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# Homoeopathic Management of Endometriosis: A Case Report

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#### **Abstract:**

Endometriosis is a chronic condition in which tissue similar to the lining of the uterus, known as endometrium, grows outside of the uterus. This can cause pain, inflammation and formation of adhesions. The common symptoms include pelvic pain, painful periods, heavy bleeding, dyspareunia and infertility. The cause of endometriosis is not fully understood but it is thought to be related to hormonal imbalances and genetics. Methods of treatment include medication, hormonal therapy and surgery. Homoeopathy is a holistic system of medicine which works on the principle of 'like cures like'. The present case report depicts a case of 26 years old female patient suffering from heavy menstrual bleeding and pain during menses. Based on the totality of symptoms, individualized homoeopathic medicine Pulsatilla 200C was prescribed and the patient was recovered.

**Keywords:** Case report, Endometriosis, Homoeopathy, Individualized homoeopathic medicine

## INTRODUCTION

According to WHO, 10% of all girls and women of reproductive age are affected by endometriosis globally. Endometriosis word is derived from Greek in which endo means 'inside', metra means 'uterus' and osis meaning 'disease'. It is a condition of the female reproductive system, in which endometrium like tissue grows outside the uterus; it typically affects the ovaries and peritoneum and results in dysmenorrhea and premenstrual discomfort. The lesions can also form in fallopian tubes, abdominal wall, bowels, cervix, bladder, and vagina. It typically involves the utero-sacral ligaments, the upper third of the posterior vaginal wall, the recto-vaginal region, the gut, and the urinary system. There is no definitive etiology of endometriosis but there are several theories regarding its development and the most plausible is Sampson's theory suggesting that with retrograde menstruation, viable cells and menstrual fragments can migrate through fallopian tubes, infiltrate into the peritoneal cavity then proliferate and cause chronic inflammation. [2]

The most common clinical symptoms of endometriosis are pelvic pain, dysmenorrhea, inter-menstrual bleeding, dyspareunia, dysuria, dyschezia, infertility, etc. The diagnosis of endometriosis is usually delayed from the onset of its symptoms. Proper diagnosis could be obtained by gynecological physical examination, histological biopsy and laparoscopy, which is considered as the gold standard tool for endometriosis. The conventional management includes NSAIDs, oral contraceptive pills, hormonal treatment like GnRH and surgical procedures like excision of endometrial implants, laser treatment or electrocautery, hysterectomy etc.

Homoeopathy, through its individualized holistic approach, is considered as one of the safest methods of treatment. It treats the patient not the disease on the basis of totality of symptoms and individualization.



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In Homoeopathic Materia Medica, there are various remedies like *Ammonium carb*, *Phosphorous*, *Sulphur*, *Pulsatilla*, *Sepia*, etc. for the management of endometriosis.

The present case report shows the management of endometriosis through the individualized homoeopathic medicine Pulsatilla 200C. It further explores the role of Homoeopathy in the management of endometriosis.

### **CASE REPORT-**

A 26 years old female patient came to the Gynae/Obs. department of the OPD at RBTS Govt. Homoeopathic Medical College & Hospital with reg. no. – A36094/36056. She had complaints of profuse menstrual bleeding and pain in lower abdomen during menstruation for 1 year. She said that sometimes the bleeding is clotted, dark black and offensive.

**PAST HISTORY -** Recurrent abortion - spontaneous (3 times)

FAMILY HISTORY- Grandfather- Joint pain

### PHYSICAL GENERALS:

**Appetite-** Good

Thirst- 3-4 lt./day

Desire-Spicy, chicken, fish, tea

**Aversion-** N/S

**Tongue-** Clean & moist

**Urine-** Clear

**Perspiration-** Normal

**Sleep-** Increased

**Dream-** Different, sometimes fearful

Thermal reaction- Ambi-thermal

**Stool-** Constipation sometimes

## MENSTR UAL HISTORY-

• **LMP:** 14/08/2023

• Cycle: 28-30 days regular cycle

• **Duration:** 6-7 days

• Colour & odour: Sometimes dark black, clotted & offensive

## LIFE-SPACE:

She was a housewife and her husband was working in Pune. She was living with her in-laws. She doesn't like her sister-in-law's, as they always make fun of her and taunt her. She was constantly weeping while telling this.

When she was asked about the stress in her mind, she replied I'm not getting pregnant and I have got 3 recurrent abortions. On being asked about the last pregnancy and what you have thought about the child? She said that there is no money to survive, the environment in the family is not good for the child and there is no support from anyone. She started weeping again. She said that she feels so lonely.



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## **General Physical Examination-**

• Appearance: Wheatish

• **Built:** Well, built

• Nourishment: Moderately nourished

• **Pallor:** Absent

## Vital signs-

• **Pulse rate:** 74 beats/minute

• **Respiratory rate:** 17 breath s/min

• **Temperature:** 97.8°F

• **Blood pressure:** 120/80 mmHg

Height: 160 cmWeight: 56kg

## Systemic examination-

• Cardiovascular system: S1, S2 heart sound audible & no abnormal sound heard.

• **Respiratory system:** Normal vesicular breath sound heard and no wheez, crackles, stridor or rhonchi heard.

## Lab investigation-

03/10/22- Rt. Ovary cyst

16/12/22- Endometrial collection

07/08/23- Lt. Ovary- Endometrioma

### Diagnosis-

Endometriosis (ICD 11- GA10.B)

## **Analysis and Evaluation of the Symptoms with Miasmatic Analysis:**

S. No.	Symptoms	Analysis	Evaluation	Miasmatic	
				analysis	
1.	Delusion, alone being	Mental general	++	Syphilitic	
2.	Confidence want of, self confidence-support desire	Mental general	++	Psora	
3.	Helplessness feeling	Mental general	+++	Psora	
4.	Weeping telling sickness when telling of her	Mental general	+++	Psora	
5.	Menses copious	Particular	+++	Syphilis	
6.	Menses offensive	Particular	++	Syphilis	
7.	Tea desire	Physical general	++	Psora	
8.	History personal- abortion of	Physical general	+++	Syphilitic	

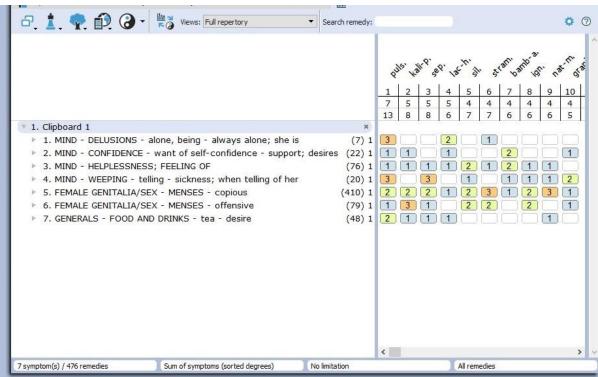


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#### **Rubrics-**

- DELUSION, ALONE BEING
- CONFIDENCE WANT OF, SELF CONFIDENCE- SUPPORT DESIRE
- HELPLESSNESS FEELING
- WEEPING TELLING SICKNESS, WHEN TELLING OF HER
- MENSES, COPIOUS
- MENSES, OFFENSIVE
- TEA, DESIRE
- HISTORY PERSONAL- ABORTION OF

## Repertorial sheet-



## **Repertorial Result-**

PULS – 7/12 SEPIA– 6/9 SILICEA - 5/9 KALI PHOS – 5/8

## REPERTORIAL ANALYSIS & REMEDY SELECTION-

After repertorisation *Pulsatilla* got highest (7/12) marks and on the second position was *Sepia* with (6/9) marks. After analysing the totality of symptoms together with materia medica, Pulsatilla was selected as the best simillimum for the concerned case, as the lady was so mild, weeping on complaints, want love support.



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## **Prescription-**

 $R_{\rm X}$ 

Pulsatilla-200/3 doses

Rubrum 200/1drm/ 4 globule/BD

## Management-

- Take warm sponging for pain.
- Avoid stress.
- Maintain hygiene.

## Follow-up:

DATE	CHANGE IN SYMPTOM	PRESCRIPTON
18-9-23	Endometrioma resolved, Menses	Rubrum 200/ 1drm/ 4 globube BD
	profuse, persists for 6-7 days, Pain	
	decreases during menses	
25-10-23	No profuse bleeding, menstrual flow	Sac lac
	reduces to 4-5 days	
17-11-23	No pain & regular menstrual cycle	Sac lac
20-12-23	Normal menstrual cycle	Sac lac
4-1-24	She feels better	Sac lac

## Modified Naranjo Criteria for Homoeopathy (MONARCH)

The Modified Naranjo Criteria for Homeopathy	Yes	No	Not sure or	Case
Inventory consists of 10 Domains			N/A	
1. Was there an improvement in the main symptom	+2	-1	0	+2
or condition for which the homeopathic medicine				
was prescribed?				
2. Did the clinical improvement occur within a	+1	-2	0	+1
plausible timeframe relative to the drug intake?				
3. Was there an initial aggravation of symptoms?	+1	0	0	0
4. Did the effect encompass more than the main	+1	0	0	+1
symptom or condition (i.e., were other symptoms				
ultimately improved or changed)?				
5. Did overall well-being improve? (suggest using	+1	0	0	+1
validated scale)				
6A. Direction of cure: Did some symptoms improve	+1	0	0	0
in the opposite order of the development of				
symptoms of the disease?				
6B. Direction of cure: Did at least two of the	+1	0	0	+1
following aspects apply to the order of improvement				
of symptoms:				
-from organs of more importance to those of less				



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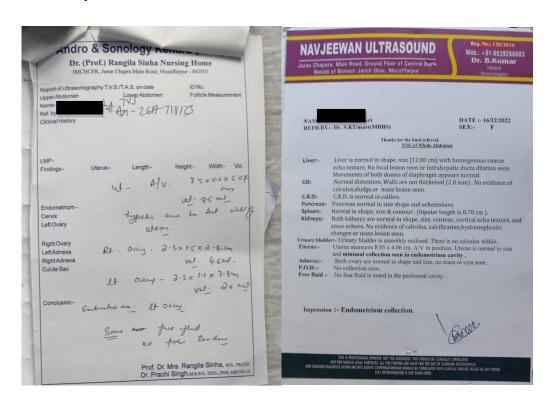
importance?				
-from deeper to more superficial aspects of the				
individual?				
-from the top downwards?				
7. Did "old symptoms" (defined as non-seasonal and	+1	0	0	0
non-cyclical symptoms that were previously thought				
to have resolved) reappear temporarily during the				
course of improvement?				
8. Are there alternate causes (other than the	-3	+1	+1	-3
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)				
9. Was the health improvement confirmed by any	+2	0	0	+2
objective evidence?				
(e.g., laboratory test, clinical observation, etc.)				
10. Did repeat dosing, if conducted, create similar	+1	0	0	0
clinical improvement?				
<u>-</u>				

### **COMPARISON OF REPORT:**

Before treatment USG report suggest

- 16-12-22- Endometrial collection
- 7-8-23- Lt. ovary Endometrioma

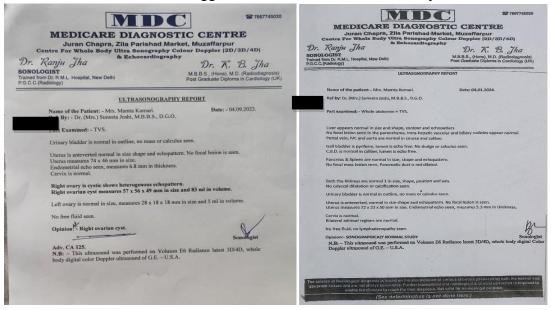






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**After treatment:** - As the ultrasound suggest no endometrioma on left ovary



#### **CONCLUSION:**

Homoeopathy is a specialised system of medicine. It treats the patient as a whole and not just symptoms. Homoeopathic treatment is based on individualisation, acting best to cure the disease without harming other systems of the body. This case-report shows a positive role of homoeopathy in managing Endometriosis. Further, more research studies are suggested that could enhance the role of Homoeopathy in such cases.

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