



## HOMOEOPATHIC APPROACH TO DYSMENORRHOEA ACCORDING TO DIFFERENT STALWARTS

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### Abstract

Dysmenorrhoea can present with different kinds of pain, including sharp, throbbing, dull, nauseating, burning, or shooting pain. It may precede menstruation by several days or may accompany it, and it usually subsides as menstruation tapers off. The discomfort during menses leads to disturbances in daily life- absenteeism from school, college, sports, jobs, social activities etc. The Homoeopathic system of medicine should be to relieve the patient symptomatically as well as to improve and restore the general health and to give them a better quality of life. This aim can be fulfilled by homoeopathic system of medicine practiced on the principles and guidelines postulated by Master Hahnemann.

**Keywords-** Menstrual pain, Cramps, Uterine contractions, Pelvic discomfort, Homoeopathic System.

**Introduction-** A normal and healthy ongoing of menstrual cycle is necessary for the purpose of normal reproductive life of a woman. The second decade of life for a girl is a period of physical and psychological preparation for safe motherhood. During this period a young girl becomes an adolescent in 11 – 14 years, passes through teenage, and becomes an adult at 18 years.

Dysmenorrhoea is defined as “difficult menstrual flow” or “painful menstruation.” It refers to menstrual pain severe enough to limit normal activities or require medication.

The term dysmenorrhoea is derived from the Greek words “dys”, meaning difficult/painful/abnormal, “meno”, meaning month, and “rrhoea”, meaning flow.

Reports of dysmenorrhoea are greatest among individuals in their late teens and 20s, with reports usually declining with age. Dysmenorrhoea is classified as primary (spasmodic) or secondary (congestive).

**Types of Dysmenorrhoea-**

**1. Primary Dysmenorrhoea:-** Primary dysmenorrhoea is defined as menstrual pain not associated with macroscopic pelvic pathology. It occurs in the first few years after menarche and affects up to 50% of post pubescent females.

**2. Secondary Dysmenorrhoea:-** Secondary dysmenorrhoea is defined as menstrual pain resulting from anatomic and/or macroscopic pelvic pathology. This condition is most often observed in women aged 25-45 years.

**Differentiating features of Primary and Secondary Dysmenorrhoea**

Primary Dysmenorrhoea		Secondary Dysmenorrhoea
<b>Symptoms</b>		
1.	Patient is young, usually 18-24 yrs, rarely after 25 yrs.	Patient is generally elderly beyond 25 years.
2.	Painful menses usually occurs 1-2 years after menarche.	Painful menses occurs after a period of painless menses.
3.	Pain starts 1-2 hours before onset of menstruation usually continues for the first 12-14 hrs and then gradually become less.	Pain starts 3-5 days before the onset of menses after which the pain usually gets less.
4.	Pain is colicky and cramp like, occurs in hypogastric region and radiates to thighs.	Pain is dull achy and is located in lower abdomen and back.
5.	The intermenstrual period is free from any pain.	In the intermenstrual period patient may have back and lower abdominal discomfort.
6.	Constitutional symptoms like nausea, vomiting, diarrhea, and fainting may be present with pain.	Other symptoms due to primary cause in the pelvis are predominating, like, menorrhagia, abnormal vaginal discharge, infertility etc.

**Homoeopathic Approach:** - Homoeopathic medicines have significant effect on the menstruation as evidenced by the literature in sources of *Materia medica*. These can be utilized under the law of “*similia similibus curantur*” to provide relief.

Homoeopathy, the scientific system of healing the sick, believes in treating the patient as a whole. Homeopathy's unique ability to reach the psyche as well as addressing the physical imbalance helps to correct the imbalance in health.

**Stalwarts View to Dysmenorrhoea:-**

**Dunham Carrol** in his “*Homoeopathic Lectures on Materia Medica*” includes the following citation in *Sepia* chapter, “it is a singular fact that Hippocrates set a high value on *sepia* as a remedy in diseases of women- dysmenorrhoea.”

**Dr. J T Kent** has given much importance to menstruation as a general symptom. In his “*Lectures on homoeopathic philosophy*” he has emphasized the importance of menstrual symptoms as general symptoms; he says that, “*the menstrual period gives us a state which we may call general*”. The woman says, “I menstruate,” so and so; she does not attribute it to her ovaries or to her uterus; her state is as a rule, different when she is menstruating.

**Dr. Kent** in his “*Lesser Writings*” has illustrated three clinical cases of dysmenorrhoea in which he used *calcareo phos* and *borax* for the treatment.

**Dr. Kent** in his “*Lectures on Materia Medica*” stated about *Pulsatilla* - “Violent menstrual colic, causing her to bend double; soreness in the region of uterus and ovaries, distended abdomen, wants

windows open, tearful, weeps without a cause. Menstruation that has been painful since puberty in plethoric girls.”

**James Compton Burnett** in his *“The Change of Life in Women”* said, “Pain at the period is so very common that not a few regard the pain as a part of the bargain. Such is, however, not the case by any means. I am prepared to grant that a little discomfort and malaise may be normal to the time of the period, but only very slightly so; if it ever comes to pain, there is something wrong.

**J. C. Burnett** illustrated, in his *“Organ Diseases of Women and Sterility”*, a case of 27 years old married lady having enlarged and retroverted uterus, which amply accounted for both dysmenorrhoea and sterility. She was treated with *thuja* and *aurum met* and cured of dysmenorrhoea and sterility.

**Dr H. N. Guernsey** in *“The application of the Principles and Practice of Homoeopathy in Obstetrics and Pediatrics”* classified dysmenorrhoea into four different classes, according to temperament and constitution of individual, or to the causes from which it originates. These are the neuralgic, the congestive, the membranous, and the mechanical forms of dysmenorrhoea.

**Malhotra H.C.** says about neuralgic dysmenorrhoea in *Menses and Health A lady's manual of homoeopathic care* that females of neuralgic diathesis who suffer from neuralgias of the other parts and organs are liable to suffer from this ailment.

**Jahr G. H. G.**, in his *“Forty Years Practice”* wrote about treatment for dysmenorrhoea. According to him the most efficient remedies for the abdominal spasms are: *Cocclus*, *Ignatia*, *Pulsatilla*, *Cuprum mettalicum*, and occasionally *Chammomila*, *Coffea*, and *Secale cor*; *Cocculs* and *Cuprum*, more particularly if the flow itself is scanty; *Ignatia* and *Chammomila*, if it is too profuse.

**Dr. Henry Minton** in his *“Uterine Therapeutics”* mentioned important remedies for dysmenorrhoea in the chapter *concomitant symptoms* during menstruation, under rubric; *abdomen, pains in, spasmodic- caulophyllum, chamomilla, nux vomica, pulsatilla, and sepia.*

**Dr. H C Allen** in his *“Materia Medica of the Nosodes”* mentioned a case of dysmenorrhoea which was cured with a dose of *Medorhinum* prescribed on the basis of mental symptoms.

**J. H. Carmichael** advocated to prescribe *Vibernum prunifolium* fluid ext. 10 drops every 1/2 hour for menorrhagia with severe contracting uterine pain during menses due to uterine myo-fibromata.

**Dr. D. B. Whittier** reports the cure of a dysmenorrhoea of fifteen years' standing in a highly neurotic and hysterical woman by a course of *Kali phosphoricum*.

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