

**TO UNDERSTAND THE HOMOEOPATHIC APPROACH IN CASE OF LUMBAR SPONDYLOSIS****Jinalben R Malani (PG Scholar)****Department of homoeopathic materia Medica****Dr.Kamna Gupta B.H.M.S M.D(HOM)****Assistant professor (department of homoeopathic materia Medica)****Rajkot homoeopathic medical College, Parul university****ABSTRACT:**

Lumbar spondylosis is a chronic, non-inflammatory disease caused by degeneration of lumbar disc and/or facet joints. It is more prevalent among the middle-age group and elderly. In these cases conventional management includes analgesic, NSAID, steroids. Homoeopathy offers a holistic approach to managing lumbar spondylosis. Present article helps to understand the management of lumbar spondylosis with the homoeopathic medicine.

KEYWORDS:

Low back pain, spondylosis, osteophyte, degenerative disk disease, homoeopathic medicine

COMPLAINTS:

A patient of 42 years came with a chief complaint of lumbar backache since 7 yrs with pain radiating towards left leg with numbness; and neck pain radiating to the left arm with same numbness. Agg. Morning, long standing, sitting, lifting weight, winter, ameli. Walking, lying down.

ASSOCIATED COMPLAINTS:

Burning pain in abdomen, sour eructation, throat irritation and one-sided headache.

PAST HISTORY:

Typhoid : Twice

INVESTIGATIONS:

MRI Lumbar spine: Moderate degree of post central protrusion of L4-L5 disc causing partial effacement of the adjacent thecal sac and resultant localized soft tissue canal compression.

MRI Cervical spine: Showing mild degree of focal post central protrusion of C3 - C4 disc causing partial obliteration of the adjacent subarachnoid space.

FAMILY HISTORY:

Mother: Backache

Father: Died due to old age

Brother (two): Backache

Sisters: 1st - died in an accident, 2nd -Backache, 3rd -Ca breast

PERSONAL HISTORY:

CRAVINGS: Sweet, Green vegetables, milk, apple, mango, banana.

THIRST: 7-8 glasses/day.

PERSPIRATION: Increased over forehead, chest, upper part of the body.

THERMAL: Season - likes - rainy, Bath - Seasonal, Fan - always wants, Open air - likes.

ON EXAMINATION: Tenderness at the level of L4-L5, with pain radiating to the left leg with numbness and tingling.

SLR-Positive 50 degrees in left leg. Tenderness along the cervical spine with pain radiating to the arms with tingling of fingers.

COURSE OF ILLNESS: Patient is complaining of severe backache since last 7 years; the pain is stiffening, with a numb feeling. He complains of shifting type of pain, and is scared during the attack with a fear of being paralyzed.

LIFE SPACE

Patient is a 42 yrs old male. His childhood was spent in his village. Later he migrated for work to Mumbai. He had to do lots of heavy work in his job and lift heavy weights and gradually his backache started. He was slightly better after stopping the heavy work. He knows that his spondylosis is here to stay, but it is the pain which makes him go in a state where he is not able to move, which bothers him the most.

Dr: Tell me more about the pain, How and when it started, and your experience of the same?

Pt: In 2018 my daughter was admitted in a hospital for vomiting and diarrhea and her condition was getting worse. That time I got frightened "I felt numb and I had severe pain in back with stiffness and numbness in legs, I was wondering that why it has happened so suddenly

"I felt completely broken, numb, couldn't think anything, I felt helpless that I didn't have any support. felt pressurized. I was trembling, feeling lonely".

"So, I thought that I should ring up my sister, and while walking towards phone booth I felt that "I was getting paralyzed".

"As if my back is "breaking... stiff. I was not able to walk further, my friend told me this must be sciatica pain, and it is incurable, it causes paralysis. After hearing this I felt stuck, because whatever he predicts comes true"

(He describes a situation where he experienced the pain at his maximum, in doing so we understand the sensation, both local and general and reaction to the situation)

SECOND EPISODE:

"Then I consulted another doctor, who told me that if not treated, I will be having paralysis. I got scared; I couldn't think: I thought that I should better die instead of living a life of a paralytic person. I was feeling totally powerless; I was trembling with sinking sensation in abdomen and palpitations."

Then thinking about the same, I started walking to catch a bus back home, and while at the bus stop. suddenly I felt as if my limbs were going numb, I was scared, as if I was getting paralyzed and had similar kind of pain which I had experienced before, I felt stuck and couldn't move.

(Here too he describes the same sensation in another situation along with the reaction to the sensation that is "he cannot move.")

THE THIRD INCIDENT (DELUSIONAL SITUATION):

One similar incident occurred "I was going to my sister's place late at night, and on the road, I saw a big, huge dog, and he yawned with his huge mouth opening to reveal his large teeth and his big eyes staring at me. It scared me so much that I started sweating profusely due to fear and suddenly had palpitations. I was so frightened, and again I experienced the same sensation, and this time too feeling of being paralyzed and stuck Here too, the patient experiences the same sensation and reaction in an entirely different situation.

D. Tell me about your dreams?

P: I get a dream in which somebody is sitting on my chest, and I am shouting and nobody is listening, and I am shouting and suddenly I wake up with fear.

D: What is the feeling in the dream when somebody is sitting on your chest?

P: I feel a burden on my chest as if somebody is strangling me by sitting on me and I am trying to oppose him but I can't move.

Here in the dream situation too the patient experiences.

the same reaction of not being able to move.

So, what is true to the part is true for the whole, as demonstrated above in three faculties: the chief complaint, stressful situation, and in the dream or the subconscious

UNDERSTANDING OF THE CASE:

In this approach, we try and understand the patient's perception of the chief complaint, his delusions, reactions and experience of the same in his problem, his psyche and his dream. Because it is the patient's perception of his complaint, his sensitivity which should match with the sensitivity of the remedy.

We try and explore the patient till he gives us the experience of the pain, his feelings, his delusions and the sensations experienced by him at that time and depending on that sensitivity we classify the perception of his sensations into kingdoms (i.e. plant, animal and mineral) and prescribe after understanding the miasm. in the case.

The effect of the complaint on him is that he cannot move and he feels as if paralyzed, stuck with a lot of stiffness accompanied with it.

This sensation experienced by him, brings forth in him an issue of sensitivity which is depicted by the words used by him 'stiffness, stuck, cannot move paralyzed' and there is no issue of structure or survival which are an issue with mineral and animal kingdom respectively.

The above-mentioned sensitivity words are the sensation words of ANACARDIACEA FAMILY. As studied. (Reference: An Insight into Plants-R SANKARAN)

He is a known case of lumbar and cervical spondylosis where he has accepted his limitation but it is this episodic pain that makes him feel stuck, which he calls being paralyzed in the situation. It is not fatal and he must accept it, this is his coping up mechanism in his problem. Therefore, he has a sensation of being stuck and unable to move like being paralyzed. It applies equally to physical and mental sensation when he gives an experience of the same sensation which he felt during his daughter's sickness, and in the episode of sighting the dog in the street at night and also in the dream where he feels stuck and cannot move with a sensation of ghost sitting on his chest.

THE MIASM IS SYCOSIS (as explained above due to his acceptance of the situation), and Sycotic Remedy in Anacardiaceae family is *Mangifera-indica* the remedy chosen was: '*Mangifera-indica* 200.' (An extract of proving of *Mangifera-indica*: Back; spondylitis)

TREATMENT:

The case was recorded on 18th February 2022: *Mangifera-indica* 200 single dose was given.

25th February 2022 back ache decreased, slight neck pain. SL was given.

16th March 2022 patient better, pain reduced by 20%. *Mangifera-indica* 200 one dose. 30th March 2022 patient better. SL was given.

7th April 2022 backache decreased by 40%. Neck pain better. SL given.

10th May 2022 pain decreased by 50%. Stiffness present slightly *Mangifera-indica* 200 one dose.

5th June 2022 backache reduced slightly. SL was given.

19th July 2022 backache reduced. SL was given. 25th August 2022 backache better by 60%. *Mangifera-indica* 200 single dose.

2nd September 2022 patient better. SL was given.

6th November 2022 patient better 60%. SL given. 2th December 2022 patient better 80%. *Mangifera-indica* 200 single dose.

Today, patient is off medicines and is maintained only on exercises.