

A Clinical Case Study On Factors Associate With Secondary Amenorrhoea And Homoeopathic Management

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ABSTRACT

Secondary amenorrhoea is a common disorder encountered by females of reproductive age group. It is a condition when a female has absence of menses for more than 3 months when she was menstruating regularly or 6 months when she was having irregular menstrual cycles. It may be caused by a variety of reasons like mental stress, physical stress, hormonal imbalance etc. It may be associated with a number of symptoms which together constitute a disease to be cured. Homoeopathic mode of treatment considers totality of symptoms as the basis of prescription which restore the original well being of the patient by removing signs and symptoms of the disease. Along with this homoeopathic medicines remove the underlying pathology. There is a case study of 34 yrs old female with complaint of secondary amenorrhoea to whom Natrum muriaticum was prescribed on the basis of totality of symptoms and which proved to be very effective in improving symptoms of the disease and quality of life of the patient.

Keywords: Secondary amenorrhoea, Amenorrhoea ,Homoeopathy, Anaemia, Repertorisation ,Hyperprolactinemia ,Hormonal factors,Menstrual Irregularities

1. INTRODUCTION

Definition

Secondary amenorrhoea is the term used for a condition when there is absence of menses in a female for more than 3 months with history of regular menstrual cycle or 6 months in a woman with irregular menstrual cycle. It is a common condition experienced by many females during their reproductive life

Prevalence

Studies suggest a prevalence of 2-5% in general population of reproductive age group women which may vary according to the age group, socioeconomic status and lifestyle of the females.

Aetiology

Secondary amenorrhoea may occur for a variety of reasons which include:

Hormonal factors

PCOS,

Thyroid malfunction

Pituitary tumour

Hyperprolactinemia

Lifestyle disorders

Low body weight

Obesity

Excessive exercise

Mental stress

Medication

Antidepressants

Antihypertensives

Oral contraceptives

Cancer chemotherapy

Uterine scarring after

D&C

Caesarian section

Surgery for uterine fibroid.

Premature menopause

General diseases

Malnutrition

Tuberculosis

Diabetes mellitus

Clinical features:

Amenorrhoea i.e cessation of menses.

Nausea, fatigue

Breast tenderness, milky discharge from nipple

Excessive hairgrowth (hirsutism)

Acne, weight gain

Headache, vision changes

Hot flushes, mood changes

Pain in the pelvic region

Case Report:

Personal Information:

Name of patient – Mrs.Bhavika W/O Suresh Kumar

Age - 34 years

Sex – Female

Religion – Hindu

Address - Royal Palm Estate, Zirakpur, Mohali, Punjab

Marital status –Married (9 years of marriage)

Occupation - Housewife

Chief complaint:

A 34 yrs old female patient visited the OPD of HMC & H, Chandigarh with complaint of

Absence of her menstrual cycle for 7 months

LMP 13th May 2024

Headache since 3 months

Aggravation from exposure to sun, exertion

Amelioration in evening, after rest

History of present illness :

The menstrual irregularity started 3 yrs back, after her last delivery. Initially her menses got irregular with a gap of one or two months. With the passage of time the gap was going on increasing and this time 7 months had passed without menstruation. She took allopathic treatment for 3 months but no fruitful result came out.

Past history:

Typhoid fever 4 yrs back. Allopathic treatment taken, got cured.

Anaemia during both pregnancies even after taking iron supplements

Family history :

Father – hypertensive, diabetic

Mother – diabetic

Sister – obesity, menses irregular

Brother - hypertensive

Physical generals:

Appetite – decreased

Thirst – thirsty

Desire - salty and fried food

Aversion – milk

Stool – constipation, dry and hard stool

Urine – clear, satisfactory

Sleep – normal

Dreams – not specific.

Thermals – hot

Perspiration - moderate

Menstrual history:

Menarche at 13years of age

Menses regular every month, last 5 days

Flow moderate, of maroon red color, fluid blood

Mild dysmenorrhoea.

She delivered a baby boy 3yrs back, after that her menses got irregular.

Obstetric history:

G2P2A0

2 male children 6&3yrs of age born by normal vaginal delivery.

Sterilization /contraceptives use- No

H/O regular medication – No

Mental generals:

Reserve nature

Highly emotional

Angry, irritable

Did not like to talk much

Weep easily, weep when alone

She liked to remain alone, did not like company.

She had good relations with husband and family members.

General Physical Examination:

Built – lean thin

Body weight – 48 Kg

Nutritional status – poor

Pallor - Present

Cyanosis – Absent

Edema – Absent

Thyroid enlargement – Absent

Tongue – white coated

Skin – Dark

Nails - Pale

Pulse - 80/min

Respiratory rate – 18/ minute

Temperature - 98.6°F

Investigations

Complete blood count – CBC normal, Hb 9.2 gm%

Pregnancy test – Negative

Thyroid test (thyroid stimulating hormone) – Within normal range

USG – Revealed normal study except increased endometrial thickness.

Diagnosis – Secondary amenorrhoea

Analysis and evaluation of symptoms:

S.No.	Symptom	Analysis	Evaluation
1	Reserve	mental general	+++
2	Highly emotional	mental general	++

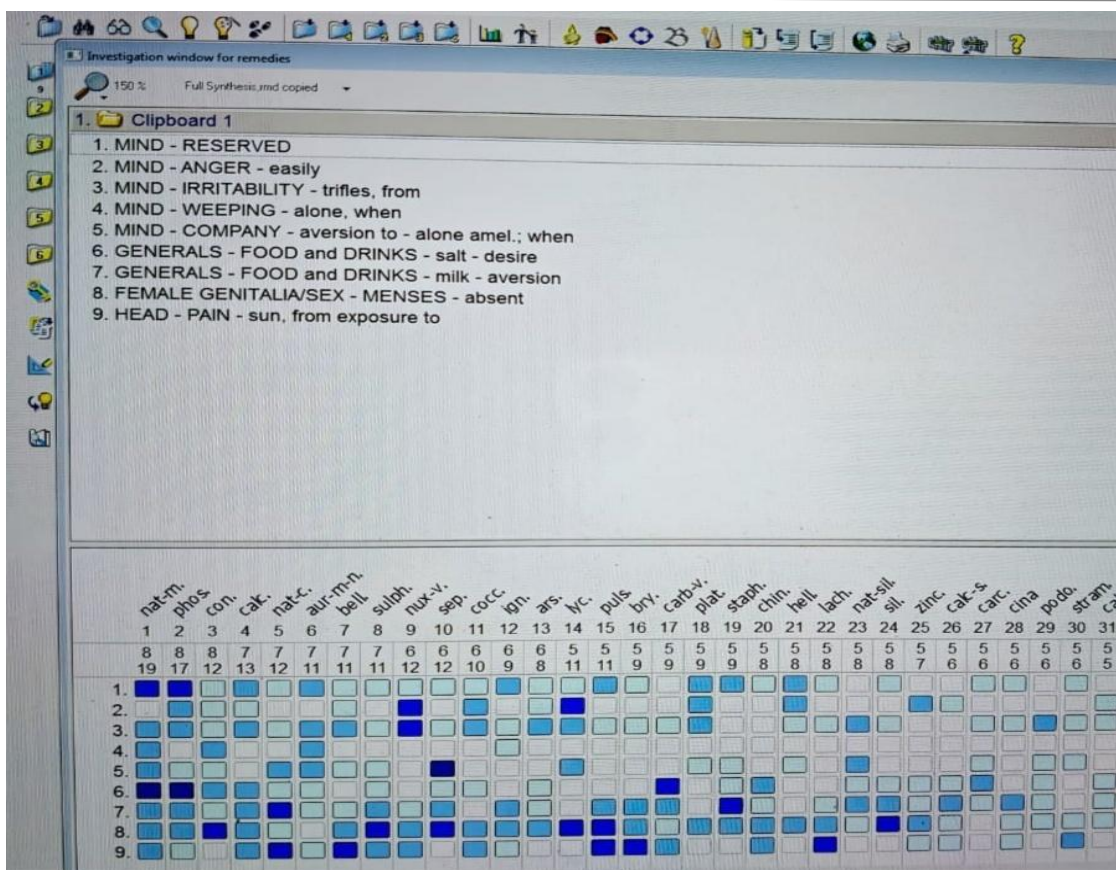
3	Anger	mental general	+++
4	Irritability	mental general	+++
5	Taciturn	mental general	+
6	Weeping easily	mental general	++
7	Weeping alone when	mental general	+++
8	Company aversion	mental general	+++
9	Menses absent	particular	+++
10	Salty things desire	Physical general	+++
11	Fried food desire	Physical general	++
12	Milk aversion	Physical general	+++
13	Headache from sun	particular	+++
14	Stool dry, hard	particular	++
15	Thermal hot	Physical general	+++

Rubrics taken using Synthesis Repertory

1. Mind – Reserved
2. Mind – Anger easily
3. Mind – Irritability trifles from
4. Mind – Weeping alone when
5. Mind – Company aversion, alone when amel.
6. Generalities – Food and drinks, salt desire
7. Generalities – Food and drinks, milk aversion
8. Female genitalia – Menses absent
- 9 Head – Headache, sun exposure to sun from

Repertorization

Repertorization is done by using Radar software, Synthesis repertory version 9.0.



Basis of prescription

The prescription is based on the totality of symptoms. After repertorization a wide range of medicines came out, out of which Natrum muriaticum is the most similimum to the totality of symptoms of patient.

Selection of potency

The potency selected is 200, on the basis that higher the susceptibility of the patient, higher the potency to be administered.

Prescription

First prescription on 15.1.2025

Natrum muriaticum 200/3dose

Placebo 30/TDS for 15 days.

S. No.	Date of visit	Symptoms	Patient's assessment	Prescription
1	30.1.2025	Menses did not appear yet, patient had relief in headache, appetite increased, bowel habit had improved	Better	Natrum muriaticum 200/3dose Placebo 30/TDS for 15 days.
2	16.2.2025	Menses appeared on 15.2.25. No dysmenorrhoea, normal flow. Other symptoms had improved.	Better	Natrum muriaticum 200/3 doses, to be taken after ceassation of menstrual flow, placebo 30/TDS regularly for 1Month

3	22.3.2025	Menses appeared on 18.3.25, flow normal, again last 4 days, headache occurred rarely, appetite and bowel habits were normal, anger and irritability had improved.	Good	Placebo 30/ TDS for 1 month
4	25.4.2025.	Menses appeared on 21.4.25, normal flow, maroon colored blood, last 4days. Patient was feeling much better mentally as well as physically.	Good	Placebo 30/ TDS for 1 month

Follow up

2. MANAGEMENT

Patient is advised to take healthy diet, fruits, green vegetables and plenty of water. Spicy food, cold drinks, chocolate, coffee etc should be avoided. She is advised to do light exercise and take proper rest.

3. RESULT

The patient showed marked improvement in her symptoms under Homoeopathic treatment. She came for regular follow ups for 9-10 months. Her menses got regular with overall improvement in general health. Later, Natrum muriaticum 1M/3dose was also prescribed in order to complete the cure. At the end she got toatally free from her complaints.

4. CONCLUSION:

The case study shows that homeopathic medicines are effective in case of secondary Amenorrhoea, if we prescribe medicine on the basis of totality of symptoms. When a homeopathically selected medicine is administered to a sick person, there is disappearance of symptoms of the disease and restoration of health of the patient. It represents the reaction of susceptible organism to the impression of the curative remedy

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