

Original Research Article

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SUCCESSFUL MANAGEMENT OF INFERTILITY ASSOCIATED WITH PCOS AT DR BATRA'S® HOMEOPATHY CLINIC AFTER FAILURE OF CONVENTIONAL THERAPY

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Abstract

Polycystic Ovary Syndrome (PCOS) is a prevalent endocrine disorder affecting 6–12% of women globally and is a leading cause of infertility due to anovulation, hormonal imbalance, and metabolic dysfunction. This case study highlights a 34-year-old female presenting with infertility, irregular menses, ovarian cysts, and associated systemic and psychological disturbances. Over a follow-up period of 19 months, there was marked improvement in menstrual regularity, reduction in cystic pathology, stabilization of mental health, and overall systemic balance. The case demonstrates the role of individualized homeopathy in addressing the root cause rather than symptomatic suppression.

This transformation was achieved at Dr Batra's® Homeopathy Clinic.

Keywords

PCOS, Infertility, Medorrhinum, Homeopathy, Individualization

INTRODUCTION

PCOS is a multifactorial hormonal disorder characterized by:

- Oligomenorrhea or amenorrhea
- Hyperandrogenism
- Polycystic ovaries
- Insulin resistance

Clinical manifestations include:

- Irregular cycles
- Infertility
- Weight gain
- Acne and hirsutism

Complications include:

- Type 2 diabetes
- Cardiovascular risks
- Endometrial hyperplasia

Homeopathy addresses PCOS by:

- Regulating hormonal axis
- Improving ovarian function
- Addressing constitutional and miasmatic factors

CASE PROFILE

Age: 34 years

Chief Complaint:

- Infertility since 2 years
- Diagnosed PCOS with ovarian cysts
- Irregular, scanty, painful menses

History of Presenting Complaints:

- Menses reduced from 5 days → 2–3 days

- Clotted flow with severe dysmenorrhea
- Long-standing gastric disturbances
- Vertigo episodes
- Morning throat mucus

PHYSICAL GENERALS

Parameter	Observation
Appetite	Reduced, tolerates hunger, increased at night
Desire	Sour, meat, onion
Aversion	Not marked
Thirst	Decreased
Thermal	Hot patient
Perspiration	Profuse (recent increase)
Stool	Regular but unsatisfactory
Urine	Normal
Sleep	Unrefreshing
Dreams	Snakes
Build	Weight gain after childhood

EXAMINATION

- Weight: ~75 kg
- Pallor: Present
- BP: Within normal range
- USG: Bilateral ovarian cysts (0.3–0.5 cm)
- AMH: 3.08

MENTAL GENERALS

The patient had a **well-supported and comfortable childhood**, described as calm, pampered, and emotionally secure. She preferred indoor activities, was quiet, and sensitive by nature.

As she grew, she developed:

- **Emotional suppression** – feels like crying but cannot
- **Irritability** – expresses anger easily
- **Internal conflict** – calm exterior but emotional turmoil
- **Dependence shifting to isolation**

Post marriage:

- Significant **emotional stress**
- **Marital disharmony**
- **Lack of physical relationship**
- **Financial and emotional neglect**
- Episodes of **panic attacks**

This evolution from a **pampered, sensitive child** → **emotionally suppressed, distressed adult** formed the core of the case.

PAST HISTORY

- Tonsillitis
- Leg pains
- Chronic gastric issues

FAMILY HISTORY

- Thyroid disorders
- Recurrent pathology (suggesting miasmatic load)

CASE ANALYSIS

TOTALITY OF SYMPTOMS

- Infertility with PCOS
- Scanty, clotted menses
- Dysmenorrhea
- Hot patient
- Profuse perspiration

- Desire for sour and meat
- Emotional suppression
- Irritability
- Marital stress
- Dreams of snakes

REPERTORIAL TOTALITY

Repertory Used: Kent Repertory

Rubrics Selected:

- Mind – Ailments from disappointment
- Mind – Suppressed emotions
- Mind – Irritability
- Female – Sterility
- Female – Menses scanty
- General – Heat, patient
- Dreams – Snakes

SELECTION OF REMEDY

CONSTITUTIONAL REMEDY

Remedy: Medorrhinum

Potency: 200

Dose: Single dose followed by placebo

Reasons:

- Strong **sycotic miasm**
- Infertility + ovarian cysts
- Hot patient
- Emotional extremes
- History of suppression
- Characteristic cravings

DIFFERENTIAL REMEDIES

Remedy	Reason for Rejection
Thuja	Sycotic but lacks emotional intensity
Pulsatilla	Mild, yielding – not matching irritability
Conium	More indurated pathology

MIASMATIC APPROACH

Symptoms	Psora	Sycosis	Syphilis	Tubercular
PCOS		✓		
Cysts		✓		
Suppression	✓	✓		
Infertility		✓		

Miasmatic Predominance: Sycosis**MATERIALS AND METHODS**

- Repertory: Kent
- Method: Classical Individualization

RESULTS

Month	Progress	Prescription
1	No major change	Medorrhinum 200
2	Menses irregular	Placebo
3	Pain persists	Placebo
4	Menses slight improvement	Placebo
5	Panic attacks reduced	Placebo
6	Flow better	Placebo
7	Emotional stability improving	Placebo

8	Menses becoming regular	Placebo
9	Pain reduced	Placebo
10	Flow normalized	Placebo
11	Cycle regular	Placebo
12	General health improved	Placebo

DETAILED FOLLOW-UP INSIGHTS

- **Menstrual cycle:** Irregular → Regular
- **Pain:** Severe → Minimal
- **Flow:** Scanty → Normal
- **Mental state:** Panic → Stable
- **Systemic health:** Improved

TRANSFORMATION TABLE

Parameter	Before Treatment	After Treatment
Menses	Irregular, scanty	Regular
Pain	Severe	Minimal
PCOS	Present	Improved
Mental state	Disturbed	Stable
Fertility status	Infertile	Improving potential

DISCUSSION & CONCLUSION

This case highlights the importance of **individualized homeopathic prescribing** in PCOS-related infertility. While conventional therapy failed to restore normal reproductive function, homeopathy addressed the **root cause—miasmatic imbalance and emotional suppression**.

Medorrhinum acted deeply on:

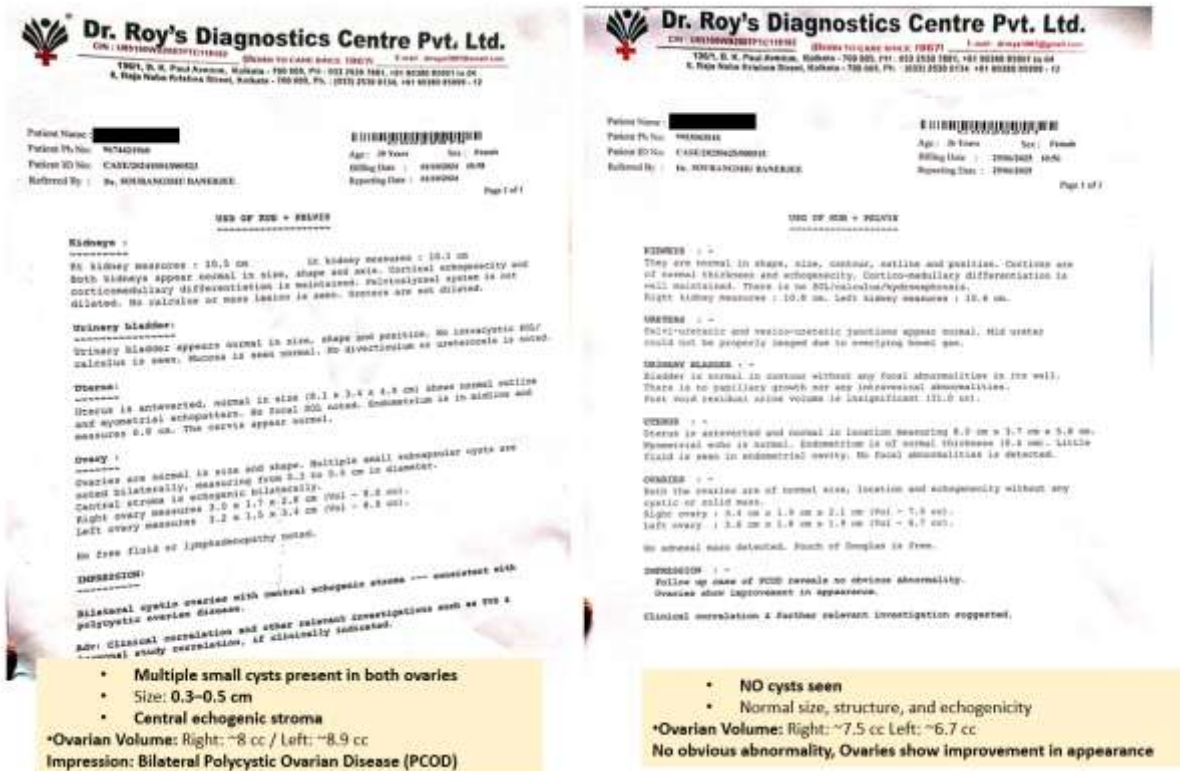
- Hormonal axis
- Emotional plane

- Systemic balance

The gradual and sustained improvement validates:

- Importance of mental generals
- Role of miasmatic prescribing
- Long-term constitutional treatment

THE TRANSFORMATION



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