



Homoeopathic Approach towards Different Types of Cough

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ABSTRACT

In homeopathy, cough is described as barking, hawkish, group, asthmatic, gagging, spasmodic, etc. It is difficult to distinguish one from the other and choose a suitable homeopathic remedy.

Excessive include discomfort from the cough itself and interference with normal lifestyle. A cough is one of the most common reasons why a patient consults a doctor. A patient with a chronic cough, especially in connection with cigarette smoking, can get used to it, even if he admits to regular production of sputum. Coughing is the body's way of removing irritants, excess secretions and foreign objects from the respiratory tract. This is important as a protective mechanism as well as for the healing process - that's why coughs should not be artificially suppressed with drugs. When the cough is painful, too intense or prevents good rest, the use of medicines can gently relieve the discomfort and help with recovery. A cough can accompany a wide variety of illnesses or conditions. If the person has severe difficulty breathing, coughs up blood or abnormal discharge, or appears to be very ill in some other way.

Keywords: Cough, Breathing, Treatment, Homeopathy and Homeopathic Materia Medica

Introduction

The chosen topic "Homoeopathic approach to different types of cough" is chosen because in our daily practice we go through several changes in the types of cough. Some are barking, others gagging, convulsive, heckling, etc. All these types must be distinguished from each other and studied from their pathological point of view and its application in homeopathic medicine.

An attempt has been made here to distinguish one type of cough from another so that the clinical application of homeopathic medicine can be better carried out and considered as a whole.

The topic also goes through various aspects like anatomy of respiratory organs, its physiological aspects, physiology of cough, practical and clinical approach to respiratory tract and related pathological conditions.

Literature review

A cough is an explosive exhalation that provides a normal protective mechanism to clear the tracheobronchial tree of secretions and foreign material.

Cough efferent messages bounce down the vagus to the larynx and spinal nerves to the diaphragm, chest, abdominal, and pelvic muscles, all of which contract during coughing. The cough reflex becomes less sensitive in the elderly and is lost during anesthesia and unconsciousness, which contributes to the danger of inhaling stomach contents under such circumstances. A non-explosive cough associated with recurrent laryngeal nerve palsies is easily recognized. A bubbling cough indicated sputum in the larger airways. Coughing attacks followed by prolonged alternating inhalations characteristic of pertussis.

Etiology

Cough can be initiated by various respiratory tract irritants that enter the tracheobronchial tree by inhalation (smoke, dust, fumes) or aspiration (upper respiratory tract secretions, gastric contents, and foreign bodies) when the cough is caused by irritation of upper respiratory tract secretions or gastric content. the initiating factor may remain unrecognized and the cough may be persistent.

Long-term exposure to these irritants can cause inflammation of the airways, which can also trigger coughing and sensitize the airways to other irritants. Any disorder leading to inflammation, constriction, infiltration, compression of the airways can be associated with cough. Inflammation usually occurs as a result of respiratory tract infections, from viral to bacterial bronchitis to bronchiectasis.

Types of cough -

1. DRY OR UNPRODUCTIVE-upper respiratory infection, early stage tuberculosis, bronchogenic carcinoma, smoker's cough, interstitial fibrosis, bronchial asthma, pulmonary infarction, whooping cough.
2. WET COUGH-bronchiectasis, lung abscess, fungal infections,
3. PAROXYSMAL-bronchial asthma, heart failure, belching disease.
4. WITH SITTING-bronchial asthma, chronic bronchitis.
5. BARKING- sharp loud sound, seal like cough, paroxysmal.
6. NOCTURNAL- for asthma, pulmonary edema, nasal drip in chronic sinusitis, reflex esophagitis.
7. CROUPY-harsh hoarse cough in laryngeal infection.
8. HACKING-short dry irritating cough, often repeated cough in congestive conditions of the pharynx, upper respiratory tract, smoker's cough.
9. SUPPRESSED OR PAINFUL Cough in pleurisy is suppressed because the chest pain is made worse by coughing
10. WHISPERING TONELESS COUGH - in destructive lesions of the vocal cords, tuberculous ulcer or neoplasm.
11. COUGH RELATED TO EXERCISE - in early LV function and mitral stenosis.
12. PEEKING
13. HORRIFIED
14. GAGGING
15. convulsions
16. ASTHMA

Pathology

Cough is perhaps the most important respiratory symptom. The mode of onset of cough may provide a clue to the etiology of the disease. It is acute due to aspiration of a foreign body, acute asthma, viral infection, pulmonary embolism, pulmonary edema. Bronchial asthma is caused by seasonal occurrence. Diurnal variation, where the cough is more severe at night, is usually asthma, tropical pulmonary eosinophilia (TPE), and early left heart failure.

Morning cough indicates chronic bronchitis and post-nasal drip. When related to working hours, it is related to the bronchial irritants seen in byssinosis. Postural cough is seen in bronchiectasis, lung abscess etc. Cough may be dry or produce sputum.

Diagnostic assessment

A barking type of cough may have epiglottal involvement (i.e. whooping cough due to haemophilus pertussis infection in young children), while cough associated with involvement of the trachea or large airways is often loud and "harsh". Cough associated with generalized wheezing may be caused by acute bronchospasm. At night, it indicates congestive heart failure that is related to eating, suggests a tracheoesophageal fistula, hiatal hernia, or esophageal diverticulum, a cough precipitated by a change in position suggests a lung abscess or a localized area, or bronchiectasis.

Complications of cough

Cough syncope - emphysematous hemorrhage rupture and rib fracture. A potential mechanism for cough syncope involves the development of significantly positive intrathoracic and alveolar pressures that reduce venous return, leading to decreased cardiac output and subsequent syncope.

Pathologic fracture seen in multiple myeloma, osteoporosis, and osteolytic metastases.

Investigation -

CHEST RADIOGRAPHY – upright x-rays are preferred over supine x-rays, the lungs are more expanded allowing for easy assessment of pulmonary and mediastinal structures, air fluid levels are detected.

The lateral view is useful in clarifying the opacity seen in PA film. Localized lesions, LUNG ZONES are divided into upper, middle and lower.

Observation - both lung fields should be compared, they should be equally translucent in equivalent places. Apices costo phrenic and cardiophrenic angles should be clear. Containers in the upper zones must be thinner than containers in the lower zones. The inverse relationship is an important sign of increased pulmonary venous pressure. A hairline-thick horizontal tear extends horizontally from the right hilum point to the chest wall.

The shift indicates a possible volume change in the right chest.

CT SCAN-has some advantages over X-ray images, eg absence of overlapping structures and excellent contrast resolution.

Detection and characterization of mediastinal masses.

Staging of bronchial carcinoma, assessment of the spread of especially lymph nodes and invasion of adjacent structures.

Localization and characterization of pleural disease distinguishing between lung and pleural disease

Assessment of a questionable hilum distinguishing vessel and mass

Detection of a metastatic nodule in the lung.

HRCT (HIGH RESOLUTION CT) – is more specific and sensitive in the diagnosis of parenchymal lung disease than conventional radiography.

ULTRASOUND - is useful for imaging pleural disease.

MAGNETIC RESONANCE IMAGING - limited use in the chest.

BRONCHOGRAPHY - radiography of the lungs after injection of an opaque medium into the bronchi. Contraindications - recent episode of hemoptysis or severe chest infection.

Causes of cough -

1 INFECTION-acute laryngitis, bronchitis, whooping cough, pneumonia, chronic pulmonary tuberculosis, bronchitis, lung abscess, laryngitis.

2 MECHANICAL IRRITATION - inhalation of dust, irritating gases, foreign body in the larynx, postnasal drip in chronic sinusitis, airway pressure in aortic aneurysm, enlarged LA in mitral stenosis, intramural in bronchogenic carcinoma, foreign body, bronchospasm.

3 REFLEX- reflex irritation of the vagus, wax in the outer ear or inflammation of the middle ear, distension of the stomach or large intestine, liver abscess.

4 Thermal stimulus - inhalation of cold air, especially asthma and intercurrent infections.

5 COUGH HABIT

6 PSYCHOGENIC COUGH

Primary Homeopathic Cough Remedies

Bryonia

This medicine relieves dry and painful cough, dry throat and intense thirst. The cough is triggered by talking and the pain is relieved by remaining still or applying strong pressure to the ribcage.

Phosphorus

This medicine is indicated when a person experiences hoarseness and a tickling cough that hurts the throat, or a cold that quickly spreads to the chest. Coughing can be made worse by talking, laughing, and exposure to cold air. The person may feel heaviness or tension. Thirst for cold drinks (which may cause nausea after heating in the stomach) is another indication for phosphorus. A person who needs this medicine is usually imaginative and timid and enjoys the company of others, but gets tired very easily. This medicine is often used for loss of voice and laryngitis.

Pulsatilla

This relieves a wet cough with thick, yellowish mucus that worsens in bed.

Rumex crispus

This remedy relieves a dry cough brought on by breathing cold air with a scratching sensation in the throat and a tickling sensation above the sternum between the two collarbones.

Other remedies

Aconitum napellus

This medicine is indicated when the cough has appeared suddenly - often from exposure to cold wind or after a traumatic experience. The cough is likely to be sharp, short, dry and persistent. It can start during sleep and wake the person up, or it can start when the person moves from a cold place to a warmer one. Restlessness and fear are typical when this drug is needed. It is often used in the early stages of diphtheria and asthma.

Antimonium tartaricum

This medicine relieves a wet cough with thick mucus and difficult expectoration.

Belladonna

A cough that comes on suddenly, often with a spotting or tickling sensation in the throat, is a strong indication for this drug. The cough is intense and annoying, and the person may feel as if their head is going to explode. Feelings of heat, flushed face and dilated pupils are often seen when this medicine is needed.

Chamomilla

A dry, harsh, irritating cough that begins after exposure to the wind or after excessive excitement and anger may indicate this remedy. The cough often worsens around nine in the evening and can continue into the night. The nervous system is hypersensitive and the person can be extremely irritable and agitated. (Babies may even scream and kick, although they often calm down if someone carries them.) This remedy is also helpful for asthma attacks, especially those triggered by anger.

Drosera

This medicine relieves a dry cough, worse at night and from the warmth of bed, brought on by talking or laughing, with a tickling sensation in the throat.

Ferrum phosphoricum

It is an excellent remedy for the early stages of many inflammatory conditions, especially colds and allergy attacks. The cough is typically short and tickly and may be painful. Things are worse in cold air, at night and early in the morning. The person feels tired and often has a mild fever and slightly reddened cheeks.

Hepar sulphuris calcareum

This relieves a dry, hoarse cough aggravated by cold air and cold drinks, occurring at the beginning and end of the night.

Ipecac

This medicine relieves a dry, paroxysmal cough that causes nausea and is accompanied by hypersalivation.

Kali Sulphuricum

This helps relieve a wet cough and stuffy nose with yellow and irritating mucus. Symptoms worsen in a warm room.

Nux vomica

Indications for this remedy include a feeling of tightness in the chest with a dry, hacking, hacking cough, which often causes soreness or a feeling that something inside has been torn. Prolonged bouts of coughing can end in stomach ache and retching and can give a person a headache. A person who needs this medicine is likely to be impatient, irritable and hypersensitive to everything. A feeling of being cold is typical, and the problems are often worse from exertion (mental and physical) and worse in the morning.

Spongia tosta

This remedy relieves a croupy, barking cough, especially after a cold or cold weather, worse when lying down at night.

Sulphur

This medicine is indicated for a burning, irritating cough that worsens at night in bed, as well as for breathing problems during sleep. It can also be helpful when a mild cough goes on for a week or more without getting worse but without much improvement. Burning sensations, redness of the eyes and mucous membranes, unpleasant odor and aggravation from bathing are often observed in a person who needs this medicine.

Summary and Conclusion

Cough was learned, understood, but its application became difficult for many practitioners, especially new doctors who pass out. Types of cough such as barking, spasmodic, gagging, tickling, etc. have been indicated, for which homeopathic medicine is given specific according to the similim.

Efforts have been made to simplify the work by collecting simple works, applying in the right direction for easy understanding and application.

Anatomy, physiology, pathology of a specific disease related to which type of cough is shown in the clinical application of the drug. To simplify knowledge, the clinical part of the physical examination, the diagnostic application with examinations, was also explained.

The result is the kind of portraits that are easy to learn, understand and express with quick reference and a simplified way.

It also helps to understand what pathology is suitable for which type of cough, to distinguish one cough from another, which helps to understand clinical applications much better as well.

The study of the physiological effect of each homeopathic remedy to distinguish one from the other in a symptom such as cough, and the effort to achieve a similar remedy with minimum confusion and accuracy.

Here studied cases from different age groups and both sexes with different pathological diagnosis to ensure the cure rate in different subjects and different walks of life to get a complete picture.

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