

Psychological Factors Affecting Gastro-Respiratory Symptoms in Childhood: A Homoeopathic Case of Fear-Triggered Vomiting and Dry Cough

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ABSTRACT

Psychosomatic illness in children frequently manifests as physical symptoms that are closely associated with emotional stress. Adverse emotional experiences can activate autonomic pathways, resulting in functional disturbances such as nausea, cough, and vomiting in the absence of organic pathology. Recognition of this mind–body interaction is essential for accurate diagnosis and for planning individualized homoeopathic management. In the present case, characteristic symptom analysis led to the selection of *Cuprum metallicum*, following which marked relief was observed in gastric symptoms, supporting the role of individualized homoeopathic intervention in psychosomatic presentations.

Keywords: Psychogenic vomiting, Functional vomiting, Paediatric psychosomatic illness, Fear-induced vomiting, post-prandial vomiting, Dry cough, *Cuprum metallicum*.

AIM

To evaluate the role of individualized homoeopathic management in a case of fright-induced psychosomatic vomiting associated with dry cough in a child.

OBJECTIVES

1. To study the clinical presentation of fear-related psychosomatic vomiting with associated dry cough in childhood.
2. To analyze the case based on DSM-5-TR concepts of psychological factors affecting physical symptoms.
3. To evaluate the totality of symptoms using homoeopathic case-taking principles and repertorization.
4. To assess the therapeutic effectiveness of *Cuprum metallicum* in managing spasmodic cough with reflex vomiting triggered by emotional stress.
5. To observe changes in physical and emotional symptoms during follow-up and document clinical outcomes.

MATERIALS AND METHODS

Study Design

Single case report.

STUDY SETTING

Department of Psychiatry, Hamsa Homoeopathy Medical College Hospital & Research Centre, Siddipet District, Telangana State, India, under Kaloji Narayana Rao University of Health Sciences, Warangal.

STUDY SUBJECT

A 10-year-old male child presenting with recurrent post-prandial vomiting associated with dry cough, temporally related to episodes of fright and punishment.

INCLUSION CRITERIA

- Child presenting with recurrent vomiting without identifiable organic pathology.
- Symptoms clearly associated with emotional stress or fright.
- Normal routine clinical and laboratory investigations.

EXCLUSION CRITERIA

- Evidence of organic gastrointestinal or respiratory disease.
- Acute infectious illness.
- Structural abnormalities detected on clinical evaluation.

CASE TAKING METHOD

A detailed case history was taken according to classical homoeopathic principles, including:

- Chief complaints with onset, duration, and modalities
- Mental and emotional characteristics
- Physical generals and particulars
- Family and past history
- Causative factors (ailments from fright and punishment)

The case was analyzed based on totality of symptoms, with emphasis on mental causation and characteristic concomitants.

DIAGNOSTIC CONSIDERATIONS

- DSM-5-TR criteria were referred to under “Psychological Factors Affecting Other Medical Conditions.”
- Routine clinical examination and laboratory investigations were performed to rule out organic pathology.

REPERTORIZATION

Repertorization was performed using Hompath (Zomeo Pro) software. The following rubrics were selected from the Repertory of the Homoeopathic Materia Medica:

- Mind – Ailments from, Fright
- Mind – Ailments from, Punishment

- Stomach – Vomiting – coughing during
- Cough – Violent

Based on repertorial analysis and materia medica correlation, **Cuprum metallicum** was selected.

INTERVENTION

- First prescription: Cuprum metallicum 200C, single dose.
- Followed by Saccharum lactis (placebo) during observation period.
- No repetition of remedy unless relapse or new symptom totality indicated.

FOLLOW-UP AND OUTCOME ASSESSMENT

Follow-ups were conducted at:

- 1 week
- 2 weeks
- 1 month

Assessment parameters included:

- Frequency and intensity of vomiting episodes
- Severity and frequency of cough
- Emotional stability and response to stress
- Appetite, sleep, and general well-being
- Recurrence of symptoms

Clinical improvement was assessed based on symptomatic relief and overall general improvement.

REVIEW OF LITERATURE

INTRODUCTION

Psychosomatic symptoms in children may arise when emotional experiences influence bodily functions. Fright can trigger autonomic responses that manifest as physical complaints such as vomiting and cough without an underlying organic disorder. When these symptoms occur together, they may reflect a stress-related disturbance rather than a primary medical illness. This report presents a case of childhood vomiting and dry cough associated with fright and discusses its management through individualized homeopathic treatment.

CASE DETAILS

A 10-year-old boy was brought with complaints of repeated vomiting of food immediately after eating, associated with a dry cough. The episodes occurred suddenly and were not accompanied by fever or features of acute illness. On further enquiry, a consistent emotional trigger was identified: the child developed intense fear following episodes of physical punishment by his father and grandmother. Soon after such incidents, the child would become frightened, anxious, and then vomit soon after eating.

DSM-5 CONCEPT⁽¹⁾

According to the **Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition**, psychological factors can significantly influence physical symptoms. Emotional stress may affect the onset, severity, and course of medical symptoms⁽²⁾. This concept is recognized under the categories

“Psychological Factors Affecting Other Medical Conditions” and Somatic Symptom and Related Disorders.

A vasovagal response is a reflex mediated by the vagus nerve, which connects the brain to the heart, lungs, and gastrointestinal tract. It is commonly triggered by emotional stress, fear, or sudden distress, especially in children who have a sensitive autonomic nervous system.⁽³⁾⁽⁵⁾

PREVALENCE

Community studies using DSM-5 criteria report prevalence rates ranging roughly from 4% to 6% in the general adult population, with higher estimates in some survey-based samples. The condition is seen more frequently in primary care settings and is particularly common in specialized psychosomatic clinics. Women tend to report somatic symptoms more often than men, contributing to a higher observed prevalence among females.

TREATMENT

The child had undergone conventional medical treatment for symptomatic gastrointestinal and respiratory complaints but showed no significant improvement. Routine clinical investigations, including laboratory tests, were within normal limits, and no organic pathology was identified. In view of the absence of physical disease and the clear association with emotional stress, the case was considered to have a psychosomatic basis with significant psychological involvement ⁽⁴⁾Thus, the case was taken up for a psychiatric holistic homeopathic treatment plan.⁽⁶⁾

Modalities

Aggravation after fright, after punishment, and from emotional stress Associated symptom: vomiting during cough paroxysm

COMPLETE REPERTORY RUBRICS

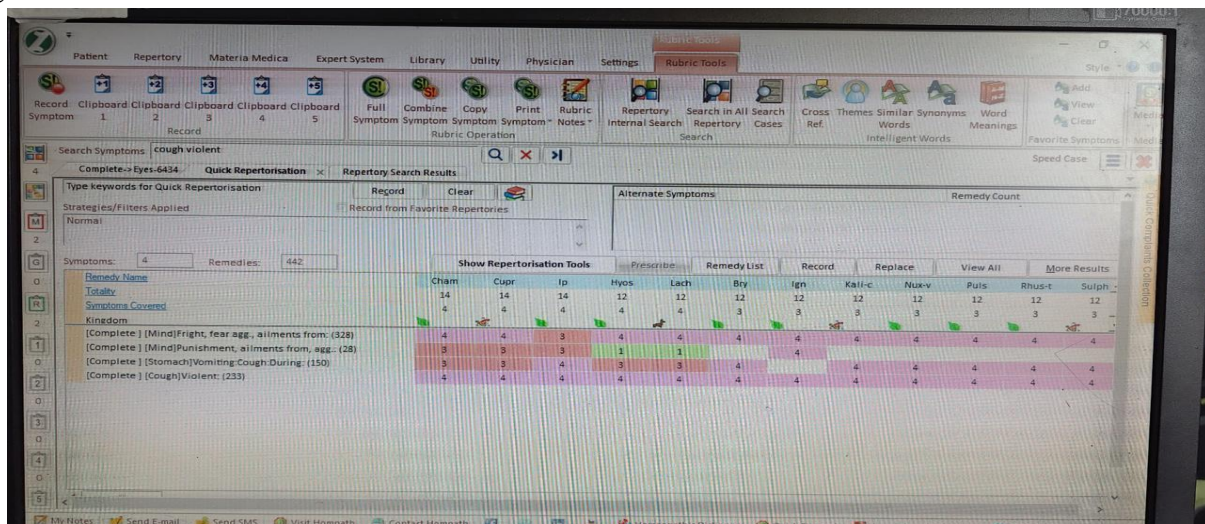
From **Repertory of the Homoeopathic Materia Medica:**

Mind – Aliments from, Fright

Mind-Aliments from, Punishment

Stomach – vomiting – coughing during

Cough – violent



HOMEOPATHIC SELECTION CRITERIA FOR CUPRUM METALLICUM

Cuprum Metallicum is primarily a remedy for disorders involving spasmodic irritation of the respiratory tract with marked reflex involvement of the stomach. It is especially suited to conditions where violent cough paroxysms lead to gagging or vomiting.

Characteristic respiratory symptoms include spasmodic, paroxysmal, violent cough occurring in rapid succession without recovery between fits. The cough is typically dry and irritating, often worse at night, and may be severe enough to cause retching or vomiting. These features form the central sphere of action of CUPRUM METALLICUM on the laryngo-tracheal region.

FOLLOW-UP AND RESPONSE TO TREATMENT

First Prescription: CUPRUM METALLICUM 200, single dose

First Follow-Up (After 1 Week): The child showed noticeable improvement. Frequency and intensity of cough paroxysms were reduced. Vomiting episodes following cough decreased. Emotional triggers were still present but less intense. Overall symptom relief was approximately **80%**. General symptoms are improved.

Plan: SL was GIVEN

Second Follow-Up (After 2 Weeks from First Dose): Marked improvement observed. Violent cough episodes became infrequent and less severe. No vomiting after coughing. The child appeared emotionally more stable with a reduced fright response. Appetite and general energy improved. Overall improvement assessed. General symptoms are improved.

Plan: As significant amelioration was ongoing, no repetition of the remedy. **Saccharum lactis (placebo)** was prescribed for 15 days.

Third Follow-Up (After 1 Month): No recurrence of cough or vomiting. The child tolerated emotional situations better. Sleep, appetite, and general activity were normal. No new symptoms appeared.

Assessment: Complete recovery.

ETHICAL APPROVAL

As this is a single case report, formal ethical committee approval was not required according to institutional and national guidelines. The case was managed as part of routine clinical practice in the Department of Psychiatry, Hamsa Homeopathy Medical College Hospital & Research Centre.

INFORMED CONSENT

Written informed consent was obtained from the patient's parent/legal guardian for publication of this case report and any accompanying clinical information. Confidentiality of the patient's identity has been strictly maintained.

DISCUSSION

Psychosomatic disorders in childhood often present diagnostic challenges, as emotional stressors may manifest predominantly through physical symptoms in the absence of demonstrable organic pathology. Vomiting and cough are common paediatric complaints, but when recurrent and closely linked to emotional triggers such as fear or punishment, a psychosomatic etiology must be considered. In the present case, the temporal relationship between fright and the onset of post-prandial vomiting with dry cough strongly indicated a psychogenic mechanism mediated through autonomic dysregulation.

According to DSM-5-TR, psychological factors can significantly influence the onset and course of physical symptoms, particularly in children with heightened emotional sensitivity and immature coping mechanisms. Fear and emotional trauma are known to activate the vagal pathways, leading to gastrointestinal hyperreactivity and reflex vomiting. The associated dry, spasmodic cough further supports the involvement of a reflex arc between the respiratory and gastrointestinal systems, as described in functional somatic disorders of childhood.

Conventional medical management in this case did not yield satisfactory improvement, and investigations ruled out organic disease, reinforcing the functional nature of the illness. This underscores the limitation of symptomatic treatment alone in psychosomatic conditions and highlights the importance of addressing the underlying emotional and constitutional factors.

From a homoeopathic perspective, individualization based on the totality of symptoms — including mental causation, modalities, and characteristic physical concomitants — is central to remedy selection. *Cuprum metallicum* was chosen due to its well-documented affinity for spasmodic cough with reflex vomiting and its strong association with ailments arising from fright and emotional shock. The repertorial correlation and materia medica indications closely matched the child's presentation.

The progressive and sustained improvement observed following a single dose of *Cuprum metallicum* 200C, without repetition, suggests a curative response rather than mere symptomatic palliation. The resolution of both physical symptoms and emotional reactivity further supports the holistic action of individualized homoeopathic treatment in psychosomatic disorders. The absence of recurrence over subsequent follow-ups strengthens the clinical significance of the outcome.

CONCLUSION

This case highlights the importance of recognizing psychosomatic presentations in children, particularly when physical symptoms are closely linked to emotional stressors such as fright and punishment. Functional vomiting associated with dry cough may represent an autonomic response to psychological distress rather than an organic disease.

Individualized homoeopathic management, guided by a thorough understanding of the mind–body relationship and totality of symptoms, can play a valuable role in such cases. The successful use of *Cuprum metallicum* in this child demonstrates its therapeutic potential in fear-induced, spasmodic psychosomatic conditions. This case supports the relevance of homoeopathy as a holistic and effective approach in the management of paediatric psychosomatic disorders and encourages further systematic studies in this area.

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REFERENCES

1. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR). 5th ed. Text rev. Washington, DC: American Psychiatric Publishing; 2022.

2. Chirita V, Untu I. Kaplan and sadock's synopsis of psychiatry: Behavioural sciences/clinical psychiatry. *Bulletin of Integrative Psychiatry*. 2016 Mar 1;22(1):119-23.
3. Hyams JS, Di Lorenzo C, Saps M, Shulman RJ, Staiano A, van Tilburg M. Functional disorders: Children and adolescents. *Gastroenterology*. 2016;150(6):1456–1468
4. Guyton AC, Hall JE. *Textbook of medical physiology*. 13th ed. Philadelphia: Elsevier; 2016.
5. Bear MF, Connors BW, Paradiso MA. *Neuroscience: Exploring the brain*. 4th ed. Philadelphia: Wolters Kluwer; 2016.
6. Hahnemann S. *Organon of medicine*. 6th ed. New Delhi: B Jain Publishers; Reprint ed Hompath (zomeo pro) soft ware.