

## THE EFFICACY OF INDIVIDUALISED HOMOEOPATHIC MEDICINES FOR PICA IN THE AGE GROUP 5-40 YEARS: A CASE SERIES

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**Abstract:** Pica = magpie, pica disorder is characterized by an appetite pattern and craving for non-nutritive substances. Pica usually does not exhibit any dangerous situations but at times can create complications. Pica clinical manifestation varies greatly and may be linked to the particular features of the substances consumed and its subsequent complications. For mild to moderate case of pica, individualized homoeopathic medicines can be prescribed. Here in, we conducted a study to identify the efficacy of individualized homoeopathic medicines in treating pica for the age group 5-40 years. Out of 45 cases assessed on the basis of PARDI and CGI scale, 40 cases responded to the individualized homoeopathic medicine.

**Keywords:** Pica, Individualized homoeopathic medicine, Pica ARFID and Rumination Disorder Interview (PARDI), Clinical Global Impression scale (CGI )

### Introduction

Pica involves the persistent eating of non-nutritive, non-food substances (eg. paper, soap, plaster, charcoal, clay, wool, ashes, paint, earth) over period of at least 1 month. <sup>[1]</sup> The term pica has its origins in the Latin classification of the magpie, a bird that is known to scavenge both edible and non-edible items.<sup>[2][3]</sup> Pica has been described from all parts of the world with a prevalence varying from 10-32.5% of all the children surveyed and 73% among school children. In 2022, in India that reported 27% of women practice pica in Chhattisgarh. Another study in Tamil Nadu in 2022, that excluded unripe mango as a substance of pica found 46% pregnant women consumed raw rice, 12% ash (vibuthi), 12% toothpaste, 3% mud and 2% each ingested charcoal and chalk<sup>[4]</sup>. Pica epidemiology is associated with food. Geophagia is the most prevalent form of pica in poor people and people living in Tropical regions and Tribal group-oriented societies.<sup>[5]</sup> There is also a lack of literature about the clinical data of Pica in our country<sup>[6]</sup>.

### Etiology and Predisposing factor

Pica's precise cause is unknown. <sup>[3]</sup> It is associated with a number of complaints like:

1. Iron deficiency anemia
2. Pregnancy
3. Cultural considerations
4. Nutritional deficit
5. Stress. Oral gratification relieves a child's anxiety and mental tension<sup>[7]</sup>
6. Neglect and abuse of children.
7. Maternal deprivation. <sup>[7]</sup>
8. Low socioeconomic status. <sup>[7]</sup>
9. Underlying mental health disorder.<sup>[8]</sup>

**Diagnostic criteria** [8][9]

The ICD-9-CIVI code for pica is 307.52 and is used for children or adults. The ICD-10-CM codes for pica are (F98.3) in children and (F50.8) in adults. The ICD -11- MMS code for pica is 6B84.

1. Persistent eating of non-nutritive, non-food substances over a period of at least 1 month.
2. The eating of non-nutritive, non-food substances are inappropriate to the developmental level of the individual.
3. The eating behaviour is not part of a culturally supported or socially normative practice.
4. If the eating behaviour occurs in the context of another mental disorder like intellectual developmental disorder, autism spectrum disorder, schizophrenia or medical condition including pregnancy, it is sufficiently severe to warrant additional clinical attention.

**Aim and Objectives**

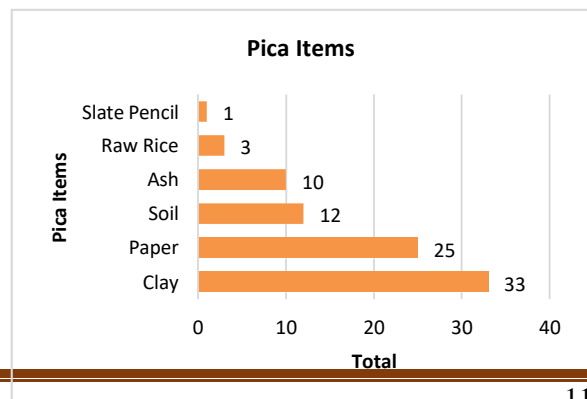
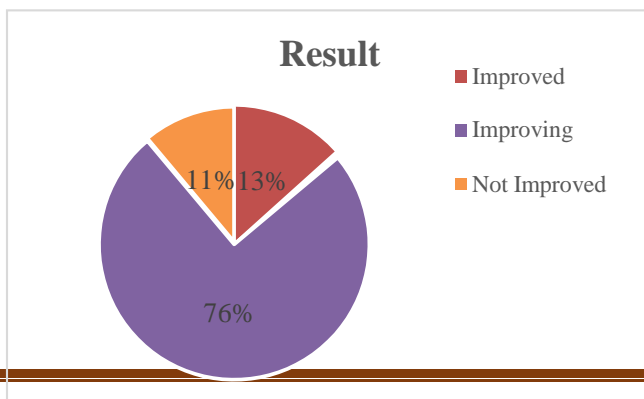
To evaluate effectiveness of individualised homoeopathic medicines for Pica in the age group 5-40 years. Primary objective is to study the effectiveness of homoeopathic remedies in cases of pica with the help of PARDI and CGI scale. Secondary objective is to Study the commonly prescribed homoeopathic medicines in cases of pica.

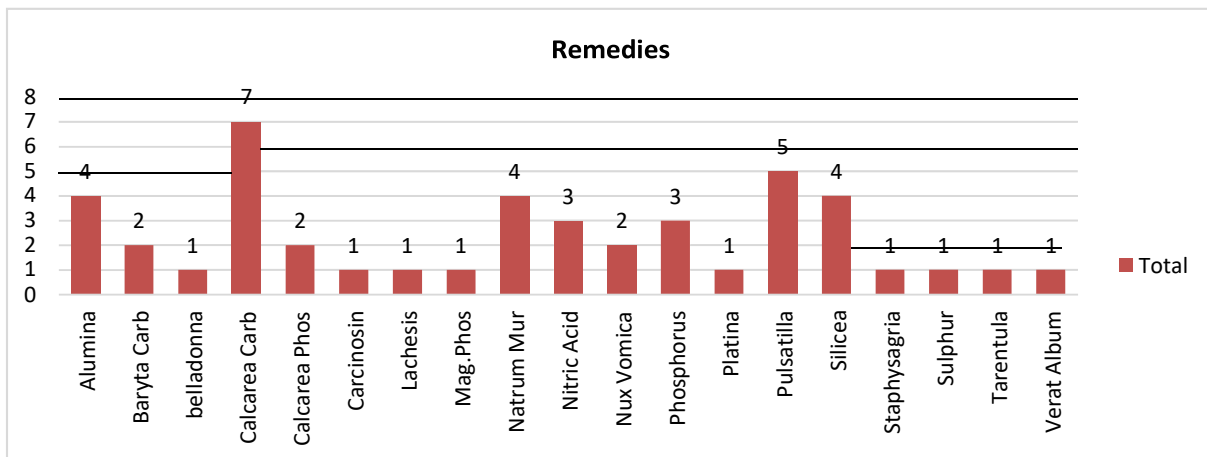
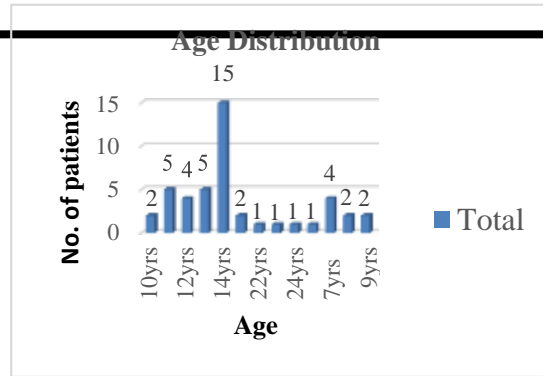
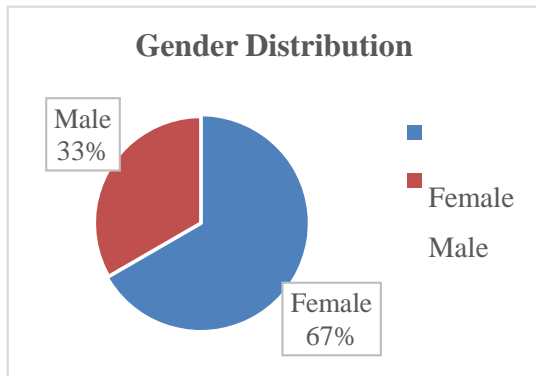
**Materials and Methods**

The research adopts a case series design undertaken at OPD of Motiwala (National) Homoeopathic Medical College and Hospital and medical camp at Ashram shala Dhondegaon ,over a 6 month period. The selection of study subject follows specific eligibility criteria including all sexes, and age group of 5-40 years. A sample size of 45 using convenience sampling with the tool used for assessment was Pica, ARFID, and Rumination Disorder Interview<sup>[10]</sup> (PARDI) and Clinical Global Impression scale (CGI ). Each case follow up at an interval of 15-30 days. Results were compared on through CGI scale – the CGI has 2 components – the CGI severity and the CGI improvement. Data of sample size 45 was statistically analysed using paired t test showing efficacy in the post test result.

**Result**

The paired t test conducted on the CGI score of patients before and after administering homoeopathy for Pica showed that the t statistics of the sample (17.54) was greater than the table t statistic(2.02)





**Discussion**

The study, conducted over a span of six months, included 45 cases with a gender distribution of 30 females and 15 males. We found that factors like influence from friends or family, parental occupation, stress, anxiety, homesickness played a role in triggering pica behaviour. After the study of 6 months ,we observed that out of 45 patients , 6 patients have improved that is the severity score is reduced to 1, 34 patients are improving that is the severity score is reduced and 5 patients did not show improvement. The overall improvement seen in 40 cases based on PARDI and CGI scale, indicating the effectiveness of homoeopathic medicines I treating pica. Calcerea Carb, Pulsatilla, Alumina, Silicea, Natrum Mur are the most commonly prescribed homoeopathic medicines in treatment of pica.

**Conclusion**

The study shows that individualised homoeopathic medicines are effective in cases of patients practicing pica aged from 5 to 40 years.. The results are still dependent on various factor beyond the control of community based research such as socio – economical conditions, maternal deprivation.

**Conflict of interest:** No conflict of interest

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