EFFECT OF TREATMENT WITH HYOSCYAMUS AND STRAMONIUM IN POTENCIES ON SCHIZOPHRENIA*

DR. V. A. BALACHANDRAN, D.H.M.

INTRODUCTION

Mental disorder is found in all social strata although more common in advanced, civilized states, more in cities than in rural areas. Its incidence increases with the social insecurity and economical drawbacks. The occurrence of mental disorders is widespread, both hereditary and environmental habits being the main causative factors to this subtle condition. Patience and tactful approach are needed for eliciting the complete symptom-complex directing to remedy selection.

Schizophrenia is a state of maladaptation characterised by defects of inner harmony and inconsistency in behaviour, thought and emotions. The commonest basic symptoms are disorder of thinking and emotional incongruity. Patient is often getting away from the main trend of thought process and illogical ideas may intervene and delusions are common. Familial tendencies, genetic factors and many other unknown influences are said to play in the causation of the illness.

Rather than allow them to remain at the service of destructive drives and delirious formulations, the approach should be such that these mechanisms be drawn on and utilized in the efforts to construct a normal personality.

In this context it is now increasingly felt that it is necessary for a physician to have a large armamentarium of psychotropic drugs for his use due to individual constitutional differences and different symptomatology seen in this disorder. It has been evident from the studies done on many of the different psychotropic drugs that one might be more effective in one instance than the other.

It is also said that a careful use of homoeotherapy should result in improvement in psychological and physiological health.

Keeping all this in view two well-known homoeopathic drugs, viz. Hyoscyamus and Stramonium were selected for their clinical assessment in this malady and thereby establish irrefutable evidence of efficacy of homoeopathic medicine in the treatment of schizophrenia.

MATERIAL AND METHOD

Forty selected schizophrenics were kept on Hyoscyamus and thirty were put on Stramonium. Amongst 70 cases, majority were chronically ill and had

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previously been hospitalised and given E.C.T. or other treatment. Duration of illness varied from 2 months to 12 years. Age range was from 19 to 40 years, with the majority falling between 27 and 35 age group. Under Hyoscyamus there were 29 males and 11 females and under Stramonium there were 24 males and 6 females. Each patient included in this study was examined physically and psychiatrically by the author in consultation with visiting psychiatrist before starting the treatment. Weekly examinations were also carried out, jointly by both, during the trial period.

The patients were divided for the choice of the drug, mainly on totality of symptoms. The dosage schedule and the potency selection were individualised, depending upon remedy reaction, patient's age, duration of illness and sensitivity. Both these drugs were used in the range of 200 and 1000 potencies. The length of treatment varied from one week to two months.

The following behaviour variables were chosen for the rating scale:

(1) Passivity phenomenon, (2) Bizarreness of thought content, (3) Incongruity of emotions, (4) Auditory hallucinations, (5) Other hallucinations, (6) Delusion of persecution, (7) Delusion of grandeur, (8) Lack of insight, (9) Lack of concentration, (10) Liability of mood, (11) Ideas of reference, (12) Blunting of affect, (13) Faulty association and behaviours, (14) Faulty speech flow.

In assessing the clinical effect of the drug three types of responses were recognised, viz. recovered, significantly improved and unrelieved.

The patient said to be *recovered* when he was totally free from all the symptoms, productively employed himself or herself in the Occupational Therapy Unit, sociable with other patients and the staff and gained insight fully into his mental condition.

He is said to have *significantly improved*, when he was totally symptom free, but his productivity in the Occupational Therapy Unit and his socialisation was cleared more than 75%.

He was said to be *unrelieved* when only symptoms were partially (50% of the symptoms) altered.

RESULTS

Overall clinical assessment of the patient's condition showed 27 cases (39%) recovered (17 under Hyoscyamus and 10 under Stramonium), 32 cases (46%) significantly improved (18 under Hyoscyamus and 14 under Stramonium), while 11 cases (15%) (5 under Hyoscyamus and 6 under Stramonium) did not respond at all.

DISCUSSION

Generally if the improvement was not noted in two weeks time, further therapy with Hyoscyamus or Stramonium did not produce any improvement at all. No side-effects were observed other than development of some physical symptoms or skin eruptions. Symptoms favourably affected by

Hyoscyamus are ideas of influence, ideas of reference, lack of insight, blunted effect, faulty associations and behaviours, faulty speech flow, paranoid-ideas, passivity phenomenon and pre-occupied for autistic states.

Symptoms responded under Stramonium are: flight of imagination, faulty speech flow, loquacity, grandiose ideas, disordered thought, hypochondriac ideas and delusions, visual hallucination of enemies, stereotyped movements, verbegeration, echolalia and fear of being murdered, delusions of persecution, and stereotyped speech with meaningless words.

Symptoms which did not respond to Stramonium are: fidgety, destructive impulses, silly cheerfulness, nudeness, ideas of influence and low muttering.

The good percentage of response were seen in cyclothymic, schizoid, and paranoid personalities under Hyoscyamus while Stramonium enabled better results in aggressive personalities.

In conclusion, from the above data; it can safely be said, that Hyoscyamus is highly effective psychotropic drug which is rapid in action, and can be given in high potencies with no side-effect. As such as withdrawn patients often responds dramatically to Hyoscyamus and become amenable to treatment and are more able to adjust with the environment. It is found to be effective in paranoid states, enabled the patient to become more active, co-operative and sociable. Hyoscyamus is likely to exert a favourable influence on almost all schizophrenic symptoms when long term treatment is employed.

In schizophrenic states involving acute psychomotor hyperactivity Stramonium is effective in calming the agitated and hostile patients, can decrease the physical overactivity. Further it has improved the quality and duration of sleep. Stramonium is capable of improving symptoms of schizophrenia particularly the excited states, and disordered thought.

In short both these drugs can considerably influence the outcome of disease process. *Minimally* both these drugs are able to control the severity of illness, preventing further regression and allow some normalcy in community life and *maximally* they improve behaviour sufficiently to allow speedy rehabilitation of these unfortunate individuals in becoming functioning or useful members of the society.

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SUMMARY

Hyoscyamus and Stramonium in potencies were tried on 70 selected cases of Schizophrenia, Hyoscyamus and Stramonium were given in oral form to 40 and 30 Schizophrenics respectively. Majority of cases were chronically ill and had had previous history of hospitalization and other treatments including E.C.T.

27 cases (39%) recovered completely (17 under Hyoscyamus and 10 under Stramonium); 32 cases (46%) showed significant improvement (18 under Hyoscyamus and 14 under Stramonium) and 11 cases (15%) did not respond at all (5 under Hyoscyamus and 6 under Stramonium).

7 Patients reported recurrence, (2 of Hyoscyamus and 5 of Stramonium) but in these cases also the lucid interval was considerably prolonged than usual.

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