

Efficacy of Homoeopathic Medicine *Baryta carbonica* in Paediatric Cases: A Clinical Study

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ABSTRACT:

Baryta carbonica is a prominent anti-scrofulous Homoeopathic remedy frequently used in pediatric care for its ability to treat a wide spectrum of acute, intercurrent, and constitutional conditions. This clinical study evaluated the efficacy of *Baryta carbonica* in 30 pediatric patients aged 1–18 years at Sarada Krishna Homoeopathic Medical College. Standardized case recording and individualized prescribing based on acute or chronic totalities were employed. Statistical analysis using the paired t-test ($t=16.429$, $p=0.000$) demonstrated a significant reduction in symptom intensity following intervention. Results showed marked improvement in 70% of cases, confirming its role as an effective therapeutic agent in the pediatric age group.

Index Term: *Baryta carbonica, Homoeopathy, Paediatric remedy, Scrofulous, Tonsillitis.*

INTRODUCTION

Childhood is a critical phase for growth and development, where biological risk factors and clinical manifestations often differ significantly from those in adults. Homoeopathy is particularly well-suited for infants and young children due to its gentle nature and palatability. Among constitutional remedies, *Baryta carbonica* is a leading prescription for the "scrofulous" constitution, characterized by a tendency toward glandular swellings, hypertrophied tonsils, and stunted physical or mental growth.

Baryta carbonica acts primarily on the lymphatic glands, mind, and various organs including the throat and heart. It is highly effective for children presenting with "late learning to walk" or "late development" compared to their peers.

NEED FOR THE STUDY

Children are highly susceptible to various infections and developmental challenges. While *Baryta carbonica* is traditionally indicated for pediatric ailments, there is a need for clinical research to systematically evaluate its effectiveness across diverse pediatric conditions and to identify the most successful potencies used in practice.

MATERIALS AND METHODS

- 3.1. Study Design:** A clinical study involving 30 cases selected through purposive sampling from OPD, IPD, and rural health centers.
- 3.2. Inclusion Criteria:** Children aged 1 to 18 years showing indications for *Baryta carbonica*.
- 3.3. Methodology:** Case details were recorded in a standardized format. Medications were prescribed based on repertorial or non-repertorial analysis of totalities. Potency and dosage were individualized according to Homoeopathic principles.
- 3.4. Statistical Tool:** The Paired 't' test was utilized to compare symptom intensity before and after treatment

OBSERVATION AND RESULTS

The study observed a wide range of pediatric conditions including Tonsillitis (23.33%), Down syndrome (20%), and Adenoids (10%).

TABLE: 1 DISTRIBUTION OF CASES ACCORDING TO THE AGE GROUPS

S. NO	AGE	NO. OF CASES	PERCENTAGE (%)
1.	1-5 YEARS	7	23.33
2.	6-12 YEARS	14	47
3.	13-18 YEARS	9	30
TOTAL		30	100

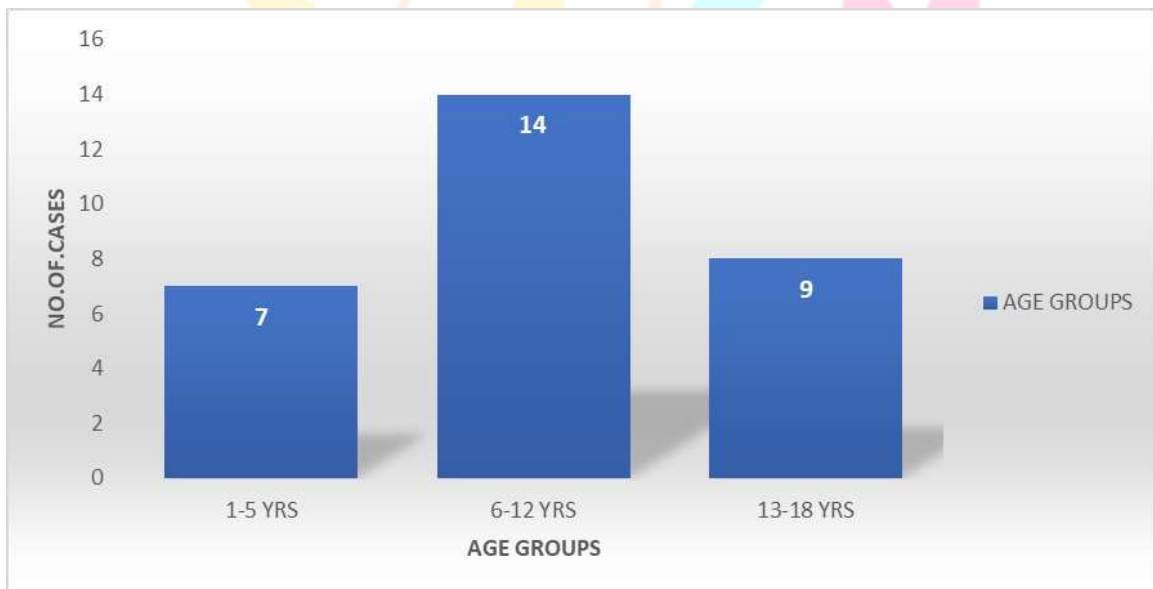


Figure: 1

FINDINGS:

The majority of patients were in the 6–12 year age group (47%).

TABLE: 2 DISTRIBUTION OF CASES ACCORDING TO THE POTENCY

S. NO	POTENCY	NO. OF CASES	PERCENTAGE (%)
1.	30	6	20
2.	200	15	50
3.	1M	7	23
4.	10M	2	7
TOTAL		30	100

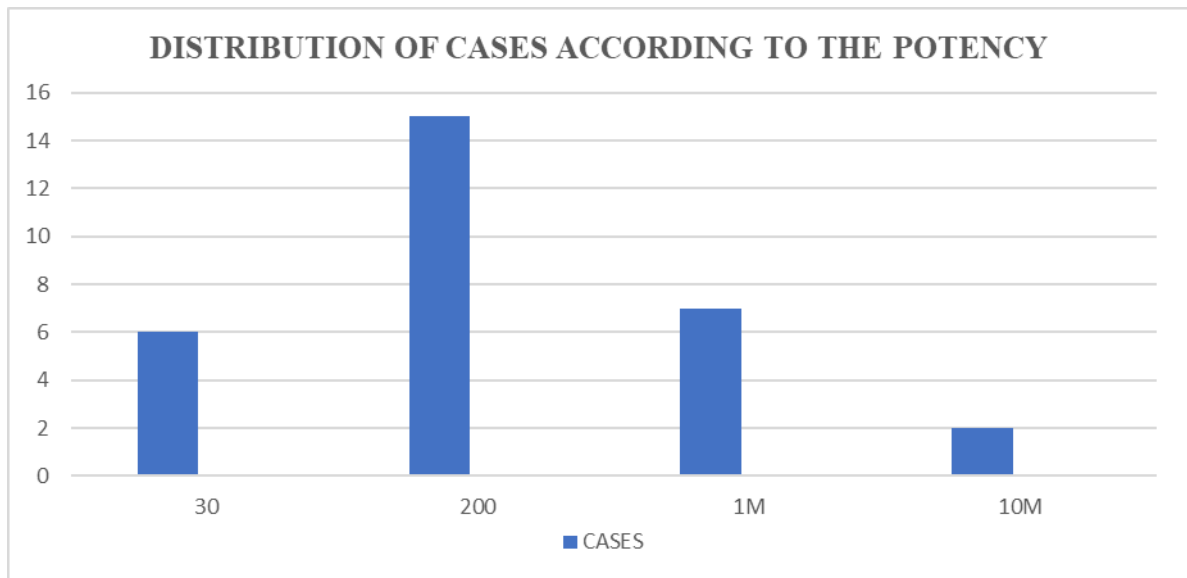


Figure: 2
FINDINGS:

The 200th potency was most frequently used (50%), followed by 1M (23%) and 30th (20%).

TABLE: 3 DISTRIBUTION OF CASES ACCORDING TO THE IMPROVEMENT STATUS

S. NO	IMPROVEMENT STATUS	NO. OF CASES	PERCENTAGE (%)
1.	MARKED IMPROVEMENT	21	70
2.	MODERATE IMPROVEMENT	8	26.66
3.	MILD IMPROVEMENT	1	3.33
4.	NO IMPROVEMENT	0	0
TOTAL		30	100

Research Through Innovation

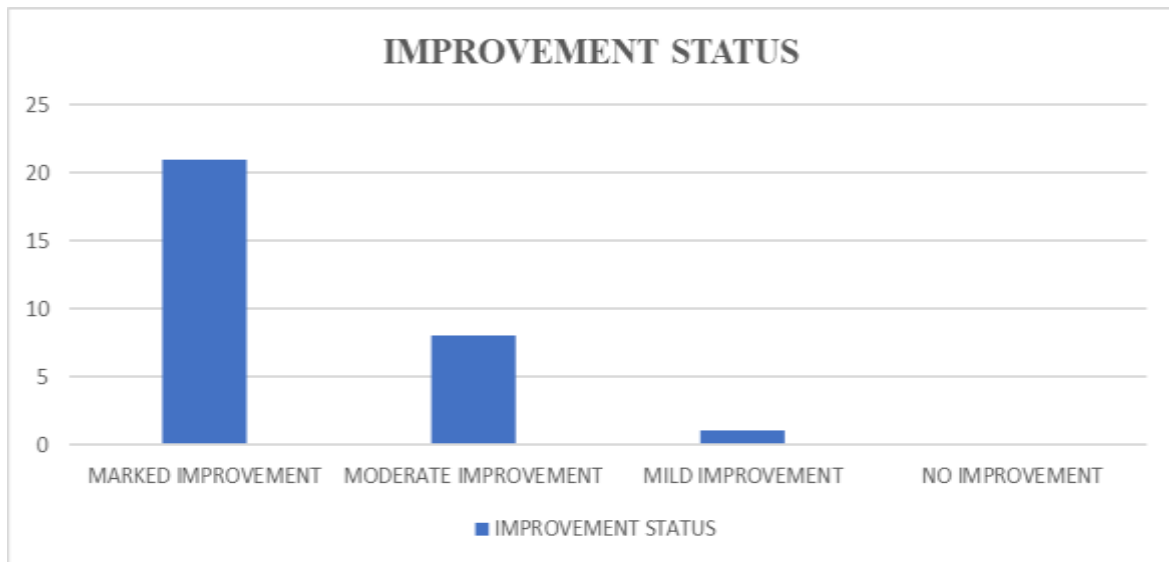


Figure: 3

FINDINGS:

21 patients (70%) showed marked improvement, 8 (26.66%) showed moderate improvement, and 1 (3.33%) showed mild improvement.

DISCUSSION

The statistical analysis revealed a t-value of 16.429 with a p-value of 0.000, indicating that the clinical intervention with Baryta carbonica had a statistically significant impact on reducing symptom intensity. The remedy was particularly effective in "chilly" patients and those exhibiting psychic features such as lack of confidence, weak memory, and timidity. The findings align with existing literature regarding the remedy's affinity for the lymphatic system and its effectiveness in treating recurrent tonsillitis.

CONCLUSION

This clinical study confirms that Baryta carbonica is a highly effective Homoeopathic remedy for the pediatric age group, particularly for conditions involving glandular hypertrophy and developmental delays. It serves as a valuable therapeutic option for both acute and constitutional management in children.

ACKNOWLEDGMENT

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