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ADD ON HOMOEOPATHIC MEDICINES ALLEVIATED SCHIZOPHRENIA SYMPTOMS IN HAEMOPHILIA B PATIENT: A CASE REPORT

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Abstract:

A psychiatric disorder like paranoid schizophrenia as a concomitant with haemophilia B (Factor IX deficiency) is extremely rare combination. Genetic mutation in the F9 gene leads to deficiency in factor IX synthesis which in turn causes prolonged bleeding from various organs. This patient is 1 out of 564 haemophilia patients treated at Homoeopathy in Haemophilia Nashik center. In this case report, homoeopathic management of a patient with haemophilia B along with paranoid schizophrenia is presented. Inferiority feeling lead to suspicious behavior towards his wife which was the major cause to develop schizophrenia. The patient underwent homoeopathic medicine was prescribed on the basis of characteristic concomitant symptom. Homoeopathic medicines greatly alleviated the schizophrenic symptoms, and also reduced the pain and swelling in the limbs. The scale used for the assessment was PANSS (Positive and negative syndrome scale), its score before the treatment was 144, at first follow-up was 45, and after 4 months of treatment was 54 respectively. Although annihilation of the disease to its whole extent was not possible because of the maintaining cause i.e. his genetic disease, still substantial improvement occurred in schizophrenic symptoms and developed a better coping with his environment and family. In this case, homoeopathy as an add-on therapy caused miasmatic descent for better adaptation.

Keywords: Paranoid schizophrenia, psychiatric disorder, Haemophilia B, Homoeopathy, Case report.

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Introduction:

Haemophilia B, also known as factor IX deficiency or Christmas disease¹, is a rare inherited immunogenic bleeding disorder² of the second most common type. Persons with haemophilia B do not bleed faster than unaffected individuals, on the contrary, they bleed longer. It is four times less common than haemophilia A³. The affected population with haemophilia B is approximately 1 in 25000 male births which is in comparison less prevalent than haemophilia A which occurs in approximately 1 in 5000 male births¹. Mutation in the F9 gene is the cause of this disease, which is located on the X-chromosome and therefore is inherited as an X-linked recessive trait. Information for the synthesis of factor IX is encoded in the F9 gene, so the mutation in the F9 gene leads to deficiency of factor IX^{1,4}. 80-90% of individuals with the disease show cephalohematoma, haematuria, intracranial haemorrhage, intramuscular hematoma, haemarthrosis, poor wound healing, and prolonged bleeding after dental extraction and surgery, recurrent epistaxis, gastrointestinal haemorrhage⁴. The standard treatment available is an infusion of factor IX concentrates to replace the defective clotting factor⁵.

Schizophrenia is a major mental disorder known as "dementia praecox" and was later given the name "schizophrenia" by Eugene Bleuler in 1911. Associated fundamental symptoms of schizophrenia are known as "4 As"; Associational disturbances of thoughts (e.g. looseness, haphazard thinking), Affective disturbances, like; mood disorders, Autism; impairs ability to communicate, and Ambivalence⁶. Paranoid schizophrenia is the most common type of schizophrenia in the world according to ICD-10⁷. The prevalence of schizophrenia internationally is 1%⁸, whereas the incidence is about 1.5 per 10,000 people⁹. Men are diagnosed slightly more with schizophrenia than a woman (in the order of 1.4:1)¹⁰.

This was a special case where the two rare disorders were found in a single case as a separate entity. Till date, no scientific data shows any correlation between these two diseases. Hereby this article presents how homoeopathy efficiently alleviated the schizophrenic symptoms in the patient with haemophilia B.

Case Presentation:

A 41-year-old male patient formerly diagnosed case of Haemophilia B recently was detected with Paranoid Schizophrenia in November 2021 and was hospitalized for the same for 70 days. After discharge, he remained home for 28 days and was on antipsychotic drugs. Nearly after 98 days when he was not relieved with his complaints, he returned in Homoeopathy in Haemophilia (HIH) center Nashik in February 2022 with the complaints of hallucinatory behavior, suspiciousness towards his wife, irritability, abuse and impulsiveness, social and emotional withdrawal, poor rapport, hyper religiosity, trembling of lower limbs, sleepiness, disorientation associated with pain and swelling in the left ankle and right knee, aggravated during walking. Previous to the diagnosis of paranoid schizophrenia the patient was on homoeopathic medication for his haemophilia related complaints since 2012. He continued homoeopathic treatment for the same till 2016 regularly, later he was very much irregular till 2019, after which visited Nashik Centre in Feb 2022 (Table 3).

Family History:

- Mother was not tested for haemophilia.
- Patient's sister is a haemophilia carrier.
- Father is suffering from Diabetes mellitus type II.

Past History:

- The patient was admitted to the hospital for schizophrenia for 70 days. Treatment given there included psychosocial intervention consisting of counselling, hypnotherapy, psycho pharma therapy, yoga, meditation and activities.
- After discharge he remained home for 28 days taking antipsychotic drugs.
- Previously patient was on homoeopathic treatment for haemophilia for more than 4 years.
- History of recurrent episodes of epistaxis, swelling in the right knee, left ankle joint, and jejunal bleeding were managed homeopathically.
- History of Koch Antikoch treatment for the same taken.

Physical General:

Thirst and appetite, adequate; sleep, sleepiness; urine and bowel habit, regular; habits/addiction, tobacco; desires, sweets.

Mental General:

The patient had suspicious behavior towards his wife. He had a delusion that his wife has an extramarital affair with his father and she will run away leaving him alone.

Assessment with Scale:

Positive and negative syndrome scale¹¹ (PANSS) was used to assess the outcome of the case after giving homoeopathic medicines.

Miasmatic trait:

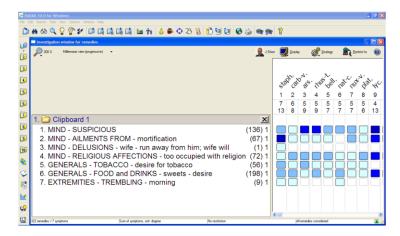
Dominant miasm – Syco-syphilitic because suspiciousness, jealousy, and tendency to harm others are the traits of syco-syphilitic miasm⁶.

Fundamental miasm – Tubercular miasm (psoro-syphilitic) Haemophilia with Schizophrenia.

Repertorization chart: Fig. 1

Staphysagria 0/1, water dose (15ml), 1 drop BD for 7 days and PL 30/2 dram, 4 pills BD for 15 days was prescribed during the first prescription.

In addition, Modified Naranjo Criteria in Homeopathy (MONARCH)¹² was used for the assessment of the case based on the 10 domains after giving homoeopathic treatment.



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Follow- up no.	Date	Complaints	Prescription
1.	01/03/2022	Suspiciousness decreased, Pain in Left Ankle and Right Knee Reduced but Swelling Persisted. No Trembling in Lower Limbs occurs occasionally at Night. Itching all over the body was reported. - PANSS Score – Total = 45 (Positive = 12, Negative = 11, General Psychopathology = 22)	
2.	13/04/2022	Suspiciousness Absent, Itching all over the body persisted. Swelling in Left Ankle and Right Knee Reduced.	- Sac Lac 30CH / 1 Dram / in globule no 30 / 4-4 x 7 Days.
3.	19/04/2022	Suspiciousness Absent, Itching all over the body on and off.	 Sac Lac 30CH / 2 Dram / in globule no 30 / 4-4 x 1 Month.
4.	26/05/2022	Suspiciousness Absent, Itching subsided. No new complaints appeared. - PANSS Score – Total = 54 (Positive = 15, Negative = 12, General Psychopathology = 27)	- Sac Lac 30CH / 2 Dram / in globule no 30 / 4-4 x 7 Days.

Result:

Table 2: The PANSS scores before and after the study were as follows

Individual components of PANSS (subscales)	Before treatment (9/2/2022)	After treatment (1/3/2022)	After treatment (26/5/2022)
1) Positive	28	12	15
2) Negative	35	11	12
3) General psychopathology	81	22	27
4) Total	144	45	54

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Sr. No	Year	Visit per Year in HIH camps	Total Number of Camps conducted by HIH after patient's Enrollment
1	2012	04	05
2	2013	11	12
3	2014	11	12
4	2015	07	12
5	2016	08	12
6	2017	04	12
7	2018	05	12
8	2019	01	12
9	2020	00	00
10	2021	00	03
11	2022	05	00
Total	11 Years	56	92

Table 3: Number of Visits in HIH Nashik Centre Camp since Enrollment

Discussion:

Haemophilia is a genetic disorder requiring lifelong treatment, and along with that if accompanied by a psychiatric illness it undoubtedly becomes a unique case to deal with. One such case of haemophilia B with paranoid schizophrenia was managed homeopathically. The combination of the two diseases is seldom. Complications of haemophilia include chronic arthropathy, hematomas, recurrent bleeds from various organs, altered daily routine, quality of life hampered, along with that, compromises in the relationship, all these things give rise to an inferiority feeling in the sufferer. The number of visits by the patient since the enrollment in the HIH centre (2012-2019) is presented in Table 3, from this data we came to know that he was regular in camps conducted till 2016, then became intermittently irregular till 2019 and thereafter was not in touch with HIH.

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Till the time he was regular under homoeopathic treatment all his ailments were managed without any major inconvenience. But the scenario changed during the period of lockdown when he could not continue the treatment. The patient eventually landed up in a state of suspiciousness due to his environmental and social factors. Suspiciousness due to the inferiority feeling was the triggering factor in the development of schizophrenia. This had worsened overall conditions both physically and mentally. After trying every possible mode of treatment there was no significant improvement seen and thereafter he came to the HIH Nashik centre. On closely assessing the schizophrenic state of the case the indicated individualized homoeopathic medicine was selected based on very characteristic concomitant¹³. Taking into consideration the totality and concomitant in this case Staphysagria 0/1 was prescribed. According to the susceptibility¹⁴ of the patient 0/1 potency was prescribed, to avoid untoward medicinal aggravation and to repeat the dose whenever necessary.

During the treatment (within 8 days), there was a positive change observed in the patient's behavior and he resumed his job, gained back his confidence, and started doing his daily activities by himself which earlier he was not able to do so. The swelling in the left ankle and right knee reduced and was now able to walk without any distress. This created confidence in the patient and likewise his inferiority feeling reduced and his Quality of life (QoL) improved. His suspiciousness towards his wife was reduced to a great extent. The score of the PANSS subscale before the study was 144 which have changed to 45 on 1st follow up. After 4 months of treatment, the score was 54 which indicates that there was a slight up gradation in the score, which could be because of the continued maintaining cause (his genetic disease producing the inferiority feeling).

Later, when the patient continued the homoeopathic treatment for a few months as add-on therapy, his adaptation to his environment improved and also alleviation of the schizophrenic symptoms was noted. Taking add-on homoeopathy for long-duration upgrades the adaptations towards the environment and situation which in turn helps to improve interpersonal, familial and social relationships¹⁵. The familial stress and anxiety¹⁵ of the family members have also been reduced. The inferiority feeling was reduced but was

still present as this is a genetic disease acting as a maintaining¹⁶ factor in every haemophilia patient's life.

In addition, the patient was assessed using Modified Naranjo Criteria in Homeopathy (MONARCH) based on 10 domains with a score of 11 out of 13.

Conclusion:

Add-on homoeopathic medicines was effective in alleviating the symptoms of paranoid schizophrenia by improving the ability to adapt to the environment and also the quality of life in terms of interpersonal, social and family relationships substantially improved.

Funding statement:

No funding was involved. Total homoeopathic treatment was done free of cost.

Conflict of interest:

None

Author's Contribution Statement:

Dr Kundu Tapas and Dr Kumat Omkar were the homoeopathic consultants for the prescription of medicine. Dr Mirza Gulfisha drafted the paper with the help of Dr Kalda Prapti for the collection of data. Dr Kundu Rita provided technical support where as Dr Ghosh Kanjaksha verified the final version of the manuscript.

Declaration of patient's consent:

Written informed consent was obtained from the patient himself and his family members for the clinical information for the sake of scientific interest and publication of data.

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