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Role of individualized homoeopathic medicine on varicose veins: A case report

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Abstract

Varicose veins are tortuous, enlarged veins which are commonlyoccur in lower extremities. Itis generally a benign condition and its etiology is not properly known. Varicose Veins (VV) are very common in India, more than 10 million people suffers from VV every year. In western world, this incidence occurs in 10-20% of population.

Case Summary: A 56 years old married female visited my clinic with complain of pain & swelling (left leg is more prominent than right leg) with tortuosity of veins of lower extremities for 2 years. She is also suffering from type 2 Diabetes Mellitus for last 15 years and Hypertension for last 5 years and used to take allopathic medication for that. She was successfully treated with the individualized homoeopathic medicine within a period of 4 months and showed significant improvement in physical and mental health.

Keywords: Varicose veins, homoeopathy, Monarch, Pulsatilla nigricans

Introduction

Varicose veins cause a great deal of morbidity in our population today. They affect 10–20% of population in the Western world and in India, it is 5% ^[1]. Varicose veins (VV) are dilated, tortuous subcutaneous veins that permit reverse flow. They are most commonly found in the lower limb and may be primary, or secondary to deep veins ^[2]. There is reversal of blood flow through its faulty valves. It is permanently elongated, dilated vein/veins with tortuous path causing pathological circulation. There are certain risk factors like heredity; female sex; occupation that demands prolonged standing; immobility; raised intra-abdominal pressure like in sports, tight clothing, pregnancy, raised progesterone level and altered estrogen-progesterone ratio, chronic constipation, high heels^[3].

Category	Risk Factor	Proposed Mechanism			
Hormonal	Female gender	High estrogen state			
Lifestyle	Prolonged standing and/or sitting	Venous hypertension			
	Smoking	Venous endothelial injury			
	Obesity	Venous hypertension			
	Pregnancy	High estrogen state Venous hypertension			
Acquired	Deep vein thrombosis	Deep venous obstruction Venous valvular			
	Deep veni thrombosis	incompetence			
	Age	Venous valvular incompetence			
	Family history	Venous valvular incompetence			
Inherited	Tall height	Venous hypertension			
	Congenital syndromes	Venous valvular incompetence Venous			
	Congenital syndromes	hypertension Deep venous obstruction			

Table 1: Risk Factors for Varicose Veins [4]

Pathophysiology

Varicose veins are a common condition caused by weak or damaged vein walls and valves. Veins have one-way valves inside them that open and close to keep blood flowing toward the heart. Weak or damaged valves or walls in the veins can cause blood to pool and even flow backward. This is called reflux. The veins may grow larger and become distorted ^[4].

Venous hypertension, venous valvular incompetence, structural changes in the vein wall, inflammation, and alterations in shear stress are the major pathophysiological mechanisms resulting in varicose veins. Venous hypertension is caused by reflux attributable to venous valvular incompetence, venous outflow obstruction, or calfmuscle pump failure^[6].

In modern medicine, varicose veins are treated with selfcare, and Compression stockings. There are some surgical procedures like Sclerotherapy, Laser treatment, Catheterbased procedures using radiofrequency or laser energy, High ligation and vein stripping, Ambulatory phlebectomy ^[7]. All this kind of treatment procedures are not so affordable to middle-class people and also expensive.

However, this holistic method of treatment can offer mild, gentle and safe treatment for patients suffering from VV. In homoeopathic literature there are several medicines for varicose veins namely Hamamelis, Calcarea carbonica, Graphites, Arnica montana, Lachesis, Sepia, Fluorium acidum, Carbo vegetabilis, Bellis perennis, Aesculus hippocastanum etc.^[8].

Case Report

A 56 years old married female visited in my clinic with a complain of pain & swelling of both legs (left leg is more prominent than right leg) with tortuosity of veins of lower extremities for 2 years. She had heaviness in leg and couldn't go upstairs for long time. She was also suffering from type 2 Diabetes Mellitus since last 15 years and Hypertension for 5 years and used to take Allopathic medication. When she came to me. I found profound disappointment on her face because she was failed out from all sorts of treatment. Later I was clearly understood the reason behind her present mental situation when she was thoroughly interrogated.

She had an attack of Bell's Palsy in 2011 & 2022.Her father died due to CVA, 25 years ago and her mother died due to CKD, 4 years ago. Her brother & sister are suffering from Alzheimer's disease and Carcinoma in breast respectively.

Physical General

She had a strong desire for cold food with thirstless. Profuse perspiration at face but not offensive, becomes restless due to hot weather.

Particular Symptoms

Heaviness of legs. Varicose veins with blue in appearance.

Mental Symptoms

She was suffering from grief and sadness after losing her parents. Thereafter she became verymorose, irritableand frequent mood swing occurred.

Analysis & Evaluation of symptoms

- Heaviness of legs. 1
- Varicose veins with blue in appearance. 2.
- 3. Desire for cold food.
- 4. Thirstless.
- Profuse perspiration. 5.
- Hot patient. 6.
- 7. Morose.
- 8. Changeable mood.
- 9. Grief.
- 10. Irritable.

Totality of Symptoms

- Heaviness of legs. 1
- 2. Varicose veins with blue in appearance.
- 3. Desire for cold food.
- 4. Thirstless.
- 5. Profuse perspiration.
- Hot patient. 6.
- 7. Morose.
- 8. Changeable mood.
- 9. Grief.
- 10. Irritable.

Miasmatic Analysis

Table 2: Miasmatic evaluation of all the presenting symptom, which showed the predominance of Psoric miasm

Symptoms/ rubrics	Miasm			
1) Heaviness of legs.	Sycosis.			
2) Varicose veins with blue	Psoric			
in appearance.	F SOLC.			
3) Desire for cold food.	Syphilis.			
4) Thirstless.	Sycosis.			
5) Profuse perspiration.	Psoric.			
6) Hot patient.	Psoric.			
7) Morose.	Syphilitic.			
8) Changeable mood.	Psoric.			
9) Grief.	Psoric.			
10) Irritable.	Psoric.			
	It was a tri miasmatic case and			
Analysis.	psoric miasm was			
	predominant.			

Repertorial totality

Symptoms are converted into rubrics. The following rubrics are -

- 1) Heaviness of legs.
- Varicose veins with blue in appearance. 2)
- 3) Desire for cold food.
- 4) Thirstless.
- 5) Profuse perspiration.
- 6) Hot patient.
- 7) Morose.
- 8) Changeable mood.
- 9) Grief.
- 10) Irritable.

Repertorial sheet: (fig-1)

Remedy	Puls	Lyc	Nat-m	Phos	Ph-ac	Merc	Nux-v	Bry	Caust	Ars	Sulph
Totality	25	22	17	17	17	16	16	15	14	14	14
Symptoms Covered	9	9	8	8	7	7	7	7	8	7	7
Kingdom	Plants	Plants	Minerals	Minerals	Minerals	Minerals	Plants	Plants	Minerals	Minerals	Minerals
[Kent] [Mind]GRIEF: (32)	3	2	3		2	2	2		3	1	
[Kent] [Mind]IRRITABILITY (SEE ANGER): (245)	3	3	3	3	3	2	3	3	3	2	3
[Kent] [Mind]MOOD:Changeable, variable, etc.: (93)	3	3	1	1		2		1	1	2	1
[Kent] [Mind]MOROSE: (75)	3	2		2	2	2	3	3	1		2
[Kent] [Generalities]HEAT:Sensation of: (86)	3	3	3	2	1	2	2	1	1	1	3
[Kent] [Generalities]VARICOSE VEINS:Blue: (2)											
[Kent] [Perspiration]PROFUSE: (133)	2	3	3	2	3	3	2	3	2	3	2
[Kent] [Stomach]DESIRES:Cold :Food: (14)	3	2	1	3							
[Kent] [Stomach]THIRSTLESS: (87)	3	2	1	1	3		1	1	1	2	1
[Kent] [Extremities]HEAVINESS,TIRED LIMBS: (120)	2	2	2	3	3	3	3	3	2	3	2

Reportorial analysis

Considering the above-mentioned totality of symptoms, reportorial analysis was done using Zomeo elite software and Kent's repertory was preferred. The repertorisation chart is given in fig-1^[9].

Intervention

First prescription: On 30th march, 2023, Pulsatilla nigricans

Follow-ups and outcomes

200C was prescribed once a day for consecutive 4days at early morning in empty stomach with placebo for 1 month.

Basis of prescription: Pulsatilla nigricans was selected on the basis of individualization, totality of symptoms and in consultation with *Materia Medica* and repertory. On subsequent follow ups potency was changed based on the assessment of improvement of varicosity of both legs.

Table 3: Follow up of the patients was assess monthly. The date wise detailed follow-ups are given

Time line including follow-up of the case								
Date	Symptoms	Medicine with doses, repetition	Justification					
	Changes found in varicose veins of both legs	Sac Lac 200C/30days to be	As there were slight changes observe along with					
3/05/2023	and patient'smental condition also improved.	taken once a day.	mental calmness.					
	Changes in varicose veins was in standstill	Pulsatilla nigricans	As there were no new symptoms with persistence					
8/06/2023	position. No subjective or observable	1M/3dose/once a day in	of previous complain at same stage, same medicine					
8/00/2023	improvement was noticed.	consecutive three days.	with higher potency repeated.					
5	Changes found in varicose veins of both legs	Sac Lac 200C/30days. To be	As there were new changes observed along with					
30/06/2023	and patient becomes less irritable.	taken once a day.	improvement of mental symptoms.					
	Marked changes occur in varicosityand the	Sac Lac 200C/30days to be	Marked improvement observed					
15/07/2023	patient mentally feels better.	taken once a day.	Warked improvement observed					
	Varicosity of both legs were absent and	Sac Lac 200C/30days to be	Complete disappearance of varicosity in both legs.					
05/08/2023	patient feels relaxed after healing.	taken once a day.	Complete disappearance of varicosity in both legs.					

Pictures of patient at various stages of treatment



Fig 1: (30.03.2023)

After treatment



Fig 3: (08.06.2023)

Fig 4: (05.08.2023)

Domains	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 √	-1	0
Did the clinical improvement occur within a plausible time frame relative to the drug intake?	$^{+1}_{\checkmark}$	-2	0
Was there an initial aggravation of symptoms?	+1	0√	0
Did the effected compass more than the main symptom or condition (i.e., were other symptoms ultimately improved or changed)?	$^{+1}_{\checkmark}$	0	0
Did overall well-being improve? (suggest using a validated scale)	$^{+1}_{\checkmark}$	0	0
A. Direction of cure: did some symptoms improve in the opposite order of the development of symptoms of the disease?	+1	0	0
B. Direction of cure: did at least two of the following aspects apply to the order of improvement of symptoms:	+1	0	0

Table 4: Modified Naranjo Criteria

-from organs of more importance to those of less importance?			
-from deeper to more superficial aspects of the individual?			
-from the top downwards?			
Did "old symptoms" (defined as non-seasonal and non-cyclical symptoms that were previously thought to	+1	0	0
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		. 1	0
improvement? (Consider known course of disease, other forms of treatment, and other clinically relevant	-3	+1	0
interventions)			N
Was the health improvement confirmed by any objective evidence? (e.g., laboratory test, clinical observation,	+2	0	0
etc.)		0	0
	+1	0	0
Did repeat dosing, if conducted, create similar clinical improvement?		0	0
Total score			+8

Score +8 in MONARCH reveals positive correlation among the medicine given and improvement.

Discussion

The patient presenting with varicose veins in both lower legs with bluish appearance and could not go upstairs for long time as there was heaviness in both legs. She was also suffering from Hypertension and Type 2 Diabetes Mellitus for long time. Also, she had family history of Cardiovascular accident and chronic kidney disease. This case was treated with individualized homoeopathic medicine and showed complete disappearance of varicosity of veins in both legs. There are several medicines mentioned in homoeopathic Materia Medica for treatment of varicose veins. In this case, after thorough analysis and history tacking, repertorisation and consultation with homoeopathic Materia Medica, Pulsatilla nigricans was prescribed. The patient showed initial improvement first, marked improvement found when higher potency of Pulsatilla nigricans was administered. The patient was very much satisfied with the treatment. She felt very happy both mentally and physically. Possible causal attribution was calculated by Modified Naranjo Criteria (MONARCH) assessment (Table-4). This case shows the effective role of homoeopathic medicine in treating VV when prescribed on the basis of homoeopathic principles.

Conclusion

Homoeopathy is an individualized, holistic system of medicine. It treats the patients as a whole, not just only remove the symptoms. It's "*Similia Similibus Curentur*" theory showed significant improvement in the treatment of Varicose Veins. And this case is documentary evidence [Fig.1-4], how Homoeopathic medicines can effect cure of surgical conditions like VV through conservative non-invasive treatment procedures. However, this is a single case study showing positivity of homoeopathic medicines, further large scale study should be taken up for scientific validation of results.

Declaration of patient consent

The authors certify that they have obtained appropriate patient consent form. In the form the patient has given her consent for her images and other clinical information to be reported in the journal. The patient understand that her name and initials will not be published and due efforts will be made to conceal her identity.

Conflict of Interest: None.

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