

## Management of Epistaxis through Homoeopathic Simillimum 'Cactus Grandiflorus'- A Case Report

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### ABSTRACT:

Concomitant symptoms, as termed in homoeopathy, are those symptoms that have no relation to the leading symptoms or the pathology of the case but they are present in the patient. These symptoms seem to be of tremendous value for homoeopathic prescription and plays a pivotal role in homoeopathic practice. However, these symptoms are often neglected while case taking. There is a paucity of evidence generated in this field and this most important aspect of concomitant symptom, as described by stalwarts of Homoeopathy, remains untouched. The case report presented an acute episode of a chronic complaint of nosebleed with an accompanying symptom of constriction in the head. This was considered as the concomitant symptom and was given the supreme importance while making the prescription. *Cactus Grandiflorus* was found to be the single remedy indicating this symptom in synthesis repertory using Radar opus software. *Cactus Grandiflorus* was prescribed in 1000 C potency, 2 doses on the baseline visit, single dose consisted of four globules of size forty. The patient was completely relieved of the main complaint along with other associated complaints and no relapse was reported within six months. This case report is an attempt to bring into light the importance of concomitant symptoms to make successful homoeopathic prescriptions.

**KEYWORD:** *Cactus Grandiflorus*, Concomitant symptom, Epistaxis, Homoeopathy.

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### INTRODUCTION:

Epistaxis is a common emergency in age group 15-25 years with anterior nasal bleeding and 45-65 years with posterior nasal bleeding. Males are more prone to epistaxis than females. [1] It applies to patients with bleeding that is heavy, is long-lasting, or keeps coming back from the nostril, nasal cavity, or nasopharynx that is enough to need medical advice.[2] Venous

epistaxis tends to occur under age group 3-5 years which is of short duration while arterial epistaxis is found in older age groups with prolonged bleeding. In 98% cases, bleeding is from Little's area, i.e. anterior inferior angle of nasal septum.[3] Nosebleeds usually happen without an obvious cause. The common causes are external trauma, hypertension, disorders of blood vessels or clotting mechanisms and

upper respiratory tract infection. Other factors responsible for epistaxis are use of alcohol and drugs like platelet inhibitors.<sup>[4]</sup> Serious causes, like some blood, kidney, liver, heart, or genetic diseases, maybe tested for when other causes are ruled out.<sup>[2]</sup> Nosebleed is diagnosed by anterior rhinoscopy or with the help of a nasal endoscope. <sup>[5,6]</sup> Nasal cautery or a small electrical current are the conventional ways to treat epistaxis. If nosebleed keeps coming back surgery may be required.<sup>[2]</sup>

**Concomitant symptom in Homoeopathy:**

Concomitant had been derived from early 17<sup>th</sup> century Latin word meaning 'accompanying'. The Latin word, Concomitari = Con (together) + Comitari (with). English literature mentions several synonyms for the word concomitant viz. accessory or ancillary etc. The Oxford English Dictionary defines the word Concomitant both as a noun and as an adjective meaning "happening at the same time as something else".<sup>[7]</sup>

The reasoning process by which homoeopathy work are an examination of the patient, analysis and evaluation of the symptoms in each case and selection of the remedy. All the symptoms taken are analyzed by the process of induction to the generals of the case. The simillimum corresponds to Hahnemann's dictum of a striking, strange, peculiar, and unusual sign, which may be considered almost alone in choosing the remedy.<sup>[8]</sup>

The "totality" is that concrete form which the symptoms take when they are logically related to each other and stand forth as an individuality.<sup>[9]</sup>

Boenninghausen, a criminal lawyer by profession, used the concomitant for individualization of the drug and the patient. He followed the philosophy of the father of medicine, The Hippocrates of Kos, which was "not the disease but individual".

The Father of Medicine, Hippocrates, used the term to forecast the disease prognosis.<sup>[10]</sup> Boenninghausen used an expression of 'quibus comitibus' for the accompanying symptoms which demands greatest importance and consideration in ascertaining the remedy.<sup>[11]</sup>

Almost every case that comes to the attention of the physician presents two separate parts, firstly the part comprising the symptoms of which the patient complains, and secondly, those symptoms which he does not consider as having any relationship to the case. Concomitant symptoms are those which accompany or are associated with the chief complaint and occur at the same time, before or after the occurrence of the chief complaint.<sup>[12]</sup> The system of concomitants also makes homoeopathy distinctly safer, rendering it less dependent upon a previously constructed diagnosis which is often deceptive.<sup>[13]</sup> These seemingly unimportant, peculiar, contingent symptoms of the patient, though valueless for purposes of diagnosis, are the chief guiding symptoms for the selection of the homoeopathic remedy.<sup>[14]</sup> There has been a paucity of research articles on this very important aspect of homoeopathic prescribing. To the best of my knowledge, only one such single blind placebo control research study was found which assessed the specificity of concomitant symptoms in homoeopathic cure.<sup>[15]</sup>

The present case report is an effort to bring forth the already verified facts about concomitant symptoms as mentioned by the stalwarts of Homeopathy.

**CASE REPORT:**

A male patient aged 20 years visited the homoeopathic outpatient department on 28.05.19 with complaint of bleeding from nose since 1week. The complaint of bleeding from nose mostly occurred in the

morning hours and while washing the face. The patient reported that there was a feeling of constriction in the head during the complaint. The patient also reported to have vertigo since 1 week during mental exertion, walking for long distance and sun heat which gets relieved with rest. During vertigo, the patient felt constrictive sensation in the head, more on the vertex and supra orbital region. The patient also complained of pain in abdomen since 1 week, which aggravated after eating cucumber, watermelon and cold food. The patient had complained of palpitation on going upstairs and exertion.

The patient had earlier suffered from recurrent bleeding from nose 6yrs ago for which he had taken allopathic treatment intermittently. The patient had also suffered from the complaint of vertigo 5yr ago. He took allopathic treatment for the same but without any relief.

Past history revealed typhoid at the age of 4 years. Family history was insignificant. The patient was a student belonging to the middle socioeconomic class. No history of any addiction found.

#### **Homoeopathic Generalities**

Mental generals: Nothing particular

Physical generals: Nothing particular

#### **Examinations:**

Inspection of Nose: Nasal mucosa was normal, No deviation of nasal bone seen, No swelling or ulceration seen in nasal vestibule, No polyp, deviation or perforation seen in Nasal septum, No inflammation in inferior turbinate seen.

Palpation of Nose: Nasal bones- Normal alignment. No tenderness, Nasal cartilage- Normal alignment. No tenderness on palpation, Nasal airflow- No difference in apparent airflow from both the nostrils was observed.

#### **Analysis of the case:**

The patient presented with complaint of nosebleed and vertigo which seems to be the acute attack of chronic manifestations. The case lacks characteristic mental and physical generals, but comprised of only particulars with few modalities. The peculiarity in the case was the presence of a sensation of constriction in head during both the complaints of epistaxis and vertigo. This symptom of 'constriction sensation in head' was considered the concomitant symptom as it accompanies the main complaint. This symptom runs through two particulars (nosebleed and vertigo) and thus formed the general of the case by the process of induction and was given the supreme importance in selecting the simillimum.

#### **Reportorial Analysis and Repertorization:**

The case presented with particular symptoms only with few modalities and a peculiar concomitant. The totality of the symptoms formed was converted into rubrics from the Synthesis Repertory (Treasure Edition 2009) with the help of Radar Opus software (version 2.2) along with the miasmatic analysis shown in Table 1. The repertorization sheet is given in Figure 1.

#### **THERAPEUTIC INTERVENTION:**

Repertorization shows *Phosphorus* (11/6), *Natrum muriaticum* (12/5), *Calcarea* (11/5) as few remedies covering symptoms of the 'Bleeding from nose', 'Vertigo', and 'Palpitation'. In this case, the concomitant symptom of 'constriction sensation in head during epistaxis' was given the supreme importance in selecting the simillimum. The corresponding rubric of this concomitant symptom, "Head-constriction-accompanied by- epistaxis" (No.3 in Repertorization Sheet), is covered by a single remedy in

third grade, *Cactus Grandiflorus*. The other symptoms covered by this medicine were related to Palpitation.

Prescription based on concomitant is to give supreme importance to those symptoms that are not commonly practiced in the profession, but plays a vital role in bringing cure. Different homoeopathic source books give us uncommon symptoms, less known symptoms, characteristic symptoms, concomitant symptoms but research is scarcely done on this often neglected subject.

Various materia medica were consulted for the symptoms under *Cactus Grandiflorus* (Table 2). After going through different materia medica, the symptom of the case matches with the remedy, *Cactus Grandiflorus*. Hence, *Cactus* was prescribed in 1000 C potency, 2 doses on the baseline visit. A single dose consisted of four globules of size forty of the indicated medicine. Each dose to be taken on an empty stomach in the morning after waking for consecutive 2 days.

### Follow up:

During follow up, the patient again visited the OPD on 30.05.19. He reported that after taking the medicine, there was no bleeding from the nose since the first dose. The constriction sensation of the head was also much reduced now. No complaint of vertigo now. No pain in abdomen now. Also the palpitations were reduced than before. Sac Lac 30, 4 globules twice a day for 15 days was prescribed on 30.05.19. The follow up with an assessment of Measure Yourself Medical Outcome Profile (MYMOP2)<sup>[16]</sup> of the case at baseline visit and follow up is given in Figure 2 and Figure 3. Patient further visited the OPD after six months to consult for his younger brother. An enquiry about his complaint of nosebleed was made and the patient told that he had not suffered any nosebleed and vertigo since the last visit (30.05.19). He also confirmed that he had not taken any other treatment.

**Table-1: Reportorial Analysis:**

Symptoms	Rubrics	Miasm
Bleeding from nose aggravate in morning	Nose-Epistaxis-morning	Latent Psora
Bleeding from nose aggravate while washing face	Nose-Epistaxis-washing from	Latent Psora
Constriction in head during epistaxis	Head-constriction-accompanied epistaxis	Psora
Vertigo aggravate by mental exertion	Vertigo-Mental exertion-agg.	Psora
Vertigo aggravate by walking	Vertigo-Walking-after-agg.	Psora
Vertigo aggravate by sun heat	Vertigo-Heat-sun;of the- agg.	Psora
Vertigo ameliorate by rest	Vertigo- Rest-amel.	Psora
Pain in abdomen aggravate by cucumber, watermelon (fruits)	Abdomen- Pain-fruit agg.	Sycosis

Palpitation on going upstairs	Chest - Palpitation of Heart - ascending stairs agg.	Psora
Palpitation on exertion	Chest - Palpitation of Heart - exertion agg.	Psora

**Table 2: Symptoms of *Cactus Grandiflorus* in Various Materia Medica**

<b>Guiding Symptom of our Materia Medica <sup>[17]</sup></b>	
Nosebleed	Profuse nosebleed, soon ceasing, from any exertion.
Vertigo	Vertigo from congestion; face red, bloated; pulsation in brain. Vertigo; agg from physical exertion, turning in bed, stooping, rising from a recumbent position, and deep inspiration.
Pain	Heavy pain and pressure like a weight on vertex, with palpitation.
Heart	Palpitation of heart on ascending stairs. Palpitation causing great restlessness and uneasiness. Occasional attacks of palpitation after unusual physical or mental exertion. Palpitation with vertigo, loss of consciousness, dyspnoea; worse walking.
<b>Lectures on Homoeopathic Materia Medica <sup>[18]</sup></b>	
Constrictions	Constrictions, contractions and congestions run through Cactus. These peculiarities run through Cactus more markedly than any other remedy. It is the nature of Cactus to constrict, to cause constriction in places where it has never been felt and never been thought of.
Head	It has a sensation of tightness and constriction about the head.
Vertigo	Vertigo from congestion; vertigo worse from physical exertion
Haemorrhage	Cactus has haemorrhages of two kinds: haemorrhage from vascular relaxation and haemorrhage from violent congestion of a part. The rush of blood to the head is of such violence in the moderately plethoric patient that he bleeds from the nose.
<b>New Manual of Homoeopathic Materia Medica with Repertory <sup>[19]</sup></b>	
Acts on the circular muscular fibres, hence constrictions. Haemorrhage, constrictions, periodicity and spasmodic pain.	
Head	Sensation of weight on the vertex. Congestive headaches. Blood vessels of the head distended.
Nose	Profuse epistaxis.
Heart	Violent palpitations. Palpitations with vertigo, dyspnoea, flatulence.



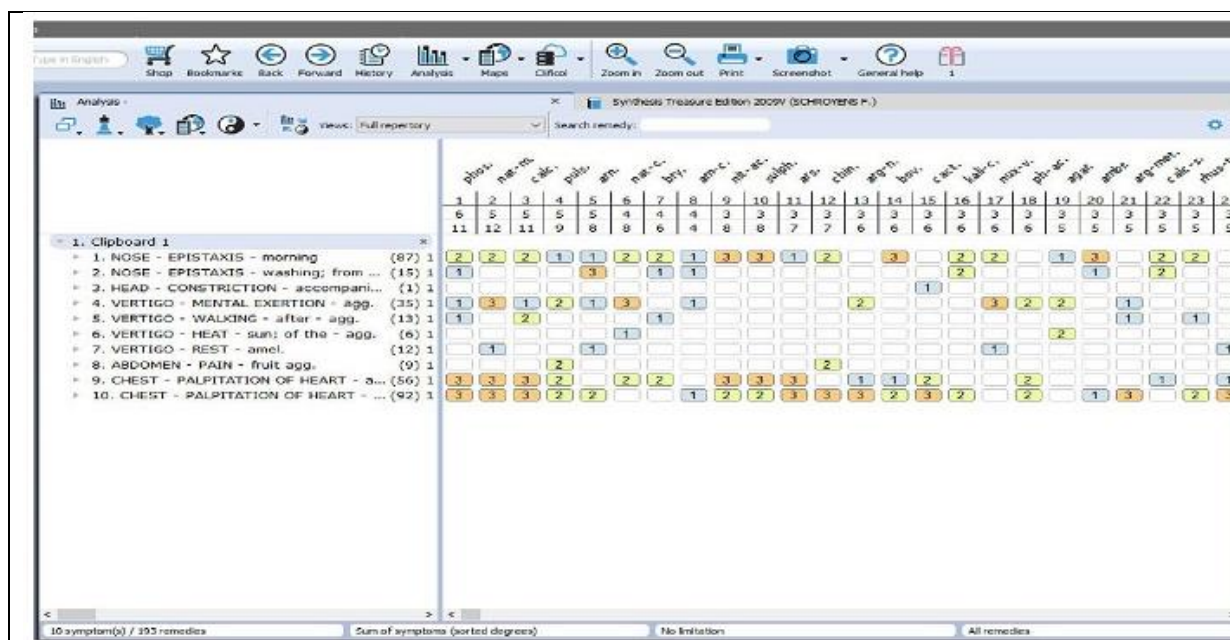


Figure 1. Repertorization sheet

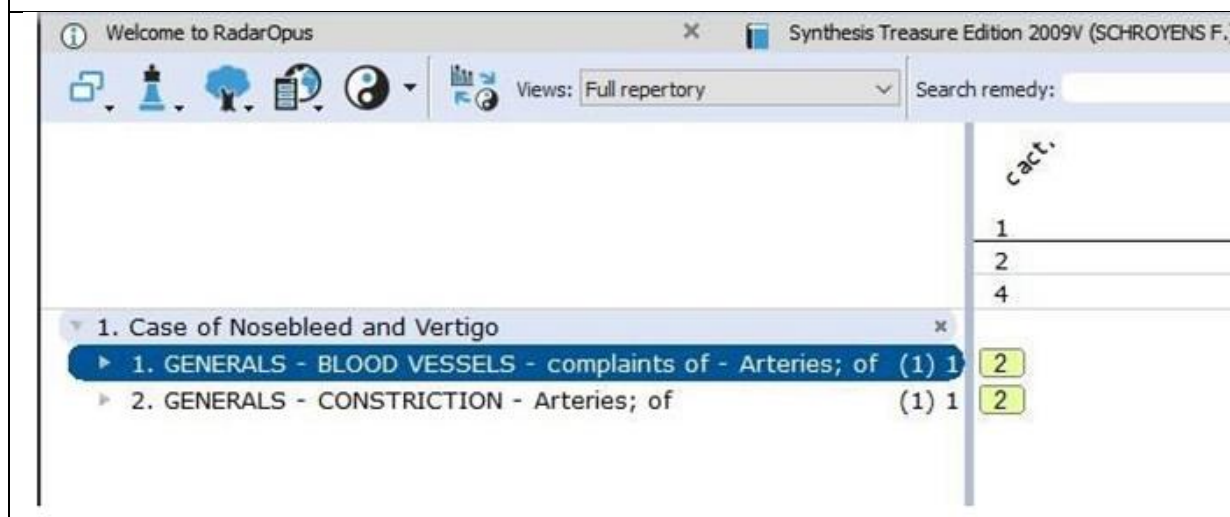


Figure 4: Rubrics in Generalities Chapter in Synthesis Repertory of Radar Opus

# INTERNATIONAL JOURNAL OF AYUSH CASE REPORTS (IJA-CARE)

### MEASURE YOURSELF MEDICAL OUTCOME PROFILE 2 (MYMOP 2) At BASELINE

Name of the Patient: ..... Date: 28/5/19

Practitioner seen by: .....

Choose one or two symptom (physical or mental) which bother you the most. Write them on the lines.  
Now consider how bad each symptom is, **over the last week**, and score it by circling your chosen number.

Symptom	1- As good as could it be	6- As bad as it could be
SYMPTOM 1: Nosebleed	0 1 2 3 4 5 6	6
SYMPTOM 2: Vertigo	0 1 2 3 4 5 6	5

Now choose one activity (physical, social or mental) that is important to you, and that your problem makes difficult or prevents you doing. Score how bad it has been **in the last week**.

Activity	1- As good as could it be	6- As bad as it could be
Activity: Physical	0 1 2 3 4 5 6	6

Lastly how would you rate your general feeling of wellbeing during the **last week**?

Well being	1- As good as could it be	6- As bad as it could be
	0 1 2 3 4 5 6	6

How long have you had Symptom 1, either all the time or on and off?  
☐ 0-4 weeks ☐ 4-12 weeks ☐ 3 months-1 year ☐ 1-5 years ☒ over 5 years

Are you taking any medication FOR THIS PROBLEM? Please circle: YES/NO  
**IF YES:**  
 1. Please write in name of the medication, and how much a day/ week  
 .....  
 2. Is cutting down this medication:  
☐ Not important ☐ a bit important ☐ very important ☒ not applicable

**IF NO:**  
 Is avoidable medication for this problem?  
☒ Not important ☐ a bit important ☐ very important ☐ not applicable

### MEASURE YOUR MEDICAL OUTCOME PROFILE (MYMOP2) FOLLOW UP FORM

Follow up no. 01 Full name: ..... OPD Reg. no. 1158/19

Practitioner seen by: ..... Date: 30/5/19

Please circle the number to show how severe your problem has been **IN THE LAST WEEK**.  
This should be YOUR opinion, no-one else's!

Symptom	1- As good as could it be	6- As bad as it could be
SYMPTOM 1: Nosebleed	0 1 2 3 4 5 6	0
SYMPTOM 2: Vertigo	0 1 2 3 4 5 6	0

Now choose one activity (physical, social or mental) that is important to you, and that your problem makes difficult or prevents you doing. Score how bad it has been **in the last week**.

Activity	1- As good as could it be	6- As bad as it could be
Activity: Physical	0 1 2 3 4 5 6	0

**Well being**

	1- As good as could it be	6- As bad as it could be
	0 1 2 3 4 5 6	1

If an important new symptom has appeared please describe it and mark how bad it is below.  
Otherwise do not use this line.

Symptom	0- As good as could it be	6- As bad as it could be
SYMPTOM 3: N.A.	0 1 2 3 4 5 6	

The treatment you are receiving may not be the only thing affecting your problem. If there is anything else that you think is important, such as changes you have made yourself, or other things happening in your life, please write it here (write overleaf if you need more space).

Are you taking medication FOR THIS PROBLEM? Please circle: YES/NO  
**IF YES:**  
 Please write in name of medication, and how much a day/week

Figure 2: Measure Yourself Medical Outcome Profile 2 (Baseline visit)

Figure 3: Measure Yourself Medical Outcome Profile 2 (Follow up)

# INTERNATIONAL JOURNAL OF AYUSH CASE REPORTS (IJA-CARE)

S.No.	Modified Naranjo criteria	Yes	No	Not sure or N/A
1	Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribed?	+2	-1	0
2	Did the clinical improvement occur within a plausible timeframe relative to the drug intake?	+1	-2	0
3	Was there an initial aggravation of symptoms?	+1	0	0
4	Did the effect encompass more than the main symptom or condition, (i.e. were other symptoms ultimately improved or changed)?	+1	0	0
5	Did overall wellbeing improve?	+1	0	0
6 (A)	Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?	+1	0	0
6 (B)	Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms: From organs of more importance to those of less importance From deeper to more superficial aspects of the individual From the top downwards	+1	0	0
7	Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement?	+1	0	0
8	Are there alternate causes (other than the medicine) that - with a high probability- could have caused the improvement? (Consider known course of disease, other forms of treatment, and other clinically relevant interventions)	-3	+1	0
9	Was the health improvement confirmed by any objective evidence? (e.g. lab test, clinical observation, etc.)	+2	0	0
10	Did repeat dosing, if conducted, create similar clinical improvement?	+1	0	0
Total Score		Maximum Score= 13 Minimum Score= -3		
		+8		

Figure 5: Modified Naranjo Criteria

## DISCUSSION:

Nosebleed or Epistaxis itself is not a disease, but a commonly occurring symptom. The case presented complaints of nosebleed and vertigo since a week, which represented an acute episode of a previous chronic manifestation. The case was a peculiar one with the absence of any mental or physical generals but presence of a strong symptom of "constriction sensation" accompanying the main complaints of epistaxis and vertigo. This auxiliary or concomitant symptom did not had any

definite relationship to the leading symptoms from the standpoint of theoretical pathology [15] but it limits the choice of the simillimum by greatly reducing the number of remedies indicated in this condition. Dr. Boenninghausen considered the concomitant symptom is to the totality what the condition of aggravation or amelioration is to the single symptom.[13] Homoeopathic drugs bear a different relationship among each other viz. complementary, cognate, inimical, antidote [20]. Similarly, two symptoms may have



different relations like alternating, cause-effect, concomitant, etc. Concomitant symptoms have no explanation for their association other than they represent the patient's vital reaction to the disease and appear at the same time [21].

In this case, there was no family or genetic history found related to bleeding disorders and no pressure change was found. The only factor that may be the cause can be associated with blood vessels where arterial epistaxis is found in older age. The same has been found under the different rubrics in the Generalities chapter in Synthesis Repertory of Radar Opus (Figure-4) where the arterial mechanism involved in the sensation of 'constriction' felt by the patient has also pointed '*Cactus Grandiflorus*' as the single remedy.

From the miasmatic prospective, psora gives the most valuable concomitant symptoms. Once the morbid agent affects the inner core of the vital force, functional changes start taking place followed by structural changes and pathological outcomes. Concomitant symptoms appear with the functional deviations as characteristic expression. Hence most of the concomitant symptoms are visible in the psoric phase of the disease. [22]

There is a large gap with reference to the research studies conducted to evaluate the importance of concomitant symptoms in homoeopathic prescription. One single blind placebo controlled clinical study concluded that prescriptions based on concomitant symptoms are effective in homoeopathic cure and overall wellbeing of the patient [15]. To focus on specific bothersome symptom, we employed the Measure Yourself Medical Outcome Profile 2 (MYMOP2) [16]. It is a brief, patient-generated, problem-specific questionnaire, which requires the patient to specify a symptom that concerns them most. All domains (symptom severity, restriction of

activity, and well-being) were analyzed individually as well as total score, the profile score, that equals the mean of the sub scores recorded (score 0-6). The MYMOP2 questionnaire at baseline defines symptom of nosebleed as the most bothersome (Symptom 1) and vertigo as the symptom 2. Both symptom 1 and 2 showed diminution from 6 and 5 (as bad as it could be) to 0 (as good as it could be) in the follow up. The MYMOP2 subscale of activity measures the work which the complaint prevents or makes it difficult to do. Patient recorded it to be physical activity which decreased from 6 (as bad as it could be) to 0 (as good as it could be). The wellbeing subscale improved on a Likert scale from 6 to 1. The MYMOP2 Profile Score showed a significant change from a baseline score of 5.75 to 0.25 depicting marked improvement in all the domains.

The possible causal attribution of the changes in this case were assessed using the Modified Naranjo Criteria as proposed by HPUS Clinical data Working Group (December 2015) [23]. The total score of outcome in this case was eight which was close to the maximum score of 13 as per Modified Naranjo Criteria. [Figure 5] Prescription made on the basis of concomitant symptom has brought marked improvement in the main complaint as well as accompanying complaints of the case. However, the case could not be followed up for a longer duration as the patient was relieved of the nosebleed and vertigo after the first prescription. The patient visited after six months for the consultation of his younger brother and it was then found that he did not suffer from any relapse since the first prescription. This has been taken into consideration as the patient did not take any other treatment or alternative mode for these complaints. This case report aimed on the often neglected but most important kind

of symptomatology of concomitant which led to the selection of *Cactus Grandiflorus*, indicated as single remedy under the indicated rubric.

**CONCLUSION:**

The prescription made while giving supreme importance to the concomitant symptom in this case has brought complete relief to the patient without any relapse with the simillimum in minute doses and shortest time period.

**LIMITATION OF THE STUDY:**

As a single case report proves to be of limited importance in bringing evidence based results, well-planned study with large sample size is required to re-establish the importance of concomitant symptoms in homoeopathic prescribing.

**DECLARATION OF PATIENT:**

The author certifies that appropriate patient consent has been taken for the clinical information to be reported in the journal.

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