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A case of adenomyomatosis of gall bladder treated with homoeopathy: A case report

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Abstract

Adenomyomatosis of the gallbladder (ADM) is a benign condition, most often discovered incidentally on imaging or following cholecystectomy. The pathological hallmark is a thickened gallbladder wall with Rokitsky–Aschoff sinuses (RAS). ADM generally requires no specific treatment; however, surgical intervention may be indicated when the condition is symptomatic, with or without associated cholecystolithiasis⁽¹⁾ Homoeopathy has a great role for various pathological advanced cases. It is a case of 35 years female patient had complaint of rt. Hypochondriac pain radiating to lower abdomen, and heavy menstrual bleeding at every cycle. She came with diagnosis of Adenomyomatosis of gall bladder with fatty liver and bulky uterus with intramural fibroids. Case was successfully treated with homoeopathic remedy *Calcarea carbonica* on the basis of constitutional approach.

Keywords: Adenomyomatosis, gall-bladder, *Calcarea carbonica*, Homoeopathy

Introduction

Adenomyomatosis of the gallbladder (ADM) is a benign condition, most often discovered incidentally on imaging or following cholecystectomy. The pathological hallmark is a thickened gallbladder wall with Rokitsky–Aschoff sinuses (RAS)⁽¹⁾.

Clinical findings, diagnosis and treatment

Adenomyomatosis of the gallbladder is usually an incidental finding most often during abdominal imaging (like ultrasound, CT, or MRCP) or after histopathological examination post-cholecystectomy⁽²⁾.

Symptoms: Most patients are asymptomatic, but some may report right upper quadrant abdominal pain, nausea, or dyspeptic symptoms that mimic gallstones.

Imaging: Ultrasound may show gallbladder wall thickening and intramural cystic spaces (Rokitansky-Aschoff sinuses). MRI/Cholangio-MRI is particularly useful for diagnosis⁽²⁾.

Clinical course: It's a benign condition and does not have malignant potential, but differentiation from gallbladder carcinoma is important⁽²⁾.

Treatment: Usually no intervention if asymptomatic. Symptomatic cases (especially with coexisting gallstones) may be treated with cholecystectomy.

Patient Information

A 35 yrs. Old female patient diagnosed with Focal Adenomyomatosis of gallbladder, mild hepatomegaly and intramural fibroids of uterus. Patient was not on treatment of any medication after diagnosis for 3-4 month as she did not have any symptoms. She called on telephone when she started with the symptoms of right hypochondriac pain radiating to lower abdomen, and heavy menstrual bleeding at every cycle with clots on second day of cycle. Her abdominal pain aggravated by drinking Tea, fatty and oily food. She had pain during stool. She had history of constipation, hemorrhoids. She also suffered from dry cough on and off as she mentioned about past history of Asthma. She had family history of Asthma, Diabetes mellitus to her father and brother with asthma.

Physical generals

Patient was obese with weight 76kg and height 5.2 inch. Her appetite was normal. Desire for sweet and piquant food. She had dreams of dark, ghost, body parts separated. She had constipation hard stool, no urge for many time. She had perspiration which was profuse on

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head and chest. Thermally she was chilly patient.

Mental generals

She was mild in nature. Didn't express anger as fear of hurting that person. Could not take decision by herself wants someone for that even when went to outside. Fear that something happen to family members, husband. Fear that someone takes advantage of my weakness especially in laws. Anxiety for future of child.

Clinical Findings

USG Report- Mild hepatomegaly, focal adenomyomatosis of gallbladder, bulky uterus with intramural fibroid and cervicitis.

Blood reports were normal.

Totality of Symptoms

Totality was formed by analyzing case, considered peculiar, characteristics, mental generals and physical generals. This process was accompanied by repertorisation with computer software RADAR 10.0. Symptoms considered for totality were-

1. Fear that something happen to family members, husband
2. Anxiety about future
3. Desire for Sweet
4. Constipation
5. Profuse perspiration on Scalp, Occipital region
6. Obese lady
7. Pain in right Hypochondriac region

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Image 1: Repertory sheet

Prescription

On the basis of totality of symptom, reportorial work with RADAR 10.0, remedy prescribed to patient was Calcarea

carbonica 30 c potency single dose. Follow ups taken after every one month.

Follow up

| Sr. No. | Date | Symptoms | Prescription |
|---------|-----------|--|---|
| 1. | 5/3/2021 | Fear that something happen to family members, husband Anxiety about future Desire for Sweet Constipation Profuse perspiration on Scalp, Occipital region Obese lady Pain in right Hypochondriac region | Calcarea carbonica 30 C Single dose |
| 2. | 10/4/2021 | Weight loss 2 kg pain reduced 60% in right hypochondriac region | Calcarea carb 30 single dose Sac lac |
| 3. | 12/6/2021 | No pain at all Feeling fresh, energetic No worries about future, can takes decision with herself | Sac lac |
| 4. | 27/7/2021 | USG REPORT- No focal Adenomyomatosis of gallbladder resolves completely. No bulky uterus with size of fibroid reduced, and no cervicitis observed. | Sac lac |

Images Before and after Homoeopathic treatment

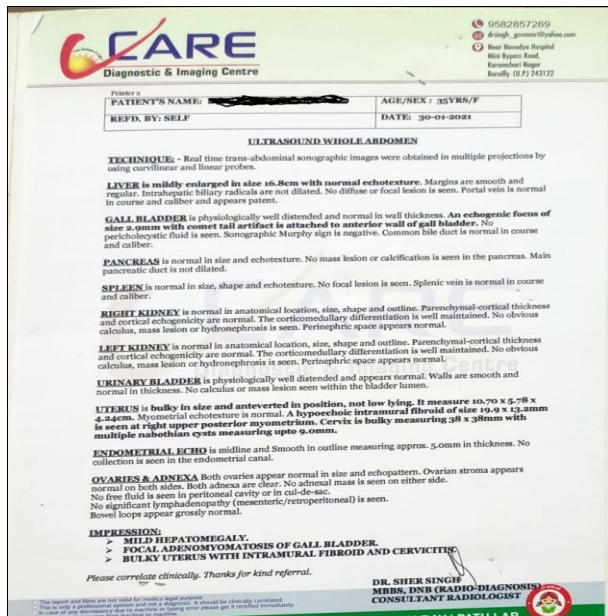
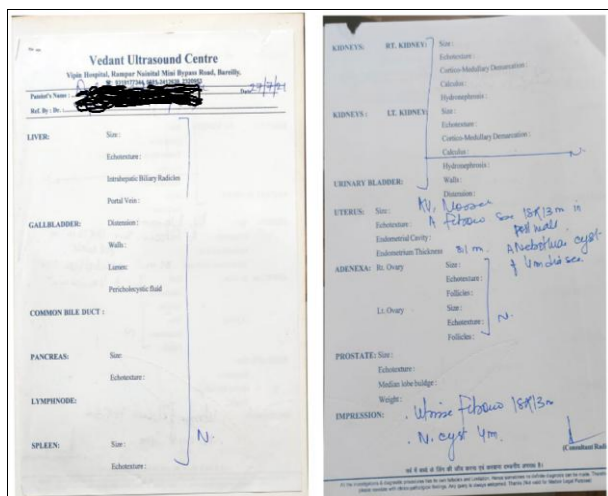


Image 2: Before Treatment



After Treatment

Conflict of Interest

Not available

Financial Support

Not available

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