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INDIVIDUALIZED HOMOEOPATHIC MANAGEMENT OF RECURRENT RESPIRATORY TRACT INFECTIONS WITH ALLERGIC RHINITIS AND ADENOID HYPERTROPHY IN A CHILD: A LONG-TERM CASE REPORT AT DR BATRA'S

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Abstract

Background

Recurrent upper respiratory tract infections (URTIs) in children are frequently associated with allergic rhinitis, adenoid hypertrophy, impaired immunity and repeated antibiotic exposure. Persistent episodes adversely affect school attendance, quality of life and overall growth. Constitutional homoeopathic treatment aims to reduce susceptibility to recurrent infections rather than merely treating acute episodes.

Case Presentation

A child presented with recurrent cough and cold for more than two years, occurring almost twice every month after the COVID-19 pandemic period in the family. Complaints included nasal obstruction, rhinorrhoea, recurrent fever, dry cough worse at night and evening, occasional yellow expectoration, mouth breathing, constipation, allergic rhinitis, adenoid hypertrophy and recurrent dandruff. Symptoms were aggravated by cold weather, ice creams, cold drinks, fruits and dust exposure and relieved by hot water. Detailed constitutional evaluation revealed a shy, fastidious, oversensitive, stubborn child with fear of darkness and insects, desire for company and tendency to weep easily. Repertorization supported Phosphorus as the constitutional remedy, Lemna minor during acute adenoid episodes and Tuberculinum as an intercurrent remedy.

Results

After nearly two years of individualized homoeopathic treatment, the frequency and severity of respiratory infections reduced markedly. Fever episodes became rare, nasal obstruction and sneezing improved considerably, constipation became less frequent, adenoid hypertrophy

reduced clinically, mouth breathing decreased and the child remained largely free from recurrent respiratory infections during follow-up.

Keywords

Recurrent Respiratory Tract Infection, Allergic Rhinitis, Adenoid Hypertrophy, Constitutional Homoeopathy, Phosphorus, Pediatric Case Report

Introduction

Recurrent respiratory infections are among the commonest pediatric illnesses and often coexist with allergic rhinitis and enlarged adenoids. Repeated infections predispose children to frequent antibiotic use, disturbed sleep, impaired school performance and reduced quality of life. Constitutional homoeopathy attempts to modify the patient's susceptibility and reduce recurrence through individualized treatment.

Patient Information

Parameter	Details
Age	Child
Gender	Female
Occupation	UKG Student
Diagnosis	Recurrent Respiratory Tract Infection with Allergic Rhinitis and Mild Adenoid Hypertrophy

Chief Complaints

- Recurrent cough and cold since 2 years
- Episodes occurring nearly twice every month
- Nasal blockage
- Running nose
- Dry cough worse at night and evening
- Occasional yellow expectoration
- Fever on and off
- Allergic rhinitis
- Mouth breathing
- Constipation

History of Present Illness

Symptoms started after the COVID-19 period in the family, although the child herself was not infected. Complaints recurred almost twice monthly with dry cough, rhinorrhoea, nasal blockage, fever and sore throat. Episodes were aggravated by ice creams, cold drinks, fruits, cold weather, climatic changes and dust exposure and improved with warm water.

Investigations revealed mild adenoid hypertrophy. The child had previously received repeated allopathic medications with only temporary relief.

Associated Complaints

- Hair fall
- Dandruff
- Sneezing
- Mouth breathing
- Thumb sucking
- Nail biting
- Occasional worms in stool
- Constipation
- Fearful dreams

Past History

- Allergic rhinitis
- Recurrent respiratory infections
- No major hospitalization

Family History

- Grandfather: Tuberculosis, Hypertension, Diabetes Mellitus

Physical Generals

Parameter	Findings
Appetite	Decreased
Thirst	Decreased
Desire	Ice cream, sweets, potatoes, warm food
Aversion	Milk, spicy food
Thermals	Hot patient
Sleep	Restful
Dreams	Frightful
Bowels	Constipation on and off

Mental Generals

- Shy
- Reserved initially
- Fastidious
- Oversensitive
- Weeps easily
- Fear of darkness
- Fear of insects
- Desire for company

- Stubborn
- Nervous when strangers scold
- Refuses consolation when desires are not fulfilled

Clinical Examination

ENT Findings

- Mouth breathing
- Mild adenoid hypertrophy
- Nasal polyp during follow-up
- Recurrent nasal obstruction

Respiratory Examination

- Recurrent dry cough
- Occasional yellow expectoration
- No chronic wheeze

Clinical Diagnosis

- Recurrent Upper Respiratory Tract Infection (RURTI)
- Allergic Rhinitis
- Mild Adenoid Hypertrophy

Case Analysis

The child demonstrated recurrent infections due to increased susceptibility along with characteristic constitutional features including fastidiousness, oversensitivity, fearfulness, decreased appetite, recurrent respiratory infections and allergic manifestations. The family history of tuberculosis further supported a tubercular background.

PART 2

Totality of Symptoms

Mental Generals

- Fastidious
- Shy
- Oversensitive
- Weeps easily
- Desire for company
- Fear of darkness
- Fear of insects
- Stubborn
- Nervous with strangers
- Refuses consolation when desires are denied

Physical Generals

- Appetite decreased
- Thirst decreased
- Desire sweets
- Desire ice cream
- Desire warm food
- Constipation
- Hot patient
- Restful sleep
- Frightful dreams

Particular Symptoms

- Recurrent cough and cold
- Dry cough worse at night
- Yellow expectoration occasionally
- Allergic rhinitis
- Mouth breathing
- Nasal obstruction
- Sneezing from dust
- Adenoid hypertrophy
- Fever recurring
- Better by hot water
- Worse cold weather
- Worse cold food
- Worse climatic changes

Miasmatic Analysis

The case predominantly represented a Tubercular miasmatic background with Psoric manifestations.

Tubercular Features

- Recurrent respiratory infections
- Family history of tuberculosis
- Allergic tendency
- Recurrent fever
- Adenoid hypertrophy
- Frequent relapses

Psoric Features

- Sneezing

- Nasal obstruction
- Functional disturbances
- Constipation
- Hypersensitivity

Level of Susceptibility

High susceptibility, evidenced by frequent infections with good response to individualized constitutional treatment.

Repertorial Rubrics

- Mind – Fastidious
- Mind – Shy
- Mind – Fear – Darkness
- Mind – Fear – Insects
- Mind – Company – Desire for
- Mind – Weeping easily
- Nose – Coryza – recurrent
- Nose – Obstruction
- Nose – Sneezing – dust from
- Throat – Pain
- Cough – Night – aggravation
- Cough – Dry
- Respiration – Mouth breathing
- Throat – Adenoids
- Generals – Cold – aggravation
- Generals – Warm drinks ameliorate

Remedy Selection

Constitutional Remedy

Phosphorus

Selection Basis

- Fastidious
- Shy and sensitive
- Weeps easily
- Decreased appetite
- Recurrent respiratory infections
- Allergic tendency
- Sneezing from dust

Acute Remedy

Lemna minor

Prescribed during acute episodes of:

- Adenoid hypertrophy
- Nasal obstruction
- Mouth breathing
- Recurrent allergic rhinitis

Intercurrent Remedy

Tuberculinum

Selected because of:

- Recurrent respiratory infections
- Family history of tuberculosis
- Frequent relapses
- Allergic constitution

Follow-up Summary

Follow-up	Clinical Progress
Initial Months	Frequency of sneezing and rhinorrhoea reduced; constipation persisted.
4–6 Months	Fever episodes became less frequent; cough severity reduced; dandruff improved; mouth breathing persisted.
8–12 Months	Nasal polyp reduced clinically; no recurrent fever; cough became occasional; appetite improved; respiratory attacks markedly reduced.
12–18 Months	Only mild respiratory episodes after dietary indiscretions or climatic exposure; constipation improved; emotionally more stable.
18–24 Months	Child remained largely free from recurrent respiratory infections; adenoid symptoms reduced; no major respiratory complaints except occasional mild cough after cold exposure.

Outcome Assessment

Parameter	Before Treatment	Final Follow-up
Respiratory attacks	Twice monthly	Rare, mild episodes
Fever	Frequent	Absent
Nasal blockage	Severe	Minimal
Sneezing	Frequent	Occasional
Mouth breathing	Persistent	Markedly reduced
Constipation	Frequent	Improved
Adenoid symptoms	Present	Reduced clinically
Quality of life	Poor	Significantly improved

Discussion

This case demonstrates the benefit of individualized constitutional homoeopathy in reducing susceptibility to recurrent respiratory tract infections. Rather than repeatedly managing acute episodes alone, constitutional treatment using Phosphorus, supported by Lemna minor during acute adenoid-related symptoms and Tuberculinum as an intercurrent remedy, resulted in sustained reduction in infection frequency and severity. Long-term follow-up showed marked improvement in respiratory health, allergic symptoms and overall well-being.

Learning Points

- Constitutional prescribing can reduce recurrence of pediatric respiratory infections.
- Adenoid hypertrophy should be evaluated in children with persistent mouth breathing and recurrent URTIs.
- Dietary triggers and allergen avoidance improve treatment outcomes.
- Regular breathing exercises and nasal hygiene complement medical treatment.
- Long-term follow-up is essential to assess sustained improvement in recurrent allergic respiratory disorders.

Health-Related Quality of Life (HRQL)

Following treatment, the patient experienced:

- Complete or near-complete freedom from recurrent respiratory infections.
- Significant reduction in allergic rhinitis symptoms.
- Ability to tolerate previously aggravating foods with minimal or no relapse.
- Improved appetite and bowel habits.
- Better sleep quality with reduced mouth breathing.
- Increased participation in school and outdoor activities.
- Marked improvement in emotional well-being and overall quality of life.

Conclusion

This case illustrates successful long-term management of recurrent respiratory tract infections associated with allergic rhinitis and mild adenoid hypertrophy through individualized constitutional homoeopathy. Treatment with Phosphorus, supported by Lemna minor and Tuberculinum, produced a marked reduction in respiratory episodes, improvement in nasal obstruction and mouth breathing, decreased dependence on conventional medications and significant enhancement in the child's quality of life.

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