

PERVENTIVE ASPECT OF HYPERTENSION IN HOMOEOPATHIC PRACTICE

The term "Hypertension" is a nightmare in the diction of clinical medicine, one of the most obscure and intractable diseases the mankind has ever witnessed, which from its nascence has disabled the immurable victims, on the contrary a perspicacious study of this statistical treatment of hypertension has unfurled the fact that the erudites of all the systems of treatment, many votaries of different systems have been plundering seriously from different angles to combat such invertebrate and obstinate disease. Veterans of preventive school has given much credence to this diseases to minimise the load on the clinicians is the pursuit of our study today.

W. H. O. chairman W. A Mallea told that :-

- 1) Check up blood pressure in almost all cases irrespective of complaints.
- 2) Emphasise on mind of the patient that with treatment there will be satisfactory result in the patient if follow the advices property.
- 3) Compliance with the patient to follow up the case.

Again comparism of Japan advised

- 1) Check up the blood pressure property.
- 2) Proper follow up the case
- 3) Creat a community awareness.

PREVENTING SCIENCE ENCOMPASSES MANY THINGS LIKE-

Health promotion,
Specific promotion,
Early diagnosis and treatment,
Disability limitation,
Rehabilitation,

PREVENTION OF HYPERTENSION CAN BE MADE AT THE THREE FOLLOWING LEVELS.

- I) Primary prevention .
- II) Secondary prevention.
- III) Tertiary prevention.

I) PRIMARY PREVENTION :

HEREDITY :

A) As we know if both the parents are hypertensive the occurrence of disease to the offsprings are 45%. So if it is known earlier the majors can be taken at various levels. Before marriage : If the marriage is over, both partners should be kept under certain regulated mode of life and treatment.

That is - constitutional treatment by Homeopathic medicine.

- If obese, then under dietary regulations which is discussed later.

- Removal of stress and strain

B) Age : As we know that hypertension is more in the age group of 40-60 years so special attention for particular age for check up blood pressure invariable with or without complaints is necessary.

C) Exercise : It is more common in people with secondary workers and those taking extreme physical exertion. So moderation is to be maintained.

D) Mental Stress : Strenuous occupation, sudden, prolonged exertion, overwork, worry and emotional stress are to be avoided.

E) Smoking : This leads to atherosclerosis. So prohibition is necessary.

F) Regular bowel habit : If no regular bowel movement, it will cause hypertension. So following things are to be seen in the patient.

a) Give sufficient roughage food.

b) Adequate drink.

c) Exercise to permissible extent.

d) Salt is curtailed to some extent.

G) Salt intake : Normally 10 gm. salt is required for a normal individual per day. It has been seen that increase salt can cause hypertension in experimental animals. Previously patients were instructed to curtail sodium intake drastically presently with oral diuretics, the most practical approach is now to advise mild dietary sodium restriction (up to 5 gm./day)

H) Over weight : the obese should be instructed to have caloric restriction.

I) Diabetic diets :

Fats (containing saturated fatty acid such as animal fat, fat derived from dietary products and hydrogenated vegetable oils) but there should be intake of unsaturated fat like groundnut oil, cotton seed oil and marine oil,

N.B: only unsaturated fat causes peptic ulcer and carcinoma as it is oxidised rapidly.

PROTEINS : casein prevents atherosclerosis, so milk can be given to hypertensive persons.

CARBOHYDRATES : Body can synthesize lipids from carbohydrates. Endogenous synthesis is to be controlled by reducing the daily carbohydrate intake to 120- 150 gms. as/ starch and excluding sugars such as sucrose, fructose & lactose.

ALCOHOL : This increases caloric intake and stimulates the production of beta lipoprotein.

Moreover in addition to above criterias for our Homoeopathic purpose diet should be such that the substances which are having medicinal action of its own should be removed so that small minute doses of Homoeopathic Medicine may not be overwhelmed extinguished and disturbed.

As hypertension is a chronic disease. our patient should have moderation in all things even in harmless are the chief duty of chronic patient.

Actual rule to be observed is that patient should partake of light digestible nursing food to satisfy hunger.

Among the list of foods :

- Coffee (strictly prohibited)

- Tea (limited to two cups)

“Tea flatteringly allures the nerves and so secretly, inevitably infests and weakens them”

- Raw onion, garlic, hengenue, camphor, zingiber & spices are limited as they possess the medicinal property of their own.

II) SECONDARY PREVENTION :

Early diagnosis and treatment (HOMOEOPATHIC TREATMENT) : After thorough case history on totality of symptoms, a constitutional treatment is provided.

Advice for general management :

a) Rest.

- Going to bed early

- Resting after meal

- Cultivate the art of relaxation.

b) Avoidance of physical & mental stress and strain.

- Nine hours sleep must be advised.

- Strenuous occupation, sudden stresses, prolonged exertion are to be avoided.

- Overwork, worry, emotional stresses are avoid.
- Free bowel movement etc.

III) TERTIARY PREVENTION :

A) **Disability limitation :**

Known case of hypertension is to be treated readily to halt other complications.

- a) Curative treatment : By antimiasmatic drugs.
- b) Palliative treatment : If antimiasmatic drugs are not responding readily, then palliative treatment may be resorted,

B) **Rehabilitation :** Cases developed cerebrovascular accidents should be given treatment with our indicated drugs and along with physiotherapy to restore the function of paralysed parts of the body.

CONCLUSION:

Above script is a mere venture to unfurl the general principle of prevention for one of the most stubborn and unyielding diseases that the human race has even effected with the unbiased clinical research in the arena of treatment of this disease is highly indispensable to fill up the existing vacuum in the literature of homoeopathy. But in the name of clinical research we should not forget the holistic concept of the patient and should never dare to treat the patient and should in the name of disease.

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