

# Finding Rest through Homoeopathy: A Holistic Approach to Insomnia

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**Abstract:** Insomnia is a widespread sleep disorder characterized by difficulty falling asleep, staying asleep, or waking up too early, leading to significant daytime fatigue and impairment. It affects millions of people globally and has a profound impact on mental, emotional, and physical well-being. This article provides an overview of insomnia, exploring its various types, causes, and contributing factors such as stress, anxiety, lifestyle choices, and underlying medical conditions. It also examines the short-term and long-term consequences of untreated insomnia, including cognitive decline, weakened immune function, and increased risk of chronic conditions like cardiovascular disease. In addition, the article reviews conventional treatment options, such as cognitive behavioral therapy and pharmacological interventions, while also discussing alternative therapies like herbal remedies, relaxation techniques, and mindfulness practices. This article also explores the potential of homeopathy as a holistic approach to managing insomnia, offering a safe, individualized, and non-invasive alternative. By examining the principles of homeopathic treatment, including the use of natural remedies that stimulate the body's inherent healing processes, we delve into how these therapies can restore balance to the mind and body. Through this article highlights the effectiveness of homeopathy in treating insomnia by focusing on underlying emotional, psychological, and physical imbalances. Ultimately, it presents homeopathy as a sustainable and integrative approach to achieving restful sleep, promoting overall well-being, and fostering long-term health. The aim is to offer a comprehensive understanding of insomnia and highlight the importance of a multi-faceted approach to its management and treatment.

**Keywords:** *Insomnia, Homoeopathy, Therapeutics.*

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## I. INTRODUCTION

Insomnia, a condition marked by difficulty falling asleep or staying asleep, is increasingly common in today's fast-paced, stress-laden world. It can lead to a range of issues including fatigue, mood disturbances, poor concentration, and even long-term health concerns. While many turn to conventional treatments such as sleep medications or therapy, these solutions often come with side effects or only provide temporary relief.

Insomnia is both a symptom and a disorder. Its prevalence is increasing day by day due to increasing stress and modern lifestyle. The effect of insomnia is not only poor sleep quality but has its fall on daytime symptoms in the individual resulting in poor physical, mental health, and quality of life.

Homeopathy, however, offers a natural and holistic alternative. Rooted in the concept of treating the individual as a whole—mind, body, and spirit—homeopathy aims to address the underlying causes of insomnia rather than merely masking its symptoms. By considering factors such as emotional stress, lifestyle habits, and physical health, homeopathic remedies seek to restore balance and support the body's natural ability to heal itself.

### ➤ *Mythology behind Word Insomnia:*

Insomnia is a Latin word. **Somnus was the Roman God of sleep.**

**In = Not, Somnus = Sleep**

It was first described by **Jonan Heinroth** in 1818 .He described it as a psychosomatic disorder.

According to **DSM IV**(diagnostic & statistical manual of mental disorders)

Insomnia is defined as: **“Difficulty initiating sleep or maintaining sleep or non restorative sleep of > 1month with daytime fatigue or impaired daytime functioning causing significant distress or impairment in social, occupational or other areas of functioning.”**

➤ As per *The International Classification of Sleep Disorder (ICSD-2)*:

- A complaint of difficulty initiating sleep, difficulty maintaining sleep, or waking up too early, or sleep that is chronically unrestorative or poor in quality.
- The above sleep difficulty occurs despite adequate opportunity and circumstances for sleep.
- At least one of the following form of daytime impairment related to night time sleep difficulty is reported by the patient:
- Fatigue or malaise, attention, concentration, or memory impairment, social or vocational dysfunction or poor school performance, mood disturbance or irritability, daytime sleepiness, motivation, energy, or initiative reduction, proneness for errors or accidents at work or while driving, tension, headaches ,or gastrointestinal symptoms in response to sleep loss, concern or worries about sleep.

## II. SLEEP PHYSIOLOGY

➤ *Non-Rapid Eye Movement (NREM) Sleep and Rapid Eye Movement (REM) Sleep.*

### • NREM SLEEP-

- ✓ NREM sleep consists of four stages:
- ✓ **Stage 1** is characterized by a decrease in brain wave activity, which is characteristic of relaxed wakefulness with the eyes closed. There is slow rolling of the eyes and which is comparable to a “drowsy” state.
- ✓ In **stage 2** eye movements becomes rare. Stage 2 is considered to be the first true stage of sleep due to the presence of “sleep spindles.”
- ✓ **Stages 3 and 4** are known as “slow wave” sleep because they are associated with low-frequency, synchronized waves on the electroencephalogram (EEG). This is the deepest level of sleep and occupies about 10% - 20% of sleep time.

### • REM SLEEP

Dreams during REM sleep are remembered. The person is even more difficult to arouse by sensory stimuli than during slow-wave sleep, and yet people usually awaken spontaneously in the morning during an episode of REM sleep. The heart and respiration rates usually become irregular, which is characteristic of the dream state. The brain is highly active in REM sleep, and the overall brain metabolism may be increased as much as 20%.

## III. CLASSIFICATION OF SLEEP DISORDERS

➤ *According to DSM-IV TR, Sleep Disorders are Classified into Four Major Sections According to their Aetiology:*

- Primary sleep disorders,
- Sleep disorder related to a general medical condition,
- Sleep disorder related to another mental disorder and
- Substance induced sleep disorder.

➤ *Types of Insomnia: According to Duration of Symptoms:*

- Transient insomnia- An insomnia complaint lasting one to several night is termed as transient insomnia. It is typically result of situational stress or change in sleep schedule or environment. (e.g. jet lag disorder)
- Short term insomnia- It last from few days to 3weeks. Disruption of this duration is usually associated with more protracted stress, such as recovery from surgery or short term illness.
- Long term / chronic insomnia- It last for month or years. It is often waxing and waning disorder with spontaneous or stressor induced exacerbation. According to nature of sleep disruption:
- Sleep onset insomnia- It is difficulty falling asleep.
- Sleep maintenance insomnia- It is frequent or sustained awakening at night.
- Sleep offset insomnia- It is early morning awakening.
- Non restorative sleep- It is persistent sleepiness / fatigue despite sleep of adequate duration.

## IV. ETIOLOGY OF INSOMNIA

Primary insomnia often persists after the original causative factors resolve. Several predisposing factors to insomnia have been hypothesized It is found that more than one third of insomniacs had a familial history. Other factors that may contribute include anxious over-concern with general health and increased sensitivity to the daytime consequences of sleep loss. A diagnosis of insomnia increases the future risk for depression or anxiety. Insomnia may also be secondary to other disorders or conditions, or it may be a primary condition.

- Primary insomnia
- Psycho physiologic insomnia
- Adjustment insomnia
- Altitude insomnia
- Insomnia due to medical condition
- Insomnia due to mental disorder
- Insomnia due to drug or substance abuse
- Insomnia due to Inadequate sleep hygiene

## V. PATHOGENESIS OF INSOMNIA

The pathogenesis of insomnia is multifactorial with emotional, behavioral patterns, and psychological vulnerability having roles. In addition, adaptation problems, psychosocial stressors, attitude of an individual, and worries of consequences of lack of sleep play a part in the

perpetuation of insomnia. These characteristics and circumstances lead to chronic disruption of the sleep homeostatic mechanisms.

➤ *Till Now Various Models of Insomnia Have Been Described to Explain the Pathogenesis of Insomnia:*

- Spielman's 3P behavioral model - It postulates that predisposing, precipitating and perpetuating factors playing a role in causing insomnia.
- Neurocognitive model (based on hyper arousal - cortical, cognitive, and somatic) There is attenuation of normal mesograde amnesia of sleep (this occurs during the period of sleep onset transition where memory recall is normally impaired for the preceding 4-5 min before sleep.)
- Stimulus control model - It suggests insomnia occurring due to alteration of sleep environment.
- Psycho physiological insomnia - It postulates that insomnia is characterized by failure to inhibit wakefulness.
- Drosophilia model - It suggests the genetic inheritance of reduced ability to sleep.

## VI. EFFECTS OF INSOMNIA

Sleepiness during the day: Have trouble having sleep. General tiredness, lethargic feeling after waking up, problems with concentration or memory, Mood disturbances.

.Impaired work performance, Poor memory, prostration of mind and body, Stumbling and vertigo, Irritability and anger, GI upset, Headache or tension, Depression and /or anxiety, Decreased motivation and increased frustration. higher absenteeism, Gait affected, Reduced quality of life, Increased motor vehicle accident, Reduced quality of life, Worsens psychiatric illness, prolongs medical illness, Decreased self esteem

➤ **THERAPY:** *Commonly used Non-Pharmacological Treatment for Insomnia:*

- **Sleep hygiene:** *It also mentions habits which will impair sleep and have to be avoided. It includes:*
  - ✓ Set and maintain a regular bedtime, every night
  - ✓ Exercise to be avoided 3 hours before bedtime
  - ✓ Avoid daytime naps
  - ✓ Dinner to be had at least 3 hours before bedtime
  - ✓ Avoid consuming caffeine, alcohol or smoking at least 3 hours before bedtime
  - ✓ Enjoy a relaxing bedtime routine for an hour before bedtime
  - ✓ Make sure that the bedroom is dark, quiet and comfortable
  - ✓ Exercise regularly. Avoid inactivity during the day
  - ✓ Avoid emotionally upsetting activities close to bedtime
- **Cognitive behavior therapy:** *It Includes:*
  - ✓ Cognitive restructuring
  - ✓ Paradoxical intention
  - ✓ Relaxation exercises

It refers to a form of psychotherapy which seeks to identify dysfunctional thoughts and beliefs, modifying them and also changing the behavior. It is based on the cognitive model. The way we think or perceive things will influence our mood and behavior. This therapy attempts to point out such dysfunctional thoughts and help in modifying them.

## VII. HOMOEOPATHIC APPROACH IN INSOMNIA

This is a method of treatment with those medicines which can produce symptoms similar to the disease of the patient. This system advocates the existence of a life force and the disease to be the derangement of the life force. When the vital force is deranged dynamically the body starts showing abnormal functions and sensations this is what we call as a disease state. The difference between Homoeopathy and other mode of treatments is that we consider the whole individual as sick and not only one part of the body like other modes of treatments. A Homoeopathic physician collects all these abnormal signs and symptoms which are due to deranged vital force by care full observation and detail case taking. After collecting these signs and symptoms a proper analysis and evaluation is done to separate the uncommon from the common symptoms in order to individualize the case, and then on making a totality of these uncommon symptoms a Similimum is selected which matches with the state of patient. The treatment plans thus designed is addressed towards correcting the psychosomatic pathways, in turn treating insomnia from within.

## VIII. HOMOEOPATHIC THERAPEUTICS FOR INSOMNIA

- **Arnica montana** - Kept awake till 2 or 3 A. M. by heat, restlessness and constant desire to change position, amelioration by lying across bed, head hanging down. Too tired to sleep. Bed feels too hard and part laid on too sore. Sleeplessness after exertion and strain, physical or mental.
- **Aconitum napellus**-Aconite is helpful if a person panics with insomnia. Fear and agitation come on suddenly when the person is drifting off to sleep, or may even wake a sleeping person up. sleeplessness of infants and of the aged. Especially useful after chill, shock, fright, operation with fear of disaster or death.
- **Coffea cruda** - Sleeplessness from overexcitement of mind and body, from sudden emotions from joy or pleasant surprise, exiting or bad news, from long watching, from excessive use of coffee; all the senses are more acute; persistent insomnia of children, without cause. Wakeful, on a constant move. Sleep till 3am after which only dozes. Sleep disturb by dreams and constant thoughts in mind.
- **Cypripedium** - Children awake at night from sleep unnaturally bright and playful, and evince no desire to go to sleep again; insomnia due to overcrowding of brain with all kind of pleasant ideas, nervous exhaustion, especially where the system has been weakened by long sickness. Sleeplessness with desire to talk.

- **Gelsemium sempervirens** - Insomnia from nervous irritation, sleeplessness from mental overwork or debauch, exhausting the vital force, patient is quiet, dull and stupid; he is on the verge of dropping to sleep and then becomes again wide awake or lies in a half-waking state.
- **Kali-phos** - Sleepless after worry, excitement, overwork or from nervous cause. Twitching of muscles on falling asleep. Awakens with a fright. Anxiety, nervous dread, lethargic, depressed. Brain fag, hysteria, night terrors, very nervous, starts easily. Slightest labor seems like a heavy task.
- **Nux vomica** – It relieves irritability, sleeplessness at 3 a.m., and digestive troubles associated with overindulgence in food, tobacco or alcohol.
- **Opium** - Insomnia from sudden shock caused by bad news, with dullness and dazed depressing; sleepy, but cannot go to sleep; insomnia with acuteness of hearing; slight or distant noises keep her awake. Great drowsiness is characteristic.
- **Passiflora incarnata** - Sleeplessness from nervous exhaustion, from mentally worried or overworked with headache. Restless and wakeful resulting from exhaustion. Has a quieting effect on the nervous system. It should be given in mother tincture.
- **Pulsatilla** - insomnia related to hormonal imbalances or emotional stress. This remedy may be particularly helpful for women, as it can help to address the causes of insomnia in females, such as premenstrual syndrome or menopause.
- **Stramonium** - Sleep full of turmoil and dreams. Desires light and company; cannot bear to be alone; worse in dark & solitude. Delirium with desire to escape.

## IX. CONCLUSION

Insomnia is a complex condition that requires a comprehensive understanding of its underlying causes, including physical, psychological, and environmental factors. A multi-faceted approach to its management and treatment is crucial, as it addresses not only the symptoms but also the root causes, whether they be stress, poor sleep hygiene, medical conditions, or lifestyle choices. Homeopathy offers a promising holistic approach to addressing insomnia, focusing on treating the root causes of the condition rather than merely alleviating symptoms. With its personalized approach, homeopathy provides a safe and non-invasive alternative to conventional treatments, empowering individuals to find lasting rest without the use of sedative medications. By combining strategies such as cognitive behavioral therapy, relaxation techniques, lifestyle adjustments, and, when necessary, medical interventions, individuals can achieve sustainable improvement in their sleep quality. Recognizing insomnia as a multifactorial issue and adopting a holistic treatment plan can pave the way for lasting relief and better overall well-being.

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