

# Osteoarthritis and Homoeopathy

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## Definition

Osteoarthritis is a disease which characterizes a state of pathological imbalance, consisting of degenerative (Syphilis) as well as reparative processes, involving the whole joint and its component parts, with secondary inflammatory changes (Psora/ Sycosis), especially in the synovium, but also in the articular cartilage.

## Classification

OA is classified as primary or idiopathic and secondary to metabolic variations, anatomic abnormalities, trauma, or inflammatory joint conditions.

### PRIMARY (IDIOPATHIC) OA

Peripheral joints and spinal apophyseal joints as well as intervertebral joints are involved.

It may be-

- Generalized osteoarthritis (Psora/ Syphilis/ Sycosis)
- Erosive inflammatory osteoarthritis (Syphilis/ Sycosis)
- Diffuse idiopathic skeletal hyperostosis (Psora/ Sycosis)
- Chondromalacia patellae (Psora/ Syphilis)
- Hereditary (Syphilis)

### SECONDARY OA

It may be caused by-

- Trauma, whether acute or chronic (occupational, sports). (Causa occasionalis)
- Underlying joint disorders like local (fracture, infection) or diffuse (rheumatoid arthritis). (Causa occasionalis/ Psora/ Sycosis)
- Systemic metabolic or endocrine disorders like ochronosis (alkaptonuria), Wilson disease, Hemochromatosis, Kashin-Bek disease, Acromegaly or Hyperparathyroidism. (Psora/ Sycosis)
- Crystal deposition disease like Calcium pyrophosphate dihydrate (pseudogout), basic calcium phosphate (hydroxyapatite-octacalcium phosphate-tricalcium phosphate) or Monosodium urate monohydrate (gout). (Psora)
- Neuropathic disorders (Charcot joints) like Tabes dorsalis, Diabetes mellitus or Intra-articular corticosteroid overuse. (Psora/ Syphilis)
- Miscellaneous like Bone dysplasia (multiple epiphyseal dysplasia, achondroplasia) or Frostbite. (Psora/ Syphilis/ Sycosis)

## Pathogenesis

Osteoarthritis is characterized by morphologic, biochemical, molecular, and biomechanical changes of both cells and matrix, which lead to softening (Syphilis), fibrillation (Psora/ Syphilis), ulceration (Syphilis), articular cartilage loss (Syphilis), sclerosis as well as eburnation of subchondral bone (Sycosis), osteophytes (Psora/ Sycosis), and subchondral cysts (Psora/ Syphilis/ Sycosis).

## Clinical Picture

**General Symptoms:** OA may be associated with depression (Psora/ Syphilis), disability (Psora), and sleep disturbance (Psora). Pain (Psora), stiffness (Psora/ Sycosis), gelling (Psora/ Sycosis), crepitus (Psora/ Syphilis), bony enlargement (Sycosis), limited range of motion (Psora/ Sycosis) and malalignment (Psora).

**Hands:** DIPs (Heberden nodes), PIPs (Bouchard nodes), carpometacarpal joint; squaring of the base of the hand; medial and lateral deviation at the DIPs and PIPs.

**Knees:** Patellofemoral joint symptoms worse on the stairs than on the flat; varus changes with medial compartment disease, valgus with lateral compartment disease; Baker's (popliteal) cysts and tenderness of the pes anserine bursa are common.

**Hips:** Typically groin pain, but occasionally in buttocks; less so in knee or below knee; flexion contractures and Trendelenberg's sign may be present.

**Cervical spine:** Localised spine pain, muscle spasm, and limited motion (lateral flexion and extension); radicular pain with pain, sensory loss or muscle weakness or atrophy in nerve root distribution; cervical myelopathy with long tract signs, bladder dysfunction.

**Lumbar spine:** Localised pain and muscle spasm, limited extension, buttock pain, worse in PM, but not nocturnal; radicular pattern with pain, sensory and motor changes in nerve root distribution; spinal stenosis pattern pain with back/leg pain with standing, walking relieved by sitting.

## Local Symptoms

Pain, limited range of motion, and stiffness are the cardinal symptoms. But picture is highly variable, depending on the joints affected, its severity, and the number of joints involved. Bony enlargement and malalignment are common. Crepitus may be present with or without pain. Effusions may be present, usually without heat or erythema. OA of spine and hip, may be associated with symptoms of adjacent nerve root compression. Symptoms may be from mild to severe and may lead to altered function and disability. End-stage osteoarthritic joints, especially weight-bearing joints, are extremely painful.

## Pain

Typical OA pain is worse by use of the joint and relieved with rest. In some, it may variate with changes in barometric pressure and whether.

Since cartilage is aneural, joint pain arises from adjacent structures like joint capsule stretched by bony enlargement, periosteal reaction, subchondral bone microfractures, increased intra-osseous venous pressure, and synovitis.

## Stiffness

Morning stiffness (Psora/ Sycosis) may occur with OA. The stiffness is localized to the region around the affected joints and is not as the diffuse morning stiffness characteristic of rheumatoid arthritis. When it occurs during the day following periods of immobilization, it is called as gelling.

## Limited Joint Function

OA may lead to decreased function for recreational, occupational, and even self-care activities. These activities may be limited due to pain; lost range of motion in the joint because of loss of joint space; associated muscle weakness due to atrophy of the adjacent muscles; need to work harder to move the joint as the coefficient of friction increases as the cartilage surface erodes and loses integrity; or joint instability.

## Signs

The symptoms arise from a joint and not a periarticular process such as a bursitis. The examination reveals which joints are involved, the number of joints, their range of motion, joint effusion or bony enlargement, malalignment, instability and crepitus.

Observation includes the gross appearance of the joints, splinting because of pain or muscle spasm, decreased range of motion, and gait assessment for limp.

Each joint is palpated for tenderness, effusion, and crepitus. Passive and active range of motion can be measured. It should be noted if there is pain with motion. Neurological examination may reveal nerve compressions.

## Tenderness

Tenderness or pain with pressure on the joint or along the joint margin is typical.

## Joint Enlargement

Joint enlargement (Sycosis) may comprise of bony enlargement due to osteophytes and/or joint effusions. These are very characteristic in the distal interphalangeal (DIP) and proximal interphalangeal (PIP) joints of the hand. The bony enlargements of DIPs are called Heberden's nodes.

## Effusions

Effusions are generally noninflammatory. (Sycosis)

## Crepitus

Crepitus is an audible or palpable sensation of roughness, crunching, or crackling sound over a joint during active or passive movement. Crepitus is most likely caused by irregularity of joint surfaces or intra-articular debris.

## Limitation of Motion

Range of motion is restricted by pain, effusions, flexion contractures, muscle spasm, mechanical inhibition like loss of cartilage, malalignment, or intra-articular loose bodies.

## Malalignment

Medial compartment knee OA is frequently associated with a varus malalignment, and lateral compartment degeneration with a valgus angulation. Malalignment is a risk factor for the progression of OA of the knee. Severe angular deviations of the fingers may occur with Heberden's OA. Hallux valgus, or bunion of the first metatarsalphalangeal joint, is a characteristic presentation of OA.

## Musculature

The muscles related to the peripheral joints may have atrophy (Syphilis) and fasciculations in OA of the spine. Intrinsic muscle wasting in the hands may mirror cervical spondylosis, and quadriceps femoris atrophy may exist in presence of knee OA.

## Acuity

Typically, OA is a chronic process (True miasmatic). An acute inflammatory presentation would suggest a systemic inflammatory arthritis, crystal arthropathy, or infection.

## Differential diagnosis

- Ankylosing Spondylitis
- Avascular Necrosis
- Bursitis
- Conditions that affect bone (e.g., cancer, osteonecrosis, Paget's disease, and osteoporosis)
- Conditions that affect cartilage such as osteochondritis dissecans and osteochondromatosis
- Crystal deposition disease (e.g. Calcium Pyrophosphate Deposition Disease, Gout)
- Charcot Joint
- Infected joint
- Inflammatory arthritis
- Lyme Disease
- Patellofemoral Arthritis
- Patellofemoral Syndrome
- Pigmented villonodular synovitis
- Prepatellar Bursitis
- Primary or metastatic bone cancer
- Psoriatic Arthritis
- Radicular spine pain
- Reactive arthritis
- Rheumatoid diseases (e.g., rheumatoid arthritis, ankylosing spondylitis, pseudogout, psoriatic arthritis)
- Rhinosporidiosis
- Seronegative spondyloarthropathies
- Tendinitis
- Underlying mechanical pain

## Investigations

X Ray, CT Scan, Arthroscopy, Synovial Fluid/ Biopsy

Uric acid, RA factor, ESR, CBC, Anti CCCP, HLA B27, CRP, ACE, ANA

# Homoeopathic Remedies for OA

	colch. led.	caust.	Puls.	Kali-c.	merc.	nat-s.	rad-br.	sil.	am.	benz-ac.	caul.	dulc.	guaj.	suiph.	alb.	cimic.	rhod.	rhus-t.	sars.	clem.	lith-c.	mang-act.	bell.	Calc.	iod.	med.	ruta.	am-p.	ars.	aur.	form-ac.	kali-bi.	Kali-c.	kalm.	lac-ac.	lith-be.	lyc.	mand.	mez.	phyt.	sabin.	sep.	abrot.	ant-c.	aran-ix.	aran.	bacls-7.	Calc-p.	Char.				
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## Short Repertory of OA

- GENERALS - INFLAMMATION - Joints; of - accompanied by - sensitivity; excessive **colch.**  
 GENERALS - INFLAMMATION - Joints; of - accompanied by - Skin; complaints of **rad-br.**  
 GENERALS - INFLAMMATION - Joints; of - Bones; long **caust.**  
 GENERALS - INFLAMMATION - Joints; of - chronic **Caust.** **mang-act.** **rad-br.** **scarl.**  
 GENERALS - INFLAMMATION - Joints; of - deformans; arthritis **abrot.** **Am-p.** **ant-c.** **apat.** **aran-ix.** **aran.** **arb.** **Arn.** **Ars.** **aur.** **bacls-7.** **Benz-ac.** **Brom.** **calc-caust.** **calc-f.** **calc-p.** **Calc.** **caps.** **caul.** **Caust.** **Cimic.** **clem.** **Colch.** **colchin.** **cupr.** **Dulc.** **euphr.** **ferr-i.** **ferr-pic.** **fl-ac.** **form-ac.** **graph.** **Guaj.** **hecla hed.** **hep.** **ichth.** **Iod.** **kali-c.** **Kali-i.** **kalm.** **lac-ac.** **Led.** **lith-be.** **lith-c.** **lith-sal.** **lyc.** **mand.** **mang-act.** **mang.** **MED.** **Merc-c.** **merc.** **methyl.** **nat-p.** **nat-s.** **nit-ac.** **onop.** **Pip-m.** **Puls.** **rad-br.** **rhod.** **Ruta** **Sabin.** **sal-ac.** **sars.** **sep.** **Sil.** **staph.** **sul-i.** **sul-ter.** **Sulph.** **sync.** **symph.** **Thuj.** **thym-gl.** **thyr.** **tub-d.** **urt-u.** **visc.**  
 GENERALS - INFLAMMATION - Joints; of - fails; when all else **morg-p.**  
 GENERALS - INFLAMMATION - Joints; of - gonorrhoeal **clem.** **kali-i.** **med.** **nat-s.** **puls.** **rhus-t.** **sulph.** **thuj.**  
 GENERALS - INFLAMMATION - Joints; of - injuries; after **arn.**  
 GENERALS - INFLAMMATION - Joints; of - Large joints **Arb.**  
 GENERALS - INFLAMMATION - Joints; of - night **cimic.**  
 GENERALS - INFLAMMATION - Joints; of - osteoarthritis **bacls-7.** **cassia-s.** **dys.** **prot.**  
 GENERALS - INFLAMMATION - Joints; of - Periosteum **bell.** **cham.** **colch.** **cycl.** **guaj.** **Kali-bi.** **kali-i.** **merc.** **Mez.** **phos.** **phyt.** **sars.** **sil.**  
 GENERALS - INFLAMMATION - Joints; of - Small joints **act-sp.** **aloe** **benz-ac.** **carb-an.** **CAUL.** **colch.** **kali-bi.** **led.** **lith-c.** **nat-c.** **rhod.** **streptoc.**  
 GENERALS - INFLAMMATION - Joints; of - subacute **dulc.** **Led.** **merc.** **Puls.** **rhus-t.**  
 GENERALS - INFLAMMATION - Joints; of - wet damp weather **nat-s.**  
 GENERALS - INFLAMMATION - Joints; of **abrot.** **ACON.** **Agn.** **am-be.** **am-c.** **am-caust.** **am-m.** **am-p.** **ambr.** **Ang.** **ant-c.** **Ant-t.** **APIS** **aran-ix.** **aran.** **arb.** **arg-met.** **arist-cl.** **Arn.** **ars.** **asar.** **aur-m-n.** **Aur.** **bar-c.** **BELL.** **Benz-ac.** **berb.** **bora-o.** **botul.** **brass-n-o.** **BRY.** **calc-hp.** **calc-p.** **Calc.** **carb-ac.** **carc.** **caul.** **Caust.** **cham.** **chin.** **chinin-s.** **cimic.** **clem.** **cocc.** **Colch.** **coloc.** **conch.** **cortico.** **cortiso.** **crot-h.** **cycl.** **Dulc.** **eos.** **eup-per.** **euphr.** **Ferr-p.** **ferr.** **fl-ac.** **Form-ac.** **form.** **gamb.** **Gaul.** **germ-met.** **gins.** **graph.** **Guaj.** **hed.** **hep.** **hyper.** **ichth.** **ign.** **Iod.** **junc-e.** **kali-ar.** **Kali-c.** **Kali-i.** **kali-m.** **kali-p.** **kali-s.** **Kalm.** **Kreos.** **Lac-ac.** **lac-c.** **lach.** **LED.** **Lith-be.** **lith-c.** **lith-sal.** **Lyc.** **lyss.** **mand.** **mang-act.** **Mang.** **meny.** **Merc.** **mez.** **moni.** **morg.** **Nat-m.** **Nat-s.** **nit-ac.** **nux-v.** **ph-ac.** **phos.** **Phyt.** **podo.** **Psor.** **Puls.** **pyrog.** **rad-br.** **ran-b.** **Rhod.** **Rhus-t.** **Ruta** **sabad.** **sabin.** **sal-ac.** **sang.** **Sars.** **Sep.** **SIL.** **spong.** **Stel.** **stict.** **streptoc.** **stront-c.** **sul-i.** **Sulph.** **syph.** **tarax.** **thuj.** **toxog.** **tub-r.** **tub.** **uncar-tom.** **urt-u.** **valer.** **ven-m.** **verat-v.** **verat.** **visc.**

## References



Radar 10



Encyclopedia Homoeopathica



Chapter 332. Osteoarthritis Harrison's Online



Chapter 44. Osteoarthritis CURRENT Rheumatology Diagnosis & Treatment



Chapter 91. Osteoarthritis The Color Atlas of Family Medicine



Degenerative & Crystal-Induced Arthritis CURRENT Medical Dx & Tx > Chapter 20. Musculoskeletal & Immunologic Disorders



Osteoarthritis Tintinalli's Emergency Medicine > Chapter 277. Shoulder Pain



Osteoarthritis Tintinalli's Emergency Medicine > Chapter 281. Acute Disorders of the Joints and Bursae



Degenerative Joint Disease Schwartz's Principles of Surgery > Chapter 44. Surgery of the Hand and Wrist



Medical Management CURRENT Diagnosis & Treatment in Orthopedics > Chapter 7. Adult Reconstructive Surgery



Osteoarthritis CURRENT Diagnosis & Treatment in Family Medicine, 3e > Chapter 23. Arthritis: Osteoarthritis, Gout, & Rheumatoid Arthritis



Prioritizing the Differential Diagnosis Symptom to Diagnosis: An Evidence-Based Guide, 2e > Chapter 23. I Have a Patient with Joint Pain. How Do I Determine the Cause?



Exercise 13-1. Degenerative Spine Disease Basic Radiology, 2e > Chapter 13. Imaging of the Spine



Osteoarthritis CURRENT Diagnosis & Treatment in Otolaryngology—Head & Neck Surgery, 3e > Chapter 26. Temporomandibular Disorders > Articular Disorders > Disc Displacement Disorders



Chapter 332 Osteoarthritis Harrison's Lecture Notes



Degenerative Joint Diseases Concise Pathology > Chapter 68. Diseases of Joints & Connective Tissue > Disorders of Joints



Bone, joint, and cutaneous disease Harrison's Online > Chapter 77. Biology of Obesity > Biology of Obesity: Introduction > Pathologic Consequences of Obesity



Imaging Studies CURRENT Diagnosis & Treatment in Family Medicine, 3e > Chapter 23. Arthritis:



Osteoarthritis (OA) CURRENT Diagnosis & Treatment: Surgery, 13e > Chapter 40. Orthopedic Surgery > Joints > Arthritis



Inflammatory versus Noninflammatory Arthritis CURRENT Rheumatology Diagnosis & Treatment > Chapter 4. Approach to the Patient with Arthritis > Types of Arthritis



Noninflammatory (Class I) CURRENT Diagnosis & Treatment Emergency Medicine, 7e > Chapter 21. Arthritis & Back Pain > Evaluation of the Patient with Acute Arthritis > Classification of Arthritis