

Case Report

Integrative case study: Chronic maxillary sinusitis with deviated nasal septum managed with homeopathic approach

Archana Kabra^{1*}, Anand Suresh Kabra²¹Dept. of Organon of Medicine and Homoeopathic Philosophy, Government Homoeopathy College, Jalgaon, Maharashtra, India²Dept. of Homoeopathic Pharmacy, SSVH Homoeopathic Medical College, Hattat, Hingoli, Maharashtra, India

Abstract

This case study presents a detailed homeopathic management of a 40-year-old male suffering from chronic maxillary sinusitis with a deviated nasal septum (DNS). The patient exhibited recurring upper respiratory tract infections, severe anxiety regarding health, and multiple physical and psychological symptoms. After an extensive case analysis and repertorization, individualized homeopathic treatment led to significant improvement in his condition, including reduced frequency and intensity of infections, improved general health, and emotional stability.

Keywords: Maxillary sinusitis, DNS, Homeopathy, Case study, Chronic sinusitis, Repertorization, Bar-ars, Sulphuricum acidum

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1. Introduction

Chronic maxillary sinusitis with a deviated nasal septum (DNS) often presents complex challenges in treatment, especially when conventional approaches offer limited relief. Homeopathy provides an individualized, holistic approach considering not just the pathology but also the psychological and general physical characteristics of the patient.¹⁻⁴

2. Case Presentation

Patient: Mr. N P, 40 years old

Date of First Visit: 01/07/2024

1. Chief Complaints

- Recurrent maxillary sinusitis
- Throat congestion and dark redness with difficulty swallowing
- Profuse, sticky expectoration
- Nasal blockage and disturbed sleep due to headache
- Generalized weakness, anxiety, and body pain
- Health fear with obsessive dietary control

2. Modalities:

- Aggravation: winter, rainy season, night, dust, cold air
 - Amelioration: expectoration, nebulization, warm water, summer
- ### 3. Physical Generals:
- Lean, thin individual (weight: ~55.5 kg)
 - Appetite: Normal (4 chapatis/meal)
 - Thirst: Low
 - Craving: Pulses
 - Perspiration: Scanty
 - Sleep: Sound with dreams of animals, dog bites, and snakes
 - Thermal state: Chilly (C2H)
- ### 4. Mental Generals:
- Health anxiety with compulsive diet control
 - History of consulting 30–40 doctors without completing treatments
 - Professional stress: Senior Executive in Dispatch Department
 - Subconscious fears: loss of mobile phone, errors in money transfers

*Corresponding author: Archana Kabra

Email: archana12185@gmail.com

- e. Personality: extroverted, expressive, cleanliness-oriented, fears dogs, reads Marathi novels
- f. Fear of Disease esp. Rabies from dog contact
5. Miasmatic Background:
 - a. Personal history: Tuberculosis (2005), Kidney stones
 - b. Family history: Father had kidney stones
6. Diagnosis:
 - a. Chronic Maxillary Sinusitis
 - b. Deviated Nasal Septum (DNS)
7. Miasm:
 - a. Predominantly sycotic with tubercular traits
8. Totality of Symptoms:
 - a. Health-related anxiety with treatment avoidance
 - b. Hurried behavior and speech
 - c. Repetitive dreams of animal attacks
 - d. Weakness despite good appetite
 - e. Obsession with cleanliness
 - f. Hasty talking and expressive nature
 - g. Thermally chilly
 - h. Thirstlessness
9. Prescription:
 - a. Initial Remedy: Bar-ars 200 (Baryta carbonica + Arsenicum album in synthetic form)
 - b. Justification: Combines health anxiety and childish behaviors
 - c. Repeated as needed based on follow-ups
 - d. Supportive: Saccharum Lactis (SL) for 1 month after each dose.

Repertorization Sheet (Key Rubrics Selected):

Rubric	Source (e.g., Kent, Synthesis)	Remedies Considered
MIND - Anxiety - health, about	Kent's Repertory	Ars, Sul-ac, Med
MIND - Laughing - talking, while	Kent's Repertory	Bar-c, Sulph
MIND - Dreams - Dogs - biting	Synthesis	Lyssin, Med, Sul-ac
GENERALITIES - Weakness - eating, after	Kent's Repertory	Sul-ac, Ars
MIND - Cleanliness - fastidious	Kent's Repertory	Ars, Sulph, Bar-c
MIND - Hurry - speech	Kent's Repertory	Sulph-ac, Bar-c
THERMAL - Chilly patient	Clinical observation	Ars, Sulph-ac
MIND - Fear - dogs	Kent's Repertory	Lyssin, Med

1. Final Remedies Chosen
 - a. Initial: Bar-ars 200 (Synthetic of Baryta carbonica and Arsenicum album)
2. Follow-Up Summary:
 - a. 16/09/2024 – Initial improvement in weakness and anxiety. Some digestive issues persisted. Repeat Bar-ars 200.
 - b. Next Month – Reduced expectoration and throat pain. Some relapse triggered by food (cow's milk, oily foods). Repeat Bar-ars 20
 - c. Subsequent Attacks – Episodes decreased in intensity. Reviewed case and repertorized. New remedy selected: Sulphuricum acidum 200 based on acid features, anxiety, and speech characteristics. Resulted in marked improvement.
 - d. Further Follow-Up – 95% improvement in all symptoms. No major attacks. Continued SL. Notable improvement in appetite, digestion, and energy levels. Minor acidity triggered by specific foods (e.g., pulses).

2.1. Latest update

Stable health. Morning sneezing only. No major attacks or fever. Persistent psychological aversion to dogs. Health stable. Other psychological fears reduced. Continued SL.

3. Discussion

This case illustrates the significance of individualized homeopathic prescription through totality of symptoms and understanding the psyche of the patient. Use of a synthetic remedy (Bar-ars) helped bridge psychological and physical dimensions, while Sulphuricum acidum addressed deeper constitutional imbalances. The chronic nature of the case and patient's long history of conventional and fragmented treatments emphasize the value of integrative, sustained care.⁵⁻⁷

This case also illustrates how chronic respiratory conditions like sinusitis can be influenced by psychological factors. An individualized prescription, rooted in a full understanding of the patient's constitution, brought about meaningful and sustainable improvement. The remedy selection evolved based on the patient's dynamic symptom picture.⁸

4. Conclusion

Homeopathic treatment based on holistic principles proved effective in managing a chronic case of sinusitis with DNS. The patient was able to reduce reliance on allopathic treatments and experienced improved quality of life. This highlights the potential of individualized homeopathy to provide long-term relief in psychosomatic and chronic inflammatory conditions.

5. Patient Consent

Informed written consent was obtained from the patient for the publication of this case report.

6. Conflict of Interest

None.

7. Source of Funding

None.

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