Management of Sub-Acute Exacerbation of Bronchial Asthma with *Blatta orientalis*: A Case Report

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**Abstract**

Asthma is a chronic respiratory disease. It is an inflammatory condition of the lower airways that affects around 275–300 million people globally and 25 to 30 million people in India. It can attack all age groups and is characterised by recurrent attacks of breathlessness, wheezing and coughing, which may vary from person to person in severity and frequency. It is caused by inflammation of air passages, hypersensitivity to allergens, pulmonary oedema and congestion of lungs. This case report is an evidence of successful treatment of sub-acute exacerbations of bronchial asthma by using homoeopathic medicine based on acute totality of the case. The case of a 32-year-old woman with bronchial asthma is reported here who was treated with *Blatta orientalis* 30C. All investigations and pulmonary function tests (spirometry) indicated the diagnosis to be bronchial asthma with moderate obstruction of small airways. After case taking, *Blatta orientalis* 30C was prescribed, following which, after 6 months of treatment, patient felt better in all aspects with reduction in the number of asthma attacks and marked improvement in Elizabeth Juniper’s Asthma Control Questionnaire Score and other investigations.

**Keywords**

► bronchial asthma
► *Blatta orientalis*
► homoeopathy
► Elizabeth Juniper’s Asthma Control Questionnaire (ACQ) Score
► pulmonary function test (PFT)

**Introduction**

The word ‘asthma’ is a Greek word derived from the verb aazein, which means ‘short of breath’.¹ It is defined as increased responsiveness of the trachea–bronchial tree to a variety of stimuli.²–⁴ It is caused by: inducing factors such as genetic factors, tobacco smoke, viral infection, maternal smoking and exposure to high concentration of allergens during infancy; provoking factors such as exposure to house dust pollution, mite, pollens, moulds, animal dander, wood dust, cotton dust, cockroaches, drugs, food and cold and dry days environment; psychological factors such as stress and grief; bacterial infection; sinusitis and obesity⁴,⁵; gastrooesophageal reflux disease.⁶,⁷ According to Global Initiative for Asthma Guidelines, ‘Asthma is a heterogeneous disease, usually characterized by chronic airway inflammation. It is defined by the history of respiratory symptoms such as wheeze, shortness of breath, chest tightness and cough which may vary over time and in intensity, together with variable expiratory airflow limitation’.⁸ In asthma, the
conventional mode of treatment is able to identify the illness but often can do very little besides palliation. In conditions like these, Homoeopathy, because of its holistic approach, can assume a very promising role. The remedies administered during homeopathic prescribing are intended to stimulate the defence mechanisms of the body and help in reducing the frequency and severity of subsequent attacks on next exposure to the allergen without any side-effects resulting in healthy growth of body and also eliminating drug dependency to maintain homoeostasis. In Homoeopathy, each case of sickness is regarded as a strictly individual phenomenon, as this system of alternative medicine strives to treat ‘like with like’.

Dr. Hahnemann dictates that a Homeopathic medicine is to be selected on the basis of totality of symptoms (§7) of a case that is formed only by the deviations in health of mind and body of the patient (§6). Utmost importance is to be given to a patient’s striking, singular, uncommon and rare signs and symptoms (§153). Higher the correspondence of the remedy symptoms to these, higher the rate of successful treatment.

Case Information

A 32-year-old female patient, teacher by profession, reported with complaint of cough with breathlessness, off and on since last 2 to 3 years. She presents with complaint of breathlessness and cough with purulent expectoration since past 1 week. Her dyspnoea aggravated in wet weather and ameliorated on bending forward. She also had a feeling of weakness all over her body and in the popliteal region. She had suffered from chronic recurrent coryza with bland nasal discharge, sneezing off and on without any lachrymation, aggravated in early morning and at change of weather. She was diagnosed as a case of bronchial asthma by a pulmonologist and took allopathic treatment off and on for past 2 years, getting temporary relief. All necessary investigations and Elizabeth Juniper’s Asthma Control Questionnaire (ACQ) Score helped diagnose it to be a case of bronchial asthma.

Her overall symptoms are as follows:

- Anxiety about health
- Cough with purulent expectoration
- Breathlessness aggravated in wet weather ameliorated by forward bending
- Cough with breathlessness
- Weakness of extremities with depression on back of knee joint

Past History

The patient had a history of pneumonia at the age of 5 years and was managed with allopathic treatment.

Treatment History

She had taken allopathic medicines including antihistamines, inhaled corticosteroid and bronchodilators for past 2 years and got temporary relief. During the course of current treatment, the patient was asked to gradually reduce the use of bronchodilators as well as inhaled corticosteroids to avoid withdrawal symptoms. By the end of treatment, the patient was no longer using these inhalers and was using only the prescribed homeopathic medicine *Blatta orientalis* 30C.

Family History

Her mother had allergic rhinitis and father had hypertension. Father is under regular allopathic medication.

Menstrual History

The patient had menarche at 14 years. Her menses is regular and of normal character.

Obstetric History

G2 P2 A0 L2, one male and one female child (full term normal delivery at home).

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**Fig. 1** Complete blood count and total eosinophil count report at baseline.
Physical Makeup

Patient was obese.

Generals

Mentals: anxiety about health++, restless+, mildness+, easily gets emotional+
Physical: sweets desire+, appetite decreased, thirst+, chilly+
Physical examination: vitals were normal (blood pressure, temperature, pulse rate, respiratory rate)

Auscultation: On expiration, diffused wheezing++ on both lung field
Clinical diagnosis: bronchial asthma

Investigations

Blood Report

- Before treatment: haemoglobin (Hb), 11.8 g/dL; total leucocyte count, 6.81 thousands/cumm; PLT, 2.56 lakhs/cumm; DLC (differential leukocyte count) (P, 64%; L, 20%; E, 9%; M, 6%; B, 1%); total eosinophil count (TEC), 550/cumm; erythrocyte sedimentation rate (ESR), 34 mm/1st hr (~Fig. 1)
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- After treatment: Hb, 12.1 g/dL; TEC, 150/cumm; ESR, 11 mm/1st hr (►Fig. 2)
- Chest X-ray (posteroanterior view): normal study

**Pulmonary Function Test (PFT) Report**
- Before treatment: moderate obstruction (forced expiratory volume in 11 [FEV1]: 55% [►Fig. 3])
- After treatment: normal study (FEV1: 112% [►Fig. 4])

**Elizabeth Juniper’s ACQ Score**
- Before treatment ACQ Score: 32 (►Fig. 5)
- After treatment ACQ Score: 4 (►Fig. 6)

**Treatment Plan**
- Anxiety about health
- Asthma with obesity
- Cough with purulent expectoration
- Breathlessness aggravated in wet weather ameliorated by forward bending
- Cough with breathlessness
- Weakness of extremities with depression on back of knee joint

**Repertorial Sheet**

**Selection of Remedy**
Homoeopathic medicine *Blatta orientalis* was selected after the repertorisation using synthesis repertory in RADAR 10 (►Fig. 7) and consultation with *materia medica*. It acts on acute condition of asthma rather than in chronic conditions.

**Selection of Potency**
30C Potency of *Blatta orientalis* was prescribed due to its better action in lower potencies in acute and sub-acute paroxysms of bronchial asthma.

![Table 1](image)

**Repetition of the Doses**
Taking into account the disease severity, acuteness of attacks and low potency of the medicine *Blatta orientalis* 30, it was determined that it can be repeated frequently and was recommended to be taken thrice a day (TDS).

- Prescription: *Blatta orientalis* 30/TDS (►Table 1)

**Discussion**
Homeopathy believes in holistic, totalistic and individualistic approach for any disease. But sometimes, acute remedy is prompted by the totality of symptoms of an individual to counter acute exacerbations. Asthma is a significant burden, not only in terms of healthcare costs but also in terms of lost productivity, reduced participation in family life and greatly affecting the quality of life of patients. The indicated homoeopathic remedies, which are selected based on the acute totality of symptoms, help stimulate the defence mechanism of the body and thereby reduce the frequency and severity of subsequent attacks on later exposure to allergen. Thus, homoeopathic treatment encourages a healthy homeostasis while...
eliminating the risk of drug dependency of the body. Studies have shown that homoeopathic treatment for respiratory diseases are associated with a significant reduction in the use and costs of conventional drugs.\textsuperscript{17,18} In the present case, \textit{Blatta orientalis} was prescribed after repertorisation and the result confirms the usefulness of \textit{Blatta orientalis} in sub-acute exacerbation of bronchial asthma if indicated by the acute totality of symptoms. This case report has relevant evidence of bronchial asthma treated with 30C potency.

In this case, Elizabeth Juniper’s ACQ Score was used. It is validated in adults to measure the primary goal of management (minimisation of symptoms/episodes, activity limitations, short-acting $\beta_2$-agonist use and airway narrowing). Before the commencement of treatment, patient had obtained 32 out of 42 on the ACQ Score and had marked obstruction, but after 6 months of regular follow-up and treatment, patient had marked improvement and obtained 4 marks out of 42.

**Conclusion**

As indicated by the acute totality of symptoms, the homoeopathic medicine prescribed was selected after repertorisation with the help of synthesis repertory. In this case, different parameters were used such as PFT, complete blood count and ACQ Score to assess the severity and all the parameters were suggestive of moderate obstruction with raised number of eosinophils and ESR levels. But after receiving 6 months of regular treatment, patient feels better along with reduction in the frequency of asthma attacks; investigations and Elizabeth Juniper’s ACQ Score also showed marked improvement in overall condition of the patient. The outcome of this case demonstrates the effectiveness of homoeopathic medicine \textit{Blatta orientalis}, where it is indicated by acute totality of symptoms, in case of sub-acute exacerbation of bronchial asthma.

**Fig. 6** Asthma Control Questionnaire Score after treatment.

**Table 1** Follow-up visits.

<table>
<thead>
<tr>
<th>Date</th>
<th>Symptoms</th>
<th>Prescription</th>
</tr>
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<tbody>
<tr>
<td>On admission</td>
<td>Pulmonary function test, complete blood count, total eosinophil count and ESR advised; PFT suggestive of moderate obstruction and CBC suggestive of increased value of eosinophils and ESR</td>
<td>Rx \textit{Blatta orientalis} 30C/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>15 days post admission</td>
<td>Cough and dyspnoea better; all other complaints — S.Q.</td>
<td>Rx \textit{Blatta orientalis} 30C/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>29 days post admission</td>
<td>Cough better; breathlessness with suffocative feeling also much better; improvement in wheezing sound</td>
<td>Rx Placebo 30/TDS $\times$ 21 d</td>
</tr>
<tr>
<td>50 days post admission</td>
<td>Marked improvement in dyspnoea and cough; occasionally expectoration</td>
<td>Rx Placebo 30/TDS $\times$ 21 d</td>
</tr>
<tr>
<td>72 days post admission</td>
<td>She had one episode of dyspnoea with heaviness of chest, 3 d back</td>
<td>Rx \textit{Blatta orientalis} 30C/3 doses followed by placebo 30/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>88 days post admission</td>
<td>Marked improvement in all complaints; PFT and CBC advised</td>
<td>Rx Placebo 30/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>102 days post admission</td>
<td>PFT and CBC suggestive of normal study; all complaints better</td>
<td>Rx Placebo 30/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>114 days post admission</td>
<td>All complaints better</td>
<td>Rx Placebo 30/TDS $\times$ 14 d</td>
</tr>
<tr>
<td>135 days post admission</td>
<td>All complaints better</td>
<td>Rx Placebo 30/TDS $\times$ 14 d</td>
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Abbreviations: CBC, complete blood count; ESR, erythrocyte sedimentation rate; PFT, pulmonary function test; TDS, ter die sumendum (thrice a day).
Declaration of Patient Consent
The authors declare that the patient had provided written consent for her images, investigation reports and other clinical information to be reported in the journal.

Conflict of Interest of Each Author/Contributor
The authors declare that they have no competing interest.

Acknowledgements
The authors are grateful to the institutional heads of both academic and hospital sections for their cooperation. We thank the fellow postgraduate trainees, staff, pharmacists and the patient for their sincere cooperation and participation in the study.

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