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"A REVIEW ON RHEUMATOID ARTHRITIS: SCOPE OF HOMOEOPATHY IN THE TREATMENT OF RHEUMATOID ARTHRITIS"

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ABSTRACT:

Rheumatoid arthritis is a severe inflammatory, auto-immune condition that damages the lining of the joints and causes cartilage to deteriorate and bulge. Rheumatoid arthritis limits a person's ability to move normally and causes pain, impairment, and difficulty in the joints. The most prevalent rheumatic disease is rheumatoid arthritis, and the use of dubious medications to treat it has been limited. Homoeopathy adheres to the law 'Similia Similibus Curentur' and treats the person as a whole by performing individualization and choosing constitutional medicine, there is a lot of room for treating this illness with homoeopathy. This is because homoeopathy stops the recurrence of auto-immune diseases like rheumatoid arthritis, psoriasis, and others without causing additional suffering or side effects.

KEYWORDS: Homoeopathy, Rheumatoid arthritis, autoimmune disease, Constitutional Medicine

INTRODUCTION:

Rheumatoid arthritis (RA) is one of the most prevalent inflammatory, autoimmune diseases that affects about 1-2% of the world population. Women are more likely to get affected than men.¹ It causes persistent inflammation of the joints which is spurred on by the body's immune system destroying connective tissues when certain unfavourable factors are present. The host cells' presence of particular proteins like HLA DR4 results in the development of antibodies (IgM) against connective tissue. As a result, the tissues around the joints and joints experience chronic inflammation.² The onset of the disease is insidious, beginning with prodromal of fatigue, weakness, joint stiffness, vague Arthralgia, and myalgias, followed by pain and generally symmetrical pattern of joint swelling, particularly in the hands, wrists, and feet.³

Medical treatment for arthritis is still symptomatic and relies on nonsteroidal anti-inflammatory drugs, analgesics, and antirheumatic medications that seek to change some of its pathophysiology despite the rising interest in understanding the fundamental causes of the disease. Current medical therapies do not always prevent the long-term progression of these disorders, and surgery may still be required to regain mechanical function in the major joint.⁴ Currently, homeopathy is most often used by people with rheumatoid arthritis.

EPIDEMIOLOGY

RA affects 30 people out of every 10,000 people. Ages 40 to 60 are when the incidence is at its highest. The prevalence rate is 1%, and three to five times as many women as men are affected. 1.5

ETIOLOGY

This illness is believed to be caused by multiple factors, including both genetic and environmental influences.

PATHOPHYSIOLOGY

- Pathogenesis involves multiple factors, including both genetic and environmental influences.
- > Immune cells and soluble inflammatory mediators an important in the pathogenesis, although the relative contribution of individual components remains uncertain.
- > The proliferation of cells in the synovial layer of the joint, together with infiltration by various cell populations, as orchestrated by cytokines, chemokines, growth factors, and hormones, produces a locally invasive pannus that is capable of invading and ultimately destroying cartilage, bone, and surrounding soft tissues.^{6,7}

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CLINICAL FEATURES

- Signs and symptoms may vary in severity, there may be usually the periods of flare-up alternating with the period of remission. The diagnosis of RA is primarily Clinical.
- > Acute or episodic onset is possible, but RA typically manifests as symmetrical polyarthritis affecting the tiny joints of the hands and feet.
- > Inflamed joints become swollen, painful, and stiff.
- > Joint pain is usually more prominent and persistent at rest, at night, and during activity. Prolonged early morning stiffness up to half an hour is also a key diagnostic feature suggestive of inflammatory disease.
- RA may also involve the cervical spine, causing pain in the neck and occipital headache.
- > RA may also affect the temporomandibular joint.
- Inflammation gradually spreads from the joint's synovium to other surrounding structures, such as the tenosynovium of tendons, ligaments, other soft-tissue structures, and bone, as a result of the untreated disease. Subcutaneous nodules can occur in more severe diseases and are associated with a worse prognosis.
- Extra-articular features are common and may involve multiple organs, including the skin, eyes, lungs, and blood vessels.

DEFORMITIES







Swan neck deformity

Boutonniere Deformity

Piano Key Deformity







Hallux Valgus Deformity



Rheumatoid nodules

NON-ARTICULAR CLINICAL FEATURES 5, 6,7,8

A. Soft tissue surrounding joints: -

- 1. Rheumatoid nodules are found in about 20% of cases. They are most often felt on the ulnar surface of the forearm below the elbow. Patients with nodules are usually seropositive.
- 2. Bursitis: The olecranon and other bursae may be swollen
- 3. Teno-synovitis: Particularly affecting the flexor tendon in the palm of the hand.
- 4. Muscle wasting around the affected joint.

B. The eyes

- 1. The most prevalent eye condition in RA is secondary Sjogren's syndrome, which affects 15% of patients (Kerato-conjunctivitis sicca), followed by xerostomia (dry mouth).
- 2. Scleritis can develop and result in painful red eyes.

C. The nervous system:

- 1. Carpal tunnel syndrome is the commonest
- 2. Poly neuropathy occurs rarely causing glove and stoking sensory loss and sometimes motor weakness

D. The spleen, lymph nodes and blood:

- 1. Palpable lymph nodes are common, usually in the distribution of the affected joint.
- 2. The spleen may be enlarged. RA with splenomegaly and neutropenic is known as Felty's syndrome
- 3. Anaemia: Usually normochromic and normocytic anaemia is seen
- 4. Thrombocytosis may occur.

E. The lungs:

- 1. Pleural effusion: commonest, the fluid has a high protein and low sugar content
- 2. Rheumatoid nodules in the lungs can be up to 3 cm in diameter.

3. Small airway disease is commoner in a patient with RA smoke than in normal people who do not smoke.

F. The heart

A pericardial rub is often heard in patients with RA.

G. The kidneys:

RA is a common cause of amyloidosis affecting the kidney. It usually presents as proteinuria and may go on to renal failure or to nephritic syndrome. ^{6,7,8}

DIAGNOSTIC APPROACHES 7,8

1. Clinical criteria: For at least six weeks, the clinical manifestations must have present. The joints feel hot, swollen and tender to touch, generalized lymphadenopathy may also be present.

2. Laboratory investigation: -

- Rheumatoid factor positive, Anti-CCP antibodies present, ESR High, CRP high, WBC Count increased, Antinuclear test positive, Thrombocytosis, Mild normocytic anaemia.
- -Arthrocentesis of synovial fluid: Straw coloured with increased neutrophils.

3. Radiology: - (Joint imaging) Plain radiography, MRI, Ultrasound

Sequence of change is- Periarticular osteopenia with soft tissue swelling, loss of joint space, erosions at joint margins, and deformities such as a subluxation or complete dislocation of affected joints.

4. Synovial biopsy: - Villus formation with thickening of synovial layer and infiltration with abnormal cells. (Rheumatoid pattern).

Differential diagnosis: -

- 1. Infectious arthritis: Presenting with pain and tenderness caused by a virus (rubella, rhinovirus type-7, Echovirus, E-B Virus, hepatitis C), Bacterial (Mycoplasma, Lyme disease).
- 2. Crystal arthropathies: Gout and the disorder known as calcium pyrophosphate dihydrate deposition.
- 3. B27-associated arthropathies, usually present as oligoarthropathy. (Psoriatic, reactive and enterohepatic) 10,11

FEW RESEARCH STUDIES/CASE REPORTS FOR EVIDENCE-BASED MEDICINE (TABLE):

Priyanka et	study	4:4			
Privanka et		participants	analysis	Assessment Scale	
	Pilot study	40	Paired t-test	Disease activity	Statistically significant values were found that are favouring the
ai, 2022				score 28	found that are favouring the individualised homoeopathic treatment
2. Kundu et al, 2020	An Open, Observational	50	Paired t-test	DAS28 and RADAI	Statistically significant reductions in both
	study			(Rheumatoid Arthritis	DAS28 score & RADAI score over 4 months of individualised
				Disease Activity Index)	homoeopathic treatment.
4. Shah et al, 2019	Multi-centric,	91	-	-	Homoeopathic medicines are useful in managing arthritic
	study				disorders.
5. Gupta et al, 2012	Case reports	NA	NA	NA	Miasmatic Individualised Homoeopathic medicines showed improvement in the symptomatology of RA patients
	al, 2020 Shah et al, 2019 Gupta et al,	Kundu et An Open, al, 2020 Observational study Shah et al, Multi-centric, 2019 observational study Gupta et al, Case reports	Kundu et An Open, 50 al, 2020 Observational study Shah et al, Multi-centric, 91 2019 observational study Gupta et al, Case reports NA	Kundu et An Open, 50 Paired t-test al, 2020 Observational study Shah et al, Multi-centric, 91 - 2019 observational study Gupta et al, Case reports NA NA	Kundu et An Open, 50 Paired t-test DAS28 and al, 2020 Observational study (Rheumatoid Arthritis Disease Activity Index) Shah et al, Multi-centric, 91 Observational study Gupta et al, Case reports NA NA NA NA

Priyanka et al, (2022) have conducted a pilot study on the efficacy of individualized homoeopathic medicines for pain management and treatment of rheumatoid arthritis. In this study total of 40 patients were participated and given homoeopathic medicines in centesimal potencies and sometimes mother tinctures, LM potencies were also prescribed according to the symptom severity of the patients and follow-ups were done every 15 days for 6 months for 16 patients only. The study showed that individualized homoeopathic medicines are beneficial in reducing the DAS28 score. It reduces inflammation of joints as indicated by lowering CRP values and thus reduces joint tenderness, swelling and redness which facilitate movement. ¹²

Kundu et al, (2020) have conducted an open, observational study to evaluate the possible role of homoeopathic treatment in RA by determining changes in the severity of complaints and quality of life. From this study, it is evident that individualized homoeopathic medicines can significantly reduce the signs and symptoms of rheumatoid arthritis patients.¹³

Shah et al, (2019) conducted a multi-centric, observational study to evaluate the role of Rhus toxicodendron in its Various Attenuations on Patients with Rheumatic Disorders. This study showed the efficacy of Homoeopathic medicine Rhus tox in its various potencies showed favourable results in RA patients.¹⁴

Gupta et al, (2012) in the case reports of the 'HOMOEOPATHIC APPROACH IN THE TREATMENT OF RHEUMATISM THROUGH CASE STUDIES' have mentioned that Homoeopathic medicines, showed improvement after administration of homoeopathic remedies selected on the basis of repertorization through Radar (version 9) using synthesis repertory. 15

HOMOEOPATHIC APPROACH FOR RHEUMATOID ARTHRITIS:

In homoeopathy, there is no such thing as a prescription for a specific diagnostic entity. According to the homoeopathic approach, sickness only manifests as abnormal functions and sensations when there is a changed state of life and mind. A homoeopathic doctor views a patient's entire set of altered sensations and functions as the disease. The actual portrait of the disease comprises all of its symptoms.

The totality of symptoms should be considered in treating a patient, which is the only guide of the homoeopathic treatment.

The homoeopathic physician tailors the remedy based on the individual aspect of the person.

FEW RUBRICS FOR RHEUMATOID ARTHRITIS:

Extremities-pain rheumatic 17

Abrot., acon., act-sp., aesc. agar. alumn., am-m., ant-t., apis., arg-m., Arn., ars-i., Ars., Aur-m-n., aur., Bad., bapt., bell., Benz-ac., Bry., cact., calc-p., calc-s., calc., camph., cann-s., caps., carb-ac., carb-s., carb-v., card-m., caul., Caust.,cedr.,Cham.,Chel., chin-a., chin., cimic., clem., Colch., coloc., corn., crot c., crot-h., crot t., cupr., dig., dulc., elaps., eup-per., eupho., ferr ar., ferrp., ferr., Form., gels., grat., guai., ham., hell., hep., hydrc., ign., kali-ar., kali-bi., kali-c., kali-chl., Kali-i., kali-p., kali-s., Kalm., lac-c., lach., lact-ac., led., Lyc., mag-c., mag-p., mag-s., Med., meph., merc-i-f., merc-i-r., merc -sul., merc., mez., mill., mur-ac., Nat-a., nit-ac., nux-m., nux-v., ol an., pall., petr., ph-ac., phos., Phyt., plat., psor., Puls., ran-b., Rhod., Rhust., ruta., salac., Sang., Sars., sec., sep., sil., spig., squil., stann., stel., stict., Sulph., syph., tarent., ter., teucr., thuj., valer., verat., viol-t., zinc. right to left: Lyc.

left to right: Lach., naja., rhus-t.

acute: Acon., ant-c., ars., asc-c., bell., Bry., calc-s., caul., cham. chel., chin-s., chin., cimic., Colch., dulc., glon., ign., kalibi., kalm., lacc., lach., Merc., nuxv., puls., rhod., Rhus-t., sal-ac., sang., verat.

alternating with gastric, symptoms: Kali-bi.

chest affection: Led.

diarrhoea: Cimic., dulc., kali-bi.

dyspnoea: Guai. eruptions: Crot-t., staph.

eruptions: Crot-t., staph

hæmorrhoids: Abrot. pain in heart: Benz-ac.

pulmonary troubles: Kali-bi.

cold,after a: Acon., arn., bry., calc-p., calc., coloc., dulc., gels., guai., merc., nit-ac., ph-ac., rhus-t., sulph.

amel.: Guai., lac-c., Led., Puls., Sec.

becoming: Ph-ac., Rhus-t.

weather: Ars., Bry., Calc-p., carb-v., colch., dulc., kali-bi., kalm., nit-ac., nux-v., ph-ac., phos., puls., rhod., Rhus-t., sul-ac., tub.

Diarrhoea, checked: Abrot.

chronic, in: Nat-s.

following: Kali-bi.

drive him out of bed: Cham., ferr., lac-c., led., Merc., sulph., verat.

eruptions, acute, after: Dulc.

gonorrhoea, after suppressed: Clem., con., cop., crot-h., daph., alm., lyc., Med., phyt., puls., sars., sep., sulph., Thuj.

injured parts: Caust.

mercury, abuse of: Arg-m., arn., asaf., bell., calc., carb-v., cham., Chin., Guai., Hep., kali-i., lach., lyc., mez., nit-ac., ph-ac., phyt., podo., puls., rhod., Sars., sulph., valer. overheated and exertion from: Zinc.

perspiration, with: Form., Merc., sulph., til.

spring: Colch.

suppressed hæmorrhoids: Abrot.

syphilitic: Benz-ac., fl-ac., kali-bi., Kali-i., kalm., merc., nit-ac., phyt.

warm weather, in: Colch., kali-bi.

first warm days: Bry.

in places least covered by flesh: Sang extending, upward: Kalm., Led.

to lower limbs: Kali-c.

Thunderstorm agg: Med, Rhus-t

Touch agg: Chel Walking on amel: Rhus-t

Wandering, sifting: Amn-m, Carb-s, Kali-s, Lac-c, Puls

Warmth agg; Sec

Amel: Ars, Kali-bi, Kali-p, Mag-p, Rhus-t, Sil

Of bed agg: Merc Amel: Ars, Rhus-t

Wet weather agg: Calc, Colch, Merc, Puls, Rhod, Rhus-t Verat

Pain joint rheumatic:

Aur, bry, Calc-p, Caust, Colch, Fer-p, Form, Iod, Kali-bi, Lyco, Rhus-t,

Spig

Gonorrhoea after suppressed: Med, Thuj

Sour wine, after: Ant-c

Wandering: Aur, Kali-bi, Lac-can, Puls

Warmth agg: Led, Puls

Amel: Ars

Warmth of bed agg: Led

Pain upper limb, rheumatic: Bryo, Calc-p, Colch, Ferr, Merc, Rhus-t, Sang

Shoulder, rheumatic: Colc, Ferr, Med, Rhod, Rhus-t, Sulph

Upper arm, rheumatic: Ferr, Rhus-t, Sang

Wrist, rheumatic: Ruta, Rhus-t.

Pain, Hand, Rheumatic: Caul, Colch, Rhus-t

Fingers, rheumatic: Caul Pain lower limb, rheumatic: Led Hip, rheumatic: Colch, Rhus-t

Knee, rheumatic: Bryo, Calc, Kali-c, Rhus-t.

Foot, rheumatic: Hep, Led. Heel, rheumatic: Rhod Toes, rheumatic: Aur

Arthritic nodosities: - abrot., agn, ant-t, APIS, arn, aur, BENZ-AC, bry., CALC, CALC-FL, calc-p, calc-s, carb-an, caust, cic, clem, colch, dig, elaps, fago, form, GRAPH, gua, hep, iod, kali-I, kalis, LED, LITH, LYCO, mang, meny, nat m, nux.v, plb, puls, ranb, rhod, rhust, sab, sil, staph, sulph, sal ac,

urt.u..

HOMOEOPATHIC THERAPEUTICS FOR RHEUMATOID ARTHRITIS 18, 19

Arnica – used in chronic arthritis when patients complain of soreness and bruised sensation in joints. Touch worsens the pain, everything on which they lie feels very hard. Rheumatism begins from the lower limbs and then extends upwards.

Belladonna – Indicated for the acute stage of arthritis. When there is abrupt redness and swelling in joints, accompanied with acute throbbing pain. The joints are quite hot to the touch and seem red. It is worse in cold but improves with warmth.

Bryonia –The patient complains of severe stitching pain in small joints and swollen, hot, red joints. Every spot is painful on pressure. Relieved by complete rest. least movements aggravate the patient.

Rhus tox – useful for rheumatoid arthritis when there is severe pain and stiffness, which is worse in the morning or cold; first movement makes the pain unbearable; the patient feels better by continuously moving around, and warmth relieves the pain. The patient becomes restless with the pain. tearing type of pain in tendons and ligaments.

Rhodoendron – Rheumatic pains worsening before a storm are guiding symptoms of this remedy—tearing pains, especially on the right side. Pain is worse at rest.

Ruta graveolens – Arthritis with much stiffness worse from cold and damp weather and also from overuse of joints.

Ledum pal – Painful swelling of joints relieved by cold application, worse from warmth. The usual affected areas are ankles and feet—rheumatism begins from the feet and extends upwards.

Calcarea carbonicum – Arthritis with nodosities in the affected joints. Pain and stiffness of joints aggravated by damp weather. Patients are easily fatigued from the slightest exertion, and chilliness and laziness are indications for the remedy.

Calcarea flour -swollen joints, hard nodosities, and joint injury history. Pain is better by warmth and motion.

Pulsatilla —Pain changes its place from one joint to another if the pain is not localized. Symptoms tend to be worse in warmth and heat, better from cold application, fresh air

Dulcamara – Pain and stiffness in joint worse from damp weather. Rheumatic affections after acute skin affection.

Colchicum – Arthritis is worse in warm, wet weather. Worse, climate change commonly affects the small joints of the hands and fingers. The slightest motion aggravates the pain.

Caulophyllum – Arthritis commonly in females. Affecting the small joints, especially the hands, fingers, toes, and ankles. Pain and stiffness alternates from one joint to another.

Guaiacum - Rheumatism of small joints, especially the wrist and fingers, worse from warmth and better from cold application

Kali carbonicum – Extremely stiff and painful joints in the early morning

Causticum - Rheumatic pains are better by warmth, especially the heat of bed, and restless legs at night, the patient has an unsteady gait

Aurum metallicum – This is indicated when the patient complains of wandering pain, especially at night. Tearing pains in joints at night are especially indicated when joints deform.

Medorrhinum-

Intense burning heat begins in the neck's nape and extends down to the spine. Burning of hands and feet, wants them uncovered and fanned. The insatiable craving for liquor, salts, sweets, ice, acid, orange, and green fruit. Weakness of memory, inability to remember names—intense, restless, and fidgety legs and feet.

Conclusion:

Homoeopathy works best when patients are treated individually based on their unique symptoms following homoeopathic principles. Based on the symptomatology, early diagnosis increases the patient's chance of recovery. However, most patients visit us in extremely late conditions where the disease has progressed deeply and abnormalities have already developed in which all systems have been severely compromised. Curing such illnesses might be difficult. In homoeopathy we can treat Rheumatoid arthritis based on individualistic, constitutional treatment and giving anti-miasmatic remedies.

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