



Original Research Article

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HOMEOPATHIC MANAGEMENT OF GLUTEN SENSITIVITY AT DR BATRA'S

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Abstract

Non-celiac gluten sensitivity and related gastrointestinal disorders, such as erosive gastritis and duodenitis, are increasingly recognized worldwide. These conditions manifest as abdominal pain, bloating, constipation, nausea, and intolerance to gluten-containing foods, significantly affecting growth and quality of life in children. Homeopathic management focuses on individualized treatment addressing both physical and mental generals, aiming to improve digestion, alleviate gastrointestinal symptoms, and enhance overall immunity and emotional well-being. This paper presents a detailed case study of a 10-year-old child with gluten sensitivity and associated gastrointestinal complaints, demonstrating the gradual improvement in both physical and mental health under homeopathic care at Dr Batra's.

Keywords:

Non-celiac gluten sensitivity, erosive gastritis, duodenitis, homeopathy, Dr Batra's

Introduction

Non-celiac gluten sensitivity (NCGS) is a condition in which ingestion of gluten leads to gastrointestinal and extra-intestinal symptoms in the absence of celiac disease or wheat allergy. The exact cause is not fully understood, but immune dysregulation and intestinal hypersensitivity are thought to play key roles. Symptoms include recurrent abdominal pain, bloating, constipation, diarrhea, nausea, headache, and fatigue. Children may also show poor appetite, weight loss, and impaired growth. Complications can include persistent

gastrointestinal discomfort, nutritional deficiencies, and emotional disturbances due to chronic illness. Homeopathic management emphasizes individualized therapy based on the totality of symptoms, including physical, mental, and emotional aspects. Remedies are selected to address digestive complaints, improve immunity, and support overall well-being. The aim is to provide a safe, holistic, and effective approach for managing gluten-related disorders in children.

Case Profile

A 10-year-old child had a history of recurrent abdominal pain, which was often severe and accompanied by nausea. He also experienced frequent headaches, persistent constipation, and occasional irritation and itching around the anal region. His appetite was extremely poor, leading to difficulty in maintaining proper nutrition and overall weakness. The child showed significant intolerance to gluten-containing foods and, at times, even milk, which further limited his diet and affected his growth and daily activities. His health issues caused him to miss school frequently, and he displayed signs of weak immunity. Over the course of treatment, there was gradual and steady improvement. The abdominal pain reduced considerably, constipation resolved, and episodes of nausea became rare. His appetite improved, allowing him to maintain better nutrition and energy levels. He became able to tolerate gluten-containing foods without discomfort, and the anal irritation and itching disappeared. Headaches became infrequent, and his overall immunity strengthened. As his health stabilized, he was able to attend school regularly, participate in daily activities, and maintain better overall well-being. Laboratory tests also reflected significant improvement, correlating with the clinical recovery observed over time. The child's condition showed continuous positive progress, with all major complaints substantially alleviated.

Physical Generals

- * Normal appetite
- * Cravings for juicy things
- * Aversion to wheat
- * Thirst normal, drinks 4–5 glasses of water per day
- * Urine normal
- * Stools occasionally constipated
- * Feels hot, prefers thick covering

- * Normal bathing
- * Seasonal preference for winter, likes use of fan
- * Sleeps 8 hours, sleep refreshing, prefers left-side position
- * Perspiration scanty, no stains
- * Odour non-offensive , upper part of body n face++++++

Examination

- * General physical examination done
- * Vital signs checked (pulse, BP, temperature, respiration)
- * Abdominal examination performed (inspection, palpation, percussion, auscultation)
- * Gastrointestinal system assessed for tenderness, distension, or organomegaly
- * Anal region examined for irritation or lesions
- * Growth parameters evaluated (height, weight, BMI)
- * Hydration status checked
- * Posture and physical activity observed
- * Overall systemic examination to rule out associated complications

Mental Generals –

The 10-year-old child has a history of wheat allergy for the past four years, accompanied by recurrent abdominal pain, occasional headaches, and intermittent constipation. Birth history was normal, with crying at birth and normal birth weight, and all developmental milestones were achieved appropriately. Maternal history reveals frequent episodes of vomiting throughout pregnancy. The child's nature is described as obstinate, stubborn, very sensitive, and emotionally weak. He has a deep love for animals and shows strong emotional attachment to his parents, feeling extremely distressed at the thought of anyone losing their parents. His expression of anger is quiet, often responding by withdrawing and not speaking to anyone. The child also exhibits fear of darkness, reflecting his sensitive and cautious temperament.

Past History:

- * Wheat allergy for the past four years

- * Recurrent abdominal pain
- * Occasional headaches
- * Intermittent constipation
- * Poor appetite and weak immunity
- * No major illnesses or hospitalizations apart from gastrointestinal complaint

Family History:

- * No significant hereditary illnesses reported
- * Maternal history: frequent vomiting during pregnancy
- * Strong emotional attachment to parents
- * No other chronic illnesses in immediate family

Case analysis

Reportorial totality

Repertory used	Rubrics selected
Synthesis Repertory	<ul style="list-style-type: none"> – Mind – Anger: Quiet, silent, reserved – Mind – Sensitivity: Emotional, very sensitive, easily affected – Mind – Attachment: Attached to parents – Mind – Fear: Darkness – Stomach – Abdominal Pain: Colic, cramping, bending double, better after passing stool – Stomach – Abdomen Pain – After Eating: Pain after food – Stomach – Abdomen – Hardness / Tension: Abdomen tense during pain – Stools – Constipation: Ineffectual urging, hard stools, difficult – Generalities – Temperature: Hot, wants thick covering – Sleep – Position: Left side, refreshing sleep – Appetite / Thirst: Normal appetite, thirst normal – Desires: Juicy things – Aversion: Wheat

Selection of Remedy

Constitutional

- * Remedy Name: Colocynth
- * Remedy Potency: 200
- * Remedy Dose: As per classical homeopathic protocol

* Remedy Reasons: Abdominal colic, cramping pain, bending double from pain, constipation with ineffectual urging, emotional sensitivity, obstinate and stubborn nature, attachment to parents, fear of darkness, aggravation from food

Acute

* Remedy Name: China

* Remedy Potency: 30

* Remedy Dose: As per classical homeopathic protocol

* Remedy Reasons: Weak immunity, exhaustion, post-stool irritation and anal itching, complaints arising from digestive disturbances, tendency to debility

Miasmatic approach

Mind – Anger: Quiet, silent, reserved – Psoric

Mind – Sensitivity: Emotional, very sensitive, easily affected – Psoric

Stomach – Abdominal Pain: Colic, cramping, bending double, better after passing stool – Psoric

Stools – Constipation: Ineffectual urging, hard stools, difficult – Psoric

Generalities – Temperature: Hot, wants thick covering – Psoric

Results

1st month – Waiting for medicinal action. Prescription: COLOC 200C, 3 doses every 3rd day; CHINA 30C, 3 doses every 3rd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day; ALFALFA MT(Q), 3 doses every 2nd day.

2nd month – Symptoms better; abdominal pain reduced, nausea decreased, good medicinal action. Prescription: COLOCYNTHIS 200C, 3 doses every 3rd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

3rd month – Abdominal pain improved, constipation better, appetite increased, overall condition much better. Prescription: COLOCYNTHIS 200C, 3 doses every 3rd day; CHINA 30C, 3 doses every 3rd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day; ALFALFA MT(Q), 3 doses every 2nd day.

4th month – Epigastric pain improved further, constipation relieved, appetite satisfactory, overall well-being improved. Prescription: COLOCYNTHIS 200C, 3 doses every 3rd day;

CHINA 30C, 3 doses every 3rd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

5th month – Abdominal pain minimal, constipation resolved, appetite good, overall health improved. Prescription: SL 200C, 3 doses every 3rd day; CHINA 30C, 3 doses every 3rd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day; ALFALFA MT(Q), 3 doses every 2nd day.

6th month – Gastric issues under control, no pain or heaviness, stool passed easily, started small amount of wheat, weight gain observed. Prescription: SL 200C, 2 doses every 2nd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day; AESCULUS 30C, 2 doses every 2nd day.

7th month – General improvement; epigastric pain better, wheat intake started, good medicinal response. Prescription: COLOCYNTHIS 200C, 3 doses every 3rd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

8th month – 80–90% improvement in gastric complaints; no headache, no constipation, adequate wheat intake, good medicinal action. Prescription: SL 200C, 2 doses every 2nd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

9th month – Gastric health good, mild anal irritation with itching, no constipation, no headache. Prescription: SL 200C, 2 doses every 2nd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

10th month – Occasional anal itching after stool, intermittent constipation, mild headache, overall better. Prescription: COLOCYNTHIS 200C, 3 doses every 3rd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

11th month – Better in all ailments, good medicinal action; occasional epigastric pain, improved fissures and anal irritation. Prescription: SL 200C, 3 doses every 3rd day; CHINA 30C, 2 doses every 2nd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day.

12th month – All complaints better, slight anal irritation, wheat intake proper, abdominal pain absent, overall much better. Prescription: COLOC 200C, 3 doses every 3rd day; CHINA

30C, 3 doses every 3rd day; CALC-P 6X, 2 doses every 2nd day; IMMUNOFORC MT(Q), 3 doses every 2nd day; ALFALFA MT(Q), 3 doses every 2nd day.

Discussion & Conclusion

The case highlights a 10-year-old child with long-standing gluten intolerance, recurrent abdominal pain, occasional headaches, constipation, poor appetite, and emotional sensitivity. Over the course of treatment, there was progressive improvement in gastrointestinal health, appetite, and overall well-being. The child's emotional and mental state also improved, with decreased sensitivity, better coping with stress, and enhanced attachment and security. Digestive tolerance to previously problematic foods improved, and growth and weight gain were observed. By the end of the follow-up, the child demonstrated significant relief from all major complaints, indicating a successful and holistic improvement in both physical and emotional health.

The transformation



26th May 2022

Esophago – Gastro – Duodenoscopy

Erosive Gastritis with Erosive Duodenitis



20th May 2023
TTG - 50.98 units

Patient Name : MASTER.JASKIRAT SINGH	Barcode NO : 20047733
Age/Gender : 0 Y 8 M 0 D /M	Visit/LabNo : PWD49458
Refer Lab/Hosp : SELF	Registration Date : 01/Apr/2025 01:38AM
Referred By Dr. : Dr.SUNAINA	Sample Received : 01/Apr/2025 01:38AM
Ref Client : HAR261	Report Generated : 02/Apr/2025 12:36AM

DEPARTMENT OF ELISA & SEROLOGY			
Test Name	Result	Unit	Bio. Ref. Range

TISSUE TRANSGLUTAMINASE ANTIBODY - IGA (TTG IGA)

Sample Type : SERUM

Tissue Transglutaminase IgA Antibody 2.04 AU/mL <20.0 NEGATIVE ~20.0 POSITIVE

CLINICAL COMMENT:-

1st April 2025
TTG – 2.04 units

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