Infertility cured by dynamic potencies

Dr. Partha Pratim Pal1* & Dr. Madhumita Nath2

1*Research Officer (H) / Scientist – I, Dr Anjali Chatterji Regional Research Institute for Homoeopathy, Kolkata under CCRH
2Senior Research Fellow (H), Central Council for Research in Homoeopathy, New Delhi – Ministry of AYUSH, Government of India

Received: September 21, 2018  Accepted: November 04, 2018

ABSTRACT: Just like many other gynaecological diseases, Infertility is also one such condition where homoeopathy has shown its efficacy. The present case report is to highlight the positive result of the specific treatment adopted for a 26 years female who was unable to conceive for 2 years despite of trying with several available methods. The most probable cause of infertility in this case was polycystic ovarian syndrome (diagnosed clinically and radiologically). After methodical case taking and analysis of symptoms (both miasmatic and reportorial) Calc carb 1M was prescribed subsequently and ultimately after 11 months patient conceived and final ultrasonography also emphasized on the ovaries which were devoid of any abnormality now.

Key Words:

Introduction
Normal fertility has been defined as achieving a pregnancy within 2 years by regular unprotected sexual intercourse. Infertility can be primary (women who have never conceived) or secondary (women who have previously conceived) due to endometriosis, ovulation disorders, tubal infertility, and idiopathic 1. 90–95% of anovulatory women seeking treatment for infertility have polycystic ovary syndrome (PCOS) and it can be concluded that PCOS is the most common cause of anovulatory infertility 2. Infact in other words, the prevalence of infertility in women with PCOS varies between 70 and 80% 3. PCOS is a heterogeneous collection of signs and symptoms consisting of menstrual abnormalities, (70% of cases in the form of oligomenorrhea, amenorrhea or dysfunctional uterine bleeding), obesity, hirsutism, acne and acanthosis nigricans (especially associated with hyperinsulinaemia) 4,5.

Homeopathy has been used in the past for treating a broad spectrum of diseases. However, in Gynaecology, its use remains limited when it comes to the context of evidence and publications. At least there are evidences of published case reports of infertility. For example, there is a study where the authors presented five cases of female infertility treated successfully with the use of homeopathic treatment in a large obstetrics-gynecology Hospital in Athens 6.

Case report
A 26 years old female patient attended outpatient department (OPD) in 29.08.17 with complaints of menstrual irregularities - menses were scanty and irregular i.e always delayed and remained for 2-3 days only. Associated complaints were of gradual increase in weight and chronic sick headache of many years which commenced everytime when she gets exposed to sunlight. Another occasional complaint was of urticarial eruptions which aggravated after perspiration. Most importantly there was a failure to conceive since 2 years.

History of present complaint -
Patient is married for 5 years and for last 2 years patient had been trying to conceive (and within that period of restrain no such contraceptive measures were taken). Patient underwent weight reduction programme (weight- 72kg, height-5’1”’, BMI=30.95 kg/m²) followed by allopathic treatment for menstrual irregularities (without undergoing ultrasonography at that time). For 8 to 9 months she was having regular periods but flow didn’t improve. Later sonographical report revealed that polycystic ovary was the pathology and the patient opted for homoeopathic treatment. Ultrasonography (USG) report revealed: Bilateral polycystic ovaries – both ovaries normal in size, shape and location with increased stromal echogenicity with multiple tiny peripheral cysts seen on 08.06.2018.

Past history: Chicken pox occurred at the age of 16years which healed spontaneously with proper rest and diet. Family history: Grandfather had adenocarcinoma of lungs and died out of it. Generals: Patient is obese. Appetite was good with craving for eggs. Thermal reaction was hot with profuse sweating on head and
trunk. Thirst was moderate. Stool and urine were reported to be normal. Patient also complained of a headache which aggravated on exposure to sunlight. She had a refreshing sleep.

Local and systemic examination: Nothing significant observed.

Figure 1: First USG

Analysis of the case -
After analyzing the symptoms of the case the characteristic physical generals and particular symptoms were considered for framing the totality. Excessive perspiration especially on scalp, desire for eggs, warmth aggravation, was the important general symptoms. Scanty menses, obesity, sterility, pain in head were the particulars included in totality. Miasmatic evaluation for presenting symptoms was done with the help of “Repertory of Miasms by Dr. R.P. Patel” showed predominance of Psora.

Table: 1 - Miasmatic analysis of the symptoms

<table>
<thead>
<tr>
<th>Psora</th>
<th>Syphilis</th>
<th>Sycosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sterility</td>
<td>Perspiration of scalp</td>
<td>Perspiration of scalp</td>
</tr>
<tr>
<td>Scanty menses</td>
<td>Warmth aggravates</td>
<td>Profuse perspiration</td>
</tr>
<tr>
<td>Pain in head from sun exposure</td>
<td>Profuse perspiration</td>
<td></td>
</tr>
<tr>
<td>Desire for eggs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urticarial eruptions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Itching of skin during perspiration</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Considering the above symptomatology, Synthesis repertory was preferred and using RADAR 10.0 software, systemic repertorisation was done.
Calcarea carbonicum 1M, one dose was prescribed on first visit (29th August 2017) followed by Placebo for 1 month, considering the repertorial totality and miasmatic background. In between Belladonna 200 was prescribed as SOS for headache if the acute paroxysms of headache occur amidst of this treatment. Details of follow up are summed up in table 2.

Table 2: Timeline including follow up of the case

<table>
<thead>
<tr>
<th>Follow up</th>
<th>Indications for prescription</th>
<th>Medicine with doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 22nd 2017</td>
<td>No menstruation yet. LMP = 24. 08.18. So, still there was time for the menses to appear. Complaints of throbbing headache occurred twice in last one month. Belladonna 200 was taken twice for 2 days to overcome the episode.</td>
<td>Calcarea carb 1M, OD x 2 days + Placebo for rest of the month</td>
</tr>
<tr>
<td>December 21st 2017</td>
<td>Headache still persistent. Last menstrual flow (LMP = 25. 11.18) was scanty and remained for two days only. Pathologically patient was having improvement as ultrasonography showed normal right ovary although left ovary is still polycystic.</td>
<td>Calcarea carb 1M, OD x 1day + Placebo for rest of the month</td>
</tr>
</tbody>
</table>

April 26th Not conceived, headache still persisting. Calcarea carb 1M, OD x 1day +
2018

June 15th 2018

<table>
<thead>
<tr>
<th>BMI</th>
<th>Placebo for rest of days</th>
</tr>
</thead>
<tbody>
<tr>
<td>28.3</td>
<td>No medicine</td>
</tr>
</tbody>
</table>

2018

Last menstrual period was on 18.04.18 and patient was confirmed to be pregnant on 15.06.18 (urine for pregnancy report) and sonological evaluation of abdomen (done on 21.07.18) confirmed a single live intrauterine gestational sac containing foetus with cardiac activity at 10 weeks. So, the patient conceived ultimately.

Figure 4: Urine examination for confirmation of pregnancy

Figure 5: Final USG

BMI = 28.3 kg/m²
In this case it is evident that with homeopathic treatment and diet management the patient was able to conceive within 8 months with pathological improvement of PCOS and obesity. One such case of infertility had also been reported where the patient conceived after 7 months after being treated with the similar i.e. Calcarea carb 9. It does not make Calcarea carb a specific medicine for infertility as prescription of the most simillimum in homeopathic therapeutic science can only be addressed with proper case taking, analysis and individualisation of the case and this similarity is a mere coincidence. Hence, using homeopathy to treat infertility may offer a unique opportunity for assessing its effectiveness with an established outcome (i.e. pregnancy).

But with advancement of medical sciences infertile couple seek treatment with other conventional mode of therapeutics and it has been rarely documented that homeopathy has a keen role in helping such couples. There is a clear need to conduct more clinical trials on the efficacy of homeopathy. Generally the homeopathic physician does not publish his or her result, nor does he replicate the same technique of treatment for patients with same disorder 10. Furthermore, it is difficult to evaluate the results of homeopathic treatments in same manner as conventional treatment as a result of the differing medical principles and differing healing processes underlying each method. O’Donovan et al conducted a meta analysis of homeopathic trials for infertility, and concluded that the quality of the majority of trials was poor 11. However, if the homeopath publishes and evaluates the results of infertility treatments, he or she can procure a definitive result of the efficacy of their methods. Rather than having anecdotal evidence, homeopaths can have a success rate measured in fertility, and compare it with other more mainstream treatments for infertility 12. By comparing two disparate methods and measuring the success rate, researchers might be able to definitively conclude the value of homeopathy in treatment of infertility.

References
8. Synthesis repertory. RADAR 10.0