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Homoeopathic Management of Peptic Ulcer- A Case Report

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Abstract- Ulcerations in the lining of upper part of the digestive tract are known as Peptic Ulcers. The ulcers may exist in the lower part of food pipe (oesophagus), in the stomach or in the initial part of the intestine (duodenum). About 10% of all adults are affected with Peptic ulcers at some time in their life. One of the most common problems of the gastrointestinal system. The damage occurs on the lining which may be due to inflammation caused by certain bacteria, or due to erosion caused by the stomach acids. Peptic ulcer disease is a constitutional disease that finds its local expression at the level of the digestive system. Homoeopathy is holistic system of medicine that treat person as whole here a case report was a 35 yrs old female suffering from Peptic ulcer, on basis on totality of symptoms & individual peculiarity, prescribe homeopathic medicine Nux Vomica 30 & case was cured and quality of life became better.

Key word- Gastric, Duodanal, Ulcer, H. Pylori, Haematemesis

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Introduction-

peptic ulcers occur when the lining of the stomach - the esophagus or the small intestines, gets damaged. Peptic ulcers can cause intense abdominal pain, vomiting nausea, indigestion and sudden unexplained weight loss.

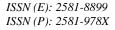
Causes of Peptic Ulcer:

The underlying process that results in Peptic ulcer formation is excess of acid production in the stomach and damage to the protective barrier inside the stomach. Certain things that can trigger excess acid production or can cause damage to the protective lining of the stomach are:

- Emotional stress
- Foods (spices, pungent foods, etc)
- Overuse of certain drugs, especially NSAIDs (Non-steroidal antiinflammatory drugs)
- Infections (H-Pylori)
- Hereditary
- Smoking

Types of Peptic Ulcers:

It may be Gastric ulcer or Duodenal ulcer. Peptic ulcers usually run a chronic course and complaints tend to be episodic in nature; the patient is usually free from the symptoms in between these episodes.





Common symptoms of Peptic ulcers are:

- Pain in the epigastrium (upper part of abdomen)
- Hunger pain- worsening of pain when the stomach is empty
- Night pain- wakes the patient from sleep
- Heartburn
- Water brash
- Loss of appetite (anorexia)
- Nausea
- Haematemesis (vomiting of blood)
- Dark or black stools

Difference between Gastric Ulcer and Duodenal Ulcer -

Chronic Gastric Ulcer	Duodenal Ulcer
1. Patients are usually middle age	1. Usually young adults
2. More common in males.	2. Common In both sexes.
3. Patients look thin.	3. Patients look obese.
4. Periodicity is less marked.	4. Periodicity is well marked.
5. Pain in mid epigastrium slightly.	5. Pain in transpyloric plane To left.
6. Taking food aggravates the pain.	6. Taking food relieves the pain.
7. Pain is not felt at night, just after eating	7. Pain felt at night, after 3 hr after meal
8. Vomiting is common found after food	8. Vomiting is rare unless pyloricstenosis complicates
9. Patient avoids spicy food.	9. Any food doesn't initiate pain so He doesn't avoid.
10. Patient looses weight	10 .Patient gains weight
11. Haematemesis is common	11. Melaena is more common

Prevention of Peptic ulcer- Certain lifestyle choices and habits can reduce your risk of developing peptic ulcers. These include:

Not drinking more than two alcoholic beverages a day

Not mixing alcohol with medication

Washing your hands frequently to avoid infections

Limiting your use of ibuprofen, aspirin, and naproxen (NSAID)

Maintaining a healthy lifestyle by quitting smoking cigarettes and other tobacco use and eating a balanced diet rich in fruits, vegetables, and whole grains will help you prevent developing a peptic ulcer.

Case Profile -

Name - Mrs. R. K.

Age - 36 year Sex - Female

Marital Status - Married

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Socio-economic Status - Middle

Religion -Sikh

Present Complaints

- She complained of continuous sour eructation every day since the last 3 years.
- It would increase if she missed her meal timings or by eating spicy food, eggs, or sour food.
- She was taking an antacid daily.
- She also complained of back pain since last 2 years.
- Nausea and vomiting

History of Present Complaints

Patient come with complaint of sour eructation and pain at night since last three yrs. Patient feels burning sensation in epigastrium. She is cheerful in nature becomes angry at trifles. She was working in MNC. She lived with her in laws and children.

Past History of Illness with Treatment

- History of constipation.
- History of Appendicitis taking allopathic treatment.

Family History

- Father- MI
- Mother- DM II
- Grand Father- BPH

Patient as a Person (Personal History) **General Appearance**

a) Built Normal

b) Gait Normal

c) Speech Normal

d) Dress Sense Good

5'3" e) Height

f) Weight 57 kg.

Diet

a) Appetite Normal b) Thirst Normal

c) Desires Spicy food

d) Aversion Nothing

Discharges

a) Stool Constipation

b) Urine 4-5/0-1 D/N

c) Abnormal Discharges - NAD

Thermal Chilly Addiction Alcohal

Sleep -Sleepy but can't sleep

Mental Generals

- She becomes abusive during anger.
- Anger at trifles.
- Anger-violent.
- **Irritability**
- Fault finder

Gynaecological/Obstetrical History

Menses: LMP-20.08.18

Time - 3-4 days, regular (28-30 days)

• Character of blood - Bright red

• Character of pain – Only 1st day

• Obs. H/O- G₂P₂A₀L₂. FTND

Physical Examination:

Pulse 68/min

Blood Pressure - 120/80 mm of hg

Anemia Absent

Normal Eyes

Tongue Clean

Systemic Examination:

GIT Distended

URINARY NAD

CNS Well Oriented

CVS S1, S2 Heard

Respiratory - Bilateral Lung clear

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Investigation - USG Abdomen – Duodenal Provisional Diagnosis & D/D:

Gastric Ulcer

Duodenal Ulcer

Final Diagnosis - Duodenal Ulcer

Repertorial Analysis

A) Repertorial Totality with Evaluation Of Symptoms

S. No.	Symptoms	Analysis
1.	Anger at trifle	MG
2.	Irritability	MG
3.	Fault finder	MG
4.	Chilly	PG
5.	Desire- Spicy thing	PG
6.	Pain at Epigastrium	PP
7.	Nausea	PP
8.	Heart Burn	PP
9.	Pain after Eating,	PP
	Midnight	

ulcer

10.	Sour taste of mouth	PP
11.	Pain Back	PP

B. Analysis With Comments

Out of six highest grading medicines. Nux vomica is covering all the symptoms including thermal also. So Nux Vomica becomes the ultimate choice.

Final Prescription -

Rx

Nux Vomica 200/3 dose PL 30 /BD 4 pills for 7 days

Mode of administration

Date - 28.08.2018

- Oral

General Management

Advice to take medicine regularly. Take blond diet, avoid spicy and outside food.

Pt. Name -Mrs. R. K. 36/F Date- 28/08/2018

1. 🗀 Clipboard 1	×
1. Mind - ANGER, general - trifles, at	(59) 1
2. Mind - IRRITABILITY, general - pai.	(21) 1
3. Mind - FAULTFINDING, disposition	(40) 1
4. Generals - COLD, temperature, w	(216)1
5. Food - SPICY, general - desires	(75) 1
6. Abdomen - PAIN, abdomen - midnig.	(14) 1
7. Stomach - HEARTBURN, general	(233)1
8. Stomach - NAUSEA, general - mc	(147) 1
9. Stomach - PAIN, stomach - eating	(143)1
10. Taste - SOUR, taste - morning	(25) 1
11. Back - PAIN, back - sitting, pain w.	(95) 1

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Treatment & Follow-Up:

Date	Follow Up	Prescription
28-08-2018	As per repertorization	Nux Vomica 200/3 Dose,
	1	PL 30- 4globules/BD for 7 Days
6-09-2018	Sour eructation and sour taste of mouth	Nux Vomica 200/1 Dose,
	not present, pain intensity reduce	PL 30- 4globules/BD for 15 Days
22-09-2018	LMP 21-09-2018, No Nausea and	PL 30-4globules/BD for 15 Days

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	vomiting, pain reduce 50%, Back ache	
	better	
10-10-2018	Anger reducing.	PL 30- 4globules/BD for 15 Days
	No heart burn, Back ache better, no pain	
	after eating, Stool normal in consistency	
26-10-2018	LMP 19-10-2018	Sulphur 30/1 Dose,
	No change, case progress stop	PL 30- 4globules/BD for 15 Days
	Sulphur is complementary of Nux	
	Vomica	
12-11-2018	All complaints are better.	PL 30-4globules/BD for 15 Days
29-11-2018	LMP 20-11-2018	PL 30- 4globules/BD for 1 Month
	No complaint	

Conclusion - Homeopathic approach towards the management of Peptic ulcer disease involves the evaluation of the complaint in details while taking into account individual factors such as one's personal and family history while planning a long-term treatment. Since the treatment targets the root cause, Homeopathy offers long-term cure instead of temporary relief. It treats at a deeper level of immunity and enhances the healing capacity of the body. This helps not only cure the ulcers but also the pre disposition to developing it again. This case shows that homeopathy is effective in case of Duodenal Ulcer, if we prescribe the medicine on the basis of totality of symptoms and individualization. If this study carried out on big sample size then result show documentary evidence of effectiveness of homoeopathy.

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Conflict of Interest: None

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