

Constitutional approach in a case of hyperlipidaemia

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Abstract: A female age 55 years diagnosed with hyperlipidaemia recovered by homoeopathy prescribing constitutionally *Arsenicum album* 200C after not responding to *Arsenicum album* 30C in addition to the diet and lifestyle related advice.

Keywords: hyperlipidaemia, *Arsenicum album*, homoeopathy.

Abbreviations: CBC: complete blood count; ECG: electrocardiography; GPAL: gravida, para, abortion, live; FTNVDs: full term normal vaginal deliveries; BP: blood pressure; ICD: International Classification of Diseases; OD: once a day (omne in die); TDS: 3 times a day (ter die sumendum), mm Hg – millimetre of mercury.

Introduction

Hyperlipidaemia is an increase in one or more of the plasma lipids, including triglycerides, cholesterol, cholesterol esters and phospholipids and or plasma lipoproteins including very low-density lipoprotein and low-density lipoprotein, and reduced high-density lipoprotein levels.^{1,2}

Generally hyperlipidaemia does not have any obvious symptoms but they are usually discovered during routine examination or until it reaches the danger stage of a stroke or heart attack. Patients with high blood cholesterol level or patients with the familial forms of the disorder can develop xanthomas which are deposits of cholesterol may form under the skin, especially under the eyes. At the same time, patients with elevated levels of triglycerides may develop numerous pimple-like lesions at different sites in their body.²

Hyperlipidaemia is the most important risk factor for atherosclerosis, which is the major cause of cardiovascular disease. Atherosclerosis is a pathologic process characterised by the accumulation of lipids, cholesterol, calcium and the development of

fibrous plaques within the walls of large and medium arteries.^{3,4}

Case history

Chief complaints

A female patient of age 55 yrs approached with the complaint of palpitation with shortness of breath, especially in the evening time. She was having a great anxiety for her health. She was very thoughtful and anxious about her family that something bad will happen to her family. She also had fear from narrow places.

History of present illness

Patient was apparently well 6 months ago and developed all her complaints gradually. Then she approached an allopathic physician who examined her and did all the investigations like CBC, thyroid function test, lipid profile, and ECG. All her reports were normal except lipid profile which was showing hyperlipidaemia and her blood pressure was markedly increased. So, he put her on antihypertensive and antihyperlipidaemic drugs.

Family history

Father died 10 years ago due to

myocardial infarction.

Mother had a attack of stroke 4 years ago.

Past history

2002 – Appendectomy

2015 – Chikungunya

Physical generals

Appetite- Moderate

Thirst- Moderate

Desire- Fatty food

Aversion- Sweets

Stool- Once a day, satisfactory

Urine- Day₄₋₇ Night₀₋₁

Perspiration- Profuse in soles

Sleep- Disturbed

Dreams- Not specific

Obstetric history- G₂P₂A₀L₂, FTNVDs

Gynaecological history- Menopause 9 years ago

Sexual history- Not specific

Thermal reaction- Sensitive to both hot and cold temperatures



Mental generals

She already mentioned by herself while telling about her presenting complaints.

Vitals

BP-150/100 mm Hg

Analysis of the case

Mental symptoms	Physical generals	Common symptoms
Anxiety about health Anxiety about family Something bad will happen to her family Fear of narrow places	Shortness of breath <evening Desire-fatty food Aversion-sweets Perspiration-profuse in soles	Palpitation. Sleep disturbed.

Evaluation of case

The grading of the symptoms was done on the basis of how much the patient emphasised on the following symptoms:

1. Anxiety about health
2. Anxiety about family

Diagnosis of the case

Diagnosis based on ICD 10 classification⁵:

E78.5 refers to hyperlipidaemia, unspecified that included excess of lipids in the blood.

On the basis of her clinical

history, physical examination and investigations, no any cardiac or respiratory or any other kind of disease was diagnosed while her lipid profile showed increased tri-glycerides in the blood, thus she was diagnosed to be a case of hyperlipidaemia.

3. Something bad will happen to her family
4. Fear of narrow places
5. Shortness of breath <evening
6. Desire-fatty food
7. Aversion-sweets
8. Perspiration-profuse in soles

9. Palpitation
10. Sleep disturbed

Repertorial totality

In repertorisation, 8 symptoms were taken which were uncommon in the case and *Synthesis repertory* was used because of prominent mental and physical generals.

Symptoms	Rubrics
Anxiety about health	MIND – Anxiety – health; about
Anxiety about family	MIND – Anxiety – family; about his
Something bad will happen to her family	MIND – Fear – happen, something will – family; to his
Fear of narrow places	MIND – Fear – narrow places, in
Shortness of breath <evening	RESPIRATION – difficult – evening
Desire fatty food	GENERALS – Food and Drinks – fat – desire
Aversion sweets	GENERALS – Food and Drinks – sweets – desire
Perspiration profuse in soles	EXTREMITIES – Perspiration – foot – sole

Repertorial sheet⁶

(See repertorial sheet)

Prescription

Patient was prescribed on 29/09/2018:

Arsenicum album 30/3 doses/OD

Rubrum 200 For 7 days

On repertorisation, the remedies

such as *Arsenicum album*, *Sulphur*, *Pulsatilla*, *Calcarea carbonica*, *Phosphorus*, *Carcinosinum* and *Natrum muriaticum* came on the top.

Arsenicum album was covering all her rubrics. It was difficult to decide medicine for her but as patient at last herself pointed out her medicine by asking of consultancy fees and for taking a less money than that shows

her possessiveness towards money which is a characteristic nature of *Arsenicum album*.⁷

Advise

Patient was advised to avoid fatty food and taking a low salt diet.

To do daily exercise and yoga atleast for 30 minutes.

125%	Millennium view (progressive)	J. Sher	Luc	Rajan's Miasms	Display	Strategy	Restict to
1	Aman case						
1	MIND - ANXIETY - family, about his	(29)	1	1	1	1	1
2	MIND - ANXIETY - health, about	(56)	1	1	2	2	2
3	MIND - FEAR - happen, something will - family, lo...	(10)	1	1	1	1	1
4	MIND - FEAR - narrow place, in	(62)	1	1	2	2	2
5	RESPIRATION - DIFFICULT - evening	(62)	1	1	2	2	2
6	EXTREMITIES - PERSPIRATION - Foot - Sole	(27)	1	1	2	2	2
7	GENERALS - FOOD and DRINKS - fat - desire	(51)	1	1	2	2	2
8	GENERALS - FOOD and DRINKS - sweets - ave...	(73)	1	1	2	2	2

Repertorial sheet

Follow up

Date	Symptoms	Vitals	Reports	Prescription
6-10-2018	No change	BP-140/94mmHg	-----	<i>Arsenicum album</i> 200/ one dose stat <i>Rubrum</i> 200/TDS for 7 days
15-10-2018	Anxiety and fear were better. Not much relief in her physical complaints	BP-140/90mmHg	-----	<i>Rubrum</i> 200/TDS for 15 days
01-11-2018	No more anxiety and fear. No palpitation and shortness of breath much better	BP-130/84mmHg	Lipid profile advised	<i>Rubrum</i> 200/TDS for 15 days
17-11-2018	Relief in all the complaints	BP-130/86mmHg	Serum cholestrol-143.2mg/dl Serum triglycerides-150.0mg/dl	<i>Rubrum</i> 200/TDS for 15 days

Reports

Before treatment

See Figure 1.

After treatment

See Figure 2.

Conclusion

The following conclusion was being made after studying this case:

1. Case of hyperlipidaemia can be managed by prescribing

constitutional medicine with changes in lifestyle.

2. We have also seen through this case that the patient not only have relief in her physical complaints but her vitals and reports also came normal.
3. Patient become better first on mental plane.

References

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Company

Sample Type : PLAIN/SERUM

Sample Collected Time 29/09/2018 18:14:52

Final Authentication : 29/09/2018 20:34:34

BIOCHEMISTRY

Test Name	Value	Unit	Biological Ref Interval
LIPID PROFILE			
Calculated			
TOTAL CHOLESTEROL Method: - Enzymatic Endpoint Method	178.11	mg/dl	Desirable <200 Borderline 200-239 High > 240
TRIGLYCERIDES Method: - GPO-PAP	403.59 H	mg/dl	Normal <150 Borderline high 150-199 High 200-499 Very high >500
* DIRECT HDL CHOLESTEROL Method: - Direct clearance Method	32.78	mg/dl	Low < 40 High > 60
* DIRECT LDL CHOLESTEROL Method: - Direct clearance Method	78.07	mg/dl	Optimal <100 Near Optimal/above optimal 100-129 Borderline High 130-159 High 160-189 Very High > 190
VLDL CHOLESTEROL Method: - Calculated	67.26	mg/dl	0.00 - 80.00
* T.CHOLESTEROL/HDL CHOLESTEROL RATIO Method: - Calculated	5.43 H		0.00 - 4.90
* LDL / HDL CHOLESTEROL RATIO Method: - Calculated	2.38		0.00 - 3.50
TOTAL LIPID Method: - CALCULATED	759.81	mg/dl	400.00 - 1000.00

TOTAL CHOLESTEROL InstrumentName Rx Daytona plus Interpretation: Cholesterol measurements are used in the diagnosis and treatments of lipid lipoprotein metabolism disorders.

TRIGLYCERIDES InstrumentName Rx Daytona plus Interpretation: Triglyceride measurements are used in the diagnosis and treatment of diseases involving lipid metabolism and various

Figure 1

Drwan DT: 17/11/2018		Rep .Date : 17/11/2018	
BIO CHEMISTRY			
TEST	RESULT	UNIT	NORMAL VALUE
S CHOLELESTROL	143.2	mg/dl	131-250
S TRIGIY CERIDES	150.0	mg/dl	30-150
HDL CHOLESTEROL	39	mg/dl	35-88
LDL CHOLESTROL	74.2	mg/dl	UPTO 150
VLDL CHOLESTROL	30	mg/dl	6-30

Figure 2

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