

Original Research

Effectiveness of viburnum opulus mother tincture in primary dysmenorrhoea

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ABSTRACT:

Primary Dysmenorrhoea, menstrual pain without pelvic pathology, is the most common gynecologic problem in young menstruating women with almost 90% young women reporting having some degree of discomfort and pain. Homoeopathic medicines not only offer pain relief but also decrease its tendency. Viburnum opulus is well indicated for dysmenorrhoea. **Aims-** (a) To study different cases of primary dysmenorrhoea in females. (b) To study effectiveness of Viburnum opulus mother tincture in cases of primary dysmenorrhoea. **Objectives-** To achieve the aims, I have the following objectives-(a) To assess possibility of usage of Viburnum opulus mother tincture in cases of primary dysmenorrhoea after doing statistical analysis. (b) To make a comparative analysis of placebo and Viburnum opulus mother tincture effects after administering to two groups. **Study Design-** Single blind clinical study. **Method-** 80-100 female patients with primary dysmenorrhoea were studied for six months. Patients were enrolled as per inclusion criteria and were divided into two groups by random allocation method, experimental group was given Viburnum opulus mother tincture, and control group was given placebo. **Result-** Treatment with *Viburnum opulus* in group A showed significant improvement from baseline 5.66 which reduced to 4.047 at one month, 2.42 at three month and .761 at six months. Max. Menstrual Pain intensity at baseline is 8 which reduced to 7 at one month, 3 at three months, and 2 at six months after treatment with 40 cases showing marked improvement, and 2 cases show moderate improvement. However those treated with placebo, in Group B (n=42), 2 cases shows mild improvement, 40 cases show non-significant changes. **Conclusion-** Viburnum opulus mother tincture is more effective in acute management of pain, because mother tincture act on physiological level and Primary Dysmenorrhoea is also physiological condition so we can administration *Viburnum opulus* as a primary solution in pain management of Primary Dysmenorrhoea.

Key words- Primary Dysmenorrhoea, Viburnum opulus, mother tincture, Numerical rating Scale.

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INTRODUCTION

Dysmenorrhoea is defined as the presence of painful cramps of uterine origin that occur during menstruation. It is one of the most common causes of pelvic pain and menstrual disorder. ⁽¹⁾ The term 'dys' meaning difficult/painful/abnormal; 'meno' meaning month and 'rrhoea' meaning flow⁽²⁾ is amongst the commonest complaint in females of reproductive age group.

The International Association for the Study of Pain defines pain as "an unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage". The burden of Dysmenorrhoea is greater than any other gynecological complaint. World Health Organization

estimated that Dysmenorrhoea as the most important cause of chronic pelvic pain.⁽¹⁾

The worldwide prevalence of dysmenorrhoea varies substantially from 16% to 91% whereas study in India reported in between 50 to 88%. Another study reported that dysmenorrhoea affects upto 90% women of child bearing age to varying degrees. Its 70.2% and furthermore in Rajasthan it came out to be 81.5%, in rural and 76%, in urban area.^(3,4,5)

Dysmenorrhoea may be primary or secondary dysmenorrhoea. Primary dysmenorrhoea is termed as painful menstruation without any organic pathology and elevated endometrial prostaglandins and its metabolites are said to be the causative factor.⁽⁶⁾

Nearly about 50% of the menstruating women are facing Primary Dysmenorrhoea around the world.⁽⁷⁾

It nearly affects 50% of the adolescent young girls from 14 to 25 years especially. Primary dysmenorrhoea impacts daily activities and causes a great distress. Often girls miss school and colleges due to severe pain. Work sector also faces huge loss due to absence of female employees or their reduced output due to anguishing pain. This affects the quality of life and increases the absenteeism in the college students and working women and is also a big social issue for the menstruating women.⁽⁷⁾

Primary dysmenorrhoea (spasmodic) starts within years of menarche⁽⁸⁾. The pain of primary Dysmenorrhoea usually begins few hours prior, to just after the onset of menstrual period and may last long as 48-72 hours⁽⁹⁾. Affected women experience sharp, intermittent spasms of pain, usually centered in the hypogastrium or supra-pubic area commonly associated with systemic symptoms like nausea, vomiting, diarrhea, fatigue, fever, headache or light-headedness and nervousness. Vasomotor symptoms like cold sweats, pallor, faintness and collapse may be associated.⁽⁸⁾

Conventional system of medicine offers symptomatic treatment only, so it acts as temporary relief. In homoeopathic system of medicine, we give medicine based on individualisation; that said, however, there are some other ways of prescribing too. According to Dr. John Henry Clarke, some drugs have a predominant affinity for certain organs so these drugs will cure a great variety of infections arising from these particular organs. These remedies are called Organopathic Remedies.

A Review of Phytochemistry and Biological Effects of *Viburnum opulus* reported presence of bioactive components such as phenolic compounds, vitamin C, carotenoids, iridoids, and essential oils. In vitro studies on *Viburnum opulus* show the antimicrobial potential of *Viburnum opulus*, especially against Gram-positive bacteria. In cell-based studies, *Viburnum opulus* demonstrated anti-inflammatory, anti-obesity, anti-diabetic, osteogenic, cardio-protective, and cytoprotective properties.⁽¹⁰⁾

Homoeopathic preparation of *Viburnum opulus* has been used for female related problems such as menstrual pain. W. Boericke, Hering and Clarke explained indications of *Viburnum opulus* in the treatment of primary dysmenorrhoea.⁽¹¹⁻¹³⁾

In this study, effectiveness of *Viburnum opulus* mother tincture was studied with regard to primary dysmenorrhoea cases.

MATERIALS AND METHODOLOGY

1. Study setting- Female patients from OPDs of following hospitals were part of study.

- a. Sri Ganganagar Homoeopathic Medical College, Hospital & Research Centre, Sri Ganganagar, Rajasthan.

- b. Daksh Multi Speciality Hospital, Hanumangarh, Rajasthan.

2. Sample size- 90 female patients were studied in this study.

- a. **Group A:** Treated with *Viburnum opulus* mother tincture- 45

- **Drop out** -03

- b. **Group B-** Placebo- 45

- **Drop out** -03

3. Study duration- Six months follow up was done.

4. Selection of samples- Simple random selection method was used.

5. Study type: Comparative study done with random allocation in treatment groups using computer generated randomization chart.

6. Study design- Single blind clinical study was conducted in the study.

7. Inclusion criteria-

- a. Menstruating Female between ages of 18-28 years.

- b. Willing to give Informed consent.

- c. Diagnosed Cases of Primary Dysmenorrhoea.

8. Exclusion criteria-

- a. Cases who refuse to give their consent for the study.

- b. Cases with gross pathological changes (Secondary Dysmenorrhoea) like Uterine tumours, Fibroids, Cervical stenosis, Endometriosis etc were excluded.

- c. The patients who were not willing to discontinue other pharmacological intervention.

- d. Patients who were suffering from any other systemic illness requiring conventional treatment.

- e. Patients with advanced pathological conditions and Immunocompromised patients.

- f. Pregnant, those trying for conception and lactating females will be excluded.

- g. **Declaration-** Treatment given to patients during the course of study was not harmful in nature as per my knowledge.

- h. **Diagnosis-** No specific test is available for diagnosis of dysmenorrhoea. It is done after finding presence of typical symptoms of primary dysmenorrhoea in young adult females.

Primary dysmenorrhoea is covered under N94.6 code in ICD-10- CM

9. Remedy selection- Mother Tincture of *Viburnum opulus* is used in the experimental group.

10. Posology- Two groups are divided, one is experimental group, and other is control group. Control group is given placebo, whereas experimental group is given mother tincture of *Viburnum opulus*.

- a. ***Viburnum opulus* Mother Tincture:** The pharmacist was trained for the dispensing of Mother Tincture with precision as follows: Ten drops of the mother tincture will be dissolved in ½ cup of water and given three times in a day. Appropriate instructions will be given to the patients. Change of dosage was on after observing

Treatment with *Viburnum opulus* in group A showed significant improvement from baseline 5.66 which reduced to 4.047 at one month, 2.42 at three month and .761 at six months. Max. Menstrual Pain intensity at baseline is 8 which reduced to 7 at one month, 3 at three months, and 2 at six months after treatment with 40 cases showing marked improvement, and 2 cases show moderate improvement.

However those treated with placebo, in Group B (n=42), 2 cases shows mild improvement, 40 cases show non-significant changes.

CONCLUSION

Viburnum opulus mother tincture is more effective in acute management of pain, because mother tincture act on physiological level and Primary Dysmenorrhoea is also physiological condition so we can administration *Viburnum opulus* as a primary solution in pain management of Primary Dysmenorrhoea.

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