

BioCore International Journal of Pharma Sciences And Scientific Research

ISSN 2471-6782

Open Access Case Report

Homoeopathic Treatment of Chronic Hepatitis C Virus

Syed Mahboob Alam¹, Farah-Saeed^{2*}, Mansoor Ahmad³, Manzoor ul Hussain⁴

¹Basic Medical Sciences Institute, Jinnah Post Graduate Medical College, Karachi-Pakistan

²Department of Pharmacognosy, Dow College of Pharmacy, Dow University of Health Sciences, Karachi-Pakistan

³Research Institute of Pharmaceutical Sciences, University of Karachi-Pakistan.

⁴Dr Mahboob Alam Homoeopathic Clinic, Karachi-Pakistan

Corresponding author: Farah-Saeed, Department of Pharmacognosy, Dow College of Pharmacy, Dow University of Health Sciences, Karachi-Pakistan. Tel: 0321-2327235, E-mail: farah.saeed079@gmail.com

Citation: Farah-Saeed et al. (2017), Homoeopathic Treatment of Chronic Hepatitis C Virus. Int J Pharm Sci & Scient Res. 3:4, 60-64. DOI:10.25141/2471-6782-2017-4.0059

Copyright: ©2017 Farah-Saeed et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited

Received: August 01, 2017; Accepted: August 14, 2017, Published: September 26, 2017

Abstract:

A case of chronic hepatitis C virus successfully treated with homoeopathic medicines is presented below.

The treatment protocol included medicines according to patient's mind symptoms, disease specific symptoms and modalities. The diagnosis was done by specific test for hepatitis antibody and viral measurements. Patient was followed for five years and till date with measurement of viral count, liver function test, complete blood count, ESR and ultrasound abdomen.

Patient is completely treated for hepatitis C and is in good health.

Clinical trials need to be conducted on this homeopathic treatment protocol to explore the therapeutic potentials of these medicines for treatment of viral hepatitis

Key Words: Chronic Hepatitis Virus, Homoeopathy, Liver Disease

Introuduction:

In 1989, HCV was discovered as the causative agent of non-A and non-B Hepatitis virus. HCV is RNA (Flaviviridae). It has an approximate diameter of 40-50 nm. The HCV genome is a single-stranded RNA molecule of 9500 kilodaltons [1-3]. Alter (2007) reported that 2.2% of the world population is suffering from hepatitis C virus. Hepatitis C is emerging as a major health problem in developing countries [4]. Pakistan has the second highest rate of Hepatitis C prevalence (4.5 - 8); as reported by Khattak et al. (2002) ^[5]. Among the various risk factors, few risk factors includes: blood transfusion especially in case of Thalassemia and hemophilia patients, reuse of needles for ear and nose piercing, reusing of syringes, injecting drug users, tattooing, unsterilized shaving razors used by barbers, unsterilized dental and surgical instruments, and error in recapping of syringes by health care workers during dialysis [6-9]

Case Presentation:

Mrs Tahira, resident of Tando Adam, was diagnosed HCV at the age of 38 years in 2011. She has normal blood pressure and sugar level. At the time of diagnosis of HCV, she was rushed to hospital due to severe pain in legs and fatigue. Apart from hepatitis C, her other complaints were irregular menstrual cycle and epigastric pain. No diseases were reported by patient in her family history.

She first time visited Dr Mahboob Alam clinic on 17-06-2011 with the diagnosis of Hepatitis C. She only took homoeopathic medicines for treatment. Her HCV negative report was obtained on 04-10-2016.

International Journal of Pharma Sciences And Scientific Research

Volume 3 Issue 4, September 2017

Date	Tests	Medicine
17-06-11		Thuja 10M
		Carbo veg 30
		Phosphorus 30
19-07-11		Repeat
20-09-11		Sepia 1000
		Phosphorus 30
20-10-11	HCV detected in 05-10-11	Thuja CM
		Chelidonium 1000 Phosphorous 30
		Ferrum phosphoricum 6x Calcarea phosphoricum 6x
15-12-11	Dry itch, heavy menses	Sulphur 10M
	Dry iten, neavy menses	Lycopodium 6
		Kali Sulphuricum 30 Natrum Phosphoricum 3x Na-
		trum Sulphricum 3x Natrum muriaticum 3x
18-01-12	Dry itch, heavy menses	Thuja CM, Carbo veg 30, Phosphorus 30
28-02-12		Repeat
03-05-12		Repeat
22-06-12	15-07-12 SGPT 87, Hb 9.7	Repeat
17-07-12	Tension	Ignatia 10 M
		Chelidonium 3x
07-09-12	06-09-12 SGPT – 72; Hb – 8.5 feeling better	Repeat
17-10-12	16-10-12 SGPT – 50; Hb – 8.1	Repeat
10-12-12	Menses normal	Repeat
11-02-13	Heavy bleeding.	Laechesis 10M
	09-02-17 SGPT 81, Hb – 6.8	Chelidonium 1000
	CLD	Phosphorus 30
12-04-13		Repeat
03-06-13		Repeat
17-07-13		Lycopodium 6
17-08-13	12-08-13 (U/S Abdomen) liver raised. Parenchymal	China 1M
	echogenicity	Ferrum metallicum 6
21.00.12	11-08-13 SGPT -58, Hb - 6	
21-09-13		China 1M Ferrum metallicum 6
		Chelidonium 3x
26-11-13		Repeat
21-12-13	Bleeding, pain	Ferrum metallicum 6
21 12 13		Chelidonium 3x
		Sabina 200
		Belladonna 6
25-01-14		Repeat
15-03-14	12-03-14 SGPT – 65, Hb 7.	Sulphur 10M
	No menses since 2 months	Ferrum metallicum 6
		Chelidonium 3x

Date	Tests	Medicine
05-04-14		Crotalus horridus 200 Carbo veg 30 Phosphorus 30 12 salts-CS12
10-05-14	08-05-14 U/S Abdomen - normal	Repeat
20-06-14		Repeat
02-08-14	Much better	Repeat
30-08-14		Psorinum 1M, Chelidonium 10M, Carbo veg 30, Phosphorus 30
27-09-14		Sabina 200 Chelidonium 3x
24-11-14	HCV Reactive SGPT 46 Hb – 5	Chelidonium 10M Sabina 1M Phosphorus 30
24-01-15		Arnica 200 Ferrum metallicum 200 China 6
28-02-15		Repeat
27-04-15		Repeat
08-06-15		Repeat
01-08-15	SGPT 56; Hb 7.6	Thuja 1M Chelidonium 1M China 6 Sabina 200 daily in case of bleeding
16-09-15	Hb 7.6, SGPT 48	Repeat
		Thuja 1M Chelidonium 1M Belladonna 30 Sabina 200 daily in case of bleeding
07-01-16		Repeat
11-02-17		Thuja 1M Chelidonium 1M China 30 Sabina 200 daily in case of bleeding
17-02-16	SGPT 27; Hb 6.7	China 6 Ferrum metallicum 200
23-04-16		Repeat
04-06-16		Chelidonium 1M China 6 Ferrum metallicum 6 Sabina 200 daily in during menses
25-08-16		Repeat
04-10-16	06-04-17 HCV not detected	Thuja 10M Chelidonium 1M China 30 Sabina 200 (during menses)

07-12-16		Repeat
13-04-17	02-04-17 Hb 7.6; RBC 4.55; WBC 5.6; Plt 339; ESR 45; SGPT 18; HCV PCR Quantitative – not detected	Repeat
17-05-17		Thuja 10M Chelidonium 1M China 30 Sabina 200 (during menses) Ferrum phosphoricum 3x Calcarea phosphoricum 3x

Discussion:

Homoeopathic system of medicine is very effective. Different theories were given by different scientists to prove its efficacy. In dose-response curve the area of interest of homeopathic system of treatment is the initial point of the curve, known as, threshold area. According to laws of pharmacology in case of medicine, small dose stimulates, moderate dose inhibits and large dose may be toxic or fatal. As threshold dose stimulates the body's immune system, in rebuilding the vitality. In homeopathic many toxic drugs are used effectively in low dose for treating patients.

In homoeopathic system of medicine, patients are asked to keep the medicated homoeopathic globules acting as nano particles in the mouth or sub-lingual as it acts best. The nanoparticles have capability to cross the blood brain barrier. Nano particle on entering the peripheral nervous system of the patient through neuropeptides and immunopeptides reaches the central nervous system to release the unusal imbalance on the emotional and mental state that has led to the pathological state in patient. The brain communication along with the electromagnetic resonance in homeopathy collectively is characterized as the vital force [10-16].

The main homoeopathic medicines used for the treatment of Mrs Tahira included: Chelidonium majus, Phosphorus, Lycopodium, Natrum phosphoricum, Natrum sulphururicum, Lachesis, China officinalis, Arnica montana. Phosphorus was used as it is a significant medicine for hepatitis C. One noteworthy feature of this medicine is its indication in the early stage of malignancy of the disease. It is recommended in cases of hyperaemia, enlargement and induration of liver, suppuration in hepatitis, fever, night sweats and marked soreness over the liver, acute atrophy of liver, interstitial hepatitis and an alignant jaundice. Chelidonium was prescribed due to its indication in hepatic disorders. It leads to secretion of thinner and more profuse bile. Cheliodonium effectively relieves sharp and lancinating pain in liver region that extends to the right shoulder blade and to the chest and stomach. It acts on portal system and covers many of the direct reflex symptoms of diseased liver, congestive inflammation, fullness and enlargement in semi-chronic and acute cases. Therefore it is therapeutically efficacious in treating cases of Hepatitis C. The keynote of the remedy is tearing, shooting, stitching pain from the liver region traveling to the back below the right shoulder blade.

Lycopodium is a right-sided remedy, specifically for liver and kidney clearance. Liver is sensitive to touch and there is a feeling of tension in it. Fullness of stomach on consumption of small amount of food, flatulence, bitter taste, bad humour and

constipation are the primary symptoms for which this medicine is prescribed. It was given to patient as she had epigastric problem along with hepatitis.

Natrum phosphoricum was prescribed due to its effectiveness for treatment of chronic hepatitis. It controls bile secretion, nausea and indigestion.

Natrum sulphuricum was given as it is used for the treatment of enlarged liver, soreness in liver region, bile secretion, nausea, gastro-intestinal heaviness and sluggish liver.

Lachesis was prescribed as it is used for burning and acute pain in stomach extending towards stomach. Inflammation and softening of liver, hepatic abscess and to control heavy menstrual bleeding.

China relieves pain in hepatic region as from ulceration of sub-cutaneous region that may get worse on touch. Hard and swollen liver. Yellow coloration of skin and conjunctiva. It was prescribed to relieve above mentioned symptoms and it also corrects anaemia.

Belladonna facilitates in treating hepatitis symptoms of nausea, vomiting, pain and jaundice and was given to relieve the patient from these symptoms. Arnica was recommended as it is effective remedy for hepatitis C. Ferrum phosphoricum and Ferrum metallicum were given to treat anemia and fatigue. Psorinum and Calcarea Phosphoricum were prescribed to treat weakness associated with disease condition. Kali sulphuricum was recommended to alleviate fever and symptoms of mucous membrane. Sulphur is generally recommended in the treatment of chronic pathologies. Apart from that it increases the flow of bile and relieves pain and soreness of liver. Ignatia is used to treat anxiety and depression due to hepatitis C. Sabina was given to treat heavy bleeding during menstruation and other irregularities associated with it [16].

Conclusion:

The patient got completely treated from hepatitis C. Apart from that her menstruation and epigastric problems were also resolved

This case history positively reflects the therapeutic efficacy of homeopathic medicines for the safe and effective treatment of hepatitis C virus. Proper clinical trials need to be carried out in future.

Consent: Informed consent was taken from the patient.

References:

1. Choo QL, Kuo G, Weiner AJ, Overby LR, Bradly DW, Hough-

International Journal of Pharma Sciences And Scientific Research

Volume 3 Issue 4, September 2017

- ton M. 1989. Isolation of a cDNA clone derived from a bloodborne non-A, non-B viral hepatitis genome. Science; 244:359-62.
- 2. Muhammad N, Jan MA. 2005. Frequency of hepatitis "C" in Buner, NWFP. J Coll Physicians Surg Pak; 15:11-4.
- 3. Hwang SJ. 2001. Hepatitis C virus infection: an overview. J Microbiol Immunol Infect; 34:227-34.
- 4. Alter, M. J. 2007. Epidemiology of hepatitis C virus infection. World Journal of Gastroenterology, 13(17), 2436-2441.
- 5. Khattak MF, Salamat N, Bhatti, FA, Qureshi, TZ. 2002. Sero-prevalence of hepatitis B, C and HIV in blood donors in northern Pakistan. Journal of Pakistan Medical Association, 52, 398–402.
- 6. United Nations Office for Drug Control and Crime Prevention. Global Illicit Drug Trend. 2002. New York: United Nations, 2002.
- 7. Arif F, Fayyaz J, Hamid A. 2008. Awareness among parents of children with thalassemia major. J Pak Med Assoc; 58: 621-624.
- 8. Hamid SS, Farooqui B, Rizvi Q, Sultana T, Siddiqui AA. 1999. Risk of transmission and features of hepatitis C after needlestick injuries. Infect Control Hosp Epidemiol; 20: 63-64.
- 9. Waheed Y, Shafi T, Safi SZ, Qadri I. 2009. Hepatitis C virus in Pakistan: A systematic review of prevalence, genotypes and risk factors. World J Gastroenterol. 7; 15 (45): 5647-5653.

- 10. Khuda-Bukhsh AR. 2003. Towards understanding molecular mechanisms of action of homeopathic drugs: an overview. Mol Cell Biochem; 253(1-2):339-45.
- 11. Bellavite P, Chirumbolo S, Marzotto M. 2010. Hormesis and its relationship with homeopathy. Hum Exp Toxicol; 29(7): 573-9.
- 12. Chikramane PS, Suresh AK, Bellare JR, Kane SG. 2010. Extreme homeopathic dilutions retain starting materials: A nanoparticulate perspective. Homeopathy; 99: 231-242.
- 13. Calabrese EJ. 2016. The Emergence of the Dose–Response Concept in Biology and Medicine. Int. J. Mol. Sci; 2034: 1-14.
- 14. Bell IR. 2012. A model for homeopathic remedy effects: low dose nanoparticles, allostatic cross-adaptation, and time-dependent sensitization in a complex adaptive system. BMC Complement Altern Med; 12: 191.
- 15. Li X. 2017. Nano carriers for drug transport across the bloodbrain barrier. J Drug Target; 25(1): 17-28.
- 16. Boericke W. 1967. Pocket manual of Homoeopathic Materia Medica With Repertory. Lahore, Pakistan. Masood Publishers.