

## Scope of Homoeopathic Medicine **Natrum Mur aticum** in case of Allergic Rhinitis –A Case report

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**DOI: 10.63001/tbs.2025.v20.i04.pp1396-1404**

### KEYWORDS

**Allergic Rhinitis, Natrum Muraticum, Constitutional Medicine, JRQLQ**

### Received on:

**18-08-2025**

### Accepted on:

**26-10-2025**

### Published on:

**04-12-2025**

### ABSTRACT

Allergic rhinitis (AR) is a hypersensitivity response of the nasal mucous membrane to specific allergens. It affects over 400 million people globally. A 45-year-old male presented to the clinic on 15/03/2024 with rhinitis and urticaria of allergic origin. He was diagnosed with allergic rhinitis. Based on the totality of symptoms, **Natrum muriaticum 200** was prescribed. The patient showed considerable improvement in both allergic rhinitis and urticaria. Marked improvement was also observed on the **Japanese Rhinoconjunctivitis Quality of Life Questionnaire (JRQLQ)**

### Introduction-

Allergic diseases are emerging public health problems characterized by an abnormal immune response to environmental antigens in atopic individuals. The immediate-phase response is followed by the development of late-phase reactions and eosinophilic inflammatory processes driven by lymphocyte-derived cytokines, namely IL-4, IL-5, IL-9, and IL-13. Conventional treatment of allergic conditions includes antihistaminic medications that provide symptomatic relief; however, upon re-exposure to the allergen, individuals may experience the same hypersensitivity response<sup>(1)</sup>

Allergic rhinitis (AR) peaks during the second and fourth decades of life and accounts for approximately 15% of diagnosed cases in clinical practice. AR is characterized by symptoms such as nasal congestion, rhinorrhea, sneezing, postnasal drip, and nasal pruritus. It reduces productivity and significantly affects

the quality of life of affected individuals. Studies show that common allergens such as pollen, dust, dust mites, fungi, and insects frequently trigger hypersensitivity responses in susceptible individuals, leading to the development of allergic rhinitis.<sup>(3)</sup> Trees, grasses, and weeds that rely on wind rather than insects for pollination produce large quantities of pollen that are widely dispersed by air currents, thereby triggering seasonal allergic rhinitis. The timing of pollination for these species has historically shown little variation from year to year within a particular locale, although it may differ significantly across different climatic regions. In temperate areas of North America, trees typically pollinate from March to May, grasses from June to early July, and ragweed from mid-August to early October. Molds, which are widely distributed in nature due to their presence in soil and decaying organic matter, release spores in patterns that are largely dependent on climatic conditions<sup>(4)</sup>

Allergic rhinitis (AR) commonly occurs in atopic individuals and is often associated with atopic dermatitis, food allergy, and asthma. Up to 50% of patients with AR also manifest asthma, whereas 70–80% of individuals with asthma and approximately 80% of individuals with chronic bilateral sinusitis experience allergic rhinitis.<sup>(4)</sup>

#### **Common symptoms of AR-**

Episodic rhinorrhea, sneezing, nasal obstruction accompanied by lacrimation, and pruritus of the conjunctiva, nasal mucosa, and oropharynx are the characteristic features of allergic rhinitis. On examination, the nasal mucosa appears pale and boggy, the conjunctiva congested and edematous, while the pharynx is generally unremarkable. Swelling of the turbinates and mucous membranes, with subsequent obstruction of the sinus ostia and eustachian tubes, may precipitate secondary infections of the sinuses and middle ear, respectively. An increasing number of patients with seasonal allergic rhinitis also exhibit pollen-associated food allergen syndrome, characterized by oropharyngeal pruritus and/or mild swelling following the ingestion of raw plant-based foods containing cross-reactive pollen-related allergens.<sup>(4)</sup>

Homoeopathy is wholistic care of healing where treatment is given according to individualization . According to Organon of Medicne Homoeopathic Medicine is capable to cure the case if you find similar Medicine to the diseased man .<sup>(5)</sup>

We are having number of Medicine which is suited for AR. Like Natrum Muraticum, Sabadilla, Arsenicum Album, Ars iodum, Wyathia are some medicine which can be indicated for AR. In Natrum Muraticum you will find violent fluent coryza ,, last for one to three days . stoppage of nose. Sneezing in early morning alternate with fluent coryza. In mental aspect of Natrum Muraticum we will find grief, disappointment and Melancholic temperament<sup>(6,7)</sup> . Japanese Rhino-conjunctivitis quality of life Questionnaire ( JRQLQ) is useful in case of Allergic Rhinitis to determined improvement in symptoms as well as in quality of life of the Patient.<sup>(8)</sup>

#### **Material and Methodology-**

The study was carried out with the approval of Institutional Ethical Committee(IEC). And Patient's consent Has been Taken prior to enroll in the study. The study Aimed to Analyzed effect of constitutional Homoeopathic treatment and Histaminum Hydrochlorinum in two different group.

#### **Case report-**

#### **History of present complain-**

Since 2 years Patient has developed Allergic Rhinitis . Before that period he also having urticaria. For this he also took allopathic Medicine but it is not relieve permanently . They are advised him to take a citrizine . He is taking medicine when complain become severe

Chief complain

COMPLAINTS WITH DURATION	LOCATION & EXTENSION	SENSATION CHARACTER AND PATHOLOGY	MODALITIES AILMENTS FROM	CONCOMITANTS
Frequency per year/month/ Week-2-3times /week -Frequency regarding symptoms during attack-remain for a day regarding sneezing ,Rhinorhea.....)	Nose-	Running nose- watery discharge Blockage-partial with coryza/without blockage Sneezing -10-12/at a time	Allergens- dust,soap, fumes, <summer	

Associated complain

COMPLAINTS WITH DURATION	LOCATION & EXTENSION	SENSATION CHARACTER AND PATHOLOGY	MODALITIES AILMENTS FROM	CONCOMITANTS
Complain since 4 year Frequence- twice a month	Skin	Hives Itching	Allergens- Yellow lentil(caffna dal) Ginger, brinjal, ground nut, dust	

#### Past history-

h/o cataract which was operated - before 3 years

#### FAMILY HISTORY:-

Mother died –not diagnosed with any complain

Father died after heart attack

2 elder brothers having no complain

1 daughter and 1 son having no complain

## PATIENT AS A PERSON-

Not having any complain in nails, hair

Appetite –normal- eating 4 roti , rice

Water intake- 10-12 glass/day

No any specific desire or aversion is found

Addiction-Tobacco

perspiration-

Sometimes on face no staining or no smell

Heat and cold relationship- ambithermal

Stool- frequency-1 time/day, normal consistency,

Without any complain

Urine-frequency-5 to 6 time /day, pale yellow without any complain

Sleep-8 hours /day ,Refreshing

Dream- not remember

Life space –

A male Patient comes from Lower Social economical status suffers from Allergic Rhinitis comes for a treatment . He is Youngest son in family and living in nuclear family . He is having a family of 2 children and wife .

He is very fastidious by nature wants every thing in proper place . If it is not in proper place he becomes angry and shout .

He is having repeated clashes with his wife on family matter and thinks “ she is not understanding me”. And he feels sad

At one instance there is fighting with his wife and she left the house . After some time she came back to house . There is anxiety about the children at that time

He is very sensitive person can not see any one to suffer even sees animal in a pain he cries . If children is sick and he saw them suffer he cries

General Examination- Patient was conscious, cooperative & oriented with time, place and person during the case evaluation

Vital Data:

PR – 75 beats/ min

Temp – Afebrile at the time of examination

BP- 124/84 mm Hg

RR-16 /min Body

Weight: 50 kgs

Eyes Conjunctiva – pink

Sclera – clear Ears- no discharge

Nose- no DNS/ Polyps, Nasal Mucus Membrane is inflamed on examination. Discharge from Nose

Throat-Inflammation, redness

Mouth: - Buccal mucosa- Pink.

Teeth – hygiene maintained

Tongue – pink Gums – Non bleeding

Neck – no lymphadenopathy

Nails- healthy No pallor, clubbing, cyanosis, icterus & pedal oedema

SYSTEMIC EXAMINATION: CNS, CVS, RS, GIT, GUT: NAD

Totality-

- Fastidious
- Sympathetic
- Disappointment
- Grief
- Anxiety about children
- Coryza < at summer
- Coryza -thin watery discharge
- Perspiration on face

Clipboard 1													
Mind - <b>PARANOICUS</b>													
2. Mind - GRIEF, feelings													
3. Mind - ANXIETY, general - children, in - about his children													
4. Mind - SYMPATHETIC, compassionate													
5. Environment - SUMMER, agg.													
6. Face - PERSPIRATION													
7. Nose - CORYZA, general - watery, discharge													

Final selection of medicine-

Natrum mur

Potency-200 as per age and metals are found in case

Treatment-

Natrum mur 200 4 pills (1dose)

Phytum tds for 15 days

Follow up

Sr. no	Date	symptoms	Priscription
1	25/3/24	Rhinitis once a week severity of attack become less 8-10 sneezing at time Coryza for one day No urticaria Physical general normal	Phytum TDS for 15 days
2	16/4/2024	Rhinitis once a 15 days Severity as above Urticaria once a wile Severity as before Physical general normal	Natrum mur4 pills(1Dose) (oraly) Phytum TDS for 15 days
3	30/4/2024	Having no urticaria or rhinitis Physical general no	Phytum TDS for 15 days
4	15/5/2024	Rhinitis twice a 15 days With mild intensity Urticaria	Natrum mur4 pills(1Dose) (oraly) Phytum TDS for 15 days

5	22/5/2024	Severe rhinitis since 3 days with urticaria After inhalation of fume	Natrum mur4 pills(3Dose) (oraly) Phytum TDS for 7 days
6	4/6/2024	Rhinitis once a week for 2 days with mild symptoms No urticaria Physical general normal	Phytum tds for 15 days
7	22/6/2024	Rhinitis twice a 15 days for 3 days with sever intensity Physical general normal	Natrum mur 4 pill (1 Dose ) oraly Phytum tdsfor 15 days
8	10/7/2024	Having complain of rhinitis with sneezing once a 15 days with mild intensity No urticaria Physical general normal	Phytum tdsfor 15 days
9	20/7/2024	No complain Physical general normal	Phytum tds for 15 days
10	5/8/2024	Severe coryza since 2 days No urticaria Sleep decrease	Natrum mur 4 pill (1 Dose ) oraly Phytum tdsfor 15 days
11	20/8/2024	No complain	Phytum tds for 15 days
12	15/8/24	No complain	Phytum tds for 15 days
13	4/9/2025	Rhinitis for 1 hour Slight sneeing	Phytum tds for 15 days

pre score JRQLQ	11
Post Score JRQLQ	2

### Discussion-

Patient is evaluated as low of Homoeopathy. Here Natrum Muraticum 200 is given as constitutional medicine whenever it is needed in case . pre score was done when Patient comes 1<sup>st</sup> time in visit and after 6 month post score JRQLQ is taken. That shows marked improvement in Patient .

### Conclusion-

In hypersensitivity response like Allergic Rhinitis Homoeopathic Treatment can be beneficial if the treatment is given carefully. Thus homoeopathy treatment proves beneficial in the patient of AR . Previous study shows utility of JRQLQ in measurement of effect of treatment in allergic Rhinitis

### Abbreviation-

JRQLQ- Japanese Rhino-conjunctivitis quality of life Questionnaire

AR-Allergic Rhinitis

**Acknowledgements:** The author acknowledges and expresses sincere gratitude to patient for their consent, trust and kind cooperation throughout the study. The author expresses gratitude to Ankit Dubey sir for his guidance, encouragement and support, The author also forwards gratitude to Parul University and Dr.Purav Desai sir Dean Faculty of Homoeopathy

The informed consent has been provided for the publication of this report by the patient.

**Statement of patient consent:** The author has obtained all necessary patient consent forms. The patient understands that his identity will not be disclosed, although complete anonymity is not assured. **Financial support:** No financial support was given for the study.

**Conflicts of interest:** The authors declare that they have no conflicts of interest

### Bibliography-

1. Munjal YP, editor. **API textbook of medicine**. 10th ed. Mumbai: The Association of Physicians of India; 2015
2. Akhouri S, House SA. *Allergic Rhinitis*. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK538186/>
3. Aggarwal D, Abhilash S, Kapur S, Gupta D. *Study of causal aeroallergens in allergic rhinitis*. Int J Otorhinolaryngol Head Neck Surg. 2019;5(4):916–921. doi:10.18203/issn.2454-5929.ijohns20192556.
4. Jameson JL, Fauci AS, Kasper DL, Hauser SL, Longo DL, Loscalzo J, editors. *Harrison's Principles of Internal Medicine*. 21st ed. New York: McGraw-Hill Education; 2022
5. Hahnemann S. *Organon of Medicine*. 5th ed. New Delhi: B. Jain Publishers; 1994

6. **Boericke W.** *Pocket Manual of Homoeopathic Materia Medica and Repertory*. 9th ed. New Delhi: B. Jain Publishers; 2007
7. Phatak SR. **Materia medica of homoeopathic medicines**. 2nd ed. New Delhi: B. Jain Publishers; 2002
8. **Tokunaga T, et al.** Comparative study of two Japanese rhinoconjunctivitis quality-of-life questionnaires (RQLQ and JRQLQ) in cedar pollinosis patients. *Allergology International*. 2005