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Research Article

ASSESSING THE RELIABLE SYMPTOMS OF RHUS TOX AND KALI CARB IN THE TREATMENT OF LUMBAR SPONDYLOSIS WITH SCIATICA SYNDROME - AN OBSERVATIONAL STUDY

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Abstract

Every homoeopathic drug has hundreds of symptoms. Most of the symptoms were recorded during proving of the drug. Around 10% of symptoms are of clinical origin as observed by keen homoeopaths. Number of symptoms are very large when it comes to polychrest drugs like Kali carb and Rhus tox. Very often these two drugs are prescribed as routine medicines when it comes to joint complaints especially lumbar Spondylosis. As homoeopathic principle clearly says that indicated medicine is the homoeopathic specific medicine for the given patient at that time, routine prescription doesn't serve the purpose. Hence an attempt was made to understand the reliable symptoms Rhus tox and kali carb especially in l.pondylosis. Methods: Patients suffering from lumbar Spondylosis with sciatica syndrome attending Alvas Homoeopathic medical college hospital between November 2018 to November 2019 were selected. After case taking those patients whose symptoms correspond to kali carb and Rhustox were considered. Using VAS scale follows up was analyzed. Symptoms which clinched the remedy diagnosis in each case was assessed. The time taken for improvement was noted. Results: a total of 14 cases were selected for the study. Among them 4 cases defaulted during the course of the study. Out of 10 cases 3 were prescribed kali carb and 7 cases were given Rhus tox. Symptom severity was high.(mean VAS score was 7 out of possible 10). After treatments mean VAS score dropped down to 1. It shows significant improvement.

Keywords: Lumbar spondylosis, sciatica, homoeopathy, Visual Analog Scale.



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INTRODUCTION

Homeopathic drugs like rhus tox and Kali carb are leading medicines for the treatment diseases of bones and joints. In degenerative joint conditions like osteoarthritis and lumbar Spondylosis both these drugs have prominent indications. Many a times prescription of rhus tox and Kali carb in joint diseases seems to be part of routine prescription. Homoeopathic principles strongly suggest that a homoeopathic drug can become remedy only when it covers the characteristic symptoms of the given case. As both these drugs are polychrests they have exhibited hundreds of symptoms. Identifying reliable symptoms as guide for selection of either rhus tox or kali carb would help in the management of lumbar spondylosis and sciatica syndrome more effectively. In other wards marking reliable symptoms which guide these two drugs in the treatment of Lumbar spondylosis would help in significantly increase the success rate of homeopathy while dealing with them. Lumbar spondylosis is part o larger group called degenerative Joint Diseases [1,2]. There is no gold slandered treatment methodology as yet. 80% of populations above 40 yrs suffer from lumbar Spondylosis [3-6]. Some of them may present with sciatica syndrome and others with backache and stiffness. Hence effective homoeopathic treatment would bring down loss of work days as well as morbidity [7,8]. Hence it is of paramount importance not only to trait but effectively manage lumbar Spondylosis [9,10].

VISUAL ANALOGUE SCALE

The Visual Analogue Scale is a subjective assessment of the patient's pain. It is a unidirectional measure of pain intensity. On its anterior aspect Vas scale has varied expressions long with an indicator. The patient uses this to mark his/her intensity of pain. Corresponding to the facial expressions there is a measurement of 0 to 100 on the posterior aspect. This is used by the physician to note down the appropriate value. 0 corresponds to smiling face indicating no pain. 100 correspond to crying image. To avoid clustering of scores around a preferred numeric value, numbers or verbal descriptions at intermediate points are not recommended.

METHODS

SOURCE OF DATA

The study was conducted with patients in the outpatient and inpatient of Alvas homoeopathic

medical college, moodbidri, Karnataka, India between November 2018 to November 2019.

TYPE OF STUDY

observational study

SELECTION OF SAMPLE

Cases were selected based on inclusion and exclusion criteria

Inclusion criteria

cases of lumbar spondylosis with sciatica. Both genders of age group 30 yrs to 70 yrs

Exclusion criteria

patients below 30 yrs and above 70yrs. Pts with renal, cardiac and metabolic disorder.

Diagnostic criteria

the diagnosis of lumbar spondylosis with sciatica was made based on clinical presentation and radiographic study. Sciatica syndrome presents with sudden pain in the back radiating towards foot along the course of sciatic nerve. This is due to impingement of sciatic nerve roots by protruding lumbar disc. Such pains are worse by movement, bending, exertion, lifting weight. Radiographic evidences consisting of X ray of lumbosacral spine showing narrowing of disc space, osteophytosis and loss of lumbosacral lordosis. MRI evidences consisting of disc protrusion an lumbar area.

DATA COLLECTION

Details of each patient collected in a standard format. Details include Mental and Physical attributes, characteristics of sector symptoms. Severity was assessed based on VAS scale before and after treatment.

Treatment

Based on the totality constructed most suitable medicine was selected and administered to the patient. Repetition of medicine was done infrequently as per the case demand. Patients were encouraged to carry on their routine work but more slowly. No auxillary measures like waist belt, physiotherapy or exercises were advised.

Remedy selection: The analysis of data and synthesis of totality was made based on Kentian philosophy. Material medica and synthesis repertory references were made whenever necessary. Depending on analysis of the follow up repetition and potency of the medicine was divided.

RESULTS

A total of 14 cases were selected based on inclusion and exclusion criteria. Out of this 4 cases defaulted. Among the 10 cases which completed the study 4 were female and 6 were male. All the 10 cases showed marked improvement (range 70 – 100%). (Table 1)

CASE 1

In this case complaint was of 6 months duration. Rhus tox acted swiftly. Patient experienced marked improvement in the first follow itself that is within 15 days. VAS dropped from 80 to 30 within this period. Back ache radiating to right leg, worse by standing, on getting up better by movement favored rhus tox. He was a manual laborer. He could go back to his work.

CASE 2

this patient with 10 yrs of backache was relieved in 15 days with the prescription of Kali carb. His VAS dropped from 70 to 40 in thus period. Subsequently it dropped further to 20. Points which favored kalicarb was back ache radiating to left leg, worse as he got up in the morning, relieved by lying on back. He also had weakness.

CASE 3

this 42 yr old male patient came with low backache and sciatica pain of 2 months duration. Complaints got relieved in first week itself after the prescription of Rhus tox IM. Points in favor was backache radiating to right leg, worse by standing, better by walking. Causation was lifting of weight. VAS dropped from 80 to 20 in 2 weeks.

CASE 4

this is 34 year old female patient presented with low back ache and sciatica pain to right leg. This was of 10 months duration. After prescription of Rhus Tox IM VAS reduced from 80 to 10 in 1 month. Points considered were Low backache with right sided sciatica worse by standing and better by walking.

CASE 5

this is 50 yr old female who developed sciatica for past 1 month. After Kali Carb her VAS came down from 70 to 0 within 2 weeks. Symptoms helped in remedy selection were low backache with radiation to left leg. Complaints worse by standing and better by lying on back. Chilly patient.

CASE 6

this 65 yr old male patient came with low backache and sciatic pain to right leg of 1 yr duration. The complaint got relieved in 2 weeks while VAS dropping from 80 to 20. Rhus tox IM was prescribed based on following features – backache radiating to right leg, worse by morning, better by walking. Chilly patient.

CASE 7

this 40 year old female patient came with the 3 year old complaint of low backache radiating to Right leg. The complaint reduced significantly with VAS dropping from 90 to 0 in 2 week's duration after the prescription of Rhus tox. Points favoring the prescription side affinity, chilly patient, worse in the morning.

CASE 8

this is 31 yr old male who presented with severe back ache with sciatica of 10 months duration. Complaint significantly reduced with VAS reducing from 100 to 0 in 1 month duration. Remedy was rhus tox. Symptoms considered were low back ache with sciatica pain to right leg, chilly patient, worse in the morning better after walking.

CASE 9

32 yr old female pt came with low back ache and sciatica pain radiating to right leg of 2 yrs duration. Her VAS came down to 0 from 80 in one month time. Remedy was Rhus tox. Points considered were side affinity, worse by standing and better by walking.

CASE 10

52 yr old Male pt presented with low backache with radiating pain to left leg. His complaint was of 2 yrs duration increased since a month. Kali carb reduced VAS from 80 to 0 in 1 month. Points considered were back ache with radiation to left leg, worse by sitting and walking. Better by lying on back.

Table 01

S. no	Age sex	Duration of complaint	Relevant totality	VAS score before	VAS score after	Remedy potency	Repetition	Time taken to improve
1	55yrs male	6months	Backache radiation to rt leg <standing< lifting weight	80	30	Rhus tox200	3 consecutive nights every week	2 weeks
2	50yrs male	10yrs	Back pain with left sided radiation.< morning > lying on back	70	20	Kali carb IM	Weekly once	2 weeks
3	42yrs male	2 months	Backache with right sided radiation. < standing > walking	80	20	Rhus tox IM	3 powders for 3 consecutive night	2 weeks
4	34yrs female	10months	Back ache radiating to right leg <standing >walking	80	10	Rhus tox IM	3 powders for 3 consecutive night	1 month
5	50yrs Female	1 month	Back ache radiating to left g.	70	0	Kali carb 200	Weekly once	2 weeks
6	65yrs male	1 yr	Back ache with sciatica <morning>walking Chilly pt	80	20	Rhus tox IM	3 powders for 3 consecutive night	2 weeks
7	40 yrs, female	3yrs	Back ache with rt sided sciatica Chilly pt < morning	90	0	Rhus tox IM	3 powders for 3 consecutive night	2 weeks
8	31yrs male	10 months	Back ache with right sided sciatica.<morning >walking. Chilly pt	100	0	Rhus tox IM	3 powders for 3 consecutive night	1 month
9	32 yrs female	2yrs	Back pain radiating to right leg	80	0	Rhus tox IM	3 powders for 3 consecutive night	1 month
10	52 yrs male	2yrs	Back ache with left sided sciatica. <sitting, < walking > lying on back	80	0	Kali carb IM to 10M	Once a week	I month

AGE DISTRIBUTION**Table 02: age Distribution**

Age	frequency	Percentage
30 – 40	3	42.8
40 – 50	2	28.5
50 – 60	4	57.1
60 – 70	1	14.3

In this group majority of the patients belonged to 50 to 60 yrs age group.

DURATION OF COMPLAINT**Table 03: Duration of complaint**

Duration of complaint	frequency	Percentage
<6months	2	28.5
>6 months to 1yr	3	42.8
> 1yr	5	71.4

Majority of the patients (71.4%) developed complaints from a year or more.

RELIABLE INDICATORS OF RHUS TOX**Table 04: Reliable indicators of Rhus tox**

Symptom	frequency	Percentage
Right sided	7	100
< morning	4	57.1
>walking	4	57.1
< standing	3	42.8

All the 7 cases of rhus tox presented with right sided sciatica pain. Worse by standing as well as better by walking was seen in 4 out of 7 cases (57.1%).

RELIABLE SYMPTOMS OF KALI CARB**Table 05: Reliable Symptoms Of Kali Carb**

Symptom	Frequency	Percentage
Left sided	3	100
>Lying on back	3	100

In Kali carb left sided pain and better by lying down provided strong indication.

CONCLUSION

Homoeopathic management of low back ache is very effective as all the 10 cases improved significantly with homoeopathic treatment. Rhus tox and Kali carb presented with definite reliable symptoms. When prescribed based on these reliable symptoms marked improvement was noticed.

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