Management of ovarian cyst with Homoeopathy

Shubhangi Mehare¹, Ruchi Biswas²

¹Merchant Homeopathy Medical College & Hospital, Mehsana. (Gujarat); ²Sriganganagar Homoeopathic Medical College Hospital & research Institute, Sriganganagar

Abstract-
Removal of Lt. sided ovarian cyst by Homeopathic treatment. In this communication, we present a case of removal Lt. sided ovarian cyst by administration of single potentised homoeopathic remedy (i.e. Arsenic Album) Selected on the basis of totality of symptoms and authenticated with the aid of Ultrasonographic studies.

Key word: Ovarian cyst, Homoeopathy, Arsenic Album, Ultrasonography

Received: 15/10/2019 Revised: 10/11/2019 Accepted: 15/11/2019

Corresponding author: Shubhangi Mehare, Merchant Homeopathy Medical College & Hospital, Mehsana. (Gujarat)


Introduction-
An ovarian cyst can be defined as collection of fluid surrounded by a very thin wall within any ovarian follicle larger than about two centimeter is termed as ovarian cyst. They vary in size from peanut size small to much large size almost that of an orange. Although they are mostly found in women of reproductive age and most of them are harmless or benign in nature they are reported occasionally to cause severe pain in the abdomen with menstrual irregularities and cause excessive bleeding. In such case when this cyst is causing concern not only for it’s increasing size but also for causing certain undesirable symptom like dull aching or sudden sharp stitching pain in Lower abdomen, pain during coition or even during bowel movements; It also sometimes gives full or bloated feeling after eating a small mall and also produces a constant nauseatingfeeling or vomiting tendency; needs to be intervened.

For the treatment of ovarian simple cyst; Homoeopathic remedies are selected by taking into considering totality of symptoms and based further on individuation of patient.

Case Profile –
Female patient age 42 came with the complaint of Lt. sided abdominal pain since 15 days before with tingling sensation in lower abdomen.
Chief complaints –

<table>
<thead>
<tr>
<th>Location</th>
<th>Sensations and pathology</th>
<th>Modalities</th>
<th>Concomittent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. GIT Abdomen</td>
<td>Lt hypogastric pain Tingling sensation in Lower abdomen, Sensation offullness in the abdomen</td>
<td>&lt; Travelling, &lt; Motion, &lt; Menses, &lt; Rest</td>
<td>Nausca, Vomiting, Sometime</td>
</tr>
<tr>
<td>2. Extremities</td>
<td>Pain, Throbbing</td>
<td>&lt; Sleep</td>
<td>Restless</td>
</tr>
<tr>
<td>Back</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Head</td>
<td>Throbbing pain</td>
<td>&lt; Walking, &lt; bending Forward</td>
<td>Weakness</td>
</tr>
<tr>
<td>4. Female</td>
<td>White discharge, Itching, Burning, Redness, Acrid</td>
<td>&lt; before menses, &gt; After menses</td>
<td></td>
</tr>
<tr>
<td>GenitalOrgan</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vagina</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Physical Generals –

- Appetite – Decreased
- Burning stomach < eatery after
- Craving – Sweet ++
- Aversion – Cold drink, Ice-cream, Milk, sour.
- Stool – Urging, Unsatisfactory
- Thirst – Short quantity, Short – Interval
- Sleep – Disturbed due to pain
- Preparation – Only on forehead < summer

Investigation Report –

- USG Abdomens / Pelvis - Left ovarian complex cyst of size 36 x 35 mm, Liver shows fatty changes.
- Urine Analysis Report -
  - Pus(WBC) cell – 4.5/hpf
  - Epithelial cell – 10-12 / hpf

Menstrual History:
- Irregular scanty 2 day LMP=22/12/2017
- Obstetric H/O : 1st, 2nd FNTD/ Full term, G2A0P3L3

Life events:
- Patient born and brought up at in an average socio-economic family having 2 brothers. Patient is 1st sibling. She say since childhood she is very Genius, caring by nature and very responsible.
- In school, did like to study very much very talented, had many friends. She was very sincere in her study teacher always appreciated her for home work. Math, English and Marathi were favorite subjects. She is very possessive about children’s Health, Own health. She will give support to another person. But receiving support in return. She is very calculative. She
is very fastidious. She came from nuclear family but after marriage jointed family. She was yelder sister in low in their family. She take whole responsibility of family without any hesitation.

Husband – High school teacher
3 children - 2 Daughter + 1 Son
She is very caring about their study.
Hobbies – Reading book’s
Very fine / Hand writing
Cooking different food recipe
Religious

Repertorial Tatality
Mind – Anxiety
Mind – Fastidious

Final selected Remedy :
Arsenic Album 200, 3 dose
SL - BD for 8 days

Repertorial chart:

<table>
<thead>
<tr>
<th>Date</th>
<th>Complaint</th>
<th>Remedy</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 30/12/2017</td>
<td>Pain in vertex , cold air Pain abdomen ++ Heaviness feeling Weakness feeling Better.</td>
<td>SL 200/2 Dose Phytum – BD, 1 month</td>
</tr>
<tr>
<td>2. 29/1/2018</td>
<td>Pain in abdomen decreased Itching – Burning on vaginal region, Mouth – dry</td>
<td>Kreosote 30 single Dose Phytum – BD, 1 month</td>
</tr>
</tbody>
</table>
### Case Discussion:
In this case repertorial totality should be consider, patient is very anxious fastidious and restless. She is very affectionate about her family. Physical generalities should be taken into consideration like Desire – cravings sweet. Aversion-cold drink, ice-cream, Stool– unsatisfactory Sleep disturbed due to pain.
Sycotic miasm plays a dominant role in this case. Nux. Vom. and Ars Alb. were two selected remedies having anxiousness, restlessness, both are chilly patients but craving sweet covers Nux. vom., Ars. Alb. covers the fastidiousness, also having Ovarian cyst pathology in its sphere of action on Female Genital Organs and Nux vom on GIT.

Conclusion

Mrs. P. known case of left sided ovarian cyst due to Sycotic miasm, patients coping strategy has been used for the repertorial totality and remedy differentiation. Therapeutic along with counseling patient started improving her physical complaint and psychological complaint primarily then pathological complaint improved with three month of continue treatment. Homeopathic remedies are selected by taking acute totality of symptoms with miasmatic approach.

References –


Conflict of Interest: None

Source of Support: Nil