

Dementia and Homoeopathy

ABSTRACT: In this paper the ideology of Dementia in modern science has been explained with symptoms and differential diagnosis in brief. At the same time, the author also gives the ideology of Dementia in homoeopathy, how to diagnose and the mode of treatment. He gives the list of useful, commonly used homoeopathic medicines with their guiding symptoms.

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CHARACTERISTIC FEATURES OF DEMENTIA

It is a chronic organic mental disorder characterized by:

1. Impairment of intellectual functions.
 2. Impairment of memory (predominantly of recent memory, especially in early stages).
 3. Deterioration of personality with lack of personal care.
 4. Impairment of all functions occurring globally, causing interference with day-to-day activities and interpersonal relationships.
 5. There is impairment of judgment and impulse control and impairment of abstract thinking.
 6. There is no impairment of consciousness.
- The course of dementia can be progressive, stationary or reversible.

ADDITIONAL FEATURES MAY INCLUDE

1. Emotional lability (marked variation in emotional expression).
2. Catastrophic reaction (when confronted with an assignment which is beyond the residual intellectual capacity and patient may go into a sudden rage)
3. Thought abnormalities, eg delusions, preservation.
4. Urinary and faecal incontinence may develop in late stages.
5. Disorientation in time, place with person may develop in late stages.

6. Neurological signs may not be present, depending on the underlying cause.

DIAGNOSIS

Like delirium, the diagnosis of dementia is clinical. Although ancillary laboratory investigations may help in elucidating the etiology, they do not help in diagnosing dementia per se.

According to the ICD-10 (CDDG), the following features are required for the diagnosis:

1. Evidence of decline in both memory and thinking, sufficient enough to impair personal activities of daily living.
2. Memory impairment typically affects registration, storage and retrieval of new information (recent memory), but previously learned material (remote memory) may also be lost, particularly in later stages.
3. Thinking is impaired, the flow of ideas reduced and the reasoning capacity impaired.
4. Presence of clear consciousness (consciousness can be impaired if delirium is present).
5. Duration of at least 6 months.

DIFFERENTIAL DIAGNOSIS OF DEMENTIA

1. **NORMAL AGING PROCESS:** Although impairment of memory and intellect are common in the old, they do not justify a diagnosis of dementia. Dementia is diagnosed only when there is demonstrable evidence of memory and other intellectual function impairment which is suffi-

ciently severe to interfere with social or occupational functioning. The normal memory impairment in old age is called as BENIGN SENESCENT FORGETFULNESS.

2. **DELIRIUM:** Syndromes of delirium and dementia may overlap each other. Eg in case of delirium the onset and course is acute which may recover within one week to one month. Whereas in dementia it is protracted and long lasting. Dementia usually shows normal clinical features and is disturbed only in later stage. In delirium memory retention is temporary whereas in case of dementia, loss of memory is permanent. In delirium perception having visual illusions and hallucination is very common whereas in dementia it is not prominent.
3. **DEPRESSIVE PSEUDO DEMENTIA:** Clinically, depression in elderly patient may be present. It is called depressive pseudo dementia. Identification of depression is very important as it is very often treatable. These patients themselves complain of memory impairment, difficulty in sustaining attention and concentration and reduced intellectual capacity. In contrast, a patient of dementia does not complain of these disturbances. In fact when confronted with the evidence of memory impairment he often confabulates.

As depression may superimpose on dementia, it is at times necessary to give an individual symptomatic trial for the selection of antidepressant remedies.

In modern ideology of Medical science four CLINICAL TYPES OF DEMENTIA are found

1. **ALZHEIMER'S DEMENTIA (DEMENTIA OF ALZHEIMER'S TYPE-DAT):** This is the commonest cause of dementia, seen in about 70% of all cases. It is more commonly seen in women. Earlier it was differentiated into presenile form and senile form. Now it is believed that these two forms represent the same disease clinically and pathologically. There is some evidence to suggest that Alzheimer's disease may have a genetic basis.
2. **MULTI-INFRACT DEMENTIA (MID):** MID is probably the second commonest cause of dementia seen

in 10-15% of all cases. It is also one of the important treatable causes of dementia. Focal neurological signs are common. Insight into the illness is usually present and emotional lability is very common. EEG (showing focal area of slowing) and CT scan brain (showing multiple infarcts) help in diagnosis.

3. **HYPOTHYROID DEMENTIA:** One of the most treatable and reversible cause of dementia. Hypothyroidism should be suspected in every patient of dementia.

4. **AIDS DEMENTIA COMPLEX:** Most of the patient suffer from AIDS or syphilis. They exhibit a triad of cognitive, behavioral and motoric deficits of subcortical dementia types known as AIDS-Dementia complex (ADC).

HOMOEOPATHIC OUTLOOK ON DEMENTIA

Homoeopathy gives more importance to mental symptoms, irrespective of the diagnosis. In explanation of any remedy the importance of mental symptoms must be given. Hence when all system symptom is based on mind or mental facts then no doubt that Homoeopathy is the best system for treating any psychiatric patient.

In case of Dementia, the homoeopathic treatment has showed its own success. The ideology, cause and diagnosis towards dementia in Homoeopathy is similar to the modern science. Only difference is that every case of dementia is treated by individual diagnosis.

Homoeopathy believes that every dementia patient has some past history of the disease. Eg Past history, miasmatic factors, ie Psora, Syphilis and Sycosis. Past stress and strain, severe attacks, any chronic disease, genetic defects of the patient's mind. Acute anxiety, delirium, and depression may be the cause of the disease.

In the diagnosis of the case the following should be noted:

1. The past and family history of the patient.
2. Causative History: eq shock, anxiety, illusions, delusion, epilepsy or brain injury.
3. Patient's liking or disliking towards food, drinks and environment.
4. Patient's habits and nature in daily life.

5. Common symptoms of the patient either physical or mental.
6. Modalities ie aggravation and amelioration of the symptoms.
7. Sleep and dreams (spatial, phobias and irritable)

SELECTION OF THE REMEDY

No doubt the selection of remedies are symptomatic but some selected remedies more specifically indicated. The founder of Homoeopathy, Dr Hahnemann was a real scientist and always advised his disciple that science cannot be bound, it always develops by time and experience. Hence do not be conservative and fixed a main drawback of a physician. Our main aim and object is to restore our patient in shortest, painless and maximum relief. We should also consider the laboratory findings in our selection list. If we do this then we are the real followers of Homoeopathy.

In a thorough study of the remedies for dementia in Homoeopathy, a brief list of remedies are given as follows:-

Agaricus-muscarius—AMANTIA: Cannot find proper words, uses wrong words after exertion. Loquacity, aversion to work. Cannot exert with delirium tremens, tries to get out from bed. Convulsive motion of facial and cervical muscle. Vertigo < walking in open air.

Anacardium: General nervous debility, loss of memory, difficult to recollect proper words in time. All symptoms develop due to shock syndrome or loss of success or property. Imagines voices from far away, laughs over useless condition. Unsocial, hypochondriac, with haemorrhoids and constipation. Irritable - desire to curse and swear.

Belladonna: Absent-minded and forgetful, imagines ghosts, hideous forms, black dogs, various insects. Afraid of imaginary things and monsters, desire to escape. Quarrelsome, violent delirium, broke into fits of laughter then gnashing of teeth. Very excitable mood, easily thought to trouble, fretfulness, wrong seems right to him. Is vexed with himself.

Cannabis-indica: Loss of consciousness and fear. Inability to recall any thought or event. Very ab-

sent minded. Delirium tremens, trembling, hallucination, tendency to become furious, noise, unquenchable thirst. Thinking about the super-power present in his body or around himself.

Hyoscyamus-niger: Stupor, suspicious, unconsciousness, does not reply to question, does not recognize anyone, inability to think; thought cannot be directed or controlled. Stupid on illusion of imagination and senses. Delirium without apparent heart, extremities are cold whereas body is hot. Restlessness, jumps out of bed right away. Fright followed by convulsion.

Lilium-trigrinum: Ideas not clear. Depression with dullness of spirit. Fear of some organic and incurable disease. Disposed to curse, strike, think for obscene things. Uterine irritation, abortion. Aimless hurried manner, must keep busy. Fear of insanity.

Phosphoric-acid: Unconsciousness, weak memory, delirium quiet with great stupefaction. Dullness of head, homesickness with incline to weep. Ailments from grief, sorrow, homesickness and disappointed love.

Picric-acid: Brain-fag and sexual excitement, lack of will-power. Dementia with prostration, declined to weakness.

Veratrum-album: Stupid from excess in alcoholic drinks, never speaks truth, does not know what to speak. Thinks himself distinguished. Delusions of impending misfortune. Delirium heavy, soporous sleep, restless, thirsty, cramps in legs. Talks much about religious things with praying. Anxiety as if committed evil.

This brief description may guide a Homoeopathic physician for the treatment of dementia.

FEW CASE RECORDS OF DEMENTIA TREATED WITH HOMOEOPATHY.

CASE 1: Mr A K Mishra, 40 yrs came to his doctor on March 2000 having a COMPLAINT of Acute Pseudo Depressive dementia.

The symptoms were:

- (a) Partial unconsciousness with fear of snake dream.
- (b) Very absent minded.
- (c) Thinking of power of lord Shiva along with his

snake had come in his body disturbing in his resting period.

(d) General nervous debility, inability to recollect proper word during speech and also making mistake in office work for which he preyed for apology. (He was a bank employee). The past history investigation showed that once he had gone to village and on doing morning ritual he had seen a dead snake in the field which shocked him. After this incident the patient became ill. In diagnosis three major medicines were found ie *Cannabis-indica* for partial unconsciousness, delusion of fake idea with hallucination of snake and super power present in his body. *Anacardium* for nervous debility, loss of memory in time and tendency of irritable desire to curse and swear. *Lac-caninum* for acute fear of snake during resting period. *Cannabis-indica* 1M one dose was given. The result showed better prognosis. Then *Anacardium* 200 once daily had been given. Due to slow progress with presence of fear of snake in rest and dream *Lac-caninum* 6 TDS in four hours interval was re-

peated. The physician found that the response was better. So the same treatment was continued for one year with good result.

CASE 2: Mr N 28 yrs had been suffering with depression, insomnia and acute dementia for last one year. His old history of disease revealed anxiety for doing any job properly and always thinks that some super power is preventing him of doing hard work. The patient was very suspicious and always thought of evil things in his dreams which made his insomnophilic. On thorough examination the medicines came up (according to their symptoms) were *Cannabis-indica*, *Anacardium*, and *Conium-mac* etc. On his loquacious and suspenseful nature *Can-ind* 1M was prescribe fortnightly, then *Anacardium* 200 daily in morning for his depressive mood and *Conium* 200 daily in night for insomnia were prescribed. After a month long treatment the result was found very well. The treatment was continued further and after six months the patient regained its normalcy.

After Shocks of Earthquake

ABSTRACT: *One of my most satisfactory result, better with only two doses of constitutional medicine. This case provides proof that the right constitutional medicine can revert back degenerative problems and make the patient live life with happiness and satisfaction.*

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A 72 years old gentleman was suffering from Alzheimer's disease. The CT Scan of brain suggested mild cerebral atrophy.

CHIEF COMPLAINT

- Weakness memory since 2006
- Confusion, tremors in hand, < closed place, < crowded place, < sitting long in unknown place.
- Ineffectual belching every 15 minutes
- No appetite, has lost 5-6 kgs in one year

➤ Burning chest, < during anxiety, > sips of water

DESIRES: Sweets³. BOWELS: 2/day, < with anxiety.

SLEEP: Sound

LIFE SPACE

Very hyperactive child. Has always been very fastidious person, very honest. He was in LIC at a very good post. Very intelligent but impulsive. Father expired when patient was at the tender age of 4 years, leaving a financial crisis at home. Being

eldest of all siblings, he had to start earning at early age.

50 years back patient had an intercaste marriage. He loves singing, photography and writing.

On the date of earthquake in Gujarat ie, 26th January 2001, he was affected badly and went into shock, and depression with after-effects of fear of crowd, and shocking news, closed places like theatre, darkness³. He forgets names³, and day to day activities; he is absent mindedness, does not like to speak, sits blank.

RUBRICS TAKEN (ROBIN MURPHY)

- 1045 Fear crowds
- 1044 Fear closed place
- 1046 Diarrhoea, < fear from
- 1050 Fear public appearing
- 1000 Anxiety, expected of him, when anything is
- 1081 Memory weak for words
- 1092 Restlessness, anxious when walks rapidly
- 0546 Desires sweet

REMEDY

Arg-nit 17/9, Ars 7/3, Lyco 14/6, Nat-m 7/3

TREATMENT

DATE	SYMPTOMS	TREATMENT
13/07/07	WT 57 KGS.	<i>Arg-n 1M STAT Nat-p 6X 2-2-2</i>
20/7/07	Sense of happiness.	SL
3/8/07	No irritation. Immense desire to write. But gets confused and develops anxiety. Sleep sound. Appetite good.	SL
15/8/07	Acidity, < eating fermented food. Belching. Memory improving; started listening to music. Wants to start studying.	<i>Carb-veg 30 BD.</i>
16/11/07	Blank, gets absorbed in thoughts. Absent minded. Mood good, cheerful. Speaks with everybody.	<i>Arg-n 1M STAT</i>
23/1/07	Wt: 60 Kgs. Attended a marriage, was very comfortable and spoke to everybody without confusion and anxiety. He enjoyed a lot. Everyone was happily surprised. Started remembering his past – school, college, marriage and speaks about them with clarity. Has started enjoying life.	SL

In George Washington's days, there were no cameras.

One's image was either sculpted or painted.

Some paintings of George Washington showed him standing behind a desk with one arm behind his back while others showed both legs and both arms.

Prices charged by painters were not based on how many people were to be painted, but by how many limbs were to be painted.

Arms and legs are "limbs," therefore painting them would cost the buyer more.

Hence the expression, "Okay, but it'll cost you an arm and a leg."