

Homeopathic Management of Hypothyroidism with Platina – A Case Report

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Abstract

Hypothyroidism is a long-term condition that happens when the thyroid gland doesn't produce enough hormones. This leads to various metabolic, physical, and psychological issues. Conventional treatment usually focuses on lifelong hormone replacement. While this may normalize lab results, it often overlooks the psychological aspects of the condition. Homeopathy takes a more holistic approach, treating the patient as a whole to restore health. This report outlines the homeopathic treatment of a 30-year-old woman with hypothyroidism. She experienced fatigue, weight gain, constipation, hair loss, cold sensitivity, and psychological symptoms like wounded pride, sensitivity to disagreement, and humiliating dreams. After a thorough assessment of her mental and physical health, *Platina* was chosen as the constitutional remedy. Over about 15 months, her condition improved significantly, both in subjective symptoms and objective lab tests. Repeat thyroid function tests showed a steady decrease in thyroid-stimulating hormone (TSH) levels, leading to normal thyroid function without conventional hormone therapy. This case demonstrates the value of personalized homeopathic treatment for hypothyroidism and highlights the mind-body connection in chronic endocrine disorders.

Keywords: Hypothyroidism, Homeopathy, *Platina*, Constitutional prescribing, Thyroid function tests, Mind-body relationship, Case report.

Introduction

Hypothyroidism is a chronic endocrine disorder caused by inadequate thyroid hormone production. This results in decreased metabolic activity across the body. The lack of thyroxine (T4) and triiodothyronine (T3) impacts various organ systems, leading to a range of symptoms. Common issues include persistent fatigue, weight gain, constipation, excessive hair loss, cold intolerance, and reduced physical and mental energy. Patients also often report psychological problems like depression and low motivation, showing how thyroid function closely relates to mental health.

Treatment for hypothyroidism mainly relies on lifelong hormone replacement therapy. This effectively corrects biochemical imbalances and prevents complications. However, it largely focuses on lab values and symptoms, often ignoring the individual's mental health, emotional conflicts, and psychological factors contributing to the illness. As a result, many patients report ongoing problems and decreased quality of life.

Homeopathy, which emphasizes individual care, considers both the mental and physical aspects of a patient as interconnected. It views illness as a disturbance in the vital force and works to restore balance at a constitutional level. The remedy choice is

based on the full range of symptoms, particularly mental and emotional ones. This case showcases how *Platina*, chosen according to a comprehensive constitutional analysis, contributed to improved thyroid function and overall health in a patient with hypothyroidism.

Case History

Patient Identification: Mrs. SS, 30-year-old female, farmer by occupation, weighing 67 kg.

Chief Complaints

- * Physical weakness for the last year: She reported fatigue, weakness, and tiredness that did not improve with rest. She felt drained during farm work and house chores.
- * Weight gain (about 9 kg) in the past year despite unchanged eating habits.
- * Constipation with hard stools: Stools passed every 2-3 days; hard and dry; requiring straining with unsatisfactory relief; ongoing for eight months.
- * Excessive hair loss for six months: 100-150 hairs daily when combing or washing, with thinning on top.
- * Cold intolerance: She preferred warmth and could not tolerate cold exposure

Life Space / Life History

The patient came from a humble rural background and lived in a joint family with agricultural and household responsibilities. She was dependable, organized, and proud, holding strong feelings of self-worth. She believed others undervalued her efforts, often expressing that "people do not understand my worth." She was highly sensitive to disagreement, easily hurt, and tended to internalize her feelings.

At times, she experienced dreams involving humiliation and insult. She exhibited a mix of dignity and vulnerability, reflecting the mental state associated with Platina.

Physical Generals and Particulars

- Diet: Mixed
- Appetite: Low
- Craving: Sweets
- Thermal Reaction: Chilly
- Sleep: Disturbed; dreams of insults and wounded pride
- Menstrual History: Regular cycles
- Past History: No major illnesses
- Family History: Non-contributory
- Diagnosis: Confirmed hypothyroidism (TSH = 23.48 mIU/L on July 15, 2024).

THYROID FUNCTION TEST (TFT)			
Investigation	Result	Unit	Bio. Ref. Interval
T3 (Total)	122.7	ng/dL	80 - 200
T4 (Total)	7.52	µg/dL	4.5 - 14.5
TSH (Ultrasensitive)	4.300	µIU/mL	0.35 - 5.50

Method:
Chemiluminescence Immunoassay (CLIA)

Test Interpretation:

TSH	T3, Total	T4, Total	Interpretation
High	Normal	Normal	Mild/Subclinical hypothyroidism
High	Low or Normal	Low	hypothyroidism
Low	Normal	Normal	Mild/Subclinical Hyperthyroidism
Low	High or Normal	High or Normal	Hyperthyroidism
Low	Low or Normal	Low or Normal	Non-thyroidal illness, rare pituitary (secondary) hypothyroidism

END OF REPORT
The reports are personally validated, authorised & signed digitally using LIMS

Figure 2 : After

Repertorial Totality and Remedy Justification^{1,2}

The totality of symptoms was derived using Kent's and Boenninghausen's repertories.

The following rubrics were considered:

- Mind – Pride – haughty
- Mind – Sensitive to contradiction
- Mind – Offended easily
- Mind – Dreams of humiliation and insults
- Generalities – Weakness – chronic
- Generalities – Obesity – in spite of normal diet
- Stool – Constipation – hard, difficult
- Hair – Falling
- Sleep – Disturbed, dreams of insults
- Generalities – Chilly patient

On repertorization, *Platina* ranked highest, covering both the mental and physical generals comprehensively. The prominent mental picture of pride, suppressed ego, and wounded dignity coupled with sluggish bowels, obesity, and cold intolerance further confirmed *Platina* as the similimum.

Homeopathic Interpretation^{3,4,5,6}

This case shows a mix of psoric and sycotic factors. The psoric aspect indicated sensitivity and irritability, while the sycotic part reflected chronic sluggishness, hormonal issues, and weight gain tendencies.

The patient had an average to high level of susceptibility and responded promptly to the remedy, with continued improvements over months. As Hahnemann noted in his work, "The physician's art regarding cure is to perceive what is curable in disease and know what is curative in medicine." Understanding both mental and physical aspects clarified the choice of remedy.

Test Name	Result	Unit	Bio. Ref. Range
Thyroid Profile Total Screen			
T3 Total	1.67	ng/mL	0.8-2.0
T4 Total	6.64	µg/dL	5.1-14.1
TSH (Thyroid Stimulating Hormone)	23.480	µIU/mL	0.27-4.20

Interpretation:

TSH	T3	T4	Interpretation
High	Normal	Normal	Subclinical Hypothyroidism
Low	Normal	Normal	Subclinical Hypothyroidism
High	High	High	Secondary Hypothyroidism
Low	High/Normal	High/Normal	Hyperthyroidism
Low	Low/Normal	Low/Normal	Non-Thyroidal Illness

Reference Range - Pregnancy:

	TSH	T3	T4
1st Trimester	0.30-4.00	0.81-1.8	0.9-17.8
2nd Trimester	0.50-4.00	1.0-2.4	0.9-12.5
3rd Trimester	0.80-5.70	1.0-2.6	0.6-12.3

Reference Range - Age Related:

Age	TSH	T3	T4
0-1 (Less than 1yr)	1.0 - 17.4	0.15 - 0.75	2.4 - 13.0
2days - 4days	1.0 - 39.0	1.0 - 7.4	14.3 - 38.4
2weeks - 20weeks	1.7 - 8.1	1.05 - 7.40	7.5 - 15.7
3months - 24months	0.8 - 4.2	1.05 - 6.60	7.2 - 15.7
2yrs - 7yrs	0.7 - 5.7	0.94 - 6.41	6.0 - 14.2
8yrs - 21yrs	0.7 - 5.7	0.8 - 2.0	4.7 - 12.4
Adults (>21yrs)	0.35 - 4.94	0.88 - 1.99	4.87 - 11.77

TSH levels are affected by circadian rhythm, rising several hours before the onset of sleep, reaching peak levels between 11 pm and 8 am. T4 and T3 concentrations are observed during the afternoon. Diurnal variation in TSH levels is approx 50% +/-, hence time of the day can influence the measured serum concentration.

*** End Of Report ***

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Figure 1 : Before

The choice of *Platina* 30CH was based on moderate symptoms combining mental and physical issues. This aligns with Hahnemann's guidance on dosage repetition. Improvements followed Hahnemann's described pattern, moving from mental calmness to physical normalization.

Treatment Timeline and Clinical Observations

Date	Clinical Observation	Remedy/Plan	TSH (mIU/L)
24 Jul 2024	First visit. Fatigue, weight gain, constipation, prideful temperament.	<i>Platina</i> 30CH prescribed.	23.48
31 Jul 2024	Energy improved; bowels better; weight unchanged.	Placebo.	15.64
4 Dec 2024	Constipation reduced; sleep improved; emotionally calmer.	<i>Platina</i> 30CH repeated.	11.8
5 Apr 2025	Hair fall reduced; vitality increased; fatigue markedly less.	Placebo.	4.33
22 Oct 2025	Stable energy, no hair fall, normal bowels, good sleep. Latest TFT: T3 – 122.7 ng/dL, T4 – 7.52 µg/dL, TSH – 4.30 mIU/mL (Euthyroid).	Placebo. continued observation	4.30

Discussion

The connection between mind and body, emphasized by Hahnemann, is clear in this case. The patient's emotional struggles, particularly wounded pride and hidden resentment, likely contributed to her thyroid issues. Administering *Platina*, based on the complete range of symptoms, not only improved her emotional health but also restored hormonal balance.

By October 2025, her thyroid function tests confirmed complete recovery. As Hahnemann noted, the key, distinctive symptoms guide remedy selection—illustrated in this case by the patient's unique mental symptoms.

This case highlights the effectiveness of tailored homeopathic care in chronic conditions and reinforces the principle that balancing the vital force leads to natural physiological equilibrium.

The results demonstrate how individualized homeopathic treatment can effectively manage hypothyroidism, showing the significance of constitutional prescribing based on comprehensive mental and physical symptoms. Choosing *Platina*, guided by key mental characteristics such as wounded pride, sensitivity, and emotional suppression, led not only to symptom relief but also to normalization of thyroid function.

Conclusion

Conclusion for my article This case shows how emotional stress and suppressed feelings can affect physical health. After selecting the Homeopathic remedy *Platina* based on the patient's mental and physical symptoms, both her emotional condition and thyroid function improved. It emphasizes that individualized homeopathic treatment and proper case taking can help restore overall balance in chronic conditions like hypothyroidism.

Conflict of Interest

The authors declare no conflict of interest.

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References

- Boericke W. Pocket Manual of Homoeopathic Materia Medica. New Delhi: B. Jain Publishers.
- Kent J.T. Repertory of the Homoeopathic Materia Medica. New Delhi: B. Jain Publishers.
- Allen H.C. Keynotes and Characteristics with Comparisons of Some of the Leading Remedies of the Materia Medica. Philadelphia: Boericke & Tafel.
- Hahnemann S. Organon of Medicine. 6th ed. New Delhi: B. Jain Publishers.
- Clarke J.H. A Dictionary of Practical Materia Medica. London: Homoeopathic Publishing Co.
- Sankaran R. The Soul of Remedies. Mumbai: Homoeopathic Medical Publishers.