

WITH THE MOTTO OF SERVING...



UMANITY TO GET

EALED BY

OLISITIC ART AND

AHNEMANNIAN SCIENCE TO ACHIEVE

HIGHER PRUPOSE OF LIVING.



INTRODUCING MYSELF.....

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ARTICLES PUBLISHED:-

SR NO	NAME OF ARTICLE	NAME OF JOURNAL / MAGAZINE	ISSN NO.	ISSUE/ EDITION
1.	THYROID DISORDERS- HOMOEOPATHY PROVES A BOON	NEW LIFE ERA	2320- 4125	JUNE 2019 - VOL 9 – ISSUE 08
2.	HAPPINESS AND HOMOEOPATHY	NATIONAL JOURNAL OF HOMOEOPATHY	-----	FEBRUARY 2019- VOL 21- ISSUE 233

➤ AND MANY OTHER ARTICLES PUBLISHED IN MAGAZINES LIKE HOMOEOTIMES, VITAL INFORMER, HOMOEEOEXCELLENCE, etc.

PRESENTATION PUBLISHED:-

➤ ON POPULAR HOMOEOPATHIC WEBSITE SIMILIMA (NOW KNOWN AS HOMOEOBOOK) :-

SR. NO.	PRESENTATION	PRESENTED UNDER SUBJECT
1.	ATROPHY	PATHOLOGY
2.	GLAUCOMA	PRACTICE OF MEDICINE

MY PRESENTATION IS ON:-



“A CLINICAL OPEN LABEL STUDY TO
EXPLORE THE UTILITY AND
EFFECTIVENESS OF HOMOEOPATHY
IN CASES OF ATTENTION DEFICIENT
HYPERACTIVITY DISORDER.”

INTRODUCTION:-

- Attention deficit hyperactivity disorder (ADHD) is a clinical syndrome defined in the Diagnostic and Statistical Manual of Mental Disorders (DSMIV) by high levels of hyperactive, impulsive, and inattentive behaviours that begin during early childhood, are persistent over time, pervasive across situations, and lead to clinically significant impairments.
- Attention deficit hyperactivity disorder (ADHD) is the most common neuropsychiatric disorder of childhood and constitutes approximately 50% of referrals to child and adolescent mental health clinics. Estimated prevalence is approximately 3% to 7% in school age children according to the Diagnostic and statistical manual of mental disorders. Boys are two or three times more likely to have ADHD than girls. ADHD has been found to be more common in the first degree biological relatives of children with ADHD than in the general population

UNDERSTANDING THE DEFINITION:-

➤The ***attention deficit*** component of ADHD refers to inattention, or difficulty focusing for long periods and being easily distractible. The “hyperactivity” portion of ADHD is used to describe behaviour that is restless, agitated, and difficult to resist. Hyperactive individuals often appear as if they NEED to move. They are in almost constant motion, and frequently make excessive noise.

➤Although impulsivity is not included in the diagnostic label, it is also considered a behaviour characteristic of this disorder. When impulsivity is paired with hyperactivity, the person appears to act without prior thought or intention. Impulsive behaviours are often intrusive, rude, and dangerous, sometimes resulting in accidents. For example, children may not think about landing when they jump off a ledge to catch a ball.

- Many children exhibit some of the behaviours characteristic of ADHD, it is important to understand the difference between normal behaviours and a true disorder. True ADHD symptoms are long-term and severe enough to impair someone's everyday functioning.
- ADHD is generally first noticeable during the preschool years and is likely to persist into adolescence and adulthood. This affects child's functioning, self-control of behaviour, school achievement, and development of social skills and positive relationships.
- Individuals with ADHD frequently have other types of coexisting mental health problems (such as oppositional defiant behaviour, aggression, or high levels of anxiety) and/or specific learning disabilities such as reading disability and language impairments. These co-existing problems may increase the risk for poor educational and social outcomes.

PATHOPHYSIOLOGY:-

➤ADHD is associated with the delayed development of five brain regions and should be considered a brain disorder. Areas thought to be involved in ADHD are located in basal ganglia – a part of the brain that controls emotions, voluntary movements and cognition. Research has previously found that the caudate and putamen regions within the ganglia are smaller in people with ADHD. The size of seven regions of the brain that were thought to be linked to ADHD are the pallidum, thalamus, caudate nucleus, putamen, nucleus accumbens, amygdala and hippocampus.

➤The frontal and prefrontal regions of the brain, as well as possibly the parietal lobe and cerebellum, are thought to be associated with ADHD. These structural areas have been identified with magnetic resonance imaging (MRI), as some research has shown that children with ADHD tended to have altered activation of the brain when performing certain tasks

- Additionally, some research has shown that children who are more hyperactive or impulsive have a slower rate of cortical thinning in the brain, which is most evident in the prefrontal regions of the brain. This is characteristic of ADHD throughout adolescence.
- ADHD is also linked to some neurophysiological deficits and abnormalities in cognitive function. These deficits may usually be seen in the resting brain but the Default-Mode-Network (DMN) activity may be involved, which is key in the region of the brain used to process tasks. As a result, affected individuals are likely to have difficulty in regulating and maintaining attention.
- Cognitive top-down executive control is thought to help monitor memory, cognitive flexibility and inhibition. This is particularly important when individuals are performing complex tasks that have high adaptation and effort demands.

➤ Our brain has many neurons that are packed into various regions of the brain. Each region is responsible for a particular function of our body. Like :-

➤ Some help us interpret things so we know what to say or do and some interact within our body and help regulate the function of our organs.

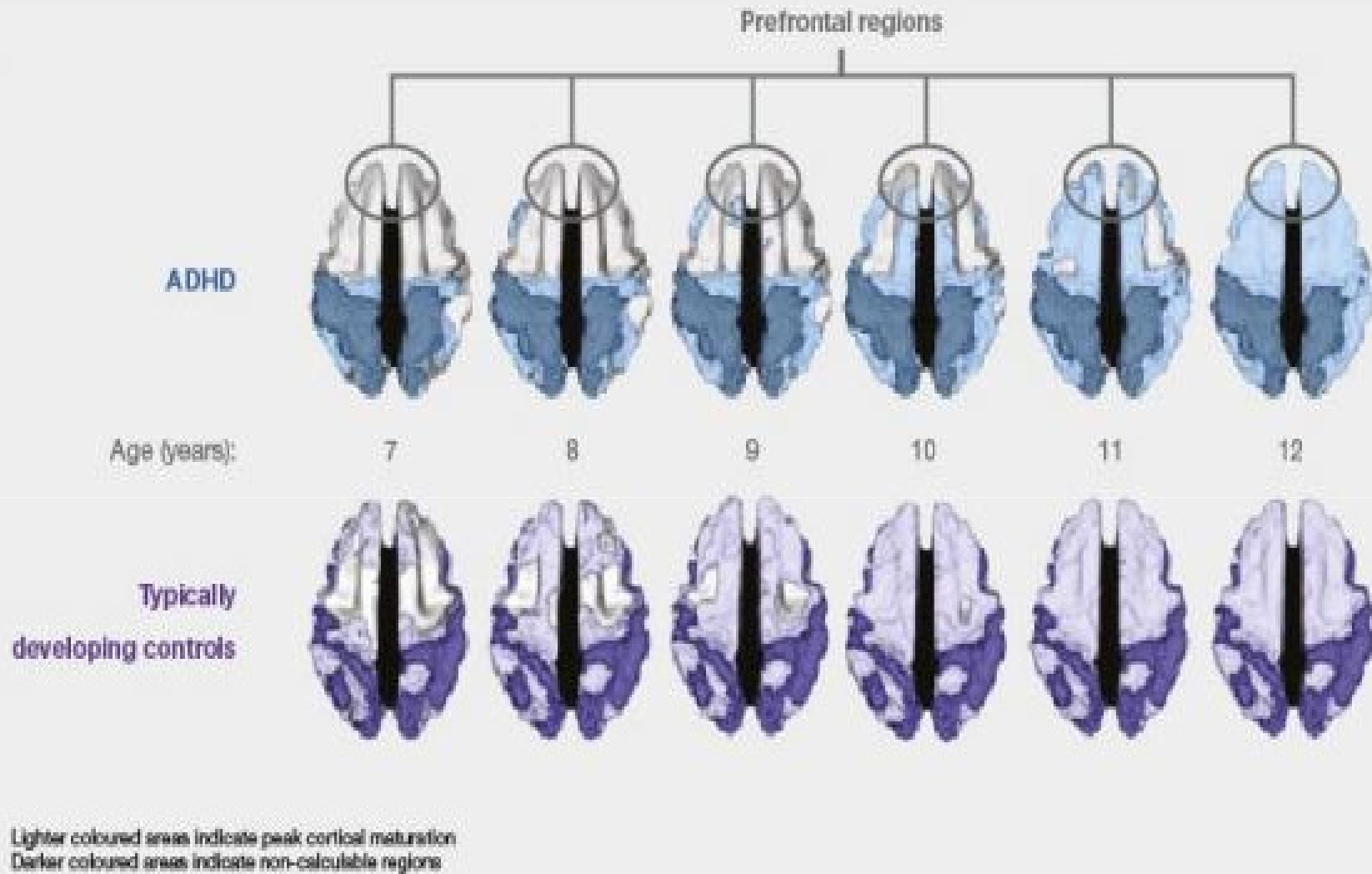
➤ Neurotransmitters are produced by the neurons in tiny quantities. They stimulate the appropriate neuron in the brain so that the message that needed will reach the brain region it is destined for.

➤ The symptoms of ADHD arise from a deficiency in certain executive functions (e.g. attentional control, inhibitory control, and working memory).

➤ The following structural abnormalities have been observed in children/adolescents and adults with ADHD versus healthy controls:

- Lower grey matter density
- White matter abnormalities
- Reduced total brain volume and volume of some brain structures
- Cortical differences
- Delayed cortical maturation in children/adolescents
- Reduced cortical thickness in adults.

➤ In a prospective magnetic resonance imaging (MRI) study, children and adolescents with ADHD (n=223) exhibited delays in cortical maturation versus typically developing controls (n=223).⁹ Delays were most prominent in prefrontal regions



(Cortical maturation in patients with and without ADHD)

CAUSES:-

➤ Heredity is the most common cause of ADHD. It is believed to involve interactions between genetics, environment and social factors.

➤ **Genetics:** twin studies indicate that the disorder is often inherited from one's parents with genetics determining about 75% of cases. Siblings of children with ADHD are three to four times more likely to develop the disorder than siblings of children without the disorder. Typically, a number of genes are involved, many of which directly affect dopamine neurotransmission. A common variant of a gene called LPHN3, is estimated to be responsible for about 9% of cases and when this variant is present people particularly responsive to stimulant medication.

➤ **Environment:** alcohol intake during pregnancy can cause fetal alcohol spectrum disorder which can include ADHD. Children exposed to certain toxic substance such as lead or polychlorinated biphenyls may develop problem which resembles ADHD. Smoke during pregnancy, extreme premature birth, very low birth weight and extreme neglect, abuse or social deprivation also increases the risk. Parental fights and constant friction between mother and father contributes a lot towards development of ADHD in children.

➤ **Society:** in some cases, the diagnosis of ADHD may reflect a dysfunctional family or a poor educational system, rather than problems with the individual themselves.

➤ **Diet:** Many people are convinced that ADHD is caused by certain types of nutrition and that especially refined sugar and food additives can contribute to hyperactivity and attention problems. The theory that nutrition and especially junk food, sugar and additives play a role remains the topic of a much heated debate. Studies reveal that many hyperactive children do not appear to benefit from restricted diets and that these diets only seemed to help about 5% of children with ADHD and that most of these children were either very young, or suffered from food allergies. Although a healthy diet will contribute to the wellbeing of any child, including a child with ADHD, there appears to be no conclusive evidence that certain diets or food play a part in the condition.

CLINICAL FEATURES:

- Inattention, hyperactivity, disruptive behaviour and impulsivity are common in ADHD.
- Self- focused behaviour.
- Interrupt others while they are talking or butt into conversations or games they are not part of.
- Have trouble waiting their turn.
- Emotional turmoil. They may have outburst of anger at inappropriate time.
- Fidgetiness. They may try to get up and run around, fidget or squirm in their chair when forced to seat.
- Has difficulty staying on task. Shifts rapidly from one task to another without completing first task.
- Talks excessively.
- Seldom listens attentively.
- Patient is disorganised; loses assignments, pencils, toys...

HOMOEOPATHIC

VIEW POINT

OF

ADHD

➤ Homoeopathy is a holistic science and plays a vital role in the management of ADHD.

➤ There are two modalities of treatments that specifically target symptoms of ADHD. One uses medication and the other is a non-medical treatment with psychosocial interventions. The combination of these treatments is called multimodality treatment. Treating ADHD in children requires a coordinated efforts between medical, mental-health and educational professionals in conjunction with parents. A multimodal treatment program should include: parent training concerning the nature of ADHD as well as effective behaviour management strategies; an appropriate educational program; individual and family counselling ,when needed, to minimize the escalation of family problems.

➤Hahnemann considers mental diseases as one-sided diseases of the chronic type affecting the whole psychosomatic entity where the brunt of derangement has been shifted on the mental aspect of the human organism after the physical disturbances have been suppressed by unhomoeopathic treatment or through some other natural causes.

➤In mental diseases originating predominantly from psychogenic causes and if they are of recent origin-psycho-therapy should be taken recourse to.

➤Hahnemann clearly mentions that the patient is to be carefully encouraged to regain self-confidence, to remould his life in the path of rectitude where there had been moral lapses. The physician to the patient should not only be his prescriber but also his friend, philosopher and guide to keep the patient to resolve his complexes and revert to healthy growth and development of his personality.

➤ Very often the cause of mental derangement lies in the failure on the part of the patient to adjust himself to the situation he finds himself in and through this defect further inroads of unsocial and immoral instincts which lay hitherto dormant in this subconscious mind, take place in the surface consciousness. These develop into all the turmoil, dissociation and disintegrations of personality to render a man misfit in the world of factual reality.

➤ Such mental diseases of psychic origin can be treated by means of psychological remedies like confidence building, friendly exhortations, sensible advice and a well disguised deception. This has to be always supported by good diet and regimen. The fundamental cause in such diseases is always psora. Hence, radical anti-psoric treatment has to be given to avoid any type of recurrences.

HOMOEOPATHIC

REMEDIES

FOR

ADHD

➤Belladonna : Ailments from fright. He reacts with violence, attempts to escape and run. Belladonna is reacting violently to save himself. Used for those who are forgetful, slow and have a poor learning ability. Sensitive to noise and light. Have night terrors and fear of ghosts. Look wild when angry. Craves cold drinks especially made from lemons and oranges.

➤Bufo rana: Used for those who have difficulty relating well to others. Have narrow focus, don't understand danger, have seizures or autism, can hug or bite you, masturbate or show a premature interest in sex. These children rely on basic instincts and need instant gratification, are upset when not understood. Cannot tolerate music or bright objects. often present with eczema, nail biting and may have protruded tongue or a gaunt face with stupid expression.

➤ Chamomilla: Indicated for those with bad temper, who are very irritable and impatient. Who are complaining, frustrated, restless and thirsty. Who are contrary, not knowing what they want; who demand one thing and then want something else. The chamomilla child is fidgety and quiets down once he has attracted attention. He wants to be carried . He settles down if carried, jiggled or rocked. These children feel pain is unbearable, feel that everything is intolerable and become so hyperactive that gets exhausted and begin to cry.

➤ Lachesis : Patients are loquacious, agitated, hyperactive, restless and moody with strong emotions. They may be very jealous with their siblings or even of the same sex parent and tend to be very revengeful, sarcastic and nasty. They can have a self-destructive personality with marked lack of confidence. They hate any kind of physical or behavioural restriction

➤Cina : Indicated for children who are cross, contrary and disobedient with very difficult behaviour. These children do not want to be touched or looked at and turn away when approached. Nothing satisfies them for long. They are restless, fidgety and fearful, especially during sleep. Their sleep is restless, accompanied by jerking, frequent swallowing and coughing. They often sleep on their abdomen. These children often have large bellies.

➤Opium: Indicated for children with difficulty concentrating. Painlessness of obvious painful complaint. Having complaints from fright or after head injury. Having constipation, sleep apnoea and mother often have been given drugs during pregnancy or labour.

➤ *Tarentula hispanica*: Indicated for children who are frenzied, are worse with music. Act wild and crazy. Love to sing and dance. Sense of a stranger in the room. They see faces on closing eyes. They are mischievous and sneaky; tease and hide; cut things; hurried and always restless.

➤ *Tuberculinum* : Indicated for those who revolt against restriction and need to feel free. They always desire and seek change, travel and new experiences. Always feel dissatisfied and feel as if there is never enough time. Fear of dogs and cats. Delusion he can fly, someone is following him, he is surrounded by animals. They are destructive; throw tantrums; break things.

**A CASE OF
ADHD**

Name: ABC

Sex: male

Age: 7 years

Education : 1st std

➤ **Chief complains:**

A. By parents:-

➤ Hyperactivity

➤ Patient cannot concentrate more than 1 min in anything.

➤ Cannot sit at one place for even for 5 min.

➤ Hits other children at school.

➤ Mischievous, stubborn.

➤ Striking.

➤ Not interested in study. Pt doesn't know what is study, what is exam, what is paper...

➤ He only does what he wants to do, any time starts to eat, go in others class, don't do any lesson in the class.

B. Teacher complains that he can't understand anything and suddenly hits other students.

➤ **Associated complain:**

- Recurrent cough and cold since 5 months of age.
- Blockage of nose, head becomes hot, fever with chill, dizziness at the time of fever, becomes dull.
- Appetite: decreased
- Thirst increased with small quantity of water at small interval at the time of cough cold.
- < From change of weather.

➤ **Past history :**

Nothing specific.

➤ **Patient as a person:**

- **Appetite:** increased. 3 meals/day.
- **Thirst:** normal. 6-7 glass/day.
- **Urine:** NAD
- **Stool:** constipation. Stool hard must strain.
- **Desire:** not specific.
- **Aversion:** buttermilk
- **Thermal reaction:** hot patient.
- **Sleep:** NAD
- **Perspiration:** scanty.
- **Allergy:** NAD
- **Addiction:** NAD

➤ **Milestones:**

- **Teething:** normal
- **Sitting:** at 11 months
- **Walking:** after 2 years
- **Speech:** after 4 year

➤ **Mental state:**

(As described by Parents)

He doesn't know what is pain. There is nothing from which he hurts. He has no any fear. He likes to play with other children but can't understand what is they are playing and interfere in between. He is very restless can't stay at one place for a minute. Do everything fast. Breaks every toys. Striking . Hits other children.

➤ **Totality of symptoms:**

- Hyperactivity
- Cannot concentrate at one task.
- Striking.
- Fearless.
- Restlessness .
- Forsaken feeling.
- Hot patient.
- Constipation; must strain.

➤ **Analysis and evaluation of symptoms:**

- Striking (characteristic mental)
- Fearless (characteristic mental)
- Forsaken feeling (characteristic mental)
- Hyperactivity (mental general)
- Concentration difficult (mental general)
- Restlessness (mental general)
- Constipation; must strain (physical general)
- Hot patient (physical general)

➤ **Repertorial totality:**

- Mind- striking- children in
- Mind -restlessness – children in
- Mind – fearless
- Mind- concentration difficult
- Generals- energy- excess of energy- children in
- Mind- forsaken feeling
- Stool- hard

Repertorisation chart :

	op.	tub.	nux-v.	phos.	china	china	lyc.	agan.	ign.	med.	rhust.
	1	2	3	4	5	6	7	8	9	10	11
	7	6	5	5	5	5	5	5	5	5	5
	10	10	10	10	9	9	9	8	8	8	8
1. MIND - STRIKING - children; in (19) 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. MIND - RESTLESSNESS - children, in (63) 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. MIND - FEARLESS (18) 1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. MIND - CONCENTRATION - difficult (384) 1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. GENERALS - ENERGY - excess of energy - children;... (26) 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. MIND - FORSAKEN feeling (157) 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. STOOL - HARD (344) 1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

➤ **Remedy selection and Prescription:**

➤ On the basis of symptom similarity of patient and medicine OPIUM was selected and prescribed as follow:-

SR. NO.	DATE	CHANGE IN SYMPTOMS OF THE PATIENT	PRESCRIPTION
1.	9/9/17	No change in restlessness. Slight change in speech. Complain of fever 99degree in between, did not taken any medicine. No any other complain. Constipation relieved.	OPIUM 10 M 2 doses weekly. SL 6 pills TDS for 4 weeks. SL 2 dose SOS for fever.
2.	8/10/17	Change in recurrent cold and cough. No complain of fever in this month. Change in restlessness. Change in stubbornness, now he follow the instructions of parents. Change in speech.	OPIUM 10 M 2 doses weekly SL 6 pills TDS for 4 weeks

SR NO	DATE	CHANGE IN SYMPTOMS OF THE PATIENT	PRESCRIPTION
3.	10/11/17	<p>No cough and cold in previous month. No fever. Change in restlessness. Change in mischievousness. Change in speech.</p>	<p>OPIUM 10M 2 doses every 15 days</p> <p>SL 6 pills TDS for 4 weeks</p>
4.	8/12/17	<p>Change in restlessness. No misbehave, now he follows the instructions of parents. Change in speech.</p>	<p>SL 4 pills TDS for 15 days. With advice to stop the medications.</p>

CONCLUSION:-

Too often, children with ADHD get labelled as —problem children‖ even if they show no signs of developmental disability. Though these children’s brain does work differently, it doesn’t preclude them from being highly intelligent. According to allopathic science there is no scope to cure this behavioural problem. But there is scope of homoeopathy to cure the patient with problem like hyperactivity disorder, autism, obsessive compulsive disorder etc... But people are not aware about wonder of Homoeopathy and there are lots of myths about Homoeopathic science. That’s why I chose ADHD, To aware people about miracles of Homoeopathy and To make a difference in the life of patient with ADHD as well as in their parent’s life.



THANK YOU