



International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493

P-ISSN: 2616-4485

www.homoeopathicjournal.com

IJHS 2022; 6(2): 168-171

Received: 07-01-2022

Accepted: 15-03-2022

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Homoeopathy in a case of head injury: A case report

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DOI: <https://doi.org/10.33545/26164485.2022.v6.i2c.555>

Abstract

A head injury is any trauma to the scalp, skull or brain. Head injury can be either closed or open (penetrating). Common head injuries include concussions, skull fractures and scalp wounds. We are discussing here an emergency case of head injury having frontal pain with swelling and bruises on face associated with for 2 hours given primary care treated therapeutically first then repertorization of the case was done according to the characteristic symptoms of the case. Many medicines have been obtained after repertorization of the case including *Arnica*, *Nux vomica*, *Rhus tox*, *Aurum* etc., but the best selected medicine was found out to be *Arnica* as it scored highest and covering all the rubrics of the case.

Keywords: Head Trauma, Bruise, Abrasion, Homoeopathy, *Arnica montana*

Abbreviations

GCS- Glasgow coma scale, TBI- Traumatic Brain Injury, ESR- Erythrocyte Sedimentation Rate, RTA- Road Traffic Accident

Introduction

A head injury is a blow to the head from a force outside the body. Head injuries are common and are often the result of an accident, a fall, a sports injury, or an attack (assault). Most head injuries do not affect the brain and are unlikely to cause ongoing problems once the person recovers. When a head injury affects the brain, it may also be referred to as a traumatic brain injury (TBI). If someone has had a brain injury, it may take longer for them to recover and in some cases, they may experience long term effects. Sometimes 'head injury' and 'TBI' are both used to describe an injury that has affected someone's brain, but it is important to remember that not all head injuries cause injury to the brain ^[1].

Common symptoms of a minor head injury include: Headache, lightheadedness, vertigo, mild confusion, nausea, temporary ringing in the ears. Symptoms of a severe head injury include loss of consciousness, vomiting, seizures, abnormal eye movements, memory loss, loss of muscle control etc. The consequences and treatments vary greatly, depending on what caused the head injury and how severe it is ^[2].

Primary Injury

Primary injury includes injury upon the initial impact that causes displacement of the brain due to direct impact, rapid acceleration-deceleration, or penetration. These injuries may cause contusions, hematomas, or axonal injuries.

- Contusion (bruise on the brain parenchyma)
- Hematoma (subdural, epidural, intraparenchymal, intraventricular, and subarachnoid)
- Diffuse axonal injury (stress or damage to axons)

Secondary Injury/Secondary Neurotoxic Cascade

Secondary injury consists of the changes that occur after the initial insult. It can be due to:

- Systemic hypotension
- Hypoxia
- Increase in ICP ^[3].

Case Summary

Following is a case of RTA treated successfully with Homoeopathy. Informed consent of the patient was taken. A 28 years old male of height 5 feet 8 inches and weight 68 kgs reported to the Outpatient Department (OPD) of Chandola Homoeopathic Medical College & Hospital, Rudrapur on 16/02/2022.

Presenting Complaints

Known case of RTA (2 hours ago)
 Pain in head for 2 hours
 Location – frontal region
 Character – severe aching type
 Sensation – burning type
 < motion, mental exertion, stress
 > rest

Associated with

- Swelling in face along with pain and bruises
 Location – whole face mainly right sided
 Sensation –Sore, bruised type
 < Touch, pressure, lying on painful side.
 >Nothing specific
- Pain in whole body mainly extremities along with bruises on right knee and right arm.
 Sensation – sore, bruised type
 < lying on bed, touch, motion.
 Patient is able to walk with support.

Treatment history – Allopathic treatment.

On examination

Local examination (face): Periorbital ecchymoses (bilaterally). (Patient is unable to open his eyes mainly right eye due to swelling)
 Lacerated wound on right upper eyelid (Primary suturing done)
 Abrasion on left cheek. Swelling in whole face.
 Neurological examination:
 Current GCS Score - E_{NT}M₆V₅
 Reflexes (Superficial and deep) – Normal.
 Investigations revealed Blood Haemoglobin level was 8.4 gm% with an elevated ESR level - 26 mm/hr.

History of presenting complaints

It was a case of RTA. He was injured owing to an accident which occurred 2 hours ago. He suffered from bruises along with abrasion on the face following the accident. He complained of pain in head along with burning sensation which was aggravated by touch and mental exertion. He also complained of pain in whole body mainly in extremities which was aching in character. There was a sore, bruised sensation in whole body. The patient experienced recurrent episodes of unconsciousness with intervening period of complete consciousness within 1 hour after the accident. He suffered from lacerated wound above the right eyelid along with discharge of blood from the eyes.

He was taken to the nearest Primary health centre immediately after the accident wherein he received first aid and was discharged after 1 hour.

Past History

Typhoid fever – 1 year ago.
 (Took allopathic treatment - relief)

Physical Generals

The patient was of normal stature and lean body. He was a vegetarian; his thermal reaction was chilly. His appetite was initially good but decreased after the accident. He had thirst for large quantity at a time. Bowel movements were regular. His sleep was disturbed and unrefreshing after the accident. He was very stressed about his health. Further he was found to be lethargic and expressive on irritation.

Provisional Diagnosis

Head Injury ^[4]

Totality of Symptoms

- Answering questions correctly during unconsciousness.
- Pain in head frontal region burning type.
- Pain aggravates on motion, mental exertion and stress.
- Pain ameliorates on rest.
- Swelling on face with sore bruised sensation.
- Swelling aggravates on touch, motion, lying on bed.
- Pain in extremities with sore bruised sensation.
- Pain in extremities aggravates on touch, lying down.
- Lacerated wound on right upper eyelid.
- Bloody discharge from eyes.

Rubrics Selected

- Mind – Unconsciousness – answering correctly
- Head – Pain
- Head – Pain – burning
- Extremities – Pain – bed, in contact with
- Extremities – Pain – bed, in contact with – sore
- Eye – conjunctiva; complaints of
- Eye – Discharges - bloody

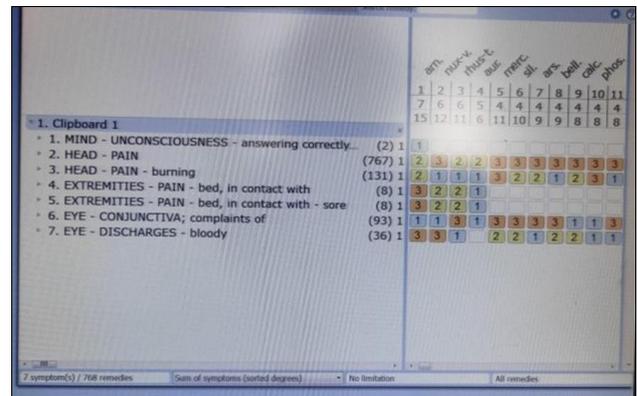


Fig 1: Repertorial Analysis

Analysis of the case

This was an emergency case which was managed by individualized homoeopathic medicine following the homoeopathic principles. The medicine was selected after observing the characteristic symptoms and making the totality. The main symptoms included in the totality were “Burning pain and swelling of the face in the head with sore bruised sensation, Pain in extremities with sore and bruised sensation, Aggravation on touch and lying down, Lacerated wound on the right eyelid, bloody discharge from eyes”. The medicine was firstly given therapeutically as the case was an emergency one with the help of materia medica then after the primary treatment repertorization was done according to the totality of the symptoms with the help of Radar Software using synthesis repertory⁵. The best selected medicine which is the simillimum of the case was *Arnica montana* with the highest score and covering all the symptoms.

Basis of prescription

Repertorisation was done of the following symptoms. Chilly patient, pain in head of burning character, pain in extremities aggravated by contact of bed, sensation of soreness in extremities, bloody discharge from eyes. (Synthesis repertory) ^[4].

After repertorisation, *Arnica montana* scored the highest rank.

The potency was selected according to the susceptibility of the patient as the patient was unconscious and though the susceptibility was high but there are certain physical injuries so the potency selected was moderate hence 200 potency was selected.

The potency selection was done on the basis of susceptibility and nature of the medicine given⁶.

1. The greater the characteristic symptoms of the drug in the case, the greater the susceptibility to the remedy and the higher the potency required.
2. Age: medium and higher potencies for children
3. Higher potencies for sensitive, intelligent persons.
4. Higher potencies for persons of intellectual or sedentary occupation and those exposed to excitement or to the continual influence of drugs.
5. In terminal conditions even the crude drugs may be required

He also writes “Different potencies act differently in different cases and individuals at different times under different conditions. All may be needed. No one potency, high or low, will meet the requirement of all cases at all times.”

First prescription (16th February, 2022)

Arnica montana 200, BD - 2 days + placebo for 7 days was given. Patient was advised to take complete bed rest to prevent further morbidity. He was instructed to eat well balanced diet and drink plenty of water. He was also asked to maintain hygiene. This case is followed upto 12/3/2022 and the treatment is still continuing.



Fig 2: Before Treatment (16/02/2022)



Fig 2: After Treatment (21/02/2022)

Table 1: Follow Up (Date-wise description of medicine)

Date	Symptoms	Medicine, potency and doses
21/2/2022	Swelling in face – decreased. Pain in head and extremities – slight relief. Bruises in periorbital region – decreased.	Placebo 30/ BD for 7 days
1/03/2022	Swelling in face – decreased. Pain in head and extremities – slight relief. Bruises in periorbital region – decreased.	Placebo 30/BD for 10 days
12/03/2022	Swelling in face – decreased. Pain in head and extremities – slight relief but still persists. Bruises in periorbital region – decreased.	<i>Arnica montana</i> 200/ BD for 2 days. Placebo 30 / BD for 10 days.

Discussion and Conclusion

As the case was an emergency type so firstly the medicine was therapeutically according to the characteristic symptoms of the patient then after the condition of the patient becomes stable repertorization was done with the help of Radar Software using Synthesis Repertory. *Arnica montana* ultimately proved to be the indicated medicine as the first prescription, going by the result of repertorization. The potency selected was 200. The patient came on regular follow ups with marked improvements in his complaints. This case has been successfully treated as the patient has been coming on regular follow ups. The treatment is still continuing and the patient is under observation period with marked improvement in patient's condition. This case was a success in the homoeopathic treatment in emergency cases with marked and progressive improvement and established the efficacy of homoeopathic medicines in such cases.

Declaration of patient consent

The authors certify that they have obtained appropriate patient consent form for his images and other clinical information to be reported in the journal. The patient understand that his name and initials will not be published and due efforts will be made to conceal his identity, but anonymity cannot be guaranteed.

Financial support and sponsorship: Nil.

Conflicts of interest: None declared.

References

1. Brain and spine foundation. Head Injury: A guide for patients and carers. ISBN 978-1-901893-75-5. [Internet] 2020. [Accessed on 20 March 2022]. Available from: <https://www.brainandspine.org.uk/wp-content/uploads/2020/02/Head-Injury-Brain-and-Spine-Foundation-2020.pdf>
2. Mayo clinic.org [Internet]. Mayo Foundation for Medical Education and Research (MFMER): 1998-2022, Traumatic Brain Injury. [Accessed on 20 March 2022]. Available from: <https://www.mayoclinic.org/diseases-conditions/traumatic-brain-injury/symptoms-causes/syc-20378557>
3. Shaikh F, Waseem M. Head Trauma. [Updated 2021

- Nov 7]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan. [Accessed on 25 March 2022]. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK430854/>
4. World Health Organisation (WHO), icd10data.com, 2022 ICD-10 -CM Diagnosis code [Internet], Geneva, Switzerland, World Health Organisation, 1993. [Accessed on 29 March 2022]. <https://www.icd10data.com/>
 5. Schroyens F. Radar 10 Homoeopathic Repertory Software. CDROM. Available: <http://www.archibel.com/radar10.html>.
 6. Close Stuart M. The Genius of Homoeopathy: Lectures and Essays on homoeopathic philosophy. Homoint.org. New York. Nanopathy, 1981. Available at <http://www.homeoint.org/books4/close/index.htm>. [Accessed on 29 march 2022].