

# Effectiveness of Ignatia Amara 200C in Post Traumatic Stress Disorder: A Case Study

Dr. Janet Cynthia Selvaraj<sup>1</sup>, Dr. Melvin Abraham K.<sup>2</sup>

<sup>1</sup>Professor, Dept of Homoeopathic Pharmacy, Sri Sairam Homoeopathy Medical College & Research Centre, West Tambaram, Chennai - 44, India  
PhD Scholar, Swami Narayan University, Kalol, Gujarat, India  
Email: [Janetselvaraj76\[at\]gmail.com](mailto:Janetselvaraj76[at]gmail.com)

<sup>2</sup>PG Scholar, Dept of Pediatrics, White Memorial Homoeo Medical College & Hospital, Chevaracode, Veeyanoor, PO, Kanyakumari District, Tamilnadu, India  
Email: [melvinkrishnan\[at\]gmail.com](mailto:melvinkrishnan[at]gmail.com)

**Abstract:** Post Traumatic stress disorder (PTSD) is a debilitating mental health condition that often results from exposure to traumatic events, leading to symptoms such as intrusive memories, emotional numbing, hypervigilance, and avoidance. Traditional treatments, including psychotherapy and medication, may carry side effects and may not fully address the emotional and physical manifestations of the disorder. This case study explores the potential of homeopathic treatment, specifically Ignatia Amara, as an alternative approach to managing PTSD symptoms. A 39-year-old female patient, Ms. A, who experienced a traumatic bike accident resulting in her son's death, exhibited severe PTSD symptoms, including nightmares, anxiety, emotional numbness, and physical distress such as hyperventilation and a sinking sensation in the stomach. After administering Ignatia Amara 200C, significant improvements were observed over a six-month period. The patient's PTSD Checklist for DSM-5 (PCL-5) score decreased from 28 to 10, and subjective symptom severity dropped from 8/10 to 1/10. Ms. A reported reduced frequency of nightmares, improved mood, and better engagement in social activities. The results suggest that Ignatia Amara may effectively alleviate PTSD symptoms, particularly emotional disturbances and associated physical symptoms. However, further research with larger sample sizes and randomized controlled trials is needed to validate these findings and understand the underlying mechanisms of action.

**Keywords:** PTSD, homeopathic treatment, Ignatia Amara, emotional disturbances, traumatic events

## 1. Introduction

PTSD is characterized by symptoms such as re-experiencing traumatic events, avoidance of reminders, negative alterations in mood and cognition, and hyperarousal. Symptoms of changes in physical and emotional reactions (also called arousal symptoms) may include: being easily startled or frightened, self-aggressive behaviour, overwhelming guilt or shame. Causes Stressful experiences, including the amount and severity of trauma patient have gone through life, inherited mental health risks, such as a family history of anxiety and depression, Inherited features of personality — often called temperament, the way brain regulates the chemicals and hormones of body in response to stress. (Dandge & Desai, 2023)

Conventional treatments often include psychotherapy and medication, which can have side effects. PTSD is a potentially chronic impairing disorder that is characterized by re-experience and avoidance symptoms as well as negative alternations in cognition and arousal. (Miao et al., 2018) Homeopathy, particularly Ignatia Amara, known for its use in grief and emotional disturbances, may provide an alternative treatment option. (American Psychiatric Association. (2013). *Diagnostic and Statistical Manual of Mental Disorders (5th Ed.)*, n. d.) This case study explores the effectiveness of Ignatia in managing PTSD symptoms.

### PTSD, The Story Behind.

The term PTSD emerged shortly after the Vietnam War, but the recognition that traumatic experiences can result in a wide range of psychobiological symptoms is not a recent revelation. During the Civil War, a PTSD-like disorder was

referred to as the 'Da Costa's Syndrome' (Wooley CF. *Jacob Mendez DaCosta: Medical Teacher, Clinician, and Clinical Investigator. Am J Cardiol.* 1982 Nov; 50 (5): 1145 - 8. Doi: 10.1016/0002 - 9149 (82) 90434 - 9. PMID: 6753556., n. d.), from the American internist Jacob Mendez Da Costa (1833–1900; Civil War duty: military hospital in Philadelphia). The syndrome was first described by ABR Myers (1838–1921) in 1870 as combining effort fatigue, dyspnea, a sighing respiration, palpitation, sweating, tremor, an aching sensation in the left pericardium, utter fatigue, the symptoms are exaggerated when making an effort and sometimes result in complete fainting. It was noted that the syndrome resembled more closely an abandonment to emotion and fear, rather than the 'effort' that normal subjects engage to overcome challenges (Myers ABR. *On the Etiology and Prevalence of Diseases of the Heart among Soldiers. London: John Churchill & Sons, 1870.*, n. d.). This classic observation pertains to what we now know of allostasis. In 1871, Da Costa documented that the condition frequently occurs in soldiers during periods of stress, particularly when fear is a factor. The syndrome became increasingly observed during the Civil War and during World War I. (Sterling P, Eyer J. *Allostasis: A New Paradigm to Explain Arousal Patho - Logy. In: Fisher S, Reason J (Eds). Handbook of Life Stress, Cognition, and Health. NY: Wiley, 1988. eCAM 2005; 2 (4) 511*, n. d.)

## 2. Symptoms

Symptoms of post-traumatic stress disorder can emerge within the initial three months following a traumatic event. However, there are instances where symptoms may not manifest until several years after the event. These symptoms

persist for more than one month and have a significant impact on social and work - related interactions, as well as interpersonal relationships. They also can affect your ability to do your usual daily tasks. (*World Health Organization. (2021). Mental Health and Substance Use. [Online] Available: [WHO Website Link], n. d.*)

The symptoms of PTSD are typically categorized into four groups: intrusive memories, avoidance, negative alterations in thinking and mood, and changes in physical and emotional responses. These symptoms may fluctuate over time or differ from individual to individual.

#### Intrusive memories

Symptoms of intrusive memories may include:

- Undesirable, troubling recollections of a traumatic occasion that come back over and over once more.
- Remembering a traumatic occasion as in the event that it were happening once more, too known as flashbacks.
- Annoying dreams or bad dreams approximately a traumatic occasion.
- Extreme enthusiastic trouble or physical responses to something that reminds you of a traumatic occasion.

#### Avoidance

- Symptoms of avoidance may include:
- Attempting not to think or conversation around a traumatic occasion.
- Remaining absent from places, exercises or individuals that remind you of a traumatic occasion.

**Negative changes in thinking and mood** (<https://www.mayoclinic.org/diseases-conditions/post-traumatic-stress-disorder/symptoms-causes/syc-20355967>, n. d.)

Indications of negative changes in considering and temperament may incorporate:

- Negative considerations around yourself, other individuals or the world.
- Continuous negative feelings of fear, fault, blame, outrage or disgrace.
- Memory issues, counting not recollecting vital angles of a traumatic occasion.
- Feeling segregated from family and companions.
- Not being inquisitive about exercises you once delighted in.
- Having a difficult time to have positive feelings.
- Feeling sincerely numb.

**Changes in physical and emotional reactions** (<https://www.nhs.uk/mental-health/conditions/post-traumatic-stress-disorder-ptsd/symptoms/>, n. d.)

Indications of changes in physical and passionate responses, too called excitement side effects, may incorporate:

- Being effectively startled or startled.
- Continuously being on protect for peril.
- Self - destructive behavior, such as drinking as well much or driving as well quick.
- Inconvenience resting.
- Inconvenience concentrating.
- Peevishness, irate upheavals or forceful behavior.

- Physical responses, such as sweating, quick breathing, quick pulse or shaking.
- Terrifying dreams that will or may not incorporate angles of a traumatic occasion.

#### Ignatia Amara

Ignatia Amara is a Homoeopathic Drug, introduced by Master Hahnemann in 1805. Details of this medicine is found in Allen's Encyclop. Mat. Med. Vol. V. (*Homoeopathic Pharmacopoeia of India, Vol 1pg.223, n. d.*) It is a plant drug and the parts used for preparation of the drug is the bean. It was included in the Homoeopathic Pharmacopoeia of India Vol 1 after the elaborate Drug Proving process.

Mind- Changeable mood; introspective; silently brooding. Melancholic, sad, tearful. Not communicative. Sighing and sobbing. After shocks, grief, disappointment.

Stomach- Acrid eructation. All - gone feeling in stomach; much tooting; hiccough. Spasms in stomach; more awful smallest contact. Unwilling to standard slim down; yearns for awesome assortment of toxic articles. Longing for for corrosive things. Sinking in stomach, diminished by taking a profound breath.

Respiratory- Dry, spastic cough that comes on quickly and in fits. Glottis spasm. coughs that reflex. The need to cough gets stronger when you cough. Much hesitating. A hollow, spasmodic cough that worsens at night, produces little expectoration, and hurts the trachea.

Female- Menses, dark, as well early, as well lavish, or meager. Amid menses awesome sluggishness, with uncontrollable torments in stomach and guts. Ladylike sexual sub zero condition. Concealment from melancholy.

Sleep- Very light. Jerking of limbs on going to sleep. Insomnia from grief, cares, with itching of arms and violent yawning. Dreams continuing a long time; troubling him. ([Http://Homeoint. Org/Books/Boericmm/i/ign. Htm](http://homeoint.org/books/boericmm/i/ign.htm), n. d.)

### 3. Case Presentation

Patient Profile:

Name: Ms. A

Age: 39 years

Gender: Female

Medical History: Ms. A experienced a traumatic event (a bike accident in which her 17 year old son died) three months prior, leading to persistent symptoms of PTSD.

#### Symptoms:

Nightmares

Hyperventilation

Sighing Respiration

Anxiety

Emotional numbness

Difficulty concentrating.

Difficulty in Sleeping

Frightening dreams

Sinking sensation in stomach

Avoiding routine

Introspective  
Suppressed Menstruation

### Initial Assessment:

Upon consultation and case taking, Ms. A reported her PTSD symptoms as severely impacting her daily life. She scored 28 on the PTSD Checklist for DSM - 5 (PCL - 5) ([https://www.ptsd.va.gov/professional/assessment/documents/pcl5\\_standard\\_form.pdf](https://www.ptsd.va.gov/professional/assessment/documents/pcl5_standard_form.pdf), n. d.), indicating significant distress.

### Intervention

#### Homeopathic Remedy:

After a detailed case - taking process that included her emotional state, physical symptoms, and life history, Ignatia amara 200C was prescribed. (Scholten, J. (2018). *The Principles of Homeopathy*. [Book Reference], n. d.)

#### Dosage:

Ms. A was advised to take Ignatia 200C one dose in the morning, with follow - up consultations to monitor progress. Further placebo was given once a month.

### Outcome Measures

#### Symptom Improvement:

Monitored using the PCL - 5 and a subjective symptom severity scale (0 - 10).

#### Follow - up Schedule:

Assessments at 1 month, 3 months, and 6 months post - initiation of treatment.

## 4. Results

Follow - Up Assessments:

### 4.1 Month Post - Treatment:

- PCL - 5 Score: Reduced from 28 to 20
- Symptom Severity Scale: Improved from 8/10 to 5/10
- Ms. A reported decreased frequency of nightmares and a slight reduction in anxiety levels.

### 4.2 Months Post - Treatment:

- PCL - 5 Score: Further reduced to 15
- Symptom Severity Scale: Improved to 3/10
- Ms. A expressed significant improvements in emotional responses, reporting better mood and reduced hypervigilance.

### 4.3 Months Post - Treatment:

- PCL - 5 Score: 10
- Symptom Severity Scale: 1/10
- Ms. A noted a remarkable change in her daily life, with the ability to engage in social activities without overwhelming anxiety.

## 5. Discussion

The case study demonstrates that Ignatia amara 200c is effective in alleviating PTSD symptoms, particularly

emotional disturbances and anxiety along with the other physical symptoms. Ms. A experienced significant improvements in her quality of life, suggesting that homeopathic remedies can play a role in managing PTSD.

While this case study is limited by its single patient focus and lack of a control group, it highlights the potential of individualized homeopathic treatment for psychological conditions. Further research with larger cohorts is warranted to validate these findings and explore the mechanisms of action of Ignatia in PTSD.

## 6. Conclusion

This case study suggests that Ignatia Amara, a homeopathic remedy, can offer significant relief for individuals suffering from PTSD, particularly in alleviating emotional distress, anxiety, and associated physical symptoms. The positive outcomes observed in Ms. A—marked by substantial reductions in PTSD symptom severity and improved quality of life—indicate that Ignatia Amara may serve as a viable alternative or complementary treatment for PTSD, especially when traditional approaches have limitations or undesirable side effects. While the findings from this case study are promising, they are limited by the absence of a control group and the focus on a single patient. Therefore, further research with larger sample sizes, randomized controlled trials, and deeper exploration of the mechanisms of action is essential to confirm the efficacy of Ignatia Amara and other homeopathic remedies in the treatment of PTSD. Future studies could provide valuable insights into the broader applicability of homeopathy in managing trauma - related psychological conditions.

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