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Research Article

SINGLE BLIND RANDOMIZED CONTROL STUDY ON THE EFFICACY OF HOMOEOPATHIC MANAGEMENT IN CORONARY ARTERY DISEASE

Arun Kumar Jamadade¹, Basavaraj S Adi², E Siva Rami Reddy^{3*}.

¹Reader, Department of Anatomy, Bharatesh Homoeopathic Medical College, Belagavi

²Reader, Department of Pharmacy, Bharatesh Homoeopathic Medical College, Belagavi

³Faculty of Homoeopathy, Tantia University, Rajasthan.

Abstract

Coronary Artery Disease in the common type of heart disease in day to day life. It's the trading cause of death in India and other Asian countries for both men are more than women. 30 cases were selected as per the inclusion and exclusion criteria. Results were depended up on the improved, not improved and recovered. Conclusion: we can conclusion that homoeopathy is safe and very effect up on the coronary artery diseases.

Keywords: Coronary artery disease, homoeopathy medicines, single blind randomized control study.



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*Corresponding Author

Dr. E Siva Rami Reddy

Faculty of Homoeopathy,

Tantia University, Rajasthan.

E-mail: dr.sivaramireddy@gmail.com

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INTRODUCTION

In many developing countries with advanced stages of the nutrition transition, the burden of coronary artery disease (CAD) has shifted from the rich to the poor. Much of this transition is caused by changes in lifestyle, in particular: dietary changes, an increase in weight and obesity, a decrease in physical activity, high levels of stress, and increasing tobacco and alcohol consumption [1-10]. However, we have come to appreciate a prominent role for inflammation in atherosclerosis and its complications [11-15]. Globalization, urbanization and Westernization of lifestyle will increase the socio economic burden posed by non communicable diseases in middle-to-low-income countries [16-19]. In Indian and western world population that is experiencing rapid

urbanization and the nutrition transition. Almost all of our patients had previously diagnosed CAD with underline risk factors. In the realm of medicine, Homoeopathy, "the scientific medicine" with its constitutional drug therapy offers such bright hope that it has to be experienced than to be believed. Even Modern medicines, which stand on the threshold of a radical change, will soon embrace the unique possibilities, which homoeopathy can offer. In spite of these homoeopathy is inexpensive and cost-effective. I have made the objective to assess the utility of Repertories in the cardiac patients to enriched with various clinical as well as pathological rubrics [20].

MATERIALS AND METHODS

This study was conducted on the patients who attended the Out Patient department of Bharatesh Homoeopathic Medical College, Hospital and Research Center, Belagavi, Karnataka and the study was undertaken for a period of research. Detailed case was taken, analysis and evaluation following Homoeopathic principles was done. The potency was selected on the basis of individual susceptibility. The outcomes were an improvement of symptoms recorded in monthly basis individual symptoms. A number of subgroups, homoeopathic potency, age group, were analyzed. Given homoeopathic medicines 30 as per the guidelines and single bland randomized to all patients.

INCLUSION CRITERIA

Cases of coronary disease will be diagnosed clinically. Hip pain and stiffness,

EXCLUSION CRITERIA

Progressive disease with deformities, coronary disease secondary to any other systematic disease with gross pathology will be excluded. The study requires few investigations routine blood investigation with ESR, HLA B27, X-ray (lumbar region), Other higher investigations as required like CT Scan and MRI. Reportorial result, rare, peculiar, uncommon symptoms and miasmatic diagnosis of the patient were considered for selecting the constitutional medicines, acute medicine on sector totality and intercurrent remedy was selected on symptomatology, follow-well relation and miasmatic predominance. The following parameters were fixed according to type of the response obtained after the treatment.

Recovered – Feeling of mental and physical well being with disappearance of all the symptoms and signs for more than six months.

Improved – Feeling of mental and physical well beings with marked disappearance of symptoms and signs for a period less than six months.

Not-improved – No relief of symptoms and signs even after sufficient period of treatment.

RESULTS

As shown in the result the maximum incidence seen in the age group 30- 40 i.e 16.66% in 05 cases. In 41-50 age group the incidence was 36.66

% i.e in 11 cases. Between the age group 51-60 i.e 40.00 % in 12 cases. And in the age group 61 -70 years i.e 6.66 % in 2 cases. The above table shows statistical study of sex incidence in 30 patients with coronary heart disease. As per the study, maximum sex incidence seen in male i.e 15 cases and female 15 cases.

Table 1. Showing Age Incidence

Age (Years)	No. of Patients	Percentage
30 to 40	05	16.66 %
41 to 50	11	36.66 %
51 to 60	12	40.00 %
61 to 70	02	6.66 %

Table 2. Faulty life style

SN.NO	FAULTY LIFE STYLE	NO	PERCENTAGE
1.	Tobacco Chewing	5	16.66
2.	Smoking	8	26.66
3.	Alcohol	3	10
4.	Obesity	6	20
5	Stress	5	16.66
6.	Sleeplessness	3	10.00

As shown in the result the maximum incidence seen in the life style tobacco chewing i.e 16.66 % in 05 cases. In smoking the incidence was 26.66 % i.e in 8 cases. In alcohol the incidence was 10% i.e. 3 cases. . In obesity the incidence was 20% i.e. 6 cases. . In stress the incidence was 16.66 % i.e. 5 cases. . In lack of sleep the incidence was 10% i.e. 3 cases.

Table 3. Family history

SN.NO	DISEASE	NO	PERCENTAGE
1.	Hypertension	12	40
2.	Diabetes Mellitus	8	26.66
3.	Heart Disease	3	10
4.	Obesity	3	10
5.	Dyslipidemia	4	13.33

As shown in the result the maximum incidence seen in the family history hypertension i.e 40 % in 12 cases. . In diabetes the incidence was 26.66 % i.e. 8 cases. . In heart disease the incidence was 10% i.e. 3 cases. . In obesity the incidence was 10% i.e. 3 cases. . In hyperlipidemia the incidence was 13.33 % i.e. cases.

Table 4. Miasmatic back ground

Miasm	No. of Patients	Percentage
Psora	3	10
Sycosis	12	40
Syphilis	15	50

As shown in the result the maximum incidence seen in the miasmatic back ground psora i.e 10 % in 3 cases. . In sycosis the incidence was 40 % i.e. 12 cases. In syphilis miasma tic back ground was 50% in cases 15.

Table 5. Showing Remedy Indicated

	Name of the Remedy	No. of Patients	Percentage (%)
1	Aconite	2	6.66
2	Apismel	1	3
3	Ars alb	5	16.66

4	Belladonna	1	3
5	Bryonia	2	6.66
6	Cact	4	13.33
8	Lachesis	1	3
11	Nuxvomica	3	10
12	Phosphorus	2	6.66
13	Phytolacca	2	6.66
14	Pulsatilla	1	3
15	Rhus tox	2	6.66
16	Silicea	2	6.66
17	Sulphur	2	6.66

As shown in the result the maximum incidence seen in the remedy indication ars alb i.e 16.66% % in 5 cases. . In cact the incidence was 13.33 % i.e. 4 cases. In nuxvomica back ground was 10% in cases 3. In aconite, bryonia, phos, rhus tox, silicea and sulphur 6.66% in cases 2 .reset of the remedies were 3% in 1 cases.

TABLE 6. Results

Sr. No	Result	No of cases	Percentage
1	Recovered	06	20.00 %
2	Improved	21	70.00%
3	Not-improved	03	10.00%

Out of 30 cases 20.00% showed recovery i.e 6 cases. 70.00% of total cases showed improvement i.e 21 cases and 10.00 % of total cases showed no improvement i.e 03 cases.

DISCUSSION

Coronary artery disease develops when coronary arteries — the major blood vessels that supply heart with blood, oxygen and nutrients — become

damaged or diseased. Cholesterol-containing deposits (plaques) on arteries are usually to blame for coronary artery disease. When plaques build up, they narrow coronary arteries, causing heart to receive less blood. Eventually, diminished blood flow may cause chest pain (angina), shortness of breath or other coronary artery disease symptoms. A complete blockage can cause a heart attack. Because coronary artery disease often develops over decades, it can go virtually unnoticed until it produces a heart attack. But there's plenty you can do to prevent and treat coronary artery disease. Start by committing to a healthy lifestyle Epicardial coronary arteries are the major site of atherosclerotic disease. Arteriosclerosis is hardening of the arteries. Atherosclerosis is a subset of arteriosclerosis, and is the formation of *atheromas* (fibrous fatty intimal plaques) in arterial walls. lipoprotein (HDL), cigarette smoking, hypertension, and diabetes mellitus] in this exhaustive study systematic analysis was done in 30 individuals diagnosed with CAD in order to perceive the homeopathic totality so that the individuals can be treated with homeopathy and results could be assessed in order to understand the role of homeopathy in management of individuals with CAD . these medicines were found not only to reduced the symptoms of the effected individuals but also prevent further recurrences. The maximum incidence seen in the age group 21-30 i.e 46.66% in 14 cases. In 31-40 age group the incidence was 23.33%. i.e in 7 cases. Between the age group 41-50 i.e 16.66% in 5 cases. And in the age group 10-20 years i.e 13.33% in 4 cases. Statistical study shows the sex incidence in 30 patients with Ankylosing Spondylitis. As reviewed in the literature male are more prone to have Ankylosing Spondylitis. As per the study, maximum sex incidence seen in male i.e 20 cases accounting 66.66% of total and minimum incidence of 33.34% of the total who where males in 10 cases. Out of 30 cases 23.33% showed recovery i.e 7 cases. 63.33% of total cases showed improvement i.e 19 cases and 13.33% of total cases showed no improvement i.e 04 cases.

CONCLUSION

Cardiac problems especially a major one with a chronic course like CAD shall take long time for a complete recovery. Symptomatic benefit with favorable changes in other reliable parameters can

be considered as a pilot to complete recovery. On the other side angina pectoris has comparatively long course in treatment since it does make much organic changes in heart. So many precipitating factors are there in angina. These can become obstacles in recovery. The research shows that Aesculus Hippocastanum plays an important role in the treatment Ankylosing Spondylitis. The study depicts that 60% of patients got relief from the Aesculus Hippocastanum and this is not a small number. There were no side effective during the treatment and it can be concluded that Aesculus Hippocastanum can be help the patient to take a new lease on life. During the study it was observed that in almost all the cases the Aesculus Hippocastanum responded well and the patient not only got rid of the main complaints of Ankylosing Spondylitis but also got rid of the associated complaints with restoration of health. With the help of use of homoeopathic medicines even allopathic management was avoided. Thus we can conclude that Homoeopathic medicines used with holistic approach are very effective in treating the cases of recurrent Ankylosing Spondylitis.

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REFERENCES

1. Burchell HB. A centennial note on Waller and the first human electrocardiogram. *Am J Cardiol* 1987;59:979-983
2. Fye WB. A history of the origin, evolution, and impact of electrocardiography. *Am J Cardiol* 1994;73:937-949
3. Cecil. Textbook of Medicine. 22nd Ed., California : WB Saunders; 1998.1654pp.
4. Bellenir, K. Health Reference Series: Back & Neck Disorder Sourcebook. Detroit, MI: Omnigraphics, Inc.; 1997.
5. Cole and Hering. Low back pain handbook. Vol.1, a guide for practicing clinician. 2nd Ed., Oxford: Elsevier Publisher; 1996.
6. Unswarth A. Biomechanics of articulations and derangement in disease. New York: Churchill Livingstone; 1993.
7. Mercer. Orthopaedic Surgery. 9th Ed., Oxford : Arnold ; 1993. P p. 982.

8. Stanely Hoppenfeld AND Michael Zeide, Orthopaedic Dictionary, J.B.Lippincott Company ; Philadelphia.
9. Souhami RL, Moxham J. Text book of medicine. Edinburgh: Churchill Livingstone; 1990, pg no.997 – 999.
10. Reddy ESR, Sharma PK, Raj PP. A clinical study on effect of Plantago in gingivitis by assessing bleeding and plaque index. Indian Journal of Research in Homoeopathy 2018;12(3):132.
11. Reddy SR. Effect of homoeopathic medicine Lycopodium clavatum in urinary calculi. International Journal of Applied Research 2017;3(1):790-791.
12. Reddy R, Sharma PK, Praveen Raj P. Homoeopathic treatment of intestinal. Research Journal of Recent Sciences ISSN 2277, 2502.
13. Adi BS, Adi GB, Tanuja B. A comparison of efficacy of Plantago major and Calendula officinalis in the management of gingivitis: a randomized controlled clinical trial. International Journal of Alternative and Complementary Medicine 2020, 1-7
14. Adi BS. Efficacy of homoeopathic medicines in chronic low back pain: A clinical study. International Journal of Alternative and Complementary Medicine 2020, 17-20
15. Adi BS, Adi GB, Jamadade AK. A Comparison of the Efficacy of Gymnema Sylvestre 6 Ch and Gymnema Sylvestre Mother Tincture in Cases of Type 2 Diabetes Mellitus. World Journal of Current Medical and Pharmaceutical Research 2020, 133-138.
16. Adi Bsabs, Rami Srres, Reddy E. An open clinical study on the efficacy of Withania somnifera mother tincture in the management of hyperlipidemia. International Journal of Indigenous Herbs and Drugs 2019, 1-6.
17. Rami Srres, Reddy E, Adi Bsabs, Jamadade Akjak. Efficacy of lactuca sativa in hyperlipidemia: a pilot study. International Journal of Indigenous Herbs and Drugs 2019, 1-7.
18. Adi BS. Effective of Hydrastis in Treatment of Cholelithiasis-An Observation Study. International Journal for Advance Research and Development 2017;2(10):65-69.
19. Sharma Pkspk, Rami Srres, Reddy E. A randomized double blind placebo controlled trial of guatteria gaumeri mother tincture in the management of hyperlipidemia. World Journal of Current Medical and Pharmaceutical Research 2020, 291-295.
20. Adi GBAGB, Ad BSABS, Rami SRRES, Reddy E. Double blind randomized controlled study on the efficacy of asparagus racemosus mother tincture in hyperlipidemia. International Journal of Indigenous Herbs and Drugs 2018, 1-7.
21. Demeter S, Gunnar BJA, George SM. Disability evaluation. New York: Mosby; 1993. 278pp.
22. Davidson's Principles and practice of Medicine 19th Ed. Churchill Livingstone: An imprint of Elsevier Science Limited.
23. Gupta R, Gupta VP. Meta-analysis of coronary heart disease prevalence in India. *Indian Heart J* 1996; 48:241-5.