

## HOMOEOPATHIC TREATMENT IN DYSMENORRHEA: A NARRATIVE REVIEW

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### ABSTRACT

Dysmenorrhea, characterized by debilitating menstrual pain, presents a significant challenge to the quality of life for millions of menstruating individuals worldwide. Conventional treatments often include nonsteroidal anti-inflammatory drugs (NSAIDs) and hormonal therapies, but concerns regarding side effects and long-term efficacy persist. Homeopathy offers a holistic and individualized approach to address dysmenorrhea, aiming to alleviate symptoms while promoting overall well-being. Homeopathic remedies, such as Pulsatilla, Magnesia phosphoricum, Colocynthis, Sepia, etc are tailored to the unique symptomatology and constitution of each patient. While large-scale clinical trials specifically evaluating the efficacy of homeopathy in dysmenorrhea are limited, existing evidence and clinical experience suggest potential benefits in reducing pain intensity and duration. By embracing homeopathy as a complementary or alternative treatment

option, healthcare providers can offer personalized care to individuals seeking natural and holistic approaches to menstrual pain relief.

**KEYWORDS:** Dysmenorrhea, Homoeopathy, Sepia, Hormonal imbalance.

### INTRODUCTION

Dysmenorrhea is characterized by painful menstruation that is severe enough to interfere with daily activities.<sup>[1]</sup> It is the most prevalent gynecological condition and one of the main reasons why women experience pelvic pain. The reported prevalence rate of dysmenorrhea

varies from 16.8% to 81%, with estimations as high as 90%.<sup>[1]</sup> The most common kind of pain is dull, aching, cramping, and it starts in the pelvis or lower abdomen and can spread to the back and thighs. A few days prior to menstruation, symptoms may start, peak on the first day of flow, and then gradually decrease over a few days.<sup>[2]</sup>

### **There are two types of dysmenorrhea: primary and secondary**

- a. **Primary Dysmenorrhea:** This type of dysmenorrhea occurs in the absence of any underlying pelvic pathology. It typically begins within a few years of menarche (the onset of menstruation) and is believed to result from increased prostaglandin production, leading to uterine muscle contractions and pain. Primary dysmenorrhea is confined almost exclusively to the ovulatory cycle and affects 15–25% of women. The pain normally lasts for the first one to two days after the menstrual cycle starts, or perhaps even sooner. Primary dysmenorrhea discomfort is characterized as spasmodic. It is placed on top of a persistent lower abdomen ache that may also radiate to the thigh or back. In addition, the patients may report headaches, diarrhea, nausea, vomiting, or exhaustion.
- b. **Secondary Dysmenorrhea:** Secondary dysmenorrhea is associated with underlying pelvic conditions such as endometriosis, adenomyosis, fibroids, pelvic inflammatory disease (PID), or anatomical abnormalities in the reproductive organs. The pain in secondary dysmenorrhea often worsens over time and may be accompanied by other symptoms suggestive of an underlying condition.<sup>[1][2]</sup>

### **Causes of Dysmenorrhea**

The specific reasons behind primary or secondary dysmenorrhea differ. Typical causes of dysmenorrhea include the following:

1. **Elevated Levels of Prostaglandins:** The uterine lining produces prostaglandins, which are compounds that resemble hormones. Higher uterine contractions and higher pain sensitivity during the menstrual cycle can result from elevated prostaglandin levels.
2. **Inflammatory Disorders:** Through inducing pain and inflammation in the pelvic area, inflammatory disorders such as adenomyosis, endometriosis, and pelvic inflammatory disease (PID) can result in secondary dysmenorrhea.
  - i) Uterine fibroids, also known as leiomyomas, are benign, non-cancerous growths that can develop in the uterus and grow outside, inside, or against the wall.
  - ii) Endometriosis: An illness where cells lining the uterus begin to proliferate outside of the uterus, such as in the rectum, ovaries, fallopian tubes, and bladder.

- iii) Pelvic inflammatory disease (PID): An infection in a female's reproductive organs. The uterus, cervix, ovaries, and fallopian tubes may all experience it. Bacterial infections acquired through sexual contact are the primary cause.
- iv) Adenomyosis: A disorder in which the uterine lining starts to develop into the uterine muscle layer.
- 3. **Anatomical Abnormalities:** Because they put more pressure on the surrounding tissues or create a mechanical obstruction, structural abnormalities of the uterus or cervix, such as fibroids, polyps, or a retroverted uterus, can aggravate dysmenorrhea.
- 4. **Hormonal Imbalances:** Variations in the amounts of certain hormones, especially progesterone and estrogen, can affect how bad menstruation hurts. Thyroid issues and polycystic ovarian syndrome (PCOS), which can worsen dysmenorrhea, are also linked to hormonal imbalances.<sup>[2]</sup>

### Risk factors of Dysmenorrhea

- 1. Women under the age of twenty
- 2. Girls who enter puberty before turning 11 years old
- 3. Women with a family history of uncomfortable menstruation
- 4. Prolonged menstruation and heavy periods
- 5. Women who smoke<sup>[2]</sup>

### Symptoms of Dysmenorrhea

The degree of dysmenorrhea symptoms varies and can include:

- 1. **Lower abdominal cramping or spasmodic pain,** which can also extend to the thighs or lower back, is the primary symptom of dysmenorrhea. Usually starting either before or during menstruation, the discomfort is characterized as dull, throbbing, or colicky. The pain begins a few hours before or just with the onset of menstruation. The severity of pain usually last for few hours, may extend to 24 hours but seldom persist beyond 48 hours.
- 2. **Nausea and Vomiting:** Some dysmenorrhea sufferers have gastrointestinal problems, nausea, or vomiting during their menstrual cycles, which can make their suffering worse.
- 3. **Headaches and Fatigue:** Dysmenorrhea can cause headaches, exhaustion, lightheadedness, or episodes of fainting, especially when there is extreme pain or ongoing monthly bleeding.
- 4. **Emotional Symptoms:** People with dysmenorrhea may experience mood swings, irritability, anxiety, or depression as a result of hormonal variations related to

menstruation.<sup>[1]</sup>

### Diagnosis of Dysmenorrhea

A thorough medical history that includes a clear description of the patient's symptoms, menstrual cycles, and any related medical disorders is usually required in order to diagnose dysmenorrhea. One way to check for indications of pelvic inflammation, structural irregularities, or pain is to do a pelvic examination. To check for underlying pelvic pathology, additional diagnostic procedures like laparoscopy, magnetic resonance imaging (MRI), or ultrasound may be advised in some circumstances.<sup>[2]</sup>

### Treatment for Dysmenorrhea

Dysmenorrhea treatment aims to reduce pain and improve quality of life. Common options include NSAIDs like ibuprofen, naproxen, and mefenamic acid, hormonal therapies like birth control tablets or IUDs, and supplementary therapies like acupuncture, chiropractic adjustments, herbal medicines, and nutritional supplements. However, there is limited evidence supporting the effectiveness of these treatments, necessitating further investigation. These treatments are essential for managing dysmenorrhea. Surgical interventions like laparoscopic endometriosis excision, fibroids myomectomy, or hysterectomy can be considered for severe dysmenorrhea due to pelvic pathology, aiming to alleviate symptoms and improve quality of life.<sup>[1]</sup>

### Life style modification

Apart from pharmacological interventions, lifestyle adjustments and self care techniques can assist individuals in coping with the symptoms of dysmenorrhea:

1. **Heat therapy:** This method of relieving menstrual cramps and relaxing uterine muscles involves placing a heating pad, warm compress, or warm bath on the lower abdomen.
2. **Frequent Exercise:** Regular exercise, such as yoga, swimming, or walking, can aid with circulation, stress reduction, and menstrual pain relief.
3. **Dietary adjustments:** Eating a well-balanced diet high in fruits, vegetables, whole grains, and lean meats while limiting intake of processed foods, alcohol, and caffeine may help lower inflammation and improve menstrual health in general.
4. **Stress Management:** Reducing stress and tension can help ease the symptoms of dysmenorrhea. Some relaxing strategies to try are deep breathing, meditation, or mindfulness.<sup>[3][8]</sup>

### Homoeopathic medicines for Dysmenorrhea

Homoeopathy is a comprehensive medical system based on the ideas of potentization—the diluting and succussion of drugs to maximize their therapeutic effects while reducing their toxicity—and the tenet of "like cures like." The goal of homoeopathic remedies is to support the body's natural healing process by tailoring each treatment to the unique symptoms and features of each patient. Several homeopathic remedies have been traditionally used for managing dysmenorrhea. Some commonly prescribed remedies include:

1. **Belladonna** causes throbbing, violent pains, worse on the right side, sudden onset, bright red, profuse bleeding, congested uterus, bear down sensation, and irritability. Itching, thirst, and worse motion, light, and noise are common symptoms.<sup>[4]</sup>
2. **Borax** causes membranous dysmenorrhea, with early, profuse menstruation, colic, nausea, and stitching pains in the pectoral region, accompanied by sterility.<sup>[6]</sup>
3. **Bromium** can cause membranous dysmenorrhea, violent abdominal spasms, premature red blood flow, exhaustion, and hard swelling in the ovarian region.<sup>[4]</sup>
4. **Bufo** –The patient experiences regular, pale fluid blood discharge with clots, an epileptic aura from the uterus to the stomach, burning heat, and stitches in the ovaries.<sup>[6]</sup>
5. **Calcarea carb** is known to cause swelling and pain in breasts before menstruation, particularly in fat ladies and females with thyroid and pituitary dysfunction.<sup>[5]</sup>
6. **Cimicifuga** is a remedy for dysmenorrhea characterized by pain in the lower abdomen, typically starting on the first day of menstruation and persisting until the flow ceases. It addresses both mental and physical symptoms aggravated by menstrual flow.<sup>[4]</sup>
7. **Chamomilla**'s symptoms include hypersensitivity, irritability, intense pain, black blood clots, bright red blood, and cold drink cravings, especially lying down.<sup>[6]</sup>
8. **Colocynthis**, resembling Mag-Phos, emphasizes amelioration from hard pressure, with heat being more important than hard pressure. It is irritable, indignant, and aggravates anger.<sup>[4]</sup>
9. **Collinsonia** is a condition characterized by severe dysmenorrhea, convulsions, womb pain, cardiac nerve irritation, and suppressed menstrual return after heart trouble has subsided.<sup>[4]</sup>
10. **Ipecacuanha** is a natural remedy for painful periods with nausea and vomiting, causing persistent nausea in the lower abdomen, cutting pain in the uterus, and heavy, bright red bleeding during periods.<sup>[6]</sup>
11. **Kali Carbonicum** is a medication prescribed for menstrual pain in the lower abdomen, back, and hips, causing severe backache that worsens with walking. Relief can be

achieved through sitting or back pressure.<sup>[5]</sup>

**12. Lac Caninum** is a painful swelling of the breasts before a period, often accompanied by gushes and alternating side-to-side pains.<sup>[6]</sup>

**13. Lachesis** can cause PMS symptoms like irritability, jealousy, depression, headache, and heat flushes. It can also cause severe cramps due to clothing pressure. It's better from open air, cold drinks, and talking, but worse from sleep and heat.<sup>[4]</sup>

**14. Magnesia Phosphoricum** is a common remedy for menstrual issues, often seen in women with dark periods. This is the typical picture of a woman with her period, doubled up with a hot water bottle or heating pad pressed firmly against her stomach. It involves hot baths, pressure, and lying on the right side, with cold drinks being the third option.<sup>[6]</sup>

**15. Nux Vomica** is characterized by pain in the lower back, irritability, impatience, anger, and a desire for fats and spicy foods.<sup>[5]</sup>

**16. Pulsatilla** individuals are easily suppressed by wet feet or bathing, with irregular and changeable menstrual cycles. They are weepy, changeable, shy, dependent, and crave nurturing, love, and attention. They are thirstless, crave creamy things, and prefer warm environments over warm ones.<sup>[5]</sup>

**17. Sabina** experiences severe cramps, pain, and blood mixed with dark clots, shooting pain up the vagina, and prefers lying flat on the back with extended limbs.<sup>[6]</sup>

**18. Secale-** Continuous discharge of watery black blood until the next period.<sup>[4]</sup>

**19. Sepia** is a condition characterized by a weak uterus, late, scanty, irregular, or profuse menstruation, violent vaginal stitches, low sex drive, anger, fatigue, chilly, irritable, and over-worked mood. It can be improved by exercise and better with warmth.<sup>[6]</sup>

**20. Tuberculinum** causes painful, early, profuse, and long-lasting pain, increasing with flow and menstruation, and persists for a long time.<sup>[4]</sup>

**21. Veratrum Album** symptoms include heavy periods, severe cramps, diarrhea, vomiting, chilliness, cold sweat, weakness, exhaustion, fainting, and may desire ice water.<sup>[5]</sup>

**22. Viburnum opulus** is a remedy that causes sudden uterine pain before menstruation, backache during menstruation, and spasmodic dysuria in hysterical individuals.<sup>[6]</sup>

## CONCLUSION

With a focus on customized treatment depending on the patient's symptoms and constitution, homoeopathy provides a comprehensive approach to addressing dysmenorrhea. Existing data and clinical experience indicate that homoeopathy may be a useful supplement or alternative to conventional medicines for women looking for natural and better solutions for menstrual

pain alleviation, even if more research is required to definitively confirm its efficacy. The aforementioned therapeutic medications are often and effectively used to treat dysmenorrhea. Patients with dysmenorrhea homoeopathic medicines may also benefit greatly from use of constitutional homoeopathic medicines (similimum).

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