



## Role of Homoeopathy in Iron Deficiency Anemia

*Dr. Nivrutti Tupe*

PG Student, Foster Development Homoeopathic Medical College Aurangabad, India

### ABSTRACT

The general definition of anemia is decrease in number of red blood cell or less than normal quantity of hemoglobin in the blood. It can include decreased oxygen-binding ability of each hemoglobin molecule due to deformity or lack in numerical development. It is the concentration of hemoglobin, red blood cell volume, or red blood cell number. Anemia can be seen anytime during life, since birth to old age irrespective of urban or rural area, cast and gender, educational or social status of the people. The major problem of this disease is that it has very gradual onset without any apparent signs and symptoms remaining silent for long time still producing exhaustion of the human economy. In this regard homoeopathy has better scope because according to Hahnemanian classification, anemia is chronic disease which can be cure by homoeopathic similimum. By curing anemia one can prevent many illnesses.

Keywords: Amenorrhoea, Individualised homoeopathic medicine, ferrumphosphoricum, iron deficiency anemia

### Introduction

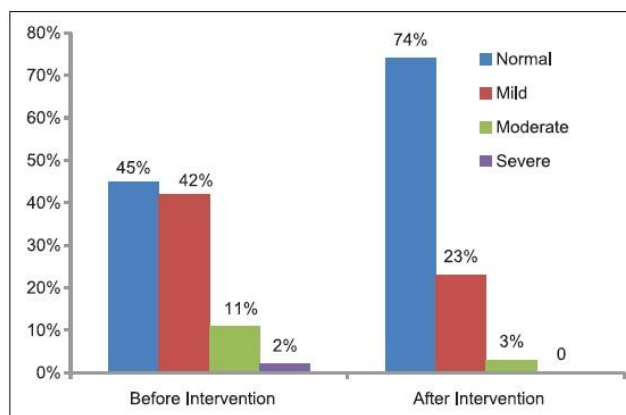
As the name suggests 'Iron Deficiency Anemia' is a type of anemia caused by lack of iron, it is the decrease in the number of red blood cells or the amount of hemoglobin in the blood. It is the most common nutritional disorder in the world. It is commonly seen in toddlers, adolescent girls, and women of childbearing age. The total body iron in a 70 kg man is about 4gm. This iron balance is maintained largely by regulating the iron absorption of dietary iron and body losses. Usually females have smaller stores of iron when compared to males due to blood loss during menstruation. The daily iron requirement is 7-10 mg in men & 7-20 mg in women.

### Material and Method:

30 cases were taken from the patients attending the OPD. The medicines were prescribed on the basis of the similarity between the totality of symptoms of a given case and symptoms of the remedy prescribed. The Potency selection and repetition was adjusted according to the susceptibility and requirement of the case. Result: 57% of the cases were cured, 23% of the cases were improved and 20% of the cases were not improved.

### ETIOLOGY OF IRON DEFICIENCY ANEMIA:

Dietary lack of iron: in such cases infants are at high risk because milk diets contain very small amounts of iron. Impaired absorption: occurs in cases of sprue, intestinal steatorrhea, chronic diarrhea and gastrectomy.

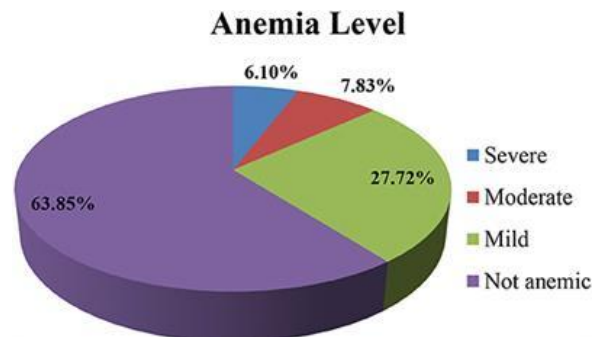


Graph 3: Reduction in severity of anemia after intervention

Increased requirement: this is an important cause of iron deficiency anemia as it is commonly seen in infants, children, adolescents, premenopausal and pregnant women.

Chronic blood loss: as can be seen in conditions like peptic ulcer, uterine fibroids, HIV/ AIDS, Malaria, worm infestations (pinworm/hookworm diseases).

#### ***PATHOGENESIS:***



Due to decreased iron supply there will be impaired Hb synthesis. This leads to a generalized defect in cellular proliferation, when anemia becomes severe there will be reduced erythrocyte survival.

When transferrin saturation falls below 16%, the supply of iron to the marrow becomes inadequate for Hb production, leading to increased protoporphyrin which hampers heme synthesis leading to microcytic and hypochromic anemia.

Because of restricted cellular proliferation and fall in number of RBCs there will be erythroid hyperplasia which caused ineffective erythropoiesis and the immature erythroid cells will be rapidly destroyed in spleen shortening the survival rates.

Anemia only appears when iron stores are completely depleted, accompanied by low serum iron, serum ferritin and transferrin saturation. Thus, the reduced erythrocyte viability is associated with decreased membrane deformability. This abnormality appears to result from oxidative damage to the membrane.

#### ***CLINICAL FEATURES:***

##### ***Symptoms:***

Fatigue and diminished capability to perform hard labour.

Leg cramps on climbing stairs.

PICA especially for ice to suck or to chew.

Poor scholastic performance.

Decreased immunity.

Impaired growth in infants.

Irritability, headache, palpitations, dizziness, breathlessness.

##### ***Signs:***

Pallor of the mucous membranes

Koilonychia i.e. spoon shaped nails.

Glossy tongue with atrophy of lingual papillae, angular stomatitis.

Splenomegaly.

##### ***Diagnosis:***

Physical Examination

Paleness in the skin, nail beds and gums.

Rapid or irregular bleeding

Bleeding : any blood loss

Family and Medical history

Complete blood count

Peripheral blood smear

Serum iron levels, serum ferritin levels, and TIBC (total iron binding capacity).

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## HOMOEOPATHIC MANAGEMENT:

Homoeopathic treatment requires a thorough investigation of the patient's physical as well as mental makeup. This makes the only guide for the selection of Homoeopathic similimum.

Homoeopathic medicines are selected on the basis of constitutional similarity which includes the study of person's physical state, mental state, familial tendencies and state of his present complaints. Few most commonly used homoeopathic medicines for Iron Deficiency Anemia are discussed below.

### **China Officinalis:**

This remedy has debility from exhausting discharges and loss of vital fluids. The individuals will have sallow complexion of face especially after hemorrhage, loss of vital fluids or sexual excesses. There will be heaviness of head with loss of sight, aversion to exercise, sensitive to touch, ringing sensation in ears, intolerance to fruits. Great congestion in the chest and violent palpitation of the heart. Trembling with numb sensation.

### **FerrumMetallicum:**

This remedy is best suited for young weakly persons, who are anemic with pseudoplethora, who flush easily, have cold extremities, oversensitive to slight noises and whose complaints become worse after any active effort. There is weakness from mere speaking or walking. Red parts become white, bloodless and puffy. There will be breathing difficulty due to surging of blood to chest and anemic murmur can be heard.

### **Sepia:**

Here women will have a weak yellow complexion. They feel cold even in a warm room. They are irritable. There will be asthenic inflammation of eye with uterine trouble. There is craving for vinegar, acids and pickles. Dyspnea aggravates after sleep and is better by rapid motion. Violent intermittent palpitation.

### **Phosphorus:**

This remedy is adapted to tall, slender persons, narrow chested, thin with transparent skin, weakened by loss of animal fluids. There will be great debility with emaciation. There will be hemorrhagic tendency. Chronic congestion of head, thirst for cold water. Violent palpitation with anxiety while lying on left side and weakness and trembling from every exertion.

### **Lecithinum:**

This remedy has action on blood and is usually given for anemic individuals to increase the number of RBCs and amount of Hb. There will be mental exhaustion. The individual will be weak with shortness of breath, loss of flesh, will be forgetful, dull and confused. The headache in the occiput will be pulsating type and will crave for wine and coffee.

### **Alumina and Nux Vomica**

Malnutrition is one of the common reasons seen in patients with Anemia. Malnutrition often leads to digestive issues like constipation. Such patients can have the two best medicines in homeopathy to treat their deficiency; Nux Vomica, CalcareaPhos, and Alumina. Symptoms like sluggish bowel movement, constipation, and sensitivity for cool air during anemia are treated with Alumina while the same symptoms with the only difference of inefficient calls to pass stool are treated with Nux Vomica.

### **CalcareaPhos**

CalcareaPhos serves as the best remedy to treat Anemia in children with a weak digestive system. The children who feel an excessive desire of eating salty food and meat as well as suffer from abdominal gas can have CalcareaPhos. Such children usually have weak bones due to anemia and seem irritable. CalcareaPhos is the best option for such children.

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## Results

After prescription of ferrumphosphoricum in various potencies, menstrual cycle became regular, no weakness and no pain in both ankles, memory was improved. After treatment, serum haemoglobin level increased from 7 gm% to 12 gm%.

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## Discussion

Iron deficiency anemia occurs in body due to low dietary intake, poor iron absorption, increased iron need in body or chronic blood loss. Iron deficiency anemia affects the functioning of organs.

Most common form of iron deficiency anemia is microcytic anemia. It mainly affects females of puberty and child bearing age. It causes fatigue, muscular weakness, decreased appetite, irritability and blood in stool.

Because of reduction in red blood cells, decreases the ability to absorb oxygen from the lungs. Serious problems can occur in prolonged and severe anaemia that is not treated. Anaemia can lead to secondary organ dysfunction or damage, including heart arrhythmia and heart failure.

Homoeopathy literatures mention several medicines for the conditions in which a similimum can help a patient to cure iron deficiency anemia. Homoeopathic remedies can offer gentle and safe cure with highest satisfaction of patient after treatment.

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## Conclusion

Homoeopathic similimum remedy can be used as therapeutic & preventive measure for upcoming diseases. In this study homoeopathic treatment had shown positive results on iron deficiency anemia and Ferrumphosphoricum in different potencies were found to be most effective. It reconfirms the importance of Individualised Homoeopathic treatment based on holistic basis rather than particular pathological diagnosis.

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