



Effectiveness of combined approach of giving homoeopathic constitutional remedies along with *Ferrum metallicum* 6X in management of cases of menorrhagia- a case series

Dr Gaurav Nagar, Dr Ruchi Mehta, Dr Kruiti Saraswat

Abstract:

Background: Menorrhagia, one of the most common gynaecologic complaints, is defined as menstruation at regular cycle intervals but with excessive flow and duration. Menorrhagia denotes regularly timed episodes of bleeding that are excessive in amount (>80ml) and/or duration of flow (>5 days). Despite being life-threatening rarely, menorrhagia has significant effects on personal, social, family, and work life of women and thereby reduces their quality of life. Heavy menstrual bleeding frequently leads to iron deficiency. Iron supplementation is usually given to recover the increased losses. Aim of the following study was to establish role of homoeopathic constitutional remedies in managing cases of menorrhagia along with *Ferrum metallicum* 6X as supplement.

Material and methods: This case series comprises of 5 female patients suffering from menorrhagia (one case has been elaborately discussed). Every patient was asked to report monthly for at least 5 months. Pre-/Post-PBAC (pictorial blood loss assessment chart) scoring was done on each visit for assessment of improvement as evidence.

Result: All the 5 patients got improved with homoeopathic constitutional remedy and *Ferrum metallicum* 6X, along with general well-being, 4 out of 5 patients reported increase in their haemoglobin (Hb) levels by at least 1gm%.

Conclusion: The results of this case series came out to be in favour of combined approach of using homoeopathic constitutional remedy along with *Ferrum metallicum* 6X.

Keywords: Menorrhagia, homoeopathy, PBAC (Pictorial blood loss assessment chart) scale, *Ferrum metallicum*.

Abbreviations: PBAC (pictorial blood loss assessment chart), HMB (heavy menstrual bleeding), Hb (haemoglobin), LMP (last menstrual period), PDF (potential differential field), DNA (Deoxyribonucleic acid), O₂ (oxygen).

Introduction

Menorrhagia is one of the most common gynaecologic complaints in contemporary gynecology, which denotes regularly timed episodes of bleeding that are excessive in amount (>80ml) and/or duration of flow (>5 days).¹

Symptoms reported by a patient with menorrhagia are often more revealing than laboratory tests. A detailed patient history is imperative and should include inquiries about the following:

Quantity and quality of bleeding, age, pelvic pain, menses pattern from menarche, sexual activity, contraceptive use (intrauterine device or hormones), presence of hirsutism (polycystic ovarian syndrome), galactorrhoea (pituitary tumour), systemic illnesses, thyroid dysfunction, other bleeding disorders, current medications (hormones or anticoagulants), previous medical history.

One in 20 women aged between 30 and 49 years consults her general practitioner each year with heavy menstrual loss. Menorrhagia accounts for 12% of gynaecological outpatient referrals and once referred to a gynaecologist, 60% of these women will get hysterectomy done within five years. It poses a burden on healthcare resources.² The World Health Organization reports that 18 million women aged 30-55 years perceive their menstrual bleeding to be exorbitant.³

The PBAC is a semi-quantitative measurement tool [Figure 1]. Women are instructed to count their number of used towels or tampons each day and then divide them by level of soiling. The chart is scored using the scoring system devised by Higham et al. This measurement method has a specificity and sensitivity of 80–90% when compared with the gold standard, alkaline haematin method. Most studies use a score of >150 points to define HMB. A PBAC score of 150 correlates with >80 ml of blood loss.⁴

Iron, the central atom of the heme group, is necessary for oxygen transport in the blood. Without iron in the heme group, there would be no site for the oxygen to bind, thus no oxygen would be delivered to the cells. Proteins needed for DNA synthesis also rely on iron. Iron is also used to help produce the connective tissues in the body, few neurotransmitters in brain, and also to maintain the immune system. Hence, iron is necessary for allowing the cells requiring oxygen to obtain O₂, for supplying the body with a reliable source of energy, and for maintaining several other important structures and systems in the body.⁵ The old school has been giving iron oral therapy with ferrous iron (Fe(II)) salts for anaemia since ages. Most commonly reported adverse effects associated with oral iron treatment are gastrointestinal side-effects (nausea, flatulence, abdominal pain, diarrhoea, constipation, black stools, etc).⁶ Homoeopathic biochemic medicines like *Ferrum metallicum* could effectively meet the deficiency of iron and can be used as supplement without above mentioned side effects.

Figure 1- PBAC Scale

Month: _____

Date	Pads			Tampons			Clots		Flooding	Score
	Light (1 pt each)	Medium (5 pts each)	Heavy (20 pts each)	Light (1 pt each)	Medium (5 pts each)	Heavy (10 pts each)	5 cent size (1 pt each)	50 cent size (5 pts each)	1 pt each episode	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
	Total									

Material and methods

Case series

The patients presented in this case series were reported to the outpatient department of Dr Girendra

Pal Homoeopathic Hospital and Research Centre, Homoeopathy University, Jaipur, Rajasthan, India with presentation of menorrhagia, seeking homoeopathic treatment. This case series comprises of 5 patients with menorrhagia. The detailed case taking of all the participants was done followed by PBAC scoring for establishment of the diagnosis. Patients were asked to report every month for follow ups for 5 subsequent months. Pre-/Post- PBAC scoring were used as evidence to assess the improvement. Homoeopathic constitutional medicines were prescribed along with *Ferrum metallicum* 6X. Aim of the study was to establish role of homoeopathy in managing cases of menorrhagia through constitutional remedies and *Ferrum metallicum* as supplement. **In this case series, we have elaborately discussed one case (case 1), other 4 cases have been discussed briefly.**

Case 1

Case profile: A 16 years old female presented on 20.09.2018 with complaint of profuse menses every month, since last 1 year. Character of blood was blackish, along with dark clots. Menses were accompanied by extreme lower abdominal cramping pains. She also reported recurrent acne on her forehead since 6 months. On interrogation, she also reported that she used to suffer from coryza every month during menses.

History of presenting complaints and treatment history: Patient was apparently well 1 year back, menses were regular and flow was normal since menarche (14 year of age). She gradually started noticing profuse menstrual flow and presence of clots during each cycle but she has not taken any treatment for this till date.

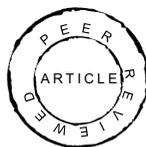
Past history: No significant past illness was reported.

Family history: All members healthy and alive with no significant medical history.

Gynaecological history: Menarche at age of 14 years, menses regular since then and flow was also normal, within limits. Patient use to suffer from slight lower abdominal pain since menarche but intensity of pain has increased since 1 year along with profuse flow and presence of clots.

LMP (Last menstrual period): 24.08.2018

Physical generals: Physical generals of importance included aggravation from milk and sour things. Patient noted that if she takes sour things (lemon, etc.) in excess, her menses would appear slightly prior at that particular month. Extreme desire for chilled water/ soft drinks was



marked. Desire for spices and salty things was present. She had aversion to sweet things since childhood.

Mental generals: She was a very stubborn child since childhood. Likes neatness in everything around her. She had fear from being in overcrowded places, water and being alone. Likes to be in company to keep herself busy. She felt that her family members don't love and care for her to the extent they do to her brother(younger) and sister(elder). On asking her to further elaborate it, she said "my brother goes to a private school in city with school bus, and I have to study in a government school of the village which is 10 kilometres from my home, and still I have to go with bicycle!" She also further said that "I am position holder of my class and he is not! Still he gets more attention!" Otherwise the patient was very friendly, and had a jolly and lively personality. She remained calm throughout the case taking and replied very politely.

Clinical findings

Appearance – ectomorphic.

Height – 5'; weight – 38 kgs.

Pallor was present (2+). Other general and systematic examination findings suggest no abnormal sign.

PBAC score: At initial visit, it was 470.

Investigations: Haemoglobin was 10.5gm%.

Totality of symptoms

1. Feels as if estranged from family
2. Fastidious
3. Fear of being alone
4. Fear in a crowd
5. Fear of water
6. Obstinate
7. Vivacious
8. Coryza during menses
9. Menses, clots present
10. Menses profuse, copious
11. Desire cold drink, cold water
12. Milk aggravation
13. Desire salt
14. Sour food, acids aggravation
15. Desire spices
16. Aversion to sweets

Figure 2- Repertorisation chart of case 1

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
		15	16	14	13	13	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11
		31	24	24	25	22	21	24	20	19	15	14	20	19	18	18	17	17	16	15	14	13	13	13	
1. MIND - ESTRANGED - family from her (26) 1		1	1	1	1	2	2																		
2. MIND - FASTIDIOUS (73) 1		1	2	1	3	2	1	1	1	2	3														
3. MIND - FEAR - alone, of being (84) 1		3	1		3		2	3	2	1	1	1	3												
4. MIND - FEAR - crowd, of a (75) 1		1	2	1	1	2		2	2	1	1	1	3	1	1										
5. MIND - FEAR - water, of (30) 1		2	1																						
6. MIND - OBSTINATE (142) 1		1	3	2	2	1	1	4	2	1	1	1	3	3	2	2	2	1	2	2	1	1	1	2	
7. MIND - VIVACIOUS (124) 1		2	2	1	1	1	1																		
8. NOSE - CORYZA - menses - during (21) 1		1	1	2																					
9. FEMALE GENITALIASEX - MENSES - clotted (133) 1		1	1	2																					
10. FEMALE GENITALIASEX - MENSES - copious (333) 1		3	3	2	3	2	2	2	2	1	3	3	2	2	2	2	2	2	3	2	1	1	1	1	
11. GENERALS - FOOD and DRINKS - cold drink, cold water - desire (227) 1		3	1	3	1	2	2	2	1	1	2	2	3												
12. GENERALS - FOOD and DRINKS - milk - agg (134) 1		2	2	3	2	2	3																		
13. GENERALS - FOOD and DRINKS - salt - desire (108) 1		4		1	1	4	1	3																	
14. GENERALS - FOOD and DRINKS - sour food, acids - agg (86) 1		1	1	2	2	1	2	2																	
15. GENERALS - FOOD and DRINKS - spices - desire (83) 1		3	2	3	1	1	1	1	2	2															
16. GENERALS - FOOD and DRINKS - sweets - aversion (73) 1		2	1	2	2	1																			

First Prescription (20.09.2018)

Phosphorus 200/1 dose/stat was prescribed on the basis of totality of symptoms along with *Ferrum metallicum* 6x.

Justification: *Phosphorus* was selected because it covered maximum rubrics and scored maximum marks after repertorisation. *Phosphorus* not only covered maximum number of physical and particular symptoms in this case, but also the mental generals. It met whole of the symptoms considered in the totality of the case. 200 potency was selected as the remedy fulfilled the mental symptoms, also this potency acts on dynamic level and not merely on organic level.^{7,8,9}

Table 1: Follow ups with prescription.

Date	Symptoms	PBAC score	Prescription
18.10.2018	LMP-22.09.2018- Flow slightly reduced. Clots present. Pain in lower abdomen same. Coryza during menses remained.	410	<i>Ferrum metallicum</i> 6X for 28 days.
15.11.2018	LMP-21.10.2018- Flow same as previous follow up. Clots almost nil. Pain slightly better. Coryza during menses remained.	360	<i>Phosphorus</i> 200/1 dose/stat <i>Ferrum metallicum</i> 6X for 28 days.
13.12.2018	LMP-20.11.2018- Flow and clots comparatively decreased. Pain slightly better. Coryza during menses present but intensity decreased. Advise- Test for haemoglobin level.	260	<i>Rubrum</i> 200/1 dose <i>Ferrum metallicum</i> 6X for 28 days.

10.01.2019	LMP-21.12.2018- Flow normal. Clots absent. Pain almost absent. Slight coryza during menses. Hb- 11.5gm%	180	Rubrum 200/1 dose Placebo 30/ TDS for 28 days.
------------	---	-----	--

Case 3

A 25 years old female presented on 15.11.2018 with complaint of profuse and much offensive menstrual flow(clots present) each month since menarche. She had a history of reported abortions, also involuntary micturition since 1 month. Physical generals included nausea as soon as she eats, thirst was decreased markedly. Desire for salt, aversion to sour things, profuse perspiration on palms and soles. Thermal reaction was towards hot. Among mental generals, constant fear that something bad would happen to her was marked, also fear of height and sudden noises was present. PBAC score was 260 and Hb was 9.5gm%. Patient improved with *Causticum 200* and *Ferrum metallicum 6X*. PBAC dropped down to 150 within 2 months and Hb increased to 10.5gm%.

Justification: *Causticum* was selected because it covered maximum rubrics and scored maximum marks after repertorisation. Also, symptoms like weakness of bladder, involuntary micturition, etc. pointed more towards *Causticum*.^{7,8,9}

Figure 4-Repertorisation chart of case 3

	Caust	Phos	Calc-h	Mag	Phos	Thrac	Staph	Mer	Calc	Chin	Nat-m	Mag	Thrac	Calc	Calc-p	Calc-p	Calc-p	Calc-p	Calc-p
1. MIND - FEAR - happen, something will (108) 1	3	3	2	2	1	2	1	-	-	3	-	2	2	2	3	1	-	-	-
2. MIND - FEAR - noise, from (42) 1	2	2	-	-	1	1	-	1	2	-	-	-	2	1	2	1	-	-	-
3. MIND - FEAR - high places, of (43) 1	1	1	1	-	1	1	1	1	-	-	1	2	1	-	-	1	1	-	-
4. STOMACH - NAUSEA - eating - after (174) 1	2	2	1	2	2	1	2	-	2	1	2	2	2	3	3	-	1	2	2
5. STOMACH - THIRSTLESS (179) 1	1	1	1	2	-	1	2	1	3	1	2	2	1	1	-	1	2	1	3
6. GENERALS - FOOD and DRINKS - salt - desire (108) 1	2	4	3	1	-	2	1	1	-	2	2	4	3	-	-	1	2	1	2
7. BLADDER - WEAKNESS (53) 1	3	-	-	2	1	1	-	2	-	-	-	-	-	-	-	-	1	1	-
8. PERSPIRATION - PROFUSE (225) 1	2	2	3	3	-	3	2	3	3	3	3	1	3	2	1	1	3	1	2
9. FEMALE GENITALIA/SEX - MENSES - clotted (133) 1	2	1	1	-	1	2	3	3	3	1	2	2	1	2	3	-	1	1	3
10. FEMALE GENITALIA/SEX - MENSES - copious (333) 1	2	3	2	3	2	3	2	3	3	3	2	2	3	3	3	2	2	2	2
11. FEMALE GENITALIA/SEX - MENSES - offensive (76) 1	2	1	3	1	2	2	1	1	3	-	-	-	1	-	1	-	1	3	-

Case 4

A 15 years old female presented on 27.12.2018 with complaint of profuse menses every month since menarche, with intense pain in lower abdomen during menses. She also complaint of itching all over her body (with no eruptions) which usually aggravated during rainy weather and night, while lying on bed. Appetite and thirst were markedly decreased. She felt nauseated after eating. Desire for sweets was marked. Thermal reaction was towards hot. She was very dull and lethargic and had no desire to do any work. Marked salivation was present even when she was talking. She was prescribed *Sulphur 30/ 1 dose* during first visit but there was no marked improvement. Hence, *Pulsatilla nigricans 200* was prescribed thereafter which showed improvement. Also *Ferrum metallicum 6x* was

Case 2

A 28 years old female presented on 01.05.2018 with complaint of discharge per vagina (profuse, thick and sticky) and profuse menstrual flow (black, clotted, offensive) every month since menarche. She also complaint of chronic headache followed by lachrymation from both eyes. Headache aggravated from taking anything warm and continued exposure to sun. Marked physical generals included desire for sweets (3+), salt (2+); disturbed sleep due to stress; burning micturition at times; thermal reaction towards chilly. Prominent mental symptoms considered in the case were constantly yelling nature of patient as she was telling her complaints one after other. She was very upset with the environment at her home. She felt much suffocative and at times even thought of committing suicide. She was having claustrophobia and photophobia also anxiety from sudden sound or noise. Desire to remain outside (balcony, garden area) was marked. Patient also reported general aggravation from cloudy weather. PBAC score at initial visit was 270 and Hb was 11gm%. Patient improved with *Pulsatilla nigricans 200*, which was prescribed on the basis of totality of symptoms along with *Ferrum metallicum 6X*. Within three months, her PBAC score dropped down to 120, along with relief in other symptoms as well. Haemoglobin level after three months remained same as earlier in this case.

Justification: *Pulsatilla nigricans* was selected because it covered maximum rubrics and scored maximum marks after repertorisation. Patient's being hot with yelling nature, claustrophobia, photophobia also pointed towards *Pulsatilla*.^{8,9} Thermal reaction was kept in PDF,. Again, 200 potency was selected, so as to let the remedy act on dynamic level and not merely organic level.

Figure 3- Repertorisation chart of case 2

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
1. FEMALE GENITALIA/SEX - LEUKORRHEA - thick (78) 1	2	1	1	2	1	3	-	-	2	-	1	-	3	-	2	1	1	1	-	-	2	-	1	-	-	-	-	-	-	-	
2. FEMALE GENITALIA/SEX - MENSES - copious (333) 1	2	2	2	3	3	2	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	
3. FEMALE GENITALIA/SEX - MENSES - clotted (133) 1	3	3	2	1	1	3	3	1	1	1	1	2	-	2	-	1	3	3	1	-	3	2	2	2	2	2	2	2	2	2	
4. FEMALE GENITALIA/SEX - MENSES - black (87) 1	3	3	2	2	1	-	2	-	1	-	2	-	2	-	2	-	1	-	2	-	2	-	2	-	2	-	2	-	2	-	
5. FEMALE GENITALIA/SEX - MENSES - offensive (76) 1	1	1	1	3	-	3	1	1	1	1	1	2	2	2	-	1	-	2	2	2	2	2	2	2	2	2	2	2	2	2	
6. HEAD - PAIN - sun, from exposure to (96) 1	3	3	2	2	2	3	3	2	-	1	-	2	-	1	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
7. GENERALS - FOOD and DRINKS - warm food - agg (75) 1	3	3	1	2	1	3	2	-	1	3	1	1	-	1	-	1	-	2	2	1	2	2	2	2	2	2	2	2	2	2	2
8. GENERALS - FOOD and DRINKS - sweets - desire (198) 1	2	1	3	2	1	2	2	1	3	2	2	1	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1
9. GENERALS - WEATHER - cloudy weather - agg (37) 1	2	1	1	-	1	-	2	2	1	-	-	1	-	1	-	1	-	1	-	1	-	1	-	1	-	1	-	1	-	1	-
10. MIND - TIMIDITY (154) 1	4	1	3	2	2	3	3	1	2	3	2	2	2	2	1	4	1	2	3	3	1	2	2	1	2	1	2	1	2	1	2
11. MIND - DESPAIR (193) 1	2	2	3	2	3	1	1	2	2	1	2	1	2	3	3	1	1	1	2	1	2	1	2	1	2	1	2	1	2	1	2
12. MIND - WEEPING (320) 1	3	3	3	2	3	3	2	1	2	3	2	3	3	1	1	2	1	1	3	3	1	3	3	3	3	3	3	3	3	3	3



given. PBAC score at initial visit was 450 and Hb was 10gm%. At third month after starting treatment, PBAC score dropped down to 200 and Hb level increased by 0.5gm% (10.5%).

Justification: Initially, *Sulphur 30* was selected because there was marked itching without any considerable cause, lesion or eruption. In order to rule out any underlying pathology, if present, and flare it up to get exact picture of the disease, *Sulphur* was prescribed. Thereafter, case was repertorised thoroughly, *Pulsatilla nigricans* came out to be the next closest remedy, hence it was prescribed.^{7,8,9}

Figure 5-Repertorisation chart of case 4

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	
1. MIND - DULLNESS (441) 1	3	3	2	2	3	3	3	3	1	1	2	3	3	2	2	2	3	2	2	1	1	1	2	3	3	3	3	3	3	
2. GENERALS - SLUGGISHNESS of the body (120) 1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1		
3. MOUTH - SALIVATION - profuse (188) 1	3	2	3	2	1	1	2	1	1	2	1	2	2	2	1	2	2	1	1	1	1	1	1	1	3	2	1	1	2	
4. STOMACH - NAUSEA - eating - after (174) 1	3	2	3	1	1	2	2	1	1	1	3	2	2	3	1	2	2	1	1	1	1	1	1	1	1	2	1	2	2	
5. STOMACH - THIRSTLESS (178) 1	3	1	1	3	1	1	1	1	1	2	1	1	2	2	1	1	1	1	2	2	1	1	2	1	1	2	1	2	2	
6. FEMALE GENITALIASEX - MENSES - copious (333) 1	2	2	3	2	2	2	3	3	2	3	2	2	3	2	3	2	2	3	3	2	2	3	3	2	2	3	3	2	2	
7. FEMALE GENITALIASEX - MENSES - dark (118) 1	3	2	3	2	1	2	2	1	2	1	2	2	2	2	2	2	2	2	1	2	3	2	2	2	2	2	3	1	1	
8. FEMALE GENITALIASEX - MENSES - offensive (76) 1	1	1	1	1	3	3	1	1	1	2	1	1	2	2	2	2	1	1	1	1	1	1	1	1	1	1	1	1	2	2
9. SKIN - ITCHING - bed in (21) 1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
10. SKIN - ITCHING - night (80) 1	1	3	1	1	1	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	
11. GENERALS - FOOD and DRINKS - sweets - desire (188) 1	2	3	1	3	2	2	1	2	1	1	2	2	2	2	1	1	2	2	1	1	1	1	1	1	1	1	2	3	1	

Case 5

A 39 years old female presented on 04.01.2019 with complaint of profuse menses every month since 1 year. Character of blood was bright red and clots were present. She also complaint of thick, whitish discharge per vagina on and off. Desire for sweets was marked. Perspiration was profuse and non-offensive. She also had recurrent complaint of flatulence. She was very bold and courageous and always does what she thinks is correct. She said she had nothing to do with what others think of her. Very sympathetic and benevolent personality, couldn't see others in pain, but also very stubborn and obstinate by nature and wanted everyone should follow what she says, at home as well as at workplace. Suspicious by nature and inability live alone and wants to be in company all the time. This patient improved with *Lycopodium clavatum 200* and *Ferrum metallicum 6X*. PBAC score at initial visit was 310 and Hb was 10.5gm%. After four months, PBAC score dropped down to 140 and Hb level increased by 1gm%(11.5%).

Justification: Patient's obstinate and dictatorial nature along with gastric troubles and marked desire for sweets pointed towards *Lycopodium*. Also, it covered maximum rubrics and scored maximum marks after repertorisation.^{7,8,9}

Figure 6-Repertorisation chart of case 5

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29
1. MIND - COMPANY - desire for - alone esp. when (78) 1	2	1	1	1	3	2	1	-	-	3	2	1	1	1	2	1	-	1	1	-	2	-	1	-	-	-	-	-	
2. MIND - DEFIANT (30) 1	2	1	1	3	-	1	-	1	-	-	-	-	-	-	-	-	-	-	1	1	-	1	-	-	-	-	-	-	
3. MIND - DICTATORIAL (50) 1	3	1	-	1	2	-	2	1	1	-	1	1	1	-	-	-	-	-	1	-	2	-	2	-	2	-	-	-	
4. MIND - OBSTINATE (142) 1	2	1	3	2	1	1	3	2	1	3	2	1	2	1	1	2	1	2	1	1	1	1	2	1	1	1	1	1	1
5. MIND - SUSPICIOUS (138) 1	4	2	2	3	2	2	1	3	3	2	3	2	-	-	3	2	3	1	-	2	1	1	3	3	2	-	1	1	
6. MIND - SYMPATHETIC (77) 1	1	1	1	2	3	-	1	-	1	2	-	2	-	1	2	-	1	1	-	-	-	-	-	-	-	1	2	1	1
7. FEMALE GENITALIASEX - LEUKORRHEA - white (108) 1	1	3	2	-	1	2	2	1	2	2	2	1	2	-	-	1	1	1	2	1	-	-	-	-	3	2	2	3	
8. FEMALE GENITALIASEX - MENSES - bright red (108) 1	1	1	3	2	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
9. FEMALE GENITALIASEX - MENSES - clotted (133) 1	2	1	3	2	1	1	3	2	3	1	-	3	1	2	3	1	2	-	2	-	1	3	3	2	2	1	-	1	2
10. PERSPIRATION - PROFUSE (225) 1	3	3	3	2	2	3	2	2	2	3	1	3	3	2	2	1	3	1	1	1	3	2	2	-	3	1	3	1	
11. GENERALS - FOOD and DRINKS - sweets - desire (188) 1	3	2	1	1	2	2	2	3	2	1	1	2	1	1	2	2	1	1	2	1	1	1	3	2	2	2	1	3	2

Results

In this case series, homoeopathic management of menorrhagia was found to be effective with combined approach of constitutional remedies and *Ferrum metallicum 6X*. It was found effective, considering all the outcome measures, pre-/ post-treatment PBAC Score, Hb levels and follow ups. 4 out of 5 patients reported increase in Hb levels and all of the 5 patients reported drop in PBAC score. The patients didn't show any recurrence during the period of 4 months on an average.

Discussion and conclusion

The objective of this study was to answer the question: could combined approach of constitutional remedies and *Ferrum metallicum 6X* be an effective approach for menorrhagia. The idea behind this approach was that the old school and allopathic system of medicine uses iron salts as supplementation to treat such cases⁶, but they have side effects too, instead iron in potentised form can be used to avoid side effects and act on dynamic plane. Considering this, *Ferrum metallicum* was the nearest analogue which could be thought of. The results of this case series provide preliminary evidence in favour of this approach. With 4 out of 5 patients reporting increase in Hb levels, it can be ascertained that homoeopathic constitutional remedies along with *Ferrum metallicum* can do wonders in cases of menorrhagia.

Most of the patients wanted to avoid extensive invasive investigation for diagnostic and prognostic purpose as well as surgical treatment. This case series proves that homoeopathy is a specialized system of medicine which treats the patient and not the disease. Homoeopathy believes in holistic individualised approach, and corrects disturbances in the vital force. The patient, after receiving homoeopathic medicine, not only reported symptomatic relief but post treatment scoring showed beneficial action of homoeopathic medicine in menorrhagia. Suggestions for future



studies shall be that a larger study should be taken up, which could provide better evidence in support of homoeopathy in the treatment of menorrhagia (with and without biochemic supplementation). For future studies, focus should be on evaluation of quality of life, investigations and inclusion of a large sample size.

Ethical issues: Patients’ consent for the reporting of the data has been obtained in interest of medical profession and patients’ privacy and integrity has been assured while reporting and publishing the data.

Conflict of interest: None declared.

Financial support and sponsorship: Nil.

References

1. Hawkin & Bourne. Shaw’s textbook of gynaecology, 15th ed. New Delhi: Elsevier; 2011.
2. Wyatt K, Dimmock Paul, O’Brien Shaughn, Kirkham Caroline, Warrilow Gill, Ismail Khaled. Quantification of menstrual blood loss. The Obstetricians and Gynaecologists. 2004;6:88–92.
3. Fatma N, Ali T, Naaz SA. Temperamental analysis in case of menorrhagia in reproductive age group. International research journal of pharmacy. 2012;3(9).
4. Herman MC, Mol BW, Bongers MY. Diagnosis of heavy menstrual bleeding. Womens Health. 2012;12(1): 15-20.
5. Casiday R, Frey R. Iron Use and Storage in the Body: Ferritin and Molecular Representations. Iron in Biology: Study of the Iron Content in Ferritin, The

- Iron-Storage Protein. Department of Chemistry, Washington University St. Louis, MO 63130
6. Tolkien Z, Stecher L, Mander AP, Pereira DIA, Powell JJ. Ferrous Sulfate Supplementation Causes Significant Gastrointestinal Side-Effects in Adults: A Systematic Review and Meta-Analysis. PLoS One. 2015; 10(2). doi: 10.1371/journal.pone.0117383
7. Kent JT. Lectures on Homoeopathic Materia Medica, New Delhi: B.Jain Publishers(P)Ltd; 2013.
8. Clarke JH. A Dictionary of Practical Materia Medica. New Delhi: B. Jain Publishers(P)Ltd.; 2014.
9. RADAR [computer program]. Version 10. Belgium: Archibel Software; 2010.

About the authors

Dr Gaurav Nagar, Professor, Dept. of Materia Medica, Dr. M.P.K. Homoeopathic Medical College, Hospital & Research Centre, Homoeopathy University, Jaipur, Rajasthan.

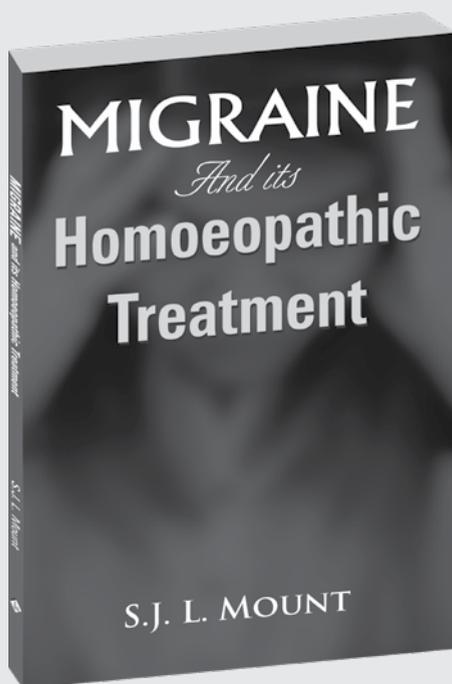
Dr Ruchi Mehta, Assistant Professor, Dept. of Gynaecology & Obstetrics, Dr. M.P.K. Homoeopathic Medical College, Hospital & Research Centre, Homoeopathy University, Jaipur, Rajasthan.

Dr Kruti Saraswat, MD Scholar, Dept. of Materia Medica, Dr. M.P.K Homoeopathic Medical College, Hospital & Research Centre, Homoeopathy University, Jaipur, Rajasthan.



Migraine and its Homoeopathic Treatment

Dr S.J.L. Mount



Distinguishing Features:

- A thesis on the genesis, nature and control of migraine in particular reference with bowel nosodes and the homoeopathic remedies which have proved their efficacy in treatment of migraine.

ISBN: 978-81-319-08273 | 416pp

For direct order please contact: +91-120-4933349