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Homoeopathic management of varicose ulcer: A case report

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Abstract

Varicose ulcers, often chronic and resistant to conventional treatment, present significant challenges due to their recurrent nature and the underlying venous insufficiency. This case report illustrates the successful long-term management of varicose ulcers in a 34-year-old male using individualized homoeopathic remedies and supportive mother tincture. The consistent improvement and eventual healing of ulcers over a period of 04 months reinforce the role of homoeopathy in treating chronic venous ulcers holistically.

Keywords: Varicose ulcer, homoeopathy, lycopodium, hamamelis mother tincture, constitutional remedy, case report

Introduction

Varicose ulcers are a common complication of chronic venous insufficiency. Conventional management often involves compression therapy and topical agents, but recurrence is frequent. Homoeopathy offers a systemic, individualised approach that can stimulate long-lasting healing without recurrence. This case demonstrates the potential of homoeopathic medicines in managing chronic venous ulcers by addressing the patient's constitution and pathology simultaneously.

Case report

Patient Profile

• Name: Mr. M.P.

• Age/Sex: 34 years / Male

Occupation: Runs a general store

• Marital Status: Married, father of one daughter

Address: Kangrali, Karnataka

• Date of First Consultation: 04/11/2019

Presenting complaints

- Chronic varicose ulcer on the right leg, later extending to multiple sites
- Pain and numbness in the right leg, pain around the heel
- History of trauma over varicose vein area, after which ulcers worsened

Associated complaints

- Erectile dysfunction with low libido intermittently
- Digestive disturbances at times

Mental Generals

- Irritable and anger-prone
- Emotionally suppressed
- Dominated by father; emotionally submissive and lacks assertiveness

Physical Generals

- Appetite, stool, urine: Normal
- Thirst: Thirstless

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• Thermal reaction: Hot patient

• Sleep: Sound

Vitals

Bp: 126/90mmhg Pulse: 74bpm RR: 14rpm Temp: Afebrile

Systemic examination

RS: clear, no rales, no ronchi CVS: S1 S2 heard rhythmically

GIT: no tenderness

CNS: well oriented in time and space

Investigations advised

Hb, CBC, TFT, lipid profile, FBSL

Diagnosis: Varicose ulcer (ICD-10: I83.0 - Varicose veins

of lower extremities with ulcer)

Diagnosis of the Phase- State Type: Psycho-syphilis

Homoeopathic Treatment Plan Remedy Selection and Rationale

- Lycopodium 1M: Selected as the constitutional remedy for underlying emotional suppression, rightsided symptoms, venous stasis, and erectile dysfunction.
- **Hamamelis Q:** Given as an organ remedy to improve venous tone and reduce local venous congestion.
- **SL** (**Placebo**): Given to assess remedy action.



Fig 1: Before treatment

Table 1: Follow-Up Summary

Date	Findings	Prescription
04/11/2019	Right leg ulcer, pain, irritability	Lycopodium 1M, Hamamelis Q, SL
07/01/2020	Ulcer 50% better, heel pain +	SL, Hamamelis Q
06/03/2020	Ulcer 100% healed	-

Outcome & Follow-Up

The patient's ulcers healed consistently with individualized

homoeopathic care. Over time, the intensity and size reduced. Emotional state and erectile function improved. No further episodes reported after March 2020.



Fig 2: During treatment

Discussion

The chronic and relapsing nature of varicose ulcers poses a therapeutic challenge. In this case, a careful analysis of the totality of symptoms led to successful constitutional and pathological prescribing. Lycopodium acted deeply on both venous insufficiency and emotional suppression. Hamamelis provided consistent support to the venous system. The result was not only symptomatic relief with no relapse but systemic improvement in overall well-being.

Conclusion

This case highlights the efficacy of individualized homoeopathic treatment in managing chronic varicose ulcers. With strategic remedy selection and timely follow-up, complete healing was achieved without recurrence for a considerable period. Homoeopathy stands as a holistic and sustainable approach for chronic venous pathologies.

Declaration

Patients consent was obtained for the use of clinical data and images in this report.

Conflict of interest

Not available

Financial support

Not available

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