



Review Article

Volume 13 Issue 11

November 2024

BREAKING THE CODE THROUGH HOMOEOPATHIC MEDICINE IN THE EFFECTS OF DEPRESSION AMONG THE IT PROFESSION

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ABSTRACT

Depression is a mood disorder characterized by a sense of inadequacy, despondency, decreased activity, pessimism, anhedonia and sadness where these symptoms severely disrupt and adversely affect the person's life, sometimes to such an extent that suicide is attempted or results.

KEYWORDS

Depression, Stress, Low mood, Homoeopathy

Abbreviations

RDD- Recurrent depressive disorder PDD-Persistent depressive disorder

PAD SYNDROME -Phobia anxiety depersonalization syndrome PHQ-Patient health questionnaires

DSM-5-Diagnostic and statistical manual of mental disorder

INTRODUCTION:

Depression is a Common mental disorder that presents with depressed mood, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, low energy, and poor concentration.

Major depressive disorder has a prevalence of 5% in the general population & 10-20% in chronically ill medical outpatients.(1)

EPIDEMIOLOGY :

INDIAN EMPLOYEE SURVEY' by HR TECH covered 3,000 employees from sectors such as IT, Manufacturing, Financial sector and startups (2). One out of every five employee of Indian inc is suffering from work place depression, says a new survey and medical experts blame it on lack of support systems at both workplace & in personal circles”(2). Archana Bisht, director at employee assistance programme (EAP) service provider 1to1help.net, said there has been a significant rise in cases of people with depression in recent times”(2). “Depression is more than just a low mood-it is a mental health disorder,” she said, adding that out of 9,622 people who took ‘depression test’ at 1to1help.net, 56% indicated signs of depression(2).

At Cosmos Institute of Mental Health and Behavioral Sciences (CIMBS), there has been a threefold increase in number of young professionals coming with complaints of sleep disturbance, headaches, chest pain, fatigue, and burnout resulting from workplace stress over the last five years(2).

Homoeopathy is a holistic system of medicine with individualised approach and differs with regular medicine in its interpretation and application of fundamental principles.

Homoeopathy stands as a safe alternative method of treatment for depression without any suppression as it shows its effect directly on the root cause. It is a patient satisfactory treatment when compared to conventional medication, improving quality of life and general health of patient. The homoeopathic treatment extends beyond the physical symptoms to address the underlying conditions of mental stress, anxiety and depression in the patients.

FACTORS LEADING TO DEPRESSION IN IT EMPLOYEES

Various factors which leading to Depression IT employees are as follows Work-Related Factors:

1. High stress levels: Tight deadlines, heavy workload, and pressure to meet targets.
2. Long working hours: Extended workdays, night shifts, and weekend work.
3. Lack of work-life balance: Blurred boundaries between work and personal life.
4. Limited job security: Fear of layoffs, downsizing, or contract termination.
5. Poor management: Ineffective communication, inadequate support, and micromanaging.

Environmental Factors:

1. Sedentary lifestyle: Prolonged sitting, lack of physical activity.

2. Social isolation: Limited social interactions, remote work, or lonely office environments.
3. Unhealthy habits: Irregular sleep, poor diet, and substance abuse.

Individual Factors:

1. Personality traits: Perfectionism, self-criticism, and low self-esteem.
2. Mental health history: Pre-existing conditions, family history, or past trauma.
3. Lack of purpose: Feeling unfulfilled, undervalued, or disconnected from work.

IT-Specific Factors:

1. Constant learning requirements: Keeping up with rapid technological changes.
2. High expectations: Meeting customer demands, resolving complex issues.
3. Repetitive tasks: Monotony, boredom, and lack of challenge.
4. Limited creativity: Constrained by protocols, procedures, and legacy systems.

Signs of Depression in IT Employees:

1. Withdrawal from team activities
2. Decreased productivity
3. Increased absenteeism
4. Mood swings, irritability
5. Loss of interest in work or hobbies
6. Changes in appetite, sleep patterns
7. Physical complaints (headaches, backaches)

GENERAL MANAGEMENT:

1. Prioritize self-care
2. Seek support from colleagues, friends, or family
3. Take breaks, practice mindfulness
4. Set boundaries (work-life separation)
5. Engage in hobbies, exercise, or creative activities
6. Seek professional help when needed

Clinical features

Feeling sad, anxious, or empty Feeling hopeless or pessimistic Feeling of guilt, worthless, or helpless

Not enjoying things you used to enjoy

Trouble with concentration, memory, or making decisions Sleeping too much or too little

Gaining or losing weight Feeling restless or irritable Thoughts of suicide or death

Classification of depression

1. Melancholic Depression
2. Atypical Depression
3. Bipolar Mood Disorder
4. Catatonic Depression
5. Seasonal affective disorder (SAD)
6. Recurrent Depressive Disorder (RDD)
7. Persistent depressive disorder (PDD)/DYSTHYMIA
8. Phobic -anxiety depersonalization syndrome (PAD syndrome)

***Melancholic Depression**

It is characterized by a LOSS of INTEREST or Pleasure in most or all activities, a GRIEF or loss, a worsening of symptoms in the Morning hours, early-morning waking, psychomotor retardation, excessive WEIGHT LOSS (not to be confused with anorexia nervosa), or excessive guilt.

***Atypical depression**

It is characterized by mood reactivity (paradoxical anhedonia) and positively significant WEIGHT GAIN or increased appetite (comfort eating), excessive sleep or sleepiness (hypersomnia), a sensation of heaviness in limbs known as leaden paralysis, and significant social impairment as a consequence of hypersensitivity to perceived interpersonal rejection.

***Bipolar Mood (Affective) Disorder**

This disorder, earlier known as manic depressive psychosis (MDP), is characterized by recurrent episodes of mania episode and depression in the same patient at different times.

Bipolar mood disorder is further classified as follows:

- 1) Bipolar 1: This is characterized by episodes of severe mania and severe depression,
- 2) Bipolar II: This is characterized by episodes of hypomania and severe depression.

***Catatonic depression**

Catatonic depression is a rare and severe form of major depression involving disturbances of motor behavior and other symptoms. Here, the person is MUTE and almost stuporous, and either remains IMMOBILE or exhibits purposeless or even bizarre movements. Catatonic symptoms also occur in schizophrenia or in manic episodes, or may be caused by neuroleptic malignant syndrome.

***Seasonal affective disorder (SAD)**

Seasonal affective disorder (SAD) is a form of depression in which depressive episodes come on in the autumn or winter and resolve in spring. This type of depression is associated with seasonal changes in sunlight (decreased sunlight).

The diagnosis is made if at least two episodes have occurred in colder months with none at other times, over a two-year period or longer.

***Recurrent Depressive Disorder**

It can be specified into mild, moderate, or-severe without psychotic symptoms or-severe with psychotic symptoms, or in remission.

***Persistent depressive disorder (PDD)/DYSTHYMIA**

These disorders are persistent mood symptoms which last for more than 2 years but are not severe. This is also called as Dysthymia and if symptoms consist of persistent instability between mild depression and mild elation, the disorder is called as Cyclothymia.

***Phobic -anxiety depersonalization syndrome (PAD syndrome)**

This is common in women aged 20-40 years. It is characterized by diffuse anxiety, multiple phobias like agoraphobia (fear of being in public places where there are a lot of people).

Claustrophobia (fear of being in small or enclosed space), panic attacks, depressive features, etc.

INVESTIGATION

- 1 Physical examination
2. PHQ

3. Complete blood count
4. Thyroid profile
5. DSM-5
6. Psychiatric evaluation

PATIENT HEALTH QUESTIONNAIRES(PHQ)(3):

It is a depression screening in older adults can be accomplished. With multiple instruments, including the PHQ-2, PHQ-9 & Various Geriatric Depression Scales.

The American Geriatrics Society recommends using the PHQ-2 as an initial screening test for depression in older adults. If Positive, the 15-item Geriatric Depression Scale or the PHQ-9 is recommended as a follow-up test.

-DSM-5: It is a criteria for depression listed in the Diagnostic & Statistical Manual of Mental Disorder (DSM-5), PUBLISHED by the American Psychiatric Association(4).

ROLE OF HOMOEOPATHY :

Homeopathy plays a distinctive role in addressing depression disorders by employing a holistic approach that aims to treat the individual as a whole, taking into account physical, mental, and emotional aspects.

Homoeopathy recognizes the interconnectedness of physical and mental well-being. The treatment is not just focused on alleviating symptoms but on addressing the underlying imbalances contributing to Depression

Homoeopathic remedies are often administered in highly diluted forms. This gentle approach is believed to stimulate the vital force without causing adverse effects.

Homeopathy offers a potential avenue for managing cases of depression disorders by meticulously documenting individual cases in accordance with the case-taking principles outlined by Dr. Samuel Hahnemann in Organon aphorisms 83 to 104 & aphorisms 210 to 230.

Following the case-taking process, the paramount focus lies in the individualization of both the disease and the patient, a crucial step for determining the most fitting similimum.

Disease individualization, especially in the realm of psychiatric diagnoses, aligns with the DSM5 framework, which provides clinicians with a standardized language for communication and establishes Reliable diagnoses crucial for mental disorder research.

The selection of homeopathic medicines predominantly centers on mental symptoms, underlining the Importance of considering the patient's unique mental and emotional state

in the remedy selection process.

REPERTORIAL APPROACH:

KENT'S REPERTORY(5):

MIND, Anxiety suicidal : Aur, caust, dros, hepar, merc, nux, play, puls, rhus, staphy MIND,

ANXIETY, BAD news, ailments from : CALC., GELS.MIND, FASTIDIOUS : Ars., nux-v.

MIND, FEAR, bad news hearing : calc-p, dros, nat-p

MIND, FEAR, Narrow place, in- Arg. Nit

DELUSIONS, imaginations, hallucinations, illusions: ARG-N., BELL., CANN-I., COCC., HYOS.,
IGN.,

MIND, Anxiety trifles about : Anac, ars, calc, china, cocc, con, ferr, sili.

BOGER'S REPERTORY(6):

MIND, Fearsome, fright, etc. – Acon, ars, phos MIND, Frightened or startled easily – ign MIND,
Fastidious – Ars., Graph., Nux v.

MIND, thought frightful : caust, lyssin, rhus, viscPathak's repertory

Future, misfortune, forebodings: Acon; Ars; calc; psor; PulsIdeas compelling- Lach., Nit.ac

Ideas fixed: Anac; Ars+; Chin; Hell; Nat-m; Saba; Stan; Sul; Thu Delusion Spectre, ghost,
sees– Med.

FEAR, Fright, of, remains- Op.

O.E. BOERICKE'S REPERTORY(7):

MIND, fear dread dark : Acon. Apis, ars, aurum, dig, nitacid, nux, phos, plat, psor, syphil.

MIND, Fright, fear- Acon., Apis, Aur., Bell., Gels., Hyos., Hyper., Ign., Nat. m., Morph., Op., Puls.,
Samb., Ver.alb

MIND, Fear, Space (agoraphobia)- Acon., Arg. N., Arn., Calc. c., Hydroc. Ac., Nux

MIND, Fear, Water (hydrophobia)- Agave, Anag., Ant. C., Bell., Canth., Hyos., Lach., Laur., Lyssin,
Stram., Sul.,

MIND, Fear, dread, Crossing streets, crowds, excitement – Acon., Hydroc. Ac., Plat.

MIND, NIGHT-TERRORS- Acon., Aur. Br., Calc. c., Cham., Cic., Cina, Chloral., Cypris., Kalibr.,
Kali p., Scutel., Solan. N., Stram., Tub., Zinc.m.

THERAPEUTIC APPROACH:

ACONITUM NAPELLUS :

Profound fear and anxiety in the mind, coupled with heightened nervous excitability; reluctance to venture outdoors, enter crowded places with excitement or numerous people, or cross the street. The facial expression mirrors this fear; life is marred by a pervasive sense of dread; convinced that the ailment will result in fatality; anticipates the specific day of demise; experiences fear of death during pregnancy. Restless and anxious, executing tasks hastily; compelled to frequently change position; easily startled by everything.

ARSENICUM ALBUM:

Great anxiety and agonizing fear and restlessness accompany every ailment however trivial.

Mentally Restless, but physically he is too weak to move about; cannot rest in any place; changing places continually; wants to be moved from one bed to another, and lies now here now there. Anxious fear of death; thinks it is incurable, is surely going to die; dread of death, when alone, or, going to bed. Attacks of anxiety at night driving out of

bed, < after midnight. Forebodings, Predicts the time of death. Feels as if what had just been done were a dream. Fitful moods; laughing,

Singing, then sad and fearful

SEPIA OFFICINALIS

Sepia is homeopathic medicine for depression in people marked by indifference to everything. They become indifferent to loved ones and averse to occupation, to family. Sepia patients get irritable and easily offended.

IGNATIA AMARA

The complaints arise after shocks, grief, disappointment, felt unloved during childhood. Ignatia amara is homeopathic medicine for depression when the person affected suffers from changeable moods and broods silently. They are melancholic, sad, tearful (uncontrollable weeping) with unfillable emptiness felt in stomach and sensation of lump in the throat. Sighing and sobbing is commonly present.

Ignatia is well indicated in person who get emotional and sad after breakup or loss of loved ones.

NATRUM MURIATICUM

They have mental symptoms after ill effects of grief, fright, anger, separation from loved one, etc. Consolation aggravates and the person wants to be alone to cry. Anxiety, Apprehension. Fear or dreams of robbers. Awkward; in talking; hasty; drops things from nervous Weakness. Hateful; to persons who had offended him. sad, during menses. Easily angered aggravation if consoled.

Hypochondriac. Wants to be alone to Cry. Weeps involuntarily, without cause or can't weep. Cheerful, laughs, signs, dances, alternating Sadness. Dwells on past unpleasant memories.

STAPHYSAGRIA :

Ailments from reserved displeasure. Very sensitive to what others say about her. Sadness without any Cause; with irritability. Ill effects after scolding or punishment in children. Want of self control. Fear; afraid Of his shadow. Hypochondriasis. Imagines insults. Irritable, nervous, excitable and violent. Great Indignation about the things done by others or by himself; grieves about the consequences. Believes he Will lose his fortune, his wife will leave him.

CONCLUSION

In this digital world computer have become the part of life. Most of the users are unaware of the physical & mental problems caused due to prolonged use of computers. HOMOEOPATHY has good scope in acute & chronic conditions of depression.

Homeopathic Approach to Depression:

1. Constitutional treatment: Addresses the individual's unique personality, emotional, and physical characteristics.
2. Symptomatic treatment: Targets specific symptoms, such as anxiety, insomnia, or mood swings.
3. Miasmatic approach: Addresses underlying patterns of disease susceptibility.

Benefits of Homeopathy in Depression:

1. Safe and non-invasive
2. No addictive potential
3. Holistic approach
4. Addresses emotional and physical symptoms

5. Can be used alongside conventional treatment
6. Cost-effective Limitations and Precautions:
 1. Requires individualized treatment
 2. May require patience and persistence
 3. Potential interactions with conventional medications

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