



A Case Study to Assess the Efficacy of Homoeopathic Remedies in Management of Thyroid Disorders

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ABSTRACT

Thyroid hormones are two types of hormones (T_3 and T_4) produced and released from thyroid gland, an endocrine gland situated in neck. Thyroid gland gets signal from the pituitary gland in the form of TSH (Thyroid stimulating hormone) to produce and release of thyroid hormone. Pituitary gland again gets permission from hypothalamus in the form of TSHRH (TSH releasing hormone) to release TSH. This is called Hypothalamo-pituitary-thyroid axis. This TSH gives signal to thyroid gland to release thyroid hormone. Thyroid gland consists of many follicles. Each follicle has number of follicular cells which secrete thyroid hormone when stimulated by TSH hormone. Constitutional medicine is given to the patient suffering which helps to improve the function of thyroid gland naturally. Homeopathy remedy helps the body to stimulate the thyroid gland to overcome deficiency or excess on its own. Eventually, it also reduces dependency on artificial hormonal supply.

Keywords: Homoeopathy, thyroid disorders, hypothyroidism, hyperthyroidism

INTRODUCTION

Any disturbance in Hypothalamo-pituitary-thyroid axis may lead to over stimulation of thyroid follicles, which results in hyperthyroidism. Any stimulus which can increase number/size of follicles in thyroid gland can also lead to hyperthyroidism. Over-activity of the thyroid is called hyperthyroidism, or thyrotoxicosis and it occurs when the thyroid produces too much thyroid hormones in response to increased TSH secretion. It is associated with weight loss, increased appetite, palpitations, hot flushes, anxiety and restlessness, muscle weakness, tremor and in women, often a reduction in menstrual flow. Sometimes the eyes may be affected and seem to bulge, hence the symptom of exophthalmos.

HOMOEOPATHIC REMEDIES FOR THYROTOXICOSIS:-

IODUM

- Rapid metabolism: Loss of flesh great appetite. Hungry with much thirst. Better after eating.
- Homeopathic medicine for hyperthyroidism has great debility, the slightest effort induces perspiration.
- Iodine individual is exceedingly thin, dark complexioned, with enlarged lymphatic glands, has voracious appetite but gets thin.
- Anxiety when quiet. Sudden impulse to run and do violence. Forgetful. Must be busy. Present anxiety and depression, no reference to the future.

THYROIDINUM

- Thyroid produces anaemia, emaciation, muscular weakness, sweating, headache, nervous tremor of face and limbs, tingling sensations, paralysis.
- Heart rate increased, exophthalmos and dilation of pupils.
- Weakness causes decided craving for large amount of sweets.

- There is feeling of lightness in brain. Persistent frontal headache.

CALCAREA-IOD

- It is in the treatment of scrofulous affections, especially enlarged glands, tonsils, etc, that this remedy has gained marked beneficial results.
- Thyroid enlargements about time of puberty.
- Headache while riding against cold wind. Lightheadedness.

LAPIS ALBUM

- Homeopathic medicine for hyperthyroidism has affections of glands.
- Fat anaemic babies with Iodine appetite. Ravenous appetite.
- Glands have a certain elasticity and pliability about them rather than the stony hardness of Calc fluor and Cistus.

FUCUS VESICULOSUS

- Digestion is hastened and flatulence diminished. Obstinate constipation.
- Forehead feels as if compressed by an iron ring.
- Thyroid enlargement in obese subjects.

CASE PRESENTATION :-

Mr A came to my clinic presenting with excessive debility and extreme feeling hotness. When he was sitting in the waiting area, I noticed that he was constantly using his handkerchief to swipe out of his perspiration indicating profuse perspiration. He then complained that he feels very hungry and also eats well but his weight is not increasing even after eating a lot.

As these were general indications of hyperthyroidism, I asked furthermore for his any specific complaints. Then he said he sometimes gets vertigo and headache. This was the keypoint which would lead me towards my remedy. Further on asking questions related sensations and modalities, he explained, the headache is very painful and throbbing in nature feels as if a band is tied on forehead and if I sit in a room itself than it gets worsen, it gets better if move to open cold air or even simply starting my AC and the headache relieves gradually.

On observation, his appearance was tubercular type, with emaciated thin body and wheatish to dark appearance. He was perspiring a lot and was anxious but not uttering a word about it just kept on thinking about the complain while waiting.

So from the above narration, following is the understanding about the case :-

1. Excessive perspiration
2. Eating well while loosing flesh
3. Excessive feeling of heat
4. Great debility and weakness
5. Ravaneous appetite
6. Throbbing Headache and vertigo <-hot room >-cold surroundings and cold air
7. Anxiety but quiet
8. Lean thin debilitated person with dark complexion

All these suggested me that it is the case of HYPERTHYROIDISM and indicated to the one explicit homoeopathic remedy IODUM.

But before the prescription the patient was directed to do the laboratory reports for the confirmation of the diagnosis.

SANJEEVANI
HARIDWAR

Patient's name: _____
Age/Sex: 28 Years / M
Referral by: _____
Patient's ID: _____

Reg ID: P-34756-15
Accession: 03613
Order date/time: 13/10/2018 09:13
Collection Time: 9:13

Test details	Result	Unit	Normal range
THYROID FUNCTION			
Total T3 (ECLIA Method)	1.11	µg/dl	0.84 - 2.0 µg/dl
Total T4 (ECLIA Method)	7.72	µg/dl	5.1 - 14.0 µg/dl
TSH (ECLIA Method)	8.21	mIU	0.27 - 4.2 mIU

Method: Electrochemoluminescence Immunoassay (ECLIA)
Test Data from source by fully automated COBAS e11 from ROCHE-GERMANY

1st Report

Dr. _____

Dr. Sivaram R. Maniar (MS, DPM) | Dr. Haridip Dhasandia (M.D. DPM) | Dr. Kailash P. Hathi (MS, DPM) | Dr. Krishna Debnaj (MS, DPM) | Dr. Ajayesh V. Patel (MS, DPM) | Dr. Kirit P. Patel (MS, DPM) | Dr. _____

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INNER HEALTH REVEALED

TEST REPORT
VD: 96170512256
Registered On: 08/12/2017 08:23 AM
Collected On: 08/12/2017 8:25 AM
Reported On: 08/12/2017 10:37 AM

Tel No: 059448897
PIN No: 0
PO NO: P96103111722
Age: 28 Years | Sex: Male

Reference: Sample Collected At: Mainstone (PH)

Investigation	Observed Value	Unit	Biological Reference Interval
TSH (Ultra sensitive) (Serum & Clot)	3.410	µIU/ml	0.45-4.5

Interpretation:

- TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample.
- TSH results between 0.1 to 0.45 require correlation with patient age & clinical symptoms. As with increasing age, there are marked changes in thyroid hormone production, metabolism & its actions resulting in an increased prevalence of subclinical thyroid disease.
- TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe burns, trauma and surgery etc.
- Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid Drugs that increase TSH values e.g. iodine, Lithium, Amiodarone.

-- End of Report --

2nd Report

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SANJEEVANI
METROPOLIS
The Pathology Specialist
Page 3 of 3
Dr. Haridip Dhasandia
M.D. DPM (PATH)
INNER HEALTH REVEALED

PRESCRIPTION: -

Rx

IODUM 200—1 DOSE

S.L. 4 PILLS TDS FOR 15 DAYS

SHREE
pathology laboratory

pathology laboratory

Patient's Name : _____ Date : 15/01/2018
Age/Sex : Male
Report time : 13:02

THYROID FUNCTION TEST

Test	Result	UNIT	Normal Range
T.S.H:	2.01	microUnit	0.4 - 4.5

**The Hormonal test done on fully automated random access immunoassay-TOSHQ by JAPAN.*

THYROID FUNCTION INDICATORS BY AGE

AGE	T3(ng/ml)	T4(ug/dl)	FT4(ng/ml)	TSH(mIU/L)
1-4 DAYS	0.97-7.42	11.03-21.5	2.17-5.26	1-59
1-4 WKS	1.04-3.45	8.23-17.1	0.93-2.33	1.7-9.1
1-12 MONTHS	1.04-2.47	5.99-19.3	0.77-1.78	0.8-8.2
1-5 YRS	1.04-2.68	7.35-14.3	0.77-2.09	0.7-6.7
6-10 YRS	0.91-4.37	6.37-13.2	1.04-2.09	0.7-6.7
11-20 YRS	0.84-2.14	5.51-11.7	0.77-2.02	0.7-6.7
21-80 YRS	0.71-2.01	4.27-12.4	0.93-2.48	0.4-4.2

3RD Report

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rajkot - 360 035, tel: lab: 0291 2403000, 0291 2260272
e-mail: drsanjaypatel71@gmail.com

SHREE
pathology laboratory

pathology laboratory

Patient's Name : RA Date : 24/04/2019
Age/Sex : Male
Report time : 09:43

THYROID FUNCTION TEST

Test	Result	UNIT	Normal Range
T.S.H:	1.61	microUnit	0.4 - 4.5

**The Hormonal test done on fully automated random access immunoassay-TOSHQ by JAPAN.*

THYROID FUNCTION INDICATORS BY AGE

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21-80 YRS	0.71-2.01	4.27-12.4	0.93-2.48	0.4-4.2

4th Report

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4. FOLLOW – UP :-

NO.	CHANGES IN COMPLAINTS	PRESCRIPTION
1 st	There was slight relief. There was decrease in feeling of heat. But complain of headache and appetite was still persistent.	IODUM 200, 4 PILLS, O.D. EVERY ALTERNATE DAY
2 ND	15 – 20% Relief in all complaints, headache also relieved but frequent attacks appeared, appetite still the same , perspiration slightly decreased	INTERCURRENT:- THYROIDINUM 1M, IODUM 200, 4 PILLS, O.D. ALTERNATE DAY
3 RD	Headache relieved, perspiration was normalized, sensation of heat was decreased. But no weight gain even after good appetite	IODUM 200, 4 PILLS, O.D. EVERY TWO DAYS
4 TH	Feeling of heat was reduced but still sometimes gets flushes of heat. Headache was observed by patient. Mental conditions of anxiety was also seen	IODUM 200, 4 PILLS, O.D. EVERY ALTERNATE DAY
5 TH	Relief was seen in all the conditions. Headache still present. Weight gain by 2kg. feeling of heat persistent. Slight relief in mental conditions .	IODUM 200—1 DOSE EVERY WEEK. S.L. 4 PILLS TDS FOR 30 DAYS
6 TH	Patient gained weight by 2.4 kg relief in conditions of feeling of heat as well as headache. Mental conditions relieved. Perspiration was normalized.	IODUM 200—1 DOSE S.L. 4 PILLS TDS FOR 30 DAYS

7 TH	All the complaints of patient were relieved with mental conditions also normalized appetite was also normalized instead of ravenous appetite. Weight gain by 1.8 kg . Perspiration normal. No complaint of headache	S.L. 4 PILLS TDS FOR 45 DAYS
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CONCLUSION: -

The aim of homeopathic treatment is to stimulate the body's homeostatic or inner self-balancing mechanisms. In order to do this the individual ideally needs to be given the simillimum, the right remedy for them at that moment in time. Theoretically, that means that the right remedy could be one out of several thousand. In practice, however, we find that there is a manageable number of remedies that have a propensity to help the thyroid and the ones mentioned have all been found of value in my practice. Interestingly, the same remedies can sometimes be indicated in situations of both over-activity and under-activity. It is the individual that should be treated, rather than the condition.

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