

Management of Hypothyroidism through Homoeopathy- A Case Report

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Abstract

Background: The prevalence of Hypothyroidism is increasing day by day. Understanding the background of hypothyroidism is essential for recognizing its impact on the body and the importance of timely diagnosis and treatment to prevent long-term complications and improve patient outcomes.

Case summary: An 8 year old girl came to OPD complaining of weight gain and constipation since 2 years. She was already diagnosed with Hypothyroidism but had not undergone any treatment. A proper case study was done and constitutional medicine was given. Patient was prescribed with Calcarea carbonicum 200 weekly doses after case study and patient was better for a time being. Later on patient had an increase in TSH (82.6mIU/l) values for which the case was re-studied and Calcarea carbonicum again seemed to be the similimum, so the potency was increased. Calcarea carbonicum 1M was given a single dose and TFT was checked again the next month TSH became 76.92mIU/L. After 4 months TFT was again checked and the hormone levels came to normal (3.07mIU/L). This case helps us to understand that homoeopathy has a positive role in managing Hypothyroidism thus improving the quality of life.

Keywords: Hypothyroidism, Homoeopathy, TFT

INTRODUCTION

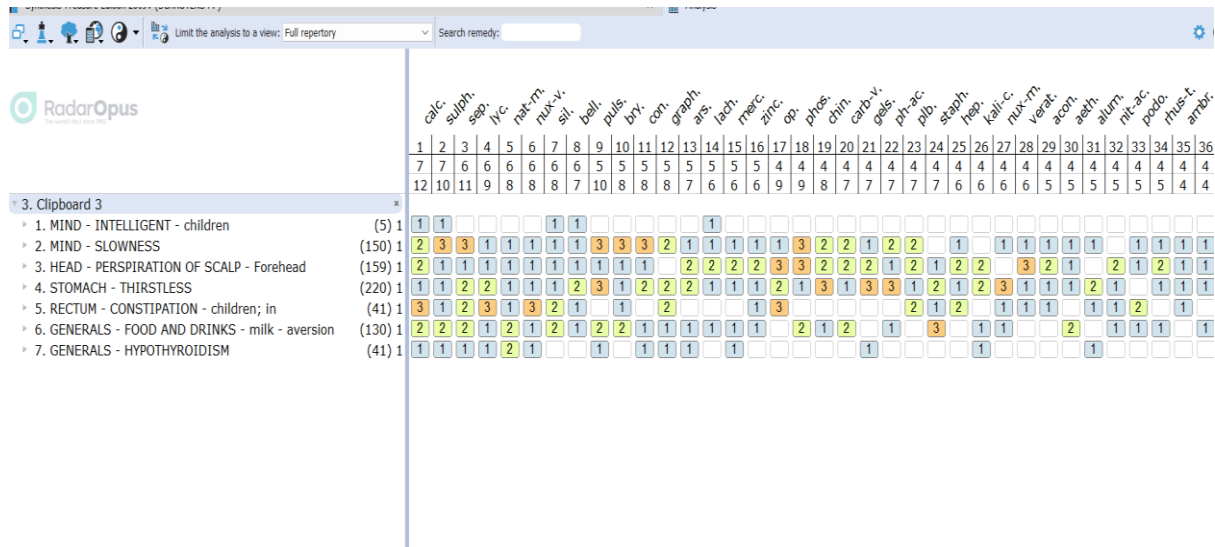
In ICD -11, Hypothyroidism is mentioned under 5A00^[1]. It is a clinical condition due to insufficient thyroid hormone production for a prolonged period or rarely from resistance of peripheral tissues to the effect of it^[2]. It can be congenital or acquired. It is a common hormonal disease in children with female predominance^[3]. Thyroid dysfunction can impair the quality of life^[4]. Symptoms are usually subtle and gradual and symptoms includes weight gain, constipation, muscle cramps, slow reaction etc^[5].

CASE SUMMARY

Baby J of 8 yearold female studying in 3rd standard came to Sarada Krishna OPD with complaints of weight gain and constipation since 2 years. There is occasional bleeding, stool was soft in nature and passed without much difficulty. She used to pass stool once in 2-3 days. The patient came with the TFT report which was taken 1 week back which showed TSH value- 62.49mIU/L. there isn't any relevant past illness or family history. In the life space investigation prenatal and antenatal history was not available as the child was adopted at her 10th day of birth. Proper vaccination was given to the child till then. She scores good mark in studies, easily mingles with others and slow in activities.

Regarding physical generals, her thirst was reduced with sweat increased on her head. Other generals were normal. She has desire for milk(+), egg(+) and curd(+) and there is an aversion to milk(++). Ther patient

comes under hydrogeniod constitution with thermal chilly. Her height was 128cm and weight 34kg with BMI- 20.8kg/m². General examination was normal with no visible or palpable swelling in the thyroid gland. There was mild darkening around her neck. The prominent miasm in the child was found out to be sycotic. There wasn't much characteristic symptom available from the patient. Based on the available symptom totality was framed and Repertorization was done in Radar software.



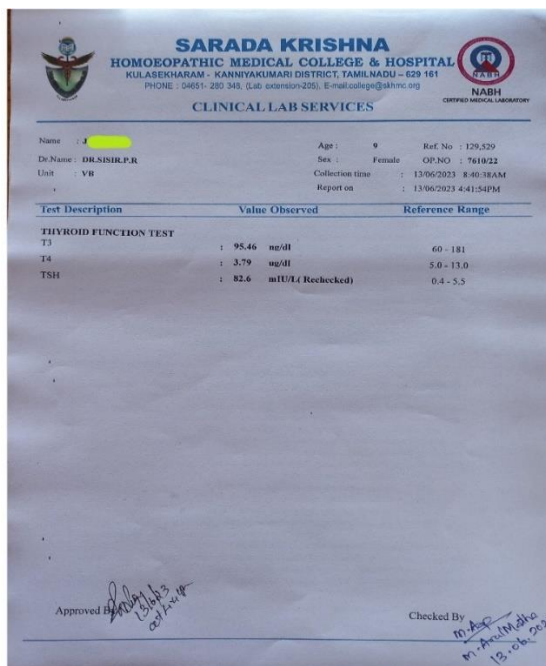
Follow up

DATE	SYMPTOM(S) CHANGES	PRESCRIPTION
19/11/22	No further weight gain, constipation occasionally. Generals - good	R CALCAREA CARBONICUM 200/4 DOSE (Weekly once) (HS) B.Pills 3xtid
13/02/23	Constipation better TSH:- 3.12mIU/ L Wt- 34kg Neck circumference- 30cm	R CALCAREA CARBONICUM 200/4 DOSE (Weekly once) (HS) B.Pills 3xtid
17/06/23	TSH:- 82.6mIU/L Wt- 35 kg Stool- regular Case restudied- again same medicine was obtained, so potency has been raised.	R Calcarea carbonicum 1M/1 DOSE B.Pills 3xtid
15/7/23	Wt- 36.7. stool - regular Generals - good	R CALCAREA CARBONICUM 1M/ 1D B.Pills 3xTDSx1month


12/08/23	Hard stool, difficulty in passing. Wt-37.3 kg TSH – 76.92mIU/L	R CALCAREA CARBONICUM 1M/ 1D(once in 15 days) (HS) B.Pills 3xTDSx1month
14/10/23	Stool constipated since 2 days Generals good Wt – 37.2 kg	R CALCAREA CARBONICUM 1M/ 2D(once in 15 days) (HS) B.Pills 3xTDSx1month
6/11/23	TSH:- 3.07mIU/L, 37.5 kg Constipation better, occasional bleeding Generals good	R CALCAREA CARBONICUM 1M/ 2D (once in 15 days) (HS) B.Pills 3xTDSx1month
17/2/24	Wt- 39.5kg Constipation better Generals good	R CALCAREA CARBONICUM 1M/ 4D (once in 15 days) (HS) B.Pills 3xTDSx1month

Report on 13/06/2023

Report on 15/07/2023



Report on 4/11/2023

 LIN LABORATORY 2-2D6, KADAMALAI KUNTU, MEKKAMANDAPAM (PO) KANYAKUMARI DISTRICT, TAMILNADU Cell: 948645 PIN 629166 709453		
Patient's Name	: MISS J [REDACTED]	Date : 04-11-2023 Print Date : 04-11-2023
Age : 10 Sex	: F	Ref No : 5676
Doctor Name	: SELF	Hospital Name :SELF
TEST	RESULT	NORMAL RANGE
THYROID FUNCTION TEST :		
T3	109.46	52-185ng/dl
T4	8.28	5.0-15.0µg/dl
TSH	3.07	Healthy persons : 0.35-5.0 mIU/L Preclinical Hyperthyroidism : 0.1-0.4 Hyperthyroidism : <0.1 Subclinical Hypothyroidism : 5-20 Primary Hypothyroidism : >20 mIU/L

DISCUSSION AND CONCLUSION

Numerous body functions, including as metabolic processes and gastrointestinal motility, are known to be impacted by hypothyroidism, which frequently causes symptoms like weight gain and constipation in juvenile patients^[6]. This case highlights the importance of prompt care by showing how untreated hypothyroidism can gradually worsen these symptoms. Calcarea carbonicum was chosen because of its proven effectiveness in treating hypothyroid disorders, especially in those with symptoms like weight gain and persistent fatigue^[8]. Susceptibility was initially assessed using the susceptibility chart^[9]. The potency was raised as we again obtained the same medicine after recase taking. The significant fluctuation in TSH levels observed in this patient underscores the dynamic nature of thyroid disorders and the necessity for regular monitoring. The eventual normalization of TSH levels after treatment with Calcarea Carbonicum 1M demonstrates the potential benefits of individualized homeopathic remedies in managing thyroid dysfunction. In conclusion, this case reinforces the role of homeopathy as a viable alternative treatment modality for paediatric hypothyroidism when conventional treatments are not initiated or effective. Further studies are warranted to explore the broader applicability of homeopathic treatments in similar cases.

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