

A Case of Hyperuricemia Treated Successfully with Bowel Nosode- A Case Report

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ABSTRACT:

The term Hyperuricemia refers to serum uric acid (SUA) levels that are greater than 6.0 mg/dL in women, >7.0 mg/dL in males, and >5.5 mg/dL in children and adolescents [1]. An estimated 38 million Americans have elevated serum uric acid, and the number of cases is rising globally as more emerging nations embrace Western diets and lifestyles. A 31-year-old individual with hyperuricaemia manifests symptomatic with slightly elevated levels of uric acid with joint pain. The complaint was slightly ameliorated by Homeopathic medicine. This case demonstrates the conventional value of Homeopathic Bowel Nodes in ongoing Hyperuricemia cases. Homeopathic Bowel Nosodes Sycotic Co. was used in accordance with the prescribed protocol. The result was evaluated in conjunction with the application of the Modified Naranjo Criteria Score (MONARCH) indicates that the improvement was brought about by Homeopathic Bowel Nosodes.

KEYNOTES: Hyperuricemia, Russell Malcolm Repertory, Sycotic Co., MONARCH score.

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INTRODUCTION:

The actual concepts were first developed by Dr. Edward Bach (1886- 1936) and continued by John Paterson (1850- 1955). [2] The concept of Bowel Nosodes evolved from investigating the intestinal bacteria in the pathogenesis of chronic diseases. He found that certain intestinal germs which belong to non-lactose fermenting. It's a gram-negative coli. He treated successfully many chronic cases by potentising various

non lactose fermenting bowel bacteria and administering them clinically. The cultures of Non lactose fermenting bacilli of intestinal flora is attenuated to prepare the medicine of Bowel Nosodes. [3]

There are many articles reflecting the correlation between musculoskeletal and bowel complaint. Musculoskeletal complications are frequent and well-recognized manifestations in IBD, and

affect up to 33% of patients with IBD [4]. Recent research studies have confirmed the association of the intestinal flora and the development of various chronic diseases, especially joint diseases. Alteration in the gut milieu not only causes intestinal disorders but also causes extra-intestinal disorders, such as atopy and arthritis [5]. The complexity and individuality of the human intestinal microflora and shown that this is a confounding factor in determining the possible significance of individual organisms in the pathogenesis of spondyloarthritis. Nevertheless, we demonstrated a higher prevalence of sulphate-reducing bacteria in the faeces of patients with Ankylosing Spondylitis. These organisms have been implicated in the pathogenesis of Inflammatory Bowel Disease. [6]

CASE PRESENTATION:

A male patient aged about 31years came with complaints of pain in joints. Pain in knee, shoulder, ankles and elbow region since 1years on and off. On physical examination of the affected area revealed with severe pain, stiffness and swelling more during night. The complaint was aggravated during walking, and at night time. Pain in joints more during early morning, and complaint better by hot water. Swollen ankles and stiffness in knee since six months and was given Homeopathic medicines like Rhus Toxicodendron, Calcarea Carbonicum. After which pain reduced but again came back, Uric acid level was 7.1.mgs/dl on 2/11/2023.

History of Present Complaints:

Six months back there was a pain in shoulder and elbow joint which was on and off and was in Homeopathic Medicine. Patient came with swelling, pain and tenderness in the affected area. But the condition got worse during October 2023

when he had a fall from his bike and the joint complaints aggravated. The whole area of knee, ankle, elbow was very tender. It was difficult to do the manual work. As a result, he was asked to check Serum Uric Acid level with Serum Calcium and Blood Sugar Level. There was slight increase of Serum Uric Acid level and he decided to take Homoeopathy treatment.

Past History: No major illness other than acute complaints

Family history: Mother – Hypertension, Father - Healthy

Vital signs: Pulse: 88\min; Temp: 98.F; RR: 18\min; BP: 120\80 mm of Hg.

Local Examination: Bilateral knee was swollen with a sign of Rubor, Calor. There was tenderness around the knee joint. Stiffness around ankle and knee joint.

Physical generals

Appetite: Good

Thirst: Adequate

Bowels: 1time a day

Urine: 4 to 5 time a day and 1 time at night

Desires: Nothing Specific

Thermal: Chilly

Physical Appearance: Stout fat with weight about 85kg and Height of 4.9 feet.

Mental Generals: Very mild and timid in nature

Life space situation: Since Childhood hardworking person, elder brother among three siblings so he had the responsibility of handling his own family.

ANALYSIS OF CASE AND DISCUSSION:

After proper analysis of case the totality of symptoms was formed. This totality of symptoms was done and repertorization using Russell Malcolm Repertory was done. The final selection was done after considering Materia Medica of Bowel Nosodes. Patient was prescribed Sycotic Co. 30 single dose OD. In Follow up the complaint was better after 7 days. After

7days patient suffered from acute condition with catarrh and the pain in elbow reduced but left knee pain persist. Here Sycotic Co. was exact similimum hence placebo was given and waited for next follow up. In 4th follow up as complain was better and after

one month both complain got relieved completely with Holistic mode of Treatment. His other complain of cough and catarrhal was reduced completely [Table-.1].

Table 1: Follow Up chart:

Complaints	Date	Prescription
Pain in shoulder and elbow reduced upto 30% Scale used is Hundred Paise Pain Scale ^[8] . For example, 20 paise pain out of 100 paise . patient was asked about out of 100 paise. how much is your pain and patient replied as 70 paise so we concluded that about 30% better	7/11/2023	Phytum. 200 single dose stat Rubrum 30 4pills tds for 15 days
Complain of slight cough with thick or no expectoration, A/F change of weather and cold air since morning	15/11/2023	Sac lac 30 single dose in luke warm water Rubrum 200 4pills TDS for 15 days.
50% reduce in complaint. Elbow and shoulder pain reduced 1 st , Previous complaint of catarrhal better. Scale used is Hundred Paise Pain Scale. For example, 20 paise pain out of 100 paise. patient was asked about out of 100 paise. How much is your pain and patient replied as 50 paise so we concluded that about 50 % better	29/11/2023	Sac lac 30 single dose OD with Rubrum 30 4pills for one month.
No complaint in elbow pain and 70% better in knee pain and ankle pain. Scale used is Hundred Paise Pain Scale. For example, 20 paise pain out of 100 paise. Patient was asked about out of 100 paise. How much is your pain and patient replied as 30 paise so we concluded that about 70% better	12/1/2024	Rubrum 200 single dose given OD Phytum 200 4pills TDS for a one month
Still mild pain in spot of left knee , while walking initially Advice for blood investigation of Serum Uric acid. After the treatment has been started, doctors will first check every three months to see whether the uric acid levels are low enough to stop crystals from developing. Less frequent check-ups, for example once a year, are	09/2/2024	Sycotic Co. 200 single dose with Phytum 200 4pills TDS for a 1 month

enough at a later stage ^[9] . It is well known that 22% to 33% of gout patients present serum uric acid levels below 7 mg/dL during an acute attack ^[10] .		
No complain, serum uric acid- 5.2 mgs/dl	29/03/2024	No medication was given.

Measuring Pain Scale

Using of HPPS i.e. **Hundred Paisa Pain Scale** ^[8]

Table -2: Modified Naranjo Criteria for Homoeopathy (MONARCH). ^[7]

Domains	Yes	No	Not sure or N/A
1. Was there an improvement in the main symptom or condition for which the homeopathic 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 well-being improve?	+1	0	
6A Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?	+1	0	0
6B 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., laboratory test, clinical observation, etc.)	+2	0	0
10. Did repeat dosing, if conducted, create similar clinical improvement?	+1	0	0

MONARCH SCORE = +8

***The number in bold font represent it has been selected.**

METHOD: Evaluation of this case report done by using Modified Naranjo Criteria for Homoeopathy (MONARCH) [7], if score is more than 6 than we can say that the case is improved. If score is below 6, then it is not improved. (Maximum Score= 13; Minimum Score= 6). In this case the MONARCH score is +8 [Table No.2].

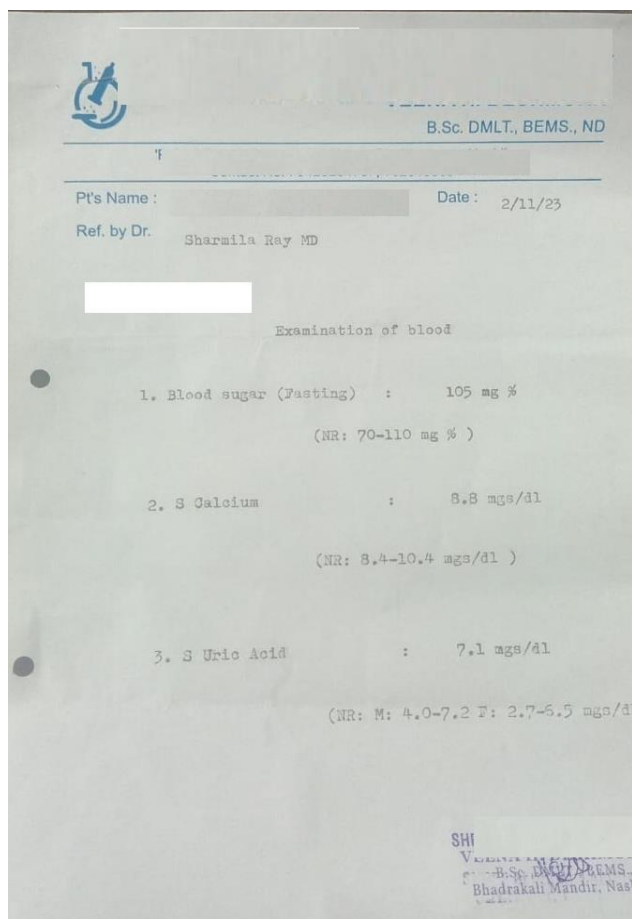


Figure-1: Serum Uric Acid before Treatment

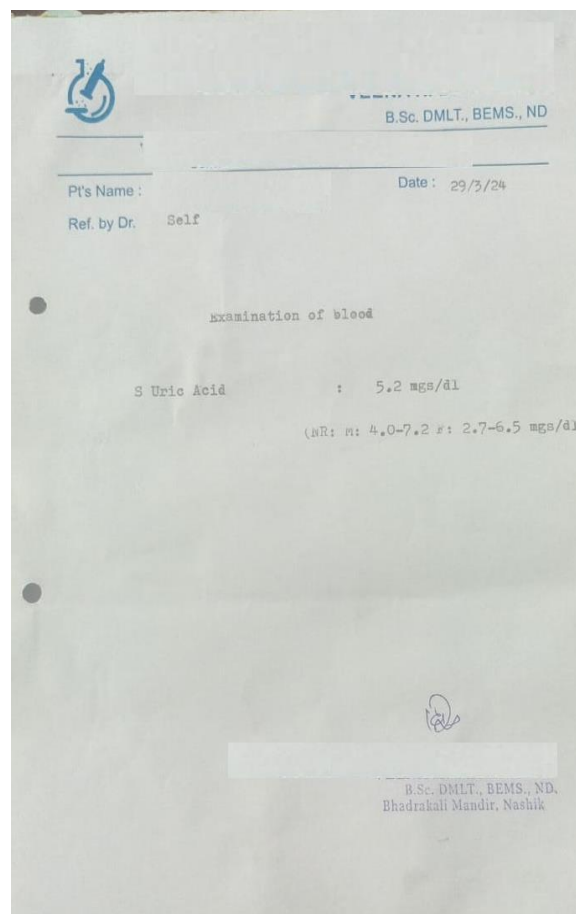


Figure-2: Serum Uric Acid after Treatment

RESULT:

Evaluation of this case report is done by using Modified Naranjo Criteria for Homoeopathy (MONARCH) [Table No. 2]. Which showed proper healing without recurrence of the same complaint till date. Even the evidence based blood report showed significance reduction of Serum uric acid from 7.1 mgs/dl to 5.2 mgs/dl within stipulated time period.

CONCLUSION:

The findings indicate that, even with carefully chosen Homeopathic medicine, Intestinal Bowel Nosodes may be considered for rheumatic complaints when the condition reaches a standstill. In Homoeopathy, Bowel Nosodes have shown to be a significant Nosode group of therapies. In some situations, it might be a useful experiential learning opportunity. More instances are available to examine the potential relationship between rheumatic illnesses and the usage of Homeopathic

bowel nodes. This case illustration Prompt healing by using Bowel Nosodes as in a chronic case of Rheumatic Disorders. A simple case and a simple remedy made a big learning.

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Declaration of the patient:

It is certified that all appropriate patient consent for the treatment and publication without disclosing the identity is noted.

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REFERENCES:

1. Zhang WZ. Why Does Hyperuricemia Not Necessarily Induce Gout? *Biomolecules.* 2021;11(2): 123-130.
2. Dr C.P. Sharma, Dr Meenakshi A, Dr Kruti S Bowel nosodes- a boon to homoeopathy | *The Homoeopathic Heritage* April 2021, p-15.
3. Russell Malcolm. *Systems & Symbiosis - The Bowel Nosodes Reappraised.* volume 5.0 January 2007: p-230.

4. Rodríguez-Reyna TS, Martínez-Reyes C, Yamamoto-Furusho JK. Rheumatic manifestations of inflammatory bowel disease. *World Journal of Gastroenterol.* 2009;15(44): 234-240.
5. Hart, A. L. et al. The role of the Gut Flora in Health and Disease, and its Modification as Therapy. *Aliment Pharmacol Ther.* 2002; 16 (8): 100-105.
6. Stebbings S, Munro K, Simon MA, Tannock G, Highton J, Harmsen H, Welling G, Seksik P, Dore J, Grame G, Tilsala-Timisjarvi A. Comparison of the faecal microflora of patients with ankylosing spondylitis and controls using molecular methods of analysis. *Rheumatology (Oxford).*2002;41(12): 35-45
7. Lamba CD, Gupta VK, van Haselen R, Rutten L, Mahajan N, Molla AM, Singhal R. Evaluation of the Modified Naranjo Criteria for Assessing Causal Attribution of Clinical Outcome to Homeopathic Intervention as Presented in Case Reports. *Homeopathy.* 2020;109(4):191-197.
8. Alghadir, Ahmad, Anwer, Shahnawaz; Anwar, Dilshad; Nezamuddin, M.. The Development and Validation of Hundred Paise Pain Scale for Measuring Musculoskeletal Pain: A Prospective Observational Study. *Medicine (Baltimore).*2015;94(29): 20-26
9. <https://www.ncbi.nlm.nih.gov/books/NBK507008/> [Last accessed on 2024 April 17]
10. Fargetti S, Goldenstein-Schainberg C, Silva Abreu A, Fuller R. Refractory gout attack. *Case Reports of Medicine* Volume 2012; 4(4): 240-145.