



ENDOMETRIOSIS & HOMOEOPATHY

Dr. Tridibesh Tripathy*	Bhms Utkal University, Bhubaneswar, Md Bfuhs, Faridkot, Mha Tiss, Mumbai, Ph.d. In Health Systems Studies Tiss, Mumbai, Homoeopathic & Public Health Expert, Visiting Professor, Master Of Public Health Community Medicine Program, Department Of Social Work, Lucknow University, Lucknow, Up, India. *Corresponding Author
Prof. Chaturbhuj Nayak	Former Director General, Central Council For Research In Homoeopathy, Ministry Of Ayush, Delhi & Former Principal-cum-superintendent, Dr. Abhin Chandra Homoeopathic Medical College & Hospital, Bhubaneswar, Government Of Odisha.
Prof. Shankar Das	Pro Vice Chancellor, Tata Institute Of Social Sciences, Mumbai & Former Director, Iihmr, Delhi.
Prof. D. P. Singh	Dean, School Of Research Methodology, Tata Institute Of Social Sciences, Mumbai.
Prof. Byomakesh Tripathy	Academic Director, Indira Gandhi National Tribal University, Amarkantak, M.p. And Former Vice Chancellor, Utkal University Of Culture, Bhubaneswar.
Prof. Rakesh Dwivedi	Hod, Department Of Social Work, Co-ordinator, Master Of Public Health Community Medicine Program, Department Of Social Work, Lucknow University, Lucknow.
Dr. Mohini Gautam	Assistant Professor, Faculty, Department Of Social Work, Guru Ghasidas University, Bilaspur, Chhatisgarh.
Dr. Umakant Prusty	Research Officer (homoeopathy), Regional Research Institute (homoeopathy), Puri, Odisha Under Central Council For Research In Homoeopathy, Ministry Of Ayush, Government Of India.
Dr. Madan Mohan Mishra	Homoeopathic Practitioner With 30 Years Of Experience, Anugul, Odisha.
Dr. Pramod Bihari Pradhan	Nodal Officer (homoeopathy), Directorate Of Ayush, Government Of Odisha, Bhubaneswar.
Dr. Jeevan Krushna Pattanaik	Medical Officer Attached To Dr. A.c. Homoeopathic Medical College & Hospital, Government Of Odisha, Bhubaneswar.
Dr. S. N. Pandey	Former District Homoeopathic Officer, Government Of Uttar Pradesh, Lucknow, Up, India
Dr. Sudhanshu Dixit	Homoeopathic Medical Officer, Directorate Of Homoeopathy, Government Of Up, Lucknow.
Ms. Sanskriti Tripathy	Iind Year Student, B.tech In Biotechnology, Bennet University, Greater Noida, Uttar Pradesh.
Mrs. Anjali Tripathy	State Consultant, Jjm, United Nations Office For Project Services, Jaipur, Former Senior Program Manager, Llf, Lucknow & Former Employee Of International Agencies Such As Catholic Relief Services & Water Aid.

ABSTRACT The current article discusses one of the main issues of Obstetrics & Gynaecology & this is endometriosis. The condition is described by modalities like epidemiology, clinical features, diagnosis, prognosis, its impact, management, treatment options, its future through public policies & finally the role of Homoeopathy to deal with endometriosis. The article discusses the Essential Medicine properties of Homoeopathy & suggests a treatment protocol based on the Homoeopathic therapeutic system. The article aspires that the integration of Homoeopathy will reduce the burden of endometriosis in the nation.

KEYWORDS : Endometriosis, Homoeopathy, Materia Medica, Miasms, AYUSH

INTRODUCTION^{1,2,3}

Endometriosis is a chronic inflammatory condition which involves the growth of tissue similar to the lining of the uterus outside the uterine cavity. The process leads to severe pain with numerous complications. The condition is an estrogen dependent disease where tissue resembling the endometrium grows outside the uterus. This unnatural growth leads to the signs & symptoms of endometriosis. It not only impacts the physical health but also a woman's educational, professional, social lives throughout their life.

The disease was first described by Daniel Shoren in 1690 & the symptoms were explained by Arthur Duff in 1769. In 1927, J.A. Simpson introduced the term endometriosis into medical literature.

Epidemiology^{4,5,6}

The condition affects 247 million women at the global level. It affects 10% of women during their reproductive years. It is a growing global health issue that affects millions of women across regions & ethnicities. About 6 to 10% of women across the globe suffer from this

condition. In terms of absolute numbers, 247 million women are affected globally & around 42 million in India.

Clinical Features^{7,9,10,11,12,6}

The distressing symptoms are severe period pain, chronic pelvic pain, painful intercourse, painful bowel movements, fatigue, depression, infertility. Usually, normal menstrual periods do not cause excruciating pain whereas in endometriosis, the pain is severe. There is severe pain in the lower abdomen before & during periods. There is pain during sexual activity. There is painful urination, painful bowel movements during periods. Fatigue is associated with heavy menstrual bleeding & finally it leads to infertility.

Diagnosis^{1,6,7,9,10,11,12}

An endometriosis diagnosis is confirmed through Laparoscopy which is a surgical procedure performed under anesthesia. The procedure reveals the location, size, extent of endometrial growth that aids in better decisions to deal with the condition.

Efforts are being made to identify treatments targeting specific disease mechanisms to manage pain. It is here that Homoeopathy has a crucial role to play.

Prognosis^{1,6,7,9,10,11,12}

Progress in developing effective treatment is limited & this indicates a significant unmet need in medical science. The recent breakthroughs have identified key molecular pathways involved in the disease & this leads to new therapeutic targets. Scientists are seeing the role of an enzyme named mPGES-1 in the progression of the disease & its potential as a target for non hormonal therapies.

The cause of endometriosis is unknown. Factors such as genetic predisposition, immune system irregularities, environmental toxins have roles to play in this disease.

Impact of Endometriosis^{1,7}

As discussed above, the factors are multi-factorial & as well as the impact is multidimensional & these dimensions are mentioned in this section. The first of these is 'educational impact' where the girls miss schools & thus their education & related opportunities in future also get affected. The next in line is the impact in their professional lives. The persistent pain & fatigue of endometriosis result in absenteeism & reduced productivity at work affecting progress in their careers. Social & emotional well being also gets affected as debilitating symptoms can strain relationships & lead to social isolation. The significant emotional disturbances are anxiety & depression.

The next step in Management^{1,7}

The management of endometriosis involves a combination of medical treatment & change/adjustment in life style. The steps of management can be achieved through the following interventions.

The first intervention is through dietary interventions. Here, anti inflammatory diets that are rich in fruits, vegetables & omega-3 fatty acids help reduce pain & inflammation. Through the intervention of exercise, regular activities one can ease pain & improve well being. Mentally one can be fit through mindfulness, meditation & therapy & thus can cope with chronic pain.

The strategy of navigating healthcare is achieved through a supportive health care that can make a significant difference in managing the condition.

Therapeutic approaches^{7,9,10,11,12}

The current therapeutic interventions for endometriosis focus on managing symptoms rather than curing the problem. These interventions are mentioned in the section below.

Pain is managed by Non Steroidal Anti Inflammatory Drugs (NSAID) are used to relieve pain. Hormonal therapies include birth control pills, Gonadotropin Releasing Hormone (GnRH) agonists, Progestin therapy that help regulate or stop menstrual cycles. Stronger Anti Oestrogens shows reduction in Bone Mineral Density (BMD) over a period of time & increases the risk of osteoporosis.

Laparoscopic surgery is done to remove endometrial lesions provide relief but recurrence is common. Alternative therapies like acupuncture, physical therapy along with dietary modifications

complements traditional treatments. Homoeopathy is one such intervention that is discussed in detail in this article.

Non Hormonal Therapies also play a significant role. Here, drugs targeting specific pathways involved in the development of endometriosis. These are mPGES-1 inhibitors which are in contention currently. Genetic & molecular profiling of patients may lead to personalized treatment plans that are proved to be effective & have less side effects as well. Homoeopathy fits into this individualized approach while having no side effects.

Public Policy^{1,7,28}

As mentioned above, endometriosis is multi-factorial & has multiple impacts. Thus, to deal with this issue, public policies need to be formed for this condition. The existing platform of Beti Bachao Beti Padhao can be used to augment awareness, promote early diagnosis & ensure access to comprehensive care for endometriosis sufferers. The policy document should incorporate funding for research, training of health care providers, establishment of specialized endometriosis treatment centres that provide holistic & multidisciplinary care & creation of a corpus fund for women health research.

Institutionalized approaches like establishment of national institute of women health would demonstrate commitment to women health.

Homoeopathic Perspective^{13to22}

Homoeopathy was discovered as a therapeutic system exactly a century later after endometriosis was explained way back in 1690. As there is tissue growth outside the uterus, the underlying miasm is 'Sycosis'. The homoeopath has to prescribe an 'Anti Sycotic' as the constitutional remedy.

The lead author has picked up the leading remedies in the Murphy's repertory. In acute endometriosis, there is one drug in capitals. The drug is 'Medorrhinum'. Similarly in chronic condition, there is one drug in capitals. The drug is 'Carcinosin'.

In severe dysmenorrhoea, the leading drugs given in Phatak's materia medica are 'Chamomilla', 'Sulphur', 'Viburnum Opulus'.

Another symptom is pain during sexual activity. The leading drugs in Phatak's Repertory are 'Hypericum', 'Petroleum', 'Xanthoxullum'. The symptom of diarrhea & painful bowel movement during periods can be dealt with 'Ammon Carb'.

The symptom of painful menses with heavy bleeding can be dealt with 'Cimicifuga'. Fatigue with heavy bleeding can be dealt with 'Carbo Animalis'.

Chronic pelvic pain can be dealt with drugs like 'Sabina', 'Viburnum Op', 'Kali Carb', 'Ova Tosta'. For depression issues, 'Kali phos', 'Calcarea Ars', 'Mustard', 'Zinc Phos' need to be prescribed.

The sterility issues can be dealt with 'Agnus Castus', 'Aurum Met', 'Borax', 'Merc Sol', 'Natum Carb', 'Phosphorus', 'Sepia'. Similarly, the appropriate bowel nosodes can also be prescribed. As it is congestion, 'Morgan Gartner' or the Morgan group can be prescribed. As the underlying miasm is sycotic, 'Sycotic Compound' can also be prescribed.

As the entire process is of inflammation inside the body, anti inflammatory medicines like 'Prednisone', 'Cortisone', 'Hydrocortisone'. 'Curcuma Longa' in potencies has to be prescribed.

The Bio Combinations of Biochemics & Indian Drugs in Mother Tinctures form that addresses the menstrual & uterus issues can be prescribed as adjuncts to the above-mentioned drugs.

Burden of the condition^{23,24,25,27}

42 million women in the reproductive age group suffer from endometriosis. The data tells us that 10% of people use Homoeopathy in India. That accounts to the fact that 4.2 million women can be benefited from the constraints of endometriosis through the use of Homoeopathy. Here, hypothetically it is presumed that out of 42 million, 10% use Homoeopathy currently. In an article in the Lancet, it is suggested that Universal Health Coverage (UHC) in India can be achieved through integration of the AYUSH systems & Homoeopathy is an active arm of the Ministry of AYUSH.

In India, the Unmet need percentage of the married women in the age group of 15-49 in India is 9.4%. After marriage, the 42 million women in the age group of 15-49 would have diagnosed themselves after knowing about their sterile condition. Assumption is that all these women would have practiced family planning till they got themselves diagnosed.

CONCLUSION²⁶

Approaches like prioritization of research, education, patient centered care will reduce the burden of endometriosis. Dialogue, research promotion, advocacy for better health care strategies will help us to achieve optimal care thus reducing the constraints of endometriosis.

Homoeopathy being cost effective, therapeutically effective & having no side effects fits into the bill effectively while being a part of the entire focus to manage the condition symptomatically, constitutionally, pathologically & physiologically.

Acknowledgement

The lead author thanks all the coauthors who are Homoeopaths for their contribution in the Homoeopathic section & all other coauthors for their contribution in the non Homoeopathic section. Professor Nayak was the teacher of the lead author during his BHMS course (1986 end-1993 beginning) in Bhubaneswar. Professor Shankar Das was the Ph.D. guide of the lead author & Dr. D.P. Singh was the teacher of the lead author at Tata Institute of Social Sciences, Mumbai during 2011-2018 & 1995-1997 respectively.

Declaration

The lead author declares that the Homoeopathic protocol given here is only suggestive in nature.

Funding

There was no funding received for the article.

Conflict of Interest

There is no conflict of interest regarding the article.

REFERENCES

1. Upadhyaya R S, Endometriosis Awareness: Need for a comprehensive health policy in India, TOI, Sunday Times of India, Lucknow Edition, Page 2, June 9, 2024.
2. Benagiano et al, the history of endometriosis, Gy Ob investigation, 2014, 78, 1-9.
3. Sampson J A, metastatic or embolic endometriosis due to the menstrual dissemination of endometrial tissue into the peritoneal cavity, Am J Path, 1927, 3, 93.
4. Eskenazi B et al, epidemiology of endometriosis, O& G clinics of North America, V24,i02, June 1997, page 235-258.
5. Parasar P et al, endometriosis, epidemiology, diagnosis & clinical management, Curr Obsy Gy Rep.2017, March, 6(1):34-41.
6. Smolarz b et al, Endometriosis, epidemiology, classification, pathogenesis, treatment & genetics (Review of literature) Int J Mol Sci, 2021,22,10554.
7. WHO, Key facts on endometriosis, 24 March, 2023, <https://www.who.int>
8. NLEM, GOI, PIB, 13th September 2022, <https://pib.gov.in>
1. Davidson, Principles & Practice of Medicine, ELBS 16th Edition, Longman Group (PE) Limited, ISBN- 0-443-04482-1. Davidson S, Principles & Practice of Medicine, Elsevier Limited, 24th Edition, ISBN: 978-0-7020-8347-1, 2023.
9. Tortora GJ: Sandra RJ, Principles of Anatomy & Physiology, 7th Edition, Harper Collins College Publishers, 1992, ISBN:0-06-046702.
10. Park JE, Park K, Text book of preventive & social medicine, 11th edition, 1987, M/s Banarasi Bhanot publishers, Jabalpur.
11. Singh M & Saini S, Conceptual Review of Preventive & Social Medicine, second edition 2019-2020, CBS publishers & distributors Pvt Ltd, ISBN-978-93-88725-84-2.
12. Murphy R, Homoeopathic Materia Medica, 3rd edition, B. Jain publishers (P) Ltd, 2017, ISBN-978-81-319-0859-4.
13. Murphy R, Homoeopathic Medical Repertory, 3rd edition, B. Jain publishers (p) Ltd, 2017, ISBN-978-81-319-0858-7.
14. Phatak SR, A Concise Repertory of Homoeopathic Medicines, B. Jain publishers (P) Ltd, 2002, Reprint edition, ISBN-81-7021-757-1.
15. Allen, H C, Key notes and characteristics with comparisons of some of the leading remedies of the Homoeopathic Materia Medica with Bowel Nosodes, Reprint edition, B. Jain publishers Pvt. Ltd, 1993, ISBN-81-7021-187-5, book code, B-2001.
16. Boericke William, New Manual of Homoeopathic Materia Medica with Repertory, reprint edition, 2008, B. Jain publishers private limited, New Delhi, pages- 362-366, ISBN- 978-81-319-0184-7.
17. Hobbouse Rosa Waugh, Life of Christian Samuel Hahnemann, B. Jain Publishers Private Ltd, Delhi, Reprint Edition 2001, ISBN- 81-7021-685-0.
18. Paterson J, Introduction to bowel Nosodes, Paper presented at International Homoeopathic League council, Lyons, France, 1949: as an addendum in H.C. Allen Key Notes, Reprint Edition, 1993.
19. Sarkar B K, Organon of Medicine by Hahnemann, M. Bhattacharya & Co. 1st edition 1955, 8th edition, 1984.
20. Phatak D S & Phatak S R, Repertory of the Bio-chemic medicines, B. Jain Publishers (p) Ltd, 2006 edition, 1st edition 1986. ISBN- 81-7021-723-7.
21. Boedler CR, applying Bach flower therapy to the healing profession of Homoeopathy, B. Jain publishers(p) Ltd, reprint edition 1998, 1st edition 1996. ISBN-81-7021-786-5.
22. IIPS and ICF.2021. NFHS 5, 2019-2021:India:volume 1, Mumbai:IIPS.
23. Chaturvedi S et al, India & its pluralistic health system- a new philosophy for universal health coverage, The Lancet Regional Health, South East Asia 2023;10:100136, December 2022.
24. Popularity of Homoeopathy in India, bjainpharma.com/blog/popularity-of-homoeopathy-in-india, 2023.
25. GOI, Ministry of AYUSH, NLEAM, 8 February, 2022.
26. IIPS and ICF.2021. NFHS 5, 2019-2021:India:volume 1, Mumbai:IIPS. BBBP: caring