

The Utility Of Boger Boenninghausen's Characteristics And Repertory In Cases Of Lower Urinary Tract Infection In Women

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Abstract: Background: Urinary tract infections (UTIs) are one of the most frequent clinical bacterial infections in women, accounting for nearly 25% of all infections. Around 50–60% of women will develop UTIs in their lifetimes. Present study shows the efficacy of BBCR in cases of Lower Urinary tract infection in women. Objective: To ascertain the role of BBCR Management of lower urinary tract infections. Material and Methods: Purposive Sampling for research purpose will be done. Selection of the medicine will be according to concept of Method of Repertorisation given by Dr Boger. Selection of the potency and repetition was based on the laws of homoeopathic Posology described in Organon of medicine Result: This study showed a significant relief to women suffering from lower urinary tract infections. Many patients who were facing difficulty or uneasiness in their day-to day schedule could attend it with best ability. Conclusion: This study has concluded the great utility of BBCR repertory in finding similimum for cases of LUTI in women. [Oza N Natl J Integr Res Med, 2022; 13(6): 33-35, Published on Dated: 15/11/2022]

Key Words: Lower Urinary Tract Infection, Boger Boenninghausen's Characteristics & Repertory

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Introduction: Urinary tract infections (UTIs) are one of the most frequent clinical bacterial infections in women, accounting for nearly 25% of all infections. Around 50–60% of women will develop UTIs in their lifetimes. Females between the ages 16 to 35 are more than forty times likely to develop urinary tract infection than aged-matched males. In women these infections occur in 1 to 3% of schoolgirls and then increase markedly in incidence with the onset of sexual activity in adolescence. The incidence in women rises by 1% every ten years. During pregnancy the prevalence rises to about 7%¹. however breastfeeding may be beneficial in the preventing the occurrence of lower urinary tract infection in women³.

The reason for the more affinity in women are, in females, the urethra appears to be particularly prone to get infection because of its proximity to the anus, its short length (4 cm), and its termination beneath the labia. (F: M-1.2%:0.6%)¹.

Infections of the urinary tract can be subdivided in to two general anatomic categories: lower tract infection (urethritis, cystitis) and upper tract infection (acute pyelonephritis, and intrarenal and perinephric abscess)¹. Lower urinary tract infection is the very common cause of morbidity and if not treated properly it can spread to upper

tract which can become serious illness and may become an important cause of mortality. Lower urinary tract infection presents with symptoms like, dysuria, frequency, urgency, supra pubic pain and occasionally fever and chills.

The goal of treatment should be to give relief and also to prevent recurrences. Homoeopathy has ability to treat such kind of acute infection and also prevent the recurrences by increases the vitality of the patient.

Hahnemann clearly perceived holistic concept of organism and placed it against the medical profession through the rational therapeutic system .i.e. Homoeopathy. Homoeopathic physician does not prescribe on the diagnosis of the symptoms .He prescribes for the individual suffering of the patient.

The Homoeopathic Materia medica, which records many symptoms of drugs, is like an ocean. The complexity of the number of symptoms and the wide varieties of polychrest medicine to exhibits its action on the every part of the body. One must need an index which arranges all these symptoms in an elaborated and systematic manner. Repertory serves these purposes. Dr. Boger was a pioneer in handling cases with complex pathologies. He laid down a formal approach to manage cases with this

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dimention. Repertory has always been a bridge to help in different varieties of cases. Out of all repertories BBCR is considered as the pioneering repertory in terms of its content, philosophy and structure. Dr.Boger in this repertory has tried to bridge the gap between Kent Repertory and Boenninghausen's Repertory⁴.

The remedies indicated for the lower urinary tract infections from our materia medica are mostly Anti-psoric.BBCR repertory has been constructed by utilizing Boenninghausen's anti-psoric Repertory with addition of modalities and concomitant. The lower urinary tract infections are presented with predominantly common symptoms of disease. The characteristic modalities and concomitants are the important features which can be used for the individualization of the case.

Material & Methods: The study was a Clinical, prospective and interventional study conducted on a total of 30 women presenting with symptoms and signs of lower urinary tract infections like dysuria, frequency, urgency, suprapubic pain, cloudy offensive urine, very occasionally fever and chills, respectively had taken for the study. Male patients, immune compromised patients and patient's required surgical intervention were excluded. An assessment tool was developed in order to evaluate the results.

Result: A sample of thirty cases from patients attended the outpatient department of Swami Vivekanand homoeopathic college and researches Centre as well as my private opd (Vrushti homoeopathic clinic) were taken for the study. All the thirty cases were followed up for the period of three months. In this study it is observed that the cases of Lower Urinary Tract infections are more in age group of 20-29 years of age, then 30-39 years of age group.

Then again after it is also increase in the age group of 50-59 years of age group. The common causative factors found in this study were use of public toilets and poor hygiene.

Among 30 cases in this study 27 cases were improved very well while only 3 cases had poor recovery. Most of the cases covered psora miasm while only few had sycosis and syphilis in their background². Discussion As the totality was formed according to Boger's concept

concomitant symptoms, modalities, and physical particular symptoms were frequently used followed by physical generals for the Repertorisation. Rubrics related to various sensations, concomitants and modalities (including causative modalities) were used.

Rubrics related to sensations were 5 [Boenning] [Urinary organs] Kidneys: Dull-pain: [Boenning]

[Urinary organs] Bladder: Burning: [Boenning][Urinaryorgans]Bladder: Closure, sensation

[Boenning][Urinaryorgans]Urethra: Closed sensation:

[Boenning] [Urinary organs]Urethra: Constriction, sensation of:

[Boenning] [Urinary organs]Urethra: Drop, sense of as in:

Rubrics related to pathological generals 5

[Boenning][Urinary organs] Kidneys: Inflammation: Rubrics related to Modalities

[Boenning] [Urinary organs]Conditions: Bladder, empty, agg :

Boenning][Urine]Conditions of Urination: Injuries after: (Causative Modality)

[Boenning][Urine]Conditions Of Urination: Lying: Agg.:

Rubric Related to Concomitants5 Boenning][Urine] Micturition: Urging: Anxiety, with:

Out of 30 cases of LUTI, the common group of the remedies found to be effective were Nux Vomica, Staphysagria, Causticum Calcarea carb, Cantharis, Berberis Vulgaris, Equisetum, Capsicum and Argentum Nitricum were Sepia, Pulsatilla, Lycopodium and Merc Sol^{5,6}.

Conclusion: This was small endeavor to explore the utility of Boger Boenninghauser's Characteristics and repertory in cases of Lower Urinary Tract Infection in women. This work may provide motivation to new aspirants to explore further the utility of Boger Boenninghausen's Characteristics and repertory for the practitioner.

After the research work it was concluded that homoeopathic medicine has shown the efficacy

in the treatment of LUTI. Boger Boenninghausen's Characteristics and Repertory contains many good rubrics which are helpful in cases of LUTI. But for all this Good case taking, correct totality of symptoms, Selection of medicine and Selection of Proper potency is required. However, further randomized controlled trial with a larger sample scale and longer follow up duration are required to conclusively establish these findings.

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