

HOMOEOPATHY AND THE SILENT KILLER IN THE MODERN ERA

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ABSTRACT-

Hypertension is also referred as “*silent killer*” as some people with this disorder remain asymptomatic until it becomes severe. It is a major medical issue existing worldwide and affecting an estimated one billion people. In a national survey conducted from the year 1999 to the year 2000, it was found that 31% of people were unaware of their hypertensive state¹. The prevalence of hypertension among the citizens of the United States and Canada is found to be 32% and 22% respectively². The incidence of hypertension is higher in the Southeastern US, particularly among African Americans².

High BP isn't an illness, but a symptom or sign of internal sickness or pathological course of action. The rise in blood pressure is in fact a compensatory or conservative progression by which a satisfactory circulation of blood to the tissues is kept up, in spite of inhibition or increased flow of blood. The American and European guidelines differ for the cut-off point in the description of hypertension. Specifically, Americans describe hypertension when BP is higher than 130/80 mmHg, in all adults⁵. However, it is defined by the ESC/ESH guidelines as BP values higher than 140/90 mmHg, with 130/80 mmHg to be the intent only for those at high cardiovascular risk⁶.

Homeopathy operates on the law of similar. Homeopathy treats the sick individual, not only his disease condition as stated in Hahnemann's writing “there is no disease, but sick people”. Therefore, in cases of primary or essential HTN, homeopathy is concerned with the sick

individual having high blood pressure rather than the hypertension itself. It is the sick man who has to be restored to health and not his body. It is the constitutional makeup of an individual and the environmental influences (both intrinsic and extrinsic factors) that influences a person to evolve HTN. Hence, the totality of characteristic symptoms as narrated by the patient and the peculiar signs leads the homeopathic physician towards similar remedy which gives the benefit to the patient as a whole as well as in the symptoms of increased blood pressure.

Hahnemann stressed upon the significance of mental or emotional symptoms in the selection of similimum⁸. Homoeopathy can assist in high blood pressure cases by determining its cause through a holistic approach that looks to cure the patient as a whole. Homeopathy use symptoms to determine which homeopathic remedy will most effectively and surely start the healing response, i.e. vital force⁴. This research aims to describe role of homeopathy in ascertaining the causes of hypertension and the management hypertension. Homeopathic treatment is recommended because it not only can lower and stabilize blood pressure but it also has applauding effect on overall health and well being.

INTRODUCTION

Hypertension (HTN) is the continuous increase in the blood pressure (BP) above the standard values. The pressure put out by blood upon the blood vessel wall while it flows through it, is known as blood pressure. High BP is not an ailment, but an externalization or sign of internal malady (sickness) or pathological process. The rise in blood pressure is a compensatory or conservative process by which a satisfactory circulation of blood to the tissues is kept up, despite obstruction or increased resistance to the flow of blood.

For adult, normal blood pressure is 120/80 mmHg. It varies with age, gender, and medical condition. According to world health organization (WHO), hypertension is diagnosed when there is:

- Repeated higher blood pressure readings or Sustained BP is called as hypertension
- 3 high blood pressure readings on two successive health care visits
- Sustained systolic BP= >140mmHg
- Sustained diastolic BP= >90mmHg is considered to constitute Hypertension⁹.

Hypertension is very disturbing public health problem. It causes high morbidity and mortality worldwide. It is a major threat for subsequent cardiovascular disease.

CAUSES

Primary hypertension does not have a single, clear cause. Generally, numerous factors come together to cause it. Common factors include:

- Genes: Some people are genetically inclined to hypertension. This may be from gene mutations or inheritable abnormalities inherited from your parents.
- Age: Individuals over the age of 65 years are more at threat for hypertension.
- Race: Black non-Hispanic individuals have an advanced prevalence of hypertension.
- Obesity: Living with obesity can lead to a many cardiac issues, including hypertension.
- High alcohol consumption: Females who habitually have more than one drink per day, and Males who have more than two drinks per day, may be at an increased threat for hypertension.
- Living a sedentary lifestyle: lowered degree of fitness has been connected to hypertension.
- Living with diabetes and/or metabolic syndrome: Individuals diagnosed with either diabetes or metabolic syndrome is at a advanced threat of developing hypertension.
- High sodium intake: There is a small relationship between daily increased sodium intake (<1.5g a day) and hypertension.
- Noxious eating habits.
- Lack of physical exercise.

Secondary hypertension has at least one distinguishable cause that healthcare providers can identify. Common causes of secondary hypertension include:

- Some medications, including immunosuppressant, NSAIDs and oral contraceptives (the pill).
- Kidney disease.
- Obstructive sleep apnea.

- Primary aldosteronism.
- Recreational medicine use (including amphetamines and cocaine).
- Renal vascular conditions, which are diseases that affect blood inflow in your kidneys' arteries and veins.
- Tobacco use (including smoking, vaping and using smokeless tobacco)
- certain endocrine tumors

PATHOPHYSIOLOGY-

Hypertension is a chronic elevation of blood pressure that, in the long-term, causes end-organ detriment and increased morbidity and mortality. Hypertension is the outcome of cardiac output and peripheral vascular resistance. It follows that cases with arterial hypertension may have an increase in cardiac yield, an increase in peripheral vascular resistance, or both. In youths, the cardiac yield is frequently elevated, while in aged increased systemic vascular resistance and increased stiffness of the vasculature shows a dominant part. Vascular tone may be exhilarated because of increased α -adrenoceptor stimulation or exhilarated release of peptides such as angiotensin or endothelin. The concluding pathway is a hike in cytosolic calcium in vascular smooth muscle causing vasoconstriction. Several growthcomponents, including angiotensin and endothelin, cause an exhilaration in vascular smooth muscle mass named as vascular remodeling. Both an increment in systemic vascular resistance and in vascular stiffness augments the load levied on the left ventricle; this induces left ventricular hypertrophy and left ventricular diastolic dysfunction.

In youth, the pulse pressure generated by the left ventricle is low and the waves reflected by the peripheral vasculature occur substantially after the cessation of systole, therefore adding pressure during the early part of diastole and enhancing coronary perfusion. With ageing, stiffening of the aorta and elastic arteries exhilarates the pulse pressure. Reflected waves shift from early part of diastole to late systole. This results in exhilaration in left ventricular afterload, and contributes to left ventricular hypertrophy. The widening of the pulse pressure with ageing is a strong predictor of coronary heart complaint.

The autonomic nervous system plays a major part in the regulation of blood pressure. In hypertensive cases, both raised release of and raised peripheral sensitivity to, norepinephrine can be found. Moreover, there is exhilarated responsiveness to stressful stimulants. Another point of arterial hypertension is a resetting of the baroreflexes and dropped baroreceptor perceptivity. The renin–angiotensin complex is involved at least in some types of hypertensions (e.g. renovascular hypertension) and is concealed in the presence of primary hyperaldosteronism. Elderly or black cases tend to have low-renin hypertension. Others have high-renin hypertension and these are more probable to develop myocardial infarction and other cardiovascular complexities.

In essential hypertension and experimental hypertension, volume management and the correlation between blood pressure and sodium excretion are atypical. Significant substantiation indicates that resetting of pressure natriuresis plays a crucial role in causing hypertension. In cases with essential hypertension, resetting of pressure natriuresis is characterized depicted by a parallel shift to advanced blood pressures and salt-insensitive hypertension, or by a decreased pitch of pressure natriuresis and salt-sensitive hypertension.

SYMPTOMS-

Many subjects with increased blood pressure have no symptoms, even if the readings reach extremely high. Patients can have high blood pressure for years without any symptoms.

Some people with increased blood pressure may have:

- Headaches
- Shortness of breath
- Nosebleeds
- Fatigue or confusion
- Vision problems
- Chest pain
- A hard time breathing
- Irregular heartbeat
- Blood in the urine

- Pounding in your chest, neck, or ears
- Seizures
- Dizziness
- Nervousness
- Sweating
- Trouble sleeping
- Facial flushing
- blurred vision or other vision changes or Blood spots in eyes
- nausea
- vomiting

RISK FACTORS

Risk factors that make a person prone to have high blood pressure include:

- Having biological family members with high blood pressure, cardiovascular disease or diabetes.
- Being over age 50.
- Being Black.
- Having certain medical conditions, including chronic kidney disease, metabolic syndrome, obstructive sleep apnoea or thyroid disease.
- Having overweight or obesity.
- Not getting enough exercise.
- Eating foods high in sodium.

It is estimated that at least one in four adults in India has hypertension ¹, but, only about 12% of them have their blood pressure under control ².

- Smoking or using tobacco products
- Drinking too much

COMPLICATIONS

Untreated hypertension may lead to serious health problems including:

1. Coronary artery disease (CAD).
2. Stroke.
3. Heart attack.
4. Peripheral artery disease.
5. Kidney disease and kidney failure.
6. Complications during pregnancy.
7. Eye damage.
8. Vascular dementia.

DIAGNOSIS-

High blood pressure does not usually have any symptoms, so the only way to find out is to have your blood pressure checked.

Measuring blood pressure-

A stethoscope, arm cuff, pumps and dial were normally used to measure your blood pressure, but automatic devices with sensors and digital displays are commonly used nowadays.

It is best to sit down with your back supported and legs uncrossed for at least 5 minutes before the test. Roll up sleeves or take-off any long-sleeved apparel so the cuff can be fixed around patient's upper arm. Try to make them calm and relax and ask them to avoid talking while the test is carried out.

During the test:

- Hold out one of patient's arm so it is at the same level as his heart, and the cuff is placed around it. His arm should be backed in this position with a cushion or the arm of a chair, for example.

- the cuff is pumped up to restrict the blood flow in your arm – this squeezing may feel a bit uncomfortable, but only lasts a few seconds
- the pressure in the cuff is slowly released and detectors sense vibrations in your arteries, a doctor will use a stethoscope to detect these, if your blood pressure is measured manually
- the pressure in the cuff is recorded at 2 points as the blood flow starts to return to your arm, these measurements are used to give your blood pressure reading

Ambulatory (24-hour) blood pressure monitoring

Having a raised blood pressure reading in 1 test does not necessarily mean you have high blood pressure. Blood pressure can fluctuate throughout the day. Feeling anxious or stressed when you visit your doctor can also raise your blood pressure. If the person has a high reading, he may be asked to take some readings with a 24-hour monitor that checks his blood pressure throughout the day. This will confirm whether you have constantly high blood pressure. It is termed as 24-hour or ambulatory blood pressure monitoring.

LABORATORY INVESTIGATIONS

In a hypertensive patient following important laboratory investigations should be carried out -

For most hypertensive patients -

- Urine for protein
- Microscopic(RBCs/sediments)
- Hemoglobin, fasting bloodglucose
- Serum creatinine, potassium, and totalcholesterol
- Electrocardiogram

When cost is not a restriction, additional investigations are -

- Lipidprofile
- Uric acid
- Chest x-ray

- Echocardiogram

HOMOEOPATHIC MANAGEMENT

Homeopathy considers health as a state indicating a harmonious functioning of the vital force. The disease is a gap in relation to health, which develops when the vital force is unable to overcome the obstacles to its smooth operation. It can be considered as the total response of the organism to factors unfavorable, such as, environmental conditions, internal or external, conditioned by constitutional, inherited, or acquired factors. This goes for all diseases, including hypertension. A more detailed concept of modern health and disease accepted in the world of medicine shows that today they are relating to the homeopathic basis. Maybe that nothing would summarize this best that the concept of etiology of hypertension, which is regarded as the product of "constitution" and "environment. The essence is contained in the statement of Hahnemann: *"there are no diseases, but the sick"*. Perhaps a more eloquent exposition is given by Dr Kent, says in his lecture on the sick, allopath thinks that the changes in tissue are all that he has for the sick man. But homeopathy perceives that there is something before the results. It is the man who is sick and who must be restored, not his body, not his tissues. The key to homeopathic treatment lies in its holistic and individualistic approach. For a homeopathic physician, it is the person, who is sick and not body parts. Therefore, the physician would take into consideration the totality of the complaints and its effects on the suffering individual, before prescribing medicine. The physician perceives all the derangements at physical and mental level, bring out a conceptual image of the patient, through the totality of the symptoms and select the medicine, most similar to the disease picture. It is by virtue of this principle of homeopathy that two persons suffering from the same disease of the same name would get different homeopathic remedies. In Boyds's pathology, it is mentioned that the patient with heart disease is not just an internal combustion engine with a leaking valve but a sensitive human being with a diseased heart. Disease in man is never the same as disease in experimental animal, for in man

the emotions come into play. It is the man or woman rather than the disease name to be treated. There is always the psychic aspect to be considered as well as the soma.

The correctness of similar approach, however, is supported by ultramodern physiology and psychosomatic drug, which have exhaustively verified the correspondence between physical and emotional conditions. This correlation is also emphasized EEG and biofeedback researches which, for example, demonstrated that deep mental concentration or meditation may result into an accelerated brain blood flow, at the same time causing a relaxation of striated muscles and reduced arterial pressure values.

The homeopathic approach to hypertensive patients is therefore focused on the individual. Thus, in cases of hypertension also, homeopathy is focused on the patient suffering from hypertension, rather than on hypertension itself. All the characteristic signs and symptoms presented by the patient lead the homeopath to the remedy. The remedy most similar to his nature relieves/cures the totality of symptoms and with it the disease condition itself gets relieved/cured.

HOMOEOPATHIC THERAPEUTICS

Amylenum nitrosum – For High Blood Pressure with Constricted feeling around the heart. A sensation of swelling in the chest, fluttering in the heart and boosted beating of the heart are the other symptoms that indicate the need for this medicine.

Belladonna- indicates the violence of the attacks and the suddenness of onset. Chest pressure in the morning. Impossible to breathe in the room, better in the open air. Violent palpitations sometimes felt in the head. Palpitation of the heart during the ascent. Tremor of the heart, with anxiety and oppressive pain. The neuralgic pains come and go suddenly. Beats throughout the body. Melancholy, with sorrow, hypochondriac humour and moral discouragement. Suicidal disposition. Sleepy but cannot sleep. Sweat only on the covered part. Belladonna is suitable for bilious and lymphatic temperament. Fair hair and complexion, blue eyes.

Crataegus oxyacantha – Helps to lower the blood pressure by dissolving the calcareous deposits in the arteries. Symptoms reflecting this medicine include pain in the region of the heart, heaviness of chest, accelerated pulse and irregular pulse. Other symptoms involve anxiety and cardiac dyspnoea.

Digitalis purpurea – The pulse is weak, irregular and unusually slow. Weakness and dilatation of the myocardium and insufficiency of the heart muscle. It stimulates the heart muscles and increases the strength of systole. Hypertrophy with dilatation. Atrial fibrillation. The slightest effort causes violent palpitations. Mitral disease causes an irregular heart. Feeling as if the heart were suddenly stopping. Cardiac dropsy. Audible palpitations. Chest tightness with cyanosis.

Glonoine – Excellent remedy for congestive headaches. Hyperemia of the brain due to excess heat or cold. Excellent for intercranial, climacteric or menstrual suppression disorders. Rushing of blood to the head and heart. Tendency to sudden and violent traffic irregularities. Violent convulsions, associated with cerebral congestion. Pulsing sensation throughout the body. Sciatica in atheromatous subjects, with limbs shriveled by the cold; seasickness. Confusion, with dizziness. Effects of insolation; heat on the head, as among composers and workers in the light of gas and electricity. Brain congestion. The head appears extremely large, as if the skull is too small for the brain. Headaches from the sun; increases and decreases with the sun. Shocks in the head, synchronic with the pulse. Headaches instead of periods. Threat of apoplexy. Laborious action. Floating. Palpitations with dyspnea. Any exertion causes a rushing of blood to the heart and fainting. Throbbing throughout the body right down to the fingertips. Better, cognac. Worse still, in the sun; exposure to sun, gas, open fire; Jar, stooping down, having his hair cut; peaches, stimulants; elongate; from 6 a.m. to noon; left side.

Latrodectus Mactans – For high blood pressure accompanied by severe heart pain. Latrodectus Mactans is a medicine for high blood pressure accompanied by severe heart pain. Heart pain expands to the shoulder or arm and fingers. There may be numbness of the upper extremities, choking, restlessness and extreme weakness.

Nux Vomica – For High Blood Pressure in Young People Nux Vomica for High Blood Pressure is a useful medicine for young people who are adopting modern, sedentary lifestyle

habits. These lifestyle habits include smoking, alcohol consumption, sedentary lifestyle, lack of exercise, etc.

Rauwolfia serpentina- this torn drug appeared only very recently and began to gain laurels in arterial hypertension, in its varying degrees of intensity and acuity. Violent congestion, throbbing and bursting headaches quickly disappear, bleeding from the nose or elsewhere quickly stops, dizziness disappears, normal sleep is restored, and the patient soon feels that tranquility ceases, dizziness disappears. Normal sleep is restored and the patient quickly feels peace of mind and body. The drug has not yet been tested in healthy people and, in homeopathic terms, it is only used clinically.

Strophanthus hispidus – High blood pressure due to arteriosclerosis Strophanthus hispidus is a medicine for high blood pressure in older people due to arteriosclerosis (hardening, thickening and loss of elasticity of the arterial walls). Strong palpitations that worsen with emotional release and exercise are noted. Symptoms include constriction behind the breastbone, difficulty breathing, alternating fast and slow pulse.

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