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## Effectuality of natrum muriaticum-50 millesimal potency in case of leucorrhoea

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### Abstract

Leucorrhoea is defined as excessive normal vaginal discharge. Abnormal vaginal discharge is quite a frequent complaint of women met in day-to-day gynecology clinics. Leucorrhoea directly or indirectly affects the daily functioning and psychological wellbeing of an individual with or without other pathology. Leucorrhoea if treated at an earlier stage it helps to avoid problems such as infertility, cervical cancer, spontaneous abortion, ectopic pregnancy, and unfortunate deaths. With the homoeopathic treatment, promising results have been seen in research on various clinical disorders, but there is a paucity of research in the field of LM potency. A case of leucorrhoea, treated with individualized homoeopathic medicine is presented. Further research is needed to confirm the role of LM potency in leucorrhoea.

**Case Summary:** A 36-year old women presented complaints of severe itching and discharge per vagina with burning. The clinical history and vaginal examination finding white discharge and redness of vaginal wall. After thorough case taking, repertoration and consulting with Materia Medica covered medicine is Natrum Muriaticum in LM Scale was prescribed. Questionnaires Criteria is used for confirmed the improvement.

**Keywords:** LM potency, Individualised homoeopathic medicine, Leucorrhoea, Natrum Muriaticum

### Introduction

The term leucorrhoea is applied to cases of abnormal vaginal discharge, non-haemorrhagic in nature, which is not caused by neoplasm or other serious organic disease.

Leucorrhoea is a very common complaint in gynaecological and medical practice. The vaginal discharge plays an important role in maintaining a healthy vagina. The secretions are designed to flush out bacteria and other tiny organisms to prevent infection. Normal vaginal discharge is odourless and a clear or pale colour. The condition may continue for weeks or months at a time. There are many causes of leucorrhoea, the usual one being estrogen imbalance. The amount of discharge may increase due to vaginal infection or STDs. The majority of these discharges are due to infections of the vaginal epithelium and the rest to malignancies of the cervix, uterus, or vagina, to cervical erosion and to senescent changes during menopause. It may disappear or reappear from time to time <sup>[1, 2]</sup>.

**Types of Leucorrhoea:** There are two main types of leucorrhoea <sup>[2]</sup>

- **Physiological Leucorrhoea:** White discharge which occurs during puberty, pregnancy and in female infants is called physiological leucorrhoea. It is a normal process and has no accompanied symptoms.
- **Leucorrhoea during Puberty:** It begins in the reproductive age (puberty) within some months to a year after onset of the girl's menses.
- Leucorrhoea occurs between girl's menstrual cycles and lasts for few days to weeks. Vagina produces a lot more watery or sticky discharge during ovulation.
- **Leucorrhoea during Pregnancy:** Leucorrhoea is common in pregnancy due to increase in the levels of estrogen hormone and changes in the walls of the cervix. It is noticed around the start of the second trimester (at 13 weeks) and increases as the pregnancy progresses. It offers protection to the birth canal from infections and allows growth of healthy bacteria in the vagina.
- **Newborn Infants:** Leucorrhoea is seen in new-born female infants for the initial one to two months after their birth. This is due to intra-uterine exposure to estrogen when the infant was in the womb <sup>[10]</sup>.

**Pathological Leucorrhoea**

Vaginal discharge with change in the color, consistency and smell due to infections or diseases of the female reproductive system is called pathological type of leucorrhoea. The discharge of yellow or green color with offensive odor is abnormal and alarming. In addition, it is often accompanied by itching, pain and swelling around labia.

Pathological leucorrhoea is caused by infections due to bacteria, fungi and other microorganisms. Female genitals are moist and covered for most of the time. Further, sweat in this area is common, which makes the female genitals more prone to infection and inflammation. Pathological leucorrhoea requires immediate medical attention [8, 9].

**Case Discussion**

A 38-year-old lady, a teacher in primary school, from middle socioeconomic background, presented on 9th March 2023 with the complaint of white discharge from vagina with burning maturation, which was more before menses, and itching also in the morning when she woke up, felt more on the labia majora and introitus since 1 year. The itching and burning was aggravated before menses, lower abdominal pain during menstruation from lifting heavy weights, in the morning after she woke up, and was ameliorated by pressure. Discharge was slightly offensive. Menses were regular and duration for 3 -5 days, however, clotted and occasionally offensive. The ultrasonography report of 24th March 2023 -no abnormality seen in report. The patient did not take any treatment so far, however. There was a family history of hypertension and diabetes mellitus of father. The patient had two children, elder son was 10 years old and the younger one was 8 years old, both born at full term by normal vaginal delivery. However, the last pregnancy was an abortion which was 5 years ago, following which, tubectomy was done. The patient appeared irritated during case taking when questioned about detail history of abortion. Her memory and intellect were good. According to her husband she likes to be alone. Her appetite was good, her thirst was adequate and she preferred warm food and salt. Her bowel movements were regular, but her stools were dry, hard and unsatisfactory. The patient was, in

general, aggravated in damp weather but was relieved in open air. Her menstrual cycle was regular, and flow was offensive with some clots.

Clinical examination. The patient had oily facial skin. A mild pallor was present. The blood pressure was 130/80 mmHg and the pulse rate was 80 beats/min. Axillary body temperature was 98.6 F. The rest of the general physical and systemic examination was also found to be normal.

**Repertorisation**

The totality of symptoms for this case included aversion to company, irritability when asking about questioning, desire warm food, desire salt things, constipation with hard dry stool, open air amelioration in general and crampy pain more during menses. After analysis and evaluation of symptoms, the case was found to have more characteristic generals than particulars, so the Repertory of Homoeopathic Materia Medica by Kent [3] was selected for repertorisation. After repertorisation with Kent's Repertory, giving priority to mental generals over physical generals and then to particular symptoms, Sepia was found to cover 16 of 24 rubrics and scored the highest marks while Natrum muriaticum covered 16 out of 24 rubrics and scored 12 marks by silicea. After further consultation from different materia medica [4-6], Natrum Muriaticum was selected. The qualifying symptoms, besides mental generals, aversion to company, irritated while questioning, that were in favour of Natrum Muriaticum are: oily face, crampy pain in the abdomen, amelioration by pressure, craving for salty food, constipation, dry, hard, unsatisfactory stool and pain in the abdomen in the morning after waking up [6].

Therapeutic intervention Individualised, single homoeopathic medicine Natrum Muriaticum was selected and prescribed in the LM scale, starting from LM/1, to be taken daily, once a day, in the morning on an empty stomach for 15 days, followed by LM/3 for the next 15 days in a similar manner. Before taking the medicine, 10 strokes were given to the medicine bottle, then one tablespoon of medicine was dissolved in half a cup of water, followed by stirring. From this solution, one tablespoon was to be taken and the rest to be discarded. The patient was advised to maintain local hygiene of the perineum.

Case repertorisation		Nat-m. (16)	Sep. (16)	Sil. (12)	Lyc. (12)	Plat. (10)	Sulph. (10)	Nit-ac. (10)	Ferr. (9)	Ign. (7)	Con. (7)	Zinc. (7)	Graph. (7)	Nux-v. (7)	Merc. (6)
Rep. Rubric															
kent	Genitalia female, itching, menses	2	1	2	2	1	2	3	2		2	2	3		2
kent	Genitalia female, leucorrhoea, white	3	3	1		2	1		2		2	2	3		2
kent	Genitalia female, pain, pressing, menses, during	1	2	1		2	1	1			1	1		1	
kent	Mind, company aversion to, amel., when alone	2	3		2		1		1		1				
kent	Mind, irritability, consolation agg.	3	3	3	1	2		2		3				1	1
kent	Rectum, constipation, insufficient, incomplete, unsatisfactory...	3	2	2	2		3	3		2		2	1	3	
kent	Stomach, appetite, easy satiety	2	2	2	3	3	2	1	2	2	1			2	1
kent	Stomach, desires, warm, food			1	2				2						

**Fig 1: Flowchart of Case Repertorisation and Remedy Selection**

### Follow-up and outcomes

The patient was followed up for 6 months, and no complication or relapse of the symptoms was noted during this period. During the period of treatment, the patient

improved symptomatically, and changes were evident by questionnaires. No homoeopathic aggravation, either subjective or objective, was noted during the treatment.

**Table 1:** Patient Treatment Record

Date	Symptoms	Prescription	Repetition
09 March 2023	Burning redness and Itching White Discharge per vagina	Natrum mur. LM 1, 16 doses, Placebo	Once daily, in the morning. 4 globules daily at night
24 March 2023	Pain in the lower abdomen decreased; Low back pain is also better Discharge per vagina same as before	Natrum mur. LM 2 16 doses	Same as before USG-no abnormality Seen.
15 April 2023	Pain in lower abdomen much better than before; Low back pain decreased further	Natrum mur. LM4 16 doses	Same as before
13 May 2023	No pain in lower in lower abdomen. Low back pain is much better. Discharge per vagina slight better	Placebo 200	4 globules daily morning and evening
14 Jun 2023	No pain in lower abdomen; Low back pain occurs rarely; Discharge per vagina was same as before	Placebo 200	4 globules daily morning and evening

### Discussion

In this case of leucorrhoea Nat. Mur LM/01 to LM/04 dose was prescribed on the basis of totality of symptoms. First follow up after 15 days, patient had feeling of well-being though leucorrhoea was as it is. It means patient is improving. Homoeopathic medicine offers gentle and safe relief and reduces chances of recurrence significantly. After 3rd and 4th follow up patient improved well. Leucorrhoea reduced. Patient had satisfaction after taking treatment. There also were some marked physical and mental generals, which further helped in the selection of individualised homoeopathic medicine. The homoeopathic treatment is based on the individualisation of the patient. After repertorization, both Sepia and Natrum muriaticum were found to be covering a maximum number of rubrics. Finally, Natrum muriaticum was selected to be prescribed based on the symptoms: the oily face, craving for salty food, dry, hard, unsatisfactory stools, and lower abdominal pain; aggravated in the morning. The medicine was given in the LM potency so that frequent repetition could be done for quick recovery in this chronic case. The medicine continued for 5 months, with a gradual relief in symptoms

### Conclusion

This case report highlights the positive impact of individualised constitutional homoeopathic treatment in Leucorrhoea selected in a classical manner. A research study with a robust design and appropriate sample size is recommended for further strengthening the evidence.

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