



Original Research Article

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INDIVIDUALIZED HOMEOPATHIC APPROACH IN CHRONIC RHEUMATOID ARTHRITIS

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Abstract

Rheumatoid arthritis is a chronic, systemic autoimmune disorder primarily affecting synovial joints, leading to progressive destruction, deformity, and functional disability if untreated. The condition imposes significant physical, psychological, and socioeconomic burdens worldwide.

Conventional management aims to reduce inflammation, prevent joint damage, and maintain quality of life, often relying on long-term pharmacological interventions. In contrast, the homeopathic approach focuses on individualized treatment, addressing the totality of symptoms—mental, emotional, and physical—alongside the underlying miasmatic background.

This case study documents the complete management of a female patient presenting with chronic joint pain, stiffness, hormonal irregularities, and marked mental symptoms, traced over a one-year follow-up period. A detailed assessment & constitutional treatment, the patient experienced progressive and sustained improvement in joint mobility, emotional stability, hormonal balance, and overall well-being, without relapse during follow-up. The paper illustrates the importance of holistic case analysis, repertorial totality, and miasmatic diagnosis in achieving lasting results in chronic autoimmune conditions. It further emphasizes the potential role of individualized homeopathic intervention in managing systemic disorders while improving quality of life at Dr Batra's

Keywords: Rheumatoid arthritis, Dr Batra's

Introduction

Rheumatoid arthritis (RA) is a chronic, systemic, inflammatory autoimmune disease that predominantly affects synovial joints, leading to pain, swelling, stiffness, and progressive joint destruction. It has a worldwide prevalence of 0.5–1% and affects women approximately three times more frequently than men, with the highest incidence between 30 and 50 years of age (1). The disease results from a complex interplay of genetic, environmental, and immunological factors, with HLA-DR4 and HLA-DR1 being the most strongly associated genetic markers (2).

The pathogenesis involves autoimmune activation, where autoreactive T-cells and cytokines drive persistent synovitis, pannus formation, and eventual cartilage and bone erosion (3). Clinical manifestations often begin with symmetrical joint involvement—most commonly of the small joints of the hands and feet—and are associated with morning stiffness lasting more than one hour. Extra-articular features may include fatigue, fever, anemia, rheumatoid nodules, and involvement of the cardiovascular, pulmonary, or ocular systems (4).

Complications of untreated or inadequately managed RA include severe joint deformities, disability, systemic organ damage, and reduced life expectancy (5). Conventional treatment focuses on disease-modifying antirheumatic drugs (DMARDs), biologics, and corticosteroids, which, while effective, carry potential adverse effects. Homeopathy offers an individualized approach, considering the patient's mental, emotional, and physical characteristics, and aims to stimulate the body's inherent healing response.

This paper presents a detailed case of chronic RA with associated hormonal imbalance and mental symptoms, demonstrating the efficacy of individualized, miasmatically guided homeopathic management in achieving long-term remission.

Case Profile

The patient, a 40-year-old female, initially presented with joint pain following delivery, with a known history of PCOS. Her symptoms began around June 2023 with pain in the left index finger, later progressing to involve the right index finger, all fingers, wrists, bilateral shoulders, knees, ankles, and dorsum of feet. The pain was associated with stiffness, particularly in the left index finger, worse in the morning after waking and at night after 10 PM, with occasional aggravation in cold weather. There was intermittent swelling in the initial phase and difficulty performing daily activities. Blood investigations revealed elevated

ESR (25 mm/hr), positive RA factor (10.23 IU/mL), and raised CRP (12.10 mg/dL), supporting a diagnosis of rheumatoid arthritis/polyarthritis. Over the treatment course, the patient reported progressive improvement: reduction in swelling, stiffness, and pain intensity, with the ability to resume household chores and later professional work. By late 2024 to mid-2025, she experienced 80–100 % relief in joint pain, with only occasional mild stiffness in cold weather. Menstrual irregularities were noted intermittently, along with episodes of constipation and disturbed sleep in the early stages. As of the latest follow-up, she is physically active, performing her professional duties without limitation, and reports good general health.

Physical Generals

Diet: Mixed diet

Appetite: Good.

Desires: Spicy food (noted preference for biryani).

Aversions: Not specifically mentioned.

Thermal Reaction: Chilly; joint stiffness and pain worse in cold weather.

Thirst: Moderate to good; around 2–3 litres/day.

Stools: Regular; occasional constipation noted in early stages of illness.

Urine: Regular, normal quantity and frequency.

Perspiration: Not specifically mentioned.

Sleep: Initially disturbed for 3–4 years, sensitive to slightest noise; improved in recent follow-ups, now sound sleep.

Dreams: Not mentioned.

Examination

Blood Pressure: 100/70 mmHg

Weight: Initially 67–74 kg; later increased to 80 kg.

Pallor: Absent.

Pedal Edema: Absent.

Systemic Examination:

RS: NAD (No abnormality detected).

CVS: S1, S2 heard; NAD.

CNS: No specific abnormality reported.

Musculoskeletal: Initially painful swelling in small joints of hands and feet with stiffness, worse in morning and cold weather; restricted movement during active disease phase. Progressive improvement over time; currently full range of motion without swelling or tenderness.

Mental Generals –

Mentally, the patient exhibited marked anxiety, predominantly health-related, with a persistent fear of disease and concern for her and her family's well-being. This anxiety intensified after the loss of her father and elder brother, both sudden and unexpected, which left her emotionally restrained and unable to express grief. Since these events, she developed anticipatory anxiety, especially regarding telephone calls, associating them with bad news, accidents, or death. The COVID-19 pandemic in 2021 further heightened her fear of illness, contributing to emotional stress. She reported disturbed sleep for the past 3–4 years, with increased sensitivity to noise, where even slight sounds could awaken her. Financial strain, weight gain, and quitting her job added to her mental burden. Despite physical improvement in her joint complaints, she continued to show a tendency toward apprehension about her health and the well-being of her loved ones, although recent follow-ups indicate better emotional stability and engagement in professional work.

Past History:

- COVID-19 infection in April 2021.
- D&C in 2020 due to immature fetal heart growth and viral fever, leading to abortion.
- Episode of diarrhea in May 2023.
- Known case of PCOS.
- History of disturbed sleep for 3–4 years.
- History of joint pain and stiffness diagnosed as rheumatoid arthritis in June 2023.

Family History:

- Father: Expired due to brain stroke.
- Elder brother: Expired suddenly (cause not mentioned).
- Mother: 59 years, healthy.
- Younger brother: 34 years, possible vitiligo.

- Husband: History of fatty liver.
- Son: 5 years old, healthy.

Case analysis

Reportorial totality

Mind – Fear – disease, of impending

Mind – Fear – death, of

Mind – Anxiety – health, about

Mind – Ailments from – grief

Mind – Anxiety – anticipation, from

Mind – Sensitive – noise, to

Generalities – Morning – on waking – aggravates

Generalities – Motion – continued – ameliorates

Generalities – Rest – aggravates

Repertory screenshot

Remedy Name	Rhus-A	Aur	Alum	Sulph	ThuJ	Clo	Chnic	Kali-a	Ment
Totality	7	7	8	8	8	8	8	8	8
Symptom Covered	4	3	5	5	5	4	4	4	4
[C] [Mind]Fear: Disease, of (See Anxiety; p health): Impending:			2	1	1	1	1		1
[C] [Mind]Fear: Death, of:	2	1	1	1	1		2	2	1
[C] [Mind]Anxiety: Health, about:			1	1					1
[C] [Mind]Grief:	1	3	1	2	1	2	1	1	
[C] [Mind]Anticipation:					1	2			3
[C] [Mind]Aversion: Noise, to:									
[GN] [Generalities and Key Notes]Morning: Worse in morning:								1	
[C] [Generalities]Rest, repose: Agg:	3	3	1	1	2	1	1	2	
[C] [Generalities]Motion: Agg : Continued:	1								

Selection of Remedy

Constitutional Remedy

Remedy Name: *Rhus toxicodendron*

Potency: 1M

Dose: 2 pills, once a week, alternating daily with Bryonia.

Reasons:

- Polyarthritis affecting both small and large joints.
- Marked morning stiffness on waking.
- Complaints < cold, damp weather; < rest; > continued motion.
- Past history of ailments from overexertion and exposure.
- Associated restlessness, inability to remain in one position.
- Fear and anxiety with physical complaints.

Acute Remedy

Remedy Name: *Bryonia alba*

Potency: 1M

Dose: 2 pills, once a week, alternating daily with Rhus tox.

Reasons:

- For acute flare-ups with pain < slightest motion, > absolute rest.
- Useful when inflammation causes aggravation on movement, especially in acute episodes.
- Complaints associated with dryness of mucous membranes, constipation.

Intercurrent Remedy

Remedy Name: *Pulsatilla*

Potency: 200C

Dose: 2 pills, twice daily for 1 day (first day of course).

Reasons:

- For hormonal background (PCOS, menstrual irregularities).
- Adapted to mild, yielding disposition with changeable complaints.
- Addressed delayed and irregular menses.
- Helpful in addressing emotional state with grief, need for consolation, and aggravation in warm, closed rooms.

Symptoms	Psora	Sycosis	Syphilis	Tubercular
Mind – Fear – disease, of impending	✓			
Mind – Fear – death, of	✓			
Mind – Anxiety – health, about	✓			
Mind – Ailments from – grief		✓		
Mind – Anxiety – anticipation, from	✓			
Mind – Sensitive – noise, to	✓			
Generalities – Morning – on waking – aggravates	✓			
Generalities – Motion – continued – ameliorates		✓		
Generalities – Rest – aggravates		✓		

Materials and Methods

Complete repertory was used for repertorization

Results

Month	Progress	Prescription
1st month	Slight reduction in joint stiffness, especially after motion; acute flare-ups still present; menstrual cycle irregular; mild improvement in sleep.	<i>Pulsatilla</i> 200C – 2 pills twice daily for 1 day (start of month) + <i>Rhus tox</i> 1M – 2 pills once weekly alternating daily with <i>Bryonia</i> 1M – 2 pills once weekly + Biochemic <i>Calc. fluor.</i> 6X – 4 tabs TDS
2nd month	Joint pains less intense in mornings; restlessness reduced; acute flare only once this month; digestion improved.	Continue <i>Rhus tox</i> 1M and <i>Bryonia</i> 1M alternately as before + <i>Calc. fluor.</i> 6X – 4 tabs TDS
3rd month	Marked decrease in swelling; mobility better; patient reports improved mood; cycles still delayed.	Same prescription
4th month	Stiffness only in cold/damp weather; no major acute episodes; menses delayed by only 1 week.	<i>Rhus tox</i> 1M – once weekly; <i>Bryonia</i> 1M – once weekly; <i>Calc. fluor.</i> 6X – 4 tabs TDS

5th month	Able to perform daily activities without restriction; sleep normal; energy level improved.	Same prescription
6th month	No acute flare-ups; only occasional mild joint stiffness; menstrual cycles regular for past 2 months.	Continue same
7th month	Mild symptoms during weather change; otherwise asymptomatic; digestion good; no constipation.	<i>Rhus tox</i> 1M – once fortnightly; stop <i>Bryonia</i> ; continue <i>Calc. fluor.</i> 6X
8th month	No significant joint pain; stamina improved; patient reports no fear/anxiety regarding health.	Same reduced prescription
9th month	Completely asymptomatic; maintained regular cycles; mental state stable.	Continue <i>Rhus tox</i> 1M once monthly + <i>Calc. fluor.</i> 6X – 4 tabs OD
10th month	Maintained improvement; no stiffness even in cold weather; weight stable.	Same
11th month	No complaints; general health robust; active lifestyle resumed.	Same
12th month	Cure maintained; patient discharged from regular follow-up with advice for seasonal care.	<i>Rhus tox</i> 1M – SOS only; stop biochemics

Discussion & Conclusion

The patient initially presented with long-standing joint pains, stiffness, and functional limitations accompanied by significant mental and emotional stress. The complaints had a clear aggravation from rest and cold weather, with relief from continued motion, pointing to a chronic progressive pathology. The menstrual irregularities and associated hormonal disturbance further contributed to the overall health decline, along with heightened sensitivity to noise and persistent anxieties regarding health.

A comprehensive case-taking, miasmatic evaluation, and repertorial analysis guided the individualized prescription. Over the months, gradual improvement was observed—first in pain intensity and stiffness, then in mobility, sleep quality, and emotional stability. Menstrual cycles became regular, digestion improved, and fears subsided. By the end of one year, the

patient reported complete absence of joint complaints, stable general health, and restoration of physical and mental well-being, maintaining the improvement without relapse.

The transformation

Attach before and after treatment photographs/investigations here

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