

Measles and Homoeopathic Approach

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ABSTRACT

One of the most widespread viruses that can infect youngsters is the measles. Preschoolers are particularly susceptible, and it is typically seen in the winter and spring.

Before the vaccine was developed in 1963, there were 500 fatalities and 3–4 million cases of measles annually in the US. Due to immunisation, there have been much fewer measles infections in recent years. The illness hasn't been totally eliminated, though.

For many years, homoeopathy has been shown to be successful in both preventing and treating measles, and several cases have amply demonstrated this. Early on in a sickness, homoeopathic remedies are helpful. Our homoeopathic treatment boosts our immune system, protecting us from the catastrophic repercussions of the measles in addition to treating the disease.

Keywords: Measles, Homoeopathy, Rash, immunocompromised patients, Children.

INTRODUCTION

Measles is a viral disease of the respiratory system that is mostly brought on by an RNA virus and is characterised by a high fever, a dry cough, and widespread rashes.

Measles is a very contagious illness, so those who contract it should avoid contact with others. If correct care is not given, it can be fatal for children and cause major complications.

90% of measles cases in youngsters are those who have not received the vaccine.

Numerous outbreaks can develop into epidemics that cause fatalities, particularly in young, undernourished, and immunocompromised children. The mortality and morbidity of measles have decreased as a result of the introduction of the measles vaccination, as well as improved childcare and healthy eating.

EPIDEMIOLOGY

Since it causes 80% of cases of heel pain, plantar fasciitis (PF) is one of the most frequent musculoskeletal (MSK) complaints of the foot [5]. 10% of the general population, according to researchers, will encounter it at least once in their lifetime [6]. Over one million doctor visits take place each year in the USA due to it [7]. Thought to just affect athletes, it has also been seen in those who lead sedentary lifestyles. Age and gender have no bearing on it [7,8].

ETIOLOGY

A single-stranded RNA virus belonging to the Paramyxoviridae family of the genus Morbillivirus is what causes measles.

The only source of infection is man. Typically, an infection spreads when someone inhales droplets of secretions from an infected person's nose, throat, or mouth. When a person puts his or her fingers in their mouth, nose, or rubs their eyes after contacting an infected surface, the

contaminated droplets can even be active on surfaces for several hours.

When the measles virus comes into contact with droplets aerosols where the virus is discharged, it enters mostly through the respiratory tract or conjunctivae. From three days prior to the rash's emergence until 4-6 days after it starts, a patient contracts the illness.

PATHOGENESIS

Incubation duration: From the time of exposure until the start of a fever or rash, the incubation period ranges from 7 to 21 days. The measles virus spreads to the respiratory tract at this time by migrating to local lymph nodes and causing a primary viraemia (in which the virus enters the bloodstream and spreads to the rest of the body). The virus was transmitted to the reticuloendothelial system by the secondary viraemia.

Prodromal illness: Within 7–11 days, secondary viraemia sets in, causing the respiratory tract to necrotize and the production of large cells in the bodily tissues. Giant cells of two different types—Warthin-Finkeldy cells and epithelial giant cells can be seen.

Recovery phase: During this time, viral replication takes place, CD4 AND CD8 cells are activated, and a rash begins to appear.

CLINICAL FEATURES

Measles symptoms typically start to manifest 10 to 14 days after the virus has been exposed.

A moderate fever, a dry hacking cough, sneezing, itchy red eyes, severe lachrymation, and running nose mark the beginning of the prodromal phase.

Exanthema-Koplik's spot typically manifests as distinct bluish white patches inside the cheeks, directly across from the second molars, on the second or third day of illness. These spots can later migrate to the lips, hard palate, conjunctival folds, and vaginal mucosa.

The severity of measles symptoms worsens for two to four days before the rash starts to develop on the fourth day. Early rashes are characterised by maculopapular eruptions that blanch with pressure. It appears behind the face, trunk, and forehead hairline. In 50% of instances, the extremities, palms, and soles may also be affected. Fever starts to increase at the same time, reaching 104 degrees. Additionally, lymphadenopathy, lethargy, and appetite loss can occur occasionally.

When the rash appears, the other measles symptoms start to fade as well. After seven days, the rash will start to fade in the same order that it appeared, leaving a brown discoloration or desquamation of the skin.

The following symptoms may be present: fever, dry cough, excessive lachrymation, running nose, Koplik spots (separate bluish white spots within cheeks, lips, hard palate, conjunctival folds), and maculopapular rash behind ears, on the trunk, in the extremities, on the palms, and on the soles.

RISK FACTORS

Unimmunization - People who have not got the measles vaccine are more likely to contract the illness than others

Overcrowding - Children who live in crowded places or attend schools are more likely to contract the disease

Travelling-Travelling to other countries where measles is common increases the risk of contracting the disease.

Vitamin A deficiency increases the risk of developing measles in those who have the condition.

Malnourishment- Children who are undernourished are more likely to contract the disease.

Immuno compromised individuals-People have immune systems that are impaired by illnesses like diabetes and HIV, which make it harder for the body to fight off infections.

PREVENTION

Isolation – Patients with measles are typically contagious for 3–6 days prior to the beginning of the rash. Therefore,

patients should restrict their exposure during this time.

Vaccination - Measles and rubella virus are mixed in the MMR vaccination, which is also available as a monovalent formulation. The first dose should be given between 9 and 12 months, and the second one between 4-6 years. An unvaccinated person who has had close contact with the measles should get immunised within 72 hours of the contact before returning to school or their regular job.

COMPLICATIONS

Measles complications typically arise as a result of the virus invading the respiratory tract and immune system. Patients under the age of five and patients beyond the age of twenty tend to have high death and morbidity rates.

Respiratory system-The most frequent side effects of measles include bronchiolitis, laryngitis, otitis media, sinusitis, and mastoiditis. The most frequent cause of mortality from measles is pneumonia. Giant cell pneumonia is the result of an additional bacterial infection (*Streptococcus Pneumoniae*).

Gastrointestinal system: Measles is associated with diarrhoea and vomiting. Lymphoid tissues that obstruct the appendix's lumen can cause appendicitis.

Measles encephalitis is a condition that primarily affects those who have not received the measles vaccine and damages brain cells. It manifests as myoclonus, stupor, mental impairment, seizures, and coma.

Subacute Sclerosing Panencephalitis (SSP) is a devastating chronic side effect of the measles. Mental impairment and myoclonic jerks are its hallmarks. It happens three to eight years after the initial measles infection. It is a gradual virus infection that causes cell death and inflammation.

HOMOEOPATHIC MANAGEMENT

Numerous infectious diseases, such as the measles, have been successfully treated and prevented with homoeopathic medicine.

Depending on the presenting symptoms, homoeopathic treatment for measles can be administered in the early stages of the illness.

The goal of homoeopathic measles treatment is to improve the immune system while also enhancing the patient's constitution and curing any underlying diseases.

1. Apis Mell

Rash starts to appear but doesn't finish and goes away quickly, leaving the infant ill. Warmth makes itching worse, and puffy eyes and face. This is a key remedy in the homoeopathic treatment of measles.

2. Belladonna

It is indicated when a high fever, flushed face, and throbbing headache suddenly appear. This fantastic homoeopathic treatment for measles. The child is typically sleepy and not thirsty

3. Bryonia

It is administered when delayed measles skin outbreaks occur. Children may cough vigorously and dryly without producing any expectoration. Any movement hurts.

4. Pulsatilla

In this case, the child exhibits thick, yellow nasal discharge in addition to excessive eye tears. Additionally, they have thirstlessness and a dry cough at night that becomes loose throughout the day.

5. Aconitum Napellus

This cure should be used if a sudden high fever with hot, dry skin, eye pain, intense thirst, or feelings of dread or panic appear. Symptoms frequently begin about midnight and can cause the person to wake up.

6. Euphrasia

When measles is present, this treatment is advised because the eyes are enlarged, weeping, and extremely sensitive to light. The tears may cause facial irritation, and the person may experience watery and bland discharge coming from their nose. Fever

may make a headache worse. The person prefers to stay in a gloomy room, feels worse in the heat, and gets chills.

7.Gelsemium

Strong indications for this medicine include drowsiness, fatigue, fever, droopy eyes, and chills that go up and down the spine. The rash is hot, dry, and itchy. When Gelsemium is required, a headache that starts in the back of the head and neck is frequently experienced.

8.Kali Bich

The duration of cold symptoms increases. There may be hoarseness, coughing up of stringy yellow mucus, earaches, and watery eyes. The person feels best by remaining in bed and remaining warm because symptoms may be worse in the morning.

9.Rhus tox

A severe rash that gets better with heat application may suggest the necessity for this treatment. The person feels incredibly agitated and may feel compelled to stand up and pace. All of the body's muscles could experience stiffness, which is worse at night, from staying still in bed, and in the morning. Along with a fever, the person may also have chills, and warmth and movement help with these symptoms.

CONCLUSION

Homoeopathy aims to address both the underlying cause and individual vulnerability of the measles in addition to treating the symptoms. In terms of therapeutic medication, there are a number of homoeopathic treatments for measles that can be chosen based on the cause, sensation, and modalities of the complaints.

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