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Souvik Dutta
MD (Hom.), Former Postgraduate Trainee, Department of Organon of Medicine and Homoeopathic Philosophy, D.N. De Homoeopathic Medical College and Hospital, Kolkata, West Bengal, India

Subhasish Ganguly
M.D. (Hom.), M.Sc. (Dietetics) Principal-in-Charge & Head of Department, Organon of Medicine and Homoeopathic Philosophy, D.N. De Homoeopathic Medical College and Hospital, Kolkata, West Bengal, India

Corresponding Author:
Souvik Dutta
MD (Hom.), Former Postgraduate Trainee, Department of Organon of Medicine and Homoeopathic Philosophy, D.N. De Homoeopathic Medical College and Hospital, Kolkata, West Bengal, India

Individual acute disease of infectious origin: A comprehensive overview

Souvik Dutta and Subhasish Ganguly

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Abstract
Background: Individualization is a fundamental concept in homeopathy. It involves differentiating an individual from a group of similar cases. In homeopathic practice, understanding the unique characteristics of each patient is essential for effective treatment.
Discussion: Individual acute diseases can be categorized into two main types based on their causes: infectious and non-infectious. Infectious diseases arise from harmful microorganisms like bacteria, viruses, fungi, or parasites. Examples include the common cold, flu, COVID-19, and scabies. These diseases are communicable, meaning they can spread from an infected person to a healthy individual through direct or indirect contact. Infectious diseases that spread from person to person are said to be contagious. However, not all infectious diseases are contagious such as cholera or diarrhoea cannot be transferred from person to person.
Conclusion: It is possible to prevent an infectious disease by proper way. It is also possible to prevent infection by immunization and homoeopathic prophylaxis. Prevention and early intervention play a crucial role in maintaining overall health.

Keywords: Homeopathy, individualization, infectious diseases, immunization

Introduction
Acute diseases are rapid pathological conditions of the disrupted vital functions, typically resolving within a moderate period either through recovery or death. [1]. An acute disease is marked by a sudden onset of typically severe symptoms.[2]. Acute diseases can be categorized in two ways depending upon causations i.e. infectious and non-infectious. Here infectious diseases are caused by microscopic germs. This infectious disease may be contagious or non-contagious. Contagious means it can spread from person to person by direct or indirect way such as common cold, flu, covid-19 infection, sexually transmitted diseases (STD) etc but non-contagious variety spread animal or insect to people but that are not contagious from another human such dengue, chicken-guinea. Moreover few infectious diseases transmit via food, water, etc such as hepatitis, salmonella infection, staphylococcus food poisoning etc which usually affects many people at a time depending upon the virulency of this organism. In Homoeopathy concept of health, disease and cure is solely based on individualization. Individualization refers to the process of distinguishing an object or person from others within a similar class or group. [3]. Homoeopathy is characterized by the principle of individualization, which governs all its practical processes. Homoeopathy acknowledges the unique characteristics of each drug and substance in nature, as well as the individuality of each patient or case. [4]. It is a philosophy which helps us to understand each person distinct from the rest of the mankind. This individualistic approach is the very basis of the homoeopathic system of medicine [3].

Materials and Methods
Acute disease of infectious origin [5]
Infection occurs when disease-causing agents invade an organism's body tissues, multiply, and provoke reactions from host tissues due to the agents and their toxins. Infectious diseases, also known as communicable diseases or transmissible diseases result from such infections. These infections are caused by a variety of infectious agents including viruses, viroids, prions, bacteria, parasitic nematodes like roundworms and pinworms, arthropods such as ticks, mites, fleas, and lice, fungi like ringworm, and other macro-parasites such as tapeworms and helminths.

The occurrence of infectious disease in a community becomes clearly in excess of normal expectancy, this situation termed as Epidemic disease. The definition of an epidemic hinges on an "excess of expected occurrence," a threshold which lacks consensus on what constitutes a significant excess. In the United States, diseases like Cholera are typically absent, so even a single case could potentially be deemed an epidemic. Conversely, in countries like India, where cholera is endemic in certain subgroups, a few hundred cases annually may be considered normal. For cholera to be classified as an epidemic in India, it would require cases well above this endemic baseline. Epidemics of infectious diseases are typically triggered by multiple factors such as changes in host population ecology (like increased stress or vector density), genetic variations in pathogen reservoirs, or the introduction of new pathogens to a host population through pathogen or host movement. Various factors are responsible for disease of infectious origin and that can be termed as Epidemiological triad i.e. Agent factors, Host factors, Environmental factors. Agent factors: a. Infectivity i.e. Infectivity refers to the capability of an infectious agent to invade and multiply within a host, leading to infection. b. Pathogenicity i.e. is the ability to cause clinically apparent illness. c. Virulence i.e. is defined as the proportion of clinical cases resulting in severe clinical manifestations. The case fatality rate is a measure of virulence. Host factors: the human host is likened to 'soil,' while the disease agent is compared to a 'seed.' Environmental factors: Examples of physical factors include air, water, soil, housing, climate, light, noise, etc. Examples of biological factors include microbial agents, insects, rodents, animals, plants, etc. Psychological factors include cultural values, customs, habits, beliefs, attitudes, morals, religion, education, lifestyles, community life, and health services. Infectious diseases can spread through various means. [5] in various ways such as,

- Airborne transmission: Infection spreads through droplet nuclei or dust in the air.
- Arthropod transmission: This occurs through insects, either mechanically via contaminated proboscis or feet, or biologically through growth or replication of the organism in the arthropod.
- Biological transmission: Involves the development stage of the infecting agent in an intermediate host.
- Contact transmission: Disease agents are transferred directly through biting, sucking, or chewing, or indirectly via inhalation of droplets, drinking contaminated water, or traveling in contaminated vehicles.
- Cyclo-propagative transmission: The agent undergoes both development and multiplication in the transmitting vehicle.
- Developmental transmission: The agent undergoes some development in the transmission vehicle.
- Faecal-oral transmission: Infectious agents shed in feces are acquired by susceptible hosts through ingestion of contaminated material.
- Propagative transmission: The agent multiplies within the transmission vehicle.
- Vertical transmission: Occurs from one generation to the next, potentially trans-ovarially or via intrauterine infection of the fetus. Some retroviruses are transmitted in the germ line, integrating their genetic material into the DNA of ova or sperm.

In Homoeopathic point of view acute disease may be classified as follows [1]

A. Individual: Acute diseases that affect individuals arise from harmful influences to which they were uniquely exposed. These conditions typically represent a brief flare-up of underlying susceptibility (latent psora), which often subsides naturally if the acute illness is not severe and is quickly controlled.

Causes: The triggering factors include excessive or inadequate food intake, intense physical impacts, exposure to cold or heat, overexertion, stress, physical injuries, and emotional distress.

B. Sporadic: These diseases affect multiple individuals simultaneously in various locations, with susceptibility limited to only a few people at any given time. Cause: - Meteoric or telluric influences, injurious agents.

C. Epidemic: These diseases afflict numerous individuals with similar symptoms caused by the same source. They often become contagious when widespread among densely populated groups of people. Each case originates from a common source, initiating an identical pathological process in all affected individuals, which typically resolves over time through either recovery or death. Cause: - Calamities of war, inundations and Famine, acute miasms i.e. Non recurring type- Which recur in the same manner (hence known by some traditional name), attack persons but once in a lifetime. Such as small pox, measles, whooping cough, the ancient, smooth, bright red scarlet fever of Sydenham, the mumps, &c. Recurring type- Recur frequently in pretty much the same manner. Such as the plague of the Levant, the yellow fever of the sea-coast, the Asiatic cholera.

Signs and Symptoms are effects but for being effect there must be causes. According to homoeopathy cause can be of two types [3]: 1. Prime/ Proximate cause, 2. Secondary cause. Prime cause means main cause, first cause and proximate means immediate cause, nearest cause i.e. Prima causa morbi. Secondary cause means cause other than the first, primary or main cause; the necessary conditions for the action of the prime cause. “The cause of Tuberculosis is the tubercle bacillus. The necessary conditions for (secondary causes of) the action of the bacillus are the peculiar bodily constitution, predisposition, susceptibility and environment of the patient. Without these concomitant conditions or causes no one would ever have tuberculosis.”—Stuart Close. [4]

Discussion

Role of Individuality in acute diseases of infectious origin

After discussing the above said topic on infectious acute disease both present and homoeopathic points of view there are few questions that should arise on the basis of present scenarios.

A. Whether the types of infectious acute diseases depend on number of people or not as said in organon of medicine. Infection or spread of infections depends on the virulency of that particular organism along with the number of people affected. If the virulency of organism

is very high then due to its virulency i.e. antigenic property of organism maximum number of people are affected and produce similar manifestations in terms of sign and symptoms. Where the virulency is high, the individual susceptibility and individuality plays little role and there will be production of similar symptoms for every person getting affected by the same micro-organism. So if few people affected with similar manifestation then it can be declared as epidemic.

B. As in sporadic disease individuality often plays a definite role as the virulency of micro-organism is less than that of epidemic. So there will be different manifestations in respect to epidemic one.
C. But in case of the individual type of acute disease the virulency of micro-organism (if caused by micro-organism) is much less than that of epidemic and sporadic so the sign and symptoms produced by the affected person vary each other. Here individuality plays maximum role.

We can conclude in the above said fashion that where the virulency is maximum their individuality plays a little role and where virulency is minimum their individuality plays a maximum role i.e. virulency and individuality is inversely proportional in case of infectious acute diseases.

D. In case of Variable incubation period [5] i.e. in case of rabies the incubation period in humans for rabies is highly variable, typically ranging from 3 to 8 weeks after exposure, but it can vary significantly from 4 days to several years. This variability is influenced by factors such as the location and severity of the bite, the number of wounds, the quantity of virus injected, the species of the biting animal, the protection provided by clothing, and any medical treatment received. Rabies stands out among communicable diseases for having such a diverse and multifactorial incubation period.
E. Miasmatic Ground of Acute Disease [1, 7]:

- Individual manifestations typically represent a temporary eruption of latent psora.
- Epidemic types are due to acute miasms.
- **Half Acute miasms [7]:** The infection of half-acute miasms without eruption. When bitten by a rabid dog, the infection spreads through the nearest nerves and subsequently affects the entire nervous system. Following this incubation period, which can last from several days to many weeks, the disease manifests as a rapidly progressing and often fatal acute illness. For this reason here variable incubation period [5] is seen. This half acute miasm in nothing but the rabies itself. If the venomous saliva of a rabid dog has truly infected someone, the transmission of the infection typically occurs irreversibly at the moment of contact. Even immediate excision or amputation of the affected area does not prevent the disease from progressing internally or the onset of hydrophobia. Thus, external measures such as cleansing, cauterization, and treating the wound may provide limited protection against the onset of hydrophobia. Ex— In Glasgow, on March 21st, 1792, an eight-year-old girl was bitten by a rabid dog. A surgeon promptly treated the wound thoroughly, ensured it remained suppurating, and administered Mercury to induce a mild salivation, continuing treatment for two weeks. Despite these efforts, hydrophobia developed on April 27th, and the patient succumbed to the disease on April 29th. (Reference: M. Duncan's Medical Commentaries, December II, Volume VII, Edinburgh, 1793, and the New London Medical Journal, Volume II.)
- **Half Spiritual miasms:** The infections with eruption like small pox, measles, chicken pox, etc which are generally contagious in nature.

Management

1. Modern concept [5]

Spread, propagation and progression of infectious diseases can be controlled in the following ways such as

- Controlling the reservoir: Early diagnosis, notification, epidemiological investigation, isolation, quarantine, disinfection, treatment.
- Breaking the channel of transmission.
- The susceptible host: Active immunization and passive immunization.

2. Homoeopathic approach [1]: In case of treating an acute disease a clear and quick case taking is needed. This case-taking helps to select remedy of this rapid morbid state. The procedures are as follows— given the disease's rapid progression and severity, there is no room for delay. Physicians may be unable to determine the symptoms present before treatment began. He must do the following-

A. The physician must content himself with observing the patient's morbid condition, though it may be altered by medicine.
B. No attention should be given to find what the previous symptoms of this disease are before taking medicine.
C. After completing the identification physician's first duty is to interrogate about present complaints and its history. Then he should take few generalities regarding the troubles.
D. But when patient comes to the physician after taking some medicines then we cannot get true picture of symptoms of diseases. But these disease symptoms mixed with the medicinal power to form Conjoint Malady (§92) by the medicinal and original diseases.
E. In this case the uses of inappropriate drugs are generally more serious and dangerous than was the original disease and hence demand prompt and efficient aid.
F. On the basis of this conjoint totality a suitable homoeopathic remedy should be selected.
G. After giving the proper homoeopathic remedy the patient shall not fall to sacrifice to the injurious drugs he had swallowed.
H. In sporadic and epidemic diseases every disease should be considered as a new and unknown one.

3. Genus Epidemicus: It is the medicine for a particular epidemic disease for that particular area and time. Hahnemann has given a clear cut idea about the collection of symptoms of an epidemic disease. The particulars to be followed during case taking are following—

a. When investigating the complete set of symptoms of an epidemic disease, it is unnecessary to determine whether such an epidemic has previously occurred anywhere in the world under the same or different name.
b. A physician must take every epidemic disease as a new one and take the case with all its particularities and

investigate it thoroughly.

c. He never relied on conjecture instead of actual observation and never assumed that the disease in front of him was already fully or partially understood.
d. The physician must carefully examine the disease in all its stages, as this approach is necessary in such cases.
e. Examination reveals that each prevailing epidemic is a phenomenon of distinct and unique character, often differing significantly from all previous epidemics, except those caused by a consistently present contagious agent such as smallpox or measles.
f. The physician should gather symptoms from multiple cases to form a more comprehensive, meaningful, and characteristic picture of the disease.
g. He should keep his attention in searching the uncommon peculiar striking and characteristics of the particular epidemic.
h. On the other side, he should keep himself busy in searching the general symptoms (e.g. the loss of appetite, sleeplessness etc.) to complete them with their peculiarities and more preciously defined.
i. By collecting the uncommon peculiar characteristic symptoms along with the general symptoms which is more preciously defined with their peculiarities, he can get the totality of symptoms of the epidemic.
j. So for the collection of totality of symptoms of an epidemic the physician have to survey several patients that of different constitution of the particular epidemic.
k. Through careful observation, a physician can often create a detailed and characteristic portrait of the epidemic by examining the first and second patients. This allows them to find a suitable homeopathically adapted remedy.

Utility of Genus Epidemicus [1]

a) For quick prescription with less labour.
b) For preventive purposes.

Examples-Hahnemann wrote that before the year 1801, when the mild form of scarlet fever as described by Sydenham occasionally spread among children, it affected every child who had not previously been exposed to it during an epidemic. However, in a similar epidemic observed in Königslutter, all children who received a very small dose of Belladonna in time remained unaffected by this highly contagious illness. Hahnemann wrote subsequently in 1801, a type of purpura miliaris (scarlet fever) arrived from the west and was mistakenly confused by physicians with scarlet fever, despite their distinct symptoms. Scarlet fever responded to Belladonna as a prophylactic and curative remedy, while purpura miliaris required aconite. Scarlet fever typically occurred as an epidemic, whereas purpura miliaris was mostly sporadic. In recent years, it appears that these two diseases occasionally combine to form a unique eruptive fever, for which neither Belladonna nor aconite alone proves to be precisely homeopathic. [1]

Regarding genus epidemicus and vaccination in homoeopathy a commentary article was published by Dutta S *et al*. [8] where authors favour the selection of genus epidemicus on the basis of symptom similarity and individualization. In a retrospective analysis [9] conducted among Indian population demonstrates the potential preventive effect of Arsenicum album 30C against COVID-19 infection.

Conclusion

In conclusion, "Individual Acute Diseases of Infectious Origin" present a nuanced landscape in medicine. These diseases, caused by pathogens like bacteria, viruses, or parasites, vary widely in severity from mild to severe. As we navigate this intricate terrain, several key points emerge: 1. Early Detection and Intervention: Swift recognition of symptoms and timely intervention are critical. Early diagnosis allows for targeted treatment and containment. Public health measures, including surveillance, contact tracing, and quarantine protocols, play a pivotal role in curbing the spread of infectious diseases. 2. Global Impact: Infectious diseases transcend borders. A localized outbreak can swiftly escalate into a global health crisis. Collaborative efforts among nations, research institutions, and healthcare professionals are essential to combating these diseases effectively. 3. Vaccination and Prevention: Vaccination remains one of the most potent tools in disease prevention. Immunization campaigns save lives and protect communities. Public awareness about vaccination benefits, safety, and accessibility is crucial. 4. Research and Innovation: Ongoing research drives our understanding of infectious diseases. Advances in diagnostics, therapeutics, and vaccine development are vital. Multidisciplinary collaboration fosters innovation and equips us to tackle emerging pathogens. 5. Human Resilience and Adaptability: Humanity's resilience shines during outbreaks. Communities rally together, healthcare workers demonstrate unwavering commitment, and scientific progress accelerates. Our ability to adapt, learn, and respond collectively defines our capacity to overcome infectious challenges. 6. Homoeopathic prophylactic approach: with symptoms similarity and holistic approach infectious diseases can be treated safely. In navigating this dynamic landscape, a holistic approach—one that combines science, empathy, and global cooperation—holds the promise of a healthier, safer world. By this above said discussion we can conclude that it is possible to prevent an infectious disease by proper way and can also prevent infection by immunization and homoeopathic prophylaxis.

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Conflicts of Interest

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