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EFFICACY OF OA NOSODE 30C IN THE MANAGEMENT OF OSTEOARTHRITIS OF KNEE JOINT IN THE AGE GROUP OF 21 TO 80 YEARS – A CLINICAL STUDY

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ABSTRACT: "Similia Similibus Curentur," is the therapeutic law of nature on which Homoeopathy is based. This means "Let like be treated by likes," with a holistic and dynamic concept. As mentioned in aphorisms no. 6 and 7 (Organon of Medicine, 6th edition of Master Hahnemann) for selection the similimum, the homoeopathic physician forms a portrait of the patient after taking the history and framing "Totality of the Symptoms" with an organized placement of all the subjective and objective symptoms. The prevalence of Osteoarthritis in India is 22% to 39%. It's a second most common Rheumatological problem facing by population with frequent joint pain, limitation in joint movement which disturbs day to day life. It was estimated as 10 th leading cause of non-fatal burden. Osteoarthritis of knee joint cause mobility impairments commonly found in aged and obese female. After Diabetes and Hypertension Osteoarthritis of the knee is a very common disease these days. Homoeopathic medicines have minute materialistic drug substance in to the potentised form and so it's safe, and potential enough to rectify the impairments of joint movement which avoid the unnecessary operation, its complication and improve the quality of life. The main aim of this research study was to prove the efficacy of Osteoarthritis nosode 30C potency in managing cases of Osteoarthritis without any side effects. One of the most important remedies used is osteoarthritis nosode, which is made from synovial liquid from arthritis of the hip joint and knee joint. **Objective:** To know the effectiveness of osteoarthritis nosode. **Method:** The study was done in 102 cases of OA ofboth knee joint who have been visited the OPD of Parul Institute of Homeopathy and Research hospital, Ishwarpura. With consideration of inclusion and exclusion criteria along with consent form from the pts. Result: It was observed to be a significant difference in scores before and after treatment. Conclusion: Osteoarthritis nosode was found to be effective in managing cases of Osteoarthritis of the knee joint. All the results were tabulated. A graphic presentation was made of all the observations.

INTRODUCTION: Dr. Christian Friedrich Samuel Hahnemann, a German physician, introduced Homoeopathic system of medicine in the year 1796, based on the therapeutic law of nature "Similia Similibus Curentur," which means "Let like be treated by likes," with a holistic and dynamic concept.



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Dr. Hahnemann has given the importance to the concept of Individualisation in which he had discussed in detail about the suffering person should be treated as a whole with his or her individualising characteristic uncommon, peculiar, rare symptoms in the 6th edition of organ on of medicine ¹.

He had also mention about the highest ideal of cure in aphorism no ². This can be achieved after the physician form a portrait of disease with consideration of susceptibility. For managing the chronic disease such as Osteoarthritis, Hahnemann sir has given the strategies in which one of the

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ways is the use of nodoses. Osteoarthritis nosode is one of the very good examples in the above-mentioned strategies ¹.

Osteoarthritis is a world-wide middle-aged and geriatric problem between the ages of 35 and 75. The prevalence of knee osteoarthritis is 22%–39% in India. Osteoarthritis of the knee is a major cause of mobility impairment. Osteoarthritis of the knee is a very common disease these days, after Diabetes and Hypertension. Commonly, it is known as wear-and-tear arthritis because the natural cushioning between joints and cartilages wears away. Due to this, the bones of the joints rub more closely against each other. So, the shock-absorbing benefits of cartilage are lost in a great way 4,5,6,7.

The selection of homoeopathic remedies must be based upon symptom similarity through detailed case-taking. But the difficulty here is that, due to the unbearable recurrent knee joint pains, stiffness, and immobility felt by the patient, it may not give sufficient time to the treating doctor for a smooth treatment. So, it is better to formulate a well-programmed homoeopathic treatment protocol for a certain period of time (at least for 6 to 12 months) ⁴⁻

One of the most important remedies used is osteoarthritis nosode, which is made from the synovial liquid of an arthritis joint. A proving of the Osteoarthritis Nosode of the hip was read at the 18th All India Homeopathic Conference at Madras on October 10, 1970. The two preparations of the Osteoarthritis Nosode are done from the synovial liquid of joints. The Osteoarthritis Nosode that originated from Dr. Foubister comes from the knee of a patient suffering from osteoarthritis, and the other stock comes from the hip of a similar case. OA of the knee, < from first motion, night, right side, > prolonged movement ^{9, 16, 17}.

Methods:

Type of Study: The clinical study was carried out at the O.P.D. of PIHRH.

Type of Participant: Participants who had fulfilled inclusion criteria after taking consent form.

Type of Intervention: Osteoarthritis Nosode 30 1 dose weekly.

Inclusion Criteria: Age 21–80 years of age both sexes. H/O: did not take medicine for osteoarthritis last month. Those who confirmed the diagnosis of knee joint osteoarthritis by the symptoms like knee joint pain, knee joint swelling, stiffness, warmth, and shiny redness of the knee joint, along with restricted range of movement.

Exclusion Criteria: Above 81 years of age having systemic diseases like Diabetes, neurological disease, being unable to walk without aids, having a previous history of fractures of the lower limb or spine, or being pregnant while taking oral Contraceptive pills History of HIV and Knee Injury.

TABLE 1: SIDE AFFINITY

102	
7	
15	
80	
	7 15

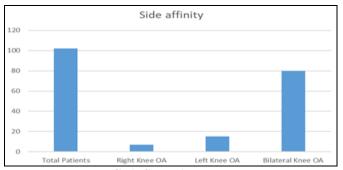


FIG. 1: SIDE AFFINITY

TABLE 2: OF THE ONE HUNDRED AND TWO CASES STUDIED FROM THE AGE GROUP OF 21–80 YEARS, THE FOLLOWING WAS THE AGE-WISE DISTRIBUTION

Age group	Male	Female	Total
21-30	0	3	3
31-40	0	5	5
41-50	4	10	14
51-60	9	30	38
61-70	13	21	34
71-80	2	5	7
Total	28	74	102

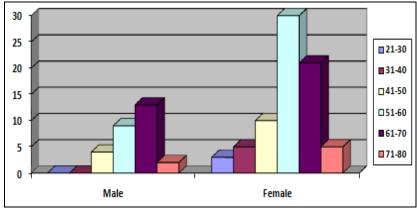


FIG. 2: OF THE ONE HUNDRED AND TWO CASES STUDIED THE FOLLOWING CLINICAL FEATURES WERE FOUND TO BE OCCURRING IN THE STATED MANNER

TABLE 3: CLINICAL FEATURES

Symptom	Total no. of patients
Knee pain	102
Swelling	8
Stiffness	41
Movement Restriction	34
Warmth of joint	6
Shiny red appearance of skin over knee joint	1

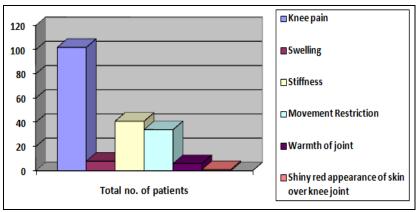


FIG. 3: OF THE ONE HUNDRED AND TWO CASES STUDIED, 7 CASES (6.86%) HAD RIGHT SIDED AFFECTION, 15 CASES (14.70%) HAD LEFT SIDED AFFECTION AND 80 CASES (78.43%) HAD BILATERAL AFFECTION. 8 CASES (7.84%) SHOWED SWELLING AROUND THE AFFECTED KNEE JOINT, 41 CASES (40.19%) SHOWED STIFFNESS, 34 CASES (33.33%) SHOWED MOVEMENT RESTRICTION, 6 PATIENTS (5.88%) SHOWED WARMTH OF JOINT AND 1 PATIENT (0.98%) SHOWED SHINY RED APPEARANCE OVER THE SKIN OF AFFECTED KNEE JOINT. ALL THE PATIENTS (100%) SHOWED CHARACTERISTIC AGGRAVATING AND AMELIORATING MODALITIES

The one hundred and two cases were studied according to their clinical intensity of symptoms

and severity staging and the distribution was in the following manner:

TABLE 4: FACTORS ON WHICH OVERALL INTENSITY/SEVERITY OF OSTEOARTHRITIS DERIVED

Factors	Intensity
Severe intensity of one or more symptoms like knee pain, swelling, stiffness, warmth of joint, restriction of	3 marks
movement, shiny red appearance of skin over knee joint and psychological stress.	
Moderate intensity of one or more symptoms like knee pain, swelling, stiffness, warmth of joint, restriction of	2 Marks
movement, shiny red appearance of skin over knee joint and psychological stress.	
Mild intensity of one or more symptoms like knee pain, swelling, stiffness, warmth of joint, restriction of	1 Mark
movement, shiny red appearance of skin over knee joint and psychological stress.	
If any of the symptom mentioned above increases in its intensity by 1 mark and vice a versa.	+1 Mark
If any of the symptom mentioned above decreases in its intensity by 1 mark and vice a versa.	-1 Mark

Observation:

TABLE 5: SCORES BEFORE AND AFTER TREATMENT

Group	Baseline	6 Months
Mean intensity of disease	2.5800	1.0000

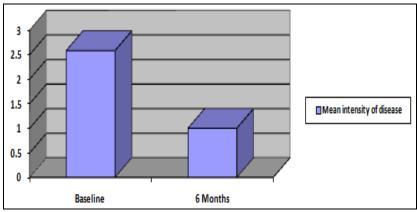


FIG. 4: SCORES BEFORE AND AFTER TREATMENT

Statistical analysis was done using paired t-test by comparing the scores before and after treatment.

DISCUSSION: Of the 102 cases studied there were 28 males and 74 females i.e., 27.45% of males and 72.54% of females as shown in **Fig. 1.**

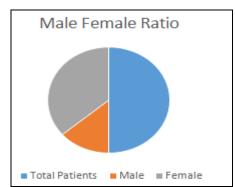


FIG. 5: PIE CHART OF MALE FEMALE RATIO

TABLE 6: CHART OF OVERALL IMPROVED, NOT IMPROVED SQ AND AGGRAVATION

Improvement	No. of Patients
Overall improved	99
Not improved SQ	2
Aggravation	1

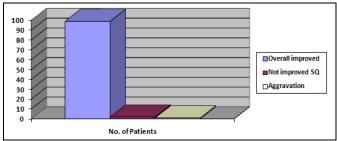


FIG. 6: OVERALL IMPROVED, NOT IMPROVED SQ AND AGGRAVATION

A systematic review identified clinical trial of oral homeopathic treatment of osteoarthritis conducted on participants. The trial investigated the efficacy of Osteoarthritis nosode (given by mouth) in cases of OA of Knee in terms of pain, swelling etc.

In the trial, a significant but similar reduction of pain was observed in the study groups. Participants who were given Osteoarthritis nosode, reported a greater reduction in pain when walking.

In this study, the effectiveness of Osteoarthritis nosode in the treatment of OA of the knee was evaluated over a time period of 6 months in 102 patients fulfilling the case definition and inclusion criteria. The evaluation was based on improvement with respect to signs, symptoms and pathology (if present) and, on the statistical verification the scores were taken before and after treatment. On the basis of these factors, they were termed as:

Improvement in Symptoms: 31 patients (30.39%)

Good Response: 68 patients (66.66%)

No Relief or Worse: 3 patients (2.94%)

102 patients were studied over a period of 6 months were analysed for parameter of symptoms and severity of disease before homoeopathic treatment and improvement after homoeopathic treatment. 97% of cases lie in the bracket of cure and good response.

Summary: After assessing pre and post Osteoarthritis nosode 30 orally 1 dose in a week, it was found that this medicine had given good results in terms of reliving symptoms.

CONCLUSION: Out of the total of 102 cases studies, 66.66% cases showed good response with Osteoarthritis nosode. In 2 (1.96%) of the 102 cases, there was acute complication in terms of increase in complaints. Total time duration required for complete eradication of symptoms was also greatly reduced with the help of Osteoarthritis nosode. Statistical analysis also shows that there is great difference in scores before treatment and after treatment. Therefore, according to the 102 cases we have studied, we can say that Osteoarthritis nosode is very much useful in treatment of OA of knee ioint. This inference is not only for statistical purpose but it gives us guidelines for prescribing in cases of OA. This will then be a feather in cap for Homoeopathy. This will also make people get over the myth that Homoeopathy takes very long to act and has little or no role in treating OA of knee joint.

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CONFLICT OF INTEREST: None declared

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