

A CASE STUDY ON RHEUMATOID ARTHRITIS

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ABSTRACT

Rheumatoid arthritis (RA) is a long-term autoimmune disorder that primarily affects joints. It typically results in warm, swollen, and painful joints. (cont) Pain and stiffness often worsen following rest. Most commonly, the wrist and hands are involved symmetrically. Peak onset age is of 50 ± 15 years, Female : male - 3 : 1, Old women - 5 %. Genetic contribution - 30% to 60%. -HLA-DR4 allele in Caucasians is associated with a relative risk of almost 4 for RA. It started as vague pain with gradual appearance without classic symptoms of Joint swelling / tenderness/ morning stiffness, effect of small joints, symmetric pattern of involvement, positive compression test is highly suggestive of RA. A case of a 38 years female was taken for its study. The case was taken with its presenting complaints with location, sensation, modality & concomitant. Then treatment history, H/O present complains, past history, family history, personal history was collected. There after physical generals, mental generals, physical examinations & laboratory investigations were done. Case was diagnosed ontologically to be a case of "Rheumatoid arthritis". Miasmatic assessment was done & determined to be case of "mixed miasmatic disease with preponderance of psoric miasm". Step by step proceeded from Analysis of symptoms, Conceptual image, Analysis of the case/Synthesis of the case, Evaluation/Repertorial totality to arrive at a "Totality of symptoms". The case was repertorized and Pulsatilla was evolved as the drug of choice. Hence it was prescribed in 50 millesimal scale followed by Bryonia album in same scale as

chronic remedies. During treatment keeping miasm in mind patient was treated. Necessary intercurrents such as Petroleum 200, Medorrhinum 1m was prescribed. Finally Sulphur 200 1 dose as an anti- psoric as per miasmatic treatment principle was given as finishing dose. Finally patient was recovered fully.

Keywords: - Autoimmune disorder, R. A. factor, Miasmatic diagnosis, Totality of symptoms, E.S.R , C.R.P.

INTRODUCTION

Rheumatoid Arthritis (RA) as a chronic progressive systemic autoimmune disease with hallmark of chronic erosive polyarthritis is the most common inflammatory articular disorder. Its overall prevalence is 1% and it is more common in middle to old aged women. Arthritis of peripheral synovial joints can be seen in almost all patients with RA. Chronic symmetric oligo/polyarthritis with especially small joints involvement of hand along with prolonged morning stiffness is the predominant feature of RA ^[1].

A patient with inflammatory arthritis may pass several stages from the onset of arthritis to a specific form of rheumatic diseases such as RA ^[2]. The first phase is the period leading up to the onset of arthritis .The second is the period during which persistence or remission is determined. The third and the fourth phases are the evolution into specific form of inflammatory arthritis and the outcome/severity of that arthritis. In some patients, these four phases follow in rapid sequences whereas in other patients the time course may prolong and continue for several months or years. Different genetic backgrounds and environmental factors or treatment can affect the various evolutionary phases of arthritis and alter the natural history of initial inflammatory arthritis ^[3,4].

Many rheumatic conditions can be diagnosed or suspected based on taking history and physical examination. Clinical findings are also the mainstay in selecting appropriate diagnostic laboratory tests requested for confirmation of RA or ruling out other rheumatic diseases ^[5].

Presence of some clinical features such as polyarthritis, symmetric arthritis,hand arthritis, pain upon squeezing the metcarpophalangeal or metatasophalangeal joints, and morning stiffness greater than 30 minutes can be helpful not only in

estimating the future course of arthritis but also in limiting the spectrum of differential diagnosis. Identification of all involved joints by precise clinical examination is essential. Counting the tender and swollen joints, and calculation of disease activity score are logical methods for the determination of disease severity and response to treatment [6].

Abnormal values of the laboratory tests are the most typical features of RA. Erythrocyte sedimentation rate (ESR) and C-reactive protein (CRP) provide the best information about the acute phase response. The level of CRP was shown to be significantly correlated with the severity of disease as well as radiographic changes [7].

Auto antibodies such as RF and anti-CCP are very helpful for the diagnosis of RA. Anti-CCP antibody demonstrated a comparable sensitivity but a greater specificity than RF for the diagnosis of RA [8,9].

We know that Rheumatoid Factor (RF) has been the famous autoantibody in RA for many years. It can be seen in many other rheumatologic and non-rheumatologic diseases and even in normal population. Nowadays Anti-cyclic citrullinated peptide (Anti-CCP or ACPA) is the most specific autoantibody in RA with specificity of more than 95%. High titer RF or Anti-CCP and both RF and Anti-CCP positivity are serologic hallmarks of RA. It is well documented in the literature that the serum-levels of RF and Anti-CCP increase years prior to establishment of RA diagnosis. Also simultaneous presence of RF and Anti-CCP in the serum of an individual was highly specific for development of future RA [10]. Negative RF or Anti-CCP can be seen in 20% to 30% of cases with RA and both RF and Anti-CCP negativity can be seen up to 50% of cases in initial presentation and up to 20% in the course of RA [11].

Considering the genetic background, it is estimated that the genetic contribution to RA ranges between 30% and 60%. The presence of HLA-DR4 allele in Caucasians is associated with a relative risk of almost 4 for RA [12].

Smoking, as the most important environmental factor for RA, is associated with the risk of developing RA with an odds of 3 times for future RA in smokers compared to non-smokers [13].

Radiographic signs of RA such as joint space narrowing, erosions and subluxation develop at later stage of RA process. Plain radiography is the standard method in investigating the extent of anatomic changes in RA patients. However, there are few data regarding the value of conventional radiographic examination in recent-onset arthritis. Synovitis is the early findings of RA and is strong predictor of bone erosion. Soft tissue swelling and mild juxtaarticular osteoporosis may be the initial radiographic features of hand joints in early – RA [7].

In contrast sonography and MRI are more sensitive and seem promising but can be used in a limited centers, Sonography is a reliable technique that detect more erosion than radiography especially in early RA [14].

CASE STUDY

On 04-07-13 Mrs Soubhagya laxmi ojha, Female; Hindu, married, aged 38 yrs consulted us with complaints multiple jt. pain; swelling & stiffness in the morning Since 7yrs. Which was agg. when exposure to cold. She had deformity of jts. & also eruption, itching & cracks of palms & soles which was agg. in winter season past history of Chicken pox; Measles; Father had Hypertension & DM type-II. First resorted to Allopathic, then Ayurvedic but had no considerable relief. Patient reacts to severely both the climate with easily catches cold(+++), Desire for sweet(+++) ,salt(++),cold food(+++), bitter(+++),Aversion to sour(+++),spicy food(++),Intolerance to spicy food(+++), fatty food(+++), thirstlessness with dry tongue (+++), perspiration profuse from head(+++),Mentally she was Irritable(+++),Fastidious(++),fear of alone(+++),company desire(++),consolation > (+++). Timidity(+)Weeping tendency(+)Consolation >(+)Fear of evening(+),Wt.-75 k.g. ,BP-120/70mm of hg,Pulse-76/Minute ,CRP(+) ,22.2mg/dl,RA-factor(+ve),ESR-64mm,ASO-36.6 Iu/mm&Uric acid 3.30mg/dl.



Patient's Name : MRS SOUBHAGYALAXMI OJHA Age/Sex : 38Years/Female
 Patient's ID : 18238757 Perm ID32937 Date : 04-july.-2013 09:10
 Referred By Dr. : NIRANJAN MOHANTY Reporting Dt. : 04-july-2013 06:30

HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Units</u>
Serum uric acid	3.30	mg/dl male(3.5-8.5)mg/dl Female(2.5-6.2) mg/dl
Anti-streptolysin O (ASO)	36.8	Iu/ml (<116.0Iu/ml)
CRP(C-Reactive protein) (By Nephelometry)	22.2	<8.0mg/L
E.S.R.	64	mm falls in 1 st hour(westergren's)
R.A. factor	positive (+ve)	

Dr. Manas R Baisakh
 MD(Path), PDCC(Oncopath)
 Consultant Histopathologist

Checked By _____ Page 1 of 3
 Sample supplied / Collected in Lab _____
 (This report is not valid for Medico-legal purpose)
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 Patrapada, Kalinga Nagar, Bhubaneswar-75, Odisha, Phone Number - 91 - 674 - 651 7001
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1.ANALYSIS OF SYMPTOMS:

(It means separating a symptoms in to its various components such as :Location ,sensation, modality & concomitant Thereby we can know characteristic symptom & common symptom .The symptoms is completed with four dimension is called characteristic symptom & which is not completed in four dimension is common symptom.)

Location	Sensations	Modalities	Concomitants
Elbow & Shoulder & Wrist jts.	Swelling/sore pain	<Cold >Warmth	Stiffness in the morning
Palm/Sole	Cracked/Itching	<Winter season	

2.CONCEPTUAL IMAGE:-

(It means to form an idol/semblance but not the actual one by this the symptoms scattered here & there are brought to one place under these heads hence it will be easy for further work)

1.Unexpected deviation -: Thirstlessness with dry tongue

2.Causation:-past history of measles & chicken pox.

3.GENERAL:-A)Mental: Irritable(+++) Fastidious(+++) Fear of alone(++) Consolation(++) Desire Company(++) .B)PHYSICAL GENERAL:RSBC(+++),easily catches cold. Desire: Sweet(+++),cold food(++),salt(++),bitter(++) ,Aversion: Sour(+++);Spicy food(+++) ,Intolerance: Spicy(+++);fat(+++) ,Thirstless with dry tongue(+++).C)PATHOLOGICAL GENERAL: Rheumatoid arthritis. Cracked

skin 4.CHARACTERISTIC PARTICULAR:

Swelling & soreness of the jts <cold>warm,associated with morning stiffness.

5.COMMON PARTICULAR:- Cracked palm & sole associated with itching<winter season .

3.ANALYSIS OF THE CASE/SYNTHESIS:-(It means to produce an important one out of unimportant . In this stage unimportant & vague symptoms are deleted)

Thus in synthesis of this case we remove H/O of chicken pox & measles from causation as it does not clearly signify. Company desire; fear of ghost, thunderstorm are excluded due to less magnitude of symptoms. So the synthesis of the case is written as follows—

1.UNEXPECTED DEVIATION: Thirst less with dry tongue(+++)

2.CAUSATION:××

3.MENTAL GENERAL: Irritable(+++),fastidious(+++),fear of alone(++),consolation > (++)Timidity(+),Weeping tendency(+),Consolation >(++) ,Fear of evening(+)

4.PHYSICAL GENERAL: Reacts severely to both the climates(+++),easily catches cold,Desire for cold food(++),sweet(+++),bitter(+++), salt(+++), Aversion: sour(++),spicy food(+++),intolerance to spicy & fat food(+++).

5.PATHOLOGICAL GENERAL: Rheumatoid arthritis,

6.CHARACTERISTICS PARTICULAR: Swelling & soreness of the joints<cold>warm, associated with morning stiffness.

7.COMMON PARTICULAR: Cracked palm & sole associated with itching<winter season .

4.EVALUATION/REPORTORIAL TOTALITY:-

(Here grading of the symptoms are made as per their intrinsic worth. Repertorial totality is built up as per necessary reportorial tool is applied for the case)

Thirst less with dry tongue,2.Irritable,3.Timidty,4.Weeping tendency,5.Consolation >, 6.Fear of evening, 7.Fear of alone , 8.Fastidious,9.Reacts severely both the climate., 10. Easily catches cold,11.Desire for sweet, salt, bitter , 12.Aversion:sour;spicy ,14.Intolerance:spicy;fat ,15.Rheumatoid arthritis, 16. Swelling & soreness of the joints <cold>warm, associated with morning stiffness.,17. Cracked palm & sole associated itching

5.MIASMATIC DIAGNOSIS:

SYMPTOMS	PSORA	SYPHILIS	SYCOSIS
1.Thirstless with dry tongue			
2.Irritable			
3.Timidty			
4.Weeping tendency			
5.Consolation >			
6.Fear of evening			
7.Fear of alone			
8.Fastidious			
9.Reacts severly both the climate.			
10. Easily cathe cold			
11.Desire for salt			
12.Desire for bitter			
13.Aversion to fat			
14.Deasire for sweet			
15Aversion to sour			
16.Intolerance to spicy			
17.Rheumatoid arthritis			
18.Swelling & soreness of the jts <cold>warm, associated with			
19. Cracked palm & sole associated itching			

Hence it is a mixed miasmatic disease with preponderance of psoric miasm^[15].

6.NOSOLOGICAL DIAGNOSIS:-

Multiple jt. Pain with swelling & morning stiffness, Especially wrist, elbow joints, with RA factor (+ve),CRP(+ve),22.2mg/l,ESR-64mm 1st hr. So it is a case of RHEUMATOID ARTHRITIS.

REPERTORIZATION:The Symptoms of “repertorial totality” were taken for repertORIZATION.

REPORTORIAL SHEET

		Repertorisation Table														
Patient Name : Mrs. SAUBHAGYALAXMI OJHA		Reg.No. : 1362										Rep.Date : 04/07/2013				
No. of Remedies : 15																
		Puls	Sulph	Calc	Nux	Natm	Phos	Sap	Lyc	Rhus	As	Caust	Graph	Alum	Kali-c	Sf
Symptoms Covered		Totally	37	36	29	27	27	26	26	24	23	21	21	21	21	21
[C] (Mouth)Dryness;Tongue;Thirst, without:		14	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Irritability:		3	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Timidity:		3	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Weeping, tearful mood;Tendency:		4	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Consolation;Amel.:		3	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Fear;Evening;Agg.:		3	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Mind)Fastidious:		3	1	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Generalities)Cold;Agg.;Heat and cold:		1	2	3	2	3	2	2	2	2	2	3	1	1	2	1
[C] (Generalities)Cold;Tendency to take, taking cold agg.:		2	2	3	3	3	2	3	3	2	2	1	2	3	3	3
[C] (Generalities)Food and drinks;Sweets;Desires:		2	3	2	1	3	2	2	3	1	1	1	1	2	2	1
[C] (Extremities)Itching;Foot;Sole of:		2	3	2	1	3	2	2	3	2	3	1	1	2	2	1
[C] (Extremities)Itching;Hand;Palm:		1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
[C] (Extremities)Cracked skin;Hands;Palms of:		1	1	1	1	1	1	1	1	1	1	1	1	1	2	1
[C] (Extremities)Cracked skin;Feet;Soles of:		1	1	1	1	1	1	1	1	1	1	1	1	1	2	1
[C] (Extremity Pain)Joints;Cold;Exposure to, after:		3	2	2	3	2	1	2	3	1	1	1	1	1	2	1
[C] (Extremity Pain)Sore, bruised;Joints:		2	3	2	2	2	1	2	3	2	2	2	1	1	2	1
[C] (Extremities)Swelling;Joints:		2	2	1	1	1	1	2	2	2	2	2	1	1	1	1
[C] (Generalities)Food and drinks;Fats and rich food;Agg.:		2	2	1	1	1	1	2	2	2	2	2	1	1	1	1
[C] (Generalities)Food and drinks;Sour, acids;Aversion:		2	2	1	1	1	1	1	1	1	1	1	1	1	1	1
[C] (Generalities)Food and drinks;Spices, condiments, piquant, highly s		3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
Symptoms 1 to 20		Total Symptoms : 21														
		Remedies 1 to 15														
		Total Remedies : 609														
		page 1 of 2														

REPORTORIAL RESULTS

Puls.-14/37,Sulph - 16/36,Cal.carb. -13/29,Nux.vom. - 14/28,Nat.mur.- 16/27

PRESCRIPTION: Dt.04-07-2013:Choice of remedy:- Rx.Puls 0/1,0/2,0/3,0/4(2 oz 16days b.d.)

BASIS OF PRESCRIPTION FOR PULSATILLA WAS AS FOLLOWS:

1.Thirstless with dry tongue,2.Irritable,3.Timidity,4.Weeping tendency,5.Consolation >,6.Fear of evening, 7.Fear of alone , 8.Fastidious,9.Reacts severely to both the climates., 10. Easily catches cold,11. Desire for sweet ,12.Intolerance:spicy;fat ,13.Rheumatoid arthritis, 14. Swelling & soreness of the joints <cold>warm, associated with morning stiffness.

1ST FOLLOW UP(09-08-2013)Multiple joints pain (wrist/elbow) ↓ ,Weakness fore arm ↓ ,Itching palm sole ↓ ,Cracked heel ↓ ,Deformity elbow joint continued.

Rx.Puls 0/5,0/6,0/7,0/8(2 oz ,16 doses, b.d.)

2nd FOLLOW UP(19-09-2013):Multiple joints pain/sore ↓ ,Weakness of right elbow joint ↓ ,Itching sole ↓ ,Crack ness sole continued.

Rx , Puls-0/9,0/10,0/11,0/12(2oz ,16 doses, b.d.)

3rd FOLLOW UP(09-11-2013):Multiple joints pain/sore(↑) with swelling of wrist/elbow continued.Weakness right. elbow joint.(↑),Itching sole/palm (↑),Crack heel ↑ ,Chest sore <cold exposure, Piles with burning pain per rectum ,Home sickness ,Irritable ,Easily offended , Constipation without urging ,Thirst with dry tongue ,Sleep disturbed ,As there was aggravation of few symptoms and few new symptoms were observed, the case was rebuilt with new totality& repertorization was done .

RE-BUILT TOTALITY OF SYMPTOMS: Multiple joints pain/sore with swelling of wrist/elbow, Weakness right elbow joint, Itching sole/palm, Crack heel, Chest sore < cold exposure, Piles per rectum, Burning pain per rectum, Constipation without urging, Thirst with dry tongue, Sleep: disturbed, Home sickness, Irritable, Easily offended,
REPORTORIAL SHEET

Patient Name : Mr. SOBHAGYALAXMI OJHA		Reg_No. : 1879		Rep_Date : 09/11/2013													
Normal		Respertorisation															
		Bry	Sulph	Calc	Caust	Merc	Si	Ar	Phos	Puls	Nux-v	Rhus-t	Sep	Acon	Carb-v	Nel-m	
[C] [Mind]Homesickness, nostalgia:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Mind]Irritability:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Mind]Offended easily:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Rectum]Pain,Burning:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Rectum]Hemorrhoids:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Rectum]Constipation,Urging-Absent:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Stomach]Thirst:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Mouth]Dryness,Tongue:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Sleep]Disturbed:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremity Pain]Sore, bruised:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremities]Swelling,Elbow:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremities]Swelling,Wrist:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremities]Itching, Foot,Sole of:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremities]Cracked skin,Feet,Soles:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Extremities]Cracked skin,Feet,Weather, in cold:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Chest]Pain,Ore, bruised:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Generalities]Weather,Cold, dry,Agg:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
[C] [Generalities]Season,Winter,Agg.:		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Symptoms 1 to 18		Total Symptoms : 18		Remedies 1 to 15		Total Remedies : 651		page 1 of 1									

REPORTORIAL RESULTS :Bryonia-14/31,Sulph.-13/31,Calc.carb.-13/30,Causticum-13/30

PRESCRIPTION : Rx, Petroleum - 200/ (1 oz, 4 doses , 6 hourly) as intercurrent remedy and Bryonia - 0/1, 0/2, 0/3, 0/4 (2 oz, 16 doses, b.d.)

BASIS OF PRESCRIPTION :Petroleum was prescribed as intercurrents for cracked skin aggravating in winter then followed by Bryonia alb. for following reasons : Multiple joints pain/sore with swelling of wrist / elbow), Weakness right elbow joint, Itching sore/ palm, Crack heel, Chest sore < cold exposure, Piles per rectum, Burning pain per rectum, Constipation without urging, Thirst with dry tongue, Sleep disturbed, Homesickness, Irritable, Easily offended

4th Follow up: Multiple joint pain(80%), Pain elbow & wrist (+), Cracked sloe ↓↓ Constipation with urging ↓ (40%) , Piles ↓
 Rx Bronia 0/5, 0/6, 0/7, 0/8 ((2 oz, 16 doses, b.d.)

5th Follow up: Multiple joint pain with swelling elbow & wrist (+), (90%) Cracked sloe with itching ↓ (80%), Constipation, unsatisfactory, with urging ↓
 Piles ↓

Rx Bronia 0/9, 0/10, 0/11, 0/12((2 oz, 16 doses, b.d.)

5th Follow up: Multiple joints pain with swelling of elbow & wrist↓ (80%), (stand still), Cracked sole with itching↓ (80%), (stand still), Piles reduced 70% (stand still).Sneezing <morning.(unchanged),Fidgety in feet, Forgetfulness ,Desire to go home, Irritable, Talks about business, Motion<, Appetite: Increased ,Thirst: Increased with dry tongue,Stool: Constipation ball like stool.

Improvement was stand still hence the totality was rebuilt.

REPORTORIAL SHEET

Patient Name : Mr. Subhalaxmi Ojha		Repertorisation Table															
Reg.No. : 1898		Rep.Date : 02/02/2014															
Symptoms Covered		Bry	Merc	Sulph	Rhus-t	Calc	Phos	Nat-m	Caust	SI	Arz	Lach	Puls	Nit-ac	Bell	Nuxv	
(C) [Extremity Pain]General:																	
(C) [Extremities]Swelling:																	
(C) [Extremities]Swelling,Elbow:																	
(C) [Extremities]Swelling,Wrist:																	
(C) [Extremities]Cracked skin,Feet,Soles:																	
(C) [Extremities]Itching, Foot,Sole of:																	
(C) [Rectum]Hemorrhoids:																	
(C) [Nose]Sneezing,Morning:																	
(C) [Extremities]Redness, Foot:																	
(C) [Mind]Forgetfulness:																	
(C) [Mouth]Crynes, Tongue:																	
(C) [Eyes]Thirst:																	
(C) [Rectum]Constipation:																	
(C) [Stool]Balls, like:																	
(C) [Mind]Irritability:																	
(C) [Mind]Home,Desires to Go:																	
(C) [Mind]Business,Talks of:																	
(C) [Generates]Motion,Agg:																	
(C) [Mind]Homesickness, nostalgia:																	
Symptoms 1 to 19	Total Symptoms : 19	Remedies 1 to 15															Total Remedies : 702

REPORTORIAL RESULTS : Bryo.-16/35, Merc.sol. - 15/35, Sulph. - 14/35, Rhus.tox.- 15/31, Cal.carb.- 15/30.

Bryonia alb.again indicated therefore an intercurrent was thought to be needed, because of following symptoms :

Fidgety in feet, Forgetfulness ,Desire to go home, Irritable, Talks about business, Motion<, Appetite: Increased ,Thirst: Increased with dry tongue,Stool: Constipation ball like stool.

Medorrhinum was given as intercurrents remedy.

PRESCRIPTION: Rx, Medorrhinum-1M(1oz 4doses6hrly) ,as intercurrent remedy. There after Bry.alb. -0/13,0/14,0/15,0/16(2oz, 16doses, b.d.) was prescribed.

6th FOLLOW UP (03-03-2014): No multiple joints pain with swelling elbow /wrist joint, No cracked in sole with itching, Piles reduced 90%, No sneezing, Fidgety in feet. ↓(50%), Forget fullness improved(60%), Desire to go home↓ , Irritable ↓, Talks about business, Motion<, Thirst: Increased with dry tongue, Stool: Constipation ball like stool .

RX, Bryonia alb. -0/17,0/18,0/19,0/20(2oz,16doses, o.d.)

7th FOLLOW UP (07-05-2014): Pain & swelling of elbow & wrist joint reduced considerably, No symptoms of piles, No sneezing .

RX, Bryonia alb. -0/21,0/22,0/23,0/24(2oz, 16doses, o.d.)

8th FOLLOW UP (20-08-2014): No joint pain ,no skin symptom, No piles.She reported for loose stool in early morning . Investigation CRP-7.2mg/dl,ESR-25mm 1st hour& R.A.Factor --+ve.

Rx, Sulphur-200(2glob.in 1oz .of distilled water 4doses 6hrly) was prescribed.

Note : As per chronic mixed miasmatic disease, we have to finish the treatment with an anti-psoric remedy.Hence sulphur was prescribed.

INVESTIGATION REPORT AFTER CURE:



Patient's Name : MRS SOUBHAGYALAXMI OJHA Age/Sex :38Years/Female
Patient's ID : 18238768 Perm ID32937 Date :03-march.-2014 08:20
Referred By Dr. : NIRANJAN MOHANTY Reporting Dt. :03-march-2014 07:30

HAEMATOLOGY

<u>Investigation</u>	<u>Result</u>	<u>Units</u>
CRP(C-Reactive protein) (By Nephelometry)	7.2	<8.0mg/L
E.S.R. hour(westergren's)	25	mm falls in 1 st
R.A. factor	positive (+ve)	

Dr. Manas R. Baisakh
MD(Path), PDCC(Oncopath)
Consultant Histopathologist

Checked By
Sample supplied / Collected in Lab

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DISCUSSION : From above case, it is understood that the rheumatoid arthritis is although an autoimmune disorder and very difficult to be cured by our counterparts allopathic and Ayurvedic system of medicine as this case came to us after being treated by them but it can be easily treated with homoeopathic medicine very comfortably.

As the disease is a mixed miasmatic disease it should be treated by series of medicines as per indication at different stages keeping in mind the predominant miasm of the case.

When the patient's symptoms aggravate or get standstill, necessary acute or intercurrent remedy is to be

prescribed to remove the block and to cure the patient at shortest period of time.

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