

HOMOEOPATHIC MANAGEMENT OF SCHIZOPHRENIA - AN ANALYTICAL REPORT

V.A. Balachandran

Introduction

Schizophrenia refers to a group of mental illness characterised by specific psychological symptoms leading to disorganisation of the personality of an individual. Symptoms chiefly interfere with the patient's thinking, emotions and behaviour in a characteristic way. A research project to clinically evaluate the efficacy of homoeopathic medicines in Schizophrenia has been undertaken at CRI, Kottayam. This paper is based on the study made on fifty (50) selected cases of Schizophrenia admitted in the Indoor Patient Department of the Central Research Institute of Homoeopathy, Kottayam.

Material and Method

Out of the total 83 cases of Schizophrenia registered in the year 1992-93, 50 cases were taken up for study. Of these 50 cases, 35 were males and 15 females (Table-1). Patients were chosen from the age group of 20-50 years (Table-2). Most of them were chronically ill and brought to this Institute after various treatments including E.C.T. So the clear picture of the patient was masked. To get a clear picture, these patients were kept in the indoor department for a long period. The duration of illness varied from 12 months to 60 months and above (Table-3). A daily clinical symptomatology assessment was made on these cases giving due importance to symptomatology, personality changes and capability in social adjustments.

Table-1
No. of cases

Total	Males	Females
50	35	15

* Assistant Director Incharge, Central Research Institute(H), Kottayam (CCRH)

Table-2
Age Group

Age group	T	M	F
Below 20 years	0	0	0
20-29 years	26	19	7
30-39 years	14	10	4
40-49 years	10	6	4
50 and above	0	0	0

Table-3
Duration of Illness

Groups	T	M	F
Below 12 months	2	1	1
12-23 months	2	2	0
24-35 months	0	0	0
36-47 months	5	5	0
48-59 months	1	1	0
60 and above	40	26	14

The details of the basis of prescription, psychosocial stress factors, occupational socio-economic, educational and marital status, miasmatic classification are mentioned in the Tables 4 to 13.

Table-4
Basis of Prescription

Causation	3
Mental generals	20
Physical generals	7
Modalities	4
Presenting complaints	19
Constitution	4
Repertorial totality	4
Keynotes/characteristic	3

Table-5
Type of Psycho-social stress factors

Conjugate	5
Presenting	2
Interpersonal problems	17
Occupational	6
Living circumstances	19
Financial	7
Developmental	9
Legal	4

Table-6
Occupational status

Occupation	T	M	F
Skilled	23	20	3
Unskilled	19	9	10
No work	8	6	2

Table-7
Socio-economic status

Low income	24
Middle income	21
High income	3

Table-8
Education status

Not gone to school	0
Backward in studies	19
Irregular in studies	23
Studied upto class 5	8
Studied upto class 10	30
Studied above class 10 th	12

Table-9
Marital status

Marital status	T	M	F
Married	13	8	5
Unmarried	30	25	5
Separated/divorced	6	2	4
Widowed	1	0	1

Table-10

	Heredity	Suicides in the family
Maternal	12	2
Paternal	12	3
Siblings	7	2

Table-11
Miasms

Miasms	T	M	F
Psora	25	18	7
Sycosis	12	9	3
Syphilis	7	5	2
Mixed	6	3	3

Table-12
Miasms Vs Personality

Miasms	Schizoid	Paranoid	Psychopathic	Obsessional
Psora	12	3	3	1
Sycosis	7	7	12	2
Syphilis	1	1	9	1

Table-13
Phase of Symptoms

Aggression	20
Elation	16
Depression	14

Results

The homoeopathic medicines were prescribed on the basis as mentioned in Table 4 and moderate to marked improvement was observed in 60% of the cases (Table-14).

Table-14
Improvement indices

Cured	0
Marked improvement	15
Moderate improvement	15
Mild improvement	9
No improvement	4
Referred	7

Table -15 shows the extent of effectiveness of various drugs. Sulphur was found effective in 15 cases, Pulsatilla and Lachesis in 7 cases each. Nux vomica, Stramonium and Tarentula hispanica responded equally. All these medicines were given in high potencies except Tarentula hispanica which gave good results in low potency.

Table-15
Drug therapy

Medicines	Responded	Aggravation	No change
Sulphur	15	3	4
Pulsatilla	7	3	4
Lachesis	7	2	4
Nux vomica	6	1	4
Stramonium	6	1	3
Tarentula hispanica	6	0	0

Follow-up and recurrence of the symptoms are tabulated in Tables 16 and 17.

Table-16
Follow-up

Reported for 6 months	2
Reported for 12 months	7
Reported for 24 months	23
Not reported	10
Irregular follow-up	5
Advised to report in the event of fluctuation	3

Table-17
Recurrence

Not reported/dropped out	10
Reported within 3 months	4
Reported within 6 months	9
Reported within 12 months	4
Reported within 24 months	2
No recurrence	21

Discussion

Schizophrenia includes a group of illness manifested by disorders of thoughts, perception, emotions

and behaviour. Symptoms include delusions, hallucinations (especially auditory), emotional incongruity and blunting, and a tendency to impulsive and erratic behaviours, which the patients explains in terms of his thought disorder. In young patients deterioration of personality may occur but in older individuals, personality may be fairly well maintained.

Like other systems, Homoeopathy also has its own role to play in alleviating this chronic and dreaded illness. In our Institute majority of the patients who come for admission are Schizophrenics. It has been seen more than 60 months (5 years) duration of illness in the patients shows its chronicity and that the age of the patients who fall into prey of this illness is mostly between 20-40 years. These 50 cases were prescribed on the basis of various parameters such as aetiology, mental generals, physical generals, presenting totality etc., but majority on the basis of mental generals.

On comparing the Table nos. 5 and 10, it is understood that the causation of the illness is not a definite one. The number shows that there is an interaction of the heredity and the life experiences of the patient. Among the life experiences, the living circumstances and the inter-personal problems, especially broken relationships are the main reasons which predispose or precipitate the condition. The Table no. 7 shows that the individual who develop this disorder are usually of low or middle income groups, however, there is no exception for the high socio-economic group. Again, the Table no.8 shows that these patients are either backward or irregular in school or under-educated. Those who are educated are no exception to this disorder.

Table no. 9 shows the marital status of these 50 individuals. Majority of the patients are unmarried. Though schizophrenia is seen in "single" individuals, than "couples", it is evident that this condition prevented the individual from getting married. Out of 50 cases, 7 were separated due to this illness. Table 11 and 12 deals with miasmatic basis and the relation between the miasms and personality of the individual, respectively. As we know that mental diseases are psoric in nature, this table also shows that 25 patients fall into the group of psora, 12 sycosis and 6 mixed. Those patients who were psoric in nature had a premorbid schizoid personality, and those who were sycotic had a premorbid psychopathic personality. Table no.13 shows that majority of the schizophrenic patients are aggressive and elated which is again a manifestation of psoric miasm.

From the response to the drug therapy (Table No.15) it is evident that the polychrest remedies are more useful than other short acting remedies. Among the polychrest remedies, Sulphur, Pulsatilla, Lachesis and Nux vomica are the most important remedies for the treatment of this chronic mental illness. Out of these 50 cases, 30 cases improved in moderate to marked degree and 9 cases in mild form, that means, 60% of the cases showed moderate to marked improvement which is a little above what is given in the text books of Modern Psychiatric medicines. This shows that Homoeopathy can better manage this chronic disease than any other system. The other cases are not improved because of various reasons such as improper approach, lack of proper psycho-therapy, lack of proper rehabilitation, frequent relapse and chronicity of the illness.

The patients who had regular follow-up and treatment with Homoeopathic similimum had less num-

ber of recurrences of the complaints (Table 16 and 17). Proper follow-up and continuous treatment is essential for preventing relapse.

Acknowledgement

The author is thankful to the Director, C.C.R.H., New Delhi for the permission to conduct this seminar and to give permission to present this paper. Special acknowledgement is due to the other staff of the Institute who helped in various ways in preparation of this paper.

References

1. L.P. Shah and Hema Shah. Hand Book of Psychiatry, p. no.21.
2. Benjamin J. Sadock. Comprehensive Text Book of Psychiatry, p.n. 465.
3. B.K. Sarkar. Organon of Medicine.
4. Price's Text Book of Practice of Medicine. Sir Ronald Bodly Scott. ELBS Ed.
5. Case Records - Central Research Institute of Homoeopathy, Kottayam for the year 1992-1993.

Rabindranath Tagore's description of Life :

"In life a multitude of cells were bound together into a larger unit not through aggregation, but through a marvellous quality of complex self-adjusting inter-relationship maintaining a perfect co-ordination of functions. This is the creative principle of unity, the divine mystery of existence that baffles all analysis".

Essays on Homoeopathy (p.56)
Dr. B.K. Sarkar
