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Treatment Of Chronic Idiopathic Constipation With Homoeopathy: A Case Report

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Abstract: Constipation is a symptom-based disorder, and its definition is mainly subjective. Constipation carries a major health care burden, as it affects 15% - 20% of the global population. Chronic idiopathic constipation (CIC) is a common functional disorder associated with an impaired quality of life (QoL), and a negative impact on mental, social, and professional aspect. According to Diamond, the digestive system is intricately related to the rest of the body's optimal functioning and emotional arena, which necessitates a holistic approach in the treatment. A young woman with severe constipation, particularly with low bowel frequency, a sense of incomplete evacuation and straining, representing a case of typical chronic idiopathic constipation as per the Rome IV Criteria for diagnosis of constipation. The treatment of such a constipation is long-lasting, and relapses are common. She was seeking different modes of treatment for last 6 years and homoeopathy for last 4 months with no relief. With thorough case taking, repertorial analysis and observation of her behaviour and lifestyle, Nux vomica 1M has been prescribed. The patient Assessment of Constipation – Symptoms (PAC-SYM) questionnaire was used as a tool to assess the severity of patient reported symptoms of chronic constipation. After the 7 months of course of treatment, her symptoms cured completely with no relapse, as observed through PAC-SYM Score which has reduced from 33 to 2 at the end of treatment. Individualised homoeopathic treatment with correct potency has cured the patient and paved the way to research further in this manner.

Index Terms **- Constipation, Nux vomica, Homoeopathy, Rome IV Criteria for diagnosis of constipation, PAC-SYM questionnaire.**

I. INTRODUCTION

International Classification of Diseases, Eleventh Revision (ICD-11), WHO, defines Constipation as "ME05.0 Constipation: an acute or chronic condition in which bowel movements occur less often than usual or consist of hard, dry stools that are often painful or difficult to pass." Constipation is defined by continuous stress or incomplete defecation and/or rare bowel movements (every three to four days or less), according to the Global Guidelines of the World Gastroenterology Organisation. (1) Constipation is a symptom-based disorder, and its definition is mainly subjective. (2) As there is no ideal definition for constipation, many definitions are described by using a self-reported constipation and the formal criteria. (3)

Constipation carries a major health care burden, as it affects 15% - 20% of the global population. A population-based study reported that the cumulative incidence of chronic constipation (CC) is higher in the elderly (~20%) compared to a younger population. Severe constipation is more common in elderly women, with rates of constipation two to three times higher than that of their male counterparts. (4)

Constipation encompasses several subtypes, each with its unique characteristics and underlying factors. (5) Chronic idiopathic constipation (CIC) is a functional disorder associated with an impaired quality of life, and a negative impact on mental, social, and professional aspect. It is associated with various symptoms including hard stools, straining, sensation of anorectal blockage, incomplete evacuation, abdominal discomfort, and bloating. (6) The causes of constipation are many and widespread. To simplify they have been categorised as being either primary: of a gastro-intestinal origin, or secondary: due to non-gastro-intestinal disorders and external factors. (7) Hence Primary causes are intrinsic problems of colonic or anorectal function, whereas secondary causes are related to organic disease, systemic disease, or medications. (8)

Pathogenesis is multifactorial which focuses on the type of diet, genetic predisposition, colonic motility, and absorption, as well as behavioural, biological, and pharmaceutical factors. Furthermore, low fibre dietary intake, inadequate water intake, sedentary lifestyle, irritable bowel syndrome (IBS), failure to respond to urge to defecate, and slow transit have been revealed to be associated with predisposition. (9) The treatment protocol for chronic constipation requires identifying any underlying medical condition that could be causing the constipation and its appropriate management. Thereafter dietary and behavioural aspects are to be corrected, and laxatives added in conjunction.

According to Diamond, the digestive system is intricately related to the rest of the body's optimal functioning as well as to the individuals' emotional arena, which necessitates a more holistic approach in the treatment strategy to encompass all aspects of the individual's presentation of the condition. (10)

Homeopathy, which uses a holistic approach in its therapeutic practice, potentially offers such an alternative to current conventional treatments. Previous research studies using homoeopathic treatment have shown variable levels of effectiveness and indicate that further research studies need to be conducted.

II. CASE REPORT

2.1 Patient Information

A 19-year-old female patient, preparing for SSC examination came to the OPD of University College of Homoeopathy, Kekri (Rajasthan) on 26/09/2023, complaining of Constipation for which she was seeking different modes of treatment for last 6 years and homoeopathy for last 4 months with no relief.

2.2 Present Complaints

- The patient is complaining of Constipation, unsatisfactory stool, must strain to pass stool, ineffectual urging of passing stool. Has not passed stool for last 3 days.
  Last passed Stool – yellowish, non-offensive, soft.
  Amelioration- After taking some kind of treatment.
- Mild itching in anal region all the time.
- Continuous Sticking pain in anal region with sensation of swelling for last 3 days.
- The patient is complaining of frequent urination, dribbling urination and heaviness in lower abdomen since last 3 days after taking homoeopathic medicine for her complaint of constipation.

2.3 History of Present Complaints

- Constipation for last 6 years, suffering for 14 years of age.
- Must strain to pass stool, doesn't pass stool for 2 or more days unless medicine is not taken, for last 6 years.
- Stool consistency alternates from hard to soft, mostly yellowish, & non-offensive, for last 2 years.
- Fatigued easily for last 2 years.
- Sticking pain in anal region with sensation of swelling for last 2 months.

2.4 Treatment History

- Allopathic treatment for constipation, on & off for last 6 years, with temporary relief every time.
  Medication – Cremaffin plus syrup, Tab Pantop-D, Tab sucral-o, for months.
- Homoeopathic treatment for constipation for last 4 months with temporary relief and having new complaints.
  Medication – BC-25, Nux vomica 30, Natrum phos 6x, continue for months.

2.5 Past History

- Not Significant.

2.6 Family History

- Father – Depression, Anxiety attacks for last few months due to financial loss
- Mother – NS
- Brother – NS
- Paternal GM - Dermatitis

2.7 Physical Generals

- Appetite- Satisfactory, can tolerate hunger.
- Desire – Spicy food +
- Aversion – NS
- Thirst – Increased +, 3-4 litre in a day.
- Perspiration – NS
- Tongue – Moist, clean
- Stool – Constipation
- Urine – Frequent urination
- Sleep – Sound, 6-7 hours, Position – NS, Dreams – NS
- Sensitivity- NS
- Thermal – Chilly+, can't tolerate cold air, want to cover the body.

2.8 Mental Generals

- Irritates easily.
- Anger on trifles++, scolds' people, throws things around.
- Studious
- Anxiety, Anxious about health

2.9 Personal History

- Marital status- Unmarried
- Habits/ Addiction- NS

2.10 Gynaecological & Obstetrical History

- Menarche- At age of 13 years
- Menstrual Cycle- Regular cycle, 28 days, normal bleeding amount
- Leucorrhoea- NS
- LMP- 01/09/23

2.11 Observation

- Behavior- Anxious, Nervous
- Complexion- Fair
- Hair- Black
- Built- Thin

2.12 General Examination

- Anemia & Jaundice- absent
- Blood Pressure- 110/80 mmHg
- Skin in general- dull

2.13 Provisional Diagnosis

Functional Disorder of Chronic Idiopathic Constipation

- According to Rome IV Criteria for diagnosis of constipation. (11) (Figure 1, Table 1)

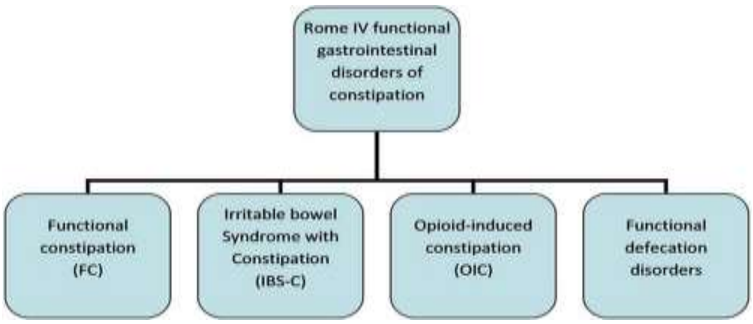

Figure 1 – Rome IV disorders of chronic constipation

Table 1 – Rome IV Criteria for diagnosis of chronic constipation

Functional Constipation (FC) – *The symptoms of FC must include two or more of the following:*	
i.	Straining more than 25% of defecations.
ii.	Lumpy or hard stools (BSFS type 1 or 2) more than 25% of defecations.
iii.	Sensation of incomplete evacuation more than one-fourth (25%) of defecations.
iv.	Sensation of anorectal obstruction/blockage more than one-fourth (25%) of defecations.
v.	Manual maneuvers to facilitate more than one-fourth (25%) of defecations.
vi.	Fewer than three spontaneous bowel movements per week.

2.14 Differential Diagnosis

- Inflammatory Bowel Disease
- Other Functional Intestinal Disorders

2.15 Miasmatic Diagnosis

- Psora is predominant

2.16 Analysis & Evaluation/ Prescribing Totality

2.16.1 Mental Generals

- Irritates easily.
- Anger on trifles++, scolds' people, throws things around.
- Studious
- Anxiety, Anxious to health

2.16.2 Physical Generals

- Constipation, unsatisfactory stool, must strain to pass stool
- Ineffectual urging of passing stool.
- Fatigued easily.
- Desire – Spicy food +
- Thirst – Increased +
- Thermal – Chilly+, can't tolerate cold air, want to cover the body.

2.16.3 Particulars

- Mild itching in anal region all the time.

2.17 Repertorial Analysis

Repertorization with RADAR 10.0 – Synthesis Repertory version 8.1 V (Figure 2)

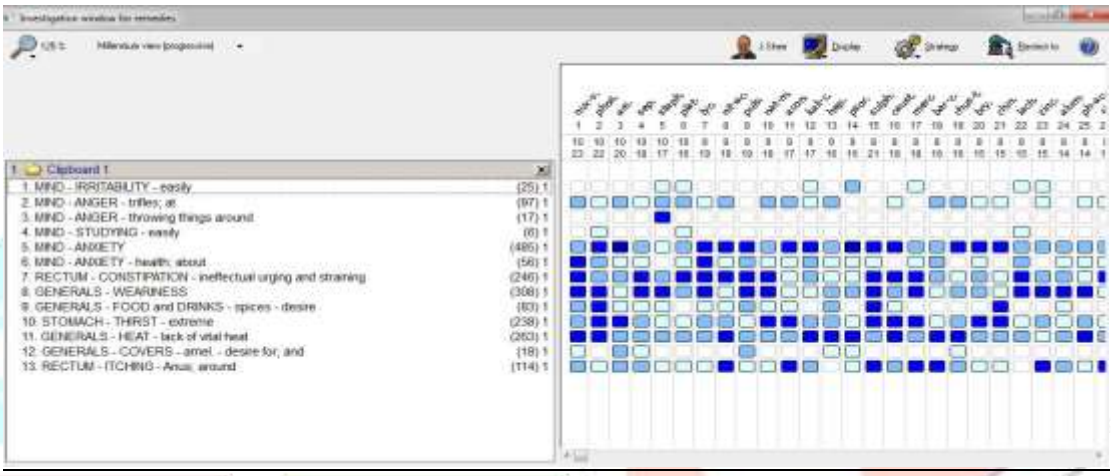

Figure 2 – Repertorial chart

2.18 Therapeutic Intervention –

Nux vomica 1M is selected, according to symptom similarity and considering sedentary lifestyle of patient, prescribed in single dose, instructed to take in the evening.

2.19 Follow-Up & Outcome –

The patient was followed-up and assessed twice in a month for 7 months. The course of the treatment is shown in Table 2. The patient Assessment of Constipation – Symptoms (PAC-SYM) questionnaire was used as a tool to assess the severity of patient reported symptoms of chronic constipation (12) (Table 3). At the time of first visit patient scored 33 and at the time of last visit it had reduced to scored 2 (Table 4 & 5).

Table 2 – Follow-up assessment

Date	Observation and Interpretation	Prescription
03/10/2023	• Frequent urination, dribbling urination and heaviness in lower abdomen relieved. • Sticking pain in anal region relieved 70 % • Sensation of swelling in anal region disappear. • Passing stool everyday with little difficulty. • Ineffectual urging – mild relief	1. Nux vomica 1M Single dose, adviced to take in evening. 2. Placebo, OD for 7 days

10/10/2023	• Passing stool everyday with little difficulty. • Ineffectual urging – Relieved • No new complaint.	Placebo, OD for 7 days
17/10/2023	• Relief in all complaints • No new complaint.	Placebo, OD for 7 days
27/10/2023	• Relief in all complaints • No new complaint.	Placebo, OD for 7 days
08/11/2023	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
28/11/2023	• Mild difficulty in passing stool, after eating spicy & oily food, for last 2 days. • Ineffectual urging continues	1. Nux vomica 1M Single dose, adviced to take in evening. 2. Placebo, OD for 15 days
12/12/2023	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
26/12/2023	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
10/01/2024	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
23/01/2024	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
03/02/2024	• Itching eruptions appear around inner thighs and vulva for past 2 months. • Started with red eruptions with severe itching, causes scratching which > • Later, white scales appear with red eruptions appear. • Patient was taking Fluconazole tablets without notifying to the physician, for past 1 Month. • Suffering from Leucorrhoea, for past 15 days.	1. Nux vomica 1M Single dose, adviced to take in evening. 2. Placebo, OD for 7 days
10/02/2024	• Red itching eruptions, and white scales disappear. • Relief in Constipation and Ineffectual urging. • No new complaint.	Placebo, OD for 15 days
24/02/2024	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
12/03/2024	• Mild heaviness in rectum, since last night, patient has travelled for 6 hours sitting last day.	Placebo, OD for 15 days

	• No new complaint.	
26/03/2024	• Relief in all complaints • No new complaint.	Placebo, OD for 15 days
16/04/2024	• Passes loose stool sometimes after taking spicy food. • Relief in all complaints • No new complaint	Placebo, OD for 15 days
30/04/2024	• Relief in all complaints • No new complaint • Patient asked not to take further medication as she was feeling well and good.	No medication was prescribed.

Table 3 – PAC-SYM questionnaire

The Patient Assessment of Constipation-Symptoms (PAC-SYM) questionnaire:	
Domain	Items
Abdominal	Discomfort in your stomach.
	Pain in your stomach.
	Bloating in your stomach.
	Stomach cramps.
Rectal	Painful bowel movements.
	Rectal burning during or after bowel movement.
	Rectal bleeding or tearing after bowel movement.
Stool	Incomplete bowel movement, like you did not "finish".
	Bowel movements that were too hard.
	Bowel movements that were too small.
	Straining or squeezing to try to pass a bowel movement.
	Feeling like you had to pass a bowel movement but could not ("False alarm")

The 12-item questionnaire is divided into three symptom subscales: abdominal (four items); rectal (three items); and stool (five items). Items are scored on 5-point Likert scales, with scores ranging from 0 to 4 (0 = 'symptom absent', 1 = 'mild', 2 = 'moderate', 3 = 'severe' and 4 = 'very severe'). A mean total score in the range of 0-4 is generated by dividing the total score by the number of questions completed; the lower the total score, the lower the symptom burden.

Table 4 – First visit, 26/09/2023

The Patient Assessment of Constipation-Symptoms (PAC-SYM) questionnaire:		
Domain	Items	Score
Abdominal	Discomfort in your stomach.	2
	Pain in your stomach.	0
	Bloating in your stomach.	3
	Stomach cramps.	0
Rectal	Painful bowel movements.	5
	Rectal burning during or after bowel movement.	1
	Rectal bleeding or tearing after bowel movement.	0
Stool	Incomplete bowel movement, like you did not "finish".	4
	Bowel movements that were too hard.	4
	Bowel movements that were too small.	4
	Straining or squeezing to try to pass a bowel movement.	5
	Feeling like you had to pass a bowel movement but could not ("False alarm")	5
	Total	33

Table 5 – Last visit, 30/04/2024

The Patient Assessment of Constipation-Symptoms (PAC-SYM) questionnaire:		
Domain	Items	Score
Abdominal	Discomfort in your stomach.	0
	Pain in your stomach.	0
	Bloating in your stomach.	0
	Stomach cramps.	0
Rectal	Painful bowel movements.	0
	Rectal burning during or after bowel movement.	0
	Rectal bleeding or tearing after bowel movement.	0
Stool	Incomplete bowel movement, like you did not "finish".	1
	Bowel movements that were too hard.	0
	Bowel movements that were too small.	1
	Straining or squeezing to try to pass a bowel movement.	0
	Feeling like you had to pass a bowel movement but could not ("False alarm")	0
	Total	2

III. **DISCUSSION**

A young woman with severe constipation, particularly with low bowel frequency, a sense of incomplete evacuation and straining, representing a case of typical chronic idiopathic constipation, the treatment of such a constipation is long-lasting, and relapses are common. The quality of life of patient was poor as she was suffering for very long time. She has received all modes of treatment including homoeopathy having partial relief, no relief or medicinal aggravation many times. This situation caused increase her suffering both mentally and physically.

At the time of first consultation, the patient gave a detailed history of suffering, anxiety and characteristic symptoms. After repertorial analysis and noticing her symptoms, behaviour and lifestyle, Nux vomica 1M has been selected, prescribed. During her previous course of homoeopathic treatment, she has received Nux vomica 30 with no satisfactory relief. The medicine didn't work effectively because strict homoeopathic principles were not followed in the case such as, the patient was taking too many medications or polypharmacy, and the potency may not fit to the case, etc.

During 7 months of treatment course her symptoms gradually disappeared after first prescription. Then after 2 months of course her symptoms reappeared due to some exciting causes. Again, noticing the totality of symptoms Nux vomica 1M is given to the patient with satisfactory relief. At the 5th month of course, patient has revealed that she was suffering from dermatitis for past 2 months and leucorrhoea for past 15 days, for which she was taking allopathic medications and ointments having no relief. She didn't tell this to homoeopathic physician before as she was thinking that these were different complaints and need different kind of treatment. These complaints of dermatitis and leucorrhoea must be the homoeopathic aggravation after 2nd dose of Nux vomica 1M. So, the patient was instructed to not take any kind of medicine and ointment for the complaint and to strictly follow the homoeopathic course of treatment.

All her signs and symptoms of itching eruptions and leucorrhoea disappeared gradually without having any sort of constipation and no new complaint. The patient then herself asked to stop the treatment as she was feeling relieved and healthy.

Homoeopathic treatment is one of the most effective and satisfactory way to provide cure in chronic diseases. One must have to follow the principles and instructions given in Organon of medicine to achieve the desired results.

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