



Therapeutic Outcome of Individualized Homeopathic Management in a Case of Seizure Disorder: A Long-Term Observation

¹Md Azmal Hossain ²Amiya Nand Dev Goswami ³Zubair Mustahid

¹PhD Scholar, Department of Homeopathy, JRN Rajasthan Vidyapeeth University, India

Email: azmal128@gmail.com

²PhD, Professor – Rajasthan Vidyapeeth Homeopathic Medical College and Hospital, Debok, Udaipur 313022, India.

³PhD Scholar, Department of Homeopathy, JRN Rajasthan Vidyapeeth University, India.

Abstract

A 24-year-old male presented with an eight-year history of recurrent seizures, occurring every four to five months, unresponsive to local treatment. The patient, a daily labourer with financial constraints, opted for homeopathic management. The principal remedy *Bufo rana*, along with complementary medicines such as *Calcarea carbonica*, *Sulphur*, *Cuprum metallicum*, *Pulsatilla*, *Causticum*, and *Acidum phosphoricum*, was prescribed in potencies ranging from 30C to 10M over several years. Marked improvement was noted, and the patient remained seizure-free for more than a decade, suggesting the potential efficacy of individualized homeopathic therapy in chronic seizure disorders.

Keywords: seizure disorder, epilepsy, *Bufo rana*, individualized homeopathy, long-term outcome

Introduction

Epilepsy is a chronic neurological disorder characterized by recurrent, unprovoked seizures, affecting nearly 50 million people worldwide (1). Despite major advances in antiepileptic drugs (AEDs), about 30% of patients remain refractory or suffer from intolerable side effects (2). Homeopathy offers a patient-centered, holistic approach emphasizing individual symptomatology and constitutional characteristics (3). This report presents a long-term observation of a case of seizure disorder successfully managed with individualized homeopathic treatment.

Case Presentation

Age: 24 years

Sex: Male

Occupation: Daily labourer

Residence: Rural

Presenting

On 19 October 1999, the patient presented with recurrent episodes of seizures every four to five months for the past eight years. Each episode began with a shrill cry followed by loss of consciousness and convulsions lasting ten to fifteen minutes, accompanied by profuse salivation and involuntary urination.

Complaints

Past Treatments: Multiple therapies had been undertaken without significant relief. The patient discontinued medication due to lack of improvement and financial limitations.

Associated Complaints: Chronic constipation with hard stool and rectal bleeding, sometimes bleeding caused relief, pyorrhoea with halitosis, diminished cognitive function, history of masturbation, late sleeping habit, and a desire for meat, salt, and sour foods.

Psychological and Social Features: The patient expressed fear of accidents due to sudden loss of consciousness and avoided traveling or swimming alone. He avoided songs in any style. His family discouraged him from traveling unaccompanied, reflecting the psychosocial burden of the disease (4).

Repertory**Homeopathic Prescription and Management**

Date/Period	Prescription	Potency Range	Remarks
Oct 1999 – Jan 2013	<i>Bufo rana</i> (principal remedy)	30C – 10M	Selected for convulsions, music aggr, salivation, post-ictal sleep, and sexual history.
Intercurrent remedies	<i>Calcarea carbonica</i> , <i>Sulphur</i> , <i>Cuprum metallicum</i> , <i>Pulsatilla</i> , <i>Causticum</i> , <i>Acidum phosphoricum</i>	30C – 1M	Used as complementary or constitutional support according to changing totality.

Treatment continued irregularly until January 2013. The patient remained seizure-free thereafter with occasional follow-up visits.

Discussion

The individualized selection of *Bufo rana* was based on characteristic features such as epileptic convulsions preceded by a shrill cry, profuse salivation, post-ictal somnolence, and a background of sexual excess and mental dullness—keynotes well documented in Hering's *Guiding Symptoms* and Allen's *Materia Medica* (5). Complementary remedies such as *Calcarea carbonica* and *Sulphur* provided constitutional support, while *Cuprum metallicum* and *Causticum* aided motor control and neurological stability. *Acidum phosphoricum* addressed cognitive dullness and emotional exhaustion.

Several clinical series and observational studies have reported improvement in seizure frequency and quality of life in patients receiving individualized homeopathic treatment (6). Although single-case observations cannot establish causality, they may provide valuable insights for hypothesis generation and further research within integrative neurological care frameworks.

Conclusion

This case demonstrates the potential benefit of individualized homeopathic therapy in managing chronic seizure disorders resistant to conventional treatment. The long-term seizure-free outcome without adverse effects underscores the need for systematic clinical studies to validate such observations.

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