



## NASAL POLYP WITH HOMOEOPATHY

### Homeopathy

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### ABSTRACT

Nasal polyp is defined as pearly white, painless, prolapsed pedunculated parts of nasal mucosa. Their aetiology remains unclear, but they are known to have associations with allergy, asthma, infection, cystic fibrosis, and aspirin sensitivity. This article deals with an overview of nasal polyp, including its diagnosis, types, and etiological factors, along with Homoeopathic management of the same.

### KEYWORDS

nasal polyp, homoeopathy

### INTRODUCTION

Nasal polyp is defined as pearly white, painless, prolapsed pedunculated parts of nasal mucosa<sup>1</sup> that originate from any part of the nasal mucosa or paranasal sinuses (although most commonly from the ethmoid or middle meatus regions)<sup>2</sup>. Their aetiology remains unclear, but they are known to have associations with allergy, asthma, infection, cystic fibrosis, and aspirin sensitivity.<sup>3</sup> Patients with Nasal Polyposis present clinically with complaints of nasal obstruction, congestion, hyposmia, rhinorrhea, epistaxis, postnasal drip, headaches, and snoring<sup>4</sup>.

Nasal polyps are thought to be common in the general population at 4%, with at least a 2:1 male to female preponderance. Patients above the age of 20 are the patients who are most affected<sup>5</sup>. In India, more than 10 million cases of nasal polyp are diagnosed each year. Nasal polyposis has a negative impact on a patient's quality of life.<sup>5</sup>

**Etiology**<sup>6</sup> - Nasal polyps are classified into three groups: localized, diffuse, and systemic.

- Localized- Inflammatory processes neoplastic processes.
- Diffuse- chronic rhinosinusitis with nasal polyposis (CRSwNP) has multiple etiologies.
- Systemic- systemic nasal polyposis refers to patients suffering from systemic diseases with nasal manifestations.

**Common Site of Origin**<sup>7</sup>: Multiple nasal polypi arise from the lateral wall of nose, usually from the middle meatus. Common sites are uncinat process, bulla ethmoidalis, Ostia of sinuses, medial surface and edge of middle turbinate.

**Pathophysiology**<sup>6</sup> - Nasal polyp pathophysiology can be complex. As we age, the human body undergoes a series of anatomical and functional changes that result in thick mucus stasis and impeded removal of irritants and biologic offenders (viruses, organisms, and fungus), making patients more likely to develop polyp.

**Clinical Features**<sup>3</sup>- The main presenting symptom of NP is nasal obstruction which is constant but can vary depending on the site and size of the polyps. Sufferers will also frequently complain of watery rhinorrhea and postnasal drip. Anosmia or hyposmia with an ensuing alteration in taste are also characteristic symptoms of Nasal Polyps.

**Investigations**<sup>7</sup>- Nasal polyps can be easily clinically diagnosed by anterior and posterior rhinoscopy.

Investigations like PNS-X ray, X-ray lateral view-soft tissue nasopharynx, CT scan and histopathological examination can be done

to rule out other pathology.

### Homoeopathic Management

**AGRAPHIS NUTANS**- Nasal polyps obstruct the nostrils; enlarged and inflamed tonsils; throat deafness. Tendency to catch cold and free discharge from mucus membrane on every exposure to cold wind.

**ALLIUM CEPA**- Sneezing, especially when entering a warm room. Copious, watery and extremely acrid discharge. Feeling of a lump at root of nose. Hay-fever. Fluent coryza with headache, cough, and hoarseness Polypus.

**AMMONIUM MURITICUM**- Free acrid, hot watery discharge corroding the lip. Sneezing. Nose sore to touch; ulcerative pain in nostrils. Loss of smell. Obstructed, stuffy feeling; constant and unavailing efforts to blow it out. Itching.

**AMMONIUM CARBONICUM**- Discharge of sharp, burning water. Stoppage at night, with long-continued coryza. Cannot breathe through nose. Snuffles of children. Epistaxis after washing and after eating. Ozaena, blows bloody mucus from nose. Tip of nose congested.

**CADMIUM SULPH** -Ozaena. Tightness at root. Nose obstructed; polypus. Caries of nasal bones. Boils on nose. Nostrils ulcerated.

**HEPAR SULP**- Sore, ulcerated. Soreness of nostrils, with catarrhal troubles. Sneezes every time he goes into a cold, dry wind, with running from nose, later, thick, offensive discharge. Stopped up every time he goes out into cold air.

**KALI NITRICUM** -Sneezing. Swollen feeling; worse, right nostril. Point red and itching. Polypus.

**LEMNA MINOR**- Putrid smell; loss of smell. Crusts and mucopurulent discharge very abundant. Post-nasal dripping. Pain like a string from nostrils to ear. Reduces nasal obstruction when it is an oedematous condition. Dryness of naso-pharynx

**SANGUINARIA CAN**- Ozaena, with profuse, offensive yellowish discharges. Nasal polypi. Coryza, followed by diarrhoea. Chronic rhinitis; membrane dry and congested Ears.

**SANGUINARIA NITRICUM**- Feels obstructed. Profuse, watery mucus, with burning pain. Enlarged turbinates at beginning of hypertrophic process. Secretion scanty, tendency to dryness. Small crusts which bleed when removed. Post-nasal secretions adherent to

nasopharynx , dislodged with difficulty

SANGUINARIA NITRICUM- Feels obstructed. Profuse, watery mucus, with burning pain. Enlarged turbinates at beginning of hypertrophic process. Secretion scanty, tendency to dryness. Small crusts which bleed when removed.

STICTA PULMONARIA- Feeling of fullness at the root of the nose. Atrophic rhinitis. Dryness of nasal membrane. Constant need to blow the nose, but no discharge. Dry scabs, especially in evening and night. Hay-fever; incessant sneezing.

TEUCRIUM MARUM VERUM -Catarrhal condition of both anterior and posterior nostrils. Mucous polypus. Chronic catarrh ; discharge of large, irregular clinkers. Foul breath. Crawling in nostrils, with lachrymation and sneezing. Coryza, with stoppage of nostrils.

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