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## DYSTHYMIA AND ITS HOMOEOPATHIC MANAGEMENT

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#### **ABSTRACT**

Dysthymia or persistent depressive disorder is a mood disorder which leads to considerable distress and disability in an individual's life. They feel despondent and hopeless for years and sometimes even greater part of adult life. It is characterized by an insidious onset depression with waxing and waning of symptoms for at least 2 year and with possibly brief periods of normal mood. This condition often remains untreated and may even lead to suicidal death. According to homoeopathy, dysthymia, a mental disorder is a one-sided disorder which is psoric in origin. It can be managed effectively by homoeopathic medicines along with general management.

**KEYWORDS**: Dysthymia, Persistent depressive disorder, Homoeopathy, Homoeopathic medicines

#### INTRODUCTION

Dysthymia, a Greek word meaning "ill humor" or "bad state of mind" is persistent mood disorder which is characterized by long standing depression of mood which is less serious than recurrent depressive disorder of mild or moderate severity in terms of duration and severity of individual episodes. This disorder is mentioned in section F34.1 in ICD 10 (International Classification of Disease 10<sup>th</sup> Revision). It is fluctuating in nature and individuals may have periods of days or weeks in which they feel well however most of the time they feel tired and depressed. Mild to severe depressive episodes may superimpose.<sup>[1]</sup>

The worldwide lifetime prevalence of depression including dysthymia is approximately 12% with incidence of 17.5% and 9.4% in developed and developing countries respectively. [2] It usually affect individuals early in adult life however may appear as aftermath of discreet depressive episode and associated with bereavement or other stress when appearing late in life. [1]

#### **ETIOLOGY**

Etiology of dysthymia is not sufficiently well understood. Biological (genetic susceptibility), physiological and psychosocial causes (stressful childhood and adulthood, lack of closure, confiding relation and unfavorable social circumstances) may play a role in predisposing, precipitating and perpetuating the

disorder. Physiological abnormalities associated with it include sleep irregularities like shorter periods of dreamless sleep (non-rapid eye movement sleep), elevated levels of interleukin 1, decreased maximum rate of serotonin uptake and lower platelet monoamine oxidase activity in females. [3,4]

#### PRESENTING COMPLAINTS

Usually dysthymia begins in early adult life. [1]According to Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM 4), individuals experience depressed mood for most of the day, for more days then not for at least 2 years as well as at least two of the following symptoms: (1) poor appetite or overeating; (2) insomnia or hypersomnia; (3) low energy or fatigue; (4) low self-esteem; (5) poor concentration; (6) feeling of hopelessness. Fleeting periods of normal mood experiences in between cannot exceed two months.

In DSM-5, the term persistent depressive disorder encompasses several chronic depressive presentations, including dysthymia with or without superimposed major depressive episodes, chronic major depression, and recurrent major depression without recovery between episodes. Dysthymia may be associated with other psychiatric comorbidities like major depression, anxiety disorder, personality disorder, somatoform disorder and substance abuse.<sup>[5]</sup>

#### **DIAGNOSIS**

Unlike major depression, dysthymia may be easily clinically overlooked because of the mild and fluctuating nature of symptoms and associated comorbidities can be misleading. Diagnosis is based in DSM criteria as mentioned above. In early onset disease it can be mistaken as characteristics of individual personality.

Validated screening tools for depression such as Cornell Dysthymia Rating Scale (CDRS), Hamilton Depression Rating Scale (HDRS) which is developed to assess frequency and severity of the disease symptoms is useful for assessing the chronic and recurring symptoms of dysthymia. CDRS has better content validity than the HDRS. [6]

#### **PROGNOSIS**

The relapsing rate of dysthymia after treatment is high. Large proportions of sufferers do not experience a sustained recovery. Patients may also experience low quality of life, disability, and poor social support and marital adjustment. Also, adolescent depression is a major risk factor for suicide. [5,7]

#### MANAGEMENT AND TREATMENT

For managing depressive disorders including dysthymia, psychotropic drugs along with psychological treatments are found to be most effective. [7] Psychological interventions are treatments in which verbal communication between a therapist and a client is the core element and in which the communication of the therapist is based on a specific theoretical framework about the causes of depression and how it can be reduced. Psychological treatments include general supportive therapy, cognitive therapy, cognitive behavior therapy, problem solving therapy, and interpersonal psychotherapy. [4,8]

Lifestyle modifications like healthier patterns of eating, physical activity, relaxation/sleep and social interaction are believed to improve depression.<sup>[3]</sup>

#### HOMOEOPATHUC MANAGEMENT

Homoeopathy and dysthymia-

According to homoeopathy, dysthymia is a mental disorder. Mental diseases are mentioned in Aphorism 210 to 230 of Organon of Medicine according to which mental diseases are one sided ailments, psoric in origin, affecting the whole psycho-somatic entity in which the symptoms of derangement of mind and disposition peculiar to each of them is increased, while the corporeal symptoms decline.

To treat mental cases, physician must apt appropriate mode of treatment according to disease category i.e. (1) disease arising from corporal disease, (2) disease appearing suddenly as acute disease due to some exciting factor, (3) disease of doubtful origin or (4) disease arising from prolonged mental cause. Treatment strategies include prescribing individualized homoeopathic remedies which include indicated acute remedies and antipsoric remedies to be prescribed according to case along with psychotherapy. [9]

Past studies on homoeopathy and depression suggest that homoeopathic intervention might be comparable to antidepressants and patients treated by homeopaths report improvement in depression. [10]

### Homoeopathic medicines

Homoeopathic medicines are prescribed on the basis of totality of symptoms. It include taking in account the altered state of mind and disposition with associated triggering event, corporeal symptoms if any along with other symptoms like physical generals, personal history, past history and family history of patient. Indications of some commonly prescribed medicines are discussed below-

- *Acidum phosphoricum*: For people who've become apathetic and indifferent to their lives. There is dullness of mind and despair about life. It is indicated when this state develops after grief or some mental shock such as disappointed love, etc. There is a craving for juicy things.<sup>[11,12]</sup>
- *Alumina*: For low spirited people who fear loss of reason. Depression is associated with confusion of thoughts, especially confusion about their personal identity. They feel as if their time passes slowly. Their sadness is accompanied by despair of cure. Indicated for suicidal tendency which triggers on seeing a knife or blood, thinks of killing themselves. Suited to people who have diminished vital heat, are disposed to be frightened easily and are unfit for laborious tasks. [11,12]
- Aurum metallicum: For people who feel worthless after failure in accomplishment of their tasks either at work or at home. This gives them a sensation of guilt and they feel self condemnation, disgust for life and talks of committing suicide. Suited to people who are responsible and are duty-bound. Their state of despondency is accompanied by increased blood pressure and weakness of memory. Music ameliorates them in general. [11,12]
- *Calcarea carbonica*: It is given when sadness is accompanied by apprehensiveness. They fear of misfortune and have fear of getting contagious diseases. Generally these people are confused, forgetful and low spirited. They are indolent people who are averse to mental as well as physical exertion. Indicated for persons who sweat profusely especially over their head and are very sensitive to cold. [11,12]
- *Causticum*: It is indicated when dysthymia results from long lasting grief, or results from some sudden emotional shock. They become sad, hopeless and even trifles make them cry. Suited to highly sympathetic individuals who cannot support injustice with anyone. They have a tendency of warts especially on their face and generally have a dirty, sallow skin texture. [11,12]
- *Ignatia*: Indicated in cases of dysthymia which develop after shocks, grief or disappointment. These people become sad, tearful, melancholic and tend to brood silently over their grief. Suited to those who have a tendency to sigh and sob during sadness. It is given to people having nervous temperament, mild disposition and are highly sensitive in nature. For people who cannot bear tobacco in any form and are generally aggravated from drinking coffee. [11,12]
- *Kalium phosphosicum*: For extreme lethargy and depressive states caused after long durations of excitement, overwork and worried states. They don't like to meet people and even slight labor appears to them a heavy task. They become despondent about their business and are disinclined to work. Suited to nervous, irritable people who start easily. These complaints are accompanied by insomnia, weakness, tiredness, etc. [11,12]
- *Natrum carbonicum*: Indicated for selfless, gentle, and mild people who tend to avoid conflict. Natrum individuals usually becomes depressed after a disappointment of some kind. They are sensitive to presence of certain individuals. They are unable to think and slow in comprehension. Other symptoms will include nervousness and sensitivities to weather changes, sun, and certain foods, worse from music. [11,12]
- Natrum muriaticum: Natrum muraticum individuals are responsible, reserved, guarded, and they seek solitude. They have psychic disease cause like ailments after grief, fright, anger, etc. With sadness, there is constant recollection of unpleasant recurrence, hate for person who has offended, hysterical laughter. Wants to be alone to cry. Although they also seek sympathy, but consolation aggravates. Absence of mind and difficulty in thinking.
- *Phosphorus*: Indicated for people having depression of spirits and are easily vexed. Loneliness is unbearable and dreads of death when alone. It is suited to sensitive people who were previously cheerful, vivacious and affectionate but now have become indifferent. For people who crave citrus fruits, juices and cold refreshing food and drinks.
- *Pulsatilla*: Especially suited to people whose depression is associated with menstrual complaints during puberty, childbed or menopause. For mild people having a yielding disposition. They get sad and cry readily. Suited to people who like sympathy, have changeable moods and are irresolute. They are highly emotional, crying helps them and seek for open air and feel better there.

Sepia officinalis: Indicated in depression when people become indifferent to their own family. Ailments start after being overtaxed with work and overwhelmed by their family. They desire to be alone and get anxious towards the evening. Other associated symptoms include menstrual irregularities, indigestion, etc. Suited to weak, yellow complexion people who want to be occupied all the time.

#### **CONCLUSION**

For individuals suffering from dysthymia, everything is an effort, nothing is enjoyed for an indefinite amount of time. Homoeopathic system of medicine is effective in managing mood disorders. Homoeopathic medicines if prescribed judiciously can help improving individuals suffering from dysthymia in a gentle and harmless manner greatly improving their quality of life.

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