

Antimiasmatic treatment on essential hypertension - a review.

Tratamiento antimiasmático en la hipertensión esencial: una revisión.

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ABSTRACT

The by-product of modern civilization, hypertension or high blood pressure has emerged as a "Silent killer" as a result of our hectic lifestyle. High blood pressure is not an illness; rather, it is a symptom or indicator of an underlying condition or pathological process. The increase in blood pressure is actually a compensatory or conservative process that ensures enough blood flow to the tissues even in the face of obstruction or increased blood flow resistance. Hypertension is linked to a number of health issues, including arterial aneurysm, strokes, heart failure, heart attacks, kidney failure, and death from circulatory failure. Traditional treatments for high blood pressure include acetazolamide, beta-blockers, etc. These medications do have a number of adverse effects though. Therefore, other therapies are required to manage and control HTN. 30 articles related to Hypertension was selected. Out of which 17 articles were related to homoeopathy. Homoeopathic medicines showed effectiveness in treating Hypertension cases. However extensive study is needed for more valid proved.

Keywords: Homoeopathy, Blood pressure, Hypertension.

RESUMEN

El subproducto de la civilización moderna, la hipertensión o la presión arterial alta, se ha convertido en un "asesino silencioso" como resultado de nuestro agitado estilo de vida. La presión arterial alta no es una enfermedad; más bien, es un síntoma o indicador de una condición subyacente o proceso patológico. El aumento de la presión arterial es en realidad un proceso compensatorio o conservador que asegura un flujo sanguíneo suficiente a los tejidos incluso ante una obstrucción o una mayor resistencia al flujo sanguíneo. La hipertensión está relacionada con una serie de problemas de salud, incluidos aneurismas arteriales, accidentes cerebrovasculares, insuficiencia cardíaca, ataques cardíacos, insuficiencia renal y muerte por insuficiencia circulatoria. Los tratamientos tradicionales para la presión arterial alta incluyen acetazolamida, betabloqueantes, etc. Sin embargo, estos medicamentos tienen una serie de efectos adversos. Por tanto, se requieren otras terapias para gestionar y controlar la HTA. Se seleccionaron 30 artículos relacionados con la Hipertensión. De los cuales 17 artículos estaban relacionados con la homeopatía. Los medicamentos homeopáticos demostraron eficacia en el tratamiento de los casos de hipertensión. Sin embargo, se necesitan estudios extensos para obtener pruebas más válidas.

Palabras clave: Homeopatía, Presión arterial, Hipertensión.

INTRODUCTION

All definitions of hypertension, including those released by the World Health Organization (WHO)/International Society of Hypertension (ISH) and the Joint National Committee (JNC) in prevention, detection, evaluation, and treatment of high blood pressure (JNC-8) are arbitrary. Currently, hypertension is defined as SBP of 140 mm Hg or above and/or DBP of 90 mm Hg or greater at any level of BP in patients using antihypertensive drugs in individuals 18 years of age and older who are not severely unwell. [1]

Hypertension having two major types

1. Primary or essential hypertension
2. Secondary hypertension

Normal range- Systolic- 100-130 mmHg

Diastolic- 60-80 mm Hg.

ESSENTIAL HYPERTENSION

The type of hypertension that, by definition, has no known aetiology is called essential hypertension, also known as primary hypertension or idiopathic hypertension. 80–95 percent of hypertensive patients have this form of hypertension, making it the most prevalent. It is frequently family and most likely results from the interplay of genetic and environmental factors. [2]

SECONDARY HYPERTENSION

The remaining 5-20% of hypertensive patients have a known underlying condition that is raising their blood pressure. An identifiable reason for the blood pressure spike is frequently more obvious in those with secondary hypertension. [2]

Blood pressure classification	Systolic, mmHg	Diastolic, mmHg
Blood pressure		
Optimal	<120	<80
Normal	<130	85
High normal	130-139	85-89
Hypertension		
Grade 1 (mild)	140-159	90-99
Grade 2(moderate)	160-179	100-109
Grade3 (severe)	≥180	>110
Isolated systolic hypertension		
Grade 1	140-159	<90
Grade 2	≥160	<90 [3]

The leading global contributor to cardiovascular disease and early death is hypertension. Global mean blood pressure (BP) has either remained steady or significantly dropped during the past forty years as a result of the widespread usage of antihypertensive drugs. Contrarily, hypertension has become more common, particularly in low- and middle-income countries (LMICs). According to projections, 31.1% of adults globally (1.39 billion) would have hypertension by 2020. Adults were more likely to have hypertension in LMICs (31.5%; 1.04 billion persons) than in high-income nations (349 million individuals; 28.5%). Some of the regional heterogeneity in the prevalence of hypertension may be explained by variations in the levels of risk factors for hypertension, such as high salt intake, low potassium intake, obesity, alcohol consumption, physical inactivity, and bad diet. Despite the rising prevalence, there are still few thorough analyses of the economic effects of hypertension, and there are low knowledge, treatment, and BP control rates, especially in LMICs. Future research is required to accurately estimate the prevalence and economic burden of hypertension around the world and to test implementation options for hypertension prevention and control, particularly in low-income populations. [4]

According to the Global Burden of Illness (GBD) and World Health Organization (WHO) statistics, cardiovascular diseases (CVD) constitute the leading cause of death and disease burden globally. According to the GBD study, in 2017, CVD caused 17.8 million deaths and 330 million years of disability worldwide (YLD). The GBD study also revealed that the greatest significant risk factor for both global mortality and disease burden is hypertension, or elevated systolic blood pressure (BP). According to the Prospective Urban Rural Epidemiology (PURE) study, about a dozen established risk factors account for 90% of new cases of cardiovascular disease in low-, middle-, and high-income nations. Additionally, it has been determined that the most significant CVD risk factor and the one that carries the highest population-based risk is hypertension (defined as BP >140 and/or >90 mmHg or known hypertension on treatment). [5]

The "principle of similia" serves as the foundation for homoeopathic care of crucial HTN. As a chronic condition, it necessitates constitutional anti-miasmatic therapy. The totality of different traits and symptoms is what leads a homoeopath to a similarity. Aphorism 153 of the Organon by homoeopathy emphasises the value of the patient's uniqueness. According to Hahnemann, unusual or distinctive symptoms that are unique to an individual rather than typical symptoms serve as a sign of similarity. Hahnemann also places a strong emphasis on patients' mental symptoms in all cases of physical illness. According to him, it is important to pay close attention to a patient's emotional responses and mental condition because they frequently influence the treatment. This Hahnemann quote is naturally suited to cases of essential HTN because it is psychological reasons that cause the sickness in these circumstances. It is important that the cure chosen for a condition with many miasmatic influences (such essential HTN) matches the prevailing or prevalent miasm. As shown by the case image itself, it is very common for the dominating psoric miasm to appear first, followed by the predominant sycotic or syphilitic miasm. [6,7]

There were found to be 30 articles related to hypertension, in that 17 publications were related with homoeopathy. And 13 articles dealt with various medical systems.

MATERIALS AND METHODS

A comprehensive search for clinical research on human beings related to hypertension was carried out. The clinical studies related to the veterinary system of treatment were excluded but allopathic and other complementary therapies (Homoeopathy, Ayurveda, Unani) were included in this review.

Search methods for identification of studies: Electronic searchA thorough literature search was conducted in the most popular international search databases, including PubMed, Research Gate, and Google Scholar, for all human clinical research and review papers. Direct searches were also done on the websites of specific peer-reviewed journals that publish articles on homoeopathy.

Search terms: For this search all keywords related to hypertension such as blood pressure, obstruction and Homoeopathy, Ayurvedic, Allopathy, Naturopathy were used.

REVIEW OF LITERATURE

The condition of hypertension, also referred to as elevated pulse, is marked by a determinedly increased weight in the veins. It is a serious illness that increases the risk of developing kidney, cardiac, and other diseases. With up to one in four men and one in every five women living in countries with populations above a billion, this is a key contributing factor to pre-developed passing worldwide.

The World Health Organization (WHO) views hypertension (HTN) as one of the most prevalent health problems in today's expanding population. According to studies, the frequency of essential hypertension is between 85 and 95%, and just 5% of people have secondary hypertension. However, homoeopathy is employed as a substitute in some instances of HTN despite its excellent clinical outcomes.

By boosting your immune system, a homoeopathic drug will increase your resistance to infection, allowing you to recover from illness as quickly and painlessly as possible. The way homoeopathic medications function is quite different; they don't interfere with the body's natural immune system but rather strengthen it so that it can better fight against infections. Based on the traditional homoeopathic philosophy, a homoeopathic practitioner considers the whole person rather than just the symptoms of the sickness, which includes the person's mind, body, and emotions.

If we take our medications as prescribed and take precautions, homoeopathy can provide lifelong remedies. In homoeopathy, there are numerous medications that function as beta-blockers to lower blood pressure and prevent future issues. In addition to helping to lower blood pressure, homoeopathic treatments can do so successfully and without causing any negative side effects. Numerous cases of hypertension have been miraculously treated by homoeopathy.

STUDY RELATED TO HYPERTENSION

The articles on homoeopathy related to hypertension involved clinical case series, case report etc.

One of the article was of monocentric, Phase 2 clinical trial, single arm, single blind, and randomized, interventional study to see the effect of Lachesis 30C in cases of primary hypertension in the age group of 20-75 years. Cases presented with complaints of elevated blood pressure level in resting systolic BP to 130mmHg or more & diastolic BP 90mmHg or more with no identifiable causes. Lachesis Muta 30C is a treatment for circulatory effects that has been seen to lower Blood Pressure (BP) through affecting circulation in many circumstances. The purpose of this study was to determine whether or not the homoeopathic drug Lachesis Muta 30C has any effect on lowering blood pressure levels in people with essential hypertension. A monocentric, single-arm, single-blind phase II clinical trial was carried out in the outpatient clinic of Bharati Vidyapeeth Deemed University's Homoeopathic College & Research Centre in Pune. The study included a total of 34 patients, both male and female, ranging in age from 20 to 75 years. 30 patients finished their follow-up, while four patients dropped out. Sitting still, blood pressure was measured. After 10–12 weeks of outpatient care, there was a reduction in blood pressure as the end result. Hypertensive patients' blood pressure levels significantly decreased both before and after therapy, and the patients also had symptom relief. After study completion, the mean reduction in SBP was 8.80 mm of Hg (95% CI 9.9, 7.7) and the mean reduction in DBP was 9.86 mm of Hg (10.2, 9.72). (10-12 weeks of treatment). Alternative medicine Lachesis Muta 30C had a considerable impact on people with essential hypertension in terms of lowering blood pressure. [8]

Second one was a prospective, double-blind, randomized, placebo-controlled, parallel-arm clinical trial was conducted at the Outpatient Clinic of the Mahesh Bhattacharyya Homoeopathy Medical College and Hospital, West Bengal. Out of 233 hypertensives assessed for eligibility, 150 were enrolled and randomized (verum/homoeopathy 70, control/placebo 80). A total of 18 dropped out and 132 were regular (verum 64, control 68). The outcome measures were assessed after three and six months respectively. In this study *Natrum muriaticum*, *Calcarea carbonica*, *Sulphur*, *Thuja occidentalis*, *Nitric acid* and *Medorrhinum* were frequently prescribed. Individualized homoeopathy produced a significantly different hypotensive effect than placebo. [9]

Another study was done, whose purpose of this double-blind study was to evaluate the efficacy of the Homoeopathic simillimum and a Homoeopathic complex (*Aurum metallicum 6CH*, *Lachesis muta 6CH*, *Natrum Muriaticum 6CH*, and *Veratrum album 6CH*) in the treatment of Primary Hypertension in adult females. A minimum of 30 patients were recruited and were selected on the basis of specified inclusion and exclusion criteria, and randomly divided into two equal groups by the research supervisor, with the first group receiving the Homoeopathic simillimum and the second group receiving the Homoeopathic complex. The results of the study led to the conclusion that both the simillimum and complex treatments were effective at reducing blood pressure over time, but there was no evidence that one treatment was more beneficial than the other, since the rates of change over time in systolic and diastolic blood pressure were similar in both treatment groups. [9]

From October 2013 to March 2018, a single-blind, randomised, placebo-controlled experiment was conducted. The major outcome measure involved tracking changes in systolic and diastolic blood pressure over the course of three months. 217 of the 2127 patients who passed the screening and met the inclusion criteria were randomly assigned to receive either placebo plus lifestyle modification (LSM) = 101 or homoeopathic Q potencies (or

LM potencies) + LSM = 116. Diet and exercise were both part of the LSM therapy plan. Analysis was done with treatment in mind. The groups' repeated-measure ANOVA results revealed a statistically significant difference (Wilk lambda 0.85, F = 12.12, df = 213, P = 0.0001) favouring Individualized Homoeopathy (IH) and LSM in both SBP and DBP. The Homoeopathy with LSM group significantly outperformed the control group in terms of mean reductions in both SBP and DBP, according to a post hoc independent t-test (mean difference 7.12 mm Hg, 95% confidence interval [CI] 4.72-9.53, P = 0.0001). The most beneficial medications included phosphorus (n = 10), natrum muriaticum (n = 21), lycopodium (n = 16), nux vomica (n = 12), and sulphur (n = 24). Patients with Stage I HTN were observed to benefit more from IH in LM potency combined with LSM than from a placebo combined with LSM. There should be more rigorous trials conducted. [10]

DISCUSSION

We attempted to gather data-supported information about the use of homoeopathic therapy for hypertension in the study. According to an exhaustive analysis of all pertinent literature on the subject, homoeopathy is a successful treatment for hypertension. Various drugs have also been utilised to treat hypertension cases with success. All the prescriptions should have been written according to homoeopathic principles. The case reports and case series that make up this review show that there are several treatments available for hypertensive patients. The lack of sufficient high-quality clinical research and laboratory tests makes it challenging to draw a firm conclusion, and it is preferred to highlight exceptional, solitary, or only successful cases.

But there's no denying that these studies gave us some valuable qualitative information on homoeopathic approaches to treating hypertension. For homoeopathy's effectiveness in treating hypertension other lifestyle disorders, more meticulously organised controlled clinical trials and laboratory studies involving a large number of patients are needed.

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