



Short Communication

To study route of administration of homoeopathic medicine by Olfaction (Inhaler) in case of acute conjunctivitis

Pranav Shah^{1*}, Rakesh Labana²

¹Dept. of Homoeopathic Pharmacy, Government Homoeopathic Medical College and Hospital, Dethali – Siddhpur, Gujarat, India

²Government Homoeopathic Medical College and Hospital, Dethali – Siddhpur, Gujarat, India



ARTICLE INFO

Article history:

Received 04-02-2024

Accepted 10-05-2024

Available online 03-07-2024

This is an Open Access (OA) journal, and articles are distributed under the terms of the [Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License](#), which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: reprint@ipinnovative.com

1. Introduction

In our daily practice mainly of the suitcases we administration of homoeopathic medicine by oral route. Olfaction is preferred only in case of convulsive, epilepsy, coma, deaf and dump some time in paediatric patients who reject to take homoeopathic medicines even in oral route. An inhale medication is passing quickly transversely respiratory tract epithelium as well.¹⁻⁵

Dr. Hahnemann have mentioned in 6th edition of organon of medicine (§288) and in the materia medica pura about the effectiveness of olfaction. The action of aconitum in olfaction is mentioned in hahnemann's materia medica pura.

2. Aim

To study route of administration of Homoeopathic Medicine by Olfaction (Inhaler) in case of Acute Conjunctivitis with reference to Patan District (Gujarat).

3. Objective

1. To study Route of Administration of Homoeopathic Medicine by Olfaction.
2. To study the Quick Action of Homoeopathic Medicine by Olfaction.

3. To Study the Selection of Potency in case of Acute Conjunctivitis.
4. To Know the Medicine in case of Acute Conjunctivitis.

4. Materials and Methods

1. Study type: purposive, randomise - clinical study
2. Study site: Government Homoeopathic Medical College And Hospital, Dethali, Siddhpur – Patan (Gujarat)
3. Selection of patient: interview technique who has been suffering from conjunctivitis.
4. Consent form: consent form take after explanation of study purpose.
5. Number of patent: 20 cases.
6. Inclusion criteria: acute conjunctivitis, all ages and all sexes.
7. Exclusion criteria: patients on other medications.
8. Selection of medicine: according to acute totality of symptoms
9. Selection of potency: according to susceptibility of patients.
10. Preparation of homoeopathic inhaler: add homoeopathic medicine to the white organically grown cotton wick, place the homoeopathic medicinal saturated wick inside the inhaler body. The tube cover will protect the homoeopathic medicinal saturated

* Corresponding author.

E-mail address: shah_pranav1682@yahoo.co.in (P. Shah).

wick. They are easy to reuse as you can add more homoeopathic medicine to the organically grown cotton wick at any time, or simply replace the wick entirely.

11. Dispense of homoeopathic inhaler (how to use of inhaler?): place the nasal inhaler near the nostrils, and then slowly inhale while waving inhaler stick back and forth under the nostrils. Think 5-5-5 when using a nasal inhaler. Count to 5 while inhaling in count to 5 while holding breath, count to 5 while exhaling
12. Repetition of remedy: according to the need of the patient.
13. Duration of action: duration of action of medicine of condition was reviewed and recorded.

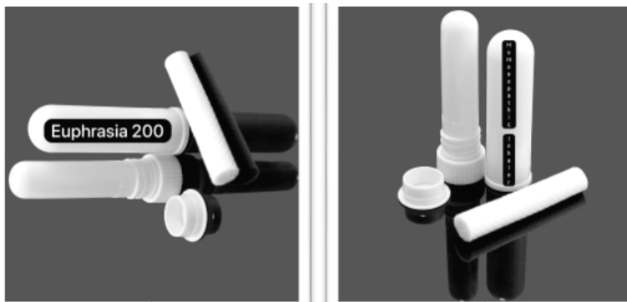


Figure 1:

4.1. Analysis based on age incidence

In our study we found out that out of 20 patients, 0 patient was from group 0-10, 09 patients were from the age group 11-20, 08 patients were from age group 21-30, 02 patients were from the age group 31-40, 01 patient was from the age group 41-50 who were suffering from conjunctivitis.

Table 1: Analysis based on age incidence

S.No.	Age group	No. of patients
1	0-10	0
2	11 - 20	9
3	21-30	8
4	31-40	2
5	41-50	1

4.2. Analysis on the basis of gender

in our study we found out that 20 patients, 15 male and 5 females was suffering from conjunctivitis.

4.3. Analysis on the basis of sides of eyes

In our study we found out that 20 patients, 09 was both eyes, 04 was right and 07 was left eyes suffering from conjunctivitis.

Table 2: Analysis based on gender

S.No.	Gender	No. of patients
1	Male	15
2	Female	5
	Total	20

Table 3: Analysis based on side of eyes

S.No.	Side of Eyes	No. of Patients
1	Both	9
2	Right	4
3	Left	7
	Total	20

4.4. Analysis based on selection of medicine

After cases taking based on totality, we prescribed medicine in 20 cases. We prescribed Euphrasia in 13 cases. out of 13 as many as 12 shown improvement and 01 didn't shown improvement, prescribed Ruta in 1 case and show improvement, prescribed Ignatia Amara in 1 case & shown improvement, prescribed Pulsatilla in 01 case & shown improvement, prescribed Rhus Tox in 1 & shown improvement, prescribed Thuja Occidentalis in 1 case & shown improvement, prescribed Nat. Mur in 1 case and show improvement, prescribed Sulphur in 1 case and show improvement.

Table 4: Analysis based on selection of medicine

S.No.	Medicine Prescribed	No. of Patients
1	Euphrasia	13
2	Ignatia Amara	1
3	Nat. Mur	1
4	Pulsatilla	1
5	Rhus tox	1
6	Ruta Graveolens	1
7	Sulphur	1
8	Thuja Occidentalis	1
	Total	20

4.5. Selection of potency

After case taking case selection of potency based on i. Susceptibility of the patient, ii. Seat of disease, iii. Nature and intensity of symptoms, iv. Stage and duration of the disease, v. Previous treatment of the patient. in our study we found out that 20 patients, 6 patients were given medicine in 30c, and 14 patients were given medicine in 200c.

Table 5: Analysis based on selection of potency

S.No.	Potency	No. of patients
1	30C	6
2	200C	14
	Total	20

4.6. Duration of Action of medicine (Time: Minute)

Duration of Action of medicine time on 02 patients show improvement in 0-10 minutes, 07 patients show improvement in 11-20 minutes, 08 patients show improvement in 21-30 minutes, and 03 patient shows improvement above 30 minutes.

Table 6: Analysis based on action of time

S.No.	Duration of Action of medicine (Time: Minute)	No. of patients
1	0 – 10	2
2	11 – 20	7
3	21 – 30	8
4	30 above	3
	Total	20

4.7. Before treatment grading of the conjunctivitis

In our study we found out that maximum patient was having grade 4, grade 3, and grade 2 conjunctivitis out of 20, 4 patient was suffering from grade1, and 4 patient was suffering from grade 2, 5 patient was suffering from grade 3, and 7 patient was suffering from grade 4.

Table 7: Before treatment grading of the conjunctivitis

S.No.	Before Treatment Grading of the conjunctivitis	No. of patients
1	Grade 0.5	0
2	Grade1	4
3	Grade2	4
4	Grade3	5
5	Grade4	7
	Total	20

Table 8: After treatment grading of the conjunctivitis

S.No.	After Treatment: Grading	No. of Patients
1	Grade0	10
2	Grade1	7
3	Grade2	2
4	Grade3	1
5	Grade4	0
	Total	20

Table 9: Analysis Based on Improvement

S.No.	Result	No. of patient
1	Improved	19
2	Not Improved	1
	Total	20

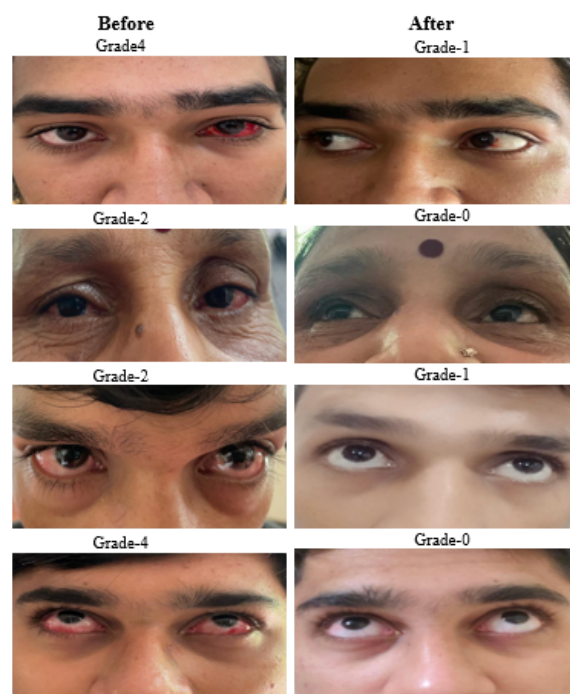


Figure 2: Photograph of before and after giving homoeopathic inhaler



Figure 3: Photograph of before and after giving homoeopathic inhaler



Figure 4: Photograph of before and after giving homeopathic inhaler

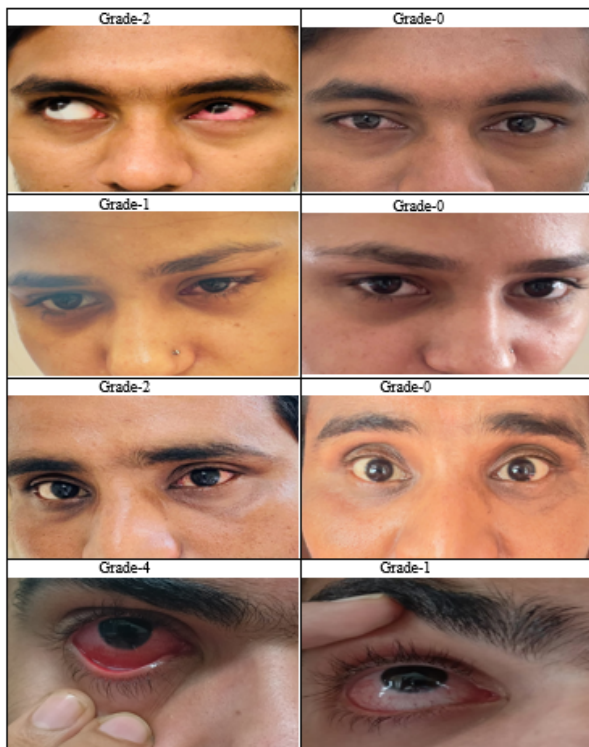


Figure 5: Photograph of before and after giving homeopathic inhaler

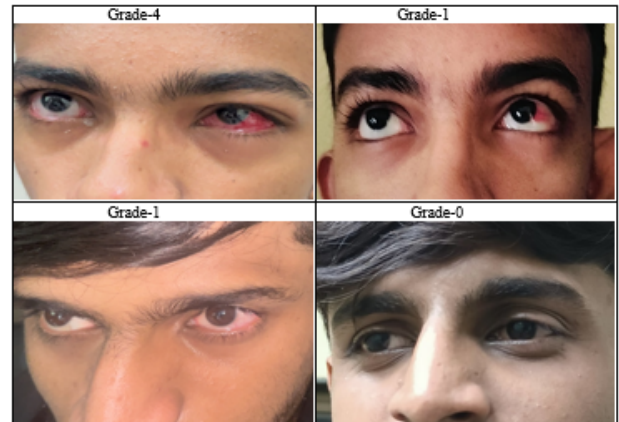


Figure 6: Photograph of before and after giving homeopathic inhaler

4.8. After treatment grading of the conjunctivitis

After giving medicine majority patients has shown improvement and symptoms severity decreased in our study, we found that after giving a homeopathic inhaler out of 20 as many as 19 shown improvement and their oxford scale came to 0 & 1 grade and 1 patient didn't shown improvement and grade 3 conjunctivitis.

4.9. Analysis based on improvement

In our study, we found that after giving a homeopathic inhaler, out of 20 patients, 19 showed improvements in their symptoms and only 1 patient was not improved.

5. Conclusion

After analyzing all data, I came to the following conclusions. Most of the patients who were suffering from conjunctivitis were from the age group 11-20 and 21-30. Out of 20, we found 17 patients in this 2-age group. We also found out that most of the patients who were suffering from the conjunctivitis were male i.e., 15 out of 20. We also used the oxford scale for the staining dots where we found out that majority of them were suffering from grade 3 and grade 4 conjunctivitis i.e., 12 out of 20.⁶⁻¹⁰

After giving medicine the oxford scale result of improved patient was grade 1, grade 2 and unchanged in unimproved patient. And based on my study and all the results we can conclude that we can use indicated homeopathic medicine in inhaler. After acute totality of symptoms we given indicated homeopathic medicine in inhaler we got result within 20 to 30 mint. Most of case we prescribed Euphrasia medicine according to acute totality, select medium potency 200.

In one case not got improvement because of patient habited of chronic tobacco chewing and smoking habit.^{11,12}

But for this to use at large scale proper large-scale research is needed where we can study it on more no. patients. Because I have studied it on only 20 patients.^{13,14}

The idea behind making a homoeopathic inhaler an inhale medication is passing quickly transversely respiratory tract epithelium as well. Hahnemann have mentioned in 6th edition of Organon of Medicine (§288) and in the Materia Medica Pura about the effectiveness of olfaction.^{15,16}

6. Source of Funding

None.

7. Conflict of Interest

None.

References

1. Phatak SR. Materia Medica of Homoeopathic Medicines - 2nd Edition Revised & Enlarged. New Delhi: B Jain Publishers Pvt Ltd; 2007.
2. Allen HC. Keynotes and Characteristics with Comparisons. New Delhi: B Jain Publishers Pvt Ltd; 2002.
3. Boericke W. Pocket Manual of Homeopathic Materia Medica. New Delhi: B Jain Publishers Pvt Ltd; 2002.
4. Clarke J. A dictionary of practical materia medica. vol. 2. New Delhi: B. Jain Publishers (p) Ltd; 1997.
5. Lilienthal S. Homoeopathic Therapeutics. Reprint edition. New Delhi: B Jain Publishers Pvt Ltd; 2001.
6. Ghai OP. Essentials pediatrics, 6th edn. New Delhi: CBS Publisher; 2005.
7. Quay GH. A monograph of diseases of the nose and throat. 200;80:171–81.
8. Brown S. Otorhinolaryngology, head and neck surgery. 7th Edn.. vol. 1. Hodder Arnold Publications; 2008. p. 1219–32.
9. Behrman RE, Kliegman R. Nelson text book of pediatrics. 17th edn. W B Saunders Co Ltd; 2003.
10. Dhingra PL. Diseases of ear, nose, throat. 4th edn. New Delhi: Elsevier India private ltd; 2004. p. 311–5.
11. Chamberlain E, Ogilvie C, Evans CC. Chamberlain's symptoms and signs in clinical medicine, 11th edn. Butterworth-Heinemann; 1992.
12. Hall and Colman's Diseases of the Ear, Nose and Throat. 14th Edn. Laurence hunter publisher; 1995. p. 97–8.
13. Hathiram B, Grewal D. Ear, nose, throat simplified. Mumbai: Bhalain book depot; 1999. p. 234–7.
14. Gray RF, Hawthorne M. Synopsis of Otolaryngology. 5th Rdn. Indian: Elsevier; p. 355–8.
15. Available from: <https://www.slideshare.net/drangelosmith/tonsillitis-38166423>.
16. 2015. Available from: <http://en.wikipedia.org/wiki/tonsillitis>.

Author biography

Pranav Shah, Assistant Professor

Rakesh Labana, Intern

Cite this article: Shah P, Labana R. To study route of administration of homoeopathic medicine by Olfaction (Inhaler) in case of acute conjunctivitis. *Southeast Asian J Case Rep Rev* 2024;11(2):55-59.