Homoeopathic Treatment for Spasmodic Dysmenorrhoea Dr.Gunjan Popat M.D.(Homoeo)

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Abstract: To evaluate the efficacy of Homoeopathic drugs in cases of spasmodic dysmenorrhoea. Homoeopathic drugs acting upon uterine muscle and control uterine contraction very well and treat spasmodic dysmenorrhoea without any side effects.

Key Words: Menarche, anxiety, spasmodic dysmenorrhoea, uterine contraction, congestive dysmenorrhoea

Introduction: Dysmenorrhoea means painful menses which makes the female unable to do her day to day activities.

Incidence: Probably 5-10 percent girls in their late teens and women in early twenties suffer from spasmodic dysmenorrhoea. This can interrupt their educational, social and economic life.

Types: There are two types of dysmenorrhoea.

- 1. **Primary or spasmodic dysmenorrhoea:** Spasmodic dysmenorrhoea signifies pain due to menstruation and of uterine origin i.e. uterine contraction. There is no obvious pelvic lesion found to cause pain. Membranous dysmenorrhoea is a variety of primary dysmenorrhoea where there is casting of big pieces of endometrium.
- 2. **Secondary or congestive dysmenorrhoea**: Congestive dysmenorrhoea means pain associated with menstruation and is related to pelvic lesion. e .g . endometriosis, chronic pelvic inflammation, uterine fibroid, cervical stenosis etc.

Spasmodic dysmenorrhoea: Patient is young usually 18- 24 years. Pain usually occurs years after menarche. Pain starts 1-2 hours before the onset of menses and usually continues for first 12- 24 hours. Then gradually decreases. Pain is colicky and cramp like, occurs in hypogastric region and radiates to the thighs. There may be low backache. The intermenstrual period is free from any pain. Systemic discomfort like nausea, vomiting, fatigue, diarrhoea and headache may be associated. It may be accompanied by vasomotor changes causing pallor, cold sweat and occasionally fainting. Abdominal or pelvic examination does not reveal any abnormal findings. Patient may be in poor state of health and anxious state of mind. Per abdominal examination

Patient may be in poor state of health and anxious state of mind. Per abdominal examination nothing abnormal is detected. Uterus is usually felt normal in vaginal or rectal examination.

Causative factors:

- Spasmodic painful uterine contractions set up by retained blood within the uterus during menstruation which results from obstruction to the outflow of blood due to pinhole os or conical cervix.
- Unilateral dysmenorrhoea may be caused by uterine malformation.
- Inadequate uterine muscles need more vigorous contractions to expel the menstrual discharge and set up as painful contraction.
- The pain may be produced by uterine muscle ischemia. Pain may be produced by disturbed or upset of pain carrying autonomous nervous system.

- Impaired state of health, physical and mental exhaustion is making the female susceptible to be conscious of pain.
- Due to tension and anxiety during adolescence, lower pain threshold is often attributed as an aggravating factor.
- The anovular menstrual cycle without the luteal phase is followed by painless menstruation.
- The ovular menstruation is associated with pain.
- Prostaglandin liberated by endometrium cause myometrial spasm and pain.

Materials and methods:

- A sample of 25 cases of spasmodic dysmenorrhoea was taken from Shri Balwantrai Mehta Homoeopathic Dispensary, Bhavnagar. Female patients of 18 24 years of age group were taken for study.
- Case taking was done in detail as instruction given by Dr. Hahnemann in Organon. From case taking symptoms recorded and homoeopathic similimum was decided and administered according to homoeopathic principles.
- The medicines were purchased in the required potency from reputed pharmacy.
- The dose schedule or repetition of doses was decided on the basis of individual susceptibility, sensitivity and other homoeopathic principles.
- Medicines were administered in required potency in globules form. Orally to be kept 4-5 globules dry on the tongue. Cases were analysed according to Kentian method.

The effect of the drug was noted and evaluated on the basis of following criteria. Criteria for improvement:

Dysmenorrhoea (pain):

- -Onset
- -Duration
- -Severity

Constitutional symptoms:

- -Backache
- -Nausea
- -vomiting
- -Headache
- -Diarrhoea

Result:

- All the 25 cases of spasmodic dysmenorrhoea were taken between the age group of 18-24 years.
 - From that 18 patients had severe dysmenorrhoea. They had strong and spasmodic painful uterine contraction. They cannot perform their day to day activities. Their routine schedule was disturbed.

- 8 patients have moderate spasmodic dysmenorrhoea. They had moderate uterine contraction. They can perform their day to day activities with lower abdominal discomfort or pain.
- All the 25 patients were treated with acute drugs i.e. drug prescribed on present totality of symptoms and constitutional drugs i.e. drug prescribed on physical and mental characteristic symptoms. The treatment continued for 3-6 months. During the treatment the cases were analysed regarding the duration and severity of pain and for other constitutional symptoms like nausea, vomiting, headache, backache and diarrhoea. The nature and causes of disease were explained to the patients.
- With the treatment symptoms decreased in severity. Pain became tolerable so the patients can perform routine day to day activities. The pain and constitutional symptoms were relieved. The remedies used with desired effect were mag. phos in 13 cases, colocynth in 8 cases and pulsatilla in 5 cases. The remedies were used in 30 and 200 potency.

Discussion:

Homoeopathic medicines acted on the uterus and constitution reduced contractions of the uterine muscles. The pain and constitutional symptoms relived. The nature and causes of spasmodic dysmenorrhoea were explained to the patients so the anxiety related to disease decreased. The patients were relieved from symptoms and feeling better.

Conclusion: With these 25 cases of spasmodic dysmenorrhoea we can come to know that homoeopathic drugs act upon the uterine muscles and constitution caused less severe uterine contraction. With counselling anxiety related to disease also reduced. So the patients relived from symptoms.

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