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## Fibromyoma and its homoeopathic management

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### Abstract

Fibromyomas are an investigational findings because of some underlying benign or malignant changes in layers of uterus, which may be due to localised cause or endocrine cause. This review article throws a light on one of the causes for abnormal uterine bleeding which deteriorate the health of reproductive women. Homoeopathic medicines are quite effective in this kind of condition. A vision in assessing this condition along with Homoeopathic approach is presented in this article.

**Keywords:** Homoeopathy, leiomyoma, fibroid, bulky uterus, menorrhagia

### Introduction

Uterus is one of the pelvic organ where conception and development of human embryo takes place [1]. The Uterus normally measures about 8cms in length, 5cms in width at the fundus and its walls are about 1.25cms in thickness and it weighs about 50-80 gms [4]. Uterine fibroids are also called as Fibromyomas or Leiomyomas. Fibromyomas arise from smooth muscle cells but also contains varying amounts of fibrous tissue. These are considered as Benign Neoplasms arising from the Uterus. These are most commonly seen in women of reproductive age. Size of the tumours may vary from Peanut size to as big as size of Head of a New born. Most of the fibroids begin in Myometrium but some may also grow in Endometrium. These are the slow growing tumours which may take 3-5 years to develop [2]. Bulky uterus implies enlarged dimensions of uterus because of increased musculature which may be due to benign or malignant growth [5].

An article published by Dr. Divya Jyoti Anand GR, Dr. Mehadi Arif Hakim SK and Dr. Vignesh Kumar S; in International Journal of Homoeopathic Sciences cited that Management of Bulky Uterus with Constitutional Remedies [5].

**Prevalance [4]:** It is more prevalent in 3<sup>rd</sup> to 4<sup>th</sup> decade of life, 50% of women with Fibromyomas remain asymptomatic.

### Risk factors [3]

1. **Age:** Reproductive age (rarely before 20 and uncommon after 45).
2. **Race:** Black women.
3. **Parity:** Nulliparous, Infertile females.
4. **Diet:** Red meat and ham eaters.
5. Oestrogen Dependence.
6. Hormonal Replacement therapy.
7. Obese individuals.
8. **Others:** Recurrent attacks of PID, Diabetes, Hypertension.
9. **Genetics:** 40% of women with fibroids have abnormal chromosomes i.e., Translocation between 12 and 14 chromosomes. Deletions of 3 & 7, Trisomy 12.
10. **Hereditability:** Two times more common in monozygotic twins; relatives of women with fibroids.

### Classification

#### Body

1. Submucosal myomas.
2. Subserosal myomas.
3. Intramural myomas.

**Cervical**

1. Central.
2. Anterior.
3. Posterior.

**Pathogenesis:** <sup>[6]</sup>

Uterine Fibroids are made up of muscle tissue on the other hand there is a variable quantity of fibrous connective tissue in them as well such as collagen, fibronectin and proteoglycans, particularly in the older and larger tumors. As every uterine fibroid is monoclonal, it arises from a somatic mutation in a progenitor monocyte. During cytogenetic analysis, more than one chromosomal abnormalities have been considered in 50% of leiomyomas; the most common abnormality detected is the translocation between long arms of chromosomes 12 to 14 before the deletion on the lengthy arm of Y chromosome.

**Clinical features** <sup>[2, 3, 4]</sup>**Symptoms**

- Pain
- Infertility, recurrent abortion.
- Menstrual disturbances: Menorrhagia, Intermenstrual bleeding, Polymenorrhoea, Post-Menopausal bleeding.
- Vaginal discharge.
- Dysmenorrhoea.
- Dyspareunia.
- Pressure signs on adjoining organs like uterus, rectum and bladder.
- Dyspareunia.
- Signs-Anaemia, lump in abdomen.

**Investigations**

- CBC: Hb%, Blood grouping.
- Hysteroscopy.
- Laparoscopy.
- Hysterosalpingography.
- MRI.

**Management****General**

- Nutritious diet.
- Exercise regularly.
- Avoid stress.

**Allopathic**

- Mifepristone.
- Laparoscopy.
- Hysterectomy.

**Homeopathic Approach****Rubrics****Kent** <sup>[7]</sup>:

Genitalia-Female-Tumors-Fibroids; PG No.: 745.

**Phatak** <sup>[9]</sup>

Fibroids, PG No.: 154.

**Boericke** <sup>[8]</sup>

Female Sexual System-Haemorrhage-from fibroids, Pg no.:848.

**BBCR** <sup>[10]</sup>

Female Organs-polypi-U; PG No.: 662.

**Robin Murphy** <sup>[11]</sup>:

Female Fibroids -Genitalia-uterus; PG No.: 769.

**Homeopathic therapeutics** <sup>[8]</sup>

- **Aurum muriaticum natronatum:** This Homeopathic medicine has very good impact on female organs. It has more action over uterine tumors than any other remedy. Ossified uterus. Indurated cervix. Sensation as if uterus fills up whole pelvis.
- **Fraxinus Americana:** It is an organ remedy of first rank and indicated in uterine tumors particularly fibroids with bearing down sensation. Dr. Burnett regards it as uterine tonic in all heavy states of uterus with prolapse, bearing down and relaxed ligaments.
- **Graphites:** Menses too late along with constipation. Tearing kind of pain in the course of menstruation. Symptoms of morning illness in the course of menstruation. Induration of uterus and ovaries.
- **Thalapsi bursa pastoris:** Haemorrhage from the uterine fibroid with back ache. Haemorrhage with cramp like pains. Metorrhagia, menses too frequent and copious. Every alternate menses very profuse. Sore pain in abdomen on standing.
- **Thyroidinum:** It is also indicated in fibroids of uterus and mammary gland. Painful and irregular menstruation with pain in lower abdomen.
- **Trillium pendulum:** It is a general homoeopathic medicine with fainting and dizziness; uterine haemorrhages with sensation as if hips and back were falling to pieces; better by tight bandage. Haemorrhages from fibroids. Gushing of bright red blood on least motion. Threatened abortion with cramp like pains.
- **Ustilago:** This is indicated where there is flabby condition of uterus and hypertrophied uterus.

**Conflict of Interest**

Not available

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Not available

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