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Case report of infected sebaceous cyst advised surgery treated with homoeopathic medicine

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Abstract

Sebaceous cysts are non-cancerous, closed sacs under the skin filled with a cheese-like or oily material. They often arise from swollen hair follicles and can occur anywhere on the body except the palms and soles. Common sites include the scalp, ears, back, face, and upper arms. These cysts are generally smooth, round, and movable under the skin. If left untreated, they can become infected or inflamed, leading to discomfort or cosmetic concerns.

Case summary: This is the case of a 72 years old male with sebaceous cyst. The case presented here is from OPD -6 of Government Homoeopathic medical college and Hospital, Trivandrum, Kerala. The patient was treated with individualized homoeopathic Medicine over a period of 7 days. There was significant improvement with homoeopathic treatment, with complete reduction of cyst.

Keywords: Silicea terra, homoeopathy, sebaceous cyst, homoeopathic medicine

Introduction

History

A 72 years old male with sebaceous cyst over the thoracic vertebrae (T_1-T_3) for 30 years reported in OPD -6 of Government Homoeopathic medical college and Hospital, Trivandrum, Kerala. Case of cyst in the thoracic area (T₁-T₃) for 30 years as year passes cyst started increasing in size. Since last week a redness appeared in the surrounding area of cyst with pus discharge so consulted general surgeon in Medical College Trivandrum and he advised for surgery. So, he came to homoeopathic treatment. There was no family history of similar complaints or any cystic conditions.

On applying pressure cyst is tender. There is no history of bleeding from lump, radiation of pain or fever.

No relevant past illness and family history.

Clinical findings

He is very cheerful and optimistic. During his case taking, he mentioned to have regular appetite and thirst, with regular bowel habit and bladder habits. He had desires for banana and egg, perspired generalized and his thermal reaction was hot. The patient has given his consent for his images and other clinical information.

He is moderately built and nourished with no signs of pallor, cyanosis, lymphadenopathy, icterus, clubbing and oedema. His Temperature was Afebrile at the time of examination, Blood pressure was 140/90 mmhg, pulse rate was 68 beats per minute.

On local examination of thoracic area cyst is with redness with local rise of temperature and on applying pressure patient experience pain and pus discharge from cyst and transillumination test came negative.

The following characteristic symptoms were considered for repertorisation:-

- A cyst in the upper back with a central punctum.
- Repertorisation was done using Boger Boenninghausen's characteristics and repertory.

BBCR

Skin & Exterior Body-Wens

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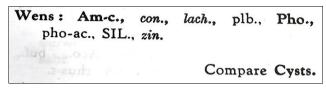


Fig 1: BBCR-skin & exterior body-wens PG. No: 978

5'-SIL 4'-Am-c, Phos 3'-con, lach, zin 2'-plb, pho-ac

Intervention

- **First prescription:** On 27 February 2025, *Silicea terra 30C*, once a day for 7 days.
- Basis of prescription: Medicine selected on the basis

of pathological symptom totality and in consultation with *Materia Medica* was *Silicea terra*. *Silicea terra* 30C, once a day for 7 days, was prescribed.

Follow up -06/03/2025

- Pain and redness reduced over the cyst.
- Pus is completely drained from the cyst and cyst area is washed with 0.9% Normal saline and tight bandage is applied.

Results

The cyst on the thoracic area (T1-T3) is completely reduced after drainage of pus. *Silicea terra* 30C showed improvement. Cyst completely disappeared within a period of 7 days of homoeopathic treatment where it was advised of surgery.

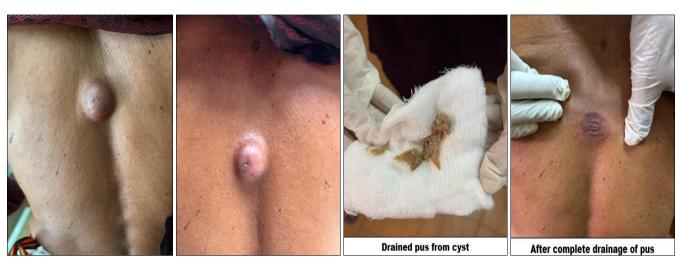


Fig 2: 27/02/2025

Fig 3: 06/03/2025 at 10:00 AM

Fig 4: 06/03/2025 at 10:15 AM **F**:

Fig 5: 06/03/2025 at 10: 30 AM

Conclusion

This case demonstrates the effectiveness of individualized homoeopathic management in treating a long-standing sebaceous cyst without surgical intervention. The patient showed significant improvement within seven days, with complete resolution of redness, pain, pus discharge, and eventual disappearance of the cyst following treatment with *Silicea terra* 30C. This highlights the potential of homoeopathy as a safe, minimally invasive, and cost-effective therapeutic option for benign cystic lesions. The practical relevance of this case lies in offering an alternative to surgery for selected patients who respond well to individualized remedies. Future studies with larger sample sizes and controlled designs are recommended to further validate the role of homoeopathy in managing sebaceous cysts and similar conditions.

Conflict of Interest: Not available

Financial Support: Not available

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