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Divya

Department of Veterinary
Medicine, Guru Angad Dev
Veterinary and Animal Sciences
University, Ludhiana, Punjab,
India

Dr. Abrar UL Haq

Assistant Professor, Department
of Veterinary Medicine, Guru
Angad Dev Veterinary and
Animal Sciences University,
Ludhiana, Punjab, India

Ratinder Kaur

Department of Veterinary
Medicine, Guru Angad Dev
Veterinary and Animal Sciences
University, Ludhiana, Punjab,
India

Ashwani Kumar Sharma

Department of Veterinary
Medicine, Guru Angad Dev
Veterinary and Animal Sciences
University, Ludhiana, Punjab,
India

Corresponding Author:

Dr. Abrar UL Haq

Assistant Professor, Department
of Veterinary Medicine, Guru
Angad Dev Veterinary and
Animal Sciences University,
Ludhiana, Punjab, India

Conium maculatum: A homoeopathic alternative for the treatment of canine distemper in a dog

Divya, Abrar UL Haq, Ratinder Kaur and Ashwani Kumar Sharma

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Abstract

A 1.2-year-old intact male Labrador retriever was presented with a history of fits, temporal twitching for 5 days, lateral recumbency from 2 days, in appetite, and fever. The clinical examination revealed typical clinical signs such as temporal twitching, jaw champing, and hind limb paralysis. Vital parameters were within the normal range, but with mildly congested mucous membranes. Ocular swab samples were taken for rapid C.D. antigen testing that was negative after analysis. Haematology revealed neutrophilic leukocytosis with mild toxic changes in the neutrophils. Based on clinical evidence, the case was diagnosed as canine distemper, and initial palliative treatment was done using intravenous fluids, antibiotics, antacids, and multivitamins for 5 days. Oral tonics were also given for 1 week, and a homoeopathic drop of Distempex was used B.I.D. daily for 10 days. After initial treatment, the dog showed only improvement in appetite, but persisting hind limb paralysis and jaw champing were present. *Conium maculatum* (poison hemlock) drop (30 C), 2 drops T.I.D., was used for 15 days. A tele-review of the case was done, and after 2 days post-*Conium* use, the owner sent a video of the stumbling walk, which persisted for 7 days more. Following 3 weeks of more treatment with *Conium*, the dog started walking normally without any sign of canine distemper. As per the client, the dog lives a normal life now. This report shows that *Conium maculatum* may be employed as an empirical therapeutic strategy for canine distemper, thus indicating further research into the effectiveness of homoeopathic drugs.

Keywords: *Conium maculatum*, hind limb paralysis, canine distemper, hemlock

Introduction

In dogs Canine distemper is a highly contagious viral disease caused by canine distemper virus (CDV) of genus *Morbillivirus*, family *Paramyxoviridae* (Ashmi *et al.*, 2017) [2]. The disease is characterized by multi systemic disease development with highest mortality rate after rabies (Latha *et al.*, 2007) [5]. The canine distemper virus (CDV) is a small enveloped, non-segmented, single-stranded, negative-sense RNA virus that encodes six structural proteins (Martella *et al.*, 2008) [6]. This pantropic virus attacks the immunologically naive respiratory, gastrointestinal, cutaneous, neurological, and ocular systems of dogs. The infected dogs show nonspecific clinical symptoms such as pyrexia, purulent eye discharge, abdominal pustules, and anorexia after the first viraemic phase (Greene and Decaro, 2012) [4]. Adult dogs without typical preceding clinical symptoms are often the ones that exhibit nervous problems. In dogs with CD, flexor spasms, hypermetria, chorea, chewing gum seizures, and generalised myoclonus were observed either separately or in combination (Geetha and Selvaraju, 2019) [3]. Therapeutic interventions for CD include course of antibiotics, anticonvulsant drugs like phenobarbital sodium and supportive therapeutic agents (Greene and Decaro, 2012) [4]. In order to improve the quality of life and lifespan of dogs with CD, other medical procedures for therapeutic treatment may be used in order to prevent the potential negative effects of prolonged anticonvulsant administration. Homoeopathy is the most popular alternative medical treatment option with the minimal possible side effects that is utilised all over the world.

Materials and Methods

A 1.2 year old intact male Labrador retriever was presented on a stretcher to small animal Out Patient Department of Guru Angad Dev Veterinary and Animal Sciences University Hospital.

On history taking and clinical examination the dog was having fits, jaw champing, temporal twitching for, lateral recumbency with hind limb paralysis, in appetite, and fever (103-104 °F). The owner also revealed exposure of its pet with another CD positive dog in their neighborhood. Based on our clinical assessment and history of the dog it was clinically diagnosed positive for canine distemper. Vital parameters were within the normal range, but with mildly congested mucous membranes. Ocular swab samples were taken for rapid C.D. antigen testing (Quick vet canine distemper Ag rapid test, Ubio) and blood samples were taken for haematological analysis and peripheral blood smear was prepared for haemoprotozoal investigation.

Results and Discussion

Ocular swab samples were negative for rapid CD antigen test after analysis being a rapid Ag testing kit, its sensitivity is less compared to molecular diagnosis. Haematological examination revealed Hb (13.3g/dl), PCV (35.2%) and TLC (17600/ μ L). DLC values revealed (98%) neutrophils and (2%) lymphocytes. On microscopic examination of peripheral blood film, no parasite was detected. Based on clinical evidence and previous exposure with CD positive dog the case was diagnosed as canine distemper, and initial palliative treatment was done using intravenous fluids (Dextrose normal saline), antibiotics (Taxim 500 mg), antacids (Aciloc), and multivitamin (polybion) for 5 days. Oral neuro tonic (Neurokind) was also given for 1 week, and a homeopathic drop of Distempex (8 drops) was used B.I.D. daily for 10 days. After initial treatment, the dog showed only improvement in appetite, but persisting hindlimb paralysis and jaw champing were present. Homeopathic medicine *Conium maculatum* (poison hemlock) drops (30 C), 2 drops t.i.d., was used for 15 days. Other studies have also used *Conium maculatum* as an alternative therapy to reduce neurological manifestation in canine distemper affected dogs (Naveenkumar *et al.*, 2019) [7]. A tele-review of the case was done, and after 2 days post-*Conium* use, the owner sent a video of the stumbling walk, which persisted for 7 days more. Following 3 weeks of more treatment with *Conium maculatum* drops, the dog started walking normally without any sign of canine distemper (Figure 1 and 2). As per the client, the dog lives a normal life now. This report shows that *Conium maculatum* may be employed as an empirical therapeutic strategy for canine distemper, thus indicating further research into the effectiveness of homeopathic drugs. Canine distemper in dogs is characterized by temporal twitching, high temperature, in appetite, jaw champing, and hind limb paralysis. In our study and other researchers have reported similar clinical progressions of canine distemper in dogs (Martella *et al.*, 2008; Amude *et al.*, 2010) [6, 1]. Age, immunity, viral strain and environmental impact of secondary pathogens determines the severity of Canine distemper infection. In our study the clinical signs of Canine distemper were managed by using palliative treatment. Similar treatment regimens were utilized by other authors to alleviate the clinical signs of Canine distemper (Naveenkumar *et al.*, 2019) [7]. Use of *Conium maculatum* in our study is supported by other authors who had used *Conium maculatum* to reduce distemper induced neurological manifestations. Due to the efficacy of *Conium maculatum* in posterior paralysis, neurological dysfunction and weakness cases, this homeopathy remedy was suggested in canine distemper affected dogs. Therefore, if we initiate treatment with homeopathic medications earlier and combine them with

normal symptomatic care, we may be able to save CD-infected animals. At the same time, more research is required to examine their antiviral properties *in vitro* as well as the therapeutic efficacy of supplementary treatment and antibiotics in general.



Fig 1: Dog standing after conium treatment



Fig 2: Dog playing with his owner after conium treatment

Author's contribution

D: Clinical diagnosis of the disease, treatment, sample collection and participation in analysis; AUH: Carried out the clinical diagnosis, treatment, draft and revision of manuscript; AKS: Participated in draft and revision of the manuscript.

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Ethical Approval: Not applicable

Conflict of interest: Authors have no conflict of interest in this clinical study.

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