

**Role of Sulphur in Case of Idiopathic Ulcerative Colitis****N. C. Chatterjee<sup>1</sup>, Ruchi Biswas<sup>2</sup>, Dinesh Rawat<sup>3\*</sup>**<sup>1</sup>Emeritus Prof., <sup>2</sup>PG Guide, Sri Ganganagar Homoeopathic Medical College Hospital and Research Institute, Sri Ganganagar, Rajasthan, <sup>3</sup>PGT**Abstract**

A young female patient diagnosed with idiopathic ulcerative colitis given homoeopathic medicine sulphur and got symptomatic relieve. She was having complaint of pain in abdomen with bloody stool since 4-5 years. Cramping Pain in abdomen associated with frequent desire for stool. She was diagnosed as idiopathic ulcerative colitis with anemia. She was on allopathic treatment since 4-5 years for idiopathic ulcerative colitis. She was given homoeopathic medicine sulphur with proper selection of potency and doses & after sometime her complaints got relieved. Homoeopathic medicine has remarkable effect on cases of idiopathic ulcerative colitis, if medicine is given in a proper potency and dose.

**Key word-** Idiopathic ulcerative colitis, Sulphur, Homoeopathy, Colonoscopy.**Corresponding Author\* : Dr. Dinesh Rawat, PGT, Sri Ganganagar Homoeopathic Medical College Hospital and Research Institute, Sri Ganganagar, Rajasthan.****Received – 08/3/2020****Revised – 25/3/2020****Accepted – 28/3/2020****INTRODUCTION**

The Idiopathic Ulcerative Colitis is one of the challenging diseases in present medical scenario because there is no permanent treatment in modern system of medicine. In this condition homoeopathic system has scope for treatment and management of idiopathic ulcerative colitis. Idiopathic Ulcerative colitis is an inflammatory bowel disease (IBD) that causes long-lasting inflammation and ulcers (sores) in gastrointestinal tract. Idiopathic Ulcerative colitis affects the

innermost lining of large intestine (colon) and rectum. Symptoms usually develop over time, rather than suddenly. Idiopathic Ulcerative colitis can be debilitating and can sometimes lead to life-threatening complications. While it has no known cure, treatment can greatly reduce signs and symptoms of the disease and even bring about long-term remission.

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**Symptoms** - Idiopathic Ulcerative colitis symptoms can vary, depending on the severity of inflammation and where it occurs. Signs and symptoms may include:

- Diarrhea, often with blood or pus
- Abdominal pain and cramping
- Rectal pain
- Rectal bleeding — passing small amount of blood with stool
- Urgency to defecate
- Inability to defecate despite urgency
- Weight loss
- Fatigue
- Fever
- In children, failure to grow

#### **Types of Idiopathic Ulcerative colitis**

The idiopathic Ulcerative colitis can be classified according to its location:

- **Ulcerative proctitis** -Inflammation is confined to the area closest to the anus (rectum), and rectal bleeding may be the only sign of the disease. This form of ulcerative colitis tends to be the mildest.
- **Procto-sigmoiditis**- Inflammation involves the rectum and sigmoid colon (lower end of the colon). Signs and symptoms include bloody diarrhea, abdominal cramps and pain, and an inability to move the bowels in spite of the urge to do so (tenesmus).
- **Left-sided colitis**- Inflammation extends from the rectum up through

the sigmoid and descending colon. Signs and symptoms include bloody diarrhea, abdominal cramping and pain on the left side, and unintended weight loss.

- **Pancolitis** – Pancolitis often affects the entire colon and causes bouts of bloody diarrhea that may be severe, abdominal cramps and pain, fatigue, and significant weight loss.
- **Acute severe ulcerative colitis** – This rare form of colitis affects the entire colon and causes severe pain, profuse diarrhea, bleeding, fever and inability to eat.

**Complication**- Possible complications of ulcerative colitis include:

- Severe bleeding
- A hole in the colon (perforated colon)
- Severe dehydration
- Liver disease (rare)
- Bone loss (osteoporosis)
- Inflammation of your skin, joints and eyes
- An increased risk of colon cancer
- A rapidly swelling colon (toxic megacolon)
- Increased risk of blood clots in veins and arteries

**Case Profile**- A 20 years old female patient came to OPD wing of Sri Ganganagar homoeopathic medical

College Hospital and Research Institute, Sri Ganganagar, Rajasthan. She was having complaints of pain in abdomen with bloody stool since 4-5 years.

**Onset-** gradually,

**Course-** progressive,

**Sensation:** Cramping pain in abdomen with distension of abdomen,

**Frequency of stool** – 10-12 time/24 hrs,

**Before stool** – Cramping pain in abdomen with urge for passing stool, distension of abdomen,

**During stool** – Bloody stool and much mucous mixed with stool, Pain in abdomen relieves,

**Character of stool** – Yellow watery stool mixed with fresh red blood and mucous, sometimes passes clotted blood, mostly passes blood and mucous in stool,

**After Stool** – Pain in abdomen relieves, Aching pain in both lower limb. Complaints aggravates before passing stool after eating anything, early morning, by traveling and Ameliorated after passing stool.

She is taking allopathic medicines since 4-5 years but did not get relieve.

**On examination** she was found anemic and underweight. She was very irritable during case taking and once she left case taking with anger. This case taking was completed in 2-3 sittings because of his irritability and anger. The laboratory

investigations suggesting anemia and colonoscopic examination showing severe ulcerative colitis.

**Management and outcome** – She was prescribed sulphur 200C single dose with placebo after complete case taking and analysis of case, during follow ups she was prescribed placebo. Initially, she did not responded well but over period of time her mental and physical complaints relieved. During treatment there was some diet and regimen also advised according to her disease condition. She was advised to take boiled water and boiled food during meal. The follow ups were taken for 3 months and found remarkable improvement in here physical and mental complaints. Her last follow up suggesting decreased frequency of stool, no tenesmus in abdomen, no irritability and anger was under control. There is a symptomatic criterion “Chatterjee’s clinical assessment scale for severity of ulcerative colitis” used for assessment of severity of disease and assessment of improvement during follow ups.

**Repertorial analysis** - Repertorization done manually using synthesis repertory and repertorial analysis was as follows - Sulphur – 14/07, Nux. Vom. – 14/07, Phos. - 09/04, Bry. - 10/06.

**Follow ups –**

Sr. no.	Date	Condition and complaints	Treatment
1.	17/01/2019	Partial improvements in mental symptoms	PL 30/BD
2.	24/01/2019	Partial improvement in abdominal complaints	PL 30/BD
3.	02/02/2019	Bleeding per anum with mucous on 29.01.2019 only in morning, pain in abdomen.	SAC LAC 30 /TDS
4.	12/03/2018	Partially improved, unsatisfactory stool	Sulphur 200 1 dose stat Rubram 30/BD
5.	19/03/2019	Feeling mentally well, No tenesmus, soft stool, no fresh complaints	Rubrum 30/BD for 1 month

**Discussion** – This case study suggests that there is scope of homeopathic treatment in cases of idiopathic ulcerative colitis if we follow the rules of proper selection of medicine, potency and dose. This case study shows light for a detail studies on large population of such type of diseases.

**CONCLUSION**

Usually in day to day practice physicians ignores the rules of proper selection of doses and potencies but as we know after selection of similar medicine proper selection of dose and potency play important role in the way of cure. As Hahnemann also said in his book - The chronic diseases their peculiar nature and their homeopathic cure “physician made three mistakes during process of cure, first is selection of similimum, second is

selection of potency and third one is selection of proper dose.

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