



BENIGN PROSTATE HYPERTROPHY AND HOMOEOPATHIC MANAGEMENT – A REVIEW

Homeopathy

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ABSTRACT

Benign Prostatic Hyperplasia (BPH) is one of the most common pathological condition affecting the Prostate gland in the aging male. It is also associated with Lower Urinary Tract Symptoms (LUTS). BPH is commonly under treated in some patients with severe Bladder Outlet Obstruction (BOO) with no symptoms and at the same time over treated in patients with LUTS but no clinical BPH(1). Homoeopathic medicines are more efficient in treating Benign Prostatic Hypertrophy as they act on person as a whole and it also show's beneficial effect in treating the effects and associated symptoms of BPH.

KEYWORDS

Benign Prostate Hypertrophy, Epidemiology, Clinical features, Complications, Homoeopathy.

INTRODUCTION

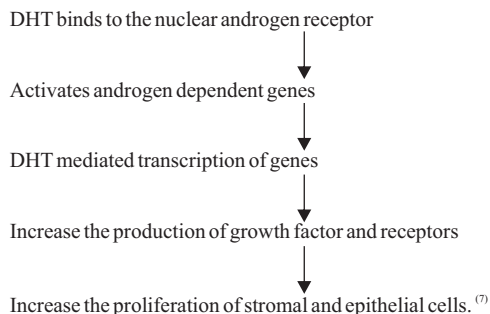
Benign Prostate Hypertrophy is the common clinical condition in ageing man, associated with Lower Urinary Tract Symptom (LUTS)⁽²⁾. Age factor is mostly after 50 years, usually between 60 to 70 years. Benign Prostatic Hypertrophy affect both glandular epithelium and connective tissue stroma⁽³⁾. It disturbs the sleep by frequent urination in every night. It may also lead the patient to lethal uremic poisoning. Later it may increases the risk of cancer also⁽⁴⁾. The earliest symptom is increased frequency of micturition particularly at night. Patient gets up in the middle of night multiple times to pass urine. This is due to inadequate emptying of the bladder and due to presence of sensitive prostatic mucous membrane of the intra vesicle enlargement of the prostate. Another symptom is urgency due to the fact that urine escape through the stretched vesicle sphincter into sensitive prostatic mucosa which causes reflex for intense desire to void⁽⁵⁾.

“Development of BPH includes three pathologic stages: Nodule formation, Diffuse enlargement of the transition zone and periurethral tissue and Enlargement of nodules”⁽⁶⁾.

Epidemiology

In India, the prevalence of BPH for the age group of 40-49 years is 25%, 50-59 years is 37%, 60-69 years is 37% and 70-79 years is 50%. Beyond the age of 50 years the prevalence of BPH varies from 20% to 62% in men. Globally, the estimated incidence case of BPH in 2019 was 11.26 million⁽⁸⁾.

Pathophysiology Of BPH



Clinical Features

Triad of BPH: Frequency, Urgency, Hesitancy.⁽⁹⁾

- Frequency of micturition: This is one of the earliest symptoms. Initially nocturnal but later on during day time as well due to ineffective emptying of bladder⁽⁹⁾.
- Acute retention of urine: this results in pain may be due to,
- When exposed to cold it causes internal congestion.
- Long trips without urination.
- Diuretics
- Alcoholic beverages

- Anticholinergic overflow.⁽¹⁰⁾
- Dysuria: The stream is often weak and tend to dribble towards the end of urination⁽¹¹⁾. The patient must wait and it is useless to strain.⁽⁴⁾
- Rarely Haematuria⁽⁴⁾.
- Some patients with BPH may present with signs of renal failure⁽¹¹⁾.

Secondary Effect of Prostatic Enlargement

- Urethral changes: Urethra get compressed elongated and get converted to longitudinal slit⁽⁹⁾.
- Bladder: Musculature of bladder hypertrophies to overcome obstruction of urine which is stagnant and may form stones occasionally, associated with haematuria in certain cases⁽⁴⁾.
- Ureter and kidney changes are: There is Pressure on ureteric orifice, gradually dilatation of ureter, Bilateral hydronephrosis, ascending infection, Nephritis which results in renal failure⁽⁴⁾.
- Sexual organs: In early stage of prostatic enlargement there is increased sexual desire (libido)⁽¹¹⁾. Impotence occurs in later stage⁽⁴⁾.

DIAGNOSIS

- Diagnosis is mainly made by means of Ultrasound and rectal examination⁽⁵⁾. Other test may include Urine analysis. Prostate Specific Antigen (PSA) test can be done , to rule out prostate cancer.⁽¹²⁾

Complications

- Acute Retention of urine occurs in men presenting with a history of bladder outflow obstruction⁽¹³⁾.
- Chronic Retention: Bladder is not completely emptied after passing urine. Which means the urine remains in the bladder always. This is called chronic (on going) retention. This may also cause recurring urine infections or incontinence because urine dribbles rather than passing large amounts each time.⁽⁴⁾
- Recurrent Urinary Tract Infection
- Uraemia
- Hydronephrosis
- Renal failure⁽⁴⁾

General Management

- Avoiding caffeinated and alcoholic beverages because it affects the muscle tone of the bladder which stimulate the kidney and produce urine, which leads to night time urination.⁽¹⁴⁾
- Emptying the bladder completely, may reduce the need for frequent urination.⁽¹⁴⁾
- Nervous and tense patients may urinate more frequently, this may be reduced exercising regularly and meditation.⁽¹⁴⁾
- Cold weather lead to urine retention and increased urgency⁽¹⁴⁾.

Therapeutic Management

BPH is a condition, which disturb the suffering person physically and psychologically. Homoeopathy being individualistic therapy considers the person suffering from disease as a whole and treats the sick based on the principle of Similia Similibus Curentur, so that the

person feels better in all planes. The most commonly indicated Homoeopathic medicines are as follows.

Aloe Socotrin

- Every time while passing urine feels as if thin stool would escape with it.⁽¹⁵⁾⁽¹⁶⁾⁽¹⁹⁾. Incontinence in aged people⁽¹⁷⁾⁽¹⁹⁾, bearing down sensation and enlarged prostate⁽²⁰⁾⁽¹⁸⁾. Scanty and high colored⁽¹⁷⁾. Urine hot⁽¹⁵⁾. Frequent urging to urinate and at night, or in afternoon⁽¹⁶⁾. Burning when urination⁽¹⁶⁾⁽¹⁵⁾. So urgent a desire that he can hardly retain urine⁽¹⁵⁾.

Baryta Carbonicum

- Irritation of bladder, greatest at night when in bed⁽¹⁵⁾. Constant urging and frequent emissions of urine; every other day⁽¹⁵⁾. Urging to make water, and frequent urination⁽¹⁵⁾⁽¹⁶⁾. On urination, burning in urethra⁽¹⁷⁾. Before urination: urgent desire to urinate⁽¹⁵⁾. During urination: burning in urethra⁽¹⁵⁾⁽¹⁶⁾⁽¹⁷⁾⁽¹⁹⁾. After urination: renewed straining, with dribbling of urine.⁽¹⁵⁾ Hypertrophied prostate⁽¹⁵⁾⁽¹⁷⁾⁽¹⁸⁾. Tenesmus of the bladder⁽¹⁶⁾. Involuntary emission of urine when walking⁽¹⁵⁾

Calcarea Carbonicum

- Tenesmus of the bladder⁽¹⁶⁾. Too frequent emission of urine, even in the night⁽¹⁶⁾. Deep colored urine, without sediment⁽¹⁶⁾. Burning in urethra⁽¹⁶⁾. Involuntary emission of urine when walking⁽¹⁵⁾

Cantharis Vesicatoria

- Urging to urinate from smallest quantity of urine in bladder⁽¹⁵⁾. Dribbling discharge, reddish, sometimes mixed with blood⁽¹⁵⁾⁽²¹⁾⁽²⁰⁾. Burning, when urinating⁽¹⁵⁾⁽¹⁶⁾. Retention of urine, causing pain⁽¹⁵⁾⁽¹⁶⁾⁽¹⁸⁾. Increased secretion of urine⁽¹⁶⁾. Urgent and ineffectual efforts to make water with painful emission; drop by drop⁽¹⁶⁾⁽¹⁷⁾. The patient will have the desire to urinate every two or three minutes⁽²¹⁾. Desire for stool while urinating⁽¹⁸⁾. Constant desire to urinate⁽¹⁷⁾

Chimaphila Umbellata

- Prostatic enlargement⁽¹⁷⁾. Urine is scanty with ropy, mucopurulent sedimentation⁽¹⁷⁾⁽¹⁵⁾. Burning and scalding during micturition and straining after words⁽¹⁷⁾. Burning in urethra⁽¹⁵⁾. Disease of prostate with waste of prostatic fluid⁽¹⁵⁾. Acute prostate with retention and dysuria⁽¹⁹⁾⁽¹⁶⁾. Urine cannot be passed without standing with feet apart and body inclined forward⁽¹⁹⁾

Conium Maculatum

- The prostatic gland swollen hard as stone, firmly fixed and much biting - itching or biting like flea - bites, a weight like a stone in perineum⁽¹⁵⁾. Prostate enlargement⁽¹⁷⁾. Much difficult in voiding⁽¹⁷⁾. It flows and stops again⁽¹⁷⁾. In old men Dribbling of urine present⁽¹⁷⁾. Urine cannot be retained⁽¹⁵⁾. Constant urging to urinate, with heat on urination⁽¹⁵⁾

Digitalis Purpurea

- Retention of urine⁽¹⁶⁾⁽¹⁸⁾. Urgent and almost futile inclination to make water, with discharge of hot, burning and very scanty urine⁽¹⁶⁾. Prostate enlarged⁽¹⁶⁾⁽¹⁸⁾. On making water, burning sensation and constriction in the urethra⁽¹⁶⁾. Involuntary emission of urine⁽¹⁶⁾. Swelled prostate⁽²⁰⁾. Dribbling urination⁽²⁰⁾⁽¹⁸⁾. Throbbing pain at neck of bladder, as if a straw was being thrust back and forth⁽¹⁷⁾. Full feeling after urination⁽¹⁷⁾

Ferrum Picricum

- Very useful remedy for senile hypertrophy of the prostate gland with frequent urination at night with full feeling and pressure in rectum⁽¹⁹⁾⁽¹⁷⁾. Retention of urine⁽¹⁹⁾⁽¹⁷⁾.

Hydrangea Arborescens

- Great thirst, with abdominal symptoms and enlarged prostate⁽¹⁷⁾⁽¹⁶⁾. There is burning in urethra and frequent desire⁽¹⁷⁾. Urine is very hard to start⁽¹⁷⁾

Petroselinium Sativum

- Sudden urging to urinate; frequent⁽¹⁷⁾. Sudden, irresistible desire to urinate⁽¹⁷⁾⁽¹⁶⁾. Dysuria⁽¹⁶⁾⁽¹⁹⁾. Enlarged prostate⁽¹⁶⁾. Frequent desire to urinate caused by crawling stitch behind navicular fossa⁽¹⁶⁾. He shiver dance round in the room because of painful urination.⁽¹⁹⁾ Intense itching in urethra due to enlarged prostate⁽¹⁴⁾⁽¹⁵⁾.

Populus Tremuloides

- Prostate enlarged⁽¹⁷⁾. At the end of urination there is pain behind the

pubis⁽¹⁷⁾. Painful scalding urine contains mucus and pus⁽¹⁷⁾. Prostatic affections⁽¹⁶⁾. Very copious discharge of urine⁽¹⁶⁾. Irritation of bladder and urethra⁽¹⁶⁾

Prunus Spinosa

- In effectual urge to urinate⁽¹⁷⁾. Tends to hurry while urination⁽¹⁷⁾. Sensation as if urine pass as far as glands and then returns and cause pain in urethra⁽¹⁷⁾⁽¹⁹⁾. Neuralgic dysuria⁽¹⁷⁾. Must press long time before urine appears⁽¹⁷⁾. Enlarged prostate in old man⁽¹⁶⁾. Frequent urination day and night⁽¹⁶⁾. When there is great accumulation of urine, it can be delayed.⁽¹⁶⁾. Cramp in bladder from pressure of flatus must double tap to urinate⁽¹⁹⁾

Pulsatilla Pratensis

- Acute prostatitis⁽¹⁷⁾. Pain and tenesmus in urination worst lying on back⁽¹⁷⁾⁽¹⁹⁾. Retention of urine with redness and heat in the region of bladder⁽¹⁶⁾. Enlarged prostate⁽¹⁶⁾. Retention of urine with great desire which is greatly aggravated on lying especially on back⁽²¹⁾. Urine frequent and scanty there is scarcely a drop collects in the bladder but it must be expelled⁽¹⁸⁾

Sabal Serrulata

- Homoeopathic catheter for retention of urine due to enlarged prostate⁽¹⁹⁾. Cystitis with prostatic hypertrophy⁽¹⁷⁾⁽¹⁶⁾. Difficulty in urination prostatic trouble⁽¹⁷⁾⁽¹⁶⁾. Discharge of prostatic fluid⁽¹⁷⁾⁽¹⁶⁾. Enlarged prostate⁽¹⁷⁾⁽¹⁶⁾⁽¹⁹⁾. Feeling as if bladder is too full⁽¹⁶⁾

Solidago Virgaurea

- Clear and offensive urine⁽¹⁷⁾. Some time makes the use of the catheter unnecessary.⁽¹⁷⁾ Prostate enlarged⁽¹⁶⁾. Obstructing flow of urine⁽¹⁶⁾⁽¹⁹⁾. Eyes red with enlarged prostate⁽¹⁹⁾

Sulphur

- Burning in urethra during micturition with enlarged prostate⁽¹⁷⁾. Parts sore once which it passes⁽¹⁷⁾. Frequent and sometimes very urgent wants to urinate⁽¹⁶⁾. Retention of urine⁽¹⁶⁾⁽¹⁹⁾. Painful ineffectual efforts to urinate⁽¹⁹⁾. It is indicated in broken-down constitution, in old inventors, in old philosophers who have been leading sedentary life, who suffers from enlarged prostate, burning in urethra during and after the flow of urine.⁽¹⁸⁾

Thuja Occidentalis

- Prostatic enlargement⁽¹⁷⁾. Pain and burning felt near neck of the bladder, with frequent micturition and urgent desire to urinate⁽¹⁷⁾. Prostatic affections from suppressed or badly treated gonorrhoea.⁽¹⁶⁾ Urine burns, dribbles, foul.⁽¹⁹⁾

CONCLUSION

BPH is the nonmalignant enlargement of the prostate gland and a common cause of voiding dysfunction in men. The primary goal of the treatment is not only to improve urinary flow and reduce symptoms, but also to avoid serious complications and improve the quality of life⁽²¹⁾. The complete recovery of illness needs prolonged medication. Homoeopathy the personalized medicine with ultra diluted potentized medicinal substances will be effective to bring complete re-mission of illness on prolonged medications.

REFERENCES

1. Foo KT (2019). "What is a disease? What is the disease clinical benign prostatic hyperplasia (BPH)?" World J Urol. Jul;37(7):1293-1296. doi: 10.1007/s00345-019-02691-0. Epub Feb 25. PMID: 30805683; PMCID: PMC6620380.
2. Sharma B, Mehra P, Oberai P, Roja V, Reddy GR, Arya DD, et al.(2018). "Homoeopathic treatment for lower urinary tract symptoms in men with benign prostatic hyperplasia: An open label randomized multicentric placebo-Controlled clinical trials". Indian Journal of research in homoeopathy. Volume -12:issue-3:page no-113:DOI-10.4103-ijrh.ijrh_36_18.
3. Shankar Uday (2018). "A Case report on benign prostatic hyperplasia with homeopathic remedies". Indian journal of research in homoeopathy. Volume -6:issue-3:page no:6.
4. Singh Kulwant,(2015). "Benign Hypertrophy of Prostate Gland"; Homoeopathy the friend of health; Volume 3 /issue 1; page no:3.
5. S.Das "A Manual On Clinical Surgery Including Special Investigation and Differential Diagnosis", 6th Edition. page no:431.
6. Bostwick DG (1996). "Pathology of Benign Prostatic Hyperplasia- Text book of Benign Prostatic Hyperplasia"; edition 2. page no:97.
7. Prostate Gland & seminal vesical "pathologyoutlines.com/topic/ prostatenodhpyer.html. benign prostatic hyperplasia" assessed on 20/09/2021.
8. Xu XF, Liu GX, Guo YS, et al. (2021). "Global, regional, and national incidence and year lived with disability for benign prostatic hyperplasia from 1990 to 2019". American Journal of Men's Health; Jul;15(4):15579883211036786.
9. ShenoyKR. "Manipal Manual of Surgery", 3rd Edition. CBI Publishers & Distributors, New Delhi; Page no: 788, 789.
10. Atri SC, "Hand Book of Surgery", SB Company, Page no:158
11. S. Das. "A Concise Textbook of Surgery", 10th Edition, B. Jain publishers Pvt Ltd, New Delhi. Page no:1279
12. Benign Prostatic Hyperplasia "healthlinkbc.ca/health-topics/hw30200" assessed on 23/09/2021.

13. Raftery AT. "Applied Basic Science for Basic Surgical Training", Page no: 572
14. 4 Tips for coping with an enlarged Prostate "health.harvard.edu/mens-health/4-tips-for-coping-with-an-enlarged-prostate". assessed on 27/09/2021.
15. Hering C(2003). "Herings Guiding Symptoms of Our Materia Medica", B. Jain Publishers Pvt Ltd, New Delhi: Volume-1 page no: 746, 140, 141. Volume-2: 467, 788. Volume-4: 724.
16. Clarke JH(1992). "A Dictionary of Practical Materia Medica". B. Jain Publishers Pvt, Ltd, New Delhi: volume 3. page no: 64, 473, 667, 918, 752, 881, 888, 929, 1048, 1221, 1432.
17. Boericke William (2002). "Pocket Manual of Homoeopathic Materia Medica & Repertory: Comprising of the Characteristic and Guiding Symptoms of All Remedies- Including Indian Drugs". B. Jain publishers Pvt Ltd, New Delhi: page no: 31, 193, 231, 253, 331, 503, 529, 532, 538, 562, 599, 644.
18. Kent JT (2009). "Lectures on Homoeopathic Materia Medica" B. Jain Publishers Pvt Ltd, New Delhi: page no: 501, 867, 868.
19. Phatak SR (2002). "Materia Medica of Homoeopathic Medicines", B. Jain Publishers Pvt Ltd, New Delhi: page no: 32, 208, 545, 575, 576, 585, 614, 652, 711.
20. Boger CM (2002). "A Synoptic Key to the Materia Medica": (a Treatise for Homoeopathic Students). IBPP Publishers. page no: 186
21. Nash EB (2003) Regional leaders, B. Jain Publishers Pvt Ltd, New Delhi. page no: 653, 848.
22. Ng M, Baradhi KM. Benign Prostatic Hyperplasia. [Updated 2021 Aug 11]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK558920/>