



Effectiveness Of Homoeopathy In Management Of Migraine Without Aura- A Case Report

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Abstract

Introduction

Migraine is a common episodic neurological disorder with a complex physiopathology. Migraine without aura is the commonest subtype of migraine, accounting for 70%–80% of cases. It is the third most prevalent disorder and second most specific cause of disability worldwide. Management protocols involves acute treatments for immediate relief and preventive therapies to reduce frequency and severity. Although current conventional treatment is useful in relieving pain yet patient continues to suffer due to recurrence and severity of attacks. This highlights the need to explore other potential treatment modalities. Homoeopathy's individualistic approach addresses the underlying Bio-Psycho-Social causes, thereby results in rapid, gentle and permanent cure.

Case summary

32-years-old married female patient, presented with throbbing type of headache accompanied by Phonophobia and nausea. Complaint started suddenly one year ago, intensity of pain was severe (Patient rated 7 on VAS), duration of pain was 6 to 12 hours and it occurred 3 times/week. After a detailed history taking, totality was formulated and after referring repertory and Homoeopathic Materia Medica Natrum Muriaticum 1M 1 dose/1 week for 1 month was prescribed, follow up was taken every month and as and when required for 6 months. After treatment, improvement in intensity of pain was assessed using visual analogue scale, which reduced to 0. The effectiveness of the Homoeopathic treatment was further confirmed using the modified Naranjo's Criteria, yielding a score of 08 which shows a causal relationship between a homeopathic intervention and clinical outcome.

Key words- Migraine without aura, Homoeopathy

Introduction

Migraine is a heterogeneous disease, ranking as the third most prevalent condition globally, affecting 10–20% of the population. ⁽¹⁾ The latest Global Burden of Disease Study estimated that 1.25 billion people suffered from migraine in 2017, accounting for 45.1 million years of life lived with disability. ⁽²⁾

It is a genetically influenced, complex neurological disorder characterized by recurrent episodes of moderate-to-severe headache, typically unilateral and often accompanied by nausea and increased sensitivity to light and sound. It is a leading cause of disability and loss of productivity, with attacks that can last from hours to days, significantly affecting daily activities and quality of life. The most common form, accounting for 75% of cases, is migraine without aura. ⁽³⁾ Although, the pathophysiology of migraine remains debated, it is believed that both biological predisposition and environmental factors may play a role in triggering attacks. Among the various triggers, stress has recently been highlighted as a critical factor. Other common triggers vary widely among individuals and can include hormonal changes, certain foods, and environmental influences. ⁽⁴⁾

Management protocols involves acute treatments for immediate relief, preventive therapies to reduce frequency and severity, and personalized lifestyle adjustments. Acute therapy includes non-steroidal anti-inflammatory drugs (NSAIDs), combination analgesics, ergotamine preparations, and migraine-specific medications. Although some authors have suggested that prophylactic drugs should be recommended for migraineurs who have at least four headache days per month, only 13% of patients reported current use of preventive drugs. Ineffectiveness of and/or contraindications to migraine medication affect 10-15% of people with migraine. ⁽²⁾ ⁽⁵⁾ Although current conventional treatment is useful in relieving pain yet patient continues to suffer due to recurrence and severity of attacks. This underscores the need to explore other potential treatment modalities.

Homoeopathy inherently offers personalized, holistic approach by targeting individual's underlying Bi-psycho-socio-environmental factors that contributes in onset and persistence of disease. By selecting the appropriate simillimum that aligns with the unique nature of each case, Homoeopathy may help reduce both the intensity and frequency of a disease, offering a more tailored solution for the individual.

Patient Information

32-years-old married female patient, working as a Software engineer presented with following complaints on 24/06/2024-

Location	Sensation	Modality	Accompaniments
Head Right side Since 1 year Onset- Sudden Duration- 06 to 12 hours P-Gradual I-High F- 3 times/week	Character of pain- Throbbing+++ Photophobia+++ Phonophobia+ Nausea ++ No vomiting No s/o of Aura No family history No neck/shoulder muscle pain	A/F- Honour wounded <- Morning+++, exposure to sun+++, Light++, <- After menses+++ >- Tight bandaging+,>- dark room+, >- Night++ >- Painkillers+ <-Sight food++	Irritability++ Want to be alone during pain++ Decreased appetite++ Thirst- Decreased++ since complaints

(Symbols "<, >, +" represents aggravation, amelioration and intensity of symptoms)

Physical Characteristics

Appearance- Lean thin, sick looking

Appetite- Decreased++ since complaints

Thirst- Decreased++ since complaints

Urine- Normal

Bowel- Normal

Perspiration- Scanty

Sleep- Disturbed since complaints

Thermally- Hot++

Menstrual History- LMP- 29/05/2024, Regular cycle (5/31-32 days), Pain in lower abdomen and back+ on 1st day of menses.

Drug and surgical history- None significant

Past History- Covid-19 during 1st wave was in home isolation, Appendicitis- 7 years back

Family History- Father- Hypertension (on regular medications), Mother – Asthma (on regular treatment)

Summary of mental General symptoms obtained after evaluating detailed life space

Ailments from Honor wounded, she feels she has been insulted+++, she feels neglected++, Irritable++, aversion to company++, Sensitive to criticism+++, Anger on contradiction++, consolation Aggravation++, anxiety while doing new things++

Physical Examination

1.Vital Data

Temperature- 98.4F, Pulse-78, BP- 110/70mmhg, RR-14/min

2. General examination (Only Positive findings are mentioned)

Pallor-Present (+)

3. Severity of Pain on Visual Analogue scale- 7

4. Systemic Examination

No significant findings were observed on systemic examination.

Diagnosis- Migraine without aura

Totality of Case

Ailments from Honour wounded

Sensitive to criticism+++

Anger on contradiction++

< - Consolation++

Aversion to Company++

Irritability during pain++

Delusion she is neglected+++

Delusion she is been insulted++

Throbbing headache+++ <- After menses+++ , <- Exposure to Sun+++ , <- Morning+++

Photophobia during pain++

After Referring Materia Medica and repertory Natrum Mur was selected as an indicated remedy.

Susceptibility

Sensitivity- High

No. of characteristic symptoms- Many

Level & degree of Correspondence (sector & constitutional treatment)

Vitality- good

Potency- 1M was selected on the basis of susceptibility of patient.

Prescription- Natrum Muriaticum 1M 1 dose per 1 week was prescribed for 15 days

Follow up criteria

Sr. No	Subjective Criteria	Objective Criteria
1	Irritability during Pain	Pain- Intensity (VAS)
2	Appetite & Thirst	Pain- frequency (episodes/month)
3	Accompaniments of pain	Pain duration (Hours)
4.	Sleep	

Follow Up summary

Sr. No	Date	Subjective				Objective			Remedy Prescribed
		1	2	3	4	1	2	3	
1	10/07/24	>30%	>50%	AB	>30%	6	8	10	Natrum Mur 1M 1 dose/ week for 1 month
2	09/08/24	>50%	AB	AB	>60%	6	6	6	Natrum Mur 1M 1 dose/ week for 1 month
3	11/09/24	>70%	AB	AB	AB	4	5	3	Natrum Mur 1M 1 dose/ 2weeks for 1 month
4	12/11/24	SQ	AB	AB	AB	2	3	2	Natrum Mur 1M 1 dose for 1 month
5	15/12/24	AB	AB	AB	AB	0	AB	AB	Natrum Mur 1M 1 dose for 1 month
6	07/01/25	AB	AB	AB	AB	0	AB	AB	Placebo for 1 month

Outcome Assessment

1. Modified Naranjo's Criteria (valid tool for assessing the likelihood of a causal relationship between a homeopathic intervention and clinical outcome) ⁽⁸⁾ - **08** Score indicates effectiveness of Homoeopathy in management of Migraine without Aura

Discussion

The above case report underscores the effectiveness of Homoeopathic in management of Migraine without aura, a clinical condition marked by unilateral headache, nausea, vomiting & phono-photophobia. Rapid, gentle cure, following the Homoeopathic Treatment was observed. It was also confirmed with objective parameter Naranjo's score. The outcome of this case report aligns with previous case reports and other studies that have demonstrated the effectiveness of Homoeopathy in management of migraine without aura. A double blind, placebo-controlled trial of 68 patients of migraine conducted by P Straumsheim, et al demonstrates the effectiveness of Homoeopathy in management of migraine. ⁽⁶⁾ While study conducted by Brigo B, et al demonstrates a significant reduction in the periodicity, frequency, and duration of migraine attacks. ⁽⁷⁾ Homoeopathy's individualistic approach, which tailors' treatment as per the individuality of the patient, considering underlying Bio-psycho-social factors was found to be effective in alleviating the symptoms of migraine in all mentioned studies. While the results of this case report are promising, it is important to note that further research is needed to validate these findings on a larger scale. Randomised control trials with a large sample size would further help to establish the effectiveness of Homoeopathy in management of Migraine without aura.

Declaration of Patient Consent

The author confirms that appropriate consent has been obtained from the patients. The patient has agreed to the inclusion of their clinical information in this case report. She has understood that her identity will remain confidential, with efforts made to anonymize the details. However, the patients acknowledges that complete anonymity cannot be assured.

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Conflicts of interest: None declared

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