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Studying the Susceptibility through Clinical Expressions in Cerebral Palsy and its Application in Posology

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ABSTRACT:

Background: Among the paediatric age group patients presenting to neurological complaints, use of complementary and alternative medicines have been increased widely, in which Homoeopathy constitute for 24%. Susceptibility is an inherent capacity in all living things to react to stimuli in the environment and represents a fundamental quality that distinguishes the living from non-living. Susceptibility is modified with the help of therapeutics measures to arrive at the path of improvement in such neurological disorders. Thus, the Susceptibility and its finer aspects, Sensitivity, Reactivity and Immunity, is studied through the clinical expressions of Cerebral palsy which are heterogeneous with different clinical types, comorbidities, brain imaging patterns, causes, and now also heterogeneous underlying genetic variants. Further, Influence of the derived susceptibility on Posology, specifically Potency and Repetition is studied.


Methods: Retrospective Qualitative Descriptive Case Series study, on 30 cases of Cerebral Palsy, selected by simple random technique, meeting the inclusion and exclusion criteria, from the OPD set up. Meeting criteria of minimum 6 months follow up. Scales were evolved to assess the grading of finer aspects of Susceptibility. Pathology, Evolution and Diagnosis of Disease was Studied with the help of Structure-Form-Function format. Arriving at the assessment of Susceptibility and its contribution to the posology was done with the planning and programming format. Evaluation of implication of Susceptibility on dose, potency and repetition, was done with the help of remedy response evaluation form.

Descriptive Statistical analysis done with the test of significance – Fisher's exact test.

Results: Prevalence of Cerebral Palsy is more in the Males (63%). Normal Birth weight individual (63%) were affected more than the Low Birth weight individuals & Preterm. Birth Asphyxia (50%) is prominent cause of Cerebral Palsy, followed by Antenatal Factors (13%). Spastic Quadriplegia (45%) observed as the most common form of Cerebral Palsy. Among the Antenatal factors PIH (16%) is the most common followed by Eclampsia (11%). Associated Deficit observed Prominently are Oculomotor Disorder in 37%, followed by 30% Oromotor Dysfunction (30%), Intellectual Disability (27%).

Overall Moderate Susceptibility was observed in 83%, followed by High Susceptibility in 10% and Low in 7%. Sanguine Temperament is seen predominantly in CP children. Tubercular Miasm was predominantly observed in both Dominant (60%) and Fundamental (20%) sphere. A significant association between the Sensitivity and the Potency selection, where, Fisher's exact test was applied; value is 4.950, $p = 0.049$. Among the various aspects of assessment of Sensitivity, The sensitivity at the level of nerve have influenced the potency selection in most of cases. Majority (73%) of prescription was from mineral source of remedy, among them leading remedies were Phosphorous (30%) and Calcarea Phos (27%). Moderate Potency (73%) scale was used predominantly, among them 30C was prescribed in 56%. Frequent Repetition (90%) was done widely, among them 90% have constituted Weekly repetition.

Keywords: Cerebral Palsy, Clinical Expressions, Aetiology, Comorbidities, Susceptibility, Miasm, Potency, Repetition, Homoeopathy.

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