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Role of homoeopathy in the management of tonsillitis: A review of previous studies

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Abstract

Tonsillitis is one of the most common issues faced by children and young adults and a major cause of absenteeism among children in school [2].

Most of the cases are viral and are self-limiting but a few of them caused by bacteria may produce various complications, both local and systemic.

In chronic and recurrent cases tonsillectomy may be advised, though it has multiple potential risks [2].

Homoeopathy can help reduce problematic symptoms and potentially lessen the need for surgical intervention.

Key words : Acute tonsillitis, Chronic tonsillitis, Recurrent tonsillitis.

Introduction

Tonsillitis may be defined as the inflammation of **palatine tonsils** (a part of waldeyer's ring) [10] producing symptoms like **sore throat, lump in throat, odynophagia, dysphagia, halitosis, cough (viral pathology), fever, malaise, snoring etc [1], [8], [10].**

Tonsillitis may be classified into **viral or bacterial** depending upon the causative organism or it may also be produced due to an immunological factor [2], [10].

Viral tonsillitis may be caused by viruses like the rhino virus, corona virus, epstein-barr virus, cytomegaly virus, HIV virus, etc [6], [10].

Whereas bacterial tonsillitis may be caused by organisms like the group A beta-hemolytic streptococcus, haemophilus influenzae, staphylococcus aureus, streptococcus pneumoniae, haemophilus influenzae, mycoplasma pneumoniae, neisseria gonorrhoeae, etc [10].

On the basis of duration and episodes of tonsillitis it may also be classified into **acute, chronic or recurrent**.

Recurrent tonsillitis may be defined as occurence of **atleast 7 episodes of tonsillitis in a year, atleast 5 episodes of tonsillitis in two year or atleast 3 episodes of tonsillitis in three years [1], [6].**

Centor score [4], {7] and **McIsaac score are useful tools that help in better management of the case in hand [10].**

Viral tonsillitis accounts for approximately 70-95% of the cases whereas bacterial tonsillitis accounts for about 5-15% of the cases [7], [10].

Risk factors

Risk factors for tonsillitis include -

1. **Age**- children aged 5-15 years are at increased risk for tonsillitis.
2. **Exposure**
3. **Weakened immune state**
4. **Seasonal variation-** More number of cases are recorded during **winters and spring.**

Diagnosis

Diagnosis of tonsillitis is primarily clinical and includes -

1. **Physical examination** that depicts enlarged, inflammed tonsils, tender cervical lymph nodes, suppuration of tissues, etc.
2. **Routine tests like CBC**
3. **Rapid antigen detection test (RADT) [10]**
4. **ASO Titre**
5. **And throat swab** may help in differentiating between viral and bacterial cases, thus reducing the use of unnecessary antibiotics [10].
6. **CT scans/ USGs** may help detect deep space infections and the extent of abscess [10].

Complications

Viral tonsillitis are mild and resolve on their own without producing any major complications [4],[10] whereas bacterial ones, especially strep throat may result into complications like **peritonsillar abscess, deep neck infections, otitis media, airway obstruction leading to problems like snoring, post streptococcal glomerulonephritis, rheumatic fever, etc [4],[7],[10].**

Conventional management of tonsillitis

Viral tonsillitis mostly resolve on their own but one may use **analgesics [4], [8]** for pain relief with **supportive care like warm saline gargles [4], rest and hydration**, **NSAIDs,** etc.

Bacterial tonsillitis may be treated with the help of appropriate **antibiotics** like **azithromycin, amoxicillin, penicillin,** etc. along with the above mentioned supportive care [8].

A dose of **corticosteroid** may also be given to speed up cure and relieve severe pain.

Surgery is indicated in cases of **chronic /recurrent tonsillitis** or when medical management fails and complications occur [2]. Tonsillectomy, just like any other surgery, **carries potential risks like post operative pain, haemorrhage,etc.**

Low temperature plasma tonsillectomy has emerged as a minimally invasive technique that is believed to offer a promising outcome [9].

Homeopathic treatment of tonsillitis

Homoeopathic treatment of acute, chronic and recurrent tonsillitis involve the administration of medicines on the basis of symptom similarity.

Medicines that are primarily used include **Psorinum [3], Belladonna, Lachesis, Lycopodium, Lac caninum, Phytolacca, Agraphis nutans, Baryta carb, Merc cyanatus and auto nosodes prepared from tonsil stones (isopathic method) [1], [5].**

A number of documented cases suggest that homoeopathy can offer beneficial results in the treatment of tonsillitis.

Conclusion

There is much documentary evidence about the efficacy of homoeopathic medicines in the treatment of acute, chronic and recurrent tonsillitis.

Tonsillitis is a common medical problem issue faced by pediatric age group that adversely affects the quality of life and is a major cause of absenteeism from school.

Conventional treatments are efficacious but homoeopathy can play a significant role in improving the quality of life and preventing surgical intervention.

Conflict of interest

None.

Financial interest

None.

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