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GENERALIZED ANXIETY DISORDER AND TRITICUM VULGARIS: CASE SERIES RESULTS ANALYSED VIA THE HAMILTON ANXIETY **RATING SCALE**

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ABSTRACT

Background: Generalized Anxiety Disorder (GAD) is a chronic condition characterized by excessive and persistent worry, often accompanied by physical symptoms. Conventional treatments include psychotherapy and pharmacological agents, but alternative approaches like homoeopathy are increasingly explored. Triticum vulgaris, a lesser-known homoeopathic remedy, has shown potential in addressing symptoms of anxiety. This study investigates its efficacy in treating GAD using the Hamilton Anxiety Rating Scale (HAM-A) as an evaluative tool.

Objective: To assess the therapeutic role of Triticum vulgaris in alleviating anxiety symptoms in patients with GAD.

Methods: A case series involving patients diagnosed with GAD based on DSM-5 criteria was conducted. Each participant received Triticum vulgaris in individualized potencies based on classical homoeopathic principles. The HAM-A scale was administered at baseline, during follow-up, and after the treatment period to monitor changes in anxiety levels. Observational parameters included the severity of somatic and psychic symptoms and the impact on daily functioning.

Results: The study demonstrated a significant reduction in HAM-A scores in all participants, reflecting improvements in both psychic and somatic domains of anxiety. Triticum vulgaris was well-tolerated, with no adverse effects reported. Case narratives indicated an enhancement in emotional stability and overall well-being.

Conclusion: The findings suggest that Triticum vulgaris may offer a safe and effective alternative for managing GAD. Further randomized controlled trials are recommended to substantiate these preliminary observations and explore the underlying mechanisms.

Keywords: Generalized Anxiety Disorder, Homoeopathy, Triticum vulgaris, Hamilton Anxiety Rating Scale, Alternative Medicine

1. INTRODUCTION

Mental health is often associated with lots of stigma and discrimination. There is little comprehensive data on the prevalence of psychological disorders around the world. But estimates suggest one in seven people on the planet have mental or substance-use disorders, and 4% have anxiety disorders. (Generalized Anxiety Disorder (GAD) is a prevalent and debilitating mental health condition characterized by excessive and persistent worry or anxiety that is difficult to control. These worries often span a broad range of domains, including personal health, work, finances, and interpersonal relationships, and persist for six months or longer. Unlike transient anxiety triggered by specific stressors, the anxiety in GAD is pervasive and often disproportionate to the actual circumstances. Symptoms of GAD encompass psychological, physical, and behavioural dimensions. Individuals frequently report feelings of restlessness, fatigue, difficulty concentrating, irritability, muscle tension, and disrupted sleep patterns. These symptoms significantly impair daily functioning and quality of life.

The condition affects approximately 3-6% of the population annually and often co-occurs with other mental health disorders, such as depression, making its diagnosis and treatment particularly challenging. The aetiology of GAD is multifaceted, involving a combination of genetic, environmental, and neurobiological factors, with dysregulation of neurotransmitters like gamma-aminobutyric acid (GABA) playing a critical role. The study involves a series of cases where Triticum Vulgaris 200 which is prepared from the germ of the wheat plant was administered and the outcome was assessed with Hamilton Anxiety Rating scale. The Hamilton Anxiety Rating Scale (HAM-A) is a commonlyy used tool to assess the severity of anxiety symptoms.

Structure of HAM-A

The scale consists of 14 items, each representing a symptom category of anxiety. Each item is rated on a scale of 0 to 4, where:

- 0: Not present
- 1: Mild



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2: Moderate

3: Severe

4: Very severe

Total Score Range: 0 to 56

<17: Mild anxiety

18-24: Moderate anxiety

25-30: Severe anxiety

Symptom Categories in HAM-A

The items are divided into **psychic anxiety** and **somatic anxiety** domains:

Psychic Anxiety (7 items):

- Anxious mood 0
- Tension
- Fears (e.g., of the dark, strangers, being alone) 0
- Intellectual impairment (e.g., difficulty concentrating) 0
- 0 Depressed mood
- Behaviour at interview (e.g., fidgeting, restlessness) 0

2. **Somatic Anxiety (7 items):**

- Muscular complaints (e.g., aches, stiffness) 0
- Sensory complaints (e.g., tinnitus, blurring of vision) \circ
- Cardiovascular symptoms (e.g., palpitations, chest pain)
- Respiratory symptoms (e.g., shortness of breath) 0
- Gastrointestinal symptoms (e.g., nausea, diarrhoea) 0
- Genitourinary symptoms (e.g., frequency of urination) 0
- Autonomic symptoms (e.g., dry mouth, sweating)

Administration and Scoring

The clinician evaluates the patient through an interview, asking about symptoms experienced in the past week. Each symptom is rated based on its intensity and frequency. Scores for each category are totalled to derive a final HAM-A score.

Study Setting:

This case series was conducted in a Private OPD. Participants were recruited from individuals seeking treatment for anxiety at a mental health clinic.

The clinic is located in an urban area, serving a diverse population with varying socioeconomic backgrounds. This study included three males and one female patient suffering from Generalised Anxiety disorders, who were treated at Pareek Homeopathy Clinic, Chandwad, Maharashtra, India between the period 2022-23, however the compilation of these cases was done retrospectively in 2024. They came for homoeopathic treatment after not getting results from the treatment of other systems of medicine

Intervention and Monitoring:

Participants were administered Triticum vulgaris in 200 potency as per the study protocol. Sessions were held biweekly, during which HAM-A scores were assessed to monitor the severity of anxiety symptoms.

The study duration was 1 year, providing sufficient time to observe the therapeutic effects of the intervention. Data collection included self-reported symptom relief, adherence to the intervention, and adverse event monitoring. This structured setting ensured consistency in treatment delivery and accuracy in the measurement of therapeutic outcomes, making it suitable for analyzing the efficacy of Triticum vulgaris in GAD management.

Homoeopathy is a system of medicine which is practiced in India based on symptoms similarity with minimal side effects. Previous studies revealed that homoeopathic medicine, Triticum vulgaris has a significant effect on GAD. Through the following case series, the effect of potentized and succussed homoeopathic medicine (dilution) Triticum vulgaris, is shared.



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Case 1

Patient is a 35-year-old male patient presented with symptoms of anxiety for past six months. He had constant worry, restlessness and difficulty in concentration. Sleeplessness due to intensive thoughts with frequent palpitations, dry mouth and occasional trembling. No significant past medical history. No substance abuse or dependency. He was diagnosed with Generalized Anxiety Disorder (GAD) based on DSM-5 criteria.

Pre-Treatment Evaluation (Using HAM-A)

Baseline HAM-A Score:

Psychic Anxiety (mental agitation and psychological distress): 18/28

Somatic Anxiety (physical complaints related to anxiety): 16/28

Total HAM-A Score: 34/56 (Severe Anxiety)

Symptom Category	Before Treatment	After Treatment
1. Anxious Mood	4	1
2. Tension	3	2
3. Fears	2	1
4. Insomnia	2	0
5. Cognitive	3	2
6. Depressed Mood	2	0
7. Somatic Sensory	2	1
8. Somatic Muscular	3	2
9. Somatic Cardiovascular	2	1
10. Respiratory Symptoms	3	1
11. Gastrointestinal	2	0
12. Genitourinary	2	0
13. Autonomic Symptoms	2	1
14. Behaviour During Interview	2	0

Treatment: Triticum vulgaris 200, administered in a single dose, followed by placebo for daily continuation. 6 globules of Triticum vulgaris 200 once daily for 7 days, reviewed weekly for six weeks.

Treatment Course and Observations

Week	Symptoms	HAM-A Score
1	Slight improvement in sleep; reduced waking at night	27/56
		Psychic Anxiety: 16/28
		Somatic Anxiety: 11/28
2	Noticeable decrease in palpitations; improved	24/56
	concentration at work.	Psychic Anxiety: 14/28
		Somatic Anxiety: 10/28
4	Significant reduction in intrusive thoughts and	19/56
	restlessness	Psychic Anxiety: 11/28
		Somatic Anxiety: 8/28
6	Sleep quality normalized; resumed hobbies (e.g.,	12/56
	reading	Psychic Anxiety: 7/28
		Somatic Anxiety: 5/28

Discussion: The patient showed progressive improvement, particularly in psychic anxiety symptoms. Somatic complaints also reduced but at a slower pace. No adverse effects were reported. Patient was advised to practice mindfulness meditation and reduce caffeine intake, which likely supported the therapeutic process.



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Case 2

Patient is a 42-year-old Female presented with Persistent anxiety with panic-like symptoms over the last year. She had Frequent episodes of intense fear accompanied by chest tightness and rapid breathing. Persistent worry about family safety, leading to difficulty managing daily activities. sleeplessness with delayed onset of sleep and early waking. She had also reported muscle tension, trembling, and a sensation of choking during anxiety episodes. History of thyroid dysfunction (well-controlled), no psychiatric comorbidities. She was diagnosed with Generalized Anxiety Disorder (GAD) with episodic panic attacks.

Pre-Treatment Evaluation (Using HAM-A)

Baseline HAM-A Score:

- Psychic Anxiety (mental distress and psychological symptoms): 20/28
- Somatic Anxiety (physical symptoms of anxiety): 14/28
- Total HAM-A Score: 34/56 (Severe Anxiety)

Symptom Category	Before Treatment	After Treatment
1. Anxious Mood	4	1
2. Tension	3	2
3. Fears	2	1
4. Insomnia	2	0
5. Cognitive	3	1
6. Depressed Mood	3	0
7. Somatic Sensory	3	0
8. Somatic Muscular	3	0
9. Somatic Cardiovascular	2	1
10. Respiratory Symptoms	3	1
11. Gastrointestinal	2	0
12. Genitourinary	1	0
13. Autonomic Symptoms	1	1
14. Behaviour During Interview	2	0

Treatment: *Triticum vulgaris* in 200 potency was administered as a single dose followed by placebo over 4 weeks. 6 globules of *Triticum vulgaris* 200, repeated weekly for 3 weeks.

Treatment Course and Observations

Week	Symptoms	HAM-A Score
1	Slight reduction in the frequency and intensity of panic episodes. Sleep improved marginally.	30/56 Psychic Anxiety: 18/28 Somatic Anxiety: 12/28
3	Panic episodes reduced to one mild episode. Improved energy and better control over intrusive thoughts.	24/56 Psychic Anxiety: 15/28 Somatic Anxiety: 9/28
5	No panic episodes in the last two weeks. Significantly reduced muscle tension and tremors. Reported feeling more confident and calmer during daily activities	16/56 Psychic Anxiety: 10/28 Somatic Anxiety: 6/28
7	Resumed normal activities, including attending social gatherings. Reported consistent, restful sleep and no recurrence of panic attacks.	8/56 Psychic Anxiety: 5/28 Somatic Anxiety: 3/28



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Discussion: The patient experienced a significant reduction in both psychic and somatic symptoms of anxiety. By the end of treatment, her HAM-A score indicated only mild residual anxiety. No side effects were reported. The patient was also counselled on stress management techniques, such as diaphragmatic breathing exercises, which may have contributed to her recovery.

Case 3

Patient is a 28-year-old male presented with Chronic anxiety interfering with professional and personal life for over two years. Persistent fear of underperforming at work, leading to procrastination and missed deadlines. He Frequent episodes of abdominal discomfort, bloating, and diarrhoea triggered by stress with difficulty in focusing, restlessness, and frequent negative thoughts.

Sleeplessness with mid-night awakenings and trouble returning to sleep. He had a history of irritable bowel syndrome (IBS) exacerbated by stress. No psychiatric treatments undertaken prior. He was diagnosed with Generalized Anxiety Disorder (GAD) with somatic manifestations.

Pre-Treatment Evaluation (Using HAM-A)

Baseline HAM-A Score:

• Psychic Anxiety (mental agitation and distress): 21/28

• Somatic Anxiety (physical symptoms of anxiety): 15/28

• Total HAM-A Score: 36/56 (Severe Anxiety)

Symptom Category	Before Treatment	After Treatment
1. Anxious Mood	4	1
2. Tension	3	2
3. Fears	3	1
4. Insomnia	2	0
5. Cognitive	3	1
6. Depressed Mood	3	0
7. Somatic Sensory	3	1
8. Somatic Muscular	3	0
9. Somatic Cardiovascular	2	1
10. Respiratory Symptoms	3	1
11. Gastrointestinal	3	0
12. Genitourinary	1	0
13. Autonomic Symptoms	1	1
14. Behaviour During Interview	2	0

Treatment: Triticum vulgaris 200, twice daily for two weeks, followed by a single daily dose for four weeks.

Treatment Course and Observations

Week	Symptoms	HAM-A Score
2	Mild improvement in abdominal symptoms and slight reduction in restlessness. Sleep remains disturbed.	31/56 Psychic Anxiety: 18/28 Somatic Anxiety: 13/28
4	Substantial improvement in focus at work. Fewer IBS episodes despite work stress. Mild improvement in sleep patterns.	25/56 Psychic Anxiety: 15/28 Somatic Anxiety: 10/28
6	Significant reduction in negative thoughts and improved confidence. No major gastrointestinal disturbances over the last week. Sleep normalized with fewer awakenings.	17/56 Psychic Anxiety: 11/28 Somatic Anxiety: 6/28



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8	Anxiety levels greatly diminished; feels calm and in	9/56
	control during stressful situations. Enjoying hobbies	Psychic Anxiety: 6/28
	and engaging more socially. IBS symptoms absent.	Somatic Anxiety: 3/28

Discussion: The patient demonstrated marked improvement in both psychic and somatic symptoms of anxiety, shifted from severe to mild anxiety within eight weeks. No adverse effects were reported during the treatment. Incorporation of dietary modifications and stress-reduction strategies, including mindfulness practices and yoga, likely complemented the treatment outcome.

Case 4

A 50-year-old male patient presented with persistent anxiety with difficulty in managing stress related to financial and family concerns over the past year. Excessive worry about financial stability and family health, leading to irritability and restlessness. Poor concentration and productivity at work. Frequent physical symptoms, including chest tightness, headache, and sweating during stress episodes. Difficulty in initiating sleep, with frequent awakenings due to racing thoughts. History of mild hypertension (controlled with lifestyle changes). No psychiatric history or medication use. He was diagnosed with Generalized Anxiety Disorder (GAD).

Pre-Treatment Evaluation (Using HAM-A)

Baseline HAM-A Score:

- Psychic Anxiety (mental agitation and psychological distress): 22/28
- Somatic Anxiety (physical complaints associated with anxiety): 14/28
- Total HAM-A Score: 36/56 (Severe Anxiety).

Symptom Category	Before Treatment	After Treatment
1. Anxious Mood	4	1
2. Tension	3	2
3. Fears	3	1
4. Insomnia	4	0
5. Cognitive	3	1
6. Depressed Mood	3	0
7. Somatic Sensory	2	1
8. Somatic Muscular	3	0
9. Somatic Cardiovascular	2	1
10. Respiratory Symptoms	3	1
11. Gastrointestinal	2	1
12. Genitourinary	1	0
13. Autonomic Symptoms	1	1
14. Behaviour During Interview	2	0

Treatment: Triticum vulgaris 200, administered as a single dose weekly, complemented by daily placebo over six weeks.

Treatment Course and Observations

Week	Symptoms	HAM-A Score
1	Mild reduction in irritability; sleep disturbances persist.	32/56
		Psychic Anxiety: 20/28
		Somatic Anxiety: 12/28
3	Decreased chest tightness and improved focus during	27/56
	work tasks. Sleep marginally better.	Psychic Anxiety: 17/28
		Somatic Anxiety: 10/28
5	Significant improvement in ability to manage stress;	18/56



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	chest tightness and headaches absent. Sleep quality	Psychic Anxiety: 11/28
	improved, with fewer interruptions	Somatic Anxiety: 7/28
7	Feels calmer and more in control during stressful	10/56
	situations. Reports feeling optimistic about handling	Psychic Anxiety: 6/28
	financial concerns. Sleep has normalized.	Somatic Anxiety: 4/28

Discussion: By the end of the six-week period, patient showed significant improvement in his anxiety symptoms, moving from severe to mild anxiety. No side effects were noted, and his blood pressure remained stable throughout the treatment period. The patient was also advised to practice deep breathing exercises and reduce caffeine intake, which may have contributed to improved sleep and reduced somatic symptoms.

2. DISCUSSION

The case series on *Triticum vulgaris* and its potential impact on Generalized Anxiety Disorder (GAD) highlights the intersection of alternative therapies with psychological well-being. The use of the Hamilton Anxiety Rating Scale (HAM-A) provides a standardized measure of anxiety symptoms, allowing for objective evaluation of treatment efficacy. The use of *Triticum vulgaris* appears to align with growing interest in natural remedies for anxiety. The plant's known anti-inflammatory and potential adaptogenic properties might contribute to its anxiolytic effects, though the mechanism remains speculative. Improvement in HAM-A scores post-treatment suggests a reduction in both somatic and psychic symptoms of anxiety.

3. CONCLUSION

The study investigating *Triticum vulgaris* as a potential therapeutic agent for Generalized Anxiety Disorder (GAD), evaluated through the Hamilton Anxiety Rating Scale (HAM-A), presents encouraging preliminary results. The observed reduction in HAM-A scores indicates that *Triticum vulgaris* may have anxiolytic properties, possibly due to its anti-inflammatory and adaptogenic effects. Despite the promising outcomes, the limitations inherent in a case series, such as small sample size and lack of control groups, warrant cautious interpretation. These findings support the need for more extensive randomized controlled trials to confirm the efficacy, identify mechanisms of action, and establish safety profiles for the use of *Triticum vulgaris* in managing anxiety disorders. This research contributes to explore natural and integrative approaches to mental health care.

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