

## Efficacy of Lesser Known Homeopathic Medicines in the Treatment of Allergic Rhinitis

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**Abstract:** Research Question: Assessment of efficacy of lesser Known homeopathic medicine in the treatment of allergic rhinitis Jaipur, (Raj) India.

**Background:** Allergic rhinitis is a global health problem that is often treated with homeopathy. The objective were to evaluate the effectiveness of homeopathic treatment of allergic rhinitis and to assess the influence of Miasm in the cases of allergic rhinitis.

**Methodology:** A hospital based observational study was carried out on Dr. M.P.K. Homoeopathic Medical College, Hospital and Research Center, Jaipur. Socio-demographic data in details were collected as per pre-designed proforma. Data collected were analysed and inferred with chi-square test.

**Result:** The overall response of the treatment with the help of 11 lesser known Homoeopathic medicines. It was observed that out of 110 patients, 50 (45.45%) patients were relieved, 27 (24.54%) patients had slight improvement, 22(20%) patients showed no response while rest 11 (10%) patients did not return.

This study reflects the predominance of PsoraMiasm in the cases of allergic rhinitis. Out of 110 cases, 62 (57.27%) cases were purely Psoric, 14 (12.72%) cases were purely Sycotic, 6 (5.45%) cases were Tubercular, while 27 (24.54%) cases were the mixture of Psora-sycosis Miasm.

**Conclusion:** There were no side effects during the treatment and it can be concluded that lesser known medicines can be help the patient to take a new lease on life.

**Key words:** Allergic Rhinitis , Outcome, Miasm, Homeopathic medicine

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### I. Introduction

Enter the world of infamous allergy. One of the most common disease conditions world wide, allergy affects one out of four Indians (Times of India) and 10 millions of Americans ([www.allergy.com](http://www.allergy.com))<sup>1</sup>

It is one of the 6<sup>th</sup> leading cause of chronic disease. Rhinitis affects quality of life, performance and attendance at school , and work<sup>2</sup> It has significant impact on healthcare costs<sup>3</sup>. Regardless of age, gender of race, almost anyone may develop allergies. Allergic or Atopic disease are extremely important in general health picture since 10% of the people at some time during their life suffer from major allergy and another 40% suffer from a minor allergy, yet there is little concern for this major public health problem (Williams CC 1968)

The prevalence of AR is also high in developing nations: rhino-conjunctivitis was 15.3% amongst 11 to 15 year old school-going children in northern Africa<sup>4</sup>.

Allergic sensitization can involve practically any tissue or body to produce a multitude of manifestations but due to its location, the nasal mucous membrane is frequently overwhelmed by excessive allergen contact giving rise to a typical triad of symptoms-rhinorrhoea, nasal obstruction and paroxysmal attack of sneezing collectively called Allergic rhinitis.

Since J.P. Longlais (1906) first suggested allergy as the cause of perennial rhinitis, many forms of treatment are in use from antihistamines (Dolouity et al 1971) autohaemotherapy, intratubinate injection of steroids (Baker et al 1962 & Gill 1966) to the intranasal dexamethasone aerosol (Smith 1965). These forms of treatment are not always useful nor are they very potent in face of prolonged exposure to the antigen. In any event, these drugs do not provide anything more than a short-lived relief of symptoms, leaving the fundamental immunologic disorder unaffected. In such disease where all other systems of medicine fail, Homoeopathy has an important role in improving the quality of life.

Several trials have evaluated the effectiveness of homeopathy for Allergic Rhinitis. Results from these trials are mixed and their quality is poor. One systematic review involving a single homeopathic remedy (*Galphimiaglauca*) for treating Allergic Rhinitis has been published in English<sup>5</sup>.

For a long time allergic complaints have been considered incurable nearly due to ignorance about the amazing benefits of Homoeopathy.

Homoeopathy attempts to stimulate the body to heal itself. So instead of trying to dry up the running nose from a cold with antihistamine a homoeopathic remedy will stimulate the body to move in the direction it is already going and in the process clear the running nose. It is a system that looks at an individual and not the disease.

Homoeopathy, on the other hand looks for the remedy that will cure the individual keeping in mind his individual susceptibility. Dr Kent in his lectures has said “ The homoeopath recognizes a wide range in susceptibility, including things that the allopath is not acquainted with. There may be a chronic idiosyncrasy from a chronic miasm and an acute idiosyncrasy from an acute miasm. There are certain individuals in every community that cannot ride in the country because of their susceptibility to hay fever; others cannot bear the smell of flowers in the room because of becoming sick, some will get sick from the smell of roses.<sup>6</sup> This study was conducted with aims to find the effectiveness of lesser known Homoeopathic medicines in treating allergic rhinitis and to assess the influence of Miasm in the cases of allergic rhinitis.

## **II. Materials & Methodology**

The hospital based, observational follow up study was conducted in the O.P.D. of Dr. M.P.K. Homoeopathic Medical College, Hospital and Research Center, Jaipur. 110 patients suffering from seasonal and perennial allergic rhinitis were either previously diagnosed or else diagnosed in O.P.D. by the help of various presenting symptoms, case taking and investigations were included in the study. The patients who did not continue the treatment upto 6 months and patients with immunodeficiency were excluded from the study. The full detail regarding the case were recorded on the predesigned and pretested Proforma attached in the appendix. Each medicine was given to 10 patients on the basis of symptom similarity. The potency was selected on the basis of individual susceptibility. Usually the cases were started with moderate potencies. The following eleven medicines were selected for the study with their indications<sup>7</sup> Agraphis Nutans-proneness to take cold on exposure to cold winds. Catarrhal conditions; obstruction of nostrils. Tendency to free discharge from mucous membranes

- i) *Ambrosia Artaemesifolia*: A remedy for hay-fever, lachrymation and intolerable itching of the eye-lids. Respiratory tract entire length stopped up. Watery coryza; sneezing; watery discharge.
- ii) *Ailanthus Glandulosa*: Adynamia characterizes all its conditions. Mucous membranes hemorrhagic and ulcerative.
- iii) *Balasanum Peruvianum*: copious, purulent expectoration. thick discharge. Chronic, fetid, nasal catarrh.
- iv) *Eucalyptus Globulus*: Nose, Stuffed-up sensation; thin, watery coryza; nose does not stop running; tightness across bridge. Chronic catarrhal. Ethmoid and frontal sinus involved.
- v) *Elaps Corralinus*: black discharges. Cold things disagree. Fear of rain. Chronic nasal catarrh, with fetid odor and greenish crusts
- vi) *Justicia Adhatoda*: Highly efficacious medicine for acute catarrhal conditions of the respiratory tract (used in the beginning) lachrymation, with coryza, profuse, fluent, constant sneezing; loss of smell and taste; coryza with cough.
- vii) *Naphthaline*: Sneezing; eyes inflamed; painful; head hot. Hay-fever. Spasmodic asthma; better in open air
- viii) *Quillaya Saponaria*: acute catarrh, sneezing and sore throat. Most effective in the beginning of coryza, checking its further development, Colds with sore throat; heat and dryness of throat.
- ix) *Sinapis Nigra*: Mucus from posterior nares feels cold. Scanty, acrid discharge. Dry, hot, with lachrymation, sneezing; hacking cough; better lying down. Nostrils alternately stopped.
- x) *Trifolium Pratense*: Increased flow of saliva. Sore throat, with hoarseness.

The outcomes were an improvement of symptoms recorded in monthly basis individual symptoms which include any appropriate measures of nasal obstruction, running nose, sneezing, itching, and eye symptoms; adverse events. A number of subgroups, homeopathic potency, age groups, and types of allergic rhinitis (seasonal or perennial) were analyzed

**Statistical Analysis:** Data were presented as proportion and percentage and difference in proportion were Analyzed by using chi square test. The test of significance was kept as  $P < 0.05$ .

## **III. Result**

Among 110 allergic rhinitis patients with mean  $\pm$ SD (29.89 $\pm$ 12.65 (median 30 years; Range 1.5 to 62 years), maximum cases were observed in age group of 21-40 years in 61 (55.45%) cases, 26 (23.6%) patients were in the age group 1-20 years and 23 (21%) patients were in the age group 41-60 years and 78 (70.9%) patients were male and 32 (29.1%) patients were females. The Male:female ratio was 2.23:1

In the present study of, 44 (40%) were from rural area and the remaining 66 (60%) were from urban areas. According to season, 50 patients (45.5%) had perennial allergic rhinitis while 60 patients (54.5%) were found to suffer from seasonal allergic rhinitis. During the study it was observed that out of 110 patients of allergic rhinitis 20 patients (18.18%) had the genetic pre-disposition to allergic rhinitis.

Majority of the patients (90.90%) had a complain of sneezing.. Rhinorrhoea was observed in 98 (89.09%) patients. Amongst the 110 patients included in the study 46 (41.8%) reported to itching in nose and palate. It was also observed that 55 (i.e. 50%) patients of allergic rhinitis complained of nasal obstruction. Eye symptoms like lachrymation, burning, redness etc. were reported in 30 (27.27%) patients.

Associated symptoms were the symptoms that had no direct relation with the disease but were present in the patients of allergic rhinitis. It was observed that 5 patients (4.54%) of allergic rhinitis had fever. 20 patients (18.18%) reported of having sore throat along with the symptoms of allergic rhinitis. It was also observed that 11 patients (10%) of allergic rhinitis had a problem of premature greying of hair. Only 4 patients (3.63%) reported to have epistaxis. Urticaria was reported by 3 (2.72%) patients and similarly 3 (2.72%) patients suffered from allergic dermatitis.

Sinusitis, Bronchial asthma, polyp and otitis media were the most common complications found in the patients of allergic rhinitis during the study. Out of 110 patients of allergic rhinitis in the study only 34 developed complications. It was observed that 9 out of 34 patients (26.5%) who had complications, developed sinusitis. 18 out of 34 (53%) had developed bronchial asthma. 5 (14.7%) patients of allergic rhinitis developed nasal polyp. It was also observed that 2 (5.8%) patients had otitis media. Association of the medicines with complications, among all presented complications, polyp were significantly more (40%) observed in Sinapis Nigra ( $P < 0.001$ S)

This study reflects the predominance of Psora Miasm in the cases of allergic rhinitis. Out of 110 cases, 62 (57.27%) cases were purely Psoric, 14 (12.72%) cases were purely Sycotic, 6 (5.45%) cases were Tubercular, while 27 (24.54%) cases were the mixture of Psora-sycosis Miasm. Significant association of types of Miasm was observed with the type of medicines. Proportion of Psoric, was significantly more (90%) in Ailanthus Glandulosus users, Quillaya Saponaria users followed by 60% in Agrapgis Nutans, Ambrosia and Balsamum Peruvianum users. ( $P = 0.006$ S). Psora-Sycosis was significantly more (60%) of Naphthaline users followed by 50% of Trifolium Pratense users ( $P = 0.03$ S). Sycosis and Tubercular were significantly more in Trifolium Pratense ( $P < 0.01$ S)

In the research of lesser Homoeopathic medicines in the treatment of allergic rhinitis 11 medicines were prescribed to the patients according to the symptoms similarity and the following observations were made. Sinapis Nigra is the most effective medicine out of the total eleven medicines chosen for the study. Sinapis Nigra relieved 7 patients and 3 got slight improvement hence it can be concluded that Sinapis Nigra is 70% effective. During the study it was found that the next effective medicine for the treatment of allergic rhinitis is Quillaya Saponaria. Out of 10 patients, 7 patients got relief, 2 patients had slight improvement while one patient did not return hence it proved to be 70% effective. Ambrosia was also found to be 70% effective. 7 patients out of 10 who were prescribed Ambrosia got relief, 2 patients showed no relief while one patient did not return. Elaps Corralinus and Justicia Adhatoda both found to be 60% effective.

Naphthaline was found to be 50% effective while Eucalyptus Globulus was found to be 40% effective. Ailanthus Glandulosa was found to be 30% effective. Agrapgis Nutans and Trifolium Pratense both found to be 20% effective. Balsamum Peruvianum was found to be least effective medicine during the study. It proved to be only 10% effective in the treatment of allergic rhinitis.

The overall response of the treatment with the help of 11 lesser known Homoeopathic medicines. It was observed that out of 110 patients, 50 (45.45%) patients were relieved, 27 (24.54%) patients had slight improvement, 22 (20%) patients showed no response while rest 11 (10%) patients did not return.

#### **IV. Discussion**

In the present study an attempt was made to find out the effectiveness of 11 lesser known Homoeopathic medicines in the treatment of allergic rhinitis. It reveals that the prevalence of allergic rhinitis is very less in elderly age group. According to the literature on the website [www.allergy.com](http://www.allergy.com), the prevalence of allergic rhinitis is approximately equal between males & females. But in the study it was found that the prevalence of allergic rhinitis was more in males. No specific cause could be found for this sexual variation. Genetic predisposition plays a vital role in the development of allergic rhinitis in a patient. **P.L. Dhingra** in his book 'Diseases of Ear, Nose & Throat'<sup>8</sup> writes that chances of children developing allergy are 29% & 47% respectively of one or both parents suffer from allergic rhinitis diathesis. Psora is the causative and the most dominating Miasm in all the allergic diseases. In the words of Dr Kent<sup>9</sup> "When one is born with this sensitivity it is very tenacious and will sometimes persist, in spite of our best endeavours, to the end of life. If eradicated at all, it requires an antipsoric to get to the bottom of it. Hay fever is brought on in the fall and is supposed to be caused by the patient's over-sensitiveness to irritants that develop about that time; sometimes it is attributed to the hay that is curing in the fields at that time, sometimes to the different weeds that grow up then. Such patients have often been able to ferret out the thing that they are susceptible to. But psora is at the bottom of all these troubles."<sup>9</sup>

During the research work, 11 lesser known medicines were prescribed on the basis of symptom similarity and it can be inferred that Sinapis nigra is the most effective drug among the other eleven medicines studied during the study. It proved to be 70% effective. The other medicines, which were effective next to Sinapis Nigra, are Quillaya Saponaria and Ambrosia. Quillaya Saponaria relieved 7 out of 10 patients, 2 patients showed only slight improvement and 1 patient did not return. Ambrosia relieved 7 patients, 2 patients showed to

relief and 1 patient did not return. ElapsCorralinus and JusticiaAdhatoda proved to be 60% effective. It was observed that Naphthaline is 50% effective while Eucalyptus globulus was found to be 40% effective.

Ailanthus Glandulosa relieved 3 patients, 4 patients had slight improvement, 1 patient had no relief while 2 patient did not return hence it can be said that it was only 30% effective Agraphisnutans and TrifoliumPratense were found to be 20% effective and the drug that was found to be least effective during the study is BalsamumPeruvianum. It proved to be only 10% effective as it relieved only 1 patient. It was observed that the overall response of 11 lesser known Homoeopathic medicines in the treatment of allergic rhinitis was quite satisfactory. In the study of 110 patients of allergic rhinitis, 50 (45.45%) were relieved, 27 (24.54%) were had slight improvement while 22 (20%) patients showed no response.

In **Trompetter**<sup>10</sup> observed in his study, the individual symptoms improved in up to 89.5% of patients. 61.4% of patients became symptom-free or felt a clear improvement following the administration of study medication. In the current study, this amount of patients is more than 20% higher. This difference might be the result of different study populations, regional differences, changed weather conditions, etc.

**Passalacqua G et al**, observed that 3 to 4 percent of CAM (complimentary and alternative medicines) users use homeopathy and about 75 percent of patients seen by homeopathic practitioners report symptomatic improvement. However, meta-analyses and systematic reviews have repeatedly concluded that homeopathy is not different from placebo in the treatment of any medical disorder, including allergic rhinitis

**Goossens M, et al(2009)** observed an average improvement of a general quality of life score ranges from 24.0% to 66.7%, so the result achieved with the homeopathic complex remedy in the presented study (66.7%) might be at the upper end of range

**Collin P (2006)** observed the success rate of the homeopathic treatment is 87.6%.

## V. Conclusion

The research shows that lesser known medicine play an important role in the treatment of allergic rhinitis. The study depicts that 45% of patients got relief from the lesser known medicines and this is not a small number. The most effective remedies during the study were Sinapisnigra, Ambrosia and Quillayasaponaria. There were no side effects during the treatment and it can be concluded that lesser known medicines can help the patient to take a new lease on life.

Sneezing, Rhinorrhoea, Itching of nose & palate common nasal obstruction and eye symptoms are the most common symptoms of allergic rhinitis in descending order. Sinapisnigra, QuillayaSaponaria and Ambrosia are the most effective medicines (out of the 11 lesser known Homoeopathic remedies selected for the study) in the treatment of allergic rhinitis. Overall response of 11 lesser known Homoeopathic medicines in the treatment of allergic rhinitis was 45.45% An attempt is also made by this study to make the patient cognizant of his disease so that he can assess how to avoid the disease and also get it treated when needed.

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**Table 1 Characteristics of the Study Population**

Age Group in years	No. of cases	Percentage
1-20	26	23.64
21-40	61	55.45
41-60	23	20.91
<b>Sex</b>		
Female	34	30.91
Male	76	69.09
<b>Location</b>		
Rural	45	40.91
Urban	65	59.09
<b>Type of allergy</b>		
Perennial	50	45.45
Seasonal	60	54.55
<b>Family History Present</b>		
Present	11	10.00
<b>Genetic Predisposition</b>		
Present	20	18.18
Absent	90	81.82
<b>Symptoms</b>		
Sneezing	100	90.91
Rhinorrhoea	98	89.09
Itching (nose, palate)	46	41.82
Nasal obstruction	55	50.00
Eye symptoms	30	27.27
<b>Associated symptoms</b>		
fever	5	4.55
Sore throat	20	18.18
Premature graying of hair	11	10.00
Epistaxis	4	3.64
Urticaria	3	2.73
Allergic dermatitis	3	2.73

**Table 2. Association of Miasm and complications with drugs**

N=110	Miasm				Complication			
	Psora(N=63)	Psora-Sycosis(27)	Sycosis (14)	Tubercular (6)	Bronchial Asthma(18)	Otitis media (2)	Polyp (5)	Sinusitis (9)
AgrappisNutans (N=10)	6	4	0	0	0	0	1	0
Ailanthus Glandulosa(N=10)	9	1	0	0	0	0	0	0
Ambrosia (N=10)	6	1	3	0	4	0	0	1
BalsamumPeruvianum(N=10)	6	1	3	0	2	0	0	1
ElapsCorralinus (N=10)	5	1	0	4	2	1	0	0
Eucalyptus G(N=10)	4	4	2	0	1	0	0	3
JusticiaAdhatoda(N=10)	9	1	0	0	0	0	0	1
Napthaline (N=10)	3	6	0	1	3	1	0	0
QuillayaSaponaria(N=10)	9	1	0	0	1	0	0	0
sinapisNigra(N=10)	2	2	5	1	1	0	4	2
TrifoliumPratense(N=10)	4	5	1	0	4	0	0	1
P Value LS	0.006S	0.031S	0.002S	0.001S	0.087NS	0.51NS	<0.001S	0.23NS

**Table No 3 Homeopathic medicines with Outcome**

Medicine	No. of cases	Relieved	Slight Improvement	No Relief	Did not Return
Ailanthus glandulosa	10	3	4	1	2
Agraphisnutans	10	2	1	6	1
Ambrosia	10	7	0	2	1
Balsamumperuvianum	10	1	6	3	0
Elapscorralinus	10	6	1	2	1
Eucalyptus globules	10	4	2	1	3
Justiciaadhatoda	10	6	4	0	0
Quillayasaponaria	10	7	2	0	1
Napthaline	10	5	1	4	0
Sinapisnigra	10	7	3	0	0
Trifoliumpratense	10	2	3	3	2

Figure 1. Effectiveness of the medicines (%)

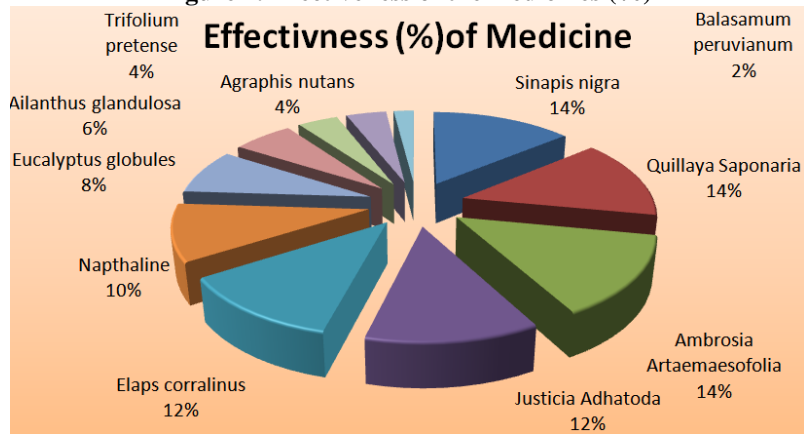


Figure :2 Overall Response of the medicines (%)

