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Management of epilepsy with individualised homoeopathic medicine Lachesis in millesimal potency: An evidence-based case report

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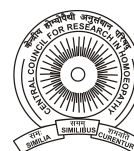
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Abstract

Introduction: Epilepsy can be defined as a seizure disorder due to a change in electric activity in the brain which comprises a variety of disorders due to underlying brain dysfunction which increases the pre-disposition for seizures. It is a serious public health problem that affects the normal activity and quality of life of an individual. Homoeopathic medicines are successfully used for the treatment of epilepsy. Hence, research is needed with documentation of well-defined case reports. Here we present a case of epilepsy which was cured by individualised homoeopathic medicine after repertorisation.

Case summary: A 52-year-old male presented with complaints of epileptic attack with unconsciousness since three years. *Lachesis* was the drug chosen for treatment in LM potency for 9 months and no epileptic attack was experienced after that. The patient was cured after the treatment, confirmed by EEG reports before and after the treatment. The causal attribution of homoeopathic medicine was assessed through Modified Naranjo Criteria for Homoeopathy (MONARCH) which scored 8 suggesting a definite causal relationship between the medicine and the outcome. This report indicates that a correctly chosen homoeopathic medicine can be helpful in the treatment of epilepsy.

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Management of epilepsy with individualised homoeopathic medicine *Lachesis* in millesimal potency: An evidence-based case report

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Abstract

Introduction: Epilepsy can be defined as a seizure disorder due to a change in electric activity in the brain which comprises a variety of disorders due to underlying brain dysfunction which increases the pre-disposition for seizures. It is a serious public health problem that affects the normal activity and quality of life of an individual. Homoeopathic medicines are successfully used for the treatment of epilepsy. Hence, research is needed with documentation of well-defined case reports. Here we present a case of epilepsy which was cured by individualised homoeopathic medicine after repertorisation. **Case summary:** A 52-year-old male presented with complaints of epileptic attack with unconsciousness since three years. *Lachesis* was the drug chosen for treatment in LM potency for 9 months and no epileptic attack was experienced after that. The patient was cured after the treatment, confirmed by EEG reports before and after the treatment. The causal attribution of homoeopathic medicine was assessed through Modified Naranjo Criteria for Homoeopathy (MONARCH) which scored 8 suggesting a definite causal relationship between the medicine and the outcome. This report indicates that a correctly chosen homoeopathic medicine can be helpful in the treatment of epilepsy.

Keywords: Epilepsy, Homoeopathic medicines, *Lachesis*, Millesimal potency, Modified naranjo criteria, Repertorisation.

INTRODUCTION

Epilepsy is a chronic neurological disease characterised by recurrent epileptic seizures that are a direct result of a change in electric activity in the brain, which comprises a variety of disorders with many different causes that have an underlying brain dysfunction that increases the pre-disposition for seizures.^[1] An epileptic seizure can be defined as the occurrence of signs and/or symptoms due to abnormal, excessive or asynchronous neuronal activity in the brain. The lifetime risk of an isolated seizure is about 5%, although incidence is highest at the extremes. Epilepsy is the tendency to have unprovoked seizures.^[2] Epileptic seizures may also occur after an acute central nervous system (CNS) affection through structural, systemic, toxic or metabolic disorders.^[3]

According to the International League Against Epilepsy (ILAE), epilepsy is defined by any of the following conditions (1) at least two unprovoked (or reflex) seizures occurring >24 h apart; (2) one unprovoked (or reflex) seizure and a probability of further

seizures similar to the general recurrence risk (at least 60% after 2 unprovoked seizures, occurring over the next 10 years; and (3) diagnosis of an epilepsy syndrome.^[4] In a meta-analysis, the pooled incidence rate of epilepsy was 61.4 per 100,000 persons per year. It is slightly higher in men than in women, it is also higher in the youngest and oldest age groups.^[5] The incidence was higher in low/middle-income countries than in high-income countries. In children, the incidence of epilepsy is highest in the first year of life and declines toward adult levels by the end of ten years of age.^[6] There are several known risk factors for epilepsy in adults including head trauma, CNS infections, strokes, both embolic and haemorrhagic, CNS

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malignancies, Alzheimer's disease and other neurodegenerative conditions.^[1] Genetic factors play a vital role in the development of epilepsy.^[7] Some patients with epilepsy may have seizures intermittently and, depending on the underlying cause, many patients are completely normal for months or even years between seizures. This implies there are important provocative or precipitating factors that induce seizures in patients with epilepsy. Similarly, precipitating factors are responsible for causing a single seizure in someone without epilepsy.^[8]

Seizure activity is usually apparent on EEG as spike and wave discharges.^[2] The clinical history and neurological examination help in the diagnosis of epilepsy, whereas laboratory evaluations serve as adjunctive tests. A routine EEG can detect abnormal electrical activity, such as focal spikes and waves or diffuse bilateral spike waves, which preferably include wakefulness, drowsiness and sleep because the prevalence of epileptiform abnormalities varies in these different states of consciousness. Sometimes EEG can be repeatedly normal in someone with epilepsy. Computed tomography and magnetic resonance imaging scans are important adjuncts to detect CNS structural lesions.^[9]

Medication-related side effects that are commonly experienced during the first few weeks of treatment include fatigue, upset stomach, dizziness and blurred vision. From a psychological standpoint, a person with epilepsy may experience difficulties with thinking, remembering, focusing, paying attention and choosing the appropriate sentence structure. Social isolation, dependency, poor marriage rates, unemployment and a lower standard of living are all common social experiences for those who suffer from epilepsy. It is linked to financial difficulties in taking anti-epileptic medicines.^[10,11]

Thus, due to the many side effects of conventional system of medicines, many patients seek alternative systems of treatment. Epilepsy can be treated by using different homoeopathic medicines which is the most preferred form of treatment. Homoeopathy addresses both the physical and mental symptoms of the disease and the underlying factors triggering it.

The clinical evidence on the role of Homoeopathy in managing epilepsy is scarce.^[12-14] Some pre-clinical studies suggest a potential positive role of homoeopathic medicines in managing epilepsy. A pre-clinical study concluded that *Nux vomica* is effective in the management of epilepsy.^[15] Another study showed that *Cicuta virosa* reduced the duration of the tonic-clonic phase against the pentylentrazole-induced seizure.^[16]

In Homoeopathy, there is no specific remedy for a disease condition. Individualised homoeopathic medicine is selected considering the patient as a whole based on the physical, mental, emotional and social background, which provides a gentle cure to the patient. The present case is reported according to the HOM-CASE-CARE guidelines.^[17] This case report shows the usefulness of individualised homoeopathic medicine in the treatment of epilepsy.

PATIENT INFORMATION

A male of 52 years visited the OPD of Dr. A.C. Homoeopathic Medical College and Hospital, Bhubaneswar on 8th August 2021 with complaints of epileptic attacks with unconsciousness for the past three years. These attacks occurred at night during sleep. These were followed by weakness and tiredness.

He had undergone anti-epileptic medications under conventional treatment since three years. Despite medication, he had attacks every 2–3 days since two months which left him tired and with a weak memory. He was worried about his livelihood due to his health condition. He then decided to take homoeopathic medicine. Usually, attacks come during night after sleeping, especially after 2 am. The seizure generally began in head and then spread to whole body with convulsions and stiffness of limbs. The patient remained unconscious for 10–15 minutes and also had accompanying symptoms, such as a frothy mouth, clenching of teeth and occasional involuntary urination. After regaining consciousness, the patient felt severe weakness and loss of memory for 1–2 days. He also reported developing an epileptic attack on the nights when he had experienced too much anger or vindictive feelings during the day. This usually happened 2–3 times a week.

He had no other significant past medical history related to epilepsy. His mother had hypertension and father suffered from arthritis.

Clinical findings

The patient had an average built with a weight of 68 kg. No abnormality was detected during the general and systemic examination. His blood pressure was 134/88 mm of Hg. There were no signs of anaemia, jaundice, cyanosis or oedema.

Mental generals

Before the onset of his condition, he was a caring and affectionate family man. However, over time, he became increasingly irritable, vindictive and malicious, occasionally using abusive language. He was married and had two children. He had endured years of severe mental stress due to financial losses. As his struggles deepened, his frustration manifested in verbal and physical aggression towards his wife and children. His business earnings were insufficient to support the family and as losses mounted, they became financially dependent on his son's income, further intensifying his distress and grief. He was loquacious, more so in the evening.

Physical generals

He was a hot patient, and had a desire for sweets and cold food. His thirst was less as he drank 1 or 1½ litres of water in a day. His stool and urine were normal. He had a disturbed sleep during the night due to anxiety. His perspiration was normal.

Diagnostic assessment

This was a pre-diagnosed case of epilepsy. The condition was further confirmed based on the clinical history of the patient, symptomatology on ILAE criteria and EEG report.^[3] The characteristics of convulsion with jerky involuntary movement

Table 2: Assessment of the case according to modified naranjo criteria for Homoeopathy

S. No.	Domains	Response	Score
1	Was there an improvement in the main symptom or condition for which the homoeopathic medicine was prescribed?	Yes	+2
2	Did the clinical improvement occur within a plausible time frame relative to the medicine intake?	Yes	+1
3	Was there a homeopathic aggravation of symptoms?	No	0
4	Did the effect encompass more than the main symptom or condition (were other symptoms not related to the main presenting complaint, ultimately improved or changed)?	Yes	+1
5	Did overall well-being improve? (Suggest using a validated scale or mention changes in physical, emotional and behavioural elements).	Yes	+1
6	(A) Direction of cure: Did some symptoms improve in the opposite order of the development of the symptoms of the disease?	Not sure	0
	(B) Direction of cure: (Did at least one of the following aspects apply to the order of improvement of symptoms) -from organs of more importance to those of less importance? -from deeper to more superficial aspects of the individual? -from the top downward?	Not sure	0
7	Did 'old symptoms' (defined as non-seasonal and non-cyclical symptoms that were previously thought to have resolved) reappear temporarily during the course of improvement.	No	0
8	Are there alternative causes (other than the medicine) that – with a high probability – could have produced the improvement? (consider the known course of disease, other forms of treatment and other clinically relevant interventions)	No	+1
9	Was the health improvement confirmed by any objective evidence? (e.g. investigations, clinical observation, etc)	Yes	+2
10	Did repeat dosing, if conducted, create similar clinical improvement?	N/A	0
	Total		+8

Therapeutic intervention

The repertorisation was done with the help of HOMPAT Classic software, Complete Repertory.^[18] The repertorial chart is shown in Figure 1. *Lachesis*, which obtained maximum marks and covered maximum rubrics, was found to be strongly indicated through the references in Materia Medica. *Lachesis* was given in millesimal potency 0/1–0/4 in 30 ml (8 doses) each, once daily morning for one month. The patient stopped all allopathic medicines after homoeopathic treatment was started.

Sycotic dominance in the family history was also noticed in this case. However, this case was predominately of psoric miasm.^[19,20]

Follow-up and outcomes

The patient was followed up every month, during which a gradual improvement was observed. The detailed follow-up is mentioned in Table 1. During his second visit on 9th September 2021, he informed that epileptic attacks still occurred twice past week but with less intensity and duration. The weakness after every attack was also less. He was prescribed *Lachesis* 0/5 and 0/6, 30 mL each in 8 doses every alternate morning. On the next visit, dated 26 October, 2021, the intensity and frequency of the attack further decreased. Furthermore, no epileptic attacks have been reported in the past 10 months. The EEG report dated 28 October, 2022, showed a normal awake EEG recording. The EEG was conducted based on the neurologist's advice and was verified by him. Since he had been attack-free for 10 months, the neurologist recommended performing the EEG during awake hours.

The Modified Naranjo Criteria for Homoeopathy (MONARCH) used to assess the causal relationship between the medicine and treatment outcome, scored +8 [Table 2].

DISCUSSION

In epilepsy, the neuronal activity of the brain gets disturbed leading to severe agitation and convulsions. The diagnosis of epilepsy is based on clinical information and the EEG is confirmatory. EEG shows changes if it is done within 2–3 days of the attack. Hence, in this case, positive EEG was obtained by doing it within the stipulated period. Due to the prolonged and unsure recovery in conventional mode of treatment, an increasing number of patients turn towards Homoeopathy for safe and cost-effective treatment.^[14] The present case showed that the classical symptoms of epilepsy were treated with the help of individualised constitutional homoeopathic medicine *Lachesis* in fifty millesimal preparations in increasing potencies up to 0/11, continued over 9 months, without any aggravation. *Lachesis* was, thus, found to be the most homoeopathically indicated remedy for this particular case. EEG also showed a normal report.

Further, it can be ascertained that there was some similarity in the mental condition of the patient and the symptoms produced by this drug. *Lachesis* has been described to fit the whole human race filled up with snake as to disposition and character, and says this venom only causes to appear that which is in man.^[21] The symptoms of *Lachesis* are worse on entering sleep and they are prolonged as the sleep deepens. There is a cloudy state of mind with melancholy mood and confusion state after arousal from sleep which is present in *Lachesis* as was also seen in this patient after each epileptic attack. Delirium in sleep perhaps shifts to convulsion and is followed by unconsciousness, as mentioned under the *Lachesis* description, and also observed in the present case.^[20]

The case showed marked improvement by *Lachesis* which was selected on the basis of totality of symptoms, in consultation with *Materia Medica*.^[21] The gradual improvement proved that the medicine selection was correct. LM potency was selected to avoid any unnecessary aggravation and hence, the improvement occurred without aggravation and the medicine could be repeated in increasing potencies. In the subsequent months, there was overall improvement in the patient, with no irritability or abusive behaviour. The patient also reported good sleep, no tiredness, desire to do more work and increased confidence. He felt free of anxiety and tension after treatment. His malicious and vindictive behaviour towards others also reduced during the follow-ups. The potency selection and repetition of doses were done following the homeopathic principles and the guidelines for the second prescription according to Dr. J. T. Kent.^[20] The curative response of the homeopathic medicine, evaluated using the MONARCH inventory, suggests a definite association between the treatment and the outcome. This case report has been documented in accordance with the HOM-CASE-CARE guidelines.^[17,22]

CONCLUSION

This case suggests a positive role of individualised homeopathic medicine in the management of epilepsy. More documented case reports and randomised clinical studies are required to establish the role of Homeopathy in the successful management of epilepsy.

Declaration of patient's consent

Written, informed consent was obtained from the patient for publication of the case report, and he was also informed that he is free to quit the consultation in case of any adverse events or disappointment from the treatment. The patient was made to understand that his name and initials will not be included in the manuscript and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

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Conflicts of interest

None declared

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Prise en charge de l'épilepsie par le médicament homéopathique individualisé *Lachesis* en puissance millimétrique : rapport de cas fondé sur des données probantes

Introduction : L'épilepsie peut être définie comme un trouble convulsif dû à une modification de l'activité électrique cérébrale. Ce trouble comprend divers troubles liés à un dysfonctionnement cérébral sous-jacent, augmentant ainsi la prédisposition aux crises. Il s'agit d'un grave problème de santé publique qui affecte l'activité normale et la qualité de vie d'une personne. Les médicaments homéopathiques sont utilisés avec succès dans le traitement de l'épilepsie. Par conséquent, des recherches sont nécessaires de rapports de cas bien définis. Nous présentons ici un cas d'épilepsie guéri par un médicament homéopathique individualisé après répertorisation. **Résumé du cas :** Un homme de 52 ans se plaignait de crises d'épilepsie avec perte de connaissance depuis trois ans. Le *Lachesis* a été le médicament choisi pour le traitement en puissance millimétrique pendant neuf mois, sans aucune crise d'épilepsie par la suite. Le patient a été guéri après le traitement, comme le confirment les rapports EEG avant et après le traitement. L'attribution causale du médicament homéopathique a été évaluée selon les critères MONARCH (Modified Naranjo Criteria for Homoeopathy), qui ont obtenu un score de 8, suggérant une relation causale certaine entre le médicament et le résultat. Ce rapport indique qu'un médicament homéopathique bien choisi peut être utile dans le traitement de l'épilepsie.

Behandlung von Epilepsie mit individualisiertem homöopathischen Arzneimittel *Lachesis* in Tausendstelpotenz: Ein evidenzbasierter Fallbericht

Einleitung: Epilepsie kann als Anfallsleiden definiert werden, das auf einer Veränderung der elektrischen Aktivität im Gehirn beruht. Sie umfasst verschiedene Erkrankungen aufgrund einer zugrunde liegenden Hirnfunktionsstörung, die die Anfälligkeit für Anfälle erhöht. Epilepsie stellt ein ernstes Problem der öffentlichen Gesundheit dar, das die normale Aktivität und Lebensqualität des Patienten beeinträchtigt. Homöopathische Arzneimittel werden erfolgreich zur Behandlung von Epilepsie eingesetzt. Daher bedarf es Forschung mit der Dokumentation fundierter Fallberichte. Hier stellen wir einen Fall von Epilepsie vor, der nach Repertorisation durch individualisiertes homöopathisches Arzneimittel geheilt wurde. **Fallzusammenfassung:** Ein 52-jähriger Mann stellte sich mit epileptischen Anfällen und Bewusstlosigkeit seit drei Jahren vor. *Lachesis* wurde als Behandlungsmittel in der LM-Potenz für neun Monate gewählt, und danach trat kein epileptischer Anfall mehr auf. Der Patient war nach der Behandlung geheilt, was durch EEG-Berichte vor und nach der Behandlung bestätigt wurde. Die kausale Zuordnung des homöopathischen Arzneimittels wurde anhand der modifizierten Naranjo-Kriterien für Homöopathie (MONARCH) bewertet. Diese erreichten einen Wert von 8, was auf einen eindeutigen kausalen Zusammenhang zwischen dem Arzneimittel und dem Behandlungsergebnis hindeutet. Dieser Bericht zeigt, dass ein richtig gewähltes homöopathisches Arzneimittel bei der Behandlung von Epilepsie hilfreich sein kann.

मिर्गी का प्रबंधन व्यक्तिगत होम्योपैथिक दवा लकेसिस की मिलेसिमल पोटन्सी द्वारा: एक साक्ष्य-आधारित केस रिपोर्ट

परिचय: मिर्गी को मस्तिष्क में विद्वत गतिविधि में परिवर्तन के कारण होने वाले दौरे के विकार के रूप में परिभाषित किया जाता है जिसमें अंतर्निहित मस्तिष्क शिथिलता के कारण कई प्रकार के विकार शामिल हैं जो दौरे के लिए पूर्व-प्रवृत्ति को बढ़ाते हैं। यह एक गंभीर सार्वजनिक स्वास्थ्य समस्या है जो किसी व्यक्ति की सामान्य गतिविधि और जीवन की गुणवत्ता को प्रभावित करती है। आमतौर पर मिर्गी के इलाज के लिए होम्योपैथिक दवाओं का सफलतापूर्वक उपयोग किया जाता है। इसलिए, अच्छी तरह से परिभाषित केस रिपोर्ट के दस्तावेज़ीकरण के साथ शोध की आवश्यकता है। यहाँ हम मिर्गी का एक केस प्रस्तुत करते हैं जिसे रिपटोराइजेशन के बाद व्यक्तिगत होम्योपैथिक दवा द्वारा ठीक किया गया। **केस सारांश:** एक 52 वर्षीय पुरुष तीन साल से मिर्गी के दौरे के साथ बेहोशी की शिकायत के साथ आया। लैकेसिस को 9 महीने तक एलएम पोटन्सी में इलाज के लिए चुना गया जिसके परिणाम स्वरूप रोगी को कोई मिर्गी का दौरा नहीं पड़ा। उपचार के बाद रोगी ठीक हो गया, जिसकी पुष्टि उपचार से पहले और बाद में ईईजी रिपोर्ट द्वारा की गई। होम्योपैथिक दवा के कारणात्मक आरोपण का मूल्यांकन होम्योपैथी के लिए संशोधित नारंजो मानदंड (MONARCH) के माध्यम से किया गया, जिसमें प्राप्त हुए 8 अंक दवा और परिणाम के बीच एक निश्चित कारणात्मक संबंध का सुझाव देता है। यह रिपोर्ट बताती है कि सही ढंग से चुनी गई होम्योपैथिक दवा मिर्गी के उपचार में सहायक हो सकती है।

Manejo de la epilepsia con el medicamento homeopático individualizado *Lachesis* en potencia milésima: Reporte de un caso basado en la evidencia

Introducción: La epilepsia se define como un trastorno convulsivo causado por un cambio en la actividad eléctrica cerebral. Comprende diversos trastornos debidos a una disfunción cerebral subyacente que aumenta la predisposición a las convulsiones. Es un grave problema de salud pública que afecta la actividad normal y la calidad de vida de una persona. Los medicamentos homeopáticos se utilizan con éxito para el tratamiento de la epilepsia. Por lo tanto, se necesita investigación con documentación de reportes de casos bien definidos. Presentamos un caso de epilepsia curada con medicamentos homeopáticos individualizados tras la repertorización. **Resumen del caso:** Un hombre de 52 años presentó síntomas de crisis epilépticas con pérdida de consciencia durante tres años. *Lachesis* fue el fármaco elegido para el tratamiento en potencia milésima durante 9 meses y no presentó ninguna crisis epiléptica posteriormente. El paciente se curó tras el tratamiento, lo cual fue confirmado mediante informes de EEG antes y después del mismo. La atribución causal del medicamento homeopático se evaluó mediante los Criterios de Naranjo Modificados para la Homeopatía (MONARCH), que obtuvieron una puntuación de 8, lo que sugiere una clara relación causal entre el medicamento y el resultado. Este informe indica que un medicamento homeopático correctamente seleccionado puede ser útil en el tratamiento de la epilepsia.

使用个性化顺势疗法药物 *Lachesis* 治疗癫痫，效力为千分之一：基于证据的病例报告

简介：癫痫可定义为由于脑电活动变化而引起的癫痫症，包括由于潜在脑功能障碍而导致的多种疾病，这会增加癫痫发作的倾向。这是一个严重的公共卫生问题，影响个人的正常活动和生活质量。顺势疗法药物已成功用于治疗癫痫。因此，需要进行研究并记录明确的病例报告。这里我们介绍了一个癫痫病例，该病例在进行复方治疗后通过个性化顺势疗法药物治疗。 **病例摘要：**一名 52 岁的男性，自三年前开始出现癫痫发作并昏迷不醒的症状。*Lachesis* 是用于 LM 效力治疗的药物，已使用 9 个月，此后没有出现癫痫发作。患者在治疗后痊愈，治疗前后的脑电图报告证实了这一点。通过改良的 Naranjo 顺势疗法标准 (MONARCH) 评估了顺势疗法药物的因果归因，得分为 8，表明药物与结果之间存在明确的因果关系。该报告表明，正确选择的顺势疗法药物有助于治疗癫痫