Blatta Orientails

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Blatta Orientails

Abstract

Blatta orientails is the scientific name for the common cockroach in India. As per the specifications given in the homoeopathic literature, the live insect is used to prepare its homoeopathic medicine. The medicine is used to relieve complaints of the patients suffering from asthma. It is reported to be suited to the corpulent people and also useful in bronchitis where there is much dyspnoea. A total number of 6184 patients participated in this multicentric clinical study at various Institutes/units under Central Council for Research in Homoeopathy to confirm the use of Blatta Orientails as mentioned in homoeopathic Materia medica with the objective of evolving its clinical drug picture. The study not only confirms its therapeutic use in cough, dyspnoea, asthmatic conditions, etc. as mentioned in various homoeopathic literature, but also has delineated characteristics which would help in differentiating Blatta orientails from other similar remedies. Besides, a set of new symptoms were also observed during the study which indicates that had the provings of this medicine been extensive, these symptoms could have been generated.

Authors


This original article is available in Indian Journal of Research in Homoeopathy: https://www.ijrh.org/journal/vol2/iss2/6
Blatta orientalis


Abstract

Blatta orientalis is the scientific name for the common cockroach in India. As per the specifications given in the homoeopathic literature, the live insect is used to prepare its homoeopathic medicine. The medicine is used to relieve complaints of the patients suffering from asthma. It is reported to be suited to the corpulent people and also useful in bronchitis where there is much dyspnoea.

A total number of 6184 patients participated in this multicentric clinical study at various Institutes / Units under Central Council for Research in Homoeopathy to confirm the use of Blatta orientalis as mentioned in homoeopathic Materia Medica with the objective of evolving its clinical drug picture.

The study not only confirms its therapeutic use in cough, dyspnoea, asthmatic conditions, etc. as mentioned in various homoeopathic literature, but also has delineated characteristics which would help in differentiating Blatta orientalis from other similar remedies. Besides, a set of new symptoms were also observed during the study which indicates that had the provings of this medicine been extensive, these symptoms could have been generated.

Keywords: homoeopathy; clinical verification; blatta orientalis; indian cockroach

Introduction

The clinical verification and confirmation of signs and symptoms, irrespective of disease observed during proving of a drug substance is essential for validation of drug pathogenesis and its therapeutic application. At times clinical application of a drug on the basis of symptoms elicited during proving may also produce clinical symptoms, expanding the horizon of therapeutic potential of a drug.

Cockroach allergy has been recognized as an important cause of asthma for over 30 years. In 1964, Burmont and Brown1 were the first to report positive skin test responses to cockroach allergen.

Cockroaches have been reported to be associated with asthma in many regions of the world, including Taiwan, Japan, Thailand, and Singapore in the Pacific Rim; Costa Rica and Puerto Rico in Central America; India; South Africa; and parts of Europe1.

Many studies have demonstrated this association, including some that have found that existence of cockroaches at homes is one of the strongest risk factors for developing allergic tendency and eventually, asthma morbidity in children2.

The primary reservoir for cockroach allergen is secretions, feces and body parts of the cockroaches. Secondary reservoir is dust. Cockroaches have long been considered to carry infectious diseases3.
Keeping cockroach as the source of allergen, immunotherapy with cockroach extract has been reported to lead to changes in immunologic and clinical parameters but with poor beneficial result. However, in homoeopathy it has been used since more than a century in treating cases of asthma and other respiratory complaints. Discovery of its therapeutic effect was accidental. Though it lacks systematic and thorough proving, its clinical use is based on the observations from various case records.

In the light of above circumstances, the Council undertook the study of this medicine through an open, multicentric trial, under its Clinical Verification Programme. The study aimed at validating the data, which is only scantily available in the present literature.

**Description of the animal**

The Zoological name for Indian cockroach is *Blatta orientalis* Linn. and the family is Orthoptera. The vernacular names for the insect are:

1. Hindi – Tail – Chatta
2. In English – Cockroach

*Blatta orientalis* is found abundantly in dwellings, houses and damp moisture corners all over India. This insect has an elongated oval, rather flat body, from 12 to 16 lines in length, of a red or brown-red colour, which becomes paler under belly. The prothorax is smooth, shining, with two large brown spots. In the male, the elytra reach beyond the belly by a few lines. In the females, they are little shorter. The wings are striate and reticulate, of the length of elytra. The antennae, which are longer than the body, exhibit at their base a small yellowish point. The feet are provided with black prickles and terminate in tarsus with five articulations. In *Blatta orientalis* the dorsoplural line of the abdomen is contained in the narrow, unfolded lateral membrane uniting the paratrigites and the large ventral plates. In the male cockroach the ventral plate of the ninth segment bears a pair of the style. Genital segments of the female are almost entirely concealed within the seven segments.

In Homoeopathy, whole live insect is used as raw material for preparation of mother tincture.

**Methodology**

*Locations of study*

- Homoeopathic Drug Research Institute, Lucknow (U.P.)
- Regional Research Institute (H), New Delhi
- Homoeopathic Research Institute, Jaipur, (Rajasthan)
- Clinical Research Unit, Jammu (J & K)
- Clinical Research Unit, Ghaziabad (U.P.)
- Clinical Verification Unit, Patna (Bihar)
- Clinical Verification Unit, Vrindaban (U.P.)

Patients for the study were drawn from the OPD: of respective Institutes / Units of the Council. The signs symptoms for *Blatta orientalis* were taken from available literature. The medicine was procured from licensee pharmacy in various potencies viz. Q, 3x, 6C, 30C and 200C. *Blatta orientalis* was prescribed, guided by the presenting signs/symptoms to 6184 patients during the period April 1979 to March 2004, of which 3407 were males and 2777 females. Their presenting symptoms and signs were recorded in the predefined case recording proforma. The medicine, which matched the symptom: of patient, was prescribed in mother tincture and any change in presenting symptoms and signs was recorded during the follow-up visits. If there was no change in symptoms and signs for significant period (according to the nature of disease), next higher potencies like 3x 6C, 30C and 200C were prescribed and in case no appreciable change was noted, the prescription was shifted to the second best indicated medicine.

**Results**

The data of all the cases were collected, analysed and compiled. A list of clinically verified symptoms is presented below. The symptoms superscripted with figures ‘7’ and ‘8’ are in conformity with the corresponding literature mentioned under bibliography and the remaining symptoms were found relieved wholly or partially during the study and emerged as *clinica symptoms*, not mentioned in earlier literature of *Blatta orientalis*.

**Clinically verified symptoms observed during the study**

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthmatic attack</td>
<td>(44, 32)</td>
</tr>
<tr>
<td>Bronchitis with breathlessness and severe cough, dyspnoea and profuse, pus like expectoration</td>
<td>(74, 69)</td>
</tr>
<tr>
<td>Difficulty in breathing with suffocative feeling</td>
<td>(1557, 1112)</td>
</tr>
<tr>
<td>in corpulent persons</td>
<td>(650, 430)</td>
</tr>
<tr>
<td>worse in rainy weather</td>
<td>(70, 70)</td>
</tr>
<tr>
<td>Cough in stout and corpulent patients</td>
<td>(187, 121)</td>
</tr>
<tr>
<td>Cough with difficulty in breathing</td>
<td>(17, 17)</td>
</tr>
<tr>
<td>Cough with expectoration</td>
<td>(1322, 913)</td>
</tr>
<tr>
<td>mucoid</td>
<td>(1141, 938)</td>
</tr>
<tr>
<td>in corpulent persons</td>
<td>(8, 6)</td>
</tr>
<tr>
<td>Accumulation of mucus in chest with feeling of suffocation</td>
<td>(154, 113)</td>
</tr>
<tr>
<td></td>
<td>(40, 31)</td>
</tr>
</tbody>
</table>
Following symptoms or part of symptoms are the additional symptoms either relieved fully or partially and emerged as clinical symptoms not mentioned in earlier literature.

<table>
<thead>
<tr>
<th>Part of Body</th>
<th>Symptom Description</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head</td>
<td>Pain in forehead</td>
<td>(8, 8)</td>
</tr>
<tr>
<td>Nose</td>
<td>Coryza, thin, nasal discharge with sneezing and coughing worse in morning</td>
<td>(118, 112)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(27, 26)</td>
</tr>
<tr>
<td>Throat</td>
<td>Pain in throat while coughing</td>
<td>(2, 2)</td>
</tr>
<tr>
<td>Stomach</td>
<td>Loss of appetite</td>
<td>(18, 17)</td>
</tr>
<tr>
<td>Abdomen</td>
<td>Flatulence worse at night</td>
<td>(25, 19)</td>
</tr>
<tr>
<td>Rectum</td>
<td>Constipation</td>
<td>(51, 48)</td>
</tr>
<tr>
<td></td>
<td>dry, hard stool</td>
<td>(29, 26)</td>
</tr>
<tr>
<td>Bladder</td>
<td>Frequent urination with backache</td>
<td>(19, 7)</td>
</tr>
<tr>
<td>Respiration</td>
<td>Breathlessness worse in morning</td>
<td>(50, 22)</td>
</tr>
<tr>
<td></td>
<td>Asthma worse bending forward</td>
<td>(10, 8)</td>
</tr>
<tr>
<td></td>
<td>worse from cold</td>
<td>(10, 8)</td>
</tr>
<tr>
<td></td>
<td>Asthma worse in morning</td>
<td>(20, 12)</td>
</tr>
<tr>
<td></td>
<td>Dyspnoea worse ascending stairs</td>
<td>(14, 12)</td>
</tr>
<tr>
<td></td>
<td>worse from change of weather</td>
<td>(5, 4)</td>
</tr>
<tr>
<td></td>
<td>Dyspnoea worse in morning worse at night</td>
<td>(438, 306)</td>
</tr>
<tr>
<td></td>
<td>worse on exertion</td>
<td>(326, 274)</td>
</tr>
<tr>
<td></td>
<td>worse in humid weather</td>
<td>(78, 54)</td>
</tr>
<tr>
<td></td>
<td>Dyspnoea better in knee chest position</td>
<td>(39, 31)</td>
</tr>
<tr>
<td></td>
<td>Dyspnoea better by warmth</td>
<td>(235, 135)</td>
</tr>
<tr>
<td></td>
<td>with excessive sweating</td>
<td>(273, 244)</td>
</tr>
<tr>
<td></td>
<td>with pale sputum</td>
<td>(5, 5)</td>
</tr>
<tr>
<td></td>
<td>with wheezing</td>
<td>(4, 4)</td>
</tr>
<tr>
<td></td>
<td>with excessive flatulence</td>
<td>(7, 6)</td>
</tr>
<tr>
<td></td>
<td>Cough with wheezing, rattling and vomiting</td>
<td>(19, 18)</td>
</tr>
<tr>
<td></td>
<td>Cough with sneezing</td>
<td>(127, 10)</td>
</tr>
<tr>
<td></td>
<td>worse in morning</td>
<td>(173, 100)</td>
</tr>
<tr>
<td></td>
<td>Cough with difficult expectoration</td>
<td>(27, 26)</td>
</tr>
<tr>
<td></td>
<td>Cough with thin, watery, whitish expectoration</td>
<td>(173,100)</td>
</tr>
<tr>
<td></td>
<td>Cough worse in morning with profuse expectoration</td>
<td>(2, 2)</td>
</tr>
<tr>
<td></td>
<td>with rattling in chest</td>
<td>(151, 110)</td>
</tr>
<tr>
<td></td>
<td>Cough with difficulty to raise sputum with pain in chest</td>
<td>(62, 39)</td>
</tr>
<tr>
<td></td>
<td>with pain in chest</td>
<td>(67, 30)</td>
</tr>
<tr>
<td></td>
<td>Cough with blockage of nose with coryza</td>
<td>(6, 6)</td>
</tr>
<tr>
<td></td>
<td>with fever</td>
<td>(8, 8)</td>
</tr>
<tr>
<td></td>
<td>Cough with pain in right side of chest stitching pain</td>
<td>(4, 4)</td>
</tr>
<tr>
<td></td>
<td>Dry cough worse at night</td>
<td>(5, 5)</td>
</tr>
<tr>
<td></td>
<td>worsening in morning</td>
<td>(30, 30)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(2, 2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(234, 135)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(88, 70)</td>
</tr>
</tbody>
</table>

N.B. in the parenthesis, the first figure denotes the number of cases the medicine was prescribed on the basis of the symptom and the second figure denotes the number of cases who got relief of the symptom.
Cough paroxysmal
worse at night
Cough with purulent expectoration
worse in morning
worse from cold
worse from change of season
worse after exertion
worse taking sour things
worse on walking
worse in winter, cold
better by bending forward
better lying down and rest
difficult to expectorate
Cough with rattling in chest
with increased sweat
with congestion in chest
Cough with difficulty in breathing
worse at night
worse on exertion
worse on inspiration
with thick yellow expectoration
with thick white expectoration
Cough with thick expectoration
yellowish expectoration
whitish expectoration
worse at night
Hawking cough

(442, 322)
(228, 171)
(126, 115)
(110, 71)
(22, 16)
(5, 4)
(109, 77)
(3, 2)
(12, 10)
(9, 8)
(7, 6)
(4, 4)
(41, 26)
(145, 125)
(1, 1)
(5, 5)
(325, 221)
(118, 91)
(959, 611)
(467, 268)
(89, 37)
(448, 327)
(654, 464)
(672, 438)
(405, 268)
(13, 10)

Discussion

The medicine was prescribed to 1557 patients suffering from difficulty in breathing, out of which 1112 cases (71%) were improved in various degrees. Among the verified modalities, morning aggravation (430 out of 650) was more prominent.

It was found that most of the patients who improved with Blatta orientalis were worse in rainy season (65%) and humid weather (75%).

Improvement of dyspnea among the corpulent patients was observed. Similarly, the cough in corpulent patients was also improved; out of 154 patients 113 got relief (73%).

The nature of expectoration observed in patients relieved with Blatta orientalis was thick (320 out of 448), purulent (115 out of 126), yellowish (464 out of 654) and thick white (438 out of 672).

Patients suffering from bronchitis like symptoms i.e. cough, dyspnoea and profuse pus like expectoration were also relieved by this medicine. Out of 74 patients, 69 were relieved of these complaints (93%).

Rattling and wheezing in chest were relieved in 125 out of 145 patients (86%), to whom this medicine was prescribed.

It was also useful in paroxysmal cough, worse at night. Moreover, symptoms of dry cough agg. at night were relieved with this medicine (70 out of 88 i.e. 79.5%). Difficulty in breathing in the patients was more inspiratory in nature and 611 out of 959 cases were relieved with the medicine. ’Dyspnoea worse at night‘ and ‘Dyspnoea worse on exertion‘ was relieved in 68% and 77% respectively.

In the complaints of gastrointestinal tract, the medicine was found to relieve constipation with dry, hard stool, in 16 out of 29 patients (90%).

Besides this, the medicine was also found useful in patients suffering from headache, blockage of nose, anorexia, flatulence, frequent urination with backache, pain in throat while coughing, cough with congestion in chest and hawking cough.
It was evident from the study that the sphere of action of _Blatta orientalis_ was more marked on respiratory system. Difficulty in breathing with or without cough, asthma, various types of productive cough, suffocative feeling in chest, etc. were relieved by this medicine, in comparison to its action on gastrointestinal tract or other organs.

This study extends the horizon of usefulness of _Blatta orientalis_ in relieving the additional modalities and concomitants associated with various symptoms which were also noted during study. Further clinical trials with suitable study design and scientific parameters are needed to validate and enhance the usefulness of this medicine.

**Repertory**

A concise repertory of the verified symptoms, according to Jost Kunzli Von Fimmelsberg Kent's Repertorium Generale has been compiled and presented for the purpose of quick reference. Rubrics / sub rubrics in italics are new rubrics / sub-rubrics i.e. not mentioned in the above referred repertory, while rubrics / sub rubrics in normal roman letters are existing in the said repertory. Physicians may include these rubrics in their personal repertoires for their day to day reference in practice and feedback may be given to CCRH for reconfirmation of symptoms, so that grading of various symptoms of the medicine can be carried out at a later stage by the Council.

**HEAD**

PAIN

Forehead

**NOSE**

CORYZA

morning

cough, with

discharge, with

DISCHARGE

THIN

OBSTRUCTION

cough, with

SNEEZING

morning

**THROAT**

PAIN

coughing, on

**STOMACH**

APPETITE

wanting

VOMITING, coughing on

**ABDOMEN**

FLATULENCE

night

**RECTUM**

CONSTIPATION

**STOOL**

DRY

HARD

**BLADDER**

URINATION

frequent

_backache, with_

**RESPIRATION**

ASTHMATIC

morning

night

_bending forward_

cold, agg.

**DIFFICULT**

morning

night

ascending, _stairs_

_change of weather_

corpulent persons, in_

cough, with

_exertion, from_

flatulence, with_

humid weather

_lying, on knees and elbows amel._

_mucus in chest, from_

_perspiration, with_

_wet weather_

_warmth, amel._

**SUFFOCATIVE** (see Difficult)

WHEEZING

**COUGH**

MORNING

NIGHT

ASTHMATIC

BENDING, forward amel.

BREATHING, difficulty, with

BRONCHIAL

COLD

CONGESTION, in chest with

CORPULENT, people

DIFFICULT, with pain in chest

**DRY**

morning

night
EXERSION
FEVER, during
HAWKING
INCREASED SWEAT, with
INSPIRATION during
LYING, amel.
MUCUS, chest, in
PAROXYSMAL
night
dyspnoea, followed by
RATTLING with
REST, amel
SEVERE
SNEEZING, with
SOUR food
WINTER in
WALKING while
WEATHER, change of
WHEEZING (see asthmatic)

EXPECTORATION
DIFFICULT
morning
corpulent people, in
MUCOUS
PALE
PROFUSE
PURULENT
THICK
THIN
YELLOW
WHITE
WATERY

CHEST
INFLAMMATION, bronchial tubes of
PAIN
sides
right
cough, during
STITCHING
morning
night
coughing

Conclusion

The study reveals that the symptoms of Blatta orientalis, as available in literature, have been reasonably verified to be correct and the additional symptoms which are not available in literature have also emerged as important clinical symptoms. Hence, there is a scope to conduct further studies on this medicine, so that the symptoms, especially the additional ones, can be verified again, paving the way for obtaining additional characteristics of Blatta orientalis.

Acknowledgements

- Dr. V.T. Augustine, Dr. D.P. Rastogi, Dr. S.P. Singh, former Directors of CCRH; Dr. R. Shaw, former Deputy Director, CCRH for supervising the study.
- Dr. V.M. Nagpaul, former Deputy Director, Dr. K. Krishna Singh, former Assistant Director, Dr. A. Khurana, Assistant Director, Dr. A. Kumar Vichitra, Research Officer, CCRH, for co-ordinating and monitoring the study.
- Dr. Debadatta Nayak, Senior Research Fellow, CCRH for preparing the article.

References