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A Case Report on utility of Tuberculinumin management of Allergic Rhinitis

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ABSTRACT:

Allergic rhinitis is a worldwide and most common problem that can worsen during the harvest season. Symptoms lead to sleep disturbances, fatigue, depression, mood and cognitive function that impair quality of life and productivity. Therefore, the case presented here studies the role of Tuberculinum in the treatment of allergic rhinitis. This case presented with episodes of sneezing and watery nasal discharge and on this basis Tuberculinum 200 was given as an intercurrent remedy followed by an acute totality remedy and marked improvement was noted.

Key words: allergic rhinitis, Tuberculinum, Intercurrent medicine

Introduction:

Allergic rhinitis occurs as a result of an immediate hypersensitive reaction of the nasal mucosa. Grass pollen is responsible for hay fever, the most common type of seasonal allergic rhinitis. Year-round allergic rhinitis may be a specific response to antigens originating from house dust, mold spores, or animal dander, but similar symptoms may be caused by physical or chemical irritants. In the seasonal type, sneezing attacks are frequent, with copious watery discharge from the nose and nasal obstruction. In the perennial variety, symptoms are similar but more continuous and generally less severe. (1)

Allergic rhinitis is one of the most common allergic diseases worldwide, affecting about 10-25% of the population. It is one of the top ten reasons for seeing a primary care physician. (2) The reported incidence of allergic rhinitis in India is also between 20% and 30%.

Case profile:

A 35-year-old woman came in complaining of a watery nasal discharge. Sneezing 6-7 episodes at a time, followed by watery discharge, increased from 6-7 months. The complaint is aggravated by dustiness, change of weather and in the evening around 7-8 pm. Steam inhalation is better. 2 years ago complaints started for which she took allopathic medicine (tab Cetrizine once or twice a week) but got temporary relief.

Location	Sensation	Modality	Concomitant
Nose	Sneezing ⁺³	<dust, change="" of="" weather,<br="">evening⁺³ >steam inhalation⁺²</dust,>	_
	Nasal discharge+2		

A/F: No ailments from available.

Past history	Family history
Patient is a known case of Hypothyrodism since 3-4 years on	Mother died 3-4 years ago
regular treatment (tab Eltroxin 100 mcg).	H/O? OA to mother
H/O convulsions 2-3 years back on tab Levera 500mg. Takes tab	
after every 2 days at night.	
1 st attack – 21 days after delivery in 2018	
2 nd attack – last year	

Personal history:

Appetite	Normal	
Thirst	Thirsty, large quantity at small intervals	
Desire	Spicy ⁺³	
Aversion	Nothing specific	
Perspiration	Scanty only on exertion ⁺²	
Sleep	Refreshing, sound sleep	
Dreams	Do not remember	
Urine	3-4times a day, no other complaints	
Stools	Satisfactory stools once a day	
Thermals	Ambithermalpatient	

Menstrual history:

Menarche: 14 years LMP: 03/ 06/ 2022 Duration: 3-4days Cycle: 28-30 days Flow: Dark red and clotted and offensive Associated complaints: Leucorrhoea 2 days prior to menses

Obstetrics history:

 $\begin{array}{l} G_3P_3A_0L_3\\ G_1\,FTCS\ -\ girl\ child\ -\ 11\ years\ old\ -\ oligohydramnios\\ G_2\,FTCS\ -\ girl\ child\ -\ 7\ years\ old\\ G_3\,FTCS\ -\ girl\ child\ -\ 3\ years\ old \end{array}$

Vital data:

Temperature: Afebrile RR: 15/min Pulse: 90/ min BP: 100/70mmhg

General Examination:

Pallor: Absent Edema: Absent Cyanosis: Absent Icterus: Absent Lymphadenopathy: Not palpable

Systemic Examination:

RS: A_EB_E CVS: s1s2+ GIT: Soft and non-tender CNS: Conscious and oriented

Local examination

Nose -watery discharge from nose Throat-NAD Eyes-NAD

Mental history:

Patient's childhood was spent in Ahmedabad. She has 2 sisters and 2 brothers. Patient is very much attached to her mother. She came to Aurangabad after marriage, here she stays with her husband and three daughters. She gets irritated due to household things and when her daughters fight or do mischiefs⁺³. Weeps when someone shouts at her only when she is alone⁺². She is mild religious. Her hobbies are drawing and listening to music.

Analysis of symptoms:

Characteristic Mental Generals	Irritable ⁺³
	Weeps alone ⁺²
Characteristic Physical generals	Desire – spicy ⁺³
	Thirst - thirsty, large quantity at small intervals ⁺²
	Perspiration – scanty only on exertion ⁺²
Characteristic physical particulars	Sneezing ⁺³ <dust, change="" evening<sup="" of="" weather,="">+3</dust,>
	>steam inhalation ⁺²
	Nasal discharge ⁺²

Totality:

- 1. Irritable⁺³
- 2. Weeps $alone^{+2}$
- 3. Desire spicy⁺³
- 4. Thirsty for large quantity of water⁺²
- 5. Scanty perspiration⁺²
- 6. Sneezing <dust⁺²
- 7. Sneezing <change of weather⁺²
- 8. Sneezing < evening⁺²
- 9. Nasal discharge⁺²

Prescription:

Tuberculinum 200 2P

Cosmos 30 4 pills TDS x 15 days

Follow up:

21/06/22	Sneezing decreased	Treatment:
	Watery discharge decreased	Rubrum 4 pills x TDS x 7days
	Headache <eructation's< th=""><th></th></eructation's<>	
	Stopped cetirizine	
15/07/22	Sneezing	Tuberculinum 200 2P
	No other complaints	Cosmos 30 4 pills x TDS x 15 days
02/08/22	Sneezing reduced	Tuberculinum 200 1P
	Headache reduced	Cosmos 30 4 pills x TDS x 7 days
	Watery discharge ⁺¹	
	No gaseous distension	
	70-80% relief	

Discussion and conclusion:

The following data were available from the Tuberculinum report for allergic rhinitis: Tuberculinum reduces the difficulty of nasal symptoms, i.e. watery discharge from the nose, sneezing, which worsened with a change in weather, dust or in the evening and also covered the patient's psyche.

This study shows a conclusion about the effectiveness of tuberculin in allergic rhinitis. Tuberculinum 200 is always a good start when treating allergic rhinitis. It shortens the duration of the attack and sometimes completely cures the patient.

Declaration of patient consent

The authors acknowledge receipt of all relevant patient consent forms. In the form, the patient gave consent to send images and other clinical information to this journal. The patient acknowledges that his name and initials will not be published and that reasonable efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

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