



HOMOEOPATHIC APPROACH IN CASES OF COMMON COLD IN PAEDIATRIC AGE GROUP

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ABSTRACT:

The most frequent acute condition assessed in an outpatient environment is an upper respiratory tract infection (URTI). URIs can range from a common cold, which usually manifests as mild, self-limiting catarrhal syndrome of the nasopharynx, to potentially fatal conditions like epiglottitis. ⁽¹⁾A distinct area of medicine called homeopathy places a strong focus on each patient's uniqueness and clinical resemblance. It treats a man's illness as a unique condition.

KEYWORDS: Respiratory tract infection, Homoeopathy, Nasopharynx

INTRODUCTION:

An acute, self-limiting viral infection of the upper respiratory tract that affects the nose, sinuses, pharynx, and larynx is known as the common cold. Either direct or indirect hand contact with an infected person's secretions or an aerosol containing the secretions and virus can spread the virus. ⁽²⁾

ETIOLOGY:

Children get colds more frequently than adults do each year because of their developing immune systems and the close physical contact they have with other kids at creche or school. ⁽⁵⁾The more than 200 distinct human rhinoviruses are the most prevalent pathogens linked to the common cold; however, numerous virus families can also cause the illness. Rhinoviruses cause over 50% of colds in adults and children. Adenoviruses, human metapneumoviruses, respiratory syncytial viruses, and parainfluenza viruses are some of the other viral causes of the common cold in young children. ⁽⁴⁾

PATHOGENESIS:

Three methods are used by viruses that cause the common cold to spread: direct hand contact (self-inoculation of one's own nasal mucosa or conjunctivae after touching a contaminated person or object), inhaling airborne small-particle aerosols from coughing, or deposition of large-particle aerosols that are released during a sneeze and land on nasal or conjunctival mucosa. ⁽⁴⁾

Common cold symptoms seem to be caused by an influx of polymorphonuclear cells (PMNs) and the production of cytokines and other mediators by infected nasal epithelial cells. ⁽⁶⁾

EPIDEMIOLOGY:

Children get six to eight colds a year on average, while adults get four to six. Thirty percent of all school absences and forty percent of all work missed are due to colds. ⁽³⁾ Although colds can occur at any time of year, their occurrence is highest from early autumn to late spring, which is indicative of the seasonal prevalence of the viral pathogens linked to cold symptoms. Early autumn (August–October) and late spring (April–May) are when rhinovirus infections are most common in the northern hemisphere. Young children typically get six to eight colds a year, but 10 to 15% of them get at least 12 illnesses. As people age, the prevalence of disease declines; by maturity, there are only two to three illnesses annually. ⁽⁴⁾

RISK FACTORS:

The following elements may make catching a cold more likely:

- **Age:** Young children and infants are more susceptible to colds than adults, particularly if they attend daycare centres.
- **Compromised immune system:** Your risk is increased if you have a chronic illness or a compromised immune system.
- **Season:** In the autumn and winter, colds are more common in both adults and children.
- **Smoking:** The risk of getting a cold is increased by smoking or being around second-hand smoke.
- **Exposure:** Getting a cold is more likely when you're in a crowd, as at school or on an aeroplane. ⁽⁷⁾

CLINICAL FEATURES:

Symptoms of a cold usually peak within 2 to 3 days and can include:

- Sneezing
- Stuffy nose
- Runny nose
- Sore throat
- Coughing
- Mucus dripping down your throat (post-nasal drip)
- Watery eyes
- Fever (although most people with colds do not have fever)

The nose produces clear mucus when cold-causing viruses initially invade the sinuses and nose. This aids in clearing the sinuses and nose of viruses. Mucus may turn white, yellow, or green after two or three days. This is typical and doesn't indicate that you require an antibiotic. Some symptoms, particularly a cough and runny or stuffy nose, can last for ten to fourteen days. Over time, the symptoms ought to become better. ⁽⁸⁾

HOMOEOPATHIC TREATMENT:

Aconitum (monkshood): This remedy is most effective in the first twenty-four hours following the onset of a cold. The child usually gets a cold or cough after being exposed to dry, chilly weather. She has a dry, raspy, croupy cough when she wakes up, and it gets worse at night and after midnight. She experiences limited expectation, shortness of breath, and a dry mouth. The cough is worst when you're cold, drinking cold water, lying on your side, smoking, and sleeping. ⁽⁹⁾

Allium Cepa (onion): This classic cold cure works well for children who have a lot of burning, fluid nasal discharge that gets worse in a warm atmosphere and better outside. Just wiping the child's nose will hurt since the nasal discharge will irritate his nostrils. He might also be experiencing a lot of bland (non-burning) eye tears. He rubs his eyes a lot, and they are red. Along with intense sneezing, he also frequently experiences a raw, tingling feeling in his nose. There are occasions when the discharge begins in the left nostril and shifts to the right. On occasion, the child may get a congestive headache in the front of the head. ⁽⁹⁾

Anas barbariae (the heart and liver of a barbery duck): This medication, which is usually marketed under the name "Oscillocoquinum," is mainly useful in treating influenza, but homoeopaths have also discovered that it can help treat the common cold. Although there are no recognised symptoms to base therapy on, it has been shown to be highly successful when taken within 48 hours of the onset of symptoms. Think about administering it if you are unsure about what other medication to administer. ⁽⁹⁾

Arsenicum Album (arsenic): These kids have a burning discharge from their noses that irritates their top lip and nostrils. They are susceptible to cold air and drafts and are quite cold. In fact, any variation in temperature may cause them to sneeze. The cold normally starts in the nose and travels to the throat; generally, a separate treatment is required after it reaches the chest. Their mouths are dry, which makes them extremely thirsty, yet they can only drink sips of water at a time. ⁽⁹⁾

Belladonna (deadly nightshade): When nasal discharge abruptly stops and is replaced by a congestive, typically pounding headache and high fever, this treatment should be taken into consideration. ⁽⁹⁾

Bryonia (wild hops): Children who require this treatment, like those who require Belladonna, have a more noticeable headache discomfort over the forehead but little to no nasal discharge. But these kids have a subtle ache instead of a pounding one. They frequently sneeze, which can hurt the stitches on top of the head. The headache gets worse the less nasal discharge there is. They may have a dry cough in addition to having a dry mouth and throat. They have a great desire for cool beverages. In a heated room, they feel worse. ⁽⁹⁾

Calcarea carb (calcium carbonate): For babies or kids who get a lot of colds and have the usual calc carb condition, this treatment is recommended. Even though they like iced drinks, these kids are cold and extremely sensitive to anything cold.

Being chilly may cause them to get a cold. Their sweat is sour, and they perspire a lot. Additionally, their stools smell sour. These kids are usually chubby, fair-skinned, and have weak muscles. In addition to tonsil and lymph node enlargement, they may experience a sore throat. Due to lose mucus in the chest and throat, they have rattled breathing and a thick, yellowish nasal discharge. ⁽⁹⁾

Euphrasia (eyebright): Children that require Euphrasia have a bland nasal discharge and a lot of burning tears in their eyes. The scorching tears cause the cheeks and the whites of the eyes to turn crimson. In the open air, the eye troubles worsen.

Sneezing is frequently accompanied by copious, bland nasal discharge, which is worse at night, when lying down, and in windy conditions. A harsh cough and raspy voice are the result of the cold spreading to the larynx after a day or two of these frequent discharges. Lying down helps to relieve the cough, which is worse during the day. ⁽⁹⁾

Ferrum phos (iron phosphate): Children who have blood in their nasal discharge or who experience head colds along with nosebleeds can benefit from this treatment. ⁽⁹⁾

Gelsemium (yellow jessamine): Children that require this treatment sneeze, have watery nasal discharge, and have a full nose. Fever, body pains, general exhaustion, headache pain, and occasionally a sore throat can accompany this cold.⁽⁹⁾

Hepar sulphur (calcium sulphide): Children who have had the least amount of exposure to cold air are the ones who should use this remedy. Their noses and nose bones hurt a lot, and they have heavy, yellow nasal discharge. Cold air can cause irritation to the nasal passages. These kids occasionally get headaches at the same time. They are irritable and touch sensitive.⁽⁹⁾

Kali bichromicum (potassium dichromate): Children who require this treatment typically have stringy, ropy, yellow mucus. This medication is helpful when kids have a thick, viscid nasal discharge. In addition, they could have post-nasal drip with stubborn mucus and soreness at the nose root, which is better relieved by packing it.

A persistent propensity to blow the nose could exist. Being outside or exposed to cold makes the discharge and sneezing worse. Warm beverages can ease the swollen throat that some kids occasionally experience. A cough could also happen at the same time.⁽⁹⁾

Natrum mur (sodium chloride): Children who frequently suffer colds and whose symptoms fit specific Natrum mur features are most frequently treated with this medicine. The symptoms of these kids usually appear following an emotional event, particularly bereavement. Unspoken grief brought on by death, divorce, unrequited love, or homesickness might eventually manifest as a variety of physical ailments. They lose their sense of taste and smell, sneeze frequently, and have a lot of watery discharge coming from their eyes and nose. The nasal discharge may eventually result in thick white mucus and chronic nasal congestion. They typically spit up a lot of mucus in the morning, which makes their symptoms worse. The cold may be accompanied by cold sores or dry, cracked lips.⁽⁹⁾

Nux vomica (poison nut tree): These kids get colds when they overindulge in rich foods or when they experience long-term mental or emotional stress. The nose swings between a dry, clogged nose and a fluid discharge. Normally, the discharge is blocked at night and flows freely during the day. Additionally, this medication is frequently used to treat infant sniffles.⁽⁹⁾

Pulsatilla (windflower): Children who get acute or persistent colds are frequently treated with this medication. Their mucus is usually thick, yellow, or greenish, and their discharge is bland—that is, it doesn't burn or irritate the skin of the face or nostrils. Their nasal congestion, which causes mouth breathing as they sleep, is greater at night, especially when they are lying down. The sides of nasal congestion tend to alternate. This congestion is more fluid outside and worse in a warm environment. Overindulging in rich or fatty foods can occasionally cause them to get a cold.⁽⁹⁾

CONCLUSION:

Homoeopathic physicians use repertorial analysis and individualisation to choose the optimum medication for a variety of ailments. According to Aphorism 270-Foot in the Fifth and Sixth Editions of the Organon of Medicine, susceptibility determines the appropriate potency.⁽¹⁰⁾

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