

"UNVEILING THE POWER OF HOMOEOPATHIC THERAPEUTICS IN MANAGEMENT OF DIFFERENT TYPES OF COUGH"

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ABSTRACT

Cough although seems to be a common and trivial symptom but sometimes it can be a sign of a deep pathology and sometimes become very difficult to treat even when it is due to trivial cause. Cough forces a large number of people every year to visit health centers and many needs to consult pulmonologist. It can be due to a physiological protective measure of body and sometimes can be due to inner pathology. This review is done to enhance the knowledge about cough & aspect of homoeopathic medicine. Homoeopathy is effective mode of treatment in all acute and chronic cases and in many studies it has proven its effectiveness in respiratory pathologies. This article also gives a brief therapeutics of homoeopathic medicines in different types of cough.

Keywords- Cough, Respiratory Disease, URTI, Homoeopathy, Mephitis, Coccus cacti.

INTRODUCTION

Cough, one of the most common and frequent symptom of respiratory system, that pushes about 30 million people to medical facilities every year and out of which around 40 percent patients need to consult pulmonologist. ^[1,2] It is an innate primitive reflex which is also an essential defence mechanism of the airway and lungs, which is used to protect from foreign bodies and remove any unwanted material from lungs lie mucus and is common during winter. ^[2,3] While in case of absence of cough reflex, human body will be at risk of retaining secretions and aspiration material resulting into infection and respiratory compromise, in other way it's excess can cause exhaustion and can lead to vomiting, syncope, rib fracture, inguinal hernia and other complications. ^[4]

On one side cough is a defence mechanism due to remove any unwanted material from respiratory passage or lung or can be reflex to change in temperature or exposure to irritants, but it is self-limiting while on other side, it can also be a sign of underlying disease requiring medical attention. ^[1,3,4]

Cough symptoms and duration depends on the etiology and environmental conditions. Broadly cough can be classified as acute cough or chronic cough depending on the duration of cough. A cough can be called acute cough, if lasting for less than 3 weeks; usually due to upper respiratory tract infections (URTIs) or acute bronchitis caused by viral infection and is self-limiting in nature, and can remain some time even after resolution of cough. ^[5] If cough lasts for more than 3 weeks but less than 8 weeks, is considered as subacute cough, commonly due to residue of tracheobronchitis in case of

pertussis or post viral tussive syndrome. Cough is considered to be chronic, if lasts for more than 8 weeks and can be result of cardiopulmonary diseases including infectious and inflammatory diseases, neoplastic diseases etc. ^[4]

MECHANISM OF COUGH

The defensive purpose of cough is to prevent entry of noxious substances into tracheobronchial tree and to throw out excess secretions and retained material from the tracheobronchial tree. Cough starts when cough receptors located in the upper and lower airways, and in many other sites such as the ear canal, tympanic membrane, sinuses, nose, pericardium, pleura, and diaphragm are stimulated. ^[3] Cough can be stimulated by either chemical stimulant such as air pollution or strong fragrance or by chemical stimulant such as chilly or chemical fumes. These stimuli triggers sensory nerve endings of rapidly adapting receptors and C fibers. Additionally many neural sensory receptors are present in pharynx, larynx, and airways to the level of the terminal bronchioles extending into the lung parenchyma external auditory canals, eardrums, paranasal sinuses, diaphragm, pleura, pericardium, and stomach, which can also cause coughing. ^[3,4]

The sensory signals travel to nucleus tractus solitarius also known as “cough center” through vagus and superior laryngeal nerves. The cough reflex is indeed a complex and coordinated process involving various muscles and physiological mechanisms. The cough reflex is usually triggered by irritation or stimulation of receptors in the respiratory tract, such as by foreign particles, mucus, or irritant gases. When the cough reflex is activated, the vocal cords quickly close together (adduct) to prevent the entry of foreign particles into the lower airways. Expiratory muscles, particularly the muscles of the abdomen and chest wall, contract forcefully. This generates high intrathoracic pressures, sometimes reaching as high as 300 mmHg. After the vocal cords close and intrathoracic pressure increases, there is a sudden release of the laryngeal contraction. This results in a rapid expulsion of air from the lungs, creating expiratory flows that exceed normal levels seen on a flow-volume curve. Airway Narrowing and Dynamic Compression: Bronchial smooth muscles contract, and there is dynamic compression of the airways. This narrows the airway lumens and maximizes the velocity of exhalation. The high-velocity expiratory airflow helps dislodge mucus from the walls of the airways. The kinetic energy available for this process is directly proportional to the square of the velocity of expiratory airflow. Taking a deep breath before coughing helps optimize the function of the expiratory muscles, allowing for a more forceful expulsion of air during the cough. In cases where there is significant mucus accumulation or persistent irritation, a series of repetitive coughs may be produced. These coughs, often at successively lower lung volumes, help sweep mucus from different areas of the airways. ^[4]

The whole process for coughing can be subdivided into three phases- the inspiration phase, the compression phase, and the expiratory phase. Coughing starts with the inhalation of air, which is followed by expiration of air against a closed glottis, which results into increase in intrathoracic pressures rising from 50-300 cm H₂O and this pressure may be transmitted to vascular, cerebrospinal, and intraocular spaces. Finally, the glottis opens that allows outflow of air explosively with the speed of 300 m/sec with expulsion of mucus, particularly from the larger, central airways resulting in cough. ^[3]

CLINICAL PRESENTATION

The characteristics of cough may help in diagnosing the site of affection and the etiology.

| COUGH ONSET AND ASSOCIATED SYMPTOMS | PROBABLE CAUSE OF COUGH |
|-------------------------------------|---|
| Sudden Onset | Presence of foreign body, Inhalation of irritant, Pulmonary Embolism. |

| | |
|---|---|
| Fever, Rhinorrhea , Normal chest exam | Nasopharyngitis, Sinusitis, Laryngotracheitis. |
| Acute onset, Fever, Abnormal chest exam | Viral or Bacterial or Hypersensitivity Pneumonia. |
| Chronic Cough | Cystic fibrosis, Asthma, Tuberculosis, Mediastinal disease, Habit of coughing. |
| Recurring cough and pneumonia | Cystic fibrosis, Immunocompromised diseases such as HIV, Leukocyte disorder, Ciliary dyskinesia, Anatomical disorders such as sequestration, Reflux bronchiectasis etc. |

Table-1 Probable cause of cough depending on cough onset and associated symptoms ^[3]

| CHARACTERISTICS OF COUGH | POSSIBLE CAUSE OF COUGH |
|------------------------------------|---|
| Staccato, paroxysmal | Pertussis, cystic fibrosis, foreign body, <i>Chlamydia</i> species, <i>Mycoplasma</i> species. |
| Followed by “whoop” | Pertussis. |
| All day, never during sleep | Psychogenic, habit. |
| Barking, brassy | Croup, psychogenic, tracheomalacia, tracheitis, epiglottitis. |
| Hoarseness | Laryngeal involvement (croup, recurrent laryngeal nerve involvement). |
| Follows exercise | Asthma. |
| Accompanies eating, drinking | Aspiration, gastroesophageal reflux, tracheoesophageal fistula. |
| Throat clearing | Postnasal drip |
| Productive (sputum) | Infection |
| Night cough | Sinusitis, asthma |
| Seasonal | Allergic rhinitis, asthma |
| Immunosuppressed patient | Bacterial pneumonia, <i>Pneumocystis jiroveci</i> , <i>Mycobacterium tuberculosis</i> , <i>Mycobacterium avium-intracellulare</i> , cytomegalovirus |
| Dyspnea | Hypoxia, hypercarbia |
| Animal exposure | <i>Chlamydia psittaci</i> (birds), <i>Yersinia pestis</i> (rodents), <i>Francisella tularensis</i> (rabbits), Q fever (sheep, cattle), hantavirus (rodents), histoplasmosis (pigeons) |
| Workdays with clearing on days off | Occupational exposure |

Table-2 Probable cause of cough depending on Characteristics of Cough ^[3]

| ORIGIN | COMMON CAUSE | CLINICAL FEATURE |
|----------------|---|---|
| Pharynx | Post-nasal drip | History of chronic rhinitis. |
| Larynx | Laryngitis, tumour, whooping cough, croup | Voice or swallowing altered with harsh or painful cough Paroxysms of cough, often associated with stridor. |
| Trachea | Tracheitis | Raw retrosternal pain with cough |
| Bronchi | Bronchitis (acute) and COPD, Asthma Eosinophilic, bronchitis, Bronchial, carcinoma | Dry or productive, worse in Morning. Usually dry, worse at night. Features are similar to asthma but no airway hyper-reactivity (AHR) Persistent (often with haemoptysis) |

| | | |
|-------------------------|---|---|
| Lung parenchyma | Tuberculosis, Pneumonia Bronchiectasis, Pulmonary oedema, Interstitial fibrosis | Productive, often with Haemoptysis Dry initially, productive later Productive, changes in posture induce sputum production Often at night (may be productive of pink, frothy sputum) Dry, irritant and distressing. |
| Drug side-effect | ACE inhibitors | Dry cough. |

Table-3 Affected site, Probable cause and clinical features of cough ^[1]

HOMOEOPATHIC MANAGEMENT

Homoeopathy is a system of medicine which is based on law of similia i.e. likes cures like, in which medicine is indicated on the basis of totality of symptoms which is according to Hahnemann is outwardly reflected picture of internal essence. Cough being only a symptom of respiratory symptom can only be a part of the totality of symptoms and when case is examined carefully according to case taking guideline given by Dr. Hahnemann, whether an acute or chronic disease, can help in constructing the 'Totality of Symptoms' and when this totality is matched with the homoeopathic medicines, it helps in identifying the similimum and prescribe it. In case of acute cough, where exciting cause is important; in chronic case, it is important to find the fundamental or miasmatic cause. ^[6]

Although complete picture of patient disease and medicine is to be matched, here are some important medicines indicated in different types of cough-

DRY COUGH- Commonly used homoeopathic medicines are ACONITUM NAPELLUS, ALUMINA, BROMIUM, BRYONIA ALBA, HYOSCYAMUS NIGER, IGNATIA AMARA, NATRIUM MURIATICUM, PHOSPHORUS, RUMEX CRISPUS, SPONGIA TOSTA.

- 1. ACONITUM NAPELLUS** - Cough caused by exposure to dry cold air or dry north or west wind or exposure to draught of cold air while in perspiration or due to suppressed perspiration. Cough is dry, croupy, horse, short, barking, ringing, loud, hacking, suffocative cough with stitching or shooting pain in chest. The onset of cough is sudden and violent. There is constant pressure felt on left side of chest with oppressed breathing on least motion. Breathing is short and labored. Constant desire to cough due to irritation or tickling in larynx with sensitiveness to touch and inspired air. Child grasps throat every time he coughs with tendency to choking. Cough aggravates after eating or drinking; on expiration; when lying; evening; night; during sleep; from tobacco smoke; from vexation, esp., fright; when over-heated; from dry, cold winds or drafts of air; from walking in open air; assuming upright position; from deep inspiration; from speaking.violent hollow cough at night, shorter and more panting during day (laryngitis). Along with cough there is strong, unquenchable thirst for large quantity of cold water. ^[7,8,9,10,11]
- 2. BROMIUM-** Cough or croup after the febrile symptoms subsides. Dry, spasmodic, suffocative, constrictive cough, with hoarseness and burning pain behind sternum. Cough with difficult, painful breathing and violent cramping of chest that runs upward. There is cold sensation during every inspiration that provokes cough with inability to breathe deep and sensation as if air passage is filled with smoke or breathing through a sponge. Cough is accompanied with laryngeal diphtheria, in which membrane begins in larynx and spreads upward. Scraping and rawness sensation in larynx, as if pit of throat were pressed against trachea. Cough is aggravated by talking, when tired; in hot room causing intolerable tingling and smarting in larynx, with wheezing and rattling breathing; tickling in trachea during inspiration: during first part of the night and is ameliorated after midnight; drinking water. This medicine is also indicated in asthma with spasm of glottis and great difficulty in breathing that improves at sea. ^[7,8,9,10,11]
- 3. BRYONIA ALBA** - Dry, hard, hoarse, hacking, painful cough from irritation in upper trachea with gagging and vomiting. Cough coming from gastric region, with feeling as if chest would fly to pieces and must support chest by pressing his head on sternum. Soreness in present in larynx

and trachea with stitching pain in chest. Difficult, quick respiration with desire to sit up and expand lungs to take long breath. Cough worse in open air; at night; after eating or drinking, with vomiting; every movement; into warm room; deep inspiration; by touch; laughing; at night in bed, from beer. Cough compels patient to sit up in erect posture at once and relieved by warm drinks. Cough, with involuntary discharge of urine. ^[7,9,10,11]

4. **SPONGIA TOSTA** - Great dryness of all air-passages with hoarseness. Cough is dry, barking, croupy with larynx sensitive to touch. Respiration is short, panting, difficult with feeling of a plug in larynx. Irrepressible cough from a spot deep in chest, as if raw and sore. It is indicated in dry, chronic sympathetic cough or organic heart disease. Bronchial catarrh, with wheezing, asthmatic cough with profuse expectoration and suffocation. Cough is worse during inspiration and before midnight, after eating or drinking, especially warm drinks, sweets, cold drinks, smoking tobacco, excitement, lying with head low, in hot room and is relieved by eating little and drinking. ^[7,11]
5. **HYOSCYAMUS NIGER**- Dry, spasmodic, suffocative, nervous, hacking, nocturnal cough due to elongation of the uvula with a dry spot in larynx and itching in throat. Cough aggravates as soon as patient lies down; at night; after eating or drinking; talking; singing and better on rising or sitting up. ^[7,9,10,11]
6. **IGNATIA AMARA**- Dry, hollow, spasmodic, hacking cough in quick succession arresting breath due to spasm of glottis. Cough, caused in the evening due to sensation of fumes of sulphur, or from dust in pit of throat, in the morning from a tickling above the pit of stomach. Coughing increases the desire to cough. Cough, worse in the evening, on standing still during a walk, or after warm drink. Patient feels sleepy after each coughing spell. Expectoration in the evening but difficult to expectorate and rarely in the morning. Cough is accompanied with stitching, lancinating pains in affected hip or in haemorrhoidal tumor or in penis, as if blood suddenly rushed in. ^[7,9,10,11]
7. **RUMEX CRISPA** – Dry, teasing, fatiguing cough from tickling in throat-pit. Copious mucous discharge from nose and trachea. Expectoration is thin, watery, and frothy; later becomes stringy and tough. Cough prevents sleep and is aggravated by changing air or room, when undressing, pressure, talking, and especially by inspiring cool air causing tickling as from feather or dust, evening after lying down, touching or pressing the throat pit; lying on left side, every night at 7 P. M. and at 8 and 11 A. M. in children. Cough ameliorates by closing or covering mouth or head. Larynx and trachea are raw with soreness behind sternum, especially left side, in region of left shoulder. ^[7,9,10,11]

PRODUCTIVE COUGH- Commonly used homoeopathic medicines are ARSENICUM ALBUM, ARALIA RACEMOSA, KALIUM BICHROMICUM, PULSATILLA PRATENSIS, RHUS TOXICODENDRON, SQUILLA MARITIMA, STANNUM METALLICUM.

1. **KALIUM BICHROMICUM** - Metallic, hacking cough excited by tickling in larynx, or at the bronchial bifurcation, by oppression at the epigastrium, from accumulation of mucus in larynx. Expectoration is profuse, yellow, very glutinous and sticky, coming out in long, stringy, and very tenacious mass. Cough accompanied with pain in sternum, extending to shoulders. Cough worse when undressing, morning on awaking, after eating and better after getting warm in bed. Voice is hoarse; worse, evening. True membranous croup, extending to larynx and nares. Toothache during coughing is present with painful with difficult expectoration. ^[7,11]
2. **SQUILLA MARITIMA**- Violent, furious, exhausting cough, with profuse, salty, slimy expectoration. Involuntary spurting of urine and sneezing during coughing. Short, dry cough and must take a deep breath. Dyspnoea and stitches in chest, and painful contraction of abdominal muscles. Child rubs face with fist during cough. Cough when taking a deep breath or cold drinks, from exertion, change from warm to cold air. ^[7]

WHOOPIING COUGH- Commonly used homoeopathic medicines are CARBO VEGETABILIS, DIOSCOREA VILLOSA, DROSER A ROTUNDIFOLIA, KALIUM SULPHURICUM.

1. **CARBO VEGETABILIS** - Whooping, spasmodic cough with gagging and vomiting of mucus and itching in larynx. Hoarseness, wheezing and rattling of mucus with cough. Oppression of breathing, soreness and rawness in chest with feeling of vapors of sulphur. Cough worse in evening and before midnight; in open air; after eating and talking; by going into cold air or into cooler air from a warm place, after lying down. Expectoration is greenish-yellow and offensive in neglected cases of pneumonia. Breath is cold and there is constant desire for being fanned. Haemorrhage from lungs. Asthma in aged with blue skin., with copious sputa. chronic hoarseness of singers. ^[7,11]
2. **DIOSCOREA VILLOSA** - Tight feeling along sternum and chest does not seem to expand on breathing. Cough worse in evening and night, lying down, and doubling up and better standing erect, motion in open air; pressure. ^[7]
3. **DROSELA ROTUNDIFOLIA** - Spasmodic, dry, deep, irritating, nervous and sympathetic cough with deep-sounding hoarse and barking cough, retching like whooping-cough with paroxysms rapidly following each other causing choking and patient can scarcely breathe. Cough with yellow expectoration, bleeding from nose and mouth. Cough in children commences as soon as the head touches the pillow at night. Cough worse after midnight or in the morning, by warmth, drinking, tobacco smoke, laughing, singing, weeping, after lying down. ^[7,11]
4. **KALIUM SULPHURICUM** - Post-grippal cough, especially in children with much rattling of mucus in chest. Bronchial asthma, with yellow expectoration. Cough worse in evening and in hot atmosphere, heated room and better in cool, open air. ^[7]

SPASMODIC COUGH- Commonly used homoeopathic medicines are AMBRA GRISEA, CHINA OFFICINALIS, COCCUS CACTI, COCCULUS INDICUS, CORALLIUM RUBRUM, KALIUM BROMATUM, LACTICUM ACIDUM, SEPIA OFFICINALIS.

1. **AMBRA GRISEA** -Asthmatic breathing with nervous, spasmodic, hoarse, hollow, spasmodic, barking cough, coming from deep in chest with eructation of gas. Cough worse in presence of people, on waking in morning. Tickling in throat, larynx and trachea with oppressed sensation in chest, gets out of breath when coughing. Expectoration is grayish-white, seldom of yellow mucus; of salty or sour taste. Cough mostly only at night from violent irritation, with concussion of pit of stomach. Cough aggravates from lifting a heavy weight, from a cold drink, by speaking. ^[7,11]
2. **COCCUS CACTI**- Catarrhs during early fall, first change from warm to cold weather and lasts until next summer when weather again becomes warm. Suffocative, spasmodic cough caused by as if mucus were ascending and descending trachea. Patient needs to hawk constantly from enlarged uvula. There is thick viscid, albuminous mucus, which is expectorated with great difficulty. Brushing of teeth causes cough. Cough worse on first waking, when lying, during exercise, after dinner, in warm room and ameliorates in open air. It is also indicated in drunkards with troublesome cough. ^[7,11]
3. **COCCULUS INDICUS** - Sensation of emptiness and cramp in chest with exhausting cough from irritation high up in larynx or from constriction in trachea and chest, particularly at night. Coughing ends with metallic sour taste in mouth. Complaint of dyspnoea as from constriction of trachea, as if irritated by smoke. Cough worse from talking, from indulging disposition to cough. It is indicated for spasmodic cough in hysterical and anaemic women. ^[7,11]
4. **CORALLIUM RUBRUM**- Dry, nervous, hysterical, spasmodic, suffocative, short, barking rapid cough, as if firing minute guns with great sensitiveness of air-passages and feels cold on deep inspiration. Profuse secretion of mucus that drops through posterior nares. Cough increases about evening to a violent spasmodic paroxysm with inclination to cough and difficult hawking up of bronchial mucus. Every atmospheric change causes coughing. ^[7,11]

CROUPY COUGH- Commonly used homoeopathic medicines are HEPAR SULPHUR, IODIUM, LACHESIS MUTUS, SAMBUCUS NIGRA, STRAMONIUM.

1. **HEPAR SULPHUR** - Dry, hoarse, violent, choking, rattling, suffocative attacks of cough when exposed to dry, cold wind or any part of the body gets cold or uncovered, or from eating anything cold. Croup with loose, rattling cough that worse in morning and patient has to rise up and bend head backwards. Cough with retching, which precede the expulsion. Cough worse towards morning and after eating with exceeding sensitiveness to the least draught of air. ^[7,11]
2. **IODIUM**– Dry, hoarse cough with stitches and burning in chest, rawness and tickling feeling provoking cough. Pain in larynx with painful roughness that worse during cough. Child grasps throat when coughing. Croup in scrofulous children with dark hair and eyes. Cough with expectoration of large quantities of saltish, sour, gray or white mucus, usually blood-streaked. Cough worse in indoors, in warm, wet weather, and when lying on back with difficult inspiration and better during day, in cool, open air. ^[7,11]
3. **SAMBUCUS NIGRA**– Paroxysmal, suffocative cough, with crying and dyspnoea. Chest feels oppressed with pressure in stomach, and nausea. Increased secretion of the respiratory mucous membrane with sudden nocturnal suffocative attacks from obstruction of thorax, when it seems as if the patient, awakened about midnight, would choke, without being able to call for help. Expectoration is profuse with oppressed respiration, much tough mucus in the larynx. Breathing is quick, wheezing, crowing breathing with accumulation of mucus in the larynx. ^[7,11]

PAROXYSMAL COUGH- Commonly used homoeopathic medicines are CALCAREA CARBONICA, CUPRUM METALLICUM, IPECACUANHA, MEPHITIS PUTORIUS, MERCURIUS SOLUBILIS, PULSATILLA PRATENSIS, STANNUM METALLICUM.

1. **CUPRUM METALLICUM**– Nervous, spasmodic, dry, suffocative cough with gurgling sound. Cough is uninterrupted and patient cannot speak a word, with discharge of bloody mucus from the nose. Spasm of the glottis with spasmodic asthma, alternating with spasmodic vomiting. Angina is accompanied with asthmatic symptoms and cramps. Cough worse at nights with suffocative attacks at 9 AM, in the morning, eating solid food, inhaling cold air, from laughing and taking deep breath and relieved by drinking cold water. ^[7,8,11]
2. **MEPHITIS PUTORIUS**- Spasmodic and whooping cough having few paroxysms in daytime, but more at night, with vomiting after eating. Food goes down wrong way. During asthma, patient feels as if inhaling sulphur with hollow, deep cough with rawness, hoarseness, and pains through chest. Cough worse at night, after drinking, from talking or loud reading. Spasmodic cough of phthisical girls. ^[7,11]
3. **MERCURIUS SOLUBILIS** - Violent racking cough with yellow muco-purulent expectoration having paroxysms of two, with soreness from fauces to sternum. Cough with stitches from lower lobe of right lung to back. Whooping cough with nosebleed. Cough with sensation as if the head and chest would burst. Cough worse during night, from warmth of bed, tobacco smoke, when lying on either side. ^[7,11]
4. **STANNUM METALLICUM** - Dry, racking, concussive, hoarse cough with sensation as if chest is eviscerated, with weakness in limbs, caused by mucus in the chest and by stitches and dryness in the trachea. Mucus is expelled by forcible cough. Cough is violent and dry in evening until midnight. Breathing is short, oppressive with stitches in left side when breathing and lying on same side. Cough is excited by laughing, singing, talking, worse when lying on right side, from drinking anything warm and relieved by expectoration which has a repugnant, sweetish taste, lying on his back. ^[7,11]

ASTHMATIC COUGH- Commonly used homoeopathic medicines are ANTIMONIUM TARTARICUM, ARSENICUM ALBUM, ASPIDOSPERMA, BLATTA ORIENTALIS, CHINA OFFICINALIS.

1. **ANTIMONIUM TARTARICUM** - Cough with burning sensation, itching and oppressed feeling in chest. Coughing shakes the whole body, with involuntary escape of copious urine. Cough as if arising from the abdomen with having first attack most severe, which becomes weak subsequently

one after another, until the last one resembles only a hacking cough. Voice becomes harsh and badly pitched. Cough aggravates after rising in the morning, coming into a warm room from the cold air.^[7,11]

2. **BLATTA ORIENTALIS** - A remedy most frequently used by homoeopaths for asthma, especially when associated with bronchitis. It is indicated after arsenic when this is insufficient. Cough with dyspnoea in bronchitis and phthisis. It acts best in stout and corpulent patients. Much pus-like mucus.^[7]

REFERENCES

1. Reid PT, Innes JA. Davidson's Principles & Practice of Medicine. 22nd Ed. China: Churchill Livingstone Elsevier; 2014.
2. Sharma S, Hashmi MF, Alhajjaj MS. Cough. [Updated 2023 Aug 8]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2024 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK493221/>
3. Amos LB. Cough. *Nelson Pediatric Symptom-Based Diagnosis*. 2018;15-38.e1. doi:10.1016/B978-0-323-39956-2.00002-9
4. Kritek PA, Fanta CH. Harrison's Principles of Internal Medicine. 19th Ed. New York: McGraw Hill Education; 2015.
5. Zanasi A, Mazzolini M, Tursi F, Morselli-Labate AM, Paccapelo A, Lecchi M. Homeopathic medicine for acute cough in upper respiratory tract infections and acute bronchitis: a randomized, double-blind, placebo-controlled trial. *Pulm Pharmacol Ther*. 2014;27(1):102-108. doi:10.1016/j.pupt.2013.05.007
6. Hahnemann S. Organon of Medicine. Sixth Edition. New Delhi: B. Jain Publishers (P) Ltd.; 2004.
7. Boericke W. Boericke's New Manual of Homeopathic Materia Medica with Repertory. 9th Ed. New Delhi: B Jain Publishers(P) Ltd.; 2007.
8. Clarke JH. A Dictionary of Practical Materia Medica Student Edition. New Delhi: B Jain Publishers(P) Ltd.
9. Boger CM. A Synoptic Key of the Materia Medica. Low Price Edition. New Delhi: B. Jain Publishers (P) Ltd.; 2010.
10. Allen HC. Allen's Keynote With Leading Remedies of the Materia Medica & Bowel Nosodes. 9th Ed. New Delhi: B Jain Publishers(P) Ltd.; 1999.
11. Lilienthal S. Homoeopathic Therapeutics. 20th impression. New Delhi: B. Jain Publishers (P) LTD, 2011.