

# CLINICAL And EXPERIMENTAL HOMEOPATHY

A peer-reviewed International Online EJournal

ISSN 0974 - 9799

<http://journal.sukulhomeopathy.com>



## Homoeopathic Treatment of Typhoid Fever: A Case Report

**Dr. Vandana Shukla**  
**MD (Homoeopathy)**  
**Practice of Medicine**

**Correspondence:**

[shuklavandana34@gmail.com](mailto:shuklavandana34@gmail.com)

**ABSTRACT:** Homoeopathy is the most solid sort of helpful framework and its treatment give a patient delicate and perfect fix here I am going to introduce an instance of Typhoid fever of 28 years of age female. I endorsed her Natrum muriaticum. Based on her psychological manifestations, physical general and individuation this medication is endorsed.

**KEYWORDS:** Homoeopathy, Typhoid fever, Natrum muriaticum, Materia Medica, Centesimal scale, Widal test.

### INTRODUCTION:

Typhoid is a multi systemic sickness. It is a kind of bacterial contamination because of the particular sort of microscopic organisms that causes manifestations mellow to serious.

The viability of Homeopathic medication in typhoid fever had shown a case report with supporting archives.

**Case history:** A 28 years old female complaint of fever from last 2 years fever on measuring  $101^{\circ}\text{f}$ . Both limbs are cold with body ache.  $102^{\circ}\text{f}$  fever from last 2 to 3 days nausea and vomiting. Thirst in extreme quantity. On examination especially on palpation hepatomegaly, Splenomegaly was seen. In front of eyes: Blurred vision – Supraorbital pain.

**Diagnosis:** On seeing report Widal test is positive.

**Case analysis:** Selection of remedy based on the Repertorisation of the case. On the basis of totality of the symptoms and reportorial analysis and consult it with Materia Medica by follows the principles of organon of medicine - Natrum Muriaticum was prescribed in centesimal scale starting with 200C in single dose.

### Follow Up:

Treatment proceeded for a half year and 4 follow up were finished during this period. To assess the status and Widal test is done after 6 months that presented a normal study.

### CONCLUSION:

The case shows the potential advantages and utility of Homeopathic treatment in Typhoid fever.

### INTRODUCTION:

Typhoid fever is the communicable type of disease. It is one of the important causes of mortality. Mostly found in developing country due to poor sanitation and poor hygienic conditions. Rate of typhoid fever for the most part found in United States yet after 1900 its frequency diminishes. Presently in the event that we see the records, its occurrence rate diminished to fewer than 400 cases each year. This all occur because of better natural conditions. But in developing countries like India and Pakistan the high rate of cases can be seen.

**Source of infection:** - There are two types Source of infection: -

**Primary Source:** -A. Faeces B Urine

**Secondary source:** contaminated water, contaminated food, contaminated Finger.

**Transmission Route:** - Fecal oral route.

**Reservoir of infection:** - The only reservoir of infection is man.

**Incubation Period:** - Usually 10-14 days with a range of approx. 2month.

**Peak Incidence:** - Reported during July, September. There are 2 reasons: -

1. Rainy Season
2. Increase in fly population.

### Etiopathogenesis:

The organism enters the body by ingestion. Generally these organisms enter the stomach but gastric juice cannot destroy it. So these organism

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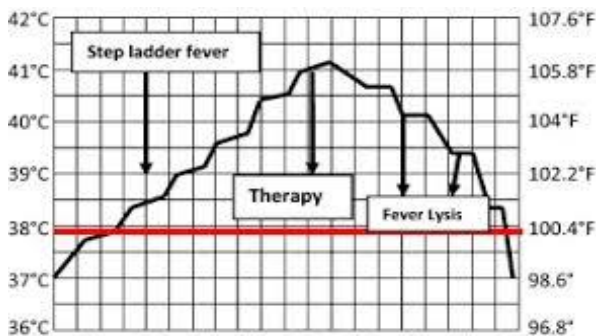


now enter the intestine where it invade the mucosa and go into the intestinal lymphatic through peyer's patches. Before reaching the blood this organism generally proliferate in mesenteric lymph nodes and spleen. Bacteremia occurs and sign and symptoms appear. In 2 week the antibodies appear so infection now localized in liver, gallbladder and peyer's patches. BACILLI now get entry into the intestine along with bile from liver. Peyer's Patches & Lymphoid Follicle, Becomes Hyperemic proliferate, after it necrosed and ulcerated. ULCER is oval in shape. Long axes of ulcer present along the long axes of gut .After treatment these ulcer heals completely without any scar.

## Sign and Symptoms

### First Week:

Fever- Gradual rise of temperature. (Step Ladder Pattern)



**NOTE: -2<sup>o</sup> evening rise and 1<sup>o</sup> morning fall.**

- Headache
- Constipation, lassitude and malaise
- Anorexia, Nausea and vomiting
- Cough and sore throat.
- Pulse: - Relative bradycardia.
- Abdomen- Tumid.
- Epistaxis present.
- Coecal gurgling present: - Due to fluid faeces and gas.
- Spleen: - Palpable.
- Rashes: -Present at the end of first week.

- WIDAL test in first week if done then result is negative.

### Second Week:

- High Fever (104<sup>o</sup>f)
- Mentally patient is dull and weak
- Rose spots appear. It can be seen in lower area of chest and abdomen.
- Pulse: - Tachycardia.
- Abdomen distended with gas.
- Spleen: -Enlarged.
- Liver enlarge (on investigation transaminases raised)
- Lung: - Bronchitis, bronchopneumonia.
- Constipation replaced by looseness of bowl. (Peasoup Diarrhoea)

### Third Week: -

- Temperature drops down.
- Patient becomes more dull sometimes reach in coma state.

### Complications

It affects different systems of body.  
It can be seen in 30% cases: -

1. **PULMONARY SYSTEM: -**
  - Bronchitis
  - Bronchopneumonia.
2. **CARDIOVASCULAR SYSTEM: -**
  - Myocarditis
  - Thrombophlebitis.
  - Circulatory failure.
3. **GASTRO INTESTINAL SYSTEM:**
  - Hemorrhage.
  - Perforation.
  - Peritonitis.
4. **NERVOUS SYSTEM: -**
  - Meningitis.
  - Convulsion.
  - Coma

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## INVESTIGATION: -

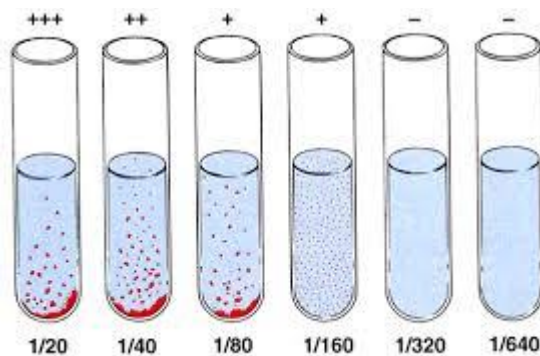
### BLOOD CULTURE:- This is positive

- 90% cases: - In first week.
- 75% cases: - In Second week.
- 60% cases: - In third week.

**Stool Culture:** - Positive throughout the course of the disease.

**Urine Culture:** - Less valuable than stool and blood culture.

**WIDAL AGGLUTINATION TEST:** -This is positive from second week rises up to third and 4 week after which it declines.



## Prevention:

Prevention and elimination of typhoid fever is within the scope of modern public health.

There are three lines of defense against typhoid fever:

- Control of reservoir.
- Control of sanitation.
- Immunization.

## HOMEOPATHIC TREATMENT: -

1. Baptisatinctoria.
2. Belladonna.
3. Bryonia.
4. Gelsemium.
5. RhusTox.

6. Arnica
7. Lachesis.
8. Chininumsulph.

**Miasmatic Approach:** - There should be psora-syphilitic miasm.

**Psora:** - In Initial state there may be presence of psora when fever lassitude and nausea vomiting, sore throat, rosy spots appear.

**Syphilis:** - In later and end stage of typhoid there may be presence of syphilis due to perforation and hemorrhage.

## CASE STUDY

**Patients Name:** - XXXXX

**Age/sex/Religion:** - 28/Female/Hindu

**Address:** 47/39 Hatiya Kanpur

**Occupation:** Housewife.

**Marital Status:** Married.

## Presenting complaints

- Patient having fever from two years. Fever on measuring  $101^{\circ}\text{f}$ .
- Extremities: - Both limbs are cold.
- Bodyache.
- Thirst in extreme quantity.
- $102^{\circ}\text{f}$  Fever from 2-3 days with nausea and vomiting (In vomiting mucus come out)
- On seeing report WIDAL test is positive.
- On examination especially on palpation: - hepatomegaly, Splenomegaly seen.
- In front of eyes: Blurred vision – Supraorbital pain.

## Past Complaints

- At 14 years age- chicken pox fever history also found in patient.

## Personal History: -

- **Constitution:** - Lean, thin, irritable temperament.
- **Food Habit:** - Vegetarian.

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- **Addiction:** - No Addiction.
- **Habit:** - Sedentary /Active/hard labour: - Active.
- **Extra marital Relation:** -No

## Family History: -

- **Father:** Cervical gland enlarged.
- **Mother** =No.
- **Social Status:** -
- **Nutritional Status:** - Poor.

## GENERAL SYMPTOMS

### Physical General: -

**Appetite:** - Decreased.

**Thirst:** - Increased.

**Desires:** - Bitter, Salty.

**Aversion:** - No.

**Sleep:** - Sleeplessness.

**Dream:** forget (yaadnahirahtha)

**Perspiration:** - Profuse (Daytime)

**Effect on patient and his complaints:** Weather :  
- < hot weather

### Mental General:

- Patient is introverted type.
- Irritability can be seen very easily.
- Anger also noticed at trifle matters.
- Anxiety about health.
- Patient is very loyal in relationship.
- Great sense of responsibility
- Sensitive to music.
- Biting finger nails.
- Indolent type: Aversion to work.
- Complaints aggravated at sun < heat.
- Emotionally strongly attached but does not show it.
- Memory Sharp

## Physical Examination

### General Examination

1. **Inspection:** - Done

2. **Palpation:** - Done: - Hepatomegaly, Splenomegaly.
3. **Percussion:** - Done: - no any abnormality seen.
4. **Auscultation:** - Done.

**Pulse:** -70/MIN

**BP:** -110/70mmhg

**Temperature:** -101<sup>0</sup>f

**Respiratory rate:** -13 breaths per min.

### Systemic Review: -

**Eye:** - Blurred sensation

**Vision:** - Myopia.

### ORAL CAVITY

#### Mouth

Tongue – slightly white coated.

#### Teeth

Left side dental caries

### Gastro Intestinal tract

**Vomiting** – nausea – Distension of abdomen

**Respiratory system:** - No

**Urinary system:** - No

**Nervous System:** - No

**Locomotor System:** - No

**Skin:** - No

### OBS/GYNAL HISTORY

#### Menstrual History

1. **Menarche:** -16 years.
2. **Duration:** - 4 Days.
3. **Flow:** -Scanty.
4. **Dysmenorrhea:** -Present.
5. **LMP:** -20 Aug.

### Investigation

**Widal Test:** -Positive.

| TO    | TH    | AH   | BH   |
|-------|-------|------|------|
| 1/480 | 1/240 | 1/40 | 1/40 |

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HB%: - 10.5gm.

Blood group: -A+

TLC: - 5300cumm.

DLC:-

Polymorphs =63%

Lymphocytes =29%

Eosinophil =7%

Monocytes =1%

Basophils = 0%

ESR: 32MM/1hrs.

## Some more information about the patient: -

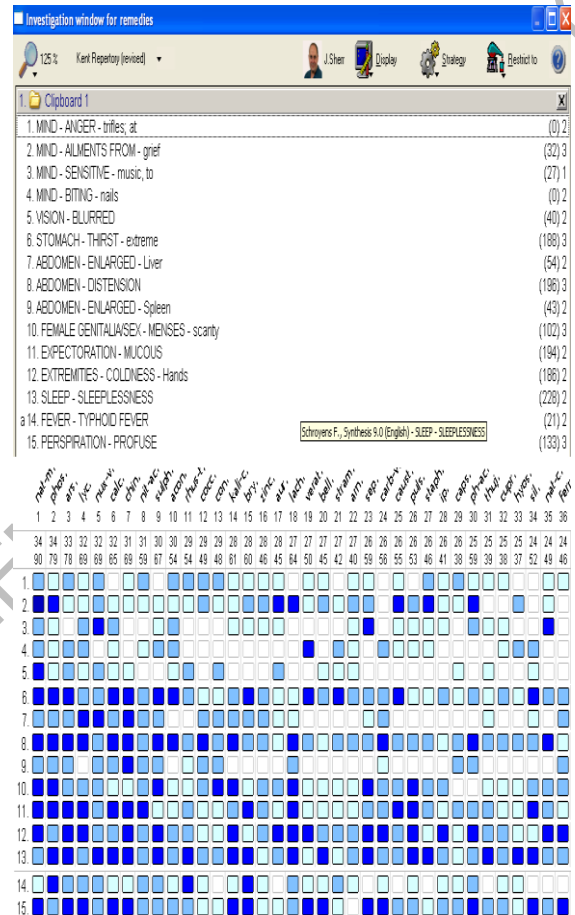
Patient does not want to live in village but after marriage she has to live in village. Silent grief runs through the whole case. With fever there is dullness with irritability. Sensitiveness to sunlight also present and headache with blur vision.

**Discussion:** - Patient is very hot with salty desire and thirsty. There is distension of abdomen also present.

## Evaluation of Symptoms: (Rubric formation)

| SYMPTOMS INTO RUBRICS       | CONVERTED | CHAPTER       |
|-----------------------------|-----------|---------------|
| Mind –anger-trifle, at      |           | MIND          |
| Mind –AILMENTS from Grief   |           | MIND          |
| Mind – Sensitive-Music , to |           | MIND          |
| Mind – Biting –Nails        |           | MIND          |
| Stomach-Thirst-Extreme      |           | Stomach       |
| Perspiration-Profuse        |           | Perspiration  |
| Sleep –Sleeplessness        |           | Sleep         |
| Vision-Blurred              |           | Vision        |
| Abdomen-Enlarged-Liver      |           | Abdomen       |
| Abdomen-Distension          |           | Abdomen       |
| Abdomen-Enlarged- Spleen    |           | Abdomen       |
| Expectoration-Mucous        |           | Expectoration |
| Extremities-Coldness, Hands |           | Extremities   |
| Fever-Typhoid               |           | Fever         |

|                  |                       |                         |
|------------------|-----------------------|-------------------------|
| Female<br>Scanty | Genitalia/Sex-Menses- | Female<br>Genitalia/Sex |
|------------------|-----------------------|-------------------------|



**Repertory Used: -SchroyensF.,Synthesis 9.0 (English)**

## Final Remedy Selection with justification: -

After repertorisation maximum score is gain by Natrum mur and Patient is very hot and desire for salty things so the final selection of remedy is Natrum Mur.

## CONCLUSION:

The case shows the potential advantages and utility of Homeopathic treatment in Typhoid fever.

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