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Homeopathic management of plasma cell cheilitis

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Abstract

Plasma Cell Cheilitis is a rare lip disorder characterized by persistent ulcers, often challenging to manage through conventional means, this paper delves into the unique case of a 53-year-old suffering from persistent mouth ulcers, particularly a non-healing ulcer on the lower lip for over two years. Despite conventional treatments yielding no improvement and, in fact, witnessing deterioration in the condition, the individual turned to homeopathic intervention. The patient's discomfort was significantly alleviated within the first Month of homeopathic treatment. The paper aims to shed light on the effectiveness of homeopathy in managing Plasma Cell Cheilitis, offering a holistic healing approach.

Keywords: Plasma cell cheilitis, rare, homeopathy, holistic healing

Introduction

Plasma Cell Cheilitis is a rare and challenging inflammatory lip disorder characterized by persistent ulcers, presenting a complex diagnostic puzzle for healthcare professionals. The precise etiology of this condition remains elusive, adding to its enigmatic nature. Common signs and symptoms include chronic lip ulcers that resist conventional treatments, causing discomfort during daily activities such as speaking, eating, and drinking. Complications may arise, leading to bleeding and pus formation on the affected lip. Homeopathy offers a holistic approach to managing Plasma Cell Cheilitis, emphasizing individualized treatment plans tailored to the patient's unique symptoms and overall well-being. Through its comprehensive and patient-centric methodology, homeopathy aims not only to alleviate the physical manifestations of the ailment but also to address the underlying factors contributing to its persistence, providing a promising avenue for those grappling with this perplexing lip disorder.

Case Profile

A 53-year-old male, serving as a restaurant manager, has been grappling with the persistent challenge of mouth ulcers since the tender age of 18. Among these, a singular ulcer on the lower lip has endured for an unsettling two-year period. Despite undertaking a multitude of local applications and antibiotic treatments, the condition not only showed a lack of improvement but, in fact, exhibited a worsening trajectory. This relentless ulcer significantly hindered the individual's daily activities, turning routine tasks such as teeth brushing, talking, and consuming meals into discomfort-laden endeavors. Even minimal contact with food or fluids triggered bleeding and pus formation on the lip ulcer, making the simple act of enjoying meals an insurmountable struggle. Seeking respite, the patient turned to homeopathy, and remarkably, signs of healing began manifesting within the initial Month of treatment. To rule out malignancy, a biopsy was conducted, ultimately revealing the diagnosis of Plasma Cell Cheilitis—a rare form of lip ulcer characterized by an unknown causative factor. This detailed account underscores the prolonged and distressing journey of the patient, highlighting the transformative impact of homeopathic intervention in managing a condition as intricate and perplexing as Plasma Cell Cheilitis.

Examination

Virtual consultation was done with the patient.

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Physical Generals

Diet	Vegetarian
Appetite	Good
Desire	Sweets +++
Aversion	Nil
Thermal Reaction	Ambithermal
Thirst	Moderate
Stools	Satisfactory
Urine	Normal
Perspiration	Dry skin. Cold weather.
Sleep	Good
Dreams	Cannot recall.

Mental Generals

A 53-year-old man with a naturally cheerful disposition, always approached life with an optimistic outlook, avoiding excessive worry and focusing on moving forward. However, recent challenges tested his resilience. Concerns about his family, including wife and two daughters, became a focal point. His eldest daughter's disappointment in not pursuing

her desired course weighed heavily on his heart, while his younger daughter achieved remarkable success, leading to shifts in his family dynamics. The onset of the COVID-19 pandemic brought additional challenges, impacting his health, routines, and financial stability. The closure of his 20-year-old business due to financial strain was particularly devastating. Despite the hardships, I adapted by taking on a new role as a restaurant manager, acknowledging that resilience is crucial for moving forward.

Past History

Skin-Since the age of 18, a history of mouth ulcers
 Psoriasis-since the age of 23, applying steroidal application on and off.

Family History

Family-Mother-diabetes, arthritis.

Case analysis

Repertorial totality

Repertory used	Rubrics selected
Kent Repertory	1. Mouth; Ulcers; persistent
	2. Mouth; Ulcers; lower lip
	3. Mouth; Bleeding; gums; brushing teeth after
	4. Mouth; Discoloration; tongue; white; coating
	5. Mind; Despair; illness from
	6. Generals; Food and drinks; difficult to swallow; liquids
	7. Generals; Eating; aversion to
	8. Generals; Talking; difficult
	9. Generals; Occupation; managers
	10. Mouth; Pus; forming

Repertory screenshot

Remedy Name	Sulph	Ars	Nit-ac	Phos	Lach	Lyc	Merc	Na&c	Camph
Totality	8	8	8	8	7	7	6	6	6
Symptom Covered	5	4	4	4	4	4	4	3	2
[Skin]Ulcers:Recurrent:	1				1				
[Face]Ulcers:Lips:	1	3	3	2		1	2	1	
[Generalities]Food and drinks:Sweets:Desires:	3	3	2	2		3	2	2	3
] [Suppression]Any suppression: Causes:Eruption:	1				1				
] [Mind]Cheerful,gay,happy (see mirth):	2	1	2	2	3	2	1	3	3
] [Phatak A-Z]Ulcers:Bleeding:		1	1	2	2	1	1		

Selection of Remedy

Remedy	Reasons
Constitutional Remedy name Remedy potency Remedy dose	Sulphur Recurrent - almost becomes better and situation recurs. H/o-suppressed skin eruptions. Craving Sweets. Cheerful Potency 200. 2 doses Monthly x 3 Month.
Acute Remedy name Remedy potency Remedy dose	Nitric acid Non healingulcer Bleeding on touch. Muco cutaneous junction. Exuberant granulation tissues.

Miasmatic approach

Rubrics	Psora	Psychosis	Tubercular	Syphilis
Mouth; Ulcers; persistent	X			
Mouth; Ulcers; lower lip	X		X	X
Mouth; Bleeding; gums; brushing teeth after	X	X		X
Mouth; Discoloration; tongue; white; coating	X		X	
Mind; Despair; illness from	X	X		X
Generals; Food and drinks; difficult to swallow; liquids	X		X	
Generals; Eating; aversion to	X	X		X
Generals; Talking; difficult	X	X		X
Generals; Occupation; managers	X	X	X	X
Mouth; Pus; forming	X	X		X

Materials and Methods: Kent repertory was used for repertorization

Results

Months	Progress	Prescription
1 st Month	Lip-ulcer healing. Discharges-nil. Pustules-not seen	Sulphur 200. 2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose.
2 nd Month	Lips-ulcer better-still persistant. Nil bleeding-Biopsy taken-stitches applied	Sulphur 200. 2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose
3 rd Month	Lip Ulcer completely healed.	Sulphur 200. 2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose
4 th Month	Ulcer -re opening.Peeling skin from the lips Nil pustules, nil bleeding.	Sulphur IM 2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose
5 th Month	Ulcer completely healed- Nil bleeding or pus.	2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose
6 th Month	Ulcer completely healed- Nil bleeding or pus	2 doses morning and evening. Next day Nit acid 3-2 doses daily x 1 Month Remedy dose
7 th Month	Ulcer completely healed-	Nil medication.

Discussion and Conclusion

Discussion

The presented case of Plasma Cell Cheilitis in a 53-year-old male restaurant manager underscores the intricate challenges posed by chronic mouth ulcers. Despite persistent symptoms since the age of 18 and rigorous attempts with local applications and antibiotics, the condition not only resisted improvement but exacerbated over time. The daily discomfort experienced during routine activities, bleeding upon slight contact with food or fluids, and the significant impact on quality of life emphasized the severity of the ailment. The decision to opt for homeopathy brought about remarkable healing within the initial Month, offering respite from the longstanding ordeal. The miasmatic analysis, encompassing rubrics related to persistent ulcers, bleeding, aversions, and occupation, aids in understanding the dynamic aspects of the case from a homeopathic perspective.

Conclusion

In conclusion, the presented case of Plasma Cell Cheilitis showcases the potential of homeopathy in managing chronic and challenging conditions. The individualized approach of homeopathic intervention addressed the unique symptoms of the patient, providing relief where conventional treatments fell short. The miasmatic analysis further aids in tailoring the treatment strategy based on the patient's inherent predispositions. This case serves as a testament to the holistic and personalized nature of homeopathy, offering

hope and healing in the face of persistent and perplexing health concerns.

The transformation



Fig 1: Show plasma cell cheilitis in a 53-year-old male

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How to Cite This Article

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