like thyrotropin releasing hormone (TRH), prolactin, rennin, aldosterone, prostaglandins etc.

According to American College of Obstetricians and Gynecologists(ACOG), it should fulfill the following criteria (5)

- A. Not related to any organic lesion.
- B. Regularly occurs during the luteal phase of each ovulatory menstrual cycle.
- C. Symptoms must be severe enough to disturb the lifestyle of the woman or she requires medical help.
- D. Symptom- free period during rest of the cycle.

· **Premenstrual Dysphoric Disorder (PMDD):** - This is a condition in which a woman has severe depressive symptoms, tension and irritability before menstruation. Symptoms are of sufficient severity as to interfere with work or school, social activities, interpersonal relationships and quality of life. Most symptoms of PMDD are similar to symptoms of a major depressive disorder (MDD), such as-(6)

- Markedly depressed mood, nearly every day.
- Decreased interest in usual activities.
- Lethargy, fatigability or lack of energy.
- Hypersomnia or insomnia.

ROLE OF HOMOEOPATHY

Homoeopathic medicines comprise of many remedies which have many complaints that arise in females prior to the menses, some of which include the following:[7]



1. *Sepia officinalis*: "feels overworked, becomes sarcastic or irritable if demands are made.... indifferent to loved ones."
2. *Chamomilla*: "irritable, angry patient who is hypersensitive to pain; fretful, sleepless and cross.... woman becomes suddenly capricious, quarrelsome and obstinate before menses."
3. *Calcarea carbonica*: "anxiety, fatigue, weight gain with digestive upset and headache.... apprehensive, fearful, depressed."
4. *Lachesis mutus*: "congestion, headache, flushing, surge of blood to head.....loquacious, amative, sad in the morning, no desire to mix with the world."
5. *Bovista*: "premenstrual problems with fluid retention resulting in puffiness of hands and feet and a bloated feeling.... alternatingmood, laughing alternates with weeping.... diarrhoea like symptoms before commencement of menses."
6. *Folliculinum*: "mental excitability alternates with depression before menses.... gain in weight before the period, bloating."
7. *Natrum Muriaticum*: "psychic causes of diseases; irritable, gets into passion about trifles, awkward, hasty.... tears with laughter." (8)

Conclusion:

PMS is a disease very prominent among women of reproductive age. It is not to be dismissed, taken for granted or treated with skepticism. If a Homoeopath, by taking into consideration the various mental symptoms which these women give; will be easily able to prescribe on their basis a medicine which would cover the physical as well as psychic ailments and provide relief to them and they would be able to be a functional part of the society.

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Inauguration Of Jala Homoeovision

મોરવા કોલેજમાં હોમિયોપેથીકને લગતું ન્યૂઝ મેગેઝીન લોન્ચ કરાયું

વિશ્વ હોમિયોપેથીક દિવસની મોરવા જવારામ હોમિયોપેથીક કોલેજ ખાતે હોમિયોપેથીકને લગતા ન્યૂઝ મેગેઝીન લોન્ચ કરવામાં આવ્યું છે. આ ઉપરાંત જવારામ હોમિયોપેથીક કોલેજમાં તબીબ હોમિયોપેથીક દિવસ પૂર્ણ કરી શકાય એ માટેના કેન્દ્રીય હોમિયોપેથીક રિસર્ચ સેન્ટર સાથે જવારામ હોમિયોપેથીક કોલેજ રજાસ એસેસોસિયેશન કરવામાં આવ્યું છે. કહેવામાં આવેલી જવારામ હોમિયોપેથીક કોલેજ ખાતે વિશ્વ હોમિયોપેથીક દિવસ ૨૬૮ બોર્ડ રક્ત એકત્રિત કરવા રક્તદાન કેમ્પ ઉપરાંત હોમિયોપેથીક પોલીસ સારવાર કેમ્પ યોજવામાં આવ્યો.



world homoeopathy day celebration

મોરવા રેણા ગામની જય જવારામ હોમિયોપેથીક મેડિકલ કોલેજમાં વિશ્વ હોમિયોપેથીક દિવસ ઉજવાશે

ઓષધ : ૧૦ એપ્રિલ એ હોમિયોપેથીક શોધક ડૉ.હનેમાનની જન્મદિવસ તરીકે વિશ્વ ભરમાં વિશ્વ હોમિયોપેથીક દિવસ ઉજવામાં આવે છે. જય જવારામ હોમિયોપેથીક મેડિકલ કોલેજ મોરવા રેણા ખાતે વિવિધ પ્રકારના કાર્યક્રમો દ્વારા વિશ્વ હોમિયોપેથીક દિવસની ઉજવણી કરવામાં આવશે. જેમાં મહત્વ હોમિયોપેથીક નિદાન અને સારવાર કેમ્પનું આયોજન કરેલ છે. હોમિયોપેથીક શોધક ડૉ.હનેમાન ની ૨૬૮મી જન્મ જયંતી હોવાથી ૨૬૮ રક્તદાન દ્વારા ૨૬૮ બ્લડ યુનિટનું દાન કરવામાં આવશે. કોલેજના ન્યૂઝ બુલેટિન પ્રથમ આવૃત્તિનું વિમોચન, નવીન કોલેજ કેન્ટીનનું લોકાર્પણ, પોસ્ટર મેકિંગ સ્પર્ધા, સાંસ્કૃતિક કાર્યક્રમ, હોમિયોપેથીક ચીક્રિસ્ટા પદ્ધતિ વિશે જાગૃતિ અભિયાન જેવાં અનેક કાર્યક્રમોનું આયોજન કરવામાં આવેલ છે. તેમ સંસ્થાના ટ્રસ્ટી ડૉ.વિજય પટેલ દ્વારા જણાવવામાં આવ્યું છે.



WHO

ગોધરા-દાહોદ ભાસ્કર 11-04-2023

મોરવા રેણાની જય જવારામ હોમિયોપેથીક કોલેજમાં હોમિયોપેથીક દિવસની ઉજવણી



મોરવા રેણાની જય જવારામ હોમિયોપેથીક કોલેજમાં વિશ્વ હોમિયોપેથીક દિવસની ઉજવણી કરી હતી. જેમાં આજે ડૉ. હનેમાનની 268મી જન્મ જયંતી હોવાથી 268 બોર્ડ રક્ત એકત્રિત કરવા માટેનો રક્તદાન કેમ્પ તથા હોમિયોપેથીક સારવાર કેમ્પ યોજવામાં આવ્યો હતો. ખાસ આ દિવસે કોલેજ દ્વારા એક ખાસ હોમિયોપેથીક ને લગતા ન્યૂઝ મેગેઝીન લોન્ચ કરવામાં આવ્યું હતું. આ કાર્યક્રમમાં ગોવિંદ ગુરુ યુનિવર્સિટીના સિનિયર મેમ્બર ડૉ. અજય ભાઈ સોની, અને પંચમહાલ જિલ્લા આયુષ્ય એસો. ના પ્રમુખ, સેકેટરી હાજર રહ્યા હતા. સમગ્ર કાર્યક્રમ કોલેજ ના એમ્પી અને પ્રિન્સિપાલ ડૉ. વિજય ભાઈ પટેલ દ્વારા આયોજિત કરવામાં આવ્યો હતો.



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