



## Case Study

### A CASE OF SENSONEURAL HEARING LOSS MANAGED WITH HOMOEOPATHIC SIMILIMUM- AN EVIDENCE BASED CASE REPORT

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**KEYWORDS:** SNHL, Cochlea, Homoeopathy, Hearing aid, *Baryta carb.*

#### ABSTRACT

Sensoneural hearing loss (SNHL) is most common form of hearing loss world-wide. SNHL results from lesions of the cochlea, 8<sup>th</sup> nerve and central auditory pathways. The causes of SNHL may be congenital, traumatic, infectious, inflammatory, iatrogenic, neoplastic and senile. The development of drugs to treat or prevent SNHL has proven challenging. In modern system of medicine this disease is difficult to treat as treatment is directed towards cause only. Rehabilitation with hearing aids and other devices are also necessary for management of such cases. This article is about a patient of 73 years of age, who was suffering from senile SNHL and improved with homoeopathic medicine, *Baryta carb 200*, and without need of hearing aid device.

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#### INTRODUCTION

According to World Health Organization (WHO), 360 million people, or approximately 5.3% of the world's population, live with disabling hearing loss.<sup>[1]</sup> In children, hearing loss has repeatedly been demonstrated to affect their academic, behavioral and cognitive development as well decreased overall quality of life.<sup>[2]</sup> Hearing loss in older adults is highly prevalent, and recent studies have demonstrated independent associations of hearing loss with incident dementia.<sup>[3]</sup> The primary effect of hearing loss is impaired communication, which can adversely affect relationships with family and friends and create difficulties in the workplace. Untreated hearing loss in adults also has indirect health, psychosocial, and economic effects and leads to social isolation and a reduced quality of life.<sup>[1-2]</sup> The most common form of hearing loss world-wide is senso-neural hearing loss (SNHL). SNHL results from lesions of the cochlea, 8<sup>th</sup> nerve and central auditory pathways.<sup>[4]</sup>

#### Etiology

The causes of SNHL lie in cochleae, Cranial nerve VIII, brain stem and temporal lobe. The causes may be divided into genetic and non-genetic. The genetic cause may have delayed onset and affects only hearing.

#### The common causes of SNHL

1. Congenital: Genetic and non genetic
2. Infectious: Labyrinthitis and meningitis
3. Trauma to VIII cranial nerve
4. Ototoxic drugs: Streptomycin and gentamycin
5. Meniere's disease
6. Tumours: CN VIII acoustic neuroma
7. Systemic diseases: Diabetes, multiple sclerosis, syphilis, hypothyroidism, Kidney disease, autoimmune diseases
8. Miscellaneous: Sudden idiopathic SNHL, Noise induced hearing loss (NIHL), Presbycusis etc.

#### History, examination and investigations

**History:** Congenital or acquired, unilateral or bilateral side involved, age and mode of onset, duration and progression, severity (mild, moderate, severe) of hearing loss, events preceding hearing loss such as infection, trauma, strain, medication, surgery, noise exposure, pain, vertigo, tinnitus; family history etc.

**Physical examination:** Complete ear, nose, throat, head and neck examination including Cranial nerves (CN), neurological and other systems to see association with other system.

**Audiometry:** Pure tone audiometry (PTA) to know the severity (mild, moderate, moderately severe, severe) and nature (high-frequency, low-frequency,

mid-frequency), speech, evoke response, and otoacoustic emission.

**Laboratory tests:** Depending upon the suspected aetiology, following investigations may be ordered: CT/MRI, CBC, blood sugar, serology, kidney function tests.

**CASE REPORT**

A 73 years old male patient represent with difficulty in hearing in both ears since 1 year.

**History of Present Illness**

Patient was suffering from this problem from last 1 year. He was also complaining about hearing of different sounds as well. His complaints aggravated at night. He took modern treatment but was not improved.

ENT surgeon advised him to use hearing aid but he does not want to use. He has firm belief in homoeopathy medicines and wants to take homoeopathic treatment for the same.

**History of past illness**

K/C/O Hypertension since 10 years  
No history of Diabetes, Surgical illness in past.

**Treatment history**

Treated with modern medicine but no relief

**Personal History**

- Diet- vegetarian
- Appetite- Regular
- Desire- nothing specific
- Aversion- fruits+++ , sweet things
- Thirst- 10-12 glasses per day for cold water
- Thermal- Sensitive to cold weather
- Bowel: Regular, twice a day
- Micturition- 8-9 time in day time
- Sleep: Disturbed due to different sounds
- Habits: Not specific

**Mental generals**

Will- timid/weak willed. Frightened easily

**Repertorial Totality**

- Anxiety about health
- Delusion- people will observe him
- Memory- poor

**Examination of the patient**

General examination:

- GC: Fair
- Pallor: Absent
- Icterus: Absent
- Lymphadenopathy: Absent
- Cyanosis: Absent
- Clubbing: Absent
- Edema: Absent

Vitals:

- B.P-144/84 mmhg
- Pulse- 80 beat/minute
- Afebrile
- Local examination
- Examination of ear
- Inspection- NAD
- Palpation- NAD

**Other systemic examination- NAD**

**Investigation**

**Speech Audiometry**

- 22/07/2019
- P.T.A (Pure tone audiometry)-
- Right ear- 41 dBHz
- Left ear- 35dBHz

**Diagnosis**

B/L mild high frequency SNHL

**Totality of symptoms**

- Anxiety health about
- Delusion- laughed at or mocked at Timid
- Aversion- Fruits
- Aversion- Sweets, fruits
- Hearing- Impaired, old people
- Hearing- Noises- Night
- Hearing- noises- hissing

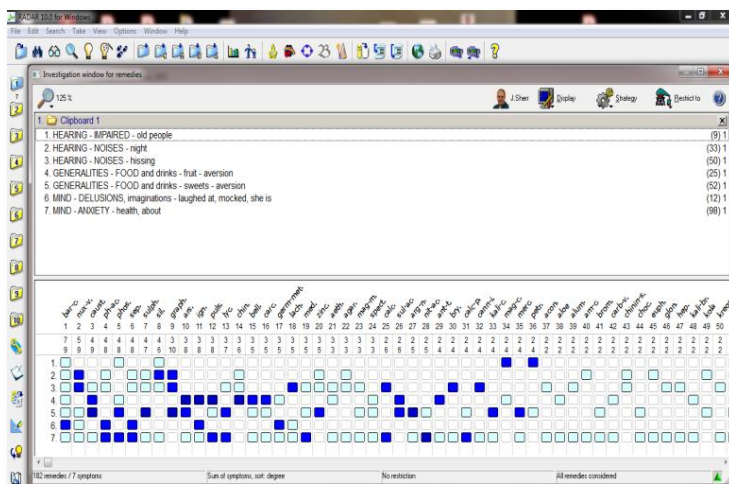


Figure 1: Repertorization using complete Repertory

Repertory software used- RADAR10.5 [5]

**Final selection of medicine with reason-** On the basis of total symptoms and after consulting material medica *Baryta carb* was selected. [6]

**Prescription: 24/07/2019**

*Baryta carb* 200 single dose

Placebo- 14 days TDS

**Follow up- 08/07/2019**

Slight improvement in hearing.

Noise in ear- better

Rx

Placebo 28 days X TDS

**06/08/2019**

Better in his complaints

Hearing better, and placebo was prescribed for another two months.

**11/10/19**

Speech audiometry report

P.T.A

Right ear- 23dBHz

Left ear- 23 dBHz

**RESULTS**

After taking homoeopathic treatment there was significant improvement in speech audiometry and his hearing was also improved.

**DISCUSSION**

Deleterious effects of hearing loss generate morbidity as hearing loss have been linked to poor overall physical functioning and social interaction, as well decreased overall quality of life.

Due to less availability of treatment, cases of SNHL are difficult to treat. Hearing loss can significantly affect patients quality of life, especially in old age. Application of hearing aid also recommended with pharmacological treatment. Homoeopathy system of medicine treats man in

disease and not disease in man. Due to adverse effects of modern medicine, homoeopathic system of medicine can be used as an alternative for such ailments.

**CONCLUSION**

This case of SNHL in old age wonderfully responded to homoeopathic medicine *Baryta carb*. Technologies exist to ameliorate hearing loss, but high cost limit access to these therapies. This case report showed that cases of SNHL can be managed successfully with homoeopathic medicines. Very less study has been done in such type of cases in homoeopathy. Further trials are needed with appropriate study design and sample size. Homoeopathic medicines are cost effective, easy to use and without adverse effects.

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## ENT & GENERAL

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Opp. Jandev Complex, Nr. Jogindra Bank, Rajgarh Road, Solan - 173212 (H.P.)

Hearing Evaluation/Assessment श्रवण (सुनाई) क्षमता मूल्यांकन

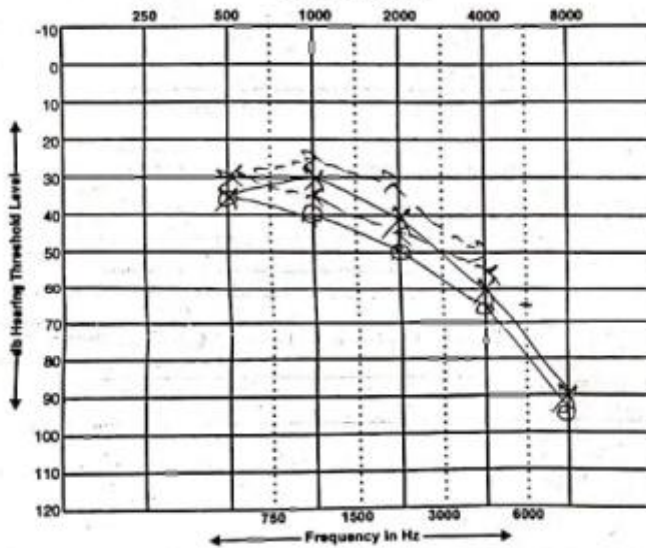
Name..... Age/Sex..... Date.....

C.R. No..... Audiogram No..... Audiometer.....

Clinical Diagnosis..... Procedure : Standard/Play Audiometry

Tested by :.....

### Audiogram



### Key to Symbols

Test	Right Ear (Red)	Left Ear (Blue)
AIR CONDUCTION	○ ○	X X
UNMASKED	<	>
NO RESPONSIVE	○ ○	X X
MASKED	△ △	□ □
NO RESPONSIVE	△ △	□ □
BONE CONDUCTION	(	)
UNMASKED	(	)
NO RESPONSIVE	∅	∅
MASKED	[	]
NO RESPONSIVE	∅	∅
FREE FIELD		

	SPEECH AUDIOMETRY		TONE DECAY				S.I.S.I.			
	RIGHT	LEFT	500 Hz	1K Hz	2K Hz	4K Hz	500 Hz	1K Hz	2K Hz	4K Hz
P.T.A.	41dB	35dB								
S.D.T.										
S.R.T.										
S.D.S.										

\*Impedence Audiometry.....

BIL mild high frequency SNHL

\*\*Audiological Diagnosis & Remarks.....

*[Signature]*  
Signature

Audiologist/ENT & Head & Neck Surgeon

CS Scanned with HEARING AIDS OF ALL TYPES (DIGITAL & PROGRAMMABLE) AVAILABLE

NOT VALID FOR MEDICO-LEGAL PURPOSES

Before treatment

Dr. Verma's



# SHIVA HOSPITAL

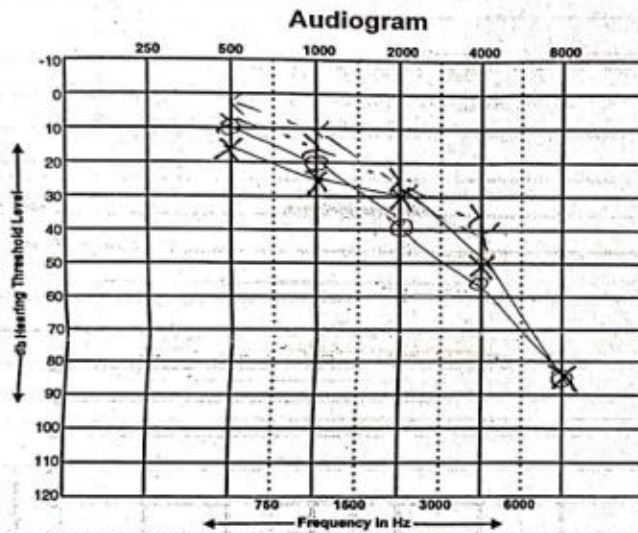
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## ENT & GENERAL

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Opp. Jandev Complex, Nr. Jogindra Bank, Rajgarh Road, Solan - 173212 (H.P.)

### Hearing Evaluation/Assessment श्रवण (सुनाई) क्षमता मूल्यांकन

Name..... Age/Sex..... 73y (MA) Date..... 11/10/19  
C.R. No..... Audiogram No..... Audiometer.....  
Clinical Diagnosis..... Procedure : Standard/Play Audiometry  
Tested by:.....



### Key to Symbols

Test	Right Ear (Red)	Left Ear (Blue)
<b>AIR CONDUCTION</b>		
UNMASKED	○	X
NO RESPONSIVE	○	X
MASKED	△	□
NO RESPONSIVE	△	□
<b>BONE CONDUCTION</b>		
UNMASKED	{	}
NO RESPONSIVE	{	}
MASKED	[	]
NO RESPONSIVE	[	]
<b>FREE FIELD</b>		

SPEECH AUDIOMETRY			TONE DECAY				S.I.S.I.			
	RIGHT	LEFT	500 Hz	1K Hz	2K Hz	4K Hz	500 Hz	1K Hz	2K Hz	4K Hz
P.T.A.	23dB	23dB								
S.D.T.										
S.R.T.										
S.D.S.										

\*Impedence Audiometry.....

\*\*Audiological Diagnosis & Remarks.....



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HEARING AIDS OF ALL TYPES [DIGITAL & PROGRAMMABLE] AVAILABLE

Signature  
Audiologist/ENT & Head & Neck Surgeon

After treatment