

HOMOEOPATHY FOR ACUTE VIRAL ENCEPHALITIS IN A CHILD – A CASE REPORT

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ABSTRACT

According to National Vector Borne Disease Control Programme AES /JE is prevalent in 22 States/Union territories and most prevalent in Uttar Pradesh (UP). A case of 2 year old boy is reported here to outpatient department of for fever (101°F), inability to talk, grinding of teeth, seizures, body ache, inflamed lips and face and redness of eyes who was given *Belladonna* 200/ 1dose stat followed by placebo 30/TDS as add –on to allopathic treatment given by physician for 5 days with assessment from MGGCS. Patient showed positive response with

improvement after add on homoeopathic treatment.

KEYWORDS: Acute viral encephalitis, Homoeopathy, Modified Glasglow coma scale, *Belladonna*.

INTRODUCTION

Acute viral encephalitis is a rare but devastating complication of common virus infections. Primary viral encephalitis is due to brain invasion by the virus and subsequent replication in the central nervous system, whereas post infectious encephalitis is thought to be immune-mediated. The most frequent causes of primary encephalitis worldwide are rabies and the arboviruses, which comprise different families of viruses distributed according to geography and seasonality.^[1] Acute Encephalitis Syndrome (AES) is a constellation of clinical signs and/ or symptoms, i.e. acute fever, with an acute change in mental status and/ or new onset of seizures that signifies acute inflammation of brain cells and/or new onset of seizures (excluding simple febrile seizures) in a person of any age at any time of year. The underlying cause of AES is many such as viruses, bacteria, mycobacteria, however, the aetiology still remains unknown in 68-75% cases. The causative agent of AES varies with season and geographical location, and predominantly affects population below 15 years.^[2] According to

National Vector Borne Disease Control Programme AES /JE is prevalent in 22 States/Union territories and most prevalent in Uttarpradesh and Bihar state. UP is one of the states which is most populous in India and eastern UP is the endemic zone to JE since 1970. There are annual outbreaks of this illness in the monsoon/post monsoon season.^[3] Despite use of antiviral drugs, sequelae remain high and relapses may occur, presumably secondary to HSV latency in the brain.^[1] Central Council for Research in Homoeopathy (CCRH) as well Homeopathy boards of various states have been taking steps for exploring the usefulness of Homoeopathy in preventing/treating epidemic/endemic diseases including AES/JE. Continuous efforts are being made to document the treatment and preventive effects of homoeopathic medicines in AES/JE.^[4] many published basic researches, clinical trials suggest effective role of homeopathy as add on therapy for AEV.^[5,6,7]

Patient information

A case of 2 year old boy is reported to outpatient department of for fever (101°F), inability to talk, grinding of teeth, seizures, body ache, inflamed lips and face and redness of eyes since one day on 10/09/2019.

H/o Present complaints

Patient was apparently well a day ago and he suddenly started complaints of fever, inability to talk, body ache, seizures and inflamed face and redness of eyes.

Mentals

Child was fearful and disoriented.

Physical generals

Appetite reduced with desires for orange and aversion to milk. Thirsty. Thermal reaction: Hot. Excessive perspiration.

Particular

Fever (101°F) with coldness and body ache. Grinding of teeth.

Redness of eyes and inflamed lips. Inability to talk

Seizures

Physical examination

Weight – 7kgs. Height – cms, Nourishment – poor

Face: inflamed Lymphadenopathy – cervical + Neck – little stiff

Temp. - 101°F Pulse – 119 / min Orientation – poor

Systemic examination

GIT – tenderness ++; oedema +;

CNS - Neck stiffness +; response to vocal stimuli +; altered sensorium+

Sensory, motor & cranial nerves – NAD

Lumbosacral spine – NAD

Laboratory investigation

IgM antibody ++ (10/09/2019)

Modified glassgow scale score on 10/09/2019 – 6

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Srl no. 190 [REDACTED] Date 10-09-2019

Patient's Name:- Master Ansh Raj Age/Sex 02 yrs/M

Refd by Dr. Self

HAEMATOLOGY REPORT

TEST	RESULT	NORMAL RANGE
Total Leukocyte Count	29,800	4,000-11,000 cu/mm
Differential Count		
Polymorphs	83%	40-70%
Lymphocyte	12%	20-40%
Monocytes	02%	03-05%
Eosinophils	03%	02-06%
Basophils	00%	00-01%

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Figure 1: Hematology report of 10/09/2019.


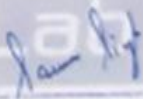
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Facility of All Routine and Special Pathological Investigation		
Srl no. 86	Date 10-09-2019	
Patient's Name:- Master Ansh Raj	Age/Sex 02 yrs/Male	
Refd by Dr. Self		
SEROLOGY REPORT		
TEST FOR JAPANESE ENCEPHALITIS:-		
TEST	RESULT	REFERENCE
Elisa for JE IgM	Positive	Negative/Positive
Method :- Chromatographic/Card		
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Figure 2: Serology report of JE IgM on 10/09/2019.



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<div style="text-align: center;">██████████</div>			
Name : Master Ansh raj Visit No. : V490093001 Age/Gender : 02 Y/Male Referred by : Self		Patient No. : ADLP490093006 Registered On : 10/09/2019 14:05 Collected On : 10/09/2019 15:46 Reported On : 10/09/2019 18:28 Report Status : Final	
MICROBIOLOGY			
CSF ANALYSIS PHYSICAL EXAMINATION(MICROSCOPIC)			
Volume	5	ml	Method : Automated & Microscopic
Colour	Colourless		Method : Automated & Microscopic
Appearance	Clear		Method : Automated & Microscopic
Cobweb/Congulum	Present		Method : Automated & Microscopic
Xanthochromia	Absent		Method : Automated & Microscopic
CHEMICAL EXAMINATION			
Protein	66	mg/dl	15 - 45 Method : Automated & Microscopic
Glucose	90	mg/dl	90 - 90 Method : Automated & Microscopic
MICROSCOPIC EXAMINATION			
RBC's	00 - 00	/h.p.f	Method : Automated & Microscopic
Total leucocyte count	570	cells/cum m	0 - 5 /cu mm Method : Automated & Microscopic
Polymorphs	12	%	Method : Automated & Microscopic
Lymphocytes	82	%	Method : Automated & Microscopic
All tests are issued after validation.			
*** End Of Report ***			
 Dr SAURAV SINGH SENIOR PATHOLOGIST			
ACCURATE DIAGNOSTIC LAB PVT.LTD MD (PATHOLOGY) DIRECTOR			

Figure 3: CSF analysis report of 10/09/2019.

Analysis of case

Mentals	Physical generals	Particulars
Disorientated	Thermal: Hot	Fever: 101°F & Body ache
Fearful	Thirsty	Inability to talk
	Aversion: Milk	Grinding of teeth
	Desire for orange	Seizers
		Inflamed face
		Redness of eyes.

Totality of symptoms

1. Fearful
2. Desire for orange
3. Thirsty
4. Aversion: Milk
5. Thermal: Hot
6. Fever: 101°F
7. Disorientated
8. Inability to talk
9. Grinding of teeth
10. Seizers
11. Body ache
12. Inflamed face
13. Redness of eyes.

Table 1: Repertorial totality^[8]

S. no.	Symptoms	Rubrics
1.	Fear	Mind- fear
2.	Desire for oranges	Stomach – desires- oranges
3.	Aversion: milk	Stomach – aversion to- milk
4.	Thirsty	Stomach- thirst
5.	Inability to talk	Mouth- speech- difficult
6.	Fever	Fever- heat in general
7.	Grinding of teeth	Teeth- grinding
8.	Disorientation and incoordination in walking	Extremities- incoordination
9.	Thermal reaction :hot	Generals- heat-sensation of
10.	Inflamed face & lips	Face- inflammation- lips
11.	Body ache	Extremities-pain- aching
12.	Redness of eyes	Eyes-redness
13.	Epileptic fits	Generals- convulsions- epileptic

Repertorisation: Repertory sheet attached

Figure 1: Repertorisation sheet.

Repertorial result

1. *Belladonna* 26/11
2. *Mercurious* 21/11
3. *Calcarea* 22/10
4. *Sulphur* 22/10
5. *Phosphorus* 21/10

Prescription

Belladonna 200/ 1dose stat followed by placebo 30/TDS as add –on to allopathic treatment given by physician for 5 days on visit 10/09/2019 at 11:00 am. Considering that medicine is covering maximum repertorial totality³ and general symptoms of patient along with allopathic treatment.

High potency was selected as acuteness and severity of symptoms, young age, high susceptibility and medicine was covering maximum symptoms.^[9,10]

Table 2: Shows follow up.

Date	Change in symptoms	Prescription with justification
10/09/2019 At 5pm	Fever: 100°F Mental orientation: Disoriented Seizer(If present): twice Body ache: Present	<i>BELLADONA 200</i> Along with Allopathic treatment, as except seizer rest of symptoms responded well
11/09/2019 At 11am	Fever: Afebrile Mental orientation: Normal Seizer(If present): Normal Body ache: Present	<i>BELLADONA 200</i> Along with Allopathic treatment
16/09/2019	Fever: Afebrile Mental orientation: Normal Seizer(If present): Normal Body ache: Present	<i>BELLADONA 200</i> Along with Allopathic treatment
20/09/2019	Fever: Afebrile Mental orientation: Normal Seizer(If present): Normal Body ache: Present	<i>BELLADONA 200</i> Along with Allopathic treatment
25/09/2019	Fever: Afebrile Mental orientation: Normal Seizer(If present): Normal Body ache: Present	<i>BELLADONA 200</i> Along with Allopathic treatment
30/09/2019	Fever: NAD Mental orientation: NAD Seizer(If present): NAD Body ache: NAD	Placebo Along with Allopathic treatment Modified Glas glow coma scale score: 13

DISCUSSION AND CONCLUSION

Belladonna was selected after detailed case taking and repertorization with due consultation with Materia medica along with allopathic treatment. Patient showed positive response with improvement after add on homoeopathic treatment. *Belladonna* acts upon every part of the nervous system, producing active congestion, furious excitement, perverted special senses, twitching, convulsion and pain. Epileptic spasms followed by nausea and vomiting. *Belladonna* has high feverish state with comparative absence of toxemia. Burning, pungent, streaming, heat. Feet icy cold. No thirst with fever. In other Study of encephalitis *Belladonna*, *Gelsemium* was frequently prescribed.^[11,12]

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