



CASE STUDY

A CASE REPORT OF GANGLION TREATED WITH HOMOEOPATHY

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Abstract

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Key Word- Ganglion, Cyst, Homoeopathy, Similimum

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The Greek term “ganglion” means “cystic tumour.” 50 to 70% of all soft tissue tumours of the hand and wrist are ganglions, which are mucus- filled cysts that are more common in women than in males (3:1). Most often appear along the tendons or wrists or hands. Also can occur in ankles and feet. They are typically round or oval filled, small ones can be pea-sized filled with a jellylike fluid.^[1]

INTRODUCTION

"Ganglion cysts" are synovial cysts that are commonly observed in orthopedic clinical practice. They have gelatinous mucoid substance within. Although the exact cause of ganglion cysts is unknown, it is believed to be the result of recurrent

microtrauma that leads to mucinous degeneration of connective tissue. [2]

Symptoms [3]

Depends on location, shape and size and pain:

➤ **Location-** Mostly affects the soft tissue mass in the wrist and hand, with

the foot and knee being less commonly affected.

- **Shape and size-** They might be oval or circular. Are occasionally too tiny to feel, but they can enlarge over time as a result of joint movement.
- **Pain-** Even though they are harmless, they can cause pain, tingling, numbness, or weakness in the affected muscles if they press on a nerve or other tissue.

Risk factors- [4]

There are many factors that contribute to the development of ganglion cyst, such as:

- **Age and sex-** Women who are 20 to 40 years old are more vulnerable.
- **Osteoarthritis-** Ganglion cysts are more likely to form close to finger joints with arthritis that are closest to the fingernails.
- **Joint or tendon injury-** The development of ganglion cysts may be brought on by injured tendons or joints.

Even though the majority of ganglion cysts are asymptomatic, patients may present with discomfort, tenderness, weakness, and dissatisfaction with cosmetic appearance.

CASE REPORT-

Name- Mrs. XYZ Marital status-Married

Age- 29 years

Occupation- Software engineer

Sex- Male

Socioeconomic status- Middle class

Date of Registration- 1/09/2023

Religion- Hinduism

Presenting Complaint:

Swelling on the inner side of left wrist (ventral) since 1 month

History of Presenting Complaint:

Patient was apparently well 1 month back when he observed swelling on the ventral side of his left wrist. There was no associated pain. The cyst used to hamper his hand surface when he used to work on his laptop. Surgery was advised for the same, but didn't opt for it.

Location- Inner (ventral) side of left wrist

Onset-Insidious

Aggravation- N/S

Amelioration-N/S

Local examination- soft swelling, of around 14mm (slightly bigger than the size of a pea)

Past History:

He suffered from typhoid when he was 12 years old and chicken pox when he was 12 years, both the times he took allopathic treatment with which he was cured and was not hospitalized

Personal History

- Diet-Non-vegetarian
- Development landmark -On time
- Habit and addiction – Nothing significant
- Allergy –No

Family History:

- Maternal History- Mother- 57 years of age, healthy and alive
- Paternal History-Father- 60 years of age, healthy and alive
- Sibling- one sister, 25 years of age, healthy and alive

Physical Generals:

- Appetite-Adequate(3meals/day-2 chapatti/meal)
- Thirst-Adequate(4l/day)
- Desire-Sweets
- Aversion- N/S
- Intolerance-Fried (causes constipation)
- Urine- D5 N1, N/S
- Stool- D1 N0, eating fried food causes constipation, stools recedes
- Taste- N/S
- Tongue- Clean and moist
- Sleep-Refreshing
- Dream- N/S
- Perspiration-Generalised
- Skin-Oily (nose and forehead)
- Thermals- Chilly

Mental Generals:

Patient is an introvert, who gets angry on contradiction. On observation he appeared very calm, composed, well-behaved and answered all the questions to the point without any hurry.

Physical Examination –

- Complexion- Light- complexioned
- Temperature- Afebrile

- Built- Mesomorphic
- Tongue- Clean, moist
- Weight- 75 kg
- Oedema- Absent
- Height- 5'8
- Pallor- Absent
- Pulse- 74 bpm
- Cyanosis- Absent
- Blood Pressure-122/80 mm of Hg
- Clubbing- Absent
- Respiratory rate-18/minute
- Lymph nodes- Not palpable

Clinical Diagnosis: Ganglion**Differential Diagnosis: [5]**

- Aneurysmal bone cyst- Benign expansile tumor-like bone lesions are known as aneurysmal bone cysts. Typically observed in children and adolescents. Usually found in the long bones' metaphysis.
- Chondroblastoma- Are uncommon, benign tumours of the cartilage. generally originate from the humerus, in specific, the epiphysis of long bones. They primarily affect younger patients.
- Pigmented villonodular synovitis- A benign monoarticular synovial condition is called pigmented villonodular synovitis. It is separated into two types: diffuse and localised. Extra-articular form is typically the localised form. The most prevalent

type of intra-articular illness is the diffuse form.

Totality of symptoms

1. Anger on contradiction
2. Introvert
3. Desire-sweets
4. Intolerance fried causes constipation- stools recedes
5. Skin – oily, nose

Analysis Of Symptoms

COMMON	UNCOMMON
Introvert	Anger on contradiction
	Desire-sweets
	Intolerance fried causes constipation- stools recedes
	Skin – oily, nose

Evaluation Of Symptoms

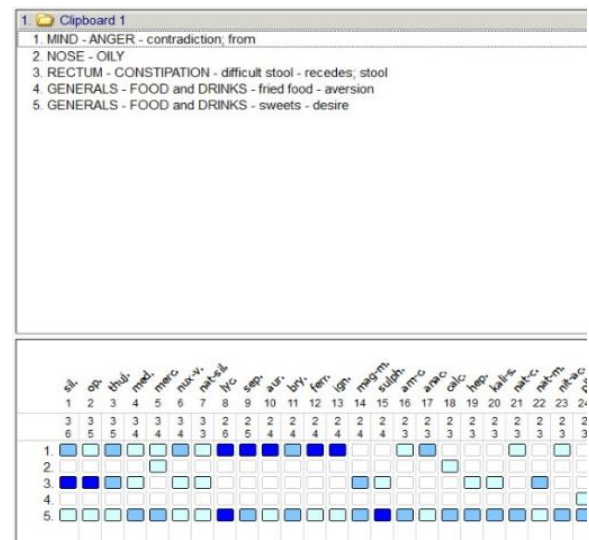
Symptoms of Patient	Intensity	Miasm [6]
1. Anger on contradiction	+3	Psora
2. Desire-sweets-	+3	Psora
3. Intolerance fried causes constipation- stools recedes-	+3	Psoro-Sycotic
4. Skin – oily, nose-	+2	Sycosis

Repertorial Totality [7]

- Mind- Anger- contradiction; from
- Generals – Food and Drinks- sweets- desire
- Generals- Food and Drinks- fried food- aversion
- Rectum- Constipation- difficult stool- recedes; stool
- Nose- Oily

Repertorial Chart

Repertorization was done using synthesis repertory



Therapeutic intervention

After analysing the reportorial totality, it was observed that Silicea covered maximum rubrics with the maximum score. Silicea seems to be the nearest similimum of the case, after consulting material medica. It was prescribed in 200C potency, one dose of four globules of size 30 to be taken one day on the baseline visit i.e.1/09/2023 followed by Sac lac 30/TDS/ 3 days.

FOLLOW-UP OF THE CASE

On 5/09/23 the ganglion cyst had almost disappeared. The patient didn't have any discomfort. Also patient's wife reported that he was now much calmly listening to any suggestions or advices. Hence Sac lac 3 / TDS/ 4 days was continued.

RESULT

There was reduction in size of the cyst, and the discomfort has disappeared completely with homoeopathic treatment. The patient was advised not to lift heavy weights or exert the joint much for some time.



BEFORE TREATMENT- BASELINE- 1/09/2023



AFTER TREATMENT- FOLLOW UP- 5/09/2023

DISCUSSION AND CONCLUSION:

In this instance, ganglion cyst treatment and mental health have both improved through a holistic homoeopathic approach. The effectiveness of homoeopathic treatment for ganglion cysts is supported by this case report. It offers an additional evidence of Silicea's effectiveness in cases of ganglion cysts.

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