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ARTICLE

Title: Managing fear and anxiety with homoeopathy

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ABSTRACT

Fear and anxiety usually proceed in the same direction but differ. Even though symptoms usually overlap, someone's revel in those feelings differs based totally on their context. Fear relates to an acknowledged or understood threat, while anxiety follows from an unknown, expected, or poorly described danger. Fear and anxiety each produce a comparable stress response. But many experts agree that there are vital differences between the two. Those variations can account for how we react to numerous stressors in our surroundings.

Keywords: Anxiety, Agoraphobia, Cognitive behavioral therapy, DSM-5, Fear, Panic Attacks

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INTRODUCTION ^{[1][2][3]}

Anxiety is the word we use to express our fear of the trouble of commodities that will be in the future rather than the present.

Anxiety may last for a short time and also go down once what was causing the anxiety is over, but it can last longer and can affect your life. Habitual stress can affect your capability to eat, sleep, or concentrate. It can help you from enjoying life, traveling, or indeed leaving the house to go to work or the academy.

Fear is one of the most important feelings we can witness.

This is a response necessary to survive. This helps us to respond to the event or dangerous situation. It can also do in everyday, threatening situations similar to examinations, public speaking engagements, job interviews, meetings, or indeed parties. This is a response to situations that worry you.

EPIDEMIOLOGY^[2]

One of the most common sorts of mental disease is anxiety disorder.

One in every four adults fits the diagnostic criteria for at least one anxiety disorder, according to the National Co-morbidity Study, a 12-month prevalence with rate of approximately 17.7 percent. In comparison to (approximately men 19.2% lifetime prevalence), women are more likely than men (approximately 30.5 percent lifetime prevalence) to have an anxiety disorder.

CAUSE OF ANXIETY DISORDER^[4]

The majority of the time, biological, psychological, and social variables contribute to anxiety disorders. Major stressors like a loved one's death, a divorce, losing a career, the risk of death, physical or mental trauma, etc. may cause them to develop. Or it could develop as a result of negative thought patterns and harmful beliefs as a result of acquired behavior. Given that many illnesses have been discovered to run in families, they also looked to be important genetic contributors.

DSM-5 CLASSIFICATION IN ANXIETY DISORDERS^{[1][2]}

In the DSM-5, the following are the primary subtypes of anxiety disorders:

Panic disorder (including or excluding agoraphobia): Persistent, unexpected anxiety attacks. A panic attack is a sudden, powerful wave of terror or discomfort that peaks in a matter of minutes.

Agoraphobia (without a history of panic disorder): Agoraphobia is fear or anxiety about situations where escape may be difficult. It is the most incapacitating of phobias since it interferes with a person's ability to perform in the job and social circumstances outside the house.

Specific phobia: It is an abnormal fear of a specific object, condition, or situation.

Social phobia: It is the fear of social circumstances, especially those involving inspection or contact with strangers.

GAD (Generalized anxiety disorder): It is described as excessive anxiety and worries about multiple events or activities on most days for at least a 6-month period.

ASSESSMENT OF ANXIETY^[1]

Anxiety can be evaluated on a symptom or disorder basis. Self-report checklists of both state and trait anxiety, fears, phobias, and avoidance, as well as clinician-administered symptom checklists, are the most often used symptom assessments among adults. Adult anxiety disorders are examined through structured and semi-structured diagnostic interviews administered by lay interviewers.

Assessment of anxiety symptoms and disorders in children might entail gathering information from the kid alone or, more commonly, from others who see the child in numerous situations (e.g., cares and/or teachers), in addition to the child himself or herself. There are also various formal and semi-structured child anxiety disorder diagnostic interviews.

CLINICAL FEATURES^{[1][2][3]}

When you are scared or nervous, your mind and body operate incredibly fast.

Here are some clinical features mentioned i.e.

Quick heartbeat, breathing, muscle ache, excessive perspiration, stomach churns, dizziness, loss of appetite, sweating, dry mouth, chest discomfort, headache, numbness & tingling, trembling & shaking, breathing difficulties, Tightness throughout the body.

These things happen because your body is preparing you for an emergency as a result of fear.

In the long run, anxiety can cause some of the aforementioned symptoms as well as a persistent sensation of fear. You may get angry, have difficulty sleeping, acquire headaches, or have difficulty getting on with work and preparing for the future; you may have sex issues and lose confidence.

RISK FACTORS AND CORRELATES^[1]

DIFFERENCES IN SEX

According to the findings of community research in adults, women had a higher incidence of practically all anxiety disorders than males.

AGE OF INCEPTION

According to retrospective accounts of adults and adolescents with anxiety disorders, their beginning often occurs during childhood or adolescence.

ETHNICITY AND SOCIAL CLASS

Community studies have frequently shown that those with lower socioeconomic status and education levels have a greater frequency of anxiety disorders.

CO MORBIDITY DISTRIBUTIONS

Subtypes of anxiety disorders frequently cooccur, both cross-sectionally and throughout time. Anxiety disorders are associated with every major form of illness, including disorders of mood, improper behaviors, and substance usage.

FAMILY AND GENETIC INFLUENCES

Anxiety disorders of all main varieties are transmitted via families, and genetic factors constitute a crucial component in the spread of these diseases.

MEDICAL SIGNS AND CONDITIONS

The significant magnitude of co-morbidity of anxiety disorders with other medical illnesses that had been documented in clinical samples has been firmly supported by community samples. An increasing body of research is showing distinct patterns of relationships between anxiety disorders and a variety of medical issues, such as respiratory issues, cardiovascular conditions, digestive issues, disorders of metabolism, and skeletal problems.

DIFFERENTIAL DIAGNOSIS^[3]

Depression Avoidant personality disorder Obsessive-compulsive disorder Delusional disorder Schizophrenia

MANAGEMENT OF ANXIETY AND FEAR^[4]

If you can, overcome your fear. Know yourself Speak with a trustworthy friend or relative. Exercise Relax Healthy eating Avoid alcohol or, drink in moderation

GENERAL ANXIETY DISORDER TREATMENT^{[1][2]}

Assessment: Form a diagnosis and look for any co-morbid conditions.

General Measures: Agree on a clear plan; seek counseling; use problem-solving methods; and psychotherapy.

Cognitive behavioral therapy.

REPERTORY^[5]

There are several rubrics in the repertory that deal with anxiety, phobias (fear), panic episodes, and particular fears. Listed below are a few rubrics: ANXIETY inclination to work, with ANXIETY work manual after ANXIETY health, about ANXIETY money matters, about ANXIETY thoughts flying, with ANXIETY loved persons, for ANXIETY chest, in FEAR alone, of being FEAR animals, (bats, birds, dogs, insects, mice, etc.) FEAR blood, of FEAR crowding public places, of FEAR driving him from place to place dyspnea, in spasms of the chest, with FEAR high places FEAR falling, off the height, from FEAR narrow places, in, claustrophobia trains and closed places, of FEAR pins, pointed, sharp things, of

FEAR trains and closed places

ORGANON OF MEDICINE^[6]

Dr. Hahnemann stated it many years ago in the Organon of Medicine under the aphorism number 225. Mental diseases like anxiety and worry can produce physical manifestations and also act as a maintaining cause for existing problems. Modern medicine has now recognized that disturbed mental health can produce many physical manifestations.

APHORISM 225:

However, as was just mentioned, there are undoubtedly a few emotional diseases that don't just develop into that form as a result of physical illnesses; rather, they are maintained by emotional causes such as persistent anxiety, worry, annoyance, wrongs, and the occurrence of intense fear and fright regularly. This type of mental illness eventually and frequently severely damages physical health.

HOMOEOPATHIC

MANAGEMENT^{[7][8][9]}

Homoeopathy focuses on the entire patient rather than just the ailment.

The following medications have therapeutic uses:

ACONITE NAPELLUS:

Every illness, no matter how little, is accompanied by great terror, fret, and tension. Despite his fear of dying, he thinks his death is imminent and predicts the day. Fears crossing the street, and the future. Unease and fluttering about. A clairvoyant condition. Great, unbearable anxiety, Anxiety over one's illness, and hopelessness for a remedy. Fear of the dark and ghosts.

ARSENIC ALBUM:

The intense fear of being alone. Anger, stress, nervousness, and a chilly feeling.

A desire to hide oneself because of fear of being alone, ghosts, and thieves.

Conscience-related worry, feeling like a crime had been committed

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ARGENTUM NITRICUM:

Anxiety in the mind. Extremely impulsive; continuously rushing yet achieving little.

Anxiety before attending church or the opera that results in diarrhoea. When easily angered or stimulated, symptoms such as coughing, discomfort, etc., appear. Profound depression; believes that she will die if left alone.

Nervousness at night is accompanied by heat and fullness in the head.

BRYONIA ALBA:

Fear of the future coupled with anxiety and apprehension.

Anxiety over impending death.

Fear, and want to run away.

IGNATIA AMARA:

After an unexpected trauma or shock, this medicine might help relieve sadness or anxiety. Sighs and deep sadness are accompanied by these emotions.

Lack of resolution; anxious to do this or that right now.

Loving isolation. Anguish, often accompanied by heart palpitations, especially when first waking up in the morning or at night. Fear and timidity.

Fear and timidity.

NATRUM MURIATICUM:

Chronic stress and moderate depression may benefit from this.

Melancholy, which results in excessive sobbing and frequent repeats of unpleasant memories; aggravation from consolation.

Anxiety, occasionally during storms, but mostly at night.

PULSATILLA:

Panic attacks with shaking, convulsive motions of the fingers, buzzing in the ears, and dread of dying or having an apoplectic fit.

Uncertainty, anthropophobia, fear of ghosts, accompanied by the desire to hide or run away; mistrust, and suspicion.

SEPIA:

This is beneficial for people who feel exhausted and unaffected.

Tears with grief and despair.

Sadness and melancholy.

Fear of being alone. Extreme sensitivity to sounds; extreme anxiety.

STRAMONIUM:

Anxiety is causing an increase in night terrors. Fear of losing his senses, having his lips grow together, suffocating, falling, and having everything fall on him.

CONCLUSION

Homoeopathy treats anxiety problems quite effectively. The therapeutic medicines mentioned above are often and successfully used to treat anxiety disorders. Homoeopathy treats the entire patient, not just the sickness. Patients with anxiety disorders may also find that other individualized homoeopathic medicines (similimum) significantly relieve their anxiety and fear.

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