

TANTIA UNIVERSITY JOURNALOF HOMOEOPATHY AND MEDICAL SCIENCE

<u>www.tjhms.com</u>

CASE REPORT

PERCEIVING RELEVANT TOTALITY IN FIBROID UTERUS CASES Ambily B.¹, Praveen Raj², Shalu Munjal³

¹Hospital Superintedant, District Homoeopathic Hospital, Kerala, ²Professor, Alva's Homoeopathic Medical College & Hospital, Moodbidri, ³Dept of Psychiatry, Sriganganagar Homoeopathic Medical College and Hopsital, Sri Ganganagar, Rajasthan,

Abstract

Received- 10/08/2023 Revised- 22/09/2023 Accepted- 30/09/2023

Key Word-fibroid uterus,constitutionalmedicine,Laccanninum,Magnesiummuriatic um

CorrespondingAuthor:-AmbilyB.,HospitalSuperintedant,DistrictHomoeopathicHospital,KeralaKerala

We have presented 2 cases of uterine fibroid here. Both the dysmenorrhea. subjects presented with First had case additional complaint of persistent leucorrhoea. Considering chronic nature of the complaint and presentation adopted. constitutional approach was Based on the constitutional totality first case was prescribed with Lac caninum 200 and the second case Magnesium muriaticum 200. First case with 18 months of history responded in 3 months and second case with 4 years history got cured in 10 months.

INTRODUCTION

Uterine fibroids or myomas or leiomyoma of uterus are the most common type of benign tumour of uterus and also most common pelvic tumour in women. In women by the age of 35 incidences of fibroids is 60% and over 80% by the age of 50. They originate from myometrial smooth muscle cells. Exact aetiology is not known but the cause estimated to be is oestrogen and progesterone which proliferate tumour growth as fibroid rarely occur before menarche and reduces after menopause. Risk factors for developing fibroids are age, early age at menarche, reduced fertility, frequent alcohol and caffeine consumption, obesity, diabetes mellitus, hypertension, previous pelvic inflammatory disease. While decreased exposure to oestrogen found with smoking, exercise and increased parity is protective.⁹

Fibroids range in size from seedlings, undetectable by the human eye, to bulky masses that can distort and enlarge the uterus. You can have a single fibroid or multiple ones.

Presentations¹⁰

- Heavy menstrual bleeding
- Menstrual periods lasting more than a week
- Pelvic pressure or pain
- Frequent urination
- Difficulty emptying the bladder
- Constipation
- Backache or leg pains

Fibroids are generally classified by their location. Intramural fibroids grow within the muscular uterine wall. Submucosal fibroids bulge into the uterine cavity. Subserosal fibroids project to the outside of the uterus.

Management¹⁰ - Almost a third of women with leiomyomas will request treatment due to symptoms. Current management strategies mainly involve surgical interventions, but the choice of treatment is guided by patient's age and desire to preserve fertility or avoid 'radical' surgery such as hysterectomy. The management of uterine fibroids also depends on the number, size and location of the fibroids. Other surgical and non-surgical approaches include myomectomy by hysteroscopy, myomectomy by laparotomy or laparoscopy, uterine artery embolization and interventions performed under radiologic or ultrasound guidance to induce thermal ablation of the uterine fibroids.

There are only a few randomized trials comparing various therapies for fibroids. Further investigations are required as there is a lack of concrete evidence of effectiveness and areas of uncertainty surrounding correct management according to symptoms. The economic impact of uterine fibroid management is significant and it is imperative that new treatments be developed provide to alternatives to surgical intervention.

Homoeopathic Management

Homeopathic of management fibroid uterus is three pronged. As this disease is a typical chronic disease by its development nature of constitutional treatment is of mainstay approach. Fibroid uterus presents with strong Sycotic miasmatic characteristics except in some cases where other miasms also may come anti into picture. Hence miasmatic intervention may also adopted be depending on the presentations. Fibroid

uterus can present with varied symptoms mentioned above. To control menorrhagia, anaemia and severe dysmenorrhea acute medicines may also be needed in certain cases.¹¹

In today's changing understanding about surgical approach in the case of fibroid, conservative treatment is gaining momentum. As is already known fibroid is not seen before menarche and naturally menopause.⁹ Thus regresses after managing symptoms due to fibroid is gaining momentum. Homoeopathy by virtue of its philosophy and unique understanding of pathogenesis promises to deliver more than just symptomatic management. True chronic diseases are dynamic in nature representing an imbalance in the Human and environmental interplay. Homoeopathy believes that when there is balance with environmental interaction health ensues otherwise Ill health follows. Equally dynamic medicine whose pure effects were already elicited on healthy humans in Homoeopathic pathogenetic trial can internal imbalances restore these and health returns. For this purpose similia rule need to be applied in drug selection.⁴

CASE 1

A 26 yr old female, married came with the complaint of severe Dysmenorrhoea developed since past one and half years. The complaint radiates to lower abdomen on right side which is worse at night. Her menses was regular with 3days duration and 28-30 day cycle having moderate flow.

She also complained of whitish, profuse leucorrhoea throughout the month not improved with any treatment.

Locati	Sensatio	Modality	Accompa
on	n		niement
Mense	Pain3	Pressure	
S		Rest	
since		< spicy	
1.5		food	
years		< lying	
radiati		on side	
on to			
left			
lower			
abdom			
en			
Femal	Leucorr	< all	
e	hoea	through	
genital	W	the month	
tract	hitish,		
	profuse		
	it		
	ching		

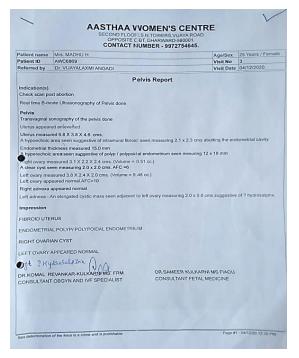
- P/H of abortion 1 year back
- F/H father hypertensive
- Physical Generals
- Menses : 3 days, regular

- Hot pt
- Craves : egg, fast food
- Sleep good
- Dreams of snakes3

Mind

This patient hails from around 400km away from the clinic peace. Hence interviewed over the phone. She was worried about complaint. Coming from village background agricultural and work demand was family, high. Her childhood and married life was uneventful. Generally silent, busy doing household works. She does not have many friends. Sleep is good but often sees snakes during sleep.

Ultrasound



- Intramural fibroid of 2.1x2.3cm
- Endometrial polyp/ polypoidal growth
- Right ovarian cyst

• Suspected Lt sided hydrosalpinx

Constitutional Totality

Mental General

- Sad
- Low spirited
- Dreams of snakes³

Physical general

- Thermal: Hot patient
- Menses :
- Menarche 12years
 - 3 days, regular
- Craves : egg3, fast food3
- Characteristic particular
- Abdomen pain during menses radiating down left side > pressure
- Profuse thick leucorrhoea throughout the month.

Remedy

Lac can 200 weekly once

Follow up

Leucorrhoea gradually reduced.

Dysmenorrhea was absent after second month

Third month there was no complaint

Repeat scan was advised.

After 3 months

Patient Name:	Madhu R. Hiremath	Age/Gender:	26Y/F
Ref. By:	Dr Veena 160	Date;	11/09/2022
indings: lver: is normal in ortal vein is norma	USG abdomen and pel size, shape and texture. No focal I I.	and the second se	R dilatation.
Gall bladder is wel	l distended. No calculus/sludge. C	BD is normal.	
Panereas: Normal i	n size, outline and echo texture. N	lo focal lesion.	
Spleen: Normal in	size, outline and echo texture. No	focal lesion.	
Both kidneys: app	ears normal in size, shape and ech	otexture, No focal lesion.	
RK:8.6cmx3.4cm,	LK:9.0cmx3.6c	m.	
No adrenal lesion s	een.		
Urinary bladder i	s well distended. No focal lesion o	r calculi seen.	
No mass / collection	on. No evidence of bowel thickeni	ng. No ascites.	
No significant and	ominal lymphadenopathy.		
in posterior wall	size and shape (5.9cm x 3.5cm x 4 myometrium appear normal. (ET: ormal in size and shape. (RO:3.5c D).	0.3mm)	
Impression:			
Small uterine fib	raid.	1	
No other significa	ant abnormality detected in this	ican.	
		Dr K M-Yettinmat Consultant Radie	
Thanks for referra			

All the previous scan findings have disappeared. Only a tiny fibroid is remaining.

CASE 2

A 40 yr old female cam with the complaint of menstrual irregularity. She had been dignosed as suffering from uterine fibroid taking allopathic medicines for the past 3 years. But the submucosal fibroid was growing in size gradually from 2.7cmx2.5cm in 2017 to 5.1x4.4cm in 2020. Lft renal calculus and fatty liver were other findings.

FGT Menorrhagi		mene	Weaknes	
Since 3	a for	S	S	
years	15days	durin	Cold	
Graduall	Fibroid	g	flushes	
У	uterus			
growing	5.1x4.4cm			
	Pain			

Treatment History

On regular allopathic medicines for above complaint since 2017.

Physical generals

- Thermal state: Hot patient
- Sweat : Profuse, general
- Craving: Pungent, Pickle3, Nonveg3
 - Weight : 75kg

Life space

This patent hailing from a middle class family was living after marriage in a joint family setup. There were strong feelings of being neglected by everyone. She was silent, non reactive but was suffering internally. Regularly used to see frightful dreams and also of dead relatives.

Having very strong Psycho somatic dynamics in the case constitutional approach was planned.

Totality

Mental generals

- Anger3 < sound, people
- Sleep early termination
- Dreams frightful, dead relatives
- Neglected feeling

Physical generals

- Thermal state: Hot patient
- Sweat : Profuse, general
- Craving: Pungent, Pickle, Non
 veg
- Weight : 75kg

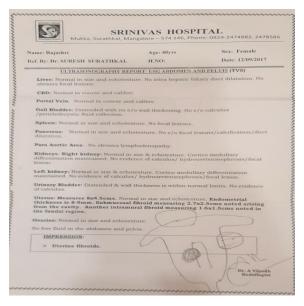
2020

Characteristic particular

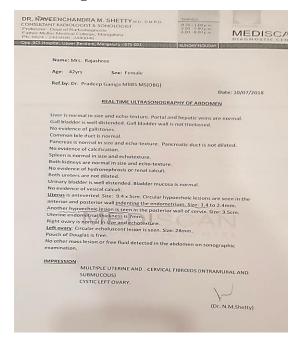
- Menorrhagia
- Fibroid uterus

This subject was taken up for treatment in February 2020. Till then she was under allopathic medication, the fibroid gradually increased in size. USG reports are given below.

USG 2017



Usg 2018



<text><text><text><text><text><text><text><text><text><text><text><text><text><text><text>

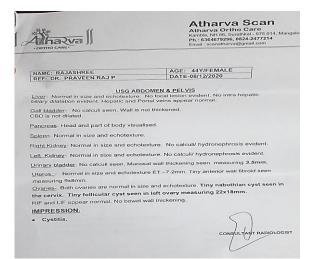
Medicine prescribed

Rx

USG

• Mag mur 200 weekly doses Feb 2020 to December 2020

Her complaints started improving gradually. Menorrhagia stopped. Dysmenorrhea relieved. was Due to Corona pandemic treatment was not very regular. Repeat scan was done in December 2020. Again scan was repeated in 2023. Both scans were identical.



Discussion

Both the cases were cured based on constitutional approach without giving any acutes or specifics for fibroid uterus. Both the cases showed characteristics at mind level. Matching these mental symptoms with physical generals is equally important. In the first case dreams snakes with profuse whitish leaucorrhea clinched Lac caninum. In the second case neglected feelings, dreams of dead relatives with craving helped in arriving at Magnesium group. Interestingly in both the cases all other pathological findings also disappeared quickly. Suspected hydrosalpinx and ovarian cyst in the first case and fatty liver, renal stones in the second case disappeared in the due course of This treatment. again highlights supremacy of Homoeopathy and greater Hahnemannian vision.

CONCLUSION

Irrespective of pathology if uncommon symptoms could be perceived and utilised in the construction of relevant Totality then the management of cases could be more effective as well as quicker.

REFERENCES

- Boericke W. New Manual Of Homoeopathic Materia Medica. New Delhi: B.Jain Publishers(P)Ltd; 2011
- Clarke(1992). A Dictionary of Practical Materia Medica. Vol I. B jain Publishers: New Dehli

- De Schepper L.(2006). Achieving and Maintaining the similimum.: B Jain Publishers New Dehli
- Dhawale M.L.(Ed)(1997).Symposium Vol. on Hahnemannian Totality. Part II:Area C 2nd edition
- Dhawale M L(1985). Principle & Practice of Homoeopathy; Institute of Clinical Research, Mumbai.
- Hahnemann Samuel (1990), Organon of Medicine, B Jain Publishers (P) Ltd, New Dehli
- Dutta D.C(2022). Text book of Gynaecology: jaypee brothers publication 8th edition.
- Padubidri V G, Daftary N Shrirish(2015).Shaw's Textbook of Gynaeclogy, Elsivier publication, 16th edition.
- 9. Ngrrili S Goldy, Yadav B Bhaurao, Takalkar А Anant, Epidemiological study of uterine fibroids: our experience from urban Maharashtra. International Journal of Reproduction, Contraception, **Obstetrics** and Gynaecology(IJRCOG) Doi: https://doi.org/10.18203/2320-1770.ijrcog20221918
- 10. Donnez <u>Jacques</u> and Dolmans <u>Marie-</u> <u>Madeleine</u> Uterine fibroid management: from the present to the future, <u>Hum Reprod Update.</u> 2016 Nov; 22(6): 665–686

11. Quadri Iqbal Jahan, MD et al, Role of homoeopathic medicines in treating uterine fibroid: a prospective observational study http://www.ijrh.org 2021, IP: 14.139.55.162

How to Cite this Article- Ambily B., Raj P., Munjal S., Perceiving Relevant Totality In Fibroid Uterus Cases. TUJ. Homo & Medi. Sci. 2023;6(3):96-103.

Conflict of Interest: None

Source of Support: Nil



This work is licensed under a Creative Commons Attribution 4.0 International License

