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Case evidence of non-invasive homeopathic intervention in chronic meibomian Cyst

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Abstract
Background: Chalazion is a chronic, non- infective inflammation of the meibomian gland commonly managed through surgical excision in conventional practice. However, surgery often leads to recurrence or scarring. This report illustrates the successful non-surgical management of a chalazion through individualized homeopathic treatment.
Case summary: A 22 years old young boy presented with a painless swelling over the upper right eye lid for three months, progressively increasing in size despite allopathic treatment. He was advised for surgical removal but sought homeopathic management due to fear of surgery. Based on a thorough case analysis, Calcarea Carbonica 200C was prescribed, followed by placebo. The swelling and redness subsided completely within one month without recurrence.
Conclusion: This case highlights the efficacy of individualised homeopathic treatment in benign glandular conditions such as chalazion, emphasizing the importance of holistic assessment, miasmatic understanding, and individualized prescription.

Keywords: Meibomian cyst, chalazion, homoeopathy, calcarea carbonium, case report

Introduction
Chalazion is a chronic granulomatous inflammation of the meibomian gland caused by blockage of its duct, resulting in a firm, painless eyelid nodule.[1] Conventional management involves incision and curettage or corticosteroid injection, but recurrence is frequent [1, 4]. Homeopathy provides a non-invasive and holistic approach, addressing both local pathology and constitutional susceptibility [2, 5]. This case demonstrates the role of individualized homeopathic management in resolving a chalazion without surgical intervention.

Case Presentation
A 22-year-old young boy presented with a painless swelling over the right upper eye lid for three months. The swelling had gradually increased in size and mild redness around swelling was noticed. While conventional treatment was going on it was reducing in size and again reversing back. The patient had been advised surgical removal after 3 months of conventional treatment but sought homeopathic treatment out of fear of surgery.

Family History
Father-Hypertension; Mother and brother-Healthy

Personal History
Well-built, mixed diet, good appetite, desire for cold drinks, profuse scalp perspiration, sound sleep, chilly disposition.

Mentals
The patient was anxious and fearful regarding surgery. He expressed concern that "something bad might happen" and shared fear after hearing about a relative's post-operative complications. Anticipatory anxiety and sensitivity to perceived danger was observed.

Physical Examination
Genera examination revealed an afebrile, well-oriented patient with pulse 77 bpm, respiratory rate 15/min, and BP 120/80 MM Hg.

No pallor, cyanosis, oedema, or lymphadenopathy was noted. Locally, a firm, non-tender, immobile nodule less than 1 cm was seen on the right upper eye lid without erythema or discharge [1]. [See below figure No. 1]

Diagnostic Interventions

Diagnosis of chalazion was primarily clinical based on a firm, painless eyelid nodule with intact overlying skin and absence of tenderness or discharge. Eyelid eversion showed a greyish discoloration on the tarsal conjunctival surface, characteristic of meibomian gland obstruction. Differential diagnosis such as stye (acute painful inflammation) and blepharitis (diffuse margin inflammation) were excluded [1].

Totality of symptoms

The totality includes

1. Fear of surgery
2. Fear after hearing other's surgical experiences
3. Desire for cold drinks
4. Profuse perspiration on scalp
5. Swelling over right eye lid

Intervention

Based on individualization, a single medicine was prescribed using the homeopathic approach. The Synthesis repertory app was used for repertorising the case and the final reference was taken from homeopathic Materia medica books. Homeopathic medicine Calcarea Carbonium 200C potency was administered every 4 pills to be taken twice for 3 days initially.

Repertory Sheet [6]

Synthesis app - Clipboard [Chalazion]

[K] = Kuenzli dot.

1 MIND - FEAR - happen, something will

2 MIND - HORRIBLE things, sad stories affect her profoundly

3 HEAD - PERSPIRATION of scalp

4 EYE - TUMORS - Lids- nodules in the lids [K]

5 GENERALS - FOOD and DRINKS - cold drink, cold water - desire

Remedies	Sum Sym	Sum Deg	Symptoms
calc.	5	13	1,2,3,4,5
caust.	5	10	1,2,3,4,5
sep.	5	10	1,2,3,4,5
sulph.	5	7	1,2,3,4,5
zinc.	5	6	1,2,3,4,5
phos.	4	11	1,2,3,5
lyc.	4	8	1,2,3,5
sil.	4	8	2,3,4,5
ars.	4	7	1,2,3,5
cimic.	4	7	1,2,3,5
coloc.	4	7	1,2,3,5
nux-v.	4	7	1,2,3,5
puls.	4	7	2,3,4,5
thuj.	4	7	2,3,4,5
alum.	4	6	1,2,4,5
calc-s.	4	6	1,2,3,5
carb-v.	4	6	1,2,3,5
graph.	4	6	1,3,4,5

Time line including follow up of the case

Day	Observation	Prescription	Justification
Day 1	Baseline- firm, painless swelling with mild redness	Calcarea Carbonium 200C, 4 pills BD × 3 days; Rubrum 200 TDS × 15 days	First prescription
Day 15	Swelling reduced by 20-30%; redness reduced	Rubrum200- 4 pills TDS × 15 days	Improvement noted
Day 30	Swelling reduced by 90%; redness disappeared	Rubrum200- 4 pills TDS × 15 days	Complete resolution

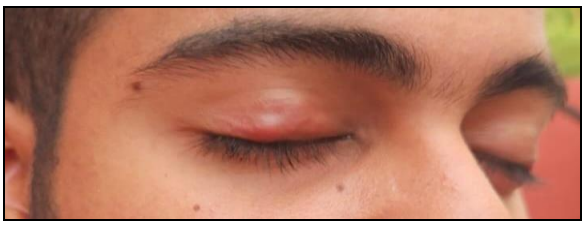

Fig 1: Before treatment

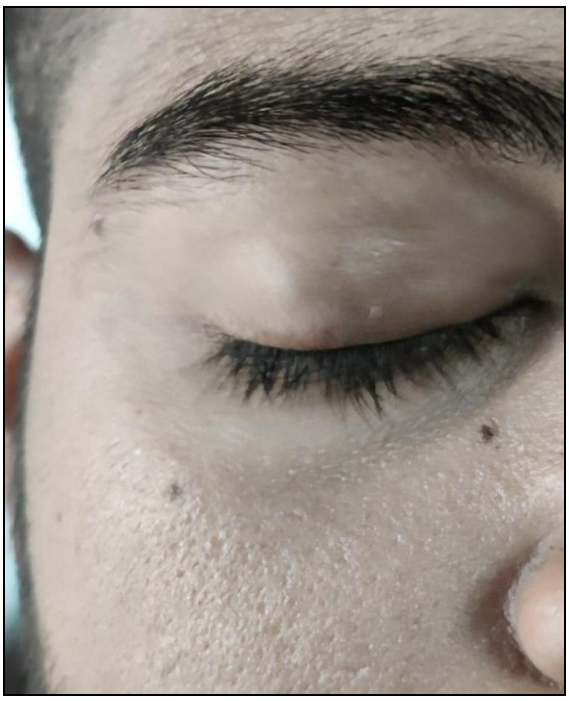

Fig 2: After One-Month Treatment

Outcome

Significant reduction in swelling and redness was noted within one month [See above figure No.2]. The patient was relieved and reported increased confidence. No recurrence occurred during follow-up. Similar outcomes have been noted in previous case reports of homeopathic management of meibomian cyst [7, 8].

Discussion

This case highlights the efficacy of individualized homeopathic treatment in chronic glandular affections. Calcarea Carbonica was chosen based on constitutional similarity. The miasmatic diagnosis was predominantly sycotic, which corresponds to slow, recurrent glandular swellings.[9] Homeopathic management addressed both local pathology and underlying susceptibility, preventing recurrence.[10]

Conclusion

Individualized homeopathic prescription can serve as a safe, effective and non-invasive alternative for manging chalazion. The constitutional approach guided by totality and miasmatic evaluation promotes lasting recovery with no recurrence.

Conflict of Interest
Not available

Financial Support
Not available

References

1. Kanski JJ, Bowling B, Nischal KK, Pearson A. Clinical ophthalmology: A systematic approach. Edinburgh: Elsevier/Saunders; c2011.
2. Hahnemann S. Organon of Medicine. 6th ed. New Delhi: B. Jain Publishers; c2002.
3. Kent JT. Lectures on Homeopathic Philosophy. New Delhi: B. Jain Publishers; c2003.
4. Yanoff M, Duker JS. Ophthalmology. 5th ed. Philadelphia: Elsevier; 2019.
5. Boericke W. Pocket Manual of Homoeopathic Materia Medica. New Delhi: B. Jain Publishers; c2010.
6. What's New with Radar Opus Homeopathy Software? [Internet]. Archibel.com. 2024 [cited 2025 Mar 26]. Available from: $\text{https://www.archibel.com}$
7. Nayak C, Singh R, Choudhury S, Ganguly D, Mandal U, Saha U, *et al*. Non-surgical management of chalazion with individualized homeopathy: A case series. Indian J Res Homoeopathy. 2017;11(3):188–193.
8. Dey S, Sharma A. A case report on homeopathic management of recurrent chalazion. Int J Homoeopath Sci. 2021;5(2):45–48.
9. Allen TF. The Chronic Miasms: Psora, Sycosis, Syphilis. New Delhi: B. Jain Publishers; c2007.
10. Roberts HA. The Principles and Art of Cure by Homoeopathy. Reprint ed. New Delhi: B. Jain Publishers (P) Ltd; c2003.

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