



# International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493

P-ISSN: 2616-4485

[www.homoeopathicjournal.com](http://www.homoeopathicjournal.com)

IJHS 2023; 7(4): 235-238

Received: 03-05-2023

Accepted: 13-06-2023

**Dr. Hasinur Jahan**

Assistant Professor,  
Department of Materia  
Medica, Kharagpur  
Homoeopathic Medical College  
and Hospital, West Bengal,  
India

**Dr. Bandona Gain**

Assistant Professor,  
Department of Organon of  
Medicine and Homoeopathic  
Philosophy, Metropolitan  
Homoeopathic Medical College  
and Hospital, West Bengal,  
India

**Corresponding Author:**

**Dr. Hasinur Jahan**  
Assistant Professor,  
Department of Materia  
Medica, Kharagpur  
Homoeopathic Medical College  
and Hospital, West Bengal,  
India

## A sebaceous cyst resolved by individualized homoeopathic medicine: A case report

**Dr. Hasinur Jahan and Dr. Bandona Gain**

**DOI:** <https://doi.org/10.33545/26164485.2023.v7.i4d.980>

### Abstract

Sebaceous cyst, a benign encapsulated, subepidermal nodule filled with keratin. They can occur anywhere on the body except the palms and soles. A 33 year- old- patient came had a cystic swelling for 6 months. After a thorough assessment, a individualized treatment plan was created, and the most suitable homeopathic medicine, Calcarea carbonica, was prescribed. The sebaceous cyst was successfully treated within a certain number of months with repetition as per needed. The progress was documented with photographs taken from the same angle and under similar lighting conditions during each follow-up.

**Keywords:** Sebaceous cyst, calcarea carbonica, homoeopathy, modified naranjo criteria

### Introduction

Sebaceous cyst also known as an epidermoid cyst is a non-cancerous, enclosed nodule beneath the skin's surface filled with keratin. These cysts can appear in various places, including the scrotum, genitalia, fingers, and occasionally the mouth lining, but are most commonly found on the face, neck, and trunk, excluding the palms and soles. The cyst's development is gradual and it can persist for years. They are typically observed between the ages of 30 to 40 and are rare before puberty. They are more prevalent in males than female, with a ratio of 2:1. Approximately 1% of these cysts have the potential to transform into squamous cell carcinoma (SCC) or basal cell carcinoma (BCC) <sup>[1, 2]</sup>.

Sebaceous cysts may be singular or multiple, spherical, and smooth. They have a border that gives way to pressure. Usually, there's a black spot on the swelling, known as a punctum, which is a blocked opening. It contains greasy, thick, greyish material that can be expressed under pressure. In larger cysts, an indentation may be seen at the punctum. Usually, these cysts are asymptomatic until they rupture, causing an inflammatory reaction as keratin spills into the surrounding tissue <sup>[2]</sup>.

The differential diagnosis for a sebaceous cyst depends on its location and may include pilar cyst, lipoma, abscess, neuroma, benign growths, skin cancer, metastatic cutaneous lesions, ganglion cyst, neurofibroma, dermoid cyst, brachial cleft cyst, pilonidal cyst, and calcinosis cutis <sup>[2]</sup>.

Complications can include infection, ulceration, rupture, sinus formation, calcification, carcinomatous change, cock's peculiar tumor, and sebaceous horn <sup>[2]</sup>.

The conventional treatment involves complete excision of the cyst through an elliptical incision. If infected, drainage is performed first, followed by excision after the infection subsides <sup>[1]</sup>.

Homeopathic medicines are mentioned as effective in treating skin abscesses and boils, with a lower chance of recurrence after treatment <sup>[3, 4]</sup>.

The case study aims to demonstrate the effectiveness of individualized homeopathic medicines for treating sebaceous cysts.

### Case report

A 33-year-old female patient who presented with a lump on her back for the past six months. The lump was initially hard, non-painful, and gradually increased in size, eventually becoming soft. Upon clinical examination, the swelling appeared oval, uniform, and had a regular outline with a sebaceous punctum. The patient stated she hadn't experienced any trauma or undergone any surgeries in that region.

**History of present complaints**

The patient's complaint started six months prior with a hard swelling that gradually grew. She tried allopathic medicines for four months without significant relief. When the swelling didn't respond to the medication and surgical intervention was suggested, she opted for homoeopathic treatment.

**Past History**

The patient's past history included a bout of chickenpox during childhood.

**Family History**

There were no noteworthy aspects in the family history.

**Mental generals**

Mentally, she exhibited a high level of anxiety about her health and had a fear of darkness.

**Physical generals**

Physically, she tended to feel cold, was prone to catching colds easily, had a good appetite with a thirst for 2-3 liters of water per day. She had a preference for hot food and sweets. Her tongue was slightly coated and moist, bowel movements were irregular and hard, while urine was normal. She also had a tendency to sweat excessively, especially on the face and neck.

**Local and systemic examination**

Systemic examination was normal. On local examination, the swelling maintained its oval, uniform, and regular appearance with the sebaceous punctum. There was no

tenderness, redness, or abnormal temperature in the area.

**Analysis of the case**

After analyzing the case, taking into account mental and physical symptoms, a totality was considered. The patient's mental state, thermal reaction, desire for sweets, hard and irregular stool, along with profuse perspiration, and particular symptom, were all included in this totality.

**Miasmatic Analysis of the case**

As per the detail (Table 1), a miasmatic analysis was also performed, indicating a predominantly Psoric miasm with elements of Sycotic manifestations [5].

**Table 1:** Miasmatic analysis

Symptoms	Miasmatic analysis
Anxiety about his health	Psoric
Desire for sweets	Psoric
Chilly patient	Psoric
Perspiration- profuse	Psoric
Wens	Sycotic

**Repertorization**

Repertorization was carried out using the Repertory of the homoeopathic materia medica by J.T Kent and Hompath Firefly software indicating following medicines for the case shown in the fig- 1. [6, 7]. The score from highest to lowest are as follows: Calc carb > Kali-c > Kali-ar > Nit-ac > Sulph > Bar-c etc. This process suggested potential medicines, with Calcarea carb being the highest scored remedy. Finally, Calcarea carb 1M, two doses, was prescribed after consulting Materia Medica.

Remedy Name	Calc	Kali-c	Kali-ar	Nit-ac	Sulph	Bar-c
<b>Totality / Symptom Covered</b>	<b>13 / 5</b>	<b>10 / 5</b>	<b>10 / 4</b>	<b>10 / 4</b>	<b>9 / 5</b>	<b>9 / 4</b>
[Kent] [Mind]Anxiety:Health,about: (33)	2	1	3	3	1	
[Kent] [Stomach]Desires:Sweets: (36)	2	2	1		3	1
[Kent] [Generalities]Heat:Vital,lack of: (108)	3	3	3	3	2	3
[Kent] [Perspiration]Profuse: (133)	3	3	3	2	2	2
[Kent] [Skin]Wens: (18)						

**Fig 1:** Repertorization from Hompath Firefly

**Prescription**

On dated 28/01/2022, Calcarea carb 1M, 2 doses were prescribed along with placebo for 15 days.

**Table 2:** Follow up schedule: Follow ups are presented in a tabular format along with the photographs in the following table

Visit	Present condition	Photograph	Prescription
1 <sup>st</sup> visit 28/01/2022	Hard lump on the back, non-painful, swelling appeared oval, uniform, regular outline with a sebaceous punctum. Patient had irregular hard stool.		Calcarea carb 1M, 2 doses, OD for 2 days. Placebo for 2 weeks.
2 <sup>nd</sup> visit 13/05/2022	Swelling decreased than before. No pain or tenderness was noted. Anxiety of the patient decreased than before. Stool was hard and irregular.		Calcarea carb 10M, 2 doses, OD for 2 days. Placebo for 2 weeks.
3 <sup>rd</sup> visit 26/05/2022	Swelling gradually become soft, suppuration occurred, pain and tenderness also appeared. Stool becomes regular.		Placebo for 1 month.
4 <sup>th</sup> visit 28/08/2021	The cyst started healing. No tenderness or pain left.		Placebo for 1 month.
5 <sup>th</sup> Visit 16/9/22	The cyst healed properly. Stool was regular and clear.		Placebo for 1 month.

**Table 3:** Modified Naranjo criteria <sup>[8]</sup>

Items	Yes	No	Not sure Or N/A
Was there an improvement in the main symptom or condition for which the homeopathic medicine was Prescribed?	+2		
Did the clinical improvement occur within a plausible Time frame relative to the drug intake?	+1		
Was there an initial aggravation of symptoms? (need to Define in glossary)			0
Did the effect encompass more than the main symptom or condition, i.e., were other symptoms ultimately improved or Changed?	+1		
Did overall wellbeing improve? (suggest using validated Scale)			0
(A) Direction of cure: did some symptoms improve in the Opposite order of the development of symptoms of the disease?	+1		
(B) Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms: From organs of more importance to those of less importance From deeper to more superficial aspects of the individual From the top downwards	+1		
Did "old symptoms" (defined as non-seasonal and non- cyclical symptoms that were previously thought to have Resolved) reappear temporarily during the course of Improvement?			0
Are there alternate causes (other than the medicine) that – with a high probability – could have caused the Improvement? (consider known course of disease, other forms of treatment, and other clinically relevant Interventions)		+1	
Was the health improvement confirmed by any objective Evidence? (e.g., lab test, clinical observation, etc.)	+2		
Did repeat dosing, if conducted, create similar clinical Improvement?			0

**Total score**

As the total score is '9'. So causal attribution is definite and the improvement was solely due to homeopathic medicine.

**Discussion**

We all know that treatment of sebaceous cyst in conventional treatment is only surgical excision, but there are also homeopathic medicines available for treating cystic growth. In this specific case, the homeopathic medicine *Calcarea carbonica* was prescribed based on homeopathic principles, and the cyst completely resolved within a certain timeframe. The final causal attribution score in this case was assessed using the Modified Naranjo Criteria, as proposed by the HPUS Clinical data Working Group, June 2014. The total score was 9, thus suggesting a 'definite' association between the medicine and the positive outcome (definite:  $\geq 9$ ; probable 5-8; possible 1-4; and doubtful  $\leq 0$ ). The paragraph concludes by recommending further case studies and randomized trials to evaluate the effectiveness of individualized homeopathic medicines in treating sebaceous cysts.

**Conclusion**

Homeopathic medicine, chosen based on a comprehensive assessment of symptoms, demonstrated a promising treatment effect in sebaceous cysts. This case also highlights the importance of tailoring treatment to each individual in homeopathy. While a study of a single case may not establish a definitive conclusion, the results are encouraging. Further research in these cases could generate more interest and consideration towards using homeopathic medicine as a preferred treatment option for patients.

**Acknowledgement**

Authors are grateful to the patient for her active cooperation and participation.

**Declaration of patient consent**

The patient has provided consent in the form for her images and other clinical information to be included in the journal. The patient is aware that her name and initials will not be disclosed, and every attempt will be made to protect her identity. However, complete anonymity cannot be assured.

**Financial support and sponsorship**

None.

**Conflicts of interest**

None declared.

**References**

- Zito PM, Scharf R. Cyst, Epidermoid (Sebaceous Cyst) [Updated 2021 Aug 11]. Stat Pearls [Internet]. Treasure Island (FL): Stat Pearls Publishing, Available from, 2019 Jan. <http://www.ncbi.nlm.nih.gov/books/NBK499974>.
- Gupta GN, Yadav AK, Monika. Individualize Homoeopathic Treatment of Sebaceous Cyst: A case report. International Journal of Homoeopathic Sciences. 2022;6(4):461- 463.
- Allen HC. Keynotes and Characteristics with Comparisons of Some of the Leading Remedies of the Materia Medica with Bowel Nosodes. 10<sup>th</sup> Impression. New Delhi: B. Jain Publishers (P) Ltd; c2011.
- Boericke W. Boericke's New Manual of Homoeopathic Materia Medica with Repertory. 30<sup>th</sup> Impression. New Delhi: B. Jain Publishers (P) Ltd; 2012.
- Speight P. A Comparison of the Chronic Miasms.
- Kent JT. Repertory of the Homoeopathic Materia Medica. 6<sup>th</sup> American ed. New Delhi: B Jain Publishers (P) Ltd; c2017.
- Homopath firefly. V 5.0.0
- Haselen RAV. Homoeopathic clinical case reports: Development of a supplement (HOM CASE) to the CARE clinical case reporting Guideline. Complementary therapies in medicine. 2016;25:78-85.

**How to Cite This Article**

Jahan H, Gain B. A sebaceous cyst resolved by individualized homeopathic medicine: A case report. International Journal of Homoeopathic Sciences. 2023;7(4):235-238.

**Creative Commons (CC) License**

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0) License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.